

# CLAIM OF BENEFICIAL USE for Groundwater Permits claiming more than 0.1 cfs



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

A fee of \$230 must accompany this form for permits  
with priority dates of July 9, 1987, or later.

## SECTION 1 GENERAL INFORMATION

**1. File Information:**

APPLICATION # <b>G-12161</b>	PERMIT # (IF APPLICABLE) <b>G-11565</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>T-NA</b>
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>ED LANDHOLDINGS LLC</b>		PHONE NO.	ADDITIONAL CONTACT NO.	
ADDRESS <b>7385 Howell Prairie Rd NE</b>				
CITY <b>Silverton</b>	STATE <b>OR</b>	ZIP <b>97381</b>	E-MAIL	

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. ***Each permit holder of record must sign this form.***

**3. Permit holder of record (this may, or may not, be the current property owner):**

PERMIT HOLDER OF RECORD <b>Duane and Eric Land Holdings LLC</b>				
ADDRESS <b>7385 Howell Prairie Rd NE</b>				
CITY <b>Silverton</b>	STATE <b>OR</b>	ZIP <b>97381</b>		

ADDITIONAL PERMIT HOLDER OF RECORD <b>NA</b>				
ADDRESS				
CITY	STATE	ZIP		

**4. Date of Site Inspection:**

**July 14, 2022**

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5. Person(s) interviewed and description of their association with the project:

NAME	DATE	ASSOCIATION WITH THE PROJECT
Aram Krueger	July 14, 2022	Farm manager

6. County

Marion County

7. If any property described in the place of use of the permit is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

OWNER OF RECORD		
NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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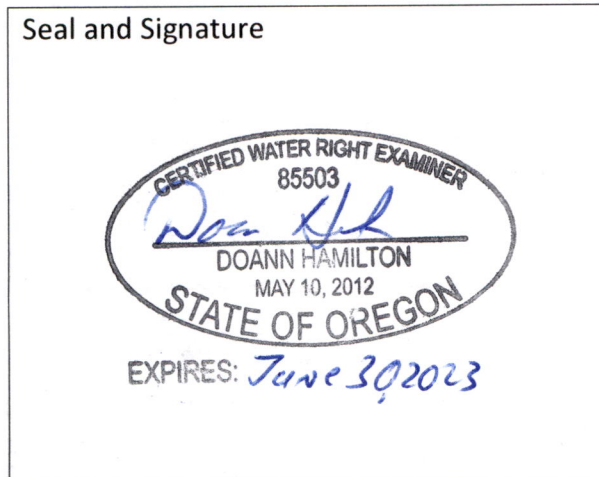
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SECTION 2  
SIGNATURES

CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.


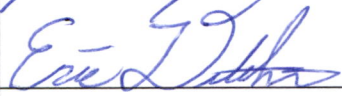


CWRE NAME Doann Hamilton	PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946	
ADDRESS 18487 S. Valley Vista Road			
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.com

Permit Holder of Record Signature or Acknowledgement

**Each** permit holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	Duane C. Ditchen	member	10/24/22
	Eric C. Ditchen	member	10/22/22

**SECTION 3**

**CLAIM DESCRIPTION**

**1. Point of appropriation name or number:**

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well	MARI 3906	NA

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

**2. Point of appropriation source, if indicated on permit:**

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
Well	A well in Little Pudding River Basin	Pudding River

**3. Developed use(s), period of use, and rate for each use:**

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
Well	Irrigation	Grass seed	Not specified in original permit	1.35 cfs
<b>Total Quantity of Water Used</b>				<b>1.35 cfs</b>

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4. Provide a general narrative description of the distribution works. This description must trace the water system from each point of appropriation to the place of use:

Water is pumped from Well (MARI 3906) using a 50 Hp submersible pump to convey water to the west through 25 feet of 6-inch above ground steel pipe equipped with a meter. The 6-inch steel pipe tees north and south and connects to a buried 6-inch PVC mainline.

The northern mainline has a hydrant at the southern edge of the creek. A 6-inch lay-flat hose is connected to the hydrant and laid over the creek. On the other side above-ground portable 6-inch aluminum pipe is laid out with hydrants. A hard hose traveler can be attached to these hydrants to cover the area north of the creek.

The southern buried 6-inch PVC mainline turns east just past the driveway before turning south at the eastern property edge. This section of the mainline has several hydrants to which a hard hose traveler can be attached to cover the area south of the creek.

Two hard hose travelers can be run at the same time.

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

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**5. Variations:**

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below.

**YES**

(e.g. "The permit allowed three points of appropriation. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

**1. The place of use was revised to include reference to the DLCs and or Government Lots and show the place of use based on field verification:**

**Original authorized place of use:**

6S	2W	3	SW SE	1.2
6S	2W	3	SE SE	8.5
6S	2W	10	NE NE	24.2
6S	2W	10	NE NE	7.7
6S	2W	10	NW NE	3.7
6S	2W	10	NW NE	0.8
6S	2W	10	SW NE	3.8
6S	2W	10	SW NE	0.4
6S	2W	10	SE NE	33.9
6S	2W	10	SE NE	2.9
6S	2W	10	NE SE	19.0
6S	2W	10	NW SE	<u>1.6</u>
Total:				107.7 acres

**Revised place of use, with addition of DLC and Government Lot information:**

6S	2W	3	SW SE	DLC 58	1.1
6S	2W	3	SE SE	DLC 58	9.0
6S	2W	10	NE NE	DLC 58	24.5
6S	2W	10	NE NE	DLC 97	8.1
6S	2W	10	NW NE	DLC 58	3.0
6S	2W	10	NW NE	DLC 97	0.6
6S	2W	10	SW NE	DLC 97	2.7
6S	2W	10	SW NE	Lot 2	0.4
6S	2W	10	SE NE	DLC 97	33.6
6S	2W	10	SE NE	Lot 1	3.0
6S	2W	10	NE SE	NA	20.1
6S	2W	10	NW SE	NA	<u>1.6</u>
Total:					107.7 acres

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**6. Claim Summary:**

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well	1.35 cfs	1.58 cfs	Not measured	Irrigation	107.7	107.7

**SECTION 4  
SYSTEM DESCRIPTION**

Are there multiple POAs?

NO

If "YES" you will need to copy and complete a separate Section 4 for each POA.

POA Name or Number this section describes (only needed if there is more than one):

Well

**A. Place of Use**

1. Is the right for municipal use?

NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
6S	2W	WM	3	SW SE	NA	58	Irrigation	1.1	NA
6S	2W	WM	3	SE SE	NA	58	Irrigation	9.0	NA
6S	2W	WM	10	NE NE	NA	58	Irrigation	24.5	NA
6S	2W	WM	10	NE NE	NA	97	Irrigation	8.1	NA
6S	2W	WM	10	NW NE	NA	58	Irrigation	3.0	NA
6S	2W	WM	10	NW NE	NA	97	Irrigation	0.6	NA
6S	2W	WM	10	SW NE	NA	97	Irrigation	2.7	NA
6S	2W	WM	10	SW NE	Lot 2	NA	Irrigation	0.4	NA
6S	2W	WM	10	SE NE	NA	97	Irrigation	33.6	NA
6S	2W	WM	10	SE NE	Lot 1	NA	Irrigation	3.0	NA
6S	2W	WM	10	NE SE	NA	NA	Irrigation	20.1	NA
6S	2W	WM	10	NW SE	NA	NA	Irrigation	1.6	NA
<b>Total Acres Irrigated</b>								<b>107.7</b>	

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (GLOT), Quarter Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, GLOT, and QQ.

**B. Groundwater Source Information (Well)**

1. Is the appropriation from a well?

YES

If "NO", items 2 through 4 relating to this section may be deleted.

2. Describe the access port (type and location) or other means to measure the water level in the well:

½ inch galvanized pipe through the vent/access port of the sanitary seal on the north side.

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3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See Well Log MARI 3906						

4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

See Well Log MARI 3906

C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)? NO

If "NO", items 2 through 4 relating to this section may be deleted.

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

D. Diversion and Delivery System Information

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport and apply the water from the point of appropriation to the place of use.

1. Is a pump used? YES

If "NO" items 2 through item 6 may be deleted.

2. Pump Information:

SOURCE	MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Well	Unknown	Unknown	Unknown	Submersible	Unknown	6 inch
Booster 1	Cornell	3RB-EM16-4	207381 12.88	Centrifugal	4 inch	4 inch
Booster 2	Cornell	3RB-EM16-4	132876 12.88	Centrifugal	4 inch	4 inch

3. Motor Information:

SOURCE	MANUFACTURER	HORSEPOWER
Well	Unknown	50 Hp per previous COBU submitted February 12, 1997
Booster 1	John Deere 4039DF001 SN T04039D445946	95 Hp
Booster 2	John Deere 4045TF150 SN PE4045T263930	90 Hp

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**4. Theoretical Pump Capacity:**

SOURCE	HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
Well	50 Hp	60 psi	195 feet (from air test recorded on well log)	0 feet	1.01 cfs
Booster 1	95 Hp	100 psi	195 feet (from air test recorded on well log)	0 feet	2.11 cfs
Booster 2	90 Hp	100 psi	195 feet (from air test recorded on well log)	0 feet	2.18 cfs

**5. Provide pump calculations:**

Q Pump (Well with 50 Hp) =  $\frac{(50 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(195 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 1.01 \text{ cfs}$

Q Pump (Well + Booster 1 @100 psi) =  $\frac{(50 \text{ Hp} \times 7.04 \text{ ft}^4/\text{sec Hp}) + (90 \text{ Hp} \times 6.61 \text{ ft}^4/\text{sec Hp})}{(195 \text{ ft lift} + 254.0 \text{ ft pressure head})} = 2.11 \text{ cfs}$

Q Pump (Well + Booster 2 @100 psi) =  $\frac{(50 \text{ Hp} \times 7.04 \text{ ft}^4/\text{sec Hp}) + (95 \text{ Hp} \times 6.61 \text{ ft}^4/\text{sec Hp})}{(195 \text{ ft lift} + 254.0 \text{ ft pressure head})} = 2.18 \text{ cfs}$

Q Pump (Well + Boosters 1 and 2 @100 psi) =  $\frac{[(50 \text{ Hp} \times 7.04 \text{ ft}^4/\text{sec Hp}) + (90 \text{ Hp} \times 6.61 \text{ ft}^4/\text{sec Hp})] + [(50 \text{ Hp} \times 7.04 \text{ ft}^4/\text{sec Hp}) + (95 \text{ Hp} \times 6.61 \text{ ft}^4/\text{sec Hp})]}{(195 \text{ ft lift} + 254.0 \text{ ft pressure head})} = 4.29 \text{ cfs}$

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**6. Measured Pump Capacity (using meter if meter was present and system was operating):**

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not running during site visit			

Reminder: For pump calculations use the reference information at the end of this document.

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7. Is the distribution system piped?

YES

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If "NO" items 8 through item 13 may be deleted.

**8. Mainline Information:**

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MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6 inch	25 feet	Steel	Above ground
6 inch	2,530 feet	PVC	Buried
6 inch – Lay flat hose	500 feet	Vinyl hose	Above ground
6 inch	1,500 feet	Aluminum	Above ground

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
4.1 inch – Hard hose traveler	1,600 feet	Poly hose	Above ground



**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
1.0 inch	100 psi	290 gpm	2	2	1.29 cfs
1.1 inch	100 psi	355 gpm	2	2	1.58 cfs

Reminder: For sprinkler output determination use the reference information at the end of this document.

**11. Drip Emmitter Information:**

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
NA					

**12. Drip Tape Information:**

DRIPPER SPACING IN INCHES	GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	ADDITIONAL INFORMATION
NA					

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NA				

**E. Storage**

1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)?

NO

If "NO", item 2 and 3 relating to this section may be deleted.

**F. Gravity Flow Pipe**

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

NO

If "NO", items 2 through 4 relating to this section may be deleted.

**G. Gravity Flow Canal or Ditch**

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

NO

If "NO", items 2 through 4 relating to this section may be deleted.

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**H. Additional notes or comments related to the system:**

**Note:**

- Per the COBU previous submitted on February 12, 1997: a Grainland Aquamater Model 400 B Totalizing Flowmeter was installed. A replacement meter was installed June 2022.
- The pump is the original pump installed in the 1980's and no records could be found to document the model or serial numbers. The pump horsepower was determined from the previous COBU submitted in 1997.
- The system can run two hard hose travelers at a time.

**SECTION 5  
CONDITIONS**

All conditions contained in the permit, permit amendment, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

**1. Time Limits:**

Permits and extension final orders contain any or all of the following dates: the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use was to be completed. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or permit extension order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	<b>September 29, 1995</b>		
BEGIN CONSTRUCTION (A)	<b>September 29, 1996</b>	<b>September 30, 1996</b>	<b>Authorized Well (MARI 3906) began construction September 18, 1987.</b>
COMPLETE CONSTRUCTION (B)	<b>October 1, 1997 extended to: October 1, 2021</b>	<b>February 1997</b>	<b>Irrigation system completed and original meter installed. (Note: Replacement meter installed in June 2022)</b>
COMPLETE APPLICATION OF WATER (C)	<b>October 1, 1998 extended to: October 1, 2021</b>	<b>April 1, 2021</b>	<b>All the permit conditions were met and full beneficial use of water was made when the annual water level reading was recorded on April 1, 2021.</b>

\* MUST BE WITHIN PERIOD BETWEEN PERMIT, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

**2. Is there an extension final order(s)?**

YES

*If "NO", items a and b relating to this section may be deleted*

a. Did the Extension Final Order require the submittal of Progress Reports?

NO

*If "NO", item b relating to this section may be deleted.*

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**3. Initial Water Level Measurements:**

a. Was the water user required to submit an initial static water level measurement? **YES**

*If "NO", items b through d relating to this section may be deleted.*

b. What month was the initial measurement to be taken in?

April

c. Was the measurement submitted to the Department? **YES**

d. If the initial measurement was not submitted, provide that measurement now, if available:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

**4. Annual Static Water Level Measurements:**

a. Was the water user required to submit annual static water level measurements? **YES**

*If "NO", items b through e relating to this section may be deleted.*

b. Provide the month, or months, the static water level measurement(s) were to be made:

April

c. Were the static water level measurements taken in the month(s) required? **YES**

d. If "YES", were those measurements submitted to the Department? **YES**

e. If the annual measurements were not submitted, provide the measurements now:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

**5. Pump Test:**

a. Did the permit require the submittal of a pump test? **YES**

Ground water permits with priority dates on or after **December 20, 1988**, require the submittal of a pump test prior to issuance of a certificate. In some cases, the permit holder may qualify for a multiple well exemption or an unreasonable burden exemption.

For additional information regarding pump tests see:

<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

*If "NO", items b through e relating to this section may be deleted.*

b. Has the pump test been previously submitted to the Department? **YES**

c. Is the pump test attached to this claim? **NO**

d. Has the pump test been approved by the Department? **YES**

e. Has a pump test exemption been approved by the Department? **NO**

**\*\* Claims will not be reviewed until a pump test or exemption has been approved by the Department**

**6. Measurement Conditions:**

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? **YES**

*If "NO", items b through f relating to this section may be deleted.*

**Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion or appropriation.**

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b. Has a meter been installed? **YES**

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well	Semetrics	05221903	Working	240 gallons (July 14, 2022)	Replaced: June 22, 2022

*If a meter has been installed, items d through f relating to this section may be deleted.*

**7. Recording and reporting conditions:**

a. Is the water user required to report the water use to the Department? **NO**

*If "NO", item b relating to this section may be deleted.*

**8. Other conditions required by permit, permit amendment final order, or extension final order:**

a. Were there special well construction standards? **NO**

b. Was submittal of a ground water monitoring plan required? **NO**

c. Was submittal of a water management and conservation plan required? **NO**

d. Was a Well Identification Number (Well ID tag) assigned and attached to the well? **NO**

WELL ID #	DATE ATTACHED TO WELL
NA	

e. Other conditions? **NO**

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

None

**SECTION 6**

**ATTACHMENTS**

Provide a list of any additional documents you are attaching to this report:

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	Claim of Beneficial Use Map
State Water Well Report – MARI 3906	Well log and driller's notes for MARI 3906 – Well
BLM Cadastral Map	BLM Cadastral Map T. 6S. R. 2W. showing DLC and Government Lot locations

**SECTION 7**

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## CLAIM OF BENEFICIAL USE MAP

The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on poly film at a scale of 1" = 1320 feet, 1" = 400 feet, or the original full-size scale of the county assessor map for the location.

Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

The COBU map was prepared using tax assessor's map 06 2W 3, 10, and 10A, overlain by a 2014 aerial photo titled USDA-FSA-APFO NAIP County Mosaic and obtained on line from the Natural Resources Conservation Service, Image Metadata:  
<http://datagateway.nrcs.usda.gov/Catalog/ProductDescription/NAIPM.html>.

### Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

**(Reminder: Incomplete maps and/or claims may be returned.)**

- Map on polyester film
- Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- Township, Range, Section, Donation Land Claims, and Government Lots
- If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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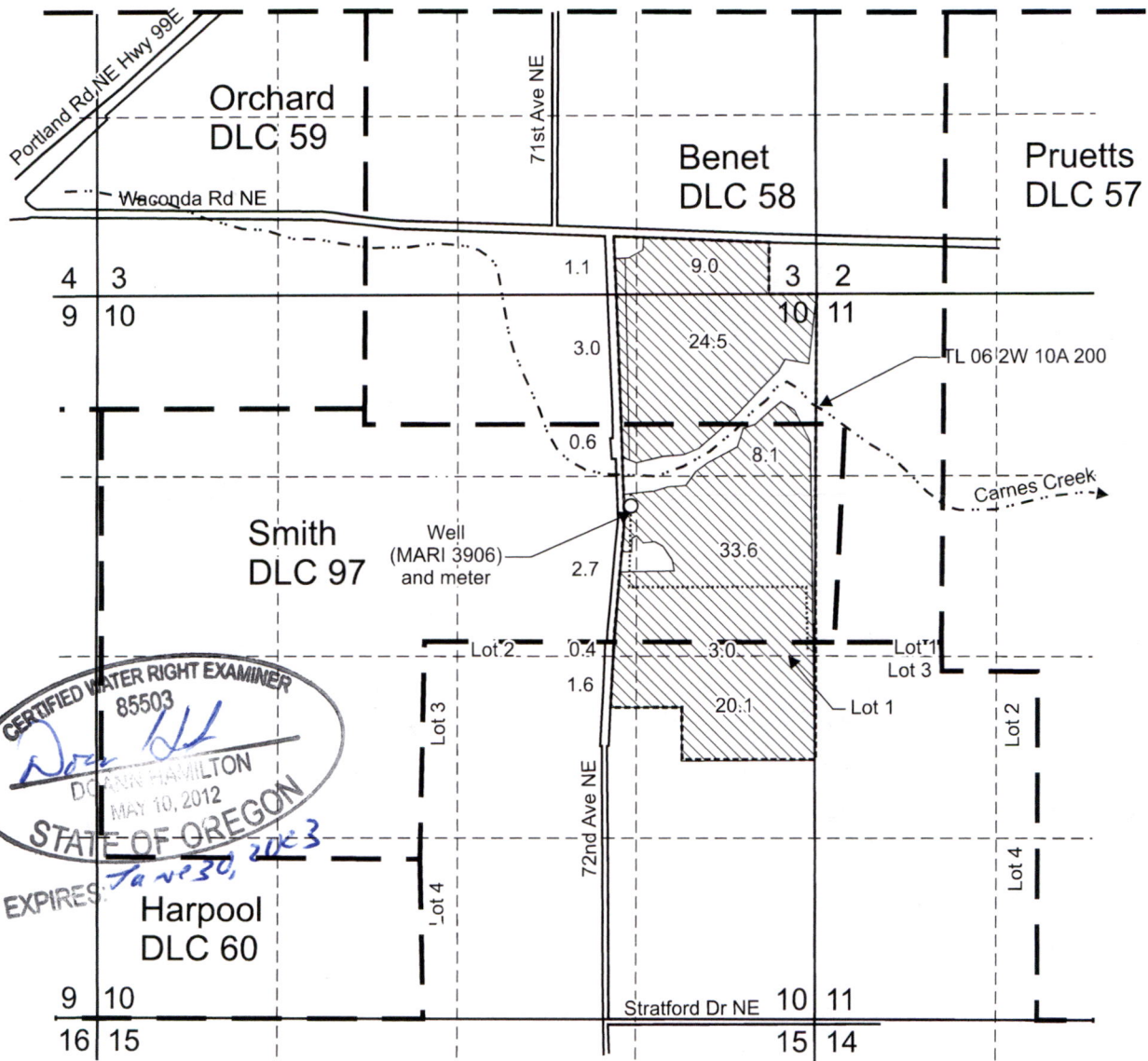
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# T.6S. R.2W. Sec. 3 & 10, W.M.



**CERTIFIED WATER RIGHT EXAMINER**  
 85503  
*Doan Hamilton*  
 DOAN HAMILTON  
 MAY 10, 2012  
 STATE OF OREGON  
 EXPIRES *Jan 30, 2023*

Well (MARI 3906) is located 1,540 feet south and 1,390 feet west from the NE corner, Section 10.

 Area (107.7 Acres) irrigated under Application G-12161, Permit G-11565.

 Tax lot boundary

 Donation Land Claim boundary

 Water main line

Scale: 1" = 1,320'



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.

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**Claim of Beneficial Use Map**  
 Application G-12161, Permit G-11565

Duane and Eric Land Holdings LLC  
 T.6S. R.2W. Sec. 3 & 10, W.M.

Pacific Hydro-Geology Inc.

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MAR 3906

69/2W-10 ab

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

DEC 21 1987

(1) OWNER: Name Martha Marks, Address 10868 S. Mulino, City Canby, State OR, Zip 97013

(2) TYPE OF WORK: [X] New Well, [ ] Deepen, [ ] Recondition, [ ] Abandon

(3) DRILL METHOD: [X] Rotary Air, [ ] Rotary Mud, [ ] Cable, [ ] Other

(4) PROPOSED USE: [ ] Domestic, [ ] Community, [ ] Industrial, [X] Irrigation, [ ] Thermal, [ ] Injection, [ ] Other

BORE HOLE CONSTRUCTION: Special Construction approval Yes No, Depth of Completed Well 195 ft., Explosives used [ ] [X] Type Amount

Table with columns: HOLE (meter From To), SEAL (Material From To), Amount (sacks or pounds). Rows include Bent cement cap 0-1.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E, [X] Other granular bent. poured into annulus

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Rows for Casing and Liner.

Location of shoe(s) pulled 12" back to 98'

(7) PERFORATIONS/SCREENS: [X] Screens, Type Johnson, Material mild steel

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Rows for perforations at 99-129 and 148-193.

(8) WELL TESTS: Minimum testing time is 1 hour. [ ] Pump, [ ] Bailer, [X] Air, [ ] Artesian. Yield 300 gal/min, Drawdown, Drill stem at 195, Time 1 hr.

Temperature of water, 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

(9) LOCATION OF WELL by legal description:

County Marion, Latitude, Longitude, Township 6S, N or S, Range 2W, E or W, WM, Section 10, NW 1/4, NE 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well (or nearest address) 10036 NE 72nd Brooks OR 97305

(10) STATIC WATER LEVEL:

26.5 ft. below land surface, Date 12-15-87, Artesian pressure lb. per square inch, Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Estimated Flow Rate, SWL. Row: 100' to 193', 300 + GPM, 26.5'

(12) WELL LOG:

Table with columns: Material, From, To, SWL. Rows: Soil, Clay-brown, medium, Clay stone-brown medium, Clay-grey, Silty sand grey, Clay grey sandy, Sand grey silty w/ gravel, Gravel large w/ coarse black sand, Clay grey, Sand black coarse, Sand & gravel large w/ wood, Clay grey.

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OWARD

Date started 9-18-87, Completed 12-15-87

(unbonded) Water Well Constructor Certification:

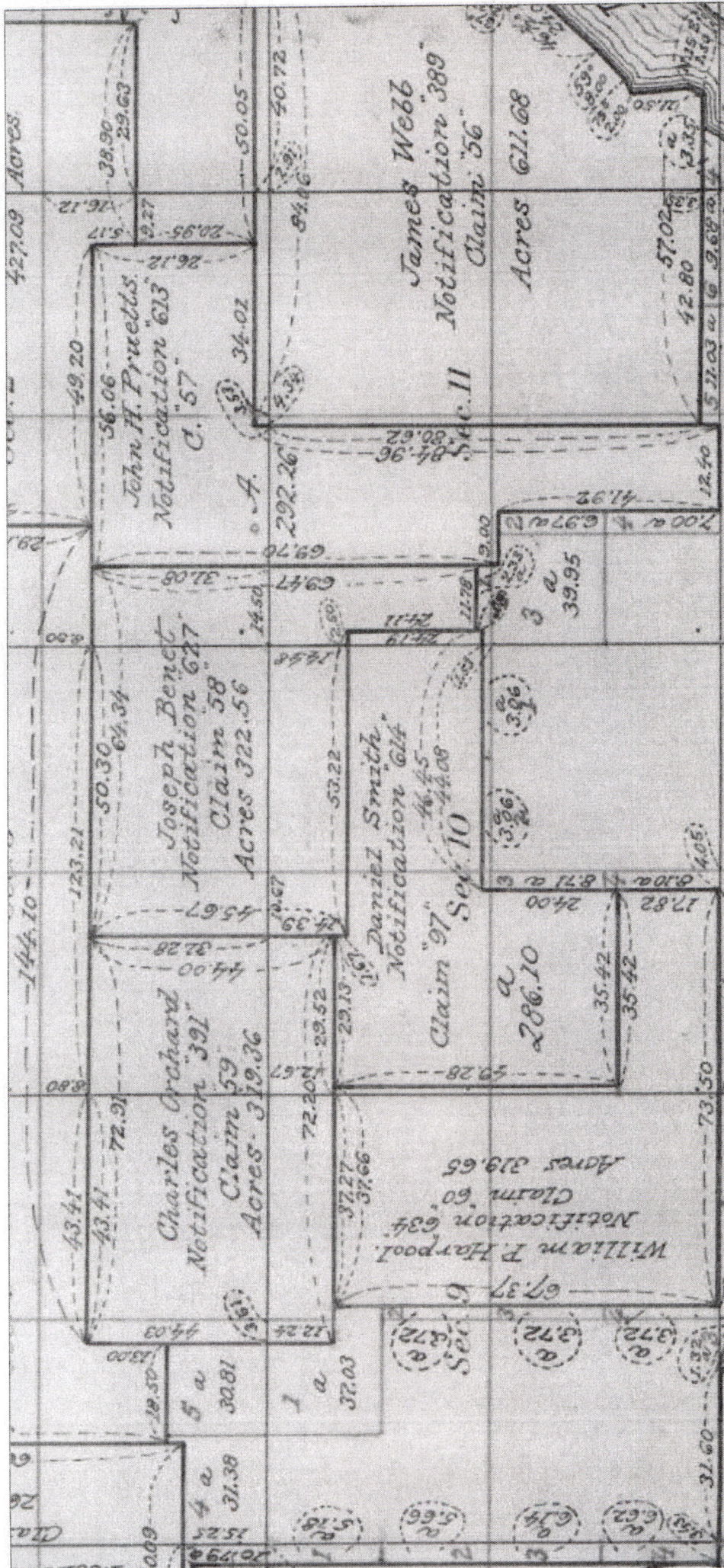
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed [Signature], WWC Number 1358, Date 12-17-87

(bonded) Water Well Constructor Certification:

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

Signed [Signature], WWC Number 723, Date 12-17-87



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