


# 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.

**This COBU is for a permit with a priority date of October 31, 2014; the \$230 fee is included.**

**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>

## SECTION 1

### GENERAL INFORMATION

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#### 1. File Information:

APPLICATION # <b>G-17955</b>	PERMIT # (IF APPLICABLE) <b>G-17564</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>T-</b>
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>Stallion Land Company LLC; Attn: Nick Card</b>		PHONE NO. <b>541-727-3550</b>	ADDITIONAL CONTACT NO.	
ADDRESS <b>PO Box 3667</b>				
CITY <b>Central Point</b>	STATE <b>OR</b>	ZIP <b>97502</b>	E-MAIL <b>NCard@combinedtransport.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>Stallion Land Company LLC</b>				
ADDRESS <b>PO Box 3667</b>				
CITY <b>Central Point</b>	STATE <b>OR</b>	ZIP <b>97502</b>		

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

**4. Date of Site Inspection:**

**10/10/2023**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Dennis Roberts</b>	<b>10/10/2023</b>	<b>Maintenance, Combined Transport</b>
<b>Chuck Liedtke</b>	<b>10/10/2023</b>	<b>Sales, Combined Transport</b>

**6. County:**

**Jackson**

**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 <b>N/A</b>				
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.



CWRE NAME <b>Theodore R. Ressler</b>		PHONE NO. <b>503-967-7050 x204</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>Summit Water Resources, LLC; 4784 SE 17th Avenue, Suite 111</b>			
CITY <b>Portland</b>	STATE <b>OR</b>	ZIP <b>97202</b>	E-MAIL <b>tressler@summitwr.com</b>

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
	Michael S. Card	Manager	11/13/23

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**SECTION 3  
CLAIM DESCRIPTION**

**1. Point of appropriation name or number:**

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well 2	JACK 7480	L-122437
Well A	JACK 62240	L-117719
Well B	JACK 62241	L-118360
Well C	JACK 62245	L-118365

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

**2. Point of appropriation source, if indicated on permit:**

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
Well 2	Bear Creek Basin	--
Well A	Bear Creek Basin	--
Well B	Bear Creek Basin	--
Well C	Bear Creek Basin	--

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

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POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
Well 2	IR, CM	Landscaping	IR: 3/1 to 10/31 CM: Year-round	0.06 cfs
Well A	IR, CM	Landscaping	IR: 3/1 to 10/31 CM: Year-round	0.06 cfs
Well B	IR, CM	Landscaping	IR: 3/1 to 10/31 CM: Year-round	0.06 cfs
Well C	IR, CM	Landscaping	IR: 3/1 to 10/31 CM: Year-round	0.05 cfs
<b>Total Quantity of Water Used</b>				<b>Cumulative total rate of 0.06 cfs, limited to 0.013 cfs for irrigation</b>

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

**Well A.** Groundwater is appropriated using a submersible pump and conveyed by pipe to a 5,000-gallon raw water tank located inside the water treatment building (water softening and GAC). A totalizing flow meter is installed on Well A to measure and record the amount of water pumped from the well. The treated water is stored in a 10,000-gallon finished water tank inside the water treatment building. Distribution system pumps draw water from the finished water tank to supply the water system for the commercial facility. Point of use RO units are installed where water is used for potable uses. Water from Well A is also used to supply an in-ground irrigation system.

**Well 2, Well B, and Well C.** Groundwater is appropriated using submersible pumps and conveyed by pipe



to a 300,000-gallon storage tank. Water from the 300,000-gallon storage tank is used to fill water trucks, which apply water for dust control and to irrigate and maintain ground cover along the entry lane of the facility. The water in the storage tank is also used to supply an emergency fire suppression system for the facility.

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

**5. Variations:**

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

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

**Place of Use.** The total quantity of irrigation authorized by the permit (1.0 acres) was developed, but the distribution of acres by quarter-quarter differs from the permit. All 1.0 acres of irrigation was developed in the NWNW of Section 28 (Note: this irrigation is located on land included in the permit). In addition, the place of use listing on the permit was not subdivided by Donation Land Claims (DLCs) or Government Lot (GLs) The place of use listed provided in this COBU includes subdivision by DLCs and GLs.

**6. Claim Summary:**

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well 2	0.06 cfs, limited to 0.013 cfs for IR	0.065 cfs	Not measured	CM, IR	1.0	1.0
Well A		0.075 cfs	Not measured	CM, IR		
Well B		0.065 cfs	Not measured	CM, IR		
Well C		0.049 cfs	Not measured	CM, IR		

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**SECTION 4  
SYSTEM DESCRIPTION**

Are there multiple POAs?

**YES**

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

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

**Well 2 (JACK 7480, L-122437)**

**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
36S	2W	WM	28	NWNW	2		CM		
36S	2W	WM	28	NWNW	2		IR	0.86	--
36S	2W	WM	28	NWNW		51	CM		
36S	2W	WM	28	NWNW		51	IR	0.06	--
36S	2W	WM	28	SWNW	3		CM		
36S	2W	WM	28	SWNW		51	CM		
36S	2W	WM	28	SWNW		52	CM		
36S	2W	WM	28	NWSW	4		CM		
36S	2W	WM	28	NWSW		52	CM		
36S	2W	WM	29	SENE			CM		
<b>Total Acres Irrigated</b>								<b>0.92</b>	<b>0</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:

**Water level access requires removal of the well cap.**

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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
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The well log is provided in Attachment 3

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.

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
Unknown	Unknown	Unknown	Submersible	N/A	Unknown

3. Motor Information:

MANUFACTURER	HORSEPOWER
Unknown	1.0

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)
1.0	0 <sup>A</sup>	54 <sup>B</sup>	54 <sup>C</sup>	0.065

Notes

<sup>A</sup> Well open discharges to atmosphere (into the top of the 300,000 gallon storage tank)

<sup>B</sup> Estimated pumping lift based on pump test completed on Well A

<sup>C</sup> Lift from the ground surface at the well to the top of the 300,000-gallon storage tank (ground surface at well = 1232 ft amsl, top of tank = 1256 ft amsl; 24 feet of lift) PLUS frictional loss in the mainline between the wellhead and the 300,000-gallon storage tank (30 ft of lift)

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**5. Provide pump calculations:**

$$Q_{\text{pump}} = \frac{(\text{Hp})(\text{conversion factor})}{(\text{lift} + \text{pressure}) \text{ total head in feet}} = \text{cfs}$$

Conversion factor:

$$\text{Turbine \& Submersible Pumps, 80\% eff. } \frac{(550 \text{ ft lb/sec/Hp})(.80)}{(62.4 \text{ lb/cu ft})} = 7.04 \text{ ft}^4/\text{sec/Hp}$$

**Well 2 Pump**

$$Q_{\text{pump}} = \frac{(1.0)(7.04)}{(108)} = 0.065 \text{ cfs}$$

**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)
<b>Not measured – the well was not operating during site inspection</b>			

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
<b>2-inch</b>	<b>1285 feet</b>	<b>PVC</b>	<b>Buried</b>

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
<b>N/A – there are no laterals</b>			

**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
<b>N/A - No sprinklers are used</b>					

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)
<b>N/A – no drip emitters are used</b>					

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**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
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N/A – no drip tape is used

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
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N/A – no pivots are used

**E. Storage**

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

YES

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

If "YES" is it a:           Storage Tank  
                                          Bulge in System / Reservoir

YES  
NO

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Metal	300,000	Above ground

**F. Gravity Flow Pipe**

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

NO

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

**G. Gravity Flow Canal or Ditch**

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

NO

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

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

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**SECTION 4  
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 A ( JACK 62240, L-117719)**

**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
36S	2W	WM	28	NWNW	2		CM		
36S	2W	WM	28	NWNW	2		IR	0.07	--
36S	2W	WM	28	NWNW		51	CM		
36S	2W	WM	28	NWNW		51	IR	0.01	--
36S	2W	WM	28	SWNW	3		CM		
36S	2W	WM	28	SWNW		51	CM		
36S	2W	WM	28	SWNW		52	CM		
36S	2W	WM	28	NWSW	4		CM		
36S	2W	WM	28	NWSW		52	CM		
36S	2W	WM	29	SENE			CM		
<b>Total Acres Irrigated</b>								<b>0.08</b>	<b>0</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?

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**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:

**Water level access requires removal of the 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
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**The well log is provided in Attachment 3**



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.

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**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
Berkeley	B20P4MS10231	Unknown	Submersible	N/A	1.25-inch

**3. Motor Information:**

MANUFACTURER	HORSEPOWER
Pentek	1.0

**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)
1.0	0 <sup>A</sup>	54 <sup>B</sup>	40 <sup>C</sup>	0.075

**Notes**

<sup>A</sup> Well open discharges to atmosphere (into the top of the 5,000 gallon raw water storage tank in the treatment building)

<sup>B</sup> Pumping lift from pump test completed on May 21, 2015 by Quinn's Well Pump and Filtration Service

<sup>C</sup> Lift from the ground surface at the well to the top of the 5,000-gallon raw water storage tank (ground surface at well = 1215 ft amsl, top of tank = 1233 ft amsl; 18 feet of lift) PLUS frictional loss in the mainline between the wellhead and the 5,000- gallon raw water storage tank (22 ft of lift)

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**5. Provide pump calculations:**

$$Q_{\text{pump}} = \frac{(\text{Hp})(\text{conversion factor})}{(\text{lift} + \text{pressure}) \text{ total head in feet}} = \text{cfs}$$

Conversion factor:

$$\text{Turbine \& Submersible Pumps, 80\% eff. } \frac{(550 \text{ ft lb/sec/Hp})(.80)}{(62.4 \text{ lb/cu ft})} = 7.04 \text{ ft}^4/\text{sec/Hp}$$

**Well A Pump**

$$Q_{\text{pump}} = \frac{(1.0)(7.04)}{(94)} = 0.075 \text{ cfs}$$

**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)
<b>Not measured – the well was not operating during site inspection</b>			

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
<b>2-inch</b>	<b>745 feet</b>	<b>PVC</b>	<b>Buried</b>
<b>3-inch</b>	<b>2355 feet</b>	<b>PVC</b>	<b>Buried</b>

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
<b>Various sizes within the distribution system</b>	<b>Various lengths</b>	<b>PVC</b>	<b>Both</b>

**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
<b>Rainbird UT15H</b>	<b>30</b>	<b>1.2</b>	<b>10 (est)</b>	<b>5</b>	<b>0.013 cfs (6 gpm)</b>

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)
<b>N/A – no drip emitters are used</b>					



**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 – no drip tape is used					

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
N/A – no pivots are used				

**E. Storage**

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

YES

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

If "YES" is it a:           Storage Tank  
                                          Bulge in System / Reservoir

YES  
NO

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Plastic	5,000	Above ground
Plastic	10,000	Above ground

**F. Gravity Flow Pipe**

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

NO

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

**G. Gravity Flow Canal or Ditch**

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

NO

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

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

--

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**SECTION 4  
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 B (JACK 62241, L-118360)**

**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
36S	2W	WM	28	NWNW	2		CM		
36S	2W	WM	28	NWNW	2		IR	0.86	--
36S	2W	WM	28	NWNW		51	CM		
36S	2W	WM	28	NWNW		51	IR	0.06	--
36S	2W	WM	28	SWNW	3		CM		
36S	2W	WM	28	SWNW		51	CM		
36S	2W	WM	28	SWNW		52	CM		
36S	2W	WM	28	NWSW	4		CM		
36S	2W	WM	28	NWSW		52	CM		
36S	2W	WM	29	SENE			CM		
<b>Total Acres Irrigated</b>								<b>0.92</b>	<b>0</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:

**Water level access requires removal of the well cap.**

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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
-----------------	--------------	-------------	----------------------------------	---------------------------------	------------------------------	-----------------

The well log is provided in Attachment 3

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.

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
Berkeley	B20P4MS10231	Unknown	Submersible	N/A	1.25-inch

3. Motor Information:

MANUFACTURER	HORSEPOWER
Pentek	1.0

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)
1.0	0 <sup>A</sup>	42 <sup>B</sup>	48 <sup>C</sup>	0.078

Notes

<sup>A</sup> Well open discharges to atmosphere (into the top of the 300,000 gallon storage tank)

<sup>B</sup> Pumping lift from pump test completed on July 2, 2015 by Quinn's Well Pump and Filtration Service

<sup>C</sup> Lift from the ground surface at the well to the top of the 300,000 gallons storage tank (ground surface at well = 1216 ft amsl, top of tank = 1256 ft amsl; 40 feet of lift) PLUS frictional loss in the mainline between the wellhead and the 300,000 gallon storage tank (8 ft of lift)

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**5. Provide pump calculations:**

$$Q_{\text{pump}} = \frac{(\text{Hp})(\text{conversion factor})}{(\text{lift} + \text{pressure}) \text{ total head in feet}} = \text{cfs}$$

Conversion factor:

$$\text{Turbine \& Submersible Pumps, 80\% eff. } \frac{(550 \text{ ft lb/sec/Hp})(.80)}{(62.4 \text{ lb/cu ft})} = 7.04 \text{ ft}^4/\text{sec/Hp}$$

**Well B Pump**

$$Q_{\text{pump}} = \frac{(1.0)(7.04)}{(90)} = 0.078 \text{ cfs}$$

**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 – the well was not operating during site inspection			

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
2-inch	260 feet	PVC	Buried

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
N/A – there are no laterals			

**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
N/A - No sprinklers are used					

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)
N/A – no drip emitters are used					

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**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 – no drip tape is used

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
--------------	-----------------------	---------------	--------------------------	--------------------------

N/A – no pivots are used

**E. Storage**

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

YES

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

If "YES" is it a:           Storage Tank  
                                          Bulge in System / Reservoir

YES  
NO

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Metal	300,000	Above ground

**F. Gravity Flow Pipe**

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

NO

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

**G. Gravity Flow Canal or Ditch**

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

NO

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

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

--

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**SECTION 4  
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 C (JACK 62245, L-118365)**

**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
36S	2W	WM	28	NWNW	2		CM		
36S	2W	WM	28	NWNW	2		IR	0.86	--
36S	2W	WM	28	NWNW		51	CM		
36S	2W	WM	28	NWNW		51	IR	0.06	--
36S	2W	WM	28	SWNW	3		CM		
36S	2W	WM	28	SWNW		51	CM		
36S	2W	WM	28	SWNW		52	CM		
36S	2W	WM	28	NWSW	4		CM		
36S	2W	WM	28	NWSW		52	CM		
36S	2W	WM	29	SENE			CM		
<b>Total Acres Irrigated</b>								<b>0.92</b>	<b>0</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:

**Water level access requires removal of the well cap.**

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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
The well log is provided in Attachment 3						

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.

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
Unknown	Unknown	Unknown	Submersible	N/A	Unknown

3. Motor Information:

MANUFACTURER	HORSEPOWER
Unknown	0.5

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)
0.5	0 <sup>A</sup>	35 <sup>B</sup>	40 <sup>C</sup>	0.049

Notes

<sup>A</sup> Well open discharges to atmosphere (into the top of the 300,000 gallon storage tank)

<sup>B</sup> Pumping lift from pump test completed on Well C on 8/5/2015 by Quinn's Well Pump and Filtration Service

<sup>C</sup> Lift from the ground surface at the well to the top of the 300,000 gallons storage tank (ground surface at well = 1219 ft amsl, top of tank = 1256 ft amsl; 37 feet of lift) PLUS frictional loss in the mainline between the wellhead and the 300,000 gallon storage tank (3 ft of lift)

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**5. Provide pump calculations:**

$$Q_{\text{pump}} = \frac{(\text{Hp})(\text{conversion factor})}{(\text{lift} + \text{pressure}) \text{ total head in feet}} = \text{cfs}$$

Conversion factor:

$$\text{Turbine \& Submersible Pumps, 80\% eff. } \frac{(550 \text{ ft lb/sec/Hp})(.80)}{(62.4 \text{ lb/cu ft})} = 7.04 \text{ ft}^4/\text{sec/Hp}$$

**Well C Pump**

$$Q_{\text{pump}} = \frac{(0.5)(7.04)}{(72)} = 0.049 \text{ cfs}$$

**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)
<b>Not measured – the well was not operating during site inspection</b>			

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
<b>2-inch</b>	<b>210 feet</b>	<b>PVC</b>	<b>Buried</b>

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
<b>N/A – there are no laterals</b>			

**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
<b>N/A - No sprinklers are used</b>					

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)
<b>N/A – no drip emitters are used</b>					

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**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 – no drip tape is used					

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
N/A – no pivots are used				

**E. Storage**

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

YES

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

If "YES" is it a:           Storage Tank  
                                      Bulge in System / Reservoir

YES  
NO

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Metal	300,000	Above ground

**F. Gravity Flow Pipe**

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

NO

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

**G. Gravity Flow Canal or Ditch**

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

NO

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

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

--

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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	4/13/2016		
BEGIN CONSTRUCTION (A)	4/13/2021	2016	Construction of the wells and water system completed
COMPLETE CONSTRUCTION (B)	Not specified	N/A	N/A
COMPLETE APPLICATION OF WATER (C)	4/13/2021	2017	Beneficial use of water for commercial and irrigation uses.

\* 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)?

**RECEIVED NO**

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

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### 3. Initial Water Level Measurements:

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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**  
*(See GWIS entry for each wells)*

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

### 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  
*(See GWIS entry for each wells)*

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

**5. Pump Test:**

a. Did the permit require the submittal of a pump test? YES

Ground water permits with priority dates on or after **December 20, 1988**, require the submittal of a pump test prior to issuance of a certificate. In some cases, the permit holder may qualify for a multiple well exemption or an unreasonable burden exemption.

For additional information regarding pump tests see:

<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

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

b. Has the pump test been previously submitted to the Department? YES

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

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

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

**\*\* 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? 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.**

**7. Recording and reporting conditions:**

a. Is the water user required to report the water use to the Department? NO

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

**8. Other conditions required by permit, permit amendment final order, or extension final order:**

a. Were there special well construction standards? NO

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

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

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d. Was a Well Identification Number (Well ID tag) assigned and attached to the well?

YES

POA NAME OR NUMBER	WELL ID #	DATE ATTACHED TO WELL
Well 2	L-122437	2016
Well A	L-117719	2015
Well B	L-118360	2015
Well C	L-118365	2015

e. Other conditions?

NO

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

## SECTION 6 ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Attachment 1	Maps
Attachment 2	Water Right Information
Attachment 3	State Water Well Reports

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## SECTION 7 CLAIM OF BENEFICIAL USE MAP

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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 points of appropriation, visible system components, and the place of use were visited during the site inspection. The location of the points of appropriation and the extent of the place of use were obtained from a field survey completed during the site inspection and an aerial photo dated October 10, 2020 (GoogleEarth). The map was created using Geographic Information System (GIS) software and spatial datasets obtained from Bureau of Land Management (BLM), Oregon Water Resources Department (OWRD), Oregon Department of Fish and Wildlife (ODFW), United States Geological Survey (USGS), and Jackson County. Additional data and information specific to the property appurtenant to the water right and the use water of under the water right described in this Claim of Beneficial Use report were obtained from the water user.**



## 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
- NA** Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- NA** 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
- NA** 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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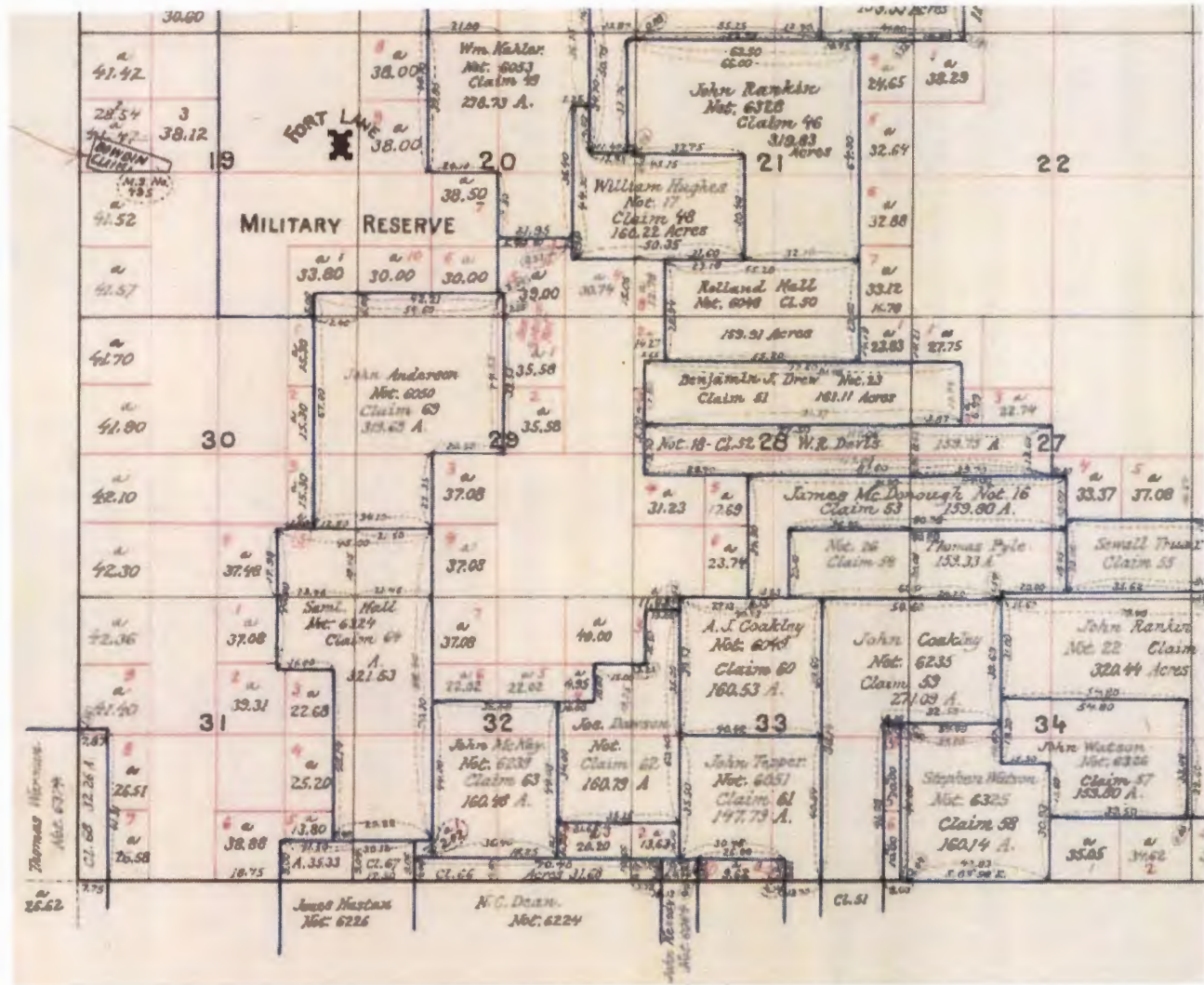
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**Attachment 1**  
**Maps**

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Claim of Beneficial Use  
Permit G-17564, Application G-17955

Stallion Land Company LLC

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**Attachment 2**  
**Water Right Information**

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STATE OF OREGON

COUNTY OF JACKSON

PERMIT TO APPROPRIATE THE PUBLIC WATERS

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THIS PERMIT IS HEREBY ISSUED TO

DEC 04 2023

OWRD

STALLION LAND COMPANY LLC  
PO BOX 3667  
CENTRAL POINT, OR 97502

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

APPLICATION FILE NUMBER: G-17955

SOURCE OF WATER: WELL 2 (JACK 7480), WELL A (JACK 62240/L117719), WELL B (JACK 62241/L118360) AND WELL C (JACK 62245/L118365) IN BEAR CREEK BASIN

PURPOSE OR USE: IRRIGATION ON 1.0 ACRE AND COMMERCIAL USE

MAXIMUM RATE/VOLUME: 0.06 CFS, FURTHER LIMITED TO 0.013 CFS FOR IRRIGATION ON 1.0 ACRE

PERIOD OF USE: IRRIGATION: MARCH 1 THROUGH OCTOBER 31  
COMMERCIAL USE: YEAR-ROUND

DATE OF PRIORITY: OCTOBER 31, 2014

WELL LOCATIONS:

WELL 2 (JACK 7480); SWNW, SECTION 28, T36S, R2W, W.M.; 2110 FEET SOUTH AND 315 FEET EAST FROM NW CORNER, SECTION 28

WELL A (JACK 62240/L117719): SWNW, SECTION 28, T36S, R2W, W.M.; 1475 FEET SOUTH AND 550 FEET EAST FROM NW CORNER, SECTION 28

WELL B (JACK 62241/L118360): NWNW, SECTION 28, T36S, R2W, W.M.; 1150 FEET SOUTH AND 200 FEET EAST FROM NW CORNER, SECTION 28

WELL C (JACK 62245/L118365): NWNW, SECTION 28, T36S, R2W, W.M.; 1270 FEET SOUTH AND 10 FEET EAST FROM NW CORNER, SECTION 28

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 2.5 acre-feet for each acre irrigated during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

<u>OO</u>			<u>COMMERCIAL USE</u>	<u>IRRIGATION</u>
NW ¼	NW ¼		X	0.16 ACRE
SW ¼	NW ¼		X	0.41 ACRE
NW ¼	SW ¼		X	0.02 ACRE

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SECTION 28

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SE ¼	NE ¼		X	0.41 ACRE
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SECTION 29

TOWNSHIP 36 SOUTH, RANGE 2 WEST, W.M.

Measurement devices, and recording/reporting of annual water use conditions:

- A. The Director may require the permittee to install a totalizing flow meter at each point of appropriation. If the Director notifies the permittee to install a measuring device, the permittee shall install such device within the period stated in the notice. Once installed, the permittee shall maintain the device in good working order, and shall allow the watermaster access to the device.
- B. The Director may require the permittee to keep and maintain a record of the volume of water diverted, and may require the permittee to report water-use on a periodic schedule as established by the Director. In addition, the Director may require the permittee to report general water-use information, the periods of water use and the place and nature of use of water under the permit.
- C. The Director may provide an opportunity for the permittee to submit alternative measuring and reporting procedures for review and approval.

Static Water Level Conditions

To monitor the effect of water use from the well(s) authorized under this permit, the Department requires the water user to obtain, from a qualified individual (see below), and report annual static water-level measurements. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.



Measurements must be made according to the following schedule:

**Before Use of Water Takes Place**

Initial and Annual Static Water Level Measurements

The Department requires the permittee to report an initial water-level measurement in the month specified above once well construction is complete, and annually thereafter until use of water begins; and

**After Use of Water has Begun**

Seven Consecutive Annual Static Water Level Measurements

Following the first year of water use, the user shall report seven consecutive annual static water-level measurements. The first of these seven annual measurements will establish the reference level against which future annual measurements will be compared. Based on an analysis of the data collected, the Director may require the user to obtain and report additional annual static water-level measurements beyond the seven year minimum reporting period. The additional measurements may be required in a different month. If the measurement requirement is stopped, the Director may restart it at any time.

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 and be submitted to the Department on forms provided by the Department. The Department requires the individual performing the measurement to:

- A. Identify each well with its associated measurement;
- B. Measure and report water levels to the nearest tenth of a foot as depth-to-water below ground surface;
- C. Specify the method used to obtain each well measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

The Department may require the discontinuance of groundwater use, 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 non-use or restricted use shall continue until the water level rises above the decline level which triggered the action or until 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 senior water rights. The water user shall in no instance 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.

Use of water under authority of this permit may be regulated if analysis of data available after the permit is issued discloses that the appropriation will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway in quantities necessary for recreation, fish and wildlife in effect as of the priority date of the right or as those quantities may be subsequently reduced.

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.

#### STANDARD CONDITIONS

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.



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The well(s) shall be constructed and maintained in accordance with the General Standards for the Construction and Maintenance of Water Supply Wells in Oregon. The works shall be equipped with a usable access port 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.

Construction of the well shall be made within five years of the date of permit issuance. The deadline to begin construction may not be extended. This permit is subject to cancellation proceedings if the begin construction deadline is missed.

Complete 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 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 13 2016*

*E. Timothy Wallin*

E. Timothy Wallin, Water Rights Program Manager  
for Thomas M. Byler, Director

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**Attachment 3**  
**State Water Well Reports**

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**Claim of Beneficial Use**  
**Permit G-17564, Application G-17955**

**Stallion Land Company LLC**

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JACK 7480 3/15/2W-28

STATE OF OREGON WATER WELL REPORT (as required by ORS 587.785)

JUN 10 1986

WATER RESOURCES DEPT

(1) OWNER:

Name DOUBLE DEE LUMBER Address POB 3517 City CENTRAL POINT State OR Zip 97502

(9) LOCATION OF WELL by legal description:

County JACKSON Township 36 N or S, Range 24 E or W, WM. Section 28 Tax Lot 2000 Lot Block Subdivision Street Address of Well (or nearest address) 7111 BLACKWELL RD., CENTRAL POINT, OR.

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Other

(10) STATIC WATER LEVEL:

19 ft. below land surface. Date 6-4-86 Artesian pressure lb. per square inch. Date

(4) PROPOSED USE:

Domestic Community Industrial Irrigation Thermal Injection Other

BORE HOLE CONSTRUCTION:

Depth of Completed Well 50 ft. Special Standards date of approval

Table with columns: HOLE Diameter, SEAL Material, Amount sacks or pounds. Row 1: 0 to 23, CEMENT, 0 to 23, 6 SACK

How was seal placed? Method A B C D E Other

Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 6, 1, 39, 250, Steel, Plastic, Welded, Threaded

Final location of shoe(s) 39

PERFORATIONS/SCREENS:

Table with columns: From, To, Slot size, Number, Diameter, Tube/pipe size, Casing, Liner. Includes checkboxes for Perforation and Screens.

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

Table with columns: Yield gal/min, Pumping level, Drill stem at, Time 1/4 hr, 1 hr. Includes checkboxes for Pump, Baller, Air, Flowing Artesian.

Temperature of water Depth Artesian Flow Found Was a water analysis done? Did any strata contain water not suitable for intended use? Depth of strata

(11) WELL LOG:

Table with columns: Material, From, To, WB?, SWL. Rows: SOIL, BROWN (0-2), CLAY, BROWN (2-17), CONGLOMERATE, BROWN (17-24), GRAVEL, SMALL (24-62), 30, 19'

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Date started 5-4-86 Completed 6-4-86

(unbonded) Water Well Constructor Certification:

I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed Joaquin Medina Date 6-4-86

(bonded) Water Well Constructor Certification:

I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed Ronald J. Matkins Date 6-4-86

Company MARTINSON WELL DRILLING, C5NG No.



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

JACK 62240  
7/8/2015

WELL I.D. LABEL # L 117719  
START CARD # 1026394  
ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. \_\_\_\_\_  
First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Company STALLION LAND COMPANY LLC  
Address PQ BOX 3667  
City CENTRAL POINT State OR Zip 97502

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

(2a) PRE-ALTERATION  
Dia + From To Gauge Std 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 80.00 ft.

BORE HOLE			SEAL			Amt	Sacks/lbs
Dia	From	To	Material	From	To		
10	0	18	Bentonite Chips	0	18	30	S
6	18	80				Calculated	8
						Calculated	

How was seal placed: Method  A  B  C  D  E  
 Other DRY POURED

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 Std Plstc Wld Thrd  

<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	<input checked="" type="checkbox"/>	2	58	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Shoe  Inside  Outside  Other Location of shoe(s) 58  
Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS  
Perforations Method \_\_\_\_\_  
Screens Type \_\_\_\_\_ Material \_\_\_\_\_

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

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailor  Air  Flowing Artesian  
 Yield gal/min 22 Drawdown 28.8 Drill stem/Pump depth 80 Duration (hr) 4  
 Temperatures 55 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount 312 ppm  
 From \_\_\_\_\_ To \_\_\_\_\_ Description \_\_\_\_\_ Amount \_\_\_\_\_ Units \_\_\_\_\_

(9) LOCATION OF WELL (legal description)  
 County JACKSON Twp 36.00 S N/S Range 2.00 W E/W WM  
 Sec 28 1/4 of the \_\_\_\_\_ 1/4 Tax Lot 2100  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or 42.41438000 DMS or DD  
 Long \_\_\_\_\_ " or -122.95203000 DMS or DD  
 Street address of well  Nearest address  
0 BLACKWELL RD. CENTRAL POINT, OR 97502

(10) STATIC WATER LEVEL  
 Date SWL(psi) + SWL(ft)  
 Existing Well / Pre-Alteration \_\_\_\_\_  
 Completed Well 5/13/2015 \_\_\_\_\_ 25  
 Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 60.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
5/13/2015	60	80	21		25

(11) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To
TIGHT BROWN CLAY SMALL GRAVEL	0	22
SMALL GRAVEL BROWN CLAY COURSE SAND	22	54
TAN CLAY SMALL GRVL FINE TO COURSE SAND	54	80

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Date Started 6/3/2015 Completed 6/3/2015  
 (unbonded) Water Well Contractor 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 1945 Date 7/8/2015  
 Signed JUSTIN SPLIETHOF (E-filed)  
 (bonded) Water Well Contractor 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 1835 Date 7/8/2015  
 Signed KEVIN D GILL (E-filed)  
 Contact Info (optional) \_\_\_\_\_



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

JACK 62241

WELL I.D. LABEL# L

118360

START CARD #

1026669

ORIGINAL LOG #

Page 1 of 1

7/8/2015

(1) LAND OWNER

Owner Well I.D.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Company STALLION LAND COMPANY LLC

Address PO BOX 3667

City CENTRAL POINT State OR Zip 97502

(2) TYPE OF WORK

New Well  Deepening  Conversion

Alteration (complete 2a & 10)  Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd

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 68.00 ft.

BORE HOLE

Dia	From	To	Material	From	To	Amt	sacks/lbs
10	0	20	Bentonite Chips	0	20	14	S
6	20	68				Calculated	9
						Calculated	

How was seal placed: Method  A  B  C  D  E

Other DRY POURED

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
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	<input checked="" type="checkbox"/>	2	58	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe  Inside  Outside  Other Location of shoe(s) 58

Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS

Perforations Method \_\_\_\_\_

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

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

Pump  Bailor  Air  Flowing Artesian

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

15		68	1
----	--	----	---

Temperature 54 °F Lab analysis  Yes By \_\_\_\_\_

Water quality concerns?  Yes (describe below) TDS amount 580 ppm

From \_\_\_\_\_ To \_\_\_\_\_ Description \_\_\_\_\_ Amount \_\_\_\_\_ Units \_\_\_\_\_

--	--	--	--

(9) LOCATION OF WELL (legal description)

County JACKSON Twp 36.00 S N/S Range 2.00 W E/W WM

Sec 28 NW 1/4 of the NW 1/4 Tax Lot 2100

Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ or 42.41535000 DMS or DD

Long \_\_\_\_\_ or -122.95333000 DMS or DD

Street address of well  Nearest address

0 BLACKWELL RD. CENTRAL POINT, OR 97502

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration Completed Well	Date	SWL (psi)	+ SWL (ft)
	<u>6/5/2015</u>		<u>25</u>

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 46.00

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
<u>6/5/2015</u>	<u>46</u>	<u>60</u>	<u>15</u>		<u>25</u>

(11) WELL LOG

Ground Elevation \_\_\_\_\_

Material	From	To
SANDY CLAY GRAVEL	0	3
GRAVEL CLAY COURSE SAND	3	46
GRAVEL COURSE SAND	46	68

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Date Started 6/5/2015 Completed 6/5/2015

(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 1686 Date 6/24/2015

Signed TADD K MOORE (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 1835 Date 7/8/2015

Signed KEVIN D GILL (E-filed)

Contact Info (optional) CLOUSER DRILLING INC

ORIGINAL - WATER RESOURCES DEPARTMENT

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

617955



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

JACK 62245  
 7/14/2015

WELL I.D. LABEL # 118365  
 START CARD # 1026929  
 ORIGINAL LOG #

(1) LAND OWNER  
 Owner Well I.D. \_\_\_\_\_  
 First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Company STALLION LAND COMPANY LLC  
 Address PO BOX 3667  
 City CENTRAL POINT State OR Zip 97502

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

(2a) PRE-ALTERATION  
 Casing: Dia + From To Gauge Stl Plstc Wld Thrd  
 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 80.00 ft.

BORE HOLE:		SEAL		sacks/lbs	
Dia	From To	Material	From To	Amt	Calculated
10	0 18	Bentonite Chips	0 18	10	S
6	18 80			8	
				Calculated	

How was seal placed: Method  A  B  C  D  E  
 Other DRY POURED  
 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  
 Shoe  Inside  Outside  Other Location of shoe(s) 58  
 Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS  
 Perforations Method AIR/HOLTE  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/Screen	Casing/Liner Dia	From	To	Scr/slot width	Slot length	# of slots	Telr/pipe size
	6	48	58	.188	1	240	

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailor  Air  Flowing Artesian  
 Yield gal/min \_\_\_\_\_ Drawdown \_\_\_\_\_ Drill stem/Pump depth \_\_\_\_\_ Duration (hr) \_\_\_\_\_  
 Temperature 57 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount 480 ppm  
 From \_\_\_\_\_ To \_\_\_\_\_ Description \_\_\_\_\_ Amount \_\_\_\_\_ Units \_\_\_\_\_

(9) LOCATION OF WELL (legal description)  
 County JACKSON Twp 36.00 S N/S Range 2.00 W E/W WM  
 Sec 28 NE 1/4 of the NW 1/4 Tax Lot 2100  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address  
 0 BLACKWELL RD CENTRAL POINT, OR 97502

(10) STATIC WATER LEVEL  
 Date SWL (psi) + SWL (ft)  
 Existing Well / Pre-Alteration \_\_\_\_\_  
 Completed Well 6/24/2015 \_\_\_\_\_ 22  
 Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 48.00

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
6/24/2015	48	58	8		22

(11) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To
DARK BROWN CLAY & COBBLES	0	3
BROWN CLAY COURSE SAND	3	13
BROWN CLAY WITH MED & LG GRAVEL	13	22
DK BRWN CLAY W/MIXED GRAVI. & CB	22	55
TAN CLAY & MIXED GRAVEL	55	59
ORANGE/TANNISH CLAY	59	72
GREY CLAYSTONE MED J	72	77
BROWN CLAYSTONE SOI	77	79
GREY CLAYSTONE MED HARD	79	80

Date Started 6/24/2015 Completed 6/24/2015  
 (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 \_\_\_\_\_ Date \_\_\_\_\_  
 Signed \_\_\_\_\_

(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 1835 Date 7/14/2015  
 Signed KEVIN D GILL (E-filed)  
 Contact Info (optional) CLOUSER DRILLING INC



November 30, 2023

Mr. Gerry Clark  
Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem, Oregon 97301-1271

**Subject:** Claim of Beneficial Use for Permit G-17564

Mr. Clark:

On behalf of the permit holder, please find enclosed Claim of Beneficial Use (COBU) report for Permit G-17564 (Application G-17995) accompanied by a check in the amount of \$230 for payment of the COBU submittal fee. Please do not hesitate to contact me at 503-967-7050 x204 with questions about the enclosed COBU.

Respectfully submitted,

Theodore Ressler, RG, CWRE  
Summit Water Resources, LLC

**Enclosures:**

Claim of Beneficial Use for Permit G-17564  
Check #79933 in the amount of \$230

Cc: Nick Card – Stallion Land Company, LLC

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