

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
with priority dates of July 9, 1987, or later.**

A separate form shall be completed for each permit.

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>

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SECTION 1

GENERAL INFORMATION

1. File Information:

APPLICATION # G-17634	PERMIT # (IF APPLICABLE) G-17135	PERMIT AMENDMENT # (IF APPLICABLE) T- N/A
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Capri Walla Walla; contact Jim O'Connell		PHONE NO. 520-219-1856	ADDITIONAL CONTACT NO. 520-429-4256 (cell)
ADDRESS 6867 N. Oracle ST, Suite 101			
CITY Tucson	STATE AZ	ZIP 85704	E-MAIL jim@caprinc.com

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 Same as #2 Above		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

September 19, 2017

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Ryan Driver	9/19/2017	Vineyard Manager

6. County:

Umatilla

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 N/A		
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.



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CWRE NAME Jim Newton		PHONE NO. 360-907-4162	ADDITIONAL CONTACT NO.
ADDRESS 21145 Scottsdale DR			
CITY Bend	STATE OR	ZIP 97701	E-MAIL newtonjim@hotmail.com

Permit Holder of Record Signature or Acknowledgement

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

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

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	Jim O'Connell	Owner	9/27/2023

**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)
UMAT-57348	UMAT-57348	L-112294

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
A Well	North Fork Walla Walla River Basin	Walla Wall 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)
A Well	Irrigation	Vines/Grapes	Mar 1 to Oct 31	0.26 cfs
Total Quantity of Water Used				0.26 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:

Groundwater is pumped from the authorized point of appropriation, 'A Well', directly into an irrigation distribution system that delivers water to vineyard rows through a micro-drip perforated water line that emits irrigation water directly to the vines of each vineyard row.

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 **NO**

(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.")

N/A

6. Claim Summary:

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POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
A Well	0.26 cfs	0.31 cfs	*Minimum of 0.26 cfs measured during well test	Irrigation	20.68 acres	18.672

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**SECTION 4
SYSTEM DESCRIPTION**

Are there multiple POAs?

YES **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):

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'A Well'

A. Place of Use

1. Is the right for municipal use?

YES **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
T 5N	R 36E	W.M.	23	NE-NW	N/A	N/A	Irrigation	18.672	N/A
Total Acres Irrigated									

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 NO

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:

3/4" measuring port in well 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
8"	+2' to 215' bgs	327'	5/15/2014	N/A	Capri, Inc.; Jim O'Connell (permit holder)	Garry Zollman; Lic #1881

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.

OWRD Well Log ID # UMAT-575348

C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)?

YES **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.

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YES NO

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1. Is a pump used?

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
Pump Not Available			Submersible		

3. Motor Information:

MANUFACTURER	HORSEPOWER
Hitachi	15 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)
15 Hp	60	Maximum recorded depth to water during test 185.63' below top of well case	Less than 20-feet above well casing, most areas are below well casing elevation	0.31 cfs

5. Provide pump calculations:

See attached OWRD pump calculator printout as Attachment A.

Assumptions:

- 15 Hp pump (based on 15 Hp submersible motor documented on well pump VFD control)
- Efficiency 7.04 for a submersible well pump, turbine style pump
- 185.63' bgs, maximum depth below top of well casing of pumping water level during pump test
- 60 psi pressure, assumed based on operable range of drip orifice pipe (operable range of pipe is 15-50 psi, assume 60 psi to allowing for pressure loss from friction to delivery point of first orifice in irrigation zone)

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)
37.16 Acre-feet	37.25 Acre-feet	4 hours	0.27 cfs average output

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

7. Is the distribution system piped?

YES NO

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

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
4"	2,200' approx..	Schedule 40 PVC	Buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
Varies between 1-1/2" to 3"	Various	Schedule 40 PVC	Buried

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
*5/32"	50 psi	5 gpm	1	1	0.011 cfs**
*No visible markings on sprinkler nozzle, based on observed size and experience, this appeared to be a 5/32" nozzle.					
**This sprinkler is mounted on a mobile tripod and used to irrigate non-crop common areas to promote stabilizing vegetation to reduce erosion and dust.					

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)
1/8" drip orifice; 18" spacings	15-50 psi	1 gallon per hour	60,800 drip orifices	At 0.26 cfs, limits to around 7,000 orifices at a time	60,800 orifices at 1 gph (2.25 cfs if all ran together)

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
N/A					

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13. Pivot Information:

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
N/A				

E. Storage

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

YES NO

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?

YES 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?

YES NO

H. Additional notes or comments related to the system:

The irrigation system is operated to allow for efficient distribution at the peak flow rate allowed under the permit. Flow rate for the polyethylene drip line is shown below and were obtained from www.dripdepot.com for 1/2" polyethylene drip line with 1/8" drip orifices and 18" spacings:

1/2" Polyethylene Pressure Compensating Drip Line

Emitter Spacing: 18"

Flow Rate: 1.0 GPH

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**SECTION 5
CONDITIONS**

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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	4/3/2014		
BEGIN CONSTRUCTION (A)	None Specified	N/A	N/A
COMPLETE CONSTRUCTION (B)	4/3/2019	9/19/2017	CWRE site visit and well pump test completed on 9/19/2017
COMPLETE APPLICATION OF WATER (C)	4/3/2019	9/19/2017	CWRE site visit and well pump test completed on 9/19/2017

* 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 NO

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

3. Initial Water Level Measurements:

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

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* NO

*All static water level measurements were completed and submitted by the OWRD Groundwater staff, as noted on the OWRD Groundwater Information System on the OWRD website.

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
N/A			

4. Annual Static Water Level Measurements:

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

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/March

c. Were the static water level measurements taken in the month(s) required? **YES*** **NO**

***Most of the annual static water level measurements were recorded in February/March, however, since OWRD Groundwater staff were conducting these measurements on behalf of the permit holder, deviations in measurements are assumed to be compliant with the permit condition.**

d. If "YES", were those measurements submitted to the Department? **YES** **NO**

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
N/A			

5. Pump Test:

a. Did the permit require the submittal of a pump test? **YES** **NO**

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.

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b. Has the pump test been previously submitted to the Department? **YES** **NO**

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

d. Has the pump test been approved by the Department? **YES** **NO**

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

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

6. Measurement Conditions:

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? **YES** **NO**

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** **NO**

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
'A Well'	Seametrics	02130276	Working	37.25 Ac-Ft (at completion of the required pump test)	Unknown, meter in-place & operating at time of site inspection

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? **YES** **NO**

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

b. Have the reports been submitted? **YES** **NO**

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? **YES** **NO**

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

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

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

WELL ID #	DATE ATTACHED TO WELL
L-112294	Present at time of site inspection

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e. Other conditions? **YES** **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 well shall produce groundwater only from a single aquifer in the Columbia River Basalt groundwater reservoir between approximately 270 feet and 300 feet below ground surface."

1. **Compliance:** The well was completed with a seal, according to UMAT-57348, to only produce groundwater from the continuously water-bearing zone of 220 to 310 feet below ground surface (bgs). The well seal is placed to a depth of 215 feet bgs into a 'Black Basalt', which according to OAR 690-210-150(1)(a)(A) "An upper oversize drillhole, at least four inches greater in diameter than the nominal diameter of the permanent well casing to be installed, shall extend from land surface to at least five feet into solid, unfractured, consolidated rock overlying the water-bearing rock formation below a depth of 13 feet. Unperforated permanent well casing shall extend to this same depth."

"The well shall be continuously cased and sealed to a minimum depth of 230 feet."

2. **Compliance:** As noted above in #1., the well produces groundwater from the required interval of approximately between a continuous saturated water-bearing zone of 220 to 310 feet bgs (as noted on UMAT-57348), and although the seal extends to 215 feet bgs, continuing the seal to 230 feet bgs would not yield a different groundwater production zone, other than to potential contaminate the water-bearing zone with cement well seal material, a detriment to the groundwater resource, and as such, the intent of sealing into the confining consolidated rock unit has been met in accordance with OAR 690-210-0150(1)(a)(A).

"Well UMAT 57059 (L95327) shall be abandoned at the time the well authorized under this permit is constructed to prevent borehole flow."

3. **Compliance:** As noted on well log UMAT-57553 (see Attachment B), this well UMAT-57059 has been abandon.

"Well UMAT 4042 shall either be abandoned or the casing extended to at least 1.0 foot above land surface (finished grade)."

4. **Compliance:** The well casing appeared to have been included in landscaping activities that pushed dirt up to the exposed casing raising the ground surface to nearly the top of the well casing. The

excess dirt has been removed and the area around the well graded to approximately 1 foot or more below the top of the exposed well casing and well cap.

SECTION 6 ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Figure 1. COBU Map G-17135	Map figure depicting the actual developed POU under permit G-17135 as observed during the COBU site inspection on 9/19/2017
Attachment A. OWRD Pump Calculator Printout	Printout of OWRD pump calculator noting suitable theoretical flow of irrigation pump to meet the authorized permitted flow rate.
Attachment B. UMAT-57553 & UMAT-57059	Well Log UMAT-57553 noting proof of abandonment as required as a special condition of the permit
Attachment C. Email of Map Waiver Acceptance	Email from Jim Newton, CWRE, to Gerald Clark of OWRD Certificate Section requesting a map waiver to an even scale to provide adequate detail of the POU of the irrigation area. Mr. Clark responded via email approving the alternate map scale.
Attachment D. Email from Watermaster approving metering device	Email correspondence between Jim Newton, CWRE, and watermaster-watermaster acceptance of metering device
Attachment E. UMAT-57348	Well Log UMAT-57348, permitted well under permit G-17135
Attachment F. Permit G-17135	OWRD permit G-17135
Attachment G. Pump Test	Required 4-hour constant rate pump test with monitored recovery

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.

Site survey was conducted September 19, 2017 with property corners located with combination of aerial photo and tax lot map with survey markers found. Well location was located by compass and survey wheel from recognized survey corner, located in the NE corner of T5N, R36E, NE-NW of Section 23, W.M. The well is located at the indicated location on attached Figure 1, with the flow meter on the discharge pipe at the well head.

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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) See Attachment C for map scale waiver.
- 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 N/A
- Locations of fish screens and/or fish by-pass devices in relationship to point of diversion N/A
- 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 N/A
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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ATTACHMENT A
OWRD Pump Calculator Printout

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Pump Capacity Calculation Sheet

using Department designed formula:

$$(\text{hp})(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$$

Efficiency:

Centrifugal = 6.61 75% assumed
Turbine = 7.04 80% assumed

Data Entry (fill in underlined blanks)

HP = 15
Efficiency = 7.04
Lift = 185.63 Maximum depth to water below measuring point
PSI = 60 Assumed irrigatoni system pressure

Results Calculated

(hp)(efficiency) = 105.6
Head based on psi = 152.4
Total dynamic head = 338.1
(head + lift)

**Pump Capacity = 0.31 feet per second
140 gallons per minute**

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ATTACHMENT B
OWRD Well Logs UMAT-57553 & UMAT-57059

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ATTACHMENT C

Email of Map Waiver Acceptance

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RE: Map Scale Waiver Request; COBU Permit G-17135

CLARK Gerald E * WRD <Gerald.E.CLARK@water.oregon.gov>

Tue 2/14/2023 5:35 AM

To:jim newton <newtonjim@hotmail.com>

Cc:MILLER Tonya L * WRD <Tonya.L.MILLER@water.oregon.gov>

Jim,

Things are great here. Hope you are well.

I have reviewed your request for a waiver to draft the Claim map at a scale of 1" = 200' for the above referenced permit. Your request is approved.

Please attach a copy of this waiver approval message to your Claim.

I see that this is a permit for which a 60 day letter was mailed. Do you have a projected timeline for the submittal of the claim?

Please let me know if you have any additional questions.

Gerry

-

Gerry Clark

He/Him/His

Oregon Water Resources Department

Program Analyst, Certificate Section, Water Right Services Division

725 Summer Street NE, Suite A Salem, OR 97301 | Phone 503-979-9103



From: jim newton <newtonjim@hotmail.com>

Sent: Monday, February 13, 2023 9:53 PM

To: CLARK Gerald E * WRD <Gerald.E.CLARK@water.oregon.gov>; CLARK Gerald E * WRD <Gerald.E.CLARK@water.oregon.gov>

Subject: Map Scale Waiver Request; COBU Permit G-17135

Hi Gerry,

I hope all is well with you.

I am emailing to request a map waiver request for a COBU map for permit G-17135. As the place of use has several narrow on-farm access roads, the finer even scale of 1"=200' allows these features to be visible on the map. With the POU fitting onto a single 20.05 acre tax lot, the map fits nicely on an 8.5" x 11" map sheet.

If this map scale waiver is acceptable, could you respond to this email noting such a waiver request is approved.

Please feel free to contact me at your earliest convenience if you have any questions.

Best,

~Jim

Jim Newton, PE, RG, CWRE

Principal - Engineer-Geologist

Cascade Geoengineering, LLC

21145 Scottsdale DR

Bend, Oregon 97701

360-907-4162

www.cascadegeoengineering.com

ATTACHMENT D

Email from Watermaster Approving Metering Device

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RE: Request for Meter Approval; Permit G-17135

MARTIN Luke C * WRD <Luke.C.MARTIN@water.oregon.gov>

Tue 3/21/2023 4:38 PM

To:jim newton <newtonjim@hotmail.com>

Jim,

I have seen that flowmeter before. I think I tagged it last year because the battery was out. As long as a totalizing flowmeter is continuously used during irrigation then it should be fine.

Luke

From: jim newton <newtonjim@hotmail.com>

Sent: Monday, March 20, 2023 12:23 PM

To: MARTIN Luke C * WRD <Luke.C.MARTIN@water.oregon.gov>

Cc: BATES David D * WRD <David.D.BATES@water.oregon.gov>

Subject: Re: Request for Meter Approval; Permit G-17135

Hi Luke, thanks for your email, however, as noted in Tonya Miller's attached email from this morning that documents the department erroneously cancelled this permit is just a little nugget of this permit and filing of the COBU. I had an error in my email this morning as well, as it was in October 2022 CWRE workshop that I discussed the final mapping for this permit with Gerry and Dwight, as was started many years ago and derailed by COVID.

If you could review the email and permit compliance that would be great, as the rest of the permit issues are being addressed by Salem. Let me know if there is anything else you may need from me as this comes to fruition.

Best,
~Jim

Jim Newton, PE, RG, CWRE

Principal - Engineer-Geologist

Cascade Geoengineering, LLC

21145 Scottsdale DR

Bend, Oregon 97701

360-907-4162

www.cascadegeoengineering.com

From: MARTIN Luke C * WRD <Luke.C.MARTIN@water.oregon.gov>

Sent: Monday, March 20, 2023 12:15 PM

To: jim newton <newtonjim@hotmail.com>

Cc: BATES David D * WRD <David.D.BATES@water.oregon.gov>

Subject: RE: Request for Meter Approval; Permit G-17135

Jim,

This is in District 23 (Walla Walla Basin). I looked up Permit G-17135 on our water right information system and noticed a letter of cancellation was sent out on February 28. I did not do any watermaster review on this permit, so I am not aware of the specifics. It appears that it was cancelled due to failure to meet proof of appropriation conditions in the permit. I have attached the letter of cancellation to this email. More details/documents can be found on OWRD website here:

https://apps.wrd.state.or.us/apps/wr/wrinfo/wr_details.aspx?snp_id=178300

Regards,

Luke Martin

Watermaster - District 23

707 E Broadway Ave | Milton-Freewater, OR 97862 | Phone (w) 541-278-5456 (c) 541-371-0818



Integrity | Service | Technical Excellence | Teamwork | Forward-Looking

Please note my new email address: luke.c.martin@water.oregon.gov

From: jim newton <newtonjim@hotmail.com>

Sent: Monday, March 20, 2023 11:24 AM

To: BATES David D * WRD <David.D.BATES@water.oregon.gov>; MARTIN Luke C * WRD <Luke.C.MARTIN@water.oregon.gov>

Subject: Request for Meter Approval; Permit G-17135

Hi David & Luke,

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I needed to get a meter approval for a claim of beneficial use that I have been preparing and not sure who is best to respond to this, as the permit notes Basin 7, however I think it now falls into Basin/watermaster 23.

Attached is a photograph of the meter installed during the COBU site inspection 9/19/2017 of the installed and operation meter. I enclosed a picture of both meter display and the meter manufacturer, model and serial number.

If one of you, whomever finds jurisdiction over this permit could provide the acceptability of the meter to include in the COBU that would be great. Thanks for you efforts.

Best,

~Jim

Jim Newton, PE, RG, CWRE

Principal - Engineer-Geologist

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Bend, Oregon 97701

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ATTACHMENT E
OWRD Well Log UMAT-57348

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

UMAT 57348

5/19/2014

WELL I.D. LABEL# L 112294
START CARD # 1023012
ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. _____
First Name JIM Last Name O'CONNELL
Company CAPRI, INC.
Address 6867 N. ORACLE
City TUCSON State AZ Zip 85704

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing:
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 327.00 ft.

BORE HOLE SEAL

Dia	From	To	Material	From	To	Amt	sacks/lbs
12	0	19	Cement	0	215	75	S
10	19	216					
8	216	327					

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount _____ Actual Amount _____

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
 8 2 215 .25
Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

Perf/ Screen	Casing/ Liner	Screen	Dia	From	To	width	length	# of slots	Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
400 _____ 327 1
Temperature 61 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount
From To Description Amount Units

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County UMATILLA Twp 5.00 N N/S Range 36.00 E E/W WM
Sec 23 NE 1/4 of the NW 1/4 Tax Lot 9041
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address

56053 N FORK WALLA WALLA RIVER RD MILTON FREEWATER, OR

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration _____
Completed Well 5/15/2014 _____ 174
Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 220.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
5/15/2014	220	310	400		174

(11) WELL LOG Ground Elevation _____

Material	From	To
Soil	0	11
Brown Basalt	11	67
Black Basalt	67	107
Brown Basalt	107	130
Black Basalt	130	170
Soft Fractured Black Basalt	170	192
Black Basalt	192	220
Black/Brown Scoria	220	235
Fractured Black Basalt w/Green Soapstone	235	295
Black Scoria w/ Blue Soapstone	295	310
Black/Brown Scoria	310	327

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Date Started 5/12/2014 Complete 5/17/2014

(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 1735 Date 5/19/2014
Signed CHAD COURTNEY (E-filed)

(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 1881 Date 5/19/2014
Signed GARRY L ZOLLMAN (E-filed)
Contact Info (optional) Garry Zollman

ATTACHMENT F
Permit G-17135

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STATE OF OREGON

COUNTY OF UMATILLA

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

JIM O'CONNELL
CAPRI WALLA WALLA
6867 N ORACLE ST SUITE 101
TUCSON, AZ 85704

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-17634

SOURCE OF WATER: A WELL IN NORTH FORK WALLA WALLA RIVER BASIN

PURPOSE OR USE: IRRIGATION OF 20.68 ACRES

MAXIMUM RATE/VOLUME: 0.26 CUBIC FOOT PER SECOND

PERIOD OF USE: MARCH 1 THROUGH OCTOBER 31

DATE OF PRIORITY: MARCH 7, 2013

WELL LOCATION: NE ¼ NW ¼, SECTION 23, T5N, R36E, W.M.; 25 FEET SOUTH AND 450 FEET WEST FROM N1/4 CORNER, SECTION 23

The amount of water used for irrigation under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second and 3.0 acre-feet for each acre irrigated during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

NE ¼ NW ¼, 20.68 ACRES
SECTION 23
TOWNSHIP 5 NORTH, RANGE 36 EAST, W.M.

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Measurement, recording and reporting conditions:

- A. Before water use may begin under this permit, the permittee shall install a totalizing flow meter at each point of appropriation. The permittee shall maintain the meter in good working order.
- B. The permittee shall keep a complete record of the amount of water diverted each month, and shall submit a report which includes the recorded water-use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the permittee to report

general water-use information, including the place and nature of use of water under the permit.

- C. The permittee shall allow the watermaster access to the meter; provided however, where any meter is located within a private structure, the watermaster shall request access upon reasonable notice.
- D. The Director may provide an opportunity for the permittee to submit alternative measuring and reporting procedures for review and approval.

The well shall produce groundwater only from a single aquifer in the Columbia River Basalt groundwater reservoir between approximately 270 feet and 300 feet below land surface.

The well shall be continuously cased and continuously sealed to a minimum depth of 230 feet.

Well UMAT 57059 (L95327) shall be abandoned at the time the well authorized under this permit is constructed to prevent borehole flow.

Well UMAT 4042 shall either be abandoned or the casing extended to at least 1.0 foot above land surface (finished grade).

The Department requires the water user to obtain, from a qualified individual (see below), and report annual static water levels for each well on the permit. The static water level shall be measured in the month of February/March. Reports shall be submitted to the Department within 30 days of measurement.

The permittee shall report an initial February/March static water-level measurement once well construction is complete and annual measurements thereafter. Annual measurements are required whether or not the well is used. The first annual measurement will establish a reference level against which future measurements will be compared. However, the Director may establish the reference level based on an analysis of other water-level data. The Director may require the user to obtain and report additional water levels each year if more data are needed to evaluate the aquifer system.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board. Measurements shall be submitted on forms provided by, or specified by, the Department. Measurements shall be made with equipment that is accurate to at least the standards specified in OAR 690-217-0045. The Department requires the individual performing the measurement to:

- A. Associate each measurement with an owner's well name or number and a Department well log ID; and

- B. Report water levels to at least the nearest tenth of a foot as depth-to-water below ground surface; and
- C. Specify the method of measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

The water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s) if any of the following events occur:

- A. Annual water-level measurements reveal an average water-level decline of three or more feet per year for five consecutive years; or
- B. Annual water-level measurements reveal a water-level decline of 15 or more feet in fewer than five consecutive years; or
- C. Annual water-level measurements reveal a water-level decline of 25 or more feet; or
- D. Hydraulic interference leads to a decline of 25 or more feet in any neighboring well with senior priority.

The period of restricted use shall continue until the water level rises above the decline level which triggered the action or the Department determines, based on the permittee's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or causing substantial interference with senior water rights. The water user shall not allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

Dedicated Measuring Tube: Wells with pumps shall be equipped with a minimum 3/4-inch diameter, unobstructed, dedicated measuring tube pursuant to figure 200-5 in OAR 690-200. If a pump has been installed prior to the issuance of this permit, and if static water levels and pumping levels can be measured using an electrical tape, then the installation of the measuring tube can be delayed until such time that water levels cannot be measured or the pump is repaired or replaced.

Prior to using water from any well listed on this permit, the permittee shall ensure that the well has been assigned an OWRD Well Identification Number (Well ID tag), which shall be permanently attached to the well. The Well ID shall be used as a reference in any correspondence regarding the well, including any reports of water use, water level, or pump test data.

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STANDARD CONDITIONS

SEP 29 2023

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

If the number, location, source, or construction of any well deviates from that proposed in the permit application or required by permit

conditions, this permit may be subject to cancellation, unless the Department authorizes the change in writing.

If substantial interference with surface water or a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well(s) shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

If the riparian area is disturbed in the process of developing a point of appropriation, the permittee shall be responsible for restoration and enhancement of such riparian area in accordance with ODFW's Fish and Wildlife Habitat Mitigation Policy OAR 635-415. For purposes of mitigation, the ODFW Fish and Wildlife Habitat Mitigation Goals and Standards, OAR 635-415, shall be followed.

The use may be restricted if the quality of downstream waters decreases to the point that those waters no longer meet state or federal water quality standards due to reduced flows.

Where two or more water users agree among themselves as to the manner of rotation in the use of water and such agreement is placed in writing and filed by such water users with the watermaster, and such rotation system does not infringe upon such prior rights of any water user not a party to such rotation plan, the watermaster shall distribute the water according to such agreement.

Prior to receiving a certificate of water right, the permit holder shall submit to the Water Resources Department the results of a pump test meeting the Department's standards for each point of appropriation (well), unless an exemption has been obtained in writing under OAR 690-217. The Director may require water-level or pump-test data every ten years thereafter.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

Completion of construction and application of the water shall be made within five years of the date of permit issuance. If beneficial use of permitted water has not been made before this date, the permittee may

Application G-17634 Water Resources Department

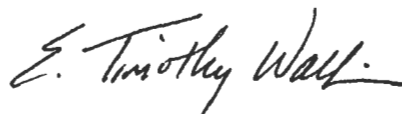
REC
PERMIT G-17135
SEP 2 8

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submit an application for extension of time, which may be approved based upon the merit of the application.

Within one year after making beneficial use of water, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner.

Issued April 3 , 2014



E. Timothy Wallin, Water Rights Program Manager
for Phillip C. Ward, Director
Water Resources Department

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ATTACHMENT G
Pump Test Documentation

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Owner Information:

OWNER NAME/BUSINESS NAME: Jim O'Connell/Capri Walla Walla		PHONE NO.: 520-219-1856	ADDITIONAL CONTACT NO.:
ADDRESS: 6867 N. Oracle ST, Suite 101			
CITY: Tucson	STATE: AZ	ZIP: 85704	E-MAIL: jim@caprinc.com

Pump Test Conducted By (If Different From Owner):

TEST CONDUCTED BY NAME: Jim Newton		QUALIFICATION: (SELECT) RG	LICENSE #: G2122
COMPANY: Cascade Geoengineering, LLC		PHONE NO.: 360-907-4162	ADDITIONAL CONTACT NO.:
ADDRESS: 21145 Scottsdale DR			
CITY: Bend	STATE: OR	ZIP: 97701	E-MAIL: newtonjim@hotmail.com

Tested Well Information (please attach well log(s) if available):

WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
UMAT-57348	L- 112294	'A Well'	327'	Jim O'Connell	5-19-2017	9-19-2017

(CONTINUED)

TWP (EX: 25S)	RNG (EX: 31E)	SEC (EX: 12)	QQ (EX: SE/SW)	SURVEYED LOCATION (EX: 100 ft N & 735 ft E fr SE cor, sec 5)	LATITUDE (EX: 44.94473859)	LONGITUDE (EX: -123.02787000)
5N	36E	23	NE/NW	450.0 feet west, 39.0 feet south from NE cor of NE-NW sec 23		

List all water rights for which you are submitting this test. Please indicate if the tested well is listed as an authorized source of water on each water right. If not, you may also need to fill out a multiple well exemption (MWE) request form.

APPLICATION	PERMIT	TRANSFER	CERTIFICATE	IS THE TESTED WELL AN AUTHORIZED POA ON THIS RIGHT?
G- 17634	G- 17135	T-		<input checked="" type="radio"/> Yes <input type="radio"/> No (Need MWE Form)
G-	G-	T-		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
G-	G-	T-		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)

SEP 29 2014

Nearby Wells and Streams: Please check yes or no. Do not leave blank.

Are there any wells, other than domestic or stock wells, within 1000 feet of the tested well?
Unknown If yes, identify the well by OWRD log number or attach a copy of the well log. Note the approximate distance to each well from the tested well and the approximate pumping rate of each. If possible, indicate if they were turned on or off during the test or within 24 hours prior to the test (Indicate Not Pumped, if applicable).

WELL LOG # (EX: MARI 99999)	BEARING & DISTANCE FROM PUMPED WELL (FT)	DATE & TIME PUMP ON	DATE & TIME PUMP OFF	PUMPING RATE (GPM)
N/A				

Is there a lake, stream or other surface water body within 1/4 mile of the tested well?
If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head. **Approximate distance:** 860 ft.
Well elevation is above the surface water body. **Approximate elevation difference:** 140 ft.

Was the test conducted during normal use of the well?
Please indicate where pumped water was discharged: On-site irrigatoin system of permit G-17135
How far from the pumped well was water discharged? approx 50-feet at closest to irrigation zone used ft.



Water-Level Measurement Method: Electric Tape

Length of air line (if used): N/A

**Airline measurements must be verified by an E-Tape measurement*

Pressure transducer (if used):

Manufacturer: N/A Serial #: _____

Date Last Calibrated: _____ Units: _____

Discharge Measurement Method: Flowmeter

Flowmeter (if used):

Manufacturer: Seametrics Serial #: 02130276

Date Last Calibrated: unknown Units: gpm

*Verify here: { Airline: _____ psi _____ feet.
E-Tape: _____ feet.

Pump Type: Submersible
HP: 15 Pump set at: unknown feet.
Pump idle time: >24 hours before pump test

Note: Well must be idle for at least 16 hours prior to the test. Additional forms can be obtained from our web site at: <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

Measuring Point (MP): Measuring point distance above land surface 20.75 inches.

Description (e.g., top port of 1 inch port pipe, west side) access port in well cap

Time pump turned on: Date 9/19/2017 Time 11:00 a.m.

Time pump turned off: Date 9/19/2017 Time 15:00 p.m.

Total pumping time: 4 hours hours 0 minutes.

Remember, your pump test may not be approved unless it meets the following criteria*:

- The discharge rate was held constant for the entire pumping phase.
- The pump was on during the entire pumping phase (≥ 4 hours).
- The discharge was measured at the start of pumping and at least once every hour during the test.
- Water levels were measured to an accuracy of 0.1 feet or 0.5 percent.
- Pre-test static water levels were measured at least three times in the hour before pumping began at no less than 20 minutes apart.
- Water levels were measured at the specified intervals during the pumping phase of the test for at least four hours (≤2 min for the first 10 minutes, ≤5 min for 10 – 30 minutes, and ≤15 min for the remainder of the test)
- Water levels were measured at the specified intervals (see above) during the recovery phase of the test for four hours or until 90 percent of the maximum drawdown has recovered.
- If using an airline, measurements were calibrated with an E-Tape and the depth to water was ≥ 300 feet.
- The pump test cover sheet was completely filled out and signed.
- The pumping rate was as close as reasonably possible to the (anticipated) pumping rate during normal use of the well.
- The well was idle for at least 16 hours prior to the test.
- The pump test was completed by an acceptably qualified person (Oregon licensed water well constructors; Oregon registered professional geologists or certified engineering geologists; certified water rights examiners; Oregon registered professional engineers; and individuals whose primary occupation involves, wholly or in significant part, pump installation, service, or testing).

**This checklist is intended for information purposes only and does not guarantee a pump test approval. The Department reserves all authority pertaining to the implementation of the rules under OAR 690-217.*

Pump tests are intended to provide aquifer and well information for ground water resource characterization and to help solve well problems (OAR 690-217-0015(9)).

Pump test requirements for OAR 690-217 can be found online at:

https://secure.sos.state.or.us/oard/displayDivisionRules.action;JSESSIONID_OARD=1BdwLynsYAPNSB1W30ZS7Zm1scp4Hfil-1ftsDAAEsMC2_ROSs!-277278532?selectedDivision=3186

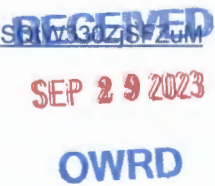
Submit forms to: Attn: Certificates Section, Oregon Water Resources Department
725 Summer St NE Suite A, Salem, OR 97301

Forms may additionally be sent to WRD_DL_pumptestsupport@oregon.gov

I hereby certify that this test has been conducted in accordance with OAR 690-217:

OPERATOR SIGNATURE: Jamy S. [Signature] DATE: 9-27-2023

OWNER SIGNATURE: _____ DATE: _____

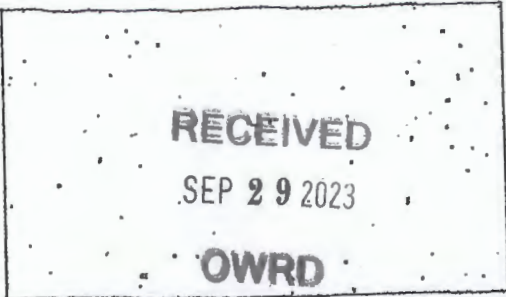




WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
UMAT-57348	L- 112294	Jim O'Connell; Capri, Inc.	327	Same	05/19/2017	9/19/2017

Date	Time	Time Since Pumping Started (min)	Depth to Water Below MP	Discharge Rate (gpm, cfs,)	Phase (Pre-Test, Pumping, Recovery)	Airline or Shut-in Pressure (psi)	Flowmeter Reading (if available)	Comments
9/17/2017	10:00	0	177.60'	0	Pre-test		37.16 AF	
	10:20	0	177.60'0	0	Pre-test			
	10:40	0	177.60'	0	Pre-test			
	11:00	0	177.60	Pump On				Pump ON
	11:01	1	183.70	119 gpm	Pumping <input type="checkbox"/>			
	11:02	2	184.10	125 gpm	Pumping <input type="checkbox"/>			
	11:03	3	184.42		Pumping <input type="checkbox"/>			
	11:04	4	184.65	116.1 gpm	Pumping <input type="checkbox"/>			
	11:05	5	184.80		Pumping <input type="checkbox"/>			
	11:06	6	184.96	122.3 gpm	Pumping <input type="checkbox"/>			
	11:07	7	185.10		Pumping <input type="checkbox"/>			
	11:08	8	185.20		Pumping <input type="checkbox"/>			
	11:09	9	185.23		Pumping <input type="checkbox"/>			
	11:10	10	185.32		Pumping <input type="checkbox"/>			
	11:15	15	185.28	130	Pumping <input type="checkbox"/>			
	11:20	20	185.05	119	Pumping <input type="checkbox"/>			
	11:25	25	185.10	118.3	Pumping <input type="checkbox"/>			
	11:30	30	185.19	119.5	Pumping <input type="checkbox"/>			
	11:45	45	185.30	117.5	Pumping <input type="checkbox"/>			
	12:00	60	185.40	117.9	Pumping <input type="checkbox"/>			
	12:15	75	185.57	117.5	Pumping <input type="checkbox"/>			
	12:30	90	185.54	117.9	Pumping <input type="checkbox"/>			
	12:45	105	185.57	117.5	Pumping <input type="checkbox"/>			
	13:00	120	185.58	117.9	Pumping <input type="checkbox"/>			
	13:15	135	185.63	118.3	Pumping <input type="checkbox"/>			
	13:30	150	185.63	117.7	Pumping <input type="checkbox"/>			
	13:45	165	185.63	118.0	Pumping <input type="checkbox"/>			
	14:00	180	185.63	117.4	Pumping <input type="checkbox"/>			
	14:15	195	185.61	117.0	Pumping <input type="checkbox"/>			
	14:30	210	185.63	117.1	Pumping <input type="checkbox"/>			
	14:45	225	185.61	117.0	Pumping <input type="checkbox"/>			
	15:00	240	185.63		Pumping <input type="checkbox"/>		37.25 Ac-Ft	Pump OFF 15:00
	15:01	1	180.03	0	Recovery <input type="checkbox"/>			
	15:02	2	179.40	0	Recovery <input type="checkbox"/>			
	15:03	3	179.08	0	Recovery <input type="checkbox"/>			
	15:03:30	3.5	178.96	0	Recovery <input type="checkbox"/>			
	15:04	4	178.85	0	Recovery <input type="checkbox"/>			
	15:05	5	178.71	0	Recovery <input type="checkbox"/>			
	15:05:30	5.5	178.63	0	Recovery <input type="checkbox"/>			

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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Capri Walla Walla; c/o Jim O'Connell

6867 N. Orade St, Suite 101

Transaction Type: COBU

Fees Received: \$ 230⁰⁰

Cash

Check

Check No. 1394

Name(s) on Check: Cascade Geo. Engineering LLC

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,

OWRD Customer Service Staff

Submission received by: Nick Reese
(Name of OWRD staff)

Instructions for OWRD staff:

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

OREGON



WATER RESOURCES
DEPARTMENT

RECEIVED

SEP 29 2023

OWRD

Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Capt. Walla Walla; c/o Jim O'Connell

6867 N. Orade St, Suite 101

Transaction Type: COB

Fees Received: \$ 230⁰⁰

Cash

Check

Check No. 1394

Name(s) on Check: Cascade Geo. Engineering LLC

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If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,

OWRD Customer Service Staff

Submission received by: Nick Keele
(Name of OWRD staff)

Instructions for OWRD staff:

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



21145 Scottsdale DR, Bend, Oregon 97701
360-907-4162 newtonjim@hotmail.com

September 27, 2023

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SEP 29 2023

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Gerry Clark, Certificate Section
Oregon Water Resources Department
725 Summer ST NE, Suite A
Salem, Oregon 97301-1266

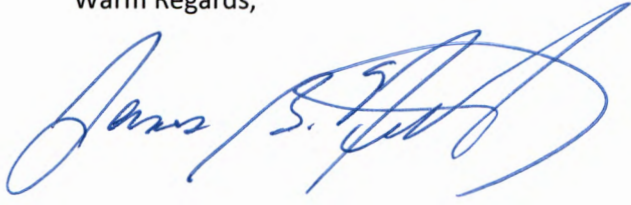
RE: APPLICATION FOR CLAIM OF BENEFICIAL USE, OWRD GROUNDWATER PERMIT G-17135 COUNTY, UMATILLA COUNTY, OREGON

Dear Gerry:

This letter has been prepared by Cascade Geoengineering, LLC (CGE) to accompany the claim of beneficial use application (COBU) for groundwater permit G-17135 in the name of Jim O'Connell, Capri Walla Walla. The enclosed COBU is for a vineyard property in Umatilla County that has been discussed for several years related to the mapping methodology of the vineyard rows and subsequent drip irrigation system. The original site inspection and well pump test was completed on September 19, 2017 and based on discussions with you and Mr. Dwight French during CWRE workshops, this COBU was withheld until the method for mapping the vineyard for the COBU was determined. Based on the outcome of those final discussions in October 2022, the COBU has been finalized and enclosed for processing.

If you have questions regarding the enclosed COBU, please feel free to contact me at your convenience, I can be reached by telephone at 360-907-4162, or email newtonjim@hotmail.com.

Warm Regards,

A handwritten signature in blue ink, appearing to read "Jim Newton". The signature is stylized and cursive.

Jim Newton, PE, RG, CWRE
Principal – Engineer-Geologist
Cascade Geoengineering, LLC

Attachments (1): COBU G-17135

RECEIVED

SEP 29 2023

OWRD