

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



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

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

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

RECEIVED

OCT 20 2023

OWRD

**SECTION 1
GENERAL INFORMATION**

Type of Authorized Change

This Claim is being submitted for a transfer where the only authorized change was a change in point(s) of appropriation or additional point(s) of appropriation, or a combination of both.

YES

If additional changes were authorized, you will need to select a different form.

1. File Information

APPLICATION # T-13488

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Aaron and Wendy Nofziger		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS 28770 S Elisha Rd			
CITY Canby	STATE OR	ZIP 97013	E-MAIL

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

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

TRANSFER HOLDER OF RECORD Aaron and Wendy Nofziger			
ADDRESS 28770 S Elisha Rd			
CITY Canby	STATE OR	ZIP 97013	

4. Date of Site Inspection:

August 1, 2023

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Aaron Nofziger	August 1, 2023	Owner / Operator

6. County

Clackamas County

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

OWNER OF RECORD		
NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

SECTION 2
SIGNATURES

RECEIVED

OCT 20 2023

OWRD

CWRE Statement, Seal and Signature

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



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


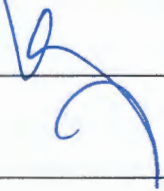
Transfer Holder of Record Signature or Acknowledgement

RECEIVED
OCT 20 2023

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

OWRD

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
	Aaron Nofziger	Owner	10/13/23
	Wandy Nofziger	Owner	10/13/23

SECTION 3
CLAIM DESCRIPTION

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

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

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
Well 1	CLAC 77268	L-145225	A well in the Creamery Creek Basin

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

If well logs are available, items A and B below can be deleted

2. Variations:

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

YES

If yes, describe below.

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

1. The authorized Well 2 has not been constructed and is, therefore, not included in this Claim of Beneficial Use.

3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
Well 1	0.16 cfs	1.07 cfs	0.587 cfs not running at full capacity

SECTION 4

SYSTEM DESCRIPTION

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

NO

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

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

Well 1

**RECEIVED
OCT 20 2023
OWRD**

A. POA System Information

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

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Grundfos	MS6000QFT 40	00280204P22 142	Submersible	6 inch	4 inch

2. Motor Information

Grundfos	40 Hp
-----------------	--------------

3. 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)
40 Hp	60 psi	110.25 feet (from permit condition pump test)	0 feet	1.07 cfs

4. Provide pump calculations:

$$Q \text{ Pump} = \frac{(40 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(110.25 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 1.07 \text{ cfs}$$

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
3,752,521.2	3,753,838.2	5 minutes	263.4 gpm or 0.587 cfs not running at full capacity

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

B. Groundwater Source Information (Well and Sump)

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

NO
RECEIVED
OCT 20 2023
OWRD

If "NO", items 4 through 6 relating to this section may be deleted.

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

C. Additional notes or comments related to the system:

Notes:

1. Well 1 (CLAC 77268) also supplies Permit G-18735.
2. Mainline is pressurized through 85 gallon pressure tank.
3. Meter records water use from both water rights.

SECTION 5 CONDITIONS

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

1. Time Limits:

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

	DATE FROM TRANSFER	DATE THE NEW AND/OR ADDITIONAL POA(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	March 17, 2021	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2023	June 5, 2023

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

RECEIVED

2. Is there an extension final order(s)?
If "NO", you may delete the following table.

OCT 20 2023

NO

3. Measurement Conditions:

OWRD

a. Does the transfer final order, or any extension final order require the installation of a meter or other 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 appropriation.

b. Has a meter been installed?

YES

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1	Seametrics	03222980	Working	3,752,659.8 gallons (August 1, 2023)	June 5, 2023

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

4. Recording and reporting conditions

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

NO

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

5. Other conditions required by the transfer final order or extension final order:

a. Were there special well construction standards?

NO

b. Was submittal of a ground water monitoring plan required?

NO

c. Other conditions?

YES

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

c) Condition:

Water shall be acquired from the same aquifer (water source) as the original point of appropriation.

Compliance:

Certificate 79974:

Original Well (CLAC 18557) develops water from the alluvial aquifer primarily from the depth of 320 feet within black sand.

New approved Well 1 (CLAC 77268) develops water from the alluvial aquifer in the depth intervals of 209.5 to 219 feet, 250 to 256 feet, 272 to 282 feet, 287 to 306 feet, and 320 to 330

feet within layers of silt and sand.

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

RECEIVED

OCT 20 2023

OWRD

SECTION 6 ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	Claim of Beneficial Use Map
State Water Well Report – CLAC 77268	Well log and driller's notes for CLAC 77268 – Well 1

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 polyester film at a scale of 1" = 1320 feet, 1" = 400 feet, or the original full-size scale of the county assessor map for the location.

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

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

The COBU map was prepared using tax assessor's maps 4 1E 25, 26, 35, and 36, overlain by a 2014 aerial photo titled USDA-FSA-APFO NAIP County Mosaic and obtained on line from the Natural Resources Conservation Service, Image Metadata:
<http://datagateway.nrcs.usda.gov/Catalog/ProductDescription/NAIPM.html>.

Map Checklist

Please be sure that the map you submit includes ALL the items listed below.
(Reminder: Incomplete maps and/or claims may be returned.)

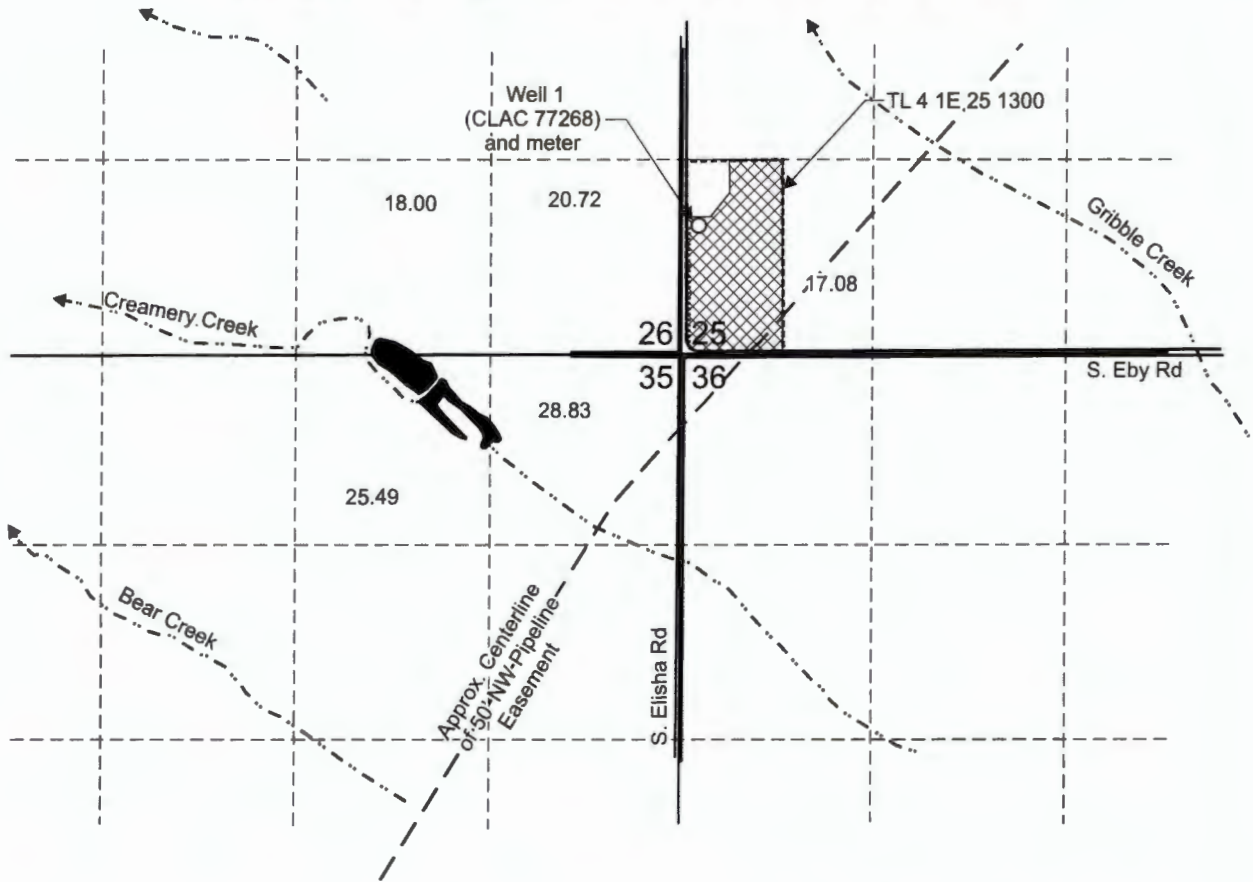
Map on polyester film

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

RECEIVED
OCT 20 2023
OWRD

OCT 20 2023
OWRD

T.4S. R.1E. Section 25, W.M.



Well 1 (CLAC 77268) is located 875 feet north and 105 feet east from the SW corner, Section 25.

 Area (17.08 Acres) irrigated under T-1348, formerly Certificate 79974, priority date June 29, 1993.

- Tax lot boundary
- Water main line

RECEIVED
OCT 20 2023
OWRD



Scale: 1" = 1,320'



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



Claim of Beneficial Use Map
T-13488, formerly Certificate 79974

Aaron C. And Wendy J. Nofziger
T.4S. R.1E. Section 25, W.M.

Pacific Hydro-Geology Inc.

10/2023

STATE OF OREGON
WATER SUPPLY WELL REPORT

WESTERBERG DRILLING INC
PO BOX 1228
MOLALLA, OR 97038

WELL ID. LABEL# L 145225
START CARD # 217164
ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

(1) LAND OWNER Owner Well I.D. _____
First Name Aaron & Wendy Last Name Nofziger
Company _____
Address 28770 S Elisha Rd
City Canby State OR Zip 97013

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

(2a) PRE-ALTERATION
Dia + From To Gauge Stil 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 345 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
14	0	40	Bentonite	0	5	4	S
10	40	378				4	
						37	S
						14	

How was seal placed: Method A B C D E
 Other bent placed dry & hydrated
Backfill placed from 345 ft to 378 ft. Material pea gravel
Filter pack from 171 ft to 345 ft. Material css Size 6/9
Explosives used: Yes Type _____ Amount _____

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

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stil Plstc Wld Thrd
Riser
weld bushing
10x8
Shoe Inside Outside Other Location of shoe(s) 354
Temp casing Yes Dia 14 From + 1 To 38' 7/4"

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type y-wire Material S.S.
Perf/S Casing/Screen
Screen Liner Dia From To Scrn/slot width Slot length # of slots Tel/ pipe size
Screen 6 209.5 219 .065 4 2 1/2
Screen 6 250 256 .065 4 2 1/2
Screen 6 272 282 .065 4 2 1/2
Screen 6 287 306 .065 4 2 1/2
Screen 6 320 330 .065 4 2 1/2

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 450 Drawdown 68 Drill stem/Pump depth 136 Duration (hr) 4
Temperature 55 °F Lab analysis Yes By OCT 20 2023
Water quality concerns? Yes (describe below) TDS amount 210 ppm
From To Description OWRD Amount Units

(9) LOCATION OF WELL (legal description)
County CLACKAMAS Twp 4 S N/S Range 1 E E/W WM
Sec 25 SW 1/4 of the SW 1/4 Tax Lot 1300
Tax Map Number _____ Lot _____
Lat _____ " or 45.18917 DMS or DD
Long _____ " or -122.64003 DMS or DD
 Street address of well Nearest address
Same

(10) STATIC WATER LEVEL
Date SWL (psi) + SWL (ft)
Existing Well / Pre-Alteration _____
Completed Well 04-18-2022 _____ 42
Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 58

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
	118	114	10		
	145	155	50+		
	210	217	50+		
	251	255	n/k		
	273	281	n/k		

(11) WELL LOG Ground Elevation _____

Material	From	To
soil	0	1
clay brown	1	14
clay blue	14	20
cemented gravel grey & brown	20	50
cemented gravel with white clay	50	58
cemented gravel	58	114
gravel & gravel & clay	114	120
cemented gravel	120	126
packed silt brown	126	133
clay tan	133	145
cemented sand brown coarse	145	155
packed silt blue grey	155	160
packed silt grey with clay lenses	160	188
clay grey sticky sticky	188	201
sand & gravel	201	207
packed silt	207	210
sand grey medium to coarse	210	218
packed silt grey	218	224
clay sticky blue grey	224	230

Date Started 01-26-2022 Completed 04-27-2022

(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 1358 Date 06-02-2022
Signed Byron B. [Signature]

(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 688 Date 06-02-2022
Signed Steven N. [Signature]
Contact Info (optional) _____

