

# 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](http://www.oregon.gov/OWRD)

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

## SECTION 1 GENERAL INFORMATION

**1. File Information:**

APPLICATION # <b>G-18329</b>	PERMIT # (IF APPLICABLE) <b>G-18329</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>T-13267</b>
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>Robinson Farm LLC c/o Chris Robinson</b>		PHONE NO. <b>503-832-4533</b>	ADDITIONAL CONTACT NO.	
ADDRESS <b>PO Box 100</b>				
CITY <b>Amity</b>	STATE <b>OR</b>	ZIP <b>97101</b>	E-MAIL <b>chris@robinsonnursery.com</b>	

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 <b>Robinson Farm LLC c/o Chris Robinson</b>		
ADDRESS <b>PO Box 100</b>		
CITY <b>Amity</b>	STATE <b>OR</b>	ZIP <b>97101</b>

ADDITIONAL PERMIT HOLDER OF RECORD <b>NA</b>		
ADDRESS		
CITY	STATE	ZIP

**4. Date of Site Inspection:**

**May 15, 2023**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Adam Tucker	May 15, 2023	Maintenance Manager

6. County

Yamhill

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

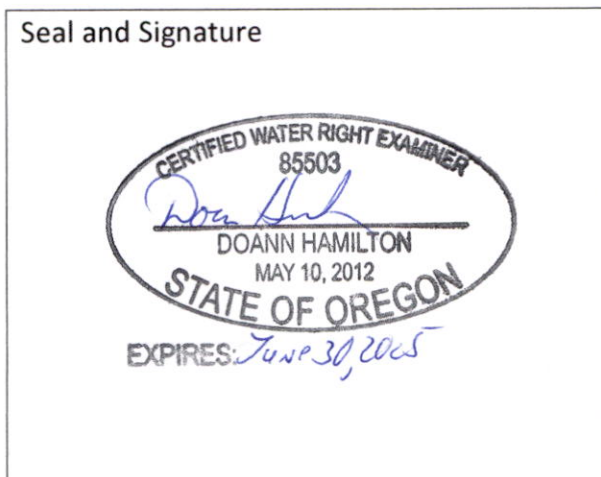
OWNER OF RECORD		
NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

**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.
Doann Hamilton		(503) 632-5016	(503) 349-6946
ADDRESS			
18487 S. Valley Vista Road			
CITY	STATE	ZIP	E-MAIL
Mulino	OR	97042	phgdmh@gmail.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
	Chris Robinson	Manager	10/13/23

**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)
Whiteson Well 3	YAMH 453	L-132413
Well 4	YAMH 59181	L-147371

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
Whiteson Well 3	Salt Creek Basin	Yamhill River
Well 4	Salt Creek Basin	Yamhill River

**3. Developed use(s), period of use, and rate for each use:**

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
Whiteson Well 3	Nursery	NA	November 1 through May 31	0.47cfs
Well 4	Nursery	NA	November 1 through May 31	0.24 cfs
<b>Total Quantity of Water Used</b>				<b>0.71cfs</b>

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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 Whiteson Well 3 (YAMH 453) using a 15 Hp submersible pump to convey water through 10 feet of 4-inch steel pipe equipped with a meter before going underground and connecting with an 8-inch PVC mainline. The mainline extends southeast to a filter station before heading east-southeast along the railroad before heading northwest and under River Bend Road.

The 8-inch mainline extends north and then west before a 3-inch line tees off to the east and into the pond as a bulge in the system. Water is then pumped from the reservoir using a centrifugal pump to convey water through a 3-inch mainline to the south and connecting to an 8-inch mainline extending back down the same trench with an 8-inch line teeing off to the west to supply the different areas.

Off these 8-inch mainlines extending to the west, the line reduces to 6 inches with hydrants to supply a 4-inch PVC line with 1.5- and 2-inch laterals extending down the length of each of the different can yards. These laterals supply 7-foot-high, ¾-inch PVC, above-ground pipe with rainbird impact sprinklers on top of each to irrigate the can yards. One small section of can yards is irrigated with portable aluminum 3-inch laterals with rainbirds extended on 3-foot-high extensions.

For the rows of greenhouses, a 4-inch mainline off the 8-inch line supplies each row. A 1.5-inch PVC below-ground line laterals off the 4-inch mainline and extends into each greenhouse. The 1.5-inch PVC lateral extends up and down the middle of each greenhouse supplying overhead Nelson S-10 sprinklers hanging down from the 1.5-inch PVC line. An additional ¾-inch PVC lateral off the 1.5-inch PVC lateral extends up and down to connect a 1-inch flex tubing extending down the length on both sides of each greenhouse to supply a Naan micro sprinkler system. Several of the greenhouses have faucets located outside on the top of 4-foot-tall, ¾-inch galvanized pipe extensions.

Irrigation is as needed.

Water is pumped from Well 4 (YAMH 59181) using a 7.5 Hp submersible pump through 15 feet of 4-inch steel pipe before heading underground where the line connects to a 4-inch buried PVC pipe extending to the south and connecting to the 8-inch mainline to discharge into the pond.

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).

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**5. Variations:**

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below. YES

(e.g. "The permit allowed three points of appropriation. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

1. The authorized Well 2 (YAMH 57192, 57394) was not performing well and has not been used; therefore, Well 2 is not included in this Claim of Beneficial Use.
2. The location of Well 4 (YAMH 59181) is more correctly placed at: 1,995 feet south and 635 feet west from the NE corner, Section 7.
3. The place of use was revised to include reference to the DLC and/or Government Lot and reduce the place of use based on field verification:

Original authorized place of use:

5S	4W	6	SE SE	0.2
5S	4W	7	NE NE	20.7
5S	4W	7	SW NE	2.0
5S	4W	7	SE NE	28.7
5S	4W	7	NE SE	14.0
5S	4W	7	NW SE	<u>2.0</u>

Total: 67.6

Revised place of use:

5S	4W	6	SE SE	DLC 40	0.2
5S	4W	7	NE NE	DLC 40	0.1
5S	4W	7	NE NE	DLC 80	18.1
5S	4W	7	NE NE	Lot 8	2.5
5S	4W	7	SW NE	DLC 43	1.6
5S	4W	7	SE NE	DLC 80	2.7
5S	4W	7	SE NE	Lot 7	0.1
5S	4W	7	SE NE	DLC 43	25.3
5S	4W	7	NE SE	DLC 43	14.0
5S	4W	7	NW SE	DLC 43	<u>2.0</u>

Total: 66.6

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**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
Whiteson Well 3		0.47 cfs	Not Measured	Nursery	67.6	66.6
Well 4		0.24 cfs	Not Measured	Nursery		
<b>Total:</b>	<b>1.69</b>	<b>0.71 cfs</b>				

**SECTION 4a of 4b  
SYSTEM DESCRIPTION**

Are there multiple POAs?

YES

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

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

Whiteson Well 3

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**A. Place of Use**

1. Is the right for municipal use?

NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
5S	4W	WM	6	SE SE	NA	40	Nursery	0.2	NA
5S	4W	WM	7	NE NE	NA	40	Nursery	0.1	NA
5S	4W	WM	7	NE NE	NA	80	Nursery	18.1	NA
5S	4W	WM	7	NE NE	8	NA	Nursery	2.5	NA
5S	4W	WM	7	SW NE	NA	43	Nursery	1.6	NA
5S	4W	WM	7	SE NE	NA	80	Nursery	2.7	NA
5S	4W	WM	7	SE NE	7	NA	Nursery	0.1	NA
5S	4W	WM	7	SE NE	NA	43	Nursery	25.3	NA
5S	4W	WM	7	NE SE	NA	43	Nursery	14.0	NA
5S	4W	WM	7	NW SE	NA	43	Nursery	2.0	NA
<b>Total Acres Irrigated</b>								<b>66.6</b>	

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:

½ inch hole on east side of the sanitary seal.

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See Well log YAMH 453						



4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

See Well log YAMH 453

### C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)? NO

If "NO", items 2 through 4 relating to this section may be deleted.

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

### D. Diversion and Delivery System Information

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport and apply the water from the point of appropriation to the place of use.

1. Is a pump used? YES

If "NO" items 2 through item 6 may be deleted.

#### 2. Pump Information:

SOURCE	MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Whiteson Well 3	Unknown	Unknown	Unknown	Submersible	4 inch	4 inch
Pond pump	Berkeley	B4JH809-CW	Unknown	Centrifugal	4 inch	6 inch

#### 3. Motor Information:

SOURCE	MANUFACTURER	HORSEPOWER
Whiteson Well 3	Unknown	15 Hp
Pond Pump	Centiva	40 HP

#### 4. Theoretical Pump Capacity:

SOURCE	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)
Whiteson Well 3	15 Hp	60 psi	70.0 feet (Estimated based on pumping test for Well 4)	0 feet	0.47 cfs
Pond Pump	40 Hp	60 psi	14 feet	0 feet	1.59 cfs

#### 5. Provide pump calculations:

Whiteson Well	$Q \text{ Pump} = \frac{(15 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(70.0 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 0.47 \text{ cfs}$
Pond pump	$Q \text{ Pump} = \frac{(40 \text{ Hp}) \times (6.61 \text{ ft}^4/\text{sec Hp})}{(14 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 1.59 \text{ cfs}$

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

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

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

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

**YES**

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

**8. Mainline Information:**

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
4 inch	10 feet	Steel	Above ground
8 inch from well up	7,350 feet	PVC	Buried
3 inch to and from pond	700 feet	PVC	Buried
<b>Common with Well 4</b>			
8 inch from pond out	5,000 feet	PVC	Buried
6 inch	2,000 feet	PVC	Buried
4 inch	2,000 feet	PVC	Buried

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
1.5 inch - canyard	33,100 feet	PVC	Buried
2 inch - canyard	29,000 feet	PVC	Buried
4 inch - canyard	2,000 feet	PVC	Buried
3 inch	1,200 feet	Aluminum	Above ground
¾ inch - rainbird	12,600 feet	PVC	Above ground
¾ inch - rainbird	144 feet	Aluminum	Above ground
1.5 inch - greenhouse	20,325 feet	PVC	Above ground and buried
¾ inch - greenhouse	44,320 feet	PVC	Above ground
1 inch - greenhouse	39,500 feet	Flex	Above ground
¾ inch faucets	100 feet	Galvanized	Above ground

**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
Rainbird 1/8 inch	60 psi	3.6 gpm	1,834	150	1.20 cfs
Nelson S-10 Grey Spinner with #13 yellow nozzle	45 psi	2.02 gpm	2,763	250	1.12 cfs
Naan Micro 5/32"	60 psi	0.90 gpm	3,302	300	0.60 cfs

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

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**H. Additional notes or comments related to the system:**

Whiteson Well 3 (YAMH 453) also supplies Certificate 81063.

The pump in Whiteson Well 3 was installed many years ago and there are no records of the type of pump used. Horsepower was estimated using amperage and other techniques.

**SECTION 4b of 4b  
SYSTEM DESCRIPTION**

**Are there multiple POAs?** **YES**

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

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

Well 4

**A. Place of Use**

**1. Is the right for municipal use?** **NO**

*If "YES" the table below may be deleted.*

TWP	RNG	MER	SEC	QQ	GLot	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
5S	4W	WM	6	SE SE	NA	40	Nursery	0.2	NA
5S	4W	WM	7	NE NE	NA	40	Nursery	0.1	NA
5S	4W	WM	7	NE NE	NA	80	Nursery	18.1	NA
5S	4W	WM	7	NE NE	8	NA	Nursery	2.5	NA
5S	4W	WM	7	SW NE	NA	43	Nursery	1.6	NA
5S	4W	WM	7	SE NE	NA	80	Nursery	2.7	NA
5S	4W	WM	7	SE NE	7	NA	Nursery	0.1	NA
5S	4W	WM	7	SE NE	NA	43	Nursery	25.3	NA
5S	4W	WM	7	NE SE	NA	43	Nursery	14.0	NA
5S	4W	WM	7	NW SE	NA	43	Nursery	2.0	NA
<b>Total Acres Irrigated</b>								<b>66.6</b>	

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.*

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2. Describe the access port (type and location) or other means to measure the water level in the well:

½ inch port on south side of the sanitary seal after removing the PVC vent tube.

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See Well log YAMH 59181						

4. In addition to the information requested in item “3” above, provide any other information which may help the Department locate any well logs associated with this appropriation.

See Well log YAMH 59181

**C. Groundwater Source Information (Sump)**

1. Is the appropriation from a dug well (sump)? NO

*If “NO”, items 2 through 4 relating to this section may be deleted.*  
 Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

**D. Diversion and Delivery System Information**

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport and apply the water from the point of appropriation to the place of use.

1. Is a pump used? YES

*If “NO” items 2 through item 6 may be deleted.*

**2. Pump Information:**

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Goulds	95L07	22B19-02-00219A	Submersible	6 inch	3 inch

**3. Motor Information:**

MANUFACTURER	HORSEPOWER
Franklin Electric	7.5 Hp

**4. Theoretical Pump Capacity:**

SOURCE	HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *If a well, the water level during pumping	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
Well 4	7.5	60 psi	67.33 feet (from permit condition pump test)	0 feet	0.24 cfs
Pond Pump	40 Hp	60 psi	14 feet	0 feet	1.59 cfs

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5. Provide pump calculations:

Well 4	Q Pump = $\frac{(7.5 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(67.33\text{ft lift} + 152.4 \text{ ft pressure head})}$ = 0.24 cfs
Pond pump	Q Pump = $\frac{(40 \text{ Hp}) \times (6.61 \text{ ft}^4/\text{sec Hp})}{(14 \text{ ft lift} + 152.4 \text{ ft pressure head})}$ = 1.59 cfs

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not running during site visit			

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
4 inch	15 feet	Steel	Above ground
4 inch	350 feet	PVC	Buried
See Whiteson Well			

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
See Whiteson Well 3			

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
See Whiteson Well 3					

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)
NA					

12. Drip Tape Information:

DRIPPER SPACING IN INCHES	GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	ADDITIONAL INFORMATION
NA					

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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	Permit G-17998 issued: October 15, 2018 Permit G-18329 issued: December 3, 2019		
BEGIN CONSTRUCTION (A)	Per Permit G-17998: October 15, 2023	October 15, 2018	Whiteson Well 3 (YAMH 453) construction began December 12, 1990.
COMPLETE CONSTRUCTION (B)	NA	NA	NA
COMPLETE APPLICATION OF WATER (C)	Per Permit G-18329: October 15, 2023	May 2023	The water system was completed, all permit conditions were met and water was put to full use. Full beneficial use of water has been made.

\* 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.

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?

March

c. Was the measurement submitted to the Department? YES

- However, later level data for Well 4 (YAMH 59181) does not appear on WRIS; therefore, attached to this COBU

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			



**4. Annual Static Water Level Measurements:**

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

*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:

March

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

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

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**Yes for Whiteson Well 3 – but the 2023 report does not appear on WRIS – see attached**

**No for Well 4 – only initial has been submitted as of today but additional readings will continue 2024.**

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

**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? **YES**

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

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

**Attached is the multiple well exemption request for Whiteson Well 3 to be processed once the pumping test results for Well 4 (YAMH 59181) is approved.**

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

**6. Measurement Conditions:**

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? **YES**

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

**Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion or appropriation.**

b. Has a meter been installed? **YES**

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Whiteson Well 3	Seametrics	032018000183	Working	4,589 gallons (June 26, 2023)	2018
Well 4	Seametrics	04200744	Working	13,030 gallons (May 15, 2023)	May 2023

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**

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

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 to the well? **YES**

WELL	WELL ID #	DATE ATTACHED TO WELL
Whiteson Well 3	L-132413	October 2018
Well 4	L-147371	February 2023

e. Other conditions? **YES**

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

**e1) Condition per T-13267:**

The use of water under the permit from the proposed additional point of appropriation shall not occur until after December 7, 2019.

**Compliance:**

Well 4 (YAMH 59181) construction was not completed until February 15, 2023 and was not put to use until May 2023.

**e2) Condition:**

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.

**Compliance:**

Well tag L-132413 is attached to the well casing of Whiteson Well 3.  
Well tag L-147371 is attached to the well casing of Well 4.

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**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	Claim of Beneficial Use Map
State Water Well Report – YAMH 453	Well log and driller’s notes for YAMH 453 – Whiteson Well 3
State Water Well Report – YAMH 59181	Well log and driller’s notes for YAMH 59181 – Well 4
BLM Cadastral Map	BLM Cadastral Map T. 5S. R. 4W. showing DLC and Government Lot locations
Pump Test Form Cover Sheet and Pump Test Data Sheet	Pumping Test Results for Well 4 (YAMH 59181) conducted May 8, 2023
Permit Condition Water-level Reporting form 2023	Static water level report for Whiteson Well 3 (YAMH 453)
Permit Condition Water-level Reporting form 2023	Static water level report for Well 4 (YAMH 59181)
Pump Test Multiple Well Exemption Request Form	Pump Test Multiple Well Exemption Request Form for Whiteson Well 3 (YAMH 453)

**SECTION 7  
CLAIM OF BENEFICIAL USE MAP**

The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on poly film at a scale of 1" = 1320 feet, 1" = 400 feet, or the original full-size scale of the county assessor map for the location.

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

The COBU map was prepared using tax assessor’s maps 5 4 06, 07 and 08 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

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- If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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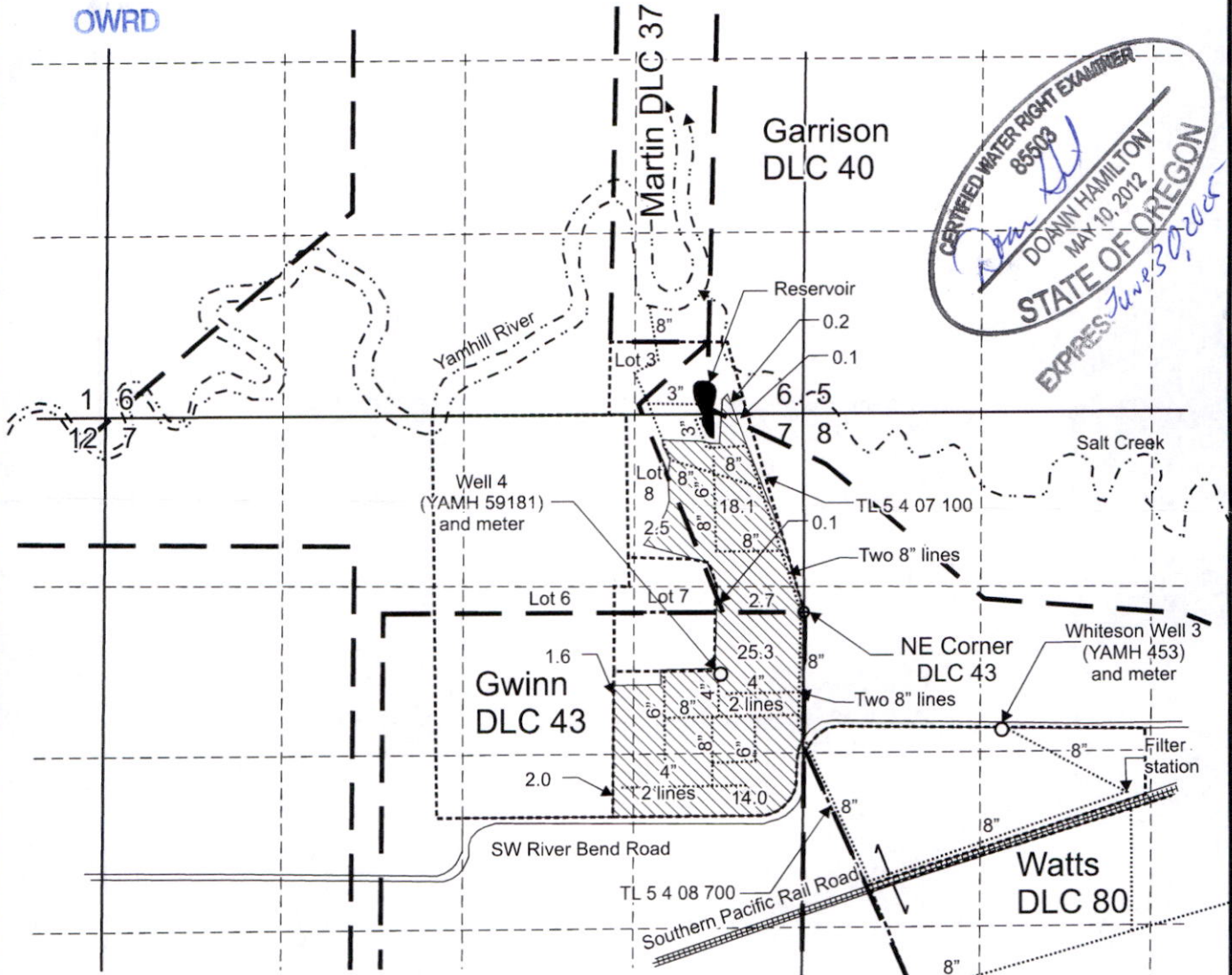
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# T.5S. R.4W. Sec. 6, 7, & 8, W.M.

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CERTIFIED WATER RIGHT EXAMINER  
 85503  
*[Signature]*  
 DOANN HAMILTON  
 MAY 10, 2012  
 STATE OF OREGON  
 EXPIRES: June 30, 2022



Whiteson Well 3 (YAMH 453) is located 890 feet south and 1,520 feet east from the NE corner, DLC 43.

Well 4 (YAMH 59181) is located 1,995 feet south and 635 feet west from the NE corner, Section 7.

Area (66.6 acres) of nursery operations under Application G-18329, Permit G-18329, T-13267.

----- Tax lot boundary      - - - - - Donation Land Claim boundary      ——— Water main line

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 Application G-18329, Permit G-18329, T-13267

Robinson Farm LLC  
T.5S. R.4W. Sec. 6, 7, & 8, W.M.

Pacific Hydro-Geology Inc.

10/2023

RobinsonG-18329COBUMap.cdr







# YAMH 453



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

## Application for Well ID Number

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

### I. OWNER INFORMATION

OWRD

Current Owner Name (please print): Robinson Farms LLC

Mailing Address: PO Box 100

City, State, Zip: Amity, OR 97101

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

Name & Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

See attached Well log YAMH 453

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

Township: 5S (North / South) Range: 4W (East / West) Section: 8 SE 1/4 of the NW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 700 County Yamhill

GPS Coordinates: \_\_\_\_\_

Street Address of Well, City: 9000 SW River Bend Rd, Mc Minnville (approx)

If the property had a different street address in the past: \_\_\_\_\_

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

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation

Date Well Constructed (or property built): 01/07/91 Total Well Depth: 137 ft Casing Diameter: 8 inch

Owner at time the well was constructed (if known): John Bernards Well Report # (if known): YAMH 453

Other Information: \_\_\_\_\_

SUBMITTED BY (please print): Chris Robinson

PHONE: 503-835-4533 EMAIL &/or FAX: Chris@robinsonnursery.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

10-18-18

Well Report Number:

YAMH 453

Well Identification #:

L-132413

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STATE OF OREGON WATER SUPPLY WELL REPORT

YAMH 59181

WELL I.D. LABEL# 147371 START CARD # 1059753 ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210) 2/20/2023

(1) LAND OWNER

Owner Well I.D. REED IRRIGATION WELL First Name Last Name Company ROBINSON FARMS LLC Address PO BOX 100 City AMITY State OR Zip 97101

(2) TYPE OF WORK

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

(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

Depth of Completed Well 107.50 BORE HOLE Dia From To Material

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount (6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd

(7) PERFORATIONS/SCREENS

Perforations Method Screens Type v-wire Material stainless Perf/ Casing/ Screen Screen Liner 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) Temperature 54 °F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS amount 264 ppm

(9) LOCATION OF WELL (legal description)

County YAMHILL Twp 5.00 S N/S Range 4.00 W E/W WM Sec 7 SE 1/4 of the NE 1/4 Tax Lot 100

(10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft) Existing Well / Pre-Alteration Completed Well 2/15/2023 14.3

WELL LOG

Table with columns: Material, From, To. Rows include clay brwn silty soft, sand brwn coarse to fine soft, etc.

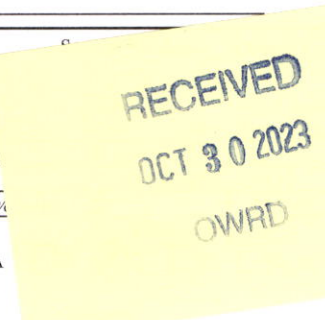
Date Started 1/13/2023 Completed 2/15/2023

(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.

(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.









WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

YAMH 59181

2/20/2023

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Map of Hole

STATE OF OREGON  
WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301  
(503)986-0900



LOCATION OF WELL

Latitude: 45.15323300 Datum: WGS84

Longitude: -123.21967700

Township/Range/Section/Quarter-Quarter Section:

WM5.00S4.00W7SENE

Address of Well:

9000 SW RIVERBEND ROAD MCMINNVILLE, OR 97128

Well Label: 147371

Printed: February 20, 2023

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor





*Handwritten note at top right.*

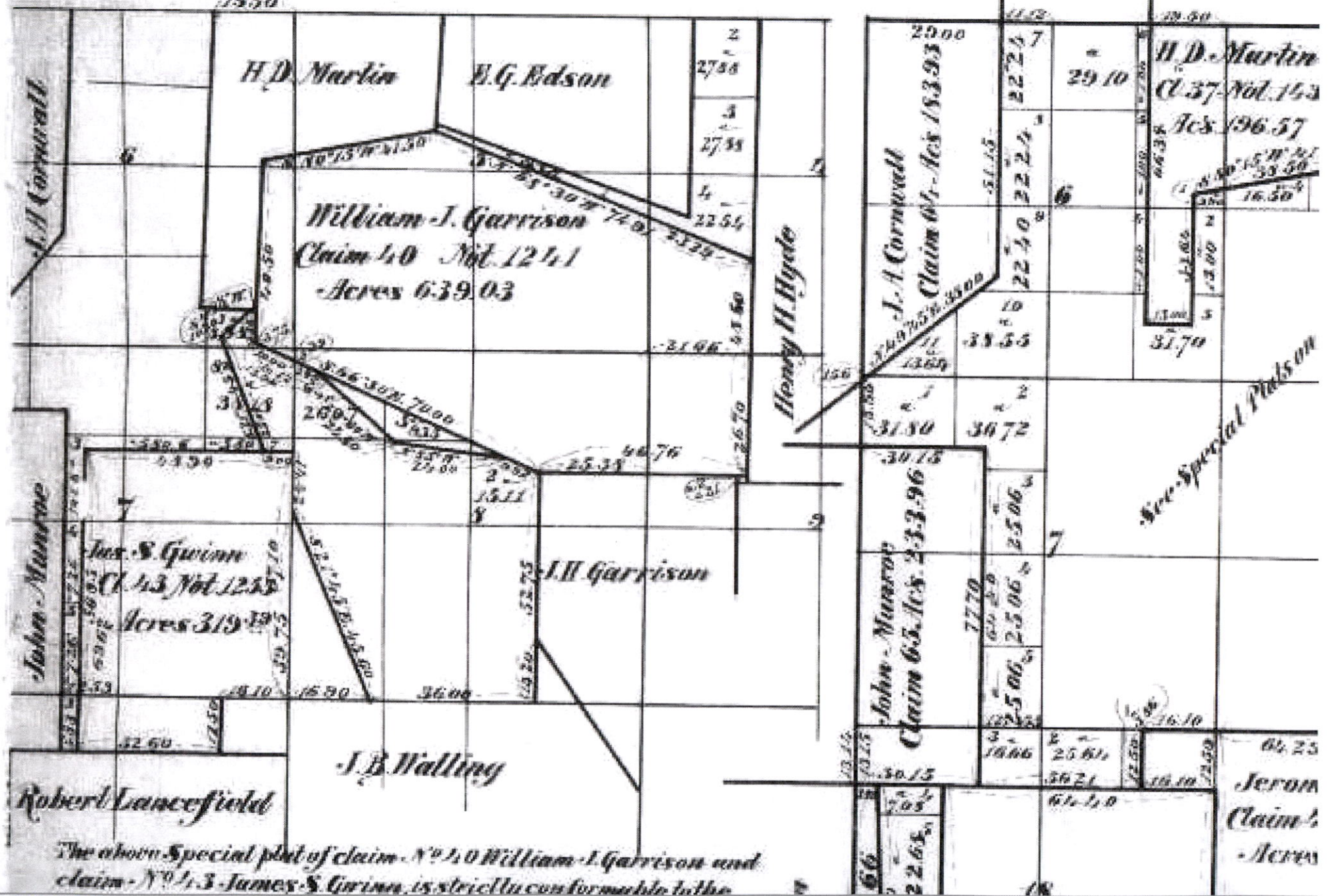
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Township 5 South, Range 4 West.

1950



The above Special plot of claim No. 10 William J. Garrison and claim No. 13 James S. Quinn is strictly conformable to the



**Oregon Water Resources Department  
PERMIT CONDITION WATER-LEVEL REPORTING FORM**

Well owner:

Name	Chris Robinson / Robinson Farms	Application:	G-18329
Address	P.O. Box 100	Permit:	G-18329
City/State/Zip	Amity OR 97107	Certificate:	NA
Phone/Fax/Cell	503-855-4533 503-931-8231 cell	Userid:	NA
Email	chris@robinson Nursery.com	Transfer	T-13267

Diana@robinson Nursery.com

Your water right requires periodic static water-level measurements in your wells. Consult your permit or certificate to determine when measurements should be made, when reports are due, and who is allowed to make the measurements. Keep a copy of all measurement reports for your records. All wells that have been constructed must be measured regardless of whether they are being used. Please contact the Department if you are no longer the holder of this right or no longer have an interest in it.

Complete one form for each well.

Other water rights that list this well:

Application number(s):	G-12381			
Permit number(s):	G-11726			
Certificate number(s):	81063			

Identification of measured well (Provide as much information as possible.)

Water Resources Well Log ID:	YAMH 453	Owner's well name:	Whiteson Well	
Well ID (Well Tag) on Well: L-	132413	Well drilled by:	Robert Shelburne	
Well ID (Well Tag) on Well Log: L-		Total depth	137	Casing diameter (inches): 8
Start Card # on Well Log:	24793	Owner on well log:	John Bernards	
Date drilled:	12-12-1990			

**Water-Level Measurement**

Date of measurement: 3/2/2023

Measurements should be made to at least the nearest tenth of a foot (10.2"), the nearest inch (10' 3") or the nearest pound, if using a gage.

Depth to water below measuring point:	14.1	Airline length or transducer depth:		feet
Measuring point height above/below land surface:	6'	Airline pressure:		psi x 2.31= feet
Depth to water below land surface:	13.5	Shut-in pressure:		psi x 2.31= feet

Measurement Status: Static  Pumping  Rising  Flowing  Other

Measurement Method: E-tape  Airline  Other

Length of time well was idle prior to measurement: \_\_\_\_\_

Measuring point description: \_\_\_\_\_

The measuring point is the reference point from which the measurement is made. Examples are: 1/2" access port in well cap; 1-1/2" port pipe on N side; pressure gage.

Comments:

When did water use begin for this well under this permit? Month \_\_\_\_\_ Year \_\_\_\_\_

I hereby certify that the information on this report is accurate and represents the static water level in the well at the time of measurement.

Person making measurement (print): Gage Anderson

Signature of measurer: *Gage Anderson*

Company: \_\_\_\_\_

Licensed number (circle license type: CWRE, RG, PE, WWC, Pump Installer): \_\_\_\_\_

Daytime phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

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**OWRD**

If you have any questions about this notice, please call the Measurement & Reporting Section of the Department at 503-986-0822. Return this Form to: OWRD, Meas & Rept Section, 725 Summer St. NE, Suite. A, Salem, OR 97301-1266 or email as an attachment to reportingmmts@wrd.state.or.us. Additional forms can be obtained from our web site at: [www.oregon.gov/owrd/](http://www.oregon.gov/owrd/)



**Oregon Water Resources Department  
PERMIT CONDITION WATER-LEVEL REPORTING FORM**

Well owner:

Name	Chris Robinson/Robinson Farms		
Address	P.O. Box 100		
City/State/Zip	Amity	OR	97107
Phone/Fax/Cell	503-855-4533	503-931-8231	cell
Email	chris@robinson Nursery.com		

Application:	G-18329
Permit:	G-18329
Certificate:	NA
Userid:	NA
Transfer	T-13267

Diana@robinson Nursery.com

Your water right requires periodic static water-level measurements in your wells. Consult your permit or certificate to determine when measurements should be made, when reports are due, and who is allowed to make the measurements. Keep a copy of all measurement reports for your records. All wells that have been constructed must be measured regardless of whether they are being used. Please contact the Department if you are no longer the holder of this right or no longer have an interest in it.

Complete one form for each well.

Other water rights that list this well:

Application number(s):	NA			
Permit number(s):	NA			
Certificate number(s):	NA			

Identification of measured well (Provide as much information as possible.)

Water Resources Well Log ID:	YAMH 59181	Owner's well name:	Well 4	
Well ID (Well Tag) on Well: L-	147371	Well drilled by:	Arrow Drilling	
Well ID (Well Tag) on Well Log: L-		Total depth	107.5	Casing diameter (inches): 8
Start Card # on Well Log:	1059753	Owner on well log:	Robinson Farms LLC	
Date drilled:	1-13-2023			

**Water-Level Measurement**

Date of measurement: 3/2/2023 Measurements should be made to at least the nearest tenth of a foot (10.2"), the nearest inch (10' 3") or the nearest pound, if using a gage.

Depth to water below measuring point:	19.7	Airline length or transducer depth:		feet
Measuring point height above/below land surface:	6"	Airline pressure:		psi x 2.31= feet
Depth to water below land surface:	19.1	Shut-in pressure:		psi x 2.31= feet

Measurement Status: Static  Pumping  Rising  Flowing  Other

Measurement Method: E-tape  Airline  Other

Length of time well was idle prior to measurement: \_\_\_\_\_

Measuring point description: \_\_\_\_\_

The measuring point is the reference point from which the measurement is made. Examples are: 1/2" access port in well cap; 1-1/2" port pipe on N side; pressure gage.

Comments:

When did water use begin for this well under this permit? Month \_\_\_\_\_ Year \_\_\_\_\_

I hereby certify that the information on this report is accurate and represents the static water level in the well at the time of measurement.

Person making measurement (print): Gage Anderson

Signature of measurer: [Signature]

Company: \_\_\_\_\_

Licensed number (circle license type: CWRE, RG, PE, WWC, Pump Installer): \_\_\_\_\_

Daytime phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

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If you have any questions about this notice, please call the Measurement & Reporting Section of the Department at 503-986-0822. Return this Form to: OWRD, Meas & Rept Section, 725 Summer St. NE, Suite. A, Salem, OR 97301-1266 or email as an attachment to reportingmmts@wrd.state.or.us. Additional forms can be obtained from our web site at: [www.oregon.gov/owrd/](http://www.oregon.gov/owrd/)





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RESOURCES  
DEPARTMENT

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PUMP TEST FORM  
COVER SHEET

Water-Level Measurement Method: Electric Tape \*Verify here: { Airline: \_\_\_\_\_ psi \_\_\_\_\_ feet.  
Length of air line (if used): \_\_\_\_\_ E-Tape: 500' \_\_\_\_\_ feet.

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

Pressure transducer (if used):

Manufacturer: \_\_\_\_\_ Serial #: \_\_\_\_\_  
Date Last Calibrated: \_\_\_\_\_ Units: \_\_\_\_\_

Pump Type: \_\_\_\_\_  
HP: 7.5 Pump set at: 78 feet.  
Pump idle time: 27 DAYS

Discharge Measurement Method: Flowmeter

Flowmeter (if used):  
Manufacturer: MICROMETER Serial #: 05-04325  
Date Last Calibrated: DEC 2022 Units: GPM

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 24" feet.

Description (e.g., top port of 1 inch port pipe, west side) 1/2 PORT IN WELL SEAL ON SOUTH SIDE

Time pump turned on: Date 5/8/2023 Time 8:30 A.M.  
Time pump turned off: Date 5/8/2023 Time 12:30 P.M.  
Total pumping time: 4 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=1BdwLynsYAPNSQ!W330ZjSFZuMscp4Hfil-1ftsDAAEsMC2\\_ROSs!-277278532?selectedDivision=3186](https://secure.sos.state.or.us/oard/displayDivisionRules.action;JSESSIONID_OARD=1BdwLynsYAPNSQ!W330ZjSFZuMscp4Hfil-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](mailto:WRD_DL_pumptestsupport@oregon.gov)

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

OPERATOR SIGNATURE: Alex Shand DATE: 5/9/2023

OWNER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_





**Owner Information:**

OWNER NAME/BUSINESS NAME:		PHONE No.:	ADDITIONAL CONTACT No.:
ADDRESS:			
CITY:	STATE:	ZIP:	E-MAIL:

**Pump Test Conducted By (If Different From Owner):**

TEST CONDUCTED BY NAME:	QUALIFICATION: (SELECT)	LICENSE #:	
COMPANY:	PHONE No.:	ADDITIONAL CONTACT No.:	
ADDRESS:			
CITY:	STATE:	ZIP:	E-MAIL:

**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
YAMH59181	L- 147371	Well 4	107.50	ROBINSON FARMS	2/20/2023	5/8/2023

(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)

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- 18329	G- 18329	T- 13267		<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)
G-	G-	T-		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)

**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?  
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)

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.  
Well elevation is  above the surface water body. Approximate distance: \_\_\_\_\_ ft.  
Approximate elevation difference: \_\_\_\_\_ ft.

No Was the test conducted during normal use of the well?  
Please indicate where pumped water was discharged: DISCHARGED TO DRAIN TILE TO POND  
How far from the pumped well was water discharged? 1800' \_\_\_\_\_ ft.





