## **Application for**

## **Permit Amendment**

Part 1 of 5 – Minimum Requirements Checklist



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

This permit amendment application <u>will be returned</u> if Parts 1 through 5 and all required attachments are not completed and included.

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

Received

MAR 0 5 2024

Check all items included with this application. (N/A = Not Applicable)OWRD  $\boxtimes$ Part 1 – Completed Minimum Requirements Checklist.  $\boxtimes$ Part 2 – Completed Application Map Checklist.  $\boxtimes$ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd fee calculator.  $\boxtimes$ Part 4 – Completed Applicant Information and Signature.  $\boxtimes$ Part 5 – Information about Permits to be Amended: Number of permits to be amended: 1 List the Permits here: Permit G-11666 Please include a separate Part 5 for each permit. (See instructions on page 6)  $\boxtimes$ Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; or the landowner of the proposed place of use is not the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at https://www.oregon.gov/OWRD/Forms/Pages/default.aspx). Assignment is not needed if the applicant is the permit holder of record. N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant or other permit holders of record that are not listed as applicants. N/A Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if all of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.  $\boxtimes$ N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)). (For Staff Use Only) WE ARE 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 \_\_ Additional signature(s) required \_\_\_\_ Part \_\_\_\_\_ is incomplete Other/Explanation

Staff:

503-

Date:

Your permit amendment 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.

	⊠ N/A	If more than three permits are involved, separate maps for each permit.	MAR	5	2024
$\boxtimes$		Permanent quality printed with dark ink on good quality paper.	O	WF	<b>ID</b>
$\boxtimes$		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, $11 \times 17$ inches, or u inches. For 30 x 30 inch maps, one extra copy is required.	p to 30	x 3	0
$\boxtimes$		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 assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that approved by the Department.			•
$\boxtimes$		Township, Range, Section, $\frac{1}{4}$ , DLC, Government Lot, and other recognized posurvey lines.	ublic laı	nd	
$\boxtimes$		Tax lot boundaries (property lines) are required. Tax lot numbers are recomm	ended.		
$\boxtimes$		Major physical features including rivers and creeks showing direction of flow, reservoirs, roads, and railroads.	lakes a	nd	
$\boxtimes$		Major water delivery system features from the point(s) of diversion/appropria main pipelines, canals, and ditches.	ition su	ch a	as
		Existing place of use that includes separate hachuring for each water use perhapse, and use including number of acres in each quarter-quarter section, gove in each quarter-quarter section as projected within government lots, donation other recognized public land survey subdivisions. If less than the entirety of the being changed, a separate hachuring is needed for the portion of the permit less than the desired public lands are permit less than the entirety of the being changed.	rnmen land c e perm	lot laim it is	or ns, or
	⊠ N/A	If you are proposing a change in place of use, show the proposed place of use hachuring that includes separate hachuring for each permit, priority date, and number of acres in each quarter-quarter section, government lot, or in each quarter section as projected within government lots, donation land claims, or other republic land survey subdivisions.	use ind uarter-	qua	_
$\boxtimes$		Existing point(s) of diversion or well(s) with distance and bearing or coordinate recognized survey corner. This information can be found in your water use pe		a	
	□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proplocation and label it clearly with distance and bearing or coordinates. If GPS coare used, latitude-longitude coordinates may be expressed as either degrees-seconds with at least one digit after the decimal (example $-42^{\circ}32'15.5''$ ) or do with five or more digits after the decimal (example $-42.53764^{\circ}$ ).	ordina minute:	S-	imal

FEE WORKSHEET for PERMIT AMENDMENT											
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,360								
	Types of change proposed:  ☐ Place of Use ☐ Point of Diversion/Appropriation  MAR 0 5 2024										
	Number of above boxes checked = 1 (2a) OWRD										
2	Subtract 1 from the number in line 2a = 0 (2b) If only one change, this will be 0  Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » »	2	\$0								
	Number of permits included in Permit Amendment <u>1 (3a)</u>		Ţ.								
	Subtract 1 from the number in 3a: <u>0 (3b)</u> If only one permit this will be 0										
3	Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » » » » »	3	\$0								
	Do you propose to add or change a well, or change from a surface water POD to a well?  No: enter 0 $\times$ Yes: enter \$480 for the 1 <sup>st</sup> well to be added or changed \$480 (4a)										
	Do you propose to add or change additional wells?										
	No: enter 0 X Yes: multiply the number of additional wells by \$410 \$410 (4b)										
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » »	4	\$890								
	Do you propose to change the place of use?										
	No: enter 0 on line 5										
	Yes: enter the cfs for the portions of the permits to be amended (see below*):(5a)										
	Subtract 1.0 from the number in 5a above:(5b)										
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » »										
_	If 5b is greater than 0, round up to the nearest whole number:(5c) and multiply 5c	_	4.0								
5	by \$350, then enter on line 5 » » » » » » » » » » » » » » » » » »	5	\$0								
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$2,250								
	Is this permit amendment:  necessary to complete a project funded by the Oregon Watershed Enhancement Board										
	(OWEB) under ORS 541.932?										
	endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat?										
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7										
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » »	7									
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » Permit Amendment Fee:	8	\$2,250								

- \*Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:
- 1. For irrigation calculate cfs for each permit involved as follows:
  - a. Divide total authorized cfs by total acres in the permit (for S-12345, 1.25 cfs  $\div$ 100 ac); then multiply by the number of acres to be changed to get the application cfs (x 45 ac= 0.56 cfs).
  - b. If the water right permit does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of permits on all the land included in the application; however **do not count** cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land. The fee should be assessed only once for each "on the ground" acre included in the application. (In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

## Part 4 of 5 – Applicant Information and Signature

#### **Applicant Information**

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.						
JLPN Inc. c/o John Lewis			503-373-9781							
ADDRESS			FAX NO.							
1118 Lancaster Dr. NE PMB 409										
CITY	STATE	ZIP	E-MAIL							
Salem	OR	97301								
By providing an e-mail address, consent is given to receive all correspondence from the Department										
ELECTRONICALLY. COPIES OF THE F	INAL ORDE	R DOCUMENTS WILL A	LSO BE MAILED.							

#### **Agent Information** – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME			PHONE NO. ADDITIONAL CONTACT NO									
Doann Hamilton / Pacific Hydro	-Geology, I	nc.	(503) 632-5016 (503) 632-5983 (Cell)									
ADDRESS		FAX NO.										
18487 S. Valley Vista Road			(503) 632-5983									
CITY	STATE	ZIP	E-MAIL									
Mulino	OR	97042	phgdmh@gmail.com									
By providing an e-mail address, consent is given to receive all correspondence from the Department												
ELECTRONICALLY. COPIES OF THE	ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.											

Explai	n in your own words what you propose to accomplish with this permit amendment; and why:
The au	uthorized wells for the southern portion of this water right are no longer being used and we wish to
add th	ne two wells we are using: Well 5 (MARI 55544) and Well 6 GR-1116 (MARI 7980).
	need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".
ii you i	leed additional space, continue on a separate piece of paper and attach to the application as. Attachment 1.
	neck this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federa imulus dollars)
Is the	applicant the permit holder of record? 🔀 Yes 🗌 No
If NO	, include either:
	A completed assignment form (with required statutory assignment fee), assigning all or a portion of the perm to the applicant(s), <b>OR</b>
	An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend t

Has the Completion ("C") Date of the permit(s) in this application expired? ☐ Yes ☒ No

If YES, this application will not be accepted by the Department.

If NO, what are the completion dates of the permit(s)? October 1, 2026

- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing of this Permit Amendment Application if the completion date of the permit expires within 6 months of the date of filing this application.

#### By my signature below, I confirm that I understand:

Prior to Department approval of the permit amendment, 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 permit 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 newspaper: <a href="Statesman Journal">Statesman Journal</a>

Received

MAR 0 5 2024

OWRD

permit.

Applicant Signature	Tohnsthon L. Lewis / Rea	S 2//3/24 Date
Applicant Signature	Print Name (and Title if applicable)	Date
Check one of the following:		
The applicant is responsible continue to be sent to the	e for completion of change(s). Notic applicant.	es and correspondence should
	ord will be responsible for completi pies of notices and correspondence	
holder(s) of record.		
holder(s) of record.  Check the appropriate box, if app	licable:	
Check the appropriate box, if app	nits proposed for amendment are o	r will be located within or serve

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.

STATE

contract for stored water with a federal agency or other entity.

Check here if water for any of the permits supplied under a water service agreement or other

**ADDRESS** 

STATE

ENTITY NAME  Marion County Planning Division	ADDRESS 5155 Silverton Road NE	
CITY	STATE	ZIP
Salem	Oregon	97305

Received MAR 0.5 2024

**OWRD** 

ZIP

ZIP

NA

CITY

NA

CITY

**ENTITY NAME** 

MAR 0 5 2024 use a separate Part 5 for each permit being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

#### **PERMIT # 11666**

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA) (Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

(Note: If th	e POD/POA name is no	t specified in	the	perr	nit, a	assig	n it a r	name (	or nun	nber he	re.)	
POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Τv	<b>ν</b> p	R	ng	Sec	1/4 1/4		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)	
Well 2	□ Authorized     □ Proposed	MARI 16475	7	s	2	w	33	NW	NW	DLC 75	250 feet south and 100 feet east from the NW corner, Section 33	
Well 3	□ Authorized     □ Proposed	MARI 7894	7	S	2	w	29	sw	SE	DLC 74	800 feet north and 1,700 feet west from the SE corner, Section 29	
Well 4	<ul><li>✓ Authorized</li><li>✓ Proposed</li></ul>	UNKNOWN	7	s	2	w	28	sw	sw	DLC 75	470 feet north and 280 feet east from the NW corner, Section 33	
Well 5	☐ Authorized ☐ Proposed	MARI 55544	7	S	2	w	28	sw	sw	DLC 75	130 feet north and 425 feet east from the SW corner, Section 28	
Well 6 GR-1116	☐ Authorized ☐ Proposed	MARI 7890	7	S	2	w	28	sw	sw	DLC 75	542 feet south and 1,838 feet west from the NE corner, DLC 75	
Chec	k all type(s) of change(s	s) proposed l	belo	w (cl	hang	e "C	CODES'	" are p	rovid	ed in pa	arentheses):	
	Place of Use (POU)				$\boxtimes$	] P	oint o	f Appr	opriat	ion/We	ell (POA)	
	Point of Diversion (	POD)				] A	Additio	nal Po	int of	Approp	oriation (APOA)	
	Additional Point of	Diversion (Al	POD		Surface water POD to Ground Water POA (SW/GW)							
Will a	all of the proposed cha	nges affect tl	he e	ntire	wat	er u	ise per	mit?				
	Yes Complete only		,			•			e 2 on	the ne	xt page. Use the	

Yes	Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the
	"CODES" listed above to describe the proposed changes.
<u></u>	

No Complete all of Table 2 to describe the portion of the permit to be changed.

## For a change in place of use: NA

Does the permit holder of record own or control the land TO which the place of use is being moved?

☐ Yes ☐ No

If NO, the landowner of the land TO which the place of use is being **moved must be assigned to the permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use?  $\square$  Yes  $\square$  No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

Received

MAR 0 5 2024

**OWRD** 

Please use and attach additional pages of Table 2 as needed. See page 6 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 Changes to Water Use Permit # G-11666

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

	AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.								Proposed Changes (see	changes are made.											5	
Twp	Rng	Sec	1/4	1/4	Tax Lot		Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Tv	vp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date
										РОА	7	s	2	w	28	sw	sw	2600	DLC 75	4.3	Well 5 and Well 6 GR-1116	10-26-1993
								7		РОА	7	S	2	w	29	SE	SE	2600	DLC 75	3.0	Well 5 and Well 6 GR-1116	10-26-1993
										РОА	7	S	2	w	32	NE	NE	2600	DLC 75	1.1	Well 5 and Well 6 GR-1116	10-26-1993
										POA	7	s	2	w	32	NE	NE	2600	DLC 75	7.4	Well 5 and Well 6 GR-1116	9-5-1990
										POA	7	S	2	w	33	NW	NW	2600	DLC 75	3.6	Well 5 and Well 6 GR-1116	10-26-1993
										POA	7	S	2	w	33	NW	NW	2600	DLC 75	7.6	Well 5 and Well 6 GR-1116	9-5-1990
				TOT	TAL ACR	ES											Т	OTAL A	ACRES	27.0		

Additional remarks: <u>Total acres are listed as per extension PFO issued January 2, 2024.</u>

Received

MAR 0 5 2024

OWRD

		her water rig or "to" lands?			use permi	ts or groun	d water reg	istrations a	ssociated	with
If \	YES, list	the other cert	ificate, per	mit, or grou	ınd water r	egistration	numbers: <u>F</u>	PERMIT G-18	8696, GR-1	116
lar to	nd for irr a water	nit(s) are for in Figation that a Fright certifica Fround w	re subject t ate or grour	to transfer r nd water reg	must either gistration n	change con	ncurrently of separately	or be cancel	led. Any ch	nange
For	a change	e in point(s) o	f appropria	ation (well(	s)) or addit	ional point	(s) of appro	priation:		
	assoc map.	log(s) are atta ciated with th ( <b>Tip</b> : You ma //apps.wrd.st	e correspoi ay search fo	nding well(s or well logs o	s) in Table 1 on the Dep	above and artment's w	on the acc	ompanying		1
AN	ND/OR									
		Describe the do not have estimate" for you consult a assembling t	a well log. f r each requ a licensed w	or <i>propose</i> ested infori vell driller, g	<i>d wells not</i> mation eler geologist, o	yet construment in the recrified w	cted or built table. The vater right o	<i>lt,</i> provide " Department	a best t recomme	nds
t t	Any well the acco transfer whether appropri	uction of Poin (s) in this listing mpanying appa application un the proposed ation (POA). The same source	ng must be olication mantil it is received well(s) will The Departi	clearly tied ap. Failure t eived. The in I access the	o provide t nformation same sour	he informatis necessar ce aquifer a	tion will del y for the de as the autho	lay the proc epartment t orized point	essing of y o assess (s) of	our
Proposed or	Is well	If an existing			Casing	Seal	Perforated or	Static water level	Source aquifer	Well - specific rate (cfs or gpm).

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right				
Well 2	Yes	MARI 16475		See Well Log MARI 16475										
Well 3	Yes	MARI 7894			See V	Vell Log MAR	17894							
Well 4	Yes	UNKNOWN	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0.34 CFS				
Well 5	Yes	MARI 55544		See Well Log MARI 55544 See Well Log MARI 7980										
Well 6 GR-1116	Yes	MARI 7980												

Received

MAR 0 5 2024

TACS

## MAR 05 2024

# **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

**OWRD** 

NAME								PHO	NE	
JLPN Inc. c/o Jeremy Powell						503	-373-978	1		
	ADDRESS									
1118 La	ncaster	Dr. PMB	409							
CITY				STATE	ZIP	EMAIL				
Salem				OR	97301					
<b>A. <u>Land a</u></b> Please inc			formation fo	r all tax lo	ts where wa	ater will b	oe diverted (1	aken from i	ts source),	conveyed
(transport	ed), and/o	or used or o	leveloped. A	pplicants	for municip	al use, or	irrigation us	es within irr	rigation dist	
substitute	existing a	nd propose	ed service-ar				nformation r	equested be	elow.	
Township	Range	Section	<i>y</i> <sub>4</sub> <i>y</i> <sub>4</sub>		Plan Designati Rural Resident			Water to be:		Proposed Land Use:
75	2W	28C		2600	EFU		□ Diverted	□ Conveyed	☑ Used	IR
							☐ Diverted	Conveyed	Used	
							☐ Diverted	Conveyed	Used	
							Diverted	☐ Conveyed	☐ Used	
Type of ar	oplication t nit to Use or	Store Wate	with the Ore	er Right Tra	insfer [2	Permit	Amendment o		iter Registrat	ion Modification
	ed Water U	_	_	ange of Wa			on of Conserv			
Source of		Reservo		⊠ Ground			e Water (nam		. 🗆	f 1
Estimated	quantity	of water ne	eeded: <u>0.34</u>		Cubic fee	t per seco	ond [_] gal	lons per mini	ute 🔲 a	cre-feet
Intended	use of wat		rrigation Municipal		mercial i-Municipal		ustrial tream	Domest Other		household(s)
Briefly des										
							mendment			
					ons (wells	) to two	o different	points of	appropria	tion for an
existing	g water r	ight Pern	nit G-1166	6.						
complete	ed while y	ou wait, p	olease have	a local g	overnment	represe	nd Use Info entative sign	the receip	ot on the b	
page 4 ar	nd include	e it with th	ne applicati	on filed v	vith the Or	egon Wa	ater Resour	ces Depart	ment.	

OWRD

Land Use Information Form — Page 3 of 4  $\,$ 

See Page 4 ->

Last Revised: 10/2023

## 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.

Please check the appropriate box	below and provide the requested inf	ormation		
	d water use(s), including proposed construct . Cite applicable ordinance section(s): <u>17,</u>			
approvals as listed in the table below. already been obtained. Record of Action	d water use(s), including proposed construct (Please attach documentation of applicable lon/land-use decision and accompanying find have not ended, check "Being Pursued."	and-use appro	vals which have	
Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:		
		Obtained Denled	☐ 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	
Name: John Speckman Signature: John Speckman	Date: 2-2 Ounty Planning Phone: So	stant P	lanner	
Signature: John Speckmin	Date: <u>2-2</u>	3-2024		
Governmental Entity: Marion C	ounty Planning Phone: So	3 - S88-5	5038	
Receipt Ackno	owledging Request for Land Use Info	rmation		
this form while the applicant waits, you may have 30 days from the date of OWRD's Publ Oregon Water Resources Department. Pleas for a new permit to use or store water, a co	he applicant. For new water right applications y complete this receipt and return it to the app lic Notice of the application to submit the comp se note while OWRD can accept a signed receip mpleted Land Use Information Form is require	licant. If you sig pleted Land Use pt as part of inta	gn the receipt, you will e Information Form to ake for an application	
Applicant Name:				
	Title:			
Staff Signature:	Date:			
Laguernmental Entity	Phone:			

OWRD

Land Use Information Form — Page 4 of 4  $\,$ 

Last Revised: 10/2023

NOTICE TO WATER WELL CONTRACTOR The original and first copy of this report,

are to be filed with the

WATER WELL REFERENCE IVED

WATER RESOURCES DEPARTMENT, SALEM, OREGON 97310 within 30 days from the date of well completion.

STATE OF OREGONDEC 5 1979

within 30 days from the date of well completion.	WATER RESOURCES DEPT	Vo	**********	***************************************
(1) OWNER:	(10) LOCATION OF WELL:			
Name Glody Wilson	County Maxito Driller's well no			
Address 5590 Stall At Selon Che.	3 T. 25	R. 2	20	W.M.
(2) TYPE OF WORK (sheek).	Bearing and distance from section or subdivisi	ion corner		
(2) TYPE OF WORK (check):				
New Well Deepening Reconditioning Abandon				
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed w	zell.		
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found	52		**
Domestic   Industrial   Municipal	Static level 25 ft. below land a	munfana T	note //	1-11-7
le	A. BOATT MAKE			10-1
	Artesian pressure lbs. per squar	re inch. i	Jate	
(5) CASING INSTALLED: Threaded Welded	(12) WELL LOG: Diameter of well	halow anni	6	b
	Depth drilled ft. Depth of compl		9.	7 4
" Diam. from ft. to ft. Gage				ft.
" Diam. from ft. to ft. Gage	Formation: Describe color, texture, grain size and show thickness and nature of each stratu	m and ag	uifer pe	netrated
(6) PERFORATIONS: Perforated?   Yes   No	with at least one entry for each change of forma position of Static Water Level and indicate prin	tion, Repor	rt each	change in
(6) PERFURATIONS: Perforated?  Yes No.		T T	er-pearm	ig strata.
	MATERIAL	From	То	SWL
Size of perforations in. by in.	log Sair	8	2	
perforations from ft. to ft.	7	-	2/	
perforations fromft. toft.	moun clay	2	36	
perforations from ft. to ft.	Barrella da sal	26	20	
(7) SCREENS: Well screen installed?   Yes No	June Hand	026	38	
Manufacturer's Name	Bresser Alast	38	52	-
TypeModel No	The cary	000	1	
Diam Slot size Set from ft. to ft.	Sand	52	54	
Diam Slot size Set from ft. to ft.				
8) WELL TESTS: Drawdown is amount water level is lowered below static level	Brown clay	54	72	
a pump test made?  Yes No If yes, by whom?	Sand & Mornel	22	82	
rield: gal./min. with ft. drawdown after hrs.			-	
" " " "	Clay & Granel	82	88	-
v / "	. 0			
Air last 50	Amall to med Granel.	88	99	
r test 60+ gal./min. with 52-ft. drawdown after hrs.				
artesian flow g.p.m.				-
'emperature of water Depth artesian flow encountered ft.	Work started //- /5 19 Complete	ed // -	16	1979
9) CONSTRUCTION:	Date well drilling machine moved off of well	11-1	6	1979
Vell seal—Material used	Drilling Machine Operator's Certification:			
Vell sealed from land surface toft.	This well was constructed under my	direct	super	vision.
plameter of well bore to bottom of sealin.	Materials used and information reported best knowledge and belief.	above a	re true	to my
diameter of well bore below sealin.	Signed Latreen & Farrell	de 1	1-19	19
fumber of sacks of cement used in well sealsacks	(Drilling Machine Operator)	Date	111	, 19
low was cement grout placed?	Drilling Machine Operator's License No	4	53.	
Punped	Water Wall Control to Control			-
The second secon	Water Well Contractor's Certification:			
The second secon	This well was drilled under my jurisditrue to the best of my knowledge and bel	iction and ief.'	this r	eport is
Vas a drive shoe used? Xes Mo Plugs Size: location ft.	true to the best of my knowledge and bel Name510 DALLAS RD. N.W.			
id any strata contain unusable water?   Yes To	(Person Law, or corporation)	(Тур	e or prin	nt)
ype of water? depth of strata Received	Address		y	**********
Tethod of sealing strata off	400 min 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	K.	
Vas well gravel packed? ☐ Yes ☑ No Size of gravel:	[Signed] (Water Well Contr.	actor)		*****
Inavel placed from	Contractor's License No. 419. Date		0	1979
(USE ADDITIONAL SH		400		., 10k

STATE OF OREGON WATER RESOURCES DEPT.
WATER WELL REPORT SALEM, OREGON



(as required by ORS 537.765)							
(1) OWNER: Well Number: (9) LOCATION OF WELL by legal description:  County Marion Latitude							
Address 5201 State Street	Township 7 South Nors, Range 2 West	E or W, W	VM.				
City Salem State Oregon Zip	Section 29 4						
(2) TYPE OF WORK:	Tax Lot Block	Subdivision	, :				
XX New Well    Deepen    Recondition    Abandon	Street Address of Well (or nearest address)						
(3) DRILL METHOD	5201 State Street Salem,	Uregon					
XX Rotary Air	(10) STATIC WATER LEVEL:						
Other	22 ft. below land surface.	Date	87				
(4) PROPOSED USE:	Artesian pressure lb. per square inch.						
□ Domestic □ Community □ Industrial XX Irrigation							
☐ Thermal ☐ Injection ☐ Other	(11) WATER BEARING ZONES:	ю п.					
** BORE HOLE CONSTRUCTION:	Depth at which water was first found20	3 Feet					
l Construction approval Yes No Depth of Completed Well 325 ft.		ated Flow Rate	SWL				
Yes No XX	203' 248' 80	GPM	40 °				
Explosives used Type Amount	288' 295' 120	GPM	22'				
HOLE SEAL Amount		GPM	22'				
Diameter From To Material From To sacks or pounds							
" 0' 25' Bentonite 0' 25'	(12) WELL LOG: Ground elevation						
	Ground elevation						
Under Reamer Used To Sea Casing 5 Feet	Material	From To	SWL				
Into Basalt Rock.Cement Pumped For Postive Sea		0 1					
How was seal placed: Method	BIOWII CIG	1 15					
XX Other See Item (5) Above	Gray Clay	15 30					
Backfill placed fromft. toft. Material	Clay And Gravels	30 38 38 49					
Gravel placed fromft. toft. Size of gravel	Gray Clay	49 69					
(6) CASING/LINER:	Gravels & Clay Cemented	49 09					
Diameter From To Gauge Steel Plastic Welded Threaded	Gravels Small To Medium Loose,	69 75					
Casing.	With Brown Sand	69 75 75 138					
	Gravels Cemented	73 136					
	Brown & Gray Clay Layers, With Decomposed Rock	138 161					
	Weathered Basalt Rock	161 197					
Liner:	Reddish Basalt Rock	197 203					
	Black & Brown Basalt Rock	203 210					
r man rocation or shoe(s)	Gray & Brown Basalt Rock	210 220					
PERFORATIONS/SCREENS:	Black Basalt Rock	220 244					
Perforations Method	Broken Basalt Rock	244 248	401				
Screens Type Material	Gray Basalt Firm	248 288					
Slot Tele/pipe	Broken Honeycomb Basalt WB	288 295	221				
From To size Number Diameter size Casing Liner	Black Basalt Firm	295 315					
	Black Vescular Basalt WB	315 320					
Received :	Black Basalt Firm	320 325	22'				
WAR 0.5 2024	DIGCK DODGIC TIII						
MAR U 5 2024	Date started July 6, 1987 Completed	July 22,	1987				
(8) WELL TESTS: Minimum testing time is 1 hour	(unbonded) Water Well Constructor Certificati	ion:	-4: au				
Flowing	I certify that the work I performed on the co- abandonment of this well is in compliance with	Oregon well cons	struction				
☐ Pump ☐ Bailer XX Air ☐ Artesian	standards. Materials used and information reported	above are true to	my best				
Yield gal/min Drawdown Drill stem at Time	knowledge and belief.						
235 325 Feet 1 hr.		VWC Number					
235 320 Feet 2 Hours	Signed D	)ate					
150 170 Feet 1 Hour (bonded) Water Well Constructor Certification:							
I accept responsibility for the construction, alteration, or abandonment							
	work performed on this well during the construction work performed during this time is in compl	i dates reported a	gon well				
Was a water analysis done?	construction standards. This report is true to the b	est of my knowl	edge and				
Did any strata contain water not suitable for intended use? \(\sigma\) 100 little  Salty \(\sigma\) Muddy \(\sigma\) Odor \(\sigma\) Colored \(\sigma\) Other \(\sigma\)	belief. MONDERS DRILLING. INC. W	VWC Number 7	58				
	Signed Phomos Peck D	Date July 24	, 1987				
2 op all of building	0.8		88/01 De086				
WHITE COPIES - WATER RESOURCES DEPARTMENT YELLOW	COPY - CONSTRUCTOR PINK COPY - CUST	T OWNER 1	10/00				

# RECEIVED

STATE OF OREGON MAR 1 (2) 2000 S	35544	1919				
WATER SUPPLY WELL REPORT		WELL 1.D. # L	4/52	5	-	
(as required by ORS 517 765) WATER HE SOURCES OF START CARD # /372 45						
lastructions for completing this report are on the last page of this form.						
(1) LAND OWNER Well Number	(9) LOCATION OF					
Namelews lakeshore Nursery Inc		211_Latitude				
Address 581 Land caster Dr St Suite 275		N or S Range			WM	
City Salem. State OR Zip 9.7301		5W 1/4				
(2) TYPE OF WORK	Tax Lot <b>260</b> C	LotBloc	kSub	division_		
M New Well 1 (Deepening 1 Alteration (repair/recondition) 1 Abandonment	Street Address of V	Yell (oy meares) address	5590	5ta	te	
(3) DRILL METHOD:	St SE S	alem, 0	R			
(TRolary Air   TRolary Mud   Cable   FAuger	(10) STATIC WATI	CR LEVEL:				
Other	44'5" ILb	clow land surface		Date 3 -	1-0	
(4) PROPOSED USE:	Artesian pressure :	lb per-	square inch	laik		
(*TDomestic     Community     Industrial   Itrigation	(11) WATER BEAL					
Thermal   Unjection   Havestock     Other			i t			
(5) BORE HOLE CONSTRUCTION:	Depth at which water s	vas first found				
Special Construction approval 1 Tyes No. Depth of Completed Well 14 of	From	To	Estimated Flo	ow Hate	SWL	
Explosives used 1 1Yes M No. Type Amount	11	21				
HOLE SEAL			7741.5			
Diameter From To Material From To Section pounds	59	lowed -	150	J.	44'4	
Diameter From The Material From To 18 or pounds  16 0 18 Cement 0 32 23+ bent.	J 7	- 1 <del>5 - 4 - 7 2 1</del>	118		7,4	
10 32 148		in/11+ 11 +	100			
How was seat placed: Method 11A 11B MC 11D !IE	(12) WELL LOG:					
	Gron	WATTER THE				
Cother	Mate	rial	From	Ta	SWL	
Backfill placed fromft_ toft.   Material	Crushed 1	E. 11	0	3		
	Ton Soil	-111	2	.8		
(6) CASING/LINER: Diameter From To Gauge Steel Plastic Welded Threaded	Brown C	en	8		$\vdash$	
The street of march			11	21		
Cosing: 10 La 18 141-16 22-14	Silty brow		21	31		
	Brown & To		31	33	<del> </del>	
			13	48		
	Silty brow		-33	70		
Lôner:	Brown clay		48	55	$\vdash$	
Drive Shoe used   Inside     Ontside     None		ums	55	59	+	
Final location of shoe(s) 146 ft 6 in	Pocked bro		32	37		
(7) PERFORATIONS/SCREENS:	Brown +ligh	rrea		125	1	
OPErforations Method Mills Knife	Sandy Cl		59	63.5	+	
1.) Screens TypeMaterial,	Med Brown	gravel	63.5	11		
Slot Tele/pipe	Min Sing	L I III	- N	66	-	
From To size Number Diameter size Casing Liner	Semi-light	r grave!	66	72	·	
100 1395 2 711 K		A Grevel	72	-67		
	Very Sandy	Drown Clay	74	2!		
	Brown Son	d - Muddy	81	86		
	Cont	Pa 2			<u> </u>	
(8) WELL TESTS: Minimum testing time is 1 hour	Date started 2 - 7	-, 01/Con	npleted <u>3 - 1</u>	-0	L	
Flowing	(unbanded) Water Wel	Constructor Certifi	cation:		-	
Di Pump I Bailer I l'Air l'I Artesian	I certify that the wor	k I perfurmed on the	entistruction, after	ations or abo	mdon-	
Yield gal/min Orawdown Drill strougt Time	ment of this well is in cu standards. Materials use					
I lir	knowledge and behef.	a and intennation rep				
150 38'1" 4 hr	1.	<u>_</u>	WWC Num	ber 162	4	
	Signed 1		1)	ate 2-/	-01	
Temperature of water 54 Depth Artesian Flow Found	(bundede Water Well (	onstructor Certifica	Ciona			
Temperature of water	Laccept responsibili	ty for the construction	a, alteration, in ab	saidoument	work	
Did any strata contain water not suitable for intended use? I, I Too little	performed on this well i	lunng the construction	r dates reported al-	mve. All wo	urk	
[TSalty   1   Muddy   1   Odor   1   Colored   1   Odor	performed during this to construction standards					
Depth of strata	flore 1		\ wwc.Num	her 12	Z_3	
technical states	1 # Leads 1	11 Marchet L	/ 15	mar 3-1	- 121	

ORIGINAL - WATER RESOURCES DEPARTMENT — FIRST COPY - CONSTRUCTOR — SECOND COPY - CUSTOMER

Received

MAR 0 5 2024

MARI 55544

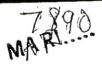
#### STATE OF OREGON

### WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.	SIARI CARD# 13 12 45				
(1) LAND OWNER Well Number Number Number Number Number	(9) LOCATION OF WELL by legal description: County Marion Latitude Longitude				
Address 581 Land Caster Dr 38 Saite 27	Bownship 7-5 Nor S Range 2-ce For W WM				
City Salem State QR Zip 97301	For W WM				
(2) TYPE OF WORK	1/4 3 1/4				
M New Well [ ] Deepening [ ] [ Alteration repsintecondustric [ ] [ Abandonment	Tax Lot <b>7600</b> Lot Block Subdivision				
	Street Address of Well are removed address 5 5 90 64-1 6				
(3) DRILL METHOD:	SE Salem Of				
L, Rotary Air     TRotary Mud   XCable	(10) STATIC WATER LEVEL:				
JOther	44 5 ft below land surface Date 3 1 + 01				
(4) PROPOSED USE:					
[ [Domestic   1 ] Community   1 ] Industrial   Definingation	(11) WATER BEARING ZONES:				
[ Thermal   I Injection   Thivestock   L'Other	OTT TOTER BEARING KONES:				
(5) BORE HOLE CONSTRUCTION:	Depth at which water was first found				
Special Construction approval + ! Yes ANo. Depth of Completed Well / 48/fc -					
Explosives used 1 Pev (1000 TypeAmount	From To Estimated Flow Rate SWL				
HOLE SEAL	MECHNER				
Diameter From To Material From To Sucks or pounds					
——————————————————————————————————————	MAY 5 - 209				
	WATERING				
	(t2) WELL LOG:				
low was seal placed. Method   IA   I   B   I   IC   I   ID   I   IE	Ground Elevation				
[Other	CHANGE ENGAGERM				
Backfill placed from It_toftMaterial	Material From In SWt.				
havet placed fromth_toft Size of gravel	Large to Med gravel				
6) CASING/LINER:					
Dismeter From To Gauge Steel Plastic Welded Threaded	Tight brown sand				
Sessing;					
	and grave 106 112				
	Acoun clay (grave)				
	Semi- Cemented 112 122				
her: [1] [1] [1]	Tight Sand+ grave 122 126				
	Med to Large gravel				
rive Shoe used 1 i Inside 1. [ Outside 1.] None	with brown clay 126 131				
atal location of shoc(s)	Hed to large gravel				
D PERFORATIONS/SCREENS:	<u> </u>				
Perforations   Method	Brown Clay 141 146.5				
l Sercens type Material	Dark gray baselt 146.5 148				
rom To size Number Diameter Size Control					
The change connects the change lines	RECEIVED				
- + - ! !!					
	MAR J 9 2001 MAR 015				
·					
<u></u>	WATER RESOURCES DE III				
WELL TESTS: Minimum testing time is I hour	SALEMOCKIEGON				
	- Completed				
Pump [] Bailer [] Air (] Artesian	(unbonded) Water Well Constructor Certification:				
Yield gul/inin Drawdown Drill stem at Time	I certify that the work I performed on the construction, alteration, or ahandon-				
hr.	ment of this well is in compliance with Oregon water apply well construction standards. Materials used and information reported above are true to the best of my born before the construction.				
	knowledge and belief.				
	WWC Number 1127				
	Signed Date 3 -/-0/				
npendure of waterDepth Artesian Flow Found	(bonded) Water Well Constructor Certification:				
s a water analysis done?     Yes   Dy whom	Laccept responsibility for the construction alterations or abandons as an				
any strata contain water not stritable for intended use? Thos little	perior med on this well diffuge the construction dates regarded above. All con-				
Robert Date to the Control of the Co	performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of thy knowledge and belief.				
	The state of the state of the control three kinds before and Indial				
oth of strata:	VI 12.0 - WW! Nousker 12.7.2				
oth of stratar	Signed Floyd USeppo WWC Number 1273				

## STATE ENGINEER Salem, Oregon



# Well Record

GR- 1076

STATE WELL NO. 7/2W-28N(1) COUNTY Marion APPLICATION NO. ... GR- 1116

OWNER: Raymond L. Philips	MAILING ADDRESS:	Rt. 5, Box 860	***************************************
	CITY AND	Salem, Oregon	
LOCATION OF WELL: Owner's No.	SIAIE:		
SW 1/4 SW 1/4 Scc. 28 T. 7 S., R. 2 W.,	, W.M.		
Bearing and distance from section or subdivision			
corner 1838! W. & 542! S. of NE cor. of the			
J. C. Caplings DLC # 75.			
Altitude at well 195 ft.		Merr	
TYPE OF WELL: Drilled Date Constructed 19	251		
Depth drilled93 ft. Depth cased80 ft	4	Section28	
CASING RECORD:			
8 inch			
FINISH:			
AQUIFERS:			
WATER LEVEL: 21 ft.			
PUMPING EQUIPMENT: Type Jacuzzi turbi Capacity	ne		H.P. 10
WELL TESTS:	hours	250	G.P.M.
Drawdown ft. after	hours		
USE OF WATER Dom., Irrig. & Stock SOURCE OF INFORMATIONG. R. Record DRILLER or DIGGERH. E. Evens	Temp	°F.	, 19
DRILLER or DIGGER H. E. Evans			

Trrigation of 30 acres.

ADDITIONAL DATA:

REMARKS:

Received MAR 05 2024

**OWRD**