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

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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 #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
G-15543	G-18158	T-12590

2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.
North American Plants LLC			
ADDRESS			
PO Box 743			
CITY	STATE	ZIP	E-MAIL
Lafayette	OR	97127	

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		
North American Plants Inc. c/o Yongjian Chang		
ADDRESS		
9375 SE Warmington Rd.		
CITY	STATE	ZIP
McMinnville	OR	97128

ADDITIONAL PERMIT HOLDER OF RECORD		
NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

September 27, 2022

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Jeremy Dewar	**September 27, 2022**	**Maintenance and Building manager**

6. County

Yamhill 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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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.

Seal and Signature

CERTIFIED WATER RIGHT EXAMINER
85503
DOANN HAMILTON
MAY 10, 2012
STATE OF OREGON
EXPIRES: JUNE 30, 2023

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**

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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
Yongjian Chang	Yongjian Chang	President	1/10/2023

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 1 – NAP Well	YAMH 5660	L-146924
Well 2 – Herman Well	YAMH 5656	L-146925
Well 3	YAMH 55661	L-100573
Well 4	YAMH 58077	L-128827

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 1 – NAP Well	A well in Hawn Creek Basin	Yamhill River
Well 2 – Herman Well	A well in Hawn Creek Basin	Yamhill River
Well 3	A well in Hawn Creek Basin	Yamhill River
Well 4	A well in Hawn Creek Basin	Yamhill 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 1 – NAP Well	Nursery	NA	Year Round	0.04 cfs
Well 2 – Herman Well	Nursery	NA	Year Round	0.04 cfs
Well 3	Nursery	NA	Year Round	0.02 cfs
Well 4	Nursery	NA	Year Round	0.09 cfs
Total Quantity of Water Used				0.19 cfs

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:

Well 1 (NAP Well) (YAMH 5660) is located in a 4.5' x 2.5' cinder block vault approximately 2.3 feet deep. Water is pumped using a 1 Hp submersible pump to convey water through a buried 1.5-inch Sch 80 PVC pipe 70 feet west to the treatment pump house.

Well 2 (Herman Well) (YAMH 5656) pumps water using a 1 Hp submersible pump to convey water through approximately 10 feet of above- and below-ground 2-inch Sch 80 PVC connecting to a buried 1.25-inch Sch 40 PVC pipe which continues 400 feet southeast to a pump house. Inside the pump house the water is pressurized through an 86.7-gallon metal pressure tank. The line tees to supply two domestic houses before the meter and the other tees goes to the meter.

Well 4 (YAMH 58077) pumps water using a 2 Hp submersible pump to convey water through a buried 1.25-inch Sch 40 PVC pipe 80 feet to the south southwest to the pump house. Inside the pump house, together with the discharge from Well 2, the line is pressurized through an 86.7-gallon metal pressure tank. The line tees to supply two domestic houses before the meter and the other tees goes to the meter.

After the meters for both Wells 2 and 4, the lines combine and exit through a single below-ground 1.25-inch Sch 40 PVC pipe, for approximately 500 feet to the south and east to the treatment pump house. A second single combined below-ground 1.25-inch Sch 40 PVC pipe heads south 50 feet to the lunch room.

Well 3 (YAMH 55661) pumps water using a ½ Hp submersible pump to convey water through a buried 1.25-inch Sch 80 PVC pipe approximately 475 feet to the south and west to the treatment pump house.

Inside the treatment pump house

Well 1 conveys water inside the treatment pump house through a 2-inch Sch 80 PVC above-ground pipe equipped with a meter and is pressurized with a 119-gallon metal pressure tank.

Well 3 conveys water inside the treatment pump house through a 2-inch Sch 80 PVC above-ground pipe equipped with a meter.

Wells 2 and 4 are combined into one below-ground 2-inch Sch 40 PVC line and convey water inside the treatment pump house through a 2-inch Sch 80 PVC above-ground line.

All three lines combine and then split off with one line having fertilizer added and the other line conveying the combined fresh water into the outside 45,000 gallon corrugated fresh water storage tank.

A 5 Hp centrifugal transfer pump with 20 gallon pressure tank transfers water from the freshwater tank through 3-inch buried Sch 80 PVC pipe to two 35,000 gallon tanks which are treated with different solutions.

There are two additional 10 Hp centrifugal transfer pumps to pump water from the two 35,000 gallon treated tanks:

a. one 10 Hp centrifugal grey pump transfers water from the bottom of the tank through a 4-inch Sch 80 PVC line to a filter system with a 20 gallon pressure tank and a pH balance system before being distributed to the places of use through below-, then above-ground 3-inch Sch 80 PVC pipes.

b. one 10 Hp centrifugal gold pump transfers water from the top portion of the tank through a 3-inch Sch 80 PVC line that is not filtered before being distributed to the places of use through below-, then above-ground 2-inch Sch 80 PVC pipes.

Four lines leave the treatment pump house:

- Two 2-inch Sch 80 PVC lines – one with fresh water and the other with fertilized water supplying the tent rooms. These lines extend approximately 200 feet west from the treatment room along the southern end of the tent rooms.

- Two 3-inch schedule 80 PVC lines – one with fresh water and the other with fertilized water supplying the greenhouses. These lines extend north with 2-inch Sch 80 PVC lines teeing off at each 3-inch PVC line heading east and west.

Inside the greenhouses and tent rooms:

The two 3-inch Sch 80 PVC lines extend north inside and along the top of the greenhouses. A 2-inch Sch 80 PVC line tees off each 3-inch PVC line. A one-inch black poly line tees off each 2-inch PVC line to supply the single one-inch black poly line paralleling the 2-inch PVC line. (A valve is used to open either fresh or fertilized water to supply this line as needed). Another one-inch black poly line tees off perpendicular to this line, one per row for 35 rows. Overhead drip emitters hang 3 feet from the one-inch black poly line using ¼-inch micro tubing every 5 feet.

In the tent rooms, the two 2-inch Sch 80 PVC lines extend from the treatment pump house west inside long the backside of the tent rooms on the south side starting below ground then coming above ground and running along the top inside of the tent rooms then back down to the boiler room. The two 2-inch Sch 80 lines come back into the tent rooms and run along the middle of the south side of the tent rooms. These two lines then head north along the top of the tent rooms to supply water to the tent rooms. Two lines tee down for each tent. One line contains the fertilizer and has a garden hose connection for use in this area. The other freshwater line extends into the tent where two rows of one-inch Sch 80 PVC laterals are attached extending east-west, two rows per tent. A drip emitter is attached to another one-inch, one-foot-long Sch 80 PVC line extending down from the east-west one-inch Sch 80 PVC line.

Approximately 400 sprinkler heads can be operated at one time.

Water is also supplied to the processing, shipping area, shop, and lunch room.

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).

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 authorized Well 5 has not been constructed and is, therefore, not included in this Claim of Beneficial Use.**

2. **The location of Well 1 – NAP Well (YAMH 5660) (also named NAP Well by client) is re-described as: 960 feet south and 1,475 feet east from the Center corner, Section 11.**

3. **The location of Well 2 – Herman Well (YAMH 5656) (also called Herman Well by client) is re-described as: 500 feet south and 840 feet east from the Center corner, Section 11.**

4. **The location of Well 3 (YAMH 55661) is more correctly placed at: 535 feet south and 1,460 feet east from the Center corner, Section 11.**

5. **The location of Well 4 (YAMH 58077) is more correctly placed at: 185 feet south and 1,110 feet east from the Center corner, Section 11.**

6. **The place of use was revised to include the correct references to the DLCs:**

Original authorized place of use:

4S	4W	Sec 11	NE SE	DLC 51	2.0
4S	4W	Sec 11	NW SE	DLC 50	4.5
				Total:	6.5

Revised place of use:

4S	4W	Sec 11	NE SE	DLC 50	1.1
4S	4W	Sec 11	NE SE	DLC 51	0.9
4S	4W	Sec 11	NW SE	DLC 50	4.5
				Total:	6.5

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 – NAP Well		**0.04 cfs**	**Not measured**	**Nursery**	**6.5**	**6.5**
Well 2 – Herman Well		**0.04 cfs**	**Not measured**	**Nursery**		
Well 3		**0.02 cfs**	**Not measured**	**Nursery**		
Well 4		**0.09 cfs**	**Not measured**	**Nursery**		
Total:	**0.974 cfs**	**0.19 cfs**				

SECTION 4a of 4d

SYSTEM DESCRIPTION

Are there multiple POAs? **YES**

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 1 – NAP 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
4S	4W	WM	11	NE SE	NA	50	Nursery	1.1	NA
4S	4W	WM	11	NE SE	NA	51	Nursery	0.9	NA
4S	4W	WM	11	NW SE	NA	50	Nursery	4.5	NA
Total Acres Irrigated								6.5	NA

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:

Top of casing beneath pitless adaptor cap.

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 YAMH 5660						

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 YAMH 5660

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:

Pump	Manufacturer	Model	Serial Number	Type (centrifugal, turbine or submersible)	Intake size	Discharge size
Well 1- NAP Well	**Unknown**	**Unknown**	**Unknown**	**Submersible**	**2 inch**	**1.25 inch**
Fresh water pump (Blue)	**Sta-Rite**	**DHJ3-170**	**1C08V**	**Centrifugal**	**3 inch**	**2 inch**
Treated water pump not filtered (Gold)	**Berkeley**	**B1- ½ TPMS**	**M28537**	**Centrifugal**	**3 inch**	**2 inch**
Treated water pump filtered (Grey)	**Berkeley**	**B1- ½ TPMS**	**M23365**	**Centrifugal**	**3 inch**	**2 inch**

3. Motor Information:

Pump	Manufacturer	Horsepower
Well 1- NAP Well	**Pentair Petek**	**1 Hp**
Fresh water pump (Blue)	**Baldor**	**5 Hp**
Treated water pump not filtered (Gold)	**Blador Reliancer**	**10 Hp**
Treated water pump filtered (Grey)	**Blador Reliancer**	**10 Hp**

4. Theoretical Pump Capacity:

Pump	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 1 – NAP Well	**1 Hp**	**45 to 60 psi**	**82 feet (estimated from pump test recorded on well log for Well 2 (YAMH 5656))**	**0 feet**	**0.03 to 0.04 cfs**
Fresh water pump (Blue)	**5 Hp**	**55 psi**	**-8.33 feet out of the 45,000 gal fresh water tank and 8.33 feet into the top of the 35,000 gal water tank for a 0 total lift**	**0 feet**	**0.24 cfs**
Treated water pump not filtered (Gold)	**10 Hp**	**55 psi**	**- 8.33 feet out of the 35,000 gal non-filtered tank and up 20 feet to the top of GH for a total of 11.7 lift**	**0 feet**	**0.44 cfs**
Treated water pump filtered (Grey)	**10 Hp**	**55 psi**	**- 8.33 feet out of the 35,000 gal filtered tank and up 20 feet to the top of GH for a total of 11.7 lift**	**0 feet**	**0.44 cfs**

5. Provide pump calculations:

Well 1 at PSI 45	**Q Pump = $\frac{(1\ Hp) \times (7.04\ ft^4/sec\ Hp)}{(82\ ft\ lift + 114.3\ ft\ pressure\ head)}$ = 0.04 cfs**
Well 1 at PSI 60	**Q Pump = $\frac{(1\ Hp) \times (7.04\ ft^4/sec\ Hp)}{(82\ ft\ lift + 152.4\ ft\ pressure\ head)}$ = 0.03 cfs**
Blue transfer pump	**Q Pump = $\frac{(5\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(0\ ft\ lift + 139.7\ ft\ pressure\ head)}$ = 0.24 cfs**
Gold transfer pump	**Q Pump = $\frac{(10\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(11.7\ ft\ lift + 139.7\ ft\ pressure\ head)}$ = 0.44 cfs**
Grey transfer pump	**Q Pump = $\frac{(10\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(11.7\ ft\ lift + 139.7\ ft\ pressure\ head)}$ = 0.44 cfs**

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 measured			

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

7. Is the distribution system piped? **YES**

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

8. Mainline Information:

Location	Mainline Size	Length	Type of Pipe	Buried or Above Ground
To the treatment pump house	1.5 inch	70 feet	Sch 80 PVC	Buried
Inside treatment pump house	4 inch	~ 50 feet	Sch 80 PVC	Buried and Above ground
Inside treatment pump house	3 inch	~ 200 feet	Sch 80 PVC	Buried and Above ground
Inside treatment pump house	2 inch	~ 1,000 feet	Sch 80 PVC	Buried and Above ground
To greenhouses (fresh and fertilized)	3 inch	~ 1,500 feet	Sch 80 PVC	Above ground
To tent houses (fresh and fertilized)	2 inch	~ 1,500 feet	Sch 80 PVC	Buried and Above ground

9. Lateral or Handline Information:

Location	Lateral or Handline Size	Length	Type of Pipe	Buried or Above Ground
Off the 3 inch mainline – fresh water	2 inch	~ 1,200 feet	Sch 80 PVC	Above ground
Off the 3 inch mainline – fertilized water	2 inch	~ 1,200 feet	Sch 80 PVC	Above ground
Off the 2 inch in greenhouse	1 inch	~10,300 feet	polyethylene	Above ground
Off the 1 inch in greenhouse	¼ inch	~486 feet	polyethylene	Above ground
Off the 2 inch mainline in the tent room – fresh water	2 inch	~ 1,600 feet	Sch 80 PVC	Above ground
Off the 2 inch mainline in the tent room – fertilized water	2 inch	~ 1,600 feet	Sch 80 PVC	Above ground
Inside each tent	1 inch	~7,200 feet	Sch 80 PVC	Above ground
Garden hoses	¾ inch	~ 4,000 feet	Polyurethane	Above ground

10. Sprinkler Information:

Size	Operating PSI	Sprinkler Output (GPM)	Total Number of Sprinklers	Maximum Number Used	Total Sprinkler Output (CFS)
NA					

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

11. Drip Emitter Information:

Location	Size	Operating PSI	Emitter Output (GPM)	Total Number of Emitters	Maximum Number Used	Total Emitter Output (CFS)
Greenhouses	**0.055 (blue)**	**29 psi**	**27.2 gph = 0.45 gpm**	**~ 2,058**	**400**	**0.40 cfs**
Tent room	**0.055 (blue)**	**29 psi**	**27.2 gph = 0.45 gpm**	**~ 3,156**	**400**	**0.40 cfs**

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)? **YES**

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

If "YES" is it a: Storage Tank **YES**
Bulge in System / Reservoir **NO**

Complete appropriate table(s), unused table may be deleted.

2. Storage Tank:

Material (concrete, fiberglass, metal, etc.)	Capacity (in gallons)	Above Ground or Buried
Metal – pressure tank for Well 1 – NAP Well	**119 gallons**	**Above ground**
Corrugated Steel tank 1 – fresh water	**45,000 gallons**	**Above ground**
Corrugated Steel tank 2 – treated water	**35,000 gallons**	**Above ground**
Corrugated Steel tank 3 – treated water	**35,000 gallons**	**Above ground**
Metal – pressure tank for fresh water transfer pump	**20 gallon**	**Above ground**
Metal – pressure tank for filter station	**20 gallon**	**Above ground**

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**

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.

H. Additional notes or comments related to the system:

Well 1 – NAP Well also supplies Permit G-18737.

SECTION 4b of 4d

SYSTEM DESCRIPTION

Are there multiple POAs? **YES**

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 2 – Herman 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
4S	4W	WM	11	NE SE	NA	50	Nursery	1.1	NA
4S	4W	WM	11	NE SE	NA	51	Nursery	0.9	NA
4S	4W	WM	11	NW SE	NA	50	Nursery	4.5	NA
Total Acres Irrigated								6.5	NA

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:

Rubber plug on a ¾ inch port on east north-east side of the sanitary seal.

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 YAMH 5656						

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 YAMH 5656

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**

2. Pump Information:

Pump	Manufacturer	Model	Serial Number	Type (centrifugal, turbine or submersible)	Intake size	Discharge size
Well 2 – Herman Well	**Unknown**	**Unknown**	**Unknown**	**Submersible**	**2 inch**	**1.5 inch**
Fresh water pump (Blue)	**Sta-Rite**	**DHJ3-170**	**1C08V**	**Centrifugal**	**3 inch**	**2 inch**
Treated water pump not filtered (Gold)	**Berkeley**	**B1- ½ TPMS**	**M28537**	**Centrifugal**	**3 inch**	**2 inch**
Treated water pump filtered (Grey)	**Berkeley**	**B1- ½ TPMS**	**M23365**	**Centrifugal**	**3 inch**	**2 inch**

3. Motor Information:

Pump	Manufacturer	Horsepower
Well 2 – Herman Well	**Franklin Electric**	**1 Hp**
Fresh water pump (Blue)	**Baldor**	**5 Hp**
Treated water pump not filtered (Gold)	**Blador Reliancer**	**10 Hp**
Treated water pump filtered (Grey)	**Blador Reliancer**	**10 Hp**

4. Theoretical Pump Capacity:

Pump	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 2 – Herman Well	1 Hp	45 to 60 psi	75 feet (from pump test recorded on well log)	0 feet	0.03 to 0.04 cfs
Fresh water pump (Blue)	5 Hp	55 psi	-8.33 feet out of the 45,000 gal fresh water tank and 8.33 feet into the top of the 35,000 gal water tank for a 0 total lift	0 feet	0.24 cfs
Treated water pump not filtered (Gold)	10 Hp	55 psi	- 8.33 feet out of the 35,000 gal non-filtered tank and up 20 feet to the top of GH for a total of 11.7 lift	0 feet	0.44 cfs
Treated water pump filtered (Grey)	10 Hp	55 psi	- 8.33 feet out of the 35,000 gal filtered tank and up 20 feet to the top of GH for a total of 11.7 lift	0 feet	0.44 cfs

5. Provide pump calculations:

Well 2 at PSI 45	Q Pump = $\frac{(1\ Hp) \times (7.04\ ft^4/sec\ Hp)}{(75\ ft\ lift + 114.3\ ft\ pressure\ head)}$	= 0.04 cfs
Well 2 at PSI 60	Q Pump = $\frac{(1\ Hp) \times (7.04\ ft^4/sec\ Hp)}{(75\ ft\ lift + 152.4\ ft\ pressure\ head)}$	= 0.03 cfs
Blue transfer pump	Q Pump = $\frac{(5\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(0\ ft\ lift + 139.7\ ft\ pressure\ head)}$	= 0.24 cfs
Gold transfer pump	Q Pump = $\frac{(10\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(11.7\ ft\ lift + 139.7\ ft\ pressure\ head)}$	= 0.44 cfs
Grey transfer pump	Q Pump = $\frac{(10\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(11.7\ ft\ lift + 139.7\ ft\ pressure\ head)}$	= 0.44 cfs

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 measured			

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

7. Is the distribution system piped? **YES**

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

8. Mainline Information:

Location	Mainline Size	Length	Type of Pipe	Buried or Above Ground
To the pump house	**2 inch**	**~ 10 feet**	**Sch 80 PVC**	**Above ground and Buried**
To the pump house	**1.25 inch**	**~ 400 feet**	**Sch 40 PVC**	**Buried**
Inside treatment pump house	**1.25 inch**	**~ 1,000 feet**	**Sch 40 PVC**	**Above ground**
To the treatment pump house combine with Well 4	**1.25 inch**	**~ 500 feet**	**Sch 40 PVC**	**Buried**
To the lunch room	**1.25 inch**	**~ 50 feet**	**Sch 40 PVC**	**Buried**
Mainlines from treatment room see Well 1				

9. Lateral or Handline Information:

Location	Lateral or Handline Size	Length	Type of Pipe	Buried or Above Ground
Laterals in greenhouses and tent room see Well 1				

10. Sprinkler Information:

Size	Operating PSI	Sprinkler Output (GPM)	Total Number of Sprinklers	Maximum Number Used	Total Sprinkler Output (CFS)
NA					

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

11. Drip Emitter Information:

Size	Operating PSI	Emitter Output (GPM)	Total Number of Emitters	Maximum Number Used	Total Emitter Output (CFS)
See Well 1					

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)? **YES**

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

If "YES" is it a: Storage Tank **YES**
Bulge in System / Reservoir **NO**

Complete appropriate table(s), unused table may be deleted.

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Metal – pressure tank for Well 2 – Herman Well	**87 gallons**	**Above ground**
Corrugated Steel tank 1 – fresh water	**45,000 gallons**	**Above ground**
Corrugated Steel tank 2 – treated water	**35,000 gallons**	**Above ground**
Corrugated Steel tank 3 – treated water	**35,000 gallons**	**Above ground**
Metal – pressure tank for fresh water transfer pump	**20 gallon**	**Above ground**
Metal – pressure tank for filter station	**20 gallon**	**Above ground**

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.

H. Additional notes or comments related to the system:

Well 2 – Herman Well also supplies Permit G-18737 and two domestic houses.

SECTION 4c of 4d

SYSTEM DESCRIPTION

Are there multiple POAs? **YES**

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 3

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
4S	4W	WM	11	NE SE	NA	50	Nursery	1.1	NA
4S	4W	WM	11	NE SE	NA	51	Nursery	0.9	NA
4S	4W	WM	11	NW SE	NA	50	Nursery	4.5	NA
Total Acres Irrigated								6.5	NA

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:

Top of casing beneath pitless adaptor cap.

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 YAMH 55661						

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 YAMH 55661

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:**

Pump	Manufacturer	Model	Serial Number	Type (centrifugal, turbine or submersible)	Intake size	Discharge size
Well 3	**Unknown**	**Unknown**	**Unknown**	**Submersible**	**2 inch**	**1.5 inch**
Fresh water pump (Blue)	**Sta-Rite**	**DHJ3-170**	**1C08V**	**Centrifugal**	**3 inch**	**2 inch**
Treated water pump not filtered (Gold)	**Berkeley**	**B1- ½ TPMS**	**M28537**	**Centrifugal**	**3 inch**	**2 inch**
Treated water pump filtered (Grey)	**Berkeley**	**B1- ½ TPMS**	**M23365**	**Centrifugal**	**3 inch**	**2 inch**

3. **Motor Information:**

Pump	Manufacturer	Horsepower
Well 3	**Pentair Pentek**	**0.5 Hp**
Fresh water pump (Blue)	**Baldor**	**5 Hp**
Treated water pump not filtered (Gold)	**Blador Reliancer**	**10 Hp**
Treated water pump filtered (Grey)	**Blador Reliancer**	**10 Hp**

4. **Theoretical Pump Capacity:**

Pump	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 3	**0.5 Hp**	**45 to 50 psi**	**68 feet (estimated from pump test recorded on well log for Well 2 (YAMH 5656))**	**0 feet**	**0.02 cfs**
Fresh water pump (Blue)	**5 Hp**	**55 psi**	**-8.33 feet out of the 45,000 gal fresh water tank and 8.33 feet into the top of the 35,000 gal water tank for a 0 total lift**	**0 feet**	**0.24 cfs**
Treated water pump not filtered (Gold)	**10 Hp**	**55 psi**	**- 8.33 feet out of the 35,000 gal non-filtered tank and up 20 feet to the top of GH for a total of 11.7 lift**	**0 feet**	**0.44 cfs**
Treated water pump filtered (Grey)	**10 Hp**	**55 psi**	**- 8.33 feet out of the 35,000 gal filtered tank and up 20 feet to the top of GH for a total of 11.7 lift**	**0 feet**	**0.44 cfs**

5. Provide pump calculations:

Well 3 at PSI 45	Q Pump = $\frac{(0.5\ Hp) \times (7.04\ ft^4/sec\ Hp)}{(68\ ft\ lift + 114.3ft\ pressure\ head)}$	= 0.02 cfs
Well 3 at PSI 50	Q Pump = $\frac{(0.5\ Hp) \times (7.04\ ft^4/sec\ Hp)}{(68\ ft\ lift + 127.0\ ft\ pressure\ head)}$	= 0.02 cfs
Blue transfer pump	Q Pump = $\frac{(5\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(0\ ft\ lift + 139.7\ ft\ pressure\ head)}$	= 0.24 cfs
Gold transfer pump	Q Pump = $\frac{(10\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(11.7\ ft\ lift + 139.7\ ft\ pressure\ head)}$	= 0.44 cfs
Grey transfer pump	Q Pump = $\frac{(10\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(11.7\ ft\ lift + 139.7\ ft\ pressure\ head)}$	= 0.44 cfs

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 measured			

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

7. Is the distribution system piped? YES

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

8. Mainline Information:

Location	Mainline Size	Length	Type of Pipe	Buried or Above Ground
To the treatment pump house	1.25 inch	475 feet	Sch 80 PVC	Buried
Mainlines from treatment room see Well 1				

9. Lateral or Handline Information:

Location	Lateral or Handline Size	Length	Type of Pipe	Buried or Above Ground
Laterals in greenhouses and tent room see Well 1				

10. Sprinkler Information:

Size	Operating PSI	Sprinkler Output (GPM)	Total Number of Sprinklers	Maximum Number Used	Total Sprinkler Output (cfs)
NA					

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

11. Drip Emitter Information:

Size	Operating PSI	Emitter Output (GPM)	Total Number of Emitters	Maximum Number Used	Total Emitter Output (CFS)
See Well 1					

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)? **YES**

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

If "YES" is it a: Storage Tank **YES**
Bulge in System / Reservoir **NO**

Complete appropriate table(s), unused table may be deleted.

2. Storage Tank:

Material (concrete, fiberglass, metal, etc.)	Capacity (in gallons)	Above Ground or Buried
Corrugated Steel tank 1 – fresh water	**45,000 gallons**	**Above ground**
Corrugated Steel tank 2 – treated water	**35,000 gallons**	**Above ground**
Corrugated Steel tank 3 – treated water	**35,000 gallons**	**Above ground**
Metal – pressure tank for fresh water transfer pump	**20 gallon**	**Above ground**
Metal – pressure tank for filter station	**20 gallon**	**Above ground**

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.

H. Additional notes or comments related to the system:

Well 3 also supplies Permit G-18737.

SECTION 4d of 4d

SYSTEM DESCRIPTION

Are there multiple POAs? **YES**

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 4

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
4S	4W	WM	11	NE SE	NA	50	Nursery	1.1	NA
4S	4W	WM	11	NE SE	NA	51	Nursery	0.9	NA
4S	4W	WM	11	NW SE	NA	50	Nursery	4.5	NA
Total Acres Irrigated								6.5	NA

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:

Top of casing beneath pitless adaptor cap.

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 YAMH 58077						

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 YAMH 58077

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:

Pump	Manufacturer	Model	Serial Number	Type (centrifugal, turbine or submersible)	Intake size	Discharge size
Well 4	Unknown	Unknown	Unknown	Submersible	2 inch	1.5 inch
Fresh water pump (Blue)	Sta-Rite	DHJ3-170	1C08V	Centrifugal	3 inch	2 inch
Treated water pump not filtered (Gold)	Berkeley	B1- ½ TPMS	M28537	Centrifugal	3 inch	2 inch
Treated water pump filtered (Grey)	Berkeley	B1- ½ TPMS	M23365	Centrifugal	3 inch	2 inch

3. Motor Information:

Pump	Manufacturer	Horsepower
Well 4	Pentair Pentek	2 Hp
Fresh water pump (Blue)	Baldor	5 Hp
Treated water pump not filtered (Gold)	Blador Reliancer	10 Hp
Treated water pump filtered (Grey)	Blador Reliancer	10 Hp

4. Theoretical Pump Capacity:

Pump	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 4	**2 Hp**	**50 to 60 psi**	**27.6 feet (from permit condition pump test)**	**0 feet**	**0.08 to 0.09 cfs**
Fresh water pump (Blue)	**5 Hp**	**55 psi**	**-8.33 feet out of the 45,000 gal fresh water tank and 8.33 feet into the top of the 35,000 gallon water tank for a 0 total lift**	**0 feet**	**0.24 cfs**
Treated water pump not filtered (Gold)	**10 Hp**	**55 psi**	**- 8.33 feet out of the 35,000 gal non-filtered tank and up 20 feet to the top of GH for a total of 11.7 lift**	**0 feet**	**0.44 cfs**
Treated water pump filtered (Grey)	**10 Hp**	**55 psi**	**- 8.33 feet out of the 35,000 gal filtered tank and up 20 feet to the top of GH for a total of 11.7 lift**	**0 feet**	**0.44 cfs**

5. Provide pump calculations:

Well 4 at PSI 50	**Q Pump = $\frac{(2\ Hp) \times (7.04\ ft^4/sec\ Hp)}{(27.6\ ft\ lift + 127.0\ ft\ pressure\ head)}$**	**= 0.09 cfs**
Well 4 at PSI 60	**Q Pump = $\frac{(2\ Hp) \times (7.04\ ft^4/sec\ Hp)}{(27.6\ ft\ lift + 152.4\ ft\ pressure\ head)}$**	**= 0.08 cfs**
Blue transfer pump	**Q Pump = $\frac{(5\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(0\ ft\ lift + 139.7\ ft\ pressure\ head)}$**	**= 0.24 cfs**
Gold transfer pump	**Q Pump = $\frac{(10\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(11.7\ ft\ lift + 139.7\ ft\ pressure\ head)}$**	**= 0.44 cfs**
Grey transfer pump	**Q Pump = $\frac{(10\ Hp) \times (6.61\ ft^4/sec\ Hp)}{(11.7\ ft\ lift + 139.7\ ft\ pressure\ head)}$**	**= 0.44 cfs**

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 measured			

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

7. Is the distribution system piped? **NO**

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

8. Mainline Information:

Location	Mainline Size	Length	Type of Pipe	Buried or Above Ground
To the pump house	**1.25 inch**	**800 feet**	**Sch 40 PVC**	**Buried**
Inside treatment pump house	**1.25 inch**	**~ 1,000 feet**	**Sch 40 PVC**	**Above ground**
To the treatment pump house combine with Well 2	**1.25 inch**	**500 feet**	**Sch 40 PVC**	**Buried**
To the lunch room	**1.25 inch**	**50 feet**	**Sch 40 PVC**	**Buried**
Mainlines from treatment room see Well 1				

9. Lateral or Handline Information:

Location	Lateral or Handline Size	Length	Type of Pipe	Buried or Above Ground
Laterals in greenhouses and tent room see Well 1				

10. Sprinkler Information:

Size	Operating PSI	Sprinkler Output (GPM)	Total Number of Sprinklers	Maximum Number Used	Total Sprinkler Output (CFS)
NA					

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

11. Drip Emitter Information:

Size	Operating PSI	Emitter Output (GPM)	Total Number of Emitters	Maximum Number Used	Total Emitter Output (CFS)
See Well 1					

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)? **YES**

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

If "YES" is it a: Storage Tank **YES**

Bulge in System / Reservoir **NO**

Complete appropriate table(s), unused table may be deleted.

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Fiberglass – pressure tank for Well 4	**86.7 gallons**	**Above ground**
Corrugated Steel tank 1 – fresh water	**45,000 gallons**	**Above ground**
Corrugated Steel tank 2 – treated water	**35,000 gallons**	**Above ground**
Corrugated Steel tank 3 – treated water	**35,000 gallons**	**Above ground**
Metal – pressure tank for fresh water transfer pump	**20 gallon**	**Above ground**
Metal – pressure tank for filter station	**20 gallon**	**Above ground**

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.

H. Additional notes or comments related to the system:

Well 4 also supplies Permit G-18737 and two domestic houses.

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	**Permit G-15352 issued: March 13, 2003 Permit G-18120 issued: October 11, 2018 Permit G-18107 issued: September 25, 2018 Permit G-18158 issued: December 31, 2018**		RECEIVED JAN 26 2023 OWRD
Begin construction (A)	**NA**	**NA**	**NA**
Complete construction (B)	**NA**	**NA**	**NA**
Complete application of water (C)	**October 1, 2007 Extended to: October 1, 2022**	**2020**	**All the permit conditions were met and water was put to full use**

* 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? **YES**

Progress reports were required on October 1, 2012, 2017 and 2022

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

b. Were the Progress Reports submitted? **YES**

Progress report due October 1, 2012 was received August 13, 2013

Progress report due October 1, 2017 was received December 12, 2017

Progress report due October 1, 2022 submitted September 28, 2022

If the reports have not been submitted, attach a copy of the reports if available.

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? **NO**

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

4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements? **NO**

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

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? **Unknown**

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

Once Well 4 (YAMH 58077) has been approved, a multi-well exemption for wells 1, 2, and 3 will be submitted.

**** 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.

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 1 – NAP Well	**Master Meter**	**19826546**	**Working**	**1,063,705.5 gallons (September 27, 2022)**	**2018**
Well 2 – Herman Well	**Master Meter**	**9012066**	**Working**	**4,653,279.4 gallons (September 27, 2022)**	**2018**
Well 3	**DLJ Meter**	**08007517**	**Working**	**7,439,110.3 gallons (September 27, 2022)**	**July 2010**
Well 4	**Master Meter**	**9078764**	**Working**	**5,723,025.3 gallons (September 27, 2022)**	**December 2018**

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? **YES**

	Well ID #	Date Attached To Well
Well 1	**L-146924**	**September 2022**
Well 2	**L-146925**	**September 2022**
Well 3	**L-100573**	**July 2010**
Well 4	**L-128827**	**November 2018**

e. Other conditions? **YES**

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

e1) Per permit amendment T-12590, Condition:
Water shall be acquired from the same aquifer as the original point of appropriation.

Compliance:
Well 1 (YAMH 5660) develops water from the alluvial aquifer between the depths of 70 and 89 feet in a gravel lens.

Well 2 (YAMH 5656) develops water from the alluvial aquifer between the depths of 71 to 80 feet in a gravel lens over blue clay

Well 3 (YAMH 55661) develops water from the alluvial aquifer between the depths of 88 and 158 feet in variously described alluvial materials.

Well 4 (YAMH 58077) develops water from the alluvial aquifer in the depth intervals of 48 to 56, 95 to 111, 113 to 129, and 145 to 166 feet in sands and gravels

It appears this well obtains water from the alluvial aquifer; therefore, this condition has been met.

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 – YAMH 5660	**Well log and driller's notes for YAMH 5660 – Well 1 – NAP Well**
State Water Well Report – YAMH 5656	**Well log and driller's notes for YAMH 5656 – Well 2 – Herman Well**
State Water Well Report – YAMH 55661	**Well log and driller's notes for YAMH 55661 – Well 3**
State Water Well Report – YAMH 58077	**Well log and driller's notes for YAMH 58077 – Well 4**
BLM Cadastral Map	**BLM Cadastral Map T. 4S. R. 4W. showing DLC and Government Lot locations**

SECTION 7

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 maps 4 4 11, 4 4 12, 4 4 13, and 4 4 14, 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

T.4S. R.4W. Sec. 11 & 12, W.M.

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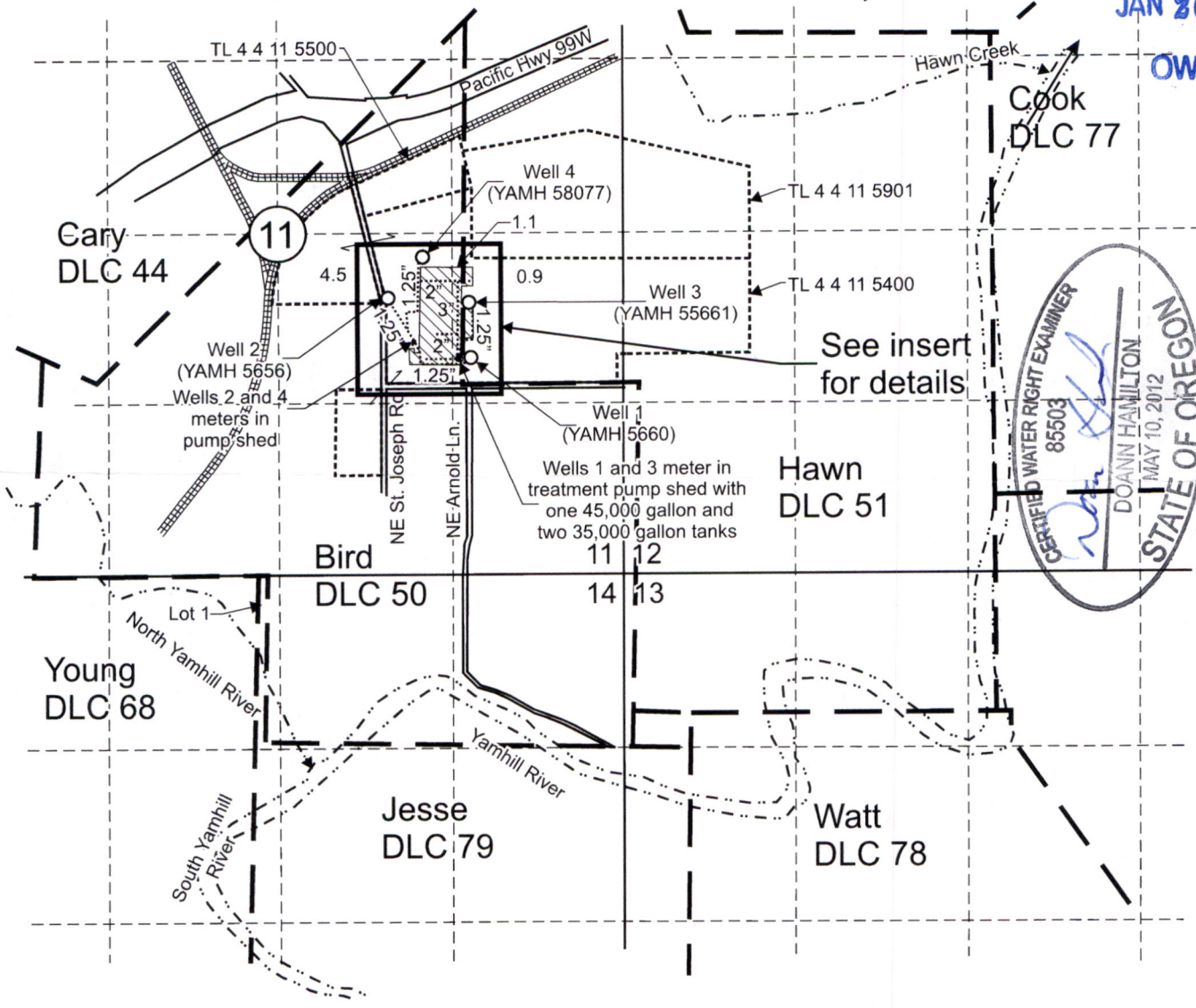

Well 1 (YAMH 5660) is located 960 feet south and 1,475 feet east from the Center corner, Section 11.

Well 2 (YAMH 5656) is located 500 feet south and 840 feet east from the Center corner, Section 11.

Well 3 (YAMH 55661) is located 535 feet south and 1,460 feet east from the Center corner, Section 11.

Well 4 (YAMH 58077) is located 185 feet south and 1,110 feet east from the Center corner, Section 11.

Area (6.5 Acres) irrigated under Application G-15543, Permit G-18158, T-12590.

Tax lot boundary

Water main line

Donation Land Claim boundary

N

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.

Scale: 1" = 1,320'

0 1,320 Feet

Claim of Beneficial Use Map
Application G-15543, Permit G-18158

North American Plants, Inc., c/o Yongjian Chang
T.4S. R.4W. Sec. 11 & 12, W.M.

Pacific Hydro-Geology Inc.

12/2022

NAmPlantsG-15543COBUMap.cdr

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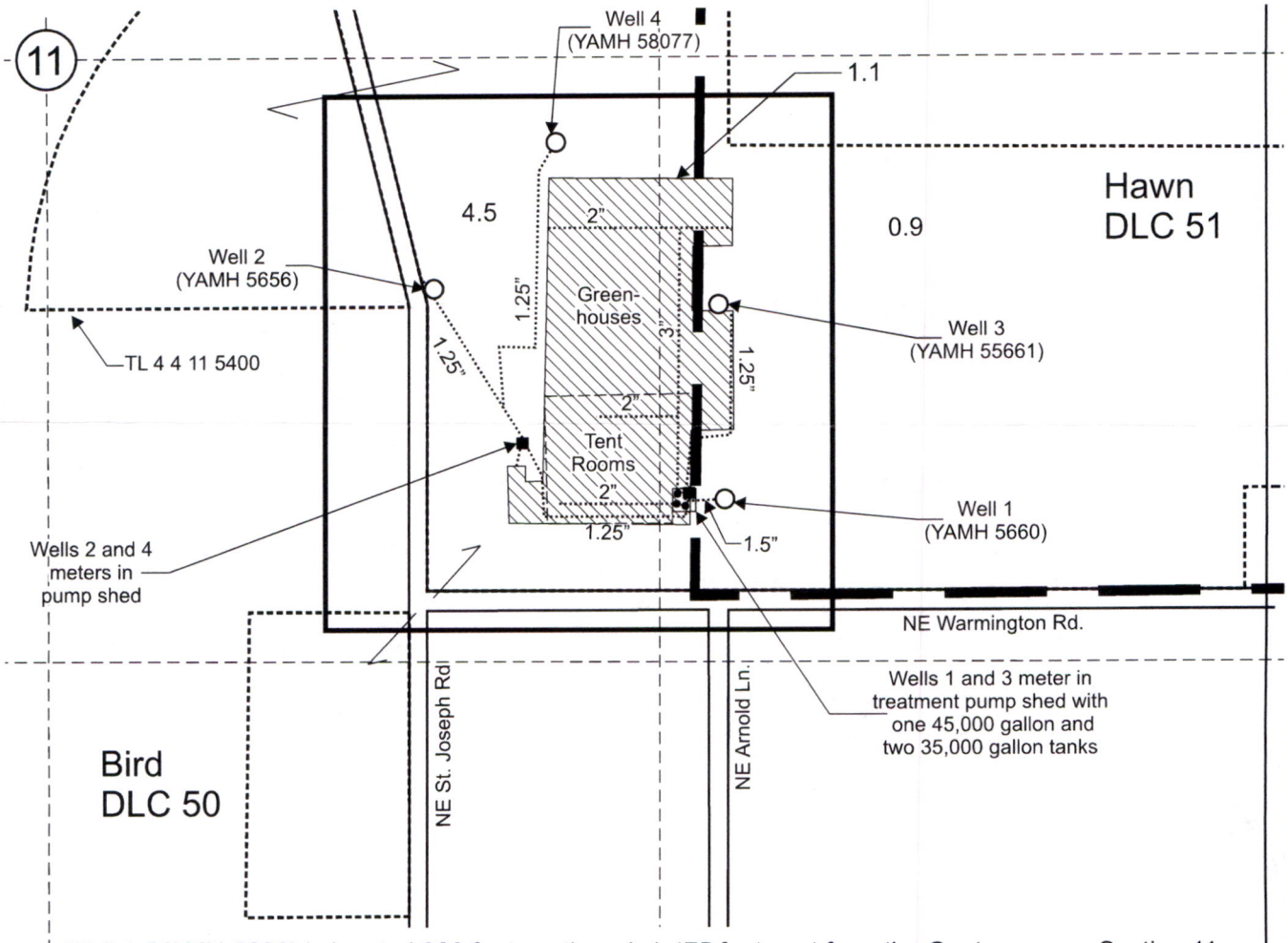
T.4S. R.4W. Sec. 11& 12, W.M.



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Water main line

Donation Land Claim boundary

CERTIFIED WATER RIGHT EXAMINER
85503
DOANN HAMILTON
MAY 10, 2012
STATE OF OREGON
EXPIRES: JUNE 30 2023

11

N

Scale: 1" = 400'

0 400 800 Feet

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

Claim of Beneficial Use Map
Application G-15543, Permit G-18158
Insert

North American Plants, Inc., c/o Yongjian Chang
T.4S. R.4W. Sec. 11 & 12, W.M.

Pacific Hydro-Geology Inc.

12/2022

NAmPlantsG-15543COBUMap.cdr

STATE OF OREGON

WATER WELL REPORT

(as required by ORS 537.765)

RECEIVED
YAMH 5660
DEC 24 1987

YAMH 5660

4S/4W-11aC

(1) OWNER:

Well Number: WATER RESOURCES DEPT SALEM, OREGON

Name Stanley Hermens

Address 3361 S.E. St. Joseph Rd.

City McMinnville State Ore. Zip 97128

(2) TYPE OF WORK:

☒ New Well ☐ Deepen ☐ Recondition ☐ Abandon

(3) DRILL METHOD

☐ Rotary Air ☒ Rotary Mud ☐ Cable

☐ Other

(4) PROPOSED USE:

☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation

☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes ☐ No ☒ Depth of Completed Well 90 ft.

Explosives used Yes ☐ No ☐ Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
13	0	91	Cement	0	26	28 sacks

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

☐ Other

Backfill placed from ____ ft. to ____ ft. Material ____

Gravel placed from 26 ft. to 90 ft. Size of gravel 3/8 Rea

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6	+1	89	.125	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS:

☒ Perforations Method Torch

☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
74	89		50	1/4 X 12		☒	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.
60+	55	90	6 hr.

Temperature of water 53 Depth Artesian Flow Found ____

Was a water analysis done? ☐ Yes By whom ____

Did any strata contain water not suitable for intended use? ☐ Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other ____

Depth of strata: ____

(9) LOCATION OF WELL by legal description:

County Yamhill Latitude ____ Longitude ____

Township 4S N or S, Range 4W E or W, WM.

Section 11 SW ¼ NE ¼

Tax Lot ____ Lot ____ Block ____ Subdivision ____

Street Address of Well (or nearest address) SAME

(10) STATIC WATER LEVEL:

35 ft. below land surface. Date Dec. 14, 87

Artesian pressure ____ lb. per square inch. Date ____

(11) WATER BEARING ZONES:

Depth at which water was first found 70

From	To	Estimated Flow Rate	SWL
70	89	60	

(12) WELL LOG:

Ground elevation 175 ft.

Material	From	To	SWL
Topsoil	0	2	
Brown Clay	2	17	
Blue clay	17	46	
Silty Blue clay	46	53	
Silty Brownish Blue Gray	53	70	
Med to Fine Blue Sand w/ small Blue Gravel	70	89	
Soft gray Shale.	89	91	

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Date started Dec 9 87 Completed Dec. 14 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.

WWC Number ____

Signed Not Appl. Date ____

(bonded) Water Well Constructor Certification:

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

WWC Number 428

Signed James H. Wilcox Date Dec. 14 87

WHITE COPIES - WATER RESOURCES DEPARTMENT YELLOW COPY - CONSTRUCTOR PINK COPY - CUSTOMER 9809C 10/86

YAMH 5660

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

Application for
Well ID Number

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Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name *(please print)*: North American Plants Inc. c/o Yongjian Chang

Mailing Address: 9375 SE Warmington Rd

City, State, Zip: McMinnville, OR 97128

Mail Well ID to: ☒ SAME AS ABOVE ☐ In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

II. WELL LOCATION INFORMATION *(Please fill out as completely as possible)*

Township: 4S (North / South) Range: 4W (East / West) Section: 11 NE 1/4 of the SE 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 5400 County Yamhill

GPS Coordinates: 45.23455800, -123.14038600

Street Address of Well, City: 9375 SE Warmington Rd, McMinnville, OR 97128

If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION *(Please fill out as completely as possible, AND attach copy of Well Report, if available)*

Use of Well (domestic, irrigation, commercial, Industrial, monitoring): Per well log - Domestic

Date Well Constructed (or property built): 12-14-1987 Total Well Depth: 91' Casing Diameter: 6 inch

Owner at time the well was constructed (if known): Stanley Hermens Well Report # (if known): YAMH 5660

Other Information: Per Permit G-15352 submitted by client - this is the well log for the approved well 1.

SUBMITTED BY *(please print)*: Yongjian Chang, North American Plants, Inc.

PHONE: 503 474 1852 **EMAIL &/or FAX:** 503 474 0872

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301. Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:	Well Report Number:	Well Identification #:
6-21-22	YAMH 5660	L 146924

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the
WATER RESOURCES DEPARTMENT, SALEM, OREGON 97310 within 30 days from the date of well completion.

YAMH 5656
WATER WELL REPORT
STATE OF OREGON

(Please type or print) YAMH

(Do not write above this line) 5656

State Well No. 4S/4W-11ca

State Permit No. .....

(1) OWNER:
Name Stan Hermens
Address McMinnville, Ore. 97128

(2) TYPE OF WORK (check):
New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:
Rotary ☒ Driven ☐
Cable ☐ Jetted ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):
Domestic ☒ Industrial ☐ Municipal ☐
Irrigation ☐ Test Well ☐ Other ☐

(5) CASING INSTALLED:
Threaded ☐ Welded ☒
6 " Diam. from 0 ft. to 80 ft. Gage .25
..... " Diam. from ..... ft. to ..... ft. Gage .....
..... " Diam. from ..... ft. to ..... ft. Gage .....

PERFORATIONS:
Perforated? ☒ Yes ☐ No.
Type of perforator used Torch
Size of perforations 3/16 in. by 12 in.
27 perforations from 71 ft. to 80 ft.
..... perforations from ..... ft. to ..... ft.
..... perforations from ..... ft. to ..... ft.

(7) SCREENS:
Well screen installed? ☐ Yes ☒ No
Manufacturer's Name .....
Type ..... Model No. .....
Diam. ..... Slot size ..... Set from ..... ft. to ..... ft.
Diam. ..... Slot size ..... Set from ..... ft. to ..... ft.

(8) WELL TESTS:
Drawdown is amount water level is lowered below static level
Was a pump test made? ☐ Yes ☒ No If yes, by whom?
d: gal./min. with ft. drawdown after hrs.
" " " "
" " " "
Comp.
Bailer test 25 gal./min. with 47 ft. drawdown after 2½ hrs.
Artesian flow g.p.m.
Temperature of water 51 Depth artesian flow encountered ..... ft.

(9) CONSTRUCTION:
Well seal—Material used Cement Grout
Well sealed from land surface to 23 ft.
Diameter of well bore to bottom of seal 12 in.
Diameter of well bore below seal 12 in.
Number of sacks of cement used in well seal 11 sacks
How was cement grout placed? Hole was clean & dry, grout introduced from bottom up.

Was a drive shoe used? ☐ Yes ☒ No Plugs ..... Size: location ..... ft.
Did any strata contain unusable water? ☐ Yes ☒ No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? ☒ Yes ☐ No Size of gravel: 3/8 Pea
Gravel placed from 23 ft. to 80 ft.

(10) LOCATION OF WELL:
County Yamhill Driller's well number
NE ¼ SW ¼ Section 11 T. 4S R. 4W W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.
Depth at which water was first found 63 ft.
Static level 28 ft. below land surface. Date July 17
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:
Diameter of well below casing 0
Depth drilled 80 ft. Depth of completed well 80 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Topsoil	0	2	
Brown Clay	2	17	
Blue Clay	17	37	
Silty Blue Clay	37	48	
Blue Clay	48	63	
Med. Blue Sand	63	72	
Med. Blue Sand w/ Med. Blue Gravel	72	79	
Blue Clay	79	80	

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AUG 17 1979
WATER RESOURCES DEPT
SALEM, OREGON

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Work started July 9 1979 Completed July 17 1979
Date well drilling machine moved off of well July 17 1979

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Randall L Wilcox (Drilling Machine Operator) Date July 19, 1979
Drilling Machine Operator's License No. 991

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name Wilcox Drilling & Pump Co. (Person, firm or corporation) (Type or print)
Address P. O. Box 569, McMinnville, Ore. 97128
[Signed] James H Wilcox (Water Well Contractor)
Contractor's License No. 428 Date July 19, 1979

(USE ADDITIONAL SHEETS IF NECESSARY)

SP*45656-119

YAMH 5656

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OREGON WATER RESOURCES DEPARTMENT

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

Application for Well ID Number

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JUN 21 2022
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Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name *(please print)*: North American Plants Inc. c/o Yongjian Chang

Mailing Address: 9375 SE Warmington Rd

City, State, Zip: McMinnville, OR 97128

Mail Well ID to: ☒ SAME AS ABOVE ☐ In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

II. WELL LOCATION INFORMATION *(Please fill out as completely as possible)*

Township: 4S (North / South) Range: 4W (East / West) Section: 11 NW 1/4 of the SE 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 5400 County Yamhill

GPS Coordinates: 45.23568700, -123.14268600

Street Address of Well, City: 9375 SE Warmington Rd, McMinnville, OR 97128

If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION *(Please fill out as completely as possible, AND attach copy of Well Report, if available)*

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Per well log - Domestic

Date Well Constructed (or property built): 7-17-1979 Total Well Depth: 80' Casing Diameter: 6 inch

Owner at time the well was constructed (if known): Stan Hermens Well Report # (if known): YAMH 5656

Other Information: Per Permit G-15352 submitted by client - this is the well log for the approved well POD # 4

SUBMITTED BY *(please print)*: Yongjian Chang, North American Plants, Inc.

PHONE: 503 474 1852 **EMAIL &/or FAX:** 503 474 0872

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301. Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:	Well Report Number:	Well Identification #:
6-21-22	YAMH 5666	L 146925

YAMH 55661

State of Oregon
WATER WELL REPORT (as required by ORS 537.765) Page 1 of 1

State Well ID L100573
Start Card # 1010438

(1) OWNER: Well No. 2685
Name NORTH AMERICAN PLANTS LLC
Address POB 743
City LAFAYETTE St OR Zip 97127

(2) TYPE OF WORK: NEW WELL

(3) DRILL METHOD: CABLE

(4) PROPOSED USE: IRRIGATION

(5) BORE HOLE CONSTRUCTION:
Special Construction Approval NO Depth of Compl. Well 159 ft
Explosives used NO Type _____ Amount _____

HOLE Diam.	From	To	Material	SEAL From	To	Amount
12	0	104	BENTONITE CHIP	0	48	45 SAX
6	104	159				

Seal placement method POURED/HYDRATED
Backfill: from ___ ft to ___ ft Material
Gravel: from 48 ft to 104 ft Size 3/8" PEA

(6) CASING/LINER:

	Diam.	From	To	Gauge	Material	Connection
Casing	6	+1	88	.25	STEEL	WELDED
	6	100	104	.25	STEEL	WELDED
Liner	4	59	159	SCH40	PLASTIC	THREADED

Final Location of shoe(s) NO SHOE, SPLINE-LOC LINER

(7) PERFORATIONS/SCREENS:
[X] Perf. Method CIRCULAR SAW
[X] Screens Type CONT. V-WIRE Material STAINLESS STEEL

From	To	Slot Size	Number	Diam.	Tele/pipe Size	Casing/liner
88	100	70	___	6" PS	____	CASING
81	140	.1X6"	60	____	____	LINER
150	158	.1X6"	14	____	____	LINER

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

Yield GPM	Draw-down	Drill stem at	Time
12	138	159	1 hr.
12	130	151	1

Temperature of water 54? Depth Artesian Flow Found ____
Was water analysis done? YES By whom BLUE H2O
Reason for water not suitable for use _____
Depth of strata ___

(9) LOCATION OF WELL by legal description:
County YAMHILL Lat. ° ' " Long. ° ' "
Township 4 S Range 4 W WM.
Section 11 NW 1/4 SE 1/4
Tax Lot 5400 Lot Block Subdivision
Street Address of Well (or nearest Address)
3367 ST JOSEPH RD MCMINNVILLE, OR

(10) STATIC WATER LEVEL:
21 ft. below land surface. Date 07/07/10
Artesian pressure _____ lb per square in. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 21

From	To	Est Flow Rate	SWL
21	154	12	21
____	____	____	___
____	____	____	___
____	____	____	___

(12) WELL LOG:
Ground elevation ___

Material	From	To	SWL
TOP SOIL	0	6	
CLAY, BROWN	6	25	
CLAY, BLUE/GRAY	25	58	
CLAY, GREEN W/CLAYSTONE BITS W/SOME SAND	58	68	
CLAY, GRAY W/CLAYSTONE/SANDSTONE STRATS, HARD/SOFT	68	83	
SAME W/A FEW FINE HARD PARTICLES	83	95	
CLAY, BLUE/GRAY W/HARD PARTICLES	95	100	
CLAY, GRAY W/CLAYSTONE	100	104	
COMPACTED SANDY CLAYSTONE/CLAY GRAY	104	121	
COMPACTED SANDY "/CLAY GRAY AND BROWN	121	154	
CLAYSTONE, GRAY W/GRAY CLAY	154	159	

DAVE PAYSINGER, BLUE WATER DRILLING CO.
(503) 868 7878

Date started 06/29/10 Completed 07/07/10

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

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 1438
Signed [signature] Date 07/08/10

ORIGINAL & FIRST COPY - WATER RESOURCES DEPTARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER 9809C 10/91

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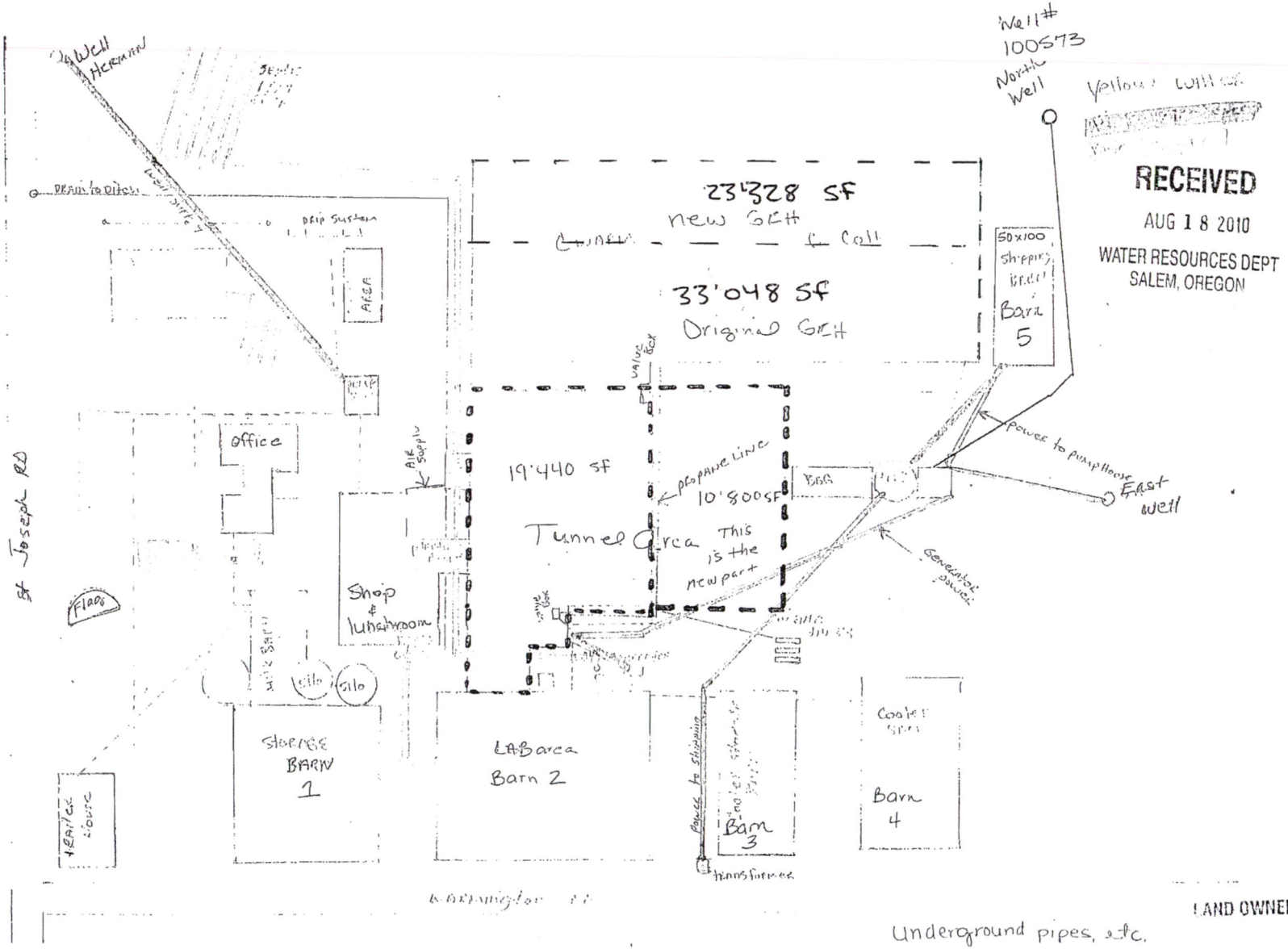
YAMH 55661



LAND OWNER SUBMITTED MAP

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

YAMH 58077

WELL I.D. LABEL# L 128827
START CARD # 212578
ORIGINAL LOG #

YAMH 58077

(1) LAND OWNER

Owner Well I.D. 4
First Name ____ Last Name ____
Company North American Plants, Inc
Address PO Box 743
City Lafayette State OR Zip 97127

(2) TYPE OF WORK

[x] New Well [ ] Deepening [ ] Conversion [ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)

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(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plste	Wld	Thrd
Casing:									

	Material	From	To	Amt	sacks/lbs
Seal:					

(3) DRILL METHOD

[x] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other ____

(4) PROPOSED USE

[ ] Domestic [x] Irrigation [ ] Community
[ ] Industrial/ Commericial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other ____

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)
Depth of Completed Well 170 ft.

BORE HOLE

Dia	From	To
10	0	250

SEAL

Material	From	To	Amt	sacks/lbs
Chip Bentonite	0	25+/-	27	Sks
		Calculated	11	
Cement	25+/1	34	15	Sks
		Calculated	5	

How was seal placed: Method [ ] A [ ] B [x] C [ ] D [ ] E
[x] Other Pour and probe bentonite
Backfill placed from 183 ft. to 250 ft. Material 3/8 Chip Bentonite
Filter pack from 34 ft. to 183 ft. Material CSSI Size 8x12
Explosives used: [ ] Yes Type ____ Amount ____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plste	Wld	Thrd
◉	○	6	+	2	46	.250	◉	○	x	
◉	○	6		56	98	.250	◉	○	x	
◉	○	6		108	117	.250	◉	○	x	
◉	○	6		127	150	.250	◉	○	x	
◉	○	6		160	170*	.250	◉	○	x	

Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s) ____
Temp casing [ ] Yes Dia ____ From ____ To ____

(7) PERFORATIONS/SCREENS

Perforations Method ____
Screens Type V-shaped wire wrap Material 304SS

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Scn		6	46	56	.040			PS
Scn		6	98	108	.040			PS
Scn		6	117	127	.040			PS
Scn		6	150	160	.040			PS

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

(◉) Pump ( ) Bailer (◉) Air ( ) Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
25 (air)		168	1
30 (pump)	90	105	.5

Temperature 55 °F Lab analysis [ ] Yes By ____
Water quality concerns? [ ] Yes (describe below) TDS amount 205

From	To	Description	Amount	Units

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(9) LOCATION OF WELL (legal description)

County Yamhill Twp 4 S N/S Range 4 W E/W WM
Sec 11 NW 1/4 of the SE 1/4 Tax Lot 5400
Tax Map Number T4S R4W 11 Lot ____
Lat ° ' " or ____ DMS or DD
Long ° ' " or ____ DMS or DD
( ) Street address of well ( ) Nearest address
9375 SE Warmington RD, McMinnville, OR 97128

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	11-27-18			12

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 48

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
	48	56+				
11/27/18	95	111				12
	113	129				
	145	166				

(11) WELL LOG

Ground Elevation ____

Material	From	To
Top soil, clay based	0	4
Clay, brown, soft, silty, sticky	4	36
Clay, grey, soft, sticky	36	48
Sand, brown, medium, some gravel	48	53
Sand, black, fine	53	56
Sand, black w/some clay, blue & sand w/cementation	56	68
Clay, green, soft w/gravel 3/4"- & lenses of sand, fine	68	95
Gravel, multi-color, 1/2"-	95	111
Clay, grey & sand w/some gravel	111	113
Sand, grey, fine	113	115
Sand, grey & gravel w/some cementation & some wood	115	129
Clay, grey, soft, sandy	129	145
Sand, grey, medium, w/some cementation & some gravel	145	168
Clay, green, soft, silty	166	178
Clay, grey, soft, silty/sandy	178	185
Clay, brown, soft, silty, lenses of sand w/cementation	185	199
Clay, grey, soft, silty/sandy	199	250
* 6" has 1/4" steel plate welded on the bottom		

Date Started 10-24-18 Completed 11-27-18

(unbonded) Water Well Constructor Certification

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

License Number 1991 Date 11/30/18
Signed Dustin Helmig

(bonded) Water Well Constructor Certification

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

License Number 649 Date 11/30/18
Signed Stephen J. Schmeda
Contact Info (optional) ____

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.95