## Application for Permanent Water Right Transfer

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

### Part 1 of 4 - Minimum Requirements Checklist

		This transfer application will be returned if Parts 1 through 4 and all real attachments are not completed and included.  For questions, please call (503) 986-0900, and ask for Transfer Section.	equired Received
neck al	ll item	is included with this application. (N/A = Not Applicable)	AUG 2 2 2025
$\times$		Part 1 – Completed Minimum Requirements Checklist.	AUU 2 2 2023
$\times$		Part 2 – Completed Transfer Application Map Checklist.	OWRD
$\leq$		Part 3 – Completed Applicant Information and Signature.	
$\boxtimes$		Part 4 – Information about Water Rights to be Transferred: How many be transferred? 2 List them here: Certificate 80671 and 98444  Please include a separate Part 4 for each water right. (See instruction NOTE: A separate transfer application is required for each water right criteria in OAR 690-380-3220 are met.	ons on page 6)
$\leq$		<b>Application Fee</b> - payable by check to the Oregon Water Resources Defee calculator is located: <b>\$4,290.00</b>	partment, the online
		https://apps.wrd.state.or.us/apps/wr/wr transfer calculator/permane	ent transfer.aspx
		Attachments:	
$\boxtimes$		Completed Transfer Application Map.	
$\leq$		Completed Evidence of Use Affidavit and supporting documentation.	
	N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not ow right is on.)	on the land the wate
	N/A	Supplemental Form D – For water rights served by or issued in the name district. Complete when the transfer applicant is not the irrigation district.	
	] N/A	Oregon Water Resources Department's Land Use Information Form with signature from each local land use authority in which water is to be divardor used. Not required if water is to be diverted, conveyed, and/or lands or if <u>all</u> of the following apply: a) a change in place of use only, b) changes, c) the use of water is for irrigation only, and d) the use is local irrigation district or an exclusive farm use zone.	erted, conveyed, used only on federal no structural
$\boxtimes$	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (v point(s) of appropriation.	vell(s)) or additional
	] N/A	Geologist Report for a change from a surface water point of diversion to point of appropriation (well), if the proposed well is more than 500' from source and more than 1000' upstream or downstream from the point of 690-380-2130 for requirements and applicability.	om the surface water
		(For Staff Use Only)  E ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):  _ Application fee not enclosed/insufficient Map not included or incomple:  _ Land Use Form not enclosed or incomplete Evidence of Use Form not encl _ Additional signature(s) required Part is incomplete her/Explanation Date:/	

Your transfer application will be returned if any of the map requirements listed below are not met.

	sure that the transfer application map you submit includes all the required items and he existing water right map. Check all boxes that apply.
⊠ □ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see <a href="http://apps.wrd.state.or.us/apps/wr/cwre_license_view/">http://apps.wrd.state.or.us/apps/wr/cwre_license_view/</a> . CWRE stamp and signature are not required for substitutions.
	If more than three water rights are involved, separate maps are needed for each water right
$\boxtimes$	Permanent quality printed with dark ink on good quality paper.
$\boxtimes$	The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, $11 \times 17$ inches, or up to $30 \times 30$ inches. For $30 \times 30$ inch maps, one extra copy is required.
$\boxtimes$	A north arrow, a legend, and scale.
	The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), 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, $\frac{1}{4}$ , DLC, Government Lot, and other recognized public land survey lines.
$\boxtimes$	Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
	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 right, 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 water right is being changed, a separate hachuring is needed for lands left unchanged.
□ ⊠ N/A	Proposed place of use that includes separate hachuring for each water right, 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 right certificate or permit.
⊠ ∏ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32′15.5″) or degrees-decimal with five or more digits after the decimal (example – 42.53764°).
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#### Part 3 of 4 – Applicant Information and Signature

## Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.						
Robert W. Gabriel			(503) 873-1200							
ADDRESS				FAX NO.						
8474 Hazelgreen Rd NE										
CITY	STATE	ZIP	E-MAIL							
Silverton	OR	97381								
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 ager	nt is autho	rized to represent t	ho applicant in all mat	tors relating to this application
Agent information — The agen	it is autiloi	ized to represent t	ne applicant in all mat	ters relating to this application
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Doann Hamilton / Pacific Hydro-	Geology, In	(503) 632-5016	(503) 349-6946 (cell)	
ADDRESS				FAX NO.
18487 S. Valley Vista Road				(503) 632-5983
CITY	STATE	ZIP	E-MAIL	
Mulino	OR	97042	phgdmh@gmail.com	
BY PROVIDING AN E-MAIL ADDRES	s, consent	IS GIVEN TO RECEIVE	ALL CORRESPONDENCE F	ROM THE DEPARTMENT
ELECTRONICALLY. COPIES OF THE F	INAL ORDE	R DOCUMENTS WILL A	LSO BE MAILED.	
Explain in your own words what y	ou propose	e to accomplish with	this transfer applicatio	n, and why:
The additional wells were add	led to Per	mit G-18910 which	n was issued to make	up the deficiency in rate for
this water right. We are now	adding the	ese same wells to	Certificates 80371 an	d 98444.
If you need additional space, cont	tinue on a s	eparate piece of par	per and attach to the ap	oplication as "Attachment 1".

#### **Check One Box**

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); OR

  I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; OR
- I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

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

- Prior to Department approval of the transfer application, 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 water right 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: Woodburn Independent..
- Amendments to the application may only be made in response to the Department's Draft Preliminary
  Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any
  issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be
  subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).
- Refunds may only be granted upon request and, as set forth in ORS 536.050(4)(a), if the Director determines that a
  refund of all or part of a fee is appropriate in the interests of fairness to the public or necessary to correct an error
  of the Department

1 (	we) affirm that the information conta	ined in this application is true and accurate.	11
		Robort Galoni	8 4/25
A	oplicant Signature	Print Name (and Title if applicable)	Date (
// _			
A	pplicant Signature	Print Name (and Title if applicable)	Date

Is the applicant the sole owner located? $\boxtimes$ Yes $\square$ No*	of the land	d on which	the wate	er right, or p	ortion there	eof, proposed for trans	fer is					
*If NO, include signatures of all d attach affidavits of consent (and water right(s) were conveyed.	leeded land mailing and	lowners (ar d/or e-mail	nd mailing I addresse	and/or e-m s) from all la	ail addresses ndowners oi	s if different than the ap r individuals/entities to	pplicant's) or which the					
Check the following boxes that	apply:											
The applicant is respon sent to the applicant.	The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.											
The receiving landowned issued. Copies of notice							order is					
issued. Copies of notices and correspondence should be sent to this landowner.  Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.												
At this time, are the lands in thi						Yes 🛛 No						
If YES, and you know who t below. If you do not know wat a later date.	he new lar who the ne	ndowner w ew landow	vill be, ple ner will b	ase complete, then a re	te the receiv	ving landowner inform signment will have to I	ation table be filed for					
If a property sells, the certifunless a sale agreement or <a href="https://www.oregon.gov/o">https://www.oregon.gov/o</a>	other doc	ument stat	es otherv	wise. For mo	re informat	ion see:						
RECEIVING LANDOWNER NAME NA				PHONE NO.		ADDITIONAL CONTACT NO	).					
ADDRESS						FAX NO.						
CITY	STATE	ZIP		E-MAIL								
Describe any special ownership	circumsta	nces:										
The confirming Certificate shall	be issued	in the nam	ne of:	Applicant	Receivi	ng Landowner						
Check here if any of the an irrigation or other water							served by					
IRRIGATION DISTRICT NAME			ADDRESS									
CITY			STATE			ZIP						
Check here if water for a contract for stored water		_				agreement or othe	er					
ENTITY NAME NA			ADDRESS									
CITY			STATE			ZIP						
To meet State Land Use Cor	nsistencv	Requiren	nents, vo	ou must lis	t all count	y, city, municipal						
corporation, or tribal govern							or used.					
ENTITY NAME			ADDRESS				Desch					
Clackamas Co. Department of Tr Development, Planning Division	ansportation	on and	150 Bea	vercreek Ro	ad		Receive					
CITY Oregon City			STATE Oregon			ZIP 97124	AUG 2 2 202					
J. 25011 City			Cregon			J/1227	OWRD					

#### Part 4a of 4b - Water Right

Please use a separate Part 4 for each water right being changed. See instructions on page 6, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

				CI	ERTIE	ICA	TE # <u>80</u>	0671			Received
Descri	ption of Water	Delivery Sys	tem								AUG 2 2 2025
Systen	n capacity: 0.4	0.44 cubic feet per second (cfs) <b>OR</b>									OWRD
	_	gallons pe	er m	inut	e (gp						
five ye	/	ormation on	the	pum	ps, c	anal	The leaves of the	,			some time within the last sused to divert, convey,
inch n	nainline to the r	north. The ma	ainli	ne t	hen 1	turn	s west	befor	e head	ding sou	water through buried 6- uth and connecting to an
	mainline runni led to irrigate tl			e ma	ainiir	ies r	iave n	yaranı	s wne	re a na	rd hose traveler can be
	cation of Author POD/POA nam										ropriation (POA) number here.)
POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Т	wp	R	ng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 2	☐ Authorized ☐ Proposed	MARI 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 5	Authorized Proposed	CLAC 59086	3	s	1	E	30	sw	N NE TL 1,605 fee		1,645 feet south and 1,605 feet west from the NE corner, Section 30.
Well 9	☐ Authorized ☐ Proposed	CLAC 78289, 78927	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): Place of Use (POU) Supplemental Use to Primary Use (S to P) Character of Use (USE) Point of Appropriation/Well (POA) Additional Point of Appropriation (APOA) Point of Diversion (POD) Additional Point of Diversion (APOD) Substitution (SUB) Surface Water POD to Ground Water Government Action POD (GOV) POA (SW/GW) Will all of the proposed changes affect the entire water right? Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes. Complete all of Table 2 to describe the portion of the water right to be changed.

#### Part 4b of 4b - Water Right

Please use a separate Part 4 for each water right being changed. See instructions on page 6, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

		Received									
Descr	iption of Water	Delivery Syst	tem								AUG 2 2 2025
Syste	m capacity: 1.0	<b>9</b> cubic feet p	er s	ecor	nd (c	fs) <b>O</b>	R				
	_	gallons pe	er m	inut	e (gp	m)					OWRD
five y		sometime within the last used to divert, convey,									
inch be throuse connection of the submitted of the submit	puried mainline.  Igh buried 6-inch  Ecting to an 8-inch  Ier can be attach  Ersible pump to  Ias hydrants whe	Water is pur mainline to ch mainline r ned to irrigat convey wate ere a hard ho rized and Pro	the unnerther the open	northing of plants of the plan	om V th. T east- ice o gh a ler c	he mest west f use burie an b	using nainlin t. The e. (War ed mai e attac	a 25 e ther mainli ter is p inline ched t	Hp substantial sub	west bave hyded from east wate the	ropriation (POA)
POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)		wp		Rng Sec			<b>%</b>	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 2	Authorized 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 5	Authorized 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 7	Authorized Proposed	CLAC 77182	3	s	1	E	29	sw	sw	DLC 58	450 feet north and 90 feet east from the SW corner, Section 29.
Well 9	☐ Authorized ☐ Proposed	CLAC 78289, 78927	3	s	1	E	30	NW	sw	TL 1200	3,100 feet south and 1,380 feet east from the NW corner, Section 30.
Checl	Place of Use Character of	(POU) Use (USE)	oose	d be	low		S   F	Supple Point o	menta of Appr	l Use to	od in parentheses):  o Primary Use (S to P)  on/Well (POA)
L	Point of Dive	ווטונוי)					$\boxtimes$ A	-uuitio	אוומו אכ	IIIL OT A	Appropriation (APOA)

Substitution (SUB)

Additional Point of Diversion (APOD)

	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV)
Will all	of the proposed changes affect the entire	e wate	r right?
Yes	Complete only the Proposed ("to" or "o "CODES" listed above to describe the pr		s) section of Table 2 on the next page. Use the d changes.
⊠ No	Complete all of Table 2 to describe the p	ortion	of the water right to be changed.

Received AUG 2 2 2025 OWRD Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

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

#### Table 2. Description of Changes to Water Right Certificate # 80671

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.								Proposed Changes (see	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.															
Twp	Rng	S	Sec	% %	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Twp		vp Rng		Rng Sec		1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
								e			APOA	3	s	1	E	30	NE	NE	300	NA	6.81	IR	Wells 2, 5, & 9	4-2-1993
											APOA	3	s	1	E	30	NW	NE	300	NA	2.41	IR	Wells 2, 5, & 9	4-2-1993
											АРОА	3	s	1	E	30	sw	NE	500	NA	27.30	IR	Wells 2, 5, & 9	4-2-1993
											АРОА	3	s	1	Ε	30	SE	NE	500	NA	14.62	IR	Wells 2, 5, & 9	4-2-1993
											APOA	3	s	1	E	30	sw	NW	1100	NA	2.13	IR	Wells 2, 5, & 9	4-2-1993
											АРОА	3	s	1	E	30	SE	NW	1100	NA	38.21	IR	Wells 2, 5, & 9	4-2-1993
											АРОА	3	s	1	Ε	30	NE	sw	1100	NA	31.12	IR	Wells 2, 5, & 9	4-2-1993
											APOA	3	s	1	Ε	30	NW	sw	1100	NA	1.77	IR	Wells 2, 5, & 9	4-2-1993
				ТС	TAL ACI	RES:												TO	TAL ACI	RES:	124.37			

Additional remarks: None.

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Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

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

#### Table 2. Description of Changes to Water Right Certificate # 98444

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

AUTHORIZED (the "from" or "off" lands)  The listing that appears on the certificate BEFORE PROPOSED CHANGES  List only that part or portion of the water right that will be changed.									Proposed Changes (see	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.																
Tv	vp	Rng	g	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Tv	vp	Ri	ng	Sec	У.	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
3	s	1	E	30	sw	NW	1000, 1200	NA	6.66	IS	Wells 2 & 5	3-6- 1979	APOA	3	s	1	E	30	sw	NW	1000, 1200	NA	6.66	IS	Wells 2, 5, & 9	3-6-1979
3	s	1	E	30	NE	sw	1100	NA	6.2	IS	Wells 2 & 5	3-6- 1979	АРОА	3	s	1	E	30	NE	sw	1100	NA	6.2	IS	Wells 2, 5, & 9	3-6-1979
3	s	1	E	30	NW	sw	1000, 1200	NA	42.34	IS	Wells 2 & 5	3-6- 1979	АРОА	3	s	1	E	30	NW	sw	1000, 1200	NA	42.34	IS	Wells 2, 5, & 9	3-6-1979
																						,				
										-																
						ТО	TAL ACE	RES:	55.2											TO	TAL AC	RES:	55.2			

Additional remarks: None.

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Permanent Transfer Application Form - Page 9 of 11

#### For Place of Use or Character of Use Changes - NA

Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands? \(\bigcap\) Yes \(\bigcap\) No

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

Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation).

Ground water supplemental Permit or Certificate # NA; Surface water primary Certificate # NA.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

AUG 2 2 2025

Identify the primary certificate to be cancelled. Certificate # NA

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

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

#### AND/OR

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

#### Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
Well 2	Yes	MARI 67037			SEE W	ELL LOG MAI	RI 67037			NOT LESS
Well 5	Yes	CLAC 59086			SEE W	ELL LOG CLA	C 59086			THAN FULL
Well 9	Yes	CLAC 78289, 78927			SEE WELL	LOG CLAC 78	3289, 78927			ALL WELLS COMBINED

For Place of U	se or Characte	er of Use C	hanges - NA
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Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands? 

Yes 
No

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

Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # <u>NA;</u> Surface water primary Certificate # <u>NA.</u> Received

12 v6 22 2025

#### For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

OWRD

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

$\boxtimes$	Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated
	with the corresponding well(s) in Table 1 above and on the accompanying application map.
	Tip: You may search for well logs on the Department's web page at:

http://apps.wrd.state.or.us/apps/gw/well log/Default.aspx

#### AND/OR

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

#### Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
Well 2	Yes	MARI 67037			SEE W	ELL LOG MA	RI 67037			NOT LESS
Well 5	Yes	CLAC 59086			SEE W	ELL LOG CLA	C 59086			THAN FULL
Well 7	Yes	CLAC 77182			SEE W	ELL LOG CLA	C 77182			RATE FOR
Well 9	Yes	CLAC 78289, 78927			SEE WELL	LOG CLAC 7	8289, 78927			COMBINED

## Application for Water Right **Transfer**

### **Evidence of Use Affidavit**



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State c	of Oregon			)							
County	of CLACKAMAS	)		,	SS						
I, <u>Вов</u> (	GABRIEL, in my	capacity	y as <u>OWI</u>	NER,						Ros	ah
mailin	g address <u>8474</u>	HAZELG	REEN RD	NE						Rec AUG 2,	CIV
teleph	one number ( <u>5</u>	03) 873	<u>3-1200</u> ,	being	first o	duly swo	rn depos	e and say:		AU5 2.	2 2
	Certi	onal ob er was u ficate #	servationseed during the servation seed during the seed during the servation seed at the	ring tl	ne pre	evious fiv	Profess re years o	ional experti	se place of use f	or	R
	Certificate #	Town			to the	e use of w	water at	the following	Gov't Lot or DLC	hin the last five years:  Acres (if applicable)	
AND											
$\boxtimes$	Confirming C	ertifica	te # <u>984</u>	1 <u>44</u> ha	as bee	n issued	within th	ne past five y	ears; <b>OR</b>		
	instream leas	e numl	ber is: _		(Note	: If the e	ntire righ	nt proposed f		years. The eased instream.); <b>OR</b>	
	The water rig							ntation that a	a presumption	of forfeiture for non-us	se
	Water has be					157.0			opriation for r	nore than	
					lci	ontinues	on reve	rsa sidal			

Revised 7/1/2021

3. The water right was used for: (e.g., crops, pasture, etc.): ROW CROPS

4.	I understand that if I do not attach one or more of the documents shown in the table below to support the above
	statements my another in will be considered incomplete

statements, my application will be considered incomplete.

Signature of Affiant

Signed and sworn to (or affirmed) before me this 66 day of August 20 25

OFFICIAL STAMP JASON SCOTT DOLAN NOTARY PUBLIC - OREGON COMMISSION NO. 1016340 MY COMMISSION EXPIRES SEPTEMBER 27, 2025

Notary Public for Oregon

My Commission Expires: 09-27-202

Supporting Documents	Examples
Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of <b>confirming</b> water right certificate that shows issue date
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul> <li>Power usage records for pumps associated with irrigation use</li> <li>Fertilizer or seed bills related to irrigated crops</li> <li>Farmers Co-op sales receipt</li> </ul>
Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul> <li>District assessment records for water delivered</li> <li>Crop reports submitted under a federal loan agreement</li> <li>Beneficial use reports from district</li> <li>IRS Farm Usage Deduction Report</li> <li>Agricultural Stabilization Plan</li> <li>CREP Report</li> </ul>
Aerial photos containing sufficient detail to establish location and date of photograph	Multiple photos can be submitted to resolve different areas of a water right.  If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.  Sources for aerial photos: OSU –www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com
Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

Received



#### STATE OF OREGON

#### **COUNTY OF CLACKAMAS**

CERTIFICATE OF WATER RIGHT

Received AUG 2 2 2025 OWRD

THIS CERTIFICATE ISSUED TO

ROBERT W. GABRIEL 8474 HAZELGREEN RD NE SILVERTON OR 97381

confirms the right to the use of water perfected under the terms of Permit G-8557. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the well(s). The specific limits and conditions of the use are listed below.

SOURCE OF WATER: THREE WELLS, A TRIBUTARY OF PUDDING RIVER

PURPOSE OR USE: IRRIGATION OF 31.6 ACRES AND SUPPLEMENTAL IRRIGATION OF 55.2 ACRES

MAXIMUM RATE: 1.09 CUBIC FEET PER SECOND

DATE OF PRIORITY: MARCH 6, 1979

The wells are located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
3 \$	1 E	WM	29	SW SW	WELL 7 (NEW) - 450 FEET NORTH AND 90 FEET EAST FROM SW CORNER, SECTION 29
3 \$	1 E	WM	30	SW NE	WELL 5 (NEW) - 1645 FEET SOUTH AND 1605 FEET WEST FROM NE CORNER, SECTION 30
3 S	1 E	WM	30	SW NW	WELL 2 (NEW) - 2470 FEET SOUTH AND 75 FEET EAST FROM NW CORNER, SECTION 30

The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated and shall be further limited to a diversion of not to exceed 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year, and shall conform to such reasonable rotation system as may be ordered by the proper state officer.

A description of the place of use under the right hereby confirmed, and to which such right is appurtenant, is as follows:

			IR	RIGATION			
Twp	Rng	Mer	Sec	Q-Q	DLC	Acres	Well
3 S	1 E	WM	29	SW SW	58	27.0	Well 7
3 S	1 E	WM	29	SE SW	58	4.6	Well 7

#### NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482. Pursuant to ORS 183.482, ORS 536.075 and OAR 137-003-0675, you may petition for judicial review and 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.

T-13112-cf-54225.ra.klk

Page 1 of 2

Certificate 98444

		SU	PPLEM	ENTAL IRRI	GATION	
Twp	Rng	Mer	Sec	Q-Q	Acres	Well
3 S	1 E	WM	30	SW NW	6.66	Well 2 and Well 5
3 S	1 E	WM	30	NE SW	6.20	Well 2 and Well 5
3 S	1 E	WM	30	NW SW	42.34	Well 2 and Well 5

The quantity of water diverted at the new points of appropriation (WELLS 2, 5, and 7), shall not exceed the quantity of water lawfully available at the original point of appropriation WELL 1), described as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
3 S	1 E	WM	30	SE SE	WELL 1 (ORIGINAL) - 880 FEET NORTH AND 350 FEET
					WEST FROM SE CORNER, SECTION 30

The right to the use of the water for the purposes aforesaid is restricted to lands or place of use herein described.

This certificate is issued confirm changes in POINT OF APPROPRIATION and PLACE OF USE approved by an order of the Water Resources Director entered JUNE 30, 2021, at Special Order Volume 120, Page 996, approving Transfer Application T-13112, supersedes Certificate 54225, State Record of Water Right Certificates.

Issued IIII 1 8 2025

Katherine Ratcliffe

Water Right Services Division Administrator, for

Ivan Gall, Director

**Oregon Water Resources Department** 

Received

AUG 2 2 2025

**OWRD** 

## 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

Received

AUG 2 2 2025

#### NOTE TO APPLICANTS

OWRD

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

#### This form is NOT required if:

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

#### NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for a new water right or modifying an existing water right. The Oregon Water Resources Department (OWRD) requires applicants to obtain land use information to ensure the water right does not result in land uses that are incompatible with your comprehensive plan. Please complete the form and return it to the applicant for inclusion in their application. **NOTE:** For new water right applications only, if you are unable to complete this form while the applicant waits, you may complete the "Receipt Acknowledging Request for Land Use Information" and return it to the applicant.

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

Last Revised: 10/2023

14721-

This page intentionally left blank.

Received AUG 2 2 2025 OWRD

14721-

AUG 2 2 2025

## Land Use Information Form

**OWRD** 



#### **Oregon Water Resources Department**

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

NAME								PHOI	NE	
Robert Gabriel 503-873				-873-120	0					
MAILING	ADDRESS									
8474 H	azelgreei	n Rd NE								
CITY				STATE	ZIP	EMAIL				
Şilverto	n	,		OR	97381		,		,	
	nd Locati		ormation fo	r all tax lo	ts where wa	ater will b	pe diverted (1	aken from it	s source), d	conveyed
							irrigation us nformation r		_	ricts, may
Township	Range	Section	1/4 1/4	Tax Lot #	Plan Designati Rural Resident			Water to be:		Proposed Land Use:
3S	1E	30		300	EFU		Diverted		☑ Used	IR
3S	1E	30		500	EFU		□ Diverted	○ Conveyed	□ Used	IR
3S	1E	30		1000	EFU		Diverted	○ Conveyed	<b>⊠</b> Used	IR
3S	1E	30		1100	EFU		Diverted	○ Conveyed	□ Used	IR
3S	1E	30		1200	EFU		□ Diverted	Conveyed	Used	IR
Clackam	nas Count eparate La	У	ormation For				yed, and/or u			applicable.
ype of ap	plication t	o be filed v Store Wate	with the Ore	gon Wate er Right Tra ange of Wa	nsfer [	Permit	nent: Amendment c on of Conserv		ter Registrat	ion Modificati
ource of	water:	Reservoi	r/Pond	Ground	Water	Surfac	e Water (nam	e)		
stimated	quantity (	of water ne	eded: <u>1.13</u>		Cubic fee	et per seco	ond gal	lons per minu	te 🗌 a	cre-feet
	use of wat		rrigation Municipal		mercial i-Municipal		ustrial tream	Domestic		household(s)
ntended		-								
ntended Briefly de	scribe:									

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

point of appropriation to part of an existing water right (Certificate 98444)

See Page 4 ->

## Received AUG 2 2 2025

## 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 inf	<u>formation</u>
	ed water use(s), including proposed construct n. Cite applicable ordinance section(s): ZDO 40	
approvals as listed in the table below. already been obtained. Record of Action	ed water use(s), including proposed construct (Please attach documentation of applicable lon/land-use decision and accompanying find have not ended, check "Being Pursued."	and-use approvals which have
Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:
		☐ Obtained ☐ Being Pursued ☐ Denied ☐ Not Being Pursued
		☐ Obtained ☐ Being Pursued ☐ Denied ☐ Not Being Pursued
		☐ Obtained ☐ Being Pursued ☐ Denied ☐ Not Being Pursued
		☐ Obtained ☐ Being Pursued ☐ Denied ☐ Not Being Pursued
	special land use concerns or make recomme posed use of water in the box below or on a	
Water impoundment for the purpos	e of irrigation allowed outright in EFU	district
Name: Max del Hierro	Title: Planne	r 1
May dol Hiorro	Digitally signed by Max del Hierro Date: 2025.08.19 09:48:05 -07'00' Date: 8/19/2	
Governmental Entity: Clackamas Cou		
Receipt Ackn	owledging Request for Land Use Info	rmation
this form while the applicant waits, you ma have 30 days from the date of OWRD's Pub Oregon Water Resources Department. Plea	he applicant. For new water right applications y complete this receipt and return it to the app lic Notice of the application to submit the comp se note while OWRD can accept a signed receip impleted Land Use Information Form is require	licant. If you sign the receipt, you will bleted Land Use Information Form to bit as part of intake for an application
300	Title:	
	Date:	
Covernmental Entity:	Phone	

MARI 67037
Westerberg Drilling, Inc.
36728 S. Kropf Rd.
START CAR

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

LAND OWNED	0
(as required by ORS 537.765	& OAR 690-20:
WATER SUPPLY WELL	
STATE OF OREGON	

5-0210)	Holalic	U .
ell ID#	1	

VELL I.D. LABEL# I		
START CARD#	214193	
ORIGINAL LOG#		

(1) LAND OWNER Owner Well I.D. #1	(9) LOCATION OF WELL (legal description)
First Name Robert Last Name Gabriel	
Company Address 8474 Hazelgreen Rd	County CLACKAMAS Twp 3 S N/S Range 1 E E/W WM
City Silverton State OR Zip 97381	Sec 30 NW 1/4 of the SW 1/4 Tax Lot 1000
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Lat bills of bb
(2a) PRE-ALTERATION	
Dia + From To Gauge Stl Plstc Wid Thrd	Street address of well     Nearest address
	25130 Eilers Rd., Aurora
Material From To Amt sacks/lbs	
Seat:	(10) STATIC WATER LEVEL
Rotary Air   Rotary Mud   Cable   Auger   Cable Mud	Date SWL(psi) + SWL(ft)
Reverse Rotary Other	Existing Well / Pre-Alteration
	Completed Well 09-06-2017 43
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 43
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)-
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	In the court of th
Depth of Completed Well 160 ft.	all water bearing
BORE HOLE SEAL sacks/	Tunger below 6WI
Dia From To Material From To Amt lbs	zones below swill
16 0 46 Bentonite 0 32 468 S	
12 46 163 Calculated 22	
6 163 236 Cement 32 46 105 S	(11) WELL LOG Ground Elevation
Calculated 7	Ground Elevation
How was seal placed: Method A B XC D E	Material From To
X Other bent placed dry	soil brown 0 1
Backfill placed from 175 ft. to 236 ft. Material cement	sand brown 1 20 24
Filter pack from 97 ft. to 175 ft. Material css Size 6/9	sand brown with some gravel 20 24 silt brown 24 35
Explosives used: Yes Type Amount	sand brown 35 38
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	ala ala
Proposed Amount Pounds Actual Amount Pounds	silt & sand brown 48 63
	11 Sand prown tine
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Il sand brown with gravei
	sand black with gravel 89 112
○       12       X       2       97       250       ○       X         ○       8       □       55       95       250       ○       X         ○       8       □       155       160       250       ○       X	Page 11 List that
8 155 160 250	clay green 116 118
	packed silt grey 111 141 145
Shoe Inside X Outside Other Location of shoe(s) 16	sand grey 145 154
	clay grey with sand 154 156
	clay green & grey sticky 156 174
(7) PERFORATIONS/SCREENS Perforations Method v wire	clay brown & grey 174 200
Screens Type Material stainless	Date Started06-07-2017
Perf/S Casing/ Screen Scrn/slot Slot # of Tele/	Date Started of 2017 Completed of to 2017
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification
Screen 8 95 155 .065 8	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
(8) WELL TESTS: Minimum testing time is 1 hour	Signed Aug & Miles
Pump	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Wall Constructor Certification
400 43 6	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.
Temperature 55 °F Lab analysis Yes By	
Water quality concerns? Yes (describe below) TDS amount 117 ppm From To Description Amount Units	License Number 688 Date 09-22-RECEIVED BY OV
From To Description Amount Units	Signed Stern n Studt.
	Contact Info (optional) NOV 1 3 2017
ORIGINAL - WATER RESOURCES I	DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTM	MENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.95
	SALEM, OR

#### **MARI 67037**

Westerberg Drilling, Inc. LABEL# L 127210 36728 S. Kropf Rd. WATER SUPPLY WELL REPORT -START CARD # 214193 continuation page Molalia, OR 97038 ORIGINAL LOG# (2a) PRE-ALTERATION Water Quality Concerns Dia Gauge Stl Plstc Wld Thrd Amount Units From To Description Material From Amt sacks/lbs (10) STATIC WATER LEVEL (5) BORE HOLE CONSTRUCTION SWL Date Est Flow SWL(psi) + SWL(ft) BORE HOLE SEAL sacks/ Dia From Material From To lbs Amt Calculated Calculated Calculated Calculated FILTER PACK (11) WELL LOG Material Size To From To clay green & brown sticky 200 205 clay grey 230 silt green & grey 230 236 (6) CASING/LINER Casing Liner Dia Gauge Stl Plstc Wld Thrd From To 00 CEIVED E S (7) PERFORATIONS/SCREENS Perf/S Casing/ Screen Scrn/slot Slot # of Tele/ creen Liner To width slots From length pipe size Comments/Remarks Received (8) WELL TESTS: Minimum testing time is 1 hour AUG 2 2 2025 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

14721-

#### **MARI 67037**

## Oregon Water Resources Department PUMP TEST FORM COVER SHEET

Well Owner:		Well Location:	
Name: Robert Gabriel		Township: 3 S Range:	
Address: 8474 Hazelgreen		Section: 30 1/4: SW 1/16 NW	
County: Clackamas	teto: 00 7in: 07201	Well depth: <u>160.0</u> Date drilled: <u>9/6</u> Owners well no. (if any):	/1/
Original owner (from well log	).	POD ID:	
	/-	1 00 10.	
Water Right Information:	Domit	Certificate:	
Application:		es If yes, list additional water rig	
Application:			
Application:	Permit:	Certificate:	
Pump Test:		00101100101	
Test Conducted by: Steve !	Stadoli ilohot2	Well Owner?	Yes
Company: Westerberg Dril	ling Inc	TVGII OWICI:	
Address: 36728 S. Kropf R	d	Date of Test: 08	/17/2017
City: Molalla	State: OR Zip:		
Daytime phone: 503-829			
Method of discharge measur	ement (see our brochure fr	or more information): Flow meter	
Method of water-level measu	rement (pick one or enter	other method used): Electric tape	
Length of air line (if used): _		and the first three thre	
Pump type (pick one or enter	other method used): Su	bmersible 30 h.o	
Was the pump test conducte	d during normal use of the	well? Yes Note: new well test	
		ck wells, pumping within 1000 feet of	
well during the test or within	24 hours prior to the test?	Tyes Note: no	are tested
		mate pumping rate of each. If possib	le, indicate if
they were turned on or off du			
the well head. Approx. distant Well elevation is		evation difference between the surface prox. elevation difference:	ft ft
Description of measuring poi	nt (e.g. top port of 1 inch p	ort pipe, west side)	
3/4" pvc pipe @ well head			
Measuring point distance at	oove land surface	3.00 feet.	
Static water level measurer pumping begins at no less th		ee measurements are required in the	hour before
		Doubt to water below	and audinos
	Depth to water below meas	•	
10:20 am 10:40 am	<u>45.20</u> 45.30	<u>42.</u> 42.	
11:00 am	45.20	42.	
		nt is required at the start of pumping	
		should be noted on the Pump Test D	
Time	Discharge Rate	Discharge Units (e.g. gpm, cfs, etc	c)
11:00 am	400.00	gpm (gallons per minute)	-,
12:00 pm	400.00	gpm (gallons per minute)	RECEIVED BY OWR
1:00 pm	400.00	gpm (gallons per minute)	RECEIVED BY OWN.
2:00 pm	400.00	gpm (gallons per minute)	
3:00 pm	400.00	gpm (gallons per minute)	NOV 1 3 2017
	Date <u>08/17/2017</u>	Time <u>11:00 am</u>	
	Date 08/17/2017	Time <u>5:00 pm</u>	
Total pumping time: 6	hours 0 minut		SALEM, OR
Note: Well must be idle for a			OWRD 2/9/2000
Additional forms can be obta	nou nom our web pite at.	A A	
Required Signature:	um N. Studen	l	
required Signature	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	<del></del>	Received
		AU	G 2 2 2025

14721-

OWRD

#### CLAC STATE OF OREGON Arrow 03-009-A WATER SUPPLY WELL REPORT (as required by ORS 537.765) (1) LAND OWNER: Well Number: Name: Thomas L. Thomsen Address: 25355 NE Glass Road State: OR Zip: 97002 City: Aurora (2) TYPE OF WORK: (repair/ New Well □Deepening □Alteration recondition)□Abandonment (3) DRILL METHOD: ☐Rotary Air ☐Rotary Mud ☐Cable ☐Auger Other: (4) PROPOSED USE: ☐Community ☐Injection Domestic Industrial Livestock Thermal Other (5) BORE HOLE CONSTRUCTION: Special Construction approval ☐Yes ☒No Depth of Completed Well 263.2 Explosives Used ☐Yes ☒No Type Amount HOLE SEAL sacks or Diameter From To To pounds Material From 16" 150 0 1 2 bags bent chps 120 bags 1 150 cement 150 280 12" How was seal placed: Method □A □B ☒C □D □E Other bent chips poured-probed Backfill placed from Material to 280 Size of gravel 8-12 sand Gravel placed from 177 (6) CASING/LINER: CASING: Diameter Gauge Steel Plastic Welded Threaded From To 12" +18" 185 .375 $\boxtimes$ $\boxtimes$ .250 $\boxtimes$ $\boxtimes$ 8" 180.6 176.6 $\bowtie$ $\boxtimes$ 8" 183.1 186.1 .250 $\boxtimes$ $\boxtimes$ 8" 196.6 .250 226.6 LINER: 247.1 263.2 250 $\boxtimes$ $\boxtimes$ Outside None Drive Shoe used Inside Final location of Shoe(s): 280' cut off (7) PERFORATIONS/SCREENS: Perforations Method: Type: v-wire Material: stainless 304 Tele/pipe Slot Casing Liner To Size Diameter size From $\boxtimes$ 180.6 183.1 60 8" pipe $\boxtimes$ 8" 186.1 196.6 50 pipe $\boxtimes$ 8" 226.6 247.1 50 pipe (8) WELL TESTS: Minimum testing time is 1 hour **⊠**Pump Bailer □Air ☐Flowing Artesian Drill Stem at Time Yield gpm Drawdown 1 hr. 52' 226 4 hr. 67' 216

#### WELL ID # L 61589 START CARD # 153779

	STA	RT CARI	) # 1537	<u> 79</u>	
(9) LOCATION	OF WELL by le	egal descri	ption:		
County: clack	Latitude:	L	ongitude:		_
Township: 3S	Range: 1E SW B	3			
Section: 30	SW	/4	<u>NE</u>	1/4	
Tax Lot: <u>500</u>	Lot: B	lock:	Subdi	vision:	
Street Address o	f Well (or nearest	address)	ntersection	on of	
Browndale and (					
(10) STATIC V	VATER LEVEL:	:			
110 Ft. below	land surface		Date	4/19/0	3
Artesian pressure	e lb. per	sq. in.	Da	te	
(11) WATER B	EARING ZONE	S:			
Depth at which v	water was first fou	ind 90'			
From	To	Est. F	ow Rate		SWL
90	112	10 to 15	gpm		dnm
187	194	100 to 15	0 gpm		110
238	246	50 to 100	gpm		110
		1			
(12) WELL LO	OG: G	round Elev	ation:		
(,	Material		From	To	SWL
top soil			0	1	
brown silty san	d		1	112	
green/blue clay			112	118	
tan clay w/tan			118	133	
	w/a lot of wood		133	187	
	ack w/small grave	1	187	194	
blue gray clay			194	221	
gray clay w/sar	nd and small grave	al	221	238	+
sand gray	id alid Siliali grave	-1	238	246	+
clay gray stiff			246	280	+
Clay gray Still			240	200	
			-		-
			+		-
			<del> </del>	-	+
			-		+
			+		+
			-		+
			+		+
			-		-
	CENTE	7	-		eceive
H	ECEIVE				ECEIAEC
			-	-	0 0 000
<b>—</b>	UL 0 8 2003		-	VIII	3 2 2 202
J	OF 0 0 5003		-	-	
WATE	5 F.F. SANTENANT	7 100 to	-	-	MAIDE
	RESOURCES ( ALEM, OREGON			-	AAALID
	ALLIN, ORLGON			-	-
Date Started: 3			pleted: 4	/19/03	
(unbonded) Water	Well Constructor C	Certification:			
I certify the	at the work I perform	ned on the co	onstruction	, alterati	on,, or
abandonment of t	his well is in compli	iance with O	regon wate	r supply	well
construction stand	dards. Materials use	ed and intom	nation repo	rted abo	ve are true
to the best of my	knowledge and belie		WWC N	umber	
Signed					
	Vell Constructor Cer	tification:		W Year	
I accept re	sponsibility for the o	construction,	alteration.	or aban	donment
work performed of	n this well during th	ne constructi	on dates re	ported al	bove. All
work performed d	luring this time is in	compliance	with Oreg	on water	supply
	standards. This rep	ort is true to	the best of	my kno	wledge and
belief.	11 11		WWC	Number	1483

WWC Number 1483 Date 7/5/03

Temperature of water <u>55</u>
Was a water analysis done?

Depth of Strata:

Depth Artesian Flow Found

**ARROW DRILLING 503-538-4422** 

By whom:

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

AUG 2 2 2025

## WESTERBERG DRILLING INC.

STATE OF OREGON OWRD WATER SUPPLY WELL REPORT

## PO BOX 1228 MOLALLA, OR 97038

WELL I.D. LABEL# [	141575
START CARD#	218462
OPICINAL LOC#	

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)	ORIGINAL LOG #	
(1) LAND OWNER Owner Well LD		
First Name Robert Last Name Gabriel	(9) LOCATION OF WELL (legal descri	ntion)
Company	County CLACKAMAS Twp 3 S N/S R	puoti)
Address 8474 Hazelgreen Rd  City Silverton State OR Zip 97381	Sec 29 SW 1/4 of the SW 1/4	Toulet 900
	Tax Map Number	Lot
(2) TYPE OF WORK New Well Deepening Conversion	Int o i mor	DMC or DD
Alteration (complete 2a & 10)   Abandonment(complete 5a)	Long or	DMS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plste Wld Thrd	Street address of well Nearest ad	Idrace DMS of DD
Casing:		
Material From To Amt sacks/lbs	Open field at very end of Barlow Rd. Approx 1/4 mil	e north of Fawver Rd.
Seal:		
(3) DRILL METHOD	(10) STATIC WATER LEVEL	
Rotary Air Rotary Mud Cable Auger Cable Mud	Existing Well / Pre-Alteration Date SW	/L(psi) + SWL(fl)
Reverse RotaryOther	Completed Well 03-17-2022	15.67
(4) PROPOSED USE Domestic Irrigation Community	103.17.2022	Hole?
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering	WATER BEARING ZONES Depth water was	
Thermal Injection Other		
	10 10 10 10 10 10 10 10 10 10 10 10 10 1	SWL(psi) + SWL(ll)
(Attach copy) Depth of Completed Well 183 5  0.	3, 00-00	10.75
PORT HOLE	09-06-2021 72 178 200	15.67
Dia From To Material From To Amt Ibs		
16 0 184 Bentonite 0 8 34 S		
Calculated 16		
Cement   8   68   64   S	(11) WELL LOG Ground Planeties	
	Ground Elevation	
How was seal placed Method A B XC D E	Material	From To
Backfill placed from ft. to ft Material	Clay Brown Dense	0 1 5
Filter pack from 21 0. to 184 ft. Material CSS Size 6/9	Cemented Gravel	5 22
	Gravel Brown	22 28
Explosives used: Yes Type Amount	Dirty Brown Sand & Gravel	28 32
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	Gravel Brown	32 36
Proposed Amount Pounds Actual Amount Pounds	Gravel Brown & Grey	36 45
(6) CASING/LINER	Gravel Medium Loose Tightly Comented Gravel	45 54 54 57
Casing Liner Dia + From To Gauge Stl Plste Wld Thrd	Clay Grey with Some Gravel	54 57 57 65
(a) (b) (c) (c) (d) (d) (d) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	Clay Grey & Green	65 68
* O 10 × 2.25 183.5 2.50 O C	Silt Grey-Green RECEIVED	68 72
Except O O	Order Hichard	72 85
Screens)	Salt Grey Sand Black ADD 9 2 2022	85 92
Shoe X Inside Outside Other Location of shoe(s) 184	Sand Black APR 2.8 2022	92 100
Temp casing Yes Dia From + To	Cemented Gravel	107 111
	Clay Blue	111 118
(7) PERFORATIONS/SCREENS Perforations Method	Silt Blue OWRD	118 122
Screens Type V-Wire Material Stainless Steel	Date Started 09-03-2021 Completed	03-22-2022
Perf/S Casing/ Screen Scrr/slot Slot # of Tcle/		V 3 22 2022
Creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification	2 20 00
Screen         10         72         85         .065         PS           Screen         10         91.5         111.5         .065         PS	I certify that the work I performed on the construct abandonment of this well is in compliance with	
Screen 10 127 153 .065 PS	construction standards. Materials used and information	
Screen 10 157.5 178.5 .065 PS	the best of my knowledge and belief	
	License Number 1858 , Date 04	1-01-2022
(8) WELL TESTS: Minimum testing time is I hour	1 The	
Pump	Signed Dym 2/1000	<del>-</del>
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification	
200 64 5	1 accept responsibility for the construction, deepenin	a elteration or ahandonmen
	work performed on this well during the construction da	
	performed during this time is in compliance with	Oregon water supply well
Temperature 55 °F Lab analysis Yes By	construction standards. This report is true to the best of	it my knowledge and belief
Water quality concerns? Yes (describe below) TDS amount 131 ppm From To Description Amount Units	License Number 688 Date 04-1	12-2022
From To Description Amount Units	Signed Sturn n Ata	1.65
	Centact Info (optional)	

## WESTERBERG DRILLING INC.

WATER SUPPLY WELL REPORT - continuation page

PO BOX 1228 MOLALLA, OR 97038

WELL I.D. LABEL# L 141575

START CARD # 218462

ORIGINAL LOG #

(A.) Done	ORIGINAL LOG#	
(2a) PRE-ALTERATION	Water Quality Concerns	
Dia + From To Gauge Stl Plstc Wld Thrd		
	From To Description	Amount Units
Material From To Amt sacks/lbs		
Tron To Aint Section		
(5) PORE HOLE CONCERNICATION	(10) STATIC WATER LEVEL	
(5) BORE HOLE CONSTRUCTION		
BORE HOLE SEAL contact	SWL Date From To Est Flow S	SWL(psi) + SWL(ft)
Dia From To		
Dia From 10 Material From To Amt lbs		
Calculated		<del></del>
Caremana		
Calculated		<del></del>
Carculated		
Calculated		
Calculated		
FILTER PACK		
	(11) WELL LOG	
From To Material Size	] =	
		From To
	Cemented Sand with Small Gravel	128 142
	Packed Silty & Sand	142 153
	Clay Blue with Gravel	153 158
(6) CASING/LINER	Silttstone Grey with Packed Sand	
(-)	Silestone Cover & Description	158 178
Casing Liner Dia + From To Gauge Stl Plste Wld Thrd	Siltstone Grey & Brown with Wood	178 184
The to dauge on Fiste wild tind		
<del>R R H H H H H H H H H H H H H H H H H H</del>	DEOCNICO	
	RECEIVED	
	100 0'0000	
(7) PERFORATIONS/SCREENS	APR 2-8 2022	
	7111 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
Perf/S Casing/ Screen Scm/slot Slot # of Tele/		
creen Liner Dia From To width length slots pipe size		
	OWRD	
	Comments/Remarks	
(O) WITH A PERCENCE AND A COLOR	16" drive chave and a 6" at 104.0	
(8) WELL TESTS: Minimum testing time is 1 hour	16" drive show cut off at 184 ft	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	This well is a transfer for a new POA from Permit # G-1	17557
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)		
	H	
	0	
	Receiv	60
		04
	4110.00.0	1
	AUG 2 2 2	/025

AIIG 2 2 2025 CLAC 78289

, STATE OF OREGON WATER SUPPLY WELL REPORT OWRD PO BOX 1228

WELL I.D. LABEL# L 149583

START CARD # 1071152

ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. #3 MOLALLA, O	R 97038						
First Name Robert Last Name Gabriel	(9) LOCATION OF WELL (legal description)						
Company	County CLACKAN Twp 3 S N/S Range 1 E	E/W WM					
A LI COMPANY A DIAME	Sec 30 NE 1/4 of the SW 1/4 Tax Lot 1200	) E/ VY VY [VI					
City Silverton State OR Zip 97381							
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot Lat	DMS or DD					
	Lat " or 45.280099 Long " or -122.738590	DMS or DD					
(2a) PRE-ALTERATION	Street address of well Nearest address	Divis of DD					
Casing: To Gauge Stl Plstc Wld Thrd							
Material From To Amt sacks/lbs	25130 Eilers Rd, Aurora, OR	1					
Seal:							
(3) DRILL METHOD	(10) STATIC WATER LEVEL						
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(ft)						
Reverse Rotary Other	Existing Well / Pre-Alteration Completed Well 9-1-23 58.7						
	Completed Well 9-1-23 Flowing Artesian? Dry Hole?	58.7					
(4) PROPOSED USE Domestic Irrigation Community		5					
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 8						
Thermal Injection X Other test well	SWL Date From To Est Flow SWL(psi)	+ SWL(ft)					
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	8-30-23 85 114 dnm	dnm					
Depth of Completed Well 168 ft.	8-31.23 116 120 dnm	dnm					
BORE HOLE SEAL sacks/	9-1-23 125 150 dnm	58.7					
Dia From To Material From To Amt Ibs	9-1-23 173 177 dnm	- 62					
10 0 18 Bentonite							
6 18 177 Calculated 8 Cement 168 177 4 S		· · · ·					
Calculated 3	(11) WELL LOG Ground Elevation	•					
How was seal placed: Method A B C D E	Material From	To					
Other bent prd & probed	soil	1					
Backfill placed fromft. toft. Material	clay brown medium	20					
Filter pack fromft. toft. Material Size	silt brown 20	30					
Seal Placement Begin Date 8-30-23 Begin Time 16 00	silt brown with sand 30	38					
	cemented gravel 38 gravel with silt 39	39 42					
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	gravel with silt 39 silt brown 42	70					
Proposed Amount P Actual Amount P	sand brown 70	90					
(6) CASING/LINER	black sand with gravel 90	114					
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	clay grey green 114	116					
6 3 153.2 250 0 0	clay with green sand 116	120					
	clay grey 120	125					
	sand grey 125	150					
R H R SI F F F F F F F F F F F F F F F F F F	clay green 150 siltstone green 160	165					
Shoe Inside Outside Other Location of shoe(s) 170	clay grey green 165	173					
Temp casing Yes Dia 10 From + 1 To 8	packed sand & wood silty 173	177					
(7) PERFORATIONS/SCREENS Perforations Method none							
Screens Type none Material	Construction Begin Date 8-30-23 Begin Time 15 I End Date	9-1-23					
Perf/ Casing/Screen Scm/slot Slot # of Tele/							
Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification	a alteration or					
	I certify that the work I performed on the construction, deepenin abandonment of this well is in compliance with Oregon wat	ter supply well					
	construction standards. Materials used and information reported a						
	the best of my knowledge and belief.						
	License Number 1358 Date 10-3-23						
(8) WELL TESTS: Minimum testing time is 1 hour	11-11						
Pump Bailer Air Flowing Artesian	Signed						
	(bonded) Water Wall Constructor Certification						
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	I accept responsibility for the construction, deepening, alteration,	or abandonment					
	work performed on this well during the construction dates reported above. All work						
Temperature 56 °F Lab analysis Yes By	performed during this time is in compliance with Oregon wat construction standards. This report is true to the best of my knowled	dge and belief					
Water quality concerns? Yes (describe below) TDS amount 190 ppr	License Numbe) 688 Pate 10-3-23	⊆ m̃					
From To Description Amount Units	17	3 _ C					
water cased off no flow test	Signed Steven V. Martely	<u> </u>					
no flow test	Contact Info (optional)						
	14/41						

THE COURSE OF TH	CL	AC 78	3289	W	VELL I.D. I	LABEL# L	14958	3
WATER SUPPLY WELL REPORT - continuation page	WESTER	RBERG	DRILLIN	NG INC	. STAR	CARD#	07/152	
continuation page	Р	O BO	X 1228	3	ORIGINA	AL LOG#	J	
2a) PRE-ALTERATION	MOLA	ALLA,	OFR O		ncerns		Amount	Tinite
Dia + From To Gauge Stl Plstc Wld Thrd	l	1	From	То		Description		
							<b>T</b>	<b>I</b>
<del></del>							<u> </u>	
Material From To Amt sacks/lbs							\ \rightarrow \rightarrow \ \rightarrow \rightarrow \ \rightarrow \rightarrow \ \rightarrow \rightarrow \rightarrow \rightarrow \rightarrow \ \rightarrow \rightarrow \rightarrow \rightarrow \rightarrow \ \rightarrow \rightar	V V
		1					<b>I</b>	<b>1</b>
		17	10) STA	TIC WA	TER LEV	VEL		
		— [	SWL Date	From	m To	Est Flor	w SWL(psi) +	SWL(ft)
5) BORE HOLE CONSTRUCTION  BORE HOLE SEAL					_		<del>                                     </del>	
N: F F	To Amt	acks/						
		<b>Ξ</b>						
Calcul		المتسا					<del>  </del>  -	+-+
Calcul							1	
Calcu	lated			-		<del>-  </del>	<del>   -</del>	
Calcu	lated		11) WEL	LLOG		• •		
FILTER PACK	iaicu	1	11) 1122		terial		From	To
From To Material Size								
		-					-	
		l l						
6) CASING/LINER		- 11						
Casing Liner Dia + From To Gauge Stl	Plstc Wld Ti	hrd						
		_  }						
	AHI	<b>⊣</b>						
8 8 8	HH	H [[					-	-
8 8 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	dH						Hecewa	•
	$\Box$					A	402 2 202	
88-14-18	$\mathcal{A} \vdash \mathcal{A}$	⊢					7 202.	,
8 8 -	$\forall$					***	OWRD	
		- 11				704		
7) PERFORATIONS/SCREENS		—					RECEIV	/ED
	# - F	Tala/						
Perf/ Casing/ Screen Scrn/slot Slot Screen Liner Dia From To width length		Tele/ ipe size					OCT 10	2023
		[					OWR	D
							+	
			Name of per	rson(s) wh	o assisted wit	h construction a	and Trainee Licens	se # / Helper
	+ +	$ \parallel$		Assistant l			уре	#
			Mike Hami	ilton				Asst
			<u> </u>			ļ		
(8) WELL TESTS: Minimum testing time is 1 ho	ur							
Yield gal/min Drawdown Drill stem/Pump depth	Duration (hr)	, [	Commer	nts/Rem	arks			
The garmin Diawdown Din Stener unp deput	(III)	<u> </u>			a production	well when perm	it is secured.	
		-	18' bentoni	te seal				- 1
		1						1
		] [						
		<b>↓</b>						1

**CLAC 78289** 

CLAC 78927

WELL I.D. LABEL#  $L_1$ START CARD# ORIGINAL LOG# CLAC 78289

	Page 1 of 3
49583	
074684	

(as required by ORS 53	37.545 & 53	37.765 and (	OAR 69	0-205-0	210)	11/1	/2024	ORIG	GINAL LOG#	CLAC	7828	9
(1) LAND OWNER		Owner We					I					
First Name ROBERT		_ Last Name	GABI	RIEL			(9) L	OCATION OF	WELL (legal d	lescription	1)	
Company								y CLACKAMAS Twp		_		E/W WM
Address 8376 HAZELGRE					201			30 NE 1/4				
City SILVERTON		tate OR	-	Zip <u>97</u>			Tax M	Ian Number		Lot		
(2) TYPE OF WORK		ew Well	Deepe			ersion	Lat	lap Number	" or 45.28009900	)		DMS or DD
		mplete 2a &	10)	Aband	onment(co	mplete 5a)	Long	0 1	" or -122.738590	000		DMS or DD
(2a) PRE-ALTERATION P	on To	Gaug	e St	1 Pleto	Wld Th	ard	Long.	Street address	of well (Ne	arest address		
0 : [ ]	3 153			0	X F	Ĩ		DEILERS RD, AURO				
Material	From		Amt sa		ے د	_		,				
Seal: Bentonite	0	18		Sacks								
(3) DRILL METHOD			_				(10)	STATIC WATE				
X Rotary Air Rot	ary Mud	X Cable	Auger	Ca	ble Mud		1	xisting Well / Pre-Alte	Date	SWL(ps	i) + 9	WL(ft)
Reverse Rotary	Other							ompleted Well	10/2/2024	_	┧╠╬╾	58.2
(4) PROPOSED USE	Про	mestic XI	rriantion	Пс	ommunitu				ing Artesian?	Dry Hole		38.2
Industrial/ Commercial					ommunity							10
Thermal Injection			Jewateri	ng				R BEARING ZONES	-	ater was first		1-1-1-1
		ner						L Date From	To Est	Flow SWL	(psi) +	SWL(ft)
(5) BORE HOLE CON	STRUC	TION	Spec	ial Stan	dard (	Attach copy	) S	ee CLAC 78289		T	$\neg \sqcap$	
Depth of Completed V	Well 160.0	00 ft.										
BORE HOLE				EAL	_	sack						
Dia From To		Material		om		Amt 1bs						
16 0 6		onite			62 culated	64 S	4					
12 62 16	52			Cai	cuiated	42	1					
	$\neg$			Cal	culated		(11) V	WELL LOG	Ground Elevatio	n		
Seal placement method:	A B		TE IZIO			V & UD		Materi			From	То
Backfill placed from16							soil	Huter	<u> </u>		0	T 1
Filter pack from 56								own medium			1	20
Explosives used:			_		<u> </u>	6/9	silt bro				20	30
Seal Placement Begin Date		14					silt bro	own with sand			30	38
						.0	cemen	ted gravel			38	39
(5a) ABANDONMENT	USING	UNHYD	RATE	D BE	NTONI	ΓE	- Marian and American	with silt			39	42
Proposed Amount		Actu	al Amo	unt			silt bro				42	70
(6) CASING/LINER			Mat.				sand b				70	90
C/L Dia + From	то То	Gauge		ила з	Thed Show	Shoe Location		sand with gravel cy green			90 114	114
	93	0.250	ST		OUT			reen with sand			116	120
C 12 X 2	95	0.250	ST	$\Diamond$	H 001	13/	clay gr				120	125
L 8 152		0.250	ST	XXX	$H \vdash$	-	sand g				125	150
6 132	100	0.230	131	A	$H \vdash$	-	clay gr				150	160
	+		H	Н	$H \vdash$	-	siltstor	ne green	25-11-5-19-1-11-AB3-13-3-1-1-1-1-1-1		160	162
							╢					
Temp casing Yes Dia	16	From+X	2		To 53							
(7) PERFORATIONS/S	SCREEN	IS					1					
Perforation	s Method	V-wire					Constr	uction				
Screens T	уре			aterial _			Begin	Date 8/5/2024	Begin Time 11	15 I	End Date 1	0/2/2024
Perf/ Casing/ Screen			crn/slot			Tele/		onded) Water Well C	onstructor Cortic			
Screen Liner Dia	From 95	To 152	.070	lengt	h slots	Pipe size	_   `	ify that the work I pe			leenening	alteration o
0	33	132	.070	_	_	0 13	aband	donment of this well				
					_	+		ruction standards. Ma				
								est of my knowledge a				
							Licen	se Number 1358	D	ate 11-1	-2024	
(8) WELL TESTS: Min	imum tes	ting time i	s 1 hon	г								
-/				rill Ster	n/ Dura	tion	Signe	d BBS				
Type of Test	Yield (gal/mi		own Pu				(bond	led) Water Well Cons	tructor Certificat	tion		
Pump	300	32		105	4		1	ept responsibility for			eration or	ahandonma
тищр	200	32		103	+ +			performed on this well				
Tomporature 54	F Lab and	lysis Yes	Rv		-		constr	med during this tim ruction standards. This	report is true to th	ne best of my	knowledge	and belief
*		-		)S amo	int 141	ppm	Licen	se Number 688	n.	ate 11/1/202	4	Hecen
Water quality concerns?	Y es	(describe be Descript	ion II	o amo	Amount	Units	Licen	3c 140HDC1 688	D.	ate 11/1/2024	4	
							Signo	d STEVEN STADE	ELI (E-filed)		A	UG 22
							_	ng Company: Weste		7 2 1	200	
							1	b company. It com		· * 1		Olam