

**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.oregon.gov/OWRD](http://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**

*Received*  
*FEB 05 2025*  
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**1. File Information:**

APPLICATION # <b>G-18884</b>	PERMIT # (IF APPLICABLE) <b>G-18509</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>NA</b>
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>Kevin and Jill Dettwyler and Myron and Diane Kuenzi Family Farms LLC</b>		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS <b>6475 State St</b>			
CITY <b>Salem</b>	STATE <b>OR</b>	ZIP <b>97317</b>	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 <b>Myron and Diane Kuenzi Family Farm LLC</b>		
ADDRESS <b>6475 State St</b>		
CITY <b>Salem</b>	STATE <b>OR</b>	ZIP <b>97317</b>

ADDITIONAL PERMIT HOLDER OF RECORD <b>NA</b>		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

November 7, 2024

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Tyler Kuenzi	November 7, 2024	General Manager

6. County

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

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
<i>Myron Kuenz</i>	MYRON KUENZ	<i>mgr</i>	1/6/25

**SECTION 3**  
**CLAIM DESCRIPTION**

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**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)
<b>Well 3</b>	<b>MARI 69522</b>	<b>L-139138</b>

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)
<b>Well 3</b>	<b>Irrigation</b>	<b>Bare root stock</b>	<b>March 1 through October 31</b>	<b>0.45cfs</b>
<b>Total Quantity of Water Used</b>				<b>0.45 cfs</b>

**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 Well 3 (MARI 69522) using a 25 Hp submersible pump to convey water through approximately 5 feet of 4 inch above ground PVC with a meter before connecting to a filter and heading below ground. The 4-inch below ground PVC heads south to a hydrant then turns west toward Well 2 (MARI 6130). There is a valve by Well 2 separating the use from each well for the appropriate permitted areas. The buried 4-inch PVC mainline continues east and south. At the east end of the mainline, a 2-inch above ground PVC pipe is connected to a hydrant. From this line, two 2-inch PVC lines tee below ground, one for the east field and one for the west field. At the west end of the east field, the 2-inch PVC pipe extends north-south where 5/8-inch tubing can be connected every five feet and extended to the surface with a quick release connection. At the surface, 5/8-inch drip lines with 12-inch spacing can be connected and extended to the east.

This section can also be covered by portable 2-inch laterals connected to the hydrant and laid out north-south along the west side of the east field. From this lateral, additional laterals with impact sprinklers can be attached and extended to the east to cover this field when needed.

This east section can be irrigated all at the same time when needed.

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. **YES**

(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.")

1. The place of use was revised to include reference to the DLC and/or Government Lot and show the reduced place of use based on field verification:

Original authorized place of use:

7S	1W	Sec 7	NE NE	0.2
7S	1W	Sec 7	NW NE	<u>3.3</u>
				Total: 3.5

Revised place of use:

7S	1W	Sec 7	NW NE	DLC 51	<u>3.3</u>
					Total: 3.3

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### 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
Well 3	0.04 cfs March 1 through August 31	0.45 cfs	Not measured	Irrigation	3.5	3.3
	0.018 cfs September 1 through September 30					
	0.04 cfs October 1 through October 31					

## 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 3

### 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. 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:

½-inch plug installed in the sanitary seal on the east south-east side of the well casing.

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See Well Log MARI 69522						

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 69522

### 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. 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)
Wolf	6LH7V	Unknown	Submersible

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)
25 Hp	65-80 psi	68.8 feet (from permit condition pump test)	0 feet	0.65 to 0.75 cfs

4. Provide pump calculations:

PSI 65	$Q \text{ Pump} = \frac{(25 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(68.8 \text{ ft lift} + 165.1 \text{ ft pressure head})} = 0.75 \text{ cfs}$		
PSI 80	$Q \text{ Pump} = \frac{(25 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(68.8 \text{ ft lift} + 203.2 \text{ ft pressure head})} = 0.65 \text{ cfs}$		

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**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)
Not running during site visit			

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

**6. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
5/32 inch	50 psi	5 gpm	40	40	0.45 cfs

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

**7. Drip Emitter Information:**

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

**8. 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
12 inch	0.72 gpm/100 feet (164 lph/100ft)	27,000 feet	27,000 feet	0.43 cfs	NA

**E. Storage**

1. Does the distribution system include in-system storage (i.e. 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.

## H. Additional notes or comments related to the system:

Well 3 (MARI 69522) is also intended for use as an additional well for Certificates 96313 and 27110, transfer pending.

### 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 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	November 17, 2020		
BEGIN CONSTRUCTION (A)	November 17, 2025	November 17, 2020	Construction began on Well 3 (MARI 69522) October 29, 2020
COMPLETE CONSTRUCTION (B)	NA	NA	NA
COMPLETE APPLICATION OF WATER (C)	November 17, 2025	September 2024	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:**

Initial + 1

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, 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**

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. Is a pump test required? **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? **Unknown**

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 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 appropriation.**

b. Has a meter been installed?

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 3	Netafim	20-100024095	Working	22,700,887 gallons (November 7, 2024)	April 15, 2021

*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? **NO**

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 a Well Identification Number (Well ID tag) assigned and attached to the well? **YES**

WELL ID #	DATE ATTACHED TO WELL
L-139138	November 2020

d. 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):

d1) Condition:

Groundwater production shall be only from the alluvial groundwater reservoir.

Compliance:

Well 3 (CLAC 9522) develops water within the alluvial aquifer through perforations in the casing within the depth interval of 110 to 120 feet in layers of sand and gravel.

It appears this well obtains water from the alluvial aquifer; therefore, this condition has been met.

d2) 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-139138 is attached to the well casing.

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## 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 69522	Well log and driller's notes for CLAC 69522 – Well 3
BLM Cadastral Map	BLM Cadastral Map T. 7S. R. 1W. showing DLC and Government Lot locations

## 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 maps 07 1W 06 and 07, overlain by a 2014 aerial photo titled USDA-FSA-APFO NAIP County Mosaic and obtained on line from the Natural Resources Conservation Service, Image Metadata:  
<http://datagateway.nrcs.usda.gov/Catalog/ProductDescription/NAIPM.html>

### Map Checklist

Please be sure that the map you submit includes ALL the items listed below.  
(Reminder: Incomplete maps and/or claims may be returned.)

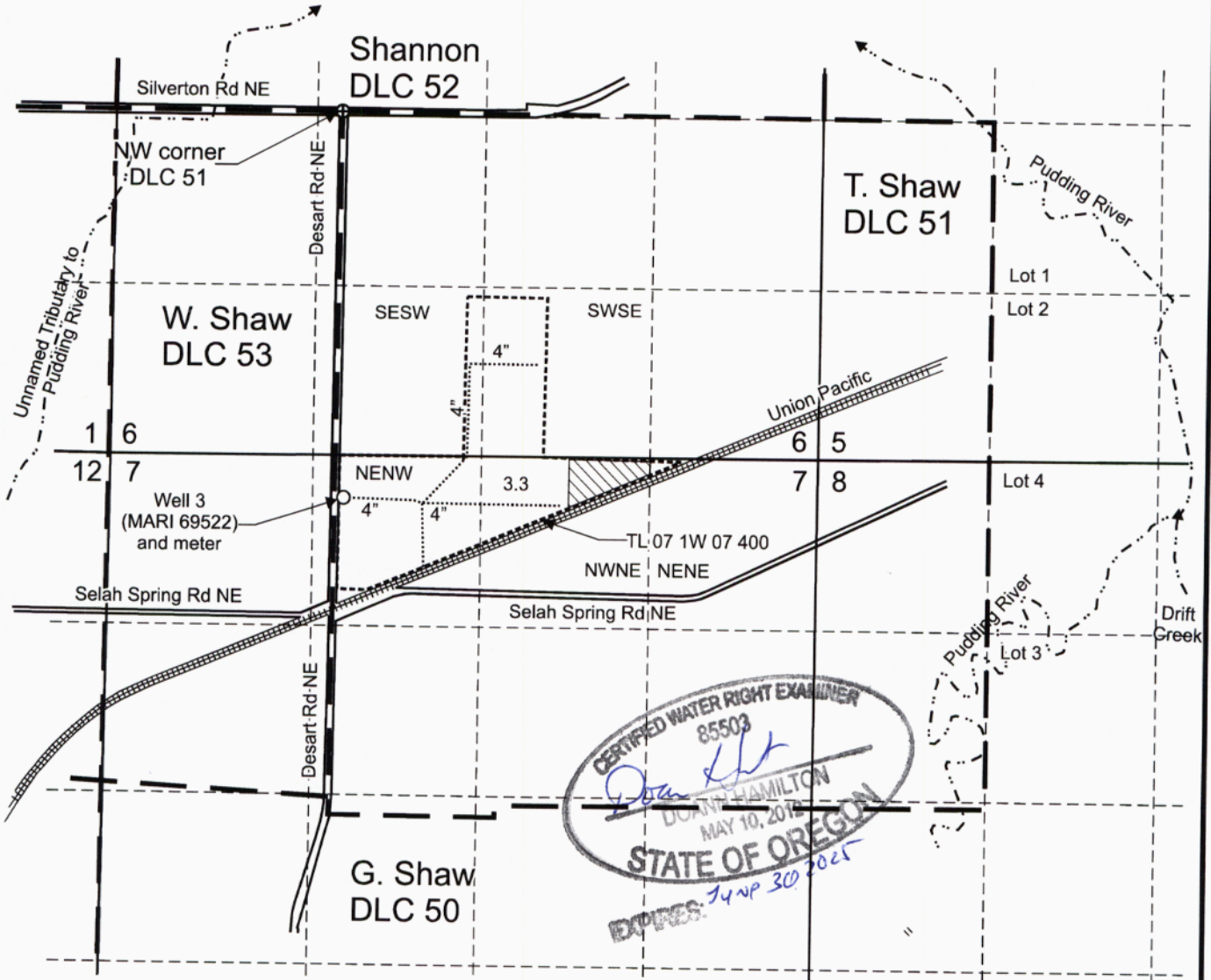
- ☒ Map on polyester film
- ☒ Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- ☒ Township, Range, Section, Donation Land Claims, and Government Lots
- ☒ If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- ☒ Locations of 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.7S. R.1W. Sec. 6 & 7, W.M.



Well 3 (MARI 69522) is located 3,010 feet south and 45 feet east from the NW corner, DLC 51.

 Area (3.3 Acres) irrigated under Application G-18884, Permit G-18509.

----- Tax lot boundary

— . — Donation Land Claim boundary

..... Water main line

Scale: 1" = 1,320'



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This map was prepared for the purpose of identifying the location of a water right only and is not intended to provide legal dimensions or location of property ownership lines.

**Claim of Beneficial Use Map**  
**Application G-18884, Permit G-18509**

Myron and Diane Kuenzi Family Farm LLC  
T.7S. R.1W. Sec. 6 & 7, W.M.

Pacific Hydro-Geology Inc.

12/2024

STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765 & OAR 690-205-0210)

MARI 69522

11/16/2020

WELL I.D. LABEL# L 139138  
START CARD # 1049663  
ORIGINAL LOG #

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(1) LAND OWNER

Owner Well I.D. \_\_\_\_\_  
First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Company KUENZI TURF INC.  
Address 6475 STATE STREET  
City SALEM State OR Zip 97317

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion  
☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd  
Material From To Amt sacks/lbs  
Seal: \_\_\_\_\_

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud  
☐ Reverse Rotary ☐ Other \_\_\_\_\_

(4) PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Community  
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering  
☐ Thermal ☐ Injection ☐ Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 150.00 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
14.5	0	40	Cement w/4% Bentonite	0	40	22	S
10	40	150			Calculated	14.08	
					Calculated		

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E  
☐ Other \_\_\_\_\_

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

Explosives used: ☐ Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

(6) CASING/LINER

Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd  
10 2 150 .250  
Shoe ☒ Inside ☐ Outside ☐ Other Location of shoe(s) 150  
Temp casing ☒ Yes Dia 14 From + 0 To 35

(7) PERFORATIONS/SCREENS

Perforations Method Holte

Screens Type \_\_\_\_\_

Material \_\_\_\_\_

Perf/	Casing/	Screen	Perf/	Casing/	Screen	Perf/	Casing/	Screen	Perf/	Casing/	Screen
Screen	Liner	Dia	From	To	width	length	# of	Te/	Screen	Liner	Dia
Perf	Casing	10	110	120	.2	1	363	pipe size	Perf	Casing	10

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
200		140	2

Temperature 53 °F Lab analysis ☐ Yes By \_\_\_\_\_

Water quality concerns? ☐ Yes (describe below) TDS amount 180 ppm  
From To Description Amount Units

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County MARION Twp 7.00 S N/S Range 1.00 W E/W WM  
Sec 7 NE 1/4 of the NW 1/4 Tax Lot 400  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ " or 44.98317000 DMS or DD  
Long \_\_\_\_\_ " or -122.85950000 DMS or DD

☒ Street address of well ☐ Nearest address

4076 DESART ROAD N.E. SILVERTON, OREGON 97381

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	11/9/2020		46
Flowing Artesian?			
Dry Hole?			

WATER BEARING ZONES

Depth water was first found 64.00

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

11/9/2020	64	132	200		46

(11) WELL LOG

Ground Elevation \_\_\_\_\_

Material	From	To
Top Soil	0	1
Firm brown clay	1	12
Soft sandy brown clay	12	18
Sticky brown clay	18	30
Sticky gray clay	30	41
Sandy brown clay w/small gravels	41	52
Brown sand and medium to large gravel	52	61
Sticky tan clay and gravel	61	64
Medium gravel w/some brown sand	64	73
Large loose gravel	73	89
Loose brown sand and small gravel	89	96
Tight medium gravel	96	106
Loose large gravel and brown sand	106	120
Loose gray coarse sand w/large gravel	120	132
Tan semi-cemented sand	132	139
Dark gray semi-cemented sand	139	142
Sticky gray clay	142	150

Date Started 10/29/2020 Completed 11/9/2020

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 1903 Date 11/12/2020

Signed RYAN PILLSBURY (E-filed)

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. 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.

License Number 1273 Date 11/16/2020

Signed FLOYD SIPPEL (E-filed)

Contact Info (optional) \_\_\_\_\_

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