

18487 S. Valley Vista Rd.  
Mulino, Oregon 97042  
(503) 632-5016 Phone  
(503) 632-5983 Fax

*Pacific Hydro-Geology Inc.*

# Memo

**To:** Oregon Water Resources Department  
**From:** Doann Hamilton, CWRE  
**CC:** *30 CLK*  
**Date:** March 25, 2015  
**Re:** COBU submitted James Dennis Pierce Application G-17244, Permit G-16656.

The Claim of Beneficial Use for James Dennis Pierce G-17244, Permit G-16656 was submitted February 19, 2015. After submitting the form, an error in the POU was noted. An amended map and page 4 was submitted early March. After adjusting the 1/16<sup>th</sup> lines again we found additional errors in the calculated acres. Attached are amended page 4 and map to reflect the changes made to supersede the previous submitted pages and map.



RENEWS June 30 2015

**RECEIVED**

APR 27 2015

WATER RESOURCES DEPT  
SALEM, OREGON

18487 S. Valley Vista Rd.  
Mulino, Oregon 97042  
(503) 632-5016 Phone  
(503) 632-5983 Fax

*Pacific Hydro-Geology Inc.*

# Memo

**To:** Oregon Water Resources Department  
**From:** Doann Hamilton, CWRE  
**CC:**  
**Date:** March 6, 2015  
**Re:** COBU submitted James Dennis Pierce Application G-17244, Permit G-16656.

---

The Claim of Beneficial Use for James Dennis Pierce G-17244, Permit G-16656 was submitted February 19, 2015. After submitting the form, an error in the POU was noted. Attached are amended page 4 and map to reflect the changes made to supersede the previous submitted pages and map



RENEWS June 30, 2015

**RECEIVED**

**MAR 10 2015**

**WATER RESOURCES DEPT  
SALEM, OREGON**

# 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](http://www.wrd.state.or.us)

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

RECEIVED

FEB 19 2015

## SECTION 1 GENERAL INFORMATION

WATER RESOURCES DEPT  
SALEM, OREGON

**1. File Information**

APPLICATION # <b>G-17244</b>	PERMIT # (IF APPLICABLE) <b>G-16656</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>NA</b>
---------------------------------	--	---

**2. Property Owner (current owner information)**

APPLICANT/BUSINESS NAME <b>James D. and Janice M. Pierce</b>		PHONE NO. <b>(503) 538-2363</b>	ADDITIONAL CONTACT NO.	
ADDRESS <b>30690 Fernwood Road</b>				
CITY <b>Newberg</b>	STATE <b>OR</b>	ZIP <b>97132</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>James Dennis Pierce</b>				
ADDRESS <b>30690 Fernwood Road</b>				
CITY <b>Newberg</b>	STATE <b>OR</b>	ZIP <b>97132</b>		

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

**4. Date of Site Inspection:** **November 11, 2014**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Dennis Pierce	November 11, 2014 December 31, 2014	Property owner

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

**SECTION 2  
SIGNATURES**


**RECEIVED**

FEB 19 2015

CWRE Statement, Seal and Signature

WATER RESOURCES DEPT  
SALEM, OREGON

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

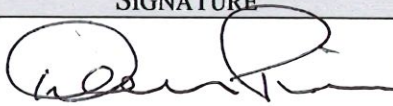
Seal and Signature

RENEWS <u>June 30, 2015</u>

CWRE NAME	PHONE NO.	ADDITIONAL CONTACT NO.	
Doann Hamilton	(503) 632-5016	(503) 349-6946	
ADDRESS			
18487 S. Valley Vista Road			
CITY	STATE	ZIP	E-MAIL
Mulino	OR	97042	phgdmh@gmail.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
	Dennis Pierce	Owner	2/10/15

### 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)
Well 1	YAMH 54107	L74424

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)
Well 1	Nursery	NA	March 1 through October 31	0.04 cfs
<b>Total Quantity of Water Used</b>				<b>0.04 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:**

The water is pumped from Well 1 (YAMH 54107/ L74424) using a submersible 3 HP pump. The water is conveyed from the well to the west then south to the pump house through a 2-inch buried PVC mainline. In the pump house the water goes through a flow meter and a 30 gallon pressure tank before being distributed to the field through a 2-inch buried PVC to the north, south and east. These mainlines are reduced down to 1-inch and 3/4 - inch as they connect to valves along the perimeter. Drip lines 5/8-inch in diameter with holes every 8 -inches are connected to these valves supplying 2 lengths of tape per row. There are 22 sections of crops with each section consisting of approximately 8,800 feet of drip tape.

The sections are irrigated by a controller rotating water for 1.5 hours per section per day, with some sections being irrigated every other week.

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).

**RECEIVED**

FEB 19 2015

WR

WATER RESOURCES DEPT  
SALEM, OREGON

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. With better mapping and aerial photos, the section and sixteenth lines vary from the original permit producing different acreage values per quarter-quarter section but not affecting the overall total. The place of use was also revised to include reference to the DLC:

Original authorized acreages in place of use:

3S	2W	W.M. 22	SW NW	1.1
3S	2W	W.M. 22	SE NW	9.7
3S	2W	W.M. 22	NE SW	0.4
3S	2W	W.M. 22	NW SW	<u>0.1</u>
Total				11.3

Adjusted acreages in place of use:

3S	2W	W.M. 22	SW NW	DLC 57	2.2
3S	2W	W.M. 22	SE NW	DLC 57	8.3
3S	2W	W.M. 22	NE SW	DLC 57	0.6
3S	2W	W.M. 22	NW SW	DLC 57	<u>0.2</u>
Total					11.3

2. The location of Well 1 (YAMH 54107/ L74424) is more correctly placed at: 650 feet south and 970 feet east from the SE Corner, DLC 51.

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 1	0.04 cfs	0.10 cfs	NA	Nursery	11.3	11.3

SECTION 4  
SYSTEM DESCRIPTION

Are there multiple POAs?

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):

Well 1

*Ampnopo  
3-30-2015  
DK*

**RECEIVED**

APR 27 2015

WATER RESOURCES DEPT  
SALEM, OREGON

WR

4. Variations:

*Superseded 4/27/15*

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 show the place of use based on field verification:

Original authorized acreages in place of use:

3S	2W	W.M.	22	SW NW	1.1
3S	2W	W.M.	22	SE NW	9.7
3S	2W	W.M.	22	NE SW	0.4
3S	2W	W.M.	22	NW SW	<u>0.1</u>
Total					11.3

Adjusted acreages in place of use:

3S	2W	W.M.	22	SW NW	DLC 57	0.9
3S	2W	W.M.	22	SE NW	DLC 57	9.7
3S	2W	W.M.	22	NE SW	DLC 57	0.4
3S	2W	W.M.	22	NW SW	DLC 57	<u>0.1</u>
Total						11.1

*AMPNOP  
3-6-15  
DH*

2. The location of Well 1 (YAMH 54107/ L74424) is more correctly placed at: 650 feet south and 970 feet east from the SE Corner, DLC 51.

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 1	0.04 cfs	0.10 cfs	NA	Nursery	11.3	11.1

*AMPNOP  
3-6-15  
DH*

SECTION 4

SYSTEM DESCRIPTION

Are there multiple POAs?

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):

Well 1

**RECEIVED**

MAR 10 2015

WATER RESOURCES DEPT  
SALEM, OREGON

WR

Superseded 3/10/2015

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 show the place of use based on field verification:**

**Original authorized acreages in place of use:**

3S	2W	W.M. 22	SW NW	1.1
3S	2W	W.M. 22	SE NW	9.7
3S	2W	W.M. 22	NE SW	0.4
3S	2W	W.M. 22	NW SW	<u>0.1</u>
<b>Total</b>				<b>11.3</b>

**Adjusted acreages in place of use:**

3S	2W	W.M. 22	SW NW	DLC 57	1.1
3S	2W	W.M. 22	SE NW	DLC 57	9.7
3S	2W	W.M. 22	NE SW	DLC 57	0.4
3S	2W	W.M. 22	NW SW	DLC 57	<u>0.1</u>
<b>Total</b>					<b>11.3</b>

**2. The location of Well 1 (YAMH 54107/ L74424) is more correctly placed at: 650 feet south and 970 feet east from the SE Corner, DLC 51.**

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 1	0.04 cfs	0.10 cfs	NA	Nursery	11.3	11.3

**SECTION 4**

**SYSTEM DESCRIPTION**

Are there multiple POAs?

**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):

Well 1

RECEIVED

FEB 19 2015

WATER RESOURCES DEPT  
SALEM, OREGON

WR



## 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)
<b>Goulds</b>	<b>33GS30</b>	<b>K0410424</b>	<b>Submersible</b>

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)
<b>3 HP</b>	<b>60 psi</b>	<b>68.3 feet (calculated theoretical lift based on well's specific capacity as determined from pumping test)</b>	<b>0 ft</b>	<b>0.10 cfs</b>

4. Provide pump calculations:

$$Q_{\text{Pump}} = \frac{(3 \text{ Hp}) (7.04 \text{ ft}^4/\text{sec HP})}{(68.3 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 0.10 \text{ cfs}$$

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)
<b>Not Running During Site Visit</b>			

**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)
<b>5/8" diameter Drip Tape Model 508-08-340</b>	<b>10 psi</b>	<b>0.0034 gpm</b>	<b>290,400</b>	<b>13,200</b>	<b>0.10 cfs</b>

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

7. Additional notes or comments related to the system:

**None**

**RECEIVED**

**FEB 19 2015**

**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:

**Top of casing beneath pitless adaptor cap.**

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
<b>See Well Log YAMH 54107</b>						

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.

**See Well Log YAMH 54107**

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

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

**D. Storage**

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

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

If "YES" is it a: Storage Tank **YES**

Bulge in System / Reservoir **NO**

*Complete appropriate table(s), unused table may be deleted.*

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
<b>Fiberglass</b>	<b>30 gallon</b>	<b>Above ground</b>

**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? **NO**

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

**F. Gravity Flow Canal or Ditch**

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

1. Provide description and calculations if necessary:

**NA**

**RECEIVED**

**FEB 19 2015**

**WATER RESOURCES DEPT  
SALEM, OREGON**

WR

## 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	<b>February 25, 2010</b>		
BEGIN CONSTRUCTION (A)	<b>NA</b>	<b>NA</b>	<b>NA</b>
COMPLETE CONSTRUCTION (B)	<b>February 25, 2015</b>	<b>May 5, 2010</b>	<b>Had all the groundwork completed and the irrigation system installed.</b>
COMPLETE APPLICATION OF WATER (C)	<b>February 25, 2015</b>	<b>October 2014</b>	<b>Put water to the full use and reported use from well.</b>

\* 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**

### 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?

**Not 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
<b>NA</b>			

### 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**

**RECEIVED**

**FEB 19 2015**

**WATER RESOURCES DEPT  
SALEM, OREGON**

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

**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? **YES**

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
Well 1	Badger Meter	40395112	Working	3,225,154.6 gallons	June 2005

*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**

METHOD OF SUBMITTING REPORT (PAPER OR ELECTRONIC)	WATER USER REPORTING ID
Electronic	18557

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? **YES**

**RECEIVED**

FEB 19 2015

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

**c) 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 L74424 is on the well.**

**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
<b>Claim of Beneficial Use Map</b>	<b>Claim of Beneficial Use Map</b>
<b>State Water Well Report – YAMH 54107</b>	<b>Well log and driller's notes for YAMH 54107 – Well 1</b>
<b>BLM Cadastral Map</b>	<b>BLM Cadastral Map T.3S. R.2W. showing DLC and Government Lot locations</b>
<b>Pump Test Form Cover Sheet and Pump Test Data Sheet</b>	<b>Pumping Test Results for Well 1 (YAMH 54107) conducted October 27, 2014</b>

**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 3 2 22, overlain by a 2009, orthographically corrected aerial photograph obtained on line from Oregon State University's Oregon Imagery Explorer Natural Resources Library.**

**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.

**RECEIVED**

**FEB 19 2015**

**WATER RESOURCES DEPT  
SALEM, OREGON**

- 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

**RECEIVED**

FEB 19 2015

WATER RESOURCES DEPT  
SALEM, OREGON

STATE OF OREGON WATER SUPPLY WELL REPORT

Arrow 05-019

WELL ID # L 74424 START CARD # 171162

(as required by ORS 537.765)

(1) LAND OWNER:

Name: Dennis Pierce Address: 30690 Fernwood Road City: Newberg State: OR Zip: 97132

(2) TYPE OF WORK:

[X] New Well [ ] Deepening [ ] Alteration/recondition [ ] Abandonment

(3) DRILL METHOD:

[X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Other:

(4) PROPOSED USE:

[X] Domestic [ ] Community [ ] Industrial [ ] Irrigation [ ] Thermal [ ] Injection [ ] Livestock [ ] Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval [ ] Yes [X] No

Depth of Completed Well 142

Explosives Used [ ] Yes [X] No Type Amount

Table with columns: Diameter, From, To, Material, SEAL From, To, sacks or pounds

How was seal placed: Method [ ] A [ ] B [X] C [ ] D [ ] E

[ ] Other

Backfill placed from to Material

Gravel placed from to Size of gravel

(6) CASING/LINER:

CASING:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Drive Shoe used [ ] Inside [X] Outside [ ] None

Final location of Shoe(s): 142'

(7) PERFORATIONS/SCREENS:

[X] Perforations Method: mill slot [ ] Screen Type: Material:

Table with columns: From, To, Slot Size, No., Diameter, Tele/pipe size, Casing, Liner

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

[ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian

Table with columns: Yield gpm, Drawdown, Drill Stem at, Time

Temperature of water 54 Depth Artesian Flow Found

Was a water analysis done? By whom:

Did any strata contain water not suitable for intended use? (explain)

Depth of Strata:

ARROW DRILLING 503-538-4422

(9) LOCATION OF WELL by legal description:

County: Yamhill Latitude: Longitude: Township: 3S Range: 2W Section: 22 SE 1/4 NW 1/4 Tax Lot: 3100 Lot: Block: Subdivision: Street Address of Well (or nearest address) 30690 Fernwood Road Newberg, OR 97132

(10) STATIC WATER LEVEL:

41 Ft. below land surface Date 6/8/05 Artesian pressure lb. per sq. in. Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Est. Flow Rate, SWL

(12) WELL LOG:

Table with columns: Material, From, To, SWL

RECEIVED JUN 14 2005 AUG 12 2005 WATER RESOURCES DEPT SALEM, OREGON

Date Started: 6/3/05 Completed: 6/8/05

(unbonded) Water Well Constructor Certification:

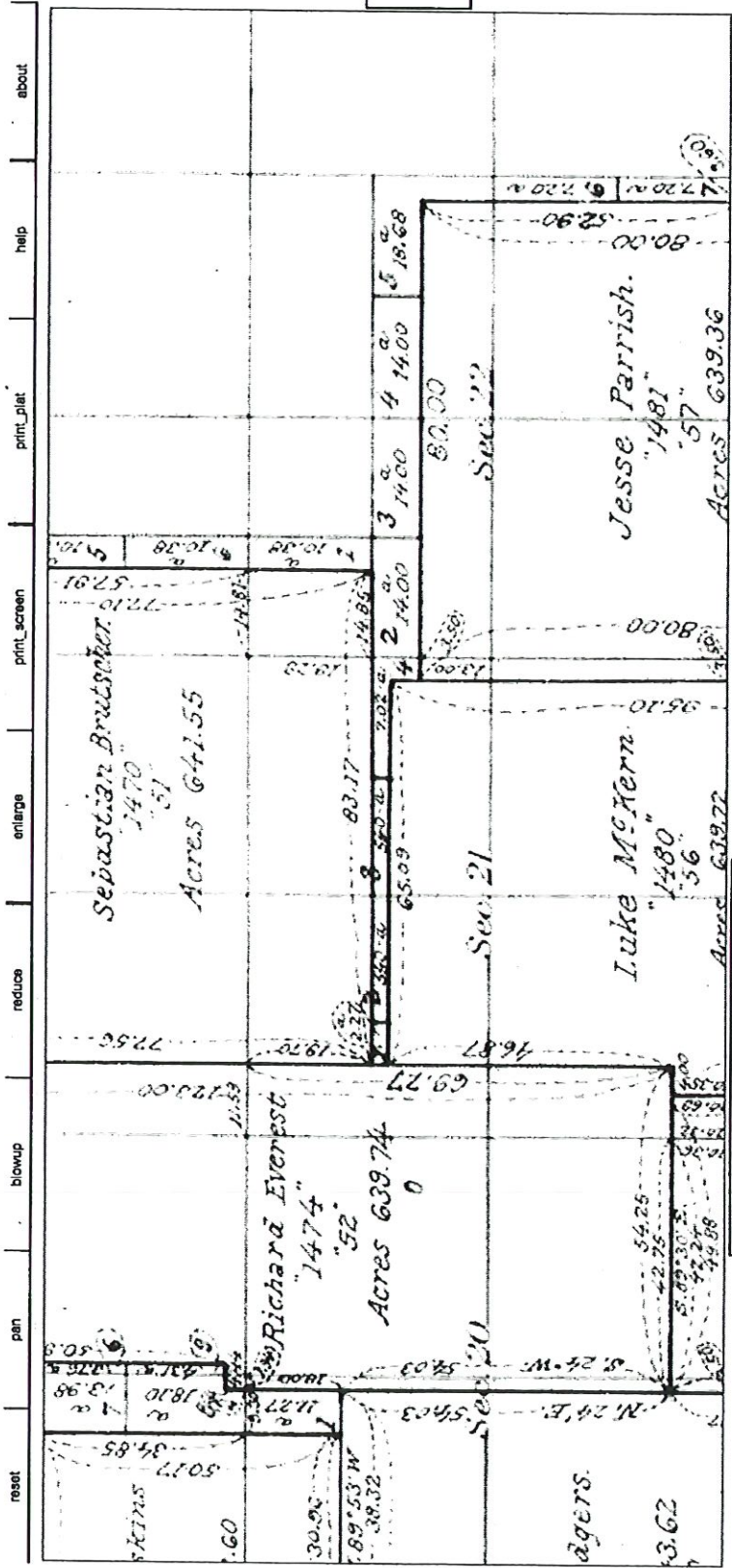
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Signed Date WWC Number

(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 Date WWC Number 1483 Date 6/9/05



reset pan blowup reduce enlarge print\_screen print\_plat help about

**RECEIVED**

FEB 19 2015

WATER RESOURCES DEPT  
SALEM, OREGON



Oregon Water Resources Department  
**PUMP TEST FORM COVER SHEET**

**Well Owner:**

Name: Dennis Pierce / Pierce Nursery  
 Address: 30690 Fernwood Rd  
 County: Yamhill  
 City: Newberg State: OR Zip: 97132  
 Original owner (from well log): \_\_\_\_\_

**Well Location:**

Township: 3 (N/S) Range: 2 (E/W)  
 Section: 22 1/4: \_\_\_\_\_ 1/16: \_\_\_\_\_ 1/64: \_\_\_\_\_  
 Well depth: 142 Date drilled: 6-2005  
 Owners well no. (if any): \_\_\_\_\_  
 POD ID: \_\_\_\_\_

**Water Right Information:**

Application: G17244 Permit: G16656 Certificate: \_\_\_\_\_  
 Is this well listed on more than one water right?  Yes If yes, list additional water rights below:  
 Application: \_\_\_\_\_ Permit: \_\_\_\_\_ Certificate: \_\_\_\_\_  
 Application: \_\_\_\_\_ Permit: \_\_\_\_\_ Certificate: \_\_\_\_\_

**Pump Test:**

Test Conducted by: Phil Garstka Well Owner?  Yes  
 Company: Phillips Pump Sales & Service  
 Address: PO Box 938 Date of Test: 10-27-14  
 City: Newberg State: OR Zip: 97132  
 Daytime phone: 503-538-6669

Method of discharge measurement (see our brochure for acceptable methods): \_\_\_\_\_  
 Method of water-level measurement (pick one or enter other method used): E-Tape Sounder  
 Length of air line (if used): NA

Pump type (pick one or enter other method used): 4" well pump  
 Was the pump test conducted during normal use of the well?  Yes Note: NO

Are you aware of any wells, other than domestic or stock wells, pumping within 1000 feet of the tested well during the test or within 24 hours prior to the test?  Yes Note: \_\_\_\_\_  
 If yes, give approximate distances to each and approximate pumping rate of each. If possible, indicate if they were turned on or off during the test: \_\_\_\_\_

Is there a lake, stream or other surface water body within 1/4 mile of the tested well?  Yes If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head. Approx. distance: \_\_\_\_\_ ft Approx. elevation difference: \_\_\_\_\_ ft  
 Well elevation is \_\_\_\_\_ surface water body.

Description of measuring point (e.g. top port of 1 inch port pipe, west side) Top of well casing  
with 6" sanitary well cap removed  
 Measuring point distance above land surface 1.1' feet.

**Static water level measurements:** (A minimum of three measurements are required in the hour before pumping begins at no less than 20 minutes apart):

Time	Depth to water below meas. point	Depth to water below land surface
<u>8:10 Am</u>	<u>65' 4"</u>	<u>64' 3"</u>
<u>8:40 Am</u>	<u>65' 4"</u>	<u>64' 3"</u>
<u>9:00 Am</u>	<u>65' 4"</u>	<u>64' 3"</u>

**Discharge measurements:** (A discharge measurement is required at the start of pumping and at least once an hour during the test; additional measurements should be noted on the Pump Test Data Sheet):

Time	Discharge Rate	Discharge Units (e.g. gpm, cfs, etc)
<u>9:10 Am</u>	<u>42.8</u>	<u>gpm</u>
<u>10:10 Am</u>	<u>42.8</u>	
<u>11:10 Am</u>	<u>42.8</u>	
<u>12:10 Pm</u>	<u>42.8</u>	
<u>1:10 Pm</u>	<u>42.8</u>	

Time pump turned on: \_\_\_\_\_ Date 10-27-14 Time 9:10 Am  
 Time pump turned off: \_\_\_\_\_ Date 10-27-14 Time 1:14 Pm  
 Total pumping time: 4 hours 4 minutes

Note: Well must be idle for at least 16 hours prior to the test.

Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

Required Signature: \_\_\_\_\_

*Phil Garstka*

**RECEIVED**

FEB 19 2015  
 OWRD 2/9/2000

**WATER RESOURCES DEPT  
 SALEM, OREGON**

Oregon Water Resources Department  
**PUMP TEST DATA SHEET**

Application: G17244 Permit: G16656 Certificate: \_\_\_\_\_ Pod Id: \_\_\_\_\_

All water-level measurements must either be in feet and inches, or feet and decimal fractions.

**Drawdown Data**

**Recovery Data**

Date	Time	Time Since Pump Started (minutes)	Depth to Water Below Measuring Pt	Depth to Water Below Land Surface	Comments	Date	Time	Time Since Pump Stopped (minutes)	Depth to Water Below Measuring Pt	Depth to Water Below Land Surface	Comments
10-27-14	9:12	2	68-3"	66-9"		10/27/14	1:16	2	66-7"	65-1"	
	9:14	4	68-4"	67-0"			1:18	4	66-9"	64-10"	
	16	6	68-8"	67-2"			1:20	6	66-2 1/2"	64-8 1/2"	
	18	8	68-9"	67-3"			1:22	8	66-1 1/2"	64-7 1/2"	
	20	10	68-9"	67-3"			1:24	10	66-1"	64-7"	
	22	12	68-9"	67-3"			1:29	15	66-1/2"	64-6 1/2"	
	9:27	17	68-9"	67-3"			1:34	20	66-1/4"	64-6 1/4"	
	32	22	68-10"	67-4"			1:39	25	66-0"	64-6"	
	37	27	68-11"	67-5"			1:44	30	65-11 1/4"	64-5 3/4"	
	42	32	68-11 1/2"	67-5 1/2"			1:59	45	65-11"	64-5"	
	57	47	69-0"	67-6"			2:14	60	65-10 1/4"	64-4 1/4"	
	10:12	62	69-1/2"	67-6 1/2"			2:29	75	65-9 1/4"	64-3 3/4"	
	27	77	69-1 1/2"	67-7 1/2"			2:44	90	65-9 1/4"	64-3 1/4"	
	42	92	69-2 1/2"	67-8 1/2"							
	57	107	69-3"	67-9"							
	11:12	122	69-4"	67-10"							
	27	137	69-4 1/2"	67-10 1/2"							
	42	152	69-5"	67-11"							
	57	167	69-5 1/2"	67-11 1/2"							
	12:12	182	69-6"	68-0"							
	27	197	69-6 1/2"	68-1"							
	42	212	69-6 3/4"	68-3 1/4"							
	57	227	69-7"	68-1"							
	1:12	242	69-7 1/4"	68-1 1/4"							
<p><b>RECEIVED</b></p> <p>FEB 19 2015</p> <p>WATER RESOURCES DEPT SALEM, OREGON</p>											
<p>COMMENT: DELETE COMMENTS COLUMNS &amp; MAKE WATER LEVEL COLUMNS WIDER. THEY ARE PRESENTLY TOO NARROW.</p>											