Application for

Groundwater Registration Modification



Oregon Water Resources Department

725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

Part 1 of 5 - Minimum Requirements Checklist

This Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

| Cha | ck all incl | uded with this application (N/A = Not Applicable) | NECEIVED | | | | | | | | | |
|-------------|-------------|---|--|--|--|--|--|--|--|--|--|--|
| | ck an inci | Part 1 – Completed Minimum Requirements Checklist. | JAN 2 3 2024 | | | | | | | | | |
| \boxtimes | | Part 2 – Completed Application Map Checklist. | OWRD | | | | | | | | | |
| \boxtimes | | Part 3 – Completed Applicant Information and Signature. | | | | | | | | | | |
| | | Part 4 – Completed Groundwater Registration Modification Application Information. (Only one Groundwater registration per a Groundwater registrations to be modified are layered). | | | | | | | | | | |
| | | Completed Groundwater Registration Modification Application Maprepared by a Certified Water Right Examiner). | p (Does not have to be | | | | | | | | | |
| | | Groundwater registration modification fees – Amount enclosed: \$ (\$875.00 for a place of use change only; \$1,250.00 for any other ch | | | | | | | | | | |
| | | Attachments: | | | | | | | | | | |
| | ⊠ N/A | Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is not the registration certificate holder of record. The Request for Assignment Form is available at https://www.oregon.gov/OWRD/Forms/Pages/default.aspx . | | | | | | | | | | |
| | | Assignment is not needed for any person or entity who can demon request recognition of a modification (e.g. legal representative, po etc.) or the applicant is named on the certificate of registration, or certificate of registration. | wer of attorney, agent, | | | | | | | | | |
| | □ N/A | Oregon Water Resources Department's Land Use Information Form signature (or signed land use form receipt stub) from each local land water is to be diverted, conveyed, and/or used. Not required if water conveyed, and/or used only on federal lands or if all of the following place of use only, b) no structural changes, c) the use of water is for the use is located within an irrigation district or an exclusive farm used. | nd use authority in which ter is to be diverted, ng apply: a) a change in r irrigation only, and d) | | | | | | | | | |
| \boxtimes | □ N/A | Water Well Report/Well Log for changes in point(s) of appropriation point(s) of appropriation. | on (well(s)) or additional | | | | | | | | | |
| | | (For Staff Use Only) | | | | | | | | | | |
| | | RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): | | | | | | | | | | |
| | | Application fee not enclosed/insufficient Map not included or incomplete | | | | | | | | | | |
| | | Land Use Form not enclosed or incomplete Assignment Form and fee not enclosed/insufficient Additional signature(s) required Part is incomplete | | | | | | | | | | |
| | Other/F | xplanation | | | | | | | | | | |
| | | | | | | | | | | | | |

Part 2 of 4 - Groundwater Registration Modification Map Checklist

Your Groundwater Registration Modification application <u>will be returned</u> if any of the map requirements listed below are not met.

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

| \times | | Permanent quality printed with dark ink on good quality paper. |
|-------------|-------|--|
| | | The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required. |
| \boxtimes | | A north arrow, a legend, and scale. |
| | | The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been preapproved by the Department. |
| \boxtimes | | Township, Range, Section, $\frac{1}{4}$, DLC, Government Lot, and other recognized public land survey lines. |
| \boxtimes | | Tax lot boundaries (property lines) are required. Tax lot numbers are recommended. |
| \boxtimes | | Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads and railroads. |
| | | Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches. |
| \boxtimes | | Existing place of use that includes hachuring, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged. |
| | ⊠ N/A | If you are proposing a modification in place of use, show the proposed place of use with hachuring including priority date and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. |
| \boxtimes | | Existing point(s) of appropriation with distance and bearing or coordinates from a recognized survey corner. |
| | □ N/A | If you are proposing a modification in point(s) of appropriation, show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32′15.5″) or degrees-decimal with five or more digits after the decimal (example – 42.53764°). |

Part 3 of 4 - Applicant Information and Signature

| Applicant Informat | ior | mat | Info | licant | App |
|--------------------|-----|-----|------|--------|-----|
|--------------------|-----|-----|------|--------|-----|

| APPLICANT/BUSINESS NAME | | | PHONE NO. | ADDITIONAL CONTACT NO. | | | | | | | |
|--------------------------------|---|-----------------------|-------------------------|------------------------|--|--|--|--|--|--|--|
| Robinson Farms LLC c/o Chris F | Robinson | | 503-832-4533 | | | | | | | | |
| ADDRESS | | | FAX NO. | | | | | | | | |
| PO Box 100 | | | , 1 | | | | | | | | |
| CITY | STATE | ZIP | E-MAIL | | | | | | | | |
| Amity | OR | 97101 | chris@robinsonnursery.c | om | | | | | | | |
| BY PROVIDING AN E-MAIL ADDRE | SS, CONSEN | T IS GIVEN TO RECEIVI | ALL CORRESPONDENCE FROM | I THE DEPARTMENT | | | | | | | |
| ELECTRONICALLY. COPIES OF THE | BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED. | | | | | | | | | | |

Agent Information - The agent is authorized to represent the applicant in all matters relating to this application

| ogy, Inc. | (503) 632-5016 | (503) 349-6946 (cell) |
|-----------|------------------|-----------------------|
| | | |
| | | FAX NO. |
| | | (503) 632-5983 |
| TE ZIP | E-MAIL | |
| 97042 | phgdmh@gmail.com | |
| | 97042 | |

Explain in your own words what you propose to accomplish with this modification; and why: We submitted a previous Groundwater Registration Modification, T-11854, to replace the Authorized Well 1 (YAMH 6872) with Well 2 - Reed Well (YAMH 57192, 57394). That well has proven to have insufficient yield. We are now filing this modification to add Well 4 (YAMH 59181) and Whiteson Well 3 (YAMH 453).

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment

| | (Check one box) |
|-------------|---|
| \boxtimes | By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to |
| | Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a); OR |
| 77 | I (we) affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; OR |
| _ | I (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation. |

I understand that prior to Department approval of the groundwater registration modification, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the groundwater registration is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following paper: News-Register.

I (we) affirm that the information contained in this application is true and accurate.



| Tive and that the information c | ontained in this application is true and t | accurate. |
|---------------------------------|--|------------------|
| Applicant Signature | Print Name and title if applicable | 12/18/23 Date |
| Applicant Signature | Print Name and title if applicable | Date |

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located? X Yes No If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing Groundwater Registration Modification - Page 3 of 7 Revised 7/1/2021

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Check the appropriate box, if applicable: Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district. IRRIGATION DISTRICT NAME **ADDRESS** NA CITY STATE Check here if water for the Groundwater registration is supplied under a water service agreement or other contract with a federal agency or other entity. ENTITY NAME **ADDRESS** NA CITY STATE ZIP

and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has

To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

| ENTITY NAME Yamhill County | ADDRESS 525 NE 4 th Street | |
|----------------------------|---------------------------------------|-------|
| CITY | STATE | ZIP |
| McMinnville | OR | 97218 |

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been conveyed.

Please use and attach additional pages of Table 2 as needed. See page 5 for instructions.

Do you have questions about how to fill-out the tables? Contact the Department at 503-986-0900 and ask for Transfer

Table 2. Description of Modifications to Registration GR-2000 (Certificate # GR-1930)

List only the part of the registration that will be modified. For the acreage in each ¼ ¼, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

| | AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration that will be changed. | | | | | | Proposed Changes (see | PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made. | | | | | | | | | | | | | | | | | | |
|----|--|---|----|-----|-----|-----|--------------------------|---|-------|---|--|------------------|-----------------------------|----|----|---|----|-----|-----|-----|---------|----------------------|-------|--------------------|--|------------------|
| Tw | р | R | ng | Sec | 1/4 | 1/4 | Tax Lot | Gvt Lot or DLC | Acres | Type of USE listed on Certificate | POA(s) (name or number from Table 1) | Priority Date | "CODES" from previous page) | Tv | wp | R | ng | Sec | 1/4 | 1/4 | Tax Lot | Gvt Lot or DLC | Acres | New Type of USE | POA(s) to be used (from Table 1) | Priority Date |
| 5 | S | 4 | w | 7 | NE | NE | 100 | DLC 80 | 3.0 | IR | Well 2 | 7-31- 1954 | POA | 5 | s | 4 | w | 7 | NE | NE | 100 | DLC 80 | 3.0 | IR | Well 4 and Whiteson | 7-31- 1954 |
| 5 | s | 4 | w | 7 | sw | NE | 100 | DLC 43 | 2.0 | IS | Well 2 | 7-31- 1954 | POA | 5 | s | 4 | w | 7 | sw | NE | 100 | DLC 43 | 2.0 | IS | Well 4 and Whiteson | 7-31- 1954 |
| 5 | s | 4 | w | 7 | SE | NE | 100 | Lot 7 | 0.1 | IR | Well 2 | 7-31- 1954 | POA | 5 | s | 4 | w | 7 | SE | NE | 100 | Lot 7 | 0.1 | IR | Well 4 and Whiteson | 7-31- 1954 |
| 5 | s | 4 | w | 7 | SE | NE | 100 | DLC 80 | 2.7 | IR | Well 2 | 7-31- 1954 | POA | 5 | s | 4 | w | 7 | SE | NE | 100 | DLC 80 | 2.7 | IR | Well 4 and Whiteson | 7-31- 1954 |
| 5 | s | 4 | w | 7 | SE | NE | 100 | DLC 43 | 5.8 | IR | Well 2 | 7-31- 1954 | POA | 5 | s | 4 | w | 7 | SE | NE | 100 | DLC 43 | 5.8 | IR | Well 4 and Whiteson | 7-31- 1954 |
| 5 | s | 4 | w | 7 | SE | NE | 100 | DLC 43 | 20.1 | IS | Well 2 | 7-31- 1954 | POA | 5 | s | 4 | w | 7 | SE | NE | 100 | DLC 43 | 20.1 | IS | Well 4 and Whiteson | 7-31- 1954 |
| 5 | s | 4 | w | 7 | NE | SE | 100 | DLC 43 | 12.93 | IS | Well 2 | 7-31- 1954 | POA | 5 | s | 4 | w | 7 | NE | SE | 100 | DLC 43 | 12.93 | IS | Well 4 and Whiteson | 7-31- 1954 |
| 5 | s | 4 | w | 7 | NW | SE | 100 | DLC 43 | 1.4 | IS | Well 2 | 7-31- 1954 | POA | 5 | S | 4 | w | 7 | NW | SE | 100 | DLC 43 | 1.4 | IS | Well 4 and Whiteson | 7-31- 1954 |
| | | | | | | тс | TAL AC | CRES | 48.03 | | | | | | | | | | | то | TAL AC | RES | 48.03 | | | |

Additional remarks: <u>Previous modifications to GR-2000 have affected this water right. T-11854 removed authorized Well 1 (YAMH 6872) and replaced with Well 2-Reed Well (YAMH 57192, 57394). T-11605 diminished 4.0 acres and T-12561 diminished 32.43 acres.</u>

Part 4 of 4 - Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

Groundwater Registration # GR-2000 (Certificate # GR-1930)

Table 1. Location of Authorized and Proposed Point(s) of Appropriation (POA)

(Note: If the POA name is not specified in the registration, assign it a name or number here.)

| POA Name or Number | Is this POA Authorized by the registration or is it Proposed? | OWRD Well Log ID# (or Well ID Tag # L) | Twp | | Rng | | Sec | У | ٤% | Tax Lot, DLC or Gov't Lot | Measured Distances (from a recognized survey corner) | |
|-----------------------|---|---|-----|---|-----|---|-----|----|----|--|---|--|
| Well 2- Reed Well | Authorized Proposed | YAMH 57192, 57394 | 5 | s | 4 | w | 7 | SE | NE | DLC 43 | 2,400 feet south and 85 feet west from NE corner, Section 7 | |
| Whiteson Well 3 | Authorized | YAMH 453 | 5 | s | 4 | w | 8 | SE | NW | DLC 80 | 890 feet south and 1,520 feet east from the NE corner, DLC 43. | |
| Well 4 | Authorized Proposed | YAMH 59181 | 5 | S | 4 | w | 7 | SE | NE | DLC 43 | 1,995 feet south and 635 feet west from the NE corner, Section 7. | |

| parentheses) | | i) wois | nounication CODES are provided in |
|--------------|---|---------------------|---|
| | e of Use (POU) | | Point of Appropriation (well) (POA) |
| | racter of Use (USE) proposed changes affect the entire | Grou | Additional Point of Appropriation (APOA) ndwater registration? |
| Yes | Complete only the proposed ("to" "CODES" listed above to describe t | error of the second | section of Table 2 on the next page. Use the posed changes. |
| No | Complete all of Table 2 to describe | the po | ortion of the registration to be changed. |

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Groundwater Registration # GR-2000 (Certificate # GR-1930)

| For a | modification | in p | lace o | of | use or | character | of | use: - | NA |
|-------|--------------|------|--------|----|--------|-----------|----|--------|----|
|-------|--------------|------|--------|----|--------|-----------|----|--------|----|

| Are there other water right certificates, water use permits, | or Groundwater registrations |
|--|------------------------------|
| associated with the "from" or "to" lands? Yes No | |

If YES, list the other certificate, water use permit, or other Groundwater registration numbers: **NA**

Pursuant to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the "to" lands must be filed separately with a Groundwater registration modification.

For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:

| \boxtimes | Well log(s) are attached for each well that are clearly labeled and associated with the |
|-------------|---|
| | corresponding well(s) in Table 1 above and on the accompanying application map. |
| | (Tip: You may search for well logs on the Department's web page at: |
| | http://apps.wrd.state.or.us/apps/gw/well_log/) |

AND/OR

| Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not |
|---|
| have a well log. For proposed wells not yet constructed or built, provide "a best estimate" for each |
| requested information element in the table. The Department recommends you consult a licensed |
| well driller, geologist, or certified water right examiner to assist with assembling the information |
| necessary to complete Table 3. |

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide adequate information is likely to delay the processing of your modification application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

| Proposed or Authorized POA Name or Number | Is well already built? (Yes or No) | If an existing well, OWRD Well ID Tag No. | Total well depth | Casing Diameter | Casing Intervals (feet) | Seal depth(s) (intervals) | Perforated or screened intervals (in feet) | Static water level of complete d well (in feet) | Source aquifer (sand, gravel, basalt, etc.) | Well -specific rate (cfs or gpm). If less than full rate of water right | |
|--|--|---|------------------------|------------------------------------|-------------------------------|---------------------------------|--|--|--|---|--|
| Reed Well 2 | Yes | YAMH 57192, 57394 | | SEE WELL LOGS YAMH 57192 AND 57394 | | | | | | | |
| Whiteson Well 3 | Yes | YAMH 453 | | SEE WELL LOG YAMH 453 | | | | | | | |
| Well 4 | Yes | YAMH 59181 | | SEE WELL LOG YAMH 59181 | | | | | | | |

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Groundwater Registration Modification - Page 7 of 7

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Land Use Information Form



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

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NOTE TO APPLICANTS

OWRD

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; OR
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and <u>all</u> of the following apply:
 - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; and
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

Land Use Information Form



OREGON Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266

(503) 986-0900 www.oregon.gov/OWRD

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Proposed Land

Applicant(s): Robinson Farm LLC c/o Chris Robinson

City: Amity

Township

State: OR

Tax Lot #

Zip Code: 97101

Daytime Phone: 503-835-4533

Water to be:

A. Land and Location

Mailing Address: PO Box 100

Range

Section

1/4 1/4

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Plan Designation (e.g.,

| 998 | | The second second | | The same of the sa | Rural Residential/RR-5) | | | | Use: |
|------------|-----------------------------|---------------------------------------|--------------------|--|--------------------------|---------------|--------------|--------------|--------------------|
| <u>5S</u> | <u>4W</u> | 7 | | 100 | | □ Diverted | □ Conveyed | □ Used | <u>IR</u> |
| <u>5S</u> | <u>4W</u> | 8 | | 700 | | □ Diverted | □ Conveyed | Used | <u>IR</u> |
| | | | | | | Diverted | Conveyed | Used | |
| | | | | | | Diverted | Conveyed | Used | |
| | | ities whe | e water is pr | oposed to be | diverted, conveyed, ar | nd/or used o | r developed: | , | |
| Yamnii | l County | | | | | | | | |
| Type of ap | nit to Use or Seed Water Us | be filed v Store Wate e License | with the Water | er Resources er Right Transfe ation of Conser | r Permirved Water Exchai | nge of Water | | ter Registra | ation Modification |
| Source of | water: | Reservoir/I | ond 🖂 | Ground Water | Surface Water (| name) | - | | |
| Estimated | quantity of | f water ne | eded: <u>144.6</u> | <u></u> | bic feet per second | gallons per n | ninute 🗌 | acre-feet | |
| Intended | use of wate | | gation [| Commercial Quasi-Munio | | | estic for | househo | old(s) |
| Briefly de | scribe: | | | | | | | | |
| | | | | 7. | ny a Groundwater | | | | |
| 10 1110 | any the po | JIIIL OI A | phrohitation | m (well) Iro | in the currently rec | ognized w | en to two t | Julier ext | stillig wells for |

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

Groundwater Registration GR-2000.

JAN 2-3 2024

For Local Government Use Only

OWRD

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

| riease check the appropriate box below an | d provide the requested information | | |
|--|--|--------------------------------------|-------------------------------------|
| Land uses to be served by the proposed water by your comprehensive plan. Cite applicable | | e allowed outrig | ght or are not regulated |
| Land uses to be served by the proposed water as listed in the table below. (Please attach do Record of Action/land-use decision and accomperiods have not ended, check "Being pursu" | cumentation of applicable land-use approven mpanying findings are sufficient.) If approven | als which have | already been obtained. |
| Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.) | Cite Most Significant, Applicable Plan Policies & Ordinance Section References | Lan | d-Use Approval: |
| permits, etc.) | | ☐ Obtained ☐ Denied | ☐ Being Pursued☐ Not Being Pursued |
| | | ☐ Obtained ☐ Denied | ☐ Being Pursued ☐ Not Being Pursued |
| | | ☐ Obtained ☐ Denied | ☐ Being Pursued ☐ Not Being Pursued |
| | | ☐ Obtained ☐ Denied | ☐ Being Pursued ☐ Not Being Pursued |
| | | ☐ Obtained ☐ Denied | ☐ Being Pursued☐ Not Being Pursued |
| | | 2D | |
| Signature: Yamh: Il Ca | Phone: | PD Date: | 12/20/2023 |
| Note to local government representative: Pleasing the receipt, you will have 30 days from the National Information Form or WRD may presume the land comprehensive plans. | Water Resources Department's notice date duse associated with the proposed use of w | to return the co vater is compati | ompleted Land Use ble with local |
| Receipt | for Request for Land Use Informati | <u>on</u> | |
| Applicant name: | | | |
| City or County: | Staff contact: | | |
| Signature | Dhono: Date | | |

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

YAMH 57192

8/6/2015

WELL ST ORI

| | | Page 1 of 1 |
|-----------------|---------|-------------|
| L I.D. LABEL# L | 119327 | |
| TART CARD# | 1027208 | |
| GINAL LOG# | | |

| (1) LAND OWNER Owner Well I.D. 2930 | | |
|--|--|----------|
| First Name Last Name | (9) LOCATION OF WELL (legal description) | |
| Company ROBINSON FARM LLC | County YAMHILL Twp 5.00 S N/S Range 4.00 W E/W | WM |
| Address POB 100 | Sec 7 SE 1/4 of the NE 1/4 Tax Lot 100 | |
| City AMITY State OR Zip 97101 (2) TYPE OF WORK New Well Deepening Conversion | Tax Map Number Lot | |
| (2) TYPE OF WORK Siewwell Deepening Conversion | Tax Map Number Lot Lat " or | DD |
| Alteration (complete 2a & 10) Abandonment(complete 5a) (2a) PRE-ALTERATION | Long OmS or I | DD |
| Dia + From To Gauge Stl Plstc Wld Thrd | Street address of well Nearest address | |
| Casing: | NONE, NEXT TO 9950 SW RIVERBEND RD, MCMINNVILLE | |
| Material From To Amt sacks/lbs | | |
| Seal: | | |
| (3) DRILL METHOD | (10) STATIC WATER LEVEL | |
| Rotary Air Rotary Mud Cable Auger Cable Mud | Date SWL(psi) + SWL(ft) | _ |
| Reverse Rotary Other | Existing Well / Pre-Alteration | \perp |
| | Completed Well 7/17/2015 28 | |
| (4) PROPOSED USE Domestic Irrigation Community | Flowing Artesian? Dry Hole? | |
| Industrial/Commericial Livestock Dewatering | WATER BEARING ZONES Depth water was first found 28.00 | |
| Thermal Injection Other | SWL Date From To Est Flow SWL(psi) + SWL(ft) | |
| (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy | 7/17/2015 28 105 140 28 | 7 |
| Depth of Completed Well 98.00 ft. | 7/1 1/2013 28 103 140 28 | \dashv |
| BORE HOLE SEAL sacks/ | | 4 |
| Dia From To Material From To Amt Ibs | | 4 |
| 12 0 42 Bentonite Chips 0 42 31 S | | \dashv |
| 10 42 98 Calculated 28 | | |
| 8 98 105 | (11) WELL LOG Ground Flavorion | _ |
| Calculated | Ground Elevation | |
| How was seal placed: Method A B C D E | Material From To | _ |
| Other POUR/PROBE/HYDRATE | top soil 0 6 | _ |
| Backfill placed from 98 ft. to 105 ft. Material CAVING GRAVEL | clay, brown 6 23 | \dashv |
| Filter pack from ft. to ft. Material Size | clay blue gray w/occ fine sand 23 63 sand, black w/some gray clay 63 72 | \dashv |
| Explosives used: Yes Type Amount | sand, black w/some gray clay 63 72 sand, w/occ fine/med gravel in clay 72 84 | \dashv |
| (5a) ABANDONMENT USING UNHYDRATED BENTONITE | gravel, poorly sorted w/sand in clay 84 104 | \dashv |
| Proposed Amount Actual Amount | claystone, dark gray 104 105 | ┪ |
| | | ٦ |
| (6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd | | |
| Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd 8 X 2 98 .25 | RECEIVED | |
| | | _ |
| | JAN 2 3 2024 | 4 |
| | | \dashv |
| | | - |
| Shoe Inside Outside Other Location of shoe(s) | OWRD | \dashv |
| Temp casing X Yes Dia 12 From 0 To 6 | | \dashv |
| | | 7 |
| (7) PERFORATIONS/SCREENS | | ٦ |
| Perforations Method drive down | D . C Introduct | _ |
| Screens Type Material Perf/ Casing/ Screen Scrn/slot Slot # of Tele/ | Date Started 7/16/2015 Completed 7/17/2015 | _ |
| Screen Liner Dia From To width length slots pipe size | (unbonded) Water Well Constructor Certification | |
| Perf Casing 8 85 96 .2 1 300 | I certify that the work I performed on the construction, deepening, alteration | ı, or |
| | abandonment of this well is in compliance with Oregon water supply | well |
| | construction standards. Materials used and information reported above are tru | e to |
| | the best of my knowledge and belief. | |
| | License Number Date | _ |
| (8) WELL TESTS: Minimum testing time is 1 hour | 6'1 | |
| Pump Bailer () Air Flowing Artesian | Signed | |
| Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) | (bonded) Water Well Constructor Certification | |
| 140 98 4 | I accept responsibility for the construction, deepening, alteration, or abandon | ment |
| | work performed on this well during the construction dates reported above. All | |
| | performed during this time is in compliance with Oregon water supply | well |
| Temperature 54 °F Lab analysis Yes By | construction standards. This report is true to the best of my knowledge and beli | ief. |
| | License Number 1438 Date 7/20/2015 | |
| Water quality concerns? Yes (describe below) TDS amount 148 ppm From To Description Amount Units | 1730 1120/2013 | _ |
| | Signed DAVID PAYSINGER (E-filed) | |
| | Contact Info (optional) bluewaterdrilling.com 503 868 7878 | |
| | | |
| ORIGINAL - WATER RESOURCES I | | |
| THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTM | 14386 - | |
| | T # 9 0 0 = | |

STATE OF OREGON WATER SUPPLY WELL REPORT

YAMH 57394

(as required by ORS 537.765 & OAR 690-205-0210)

2/25/2016

Page 1 of 2 WELL I.D. LABEL# L 119327 START CARD # 1029606 ORIGINAL LOG# YAMHILL 57192

| Owner Well I.D. 2977 | |
|---|--|
| First Name Last Name Company ROBINSON FARM LLC | (9) LOCATION OF WELL (legal description) |
| | County YAMHILL Twp 5.00 S N/S Range 4.00 W E/W WM |
| Address POB 100 City AMITY State OR Zip 97101 | Sec 7 SE 1/4 of the NE 1/4 Tax Lot 100 |
| | |
| (2) TYPE OF WORK New Wen Deepening Conversion | Tax Map Number Lot Lat " " or DMS or DD |
| (2a) PRE-ALTERATION Abandonment(complete 5a) | Long ' or DMS or DD Street address of well Nearest address |
| Dia + From To Gauge Stl Plstc Wld Thrd | Street address of well Nearest address |
| Casing: | NONE, NEXT TO 9950 SW RIVERBEND RD, MCMINNVILLE |
| Material From To Amt sacks/lbs | The rest is a second of the rest is the second of the seco |
| Seal: | |
| (3) DRILL METHOD | (10) STATIC WATER LEVEL |
| Rotary Air Rotary Mud Cable Auger Cable Mud | Date $SWL(psi) + SWL(ft)$ |
| Reverse Rotary Other | Existing Well / Pre-Alteration 2/10/2016 24 |
| | Completed Well 2/10/2016 24 |
| (4) PROPOSED USE Domestic Irrigation Community | Flowing Artesian? Dry Hole? |
| Industrial/ Commercial Livestock Dewatering | WATER BEARING ZONES Depth water was first found |
| Thermal Injection Other | SWL Date From To Est Flow SWL(psi) + SWL(ft) |
| | |
| (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy | |
| Depth of Completed Well 98.00 ft. | |
| BORE HOLE SEAL sacks/ | |
| Dia From To Material From To Amt lbs 8 0 98 | |
| 8 0 98 Calculated | |
| Calculated | 1 |
| Calculated | (11) WELL LOG Ground Elevation |
| How was seal placed: Method A B C D E | Material From To |
| Other | iviateriai 110iii 10 |
| Backfill placed from ft. to ft. Material | |
| Filter pack from 60 ft. to 98 ft. Material 3/8" Size pea gravel | |
| | |
| Explosives used: Yes Type Amount | |
| (5a) ABANDONMENT USING UNHYDRATED BENTONITE | |
| Proposed Amount Actual Amount | |
| (6) CASING/LINER | RECEIVED |
| Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd | RECEIVED |
| ○ 6 ☐ 3 98 SCH 40 ○ X ☐ | |
| | JAN 2 3 2024 |
| | to V to I |
| | OWRD |
| | O WILL |
| Shoe Inside Outside Other Location of shoe(s) | |
| Temp casing Yes Dia From To | |
| | |
| (7) PERFORATIONS/SCREENS | |
| Perforations Method circular saw | D. G. Jananas G. J. Jananas |
| Screens Type Material Perf/ Casing/ Screen Scrn/slot Slot # of Tele/ | Date Started 2/10/2016 Completed 2/10/2016 |
| Screen Liner Dia From To width length slots pipe size | (unbonded) Water Well Constructor Certification |
| Perf Liner 6 82 97 6 0.1 196 | I certify that the work I performed on the construction, deepening, alteration, of |
| | abandonment of this well is in compliance with Oregon water supply we |
| | construction standards. Materials used and information reported above are true t |
| | the best of my knowledge and belief. |
| | License Number Date |
| (8) WELL TESTS: Minimum testing time is 1 hour | |
| | Signed |
| Pump Bailer • Air Flowing Artesian | A - 1 DW-4 WHO - 4 - 4 - C-46 - 4 |
| Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) | (bonded) Water Well Constructor Certification |
| 60 97 4.5 | I accept responsibility for the construction, deepening, alteration, or abandonme |
| | work performed on this well during the construction dates reported above. All wo performed during this time is in compliance with Oregon water supply we |
| | construction standards. This report is true to the best of my knowledge and belief. |
| Temperature 54 °F Lab analysis Yes By | |
| Water quality concerns? Yes (describe below) TDS amount 148 ppm From To Description Amount Units | License Number 1438 Date 2/11/2016 |
| From To Description Amount Units | Signed DAVID PAYSINGER (E-filed) |
| | |
| | Contact Info (optional) bluewaterdrilling.com 503 868 7878 |
| ORIGINAL - WATER RESOURCES I | DEPARTMENT |
| THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTS | |
| | 14386 - |
| | T T 0 0 0 - |

2/25/2016

WELL I.D. LABEL# L 119327

START CARD # 1029606

ORIGINAL LOG # YAMHILL 57192

| | 212512 | 2010 | | ORIGINAL LO | G # YAM | HILL 571 | 92 |
|---|--|----------------|------------|---------------|----------|-------------|-----------|
| 2a) PRE-ALTERATION | V | Water Qua | ality Cor | ncerns | | | |
| Dia + From To Gauge Stl Plstc Wld Thrd | 1 | | То | Descripti | on | Amour | nt Units |
| | Ir | | | [| | | |
| | | | | | | | |
| | | | | | | | |
| Material From To Amt sacks/lbs | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (1 | 0) STAT | IC WA | TER LEVEL | | | |
| 6) BORE HOLE CONSTRUCTION | | SWL Date | Fron | | Fet Flow | SWL(psi) | + SWL(ft) |
| BORE HOLE SEAL | sacks/ | | | | | 5 (7 E(p31) | T SWE(II) |
| Dia From To Material From To Amt | lbs | | _ | | | | |
| | | | | | | | |
| Calculated | | | | | | | |
| | | | | | | | Ц |
| Calculated | | | - | | | | |
| Calculated | | | | | | | |
| | | | | | | | |
| Calculated | | | | | | | |
| FILTER PACK | (1: | 1) WELI | LOC | | | | |
| From To Material Size | (1. | I) WELL | | | | | |
| | | | Mate | erial | | From | То |
| | | | | | | | |
| | - | | | | | | |
| CASING/LINER | | | | | | | |
| | Th | | | | | | |
| Casing Liner Dia + From To Gauge Stl Plstc Wld T | inrd | | | | | | |
| | | | | | | | - |
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| | H | | | | | | |
| | $H \mid \Gamma$ | | | | | | |
| | $H \Vdash$ | | | | | | |
| | | | | | REC | CEIVE | |
| | | | | | | 1 | |
| DEDEOD A TIONG/GODEENG | | | | | JAN | 2-3 20 | 124 |
| PERFORATIONS/SCREENS | | | | | | - 20 | 76.7 |
| | Tele/ | | | | | RIFE | |
| creen Liner Dia From To width length slots p | pipe size | | | | U | WRD | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | - | | | | | | - |
| | —— <u> </u> | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | C | Comments | s/Rema | irks | | | |
| N. WINN Y MYROMO AND A | Ir | nstall liner a | ind redeve | elop with air | | | |
| 8) WELL TESTS: Minimum testing time is 1 hour | | | | | | | |
| Yield gal/min Drawdown Drill stem/Pump depth Duration (hr | r) | | | | | | |
| | ¬ | | | | | | |
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3 STATE OF OREGON



YAMH 453 JAN 1 4 1991 GEGENTH

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| 300/140/0 | u |
| 2/1702 | |
| 24/93 | |

| WATER WELL REPORT (as required by ORS 537,765) | 7 | 9 | PA | GE W |
|--|---------------------|------------|--------------------|-----------|
| (1) OWNER: | | Well Nun | nber: | 1193 |
| Name JOHN BERNARDS | | | | |
| Address 14555 SW MCCABE | CHA | PEL | | |
| City MCMINNVILLE | State | OR | Zip | 9712 |
| (2) TYPE OF WORK: | | | - | |
| New Well Deepen Recor | ndition | Па | bandon | |
| (3) DRILL METHOD | | | ioanaon | |
| | X | | | |
| Other | Cable | | | |
| (4) PROPOSED USE: | | | | |
| | | X | | |
| Domestic Community Indus | | ☐ Irriga | ttion | |
| ☐ Thermal ☐ Injection ☐ Other | | | | |
| (5) BORE HOLE CONSTRUC | | | | 13 |
| pecial Construction approval Yes No X | Depth | of Comple | ted Well. | · · · |
| $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | | | |
| | | Amount _ | | |
| | AL | m- | | mount |
| Diameter From To Material CEMENT | From 0 | 18 | sacks | or pounds |
| 12 18 137 | | 1 | 1 | DIII |
| | | | 1. | |
| | | <u> </u> | 1 | |
| How was seal placed: Method A B | $\square X_C$ | □ D | □ E | |
| Other | | ט ט | LI E | |
| Backfill placed fromft. toft. | Mater | ai a l | | |
| Gravel placed from 18 ft. to ft. | Mater | | 3/8 | P |
| | Size o | f gravel _ | 370 | T |
| (6) CASING/LINER: | | | | |
| Diameter From To Gauge | | Plastic | Welded | Threade |
| Casing: 8 +2 137 .2 | $\supset \square X$ | | ПХ | |
| | | | | |
| | | | | |
| | | | | |
| Liner: | | | | |
| | L | | | 📙 |
| Final location of shoe(s) | ~ | | | |
| (7) PERFORATIONS/SCREE | | | | |
| Perforations Method | DRCH | | | |
| Screens Type | | Material | | |
| Slot | Te | le/pipe | | |
| From To size Number Diame | eter | size | Casing | Liner |
| 75 130 6" 400 | | | ĽΚ | |
| | _ | | | |
| | | | ليا ، | |
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| | | | | |
| | | | | |
| (8) WELL TESTS: Minimum te | șting t | ime is 1 | lhour | |
| ☐ Pump ☐ Bailer ☐ | Air | I | □ Flowi □ Artes | |
| Secretary to person and the secretary to | | | | |
| | ill stem | at | Ti | me |
| 200.00 | | | | hr. |
| 200 13 | 5 / | | 20 | |
| | | | | |
| remperature of water 51 | pth Artes | sian Flow | Found | |
| Was a water analysis done? Yes By who | - | | | |
| Did any strata contain water not suitable for inten | | □ То | little | |
| ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ | | | | |
| | | | | |
| Depth of strata: | | | - | |

| County | 1 T L L L L L L L L L L L L L L L L L L | legal d | " Longitu W | de | , ,,,,,, |
|-----------------------------------|--|--|-----------------------|-----------|----------|
| Section | Nor S, Range SE | NM | 1/4 | E or W | , WM. |
| | Lot Blo | | | division_ | is . |
| Street Address of APPROX | Well (or nearest address) 9000 SW RI | VERB | END | WHI | TESO |
| | WATER LEVEL t. below land surface. | ı: | Date | | /07/ |
| Artesian pressure | lb. per sq | uare inch. | Date | | |
| | BEARING ZONI 68 | ES: | | | |
| epth at which water w From | ras first found | Fetir | nated Flor | y Pata | SWI |
| | | | | | |
| 68 | 130 | | 200 | | 2.5 |
| | | | | | |
| 12) WELL LO | OG: Ground elevat | ion | | | |
| | Material | | From | То | SWL |
| TOP SOIL | | | 0 | 4 | - |
| BROWN SII | | | 4 | 12 | |
| BLUE CLAY | | | 12 | 58 | - |
| BLUE CLAY | W/SAND | | 58 | 62 | - |
| BLUE CLAY | | | 62 | 68 | |
| | RAVEL W/BLUE | CT.A | | 130 | 25 |
| RED/BROWN | | | 130 | 137 | 23 |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| | RECEIVED | | | | |
| | AN 23 2024 | | | | |
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| | OWRD | | | | |
| Drug Gam | D DDITTING | 00 | | | |
| DAYTON, O | R DRILLING R. 97114 | CU. | | | - |
| 2112 110117 | 77111 | | | | |
| ** | | | | | |
| te started 12/ | 12/90 _{Com} | pleted | 01/0 | 7/91 | _ |
| nbonded) Water I certify that the | Well Constructor Ce ne work I performed o s well is in compliand used and information i | rtification the concession the concession that | nstructio Oregon v | vell cons | structio |
| gned | | | WC Nu | | |
| | | | | | |

Signed A O GOTT

belief.

WWC Number Date 01/07/91



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem Oregon 97301 (503) 986-0900 www. oregon.gov/owrd

Application for

OWRD

Well ID Number

DECEMED

| | RECEIVED | | | | |
|---|-------------------------|--|--|--|--|
| Do not complete if the well already has a Well Identification Number. | OCT 1 8 2018 | | | | |
| I. OWNER INFORMATION Current Owner Name (please print): Robinson Farms LLC | OWRD | | | | |
| Mailing Address: PO Box 100 | | | | | |
| City, State, Zip: Amity , OR 97101 | | | | | |
| Mail Well ID to: SAME AS ABOVE In Care Of (C/O) | | | | | |
| Name & Address: | | | | | |
| City, State, Zip: | | | | | |
| See attached W | ell log YAMH 453 | | | | |
| II. WELL LOCATION INFORMATION (Please fill out as completely as possible) Township: 5S (North / South) Range: 4W (East / West) Section: 8 Tax Lot (usually last 3-5 numbers of Tax Map #): 700 County Ye | SE 1/4 of the NW 1/4 | | | | |
| GPS Coordinates: | | | | | |
| Street Address of Well, City: 9000 BW River Bend Rd, Mc Minnville (ag | oroX) | | | | |
| If the property had a different street address in the past: | | | | | |
| III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND at Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation Date Well Constructed (or property built): 01/07/91 Total Well Depth: 137 ft Owner at time the well was constructed (if known): John Bernards Well Report | Casing Diameter: 8 inch | | | | |
| SUBMITTED BY (please print): Chris Robinson PHONE: 503-835-4533 EMAIL &/or FAX: Chris @ robinson | insonnursery.com | | | | |
| Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Or Applications are processed in the order they are received, and Well ID Numbers are mailed within | | | | | |
| For Official Use Only by the Oregon Water Resources Depo | artment: | | | | |
| Received Date: Well Report Number: | Well Identification #: | | | | |
| 10-18-18 YAMH 453 | L-132413 | | | | |

Well I.D. Number/2 Last Update: 5/15/18

WCC

STATE OF OREGON

YAMH 59181

| | Page 1 of 3 |
|--------------------|-------------|
| WELL I.D. LABEL# L | 147371 |
| START CARD# | 1059753 |
| ORIGINAL LOG# | |

| WATER SUPPLY WELL REPORT | 1781411 | 37101 | STA | RT CARD # | 10597 | 153 | | |
|--|-----------------|----------------------------------|-----------------|-------------------|------------|-------------|-----------|------------|
| (as required by ORS 537.545 & 537.765 and OAR 690-205-0210) | 2/20/ | 2023 | ORIG | NAL LOG# | | | | |
| | ON WELL | | | | | | | |
| First Name Last Name | | (9) LOCATION | ON OF W | ELL (legal | descri | otion) | | |
| Company ROBINSON FARMS LLC | | County YAMHILL | | | | | W | E/W WN |
| Address PO BOX 100 | | Sec 7 SI | | | | | | |
| City AMITY State OR Zip 97101 (2) TYPE OF WORK New Well Deepening Conv | version | Tax Map Number | | | | Lot - | | |
| (2) TYPE OF WORK New Well Deepening Comp | | Tax Map Number Lat° Long° | 1 1 | or 45.1532330 | 00 | | DM | S or DD |
| Alteration (complete 2a & 10) Abandonment(complete 2a & 10) Abandonment(complete 2a & 10) | omplete 5a) | Long° | | or -123.21967 | 7700 | | DM | S or DD |
| Dia + From To Gauge Stl Plstc Wld Thrd | | Stree | et address of | well ON | earest ad | dress | | |
| Casing: | | 9000 SW RIVER | BEND ROA | D MCMINNV | ILLE, OF | R 97128 | | |
| Material From To Amt sacks/lbs Seal: | | L | | | | | | |
| (3) DRILL METHOD | | (10) STATIC | WATER | LEVEL | | | | |
| Rotary Air Rotary Mud Cable Auger Cable Mud | | , | | Dat | e SW | L(psi) | + SWI | L(ft) |
| Reverse Rotary Other | | Existing Wel | | | | | | |
| | | Completed W | | 2/15/2023 | | | 14 | 4.3 |
| (4) PROPOSED USE Domestic XIrrigation Community | | | | g Artesian? | | Hole? | _ | |
| Industrial/Commericial Livestock Dewatering | | WATER BEARIN | G ZONES | | | | | |
| ThermalInjectionOther | | SWL Date | From | To Es | st Flow | SWL(psi) | + SW | /L(ft) |
| (5) BORE HOLE CONSTRUCTION Special Standard (| (Attach copy) | 1/15/2023 | 63 | 98 | 160 | | | 19.42 |
| Depth of Completed Well 107.50 ft. | | | | | | | | |
| BORE HOLE SEAL | sacks/ | | | | | | | |
| Dia From To Material From To A 12 0 107.5 Bentonite Chips 0 22 | Amt lbs 27 S | | | | | | | |
| Calculated 1 | | | | | | | | |
| Cement with 2% Bento; 22 50 | 35 S | (11) WELL L | 00 | | | | | |
| Calculated | 8.03 | (11) WELL L | UG | Ground Elevati | on | | | |
| How was seal placed: Method A B XC D | E | | Material | | | From | To | |
| Other | | clay brwn silty so | oft | | | 0 17 | | 17 25 |
| Backfill placed from ft. to ft. Material Filter pack from50 | 0.10 | sand brwn coarse | to fine soft | | | 25 | | 31 |
| | 8-12 | clay gray sandy g | | | | 31 | | 35 |
| Explosives used: Yes Type Amount | | clay gray sandy se | | | | 35 | | 37 |
| (5a) ABANDONMENT USING UNHYDRATED BENTONI | TE | clay gray sandy s | | | | 37 | | 14 |
| Proposed Amount Actual Amount | | clay gray silty sof | | | - | 63 | | 63 68 |
| (6) CASING/LINER | XXII 1 (77) 1 | sand coarse fine t | | | | 68 | | 77 |
| Casing Liner Dia + From To Gauge Stl Plstc 8 X 2 78 .250 | | gravel small sand | blk fine | | | 77 | 8 | 82 |
| 98 107.5 .250 | \mathbf{x} | gravel coarse wel | l rounded sai | nd coarse | | 82 | | 90 |
| 8 8 1 1 7 10/3 1250 8 8 | ĤH | to fine sand coarse fine r | and arrayal ail | | | 82 90 | _ | 90 |
| | | wood w/silty sand | | | / / / | | | 98 |
| | | sand coarse silty | | RECEI | | 98 | 1 | 04 |
| Shoe Inside Outside Other Location of shoe(s) | | sandstone blk har | der | JAN 2 | 3 202 | 104 | 10 |)7.5 |
| Temp casing Yes Dia 12 From + 0 To 107 | 7 | | | | - | | | |
| (7) PERFORATIONS/SCREENS | | | | | | | _ | |
| Perforations Method | | D 0 1 | | OWR | D. | | | |
| Screens Type v-wire Material stainless Perf/ Casing/ Screen Scrn/slot Slot # of | Tele/ | Date Started 1/ | 13/2023 | Con | npleted | 2/15/202 | 3 | |
| Screen Liner Dia From To width length slots | | (unbonded) Wat | ter Well Cor | istructor Certi | fication | | | |
| Screen Casing 8 78 98 .04 | 8 | I certify that the | | | | | | |
| | | abandonment of construction stan | this well | is in complian | ce with | Oregon | water sup | oply well |
| | + | the best of my kn | | | morman | on reporte | d above a | ne nue te |
| | | License Number | _ | T | Date | | | |
| (8) WELL TESTS: Minimum testing time is 1 hour | | | | | - | | | |
| Pump Bailer Air Flowing A | Artesian | Signed | | | | | | |
| Yield gal/min Drawdown Drill stem/Pump depth Duration (| | (bonded) Water | Well Constr | uctor Certifics | ation | | | |
| 35 52 4 | 111) | I accept responsi | | | | g. alterati | on, or ab | andonme |
| | | work performed of | on this well d | luring the constr | ruction da | ates repor | ted above | e. All wor |
| | | performed during | g this time | is in compliar | nce with | Oregon | water si | upply we |
| Temperature 54 °F Lab analysis Yes By | | construction stand | | eport is true to | the best o | of my kno | vledge ar | nd belief. |
| Water quality concerns? Yes (describe below) TDS amount 264 Prom To Description Amount | ppm | License Number | 1483 | I | Date 2/20 | /2023 | | |
| From To Description Amount | Units | Signed IOHN | STADELI (I | E-filed) | | | | |

Contact Info (optional) Arrow Drilling 503-538-4422

START C

| ELL I.D. LABEL# L | 147371 | | | | |
|-------------------|---------|--|--|--|--|
| START CARD# | 1059753 | | | | |

| continuation page | 2/20/2023 ORIGINAL LOG # |
|---|--|
| (2a) PRE-ALTERATION | Water Quality Concerns |
| Dia + From To Gauge Stl Plstc Wld Thrd | From To Description Amount Units |
| | |
| | |
| Material From To Amt sacks/lbs | |
| | |
| | |
| | (10) STATIC WATER LEVEL |
| (5) BORE HOLE CONSTRUCTION | SWL Date From To Est Flow SWL(psi) + SWL(ft |
| | sks/ |
| Dia From To Material From To Amt | DS (|
| Calculated | |
| Carculated | |
| Calculated | |
| Calculated | _ |
| | |
| Calculated | |
| FILTER PACK From To Material Size | (11) WELL LOG |
| From To Material Size | Material From To |
| | |
| | |
| 6) CASING/LINER | _ |
| | |
| Casing Liner Dia + From To Gauge Stl Plstc Wld Tl | d |
| | |
| | |
| | - |
| | |
| | |
| | RECEIVED |
| | JAN 2-3 2024 |
| | JAN 20 ZUZY |
| TO DEDECT A TRANSICODE ENG | OWDO |
| (7) PERFORATIONS/SCREENS | OWRD |
| | ele/ e size |
| Screen Liner Dia From To width length slots pi | 7.5120 |
| | |
| | |
| | |
| | |
| | |
| | Comments/Remarks |
| | Comments/Remarks |
| (8) WELL TESTS: Minimum testing time is 1 hour | Steel plate welded on bottom. |
| Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) | Yield test done by air lift tool. 13 feet of drawdown while airlifting after 4 |
| Tion garrinii Diawdown Dini stein/Fump depui Duration (III) | hours. |
| | |

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

YAMH 59181

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2/20/2023

OWRD

STATE OF OREGON

WELL LOCATION MAP

Map of Hole

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301 (503)986-0900

OREGON

LOCATION OF WELL

Latitude: 45.15323300 Datum: WGS84

Longitude: -123.21967700

Township/Range/Section/Quarter-Quarter Section:

This map is supplemental to the WATER SUPPLY WELL REPORT

WM5.00S4.00W7SENE

Address of Well:

9000 SW RIVERBEND ROAD MCMINNVILLE, OR 97128

Well Label: 147371

Printed: February 20, 2023

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor





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JAN 2 3 2024 OWRD

Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

| Applicant Name(s) & Address: Robinson Favnc 110 |
|--|
| PO Box 100, Amity OR 97/01 |
| Transaction Type: GR Mad |
| Fees Received: \$ 1250.00 |
| Cash Acheck: Check No. 36/7 |
| Name(s) on Check: Same as apove |
| Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible. |
| If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete. |
| If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted. |
| If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810. |
| Sincerely, |
| OWRD Customer Service Staff |
| Submission received by: Whe Lovnen |
| (Name of OWRD staff) |
| Instructions for OWRD staff: |
| * Converted to the second |

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place
 the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Fold and put one copy of the Submission Receipt with check/cash into the Safe slot. Place the other copy of
 the Submission Receipt with submission (application/other document) in the top drawer of filled application.