### **CLAIM OF** BENEFICIAL USE for Transfer New or Additional **POA Only**



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

A fee of \$230 must accompany this form for any Transfer final orders including a water right with a priority date of July 9, 1987, or later.

Example - A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

### A separate form shall be completed for each transfer.

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at: https://www.oregon.gov/OWRD/Forms/Pages/default.aspx

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. Every item must have a response. If any requested information does not apply to the claim, insert "NA." Do not delete or alter any section of this form unless directed by the form. The Department may require the submittal of additional information from any water user or authorized agent.

"Section 8" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-979-9103.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see:

https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx

### **SECTION 1** GENERAL INFORMATION

### **Type of Authorized Change**

This Claim is being submitted for a transfer where the only authorized change was a change in point(s) of appropriation or additional point(s) of appropriation, or a combination of both. YES If additional changes were authorized, you will need to select a different form. RECEIVED

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1. File Information	on				
APPLICATION #					
T-13876					
2. Property Own	er (current owne	er information)			
APPLICANT/BUSINES		,	PHONE No.		ADDITIONAL CONTACT No.
Crescent Water S	upply and Impro	ovement District	541-433-2989	)	
Address					
PO Box 247					
CITY		STATE	ZIP	E-MAIL	
Cusses		OR	97733-0247	crescenty	vater@cwsid.org
of the current pro assignment be file <b>3.</b> Transfer holde TRANSFER HOLDER O	ed with the Depa er of record (this	ot the transfer hol artment. <u>Each</u> tran	sfer holder of r	it is recomn	nended that an t sign this form.
If the current pro assignment be file 3. Transfer holde TRANSFER HOLDER O Same as above	ed with the Depa er of record (this	ot the transfer hol artment. <u>Each</u> tran	sfer holder of r	it is recomn	nended that an t sign this form.
assignment be file  3. Transfer holde  TRANSFER HOLDER O  Same as above	ed with the Depa er of record (this	ot the transfer hol artment. <u>Each</u> tran	sfer holder of r	it is recomn	nended that an t sign this form.
If the current pro assignment be file	ed with the Depa er of record (this	ot the transfer hol artment. <u>Each</u> tran	sfer holder of r	it is recomn	nended that an t sign this form.
If the current pro assignment be file  3. Transfer holder of the state	ed with the Depa er of record (this F RECORD	ot the transfer hol artment. <u>Each</u> tran may, or may not,	be the current	it is recomn	nended that an t sign this form.
If the current pro assignment be file 3. Transfer holder TRANSFER HOLDER O Same as above ADDRESS CITY 4. Date of Site In	ed with the Depa er of record (this F RECORD	ot the transfer hol artment. <u>Each</u> tran may, or may not,	be the current	it is recomn	nended that an t sign this form.
If the current pro assignment be file  3. Transfer holder  TRANSFER HOLDER OF Same as above  ADDRESS  CITY  4. Date of Site In	er of record (this F RECORD	ot the transfer hole artment. <u>Each</u> trans may, or may not,	be the current	it is recomn record must property o	nended that an training sign this form. wner)
If the current pro assignment be file  3. Transfer holder of Same as above ADDRESS  CITY  4. Date of Site In 10/10/2022	er of record (this F RECORD	ot the transfer hol artment. <u>Each</u> tran may, or may not,	be the current  ZIP	it is recomn record must property o	nended that an training sign this form. wner)

Klamath	

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

racinally and attitude of record for and	p p / ( - · · · · · ·	
OWNER OF RECORD		
Address		
Сіту	STATE	ZIP

Add additional tables for owners of record as needed



### 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.

Daniel B. Scalas
April 23, 2015

OF OREG

RENEWAL 06/30/24

CWRE NAME		PHONE NO.		ADDITIONAL CONTACT NO.
Daniel B. Scalas		541-884-46	66	
ADDRESS				
1435 Esplanade Ave.				
CITY	STATE	ZIP	E-MAIL	
Klamath Falls	OR	97601	dscalas@ad	kinsengineering.com

### Transfer Holder of Record Signature or Acknowledgement

**<u>Each</u>** transfer 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
Mill D. BL	Michael Carlson	Board President of Crescent Water Supply and Improvement District	11-14-2022



### **CLAIM DESCRIPTION**

Note: The Claim <u>only</u> needs to describe the new or additional point(s) of appropriation. This Claim does not need to provide information for the original point(s) of appropriation unless the original point of appropriation is either a new or additional point of appropriation on another right involved in this transfer.

1. New or additional point of appropriation name or number:

POINT OF APPROPRIATION	WELL LOG ID # FOR ALL	WELL TAG#	Source
(POA) NAME OR NUMBER	WORK PERFORMED ON THE	(IF APPLICABLE)	(IF LISTED IN TRANSFER FINAL)
(CORRESPOND TO MAP)	WELL		ORDER)
المراجعة الم	(IF APPLICABLE)		
Weil 4	KLAM 61358	L-145150	Little Deschutes River Basin

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

#### 2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final?

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

M	/A
IN	/ A

3. Claim Summary:

NEW OR ADDITIONAL POA	MAXIMUM RATE	CALCULATED THEORETICAL	AMOUNT OF WATER MEASURED
NAME OR #	AUTHORIZED	RATE BASED ON SYSTEM	
Well 4	1.8 CFS	0.91 CFS	N/A

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Note: The Claim <u>only</u> needs to describe the new or additional point(s) of appropriation. This Claim does not need to provide information for the original point(s) of appropriation unless the original point of appropriation is either a new or additional point of appropriation on another right involved in this transfer.

1. New or additional point of appropriation name or number:

Well 4	(IF APPLICABLE)  KLAM 61358	L-145150	Little Deschutes River Basin
(POA) NAME OR NUMBER (CORRESPOND TO MAP)	WORK PERFORMED ON THE	(IF APPLICABLE)	(IF LISTED IN TRANSFER FINAL ORDER)
POINT OF APPROPRIATION	WELL LOG ID # FOR ALL	WELL TAG #	Source

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

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If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

	/ A
N	/A

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New or Additional POA	MAXIMUM RATE	CALCULATED THEORETICAL	AMOUNT OF WATER MEASURED
NAME OR #	AUTHORIZED	RATE BASED ON SYSTEM	
Well 4	1.8 CFS	0.91 CFS	N/A



### SYSTEM DESCRIPTION

Are there multiple new or additional Points of Appropriation (POA)?

NO

### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Goulds	7CLC	Unknown	Submersible	6"	6"

### 2. Motor Information

MANUFACTURER	Horsepower		
Hitachi	60		

3. Theoretical Pump Capacity

HORSEPOWER OPERATING PSI		*IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)	
60	50	336.0'	130.0'	0.91 CFS	

4. Provide pump calculations:

See Attachment D for theoretical pump capacity calculations.

5. 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)
N/A			

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

- B. Groundwater Source Information (Well and Sump)
- 3. Is the appropriation from a dug well (sump)?

NO

C. Additional notes or comments related to the system:

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### **SECTION 5**

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### **CONDITIONS**

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

#### 1. Time Limits:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	*This Date Must Fall Between The "Issuance Date" And The "Completeness Date"		
ISSUANCE DATE	9/22/2022			
COMPLETENESS DATE FROM ORDER (C)	10/1/2023	9/22/2022		

<sup>\*</sup> MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

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

NO

- 3. Measurement Conditions:
- a. Does the transfer final order, or any extension final order require the installation of a meter or other approved measuring device?

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 appropriation.

b. Has a meter been installed?

YES

#### c. Meter Information

Well 4	McCrometer	2022882-06	Working	5,920,000 gallons	August 2022
POA Name or #	Manufacturer	SERIAL#	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED

- 4. Recording and reporting conditions
- a. Is the water user required to report the water use to the Department?

NO

- 5. Other conditions required by the transfer 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. 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):

### **ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION			
Attachment A	Copy of Transfer Final Order T-13876			
Attachment B	Claim of Beneficial Use Map on Mylar			
Attachment C	Claim of Beneficial Use Map (paper copy)			
Attachment D	Theoretical Pump Capacity Calculations			
Attachment E	Well Log KLAM 61358			



### **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 polyester 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.

For the purpose of this Claim, the map identifying the location of the place of use does not require a new survey. The location of the place of use identified on the Claim map should be based on the original right of record at the time the transfer final order was issued. In transfers approved for <u>additional</u> points of appropriation, the original points must be identified the map based on the original right of record at the time the transfer final order was issued.

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.

This Claim of Beneficial Use Map was prepared from field measurements, NAIP 2022 aerial photography, Klamath County tax maps, and Oregon GLO maps.



### **Map Checklist**

(Remin	der: Incomplete maps and/or claims may be returned.)
$\boxtimes$	Map on polyester film
$\boxtimes$	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
$\boxtimes$	Township, Range, Section, Donation Land Claims, and Government Lots
⊠N/A	Alf irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
$\boxtimes$ N/A	Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
$\boxtimes$	Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
$\boxtimes$	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.) *Not required for this type of Claim of Beneficial Use
$\boxtimes$	Point(s) of diversion or appropriation (illustrated and coordinates)
$\boxtimes$	Tax lot boundaries and numbers
$\boxtimes$ N/A	A Source illustrated if surface water
$\boxtimes$	Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
$\boxtimes$	Application and permit number or transfer number
	North arrow
$\boxtimes$	Legend
$\boxtimes$	CWRE stamp and signature

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

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### ATTACHMENT A Copy of Transfer Final Order T-13876

NOV 28 2022 SALEM, OREGON



## OF THE STATE OF OREGON

In the Matter of Transfer Application	)	FINAL ORDER APPROVING
T-13876, Klamath County	)	AN ADDITIONAL POINT OF
	)	APPROPRIATION

#### Authority

Oregon Revised Statutes (ORS) 537.705 and 540.505 to 540.580 establish the process in which a water right holder may submit a request to transfer the point of appropriation, place of use, or character of use authorized under an existing water right. Oregon Administrative Rules (OAR) Chapter 690, Division 380 implement the statutes and provides the Department's procedures and criteria for evaluating transfer applications.

### Applicant

CRESCENT WATER SUPPLY AND IMPROVEMENT DISTRICT PO BOX 247 CRESCENT, OR 97733-0247

### **Findings of Fact**

- On December 20, 2021, CRESCENT WATER SUPPLY AND IMPROVEMENT DISTRICT filed an application for an additional point of appropriation under Certificate 89904. The Department assigned the application number T-13876.
- 2. Notice of the application for transfer was published on January 4, 2022, pursuant to OAR 690-380-4000. No comments were filed in response to the notice.
- 3. On June 16, 2022, the Department mailed a copy of the draft Preliminary Determination proposing to approve Transfer Application T-13876 to the applicant. The draft Preliminary Determination cover letter set forth a deadline of July 18, 2022, for the applicant to respond. The applicant requested that the Department proceed with issuance of a Preliminary Determination and provided the necessary information to demonstrate that the applicant is authorized to pursue the transfer.

This final order is subject to judicial review by the Court of Appeals under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482(1). Pursuant to ORS 536.075 and OAR 137-003-0675, you may petition for judicial review or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

- 4. On August 3, 2022, the Department issued a Preliminary Determination proposing to approve Transfer T-13876 and mailed a copy to the applicant. Additionally, notice of the Preliminary Determination for the transfer application was published on the Department's weekly notice on August 9, 2022, and in the Klamath Herald and News newspaper on August 9 and 16, 2022 pursuant to ORS 540.520 and OAR 690-380-4020. No protests were filed in response to the notice.
- 5. The right to be transferred is as follows:

Certificate:

89904 in the name of CRESCENT WATER SUPPLY AND IMPROVEMENT

DISTRICT (perfected under Permit G-11990)

Use:

QUASI-MUNICIPAL USES

Priority Date: OCTOBER 19, 1989

Rate:

1.8 CUBIC FEET PER SECOND (CFS) FURTHER LIMITED TO 1.03 CFS FROM

WELL 1, 0.71 CFS FROM WELL 2, LAND 0.50 CFS FROM WELL 3, in any combination, or its equivalent in case of rotation, measured at the well.

Source:

WELL 1, WELL 2, AND WELL 3 in the LITTLE DESCHUTES RIVER BASIN

### **Authorized Points of Appropriation:**

Twp	Rng	Mer	Sec	Q-Q	GLot	Measured Distances
24 S	9 E	WM	30	SW NE		WELL 1 - 1680 FEET SOUTH AND 1260 FEET EAST FROM THE N1/4 CORNER OF SECTION 30
24 S	9 E	WM	30	SE NE	9	WELL 2 - 1520 FEET SOUTH AND 1770 FEET EAST FROM THE N1/4 CORNER OF SECTION 30
25 S	8 E	WM	1	NE NE	1	WELL 3 - 470 FEET SOUTH AND 770 FEET WEST FROM THE NE CORNER OF SECTION 1

#### Authorized Place of Use:

		QUASI-N	IUNICIP	AL	
Twp	Rng	Mer	Sec	Q-Q	GLot
245	8 E	WM	25	NW NE	28700
245	8 E	WM	25	SW NE	13
24 5	8 E	WM	25	SE NE	
24 S	8 E	WM	25	SE NW	
24 \$	8 E	WM	25	NE SW	
24 S	8 E	WM	25	NW SW	
24 S	8 E	WM	25	SW SW	
245	8 E	WM	25	SE SW	
24 S 8 E		WM	25	NE SE	
245	8 E	WM	25	NW SE	
245	8 E	WM	25	SW SE	
245	8 E	WM	25	SE SE	
245	8 E	WM	36	SE NE	
24 S	8 E	WM	36	NE SW	
24 S	8 E	WM	36	SE SW	
24 S	8 E	WM	36	NE SE	
245	8 E	WM	36	NW SE	
245	8 E	WM	36	SW SE	
245	8 E	WM	36	SE SE	



	QUASI-MUNICIPAL							
Twp	Rng	Mer	Sec	Q-Q	GLot			
24 S	9 E	WM	30	NE NE				
24 S	9 E	WM	30	NW NE				
24 S	9 E	WM	30	SW NE				
24 S	9 E	WM	30	SE NE				
24 S	9 E	WM	30	SW NW	2			
24 S	9 E	WM	30	SE NW	2			
24 S	9 E	WM	30	NE SW	3			
24 S	9 E	WM	30	NW SW	3			
24 S	9 E	WM	30	SW SW	3			
24 S	9 E	WM	30	SE SW	3			
24 S	9 E	WM	30	NW SE				
24 S	9 E	WM	31	NW NW				
24 S	9 E	WM	31	SW NW				
25 S	8 E	WM	1	NE NE	1			
25 S	8 E	WM	1	NW NE	1			

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6. Transfer Application T-13876 proposes an additional point of appropriation approximately between 234 feet and 2.03 miles from the existing points of appropriation to:

						APPROXIMATE DISTANCES FROM AUTHORIZED WELLS (feet & miles)		
Twp	Rng	Mer	Sec	Q-Q	Measured Distances	WELL 1	WELL 2	WELL 3
24 S	9 E	WM	30	SE NE	WELL 4 - 1580 FEET SOUTH AND 1490 FEET EAST FROM THE N1/4 CORNER OF SECTION 30	234.8 FEET	257.0 FFET	2.03 MILES

### Transfer Review Criteria (OAR 690-380-4010)

- 7. Water has been used within the last five years according to the terms and conditions of the right. There is no information in the record that would demonstrate that the right is subject to forfeiture under ORS 540.610.
- 8. A pump, pipeline, and sprinkler system sufficient to use the full amount of water allowed under the existing right were present within the five-year period prior to submittal of Transfer Application T-13876.
- 9. The proposed change would not result in enlargement of the right.
- 10. The proposed change would not result in injury to other water rights.
- 11. All other application requirements are met.

### Conclusions of Law

The additional point of appropriation proposed in Transfer Application T-13876 is consistent with the requirements of ORS 537.705 and 540.505 to 540.580 and OAR 690-380-5000.



### Now, therefore, it is ORDERED:

- The additional point of appropriation proposed in Transfer Application T-13876 is approved.
- 2. The right to the use of the water is restricted to beneficial use at the place of use described and is subject to all other conditions and limitations contained in Certificate 89904 and any related decree.
- 3. Water right Certificate 89904 is cancelled.
- 4. The quantity of water diverted at the additional point of appropriation (WELL 4), together with that diverted at the original points of appropriation (WELLS 1, 2, and 3), shall not exceed the quantity of water lawfully available at the original points of appropriation (WELLS 1, 2, and 3).
- 5. Water use measurement conditions:
  - a. Before water use may begin under this order, the water user shall install a totalizing flow meter, or, with prior approval of the Director, another suitable measuring device, at each point of appropriation.
  - b. The water user shall maintain the meters or measuring devices in good working order.
  - c. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.
- 6. Water shall be acquired from the same aquifer (water source) as the original points of appropriation.
- 7. Full beneficial use of the water shall be made, consistent with the terms of this order, on or before October 1, 2023. A Claim of Beneficial Use prepared by a Certified Water Right Examiner shall be submitted by the applicant to the Department within one year after the deadline for completion of the change and full beneficial use of the water.
- 8. After satisfactory proof of beneficial use is received, a new certificate confirming the right transferred will be issued.

SEP 2 2 2022 Dated in Salem, Oregon on Lisa J. Jaramillo, Fransfer and Conservation Section Manager, for SEP 2 3 2022

DOUGLAS E. WOODCOCK, ACTING DIRECTOR

Oregon Water Resources Department



### ATTACHMENT B Claim of Beneficial Use Map on Mylar



### ATTACHMENT C Claim of Beneficial Use Map (paper copy)

# ATTACHMENT D Theoretical Pump Capacity Calculations

NOV 28 2022 SALEM, OREGON

### **Pump Capacity Calculation Sheet**

using Department designed formula:

(hp)(efficiency) / (lift + psi head) = capacity in cfs

Efficiency:

Centrifugal = 6.61 Turbine = 7.04

### Data Entry (fill in underlined blanks)

$$\begin{array}{c} \text{HP =} & 60 \\ \text{Efficiency =} & 7.04 \\ \text{Lift =} & 336 \\ \text{PSI =} & 50 \end{array}$$

### **Results Calculated**

(hp)(efficiency) = 422.4 Head based on psi = 127.0 Total dynamic head = 463.0

(head + lift)

Pump Capacity = 0.91 cubic feet per second

Well 4

Date: 11/3/2022

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### ATTACHMENT E Well Log KLAM 61358

### **KLAM 61358**

STATE OF OREGON WATER SUPPLY WELL REPORT

WELL I.D. LABEL# L	145150	
START CARD#	1056355	
ORIGINAL LOG#		

(as required by ORS 537.765 & OAR 690-205-0210)	ORIGINAL LOG #			
(1) LAND OWNER Owner Well I.D. 6350				
First Name Last Name	(9) LOCATION OF WELL (legal description)			
Company Crescent Water Supply & Improvement District	County KLAMATH Twp 24 S N/S Range 9 E E/W WM			
Address P.O. Box 247	Sec 30 SE 1/4 of the NE 1/4 Tax Lot 10			
City Crescent State OR Zip 97733				
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot Lat or 43.46784167	DMS or DD		
Alteration (complete 2a & 10)   Abandonment(complete 5a)	Long or -121.68843517	DMS or DD		
(2a) PRE-ALTERATION	C Street address of well C Nearest address	_ 5.45 0. 55		
Casing: To Gauge Stl Plstc Wid The CEIVE				
Material From To Amt sacks/lbs	Main St Crescent, OR			
Seal: JUN 1 6 2022  (3) DRILL METHOD JUN 1 6 2022  Rotary Air Rotary Mud Cable Auger Cable Mud  Reverse Rotary Other	(10) STATIC WATER LEVEL			
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) +	SWL(ft)		
Reverse Rotary Other	Completed Well 06-03-2022	334.5		
	Flowing Artesian? Dry Hole?	334.3		
(4) PROPOSED USE Domestic Irrigation Community VKD		225		
Industrial/Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found			
Thermal Injection Other	SWL Date From To Est Flow SWL(psi)	+ SWL(ft)		
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	06-03-2022 335 454 1,000+	334.5		
Depth of Completed Well 462 ft.				
BORE HOLE SEAL sacks/				
Dia From To Material From To Amt lbs				
18 0 20   Cement   184   204   22   S   17   20   204   Cement   13.2				
17   20   204   Calculated   13.2				
Calculated 10.3	(11) WELL LOG Ground Elevation			
How was seal placed: Method A B XC D E	Material From	То		
XOther Poured dry	Pummy 0	6		
Backfill placed from ft. to ft. Material	Gravel 6	8		
Filter pack from ft. toft. Material Size	Scoria rock black 8	18		
Explosives used: Yes Type Amount	Hard basalt black 18	24		
	Broken basalt black 24	27		
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	Broken basalt lavender 27 Broken basalt grey 32	32		
Proposed Amount Pounds Actual Amount Pounds	Broken basalt grey 32 Dense basalt w/some fractures lavender mix 37	55		
(6) CASING/LINER	Black & brown basalt broken 55	56		
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Black & lavender broken basalt 56	62		
	Brown broken volcanic rock 62	69		
0 10 🛛 1.9 459 365 🔘 🖂	Black & grey hard basalt 69	73		
	Black & grey broken basalt 73	80		
	Brown, red & black highly broken basalt 80  Black & red honeycomb broken basalt 84	84		
Shoe Inside Outside Other Location of shoe(s)	Black & red honeycomb broken basalt 84 Grey basalt hard 89	95		
Temp casing X Yes Dia 16 From 0 To 160	Grey basalt hard w/some fractured basalt 95	103		
	Grey brown broken basalt 103	111		
(7) PERFORATIONS/SGREENS Perforations Method Torch cut	Grey basalt hard	121		
	Data Stanta 404 22 2022	22		
Screens Type Material Perf/S Casing/ Screen Scrn/slot Slot # of Tele/	Date Started 04-27-2022 Completed 06-03-202			
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification			
Perf Liner 10 332 452 .25 8 984	I certify that the work I performed on the construction, deepen			
	abandonment of this well is in compliance with Oregon w			
	construction standards. Materials used and information reported the best of my knowledge and belief.	above are true to		
	1			
(O) MELL TECTO MELL CONTRACTOR	License Number 1411 Date 06-10-2022	-		
(8) WELL TESTS: Minimum testing time is 1 hour	Signed X + O W			
Pump Bailer Air revers Flowing Artesian				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification			
100 0 400 3	I accept responsibility for the construction, deepening, alteration work performed on this well during the construction dates reported			
	performed during this time is in compliance with Oregon w			
Temperature 62 °F Lab analysis Yes By	construction standards. This report is true to the best of my know			
		the States S.M. & Process Services		
Water quality concerns?	License Numbor 1684 Date 06-10-2022	I was I was		
	Signed Signed			
	Contact Into (setional) ionescrilling@notmail.com	28 2022		
ANABUL WATER TOOLS OF	1101	20 2000		
ORIGINAL - WATER RESOURCES DEPARTMENT OF THE WATER RESOURCES DEPARTMENT OF	VENT WITHIN 3 DAVE OF COMPLETION OF WORK FOR	ersion R 0.95 M, OREGON		

WATER SUPPLY WELL REPORT - continuation page

WELL I.D. LABEL# L 145150 START CARD # 1056355 ORIGINAL LOG #

(2a) PRE-ALTERATION	Water Quality Concerns		
Dia + From To Gauge Stl Plstc Wld Thrd	From To Description	Amount Units	
			$\neg$
			$\dashv$
			7
Material From To Amt sacks/lbs			$\dashv$
triuterial Plois To Aint Sectores			$\dashv$
			$\dashv$
	(10) STATIC WATER LEVEL		
(5) BORE HOLE CONSTRUCTION		сил (nei) + сил (	(4)
DODE HOLE CEAL	SWL Date From To Est Flow	SWL(psi) + SWL(i	(11)
Sacks			_
Dia From 10 Material From To Amt lbs			_
		-	_
Calculated 109.2			_
Bentonite 0 6 15 S		<b> </b>	_
Calculated 7.6			_
			_
Calculated			_
			_
Calculated			
FILTER PACK	(11) WELL LOC		
From To Material Size	(11) WELL LOG		
	Material	From To	
	Grey red honeycomb basalt	121 138	8
	Grey red dense hard basalt	138 147	
	Grey fractured basalt	147 148	
(6) CASING/LINER	Grey red bolcanic cinders porous	148 149	
	Grey red fractured basalt porous	149 157	7
Casing Liner Dia + From To Gauge Stl Plste Wld Thrd	Grey brown porous basalt	157 158	8
	Grey broken basalt	158 162	2
	Grey honeycomb basalt highly fractured	162 174	
	Grey fractures some porous	174 185	
	Grey basalt	185 193	3
	Grey basalt some fractured	193 210	
	Grey basalt	210 211	1
K XIIII H K XI H H	Grey lavender basalt fractured	211 214	4
	Grey red basalt highly fractured	214 219	9
	Grey red basalt	219 222	2
	Grey basalt	222 228	8
	Grey porous basalt broken	228 234	4
	Grey red porous some fractures	234 237	7
AND DEPOSIT AND	Grey bawsalt dense	237 242	
(7) PERFORATIONS/SCREENS	Red grey porous broken basalt	242 255	5
Perf/S Casing/ Screen Scm/slot Slot # of Tele/	Dense grey basalt	255 265	
creen Liner Dia From To width length slots pipe siz	Grey basalt some fractured	265 284	4
	Void - red cinders	284 286	
	Fast drilling - no return	286 292	2
	Red grey basalt mix	292 293	3
	Grey basalt	293 297	7
	Grey basalt broken	297 301	
	Grey basalt	301 308	8
	Grey red highly fractured basalt	308 310	0
	1		
	Comments/Remarks		
(8) WELL TESTS: Minimum testing time is 1 hour Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	RECEIVED RECE	IVED	
	JUN 1 6 2022 NOV 2		
	OWRD SALEM, C	R D DREGON	

### **KLAM 61358**

WATER SUPPLY WELL REPORT - continuation page

WELL I.D. LABEL# L 145150

START CARD # 1056355

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		
CONCEDENTAL CONCEDENCE	(10) STATIC WATER LEVEL	
5) BORE HOLE CONSTRUCTION	SWL Date From To Est Flow S	SWL(psi) + SWL(ft)
BORE HOLE SEAL sacks	/	
Dia From To Material From To Amt lbs		
Calculated		
Calculated		
Calculated	,   <del>                                  </del>	-
Calaulated	<sup>1</sup>   <del>                                  </del>	
Calculated		
FILTER PACK	(11) WELL LOG	
From To Material Size		-
	Material	From To
<del>       </del>	Red cindery grey basalt	310 316
	Grey red broken basalt Grey brown broken basalt	316 325 325 332
6) CASING/LINER	Grey basalt	332 343
0) CASHIG/LINER	Grey brown highly fractured basalt	343 347
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Grey brown open fractures loss circulation	347 355
	Grey brown w/some fractures	355 362
	Dense black basalt	362 367
	Black w/some red highly fractured caving	367 375
	Black & some red highly fractured basalt	375 381
	Black & brown hard basalt fractured	381 385
	Black & brown fractured porous	385 395
	Black & brown fractured basalt	395 408
	Black & brown porous fractured basalt Black & brown fractured porous basalt	408 412 412 420
	Black porous fractured basalt	420 446
	Black lightly porous dense basalt	446 448
	Black hard basalt some fractures	448 454
	Grey black basalt hard	454 456
(7) PERFORATIONS/SCREENS	Grey basalt hard	456 462
Perf/S Casing/ Screen Scrn/slot Slot # of Tele		
creen Liner Dia From To width length slots pipe s		
	-	
	-	
	Comments/Remarks	
	-	
(8) WELL TESTS: Minimum testing time is 1 hour		
	RECEIVED	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	DEC	CENED
	ne.	I had V hand
	JUN 1 6 2022	
	NOV	28 2022
	OWRD SALE	WRD
	SALE SALE	M, OREGON



# OWRD NOV 28 2022

Date Received (Date Stamp Here)

### **OWRD Over-the-Counter Submission Receipt**

Applicant Name(s)	& Address:(	rescent Wo	Her Supply	and Imx	novement	Mistrict
AO Boy	247	Crescent,	OR 9	7733		
Transaction Type:	COBU.				•	
Fees Received: \$_	230.00					•
$\square$ Cash	(Check;	Check No.	B626			
• •		Name(s) on C	Check: <u>Saw</u>	e as a	pplicant	
Thank you for your review your submit	submission. Oi ttal as soon as p	regon Water Res ossible.	sources Depart	ment (Depa	irtment) sta	ff will
lf your submission an acknowledgeme				a receipt fo	or the fees p	aid and
If determined to be an explanation of d	e incomplete, yo leficiencies that	our submission a must be addres	nd the accomp sed in order fo	panying fees or the submi	will be retu ttal to be ac	rned with
If you have any que at 503-986-0801 or			act the Departr	nent's Custo	omer Servic	e staff
Sincerely, OWRD Customer S	ervice Staff					
Submission receive	ed by:	(Name of OWRE	Staff)		•	
		<del></del>	· · · · · · · · · · · · · · · · · · ·	a <del>nd the same of t</del>		

### Instructions for OWRD staff:

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





Date Received (Date Stamp Here)

### **OWRD Over-the-Counter Submission Receipt**

Applicant Name(s) & Address: Crescent Water Sundy and Improvement District
PO DON 247 Crescent, OR 97733
Transaction Type: COBU
Fees Received: \$
☐ Cash ☐ Check; Check No. 8626
Name(s) on Check: Same as applican
Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.
If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.
If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.
If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.
Sincerely, OWRD Customer Service Staff
Submission received by: (Name of OWRD staff)

### Instructions for OWRD staff:

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
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