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

OREGON WATER RESOURCES DEPARTMENT

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

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

A separate form shall be completed for each permit.

In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at:
https://www.oregon.gov/OWRD/Forms/Pages/default.aspx
The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. **Every item must have a response.** If any requested information does not apply to the claim, insert "NA." **Do not delete or alter any section of this form unless directed by the form.** The Department may require the submittal of additional information from any water user or authorized agent.

"Section 8" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-979-9103.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see
https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx

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SECTION 1

GENERAL INFORMATION

1. File Information:

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
G-14194	G-12576	T-

2. Property Owner (current owner information):

Applicant/Business Name		Phone No.	Additional Contact No.
City of Mt. Vernon		**541-932-4688**	**541-620-4461**
Address **PO Box 647**			
City **Mt. Vernon**	State **Oregon**	Zip **97865**	E-Mail **cmtvpw@ortelco.net**

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

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

Permit Holder of Record		
Same As Above		
Address		
City	State	Zip

Additional Permit Holder of Record		
N/A		
Address **N/A**		
City **N/A**	State **N/A**	Zip **N/A**

4. Date of Site Inspection:

6-12-2024

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

Name	Date	Association with the Project
Bill Cearns	**6/12/2024**	**Public Works Director**

6. County:

Grant

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

Owner of Record		
N/A		
Address **N/A**		
City **N/A**	State **N/A**	Zip **N/A**

Add additional tables for owners of record as needed

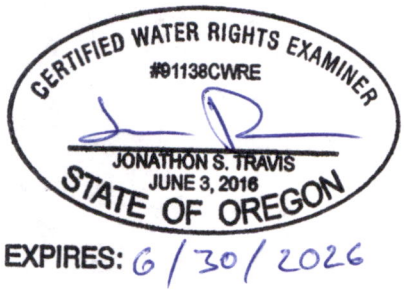
SECTION 2

SIGNATURES

CWRE Statement, Seal and Signature

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

Seal and Signature



EXPIRES: 6/30/2026

CWRE NAME		PHONE NO.	ADDITIONAL CONTACT NO.
Jonathon Travis		**509-979-0332**	
ADDRESS **8019 W Quinault, Suite 201**			
CITY **Kennewick**	STATE **WASHINGTON**	ZIP **99336**	E-MAIL **Jtravis@geoengineers.com**

Permit Holder of Record Signature or Acknowledgement

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

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

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	William R Cearns	Public Works Superintendent	6-25-24

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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)
POA 2 – School Well	**GRAN 50098**	**L-11032**
POA 3 – Jones Well	**GRAN 50092**	**L-11031**

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
POA 2 – School Well	**John Day**	**Columbia River**
POA 3 – Jones Well	**John Day**	**Columbia River**

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

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
POA 2 – School Well	**Municipal**	**N/A**	**Year Round**	**0.20 CFS**
POA 3 – Jones Well	**Municipal**	**N/A**	**Year Round**	**0.65CFS**
Total Quantity of Water Used				**0.67 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 each well and distributed throughout the City via approximately 17,650 ft of 12, 8, and 6-inch water lines to residential and commercial connections. The wells also fill two large reservoirs.

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."*)

The permit allowed three points of appropriation. The City only developed two of those points.

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
POA 2 – School Well	**0.67 ACFT**	**0.20 CFS**	**N/A**	**Municipal**	**N/A**	**N/A**
POA 3 – Jones Well	**0.67 ACFT**	**0.65 CFS**	**N/A**	**Municipal**	**N/A**	**N/A**

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):

POA 2 – School Well

A. Place of Use

1. Is the right for municipal use? **YES**

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:

1" port on East side of 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						

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.

GRAN 50098

C. Groundwater Source Information (Sump)

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

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
grundfos	GF85575-6	E 19-35-0162	submersible	6-inch	6-inch

3. Motor Information:

Manufacturer	Horsepower
grundfos	7.5 HP

4. Theoretical Pump Capacity:

HHPorsepower	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)
7.5 HP	61 psi	83 ft	20 ft	0.20 CFS

5. Provide pump calculations:

HP = 7.5
Efficiency = 7.04
Lift = 103
PSI = 61

Results Calculated

(hp)(efficiency) = 52.8
Head based on psi = 155.0
Total dynamic head = (head + lift) 258.0

Pump Capacity = 0.20 cubic feet per second

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)
N/A	Not running	6/12/24	

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
12-inch	1900 ft	PVC	Buried
8-inch	13450 ft	PVC	Buried
6-inch	2300	PVC	Buried

9. Lateral or Handline Information:

Lateral or Handline Size	Length	Type of Pipe	Buried or Above Ground
N/A			

10. Sprinkler Information:

Size	Operating PSI	Sprinkler Output (GPM)	Total Number of Sprinklers	Maximum Number Used	Total Sprinkler Output (CFS)
N/A					

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					

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					

13. Pivot Information:

Manufacturer	Maximum Wetted Radius	Operating PSI	Total Pivot Output (GPM)	Total Pivot Output (CFS)
N/A				

E. Storage

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

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 **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
Steel	**320,000**	**Above**
Steel	**500,000**	**Above**

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**

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**

H. Additional notes or comments related to the system:

None

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):

POA 3 – Jones Well

A. Place of Use

1. Is the right for municipal use? **YES**

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:

1" NE side of 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
See Well Log						

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.

GRAN 50092

C. Groundwater Source Information (Sump)

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

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
grundfos	GF230S200-7C	16057	submersible	6-inch	6-inch

3. Motor Information:

Manufacturer	Horsepower
grundfos	25

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)
25 HP	74	84 ft	0 ft	0.65 CFS

5. Provide pump calculations:

HP = 25
Efficiency = 7.04
Lift = 84
PSI = 74

Results Calculated

(hp)(efficiency) = 176

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Head based on psi =	188.0
Total dynamic head = (head + lift)	272.0

Pump Capacity = 0.65 cubic feet per second

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)
N/A	**Not running**	**6/12/24**	

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
12	**1900 ft**	**PVC**	**buried**
8	**13450 ft**	**PVC**	**buried**
6	**2300**	**PVC**	**buried**

9. Lateral or Handline Information:

Lateral or Handline Size	Length	Type of Pipe	Buried or Above Ground
N/A			

10. Sprinkler Information:

Size	Operating PSI	Sprinkler Output (GPM)	Total Number of Sprinklers	Maximum Number Used	Total Sprinkler Output (CFS)
N/A					

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					

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					

13. Pivot Information:

Manufacturer	Maximum Wetted Radius	Operating PSI	Total Pivot Output (GPM)	Total Pivot Output (CFS)
N/A				

E. Storage

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

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 **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
Steel	320,000	Above
Steel	500,000	Above

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**

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**

H. Additional notes or comments related to the system:

None

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	**10/30/1995**		
Begin construction (A)	**Not specified**	**N/A**	**N/A**
Complete construction (B)	**Not specified**	**N/A**	**N/A**
Complete application of water (C)	**10/1/2018**	**Prior to 10/1/2018**	**Full beneficial use of water**

* 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? **NO**

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? **YES**

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

b. What month was the initial measurement to be taken in?

N/A

c. Was the measurement submitted to the Department? **YES**

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

Date of Measurement	Measurement Made By	Method	Measurement
N/A			

4. Annual Static Water Level Measurements:

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

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? **NO**

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

6. Measurement Conditions:

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

If "NO", items b through f relating to this section may be deleted.
Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion or appropriation.

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

c. Meter Information

POD/POA Name or #	Manufacturer	Serial #	Condition (working or not)	Current Meter Reading	Date Installed
POA 2 – School Well	**Optiflex-IP68**	**S1110231**	**working**	**262479 x 100gal**	**2010**
POA 3 – Jones Well	**Krhone-Holland**	**32132**	**working**	**622.196x1000 gal**	**2001**

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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? **YES**

d. Was a Well Identification Number (Well ID tag) assigned and attached **YES**

to the well?

Well ID #	Date Attached To Well
POA 2 L-11032	**6/1997**
POA 3 L-11031	**5/1997**

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 A	**Map**
Attachment B	**Water Right**
Attachment C	**Well Logs**

SECTION 7

CLAIM OF BENEFICIAL USE MAP

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

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

The point of diversion, visible system components, and the place of use were visited during the site inspection. The location of the point of diversion and the extent of the place of use were obtained from a field survey completed during the site inspection and an aerial photo. The map was created using AutoCAD software and spatial datasets obtained from Oregon Water Resources Department (OWRD), Grant County, Bureau of Land Management (BLM), United States Geological Survey (USGS), and ESRI. Additional data and information specific to the City and the use of water under the permit described in this Claim of Beneficial Use report were obtained from the City.

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
- N/A 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
- N/A 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

ATACHMENT A

MAP

ATACHMENT B

WATER RIGHT

STATE OF OREGON

COUNTY OF GRANT

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

CITY OF MT. VERNON
PO BOX 647
MT VERNON, OREGON 97865

(541) 932-4688

The specific limits for the use are listed below along with conditions of use.

APPLICATION FILE NUMBER: G-14194

SOURCE OF WATER: THREE WELLS IN JOHN DAY RIVER BASIN

PURPOSE OR USE: MUNICIPAL USE

RATE OF USE: 0.67 CUBIC FOOT PER SECOND

PERIOD OF ALLOWED USE: YEAR ROUND

DATE OF PRIORITY: OCTOBER 30, 1995

POINT OF DIVERSION LOCATION: SW 1/4 SW 1/4, SE 1/4 SW 1/4, SECTION 21, NE 1/4 NE 1/4, SECTION 28, T13S, R30E, W.M.; WELL A - 20 FEET SOUTH AND 90 FEET WEST FROM THE NE CORNER OF SECTION 28; WELL B - 70 FEET NORTH AND 1040 FEET WEST FROM THE S 1/4 CORNER OF SECTION 21; WELL C - 70 FEET NORTH AND 594 FEET EAST FROM THE SW CORNER OF SECTION 21

THE PLACE OF USE IS LOCATED AS FOLLOWS:

WITHIN THE CITY OF MT VERNON SERVICE AREA

Measurement, recording and reporting conditions:

A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order.

B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

C. The Director may require the permittee to keep and maintain a record of the amount (volume) of water used and may require the permittee to report water use on a periodic schedule as established by the Director. In addition, the Director may

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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. The Director may provide an opportunity for the permittee to submit alternative reporting procedures for review and approval.

The water user shall develop a plan to monitor and report the impact of water use under this permit on water levels within the aquifer that provides water to the permitted well(s). The plan shall be submitted to the Department within one year of the date the permit is issued and shall be subject to the approval of the Department. At a minimum, the plan shall include a program to periodically measure static water levels within the permitted well(s) or an adequate substitute such as water levels in nearby wells. The plan shall also stipulate a reference water level against which any water-level declines will be compared. If a well listed on this permit (or replacement well) displays a total static water-level decline of 25 or more feet over any period of years, as compared to the reference level, then the water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s). Such action shall be taken until the water level recovers to above the 25-foot decline level or until the Department determines, based on the water user'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.

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.

The wells for this use shall be developed to produce water from a confined aquifer in a consolidated formation and constructed in a manner to effectively seal off any shallow groundwater which may be in direct hydraulic connection with the John Day River. The wells shall be set back a minimum of 500 feet from the John Day river or any surface water bodies hydraulically connected to the John Day River.

STANDARD CONDITIONS

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

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

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.

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.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

Actual construction of the wells shall begin within one year from permit issuance and shall be completed on or before October 1, 1998. Complete application of the water to the use shall be made on or before October 1, 1999.

Issued June 25, 1996

for Martha O. Pagel, Director
Water Resources Department

ATACHMENT C

WELL LOGS

gran 50098

RECEIVED

JUN 30 1997

WATER RESOURCES DEPT.
SALEM, OREGON

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

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

(START CARD) # 91102

(1) OWNER: Well Number L11032
Name City of Mt. Vernon
Address P.O. Box 649 199 West Main
City Mt. Vernon State Ore. Zip 97865

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

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval [ ] Yes [X] No Depth of Completed Well 165' ft.
Explosives used [ ] Yes [X] No Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
18"	0	195	cement grout	0	112	13 yards

How was seal placed: Method [ ] A [ ] B [X] C [ ] D [ ] E
[ ] Other
Backfill placed from ____ ft. to ____ ft. Material ____
Gravel placed from 112 ft. to 195 ft. Size of gravel #6 x 9

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	12"	+2	112	.375	[X]	[ ]	[X]	[ ]
	8"	110'	115	.344	[X]	[ ]	[X]	[ ]
	8"	155'	165	.344	[X]	[ ]	[X]	[ ]
					[ ]	[ ]	[ ]	[ ]
Liner:					[ ]	[ ]	[ ]	[ ]
					[ ]	[ ]	[ ]	[ ]

Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS:
[ ] Perforations Method Johnstone
[X] Screens Type Wire wrap. Material ____

From	To	Slot size	Number	Diameter	Telescope size	Casing	Liner
115	155'	.040		8"		[X]	[ ]
						[ ]	[ ]
						[ ]	[ ]
						[ ]	[ ]
						[ ]	[ ]

(8) WELL TESTS: Minimum testing time is 1 hour
[X] Pump [ ] Bailer [ ] Air [ ] Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
75	60'		4 hr.

Temperature of water 58 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 Grant Latitude ____ Longitude ____
Township 13 N or (S) Range 30 (E) or W. WM.
Section 21 SW 1/4 SW 1/4
Tax Lot 1500 Lot ____ Block ____ Subdivision ____
Street Address of Well (or nearest address) Beside Mt. Vernon School

(10) STATIC WATER LEVEL:
35' ft. below land surface. Date 5/31/97
Artesian pressure ____ lb. per square inch. Date ____

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

From	To	Estimated Flow Rate	SWL
all Gravel	& Below	36'	

(12) WELL LOG:
Ground Elevation ____

Material	From	To	SWL
Topsoil	0	1	
gravel + Boulders	1	17	
Gravel + Brn Clay	17	55	
Tan Sandstone + Clay	55	82	
Brn Sandstone, Sand + Gravel	82	103	
Greenish Sandstone + Gravel	103	107	
Blue Clay + Sand + Gravel	107	110	
Sand + Gravel	110	151	
Blue Clay	151	153	
Sand + Gravel	153	155	
Blue + Brn Clay	155	195	

Received
JUL 11 2024
OWRD

Date started 5-15-97 Completed 6-6-97

(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 1505
Signed ____ 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.
WWC Number 1506
Signed ____ Date ____

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

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JUL 11 2024
OWRD

gran 50092

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MAY 16 1997
WATER RESOURCES DEPT.
SALEM, OREGON

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

(START CARD) # 76153

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

(1) OWNER: Well Number LL1031
Name [redacted] City of Mt Vernon
Address Box 647 199 West Main
City Mt Vernon State OR Zip 97865

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

(3) DRILL METHOD:
☐ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☒ Other REVERSE ROTARY

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 182 ft.
Explosives used ☐ Yes ☒ No Type ____ Amount ____

HOLE Diameter	From	To	Material	SEAL From	To	Sacks or pounds
12"	0	235	cement grout	8	120	16 yards

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☐ Other Pumped In Grout Pump
Backfill placed from ____ ft. to ____ ft. Material ____
Gravel placed from 120 ft. to 235 ft. Size of gravel 3/4"

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	12"	+1.5	120	.375	☒	☐	☒	☐
	8"	115	122	.322	☒	☐	☒	☐
	8"	122	182	.322	☒	☐	☒	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS: Johnstone
☐ Perforations Method ____
☒ Screens Type Wire Wrap Material SS

From	To	Slot size	Number	Diameter	Telescoping Casing	Liner
122'	182'	Wire Wrap		8"	☒	☐
					☐	☐
					☐	☐
					☐	☐
					☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
350	80'		4 hr.

Temperature of water 58° 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 Grant Latitude ____ Longitude ____
Township 13 N or S Range 30 E or W. WM.
Section 21 SW 1/4 SW 1/4
Tax Lot 2300 Lot ____ Block ____ Subdivision ____
Street Address of Well (or nearest address) Hwy 26
Milepost 153.61

(10) STATIC WATER LEVEL:
21' 4" ft. below land surface. Date 5-8-97
Artesian pressure ____ lb. per square inch. Date ____

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

From	To	Estimated Flow Rate	SWL
All gravels Below 21' 4"			

(12) WELL LOG:
Ground Elevation ____

Material	From	To	SWL
Top Soil	0	5	—
Sand gravel, Boulders	5	18	—
Brown Clay w/ Embedded gravel	18	22	21' 4"
Sand Gravel, Boulders	22	32	21' 4"
Brown Clay, imbedded rock	32	46	" "
Gravel, Broken rock	46	73	" "
Clay Stone	73	76	" "
Sand, gravel, clay streaks, sandstone	76	100	" "
Gray Sand, Sandstone	100	120	" "
Brn - coarse gray sand	120	126	" "
Gray hard Clay stone	126	127	" "
Fine-coarse gray stone sand	127	132	" "
Fine-coarse, Brown/red sand, gravel	132	148	" "
Gray clay, gravel, mixed	148	150	" "
Sand, gravel, brown	150	154	" "
Brown/red clay, sand, gravel	154	171	" "
Sand, gravel, Broken rock	171	185	" "
Gravel, Broken rock, Broken Basalt	185	190	" "
Sand, gravel, Broken rock, Stream clay	190	216	" "
Gravel, Broken rock, Basalt	216	235	" "

Date started 4-12-97 Completed ____

(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 1505
Signed [signature] Date 5/14/97

(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.
WWC Number 1506
Signed [signature] Date 5/14/97

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

GeoEngineers
8019 W Quinault Ave. Suite 201
Kennewick, WA 99336
509.209.2839

July 8, 2024

Mr. Gerry Clark
Water Rights and Adjudications Division
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301-1271

Subject: **Claim of Benneficial Use for Permit G-12576 (Application G-14194)**

Mr. Clark

Find enclosed with this letter the Claim of Beneficial Use (COBU) report for Permit G-12576, accompanied by a check in the amount of $230 for payment of the COBU submittal fee. Please do not hesitate to contact me at 509.979.0332 with questions about the enclosed COBU report.

Respectfully submitted,

Jon Travis, RG, CWRE
GeoEngineers, Inc.

Enclosures:
Claim of Beneficial Use for Permit G-12576
Check in the amount of $230