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



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

001 2 3 2024

Heceived by OWRD Received by Overse of \$230 must accompany this form for any Transfer final orders including a water right with a priority date of July 9, 1987, or later. OCT 2 3 2024

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

Salem, OR

A separate form shall be completed for each transfer.

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

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

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

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

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

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

https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx

SECTION 1 **GENERAL INFORMATION**

Type of Authorized Change

This Claim is being submitted for a transfer where the only authorized change was a change in point(s) of appropriation or additional point(s) of appropriation, or a combination of both. YES NO If additional changes were authorized, you will need to select a different form.

		Rece	eived by OW	Salem, OR du
1. File Information			OCT 2 3 2024	
APPLICATION #				0C1 2 3 2024
T-12917		0	Salem, OR	Received by OWRD
2. Property Owner (current o	wner information)			
APPLICANT/BUSINESS NAME		PHONE NO.		ADDITIONAL CONTACT NO.
C & E Brentano Family LP		(503) 932	-2371	
Address				
5009 Davidson Rd. NE				
Сіту	STATE	ZIP	E-MAIL	
St. Paul	OR	97137	danb@stpa	ultel.com
				1
APPLICANT/BUSINESS NAME OTHER	PROPERTY OWNER	PHONE NO		ADDITIONAL CONTACT NO.
RD Farms Inc.		(503) 633	-4887	
ADDRESS				
4608 Davidson Rd. NE				
Сіту	STATE	ZIP	E-MAIL	
St. Paul If the current property owner	OR	97137		
assignment be filed with the D 3. Transfer holder of record (TRANSFER HOLDER OF RECORD			-	
C & E Brentano Family LP				
ADDRESS 5009 Davidson Rd. NE				
CITY	STATE	ZIP		
St. Paul	OR	97137		
4. Date of Site Inspection:	UN	3/13/		
3/19/2024			with the surface	
5. Person(s) interviewed and	the second s			and the second
NAME	DATE		ASSOCIATION WITH	H THE PROJECT
Dan Brentano	3/19/2024	Owner (B	and the second se	
Steve Davidson	8/2/2024	Owner (R	D Farms)	
6. County:				
Marion				
7. If any property described in identify the owner of record f				xcluded from this report,
OWNER OF RECORD				
Address				
Сіту	STATE	ZIP		

Add additional tables for owners of record as needed

SECTION 2

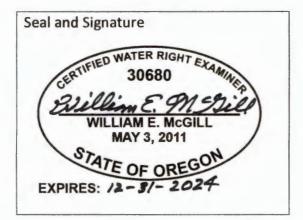
SIGNATURES

Received by OWRD

Salem, OR

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 William E. McGill		PHONE NO (503) 510	
ADDRESS 15333 Pletzer Rd. SE			
Сіту	STATE	ZIP	E-MAIL
Turner	OR	97392	willmcgill.surveying@gmail.com

Transfer Holder of Record Signature or Acknowledgement

Each transfer 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
Carol M. Brentano	Carol MBrentano	Partner	9/4/2024
H. Para .	Steve DAUIDSON	Pres	10/22/24

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CLAIM DESCRIPTION

SECTION 3

Salem, OR

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

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

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	Well Tag# (IF applicable)	Source (If Listed in Transfer Final Order)
APOA/POA 3	MARI 1243	No well tag	Mission Creek
APOA/POA 4	MARI 1336	No well tag	Mission Creek
RD POA 5	MARI 1338	No well tag	Willamette River

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

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

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

CASING	CASING	TOTAL	COMPLETION	COMPLETION	WHO THE WELL	WELL DRILLED
DIAMETER	DEPTH	DEPTH	DATE OF	DATES OF	WAS DRILLED FOR	ВҮ
			ORIGINAL WELL	ALTERATIONS		

See attached well logs.

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

2. Variations:

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

If yes, describe below.

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

RD POA 3 and RD POA 4 were not developed.

3. Claim Summary:

New or Additional POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
APOA/POA 3	2.37 cfs	2.60 cfs*	**
APOA/POA 4	0.60 cfs	2.14 cfs*	**
RD POA 5	0.02 cfs	2.98 cfs*	**

*All POAs authorized for other water rights in addition to T-12917

****System not running at time of site inspection.**

SECTION 4

SYSTEM DESCRIPTION

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

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

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

APOA/POA 3

A. POA System Information

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

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Layne & Bowler	10RM	D 9715	Turbine		8″
Pump Company					

2. Motor Information

US Electrical Motors

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
60	60	22'	-12' avg.	2.60

4. Provide pump calculations:

Q = (60*7.04) / (152.4+10) = 2.60 cfs

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
The second s		OBSERVED	(IN CFS)
System not running at	time of site inspection.		

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

60

YES NO

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B. Groundwater Source Information (Well and Sump)

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



C. Additional notes or comments related to the system:

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

APOA/POA 4

A. POA System Information

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

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE
General Electric	5K62481H4A		Turbine		6″

2. Motor Information

General Electric	50

3. Theoretical Pump Capacity

Horsepower	Operating PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIET FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
50	55	36'	-11' avg.	2.14 cfs

4. Provide pump calculations:

= (50*7.04) / (139.7+25) = 2.14 cfs		

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
	ann an ann an Saoine an Air ann an Saoine an Air ann an Martana an Air ann an Air ann an Air ann an Air an Air	OBSERVED	(IN CFS)
System not running at	time of site inspection		

System not running at time of site inspection.

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

Received by OWRD

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Salem, OR

B. Groundwater Source Information (Well and Sump)

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



C. Additional notes or comments related to the system:

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

RD POA 5

A. POA System Information

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

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
Newell			Turbine		

2. Motor Information

MANUFACTURER	HORSEPOWER
Newell	60

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
60	60	40'	0'	2.2 cfs

4. Provide pump calculations:

= (60*7.04) / (152.4+40) = 2.2 cfs		

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
		OBSERVED	(IN CFS)
		anna a bha an a na ada ann an an ann anna anna a	a the law of the special design and state of the second state of the second state of the state of the second state of the seco

System not running at time of site inspection.

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

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Salem, OR

B. Groundwater Source Information (Well and Sump)

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

YES NO

C. Additional notes or comments related to the system:

This well belongs to the neighbor (RD Farms Inc.) and was only authorized for the following portion of former Certificate 40094: 4S 2W 29 NENW 1.1 4S 2W 29 NWNW 2.7

SECTION 5

CONDITIONS

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

1. Time Limits:

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

	DATE FROM TRANSFER	DATE THE NEW AND/OR ADDITIONAL POA(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	12/27/2021	
COMPLETENESS DATE FROM ORDER (C)	10/1/2025	May 2022

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

2.	ls t	there an extension final order(s)?	YES	NO
3.	Me	easurement Conditions:		
		es the transfer final order, or any extension final order require the installation of a approved measuring device?	a meter YES	or
4.	Re	cording and reporting conditions		
a.	ls t	the water user required to report the water use to the Department?	YES	NO
5.	Oth	ner conditions required by the transfer final order or extension final order:		
	a.	Were there special well construction standards?	YES	NO
	b.	Was submittal of a ground water monitoring plan required?	YES	NO
	c.	Other conditions?	YES	NO
		" to any of the above, identify the condition and describe the water user's actions y with the condition(s):	to	

SECTION 6

ATTACHMENTS

ATTACHMENT NAME	DESCRIPTION	
Well Logs (x3)	APOA/POA 3 MARI 1243 (1 pg.), APOA/POA 4 MARI 1336 (2 pgs.), RD POA 5 MARI 1338 (1 pg.)	
Pictures (x6)	Taken at 3/19/2024 site inspection	

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

SECTION 7

CLAIM OF BENEFICIAL USE MAP

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

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

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

Survey method used was aerial photo provided by Maxar Technologies. Source Date: 4/29/2023

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.)

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

G3088, G235 APOA & POA **MARI 1243** NOTICE TO WATER WELL CONTRA The original and first copy of this report are to be filed with the ATER WELL REI 4/20-20 Well No. . STATE ENGINEER, SALEM, OREGON within 30 days from the date of well completion. EE OF OREGON 5(Please type or print) STATE ENGINEER No. MAY ENGINEER (11) WELL TESTS. STATE Drawdown is amount water level is lowered below static level (1) OWNER CREGON 1. 178.4 Was a pump test made? Yes [] No If yes, by whom? Name Yield: 2400 gal./min. with 80 ft. drawdown after hrs. Address 18 93 700 ... 1.0 (2) LOCATION AMH 3088 OF WELL: Bailer test 4% gal./min. with ft. drawdown after hrs. Count Driller's well number Artesian flow g.p.m. Date W.M. SW X Section JA т. 45 R. Temperature of water Was a chemical analysis made? 🗌 Yes 🔲 No Bearing and distance from section or subdivision corner (12) WELL LOG: Λ Diameter of well below casing Marca 260 de Depth drilled ft. Depth of completed well 15 Formation: Describe by color, character, size of material and structure, and show thickness of aguifiers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation. MATERIAL FROM TO (3) TYPE OF WORK (check): 2 0 New Well Abandon Deepening Reconditioning OF 2 15 donment, describe material and procedure in Item 12. 15 24 24 2 (5) TYPE OF WELL: (4) PROPOSED USE (check): 38 S Driven Rotary Domestic 🖸 Industrial 🔂 Municipal 🔲 7 55 Cable Jetted È Irrigation 🗊 Test Well 🔲 Other Dug ì Bored 7: 71 73 94 (6) CASING INSTALLED: Threaded [] Welded 145 ft. Gage . 200 ft. to .. " Diam. from 98 0 158 . ft. Gage 1 250 " Diam. from ft. to ... 158 ft. Gage 1375 15 7 ft. to .. 20 " Diam, from 13.8 (7) PERFORATIONS: Perforated? Yes D No 1 156 15 asses Type of perforator used Bary Size of perforations in by 146- Low perforations from 86 106 ft. to ft. 240 perforations from . 116 136 -44 RD me perforations from 216 136 Received ft perforations from 2 3 2024 perforations from ft. to ft. (8) SCREENS: Well screen installed? [] Yes [] No 11-Manufacturer's Name .. Model No. Slot size tt. to ft Set from _ Work started / 2- 3 - 6419 . Completed 19 Slot size ... Set from . ft. to . Diam. 16 Date well drilling machine moved off of well (9) CONSTRUCTION: (13) PUMP: Well seal-Material used in seal ... Manufacturer's Nan Depth of seal ______ ft. Was a packer used? H.P. Type: 24 Diameter of well bore to bottom of seal in. Water Well Contractor's Certification: Were any loose strata cemented off? I Yes M No Depth Was a drive shoe used? I Yes 🖸 No This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Was well gravel packed? A Yes D No Size of gravel: 2 156 Gravel placed from Ď ft. to Did any strata contain unusuable water? 🗌 Yes 🗌 No Type of water? depth of strata Address-Method of sealing strata off 2 Drilling Machine Operator's Litense No. (10) WATER LEVELS: [Signed] Static level a ft. below land surface Date Artesian pressure lbs. per square inch Date Contractor's License No.3. 7. Date

(USE ADDITIONAL SHEETS IF NECESSARY)

MARI 1356 CEIVEN NOTICE TO WATER WELL CONTRA The original and first copy of this report are to be filed with the JUL 20 TER WELL REPORT 2w-29 E State Well No. STATE ENGINEER, SALEM, OREGON TALE ENGINEATE OF OREGON G-4171 within 30 days from the date SALEM, OREGON SALEM, OREGON SALEM. OREGON STILL OR CON STILL State Permit No. . Drawdown is amount water level is lowered below static level (11) WELL TESTS: (1) OWNER: Was a pump test made? [] Yes [] No If yes, by whom? Iame 1500 86 gal./min. with ft. drawdown after hrs. Yield: Address 12.20 -00 (2) LOCATION OF WELL: 40 gal./min. with 49 Ballon test 5 - ft. drawdown after hrs County Driller's well number g.p.m. Date Artesian flow 1/4 Section 29 T. 45 21 R. W.M. Temperature of water 34 Was a chemical analysis made? [] Yes [] No Bearing and distance from section or subdivision corner (12) WELL LOG: Diameter of well below casing 2 Depth drilled /58 ft. Depth of completed well ker met Formation: Describe by color, character, size of material and structure, and show thickness of aguifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation. FROM MATERIAL TO (3) TYPE OF WORK (check): Was 14 Reconditioning New Well Deepening Abandon MI andonment, describe material and procedure in Item 12. 14 with (5) TYPE OF WELL: (4) PROPOSED USE (check): Rotary Driven Domestic 🗌 Industrial 🗋 Municipal Cable Ľ Jetted Irrigation X Test Well [] Other Dug Bored 154s. (6) CASING INSTALLED: Threaded , D Welded 12-" Diam. from # 18 158/34. Gage 1 0 8 " Diam. from 91 ft. Gage , 250 0 ft to " Diam. from ft. to ft. Gage (7) PERFORATIONS: Perforated? Yes [] No Type of perforator used Actra 3/2 Size of perforations in. by 118-4.8.0 perforations from . Fit to 155 ft. ft. to perforations from ft. perforations from ft to perforations from ft. to ft. 1 M OWH ft. perforations from ft to (8) SCREENS: Well screen installed? [] Yes [] No OCI 2 3 2024 Manufacturer's Name Model No. 1 Salem Slot size ... Set from .. ft. to -13 -6157 -20 Work started Completed __ Set from .. Diam. Slot size ft. to ft Date well drilling machine moved off of well (9) CONSTRUCTION: (13) PUMP: Bentonit Well seal-Material used in seal . Manufacturer's Name (2 . ft. Was a packer used? Wet H.P. 50 Depth of seal _____ Type: 12 in Diameter of well bore to bottom of seal Water Well Contractor's Certification: Were any loose strata cemented att? I Yes the Depth Was a drive shoe used? [] Yes [] No This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief Was well gravel packed? Dres [No Size of gravel: Gravel placed from 11. 10 -154 NAME / Did any strata contain unusable water? Dyes the depin d strata Addres Type of water? Method of sealing strata off Drilling Machine Operator's Ligense No. (10) WATER LEVELS: ft. below and surface Date 6-10-67 [Signed] Static level lbr. persquare inch Date Artesian pressure Contractor's License No Date (USE ADDITIONAL SHEETS IF NECESSARY)

O. BOX 19

POA4

PECEIVE

UN.

JUL 20 1967

STATE ENGINEER

CALEM. OREGON

THOME BET4

Marion

1. 1. A.

. T. MILLER

Well Drilling Contractor AUPORA, OREGON

Ted Van Dyke, ST.Paul Ore.

Log Of Well.

0-3surface 3-7 clay 7-35 blue clay 35-68 hard grey clay 68-70 blue clay 70-80 broken clay with sand and water 80-87 grey clay 87-104 soft sandy clay 104-106 broken hard sand 106-111 blue clay 111-123 grey clay with small red sardy streaks 123-139 fine black sand 139-150 coarse black sand ,small gravel 150-152 gravel.

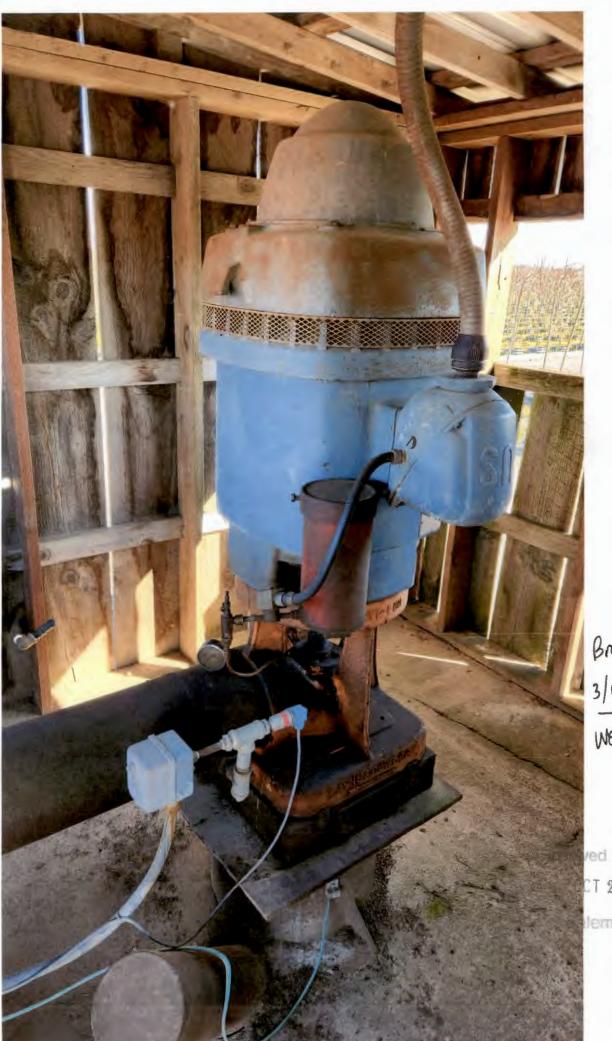
Set 12 inch pire 110 ft. set 152 ft * in. performed 8 in. pipe at 140 to 150 and 95 to 99 ft., graveled between 12 and 8 inch pipe, put 9 yards in. Static water level 21 ft. Drawdown on test 280 gal.per.min. 30 ft. 400 " " " 42 " 600 " " " 57 ".

Received by OWRD

OCT 2 3 2024

Salem OR

Received by OWRD RO POA 5 MARI NOTICE TO WATER WELL CONTRACTOR WATER WELL REPORT 3 2024 The original and first copy of this report are to be 4/2w-29 E filed with the STATE OF OREGON State Well No. 11. 1 STATE ENGINEER, SALEM, OREGON (Please type or print) within 30 days from the date 1968 (Do not write above this line) OR Min. State Permit No. of well completion. G-4330 TEENGINEER 1 CRECON (11) LOCATION OF WELL: (1) OWNER: dion Driller's well number County Marion Name 24 29 т. 45 W.M 2 14 Section R 71 Bearing and distance from section or subdivision corner (2) TYPE OF WORK (check): New Well Deepening Reconditioning Abandon If abandonment, describe material and procedure in Item 12. (3) TYPE OF WELL: (4) PROPOSED USE (check): Ο (12) WELL LOG: Diameter of well below casing Driven Rotary Domestic 🗍 Industrial 🗍 Municipal 🗍 225 Depth drilled 22X Cable Jetted ft. Depth of completed well ft. Bored Irrigation I Test Well [] Other . [] Dur Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, CASING INSTALLED: Threaded D Welded with at least one entry for each change of formation. Report each change - # to 117 2 -0 0 " Diam. from .. in position of Static Water Level as drilling proceeds. Note drilling rates. . ft. Gage .4 ft. Gage 12.50 12 " Diam. from . ft. to 158 Δ MATERIAL SWL From To 158 m. to 159 -3 n Gage . 375 /6 " Diam. from 2 230 1250 150 21 PERFORATION erfora Yes 🗆 No. 90 Type of perforator used 22 Size of perforations 70 94 555 40 1 # to perforations from ft. 150 10 152 ft. perforations from performions from ft. to 2 94-.00 fi 28 138 133 8X8" perforations from 138 133-33 138 148 (7) SCREENS: Well screen installed? Ves 148 154 8:420 DTE or al Manufacturer's Ng 163 Thenstalled outer 154 AL NO 168 70 Diam. Slot size from 33 170 173 Set from ft. to Diam. Slot size ft 172 186 (8) WATER LEVEL: Completed well. 182 -1-11 41 96 118 ft, below land surface Date - 4-18 level 40 218 40 lbs. per square inch Date ian pressure Drawdown is amount water level is (9) WELL TESTS: elow static lev No I yes, by whom? 155-151 Was a pump test made? Wes Work started 19 7 Completed 3-4-20 : 800 95 gal./min. with ft. drawdown after hrs. Date well drilling machine moved off of well 3-4-6 819 . 10 **Drilling Machine Operator's Certification:** This well was constructed under my direct supervision. Mategal./min. with ft. drawdown after **Bailer** test hrs. rials used and information reported above are true to my best knowledge and belief. g.p.m, Date Artesian flow [Signed] Was a chemical analysis made? [] Yes Temperature of water 4 DI No Date Orlilling Mach (10) CONSTRUCTION: Drilling Machine Operator's License No. ... 001 Well seal-Material used Water Well Contractor's Certification: Depth of seal . This well was drilled under my jurisdiction and this report is Ant - the Diameter of well bore to bottom of seal true to the best of my incolledge and belief Were any loose strata cemented off? The No Depth NAME Was a drive shoe used? [] Yes [] No (Ty) or print) Did any strata contain unusable water UYes WNo Address depth of strata Type of water? Method of sealing strata off [Signed] Was well gravel packed? Yes I No Size of gravel: 158 3 Contractor's License No. t. to Date .. Gravel placed from ... (USE ADDITIONAL SHEETS IF NECESSARY)

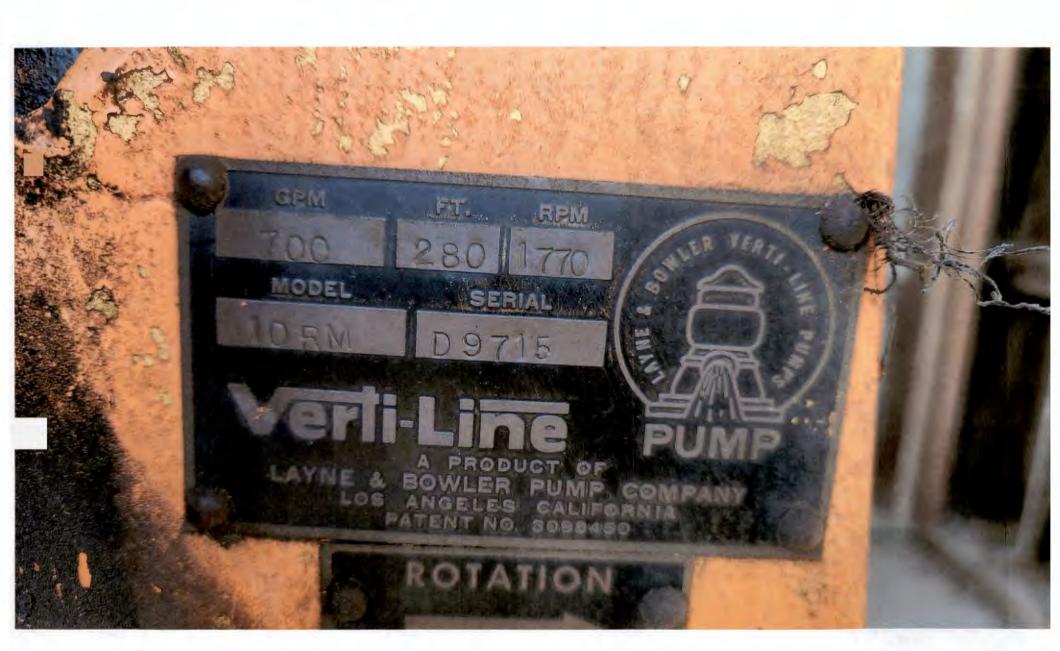


Brentono 3/19/24 Well 3

ved by OWRE CT 2 3 2024 Jerm, OR



Brentano 3/19/24 - Well 3 motor tag



Brentono 3/19/24 - Well 3 pump tag



Brenturo 3/19/24 - Well 4 pump/motor tag



Brentano S/19/24 Mellit Mellit

Salem, OR



Brentano 3/19/24 Well 4