



TELEPHONE (503) 357-5717
FAX (503) 357-5698
WEBSITE: www.stuntzner.com
2137 19th Avenue
Forest Grove, OR 97116

COOS BAY - FOREST GROVE - DALLAS

December 2, 2013

Oregon Water Resources Department
725 Summer Street NE, Ste. A
Salem, OR 97301-1266

RE: Permit G-15789

To Whom It May Concern:

A *Claim of Beneficial Use* has been completed for Permit G-15789. You will find the following enclosed:

1. Check #14429 in the amount of \$175 to cover the review fees associated with this form.
2. The completed and signed *Claim of Beneficial Use* for Permit G-15789.
 - a. Attachment A – Pump Capacity Calculation Sheet
 - b. Attachment B – Claim of Beneficial Use map
 - c. Attachment C – COBU Detail Map
 - d. Attachment D – Well Log

If you have any questions on this submitted material, please contact Dylan Hitner at 503-357-5717 or dylanhitner@stuntzner.com

Sincerely,
Stuntzner Engineering & Forestry LLC

Carol Taylor
Office Assistant

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DEC 04 2013

SALEM, OR

**CLAIM OF
BENEFICIAL USE
for Ground Water Permits
claiming 0.1 cfs or less**



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

**A fee of \$175 must accompany this form for permits
with priority dates after July 8, 1987.**

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:
http://www.oregon.gov/owrd/pages/wr/cwre_info.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.

If you have questions regarding the completion of this form, please call 503-986-0900 and ask for the Certificate Section.

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 http://www.oregon.gov/owrd/pages/mgmt_reimbursement_authority.aspx

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**SECTION 1
GENERAL INFORMATION**

1. File Information

APPLICATION # G-16209	PERMIT # (IF APPLICABLE) G-15789	PERMIT AMENDMENT # (IF APPLICABLE)
---------------------------------	--	------------------------------------

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Countryside Community Church		PHONE NO. 503-925-0689	ADDITIONAL CONTACT NO.
ADDRESS 18810 SW Kruger Road			
CITY Sherwood	STATE OR	ZIP 97140	E-MAIL dave@countrysidechurch.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.***

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

PERMIT HOLDER OF RECORD Countryside Community Church			
ADDRESS 18810 SW Kruger Road			
CITY Sherwood	STATE OR	ZIP 97140	

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Dave Klepinger	1/24/12	Director of Operations

6. County:

7. If any property described in the place of use of the permit final order is excluded from this report, identify the owner of record for that property (ORS 537.230(4)):

OWNER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

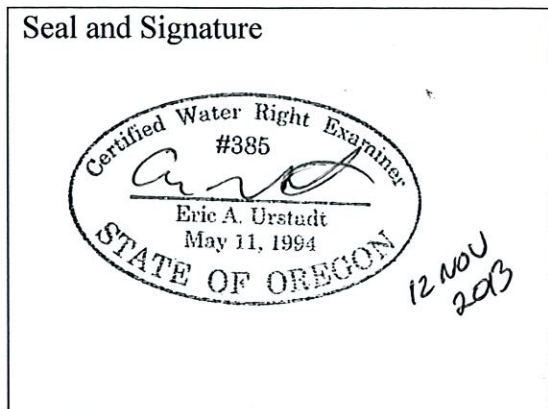
Add additional tables for owners of record as needed

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**SECTION 2
SIGNATURES**

CWRE Statement, Seal and Signature

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



CWRE NAME Eric Urstadt		PHONE No. 503-357-5717	ADDITIONAL CONTACT No.
ADDRESS 2137 19th Avenue			
CITY Forest Grove	STATE OR	ZIP 97116	E-MAIL ericurstadt@stuntzner.com

Permit Holder's 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
	Dave Klepinger	Director of Operations	11/25/13

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SECTION 3

CLAIM DESCRIPTION

1. Point(s) of Appropriation (POA):

POA NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
POA #1	WASH 59308	L64131

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

2 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 #1	Irrigation	Lawn & Landscape	April 1 – October 15	0.01 CFS
Total Quantity of Water Used				0.01 CFS

3. 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 the well using a 3 hp Berkeley submersible pump. Water is pumped through a 2" mainline, which is connected to an extensive system of smaller mainlines, lateral lines, emitters, and driplines.

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).

4. 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.

(e.g. "The permit allowed three points of diversion. 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 0.941 acres of irrigation. The water user only developed 0.92 acres.

5. Claim Summary:

POD / POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
POA #1	0.01	0.25	NA	Irrigation	0.941	0.92

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SALEM, YES

SECTION 4 SYSTEM DESCRIPTION

Are there multiple POAs?

YES NO

If "YES" you will need to copy and complete Sections 4B through 4F for each POA.

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

POA #1

A. Place of Use

Attach Claim of Beneficial Use map.

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (Gov Lot), Quarter-Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, Gov Lot, and QQ.

B. Appropriation and Delivery System Information

Provide the following information concerning the appropriation 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 5 may be deleted.

2. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
Berkeley	2343162604	Unknown	Submersible

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP <small>*If a well, the water level during pumping</small>	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
3	20	0'	34'	0.25

4. Provide pump calculations:

See Attachment A

5. 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)
System not operating			

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

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6. Sprinkler Information

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
*System primarily uses drip tubing.					

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

7. Additional notes or comments related to the system:

A variety of sprinkler types are used in conjunction with the drip lines. The exact number of sprinklers is unknown. The landscape irrigation system is on a timer and generally only irrigates portions of the POU at a given time. Although we are unable to calculate the actual output since a drip system is used, it is expected that if the entire system was operated at once the distribution capacity would exceed the permitted rate.

C. Groundwater Source Information (Well and Sump)

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

Access port is located outside building, next to flow meter. The top of the well casing is approximately 0.9' above ground.

2. 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						

3. In addition to the information requested in item "2" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

Start Card: 155366; Tag: L64131

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

If "NO", items 5 through 7 relating to this section may be deleted.

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D. Storage

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

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

E. 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?

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

NO

F. Gravity Flow Canal or Ditch

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

1. Provide description and calculations if necessary:

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SECTION 5 CONDITIONS

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

1. Time Limits:

Permits and any 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 extension final order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	12/9/2004		
BEGIN CONSTRUCTION (A)	NA	Spring 2005	
COMPLETE CONSTRUCTION (B)	NA		
COMPLETE APPLICATION OF WATER (C)	10/1/2009	November 2013	Pump and irrigation system were installed. Water was used to irrigate the place of use. Water use was metered, recorded, and reported to OWRD.

* 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

3. Initial Water Level Measurements:

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

If "NO", items 3b through 3d relating to this section may be deleted.

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

None Specified

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
3/18/2003	A M Janssen Drilling	Unknown	34' below land surface

4. Annual Static Water Level Measurements:

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

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

b. Provide the month, or months, in which the static water level measurement(s) were to be made:

March

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

d. If "YES", were those measurements submitted to the Department? YES

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

5. Pump Test (Required for most ground water permits prior to issuance of a certificate)

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

If "NO", items 5b through 5e 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? **NO**

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

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

****The Claim 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 6b through 6f 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 appropriation.

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

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POA #1	Badger Meter	32357387	Working	793,445 CF	Unknown, prior to the 2006 March well measurement

If a meter has been installed, items 6d through 6f 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 7b 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. Other conditions? **NO**

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

Water from the well was to be controlled or shut off if (1) There was a water level decline of 3 or more feet per year for five years. (2) There was a total water level decline of fifteen or more feet. (3) A hydraulic decline of 15 or more feet in any neighboring well providing water for a senior right. No water level declines have been observed that exceed the thresholds put forth in this condition.

SECTION 6 ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Attachment A	Pump Calculations
Attachment B	COBU Map
Attachment C	COBU Detail Map
Attachment D	Well Log

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.

Map Basis:
 Washington County Tax Map T2S R2W SEC. 36D
 2012 Aerial Photo from Google Earth
 Countryside Church Irrigation Plans

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 meters and/or measuring devices in relationship to point of diversion or appropriation.

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- 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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Attachment A: Pump Capacity Calculation Sheet

using Department designed formula:

$$(\text{hp})(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

Data Entry (fill in underlined blanks)

HP = 3
Efficiency = 7.04
Lift = 34
PSI = 20

Results Calculated

(hp)(efficiency) = 21.12
Head based on psi = 50.8
Total dynamic head = 84.8
(head + lift)

Pump Capacity = 0.25 feet per second

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SALEM, OR

ATT. D

WASH 59308

MAR 21 2003

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

WATER RESOURCES DEPT
SALEM, OREGON

WELL I.D. # L 64131
START CARD # 155366

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

(1) LAND OWNER
Name COUNTRYSIDE COMMUNITY CHURCH
Address 15025 SW TUALATIN-SHERWOOD RD.
City SHERWOOD State OR Zip 97140

(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 221 ft.
Explosives used Yes No Type Amount

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	155	Bent. chips	0	10	11 sks
			Cem/Bent	10	155	47 sks w/gel
6"	155	221				

How was seal placed: Method A B C D E
 Other Poured slowly into annular
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"	+2	155	250	<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"/>

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

(7) PERFORATIONS/SCREENS:

Perforations Method
 Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
72		221	1 hr.
72		155	"
36		81	"

Pump Bailer Air Flowing Artesian

Temperature of water 53°F Depth Artesian Flow Found
Was a water analysis done? Yes By whom AMJ
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other
Depth of strata 21-90' (SEALED OFF)

(9) LOCATION OF WELL by legal description:
County WASHINGTON Latitude Longitude
Township 2S N or S Range 2W E or W. WM.
Section 36-D NE 1/4 SE 1/4
Tax Lot 600 Lot Block Subdivision
Street Address of Well (or nearest address) 18810 SW KRUGER RD
SHERWOOD, OR 97140

(10) STATIC WATER LEVEL:
34 ft. below land surface. Date 03/18/03
Artesian pressure lb. per square inch Date

(11) WATER BEARING ZONES:

Depth at which water was first found (21) 161

From	To	Estimated Flow Rate	SWL
161	186	10 gpm	34
186	215	12 "	"
215	221	50 gpm	34

(12) WELL LOG:
Ground Elevation

Material	From	To	SWL
Fill mat'l	0	12	
Red-brown clay	12	19	
Decomp red-brown clay	19	21	
Brown/dk.brown claystone	21	65	wb
Black basalt	65	75	{
Gray-brown interbed	75	90	wb
Black basalt	90	121	
Brite red-brown interbed	121	130	
Gray-brown basalt	130	141	
Black basalt	141	150	
Gray-brown basalt	150	161	
Gray-green&brown inter.	161	186	34
Gray-black&brown basalt	186	215	?
Gray-black basalt	215	221	34

Date started 03/12/03 Completed 03/18/03

(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: [Signature] WWC Number 1749 Date 03/18/03

(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: [Signature] WWC Number 5/3 Date 03/18/03

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

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SALEM, OR

CLAIM OF BENEFICIAL USE MAP

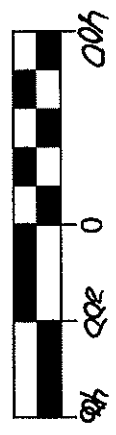
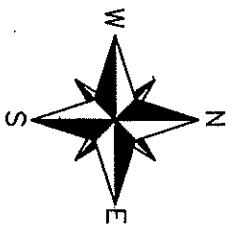
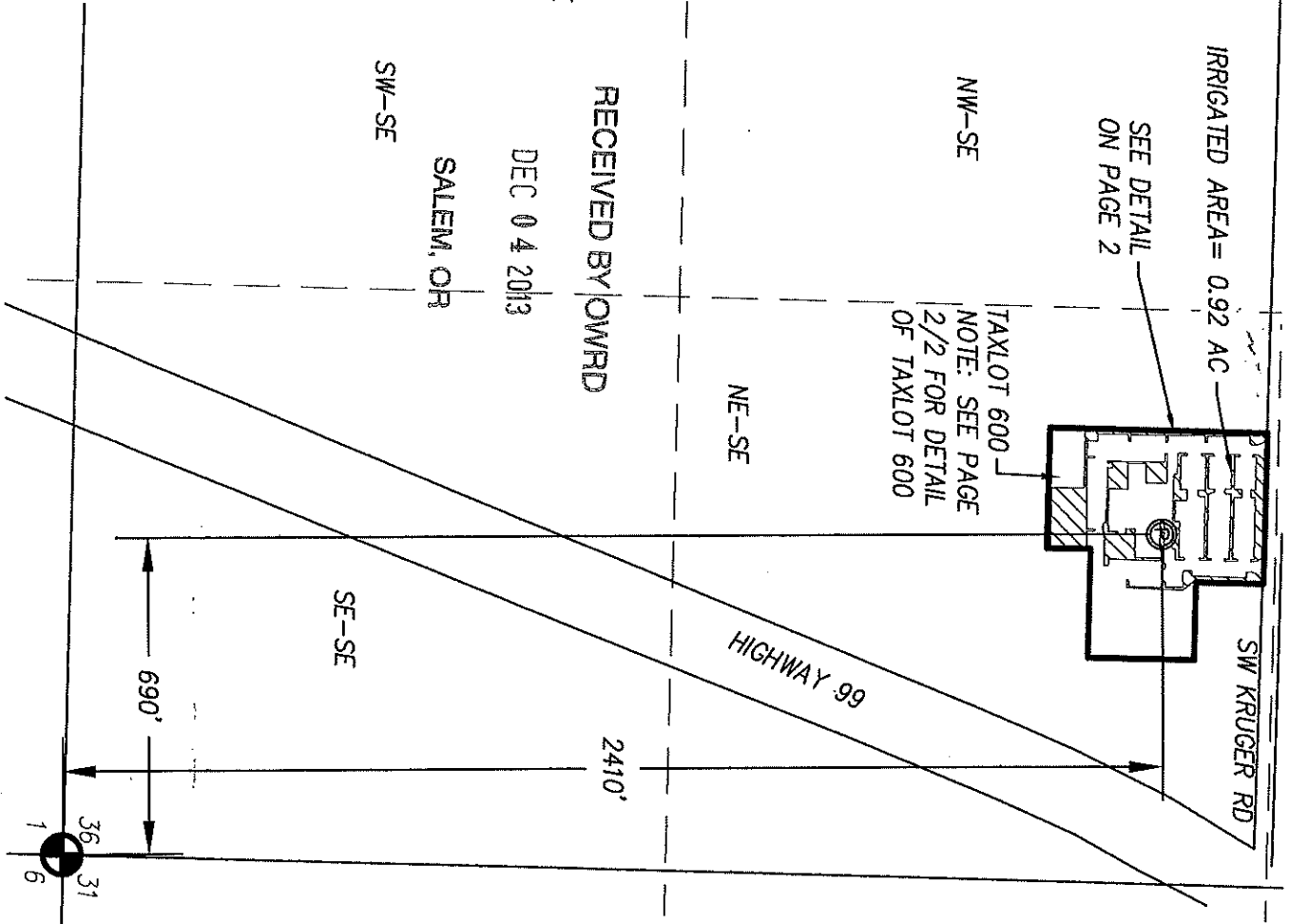
SECTION 36, T2S, R2W, WM
 LOT 101 OF TAX MAP 2N 3 SEC. 36
 WASHINGTON COUNTY, OREGON
 APPLICATION G-16209 (PERMIT G-15789)


PREPARED FOR:
 COUNTRYSIDE COMMUNITY CHURCH
 18810 SW KRUGER ROAD
 SHERWOOD, OR 97140

- LEGEND**
-  POINT OF DIVERSION (WITH METER)
 -  PROPERTY BOUNDARY LINE
 -  1/16TH SECTION LINE
 -  SECTION CORNER
 -  PLACE OF USE

MAP BASES: WASHINGTON COUNTY TAX MAP T2S R2W SEC. 36D
 2012 AERIAL PHOTO FROM GOOGLE EARTH AND COUNTRYSIDE CHURCH IRRIGATION PLANS

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.



Certified Water Right Examiner
 #385

 Eric A. Urstadt
 May 11, 1994
 STATE OF OREGON
 EXPIRES 06/30/2014

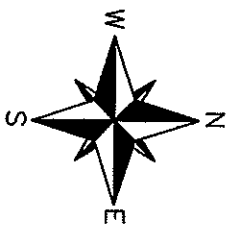
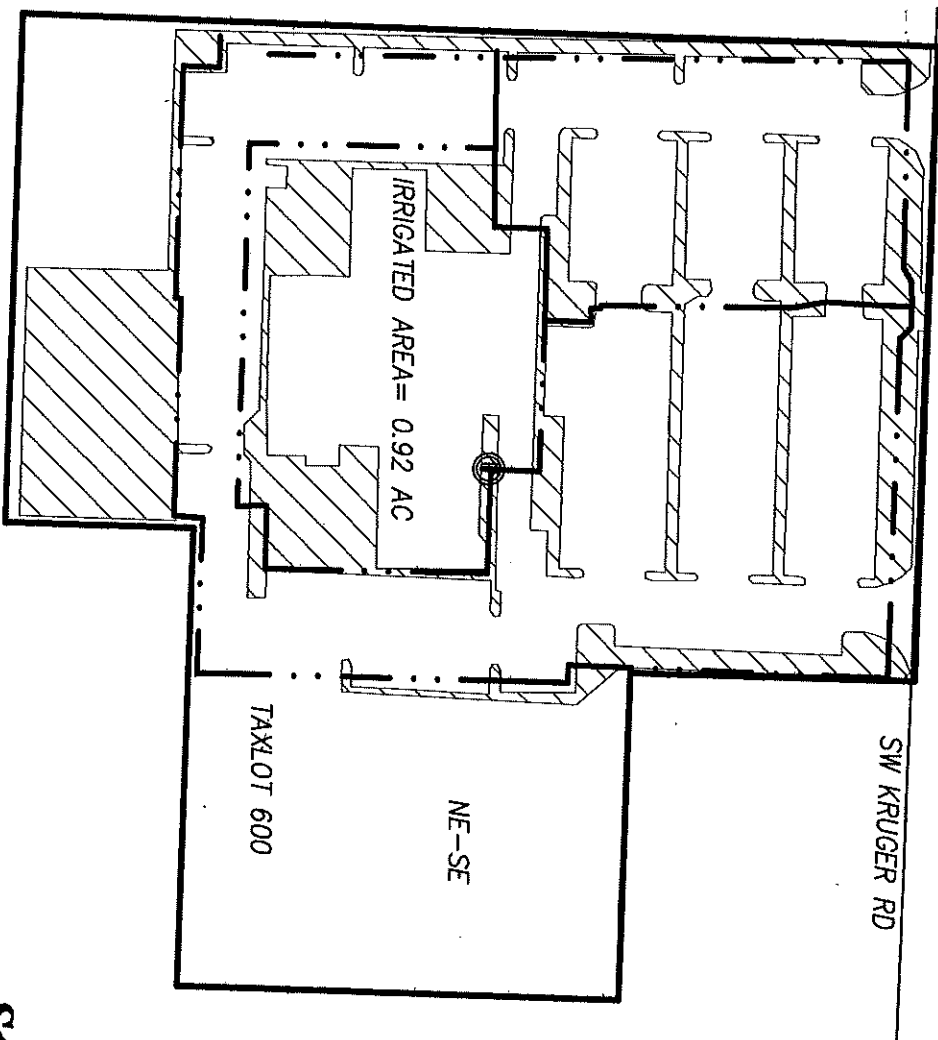


Project: 312-048
 By: Dyan Htner
 Checked by: Eric Urstadt
 Date: November 4, 2013
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CLAIM OF BENEFICIAL USE DETAIL

LEGEND

- Ⓟ POINT OF DIVERSION (WITH METER)
- · — · — MAIN IRRIGATION PIPES
- — — — — PROPERTY BOUNDARY LINE
- ▨ PLACE OF USE



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MAP BASES: WASHINGTON COUNTY TAX MAP 12S R2W SEC. 36D 2012 AERIAL PHOTO FROM GOOGLE EARTH AND COUNTRYSIDE CHURCH IRRIGATION PLANS
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Stuntzner
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Project: 312-048
 By: Dylan Hltner
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