



April 28, 2025

Lisa Jaramillo
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301

RE: Permit Amendment Application for Permit G-17750 in the name of City of Independence

Dear Lisa:

GSI Water Solutions, Inc. (GSI) is submitting the enclosed permit amendment application on behalf of The City of Independence. The City is proposing to amend the existing permit to add four existing wells and to change the authorized use to within the City's service area.

The permit amendment application and a check for the required processing fee of \$4,160 are enclosed.

Please contact me if you have any questions or concerns at kgrigsby@gsiws.com.

Sincerely,

A handwritten signature in cursive script that reads "Kimberly Grigsby".

Kimberly Grigsby
Principal Water Resources Consultant

Enclosures: Permit Amendment Application
Check for application fee in the amount of \$4,160



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 will be returned 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.

Check all items included with this application. (N/A = Not Applicable)

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- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Application Map Checklist.
- ☒ 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: **Fee enclosed in the amount of \$4160**
- ☒ Part 4 – Completed Applicant Information and Signature.
- ☒ Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-17750 See Attachment A
Please include a separate Part 5 for each permit. (See instructions on page 6) **N/A**
- ☒ Completed Permit Amendment Application Maps (Does not have to be prepared by a Certified Water Right Examiner). **See Attachment B**
- ☐ ☒ 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. **See Attachment C**
- ☒ ☐ N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. **See Attachment D**
- ☐ ☒ 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 will be returned 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 not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

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- ☐ ☒ N/A If **more than three** permits are involved, separate maps for each permit.
- ☒ Permanent quality printed with dark ink on good quality paper.
- ☒ The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- ☒ 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 pre-approved by the Department.
- ☒ Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- ☒ Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- ☒ 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 diversion/appropriation such as main pipelines, canals, and ditches.
- ☒ Existing place of use that includes separate hachuring for each water use permit, 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 permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
- ☒ ☐ N/A If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, 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.
- ☒ Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
- ☒ ☐ N/A If you are proposing a change in point(s) of diversion or well(s), 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°).

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Part 3 of 5 – Fee Worksheet

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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: <input checked="" type="checkbox"/> Place of Use <input checked="" type="checkbox"/> Point of Diversion/ <u>Appropriation</u> Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i>		
2	Multiply line 2b by \$1090 and enter »	2	\$1090
	Number of permits included in Permit Amendment <u>1 (3a)</u> Subtract 1 from the number in 3a: <u>0 (3b)</u> <i>If only one permit this will be 0</i>		
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? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: enter \$480 for the 1 st well to be added or changed \$480 (4a) Do you propose to add or change additional wells? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: multiply the number of additional wells by \$410 \$1230 (4b)		
4	Add line 4a to line 4b and enter »	4	\$1710
	Do you propose to change the place of use? <input type="checkbox"/> No: enter 0 on line 5 <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the permits to be amended (see below*): 0.56 (5a) Subtract 1.0 from the number in 5a above: <u>0 (5b)</u> 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 by \$350, then enter on line 5 »		
5		5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$4160
	Is this permit amendment: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> 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 If no box is applicable, enter 0 on line 7 »		
7		7	0
8	Subtract line 7 from line 6 » Permit Amendment Fee:	8	\$4160

*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 ÷ 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 City of Independence			PHONE NO. 503-838-1212	ADDITIONAL CONTACT NO.
ADDRESS PO Box 7			FAX NO.	
CITY Independence	STATE OR	ZIP 97351	E-MAIL gfisher@ci.independence.or.us	
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.				

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

AGENT/BUSINESS NAME Kimberly Grigsby, GSI Water Solutions, Inc			PHONE NO. 541.257.9004	ADDITIONAL CONTACT NO.
ADDRESS 1600 SW Western Blvd Suite 240			FAX NO.	
CITY Corvallis	STATE OR	ZIP 97333	E-MAIL kgrigsby@gsiws.com	
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.				

Explain in your own words what you propose to accomplish with this permit amendment; and why:
The City is proposing to amend the existing permit to add four wells and to use within the City's service area.
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 Act. (Federal stimulus 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 permit to the applicant(s), **OR**
- ☐ An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

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)? 4/6/2037

- 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: Polk County Itemizer-Observer

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


Applicant Signature

Gerald Fisher, Public Works Director
Print Name (and Title if applicable)

04/15/25
Date

Applicant Signature

Print Name (and Title if applicable)

Date

Check one of the following:

- ☒ The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- ☐ The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.

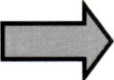
Check the appropriate box, if applicable:

- ☐ Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district. N/A

IRRIGATION DISTRICT NAME N/A	ADDRESS	
CITY	STATE	ZIP

- ☐ Check here if water for any of the permits supplied under a water service agreement or other contract for stored water with a federal agency or other entity. N/A

ENTITY NAME N/A	ADDRESS	
CITY	STATE	ZIP

 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 City of Independence	ADDRESS PO Box 7	
CITY Independence	STATE OR	ZIP 97351

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



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Part 5 of 5 – Water Use Permit Information

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Please 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.

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PERMIT # G-17750

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.)

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-____)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Park Well G-17750	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	POLK 53003	8	S	4	W	21	SW	SE		1265 ft N and 2403 ft W from SE Corner Section 21
Polk St Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	POLK 2945	8	S	4	W	21	NW	SE	DLC 63	2455 ft N and 1815 ft W from SE Corner, Section 21
Polk St Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	POLK 51438	8	S	4	W	21	NW	SE	DLC 63	2190 ft N and 2000 ft W from SE Corner, Section 21
Polk St Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	POLK 52307	8	S	4	W	21	NW	SE	DLC 63	2005 ft N and 2120 ft W from SE Corner, Section 21
Polk St Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	POLK 54296	8	S	4	W	21	SE	NE	DLC 63	1500 ft S and 480 ft W from NE Corner, Section 21

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- ☒ Place of Use (POU)
 ☐ Point of Appropriation/Well (POA)
- ☐ Point of Diversion (POD)
 ☒ Additional Point of Appropriation (APOA)
- ☐ Additional Point of Diversion (APOD)
 ☐ Surface water POD to Ground Water POA (SW/GW)

Will all of the proposed changes affect the entire water use permit?

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

For a change in place of use:

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

☐ Yes ☐ No N/A – Permit G-17750 is held by a city and authorizes use for municipal purposes

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? ☒ Yes ☐ No

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-17750

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 "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acre (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp	Rng		Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acre (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date						
EXAMPLE																								
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	S	9	E	15	NW	NW	100	1	10.0	POD #5	
"	"	"	"	"	"	"	"	"	EXAMPLE	"		"	2	S	9	E	15	SW	NW	200		5.0	POD #6	
												POU/APOA	Within the City of Independence Service Area (see maps in Attachment B)								Park Well Polk Well #1 Polk Well #2 Polk Well #3 Polk Well #4	2/4/2016		
TOTAL ACRES											TOTAL ACRES									N/A				

Additional remarks: _____.

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Are there other water rights certificates, water use permits or ground water registrations associated with the "from" or "to" lands? ☐ Yes ☐ No ☒ N/A

If YES, list the other certificate, permit, or ground water registration numbers: N/A- Permit G-17750
authorizes use for municipal purposes so 'layering' does not apply.



If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

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

- ☒ Well log(s) are attached for each authorized and proposed well(s) 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/Default.aspx) See Attachment D

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 the information will delay the processing of your transfer 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. 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

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Attachment A

Permit G-17750

**Application for a Permit Amendment
City of Independence**

STATE OF OREGON

COUNTY OF POLK

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

CITY OF INDEPENDENCE
PO BOX 7
INDEPENDENCE, OR 97351

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-18256

SOURCE OF WATER: PARK WELL (POLK 53003/L93618) IN WILLAMETTE RIVER
BASIN

PURPOSE OR USE: MUNICIPAL USES

MAXIMUM RATE: 0.56 CUBIC FOOT PER SECOND

PERIOD OF USE: YEAR-ROUND

DATE OF PRIORITY: FEBRUARY 4, 2016

WELL LOCATION: SW $\frac{1}{4}$ SE $\frac{1}{4}$ SECTION 21, T8S, R4W, W.M.; 1265 FEET NORTH AND
2403 FEET WEST FROM SE CORNER, SECTION 21

THE PLACE OF USE IS LOCATED AS FOLLOWS:

NE $\frac{1}{4}$ NE $\frac{1}{4}$
NW $\frac{1}{4}$ NE $\frac{1}{4}$
SW $\frac{1}{4}$ NE $\frac{1}{4}$
SE $\frac{1}{4}$ NE $\frac{1}{4}$
NE $\frac{1}{4}$ SE $\frac{1}{4}$
SECTION 21

TOWNSHIP 8 SOUTH, RANGE 4 WEST, W.M.

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Measurement Devices, and Recording/Reporting of Annual Water Use
Conditions:

- A. Before water use may begin under this permit, the permittee shall install a totalizing flow meter at each point of appropriation. The permittee shall maintain the device in good working order.
- B. The permittee shall allow the watermaster access to the device; provided however, where any device is located within a private structure, the watermaster shall request access upon reasonable notice.

- C. The permittee shall keep a complete record of the volume of water diverted each month, and shall submit a report which includes water-use measurements to the Department annually, or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water-use information, including the place and nature of use of water under the permit.
- D. The Director may provide an opportunity for the permittee to submit alternative measuring and reporting procedures for review and approval.

Static Water Level Conditions:

The Department requires the water user to obtain, from a qualified individual (see below), and report annual static water levels for each well on the permit. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.

The permittee shall report an initial March static water-level measurement once well construction is complete and annual measurements thereafter. Annual measurements are required whether or not the well is used. The first annual measurement will establish a reference level against which future measurements will be compared. However, the Director may establish the reference level based on an analysis of other water-level data. The Director may require the user to obtain and report additional water levels each year if more data are needed to evaluate the aquifer system.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board. Measurements shall be submitted on forms provided by, or specified by, the Department. Measurements shall be made with equipment that is accurate to at least the standards specified in OAR 690-217-0045. The Department requires the individual performing the measurement to:

- A. Associate each measurement with an owner's well name or number and a Department well log ID; and
- B. Report water levels to at least the nearest tenth of a foot as depth-to-water below ground surface; and
- C. Specify the method of measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

The Department may require the discontinuance of groundwater use, or reduce the rate or volume of withdrawal, from the well(s) if any of the following events occur:

- A. Annual water-level measurements reveal an average water-level decline of three or more feet per year for five consecutive years; or
- B. Annual water-level measurements reveal a water-level decline of 15 or more feet in fewer than five consecutive years; or
- C. Annual water-level measurements reveal a water-level decline of 25 or more feet; or
- D. Hydraulic interference leads to a decline of 25 or more feet in any neighboring well with senior priority.

The period of restricted use shall continue until the water level rises above the decline level which triggered the action or the Department determines, based on the permittee's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or causing substantial interference with senior water rights. The water user shall not allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

Well Identification Tag Condition:

Prior to using water from any well listed on this permit, the permittee shall ensure that the well has been assigned an OWRD Well Identification Number (Well ID tag), which shall be permanently attached to the well. The Well ID shall be used as a reference in any correspondence regarding the well, including any reports of water use, water level, or pump test data.

STANDARD CONDITIONS

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

If the number, location, source, or construction of any well deviates from that proposed in the permit application or required by permit conditions, this permit may be subject to cancellation, unless the Department authorizes the change in writing.

If substantial interference with surface water or a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to

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mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well(s) shall be constructed and maintained in accordance with the General Standards for the Construction and Maintenance of Water Supply Wells in Oregon. The works shall be equipped with a usable access port adequate to determine water-level elevation in the well at all times.

If the riparian area is disturbed in the process of developing a point of appropriation, the permittee shall be responsible for restoration and enhancement of such riparian area in accordance with ODFW's Fish and Wildlife Habitat Mitigation Policy OAR 635-415. For purposes of mitigation, the ODFW Fish and Wildlife Habitat Mitigation Goals and Standards, OAR 635-415, shall be followed.

The use may be restricted if the quality of downstream waters decreases to the point that those waters no longer meet state or federal water quality standards due to reduced flows.

Where two or more water users agree among themselves as to the manner of rotation in the use of water and such agreement is placed in writing and filed by such water users with the watermaster, and such rotation system does not infringe upon such prior rights of any water user not a party to such rotation plan, the watermaster shall distribute the water according to such agreement.

Prior to receiving a certificate of water right, the permit holder shall submit to the Water Resources Department the results of a pump test meeting the Department's standards for each point of appropriation (well), unless an exemption has been obtained in writing under OAR 690-217. The Director may require water-level or pump-test data every ten years thereafter.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

Construction of the well shall be made within twenty years of the date of permit issuance. The deadline to begin construction may not be extended. This permit is subject to cancellation proceedings if the begin construction deadline is missed.

Complete application of the water shall be made within twenty years of the date of permit issuance. If beneficial use of permitted water has not been made before this date, the permittee may submit an application for extension of time, which may be approved based upon the merit of the application.

Within one year after making beneficial use of water, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner.

Issued *APRIL 6 2017*

E. Timothy Wallin

E. Timothy Wallin, Water Rights Program Manager
for Thomas M. Byler, Director



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Attachment B

Application Maps

Application for a Permit Amendment
City of Independence

From: [JARAMILLO Lisa J * WRD](#)
To: [Kim Grigsby](#)
Cc: [Molly Monroe](#)
Subject: RE: Map scale waiver - revised
Date: Wednesday, April 9, 2025 1:10:54 PM
Attachments: [Permit Amendment G17750 POA.pdf](#)
[Permit Amendment G17750 POU.pdf](#)

Hi Kim,

Thank you. Your request for map scale waiver is hereby approved. Please include a copy of this correspondence along with the application and map when submitted.

Best regards,
Lisa

[Lisa J. Jaramillo](#)

Transfer and Conservation Section Manager

725 Summer Street NE, Suite A, Salem, OR 97301 | Phone: 503-871-1889 (work cell)



Integrity | Service | Technical Excellence | Teamwork | Forward-Looking

NOTE: OWRD offices are now open to the public. Given that many staff will continue teleworking remotely or have job duties that take them into the field on a regular basis, however, availability of staff in the office is not guaranteed 8 a.m. - 5 p.m. every day (M-F). OWRD's Salem office is closed for customer service drop-ins from Noon – 1pm. **Customers and visitors are encouraged to schedule an appointment in advance if they wish to meet in person with specific staff members.** Alternative methods for meeting, such as by phone or virtually via Teams, are also available.

From: Kim Grigsby <kgrigsby@gsiws.com>
Sent: Wednesday, April 9, 2025 12:39 PM
To: JARAMILLO Lisa J * WRD <Lisa.J.JARAMILLO@water.oregon.gov>
Cc: Molly Monroe <mmonroe@gsiws.com>
Subject: Map scale waiver - revised

Hi Lisa,

We need to request a map scale waiver for a permit amendment application. We are requesting a waiver for the attached place of use map. Our (revised) POA map will be to the standard scale (also attached).

Thank you,
Kim

Kimberly Grigsby

Principal Water Resources Consultant

mobile: 503.351.1912

1600 SW Western Boulevard, Suite 240, Corvallis, OR 97333

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GSI Water Solutions, Inc. | www.gsiws.com
pronouns: she, her

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Attachment C

Land Use Information Form
Application for a Permit Amendment
City of Independence

Nov 2022

SP. 10. YAA

2021

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

In order for your application to be processed by the Oregon Water Resources Department (OWRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be diverted, conveyed, used, and developed. The planning official may choose to complete the form while you wait or return the "Receipt Acknowledging Request for Land Use Information" to you. Applications received by OWRD without the Land Use Information Form, or the signed receipt, will be returned to you. **IMPORTANT:** Please note that while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for OWRD's acceptance of all other applications. Please be aware that your application cannot be approved without land use approval.

This form is **NOT** required if:

- 1) Water is to be diverted, conveyed, and used on federal lands only; **OR**
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and all 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 a new water right or modifying an existing water right. The Oregon Water Resources Department (OWRD) requires applicants to obtain land use information to ensure the water right does not result in land uses that are incompatible with your comprehensive plan. Please complete the form and return it to the applicant for inclusion in their application. **NOTE:** For new water right applications only, if you are unable to complete this form while the applicant waits, you may complete the "Receipt Acknowledging Request for Land Use Information" and return it to the applicant.

You will receive notice via OWRD's weekly Public Notice once the applicant formally submits their request to OWRD. The notice will give more information about OWRD's water right process and provide additional comment opportunities. If you previously only completed the receipt for an application for a new permit to use or store water, you will have 30 days from the Public Notice date to complete the Land Use Information Form and return it to OWRD. Your attention to this request for information is greatly appreciated. If you have questions concerning this form, please contact OWRD's Customer Service Group at 503-986-0900 or WRD_DL_customerservice@water.oregon.gov.

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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

NAME City of Independence			PHONE 503-838-1212	
MAILING ADDRESS P.O. Box 7				
CITY Independence	STATE OR	ZIP 97351	EMAIL	

A. Land and Location

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.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
See Attached Maps						<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Municipal
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

City of Independence

NOTE: A separate Land Use Information Form must be completed and submitted for each county and city, as applicable.

B. Description of Proposed Use

Type of application to be filed with the Oregon Water Resources Department:

- ☐ Permit to Use or Store Water ☐ Water Right Transfer ☒ Permit Amendment or Ground Water Registration Modification
☐ Limited Water Use License ☐ Exchange of Water ☐ Allocation of Conserved Water

Source of water: ☐ Reservoir/Pond ☒ Ground Water ☐ Surface Water (name) _____

Estimated quantity of water needed: **0.56** ☒ cubic feet per second ☐ gallons per minute ☐ acre-feet

Intended use of water: ☐ Irrigation ☐ Commercial ☐ Industrial ☐ Domestic for _____ household(s)
 ☒ Municipal ☐ Quasi-Municipal ☐ Instream ☐ Other _____

Briefly describe:

<u>The City is requesting a permit amendment to add four existing wells to the City's permit and to change the Authorized place of use from the park "to within the City's service area." See maps for location of the City's wells and service area.</u>

Note to applicant: For new water right applications only, if the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt on the bottom of page 4 and include it with the application filed with the Oregon Water Resources Department.

See Page 4 →

For Local Government Use Only

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 information

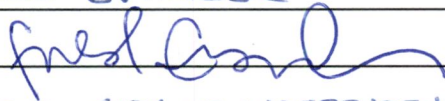
- ☒ Land uses to be served by the proposed water use(s), including proposed construction, are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): _____
- ☐ Land uses to be served by the proposed water use(s), including proposed construction, involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being Pursued."**

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:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

Local governments are invited to express special land use concerns or make recommendations to the Oregon Water Resources Department regarding this proposed use of water in the box below or on a separate sheet.

--

Name: FRED EVANDER Title: CITY PLANNER

Signature:  Date: 4.16.2025

Governmental Entity: CITY OF INDEPENDENCE Phone: 503-838-1212

Receipt Acknowledging Request for Land Use Information

Note to Local Government Representative:

Please complete this form and return it to the applicant. **For new water right applications only**, if you are unable to complete this form while the applicant waits, you may complete this receipt and return it to the applicant. If you sign the receipt, you will have 30 days from the date of OWRD's Public Notice of the application to submit the completed Land Use Information Form to Oregon Water Resources Department. Please note while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for all other applications.

Applicant Name: _____

Staff Name: _____ Title: _____

Staff Signature: _____ Date: _____

Governmental Entity: _____ Phone: _____

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LOCATION DESCRIPTION

AUTHORIZED POINT OF APPROPRIATION

Park Well

Located 1,265 feet North and 2,403 feet West from the SE corner of Section 21, Township 8 South, Range 4 West (W.M.)

PROPOSED POINTS OF APPROPRIATION

Polk Well 1

Located 2,455 feet North and 1,815 feet West from the SE corner of Section 21, Township 8 South, Range 4 West (W.M.)

Polk Well 2

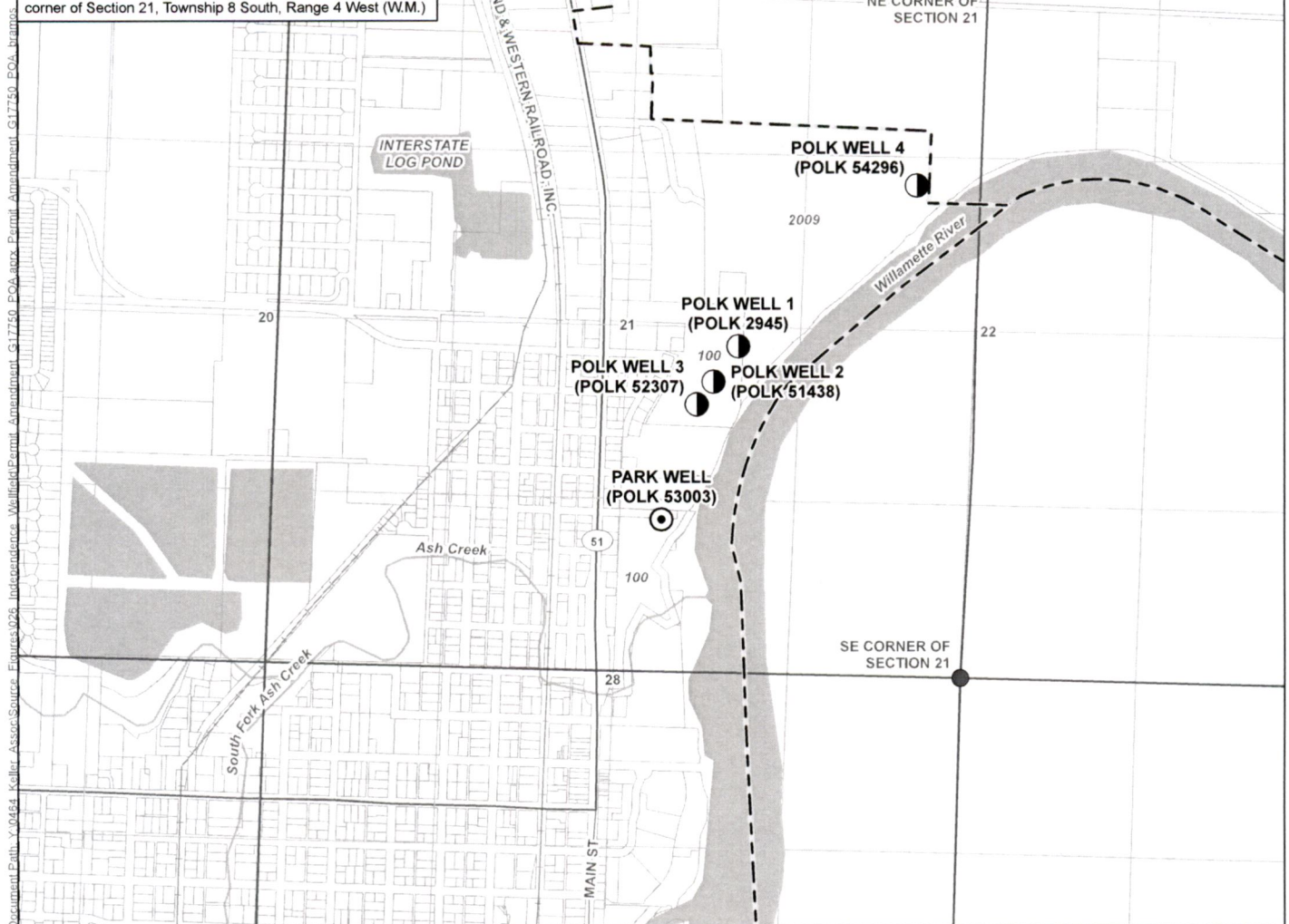
Located 2,190 feet North and 2,000 feet West from the SE corner of Section 21, Township 8 South, Range 4 West (W.M.)

Polk Well 3

Located 2,000 feet North and 2,080 feet West from the SE corner of Section 21, Township 8 South, Range 4 West (W.M.)

Polk Well 4

Located 1,500 feet South and 480 feet West from the NE corner of Section 21, Township 8 South, Range 4 West (W.M.)



LEGEND

- ⊙ Authorized Point of Appropriation (POA)
- Proposed Point of Appropriation

All Other Features

- ▬ County Boundary
- ▬ City Boundary
- Tax Lot
- Major Road
- Railroad
- Watercourse
- Waterbody

Permit Amendment for Permit G-17750

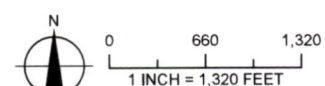
Authorized and Proposed Points of Appropriation

Township 8 South, Range 4 West (W.M.)

DISCLAIMER

This map was prepared for the purpose of identifying the location of a water right only and it is not intended to provide legal dimensions or location of property ownership lines.

Date: April 9, 2025
Data Sources: BLM, ESRI, OWRD, USGS



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LEGEND

- Authorized Place of Use (POU)
- Proposed Place of Use

All Other Features

- City Boundary
- County Boundary
- Major Road
- Railroad
- Watercourse
- Waterbody

Permit Amendment for Permit G-17750

Authorized and Proposed Place of Use

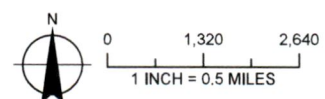
Township 8 South, Range 4 West (W.M.)

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DISCLAIMER

This map was prepared for the purpose of identifying the location of a water right only and it is not intended to provide legal dimensions or location of property ownership lines.

Date: March 11, 2025
Data Sources: BLM, ESRI, OWRD, USGS



Park Well- POLK 53003
Polk St Well 1 - POLK 2945
Polk St Well 2- POLK 51438
Polk St Well 3- POLK 52307
Polk St Well 4- POLK 54296

Attachment D

Well Logs

Application for a Permit Amendment
City of Independence

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STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

POLK 53003

(START CARD) #

TAG#L93618

196831

(1) OWNER: E/O INDEPENDENCE Well Number _____
Name _____
Address 240 MONMOUTH ST.
City INDEPENDENCE State OR Zip 97351

(2) TYPE OF WORK:
☒ New Well ☐ Deepen ☐ Recondition ☐ Abandon

(3) DRILL METHOD:
☐ Rotary Air ☐ Rotary Mud ☒ Cable
☐ Other _____

(4) PROPOSED USE:
☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☒ Other Municipal

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 45 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
12"	0' 45'	CEMENT	22.5' 8 FT.	15 SACKS	
		BENTONITE	8 FT 0'	10 SACKS	

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☒ Other POURED FROM SURFACE TO SURFACE
Backfill placed from 24.5 ft. to 22.5 ft. Material 4+ MINUS W/BENT
Gravel placed from 45 ft. to 24.5 ft. Size of gravel 3/8 ROUND

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
8"	12.5'	25'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	38'	45'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Final location of shoe(s) NO SHOE USED

(7) PERFORATIONS/SCREENS:
☐ Perforations Method _____
☒ Screens Type V-SLOT Material 304 SS

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
25'	38'	120		8"	PS	<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

☒ Pump ☐ Bailer ☐ Air ☐ Flowing
☐ Artesian

Yield gal/min	Drawdown	Drill stem at	Time
250 GPM	14'-10"		30 hrs.

Temperature of Water 54° Depth Artesian Flow Found _____
Was a water analysis done? ☒ Yes By whom WATERLAB
Did any strata contain water not suitable for intended use? ☐ Too little
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County POLK Latitude _____ Longitude _____
Township 8S N or S. Range 4W E or W. WM. _____
Section 21 SW 1/4 SE 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) EAST END OF GRAND ST., 200'± FROM WILLAM. RIVER

(10) STATIC WATER LEVEL:
14 ft. below land surface. Date 06-06-09
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 25'

From	To	Estimated Flow Rate	SWL
25'	38'	250 GPM	14'

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
CLAY, BROWN	0'	1'	
CLAY, BROWN + SANDY	1'	8'	
CLAY, BROWN W/ BITS OF GRAVEL	8'	22'	
GRAVEL, SMALL TO LARGE W/ BROWN + BLACK SAND	22'	28'	14'
GRAVEL, SMALL TO MEDIUM W/ BLACK FINE TO COARSE SAND	28'	38'	14'
GRAVEL, SAND, SAND RATIO TO GRAVEL INCREASING	38'	40'	
GRAY CLAY, SANDY	40'	42'	
GRAY CLAY, DENSER	42'	45'	

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WATER RESOURCES DEPT.
SALEM, OREGON

MAY 01 2025

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Date started 04-16-09 Completed 06-08-09

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Material used and information reported above are true to my best knowledge and belief.

Signed _____ WWC Number _____
Date _____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.

Signed Michael Waltrip WWC Number 63
Date 06-09-09

SEP 24 1957

STATE OF OREGON

Do Not State Well No.

Fill In

State Permit No.

(1) OWNER:

Name Pacific Power & Light Co.
Address Independence, Oregon

(2) LOCATION OF WELL:

County Polk Owner's number, if any— 1
R. F. D. or Street No. Polk St
Bearing and distance from section or subdivision corner
Beginning at the NE corner of Block Number 6
Township of Independence 438' East and
then 162.15' South

(3) TYPE OF WORK (check):

New well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐
andonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☒
Irrigation ☐ Test Well ☐ Other ☐

(5) EQUIPMENT:

Rotary ☐
Cable ☒
Dug Well ☐

CASING INSTALLED:

Threaded ☐ Welded ☒

FROM	ft. to	ft.	Diam.	Gage or Wall
" 0 "	50 "	16 "	3/8 "	
" "	" "	" "	" "	
" "	" "	" "	" "	
" "	" "	" "	" "	
" "	" "	" "	" "	

If gravel packed

Diameter of Bore	from ft.	to ft.
" "	" "	" "
" "	" "	" "
" "	" "	" "
" "	" "	" "
" "	" "	" "

Type and size of shoe or well ring

Size of gravel:

Describe joint Are welded

(7) PERFORATIONS:

Type of perforator used <u>mills knife perforator</u>	
E of perforations	in., length, by
M ft. to ft.	per foot No. of rows
" 20 "	45 " 6 " " " 6 " " "
" "	" " " " " " " "
" "	" " " " " " " "
" "	" " " " " " " "
" "	" " " " " " " "

SCREENS:

Give Manufacturer's Name, Model No. and Size

(8) CONSTRUCTION:

Was a surface sanitary seal provided? ☐ Yes ☐ No To what depth ft.

Were any strata sealed against pollution? ☐ Yes ☒ No

If yes, note depth of strata

FROM	ft. to	ft.
" "	" "	" "

METHOD OF SEALING

(9) WATER LEVELS:

Depth at which water was first found 18 ft.
Standing level before perforating 18' ~~18'~~ ft.
Standing level after perforating 18 ft.

Log Accepted by

[Signed] R. A. White Dated 8-13, 1957
Owner

(10) WELL TESTS:

Was a pump test made? ☒ Yes ☐ No If yes, by whom? Pump, Pipe Power Co.

Yield: 1200 gal./min. with 14 ft. draw down after 25 hrs.

Artesian flow g.p.m.

Shut-in pressure lbs. per square inch.

Bailer test g.p.m. with ft. drawdown

Temperature of water Was a chemical analysis made? ☒ Yes ☐ No

Was electric log made of well? ☐ Yes ☒ No

(11) WELL LOG:

Diameter of well, 16 inches.

Total depth 50 ft. Depth of completed well 50 ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

ft. to	ft.	
0 "	5 "	alluvial soil
5 "	10 "	brown clay
10 "	15 "	sand
15 "	20 "	loose gravel
20 "	25 "	
25 "	30 "	
30 "	35 "	gravel & sand
35 "	40 "	
40 "	45 "	
45 "	50 "	
" "	" "	
" "	" "	
" "	" "	
" "	" "	
" "	" "	
" "	" "	

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Ground elevation at well site 130.69' feet above mean sea level. ☒

Work started July 2 1957 Completed July 14 1957

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Art Clinton
(Person, firm, or corporation) (Typed or printed)

Address Rt. 1 Box 2 Independence

Driller's well number

[Signed] Art Clinton
(Well Driller)

License No. 14 Dated Aug 8, 1957

14650 -

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.

(1) **LAND OWNER** Well Number Polk #2
 Name City of Independence
 Address 240 Monmouth St.
 City Independence State ore Zip 97351

(2) **TYPE OF WORK**
☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) **DRILL METHOD:**
☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger
☐ Other _____

(4) **PROPOSED USE:**
☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☒ Other Municipal

(5) **BORE HOLE CONSTRUCTION:**
 Special Construction approval ☐ Yes ☒ No Depth of Completed Well 57 ft.
 Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds	
20"	0'	19'	Bentonite	0	3	8	sacks
20"	3'	19'	Cement	3	19	15	"
12"	19'	57'					

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☒ Other Bentonite placed dry
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) **CASING/LINER:**

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	+3'	26'-3"	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used ☐ Inside ☐ Outside ☒ None
 Final location of shoe(s) _____

(7) **PERFORATIONS/SCREENS:**
☐ Perforations Method _____
☒ Screens Type V-slot Material 304s. steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
24'	26'-8"	K-packer		10"	PS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
26'-8"	46'-8"	150		12"	Tele.	<input type="checkbox"/>	<input type="checkbox"/>
46'-8"	57'					<input type="checkbox"/>	<input type="checkbox"/>

(8) **WELL TESTS:** Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Time
300	7.6'	NA	1 hr.
400	9'	NA	7 hours

Temperature of water 54° Depth Artesian Flow Found _____
 Was a water analysis done? ☐ Yes By whom _____
 Did any strata contain water not suitable for intended use? ☐ Too little
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____
 Depth of strata: _____

Polk
51438

WELL I.D. # L 48798
 START CARD # 141217

(9) **LOCATION OF WELL by legal description:**
 County Polk Latitude _____ Longitude _____
 Township 8S N or S Range 4W E or W. WM.
 Section 21 NW 1/4 SE 1/4
 Tax Lot 8421 DB 100 Block _____ Subdivision _____

Street Address of Well (or nearest address) South of Polk #1
Street well 350' approx.

(10) **STATIC WATER LEVEL:**
24 ft. below land surface. Date 8-15-01
 Artesian pressure _____ lb. per square inch Date _____

(11) **WATER BEARING ZONES:**
 Depth at which water was first found 38'

From	To	Estimated Flow Rate	SWL
26'	46'	300+	24'

(12) **WELL LOG:**
 Ground Elevation _____

Material	From	To	SWL
Topsoil	0'	2'	
Brown clay	2'	10'	
Silty Brown clay	10'	22'	
Gravel, small-med.			
w/ brown fine coarse			
sand	22'	47'	
Blue clay	47'	57'	
Received			
MAY 01 2025			
RECEIVED			
OCT 09 2001			
WATER RESOURCES DEPT. SALEM, OREGON			
NOV 9 2001			
WATER RESOURCES DEPT. SALEM, OREGON			

Date started August 9, 2001 Completed August 16, 2001

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

WWC Number _____
 Signed _____ Date _____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 8833
 Signed Michael Walden Date 9-28-01

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.

WELL I.D. # L 68852
START CARD # 161380

(1) LAND OWNER Well Number WELL #3
Name CITY OF INDEPENDENCE
Address 240 MONMOUTH ST.
City INDEPENDENCE State OR. Zip 97351

(2) TYPE OF WORK
☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:
☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger
☐ Other _____

(4) PROPOSED USE:
☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☒ Other Municipal

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☐ No Depth of Completed Well 52 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
16"	0'	52'	CEMENT	0'	20'	21 SACKS	

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☐ Other _____

Backfill placed from 42 ft. to 52 ft. Material 3/8 PEA GRV.
Gravel placed from 20 ft. to 22 ft. Size of gravel PEA GRV.

(6) CASING/LINER:

Casing:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	12"	42.67'	52'	.250"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	12"	42'	52'	.250"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Drive Shoe used ☐ Inside ☐ Outside ☒ None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☒ Screens Type V-slot Material 304 SS

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
22'	32'	100		12"	PS	<input type="checkbox"/>	<input type="checkbox"/>
32'	42'	60		12"	PS	<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Time
900	10.5'		5 hrs
810	9.83'		3

Temperature of water 56° Depth Artesian Flow Found _____

Was a water analysis done? ☒ Yes By whom WATERLAB

Did any strata contain water not suitable for intended use? ☐ Yes ☐ No

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata _____

RECEIVED **MAR 14 2006**

OVER THE COUNTER

(9) LOCATION OF WELL by legal description:

County POLK Latitude _____ Longitude _____
Township 8S N or S Range 4W E or W. WM.
Section 21 NW 1/4 SE 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) IN WELL FIELD east of Junction of Polk St & S. RIVER DR. 200' S. of #2 well

(10) STATIC WATER LEVEL:
14'-8" ft. below land surface. Date 02-15-06
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 19'

From	To	Estimated Flow Rate	SWL
22'	42'	800+ GPM	14.67'

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Brown clay	0'	7'	
Brown sandy clay	7'	19'	
Gravel, small med w/ some coarse br.			
sand - w. B.	19'	39'	14.8
Gravel w/ fine sand - brown	39'	41'	14.8
Brown sand w/ small gravel	41'	43'	
small gravel w/ black sand and wood	43'	44'	
Black fine medium coarse sand w/ small gravel + wood	44'	50'	
Blue clay w/ gravel	50'	52'	

Date started Nov. 23, '05 Completed FEB. 20, 2006

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

WWC Number _____

Signed _____ Date OWRD

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 633

Signed Michael Waldrop Date FEB. 28, 06

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

WELL I.D. LABEL# 131610
START CARD # 1043407
ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. 6015
 First Name _____ Last Name _____
 Company City of Independence
 Address 555 S. Main St.
 City Independence State OR Zip 97351

(2) TYPE OF WORK ☒ New Well ☐ Deepening ☐ Conversion
 Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION
 Dia + From To Gauge Stil Plstc Wld Thrd
 Casing: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
 Seal: Material From To Amt sacks/lbs

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other

(4) PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION Special Standard ☐ (Attach copy)
 Depth of Completed Well 63.5 ft.

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	
16	0	64	Cement	7	25	37 S
					Calculated	9.1
			Bentonite	0	7	8 S
					Calculated	5.5

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E

☒ Other Poured dry

Backfill placed from 15 ft. to 27 ft. Material fine sand

Filter pack from 27 ft. to 63.5 ft. Material wash round Size 3/8"

Explosives used: ☐ Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
 Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
 Casing Liner Dia + From To Gauge Stil Plstc Wld Thrd
☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐
 12 3 32 250 12 32 250
 12 52 63.5 250
 Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)
 Temp casing ☒ Yes Dia 16 From 0 To 60

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type Wrap rib Material stainless
 Perf/S Casing/Screen
 green Liner Dia From To width length # of slots Tele/ pipe size
 Screen 12 32 52 .1
 Screen 12 32 52 .1
 Screen 12 32 52 .1
 Screen 12 32 52 .1

(8) WELL TESTS: Minimum testing time is 1 hour

☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
 600 11 54 4

Temperature 62 °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS amount 236

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County POLK Twp 8 S N/S Range 4 W E/W WM
 Sec 21 NE 1/4 of the NE 1/4 Tax Lot 2009
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
☒ Street address of well ☐ Nearest address

End of Deanne Dr. - Lebanon, OR 97302

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	07-11-2019			19.5
Flowing Artesian?	<input type="checkbox"/>			
Dry Hole?	<input type="checkbox"/>			

WATER BEARING ZONES

Depth water was first found 25

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
07-11-2019	25	52	800			19.5

(11) WELL LOG

Ground Elevation _____

Material	From	To
Top Soil	0	2
Brown clay	2	5
Brown silty clay	5	20
Brown dirty gravel	20	52
Brown clay	52	56
Blue clay	56	64

RECEIVED
 AUG 27 2019
 OWRD
 JONES DRILLING CO., INC.
 29400 SANTIAM HWY.
 LEBANON, OR 97355
 541-367-2560 541-451-2686
 1-800-915-8388

Received
 MAY 01 2025
 OWRD

Date Started 06-24-2019 Completed 07-11-2019

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 1411 Date 07-26-2019

Signed Kurt Martin

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1684 Date 07-26-2019

Signed
 Contact Info (optional)