

RA

Permit Amendment

T-14331

Name Loen Nursery Co.
c/o Kurtis T. Loen
 Address 19205 SW Cipole Rd.
Sherwood, OR 97140
thatcher@loennursery.com

Change in POA
 Date Filed 9-26-2023
 Initial notice date 10-3-2023
 DPD issued date _____
 PD issued date _____
 PD notice date _____
 Date of FO 6/11/24 Vol 131 Page 284-286

C-Date _____
 COBU due date _____
 COBU Received date _____
 Certificate issued _____

Assignments: _____

Irrigation District _____

Agent Malia Kupillas - phg@betonline.com

CWRE _____

CC's list Washington County

☐ - Oversized map - Location _____

DESCRIPTION OF WATER RIGHT(s)

Name of Stream A Well
 Trib. of Tualatin River Basin

Use Nursery Use County Washington
 Quantity of water (CFS) _____ No. of Acres _____
 Name of ditch _____

App#	Per #	Cert #	PR Date
<u>Gr-13890</u>	<u>Gr-12326</u>	<u>—</u>	<u>11/23/1994</u>
App#	Per #	Cert #	PR Date
App#	Per #	Cert #	PR Date
App#	Per #	Cert #	PR Date

FEES PAID

Date	Amount	Receipt #
<u>9-26-23</u>	<u>1,840.00</u>	<u>141672</u>
<u>9-26-23</u>	<u>\$125.00</u>	<u>141673</u>
<u>10-6-23</u>	<u>\$1,648.32</u>	<u>141730</u>

FEES REFUNDED

Date	Amount	Receipt #

**BEFORE THE WATER RESOURCES DEPARTMENT
OF THE
STATE OF OREGON**

In the Matter of Permit Amendment)	FINAL ORDER APPROVING A CHANGE IN
T-14331, Washington County)	POINT OF APPROPRIATION

Authority

Oregon Revised Statute (ORS) 537.211 establishes the process in which a water right permit holder may submit a request to change the point of appropriation and/or place of use authorized under an existing water right permit.

Applicant

LOEN NURSERY CO.
19205 SW CIPOLE RD
SHERWOOD, OR 97140

Findings of Fact

1. On September 26, 2023, LOEN NURSERY CO. filed an application to change a point of appropriation under Permit G-12326. The Department assigned the application number T-14331.
2. On April 26, 2006, the Department approved Permit Amendment Application T-8864, for a change in points of appropriation, recorded at Special Order Volume 68, Pages 320-323.
3. On August 18, 2023, the Department approved an extension of time for complete application of water to October 1, 2026.
4. Notice of the application for the permit amendment was published in the Department's weekly notice on October 3, 2023, pursuant to ORS 540.520(5).

This is a final order in other than contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review must be filed within the 60 day time period specified by ORS 183.484(2). Pursuant to ORS 536.075 and OAR 137-004-0080 you may either petition for judicial review or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

5. Permit Amendment Application T-14331 proposes to move the authorized point of appropriation (WELL 2) with approximate distances from the existing points of appropriation to:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances	Approximate distance from Authorized Wells
2 S	1 W	WM	21	NE SW	WELL 2 (WASH 50714) - 620 FEET SOUTH AND 2450 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21	WELL 2 - 0 FEET

Permit Amendment Review Criteria

6. The change would not result in injury to other water rights.
7. The change does not enlarge the permit.
8. The change does not alter any other terms of the permit.

Conclusions of Law

The change in point of appropriation proposed by Permit Amendment Application T-14331 is consistent with the requirements of ORS 537.211.

Now, therefore, it is ORDERED:

1. The change in point of appropriation proposed by Permit Amendment Application T-14331 is approved.
2. Approval of this permit amendment application does not constitute nor grant legal access onto or through another person's property for purposes of accessing the new point of appropriation.
3. Permit G-18899, in the name of LOEN NURSERY CO., is issued to replace Permit G-12326, and incorporates the amendment approved by this order and the extension of time. Permit G-12326, in the name of LOEN NURSERY COMPANY, is no longer of any force or effect.
4. The quantity of water diverted at the new point of appropriation (WELL 2), shall not exceed the quantity of water lawfully available at the original point of appropriation (WELL 2).
5. Water use measurement conditions:
 - a. Before water use may begin under this order, the water user shall install a totalizing flow meter, or, with prior approval of the Director, another suitable measuring device, at each new point of appropriation with the exception that water rights issued to the Bureau of Reclamation or an irrigation district (or similar entity) are not subject to this condition.

- b. The water user shall maintain the meters or measuring devices in good working order.
 - c. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.
6. Water shall be acquired from the same aquifer as the original point of appropriation.
7. All other terms and conditions of Permit G-18899 remain the same.

Dated in Salem, Oregon on JUN 10 2024



Lisa J. Jaramillo, Transfer and Conservation Section Manager, for
DOUGLAS E. WOODCOCK, ACTING DIRECTOR
Oregon Water Resources Department

Mailing Date: JUN 11 2024

STATE OF OREGON

COUNTY OF WASHINGTON

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

LOEN NURSERY CO.
19205 SW CIPOLE RD
SHERWOOD, OR 97140

This superseding permit is issued to describe an amendment for change in point of appropriation proposed under Permit Amendment Application T-14331 and approved by Special Order Vol. 131, Page 284, entered JUN 10 2024, and to describe a previous Permit Amendment T-8864 approved by Special Order Volume 88, Page 320, entered April 26, 2006, and an extension of time for complete application of water approved August 18, 2023. This permit supersedes Permit G-12326.

The specific limits for the use are listed below along with conditions of use.

APPLICATION FILE NUMBER: G-13890

SOURCE OF WATER: EIGHT WELLS IN TUALATIN RIVER BASIN

PURPOSE OR ALLOWED USE: AGRICULTURAL USE FOR NURSERY STOCK

RATE OF ALLOWED USE: 3.56 CUBIC FEET PER SECOND

THE PERIOD OF ALLOWED USE: YEAR ROUND

DATE OF PRIORITY: NOVEMBER 23, 1994

POINT OF DIVERSION LOCATION:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
2 S	1 W	WM	21	NE SW	WELL 1 - 545 FEET SOUTH AND 2520 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21
2 S	1 W	WM	21	NE SW	WELL 2 (WASH 53928) - 620 FEET SOUTH AND 2450 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21
2 S	1 W	WM	21	NE SW	WELL 3 - 735 FEET SOUTH AND 2600 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21
2 S	1 W	WM	21	NE SW	WELL 4 - 70 FEET SOUTH AND 2320 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21
2 S	1 W	WM	21	NE SW	WELL 5 - 170 FEET SOUTH AND 2310 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21
2 S	1 W	WM	21	NE SW	WELL 6 (WASH 50715) - 460 FEET SOUTH AND 2425 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21
2 S	1 W	WM	21	NE SW	WELL C/ WELL 7 - 730 FEET SOUTH AND 2380 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21
2 S	1 W	WM	21	NE SW	WELL H/ WELL 8 - 440 FEET SOUTH AND 2260 FEET EAST FROM THE W 1/4 CORNER OF SECTION 21

The amount of water used for NURSERY OPERATIONS is limited to a diversion of 0.15 cubic foot per second per acre. For the irrigation of **containerized nursery plants**, the amount of water diverted is limited to ONE-FORTIETH of one cubic foot per second (or its equivalent) and 5.0 acre feet per acre per year. For the irrigation of **in ground nursery plants** the amount of water diverted is limited to ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 2.5 acre feet per acre per year. The use of water for NURSERY OPERATIONS may be made at anytime of the year that the use is beneficial. For the irrigation of **any other crop**, the amount of water diverted is limited to ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 2.5 acre feet per acre during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

AGRICULTURAL USE FOR NURSERY STOCK					
Twp	Rng	Mer	Sec	Q-Q	Acres
2 S	1 W	WM	21	NE SW	24.0
2 S	1 W	WM	21	NW SW	2.5
Total					26.5

Permit Amendment T-14331 Conditions:

The quantity of water diverted at the new point of appropriation (WELL 2) shall not exceed the quantity of water lawfully available at the original point of appropriation (WELL 2).

Water use measurement conditions:

- a. Before water use may begin under this order, the water user shall install a totalizing flow meter, or, with prior approval of the Director, another suitable measuring device, at each new point of appropriation with the exception that water rights issued to the Bureau of Reclamation or an irrigation district (or similar entity) are not subject to this condition.
- b. The water user shall maintain the meters or measuring devices in good working order.
- c. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

Water shall be acquired from the same aquifer as the original point of appropriation.

Permit Amendment T-8864 Conditions:

The combined quantity of water diverted at the new points of appropriation (wells) shall not exceed the maximum rate and duty allowed under Permit G-12326.

Prior to water use from the proposed points of appropriation, the permittee shall install meters or other suitable measuring devices as approved by the Director. The permittee shall maintain the meters or measuring devices in good working order and shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded 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.

The permittee shall allow the watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the watermaster shall request access upon reasonable notice.

Water shall be acquired from the same aquifer as the original points of appropriation.

Extension of Time Conditions:

Permit Amendment Condition

The Permit Holder shall submit an Application for Permit Amendment by no later than October 1, 2023, requesting the change in point of appropriation from Well 2 (WASH 53928) to WASH 50714. Failure to submit the required Application for Permit Amendment by October 1, 2023, shall result in the loss of the use of water from Well 2 and the inability to perfect the use of water developed from WASH 50714. No additional changes may be authorized by this Permit Amendment.

Last Extension Condition

This will be the last extension of time granted for Permit G-12326. Any future extensions of time request will be denied, unless the Department determines the need for an extension of time is due to a delay in the processing of the timely submitted Application for Permit Amendment required above, or a delay in confirmation from the Department that the repairs to the wells, completed prior to October 1, 2026, are sufficient to meet the requirement of the condition. ORS 539.010(5); OAR 690-315-0040.

Development Limitation

Use of water under this permit is limited to the water appropriated from WASH 50714, and WASH 50715, **AFTER** repairs to the wells has been determined sufficient enough to meet the requirement in the permit, being no more than 0.17 cubic feet per second, being 0.08 cfs from WASH 50714, and 0.09 cfs from WASH 50715. Additionally, no more than 18.5 acres of agricultural use for nursery stock and other associated uses authorized by the permit, may be developed.

No Water Use/Well Repair Condition

Use of water under this permit shall be suspended, and no water may be appropriated from any well listed on this permit until the well is altered to meet the condition contained in the permit, **AND** the Department has determined, in writing, the alteration(s) is sufficient to meet the requirements in the permit.

Original Permit Conditions:

Measurement, recording and reporting conditions:

- A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order, shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded 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.

- B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice. If substantial interference with 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 mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

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

Prior to use of groundwater from wells listed on this permit, applicant must provide well reports that detail information which is sufficient to establish that a confined aquifer is developed. Groundwater production from any well listed on this permit may not be from the targeted basalt aquifer of the Sherwood-Dammasch-Wilsonville Groundwater Limited Area but more specifically only from the confined alluvial groundwater reservoir between approximately 100 feet and 300 feet below land surface.

STANDARD CONDITIONS

The wells shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

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.

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.

The use of water shall be limited when it interferes with any prior surface or ground water rights. The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

The original permit was issued April 15, 1996. Actual construction work was to begin within one year from issuance of the original permit. By Extension of Time Final order dated August 18, 2023, the deadline for complete application of water to use was extended to October 1, 2026.

Signed JUN 10 2024



Lisa J. Jaramillo, Transfer and Conservation Section Manager, for
DOUGLAS E. WOODCOCK, ACTING DIRECTOR
Oregon Water Resources Department



Oregon

Tina Kotek, Governor

Water Resources Department

North Mall Office Building

725 Summer St NE, Suite A

Salem, OR 97301

Phone 503 986-0900

Fax 503 986-0904

June 10, 2024

Loen Nursery Co.
19205 SW Cipole Rd
Sherwood, OR 97140-9712

REFERENCE: Permit Amendment Application T-14331

Enclosed is a copy of the order approving your Permit Amendment application.

Also enclosed is a superseding permit that incorporates the amendments approved by the final order contained herein. Please read this document and abide by the requirements.

If you have any questions related to the approval of this permit amendment, you may contact your caseworker, Arla Davis, by telephone at (503) 979-3129 or by e-mail at Arla.I.davis@water.oregon.gov.

Sincerely,

Elyse D. Richman
Water Rights Services Support
Transfers and Conservation Section

cc: Jacob W. Constans, Watermaster Dist. # 18 (via email)
Malia R. Kupillas, Agent
Washington County, Local Government

Enclosure

PERMIT AMENDMENT COVER SHEET

Arta
[Signature]

Transfer: T-14331

Permit Amendment Specialist:

Transfer Type: **Permit Amendment Transfer**

Reimbursement Authority? ☒

Applicant: KURTIS T. LOEN 19205 SW CIPOLE RD SHERWOOD, OR 97140	Agent:	CWRE:
Irrigation District:	Affected Local Gov'ts: Washington County	Affected Tribal Gov't:
BOR Notified (date):		

Permit(s) Affected

File Marked	App. File # or Decree Name	Permit Number	Superseding Permit Number
<input type="checkbox"/>	G13890	G12326	6-10009
<input type="checkbox"/>			
<input type="checkbox"/>			

Key Dates & Initial Actions (Support Staff)

Rec'd: September 26, 2023	Proposed Action(s): POINT OF APPROPRIATION	
Fees Pd: 1840.00	Acknowledgement Letter Sent <input checked="" type="checkbox"/>	Basin: 2 Willamette
Initial Public Notice: 10/3/2023	County sent cc: of Ack Letter <input checked="" type="checkbox"/>	County: WASHINGTON
WM District: 18 Jacob W. Constans	WM Review request sent:	WM Review date received:
ODFW District:	ODFW Review sent:	ODFW Review date received:
Groundwater	GW Review sent:	GW Review date received:

Caseworker Actions: Newspaper Notice and other:

Newspaper notice needed: <input type="checkbox"/>	Name of Newspaper:		
Newspaper notice sent to coordinator:	Newspaper notice quote requested (NRS1):		
Request for news \$ sent:	News \$ received:		
Affidavit of publication received:	Last day of publication:		
Extension of Time? <input type="checkbox"/>	Assignment? <input type="checkbox"/>	Previous Permit Amendments? <input type="checkbox"/>	WMCP? <input type="checkbox"/>

Peer Review:

Document	Drafted	Peer Review	Coordinator	Changes Made	Signature Bin	Signature Date
FO	Date: <u>4/24</u> Initials: <u>AD</u>	Date: <u>4/24</u> Initials: <u>DJL</u>	Date: <u>4/30</u> Initials: <u>PKS</u>	Date: <u>5/1</u> Initials: <u>AD</u> Data Review Date: <u>5/2</u>	Date: <u>5/28</u> WM Sheet <input checked="" type="checkbox"/> ODFW Sheet: <input type="checkbox"/> No. of docs for sig: <u>2</u>	Date: _____

Special Issues: _____

Special Order Volume: Vol. _____ Pages _____

Corrected on 6/6/24 and resubmitted to sig box

DAVIS Arla L * WRD

From: ELLIOTT Chloe * WRD
Sent: Thursday, May 2, 2024 11:19 AM
To: DAVIS Arla L * WRD; WRD_DL_is_data_techs
Subject: RE: Review of RA Permit Amendment T-14331

Thank you Arla!

Have a great day! I've updated my note in WRIS.

Best Wishes,



[Chloe Elliott](#)

Data Tech 1
Oregon Water Resources Department
725 Summer St. NE, Suite A
Salem, Oregon 97301



[Integrity](#) | [Service](#) | [Technical Excellence](#) | [Teamwork](#) | [Forward-Looking](#)

From: DAVIS Arla L * WRD <Arla.L.DAVIS@water.oregon.gov>
Sent: Thursday, May 2, 2024 10:21 AM
To: ELLIOTT Chloe * WRD <Chloe.ELLIOTT@water.oregon.gov>; WRD_DL_is_data_techs <WRD_DL_is_data_techs@water.oregon.gov>
Subject: RE: Review of RA Permit Amendment T-14331

Good Morning Chloe,

1 – no we will not remove those acres without a cancellation affidavit submitted. They will be removed at time of Claim.

2 – THANK YOU!!!

3 – The ECM date is correct

4- this is correct – the well is not moving – I know that is confusing but the wrong Well Log (WASH 53928) was assigned to Well 2 thru transfer T-8864. The extension of time had a requirement that they file a permit amendment correcting this error (correct is WASH 50714). It is the only reason for the permit amendment and the map is correct. The Well DID NOT MOVE. Let me know if you have more questions! 😊

[Arla L. Davis](#)

She/Her/Hers

Water Rights Transfer Specialist

Transfer and Conservation Section

725 Summer St. NE, Suite A | Salem, OR 97301 | Phone: 503-979-3129



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Work Schedule: Mon-Th – 6:00 a.m. to 4:30 p.m.

NOTE: The Salem office is 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, availability of staff in the office is not guaranteed 8:00 a.m. – 5:00 p.m. every day. **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: ELLIOTT Chloe * WRD <Chloe.ELLIOTT@water.oregon.gov>

Sent: Wednesday, May 1, 2024 2:19 PM

To: DAVIS Arla L * WRD <Arla.L.DAVIS@water.oregon.gov>; WRD_DL_is_data_techs <WRD_DL_is_data_techs@water.oregon.gov>

Subject: RE: Review of RA Permit Amendment T-14331

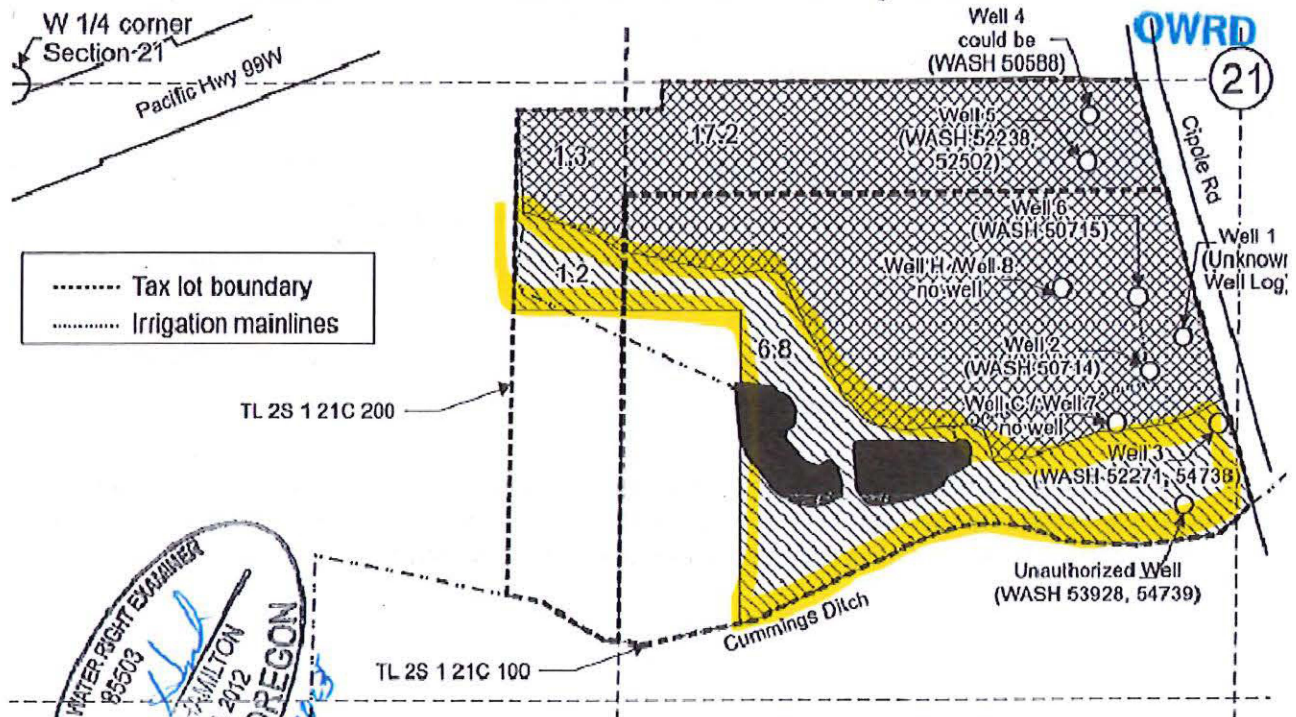
Good Afternoon Arla,

Data has completed work on RA T 14331 in 2 hours 45 minutes, however there appear to be a few errors to look into:

- 1) The map shows that there are 8 POU acres removed under extension FO 8/18/23, should those 8 acres remain or be removed from the document/mapping?

T.2S. R.1W. Section 21, W.M.

SEP 26 2023



Well 1 (Unknown well log) is located 545 feet south and 2,520 feet east from the W 1/4 corner, Section 21.

Well 2 (WASH 50714) is located 620 feet south and 2,450 feet east from the W 1/4 corner, Section 21. (Per T-8864: Well log ID as WASH 53928)

Well 3 (WASH 52271, 54738) is located 735 feet south and 2,600 feet east from the W 1/4 corner, Section 21.

Well 4 (could be well log WASH 50588) is located 70 feet south and 2,320 feet east from the W 1/4 corner, Section 21.

Well 5 (WASH 52238, 52502) is located 170 feet south and 2,310 feet east from the W 1/4 corner, Section 21.

Well 6 (WASH 50715) is located 460 feet south and 2,425 feet east from the W 1/4 corner, Section 21.

Well C / Well 7 (could be one of the abandon wells) is located 730 feet south and 2,380 feet east from the W 1/4 corner, Section 21.

Well H / Well 8 (could be one of the abandon wells) is located 440 feet south and 2,260 feet east from the W 1/4 corner, Section 21.

21
28



Area (8.0 Acres) not irrigated under Application G-13890, Permit G-12326 priority date: 11-23-1994, and removed under Extension Final Order issued 8-18-23.

2) A small typo in the first sentence of the conditions paragraph:

Permit Amendment T-14331 Conditions:

The quantity of water diverted at the new point of appropriation (WELL 2) shall not exceed the quantity of water lawfully available at the original point of appropriation (WELL 2).

Water use measurement conditions:

3) Is the ECM date correct or should it be 10/1/2026?

	POU Use	POU Loc	POU Loc Del	POU Loc Spnd	POU Loc Xfer	POU Loc/Tbl		Da
	POD Loc	POD Use	POD Reserv	POD Instream	POD<=>POU	PodConditions	PODRateChng	
Water Right	Claim	Application	Permit	Certificate	Order	Decree	Transfer	

Search Results:

Prc	Type	Begin Date	Completed	C ^
PR	ECM		10/1/2006	
PR	EFO		8/18/2004	
PR	EPN		10/9/2001	
PR	ERD		2/11/2000	
PR	COM	10/1/1999	10/1/1999	
PR	PFO	10/9/2001	6/15/2004	
PR	CWR	11/9/2005	11/9/2005	
PR	6M1	1/25/2022	1/25/2022	4.

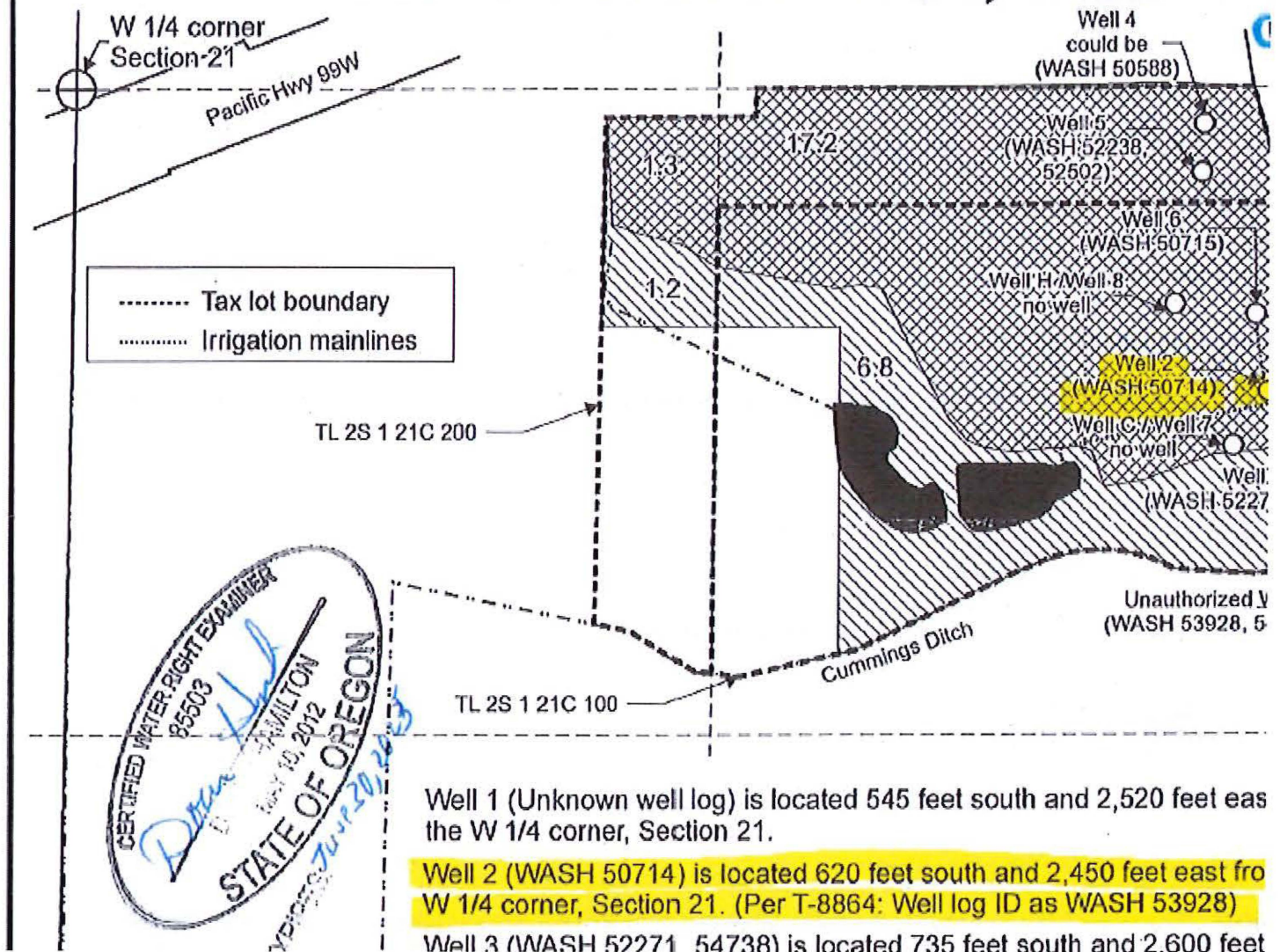
Selected Information:

Process: **Permit Tracking** No Email Log Available

Workflow Item	Dates	Fee Related
Item Type: Extended Completion Date [Extens	Begin: <input type="text"/>	Fe
Reviewer: REECE, ANN L.	Remind: <input type="text"/>	Re
Item Status: <input type="text"/>	Deadline: <input type="text"/>	Re
Process Loc: Salem	Completed: 10/1/2006	Xfi
Fish Friendly: <input type="checkbox"/>		Xfi

4) The map's labeling for Well 2 is off. The permit and map share the same measured distance , but the measured distance places it where the map says well 1 is (which is where we have it mapped on the red X) . This location also corresponds to the GW Wells layer that corresponds to the well ID of WASH 50714.

T.2S. R.1W. Section 21, W.M.



Best Wishes,



Chloe Elliott

Data Tech 1
Oregon Water Resources Department
725 Summer St. NE, Suite A
Salem, Oregon 97301



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From: DAVIS Arla L * WRD <Arla.L.DAVIS@water.oregon.gov>
Sent: Wednesday, May 1, 2024 6:21 AM
To: WRD_DL_is_data_techs <WRD_DL_is_data_techs@water.oregon.gov>
Subject: Review of RA Permit Amendment T-14331
Importance: High

Good Morning Everybody!

I need a data review for the attached RA Permit Amendment Final Order and Superseding Permit ... Thank you very much! 😊

[Arla L. Davis](#)

She/Her/Hers

Water Rights Transfer Specialist

Transfer and Conservation Section

725 Summer St. NE, Suite A | Salem, OR 97301 | Phone: 503-979-3129



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STATE OF OREGON
WATER RESOURCES DEPARTMENT

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # 141672

INVOICE # _____

RECEIVED FROM: Loen Nursery Inc.

BY: 20990

CASH: ☐ CHECK: # ☒ OTHER: (IDENTIFY) ☐

APPLICATION
PERMIT
TRANSFER T-14331

TOTAL REC'D \$1,840.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES \$
OTHER: (IDENTIFY) \$

0243 I/S Lease 0244 Muni Water Mgmt. Plan 0245 Cons. Water

4270 WRD OPERATING ACCT

MISCELLANEOUS

0407 COPY & TAPE FEES \$
0410 RESEARCH FEES \$
0408 MISC REVENUE: (IDENTIFY) \$
TC162 DEPOSIT LIAB. (IDENTIFY) \$
0240 EXTENSION OF TIME \$

WATER RIGHTS:

0201 SURFACE WATER \$
0203 GROUND WATER \$
0205 TRANSFER \$1,840.00

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR \$
LANDOWNER'S PERMIT \$

OTHER (IDENTIFY)

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE \$ CARD#
0210 MONITORING WELLS \$ CARD#

OTHER (IDENTIFY)

0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER

0233 POWER LICENSE FEE (FW/WRD) \$
0231 HYDRO LICENSE FEE (FW/WRD) \$
HYDRO APPLICATION \$

TREASURY OTHER / RDX

FUND _____ TITLE _____
OBJ. CODE _____ VENDOR # _____
DESCRIPTION _____ \$

RECEIPT: 141672

DATED: 9-26-2023 BY: um. mills

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

STATE OF OREGON
WATER RESOURCES DEPARTMENT

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # 141672

INVOICE # _____

RECEIVED FROM: Loen Nursery Inc.

BY: 20990

CASH: ☐ CHECK: # ☒ OTHER: (IDENTIFY) ☐

APPLICATION
PERMIT
TRANSFER T-14331

TOTAL REC'D \$1,840.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES \$
OTHER: (IDENTIFY) \$

0243 I/S Lease 0244 Muni Water Mgmt. Plan 0245 Cons. Water

4270 WRD OPERATING ACCT

MISCELLANEOUS

0407 COPY & TAPE FEES \$
0410 RESEARCH FEES \$
0408 MISC REVENUE: (IDENTIFY) \$
TC162 DEPOSIT LIAB. (IDENTIFY) \$
0240 EXTENSION OF TIME \$

WATER RIGHTS:

0201 SURFACE WATER \$
0203 GROUND WATER \$
0205 TRANSFER \$1,840.00

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR \$
LANDOWNER'S PERMIT \$

OTHER (IDENTIFY)

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE \$ CARD#
0210 MONITORING WELLS \$ CARD#

OTHER (IDENTIFY)

0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER

0233 POWER LICENSE FEE (FW/WRD) \$
0231 HYDRO LICENSE FEE (FW/WRD) \$
HYDRO APPLICATION \$

TREASURY OTHER / RDX

FUND _____ TITLE _____
OBJ. CODE _____ VENDOR # _____
DESCRIPTION _____ \$

RECEIPT: 141672

DATED: 9-26-2023 BY: um. mills

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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:
http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- ☒ 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: Permit G-12326
Please include a separate Part 5 for each permit. (See instructions on page 6)
- ☒ 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.
- ☒ ☐ 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):

- | | |
|--|---|
| <input type="checkbox"/> Application fee not enclosed/insufficient | <input type="checkbox"/> Map not included or incomplete |
| <input type="checkbox"/> Land Use Form not enclosed or incomplete | |
| <input type="checkbox"/> Additional signature(s) required | <input type="checkbox"/> 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°).

Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	SEP 26 2023	1 \$1,360
2	Types of change proposed: <input type="checkbox"/> Place of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>1 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$1090 and enter »	OWRD	2 \$0
3	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> Multiply line 3b by \$610 and enter »		3 \$0
4	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 <u>\$480 (4a)</u> Do you propose to add or change additional wells? <input checked="" type="checkbox"/> No: enter 0 <input type="checkbox"/> Yes: multiply the number of additional wells by \$410 _____ (4b) Add line 4a to line 4b and enter »		4 \$480
5	Do you propose to change the place of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 <input type="checkbox"/> 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 by \$350, then enter on line 5 »		5 \$0
6	Add entries on lines 1 through 5 above » Subtotal:		6 \$1,840
7	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 \$0
8	Subtract line 7 from line 6 » Permit Amendment Fee:		8 \$1,840

***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:

- For irrigation calculate cfs for each permit involved as follows:
 - 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*).
 - 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*)
- 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 Kurtis T. Loen of Loen Nursery Co.		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS 19205 SW Cipole Rd		FAX NO.	
CITY Sherwood	STATE OR	ZIP 97140	E-MAIL thatcher@lonenursery.com
<p style="text-align: right; color: blue; font-weight: bold; font-size: 1.2em;">RECEIVED</p> <p style="text-align: right; color: red; font-weight: bold; font-size: 1.2em;">SEP 26 2023</p> <p style="text-align: right; color: blue; font-weight: bold; font-size: 1.2em;">OWRD</p>			
<p>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.</p>			

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

AGENT/BUSINESS NAME Malia R. Kupillas		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 310-5553 (cell)
ADDRESS 18487 S. Valley Vista Road		FAX NO. (503) 632-5983	
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phg@bctonline.com
<p>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.</p>			

Explain in your own words what you propose to accomplish with this permit amendment; and why:
When the previous permit amendment T-8864 was submitted, well log (WASH 53928) was miss-identified for Well 2. The well tag on the well casing for Well 2 identifies well log (WASH 50714). Per the extension final order issued August 18, 2023, a permit amendment is required to address the correct well log (WASH 50714) to be evaluated. Note: the extension final order also removed 8.0 acres that had not been irrigated and limited the use to only Well 2 and 6 (WASH 50715).

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)? **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: Sherwood Gazette.

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

Applicant Signature

Print Name (and Title if applicable)

Date

Applicant Signature

Print Name (and Title if applicable)

Date

9-25-23

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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.

IRRIGATION DISTRICT NAME NA	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.

ENTITY NAME NA	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 Washington County Assessment	ADDRESS 155 N 1st Ave #130	
CITY Hillsboro	STATE OR	ZIP 97124

Part 5 of 5 – Water Use Permit Information

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-12326

SEP 26 2023

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)
Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	UNKNOWN	2 S	1 W	21	NE SW	TL 100	545 feet south and 2,520 feet east from the W ¼ corner, Section 21.
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	WASH 53928	2 S	1 W	21	NE SW	TL 100	620 feet south and 2,450 feet east from the W ¼ corner, Section 21.
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	WASH 50714	2 S	1 W	21	NE SW	TL 100	620 feet south and 2,450 feet east from the W ¼ corner, Section 21.
Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	WASH 52271, 54738	2 S	1 W	21	NE SW	TL 100	735 feet south and 2,600 feet east from the W ¼ corner, Section 21.
Well 4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	POSSIBLE WASH 50588	2 S	1 W	21	NE SW	TL 200	70 feet south and 2,320 feet east from the W ¼ corner, Section 21.
Well 5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	WASH 52238, 52502	2 S	1 W	21	NE SW	TL 200	170 feet south and 2,310 feet east from the W ¼ corner, Section 21.
Well 6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	WASH 50715	2 S	1 W	21	NE SW	TL 100	460 feet south and 2,425 feet east from the W ¼ corner, Section 21.
Well C / Well 7	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	COULD BE ABANDON - UNKNOWN	2 S	1 W	21	NE SW	TL 100	730 feet south and 2,380 feet east from the W ¼ corner, Section 21.
Well H / Well 8	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	COULD BE ABANDON - UNKNOWN	2 S	1 W	21	NE SW	TL 100	440 feet south and 2,260 feet east from the W ¼ corner, Section 21.

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

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU)
<input type="checkbox"/> Point of Diversion (POD)
<input type="checkbox"/> Additional Point of Diversion (APOD) | <input checked="" type="checkbox"/> Point of Appropriation/Well (POA)
<input type="checkbox"/> Additional Point of Appropriation (APOA)
<input type="checkbox"/> 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.

PER Extension Final order dated 8-18-23

- ☐ 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? ☐ Yes ☐ 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.

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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-12326

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			
									POA	2	S	1	W	21	NE	SW	100 & 200	NA	17.2	Well 2 and 6	11-23-1994
									POA	2	S	1	W	21	NW	SW	200	NA	1.3	Well 2 and 6	11-23-1994
TOTAL ACRES									TOTAL ACRES						18.5						

Additional remarks: Place of use was reduced to 18.5 acres per Extension Final Order issued August 18, 2023.

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 OWRD
 TACS

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

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OWBD

If YES, list the other certificate, permit, or ground water registration numbers: NA

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)

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). <u>If</u> less than full rate of water right
Well 1	Yes	UNKNOWN	UNKNOWN							PER EXTENSION FINAL ORDER ISSUED 8-13-23: MAX 0.17 CFS BEING: 0.08 CFS FROM WASH 50714 AND 0.09 CFS FROM WASH 50715
Authorized Well 2	Yes	WASH 53928, 54739	SEE WELL LOG WASH 53928, 54739							
Proposed Well 2	Yes	WASH 50714	SEE WELL LOG WASH 50714							
Well 3	Yes	WASH 52271, 54738	SEE WELL LOG WASH 52271, 54738							
Well 4	Yes	POSSIBLE WASH 50588	SEE POSSIBLE WELL LOG WASH 50588							
Well 5	Yes	POSSIBLE WASH 52238, 52502	SEE POSSIBLE WELL LOG WASH 52238, 52502							
Well 6	Yes	WASH 50715	SEE WELL LOG WASH 50715							
Well C / 7	Yes	ABANDON UNKNOWN	UNKNOWN							
Well H / 8	Yes	ABANDON UNKNOWN	UNKNOWN							

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ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

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

Kurtis T. Loen

Applicant(s): Thatcher Loen of Loen Nursery Co.

Mailing Address: 19205 SW Cipole Rd

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SEP 26 2023

City: Sherwood

State: OR

Zip Code: 97140

Daytime Phone: _____ **OWRD**

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:
<u>2S</u>	<u>1W</u>	<u>21</u>	_____	<u>100</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>AG for NU</u>
<u>2S</u>	<u>1W</u>	<u>21</u>	_____	<u>200</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>AG for NU</u>
_____	_____	_____	_____	_____	_____	<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:

Washington County

B. Description of Proposed Use

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

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

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

Estimated quantity of water needed: 0.17 ☒ 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:

This Land Use Information Form is to accompany a permit amendment application that proposes to Address the corrected well log for one of the point of appropriation (well) for an existing water right Permit G-12326.

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

See bottom of Page 3. ➔

For Local Government Use Only

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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 information

☒ Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): CDC Section 344

☐ Land uses to be served by the proposed water uses (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
		<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 Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Name: Hellie Crowdis Title: Asst. Planner

Signature: Hellie Crowdis Phone: 503-846-8761 Date: 9-21-23

Government Entity: Washington County

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____

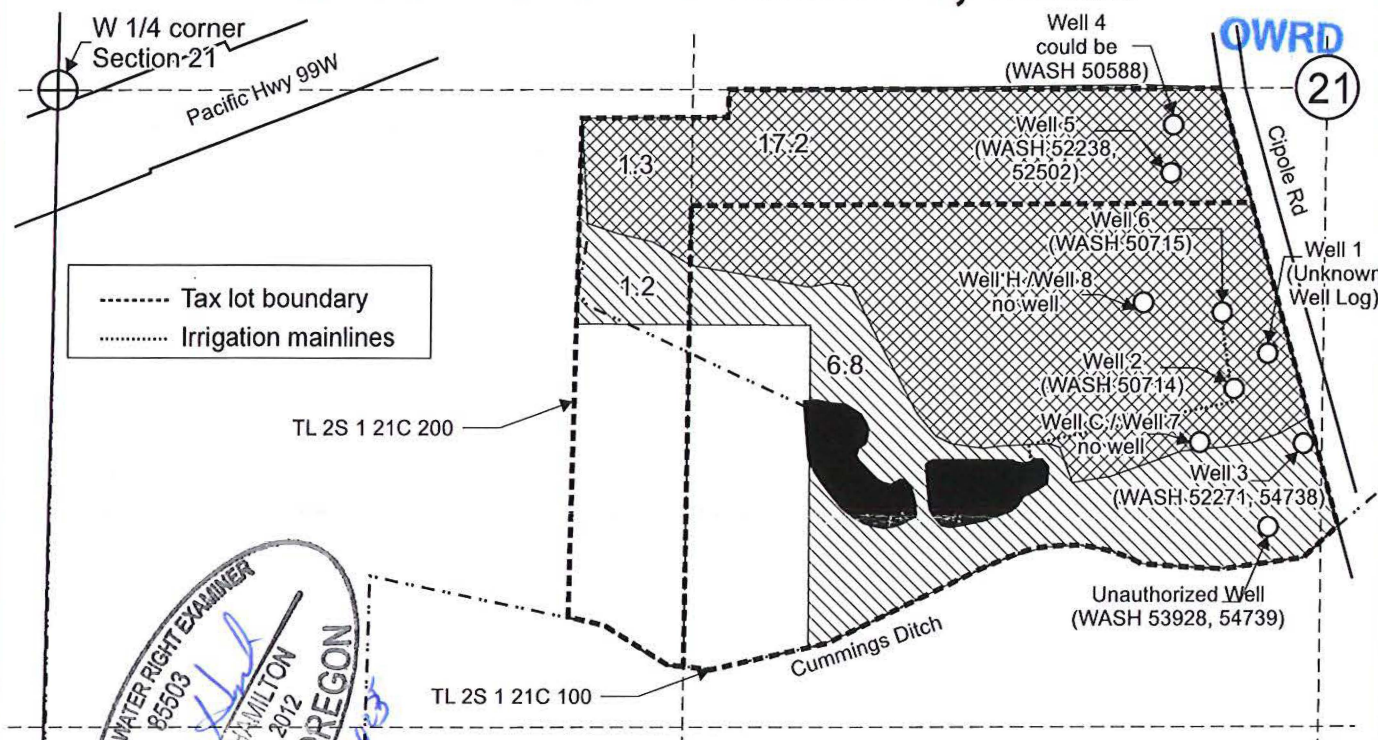
City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

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T.2S. R.1W. Section 21, W.M.



Well 1 (Unknown well log) is located 545 feet south and 2,520 feet east from the W 1/4 corner, Section 21.

Well 2 (WASH 50714) is located 620 feet south and 2,450 feet east from the W 1/4 corner, Section 21. (Per T-8864: Well log ID as WASH 53928)

Well 3 (WASH 52271, 54738) is located 735 feet south and 2,600 feet east from the W 1/4 corner, Section 21.


Well 4 (could be well log WASH 50588) is located 70 feet south and 2,320 feet east from the W 1/4 corner, Section 21.

Well 5 (WASH 52238, 52502) is located 170 feet south and 2,310 feet east from the W 1/4 corner, Section 21.

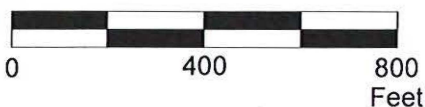
Well 6 (WASH 50715) is located 460 feet south and 2,425 feet east from the W 1/4 corner, Section 21.

Well C / Well 7 (could be one of the abandon wells) is located 730 feet south and 2,380 feet east from the W 1/4 corner, Section 21.

Well H / Well 8 (could be one of the abandon wells) is located 440 feet south and 2,260 feet east from the W 1/4 corner, Section 21.

-  Area (8.0 Acres) not irrigated under Application G-13890, Permit G-12326 priority date: 11-23-1994, and removed under Extension Final Order issued 8-18-23.
-  Area (18.5 Acres) irrigated under Application G-13890, Permit G-12326 priority date: 11-23-1994. Since 1996.

Scale: 1" = 400'



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

Permit Amendment "From" Map
Application G-13890, Permit G-12326, T-8864

Pacific Hydro-Geology Inc.

Loen Nursery Company
T.2S. R.1W. Section 21, W.M.

09/2023

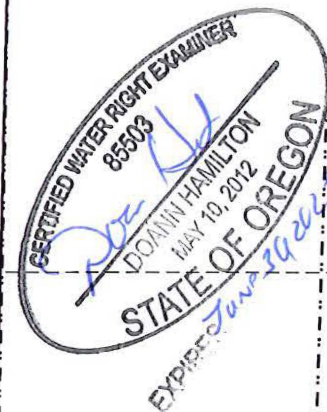
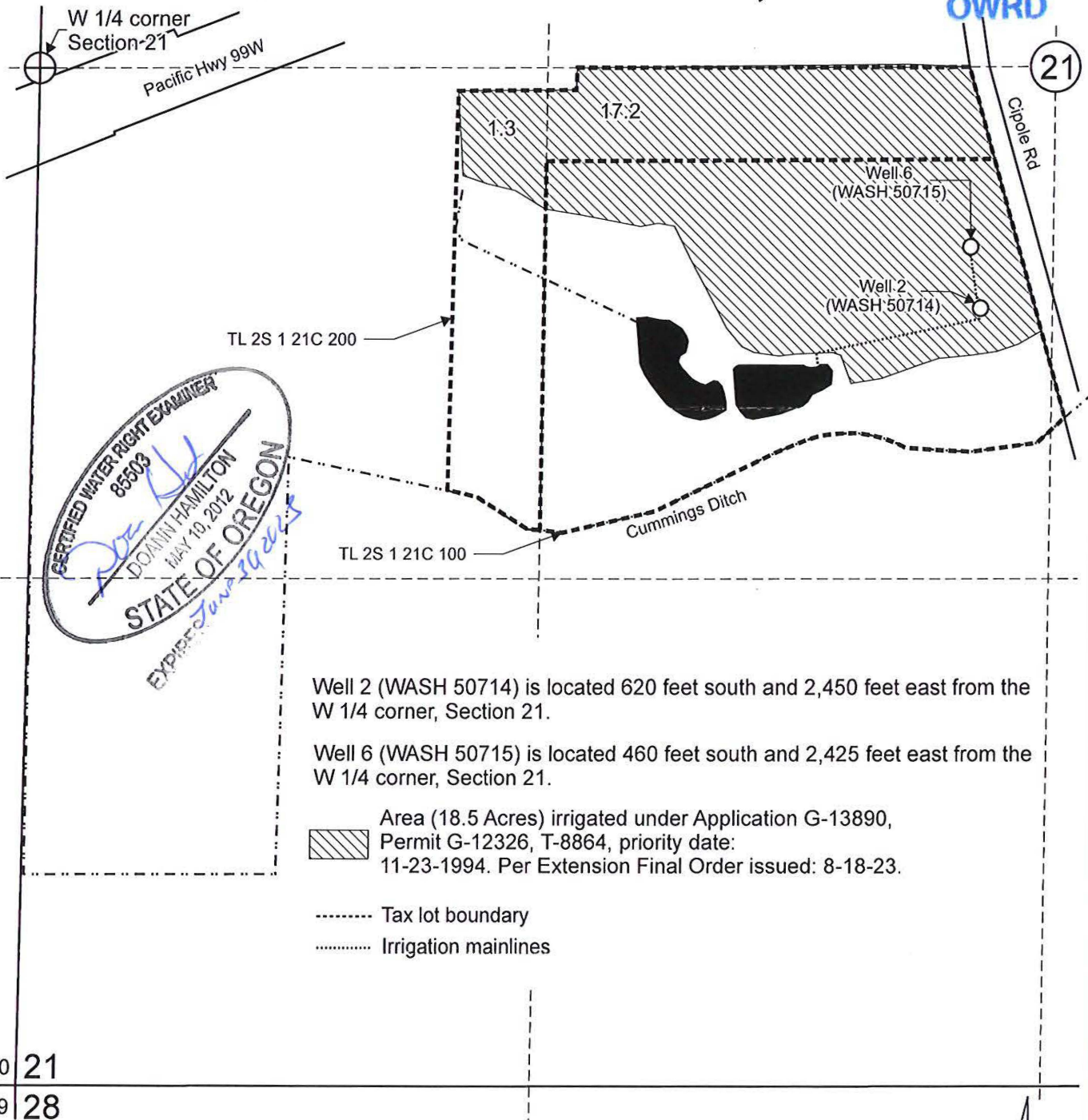
LoenCipoleG-13890PAMap.cdr

SEP 26 2023

T.2S. R.1W. Section 21, W.M.

OWRD

21



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

Permit Amendment "To" Map
Application G-13890, Permit G-12326, T-8864

Pacific Hydro-Geology Inc.

Loen Nursery Company
T.2S. R.1W. Section 21, W.M.

09/2023

Malia Kupillas

From: SCANDELLA Benjamin P * WRD <Benjamin.P.Scandella@oregon.gov>
Sent: Wednesday, May 15, 2019 11:40 AM
To: Doann Hamilton
Cc: JEFFERY Joel W * WRD; Malia Kupillas; ORLOWSKI Dennis R * WRD; CLARK Gerald E * WRD
Subject: RE: Well construction App G-13890, Permit G-12326, T-8864

Hello Doann,

I'm happy to advise on whether wells conform to the construction permit conditions, but the identification of wells is the responsibility of the CWRE submitting the COBU. A few issues to consider based on my preliminary review:

1. The C-date on this permit appears to have passed long ago, so you may need to contact Gerry Clarke (cc'd) to discuss options to address this issue. Perhaps the compliance letter you referenced in your email was attempting to rectify this, but I am not aware of the department's having received anything.
2. ② WASH 50714 / L-1713 and WASH 50715 / L-1712 do not appear to meet the permit condition precluding production of water from the basalts. *5' of basalt needs to be sealed off.*
3. ③ WASH 52271/ WASH 54738 may meet the permit condition. However, it is not clear from the log for WASH 54738 that the original 5" liner was removed before backfilling. Can you please confirm that this was first completed? *Completed from 130' to 365' basalt @ 250' WB 220' to 250' in alluvium*
4. ④ WASH 6850 and WASH 6854 appear to access the unconfined alluvial aquifer system, not the confined system allowed in the permit condition. The permit condition notes that the applicant must supply information sufficient to establish that a confined aquifer is developed.
5. ⑤ WASH 52238 appears to have been drilled to 225' as you say, but WASH 52502 appears to have deepened the well to 540', not back-filled into the alluvium. *5' of basalt needs to be sealed off.* ④
6. Joel has advised me that all the wells you mentioned except for WASH 6850 and WASH 6854 have serious well construction issues that would require repair or abandonment. If you have specific questions about this, please contact Joel.
7. These findings are based on a preliminary review of the issues you brought up in your email. Other issues may arise from a more complete review of the water right file and hydrogeology.

Best,
Ben

Well 1 could be WASH 52502 I think

Benjamin Scandella, PhD, GIT

Hydrogeologist, Technical Services Division
725 Summer Street NE, Suite A Salem, OR 97301 | Phone 503-986-0842



OREGON
WATER
RESOURCES
DEPARTMENT

Please note: under Oregon law, messages to and from this e-mail address may be made available to the public.

From: ORLOWSKI Dennis R * WRD <Dennis.R.Orlowski@oregon.gov>
Sent: Monday, May 13, 2019 9:04 AM

STATE OF OREGON

COUNTY OF WASHINGTON

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

LOEN NURSERY COMPANY
18710 SW PACIFIC DR
SHERWOOD, OREGON 97140

(503) 625-5454

The specific limits for the use are listed below along with conditions of use.

APPLICATION FILE NUMBER: G-13890

SOURCE OF WATER: EIGHT WELLS IN TUALATIN RIVER BASIN

PURPOSE OR ALLOWED USE: AGRICULTURAL USE FOR NURSERY STOCK

RATE OF ALLOWED USE: 3.56 CUBIC FEET PER SECOND

THE PERIOD OF ALLOWED USE: YEAR ROUND

DATE OF PRIORITY: NOVEMBER 23, 1994

POINT OF DIVERSION LOCATION: WELL #A - NE 1/4 SW 1/4, 800 FEET SOUTH & 1760 FEET EAST; WELL #B - NE 1/4 SW 1/4, 770 FEET SOUTH & 2200 FEET EAST; WELL #C - NE 1/4 SW 1/4, 730 FEET SOUTH & 2380 FEET EAST; WELL #D - NE 1/4 SW 1/4, 950 FEET SOUTH & 1510 FEET EAST; WELL #E - NW 1/4 SW 1/4, 900 FEET SOUTH & 1290 FEET EAST; WELL #F - NE 1/4 SW 1/4, 600 FEET SOUTH & 1410 FEET EAST; WELL #G - NE 1/4 SW 1/4, 500 FEET SOUTH & 1870 FEET EAST; WELL #H - NE 1/4 SW 1/4, 440 FEET SOUTH & 2260 FEET EAST; ALL FROM THE W1/4 CORNER, SECTION 21, ALL LOCATED WITHIN SECTION 21, TOWNSHIP 2 SOUTH, 1 WEST, W.M.

The amount of water used for NURSERY OPERATIONS is limited to a diversion of 0.15 cubic foot per second per acre. For the irrigation of **containerized nursery plants**, the amount of water diverted is limited to ONE-FORTIETH of one cubic foot per second (or its equivalent) and 5.0 acre feet per acre per year. For the irrigation of **in ground nursery plants** the amount of water diverted is limited to ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 2.5 acre feet per acre per year. The use of water for NURSERY OPERATIONS may be made at anytime of the year that the use is beneficial. For the irrigation of **any other crop**, the amount of water diverted is limited to ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 2.5 acre feet per acre during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

NE 1/4 SW 1/4 24.0 ACRES (PRIMARY & SUPPL AGRICULTURE)
NW 1/4 SW 1/4 2.5 ACRES
SECTION 21
TOWNSHIP 2 SOUTH, RANGE 1 WEST, W.M.

Measurement, recording and reporting conditions:

- A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order, shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded 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.
- B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

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

Prior to use of groundwater from wells listed on this permit, applicant must provide well reports that detail information which is sufficient to establish that a confined aquifer is developed. Groundwater production from any well listed on this permit may not be from the targeted basalt aquifer of the Sherwood-Dammasch-Wilsonville Groundwater Limited Area but more specifically only from the confined alluvial groundwater reservoir between approximately 100 feet and 300 feet below land surface.

STANDARD CONDITIONS

The wells shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

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.

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.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

Actual construction of the well shall begin within one year from permit issuance, and shall be completed on or before October 1, 1998. Complete application of the water to the use shall be made on or before October 1, 1999.

Issued APRIL 15, 1996

CO 6

Martha O. Pagel

for Martha O. Pagel, Director
Water Resources Department

STATE OF OREGON
Water Resources Department
158 12th St. N.E.
Salem, OR 97310

MEMORANDUM

DATE: 11/10/97

TO: Jerry Rodgers
FROM: Donn Miller, Hydrogeologist
SUBJECT: Aquifer Assessment of Permit G-12326 (Loen Nursery Co.)

This assessment is in response to your request through Tom Paul on 9/16/97. I've examined the file, copied the permit, printed out Loen well reports for the section, consulted with my manager (Fred Lissner) and others, and analyzed the information. I don't know for sure which report matches which well listed on the permit.

The permit authorizes the use of eight wells which develop the confined alluvial groundwater reservoir between approximately 100 feet and 300 feet below land surface. The permit also requires that prior to use, the applicant must provide well reports that detail information which is sufficient to establish that a confined aquifer is developed. This memo is that assessment. I assume that we have all of the well reports on file now for the project.

The way I see it, only four wells seem to be constructed properly for use under the permit. Problem features regarding use are boldfaced.

<u>Well Log ID</u>	<u>Commingles</u>	<u>Develops Confined alluvium</u>	<u>Develops Basalt</u>
WASH 6850	no	NO, develops unconfined alluvium	no
WASH 6854	no	NO, develops unconfined alluvium	no
WASH 6866	no	yes	no
WASH 50578	no	N/A, well abandoned	no
WASH 50589	no	N/A, well abandoned	no
WASH 50715 (Well-6)	YES	yes	YES
WASH 50714 (Well-2)	YES	yes	YES
WASH 52238	no	yes	no
WASH 52502*	no	yes	no
WASH 52271 (Well-3)	YES	yes	YES
WASH 11892	no	yes	no
WASH 50588	no	yes	no

*This report is a deepening of the new well described in WASH 52238. The well penetrates five feet into the basalt but does not develop water from it.

RECEIVED

AUG 26 1998

STATE OF OREGON
WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.
(as required by ORS 537.765) SALEM, OREGON

Instructions for completing this report are on the last page of this form.

WELL I.D. # L L01753
START CARD # 115067

(1) OWNER: Well Number 519
Name Loen Nursery
Address 18710 SW Pacific Dr.
City Sherwood State OR Zip 97140

(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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 295 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10	0	35	bentonite	0	35	25
8	35	195	cement	180	195	5

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

Backfill placed from 35 ft. to 180 ft. Material bentonite
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:								
	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6	+2	195	1/4	<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"/>

Final location of shoe(s) 195

(7) PERFORATIONS/SCREENS:									
<input type="checkbox"/> Perforations Method _____									
<input type="checkbox"/> Screens Type _____ Material _____									
From	To	Slot size	Number	Diameter	Tele./pipe size	Casing	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"/>		

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Air	Flowing
Yield gal/min	Drawdown	Drill stem at	Time
8.0		290	1 hr.

Temperature of water 58 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: _____

(9) LOCATION OF WELL by legal description:
County Wash. Latitude _____ Longitude _____
Township 2 N or S Range 1 E or W. WM.
Section 21 SE 1/4 NW 1/4
Tax Lot 0100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 19205 Cipole Rd.

(10) STATIC WATER LEVEL:
20 ft. below land surface. Date 8/6/98
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	30	30	04
180	190	15	20
210	290	80	20

(12) WELL LOG:
Ground Elevation OWRD Elev. 125.6
Google Elev. 97'

Material	From	To	SWL
clay gray	0	15	
clay brown	15	25	
gravel brown	25	30	04
clay gray	30	40	
clay/sand gray	40	60	
clay brown	60	70	
clay gray	70	140	
clay/sand/gravel gray	140	150	
clay green/gray	150	180	
clay/sand gray	180	190	20
gravel/cemented wood			
chips/sand gray	195	290	20
basalt gray/brown	290	295	

Date started 7/17/98 Completed 8/6/98

(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.

Signed _____ WWC Number _____ Date _____

(bonded) **AMERICAN WELL DRILLING**
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.
Signed Rodney C. Galt WWC Number 663 Date 8/20/98

Instructions for completing this report are on the last page of this form

Name Loen Nursery
Address 18710 SW Pacific Dr.
City Sherwood State OR Zip 97140

☐ New Well ☐ Deepening ☒ Alteration (repair/recondition) ☐ Abandonment

☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger
☐ Other

☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 45 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

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

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					<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"/>	<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"/>

Final location of shoe(s) _____

<input checked="" type="checkbox"/> Perforations <input type="checkbox"/> Screens		Method <u>Air</u> Type _____		Material _____	
From	To	Slot size	Number	Diameter	Tele/plpe size
25	40	1x1/4	75	6"	

Casing
☒
☐
☐
☐
☐

Liner
☐
☐
☐
☐
☐

☐ Pump ☐ Baller ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
---------------	----------	---------------	------

25	45	1 hr.
----	----	-------

2			

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: _____

ORIGINAL & 5/FOOT COPY WATER RESOURCES DEPARTMENT SEC

$W_1 \parallel ??$

WELL ID # **L01753**
(START CARD) # **115126**

County **Washington** Latitude _____ Longitude _____
Township **2S** N or S. Range **1W** E or W. of WM.
Section **21** **SE** $\frac{1}{4}$ **NW** $\frac{1}{4}$
Tax Lot **0100** Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address)
19205 Cipole Rd.

4 ft. below land surface. Date 4/19/99
Artesian pressure lb. per square inch. Date

Depth at which water was first found

From	To	Estimated Flow Rate	SWL

Ground elevation _____

[illegible]

Date started **4/15/99** Completed **4/19/99**

(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 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Rodney C. Eubank WWC Number 663
Date 5/13/99

AMERICAN WELL DRILLING

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER

53739.

RECEIVED

WASH 52271

Well 3
not using

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

JUN 19 1997

WATER RESOURCES DEPT.
SALEM, OREGON

WELL I.D.# L10405

(START CARD) # 095333

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number 438
Name Loen Nursery
Address 18710 SW Pacific Dr.
City Sherwood State OR Zip 97140

(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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 365 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10	0	25	bentonite	0	25	30
8	25	118	cement	100	115	5

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

☐ Other _____
Backfill placed from 25 ft. to 100 ft. Material bentonite
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6	+2	118	1/2	<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:	5	-15	365	1/8	<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"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

		Method		Material	
<input checked="" type="checkbox"/> Perforations		factory			
<input type="checkbox"/> Screens					
From	To	Slot size	Number	Diameter	Material
320	360	1/3	900	5	Tele/plpe size
					Casing
					Liner

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Flowing
Yield gal/min	Drawdown	Drill stem at	Time
80		320	1 hr.

Temperature of water 58 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: _____

(9) LOCATION OF WELL by legal description:
County Wash. Latitude _____ Longitude _____
Township 2-S N or S Range 1-W E or W. WM.
Section 21 SW 1/4 NE 1/4
Tax Lot 0100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Cipole Rd. & Pacific Hwy. 99, Sherwood, OR

(10) STATIC WATER LEVEL:
5 ft. below land surface. Date 6/5/97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 200

From	To	Estimated Flow Rate	SWL
200	360	80	5

(12) WELL LOG:
Ground Elevation OWRO Elev 125.45
Google Elev. 101'

Material	From	To	SWL
Clay Brown	0	10	
Gravel & Sand Clay	10	20	
Sand Fine Gray Clay	20	70	
Clay Brown Sticky	70	90	
Clay Blue-Gray	90	130	
Clay Gray & Woodchips	130	140	
Gravel	140	145	
Clay Gray & Woodships	145	170	
Clay Gray & Brown	170	180	
Clay Gray	180	200	
Gravel Brown & Red Sand	200	250	5
Basalt Brown Decomp.	250	360	5
Basalt Gray	360	365	

Date started 6/4/97 Completed 6/5/97

(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 1622
Signed [Signature] Date 6/6/97

(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 663
Signed [Signature] Date 6/6/97

Instructions for completing this report are on the last page of this form

THIRD COPY - CUSTOMER

WASH
50714

XXXXXX L01713

(START CARD) # ~~85673~~ 85637

(9) LOCATION OF WELL by legal description:

County Wash. Latitude _____ Longitude _____
Township 2 N or S Range 1 E or W. WM.
Section 15 NW 1/SE 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) SW Cible Rd.

(10) STATIC WATER LEVEL:
0 ft. below land surface. Date 6/3/96
 Artesian pressure 0 lb. per square inch. Date 6/3/96

(11) WATER BEARING ZONES:

Depth at which water was first found 340

Depth at which water was first found 340

From	To	Estimated Flow Rate	SWL
340	380	36	0

(12) WELL LOG:
Ground Elevation DWRD Elev 126.95
Google Elev 103'

[illegible]

Date started 5/30/96 Completed 6/3/96

(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 1622
Signed James M. [Signature] Date 6/4/96
(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 was in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

Depth of strata: _____

Signed *Robert C. Egan* WWC Number 663
Date 6/4/96

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

L01712 21

(as required by ORS 537.765)

WATER RESOURCES DEPT

Instructions for completing this report are on the last page of this form.

SALEM OREGON

(START CARD) # 85657

G-12326

No ILS

(9) LOCATION OF WELL by legal description:

County Wash. Latitude _____ Longitude _____

Township 2 ~~N~~ or ~~S~~ Range 1 E or W WM

Section 21 ~~C~~ 15 NW 1/4 SE 1/4

Tax Lot 100 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) SW Cipole Rd.

Cipole Rd is in Sec 2

(10) STATIC WATER LEVEL: not 15
5 ft. below land surface. Date 5/30/96

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found	280
--------------------------------------	-----

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 420 ft.

Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10	0	50	bentonite	0	50	70
8	50	120				
6	120	420				

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

☐ Other _____

Backfill placed from 50 ft. to 120 ft. Material bentonite

Gravel placed from	ft. to	ft.	Size of gravel
--------------------	--------	-----	----------------

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6	+2	120	$\frac{1}{2}$	<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:	5	-5	120	188	<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"/>

Final location of shoe(s)

7) PERFORATIONS/SCREENS:

<input checked="" type="checkbox"/> Perforations	Method	cutting	tourth
--	--------	---------	--------

Screens		Type	Material			
From	To	Slot size	Number	Diameter	Tele/plpe size	Casing Liner
280	300	$\frac{1}{8}$ "	30	5		<input type="checkbox"/> <input checked="" type="checkbox"/>
320	340	$\frac{1}{8}$ "	30	5		<input type="checkbox"/> <input checked="" type="checkbox"/>
380	420	$\frac{1}{8}$ "	60	5		<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"/>

8) WELL TESTS: Minimum testing time is 1 hour

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
40		420	1 hr.

Temperature of water	58	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:

(12) WELL LOG:

Ground Elevation OLWRD = 126.85

Material	From	To	SWL
clay brown	0	10	
clay/sand/gravel brown	10	40	
clay gray	40	280	
gravel/sand/clay brown	280	285	5
clay/gravel stingers	285	305	
clay gray	305	320	
clay/sand/brown gravel	320	340	5
clay gray	340	385	
decomposed basalt brown	385	415	5
basalt gray	415	420	
Pumps into pond			
AUG 26 1993			
WATERFALL RIVER BASIN			
WATERFALL RIVER BASIN			

Date started 5/29/96 Completed 5/30/96

(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 1622

Signed James Blair Date 6/4/96

(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 on this well is in full compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 663

Signed [Signature] Date 6/4/96

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

RECEIVED

WASH# 52258

Well-5 Deepened by WASH# 52502

STATE OF OREGON JUN - 6 1997 WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES

WELL I.D.#

L10398

(START CARD)# 095322

Instructions for completing this report are on the back of this form.

(1) OWNER: Well Number 434
Name Loen Nuersery
Address 18710 SW Paifice Dr.
City Sherwood State OR. Zip 97140

(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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 210 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
14	0	18	bentonite	0	18	9
10	18	210				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☐ Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 210 ft. to 225 ft. Size of gravel 2"

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	10	+2	210	1/4	<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"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From		To		Slot size	Number	Diameter	Tele/pipe size	Casing	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"/>
								<input type="checkbox"/>	<input type="checkbox"/>

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

<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Bailor	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing
Yield gal/min	Drawdown	Drill stem at	Time
40	50		1 hr.

Temperature of water 56 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: _____

(9) LOCATION OF WELL by legal description:
County Wash. Latitude _____ Longitude _____
Township 2-S N or S Range 1-W E or W. WM.
Section 21 SW 1/4 NE 1/4
Tax Lot 0100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Cipole Rd. & Hwy. 99 Sherwood, OR.

(10) STATIC WATER LEVEL:
20 ft. below land surface. Date 6/3/97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 50

From	To	Estimated Flow Rate	SWL
50	90	15	20
180	210	40	20

(12) WELL LOG:
Ground Elevation OWRD Elev. 136.58'
600 ft. Elev. 116'

Material	From	To	SWL
clay brown	0	1	
clay gray	1	20	
clay/sand gray	20	50	
sand/clay gray	50	90	20
clay brown	90	115	
clay/gravel brown	115	135	
clay green	135	180	
clay/sand blue	180	210	20
clay brown	210	225	

Date started 5/15/97 Completed 6/3/97

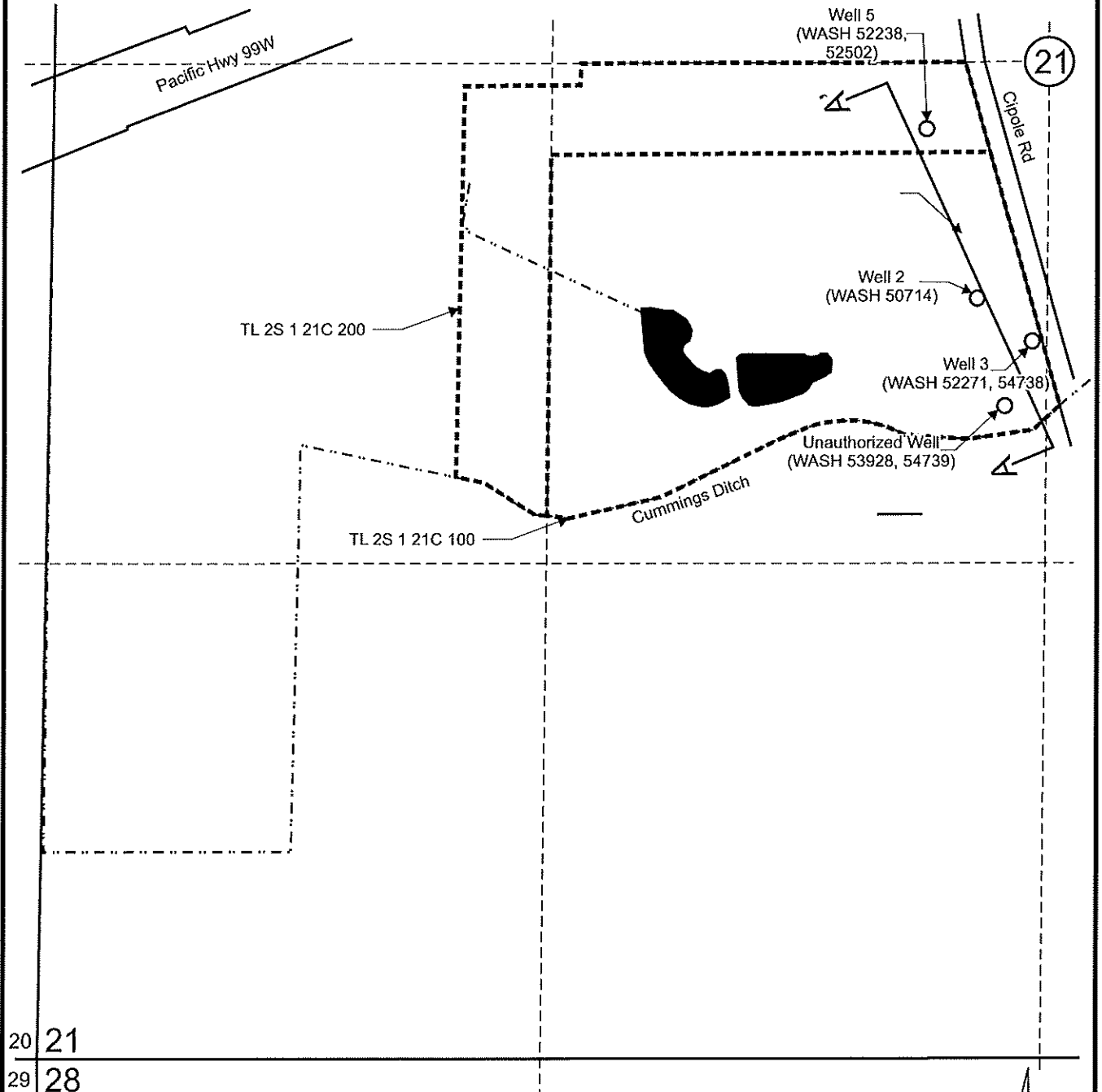
(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and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

Signed _____ WWC Number _____ Date _____

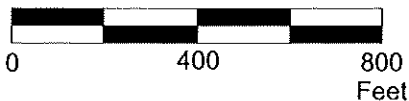
(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards.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

Signed Proby C. Esch WWC Number 663 Date 6/4/97

T.2S. R.1W. Section 21, W.M.



Scale: 1" = 400'



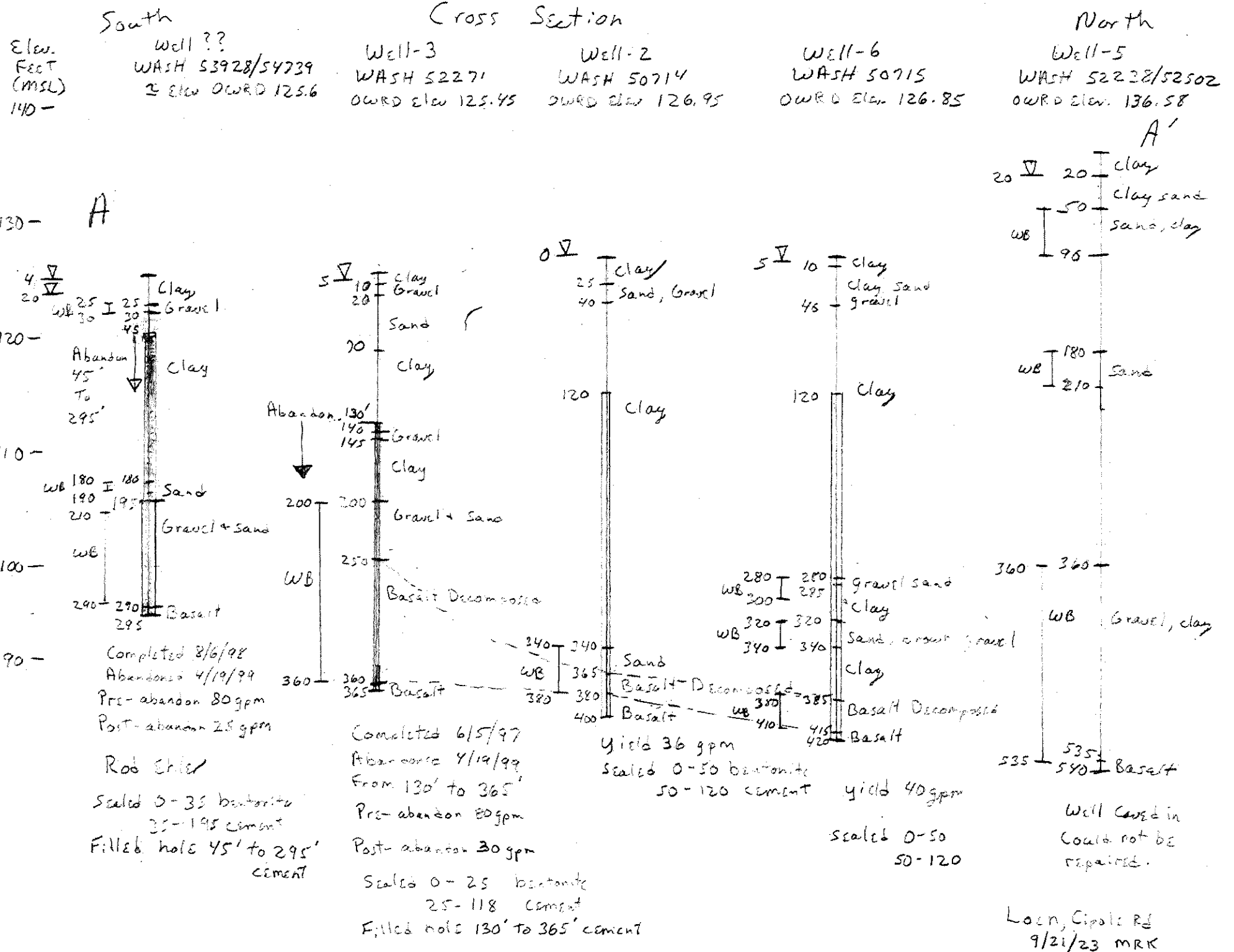
This map was prepared for the purpose of identifying the location of a water right only and is not intended to provide legal dimensions or location of property ownership lines.

Cross-Section
Application G-13890, Permit G-12326, T-8864

Loen Nursery Company
T.2S. R.1W. Section 21, W.M.

09/2023

Pacific Hydro-Geology Inc.





Oregon
Kate Brown, Governor

Water Resources Department
725 Summer St NE, Suite A
Salem, OR 97301
(503) 986-0900
Fax (503) 986-0904

MARCH 28, 2022

KUENZI TURF AND NURSERY
C/O TYLER KUENZI
6475 STATE ST.
SALEM, OR 97301

REFERENCE: Permit Amendment T-13783

The Department groundwater review identifies some problems with some of the proposed wells: Well 7 (MARI 7764) does not meet current well construction standards (OAR 690-210) for a well complete in a basalt aquifer; the well is sealed only to 18 ft. bls, while the top of hard dense basalt is noted at approx. 135 ft bls. The casing is perforated from 105-120 ft bls, within the weathered top (regolith) of the Columbia River Basalt (CRB), which is typically included in the alluvial aquifer system – the well, therefore, commingles the alluvial and CRB aquifer systems. Well 7 should not be authorized as an additional point of appropriation under permit G-15191 unless and until it meets current well construction standards and prevents commingling of aquifers.

The Well Record for Well 8 (MARI 7781) does not include any information regarding a surface seal. Well 8 should not be authorized as an additional point of appropriation under Permit G-15191 unless and until it can be demonstrated to meet current well construction standards (OAR 690-210).

The issues that we have identified could be resolved by one of the following alternatives:

- Provide a well report that details how Well 8 (MARI 7781) was originally constructed and shows that the construction meets current minimum construction standards, OR;
- Remove Well 8 from the transfer application, AND;
- Bring Well 7 up to current well construction standards, or remove Well 7 from the transfer application, OR;
- Withdraw the application.

If the Department does not receive application revisions or a request to withdraw by April 27, 2022, the Department will issue an Order to Deny Permit Amendment T-13783.

Please submit the requested information to me via email. If you have any questions, please email me at tamera.l.smith@water.oregon.gov or phone at 503-979-9607.

Kindest regards,

Tamera Smith
Transfer Caseworker

cc: Greg Wacker, Watermaster, District 16 *via email*
Doann Hamilton, agent *via email*
enclosures

Watermaster Review Form: Water Right Transfer



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

Transfer Application: T-14331

Review Due Date:

Applicant Name: Kurtis Loen

Proposed Changes: ☐ POU ☐ POD ☒ POA ☐ USE ☐ OTHER

Reviewer(s): Jake Constans

Date of Review: 11/17/2023

1. Do you have evidence that the right has not been used in the last 5 years and that the presumption of forfeiture would not likely be rebuttable? ☐ Yes ☒ No If "Yes", attach evidence (e.g. dated aerial photo showing pavement or building on the land for >5 yrs.)
2. Is there a history of regulation on the source that serves this (or these) right(s) that has involved the transferred right(s) and downstream water rights? ☐ Yes ☒ No Generally characterize the frequency of any regulation or explain why regulation has not occurred:
There is no record of groundwater source regulation in the Tualatin Basin.
3. Have headgate notices been issued for the source that serves the transferred right(s)?
☐ Yes ☒ No ☐ Records not available.
4. In your estimation, after the proposed change, would distribution of water for the right(s) result in regulation of other water rights that would not have occurred if use under the original right(s) was/were maximized? ☐ Yes ☒ No If "Yes", explain:
5. In your estimation, if the proposed change is approved, are there upstream water rights that would be affected? ☐ Yes ☒ No If "Yes", describe how the rights would be affected and list the rights most affected:

6. Check here ☐ if it appears that downstream water rights benefit from return flows resulting from the current use of the transferred right(s)? If you check the box, generally characterize the locations where the return flows likely occur and list the water rights that benefit most:

☒ N/A

7. For POD changes and instream transfers, check here if there are channel losses between the old and new PODs or within the proposed instream reach? If you check the box, describe and, if possible, estimate the losses:

☒ N/A

8. For instream transfers that propose protection of a reach beyond the mouth of the source stream:

☒ N/A Would the quantity be measureable into the receiving stream consistent with OAR 690-077-0015(8)? ☐ Yes ☐ No

9. For POU changes: ☒ N/A Is it likely the original place of use would continue to receive water from the same source? ☐ Yes ☐ No If "Yes", explain:

10. For POU or USE changes: ☒ N/A In your best judgment, would use of the existing right at "full face value," result in the diversion of more water than can be used beneficially and without waste? ☐ Yes ☐ No If "Yes", explain:

11. For POU changes that involve micro-irrigation: ☒ N/A

- a. Has the applicant made changes (absent a transfer) to convert to micro-irrigation within the current place of use boundary of the water right proposed for transfer, and previously demonstrated to the Department through monitoring and site inspections by the Watermaster that the proposed transfer will not result in injury or enlargement?

☐ Yes ☐ No If "Yes", explain:

- b. Has a temporary transfer of this nature been previously filed and approved on the same lands (or portions thereof) as those lands involved in this transfer?

☐ Yes ☐ No If "Yes", answer the following:

- i. Were there any problems with more acres being irrigated (or wetted) than were authorized under the temporary transfer? ☐ Yes ☐ No If "Yes", explain:
- ii. Did the designated areas that were to remain dry (or not wetted) under the temporary transfer actually remain dry? ☐ Yes ☐ No If "No", explain:
- iii. Did the applicant comply with and meet all of the conditions of the temporary transfer? ☐ Yes ☐ No If "No", explain:
- iv. Do you have any other observations regarding the temporary transfer? ☐ Yes ☐ No If "Yes", describe:
- v. Did the applicant demonstrate to the Department through monitoring and site inspections by the Watermaster that neither injury nor enlargement occurred as a result of the temporary transfer? ☐ Yes ☐ No If "No", explain:

- c. To the best of your knowledge, if this transfer is approved, does it appear that:

- i. "Injury" will occur to other water rights that share the same source?

☐ Yes ☐ No If "Yes", explain:

- ii. "Enlargement" of the water right being transferred will occur?

☐ Yes ☐ No If "Yes", explain:

12. Are there other issues not identified through the above questions that should be considered in determining whether the change "can be effected without injury to other rights"?

☐ Yes ☒ No If "Yes", explain:

13. What alternatives may be available for addressing any issues identified above:

14. Do conditions need to be included in the transfer order to avoid enlargement of the right or injury to other rights? ☐ No ☒ Yes, as checked and provided below:

☐ For POU changes that involve micro-irrigation, provide the monitoring and reporting conditions necessary to prevent injury/enlargement:

☐ A Headgate should be required prior to diverting water.

☒ Measurement Devices for POD or POA: (if this condition is selected, also fill in the top sections of Page 4)

*a. Before water use may begin under this order, the water user shall install a **totalizing flow meter***, or, with prior approval of the Director, another suitable measuring device, ☐ at each point of diversion/appropriation (new and existing) OR at each new point of diversion/appropriation ☒ with the exception that water rights issued to the Bureau of Reclamation or an irrigation district (or similar entity) are not subject to this condition.*

b. The water user shall maintain the meters or measuring devices in good working order.

c. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

☐ Reservoir water use measurement: (if this condition is selected, also fill in the top sections of Page 4)

*a. Before water use may begin under this order, the water user shall install **staff gages***, or, with prior approval of the Director, other suitable measuring devices, that measure the entire range and stage between empty and full in each reservoir. Staff gages shall be United States Geological Survey style.*

b. Before water use may begin under this order, if the reservoir is located in channel, weirs or other suitable measuring devices must be installed upstream and downstream of the reservoir, and, an adjustable outlet valve must be installed. The water user shall maintain such devices in good working order. A written waiver may be obtained, if in the judgment of the Director, the installation of weirs or other suitable measuring devices, or the adjustable outlet valve, will provide no public benefit.

* The following alternative device(s) should be substituted for the bold, underlined device in the above selected condition:

<input type="checkbox"/> Weir	<input type="checkbox"/> Submerged Orifice
<input type="checkbox"/> Parshall Flume	<input type="checkbox"/> Flow Restrictor
<input type="checkbox"/> Other: _____	

Oregon Water Resources Department

Measurement Condition Information for the Applicant

(To be sent with the Draft Preliminary Determination or Final Order)

Transfer #: T- 14331



In order to avoid enlargement of the right or injury to other rights, a **totalizing flow meter** will be required to be installed prior to diversion of water, as a condition of this transfer:



at each point of diversion/appropriation (new and existing) **OR**



at each new point of diversion/appropriation.

For additional information, or to obtain approval of a different type of measurement device, the applicant should contact the area Watermaster:

Watermaster name: **Jake Constans**

District: **18**

Address: **1400 SW Walnut Street, #240**

City/State/Zip: **Hillsboro, OR 97123**

Phone: **503-846-7780**

Email: **jake.w.constans@water.oregon.gov**

Note: If a device other than the one specified in the Preliminary Determination or Final Order is approved by the Watermaster, fill out and mail the form below to the Salem office.

Approval of an Alternate Measurement Device T- (to be filled out after consultation with the applicant, or after a site visit)

On behalf of the Director, I authorize use of the following suitable **alternate measurement device**:

Watermaster signature

District

Date

If this form is used for approval of an alternative measurement device, it must be mailed to:

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

Groundwater Transfer Review Summary Form

Transfer/PA # T- 14331

GW Reviewer Dennis Orłowski Date Review Completed: 11/07/2023

Summary of Same Source Review:

☐ The proposed change in point of appropriation is not within the same aquifer as per OAR 690-380-2110(2).

Summary of Injury Review:

☐ The proposed transfer will result in another, existing water right not receiving previously available water to which it is legally entitled or result in significant interference with a surface water source as per 690-380-0100(3).

Summary of GW-SW Transfer Similarity Review:

☐ The proposed SW-GW transfer doesn't meet the definition of "similarly" as per OAR 690-380-2130.

This is only a summary. Documentation is attached and should be read thoroughly to understand the basis for determinations.



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1271
(503) 986-0900
www.wrd.state.or.us

Ground Water Review Form:

- ☐ Water Right Transfer
☒ Permit Amendment
☐ GR Modification
☐ Other

Application: T-14331

Applicant Name: Loen Nursery Co. – Kurtis Loen

Proposed Changes: ☒ POA ☐ APOA ☐ SW→GW ☒ RA
☐ USE ☐ POU ☐ OTHER

Reviewer(s): Dennis Orlowski

Date of Review: 11/07/2023

Date Reviewed by GW Mgr. and Returned to WRSD: 11/07/2023

The information provided in the application is insufficient to evaluate whether the proposed transfer may be approved because:

- ☐ The water well reports provided with the application do not correspond to the water rights affected by the transfer.
- ☐ The application does not include water well reports or a description of the well construction details sufficient to establish the ground water body developed or proposed to be developed.
- ☐ Other _____

1. Basic description of the changes proposed in this transfer: This proposed amendment pertains to permit G-12326, which originally authorized the use of up to eight wells in the Tualatin River basin to pump groundwater for year-round nursery use on 26.5 acres (maximum combined rate 3.56 cfs (~1598 gpm)).

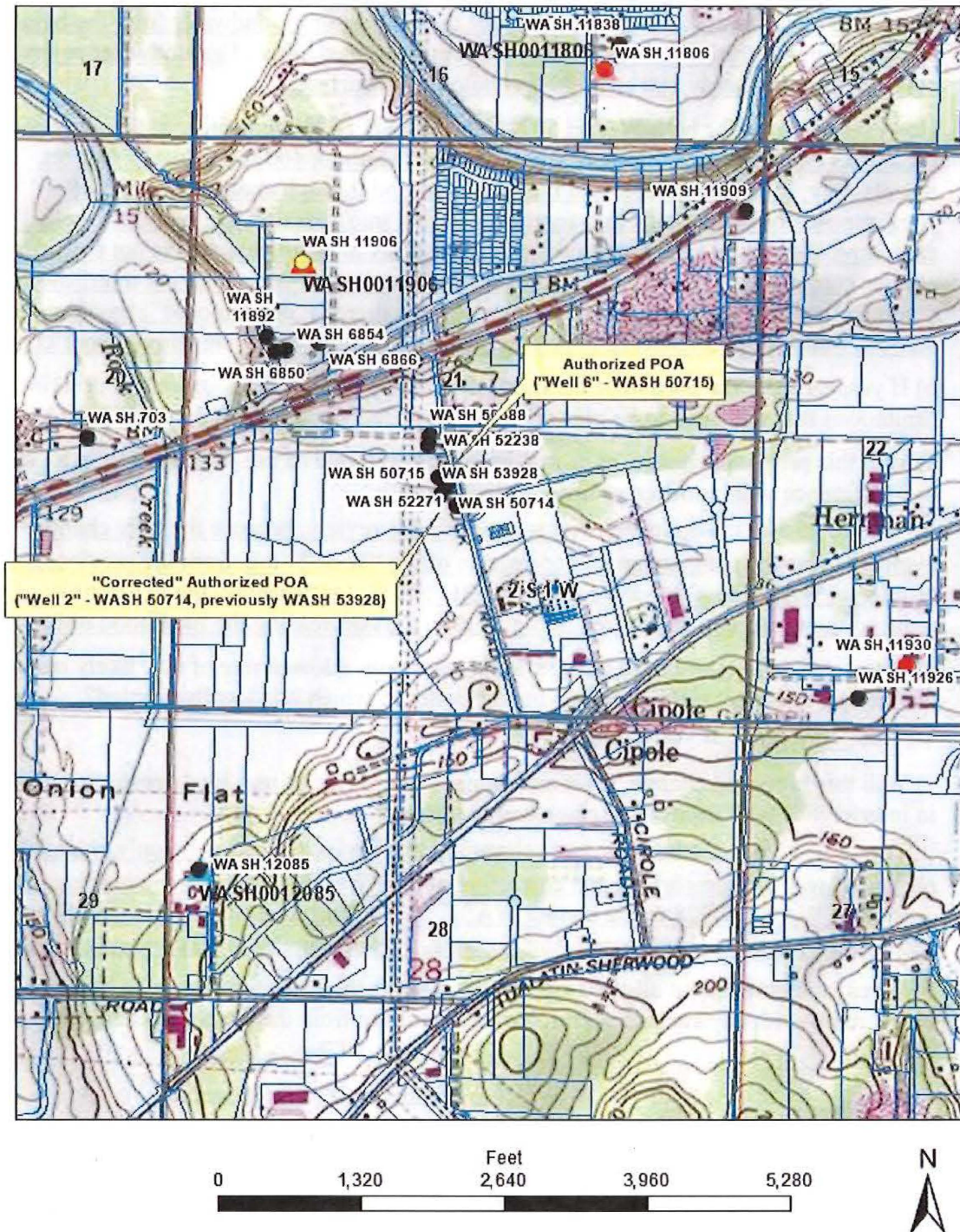
However, a recent (8/18/2023) extension final order for permit G-12326 significantly modified/reduced certain provisions of the original permit. Most relevant of those extension FO changes to this proposed permit amendment are: (1) reduction of POA from eight to only two wells, WASH 50714 and WASH 50715; (2) reduction of maximum combined pumping rate to 0.17 cfs; and (3) reduction of POU area to 18.5 acres.

According to the application, "Well 2" was previously mis-identified as WASH 53928, whereas it was subsequently confirmed by the applicant's agent to instead be WASH 50714. Thus, the purpose of this groundwater review is to confirm that WASH 50714 meets relevant conditions of permit G-12326 and its corresponding extension FO issued in August 2023.

2. Will the proposed POA develop the same aquifer (source) as the existing authorized POA?
☒ Yes ☐ No Comments: See response to 3a below.

3. a) Is there more than one source developed under the right (e.g., basalt and alluvium)?
☐ Yes ☒ No The POA/POU are located within the Sherwood-Dammasch-Wilsonville GWLA, in which use of groundwater from the local basalt aquifer is restricted. Consequently, permit G-12326 prohibits the acquisition of groundwater from the basalt aquifer system, limiting pumping "only from the confined alluvial groundwater reservoir between approximately 100 and 300 feet below land surface."
However, the logs for both WASH 50714 and WASH 50715 indicate that the alluvial sediments extend deeper than stated in the permit, to about 400 feet and 415 feet bls, respectively. It is also notable that both wells extend through about 15-30 feet of "decomposed brown basalt", and another 5-10 feet into "basalt." Despite both wells extending slightly into the basalt underlying the alluvial sediments, this is not considered aquifer commingling as the wells do not penetrate a distinct water-bearing interflow zone ("aquifer") within the basalt. Furthermore, the weathered ("decomposed") basalt recorded on both well logs is considered to be essentially part of the overlying alluvial aquifer system.
- b) If yes, estimate the portion of the right supplied by each of the sources and describe any limitations that will need to be placed on the proposed change (rate, duty, etc.): N/A
4. a) Will this proposed change, at its maximum allowed rate of use, likely result in an increase in interference with another ground water right?
☐ Yes ☒ No Comments: Not relevant to this review, because the only change evaluated was the comparison and correction of the "Well 2" log, from the previously-erroneous WASH 53928 to the correct WASH 50714. Furthermore, the FO significantly reduced the maximum authorized pumping rate, thus decreasing the likelihood of injury.
- b) If yes, would this proposed change, at its maximum allowed rate of use, likely result in another groundwater right not receiving the water to which it is legally entitled?
☐ Yes ☒ No If yes, explain: N/A
1. a) Will this proposed change, at its maximum allowed rate of use, likely result in an increase in interference with another surface water source?
☐ Yes ☒ No Comments: Not relevant to this review, because the only change evaluated was the comparison and correction of the "Well 2" log, from the previously-erroneous WASH 53928 to the correct WASH 50714. Furthermore, the FO significantly reduced the maximum authorized pumping rate, thus decreasing the likelihood of injury.
- b) If yes, at its maximum allowed rate of use, what is the expected change in degree of interference with any surface water sources resulting from the proposed change?
Stream: _____ ☐ Minimal ☐ Significant
Stream: _____ ☐ Minimal ☒ Significant
Provide context for minimal/significant impact: N/A
2. For SW-GW transfers, will the proposed change in point of diversion affect the surface water source similarly (as per OAR 690-380-2130) to the authorized point of diversion specified in the water use subject to transfer?
☐ Yes ☐ No Comments: N/A
3. What conditions or other changes in the application are necessary to address any potential issues identified above: None
4. Any additional comments: None

**T-14331 Loen Nursery
T2S R1W Section 21**



Service Layer Credits: Oregon Statewide Imagery Program (OSIP) - Oregon Imagery Framework Implementation Team
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Oregon

Tina Kotek, Governor

Water Resources Department

North Mall Office Building

725 Summer St NE, Suite A

Salem, OR 97301

Phone 503 986-0900

Fax 503 986-0904

September 27, 2023

LOEN NURSERY CO.
KURTIS T. LOEN
19205 SW CIPOLE RD
SHERWOOD, OR 97140

Reference: Application T-14331

On September 26, 2023, OWRD received your water right Permit Amendment Application. The application was accompanied by \$1840.00. Our receipt number 141672 is enclosed.

By copy of this letter, we are asking the Watermaster for a report regarding the potential for injury to existing water rights which may be caused by the requested change. A review form will also be sent to our groundwater staff to determine whether the proposed well accesses the same source of water as the original well.

This application may require publication of a notice for two consecutive weeks in a newspaper with general circulation in the area where the water right is located. If it is determined that newspaper notice will be required, the Department will prepare the notice and notify you of the cost. You will be responsible for submitting payment to the Department prior to publication of the notice.

Except as provided under ORS 540.510(3) for municipalities, you may not use water from the new point of appropriation until a final order approving the application has been issued by the Department.

Refer to the following page for a chart showing the steps and expected timelines for the processing of your application.

If you have any questions, please contact the Transfer Section at (503) 986-0935.

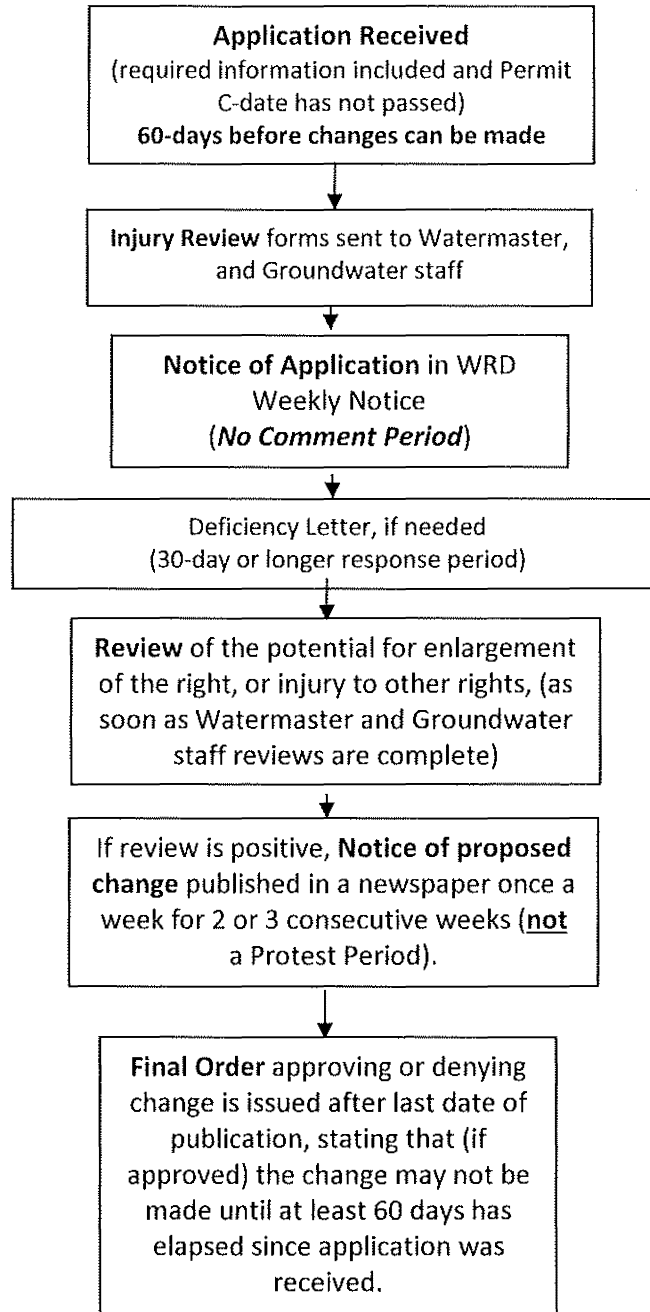
Cc: Watermaster Dist. #18, Jacob W. Constans (via email)
Washington County Planning
Malia R. Kupillas, Agent

Enclosure

Permit Amendment Process

ORS 537.211

Changes: POD/POA, Place of Use



**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # **141730**

INVOICE # _____

RECEIVED FROM: Loen Nursery Inc.

BY: _____

APPLICATION	
PERMIT	
TRANSFER	<u>T-14331</u>

CASH: ☐ CHECK: # X 20992 OTHER: (IDENTIFY) ☐ _____

TOTAL REC'D \$ 1,648.32

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES 47124 R11-467-25 \$ _____
0412 OTHER: (IDENTIFY) Transfer R.A. \$ 1,648.32

0243 I/S Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

4270 WRD OPERATING ACCT

MISCELLANEOUS

0407	COPY & TAPE FEES	\$
0410	RESEARCH FEES	\$
0408	MISC REVENUE: (IDENTIFY) _____	\$
TC162	DEPOSIT LIAB. (IDENTIFY) _____	\$
0240	EXTENSION OF TIME	\$

WATER RIGHTS:

0201	SURFACE WATER	\$	0202	\$
0203	GROUND WATER	\$	0204	\$
0205	TRANSFER	\$		

WELL CONSTRUCTION

0218	WELL DRILL CONSTRUCTOR	\$	0219	\$
	LANDOWNER'S PERMIT		0220	\$

OTHER (IDENTIFY) _____

0536 TREASURY 0437 WELL CONST. START FEE

0211	WELL CONST START FEE	\$	CARD#	
0210	MONITORING WELLS	\$	CARD#	

OTHER (IDENTIFY) _____

0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER

0233	POWER LICENSE FEE (FW/WRD)	\$
0231	HYDRO LICENSE FEE (FW/WRD)	\$
	HYDRO APPLICATION	\$

TREASURY OTHER / RDX

FUND _____ TITLE _____

OBJ. CODE _____ VENDOR # _____

DESCRIPTION _____ \$ _____

RECEIPT: **141730**

DATED: 10/6/2022 BY: Loen D Miller

**REIMBURSEMENT AUTHORITY
APPLICANT'S AGREEMENT**
Contract Number: R11-467-25

RECEIVED

OCT 06 2023

**OWRD
SALEM, OREGON**

This Agreement is between the **Oregon Water Resources Department**, hereafter OWRD, and **Loen Nursery Co.**, hereafter Applicant, hereafter known together as the parties.

OWRD Information

Contact: **Kelly Starnes**
Title: **Transfer Advisor**
Address: **725 Summer Street, NE, Suite A
Salem, OR 97301-1266**

Phone: **503 979-3511**
Fax: **503 986-0901**
Email: patrick.k.starnes@water.oregon.gov

Applicant's Information

Name: **Loen Nursery Co.**
Contact: **Thatcher Loen**
Address: **19205 SW Cipole Rd
Sherwood, OR 97140**

Phone: **(503) 453-7196**
Fax:
Email: tloen@loennursery.com

Applicant's Representative

Name: **Pacific Hydro-Geology, Inc.**
Contact: **Doann Hamilton**
Address: **18487 S Valley Vista Rd.
Mulino, OR 97042**

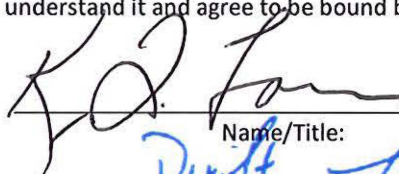
Phone: **(503) 349-6946**
Fax: **(503) 632-5983**
Email: phgdmh@gmail.com

Purpose The purpose of this Agreement is to expedite the processing of the **Transfer Application**. (**Application Number: T-14331**)

1. **Authority.** The OWRD has been authorized pursuant to ORS 536.055 to enter into a voluntary agreement with any applicant, permittee or regulated entity (collectively Applicant) for expediting or enhancing a regulatory process. In making this agreement, OWRD shall require the applicant to pay the full cost of expedited process.
2. **Restrictions.** Applicant and OWRD agree that this Agreement shall not be construed to restrict in any way the decisions and actions by OWRD. OWRD shall be free to exercise independent judgment consistent with existing laws and regulations.
3. **Effective Date and Duration.** Unless otherwise terminated by non-deposit of funds by the Applicant, this Agreement shall become effective on the date on which both parties have signed the Agreement and the full deposit of the estimated cost of the proposed service.
4. **Consideration.**
 - a. Applicant shall pay OWRD in advance for actual costs incurred by OWRD. The estimated maximum reimbursement payable to OWRD under this Agreement is **\$1,648.32**. Applicant agrees to pay the full amount of **\$1,648.32** to OWRD prior to commencement of any work stated in this Agreement. This payment will be placed in an account administered by OWRD and drawn upon as costs are actually incurred. If the actual cost of performing the work is less than payments received, OWRD will refund the unspent balance. If the actual cost of processing exceeds the estimate, the Applicant can either elect to terminate this Agreement or amend the Agreement to reflect the increase in cost.
 - b. The costs stated in this Agreement do not include the statutory application processing and filing fees.
5. **Confidentiality.** Applicant agrees that any information provided to or acquired by OWRD under this Agreement will be subject to the Oregon Public Records Law and shall be considered public records.
6. **Indemnity.** Applicant shall defend, save, hold harmless, and indemnify the State of Oregon, OWRD, and their officers, employees, and agents from and against all claims, suits, actions, losses, damages, liabilities, costs, and expenses of any nature resulting from or arising out of, or relating to the activities of Applicant or its representatives, officers, employees, contractors, or agents under this Agreement or with respect to the expedited service. The Applicant acknowledges that the Oregon Water Resources Department cannot and does not guarantee a favorable review under the subject regulatory process.

7. **Termination.** Applicant may request to terminate this agreement only in writing at anytime during the process. The Applicant agrees to pay for the work done by OWRD up until the time of the written termination request. OWRD, upon receiving such written termination request from the Applicant, will refund any unspent balance.
8. **Funds Authorized and Available.** By its execution of this Agreement, Applicants certify that sufficient funds are authorized and available to cover the expenditures contemplated by this Agreement.
9. **Duration of Estimate.** The Estimate of Time to completion is **approximately** 120 days once this Agreement has been fully executed and payment of the estimated cost deposited. If the Applicant's Agreement is not received by the Department within thirty (30) days of mailing the Agreement, the Applicant may need to re-apply for a new estimate. NOTE: Any time estimate is approximate; No guarantee of Final Order issuance of a date is certain. Duration estimates do not include any statutory waiting periods.
10. **Completion Date.** OWRD, by the execution of this Agreement does not guarantee the completion date indicated in this Agreement. Completion date is only an estimate and may be affected by the Department's workload, issues arising from the processing of the requested services and Applicant's timely response to requests for additional information.
11. **Captions.** The captions or headings in this Agreement are for the convenience only and in no way define, limit, or describe the scope, or intent, of any provision of this Agreement.
12. **Amendment and Merger.** The terms of this Agreement shall not be waived, altered, modified, supplemented, or amended in any manner whatsoever, except by written instrument signed by both parties. Such waiver, consent, modification or change, if made, shall be effective only in the specific instance and for the specific purpose given. There are no understandings, agreements or representations, oral or written, not specified herein regarding this Agreement.
13. **Signatures.** All parties, by the authorized representative's signature below, hereby acknowledge that they have read this Agreement, understand it and agree to be bound by its terms and conditions.

For Applicant:

 President
Name/Title:

10-3-23
Date

For OWRD:


Dwight French – Administrator

OCT 9 - 2023
Date

Mail signed Agreement to:

Elyse Richman
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301-1266

Permit Amendment Application Intake Checklist

Permit Amendment # T- **14331**

Reviewer Stacy Date 9-27-2023	Type of Change(s) Proposed: <input type="checkbox"/> POU <input type="checkbox"/> POD <input type="checkbox"/> APOD <input checked="" type="checkbox"/> POA <input type="checkbox"/> APOA <input type="checkbox"/> SW to GW
Calculated Fee \$ <input checked="" type="checkbox"/> Use fee calculator on back of this form	
Fee Received \$ 1840.00	
Permit: G-12326 Permit: Permit:	Completion Date: 10-1-2026 Completion Date: Completion Date:
Check <u>ALL</u> Permits in WRIS to confirm completion date is not expired	
Notes:	

Application:			
1.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Have <u>ALL</u> of the applicant's signed and dated the application? If no, whose signature is missing?
2.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Part 5 of application: Does the information match the description of the explanation on Part 4 of the application?
3.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
For multiple permits: Each permit proposed for transfer has their own separate completed Part 5, Tables 1 & 2? If no, which permit(s) are missing separate Part 5, Tables 1 & 2?			

Map Requirements:			
4.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Map included & to scale? (Separate map for each permit if more than 3 permits)
5.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
Map Waiver? The map waiver must be issued by the Department			
Notes:			

Attachments:			
6.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	Has the Permit Completion Date expired? (If yes, we cannot accept)
7.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Land Use Form included and signed by the County?			
8.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
Consent Form included, signed, & notarized (for applicants who are not a permit holder of record)?			
9.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
For changes in POA/APOA – are the well logs included?			
10.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
For change in POU within Umatilla County, Supplemental Form U included?			

<input checked="" type="checkbox"/>	Application complete: no deficiencies identified, assign a T-number and put this checklist in T-folder.
<input type="checkbox"/>	Application DEFICIENT: DO NOT accept - return to applicant with letter explaining deficiencies identified.

Permit Amendment Application Intake Checklist

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,360
2	Types of change proposed: <input type="checkbox"/> Place of Use <input type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = _____ (2a) Subtract 1 from the number in line 2a = _____ (2b) <i>If only one change, this will be 0</i> Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » »	2	
3	Number of permits included in Permit Amendment _____ (3a) Subtract 1 from the number in 3a above: _____ (3b) <i>If only one permit, this will be 0</i> Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » »	3	
4	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 type="checkbox"/> Yes: enter \$480 for the 1st well to be added or changed _____ (4a) Do you propose to add or change additional wells? <input type="checkbox"/> No: enter 0 <input type="checkbox"/> Yes: multiply the number of additional wells by \$410 _____ (4b) Add line 4a to line 4b and enter » » » » » » » » » » » » » » »	4	
5	Do you propose to change the place of use? <input type="checkbox"/> No: enter 0 on line 5 » <input type="checkbox"/> Yes: enter the cfs for the portions of the permits to be amended (see example below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) Multiply 5c by \$410, then enter on line 5 » » » » » » » » » » » » » » »	5	
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	
7	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	
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » Permit Amendment Fee:	8	

STATE OF OREGON
WATER RESOURCES DEPARTMENT

RECEIPT # 141673

725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE #

RECEIVED FROM: Loen Nursery Inc.
BY:

APPLICATION	
PERMIT	
TRANSFER	T-14331

CASH: ☐ CHECK: # ☒ 20991 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$125.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES 47/24 R11461-25 \$
0412 OTHER: (IDENTIFY) Transfer Reimbursement \$125.00
0243 I/S Lease 0244 Muni Water Mgmt. Plan 0245 Cons. Water

4270 WRD OPERATING ACCT

MISCELLANEOUS

0407	COPY & TAPE FEES	\$
0410	RESEARCH FEES	\$
0408	MISC REVENUE: (IDENTIFY)	\$
TC162	DEPOSIT LIAB. (IDENTIFY)	\$
0240	EXTENSION OF TIME	\$

WATER RIGHTS:

0201	SURFACE WATER	\$	0202	\$
0203	GROUND WATER	\$	0204	\$
0205	TRANSFER	\$		

WELL CONSTRUCTION

0218	WELL DRILL CONSTRUCTOR	\$	0219	\$
	LANDOWNER'S PERMIT		0220	\$

OTHER (IDENTIFY)

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE \$ CARD#
0210 MONITORING WELLS \$ CARD#
OTHER (IDENTIFY)

0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER

0233 POWER LICENSE FEE (FW/WRD) \$
0231 HYDRO LICENSE FEE (FW/WRD) \$
HYDRO APPLICATION \$

TREASURY OTHER / RDX

FUND TITLE
OBJ. CODE VENDOR #
DESCRIPTION \$

RECEIPT: 141673 DATED: 9-26-2023 BY: cm-mills

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

STATE OF OREGON
WATER RESOURCES DEPARTMENT

RECEIPT # 141673

725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE #

RECEIVED FROM: Loen Nursery Inc.
BY:

APPLICATION	
PERMIT	
TRANSFER	T-14331

CASH: ☐ CHECK: # ☒ 20991 OTHER: (IDENTIFY) ☐

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OTHER (IDENTIFY)

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0231 HYDRO LICENSE FEE (FW/WRD) \$
HYDRO APPLICATION \$

TREASURY OTHER / RDX

FUND TITLE
OBJ. CODE VENDOR #
DESCRIPTION \$

RECEIPT: 141673 DATED: 9-26-2023 BY: cm-mills

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal



OREGON WATER RESOURCES DEPARTMENT
TRANSFER REIMBURSEMENT AUTHORITY
ESTIMATE APPLICATION



ORS 536.055 authorizes the Oregon Water Resources Department to expedite or enhance regulatory processes voluntarily requested under the agreement.

Please contact Transfer Staff before submitting this request, as the application fee of \$125.00 per request is non-refundable.

Checks submitted for this application must be separate from Transfer fees.

The purpose of this application is to obtain estimates of the cost and time required to process a Transfer Application Request. There is a non-refundable application fee of \$125.00 per request.

REQUEST	TYPE	FILE NUMBER
<input checked="" type="checkbox"/>	Transfer Application	Transfer Number NA

	Applicant Information	Applicant's Representative/Contact
Name:	Loen Nursery Co. c/o Thatcher Loen	Pacific Hydro-Geology, Inc. c/o Doann Hamilton
Address:	19205 SW Cipole Rd	18487 S. Valley Vista Road
	Sherwood, OR 97140	Mulino, OR 97042
Phone:	503-453-7196	(503) 349-6946 cell
Fax:		(503) 632-5983
E-Mail Address:	TLoen@loennursery.com	phgdmh@gmail.com

By signing this application, I understand:

- That upon receipt of my non-refundable application fee of \$125.00, OWRD will, within fourteen (14) days, notify me in writing of the estimate of costs and time frame for the expedited service.
- That this fee covers the reimbursement authority staff to evaluate and provide the estimate for processing of the request.
- That upon receiving the estimate, I may agree or decline to enter into a formal contract to pay the estimated cost in advance to initiate the expedited service.
- That an incomplete or inaccurate application may delay the process and increase the cost to process my request.
- That expedited processing does not guarantee a favorable review of my request.

I certify that I am the (check one):

☒ Applicant ☐ Applicant's Representative ☐ Other (Please specify)

Name: Kurtis T Loen

Signature: [Handwritten Signature]

Send completed Application and payment to:

Oregon Water Resources Department
Transfer Reimbursement Authority Program
725 Summer St. NE, Suite A
Salem, OR 97301-1271

RECEIVED
SEP 26 2023
OWRD

OWRD USE ONLY: Reimbursement Authority Number: R11-467-25



Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Kurtis T. Loen Nursery Co.

Transaction Type: Permit Amendment

Fees Received: \$ 1,840.00

☐ Cash

☒ Check

Check No. 20990

Name(s) on Check: Loen Nursery Inc

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,

OWRD Customer Service Staff

Submission received by: Adi Funch

(Name of OWRD staff)

Instructions for OWRD staff:

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



RECEIVED

SEP 26 2023

OWRD

Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Loen Nursery Co. 5740 Thatcher
Loen

Transaction Type: Transfer Reimbursement Authority Estimate
Application

Fees Received: \$ 125.00

☐ Cash

☒ Check

Check No. 20991

Name(s) on Check: Loen Nursery Inc.

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

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If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,

OWRD Customer Service Staff

Submission received by: Aide Fink

(Name of OWRD staff)

Instructions for OWRD staff:

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
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