

Permit Amendment RA

Name Robert Gabriel

Address 8474 Hazelgreen Rd NE
Silverton, OR 97381

Change in APOA
Date Filed 12/26/2023
Initial notice date 1/4/2024
DPD issued date
PD issued date
PD notice date
Date of FO Vol Page

C-Date
COBU due date
COBU Received date
Certificate issued

DESCRIPTION OF WATER RIGHT(s)

Name of Stream A well
Trib. of Pudding River Basin
Use Irrigation County Clackamas
Quantity of water (CFS) No. of Acres
Name of ditch
App# G-17988 Per # G-18878 Cert # PR Date 1-27-2015
App# Per # Cert # PR Date
App# Per # Cert # PR Date
App# Per # Cert # PR Date
App# Per # Cert # PR Date

FEES PAID		
Date	Amount	Receipt #
12-26-2023	\$1,840.00	142160
12-26-2023	\$125.00	142148
1-23-2024	\$1,596.72	142269

FEES REFUNDED		
Date	Amount	Receipt #

Assignments:

Irrigation District

Agent Pacific Hydro-Geology, Inc
Doann Hamilton phgdmh@gmail.com

CWRE
CC's list

☐ - Oversized map - Location



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

November 26, 2024

Robert W. Gabriel
8474 Hazelgreen Rd NE
Silverton, OR 97381

REFERENCE: Permit Amendment Application T-14374

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, Dante Luongo, by telephone at (971) 304-5006 or by e-mail at Dante.j.luongo@water.oregon.gov.

Sincerely,

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

cc: Gregory J. Wacker, Watermaster Dist. # 16 (via email)
Doann Hamilton, Agent

Enclosure

BEFORE THE WATER RESOURCES DEPARTMENT
OF THE
STATE OF OREGON

In the Matter of Permit Amendment)	FINAL ORDER
T-14374, Clackamas County)	APPROVING AN ADDITIONAL 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

ROBERT W. GABRIEL
8474 HAZELGREEN RD NE
SILVERTON, OR 97381

Findings of Fact

1. On December 26, 2023, ROBERT W. GABRIEL filed an application for an additional point of appropriation under Permit G-18878. The Department assigned the application number T-14374.
2. Notice of the application for the permit amendment was published in the Department's weekly notice on January 9, 2024, and in the Wilsonville Spokesman newspaper on October 10 and October 17, 2024, pursuant to ORS 540.520(5).
3. Permit Amendment Application T-14374 proposes an additional point of appropriation with the following approximate distances from the existing points of appropriation to:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances	Distance From Authorized Wells
3 S	1 E	WM	30	NW SW	WELL 9 - 3100 FEET SOUTH AND 1380 FEET EAST FROM THE NW CORNER OF SECTION 30	WELL 2 - 1430 FEET SE WELL 3 - 1430 FEET S WELL 4 - 850 FEET S WELL 5 - 2700 FEET NE WELL 6 - 1400 FEET S WELL 8 - 1430 FEET SW

Permit Amendment Review Criteria

4. The change, as conditioned, would not result in injury to other water rights.

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. The change, as conditioned, does not enlarge the permit.
6. The change does not alter any other terms of the permit.

Conclusions of Law

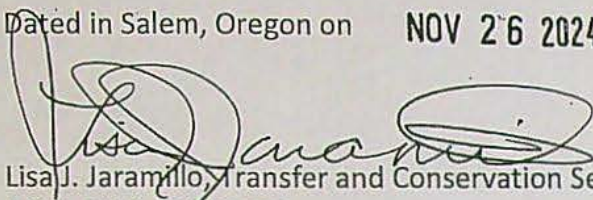
The additional point of appropriation proposed by Permit Amendment Application T-14374 is consistent with the requirements of ORS 537.211.

Now, therefore, it is ORDERED:

1. The additional point of appropriation proposed by Permit Amendment Application T-14374 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-18910, in the name of ROBERT W. GABRIEL, is issued to replace Permit G-18878, and incorporates the amendments approved by this order. Permit G-18878, in the name of BOB GABRIEL, is no longer of any force or effect.
4. The combined quantity of water diverted at the new additional point of appropriation (Well 9), together with that diverted at the original points of appropriation (Wells 2, 3, 4, 5, 6, and 8), shall not exceed the quantity of water lawfully available at the original points of appropriation (Wells 2, 3, 4, 5, 6, and 8).
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 point of appropriation (new and existing).
 - 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 points of appropriation.

7. All other terms and conditions of Permit G-18910 remain the same.

Dated in Salem, Oregon on **NOV 26 2024**



Lisa J. Jaramillo, Transfer and Conservation Section Manager, for
IVAN GALL, DIRECTOR
Oregon Water Resources Department

Mailing Date: **NOV 27 2024**

STATE OF OREGON

COUNTY OF CLACKAMAS

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

BOB GABRIEL
8474 HAZELGREEN RD NE
SILVERTON, OR 97381

This superseding permit is issued to describe an amendment for an additional point of appropriation proposed under Permit Amendment T-14374 and approved by Special Order Vol. 133, Page 379, entered NOV 26 2024, and to describe a scrivener's error in the source of water and well locations approved by Special Order Vol. 128, Page 553, an amendment for additional points of appropriation and a change in point of appropriation proposed under Permit Amendment Application T-13866 approved by Special Order Vol. 129, Page 140, entered October 4, 2023, to describe a partial cancellation and partial diminution approved by Special Order Volume 120, Pages 996 – 1004, and to describe an extension of time for complete application of water approved October 15, 2021. This permit supersedes Permit G-18878.

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

APPLICATION FILE NUMBER: G-17988

SOURCE OF WATER: WELL 2, WELL 3 (CLAC 20355), WELL 4 (CLAC 20344), WELL 5, WELL 6, WELL 8, AND WELL 9 IN PUDDING RIVER BASIN

PURPOSE OR USE: PRIMARY IRRIGATION OF 25.44 ACRES, PRIMARY IRRIGATION TO MAKE UP A DEFICIENCY IN RATE ON 124.37 ACRES, AND SUPPLEMENTAL IRRIGATION OF 8.40 ACRES

MAXIMUM RATE: 0.399 CUBIC FOOT PER SECOND (CFS); BEING 0.379 CFS FOR PRIMARY IRRIGATION, AND PRIMARY IRRIGATION TO MAKE UP A DEFICIENCY IN RATE, AND 0.02 CFS FOR SUPPLEMENTAL IRRIGATION

PERIOD OF USE: MARCH 1 THROUGH OCTOBER 31

DATE OF PRIORITY: JANUARY 27, 2015

WELL LOCATIONS:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
3 S	1 E	WM	30	SW NE	WELL 5 – 1645 FEET SOUTH AND 1605 FEET WEST FROM THE NE CORNER OF SECTION 30

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
3 S	1 E	WM	30	SW NW	WELL 2 – 2470 FEET SOUTH AND 75 FEET EAST FROM THE NW CORNER OF SECTION 30
3 S	1 E	WM	30	SW NW	WELL 3 - 1560 FEET SOUTH AND 1400 FEET EAST FROM THE NW CORNER OF SECTION 30
3 S	1 E	WM	30	SW NW	WELL 4 - 2170 FEET SOUTH AND 1400 FEET EAST FROM THE NW CORNER OF SECTION 30
3 S	1 E	WM	30	SE NW	WELL 6 – 1560 FEET SOUTH AND 1560 FEET EAST FROM THE NW CORNER OF SECTION 30
3 S	1 E	WM	30	NW SW	WELL 8 – 3785 FEET SOUTH AND 220 FEET EAST FROM THE NW CORNER OF SECTION 30
3 S	1 E	WM	30	NW SW	WELL 9 - 3100 FEET SOUTH AND 1380 FEET EAST FROM THE NW CORNER OF SECTION 30

The amount of water used for nursery use under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second and 2.5 acre-feet for each acre irrigated during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

PRIMARY IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
3 S	1 E	WM	30	SW NW	25.44

PRIMARY IRRIGATION TO MAKE UP DEFICIENCY IN RATE					
Twp	Rng	Mer	Sec	Q-Q	Acres
3 S	1 E	WM	30	NE NE	6.81
3 S	1 E	WM	30	NW NE	2.41
3 S	1 E	WM	30	SW NE	27.30
3 S	1 E	WM	30	SE NE	14.62
3 S	1 E	WM	30	SW NW	2.13
3 S	1 E	WM	30	SE NW	38.21
3 S	1 E	WM	30	NE SW	31.12
3 S	1 E	WM	30	NW SW	1.77
TOTAL					124.37

SUPPLEMENTAL IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
3 S	1 E	WM	30	SW NW	8.40

Permit Amendment T-14374 Conditions:

The combined quantity of water diverted at the new additional point of appropriation (Well 9), together with that diverted at the original points of appropriation (Wells 2, 3, 4, 5, 6, and 8), shall not exceed the quantity of water lawfully available at the original points of appropriation (Wells 2, 3, 4, 5, 6, and 8).

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

- point of appropriation (new and existing).
- 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 points of appropriation.

Permit Amendment T-13866 Conditions:

The quantity of water diverted at the new point of appropriation (Well 5), shall not exceed the quantity of water lawfully available at the original point of appropriation (Well 5).

The combined quantity of water diverted at the new additional point of appropriation (Well 6 and Well 8), together with that diverted at the old points of appropriation (Wells 1, 2, 3, 4, 5, and 7), shall not exceed the quantity of water lawfully available at the original points of appropriation (Wells 1, 2, 3, 4, 5, and 7).

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 point of appropriation (new and existing).
- 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 points of appropriation.

Existing Permit Conditions:

Measurement devices, and recording/reporting of annual water use conditions:

- A. Before water use may begin under this permit, the permittee shall install a totalizing flow meter at each point of appropriation. The permittee shall maintain the device in good working order.
- B. The permittee shall allow the watermaster access to the 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.
- C. The permittee shall keep a complete record of the volume of water diverted each month, and shall submit a report which includes water-use measurements to the Department

annually, or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water-use information, including the place and nature of use of water under the permit.

- D. The Director may provide an opportunity for the permittee to submit alternative measuring and reporting procedures for review and approval.

Static Water Level Conditions

To monitor the effect of water use from the well(s) authorized under this permit, the Department requires the water user to obtain, from a qualified individual (see below), and report annual static water-level measurements. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.

Measurements must be made according to the following schedule:

Before Use of Water Takes Place

Initial and Annual Static Water Level Measurements

The Department requires the permittee to report an initial water-level measurement in the month specified above once well construction is complete, and annually thereafter until use of water begins; and

After Use of Water has Begun

Seven Consecutive Annual Static Water Level Measurements

Following the first year of water use, the user shall report seven consecutive annual static water-level measurements. The first of these seven annual measurements will establish the reference level against which future annual measurements will be compared. Based on an analysis of the data collected, the Director may require the user to obtain and report additional annual static water-level measurements beyond the seven year minimum reporting period. The additional measurements may be required in a different month. If the measurement requirement is stopped, the Director may restart it at any time.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board. Measurements and be submitted to the Department on forms provided by the Department. The Department requires the individual performing the measurement to:

- A. Identify each well with its associated measurement;
- B. Measure and report water levels to the nearest tenth of a foot as depth-to-water below ground surface;
- C. Specify the method used to obtain each well measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

The water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s) if any of the following events occur:

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

The period of non-use or restricted use shall continue until the water level rises above the decline level which triggered the action or until the Department determines, based on the permittee's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or causing substantial interference with senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

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

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

STANDARD CONDITIONS

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

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

The well(s) 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 adequate to determine water-level elevation in the well at all times.

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

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

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

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

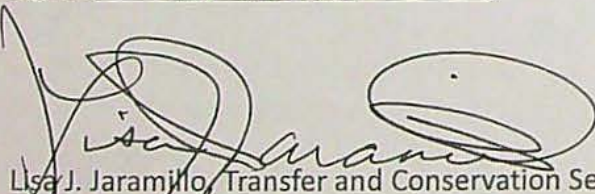
This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

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

The original permit was issued March 22, 2016. Complete application of the water to the use was to be made on or before March 22, 2021. By Extension of Time Final Order dated October 15, 2021, complete application of the water to the use is to be made on or before October 1, 2026. If beneficial use of permitted water has not been made before this date, the permittee may submit an application for extension of time, which may be approved based upon the merit of the application.

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

Signed NOV 26 2024 ;



Lisa J. Jaramillo, Transfer and Conservation Section Manager, for
IVAN GALL, DIRECTOR
Oregon Water Resources Department

PERMIT AMENDMENT COVER SHEET

Transfer: T-14374

Permit Amendment Specialist:

Transfer Type: Permit Amendment Transfer

Reimbursement Authority? ☒

Sanje Lugo

Applicant: Robert W. Gabriel 8474 Hazelgreen Rd NE Silverton, OR 97381	Agent: Doann Hamilton 18487 S Valley Vista Rd Mulino, OR 97042	CWRE:
Irrigation District:	Affected Local Gov'ts:	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"/>	G-18878 G-17988	G-18878	G-18910
<input type="checkbox"/>			
<input type="checkbox"/>			

Key Dates & Initial Actions (Support Staff)

Rec'd: December 26, 2023	Proposed Action(s): ADDITIONAL POINT OF APPROPRIATION	
Fees Pd: 1840.00	Acknowledgement Letter Sent <input checked="" type="checkbox"/>	Basin: 2 Willamette
Initial Public Notice: 1/9/2024	County sent cc: of Ack Letter <input type="checkbox"/>	County: CLACKAMAS
WM District: 16 Gregory J. Wacker	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 checked="" type="checkbox"/>	Name of Newspaper:
Newspaper notice sent to coordinator: <i>Yes</i>	Newspaper notice quote requested (NRS1): <i>Yes</i>
Request for news \$ sent: <i>\$60.00</i>	News \$ received: <i>\$60.00</i>
Affidavit of publication received: <i>Yes</i>	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: <i>6-1-24</i> Initials: <i>02</i>	Date: <i>6-10-24</i> Initials: <i>AD</i>	Date: <i>9-10-24</i> Initials: <i>CC</i>	Date: <i>9-20-24</i> Initials: <i>Hz</i> Data Review Date: <i>11-14-24</i>	Date: <i>11-14-24</i> WM Sheet <input checked="" type="checkbox"/> ODFW Sheet: <input checked="" type="checkbox"/> No. of docs for sig: <i>2</i>	Date: <i>11/26/24</i>

Special Issues: _____

Special Order Volume: Vol. *133* Pages *379-381*

14374 -

RECEIPT # 143911

INVOICE #

RECEIVED FROM: Gabriel Farms, Inc. DBA;
BY: Oregon Blueberry Farms & Nursery
CASH: ☐ CHECK: # 27513 OTHER: (IDENTIFY) ☐
TOTAL REC'D \$ 60.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES 46118 \$
OTHER: (IDENTIFY) Newspaper Notice \$ 60.00
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: EXAM FEE RECORD FEE
0201 SURFACE WATER \$ 0202 \$
0203 GROUND WATER \$ 0204 \$
0205 TRANSFER \$
WELL CONSTRUCTION EXAM FEE LICENSE FEE
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 # 143911

INVOICE #

RECEIVED FROM: Gabriel Farms, Inc. DBA;
BY: Oregon Blueberry Farms & Nursery
CASH: ☐ CHECK: # 27513 OTHER: (IDENTIFY) ☐
TOTAL REC'D \$ 60.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES 46118 \$
OTHER: (IDENTIFY) Newspaper Notice \$ 60.00
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: EXAM FEE RECORD FEE
0201 SURFACE WATER \$ 0202 \$
0203 GROUND WATER \$ 0204 \$
0205 TRANSFER \$
WELL CONSTRUCTION EXAM FEE LICENSE FEE
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 \$

Checking Acct 1214 for T-14374 NOTICE 60.00

Received
SEP 30 2024
OWRD

Oregon Water Resources Department
Date 9/17/2024 Type Bill Reference T-14374 Notice
Original Amt. 60.00 Balance Due 60.00
9/25/2024 Discount
Check Amount Payment 60.00
27513



**Carpenter Media Group
OREGON**

NEW MAILING ADDRESS - P.O. Box 43, West Linn, Oregon 97068

P.O. Box 45 West Linn, OR 97068
Phone: 503-684-0360 Fax: 503-620-3433
E-mail: legals@commnewspapers.com

AFFIDAVIT OF PUBLICATION

State of Oregon, County of Clackamas, ss I,
Marc Caplan, being first duly sworn, depose
and say that I am the Public Notice Manager
of the Wilsonville Spokesman, a newspaper
of general circulation, published in Clack-
amas County, Oregon, as defined by ORS
193.010 and 193.020, that

Ad#: 339020

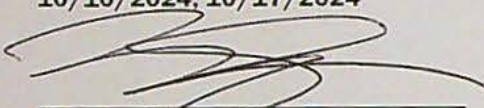
**Owner: Oregon Water Resources Depart-
ment**

**Description: Notice of Permit Amendment
T 14374**

SEE EXHIBIT A

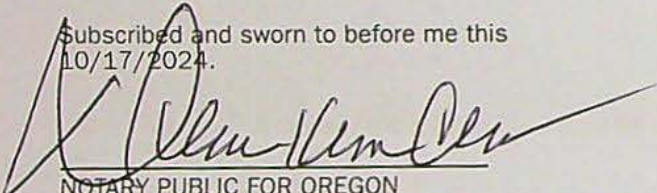
A copy of which is hereto annexed, was
published in the entire issue of said
newspaper for 2 week(s) in the
following issue:

10/10/2024, 10/17/2024



Marc Caplan (Public Notice Manager)

Subscribed and sworn to before me this
10/17/2024.



NOTARY PUBLIC FOR OREGON

Acct #: 149038

Attn: ELYSE D. RICHMAN

OREGON WATER RESOURCES DEPARTMENT
725 SUMMER STREET SE, SUITE A
SALEM, OR 97301



OFFICIAL STAMP
DESERI KIM CERRUTI
NOTARY PUBLIC - OREGON
COMMISSION NO. 1014575
MY COMMISSION EXPIRES JULY 18, 2025

EXHIBIT A

Notice of Permit Amendment T 14374

T-14374 filed by Robert W. Gabriel, 8474 Hazelgreen RD NE Silverton, OR 97381, proposes an additional point of appropriation under Permit G-18878. The permit allows the use of 0.399 cubic foot per second from 6 wells in Sec. 30, T3S, R1E, W.M. for irrigation and supplemental irrigation in Sec. 30, T3S, R1E, W.M. The applicant proposes an additional point of appropriation in Sec. 30, T3S, R1E, W.M. The Water Resources Department has concluded that the proposed permit amendment appears to be consistent with the requirements of ORS 537.211. The last date of newspaper publication is October 17, 2024.
Published Oct. 10 & 17, 2024.

WS339020

Groundwater Transfer Review Summary Form

Transfer/PA # T- 14374 RA

GW Reviewer Travis Brown Date Review Completed: 5/14/2024

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-14374

Applicant Name: Robert Gabriel

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

Reviewer(s): Travis Brown

Date of Review: 5/14/2024

Date Returned to WRSD: 5/14/2024

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: Applicant proposes to add one APOA well to Permit G-18878 because wells drilled at the POA locations of "Well 6" and "Well 8", authorized per T-13866, were dry.
 2. Will the proposed POA develop the same aquifer (source) as the existing authorized POA?
☒ Yes ☐ No Comments: The authorized POA wells are located on a terrace west of the Pudding River, range in total depth from 120 to 160 feet, and produce groundwater from confined alluvial sand and gravel deposits overlain by 40 feet or more of low-permeability silts and clays (Gannett and Caldwell, 1998). Proposed APOA Well 9 (CLAC 78289) has a total depth of 177 feet and produces from the same alluvial aquifer system.
 3. a) Is there more than one source developed under the right (e.g., basalt and alluvium)?
☐ Yes ☒ No Comments: All the authorized POA wells produce groundwater from the 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: The proposed APOA is not closer to neighboring ground water rights.

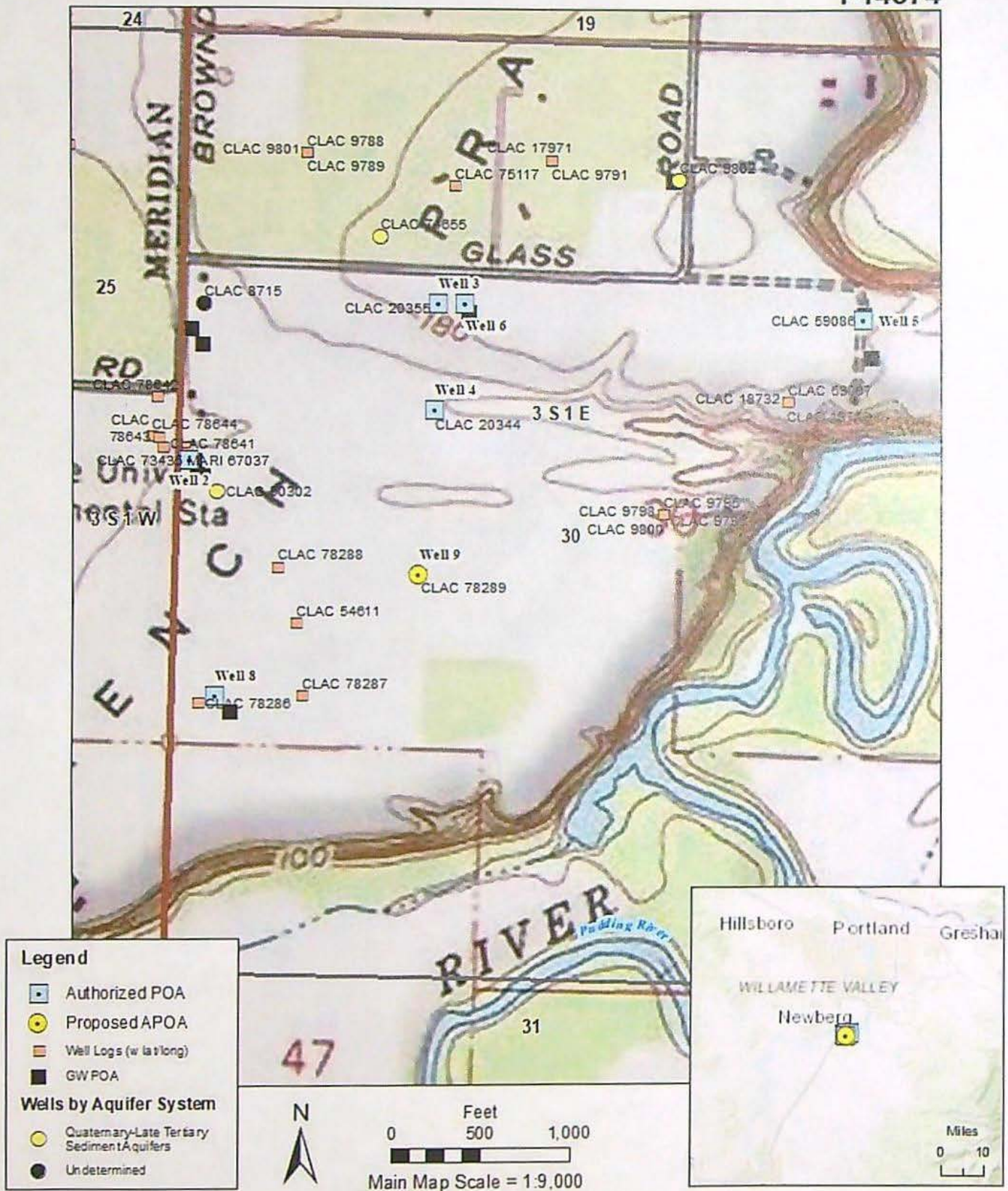
- b) If yes, would this proposed change, at its maximum allowed rate of use, likely result in another groundwater right not receiving the water to which it is legally entitled?
☐ Yes ☐ No If yes, explain: N/A
5. a) Will this proposed change, at its maximum allowed rate of use, likely result in an increase in interference with **another surface water source**?
☐ Yes ☒ No Comments: The proposed APOA is not closer to the nearest surface water (the Pudding River) compared to the closest authorized POA (Well 5/CLAC 59086).
- 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
Provide context for minimal/significant impact: N/A
6. 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
7. What conditions or other changes in the application are necessary to address any potential issues identified above: None
8. Any additional comments: None

References

Gannett, M.W. and Caldwell, R., 1998, Geologic framework of the Willamette Lowland aquifer system, Oregon and Washington, Professional Paper 1424-A, 32 p: U. S. Geological Survey, Reston, VA.

Well Location Map

T-14374



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-14374

Review Due Date: 02/03/2024

Applicant Name: Robert W. Gabriel

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

Reviewer(s): G. Wacker

Date of Review: 01/24/2024

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:
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:

☐ Weir
☐ Parshall Flume
☐ Other: ____

☐ Submerged Orifice
☐ Flow Restrictor

Oregon Water Resources Department

Measurement Condition Information for the Applicant

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

Transfer #: T- 14374



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: Greg Wacker

District: 16

Address: 725 Summer St NE Ste A

City/State/Zip: Salem, OR 97301

Phone: 971-719-6262

Email: gregory.j.wacker@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

**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 # **142148**

INVOICE # _____

RECEIVED FROM: Gabriel Farms Inc. dba Oregon Blueberry Farms & Nursery

BY: _____

CASH: ☐

CHECK: #

OTHER: (IDENTIFY) _____

☐
☒

26571

☐

APPLICATION

PERMIT

TRANSFER

T-14374

TOTAL REC'D

\$ 125.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES

0412 OTHER: _____

(IDENTIFY) _____

0243 I/S Lease _____

0244 Muni Water Mgmt. Plan _____

0245 Cons. Water _____

\$

\$ 125.00

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

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR

LANDOWNER'S PERMIT

OTHER

(IDENTIFY) _____

EXAM FEE

\$

\$

\$

EXAM FEE

\$

0202

0204

0219

0220

RECORD FEE

\$

\$

LICENSE FEE

\$

\$

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE

0210 MONITORING WELLS

OTHER

(IDENTIFY) _____

\$

\$

CARD#

CARD#

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: **142148**

DATED: 12-26-2023

BY: _____



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 Personnel before submitting this request; as the application fee is a non-refundable \$125.00 fee per request. Checks submitted for this application should 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 <u>NA</u>

	Applicant Information	Applicant's Representative/Contact
Name:	<u>Robert W. Gabriel</u>	Pacific Hydro-Geology, Inc. c/o Doann Hamilton
Address:	<u>8474 Hazelgreen Rd NE</u>	<u>18487 S. Valley Vista Road</u>
	<u>Silverton, OR 97381</u>	<u>Mulino, OR 97042</u>
Phone:	<u>(503) 873-1200</u>	<u>(503) 349-6946 cell</u>
Fax:		<u>(503) 632-5983</u>
E-Mail Address:		<u>phgdmh@gmail.com</u>

I understand the following:

- 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 OWRD will, within fourteen (14) days, notify me in writing of the estimates of costs and time frame for the expedited service.
- 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.
- An incomplete or inaccurate application may delay the process and increase the cost to process my request.
- Expedited processing does not guarantee a favorable review of my request.
- Send completed Application and payment to:

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

I certify that I am the (check one):

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

Name: Robert Gabriel

Signature: [Signature]

RECEIVED

DEC 26 2023

OWRD

OWRD USE ONLY: Reimbursement Authority Number: R11- 475-23-25



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

January 4, 2024

Robert W. Gabriel
8474 Hazelgreen Rd NE
Silverton, OR 97381

Reference: Application T-14374

On December 26, 2023, OWRD received your water right Permit Amendment Application. The application was accompanied by \$1840.00. Our receipt number 142160 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.

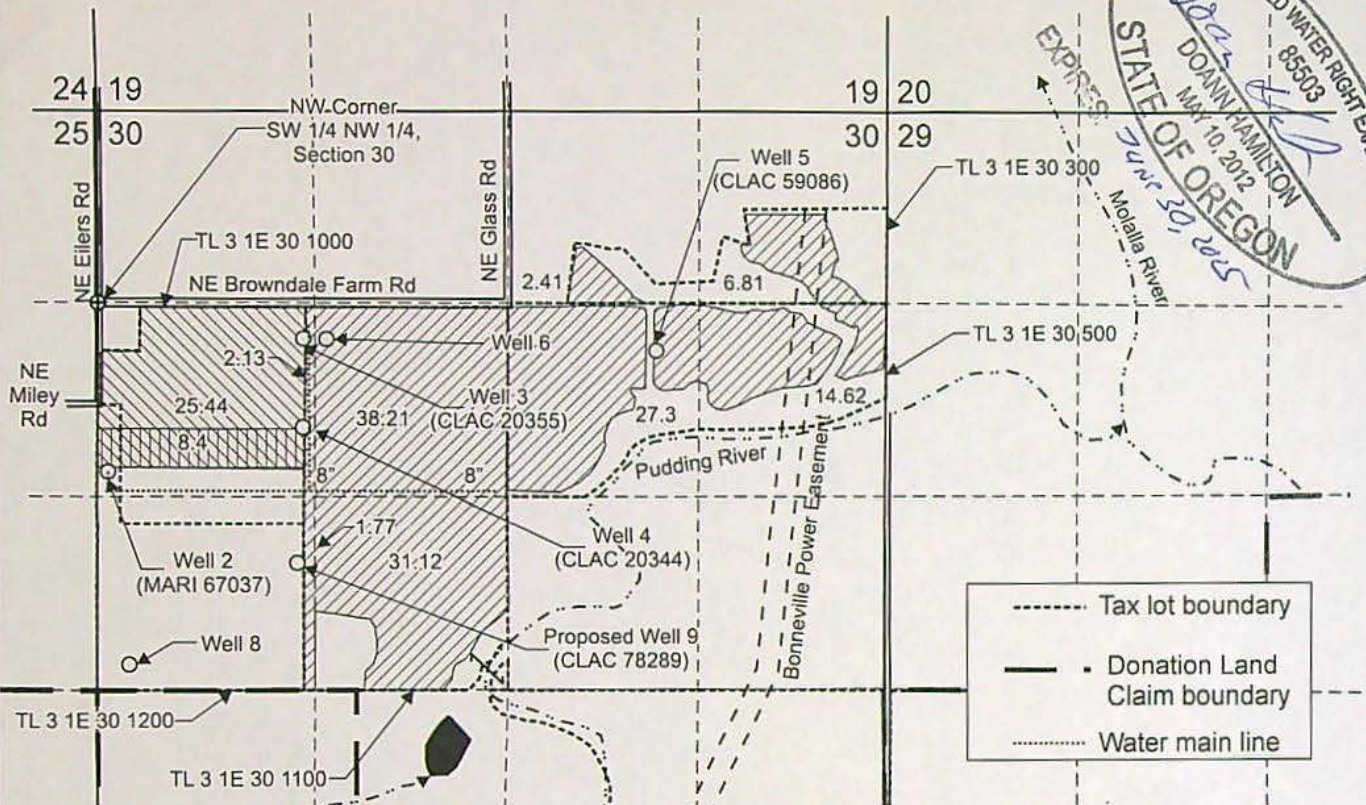
If you have any questions, please contact the Transfer Section at (503) 986-0935.

Cc: Watermaster Dist. #16, Gregory J. Wacker (via email)
Doann Hamilton, Agent




Enclosure

14374 -

T.3S. R.1E. Section 30, W.M.



Well 2 (MARI 67037) is located 2,470 feet south and 75 feet east from the NW corner, Section 30.
 Well 3 (CLAC 20355) is located 1,560 feet south and 1,400 feet east from the NW corner, Section 30.
 Well 4 (CLAC 20344) is located 2,170 feet south and 1,400 feet east from the NW corner, Section 30.
 Well 5 (CLAC 59086) is located 1,645 feet south and 1,605 feet west from the NE corner, Section 30.
 Well 6 is located 1,560 feet south and 1,560 feet east from the NW corner, Section 30.
 Well 8 is located 3,785 feet south and 220 feet east from the NW corner, Section 30.
 Proposed Well 9 (CLAC 78289) is located 3,100 feet south and 1,380 feet east from the NW corner, Section 30.

-  Area (25.44 Acres) of primary irrigation under Application G-17988, Permit G-18878, T-13866, priority date: 1-27-2015.
-  Area (124.37 Acres) of primary irrigation under Application G-17988, Permit G-18878, T-13866, to make up deficiency in rate, priority date: 1-27-2015.
-  Area (8.4 Acres) diminished to supplemental irrigation under T-13112.

RECEIVED
DEC 26 2023
0113



Scale: 1" = 1,320'



0 1,320 Feet

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.

Pacific Hydro-Geology Inc.

Permit Amendment Map
 Application G-17988, Permit G-18878, T-13866

Bob Gabriel
 T.3S. R.1E. Section 30, W.M.

11/2023

14374 -

**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 # **142160**

INVOICE # _____

RECEIVED FROM: Gabriell Farms Inc. dba

BY: Oregon Blueberry Farms & Nursery

CASH: ☐

CHECK: #

OTHER: (IDENTIFY) _____

APPLICATION

PERMIT

TRANSFER

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:

EXAM FEE

RECORD FEE

0201 SURFACE WATER

\$

0202

\$

0203 GROUND WATER

\$

0204

\$

0205 TRANSFER

\$ 1,840.00

WELL CONSTRUCTION

EXAM FEE

LICENSE FEE

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: **142160**

DATE: 12-26-2023 BY: [Signature]

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.

RECEIVED

DEC 26 2023

OWRD

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

- ☒ 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. If you have questions, call Customer Service at (503) 986-0801.
- ☒ 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-18878
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):

- ☐ Application fee not enclosed/insufficient ☐ Map not included or incomplete
- ☐ Land Use Form not enclosed or incomplete
- ☐ Additional signature(s) required ☐ Part _____ is incomplete

Other/Explanation _____

Staff: _____ 503- _____ Date: ____/____/____

Part 2 of 5 – Permit Amendment Map Checklist

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.

RECEIVED

DEC 26 2023

OFFICE

- ☐ ☒ 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)	RECEIVED DEC 26 2023 OWEB	1	\$1,360
	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>			
2	Multiply line 2b by \$1090 and enter »		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 checked="" type="checkbox"/> Yes: multiply the number of additional wells by \$410 <u>\$0 (4b)</u> 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:

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

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Robert W. Gabriel			PHONE NO. (503) 873-1200	ADDITIONAL CONTACT NO.
ADDRESS 8474 Hazelgreen Rd NE			FAX NO.	
CITY Silverton	STATE OR	ZIP 97381	E-MAIL	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

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

AGENT/BUSINESS NAME Doann Hamilton / Pacific Hydro-Geology, Inc.			PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946 (cell)
ADDRESS 18487 S. Valley Vista Road			FAX NO. (503) 632-5983	
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this permit amendment; and why:

The wells approved under T-13866 were dry and we need to add an additional well where we have been able to find water.

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: Wilsonville Spokesman

RECEIVED

DEC 26 2023

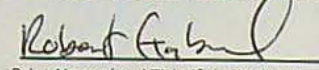
OW PD



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


Applicant Signature

Applicant Signature


Print Name (and Title if applicable)

Print Name (and Title if applicable)

11/16/23
Date

Date

Check one of the following:

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

Check the appropriate box, if applicable:

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

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 Clackamas Co. Department of Transportation and Development, Planning Division	ADDRESS 150 Beaver Creek Road	
CITY Oregon City	STATE Oregon	CITY Oregon City

RECEIVED

DEC 26 2023

OWED

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.

PERMIT # G-18878

RECEIVED

DEC 26 2023

OWRD

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 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 67037	3 S	1 E	30	SW NW	TL 1200	2,470 feet south and 75 feet east from the NW corner, Section 30.
Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	CLAC 20355	3 S	1 E	30	SW NW	TL 1000	1,560 feet south and 1,400 feet east from the NW corner, Section 30.
Well 4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	CLAC 20344	3 S	1 E	30	SW NW	TL 1000	2,170 feet south and 1,400 feet east from the NW corner, Section 30.
Well 5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	CLAC 59086	3 S	1 E	30	SW NE	TL 500	1,645 feet south and 1,605 feet west from the NE corner, Section 30.
Well 6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NA	3 S	1 E	30	SE NW	TL 1100	1,560 feet south and 1,560 feet east from the NW corner, Section 30.
Well 8	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NA	3 S	1 E	30	NW SW	TL 1200	3,785 feet south and 220 feet east from the NW corner, Section 30.
Well 9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CLAC 78289	3 S	1 E	30	NW SW	TL 1200	3,100 feet south and 1,380 feet east from the NW corner, Section 30.

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

RECEIVED

DEC 26 2023

O'D

Additional remarks: The places of use and well locations were described to correlate with the descriptions in the Final Order for T-13112.

RECEIVED
DEC 26 2023
OWED

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

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.

RECEIVED
DEC 26 2023
OWRD

14374 -

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L- _____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
Well 2	Yes	MARI 67037	SEE WELL LOG MARI 67037							0.399 CFS TOTAL FOR ALL WELLS NOT LESS THAN FULL RATE FOR ALL WELLS COMBINED
Well 3	Yes	CLAC 20355	SEE WELL LOG CLAC 20355							
Well 4	Yes	CLAC 20344	SEE WELL LOG CLAC 20344							
Well 5	Yes	CLAC 59086	SEE WELL LOG CLAC 59086							
Well 6	No	NA	180 feet	12 inch	TBD	TBD	TBD	NA	Alluvial	
Well 8	No	NA	180 feet	12 inch	TBD	TBD	TBD	NA	Alluvial	
Well 9	No	CLAC 75289	180 feet	12 inch	TBD	TBD	TBD	NA	Alluvial	

RECEIVED**DEC 26 2023****OWRD**

MARI 67037
Westerberg Drilling, Inc.
36728 S. Kropf Rd.
Metalla, OR 97038

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

WELL I.D. LABEL# L 127210
START CARD # 214193
ORIGINAL LOG #

(1) LAND OWNER
First Name Robert Owner Well I.D. #1
Last Name Gabriel
Company
Address 8474 Hazelgreen Rd
City Silverton State OR Zip 97381

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

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard ☐ (Attach copy)
Depth of Completed Well 160 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
16	0	46	Bentonite	0	32	468	S
12	46	163			Calculated	22	
6	163	236	Cement	32	46	105	S
					Calculated	7	

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

Backfill placed from 175 ft. to 236 ft. Material cement

Filter pack from 97 ft. to 175 ft. Material css Size 6/9

Explosives used: ☐ Yes Type Amount

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

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stil Plstc Wld Thrd
☒ ☐ 12 ☒ 2 97 250 ☒ ☐ ☒ ☐
☐ ☐ 8 ☐ 55 95 250 ☐ ☐ ☒ ☐
☐ ☐ 8 ☐ 155 160 250 ☐ ☐ ☒ ☐
Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 16
Temp casing ☒ Yes Dia 16 From + ☒ 1 To 46

(7) PERFORATIONS/SCREENS
Perforations Method v wire
Screens Type Material stainless
Perf/S Casing/ Screen
Screen Liner Dia From To Scrn/slot Slot # of Tel/
width length slots pipe size
Screen 8 95 155 .065 8 8

(8) WELL TESTS: Minimum testing time is 1 hour
☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
400 43
Temperature 55 °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS amount 117 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County CLACKAMAS Twp 3 S N/S Range 1 E E/W WM
Sec 30 NW 1/4 of the SW 1/4 Tax Lot 1000
Tax Map Number Lot
Lat " or " DMS or DD
Long " or " DMS or DD
☒ Street address of well ☐ Nearest address
25130 Eilers Rd., Aurora

(10) STATIC WATER LEVEL
Date SWL (psi) + SWL (ft)
Existing Well / Pre-Alteration
Completed Well 09-06-2017 43
Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 43
SWL Date From To Est Flow SWL (psi) + SWL (ft)

			400		43
all water bearing zones below SWL					

(11) WELL LOG Ground Elevation
Material From To
soil brown 0 1
silt brown 1 20
sand brown with some gravel 20 24
silt brown 24 35
sand brown 35 38
silt brown 38 48
silt & sand brown 48 63
sand brown fine 63 84
sand brown with gravel 84 89
sand black with gravel 89 112
packed silt grey hard 112 116
clay green 116 118
sand grey blue 118 128
sand grey & green 128 141
packed silt grey 141 145
sand grey 145 154
clay grey with sand 154 156
clay green & grey sticky 156 174
clay brown & grey 174 200
RECEIVED BY OWRD
OCT 02 2017
SALEM, OR

Date Started 06-07-2017 Completed 09-06-2017

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number 358 Date 09-22-2017
Signed *[Signature]*

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 688 Date 09-22-2017
Signed *[Signature]*
Contact Info (optional) NOV 13 2017

Westerberg Drilling, Inc.
46728 S. Kropf Rd.
Molalla, OR 97038

WELL I.D. LABEL# L127210

START CARD # 214193

ORIGINAL LOG #

[illegible]

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	
					Calculated	
					Calculated	
					Calculated	
					Calculated	
					Calculated	

From	To	Material	Size

[illegible][illegible]

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

From	To	Description	Amount	Units

[illegible][illegible]

Comments/Remarks

MARI 67037**RECEIVED****DEC 26 2023****OWRD**Oregon Water Resources Department
PUMP TEST FORM COVER SHEET**Well Owner:**Name: Robert GabrielAddress: 8474 Hazelgreen RdCounty: ClackamasCity: Silverton

Original owner (from well log): _____

State: OR Zip: 97381**Well Location:**Township: 3 S Range: 1 ESection: 30 $\frac{1}{4}$ SW $\frac{1}{16}$ NW $\frac{1}{64}$ NEWell depth: 160.0 Date drilled: 9/6/17

Owners well no. (if any): _____

POD ID: _____

Water Right Information:

Application: _____

Permit: _____

Certificate: _____

Is this well listed on more than one water right? ☐ Yes If yes, list additional water rights below:

Application: _____

Permit: _____

Certificate: _____

Application: _____

Permit: _____

Certificate: _____

Pump Test:Test Conducted by: Steve StadeliWell Owner? ☐ YesCompany: Westerberg Drilling IncAddress: 36728 S. Kropf RdDate of Test: 08/17/2017City: MolallaState: ORZip: 97038Daytime phone: 503-829-2526Method of discharge measurement (see our brochure for more information): Flow meterMethod of water-level measurement (pick one or enter other method used): Electric tape

Length of air line (if used): _____

Pump type (pick one or enter other method used): Submersible 30 hpWas the pump test conducted during normal use of the well? ☐ Yes Note: new well testAre you aware of any wells, other than domestic or stock wells, pumping within 1000 feet of the tested well during the test or within 24 hours prior to the test? ☐ Yes Note: no

If yes, give approximate distances to each and approximate pumping rate of each. If possible, indicate if they were turned on or off during the test: _____

Is there a lake, stream or other surface water body within $\frac{1}{4}$ mile of the tested well? ☐ Yes If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head. Approx. distance: _____ ft Approx. elevation difference: _____ ft

Well elevation is _____ surface water body.

Description of measuring point (e.g. top port of 1 inch port pipe, west side) _____

3/4" pvc pipe @ well headMeasuring point distance above land surface 3.00 feet.**Static water level measurements:** (A minimum of three measurements are required in the hour before pumping begins at no less than 20 minutes apart):

Time	Depth to water below meas. point	Depth to water below land surface
<u>10:20 am</u>	<u>45.20</u>	<u>42.50</u>
<u>10:40 am</u>	<u>45.30</u>	<u>42.30</u>
<u>11:00 am</u>	<u>45.20</u>	<u>42.20</u>

Discharge measurements: (A discharge measurement is required at the start of pumping and at least once an hour during the test; additional measurements should be noted on the Pump Test Data Sheet):

Time	Discharge Rate	Discharge Units (e.g. gpm, cfs, etc)
<u>11:00 am</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>
<u>12:00 pm</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>
<u>1:00 pm</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>
<u>2:00 pm</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>
<u>3:00 pm</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>

Time pump turned on: _____

Date 08/17/2017Time 11:00 am

Time pump turned off: _____

Date 08/17/2017Time 5:00 pmTotal pumping time: 6 hours 0 minutes**Note:** Well must be idle for at least 16 hours prior to the test.Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

OWRD 2/9/2000

Required Signature: _____

Steve N. Stadeli**RECEIVED BY OWRD****NOV 13 2017****SALEM, OR**

14374 -

RECEIVED

35/1E/30

RECEIVED

JUN 23 1995

Page 1 of 2

DEC 26 2023

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPARTMENT (START CARD) # 79223

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

(1) OWNER: Well Number #1
Name TOM THOMSEN
Address 25355 NE GLASS RD.
City AURORA State OR Zip 97002

(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 130 ft.
Explosives used ☐ Yes ☒ No Type Amount

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
13 1/2"	0	130	cement/gel	0	25'	16 sks.
			drill gel	25	75	----
			cement	75	85	3 sks.
8"	130	343	see #12			12 sks.

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

Backfill placed from ft. to ft. Material
Gravel placed from 85 ft. to 130 ft. Size of gravel #8 sand

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8"	+1	101	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	125	130	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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:

☐ Perforations Method
☒ Screens Type slotted Material stainless steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
101	125	3/64		8"	pipe	<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"/>

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
110		100'	1 hr.

Temperature of water 53°F 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: 0' 20'
County Clackamas Latitude Longitude
Township 3S N or S Range 1E E or W. WM.
Section 30 1/4 1/4
Tax Lot Lot Block Subdivision
Street Address of Well (or nearest address) Tom Thomsen
25355 NE Glass Rd., Aurora, OR 97002

(10) STATIC WATER LEVEL:
62 ft. below land surface. Date 6-17-95
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:
Depth at which water was first found 101'

From	To	Estimated Flow Rate	SWL
101	123	110 gpm	62'

(12) WELL LOG:
Ground Elevation

Material	From	To	SWL
Topsoil	0	1	
Soft brown silty clay	1	24	
Fine-coarse brown sand	24	84	
Soft gray silty clay	84	88	
Fine-coarse sand	88	99	
Coarse gravel w/sand	99	106	62'
Fine-coarse sand w/pea gravel	106	117	"
Wood & gravel	117	123	62'
Sticky gray silty clay	123	134	
Sticky blue-gray & brown clay	134	146	
Sticky brn. & gray brn. clay	146	197	
Fine-coarse black sand	197	203	
Sticky gray & blue-gray clay	203		
w/soft streaks		343	
Well completed @ 130'			
Hole was abandon below 130'			
cement	343	330	3 sks.
gel	330	250	
cement	250	235	4 sks.

Date started 5-25-95 Completed 6-17-95

(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 Mel Bigsby WWC Number 1492 Date 6-20-95

(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 J. J. [Signature] WWC Number 1266 Date 6-20-95

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

14374

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

RECEIVED

Page 1 of 2

JUN 21 1995

(START CARD) # 79230

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

WATER RESOURCES DEPT.

SALEM, OREGON

RECEIVED

DEC 20 2023

(1) OWNER:

Well Number 2

Name TOM THOMSEN
Address 25355 N.E. GLASS RD.
City AURORA State OR Zip 97002

(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 120 ft.

Explosives used ☐ Yes ☒ No Type Amount

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
14 3/4"	0	90	cement	0	30	17 sks.
10"	90	120	drill gel	30	70	-----
			cement	70	90	11 sks.
8"	120	363	see #12			13 sks.

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

☐ Other

Backfill placed from ft. to ft. Material

Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10"	+1	91	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	83	92	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: 8"	98	104	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	116	120	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☒ Screens Type slotted Material stainless

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
92	98	.050		8"	pipe	<input type="checkbox"/>	<input checked="" type="checkbox"/>
104	116	.030		8"	pipe	<input type="checkbox"/>	<input checked="" 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
130	25'		4hr.

Temperature of water 53°F 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 Clackamas Latitude Longitude
Township 3S N or S Range 1E
Section 30 SW 1/4 NW 1/4
Tax Lot Lot Block Subdivision
Street Address of Well (or nearest address) Tom Thomsen
25355 N.E. Glass Rd., Aurora, 97002

(10) STATIC WATER LEVEL:

50' ft. below land surface. Date 6-14-95
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 92'

From	To	Estimated Flow Rate	SWL
92	98	-----	50'
105	116	130 gpm	50'

(12) WELL LOG:

Ground Elevation

Material	From	To	SWL
Topsoil	0	1	
Soft brown silty clay	1	16	
Soft brn. sandy clay w/sand	16		
seams		31	
Fine sand w/occ. pea gravel	31	40	
Brown clay	40	44	
Fine gray-brown sand w/clay	44		
streaks		64	
Fine gray-blk. & brn. sand	64	85	
Gray-brown silty clay	85	92	
Coarse gravel w/sand	92	98	50'
Sticky blue-gray clay	98	105	
Fine-coarse blk. sand w/pea	105		
gravel		116	50'
Sticky gray & gray-brn. clay	116	190	
Sticky blue-gray clay	190	194	
Soft gray clay w/occ. sand	194		
seams		243	
Sticky gray clay w/silty	243		
streaks		363	

Date started 6-2-95 Completed 6-14-95

(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 *Meli Biggs* WWC Number 1492 Date 6-16-95

(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 *[Signature]* WWC Number 1266 Date 6-16-95

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

14374 -

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

(1) LAND OWNER:

Well Number: _____
 Name: Thomas L. Thomsen
 Address: 25355 NE Glass Road
 City: Aurora State: OR Zip: 97002

(2) TYPE OF WORK:

(repair/

☒ New Well ☐ Deepening ☐ Alteration ☐ 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 ☒ NoDepth of Completed Well 263.2Explosives Used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			sacks or
Diameter	From	To	Material	From	To	pounds
16"	0	150	bent chps	0	1	2 bags
			cement	1	150	120 bags
12"	150	280				

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E☒ Other bent chips poured-probed

Backfill placed from _____ to _____ Material _____

Gravel placed from 177 to 280 Size of gravel 8-12 sand

(6) CASING/LINER:

CASING:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
12"	+18"	185	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	176.6	180.6	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	183.1	186.1	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	196.6	226.6	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

LINER:

8"	247.1	263.2	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
----	-------	-------	------	-------------------------------------	--------------------------	-------------------------------------	--------------------------

Drive Shoe used ☐ Inside ☒ Outside ☐ NoneFinal location of Shoe(s): 280' cut off

(7) PERFORATIONS/SCREENS:

☐ Perforations Method: _____☒ Screen Type: y-wire Material: stainless 304

From	To	Size	No.	Diameter	size	Casing	Liner
180.6	183.1	60		8"	pipe	<input type="checkbox"/>	<input checked="" type="checkbox"/>
186.1	196.6	50		8"	pipe	<input type="checkbox"/>	<input checked="" type="checkbox"/>
226.6	247.1	50		8"	pipe	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian
 Yield gpm Drawdown Drill Stem at Time

226	52'		1 hr.
216	67'		4 hr.

Temperature of water 55 Depth Artesian Flow Found _____

Was a water analysis done? _____ By whom: _____

Did any strata contain water not suitable for intended use? (explain)

Depth of Strata: _____

ARROW DRILLING 503-538-4422

WELL ID # L 61589
START CARD # 153779

(9) LOCATION OF WELL by legal description:

County: clack Latitude: _____ Longitude: _____
 Township: 3S Range: 1E
 Section: 30 SW 1/4 NE 1/4
 Tax Lot: 500 Lot: _____ Block: _____ Subdivision: _____
 Street Address of Well (or nearest address) intersection of
Browndale and Glass Roads

(10) STATIC WATER LEVEL:

110 Ft. below land surface Date 4/19/03
 Artesian pressure _____ lb. per sq. in. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 90'

From	To	Est. Flow Rate	SWL
90	112	10 to 15 gpm	dnm
187	194	100 to 150 gpm	110
238	246	50 to 100 gpm	110

(12) WELL LOG:

Ground Elevation: _____

Material	From	To	SWL
top soil	0	1	
brown silty sand	1	112	
green/blue clay	112	118	
tan clay w/tan sandstone	118	133	
tan sandstone w/a lot of wood	133	187	
course sand black w/small gravel	187	194	
blue gray clay sticky	194	221	
gray clay w/sand and small gravel	221	238	
sand gray	238	246	
clay gray stiff	246	280	

RECEIVED
 JUL 08 2003
 WATER RESOURCES DEPT
 SALEM, OREGON

RECEIVED
 DEC 26 2023
 0" 79

Date Started: 3/13/03Completed: 4/19/03

(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 _____

WWC Number 1483
 Date 7/5/03

CLAC 78289

STATE OF OREGON
WATER SUPPLY WELL REPORTWESTERBERG DRILLING INC.
PO BOX 1228WELL I.D. LABEL# 149583
START CARD # 1071152
ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

(1) LAND OWNER Owner Well I.D. #3 MOLALLA, OR 97038

First Name Robert Last Name Gabriel
Company
Address 8376 Hazelgreen Rd NE
City Silverton State OR Zip 97381(2) TYPE OF WORK ☒ New Well ☐ Deepening ☐ Conversion
☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Dia + From To Gauge Stl Plstc Wld Thrd
Casing: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Material From To Amt sacks/lbs
Seal: ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other(4) PROPOSED USE ☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☒ Other test well(5) BORE HOLE CONSTRUCTION Special Standard ☐ (Attach copy)

Depth of Completed Well 168 ft.

BORE HOLE			SEAL			sacks/lbs	
Dia	From	To	Material	From	To	Amt	lbs
10	0	18	Bentonite	0	18	9.5	S
6	18	177			Calculated	8	
			Cement	168	177	4	S
					Calculated	3	

How was seal placed: Method ☐ A ☒ B ☐ C ☐ D ☐ E☒ Other bent prd & probed

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Seal Placement Begin Date 8-30-23 Begin Time 16:00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount P Actual Amount P

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	<input checked="" type="checkbox"/>	3	153.2	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 170Temp casing ☒ Yes Dia 10 From +1 To 8

(7) PERFORATIONS/SCREENS

Perforations Method none

Screens Type none

Material

Perf/	Casing/Screen	Screen	Liner	Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/ pipe size
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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/Pump depth Duration (hr)

Temperature 56 °F Lab analysis ☐ Yes ByWater quality concerns? ☐ Yes (describe below) TDS amount 190 ppb

From	To	Description	Amount	Units
		water cased off		
		no flow test		

(9) LOCATION OF WELL (legal description)

County CLACKAM Twp 3 S N/S Range 1 E E/W WM

Sec 30 NE 1/4 of the SW 1/4 Tax Lot 1200

Tax Map Number Lot

Lat " or 45.280099 DMS or DD

Long " or -122.738590 DMS or DD

☒ Street address of well ☐ Nearest address

25130 Eilers Rd, Aurora, OR

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL (psi)	+ SWL (ft)
Completed Well	9-1-23		58.7

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 85

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
8-30-23	85	114	dnm		dnm
8-31-23	116	120	dnm		dnm
9-1-23	125	150	dnm		58.7
9-1-23	173	177	dnm		62

(11) WELL LOG

Ground Elevation

Material	From	To
soil	0	1
clay brown medium	1	20
silt brown	20	30
silt brown with sand	30	38
cemented gravel	38	39
gravel with silt	39	42
silt brown	42	70
sand brown	70	90
black sand with gravel	90	114
clay grey green	114	116
clay with green sand	116	120
clay grey	120	125
sand grey	125	150
clay green	150	160
siltstone green	160	165
clay grey green	165	173
packed sand & wood silty	173	177

Construction

Begin Date 8-30-23 Begin Time 15:15 End Date 9-1-23

(unbonded) Water Well Constructor Certification

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

License Number 1358

Date 10-3-23

Signed

(bonded) Water Well Constructor Certification

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

License Number 688

Date 10-3-23

Signed

Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK. Form Version:

14374 -

RECEIVED
OCT 10 2023
DWRD

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

Applicant(s): Robert W. Gabriel

Mailing Address: 8474 Hazelgreen Rd NE

City: Silverton

State: OR

Zip Code: 97381

Daytime Phone: (503) 873-1200

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:
3S	1E	30		300	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
3S	1E	30		500	EFU	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
3S	1E	30		1000	EFU	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR, IS
3S	1E	30		1100	EFU	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
3S	1E	30		1200	EFU	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR, IS

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

Clackamas 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: 0.339 ☒ 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 add a new point of appropriation for existing water right Permit G-18878.

RECEIVED

DEC 26 2023

0110

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

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): Zoning & Development Ordinance Section 401
- ☐ 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
	RECEIVED	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	DEC 26 2023	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	01 20	<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.

The irrigation approved by the County is only for recognized farm crops. No irrigation of marijuana is permitted without prior separate land use approval.

Name: Melissa Lord Title: Planner II

Signature: MLord Digitally signed by: MLord
DN: cn = MLord email =
vLord@clackamas.us
Date: 2023.12.20 16:33:31 -08'00' Phone: 503-742-4500 Date: 12/16/2023

Government Entity: Clackamas 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: _____

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 # 142269

INVOICE # _____

RECEIVED FROM: *Gabriel Farms, Inc. dba Oregon Blueberry Farms Nursery*

BY: _____

CASH: ☐ CHECK: # *26748* OTHER: (IDENTIFY) _____

APPLICATION _____
PERMIT _____
TRANSFER *T-14374*

TOTAL REC'D \$ *1,596.72*

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES *47124* \$ _____

0412 OTHER: (IDENTIFY) *Transfer from business authority* \$ *1,596.72*

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:

	EXAM FEE		RECORD FEE
0201 SURFACE WATER	\$ _____	0202	\$ _____
0203 GROUND WATER	\$ _____	0204	\$ _____
0205 TRANSFER	\$ _____		
WELL CONSTRUCTION	EXAM FEE		LICENSE FEE
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: 142269

DATED: *1-23-2024* BY: *[Signature]*

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

Checking Acct 1214

R11-475-25 to ammend T14374

1,596.72

RECEIVED
JAN 23 2024
OWRD

OREGON BLUEBERRY FARMS & NURSERY
Oregon Water Resources Department
Date 1/5/2024
Type Bill
Reference R11-475-25

Original Amt.
1,596.72

Balance Due
1,596.72

Check Amount

1/15/2024
Discount

Payment
1,596.72
1,596.72

26748

**REIMBURSEMENT AUTHORITY
APPLICANT'S AGREEMENT
Contract Number: R11-475-25**

RECEIVED

JAN 23 2024

OWRD

This Agreement is between the **Oregon Water Resources Department**, hereafter OWRD, and **Robert W. Gabriel**, hereafter Applicant, hereafter known together as the parties.

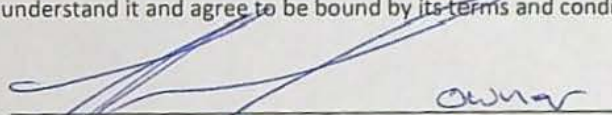
OWRD Information	Applicant's Information	Applicant's Representative
Contact: Kelly Starnes	Name: Robert W. Gabriel	Name: Pacific Hydro-Geology, Inc.
Title: Transfer Advisor	Contact:	Contact: Doann Hamilton
Address: 725 Summer Street, NE, Suite A Salem, OR 97301-1266	Address: 8474 Hazelgreen Rd NE Silverton, OR 97381	Address: 18487 S Valley Vista Rd Mulino, OR 97042
Phone: 503 979-3511	Phone: (503) 871-1200	Phone: (503) 349-6946 (cell)
Fax: 503 986-0901	Fax:	Fax: (503) 632-5983
Email: patrick.k.starnes@water.oregon.gov	Email:	Email: phgdmh@gmail.com

Purpose The purpose of this Agreement is to expedite the processing of the **Transfer Application**. (Application Number: **T-14374**)

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 **\$1,596.72**. Applicant agrees to pay the full amount of **\$1,596.72** 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:


Name/Title: owner

For OWRD:


Dwight French - Administrator

1/12/24
Date

JAN 24 2024
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- 14374

Reviewer <u>Stacy</u> Date <u>1-3-2024</u>	Type of Change(s) Proposed: <input type="checkbox"/> POU <input type="checkbox"/> POD <input type="checkbox"/> APOD <input type="checkbox"/> POA <input checked="" 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 \$ <u>1840.00</u>
Permit: <u>G-18878</u> Completion Date: <u>10-1-2026</u> Permit: Completion Date: Permit: 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
	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	0
	Number of permits included in Permit Amendment <u>1</u> (3a) Subtract 1 from the number in 3a above: <u>0</u> (3b) <i>If only one permit, this will be 0</i> Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » »	3	0
	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: enter \$480 for the 1st well to be added or changed <u>480</u> (4a) 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 <u>0</u> (4b)	4	480
	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » »	4	480
	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 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)	5	0
	Multiply 5c by \$410, then enter on line 5 » » » » » » » » » » » » » » » »	5	0
	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	1840
	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 »	7	0
	If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »	7	0
	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » Permit Amendment Fee:	8	1840