

**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-18542	PERMIT # (IF APPLICABLE) G-18343	PERMIT AMENDMENT # (IF APPLICABLE) T-NA
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Eugene and Andrea Beyer		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS 10750 Edmunson Dr SE			
CITY Salem	STATE OR	ZIP 97317	E-MAIL

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 Beyer Farms c/o Eugene and Andrea Beyer		
ADDRESS 10750 Edmunson Dr SE		
CITY Salem	STATE OR	ZIP 97317

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

July 3, 2024

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Gene Beyer	July 3, 2024	Owner / Operator

6. County

Marion County

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

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



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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

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
<i>Eugene A. Beyer</i>	Eugene A. Beyer		1/7/25
<i>Andrea M Beyer</i>	Andrea M Beyer		1/8/2025

SECTION 3

CLAIM DESCRIPTION

1. Point of appropriation name or number:

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well 1	MARI 9193, 68554	L-133226, L-133601 (per email dated 7-8-2024 from OWRD – Well tag L-133226 should be removed.)

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

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

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
Well 1	Little Pudding River Basin	Pudding 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)
Well 1	Irrigation	Hazelnuts	March 1 through October 31	0.18 cfs
Total Quantity of Water Used				0.18 cfs

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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 Well (MARI 9193, 68554) using a 50 Hp submersible pump. Water is conveyed through above-ground 5-inch steel pipe with a filter and clean-out system before the meter. This meter records all the use from the well under both Certificate 977018 and Permit G-18343. The line then elbows down with a faucet before going underground and connecting to a 5-inch buried PVC mainline. The 5-inch buried PVC mainline then continues east approximately 1, 075 feet and connects to a 4-inch buried PVC mainline. At that point, the line elbows above ground about 3 feet with a faucet, then continues east about 8 feet with a meter to record water use under Permit G-18343 only. The line then angles back down with another faucet and connects back up with the buried 4-inch PVC mainline. The buried 4-inch mainline continues east for approximately 800 feet before turning south and extending nearly to the end of the property.

A 3-inch buried PVC lateral parallels the 4-inch mainline heading south. Extending up from the laterals are sections of 1-inch polyethylene tubing, one per row, with a barbed tee allowing drip lines to be connected running east-west. For the rows of trees in the northeast corner, an additional 3-inch buried PVC lateral extends east where the mainline turned south, connecting to a 2-inch buried PVC lateral heading north to connect driplines running east. Another extension of the lateral extends west below the small area not being irrigated then back up north to allow drip lines to be connected running west to reach the short rows of trees in that section.

The entire place of use is irrigated with the drip system, one line per row, with drip emitters every 30 inches. There are four zones of which only one zone can be irrigated at one time.

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. After field verifying the location of crops being irrigated, the place of use was reduced from the originally authorized acreage.

Original authorized place of use:

8S	1W	6	SWNW	1.9
8S	1W	6	NWSW	5.1
8S	1W	6	SWSW	3.1
8S	2W	1	SENE	1.3
8S	2W	1	NESE	32.1
8S	2W	1	SESE	<u>21.6</u>
Total:				65.1

Revised place of use, with addition of DLC information:

8S	1W	6	SWNW	DLC 62	1.9
8S	1W	6	NWSW	DLC 62	5.0
8S	1W	6	SWSW	DLC 62	2.4
8S	2W	1	SENE	DLC 56	1.3
8S	2W	1	NESE	DLC 56	28.1
8S	2W	1	SESE	DLC 56	<u>18.7</u>
Total:					57.4

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2. The location of Well 1 (MARI 9193) is more correctly placed at:
280 feet south and 1,020 feet west from the SE corner, DLC 55

6. Claim Summary:

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well 1	0.23 cfs	0.18 cfs	0.24 cfs (107.5 gpm)	Irrigation	65.1	57.4

SECTION 4

SYSTEM DESCRIPTION

Are there multiple POAs?

NO

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

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

Well 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
8S	1W	WM	6	SWNW	NA	62	Irrigation	1.9	NA
8S	1W	WM	6	NWSW	NA	62	Irrigation	5.0	NA
8S	1W	WM	6	SWSW	NA	62	Irrigation	2.4	NA
8S	2W	WM	1	SENE	NA	56	Irrigation	1.3	NA
8S	2W	WM	1	NESE	NA	56	Irrigation	28.1	NA
8S	2W	WM	1	SESE	NA	56	Irrigation	18.7	NA
Total Acres Irrigated								57.4	NA

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:

¾ inch plug on the south side of the well in a base plate mounted on top of the well casing.

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 MARI 9193, 68554						

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 MARI 9193, 68554

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

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Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport and apply the water from the point of appropriation to the place of use.

1. Is a pump used?

YES

If "NO" items 2 through item 6 may be deleted.

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Unknown	Unknown	Unknown	Submersible	Unknown	4 inch

3. Motor Information:

MANUFACTURER	HORSEPOWER
Unknown	50 Hp

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)
50 Hp	60 psi	288.9 feet (from permit condition pump test)	65 feet	0.70 cfs

5. Provide pump calculations:

$$Q \text{ Pump} = \frac{(50 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(353.9 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 0.70 \text{ cfs}$$

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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)
6,669,060 gallons	6,669,380 gallons	4 minutes	0.18 cfs (80.0 gpm)

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
5 inch	~ 25 feet	Steel	Above ground
4 inch	~2,450 feet	PVC	Buried
4 inch	~ 14 feet	Steel	Above ground
5 inch	~1,075 feet	PVC	Buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
1 inch	~130 feet	Polyethylene	Above ground and buried
2 inch	~1,080 feet	PVC	Buried
3 inch	~2,200 feet	PVC	Buried

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
NA					

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
30 inches	0.28 gpm per 100 ft	~118,100 feet	29,520 feet	0.18 cfs (82.7 gpm)	None

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)?

NO

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

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.

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H. Additional notes or comments related to the system:

Well also supplies Certificate 77018.

Note:

- at the well head there is a meter recording all the use from this well
- There is also a second meter recording only the water use for Permit G-18343
- Reported use for Certificate 77018 should be the meter reading at the well head minus water use from Permit G-18343

SECTION 5 CONDITIONS

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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	January 2, 2020		
BEGIN CONSTRUCTION (A)	January 2, 2025	January 2, 2020	Well (MARI 9193) construction was completed 7-28-1980
COMPLETE CONSTRUCTION (B)	NA	NA	NA
COMPLETE APPLICATION OF WATER (C)	January 2, 2025	Summer 2023	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)?

NO

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

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?

March

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
NA			

4. Annual Static Water Level Measurements:

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

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

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

March

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

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

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

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**

Certificate 77018 but the Department has determined this pump test was older than 10 years and needed to be redone.

c. Is the pump test attached to this claim? **YES**

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

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**

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c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1 – at the well head recording all use	ARAD - Netafim	16-100007392	Working	21,350,773 gallons (July 3, 2024)	May 2016
Well 1 recording only Permit G-18343	ARAD - Netafim	18-80040429	Working	6,669,380 gallons (July 3, 2024)	April 2019

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 ID #	DATE ATTACHED TO WELL
L-133226	February 2019 (per email dated 7-8-2024 from OWRD – Well tag L-133226 should be removed.)
L-133601	May 2019

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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):

e) Condition:

Prior to using water from any well listed on this permit, the permittee shall ensure that the well has been assigned an OWRD Well Identification Number (Well ID tag), which shall be permanently attached to the well.

Compliance:

Well tag L-133226 is attached to the well casing (per email dated 7-8-2024 from OWRD – Well tag L-133226 should be removed.)

Well tag L-133601 is attached to the well casing

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 – MARI 9193	Well log and driller's notes for MARI 9193 – Well 1
State Water Well Report – MARI 68554	Well log and driller's notes for MARI 68554 – Well 1 alteration
BLM Cadastral Map	BLM Cadastral Map T. 8S. R. 1W. showing DLC and Government Lot locations
BLM Cadastral Map	BLM Cadastral Map T. 8S. R. 2W. showing DLC and Government Lot locations
Pump Test Form Cover Sheet and Pump Test Data Sheet	Pumping Test Results for Well 1 (MARI 9193) conducted June 20, 2024
OWRD email dated July 1, 2024 from Ladeena Ashley regarding well tag	Per the email communication, well tag L-133226 should be removed

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 COBU map was prepared using tax assessor's map 08 2W 01, 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.)

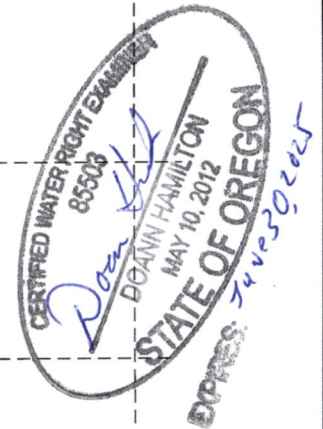
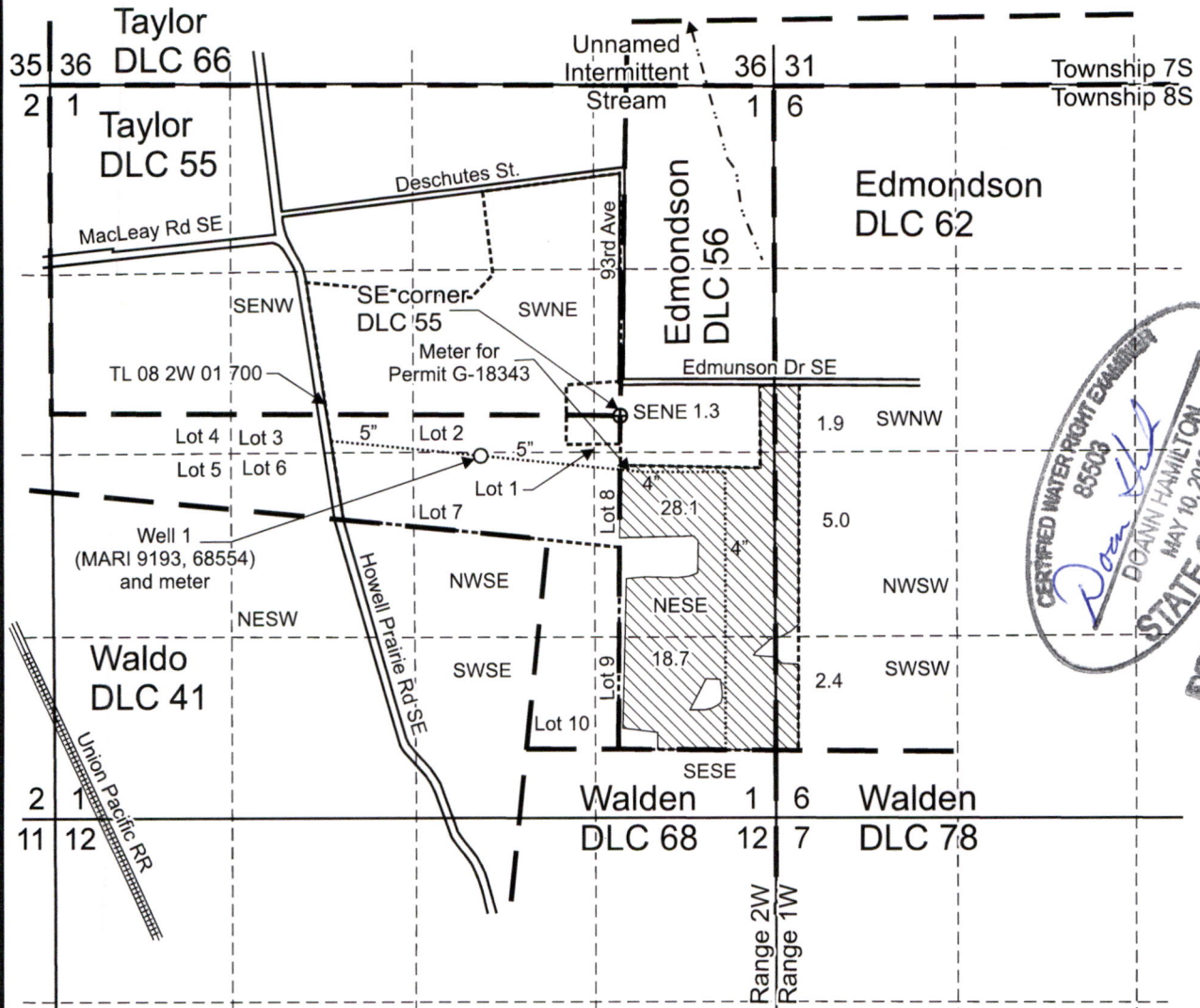
- ☒ Map on polyester film
- ☒ Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- ☒ Township, Range, Section, Donation Land Claims, and Government Lots
- ☒ If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters

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- ☐ 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.8S. R.2W. Section 1 T.8S. R.1W. Section 6, W.M.



Well 1 (MARI 9193, 68554) is located 280 feet south and 1,020 feet west from the SE corner, DLC 55.

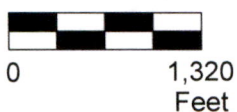
 Area (57.4 Acres) irrigated under Application G-18542, Permit G-18343.

----- Tax lot boundary

— . — Donation Land Claim boundary

..... Water main line

Scale: 1" = 1,320'



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.

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Claim of Beneficial Use Map
Application G-18542, Permit G-18343

Beyer Farms

T.8S. R.2W. Section 1,
T.8S. R.1W. Section 6, W.M.

Pacific Hydro-Geology Inc.

07/2024

WATER WELL REPORT
STATE OF OREGON

RECORDED
MARI 9193
AUG 7 1980
WATER RESOURCES DEPT
SALEM, OREGON

State Well No. 852w-1
State Permit No.

(1) OWNER:

Name HENRY FU
Address 912 S.E. EMIGRANT
City PENDLETON State OR 97801

(2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Air ☒ Driven ☐ Domestic ☐ Industrial ☐ Municipal ☐
Mud ☐ Dug ☐ Irrigation ☒ Test Well ☒ Other ☐
Bored ☐ Thermal: Withdrawal ☐ Reinjection ☐

(4) PROPOSED USE (check):

(5) CASING INSTALLED: Steel ☒ Plastic ☐
Threaded ☐ Welded ☒
" Diam. from +1 ft. to 99 ft. Gauge .250
" Diam. from _____ ft. to _____ ft. Gauge _____

LINER INSTALLED:

" Diam. from _____ ft. to _____ ft. Gauge _____

(6) PERFORATIONS:

Perforated? ☐ Yes ☒ No

Type of perforator used _____

Size of perforations in. by in.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? ☐ Yes ☒ No

Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.

WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☒ No If yes, by whom?

Yield: gal./min. with ft. drawdown after hrs.
" " " " "

Air test 300 + gal./min. with drill stem at 385 ft. 1 hrs.
test X gal./min. with ft. drawdown after hrs.
Artesian flow X g.p.m.

Temperature of water 52° Depth artesian flow encountered X ft.

(9) CONSTRUCTION:

Special standards: Yes ☐ No ☒

Well seal—Material used CEMENT
Well sealed from land surface to 99' ft.
Diameter of well bore to bottom of seal 14" to 25"; 12" to 99'
Diameter of well bore below seal 10 in.
Number of sacks of cement used in well seal 29 sacks
How was cement grout placed? PUMPED TRAMMEL PIPE

Was pump installed? NO Type _____ HP _____ Depth _____ ft.

Was a drive shoe used? ☐ Yes ☒ No Plugs NO Size: location _____ ft.

Did any strata contain unusable water? ☐ Yes ☒ No

Type of Water? _____ depth of strata _____

Method of sealing strata off _____

Was well gravel packed? ☐ Yes ☒ No Size of gravel: _____

Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County MARION Driller's well number 1515
Tax Lot # _____ Lot _____ Blk _____ Subdivision _____
Address at well location: _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 305 ft.
Static level 111 ft. below land surface. Date 7-28-80
Artesian pressure X lbs. per square inch. Date X

(12) WELL LOG:

Diameter of well below casing 10" to 310' - 8" to 395'

Depth drilled 395 ft. Depth of completed well 395 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
RED SOIL	0	2	
YELLOW CLAY	2	15	
BASALT W/CLAY SEAMS	15	130	
HARD BASALT	130	205	
BASALT W/BROWN FRACTURES	205	320	
BLUE UNFRACTURED BASALT	320	341	
BASALT BROWN FRACTURES	341	395	

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Work started 7-21 1980 Completed 7-28 1980
Date well drilling machine moved off of well 7-28 1980

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] East Jones Date 7-29 1980
(Drilling Machine Operator)

Drilling Machine Operator's License No. 158

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name JONES DRILLING CO., INC.
(Person, firm, or company) 29400 Sanham Hwy. (Type or print)

Address Lebanon, OR 97355

[Signed] East Jones (Water Well Contractor)

Contractor's License No. 514 Date 7-29 1980

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report
must be filed with the

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion

SP*12658-690

MARI 9193



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

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Application for
Well ID Number

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Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name (please print): Eugene Beyer and Andrea Beyer

Mailing Address: 10750 Edmunson Dr. SE

City, State, Zip: Salem, OR 97317

Mail Well ID to: ☒ SAME AS ABOVE ☐ In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 8S (North / South) Range: 2W (East / West) Section: 1 NW 1/4 of the SE 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 700 County Marion

GPS Coordinates: _____

Street Address of Well, City: 9122 Aspen LN SE, Salem, OR 97317

If the property had a different street address in the past: Unknown

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation

Date Well Constructed (or property built): 7/28/1980 Total Well Depth: 395' Casing Diameter: 10 inch

Owner at time the well was constructed (if known): Henry Fu Well Report # (if known): MARI 9193

Other Information: _____

SUBMITTED BY (please print): Eugene Beyer

PHONE: 503-510-9823 EMAIL &/or FAX: gbeyerfarms@gmail.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.
Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

2-13-19

Well Report Number:

MARI 9193

Well Identification #:

L-133226

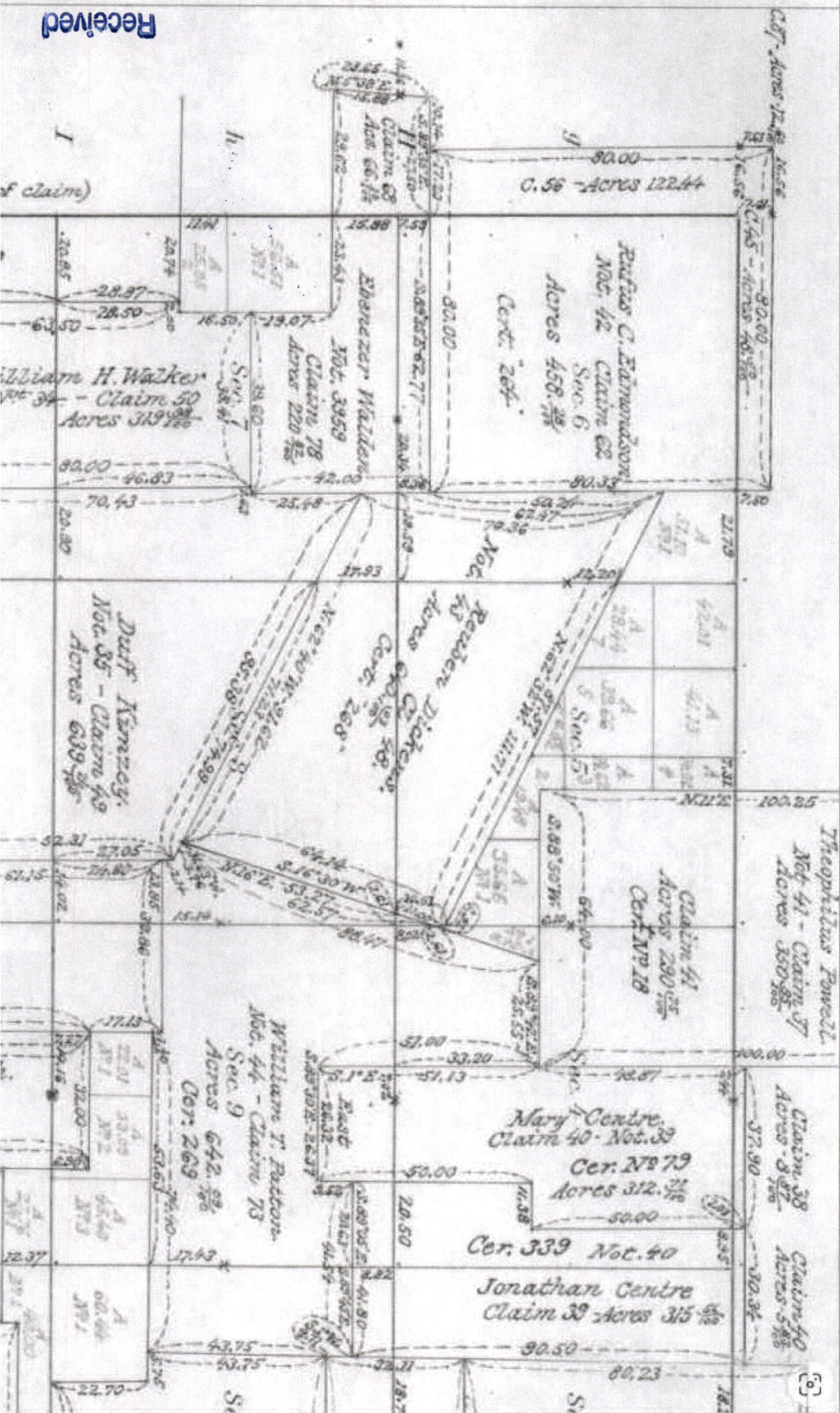
Silverton, OR 97381

ORIGINAL LOG #	MARION	9193
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(as required by ORS 537.765 & OAR 690-205-0210)

Contact Info (optional) _____

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK. Form Version: 0.95



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PUMP TEST FORM
COVER SHEET

OWRD

Owner Information:

OWNER NAME/BUSINESS NAME: Eugene & Andrea Beyer		PHONE No.: 503-510-9823	ADDITIONAL CONTACT No.:
ADDRESS: 10750 Edmunson Dr SE			
CITY: Salem	STATE: OR	ZIP: 97317	E-MAIL:

Pump Test Conducted By (If Different From Owner):

TEST CONDUCTED BY NAME: Daniel D Stadelj	QUALIFICATION: (SELECT) WWC	LICENSE #: 1487
COMPANY: R. Stadelj & Sons, Well & Pump, Inc.	PHONE No.: 503-873-5245	ADDITIONAL CONTACT No.:
ADDRESS: 4385 Stadelj Lane NE		
CITY: Silverton	STATE: OR	ZIP: 97381
E-MAIL: wdi.rsi@gmail.com		

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
MARI 9193 & 68554	L- 133601	Well 1	395	Henry Fu	07/28/1980	06/20/2024

(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)
8S	2W	1	NW/SE	9122 Aspen Lane SE, Salem, OR 97317	(300ft S, 1130ft W from SE	Corner, Taylor DLC 55)

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- 18542	G- 18343	T- NA	NA	<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.

☒ No 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)

☒ No 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.
Well elevation is above the surface water body. Approximate distance: _____ ft.
Approximate elevation difference: _____ ft.

☒ Yes Was the test conducted during normal use of the well?
Please indicate where pumped water was discharged: Irrigation Zones
How far from the pumped well was water discharged? 500+ _____ 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

Water-Level Measurement Method: Electric Tape

Length of air line (if used): _____

*Verify here: { Airline: _____ psi _____ feet.
E-Tape: _____ feet.

*Airline measurements must be verified by an E-Tape measurement

Pressure transducer (if used): _____

Manufacturer: _____ Serial #: _____

Date Last Calibrated: _____ Units: _____

Pump Type: Submersible

HP: 50 Pump set at: 294 feet.

Pump idle time: 16+ Hours

Discharge Measurement Method: Flowmeter

Flowmeter (if used): _____

Manufacturer: Netafim Serial #: Unk

Date Last Calibrated: Unk Units: USG

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 1.5 feet.

Description (e.g., top port of 1 inch port pipe, west side) 1" NPT opening to the dedicated 3/4" sounder tube on the South side of the top of well plate

Time pump turned on: Date 06/20/2024

Time 8:00 AM

Time pump turned off: Date 06/20/2024

Time 12:00 PM

Total pumping time: 4

hours 0 minutes.

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

- ☐ The discharge rate was held constant for the entire pumping phase.
- ☐ The pump was on during the entire pumping phase (≥ 4 hours).
- ☐ The discharge was measured at the start of pumping and at least once every hour during the test.
- ☐ Water levels were measured to an accuracy of 0.1 feet or 0.5 percent.
- ☐ Pre-test static water levels were measured at least three times in the hour before pumping began at no less than 20 minutes apart.
- ☐ Water levels were measured at the specified intervals during the pumping phase of the test for at least four hours (≤ 2 min for the first 10 minutes, ≤ 5 min for 10 – 30 minutes, and ≤ 15 min for the remainder of the test)
- ☐ Water levels were measured at the specified intervals (see above) during the recovery phase of the test for four hours or until 90 percent of the maximum drawdown has recovered.
- ☐ If using an airline, measurements were calibrated with an E-Tape and the depth to water was ≥ 300 feet.
- ☐ The pump test cover sheet was completely filled out and signed.
- ☐ The pumping rate was as close as reasonably possible to the (anticipated) pumping rate during normal use of the well.
- ☐ The well was idle for at least 16 hours prior to the test.
- ☐ The pump test was completed by an acceptably qualified person (Oregon licensed water well constructors; Oregon registered professional geologists or certified engineering geologists; certified water rights examiners; Oregon registered professional engineers; and individuals whose primary occupation involves, wholly or in significant part, pump installation, service, or testing).

*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=1BdwLynsYAPNSQtW330ZjSFZuMscp4Hfi1-1ftsDAAEsMC2_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: _____

DATE: 06/21/2024

OWNER SIGNATURE: _____

DATE: _____

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

OWRD 20200115



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PUMP TEST FORM
DATA SHEET

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WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
MARI 9193 & 68554	L- 133601	Well 1	395	Henry Fu	07/28/1980	06/20/2024

Date	Time	Time Since Pumping Started (min)	Depth to Water Below MP	Discharge Rate (gpm, cfs, gpm)	Phase (Pre- Test, Pumping, Recovery)	Airline or Shut-in Pressure (psi)	Flowmeter Reading (if available)	Comments
06/20/2024	7:20 AM		131.25'	0	Pre-test		020654	
	7:40		131.25'	0	Pre-test		020654	
	8:00		131.25'	0	Pre-test		020654	
	8:02	2 Min	270.10'	312	Pumping			
	8:04	4 Min	276.10'	312	Pumping			
	8:06	6 Min	285.40'	312	Pumping			
	8:08	8 Min	288.40'	312	Pumping			
	8:10	10 Min	288.85'	312	Pumping			
	8:15	15 Min	288.01'	312	Pumping		020659	
	8:20	20 Min	288.25'	312	Pumping			
	8:25	25 Min	288.05'	312	Pumping			
	8:30	30 Min	288.70'	312	Pumping		020664	
	8:45	45 Min	289.50'	312	Pumping		020669	
	9:00	1 Hour	289.75'	312	Pumping		020673	
	9:15	1 H 15 M	289.85'	312	Pumping		020678	
	9:30	1 H 30 M	290.00'	312	Pumping		020682.5	
	9:45	1 H 45 M	290.10'	312	Pumping		020687	
	10:00	2 Hours	290.20'	312	Pumping		020692	
	10:15	2 H 15 M	290.24'	312	Pumping		020697	
	10:30	2 H 30 M	290.33'	312	Pumping		020701	
	10:45	2 H 45 M	290.40'	312	Pumping		020706	
	11:00	3 Hours	290.42'	312	Pumping		020711	
	11:15	3 H 15 M	290.44'	312	Pumping		020715.5	
	11:30	3 H 30 M	290.47'	312	Pumping		020720	
	11:45	3 H 45 M	290.40'	312	Pumping		020725	
	12:00	4 Hours	290.40'	312	Pumping		020729.3	
	12:02		176.50'		Recovery			
	12:04		138.50'		Recovery			
	12:06		135.40'		Recovery			
	12:08		134.85'		Recovery			
	12:10		134.60'		Recovery			
	12:15		134.10'		Recovery			
	12:20		133.85'		Recovery			
	12:25		133.70'		Recovery			
	12:30		133.60'		Recovery			
	12:45		133.30'		Recovery			
	1:00		133.10'		Recovery			90% Recovery

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Doann Hamilton <phgdmh@gmail.com>

Two Well tags App G-18542

ASHLEY Ladeena K * WRD <Ladeena.K.ASHLEY@water.oregon.gov>

Mon, Jul 8, 2024 at 9:43 AM

To: Doann Hamilton <phgdmh@gmail.com>, Gene Beyer <gbeyerfarms@gmail.com>

Hi, Doann,

Hmmm. It only needs one tag.

Mr. Beyer applied for a well ID tag just a month prior to the alteration, and I assigned L-133226. Perhaps he didn't have the tag when the well was altered in 2019, so the driller tagged at completion, as usual.

The easiest fix is to remove L 133226 that I assigned via ID app.

I will remove the well ID application from our system, so only L 133601 is associated with the well.

Please either mail the extra tag back to me (I can use on another well), or destroy it.

Thanks!

Ladeena

Ladeena Ashley

Well ID Program Coordinator ~ Public Service Representative, Well Construction Section

Direct: 971-287-8218



725 Summer St NE Suite A Salem, OR 97301

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