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

A fee of \$230 must accompany this form for permits RECEIVED with priority dates of July 9, 1987, or later. FEB 0 1 2023

A separate form shall be completed for each permit.

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In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.

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

1. File Information:

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
G-17640	G-17141	T-

2. Property Owner (current owner	r information):		i e	
APPLICANT/BUSINESS NAME	5	PHONE NO	D.	ADDITIONAL CONTACT NO.
Cunningham Sheep Company				8
Address				
PO Box 1186				
Сіту	STATE	ZIP	E-MAIL	
Pendleton	OR	97801		
If the current property owner is not filed with the Department. <u>Each</u> per 3. Permit holder of record (this materials)	rmit holder of rec	ord must	sign this form.	
PERMIT HOLDER OF RECORD			, , ,	
Cunningham Sheep Company				
Address				
PO Box 1186			-	RECEIVED
CITY	STATE	ZIP		FEB 0 1 2023
Pendleton	OR	97801		FEB U I 2023
				OWRD
Additional Permit Holder of Record Not Applicable				
Address				
Сіту	STATE	ZIP		
				<u>``</u>
	4. Date of Site	Inspection	on:	
January 18, 2023				
5. Person(s) interviewed and desc	ription of their a	ssociatio	n with the proi	ect:
NAME	DATE			TION WITH THE PROJECT
Jeff Jorgenson	1/18/2023	Ge	eneral Manager	•
	2,10,2020		onerar manager	
6. County:				
Umatilla				
7. If any property described in the owner of record for that property (is excluded fro	om this report, identify the
OWNER OF RECORD	0110 007 1200(077)	'		^
Not Applicable				
ADDRESS				
Сіту	STATE	ZIP		

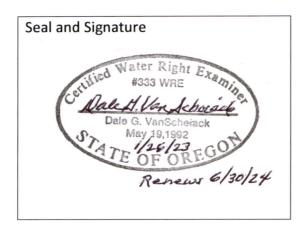
Add additional tables for owners of record as needed

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.



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CWRE NAME		PHONE NO.		Additional Contact No.
Dale VanSchoiack		509 627 87	17	
Address				
2141 South Lyle St.				
Сіту	STATE	ZIP	E-MAIL	
Kennewick	WA	99337	dalevconsu	lting@gmail.com

Permit Holder of Record Signature or Acknowledgement

<u>Each</u> 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
Jeffer D. Jargenson For Curningham Sheep Company	Jeffrey D Torgerson Cunningham Sheep Company	General Manager	01/30/2023

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SECTION 3

CLAIM DESCRIPTION

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1. Point of appropriation name or number:

Well	UMAT 57116 and UMAT 57376	109381
(POA) NAME OR NUMBER (CORRESPOND TO MAP)	FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	(IF APPLICABLE)
POINT OF APPROPRIATION	WELL LOG ID #	WELL TAG#

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	Source	Tributary
NAME OR NUMBER	BASIN LOCATED WITHIN	
Well UMAT 57116	Birch Creek Basin	Umatilla 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	Irrig and Supp Irrig	Pasture	March 1- October 31	
Total Quantity of	Water Used			

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

Water is pumped from the well with a 60 hp line shaft turbine pump. It is carried through 400± feet of buried 8" pipeline in a north westerly direction to a point where it crosses West Birch Creek. A short distance before crossing the creek there is a flow meter installation. The mainline in the vicinity of the flow meter and the creek crossing is above grade steel pipe. There are branch valves off the mainline at this location that allow portable hand lines to be used to irrigate pasture and orchard ground east of the creek in this area.

After crossing the creek, the pipe branches into two pipelines. One extends in a south westerly direction 430± feet. At this point in bends to a more southerly direction and extends 500± feet to a point where there is a 400 foot cross pipe with risers for connection to a side roll (wheel line) irrigation machine. From the cross pipe the 8" mainline continues 740± feet southerly paralleling West Birch Creek where there is another cross pipe (300± feet) with risers that connect to a second wheel line. From this point the mainline extends southerly 1380± feet continuing to parallel the creek. At the southerly end of this mainline there are four risers that are used to irrigate the southerly end of the field with big gun sprinklers. During the active period of the permit there were four big guns sprinklers being used on the farm. Portable above ground aluminum mainline pipe is used to position the big gun sprinklers to get full coverage of the southerly end of the field.

The other branch pipeline extends from the bifurcation by the creek crossing 210± feet in a north westerly direction to a riser that supplies water for irrigation of the field to the north on the westerly side of West Birch Creek. This branch of the mainline continues in a northerly direction 860± feet to another riser. Big gun sprinklers in conjunction with portable above ground aluminum mainline and portable handlines were connected to these risers to irrigate this field. At the northerly most riser the mainline bends to the southeast and extends 660± feet crossing the West Birch Creek and extending across the field lying on the easterly side of the creek. There are risers along this pipeline that supply water to a wheel line that irrigates the field on the easterly side of the creek.

The big gun sprinklers and portable handlines were used to irrigate the field end areas and irregular shapes of the three fields irrigated by the three wheel lines.

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.

(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.")

The location of the well noted on the permit is 850' N and 2010' W from the center ¼ corner of Section 30. The location of the well was found to be 820' N and 1950' W from the center ¼ corner of Section 30.

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	0.79 cfs	Pump output 1.01 cfs	Not Applicable	Irrig and Supplemental Irrig	Irrig 8.3 ac Supp Irrig 55.2 ac*	Irrig 8.3 ac Supp Irrig 55.2 ac*
	,					

* The permit lists 32.9 ac of primary irrigation and 30.6 acres of supplemental irrigation. There is a note on the application map that indicates that the Circuit Court was being petitioned to correct an error in the Umatilla River Decree for Certificate 2508. This occurred and a new certificate, Certificate 89161, was issued to replace Certificate 2508. This resulted in 24.6 acres that are listed on the permit being changed from primary to supplemental irrigation. The acres listed in the above table reflect this change.

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SECTION 4

SYSTEM DESCRIPTION

Are there multiple POAs?	NO
If "YES" you will need to copy and complete a separate Section 4 for each POA.	
POA Name or Number this section describes (only needed if there is more than one):	RECEIVE
Well	FEB 0 1 202
A. Place of Use	OWRD
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
15	31E	WM	25	SENE			Irrigation		15.0
15	31E	WM	25	NESE			Irrigation		10.2
15	31E	WM	25	NWSE			Irrigation	4.3	
15	31E	WM	25	SWNE			Irrigation		2.1
15	32E	WM	30	NENW			Irrigation	4.0	
15	32E	WM	30	NWNW			Irrigation		18.3
15	32E	WM	30	SWNW			Irrigation		9.6
Total A	cres Irrig	ated						8.3	55.2

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:

There is a 2.5" pipe off of the side of the column that can be used for measuring the water level.

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
UMAT 57116 and UMAT 57376						
,						

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.

UMAT 57116 and UMAT 57376 (These well logs are for the same well.)

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.

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Items 2 through 4 of this section were deleted.

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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 <u>and</u> 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:

MANUFACTURER	MODEL	SERIAL NUMBER	Type (centrifugal, turbine or submersible)	INTAKE SIZE	DISCHARGE SIZE
Peerless (head) Goulds (bowl)	BFDHC-17	Peerless head 2TJ1223107	Turbine	NA	6"

3. Motor Information:

Manufacturer	Horsepower	
General Electric	60 hp	

4. Theoretical Pump Capacity:

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)
60 hp	80 psi	120 ft	48 ft (1896-1848)	1.01 cfs

5. Provide pump calculations:

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WELL PUMP

Estimated Pumping head (TDH ft)

Pressure 80 psi at well head x 2.31 ft/psi =		185.0 ft
40 ft SWL (WRIS info) plus assumed 80 ft drawdown.		120.0 ft
Lift from well head to land		48.0 ft
Pipeline loss (estimated)		50.0 ft
Misc. loss: pump column, valves, fittings, and flow meter		15.0 ft
	Total TDH	418.0 ft

$$Hp = \frac{TDH \ x \ gpm}{3960 \ x \ eff.} \text{ or } gpm = \frac{3960 \ x \ eff \ x \ hp}{TDH} = \frac{3960 \ x \ 80\% \ x \ 60.0 \ hp}{418.0 \ ft} = \frac{454.7 \ gpm_or \ 1.01 \ cfs}{418.0 \ ft}$$

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
		OBSERVED	(IN CFS)
Not Applicable			

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:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
8"	4520'	PVC	Buried
8"	100'	Steel	Above Ground
6"	1360'	PVC	Buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROU	ND
East Field		,		
Wheel Line	1120'	4" aluminum	Above Ground	
Handline	160'	3" aluminum	Above Ground	
Portable main	180'	4" aluminum	Above Ground	
				in the
North West Field			 	
Handline	480'	3" aluminum	Above Ground	RECEI
Portable main	960'	4" aluminum	Above Ground	
				FEB 01
Middle West Field				OWE
Wheel Line	1210'	4" aluminum	Above Ground	OWI
Handline	160'	3" aluminum	Above Ground	
Portable main	210′	4" aluminum	Above Ground	
South West Field				
Wheel line	880'	4" aluminum	Above Ground	
Handline	600'	3" aluminum	Above Ground	
Portable main	570'	4" aluminum	Above Ground	

10. Sprinkler Information:

Size	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
Wheel line and handline sprinklers 11/64" dia.	45 psi	5.7 gpm	118	80	456 gpm (1.01 cfs)
Nelson 100 Big Gun sprinklers 1.0" dia.	60 psi	224 gpm	4	2	448 gpm (1.00 cfs)

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)
Not Applicable					

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
Not Applicable	-				

13. Pivot Information:

Manufacturer	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
Not Applicable				
2				

E. Storage

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

NO

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

Items 2 and 3 relating to this section were deleted.

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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.

Items 2 through 4 relating to this section were 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.

Items 2 through 4 relating to this section were deleted.

H. Additional notes or comments related to the system:

None	
-	da .

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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	April 4, 2014		
Begin construction (A)	,		The well and irrigation system existed at the time the permit was issued.
COMPLETE CONSTRUCTION (B)	April 4, 2019	April 1, 2019	The water user made improvements to the irrigation system and equipment.
COMPLETE APPLICATION OF WATER (C)	April 4, 2019	April 1, 2019	The water user used the irrigation system to irrigate the land.

^{*} 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)?

NO

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

Items a and b relating to this section were deleted.

- 3. Initial Water Level Measurements:
- a. Was the water user required to submit an initial static water level measurement? YES

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

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

February/March

c. Was the measurement submitted to the Department?

YES

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT		
Not Applicable					

4. Annual Static Water Level Measurements:

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

YES

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

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

February 1- March 31

YES

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

....

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

YES

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	Метнор	MEASUREMENT		
Not Applicable					

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?

NO

c. Is the pump test attached to this claim?

NO

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

NO

e. Has a pump test exemption been approved by the Department?

NO

The permit holder has been informed about the requirement for a pump test.

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

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

c. Meter Information

DATE INSTALLED -	
/lay 2013	
12	

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

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department?

e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

NAME	TITLE	APPROXIMATE DATE
Not Applicable		

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION	DATE INSTALLED
	(WORKING OR NOT)	
Not Applicable		

7. Recording and reporting conditions:

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a. Is the water user required to report the water use to the Department?

YES

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

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b. Have the reports been submitted?

YES

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

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

YES

to the well?

WELL ID#	DATE ATTACHED TO WELL
109381	Unknown

e. Other conditions?

NO

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

The water user was issued a Well ID # 109381. It is unknown when it was issued and attached to the well. Site identification information on the WRIS was established by OWRD on 12/12/2012. It includes the well tag number.

SECTION 6

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
COBU Map	COBU Map
Well Logs UMAT 57116 and UMAT 57376	Well Logs for Well

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 the permit map, the county tax lot map, google earth images, and observations and measurements made during the site visit.							

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.)

\boxtimes	Map on polyester film
	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
\boxtimes	If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots Quarter-Quarters
NA	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.)
\boxtimes	Point(s) of diversion or appropriation (illustrated and coordinates)
\boxtimes	Tax lot boundaries and numbers
NA	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
\boxtimes	North arrow RECEIVED
\boxtimes	North arrow Legend FEB 0 1 2023
\boxtimes	CWRE stamp and signature OWRD

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WELLID #1 /09 381

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-												
(1) LAND OWNER Name Cunningham Sheep & Land Co					(9) LOCATION OF	Latitude	description:					
Address P.O. Box 860					County LA PAGE	Latitude S Range	32 E	ongitude				
City Pendleton State OR Zip 1780							17801	Township 1	5ω _{1/4}	A(6)	E OFFE	WM.
								LotBloc				
(2) TYPE OF WORK New Well Deepening Alteration (repair/recondition) Abandonment					Tax Lot 700	/ell (or pearest address	1.585	ubdivision_	Milacket			
								Street Address of W	Pilot R	ock	1 6116	O GALGORA
(3) DK	ILL ME	Roten	D: Mud □(Cable A	nger			(10) STATIC WATE	DIEVEL.			
	r							36.90 ft b	elow land surface.		Date ///2	9/2012
	OPOSEI	-			_			Artesian pressure	lb. per	square inch	Date	
Dom	estic 🔲	Comm	unity 🗆 Inc	dustrial 🗷	Irrigation	n		(11) WATER BEAR				
	mal 🗆			vestock 🗆	Other_			L				
(5) BO	RE HO	LE CC	NSTRUC	TION:				Depth at which water w	as first found			
				No Dep				Prom	То	Estimated I	Flow Rate	SWL
Explosi	ves used I	res	∐ No iype	SEAL	^	nount				· · · · · ·		
Diameter	r From .	Tb	Materia		To	Sacks or pe	ounds					
17	1.9.1		Cemen	From	-							
	-								•	-		
	+			+								
How we	s seal plac	ceq.	Method		B	C DD	DE	(12) WELL LOG:	nd Elevation			
Other			Menos					000	nd Elevation			
		om	ft. to	ft.	Materia	d		Mater		From	То	SWL
Gravel	placed from	m	ft. to	ft.	Size of	gravel		Columbia	River	0	738	
(6) CA	SINGAL	INER:							Bosalt			
	Diameter			uge Steel	Plastic		Threaded					
Casing:	10	1									-	
-		+	+++	_								
-		_							+		 	-
Liner:							ā					
Drive S	hoe used	☐ Insid	ie 🗌 Outsi	de Di None								10
Final lo	cation of s	noc(s).	SSCREEN	ec.							1,00	
	erforation		Method									
_	creens		Туре		Man	erial						
		Slot			Tele/pip			ļ				
From	To	size	Number	Diameter	size	Casing					· ·	
	-		+		_	_ 🖁						
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(0) SWT	TT TEC	TC. N	Al-l-way	antine time	o in 1 he		-	Date started	Con	pleted		
				esting tim	c 13 1 11(Flov	ving		30.			
□ Pu	•	□ B		☐ Air		☐ Arte						
Yleid	gal/min	Dr	RWOOWB	Drill ste	m at		hr.	SOURCE O	F DATA/IN	IFO.		
		-				 	14.	Sitevis	rit of do	anhole	Lude	D
	_	_				+						
Temperature of water Depth Artesian Flow Found							111					
	Was a water analysis done?						no little	COMPILED	BY: Mar	~ No.	ton	
-	☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other						O IRUE					
Depth of strata:							1	1 /-				
p o				,				DATE: /	2/11/20	12	_	



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

Application for Well ID Number

RECEIVED

FEB 0 1 2023

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

I. OWNER INFORMATION			OWRD
Current Owner Name (please prin	nt): Cunningham Shee	p & Land Co	
Mailing Address: P.O. B			
City: Penaleton		Zip:	97801
Mailing Address (to send Well I.I.	0.):		•
City:			
	o not complete this section if the well re (North/South) Range:		Section: 30
Tay Lot: 400	County: Umatila		<i>νω</i> 1/4
	356 Yellow Jacket Rd		- Rock
Owner at time the well was const			The contract of the contract o
	eet address in the past: Unknow		
- and property and a		27.	
III. GENERAL WELL INFORT	MATION (Do not complete this section	n if the well report is attached)	
Use of Well (domestic irrigation	commercial, industrial, monitoring):	Donach + Train	and in
Date Well Constructed: 7	Total Well Depth:	738 Casing	Diameter: 10" steel
	Total Well Deput	736 Casing	Diameter. 10 SPEA
Other Information:			
SUBMITTED BY (please print):	Marc A Norton		

Send application to Oregon Water Resources Department; 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.

For	Official	Use (Only	by the	e Oregon	Water	Resources	Department.	:
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Received DEFCFIVED

PHONE: 503-986 - 0841

Well Log Number: UMAT 57116

Well Identification #:

109381

DEL 12 201

Last Update: 11/04/08 WATER RESOURCES DEPT
SALEM, OREGON

Well I.D. Number/ 1

WCC

STATE OF OREGON UNIA 1	WELL I.D. I.ABEL# L 109381
WATER SUPPLY WELL REPORT	START CARD# 1023435
(as required by ORS 537.765 & OAR 690-205-0210)	ORIGINAL LOG# UMATILLA 57116
1) LAND OWNER Owner Well I.D.	137116
First Name Last Name	(9) LOCATION OF WELL (legal description)
Company CUNNINGHAM SHEEP CO.	
Address P.O. BOX 1186	County UMATILIA Twp 1.00 S N/S Range 32.00 E E/W WM
Tity PENDLETON State OR Zip 97801	Sec 30 SW 1/4 of the NW 1/4 Tax Lot 400
TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot 5a) Lat "or DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a PRE-ALTERATION	5a) Lat "or DMS or DD Long "or DMS or DD
Dia + From To Gauge Stl Plste Wld Thrd	Long Or DD DMS or DD Street address of well Nearest address
Casing: 10 X 1 67 .25 (X	65856 YELLOWJACKET RD PILOT ROCK OR.
Material From To Amt sacks/lbs	SOUTH AND THAT ROCK OR.
Seal:	
DRILL METHOD	(10) STATIC WATER LEVEL
X Rotary Air Rotary Mud Cable Auger Cable Mud	Existing Well / Pre-Alteration Date SWL(psi) + SWL(ft)
Reverse Rotary Other	Completed Wull
PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?
Industrial/ Commercial Livestock Dewatering	
Thermal Injection Other	WATER BEARING ZONES Depth water was first found SWL Date From To Fet Flow SWI (pe) + SWI (A)
	Estrick SWL(It)
Depth of Completed Well 770.00 ft. Special Standard (Attach cop	ipy)
DODE HOLE	
Dia From To Material From To Amt Ibs	
10 0 765	
	(11) WELL LOG
How was and about Mid 1 The Tra Tra	Ground Elevation
How was seal placed: Method A B C D E	Material From To
Backfill placed fromft. toft. Material	
Filter pack from ft. to ft. Material Size	
Explosives used: Yes Type Amount	RECEIVED BY OWRD
ABANDONMENT USING UNHYDRATED BENTONITE	OHAMD .
Proposed Amount Actual Amount	
CASING/LINER Casing Liner Dia + From To Gauge Stl Plete Wild Thed	JUL 0 1 2014
To Stage Sti Tiste Wid Tillu	RECEIV
<u>○ </u>	CAL
	SALEM, OR FED. 4.1.2
	FEB 0 1 2
Shoe Inside Outside Other Location of shoe(s)	OWRD
Temp casing Yes Dia From To	
PERFORATIONS/SCREENS	
Perforations Method	
Screens Type Material	Date Started6/23/2014 Complete 6/26/2014
Perf/ Casing/ Screen Scm/slot Slot # of Tele/	
Screen Liner Dia From To width length slots pipe size	(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 1963 Date 6/30/2014
VELL TESTS: Minimum testing time is 1 hour	0/30/2014
Pump Bailer (a) Air Flowing Artesian	Signed JOHN KLINE (E-filed)
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification
1000 765 1	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
Temperature°F Lab analysisYes By	construction standards. This report is true to the best of my knowledge and belief.
Water quality concerns? Yes (describe below) TDS amount	License Number 1881 Date 6/30/2014
From To Description Amount Units	C' I
	Signed GARRY L ZOLLMAN (E-filed)
	Contact Info (optional) Garry Zollman

UMAT 57376

STATE OF OREGON

Page 1 of 2

· continuation page	109381	-
page	START CARD # 1023435	
(2a) PRE-ALTERATION	ORIGINAL LOG# UMATILLA 571	16
Dia + From To Gauge Stl Plste Wld Thrd	Water Quality Concerns	
To Gauge Sti Piste Wid Thrd	From T-	t Units
Material From To Amt sacks/lbs		
, and suchs/105		
(5) BORE HOLE CONSTRUCTION	(10) STATIC WATER LEVEL	
BORE HOLE SEAL	SWL Date From To Est Flow SWL(psi)	+ cua.a.
Dia From To sacks/	Switch Swi(psi)	J SWL(II)
Material From To Amt lbs		+
		+
		-
		
FILTUD DA GU		
FILTER PACK From To Material Size	(11) WELL LOG	
110m 10 Waterial Size	(11) WELL LOG	
	Material From	To
6) CASING/LINER		
Casing Liner Dia + From To Gauge Stl Plate Wid Thed		
Casing Liner Dia + From To Gauge Stl Plate Wld Thrd		-
D D D D D D D D D D D D D D D D D D D		
	RECEIVED BY OWRD	
	- TOWND	
	JUL 0 1 2014	
	SALEM, OR	
) PERFORATIONS/SCREENS		
Perf/ Casing/Sassa	RECEN	
Some Lines Dis Some Stoll # of Tele	HECEIVED	
Screen Liner Dia From To width length slots pipe size	FEB 0 1 2022	
	FEB 0 1 2023	
	OWRD	
	Comments/Remarks	
WELL TECTS ME	Well bore diameter was assumed to reduce at some point down the well	
	to bottom with 9.7.8" Roller bit, saw no reduction in hole diameter. Had	d a tight
Drill stem/Pump depth Duration (hr)	spot at 560° to 580°, and another at 475′ to 500′. No alteration needed W	ell was
	already 10" to bottom.	
		1

UMAT 57376

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WELL I.D. LABEI# L 109381

WATER SUPPLY WELL REPORT -