

CLAIM OF BENEFICIAL USE for Groundwater Permits claiming more than 0.1 cfs



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

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

SECTION 1 GENERAL INFORMATION

1. File Information:

APPLICATION # G-12589	PERMIT # (IF APPLICABLE) G-18363	PERMIT AMENDMENT # (IF APPLICABLE) T-13051
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2a. Property Owner (current owner information): TL 3S 3E Section 1 Lot 600

APPLICANT/BUSINESS NAME Eagle Creek Limited Partnership, Lessee; USA Bureau of Land Management, Lessor		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS For BLM: 1717 Fabry Rd SE			
CITY For BLM: Salem	STATE OR	ZIP 97306	E-MAIL

**2b. Property Owner (current owner information):
TL 3S 3E Section 1 Lot 100, 300, 400, 700
TL 3S 4E Section 7 Lot 100, 203**

APPLICANT/BUSINESS NAME Eagle Creek Limited Partnership		PHONE NO. (503) 927-6470	ADDITIONAL CONTACT NO.
ADDRESS 25805 SE Dowty St.			
CITY Eagle Creek	STATE OR	ZIP 97022	E-MAIL bastasch@gmail.com

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

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

PERMIT HOLDER OF RECORD Eagle Creek Golf Course Inc.		
ADDRESS 25805 SE Dowty St.		
CITY Eagle Creek	STATE OR	ZIP 97022

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

July 11, 2023 September 6, 2023 December 12, 2023
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5. Person(s) interviewed and description of their association with the project:

NAME	DATE	ASSOCIATION WITH THE PROJECT
Jim Bastasch	July 11, 2023 September 6, 2023	Owner / Operator

6. County

Clackamas

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

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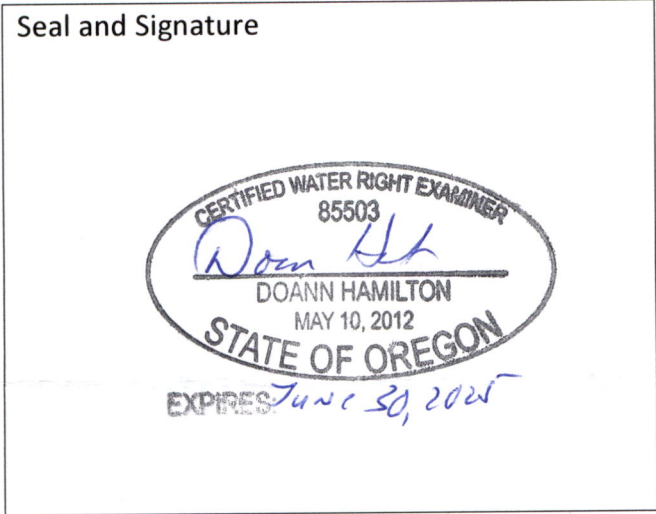
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**SECTION 2
SIGNATURES**

CWRE Statement, Seal and Signature

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



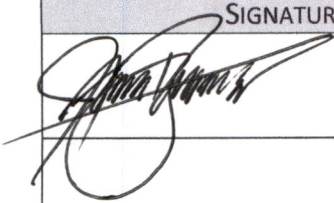
CWRE NAME Doann Hamilton		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946
ADDRESS 18487 S. Valley Vista Road			
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.com

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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
	James Borstasch	President	12/20/2023

**SECTION 3
CLAIM DESCRIPTION**

1. Point of appropriation name or number:

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Cart Arm Well – Well 1	CLAC 78003	L-146324
Center Well – Well 2	CLAC 50087, 78002	L-146325
Barn Well – Well 4	CLAC 61102	L-69067

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
Cart Arm Well – Well 1	Eagle Creek Basin	Clackamas River
Center Well – Well 2	Eagle Creek Basin	Clackamas River
Barn Well – Well 4	Eagle Creek Basin	Clackamas River

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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)
Cart Arm Well – Well 1	Primary Irrigation (see comment in item 5 below)	Grass and greens for golf course	March 1 through October 31	0.05 cfs
Center Well – Well 2				0.04 cfs
Barn Well – Well 4				0.18 cfs
Center Well – Well 2	Maintenance of ponds for recreation purposes	NA	Not specified in original permit	0.04 cfs
Barn Well – Well 4				0.18 cfs
Total Quantity of Water Used				0.27 cfs

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

Water is pumped from Cart Arm Well - Well 1 (CLAC 78003) using a 2 Hp submersible pump to convey water through approximately 10 feet of a 2-inch PVC pipe on which a meter is attached before heading underground to the north. The below ground 2-inch PVC mainline extends west approximately 10 feet, then tees into the 2-inch buried mainline from Wells 2 and 4 and heads north approximately 100 feet to the pond by the shed as a bulge in the system and to maintain the pond.

Water is pumped from Center Well - Well 2 (CLAC 50087, 78002) using a 1.5 Hp submersible pump to convey water through approximately 10 feet of a 2-inch PVC pipe reducing down to 1-inch pipe on which the meter is attached, then increasing back to a 2-inch pipe before heading underground. The below ground 2-inch PVC mainline extends west approximately 50 feet, then tees into the 2-inch buried mainline from Well 4 and heads north approximately 900 feet to the pond by the shed as a bulge in the system and to maintain the pond.

Water is pumped from Barn Well - Well 4 (CLAC 61102) using a 7.5 Hp submersible pump to convey water through a meter connected to approximately 5 feet of 2-inch above ground PVC pipe before heading underground. The below ground 2-inch PVC mainline extends west approximately 300 feet before heading north approximately 1,000 feet and connecting with 2-inch mainline from Well 2 discharging to the pond by the shed as a bulge in the system and to maintain the pond.

Water in the pond is pumped up 17 feet by two turbine pumps (Pond Pump 1, 100 Hp and Pond Pump 2, 25 Hp) within the pump shed at the northeast corner of the pond. The water pumped from the two turbine pumps conveys the water into approximately 5 feet of 8-inch steel pipe that discharges the water into an 800 gallon steel tank. The water continues from the 800 gallon tank through approximately 3 feet of the 8-inch steel pipe with 2-inch galvanized line attached to a 119 gallon steel pressure tank just before the check valve. The 8-inch steel pipe continues outside the pump house approximately 10 feet before going underground to the east. Approximately 15 feet further east underground, the 8-inch steel pipe connects to the 6-inch PVC mainline heading north and south.

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The 6-inch buried PVC mainline extends along the edges of each fairway reducing down to 4-inch buried PVC the farther west the line extends. From this 6-inch buried PVC mainline, 2-inch buried PVC submains extend perpendicular approximately 50 feet from the 6-inch mainline into each green, tee and fairway approximately every 120 feet. From the 2 inch submains, 1-inch buried PVC laterals supply the different irrigation sprinkler systems. Around each green there is a 1-inch PVC lateral that extends around each green where the sprinklers can be attached along with quick connect system where a ¾-inch garden hose can be attached to supply additional water by hand.

Irrigation can run a combination of 8 of the sprinklers at one time. The large turbine Pond Pump 2 can be turned on separately to irrigate the greens with the quick connects to allow use of water at a reduced pressure on the greens.

Recreational use is supplied to the additional ponds north and south of the Pump House Pond. The ponds to the north receive overflow water from the Pump House 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. **Note:** There is a scrivener's error in the original issued Permit G-11627 regarding the use being for Supplemental Irrigation. (The primary surface water right, Application S-71714, was withdrawn August 14, 1992.) There is no other overlying primary water right associated with this place of use therefore the permit should have been issued for a Primary Irrigation use. This claim of beneficial use will describe the place of use as primary. See Attached OWRD emails discussing this issue.
2. The authorized Well 3 has not been constructed and is, therefore, not included in this Claim of Beneficial Use.
3. Commercial use under this permit is not being used and therefore not included in this Claim of Beneficial Use.
4. Authorized Well 1 – Cart Arm Well (CLAC 20012) was approved under permit amendment T-13051. While proving up this claim, the driller came out to clean out the well (alteration documented as CLAC 78003 / L-146324) the driller noted the total depth to be 297 feet. This is deeper than the identified well log for this well (CLAC 20012) of 60 feet; therefore, CLAC 20012 is assumed to be the wrong well log. For this Claim of Beneficial Use only well log CLAC 78003 will be referenced.
5. The place of use was reduced and revised to include reference to the DLC and/or Government Lot and show the place of use based on field verification:

Original authorized place of use:

2S	3E	36	SW SE	IR	5.0
2S	3E	36	SE SE	IR	10.4
2S	4E	31	SW SW	IR	2.5
3S	3E	1	NE NE	IR	17.5
3S	3E	1	NW NE	IR	4.3
3S	3E	1	SW NE	IR	10.8
3S	3E	1	SE NE	IR, Rec	26.9
3S	3E	1	SE NW	IR	0.4
3S	3E	1	NE SE	IR, CM & Rec	16.0
3S	3E	1	NW SE	IR	4.5
3S	3E	1	SE SE	IR	6.9
3S	3E	12	NE NE	IR	0.9
3S	4E	6	NW NW	IR	6.3
3S	4E	6	SW NW	IR, Rec	3.2
3S	4E	6	NE SW	IR	5.7
3S	4E	6	NW SW	IR, Rec	4.3
3S	4E	6	SW SW	IR	36.0
3S	4E	6	SE SW	IR	37.1
3S	4E	6	NWSE	IR	6.2

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3S	4E	6	SW SE	IR	17.0
3S	4E	7	NE NW	IR	1.9
3S	4E	7	NW NW	IR	<u>10.2</u>
Total:					234.0

Revised place of use:

3S	3E	1	NE NE	DLC 42	IR	2.6
3S	3E	1	NE NE	DLC 41	IR	9.3
3S	3E	1	NWNE	DLC 42	IR	0.2
3S	3E	1	SW NE	Lot 3	IR	3.0
3S	3E	1	SE NE	DLC 41	IR, Rec	23.6
3S	3E	1	NE SE	DLC 41	IR, Rec	12.7
3S	3E	1	NE SE	Lot 12	IR	1.6
3S	3E	1	NW SE	NA	IR	7.6
3S	3E	1	SE SE	DLC 40	IR	4.0
3S	3E	1	SE SE	DLC 41	IR	3.6
3S	3E	1	SE SE	Lot 13	IR	1.1
3S	3E	12	NE NE	DLC 40	IR	4.5
3S	4E	6	SW NW	DLC 45	IR, Rec	2.2
3S	4E	6	NW SW	DLC 45	IR, Rec	<u>2.3</u>
Total:						78.3

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
Cart Arm Well – Well 1	2.93 cfs	0.05 cfs	Not measured	Primary Irrigation (see comment in item 5 above)	234.0	78.3
Center Well – Well 2		0.04 cfs	Not measured			
Barn Well – Well 4		0.18 cfs	0.21 cfs			
Cart Arm Well – Well 1	0.01 cfs	0.05 cfs	Not measured	Maintenance of ponds for recreation purposes	NA	NA
Center Well – Well 2		0.04 cfs	Not measured			
Barn Well – Well 4		0.18 cfs	Not measured			

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SECTION 4a of 4c
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):

Cart Arm Well – Well 1

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
3S	3E	WM	1	NE NE	NA	42	IR	2.6	NA
3S	3E	WM	1	NE NE	NA	41	IR	9.3	NA
3S	3E	WM	1	NWNE	NA	42	IR	0.2	NA
3S	3E	WM	1	SW NE	Lot 3	NA	IR	3.0	NA
3S	3E	WM	1	SE NE	NA	41	IR, Rec	23.6	NA
3S	3E	WM	1	NE SE	NA	41	IR, Rec	12.7	NA
3S	3E	WM	1	NE SE	Lot 12	NA	IR	1.6	NA
3S	3E	WM	1	NW SE	NA	NA	IR	7.6	NA
3S	3E	WM	1	SE SE	NA	40	IR	4.0	NA
3S	3E	WM	1	SE SE	NA	41	IR	3.6	NA
3S	3E	WM	1	SE SE	Lot 13	NA	IR	1.1	NA
3S	3E	WM	12	NE NE	NA	40	IR	4.5	NA
3S	4E	WM	6	SW NW	NA	45	IR, Rec	2.2	NA
3S	4E	WM	6	NW SW	NA	45	IR, Rec	2.3	NA
Total Acres Irrigated								78.3	

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:

Top of casing beneath pitless adaptor 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
See Well Log CLAC 78003						
6 inch	Unknown	297 feet	Unknown	May 26, 2023	Unknown	Unknown

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 CLAC 78003

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
Cart Arm Well – Well 1	Grundfos	16S 20-18	Unknown	Submersible	4 inch	1.25 inch
Pond Pump 1	Unknown	Unknown	Unknown	Turbine	8 inch	8 inch
Pond Pump 2	Flowtronex PSI pumping system	10L22-7	5193-1	Turbine	6 inch	6 inch

3. Motor Information:

SOURCE	MANUFACTURER	HORSEPOWER
Cart Arm Well – Well 1	Grundfos	2 Hp
Pond Pump 1	General Electric	100 Hp
Pond Pump 2	General Electric	25 Hp

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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)
Cart Arm Well – Well 1	2 Hp	40 to 60 psi	186.4 feet (Estimated based on pumping test for Well 4)	0 feet	0.05 to 0.04 cfs
Pond Pump 1	100 Hp	90 psi	17 feet	0 feet	2.87 cfs
Pond Pump 1	100 Hp	120 psi	17 feet	0 feet	2.19 cfs
Pond Pump 2	25 Hp	70 psi	17 feet	0 feet	0.90 psi
Pond Pump 2	25 Hp	90 psi	17 feet	0 feet	0.72 psi

5. Provide pump calculations:

Cart Arm Well – Well 1 at 40 psi	$Q \text{ Pump} = \frac{(2 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(186.4 \text{ ft lift} + 101.6 \text{ ft pressure head})} = 0.05 \text{ cfs}$
Cart Arm Well – Well 1 at 60 psi	$Q \text{ Pump} = \frac{(2 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(186.4 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 0.04 \text{ cfs}$
Pond Pump 1 – 90 psi	$Q \text{ Pump} = \frac{(100 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 228.6 \text{ ft pressure head})} = 2.87 \text{ cfs}$
Pond Pump 1 – 120 psi	$Q \text{ Pump} = \frac{(100 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 304.8 \text{ ft pressure head})} = 2.19 \text{ cfs}$
Pond Pump 2 – 70 psi	$Q \text{ Pump} = \frac{(25 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 177.8 \text{ ft pressure head})} = 0.90 \text{ cfs}$
Pond Pump 2 – 90 psi	$Q \text{ Pump} = \frac{(25 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 228.6 \text{ ft pressure head})} = 0.72 \text{ cfs}$

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 running during site visit			

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

7. Is the distribution system piped?

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

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8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch – to 2 inch mainline to pond	~ 10 feet	PVC	Above ground
2 inch – to 2 inch mainline to pond	~110 feet	PVC	Buried
Rest of main lines common with Wells 2 and 4			
8 inch	~18 feet	Steel	Above ground
8 inch	~15 feet	Steel	Buried
6 inch mainline	~11,500 feet	PVC	Buried
4 inch mainline	~3,500 feet	PVC	Buried
2 inch submain	~5,500 feet	PVC	Buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
1 inch	~8,000 feet	PVC	Buried

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
Toro 690	80	61.2 gpm	132	~8	0.29 to 1.09 cfs
Toro 730 - green	80	29.5 gpm	79		
Toro 760 blue	80	16.4 gpm	117		
Quick connect hand held hose ¾ inch	40 psi	~ 9 gpm	28	1	0.02 cfs

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

11. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
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					

13. Pivot Information:

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

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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 YES
 Bulge in System / Reservoir YES

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

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Steel holding tank	800 gallons	Above ground
Steel pressure tank	119 gallons	Above ground

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Pond – by the pump shed	3 feet	Covers 0.5 acres is 20 to 25 feet deep – approximately 10 AF

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:

Water is pumped into the pond as a bulge in the system.

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SECTION 4b of 4c
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):

Center Well – Well 2

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
3S	3E	WM	1	NE NE	NA	42	IR	2.6	NA
3S	3E	WM	1	NE NE	NA	41	IR	9.3	NA
3S	3E	WM	1	NWNE	NA	42	IR	0.2	NA
3S	3E	WM	1	SW NE	Lot 3	NA	IR	3.0	NA
3S	3E	WM	1	SE NE	NA	41	IR, Rec	23.6	NA
3S	3E	WM	1	NE SE	NA	41	IR, Rec	12.7	NA
3S	3E	WM	1	NE SE	Lot 12	NA	IR	1.6	NA
3S	3E	WM	1	NW SE	NA	NA	IR	7.6	NA
3S	3E	WM	1	SE SE	NA	40	IR	4.0	NA
3S	3E	WM	1	SE SE	NA	41	IR	3.6	NA
3S	3E	WM	1	SE SE	Lot 13	NA	IR	1.1	NA
3S	3E	WM	12	NE NE	NA	40	IR	4.5	NA
3S	4E	WM	6	SW NW	NA	45	IR, Rec	2.2	NA
3S	4E	WM	6	NW SW	NA	45	IR, Rec	2.3	NA
Total Acres Irrigated								78.3	

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:

Top of casing beneath pitless adaptor 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
See Well Log CLAC 50087, 78002						

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 CLAC 50087, 78002

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
Center Well – Well 2	Grundfos	16S 15-14	Unknown	Submersible	2 inch	2 inch
Pond Pump 1	Unknown	Unknown	Unknown	Turbine	8 inch	8 inch
Pond Pump 2	Flowtronex PSI pumping system	10L22-7	5193-1	Turbine	6 inch	6 inch

3. Motor Information:

SOURCE	MANUFACTURER	HORSEPOWER
Center Well – Well 2	Franklin Electric	1.5 Hp
Pond Pump 1	General Electric	100 Hp
Pond Pump 2	General Electric	25 Hp

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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)
Center Well – Well 2	1.5 Hp	40 to 60 psi	186.4 feet (Estimated based on pumping test for Well 4)	0 feet	0.03 to 0.04 cfs
Pond Pump 1	100 Hp	90 psi	17 feet	0 feet	2.87 cfs
Pond Pump 1	100 Hp	120 psi	17 feet	0 feet	2.19 cfs
Pond Pump 2	25 Hp	70 psi	17 feet	0 feet	0.90 psi
Pond Pump 2	25 Hp	90 psi	17 feet	0 feet	0.72 psi

5. Provide pump calculations:

Center Well – Well 2	$Q \text{ Pump} = \frac{(1.5 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(186.4 \text{ ft lift} + 101.6 \text{ ft pressure head})} = 0.04 \text{ cfs}$
Center Well – Well 2	$Q \text{ Pump} = \frac{(1.5 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(186.4 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 0.03 \text{ cfs}$
Pond Pump 1 – 90 psi	$Q \text{ Pump} = \frac{(100 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 228.6 \text{ ft pressure head})} = 2.87 \text{ cfs}$
Pond Pump 1 – 120 psi	$Q \text{ Pump} = \frac{(100 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 304.8 \text{ ft pressure head})} = 2.19 \text{ cfs}$
Pond Pump 2 – 70 psi	$Q \text{ Pump} = \frac{(25 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 177.8 \text{ ft pressure head})} = 0.90 \text{ cfs}$
Pond Pump 2 – 90 psi	$Q \text{ Pump} = \frac{(25 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 228.6 \text{ ft pressure head})} = 0.72 \text{ cfs}$

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 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.

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8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch – to 2 inch mainline to pond	~ 10 feet	PVC	Above ground
2 inch – to 2 inch mainline to pond	~950 feet	PVC	Buried
Rest of main and submain see Well 1			

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
See Well 1			

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
See Well 1					

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					

13. Pivot Information:

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

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

YES

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

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2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Steel holding tank	800 gallons	Above ground
Steel pressure tank	119 gallons	Above ground

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Pond – by the pump shed	3 feet	Covers 0.5 acres is 20 to 25 feet deep – approximately 10 AF

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:

Water is pumped into the pond as a bulge in the system.

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SECTION 4c of 4c
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):

Barn Well – 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
3S	3E	WM	1	NE NE	NA	42	IR	2.6	NA
3S	3E	WM	1	NE NE	NA	41	IR	9.3	NA
3S	3E	WM	1	NWNE	NA	42	IR	0.2	NA
3S	3E	WM	1	SW NE	Lot 3	NA	IR	3.0	NA
3S	3E	WM	1	SE NE	NA	41	IR, Rec	23.6	NA
3S	3E	WM	1	NE SE	NA	41	IR, Rec	12.7	NA
3S	3E	WM	1	NE SE	Lot 12	NA	IR	1.6	NA
3S	3E	WM	1	NW SE	NA	NA	IR	7.6	NA
3S	3E	WM	1	SE SE	NA	40	IR	4.0	NA
3S	3E	WM	1	SE SE	NA	41	IR	3.6	NA
3S	3E	WM	1	SE SE	Lot 13	NA	IR	1.1	NA
3S	3E	WM	12	NE NE	NA	40	IR	4.5	NA
3S	4E	WM	6	SW NW	NA	45	IR, Rec	2.2	NA
3S	4E	WM	6	NW SW	NA	45	IR, Rec	2.3	NA
Total Acres Irrigated								78.3	

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:

The well has a ½-inch vent port which is installed in the well seal on the south side of the well.

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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
See Well Log CLAC 61102						

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 CLAC 61102

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
Barn Well – Well 4	Grundfoss	60S75-13	Unknown	Submersible	2 inch	2 inch
Pond Pump 1	Unknown	Unknown	Unknown	Turbine	8 inch	8 inch
Pond Pump 2	Flowtronex PSI pumping system	10L22-7	5193-1	Turbine	6 inch	6 inch

3. Motor Information:

SOURCE	MANUFACTURER	HORSEPOWER
Barn Well – Well 4	Franklin Electric	7.5 Hp
Pond Pump 1	General Electric	100 Hp
Pond Pump 2	General Electric	25 Hp

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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)
Barn Well – Well 4	7.5 Hp	40 to 60 psi	186.4 feet (from permit condition pump test)	0 feet	0.16 to 0.18 cfs
Pond Pump 1	100 Hp	90 psi	17 feet	0 feet	2.87 cfs
Pond Pump 1	100 Hp	120 psi	17 feet	0 feet	2.19 cfs
Pond Pump 2	25 Hp	70 psi	17 feet	0 feet	0.90 psi
Pond Pump 2	25 Hp	90 psi	17 feet	0 feet	0.72 psi

5. Provide pump calculations:

Barn Well – Well 4	$Q \text{ Pump} = \frac{(7.5 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(186.4 \text{ ft lift} + 101.6 \text{ ft pressure head})} = 0.18 \text{ cfs}$
Barn Well – Well 4	$Q \text{ Pump} = \frac{(7.5 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(186.4 \text{ ft lift} + 101.6 \text{ ft pressure head})} = 0.16 \text{ cfs}$
Pond Pump 1 – 90 psi	$Q \text{ Pump} = \frac{(100 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 228.6 \text{ ft pressure head})} = 2.87 \text{ cfs}$
Pond Pump 1 – 120 psi	$Q \text{ Pump} = \frac{(100 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 304.8 \text{ ft pressure head})} = 2.19 \text{ cfs}$
Pond Pump 2 – 70 psi	$Q \text{ Pump} = \frac{(25 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 177.8 \text{ ft pressure head})} = 0.90 \text{ cfs}$
Pond Pump 2 – 90 psi	$Q \text{ Pump} = \frac{(25 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(17 \text{ ft lift} + 228.6 \text{ ft pressure head})} = 0.72 \text{ cfs}$

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)
3,252,000.00 gallons	3,252,200.00 gallons	2.1 minutes (September 6, 2023)	0.21 cfs

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

7. Is the distribution system piped?

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

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8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch	~5 feet	PVC	Above ground
2 inch – mainline connecting with Well 2	~1,300 feet	PVC	Buried
Rest of main and submain see Well 1			

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
See Well 1			

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
See Well 1					

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					

13. Pivot Information:

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

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

YES

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

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2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Steel holding tank	800 gallons	Above ground
Steel pressure tank	119 gallons	Above ground

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Pond – by the pump shed	3 feet	Covers 0.5 acres is 20 to 25 feet deep – approximately 10 AF

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:

Water is pumped into the pond as a bulge in the system.

**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-11627 issued: November 22, 1993		
BEGIN CONSTRUCTION	Permit G-11627	August 10, 1994	According to Form A “Notice of

(A)	November 22, 1994		Beginning of Construction" filled out by Frank Bastasch and submitted to the State of Oregon Office of the Water Resources Director, the first well was drilled by Rich Waller of Always Drilling Estacada, OR. Also note that Cart Arm Well 1 (CLAC 20012) was drilled July 21, 1994 by Rich Waller.
COMPLETE CONSTRUCTION (B)	Permit G-11627 October 1, 1995 Extended to: October 1, 1996 Extended to: October 1, 1997 Extended to: October 1, 2007 Extended to: October 1, 2023	2018	Meters were installed
COMPLETE APPLICATION OF WATER (C)	Permit G-11627 October 1, 1996 Extended to: October 1, 1997 Extended to: October 1, 2007 Extended to: October 1, 2023	March 26, 2020	Permit amendment T-13051 final order issued approving the well locations. All the permit conditions were met and water was put to full use.

* MUST BE WITHIN PERIOD BETWEEN PERMIT, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

2. Is there an extension final order(s)? YES

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

a. Did the Extension Final Order require the submittal of Progress Reports? YES and NO

Extension Final order issued March 26, 1996 – NO

Extension Final order issued March 13, 1997 – NO

Extension Final order issued January 27, 2000 - YES

Extension Final order issued October 26, 2018 - YES

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

b. Were the Progress Reports submitted? YES

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Extension Final order issued January 27, 2000 – Progress report due October 1, 2003

Submitted – September 26, 2003

Extension Final order issued October 26, 2018 – Progress report due October 1, 2023

Submitted – September 29, 2023

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

3. Initial Water Level Measurements:

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

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

4. Annual Static Water Level Measurements:

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

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

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? **Unknown**

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

For Cart Arm Well – Well 1 (CLAC 78003) and Center Well 2 (CLAC 50087, 78002): A multi-well exemption is attached to be approved once the pump test result for Well 4 (CLAC 61102) 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**

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c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Cart Arm Well – Well 1	Badger	17070168	Working	4,112,765.58 gallons (December 12, 2023)	July 13, 2023
Center Well – Well 2	Badger	221735712	Working	665,215.8 gallons (September 6, 2023)	Replacement meter installed August 2023
Barn Well – Well 4	Master meter	17070189	Working	112,183.86 gallons (July 11, 2023) 3,251,936.69 gallons (September 6, 2023)	March 2018

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
Cart Arm Well – Well 1	L-146324	May 2023
Center Well – Well 2	L-146325	May 2023
Barn Well – Well 4	L-69067	June 2004

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:
Water shall be acquired from the same aquifer as the original points of appropriation.

Compliance:
Cart Arm Well – Well 1 (CLAC 78003) develops water from 297 feet which is assumed to be the same alluvial aquifer found in Wells 2 and 4.

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Center Well – Well 2 (CLAC 50087, 78002) develops water from the alluvial aquifer between at the depths 305 feet with in clay on top of gravel and sand.

Barn Well – Well 4 (CLAC 61102) develops water from the alluvial aquifer between the depths of 272 to 302 feet with in sand over clay layer.

It appears these wells obtain water from the alluvial aquifer; therefore, this condition has been met.

SECTION 6 ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	Claim of Beneficial Use Map
State Water Well Report – CLAC 20012	Well log and driller’s notes for CLAC 20012 – Cart Arm Well – Well 1
State Water Well Report – CLAC 78003	Well log and driller’s notes for CLAC 78003 – Cart Arm Well – Well 1
State Water Well Report – CLAC 50087	Well log and driller’s notes for CLAC 50087 – Center Well – Well 2
State Water Well Report – CLAC 61102	Well log and driller’s notes for CLAC 61102 – Barn Well – Well 4
State Water Well Report – CLAC 78002	Well log and driller’s notes for CLAC 78002 – Center Well – Well 2 – cleaned out
BLM Cadastral Map	BLM Cadastral Map T. 2S. R. 3E. showing DLC and Government Lot locations
BLM Cadastral Map	BLM Cadastral Map T. 2S. R. 4E. showing DLC and Government Lot locations
Pump Test Form Cover Sheet and Pump Test Data Sheet	Pumping Test Results for Well 4 (CLAC 61102) conducted May 2, 2023
Form 90 – Notice of Beginning of Construction	Form A “Notice of Beginning of Construction” filled out by Frank Bastasch noted first well was drilled by Rich Waller of Always Drilling Estacada, OR.
OWRD email chain February 24, 2015 to February 27, 2015	Email correspondence among OWRD personnel discussing issue with permit G-11627 being for supplemental when the primary surface water application was cancelled.
Multi-Well Exemption	Multi-Well Exemption for Well 1 (78003) and Well 2 (CLAC 50087, 78002) to be approved once pump test for Well 4 (CLAC 61102) is approved

SECTION 7

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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 3 3E 1 and 12, 2 4E 31, 2 3E 36 and 36C, 3 4E 6, and 3 4E 7 overlain by a 2014 aerial photo titled USDA-FSA-APFO NAIP County Mosaic and obtained on line from the Natural Resources Conservation Service, Image Metadata: <http://datagateway.nrcs.usda.gov/Catalog/ProductDescription/NAIPM.html>.

Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

(Reminder: Incomplete maps and/or claims may be returned.)

- Map on polyester film
- Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- Township, Range, Section, Donation Land Claims, and Government Lots
- If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- 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

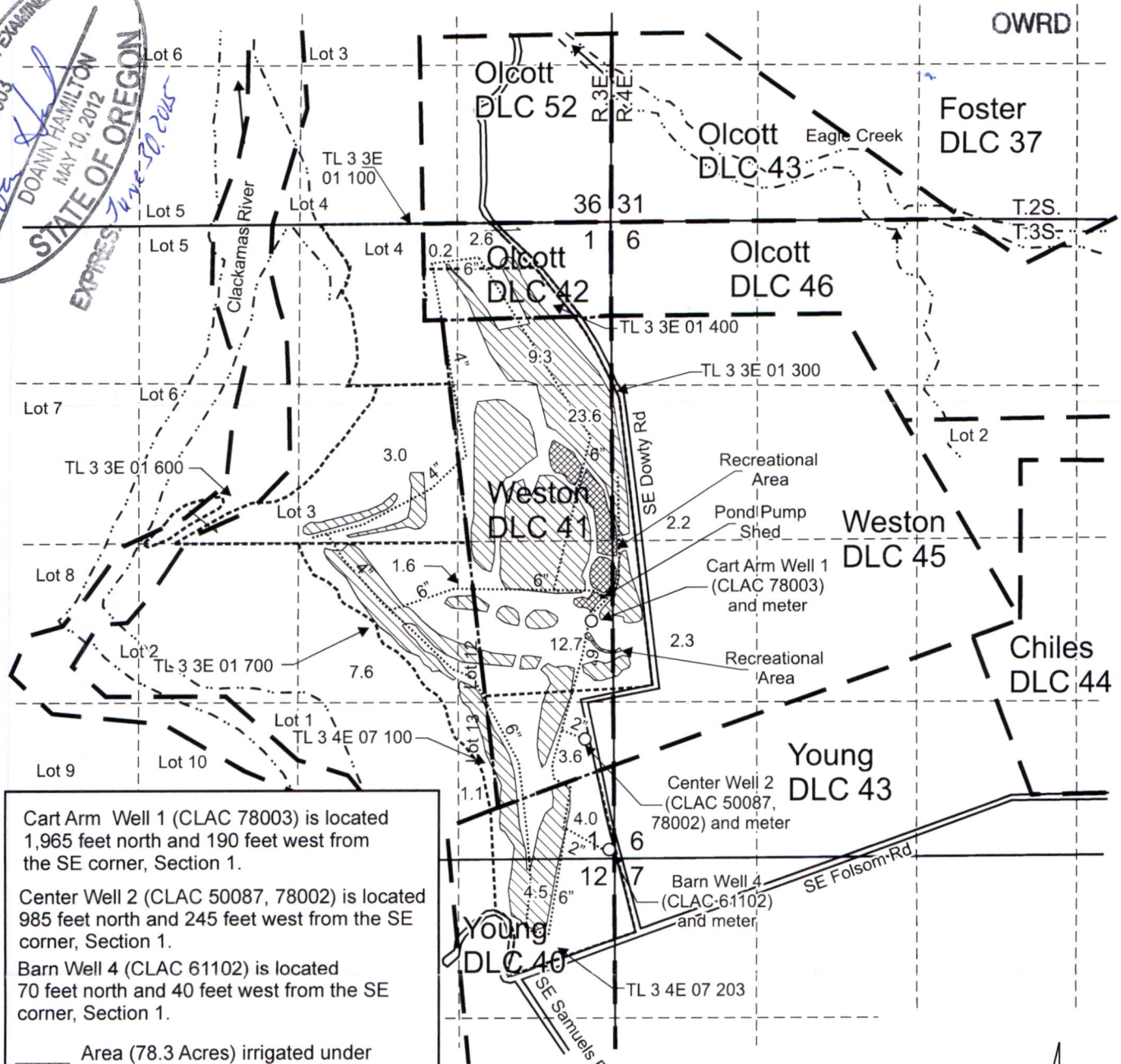
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T.3S. R.3E. Sec. 1 & 12, and T.3S. R.4E. Section 6, W.M.

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CERTIFIED WATER RIGHT EXAMINER
65503
[Signature]
DOANNY HAMILTON
MAY 10, 2012
STATE OF OREGON
EXPRES June 30, 2015



Cart Arm Well 1 (CLAC 78003) is located 1,965 feet north and 190 feet west from the SE corner, Section 1.

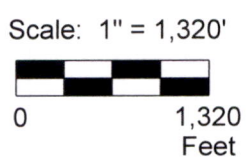
Center Well 2 (CLAC 50087, 78002) is located 985 feet north and 245 feet west from the SE corner, Section 1.

Barn Well 4 (CLAC 61102) is located 70 feet north and 40 feet west from the SE corner, Section 1.

Area (78.3 Acres) irrigated under Application G-12589, Permit G-18363, T-13051.

Recreation Water use area.

--- Tax lot boundary - - - Donation Land Claim boundary Mainline Irrigation



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-12589, Permit G-18363, T-13051

Eagle Creek Golf Course
T.3S. R.3E. Sec. 1 & 12
and T.3S. R.4E. Section 6, W.M.

Pacific Hydro-Geology Inc.

12/2023

Eagle Creek COBU Map.cdr

16

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JAN 13 1995

35/4E/6CC
69073

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

CLAC
20012

(START CARD)

Instructions for completing this report are on the last page of this form.

(1) OWNER:

Well Number 1
Name Eagle Creek Golf Course
Address 25805 SE County Rd
City Eagle Creek State OR Zip 97022

(2) TYPE OF WORK

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 60 ft.
Explosives used Yes No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10	0	18	GRAVEL	0	18	12 BAGS
6	18	60	BENTONITE			

How was seal placed: Method A B C D E
 Other Powered Dry

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

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>6 5/8</u>	<u>+1</u>	<u>58</u>	<u>2 1/2</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 58'

(7) PERFORATIONS/SCREENS:

Perforations Method Air Perforator
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casting	Liner
<u>25</u>	<u>56</u>	<u>4x3</u>	<u>4</u>	<u>Rows</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>30</u>		<u>55</u>	1 hr.
<u>30</u>		<u>55</u>	<u>2 hr</u>

Temperature of water 52° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Clack Latitude _____ Longitude _____
Township 3 N or S Range 4 E or W. WM.
Section 6 SW 1/4 SW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Same as #1

(10) STATIC WATER LEVEL:

15 ft. below land surface. Date 7-21-94
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 21 ft

From	To	Estimated Flow Rate	SWL
<u>21</u>	<u>58</u>	<u>30</u>	<u>15</u>

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
<u>Soil Brown</u>	<u>0</u>	<u>1</u>	
<u>Clay Brown w/cobbles</u>	<u>1</u>	<u>6</u>	
<u>Cobble w/large gravel</u>	<u>6</u>	<u>19</u>	
<u>Med-gravel w.B.</u>	<u>19</u>	<u>58</u>	<u>15</u>
<u>Clay grey sticky</u>	<u>58</u>	<u>60</u>	

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Date started 7-20-94 Completed 7-21-94

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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.

Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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.

Signed Jack Wallart WWC Number 792 Date 8-5-94

STATE OF OREGON WATER SUPPLY WELL REPORT

CLAC 78003

WELL I.D. LABEL# L 146324 START CARD # 1061218 ORIGINAL LOG #

6/8/2023

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

(1) LAND OWNER Owner Well I.D. 02 First Name JIM Last Name BASTASCH Company EAGLE CREEK GOLF COURSE Address 25805 SE DOWTY RD City EAGLE CREEK State OR Zip 97022

(2) TYPE OF WORK [X] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

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

(3) DRILL METHOD [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud [] Reverse Rotary [] Other

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy) Depth of Completed Well 297.00 ft. BORE HOLE Dia From To Material SEAL From To Amt sacks/lbs

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

(5a) ABANDONMENT USING UNHYDRATED BENTONITE Proposed Amount [] Actual Amount []

(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd Shoe [] Inside [] Outside [] Other Location of shoe(s) [] Temp casing [] Yes Dia [] From [] To []

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

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature 58 °F Lab analysis [X] Yes By SDI, Iron 2.0 ppm Water quality concerns? [] Yes (describe below) TDS amount 112 ppm From To Description Amount Units

(9) LOCATION OF WELL (legal description) County CLACKAMAS Twp 3.00 S N/S Range 3.00 E E/W WM Sec 1 NE 1/4 of the SE 1/4 Tax Lot 300 Tax Map Number [] Lot [] Lat [] Long [] Street address of well [X] Nearest address [] 25805 SE DOWTY RD, EAGLE CREEK, OR 97022

(10) STATIC WATER LEVEL Date [] SWL(psi) [] + SWL(ft) [] Existing Well / Pre-Alteration Completed Well 5/26/2023 152 Flowing Artesian? [] Dry Hole? [] WATER BEARING ZONES Depth water was first found [] SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG Ground Elevation 357.00 Material From To Well Clean-Out Only 0 297 RECEIVED JAN 11 2024 OWRD

Date Started 5/25/2023 Completed 5/26/2023

(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. License Number 2003 Date 6/8/2023 Signed JAIME MUNOZ JR (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. License Number 2006 Date 6/8/2023 Signed CHRISTEN BLAND (E-filed) Contact Info (optional) SKYLES WELL DRILLING 503-656-2683

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

CLAC 78003

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6/8/2023

JAN 11 2024

Map of Hole

OWRD

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)988-0900



LOCATION OF WELL

Latitude: 45.33663430 Datum: WGS84

Longitude: -122.37367540

Township/Range/Section/Quarter-Quarter Section:

WM3.00S3.00E1NESE

Address of Well:

25805 SE DOWTY RD, EAGLE CREEK, OR 97022

Well Label: 146324

Printed: June 8, 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



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JAN 11 2024

STATE OF OREGON WATER WELL REPORT (as required by ORS 537.765)

CLAC 50087

JAN - 5 1996

(START CARD) # 92050

Instructions for completing this report are on the last page of WATER RESOURCES DEPT.

(1) OWNER: Well Number 2 SALEM Name Eagle Creek Golf Course Address 25805 S.E. County Rd City Eagle Creek State OR Zip 97022

(9) LOCATION OF WELL by legal description: County Clack, Latitude Longitude Township 3 N or S Range 4 W or W. WM. Section 6 SW 1/4 SW 1/4 Tax Lot Lot Block Subdivision Street Address of Well (or nearest address) Same as above

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(10) STATIC WATER LEVEL: 85 ft. below land surface. Date Artesian pressure lb. per square inch. Date

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(11) WATER BEARING ZONES: Depth at which water was first found 20-30 ft.

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

Table with 4 columns: From, To, Estimated Flow Rate, SWL. Data rows: 20-30 (15, 4), 299-305 (65, 85)

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 305 ft. Explosives used [] Yes [X] No Type Amount

Table with 6 columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Data rows: 10-0-39 Cement 0-39 31, 6-39-305

(12) WELL LOG: Ground Elevation

How was seal placed: Method [] A [] B [X] C [] D [] E [] Other Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

Table with 4 columns: Material, From, To, SWL. Log entries: Soil Brown w/cobbles 0-3, Clay Brown w/cobbles 3-14, Gravel + Cobbles 14-20, Cemented slightly, Gravel + Cobbles med 20-31, Clay yellow Brown 31-33, Clay Blue Grey sticky 33-91, Clay Grey Fine 91-137, Clay Grey sticky 137-189, Clay Grey Dark 189-241, Clay Blue sticky 241-259, Clay Blue Green sticky 259-298, SAND Course w/ Gravel smacc + Lg pcs of Tan Pumice 298-304, Clay Grey sticky 304-305

(6) CASING/LINER: Diameter From To Gauge Steel Plastic Welded Threaded Casing: 6 5/8 +3 297-298 [X] [] [X] [] Liner: [] [] [] []

Date started 11-12-95 Completed 11-17-95

(7) PERFORATIONS/SCREENS: [] Perforations [] Screens Method Type Material From To Slot size Number Diameter Tele/pipe size Casing Liner

(unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, 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. WWC Number Date

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem at Time 65 295 1 hr.

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, 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. Signed Dick Walwood WWC Number 792 Date 11-30-95

Temperature of water 52 Depth Artesian Flow Found Was a water analysis done? [] Yes [] No By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [X] Other - Shallow - Depth of strata 20-30 ft.

MAY 27 2005

STATE OF OREGON
 WATER SUPPLY WELL REPORT
 (as required by ORS 537.765)

WATER RESOURCES DEPT
 SALEM, OREGON

*CLAC
 61102*

WELL I.D. # L 69067
 START CARD # 157123

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number _____
 Name John Bastasch
 Address 24255 S.E. Folsom Rd.
 City Eagle CR. State ORE. Zip 97022

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

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

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 302 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	32	Cement	0	27	23
6"	32	302				

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	42	299	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4 1/2"	262	302	26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 299'

(7) PERFORATIONS/SCREENS:

Perforations Method SKILL Saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
222	302	1/4 x 4	110			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
90		302	1 hr.

Pump Bailer Air Artesian
 Flowing Artesian

Temperature of water 57° Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: 3 TO 24 FEET

(9) LOCATION OF WELL by legal description:
 County Clackamas Latitude _____ Longitude _____
 Township 3S S Range 4E E. WM. _____
 Section 7 NW 1/4 NW 1/4
 Tax Lot 00203 of _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:
135 ft. below land surface. Date 5-29-04
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
3	29	12	3'
294	302	90	135'

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(12) WELL LOG: JUN 27 2005
 Ground Elevation _____ WATER RESOURCES DEPT
 SALEM, OREGON

Material	From	To
SOIL BROWN	0	3
GRAVELS	3	24
Clay GRAY sticky	24	52
Clay GRAY SOFT	52	54
Clay GREEN	54	92
Clay GRAY	92	105
Clay GREEN SOFT	105	116
Clay GRAY	116	132
Clay GREEN	132	157
Clay GRAY with SANDS & WOOD	157	166
Clay GRAY	166	180
Clay GREEN	180	215
Clay GRAY	215	256
Clay GREEN FIRM	256	294
COARSE SANDS		
WATER BEARING	294	301
Clay DARK GRAY	301	302

Date started 5-13-04 Completed 6-5-04

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, 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.
 Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:
 I accept responsibility for the construction, 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.
 Signed Tom J. Gray WWC Number 1031 Date 7-29-04

ORIGINAL - WATER RESOURCES DEPARTMENT FIRST COPY - CONSTRUCTOR SECOND COPY - CUSTOMER

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JAN 11 2024

OWRD

MAY 17 2005

STATE OF OREGON

WATER SUPPLY WELL REPORT WATER RESOURCES DEPT SALEM, OREGON

(as required by ORS 537.765)

CLAC 61102

WELL I.D. # L 69067 START CARD # 157123

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER: Name JOHN BASTASCH, Address 26255 S.E. FOLSON RD., City Eagle CR., State ORE., Zip 97022

(9) LOCATION OF WELL by legal description: County Chackamas, Township 3S, Range 4E, Section 7, Block NW 1/4 NW 1/4, Street Address of Well (or nearest address) SAME

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(10) STATIC WATER LEVEL: 135 ft. below land surface. Date 5-29-04

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(11) WATER BEARING ZONES: Depth at which water was first found

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 302 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Row 1: 10", 0, 32, CEMENT, 0, 37, 23. Row 2: 6", 32, 302, , , , .

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 3, 29, 12, 3. Row 2: 294, 302, 90, 135. Includes stamp: RECEIVED JUN 27 2005

How was seal placed: Method [X] A [] B [X] C [] D [] E

(12) WELL LOG: WATER RESOURCES DEPT SALEM, OREGON

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

Table with columns: Casing Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Liner: 4 1/2", 262, 302, 50", [X] [] [] [] [] [] [] []

Table with columns: Material, From, To, SWL. Rows include: Soil BAUM, GRAVELS, Clay GRAY sticky, Clay GRAY SOFT, Clay GREEN, Clay GRAY, Clay GREEN soft, Clay GRAY, Clay GREEN, Clay GRAY with SANDS & WOOD, Clay GRAY, Clay GREEN, Clay GRAY, Clay Green FIRM, coarse SANDS, WATER BEARING, Clay Dark GRAY.

Drive Shoe used [] Inside [X] Outside [] None Final location of shoe(s) 299'

(7) PERFORATIONS/SCREENS: [X] Perforations Method SKILL Saw [] Screens Type Material. Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: 222, 302, 1/4 x 3/8, 110, , , [] [X]

Date started 5-13-04 Completed 6-5-04

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Artesian Yield gal/min 90 Drawdown Drill stem at 302 Time 1 hr.

(unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Signed _____ Date _____ WWC Number _____

Temperature of water 57° Depth Artesian Flow Found Was a water analysis done? [] Yes By whom Did any strata contain water not suitable for intended use? [X] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata: 3 TO 24 FEET

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. Signed Lorn J. Young Date 7-24-04 WWC Number 1621

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JAN 11 2024

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STATE OF OREGON WATER SUPPLY WELL REPORT

CLAC 78002

WELL I.D. LABEL# L 146325 START CARD # 1061217 ORIGINAL LOG # CLACKAMAS 50087

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

6/8/2023

(1) LAND OWNER Owner Well I.D. 01 First Name JIM Last Name BASTASCH Company EAGLE CREEK GOLF COURSE Address 25805 SE DOWTY RD City EAGLE CREEK State OR Zip 97022

(2) TYPE OF WORK [X] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION Casing: Dia + From To Gauge Stil Plstc Wld Thrd Seal: Cement 0 39 31 Sacks

(3) DRILL METHOD [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud [] Reverse Rotary [] Other

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy) Depth of Completed Well 305.00 ft. BORE HOLE Dia From To Material SEAL From To Amt sacks/lbs

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

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

(6) CASING/LINER Casing Liner Dia + From To Gauge Stil Plstc Wld Thrd Shoe [] Inside [] Outside [] Other Location of shoe(s) Temp casing [] Yes Dia From + To

(7) PERFORATIONS/SCREENS Perf/ Casing/ Screen Dia From To width length slots # of pipe size Screens Type Material

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) Temperature 58 °F Lab analysis [X] Yes By SDI, Iron 2.0 ppm Water quality concerns? [] Yes (describe below) TDS amount 105 ppm

(9) LOCATION OF WELL (legal description) County CLACKAMAS Twp 3.00 S N/S Range 3.00 E E/W WM Sec 1 SE 1/4 of the SE 1/4 Tax Lot 100 Tax Map Number Lot Lat Long DMS or DD NEAR 25805 SE DOWTY RD, EAGLE CREEK, OR 97022

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Pre-Alteration 5/17/2023 145 Completed Well 5/24/2023 145 Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG Ground Elevation 365.00 Material From To Well Clean-Out Only 0 305 RECEIVED JAN 11 2024 OWRD

Date Started 5/17/2023 Completed 5/24/2023

(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. License Number 2003 Date 6/8/2023 Signed JAIME MUNOZ JR (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. License Number 2006 Date 6/8/2023 Signed CHRISTEN BLAND (E-filed) Contact Info (optional) SKYLES WELL DRILLING 503-656-2683

**WATER SUPPLY WELL REPORT -
continuation page**

CLAC 78002

WELL I.D. LABEL# 1

146325

6/8/2023

START CARD #

1061217

ORIGINAL LOG #

CLACKAMAS 50087

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
					<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"/>

Material	From	To	Amt	sacks/lbs

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	Amt
						Calculated
						Calculated
						Calculated
						Calculated

FILTER PACK			
From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<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"/>	<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"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS

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

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

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

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(11) WELL LOG

Material	From	To

RECEIVED

JAN 11 2024

OWRD

Comments/Remarks

Scoped well with camera. Hit obstruction at 236', possible boulder that rolled in during original construction. Casing below obstruction might be broken. Broken, undocumented, screen at 281' to bottom. Started at 7gpm. Used mud-buster, well now producing 15gpm. Installed Well ID tag.

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

CLAC 78002

6/8/2023

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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: 45.33394440 Datum: WGS84

Longitude: -122.37380820

Township/Range/Section/Quarter-Quarter Section:

WM3.00S3.00E1SESE

Address of Well:

NEAR 25805 SE DOWTY RD, EAGLE CREEK, OR 97022

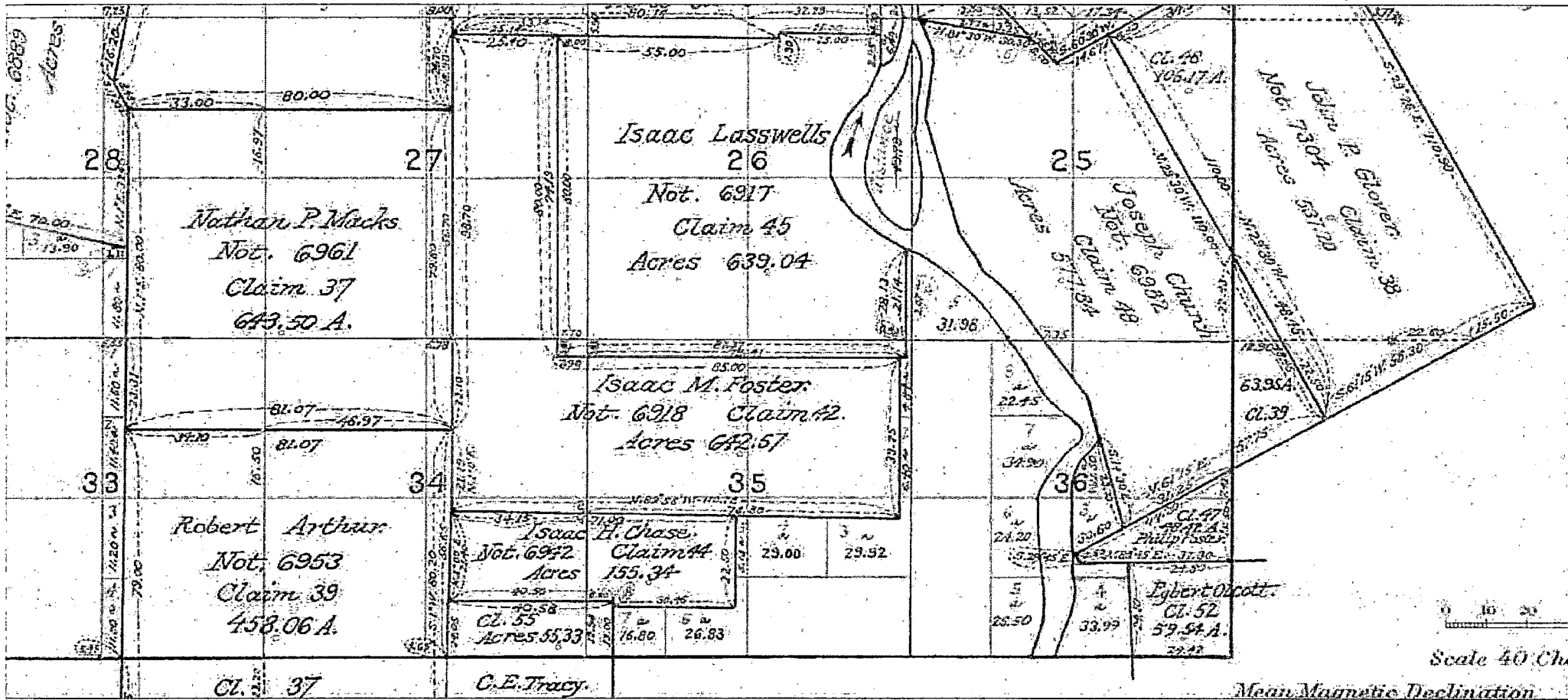
Well Label: 146325

Printed: June 8, 2023

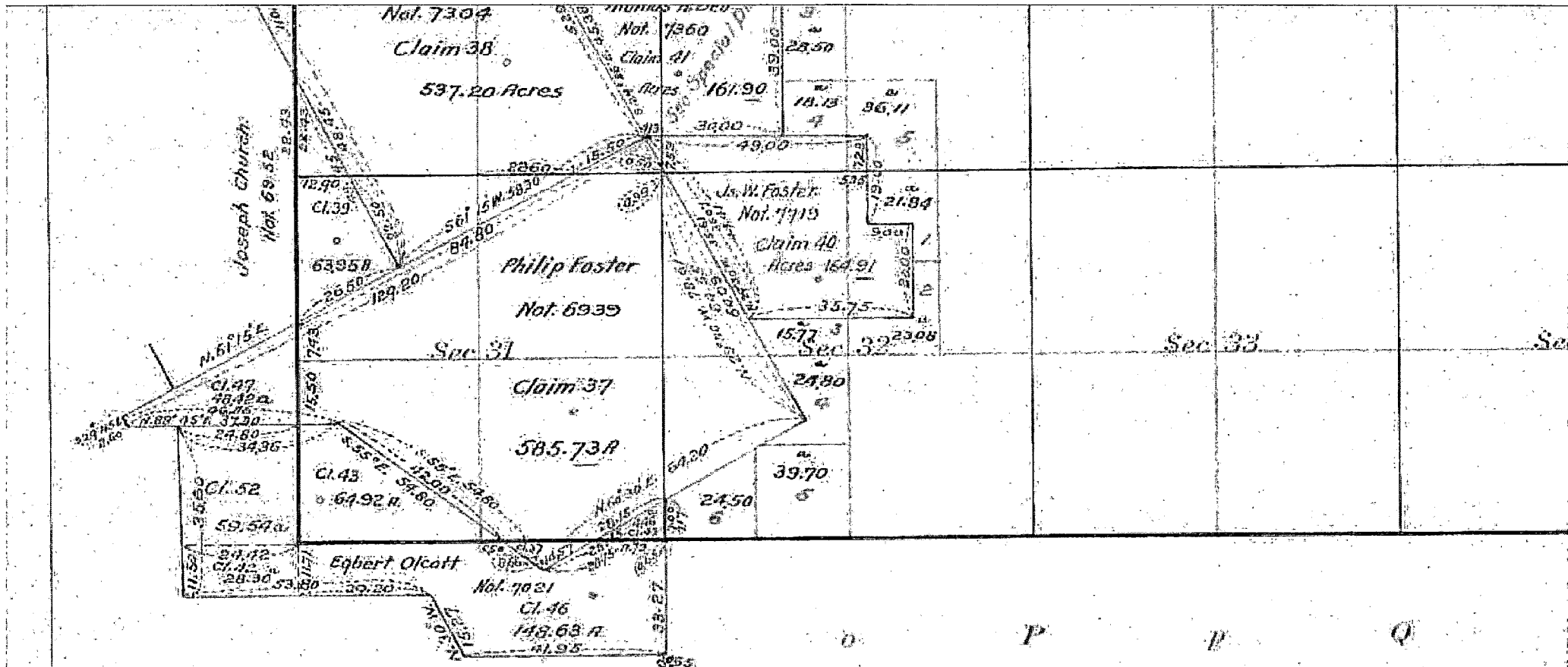
DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor





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Surveys Designated	By Whom Surveyed	Group		Amount of Surveys			When Survey	
		No.	Date of Instructions	Mts.	chs.	Pls.	Began	C

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PUMP TEST FORM
COVER SHEET

Owner Information:

OWNER NAME/BUSINESS NAME: Eagel Creek Golf Course		PHONE No.: 503-927-6470	ADDITIONAL CONTACT No.:
ADDRESS: 25805 SE Dowty Rd			
CITY: Eagle Creek	STATE: OR	ZIP: 97022	E-MAIL: Bastasch@gmail.com

Pump Test Conducted By (If Different From Owner):

TEST CONDUCTED BY NAME: Steve Hougak	QUALIFICATION: (SELECT) Other	LICENSE #: 72cpi
COMPANY: Steve's Pump Service Inc.	PHONE No.: 503-658-3051	ADDITIONAL CONTACT No.:
ADDRESS: PO Box 547		
CITY: Boring	STATE: OR	ZIP: 97009
E-MAIL: stevespumpservice@comcast.net		

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
CLAC 61102	L- 69067	South well: barn well	302		7/28/2004	5/2/2023

(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- 12589	G- 18363	T- 13051		<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. **Approximate distance:** _____ ft.
Well elevation is above the surface water body. **Approximate elevation difference:** _____ ft.

Was the test conducted during normal use of the well?
Please indicate where pumped water was discharged: To a pond _____
How far from the pumped well was water discharged? About 400 yards _____ ft.

Additional forms can be found at: <https://www.oregon.gov/owrd/Forms/Pages/default.aspx>.



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PUMP TEST FORM COVER SHEET

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Water-Level Measurement Method: Other (Enter)

Length of air line (if used):

*Verify here:

Airline: psi feet. E-Tape: Powers 500' well sounder 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: 294 feet. Pump idle time: 24 hrs

Discharge Measurement Method: Flowmeter

Flowmeter (if used):

Manufacturer: Product Recover Mana Serial #: 17070189 Date Last Calibrated: N/A Units: Gallons

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 32.75 feet. Correct MP = 32.75 inches

Description (e.g., top port of 1 inch port pipe, west side) Top of Well Seal or 2.75 feet

Time pump turned on: Date 5/2/23 Time 1:30 pm. Time pump turned off: Date 5/2/23 Time 5:40 pm. Total pumping time: 4 hours 10 minutes.

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

- Checklist items regarding discharge rate, pump operation, measurements, and safety protocols.

*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=1BdwLynsYAPNSQW330ZjSFZuMscp4Hfil-1ftsDAAEsMC2_ROSs!-277278532?selectedDivision=3186.

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

Forms may additionally be sent to WRD_DL_pumptestsupport@oregon.gov

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

OPERATOR SIGNATURE: [Signature] DATE: 5-2-2023

OWNER SIGNATURE: DATE:



WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-9999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
CLAC 61102	L- 69067	South well aka Barn Well	302	John Bastasch	7/28/04	5/2/23

Date	Time	Time Since Pumping Started (min)	Depth to Water Below MP	Discharge Rate (gpm, cfs, <small>gpm</small>)	Phase (Pre-Test, Pumping, Recovery)	Airline or Shut-in Pressure (psi)	Flowmeter Reading (if available)	Comments
5/2/23	11:00	24 hrs	159' 6"	0	Pre-test			
	11:30			0	Pre-test			
	12:00			0	Pre-test			
	1:30		159' 6"		Pumping			
	1:32		172	25	Pumping	54		
	1:34		173	25	Pumping	54		
	1:36		175' 6"	60	Pumping	40		
	1:38		177'	60	Pumping	40		
	1:40		177' 4"	60	Pumping	40		
	1:55		178' 6"	60	Pumping	40		
	2:00		179' 5"	60	Pumping	40		
	2:05		180'	60	Pumping	40		
	2:10		180' 7"	60	Pumping	40		
	2:25		181' 10"	60	Pumping	40		
	2:40		183' 3"	60	Pumping	40		
	2:55		184'	60	Pumping	40		
	3:10		184' 9"	60	Pumping	40		
	3:25		185' 6"	60	Pumping	40		
	3:40		186'	60	Pumping	40		
	3:55		186' 6"	60	Pumping	40		
	4:10		187'	60	Pumping	40		
	4:25		187' 6"	60	Pumping	40		
	4:40		187' 11"	60	Pumping	40		
	4:55		188' 3"	60	Pumping	40		
	5:10		188' 7"	60	Pumping	40		
	5:25		189'	60	Pumping	40		
	5:40		189' 2"		Recovery			
	5:42		189' 2"		Recovery			
	5:44		176' 5"		Recovery			
	5:46		174' 5"		Recovery			
	5:48		173' 5"		Recovery			
	5:52		173' 3"		Recovery			
	5:57		172'		Recovery			
	6:02		171'		Recovery			
	6:07		170' 2"		Recovery			
	6:12		169' 10"		Recovery			
	6:17		169' 2"		Recovery			
	6:23		168'		Recovery			
	6:38		167' 2"		Recovery			

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WATER RESOURCES DEPT.
SALEM, OREGON

A - Form 90

G-12589

STATE OF OREGON
Office of the Water Resources Director
Salem, Oregon 97310

The terms of your water right permit No. G-11627, require you to begin on or before November 22, 1994 actual construction of the works and/or the purchase and installation of the pump and other equipment necessary to your use of water. We have not received the notice of beginning of construction. If you have begun such work you should promptly fill out, sign and forward the notice (Form A) which was attached to your permit.

In case you failed to begin construction work, your right has been lost. In order that the records of this office may be complete without strict notice procedure, a statement of the fact and authorization to cancel the permit would be greatly appreciated.

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Application No.

Form A (690-9-77)

NOTICE OF BEGINNING OF CONSTRUCTION

I, FRANK J. BASTASCH / EAGLE CREEK GOLF COURSE, the holder of Permit No. G-11627

to appropriate the public waters of the state of Oregon, began the actual construction of the works described therein on the 10th day of AUGUST, 1994.

Remarks: FIRST WELL WAS DRILLED BY ALL WAYS DRILLING - ESTACADA, OR. PRIOR TO

11/22/94 ALL THE PUMPS AND 50% OF THE PIPE AND SPRINKLERS WERE ACQUIRED. ALSO, A

TEMPORARY WATERING SYSTEM WAS COMPLETED FOR THE GREENS.

authorized by your permit.

IN WITNESS WHEREOF, I have hereunto set my hand this 3rd day of FEBRUARY, 1995

Frank J. Bastasch
(Signature of Applicant)

1403 S.E. STARK ST PORTLAND, OR 97214
(Address)

Fill out, detach and mail to the Water Resources Department, Salem, OR 97310, when construction work is begun.

SP*35567-690

WELL DRILLED
BY: RICH WALLER
ALWAYS DRILLING
ESTACADA, OR.

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EASTMAN Jeana M

From: EASTMAN Jeana M
Sent: Friday, February 27, 2015 2:47 PM
To: MCCORD Mike L; KIM Amy J; EASTMAN Jeana M
Subject: RE: Permit G-11627 Problem

Mike / Amy -

They may or may not need an extension; the file doesn't contain enough info on some items for me to determine that.

The permit required recording monthly water use and annual reporting. Reports were submitted for 1999 - 2000, and 2003 - 2008 so that condition was met.

Permit conditions that I'm unable to determine if they were met:

- Installation of meter or suitable measuring device
- Access port on well
- Pump test (there wasn't a pump test record in the file or in GW's filing cabinet so I don't think this was met)

The first two extensions didn't require additional terms/conditions beyond what the permit required. However, the third extension Final Order did; a written progress report with certain info. That was submitted timely and Lisa Jaramillo wrote a letter indicating that condition was met.

The good news is that there is only a short list of items that we'd need to check on with the permit holder to see if they're done. If so, they can file a COBU; if not, a permit extension.



Jeana Eastman ★ ★ ★ NW Region Assistant Watermaster ★ ★ ★ 503.986.0896

Oregon Water Resources Dept, 725 Summer St NE, Ste A, Salem OR 97301
<http://oregon.gov/OWRD>

It is not length of life, but depth of life. ~ Ralph Waldo Emerson

From: MCCORD Mike L
Sent: Wednesday, February 25, 2015 8:39 AM
To: KIM Amy J
Cc: EASTMAN Jeana M
Subject: FW: Permit G-11627 Problem

Amy, some good news on this. I will have Jeana go through the file and determine if they can file a CBU or if they need another extension. I think it is fair to let the appraiser know that there was what appears to be a procedural error in the processing of this right and we are working on sorting it out. Try not to scare him. It is probably a good idea to wait until Jeana looks this over so we can provide more clear guidance on what they need to do.

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Mike

From: MCCORD Mike L
Sent: Wednesday, February 25, 2015 8:34 AM
To: FRENCH Dwight W; CLARK Gerry E
Subject: RE: Permit G-11627 Problem

OWRD

Thanks Dwight, this sounds like a reasonable approach. They were pretty on top of things early on but it appears that they may need to do another extension. It is possible they met all the conditions during their last extension but I have to go through the file to check all those details. I was mainly looking for other documents when I went through the file.

I will follow up with Gerry on this.

Thanks again.

From: FRENCH Dwight W
Sent: Tuesday, February 24, 2015 5:08 PM
To: MCCORD Mike L; CLARK Gerry E
Subject: RE: Permit G-11627 Problem

Mike and Gerry,

I have a proposed solution. We need to receive and review a COBU and then issue the cert for primary – as was intended.

Perhaps Gerry can proof this possibility and confirm whether it will work or not. Do we have a COBU? What is the due date?

I've been there once - 10-15 years ago.

Dwight

Dwight French

Water Right Services Division Administrator
Oregon Water Resources Department
dwight.w.french@state.or.us
503-986-0819

From: MCCORD Mike L
Sent: Tuesday, February 24, 2015 3:14 PM
To: FRENCH Dwight W
Subject: Permit G-11627 Problem

Dwight, this permit is for supplemental irrigation and there is no underlying primary. Along with the GW application they filed an application to use surface water (S-71714) however they asked that the application be withdrawn. It was, V.47, Page 233. That order was issued 4 months prior to the permit being issued. In the same letter, they asked that the GW application be considered primary irrigation. The letter came in about a year prior to the issuance of Permit G-11627. Other than a scribbled note in the file, there is no reference to the letter in the file and there is no correspondence to the applicant about the letter they sent in.

We have issued two extensions for this permit and this issue has not been discovered. It came up when an appraiser called about the water rights for this property. The property happens to be Eagle Creek Golf Course. At this time, the appraiser is totally unaware of this problem.

I have an idea on how this could be fixed but I am not sure if it will fly. What are your thoughts on this? I have the GW file. The SW application appears to be destroyed.



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OWNER NAME/BUSINESS NAME: Eagle Creek Limited Partnership c/o James Bastasch		PHONE No.: 503-927-6470	ADDITIONAL CONTACT No.:
ADDRESS: 25805 SE Dowty Rd			
CITY: Eagle Creek	STATE: OR	ZIP: 97306	E-MAIL: bastasch@gamil.com

NOTE: To qualify for an exemption from testing your well(s), you must meet all of the following criteria (OAR 690-217-0020(3)):

- 1. You own multiple wells producing water from the same aquifer (to be verified by OWRD);**
- 2. One of the wells has been tested and the test has been approved by OWRD; and**
- 3. The wells are within 5 miles of the tested well.**

1. List the *tested* well. If the well is listed on any water right, please provide the water right identification numbers as well as the surveyed location. Note that an exemption cannot be granted until the test has been approved.

WELL LOG # <small>(EX: MARI 99999)</small>	WELL TAG # <small>(EX: L-999999)</small>	WELL NAME OR #	TEST DATE	APPLICATION	PERMIT	TRANSFER	CERTIFICATE
CLAC 61102	L- 69097	Barn Well	5-2-2023	G- 12589	G- 18360	T- 13051	NA

(CONTINUED)

TWP <small>(EX: 25S)</small>	RNG <small>(EX: 31E)</small>	SEC <small>(EX: 12)</small>	QQ <small>(EX: SE/SW)</small>	SURVEYED LOCATION <small>(EX: 100 ft N & 735 ft E fr SE cor, sec 5)</small>	LATITUDE <small>(EX: 44.94473859)</small>	LONGITUDE <small>(EX: -123.02787000)</small>
3S	3E	1	SESE	70 feet N and 190 feet W from the SE corner, Sec 1		

2. List each well and associated water right(s) for which you are requesting a multiple well exemption. This does *not* include the tested well. If a well is listed on more than one water right, be sure to include them all here:

	WELL LOG # <small>(EX. MARI 99999)</small>	WELL TAG # <small>(EX. L-999999)</small>	WELL NAME OR #	APPLICATION	PERMIT	TRANSFER
a	CLAC 50087, 780	L- 146325	Center Well - Well 2	G- 12589	G- 18360	T- 13051
b	CLAC 78003	L- 146324	Cart Arm Well - Well 1	G- 12589	G- 18360	T- 13051
c		L-		G-	G-	T-
d		L-		G-	G-	T-
e		L-		G-	G-	T-

(CONTINUED)

	TWP <small>(EX: 25S)</small>	RNG <small>(EX: 31E)</small>	SEC <small>(EX: 12)</small>	QQ <small>(EX: SE/SW)</small>	SURVEYED LOCATION <small>(EX: 100 ft N & 735 ft E fr SE cor, sec 5)</small>	LATITUDE <small>(EX: 44.94473859)</small>	LONGITUDE <small>(EX: -123.02787000)</small>
a	3S	3E	1	SESE	985 ft N and 245 ft W from the SE corner, Section 1		
b	3S	3E	1	NESE	1,965 ft N and 190 ft W from the SE corner, Sec. 1		
c							
d							
e							

3. For each well listed in #1 and #2 above, attach all water well reports (i.e. well logs) or, if unavailable, other documentation showing the water-producing zones. If available, please attach a copy of the test and/or approval letter as well as a map showing the locations of all wells listed on this form.

I hereby certify that the tested well and the well(s) requested for exemption(s) are under the ownership listed above and are located within 5 miles of each other.

SIGNATURE: **DATE:** 12/20/2023 **LICENSE #:** 5204168

PRINTED NAME: JAMES BASTASCH (CIRCLE ONE) OWNER EMPLOYEE, CWRE, RG, PE, WWC, PUMP INSTALLER

PHONE: 503 927 6470 **EMAIL:** bastasch@gmail.com