

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



**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 any Transfer final orders including a water right with a priority date of July 9, 1987, or later.**

**Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.  
The water right has a priority date of July 14, 1959. The fee is not required.**

**A separate form shall be completed for each transfer.**

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at:  
<https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

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

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

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

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

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

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

**SECTION 1  
GENERAL INFORMATION**

**Type of Authorized Change**

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

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1. File Information

APPLICATION #  
**T-13527**

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME <b>Bailey Nurseries, Inc.</b>		PHONE NO. <b>503-457-6897</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>PO Box 398</b>			
CITY <b>Dayton</b>	STATE <b>OR</b>	ZIP <b>97114</b>	E-MAIL <b>jon.estes@baileynursery.com</b>

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. ***Each transfer holder of record must sign this form.***

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

TRANSFER HOLDER OF RECORD <b>Bailey Nurseries, Inc.</b>		
ADDRESS <b>PO Box 398</b>		
CITY <b>Dayton</b>	STATE <b>OR</b>	ZIP <b>97114</b>

4. Date of Site Inspection:

**September 26, 2024**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Jon Estes</b>	<b>9/26/2024</b>	<b>Water Resources Manager, Bailey Nurseries</b>

6. County:

**Yamhill**

7. If any property described in the place of use of the transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

OWNER OF RECORD <b>N/A</b>		
ADDRESS		
CITY	STATE	ZIP

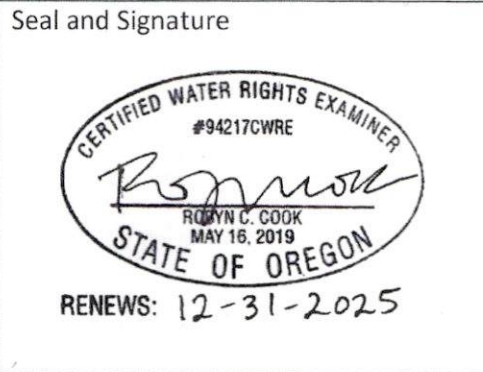
Add additional tables for owners of record as needed

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**SECTION 2**  
**SIGNATURES**

CWRE Statement, Seal and Signature

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

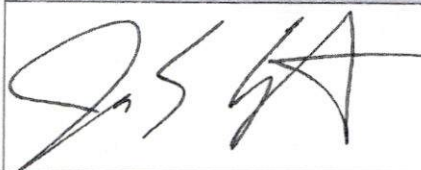


CWRE NAME <b>Robyn Cook</b>		PHONE NO. <b>971-200-8505</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>GSI Water Solutions, Inc., 650 NE Holladay Street, Suite 900</b>			
CITY <b>Portland</b>	STATE <b>OR</b>	ZIP <b>97232</b>	E-MAIL <b>rcook@gsiws.com</b>

Transfer Holder of Record Signature or Acknowledgement

Each transfer holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	<b>Jon Estes</b>	<b>Water Resources Manager, Bailey Nurseries</b>	<b>4/16/25</b>

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### SECTION 3 CLAIM DESCRIPTION

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

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

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
Well 3	YAMH 59179	147396	-
Holbrook Well 2	YAMH 6439	131191	-

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

*If well logs are available, items A and B below can be deleted. Items A and B were deleted. Well logs are provided in Attachment B.*

**2. Variations:**

Was the use developed differently from what was authorized by the transfer final order, or extension final? YES NO

If yes, describe below.

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

N/A

**3. Claim Summary:**

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
Well 3	1.06 cfs	0.8 cfs	0.6 cfs
Holbrook Well 2		1.2 cfs	0.8 cfs

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## SECTION 4

### SYSTEM DESCRIPTION

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

YES NO

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

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

Well 3
Holbrook Well 2

#### A. POA System Information

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

##### 1. Pump Information

POA NAME	MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Well 3	Goulds Pump	6CHC- 20HP-4	MG4392	Submersible	4"	4"
Holbrook Well 2	Franklen	8FP3500	Unknown	Submersible	4"	4"

##### 2. Motor Information

WELL NAME	MANUFACTURER	HORSEPOWER
Well 3	Hitachi	20 HP
Holbrook Well 2	Franklen	30 HP

##### 3. Theoretical Pump Capacity

WELL NAME	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)
Well 3	20 HP	70	Component of operating pressure	0 ft	0.8 cfs
Holbrook Well 2	30 HP	69	Component of operating pressure	0 ft	1.2 cfs

##### 4. Provide pump calculations:

Pump calculations are provided in Attachment C.

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

WELL NAME	INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Well 3	-	-	-	0.6 cfs
Holbrook Well 2	-	-	-	0.8 cfs

Measured pump capacities were obtained using instantaneous flow meter readings taken at each well.

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## B. Groundwater Source Information (Well and Sump)

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

YES NO

*If "NO", items 4 through 6 relating to this section may be deleted. Items 4 through 6 were deleted.*

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

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

N/A

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## SECTION 5 CONDITIONS

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

### 1. Time Limits:

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

	DATE FROM TRANSFER	DATE THE NEW AND/OR ADDITIONAL POA(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	May 9, 2022	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2023	February 6, 2023

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

### 2. Is there an extension final order(s)?

YES NO

If "NO", you may delete the following table. The table was deleted.

### 3. Measurement Conditions:

a. Does the transfer final order, or any extension final order require the installation of a meter or other approved measuring device?

YES NO

If "NO", items b through f relating to this section may be deleted. Items b through f were deleted.

### 4. Recording and reporting conditions

a. Is the water user required to report the water use to the Department?

YES NO

If "NO", item b relating to this section may be deleted. Item b was deleted.

### 5. Other conditions required by the transfer final order or extension final order:

a. Were there special well construction standards?

YES NO

b. Was submittal of a ground water monitoring plan required?

YES NO

c. Other conditions?

YES NO

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

**5c. The quantity of water diverted at the new point of appropriation (Well 3), together with that diverted at the additional point of appropriation (Holbrook Week 2), shall not exceed the quantity of water lawfully available at the original point of appropriation (POA 1). In compliance, the new POAs do not divert more water than was originally available.**



**5c. Water shall be acquired from the same aquifer (water source) as the original point of appropriation. In compliance. Both POAs appropriate water from an alluvial aquifer.**

## **SECTION 6**

### **ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Attachment A	Transfer Final Order
Attachment B	Well Logs
Attachment C	Pump Calculations
Attachment D	Claim of Beneficial Use Map

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## SECTION 7

### CLAIM OF BENEFICIAL USE MAP

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

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

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

**The new and additional points of appropriation were visited during the site inspection and their location was confirmed with a handheld GPS. The map was created using Geographic Information System (GIS) software and spatial datasets obtained from the Bureau of Land Management, Environmental Systems Research Institute, Oregon Water Resources Department, and United States Geological Survey. Additional information specific to the use of water under the water right described in this Claim of Beneficial Use report was obtained from the water right holder.**

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## 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
- N/A Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- N/A Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- N/A Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.) **\*Not required for this type of Claim of Beneficial Use**
- ☒ Point(s) of diversion or appropriation (illustrated and coordinates)
- ☒ Tax lot boundaries and numbers
- N/A Source illustrated if surface water
- ☒ Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- ☒ Application and permit number or transfer number
- ☒ North arrow
- ☒ Legend
- ☒ CWRE stamp and signature





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## **Attachment A**

Transfer T-13527 Final Order  
Claim of Beneficial Use – Bailey Nurseries, Inc.

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**BEFORE THE WATER RESOURCES DEPARTMENT  
OF THE  
STATE OF OREGON**

In the Matter of Transfer Application	)	FINAL ORDER APPROVING A
T-13527, Yamhill County	)	CHANGE IN POINT OF
	)	APPROPRIATION AND AN
	)	ADDITIONAL POINT OF
	)	APPROPRIATION

**Authority**

Oregon Revised Statutes (ORS) 537.705 and 540.505 to 540.580 establish the process in which a water right holder may submit a request to transfer the point of appropriation, place of use, or character of use authorized under an existing water right. Oregon Administrative Rules (OAR) Chapter 690, Division 380 implement the statutes and provides the Department's procedures and criteria for evaluating transfer applications.

**Applicant**

BAILEY NURSERIES, INC.,  
ATTN: JON ESTES  
PO BOX 398  
DAYTON, OR 97114

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**Findings of Fact**

1. On September 29, 2020, BAILEY NURSERIES, INC., ATTN: JON ESTES filed an application to change a point of appropriation and an additional point of appropriation under Certificate 31650. The Department assigned the application number T-13527.
2. Notice of the application for transfer was published on September 29, 2020, pursuant to OAR 690-380-4000. No comments were filed in response to the notice.
3. On October 18, 2021, the Department sent a copy of the draft Preliminary Determination proposing to approve Transfer Application T-13527 to the applicant. The draft Preliminary Determination cover letter set forth a deadline of November 17, 2021, for the applicant to respond. The applicant requested that the Department proceed with issuance of a Preliminary Determination and provided the necessary information to demonstrate that the applicant is authorized to pursue the transfer.

This final order is subject to judicial review by the Court of Appeals under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482(1). Pursuant to ORS 536.075 and OAR 137-003-0675, you may petition for judicial review or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

4. On March 14, 2022, the Department issued a Preliminary Determination proposing to approve Transfer Application T-13527 and sent a copy to the applicant. Additionally, notice of the Preliminary Determination for the transfer application was published in the Department's weekly notice on March 15, 2022, and in the NEWS-REGISTER newspaper on March 18 and 25, 2022 pursuant to ORS 540.520 and OAR 690-380-4020. No protests were filed in response to the notice.

5. The portion of the right to be transferred is as follows:

**Certificate:** 31650 in the name of NORMAN & JOYCE QUIGLEY (perfected under Permit G-1387)  
**Use:** IRRIGATION of 117.9 ACRES  
**Priority Date:** JULY 14, 1959  
**Rate:** 1.06 CUBIC FEET PER SECOND  
**Limit/Duty:** The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated and shall be further limited to a diversion of not to exceed 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year.  
**Source:** A WELL, a tributary of WILLAMETTE RIVER

**Authorized Point of Appropriation:**

Twp	Rng	Mer	Sec	Q-Q	DLC	Measured Distances
5 S	3 W	WM	9	SE SW	53	POA 1 - 5 CHAINS SOUTH AND 12 CHAINS EAST FROM THE SE CORNER OF THESSING DLC 51

**Authorized Place of Use:**

IRRIGATION							
Twp	Rng	Mer	Sec	Q-Q	GLot	DLC	Acres
5 S	3 W	WM	8	SW SE		50	21.4
5 S	3 W	WM	8	SE SE		50	27.6
5 S	3 W	WM	9	SW SW	2		19.5
5 S	3 W	WM	9	SE SW	1		0.8
5 S	3 W	WM	9	SE SW		53	16.5
5 S	3 W	WM	9	SW SE		53	9.9
5 S	3 W	WM	16	NW NE		53	2.8
5 S	3 W	WM	16	NE NW	2		0.1
5 S	3 W	WM	16	NE NW		53	4.6
5 S	3 W	WM	16	NW NW	3		4.8
5 S	3 W	WM	17	NE NE		50	5.6
5 S	3 W	WM	17	NW NE		50	4.3
						Total	117.9

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6. Transfer Application T-13527 proposes to move the authorized point of appropriation approximately 700 feet from the existing point of appropriation to:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
5 S	3 W	WM	9	SE SW	WELL 3 – 520 FEET NORTH AND 1275 FEET EAST FROM THE NW CORNER OF DLC 56

7. Transfer Application T-13527 proposes an additional point of appropriation approximately 1800 feet from the existing point of appropriation to:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
5 S	3 W	WM	9	NW SW	HOLBROOK WELL 2 – 2120 FEET NORTH AND 675 FEET EAST FROM THE NW CORNER OF DLC 56

***Transfer Review Criteria (OAR 690-380-4010)***

8. Water has been used within the last five years according to the terms and conditions of the right. There is no information in the record that would demonstrate that the right is subject to forfeiture under ORS 540.610.
9. A pump, pipeline, and sprinkler system sufficient to use the full amount of water allowed under the existing right were present within the five-year period prior to submittal of Transfer Application T-13527.
10. The proposed change would not result in enlargement of the right.
11. The proposed change would not result in injury to other water rights.
12. All other application requirements are met.

**Conclusions of Law**

The change in point of appropriation and an additional point of appropriation proposed in Transfer Application T-13527 is consistent with the requirements of ORS 537.705 and 540.505 to 540.580 and OAR 690-380-5000.

**Now, therefore, it is ORDERED:**

1. The change in point of appropriation and an additional point of appropriation proposed in Transfer Application T-13527 are approved.
2. The right to the use of the water is restricted to beneficial use at the place of use described, and is subject to all other conditions and limitations contained in Certificate 31650 and any related decree.
3. Water right Certificate 31650 is cancelled. A new certificate will be issued describing that portion of the right not affected by this transfer.


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4. The quantity of water diverted at the new point of appropriation (Well 3), together with that diverted at the additional point of appropriation (Holbrook Well 2), shall not exceed the quantity of water lawfully available at the original point of appropriation (POA 1).
5. Water shall be acquired from the same aquifer (water source) as the original point of appropriation.
6. Full beneficial use of the water shall be made, consistent with the terms of this order, on or before **October 1, 2023**. A Claim of Beneficial Use prepared by a Certified Water Right Examiner shall be submitted by the applicant to the Department within one year after the deadline for completion of the change and full beneficial use of the water.
7. After satisfactory proof of beneficial use is received, a new certificate confirming the right transferred will be issued.

Dated in Salem, Oregon on **MAY 09 2022**

  
Lisa J. Jaramillo, Transfer and Conservation Section Manager, for  
THOMAS M BYLER, DIRECTOR  
Oregon Water Resources Department

Mailing date: ~~\_\_\_\_\_ MAY 10 2022 \_\_\_\_\_~~

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Well Name	Well Log
Holbrook Well 2	YAMH 6439
Well 3	YAMH 59179

## Attachment B

Well Logs

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Claim of Beneficial Use – Bailey Nurseries, Inc.



## NOTICE TO WATER WELL CONTRACTOR

The original and first copy  
of this report are to be  
filed with the

STATE ENGINEER, SALEM, OREGON 97310  
within 30 days from the date  
of well completion.

## WATER WELL REPORT

STATE OF OREGON

(Please type or print) *YAMH 6439*(Do not write above this line) *Ap. G-5132*

State Well No.

State Permit No.

STATE ENGINEER

## (1) OWNER:

Name *Joe Hollbrook*  
Address *211 Bl 140 Dayton*

## (2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

## (3) TYPE OF WELL:

Rotary ☐ Driven ☐  
Cable ☒ Jetted ☐  
Dug ☐ Bored ☐

## (4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐  
Irrigation ☒ Test Well ☐ Other ☐

## CASING INSTALLED:

Threaded ☐ Welded ☒ *1/4*  
10" Diam. from 0 ft. to 100 ft. Gage *14*  
" Diam. from ft. to ft. Gage  
" Diam. from ft. to ft. Gage

## PERFORATIONS:

Perforated? ☒ Yes ☐ No.

Type of perforator used *Torch*  
Size of perforations *1/4* in. by *6* in.  
*480* perforations from *48* ft. to *80* ft.  
perforations from ft. to ft.  
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.

## (8) WATER LEVEL: Completed well.

Static level *15* ft. below land surface Date *4-1-69*  
sian pressure lbs. per square inch Date

## (9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☒ Yes ☐ No If yes, by whom? *Driller*  
Yield: *250* gal./min. with *45* ft. drawdown after *8* hrs.

Ballor test gal./min. with ft. drawdown after hrs.  
Artesian flow g.p.m. Date  
Temperature of water Was a chemical analysis made? ☐ Yes ☒ No

## (10) CONSTRUCTION:

Well seal—Material used *cement*  
Depth of seal *20* ft.  
Diameter of well bore to bottom of seal *16* in.  
Were any loose strata cemented off? ☐ Yes ☒ No Depth  
Was a drive shoe used? ☐ Yes ☒ No  
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: *3/4*  
Gravel placed from *20* ft. to *100* ft.

## (11) LOCATION OF WELL:

County *Yamhill* Driller's well number *123*  
*1/4* Section *9* T. *55* R. *3* W. W.M.

Bearing and distance from section or subdivision corner

## (12) WELL LOG:

Diameter of well below casing *0*Depth drilled *140* ft. Depth of completed well *100* 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 as drilling proceeds. Note drilling rates.

MATERIAL	From	To	SWL
<i>top soil</i>	<i>0</i>	<i>2</i>	
<i>brown clay</i>	<i>2</i>	<i>25</i>	
<i>blue clay</i>	<i>25</i>	<i>47</i>	
<i>black sand</i>	<i>47</i>	<i>80</i>	
<i>blue clay</i>	<i>80</i>	<i>140</i>	

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Work started *3-16* 19*69* Completed *4-1* 19*69*  
Date well drilling machine moved off of well *4-1* 19*69*

## 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] *Robert S. Hubbard* Date *5-7*, 19*69*  
(Drilling Machine Operator)

Drilling Machine Operator's License No. *337*

## 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 *Blue Water Drilling Co*  
(Person, firm or corporation) (Type or print)

Address *RT 1 BX 75 Dayton*

[Signed] *Robert S. Hubbard*  
(Water Well Contractor)

Contractor's License No. *412* Date *5-7*, 19*69*

(USE ADDITIONAL SHEETS IF NECESSARY)



Amended 6/22/2023

Page 1 of 3

STATE OF OREGON  
WATER SUPPLY WELL REPORT

YAMH 59179

WELL I.D. LABEL # 147396

START CARD # 1058241

ORIGINAL LOG #

(as required by ORS 537.545 &amp; 537.765 and OAR 690-205-0210)

2/15/2023

## (1) LAND OWNER

Owner Well I.D. UNIONVALE #3

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Company BAILEY NURSERY  
Address 14301 SE WALLACE ROAD  
City DAYTON State OR Zip 97114

## (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 135.80 ft.

BORE HOLE			SEAL			sacks/lbs	
Dia	From	To	Material	From	To	Amt	lbs
12	0	239	Bentonite Chips	0	41	56	S
					Calculated	23.25	
			Cement with 2% Benton	41	71	35	S
					Calculated	8.62	

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E  
☒ Other BENT POURED-PROBED-HYD  
Backfill placed from 195 ft. to 239 ft. Material CLAY SLOUGH  
Filter pack from 71 ft. to 135.8 ft. Material SILICA SAND Size 8/12

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  
☒ Inside ☐ Outside ☐ Other Location of shoe(s) \_\_\_\_\_  
 Temp casing ☒ Yes Dia 12 From + 0 To 239

## (7) PERFORATIONS/SCREENS

Perforations Method \_\_\_\_\_

Screens Type v-wire wrap

Material stainless

Perf/	Casing/ Screen	Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Casing	8	112.8	127.8	.04			8

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

☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian  
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)  
160 36 110 4

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

Water quality concerns? ☒ Yes (describe below) TDS amount 249 ppm  
From To Description Amount Units  
203 219 salt water 1700 ppm

## (9) LOCATION OF WELL (legal description)

County YAMHILL Twp 5.00 S N/S Range 3.00 W E/W WM  
Sec 9 SE 1/4 of the SW 1/4 Tax Lot 1500  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ or 45.14458500 DMS or DD  
Long \_\_\_\_\_ or -123.06705800 DMS or DD

☒ Street address of well ☐ Nearest address

16040 SE UNIONVALE ROAD DAYTON, OR 97114

## (10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)  
Existing Well / Pre-Alteration \_\_\_\_\_  
Completed Well 2/6/2023 \_\_\_\_\_ 38.4

Flowing Artesian? ☐ Dry Hole? ☐

## WATER BEARING ZONES

Depth water was first found 71.00

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

9/12/2022	71	113	10		58
9/12/2022	113	127	200		58
9/12/2022	203	219	100		58

## (11) WELL LOG

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

Material	From	To
top soil	0	1
clay brwn silty	1	27
clay gray silty	27	35
clay gray some sandy	35	71
clay gray stiff occ sandy	71	113
sand blk fine to med w/few gravels	113	127
and some silt	113	127
clay gray sandy	127	129
clay gray/green stiff occ sandy	129	203
clay gray sandy soft	203	205
sand fine silty	205	219
clay gray soft sandy	219	223
clay gray/green stiff	223	226
siltstone green soft	226	239

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Date Started 8/30/2022

Completed 2/6/2023

## (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 \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_

## (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 1483 Date 2/15/2023

Signed JOHN STADELI (E-filed)

Contact Info (optional) Arrow Drilling 503-538-4422

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:  
New exempt use wells must be submitted with a map and recording fee.



backfill placed from 135.8 to 195 cement 38 sacks
backfill from 195 to 239 is clay slough and silica sand



WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

YAMH 59179

2/15/2023

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## Map of Hole

# STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301  
(503)986-0900



## LOCATION OF WELL

Latitude: 45.14458500 Datum: WGS84

Longitude: -123.06705800

Township/Range/Section/Quarter-Quarter Section:

WM5.00S3.00W9SESW

Address of Well:

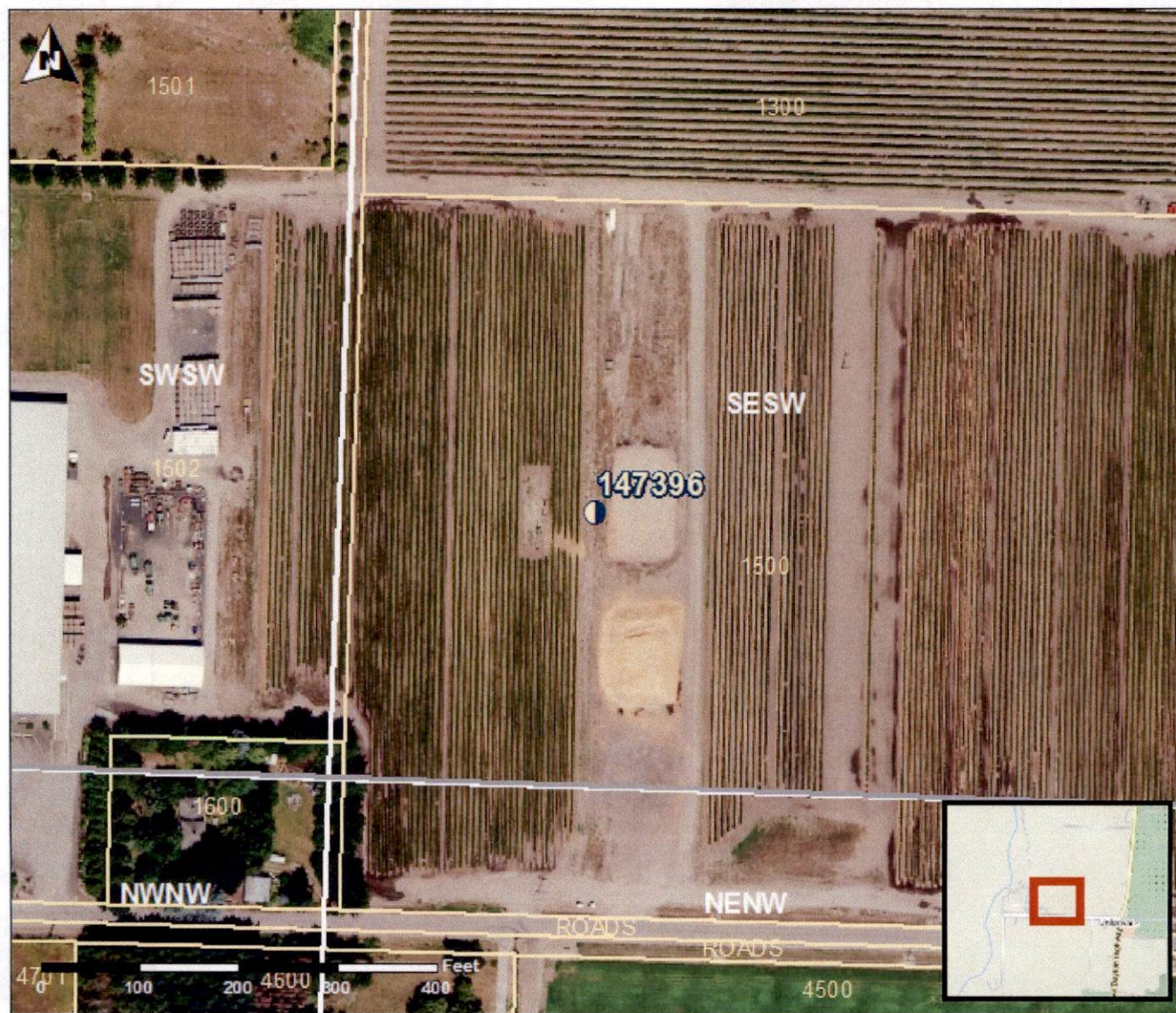
16040 SE UNIONVALE ROAD DAYTON, OR 97114

Well Label: 147396

Printed: February 15, 2023

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



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APR 21 2025  
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## **Attachment C**

Pump Calculations

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Claim of Beneficial Use – Bailey Nurseries, Inc.

## Well 3

### Pump Capacity Calculation Sheet

using Department designed formula:

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

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

---

#### Data Entry (fill in underlined blanks)

---

HP = 20  
Efficiency = 7.04  
Lift = 0  
PSI = 70

---

#### Results Calculated

---

(hp)(efficiency) = 140.8  
Head based on psi = 177.8  
Total dynamic head = 177.8  
(head + lift)

**Pump Capacity = 0.8 cubic feet per second**

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## Holbrook Well 2

### Pump Capacity Calculation Sheet

using Department designed formula:

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

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

---

#### Data Entry (fill in underlined blanks)

---

HP =	<u>30</u>
Efficiency =	<u>7.04</u>
Lift =	<u>0</u>
PSI =	<u>69</u>

---

#### Results Calculated

---

(hp)(efficiency) =	211.2
Head based on psi =	175.3
Total dynamic head =	175.3
(head + lift)	

**Pump Capacity =**                      **1.2 cubic feet per second**

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APR 21 2025  
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## **Attachment D**

Claim of Beneficial Use Map

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Claim of Beneficial Use – Bailey Nurseries, Inc.



April 17, 2025

Gerry Clark  
Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem, Oregon 97301-1271

RE: Claim of Beneficial Use for Transfer T-13527

Gerry:

On behalf of Bailey Nurseries, Inc., please find enclosed a Claim of Beneficial Use report for Transfer T-13527.

Please do not hesitate to contact me at 541-753-0933 with questions about the enclosed COBU.

Sincerely,

A handwritten signature in blue ink that reads "Zach Pike-Urlacher".

Zach Pike-Urlacher  
Water Resources Consultant

A handwritten signature in blue ink that reads "Robyn Cook".

Robyn Cook, RG, PG, CWRE  
Principal Hydrologist

Enclosures:  
Claim of Beneficial Use for Transfer T-13527 and \$230 fee

Received  
APR 22 2025  
OWRD