

**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.

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SECTION 1
GENERAL INFORMATION

1. File Information:

APPLICATION # G-13672	PERMIT # (IF APPLICABLE) G-12002	PERMIT AMENDMENT # (IF APPLICABLE) T-NA
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Rhoda and Brian Gibler		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS 28760 SE Folsom Rd			
CITY Eagle Creek	STATE OR	ZIP 97022	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 Rhoda Gibler		
ADDRESS 26650 SE Eagle Creek Rd (Please update to: 28760 SE Folsom Rd)		
CITY Estacada (Please update to: Eagle Creek)	STATE OR	ZIP 97023 (Please update to: 97022)

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

January 15, 2025

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Rhoda Gibler	January 15, 2025	Owner operator
Brian Gibler	January 15, 2025	Owner operator

6. County

Clackamas 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
	RHODA GIALLER	OWNER	4/20/25

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	CLAC 083	NA
Well 2	CLAC 75492	L-134521

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	Clackamas River Basin	Willamette River
Well 2	Clackamas River Basin	Willamette 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	Blueberries	March 1 through October 31	0.10 cfs
	Agriculture	NA	Year round	
Well 2	Irrigation	Blueberries	March 1 through October 31	0.11 cfs
	Agriculture	NA	Year round	
Total Quantity of Water Used				0.21 cfs

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:

Well 1 (CLAC 083) is located inside a pump shed in the northeast corner of the property. Water is pumped from the well using a 3 Hp submersible pump to convey water through 2-inch galvanized pipe to the south through a backflow preventer then a meter before reducing down to a 1.5-inch PVC pipe. The 1.5-inch PVC pipe continues south about 3 feet before angling down 2 feet then back north. The 1.5-inch PVC pipe extends about 1.5 feet north before connecting to 2 -inch galvanized pipe where a 1-inch PEX tubing tees to the west about 1.5 feet before angling north and connecting to a shut-off valve and then to 1.5-inch PEX for about 2 feet, then connecting to a 1.5-inch PVC pipe angling down underground to irrigate the nursery.

The 2-inch galvanized pipe then continues on to the north and connects back to a 1.5-inch PVC pipe where one line tees off to two 81-gallon pressurized tanks. Another lined tees off with a shut-off valve to supply both houses. Then there is a third tee angles upward about 1.5 feet which then turns north about 2 feet before angling back down connecting to 2-inch shut-off valve and galvanized pipe before extending underground to supply the irrigation.

After the tee for the irrigation, the 1.5-inch PVC pipe is connected to water from Well 2 (CLAC 75492). Well 2 conveys water from 3 Hp submersible pump to the east approximately 330 feet through 2-inch buried PVC line extending under the ditch and road then extending upward into the pump shed in the southwest corner. The 2-inch PVC then connects to 1.5-inch galvanized pipe extending north through a backflow preventer and then a meter before connecting to the 1.5-inch PVC that loops into the same PVC pipe after the tee to the irrigation line.

The line for the irrigation continues from under the shed connecting underground to a 2-inch PVC that heads east about 10 feet to a control box. In the control box, an old mainline continues east but is now cut off. The new mainline tees to the south with a shut-off valve. After the shut-off valve the line connects to 3-inch PVC pipe that heads south about 10 feet before angling west back toward Well 2 in the same trench as the 2-inch PVC line from Well 2 extending east into the pump shed.

By Well 2, the 3-inch mainline heads southeast 514 feet to a filter station. At the filter station, 3-inch steel pipe extends up about 3 feet, then tees south with a faucet, then a back flow preventer, two lines teeing in to add fertilizer, then a third meter to record water just being used from both wells for irrigation. After the meter, the water is conveyed through a filter and pressure regulator set at 40 psi

before teeing back down under ground.

Underground the steel pipe connects to 3-inch PVC pipe where one line tees to the west about 10 feet and then angles north about 21 feet the turn west connecting to 2-inch PVC pipe extending about 220 feet along the southern edge of the northern blueberry field. From this 2-inch PVC pipe, 1-inch polyethylene tubing extends north about 5 feet, one per row. Each 1-inch polyethylene tubing has a Y connection where two ½-inch drip lines can be attached; therefore' two lines of drip per row. The drip emitters in this section are 18 inches apart and there are two zones.

The other line teeing off from the filter station extends south about 96 feet where it connects to a 2-inch PVC pipe extending across the northern edge of both southern fields. From this 2-inch PVC pipe, 1-inch polyethylene tubing extends south about 5 feet, one per row. Each 1-inch polyethylene tubing has a Y connection where two ½-inch drip lines can be attached; therefore, two lines of drip per row. The drip emitters in this section are 24 inches apart and there are nine zones. An additional 2-inch PVC line extends south down the row every 40 feet. From this 2-inch PVC pipe, a 0.5-inch polyethylene tubing is connected every 10 feet where it extends above ground and is connected to 0.5 PVC riser pipes that extend up approximately 6 feet, each with an impact sprinkler on top.

The nursery area is irrigated from the 1.5-inch PVC pipe within the pump house which then extends south connecting to 1.5-inch PVC pipe under the asphalt pad of the barn. On the other side of the barn the 1.5-inch PVC pipe turns west and then extends above ground and is laid out on a grid pattern of above ground 1.5-inch PVC pipe with 1.5 inch PVC risers extending upward about 4 feet, each with an impact sprinkler on top.

An additional strip of landscaping is irrigated from the house to supply a drip line to cover this area.

Irrigation of the blueberries is done one zone at a time for 30 mins along with any overhead impact sprinklers as needed to maintain the full rate allowed.

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).



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. Note there is a scrivener's error in Permit G-12002 regarding the point of diversion location. The permit describes the location for both wells being to the west of NW corner of the Joseph Young DLC #43 when they are clearly located to the east of this DLC corner.
2. The location of Well 1 (CLAC 083) is more correctly placed at:
875 feet south and 1,770 feet east from the NW corner, DLC 43.
3. The location of Well 2 (CLAC 78492) is more correctly placed at:
1,005 feet south and 1,455 feet east from the NW corner, DLC 43.
4. With better mapping with respect to the BLM designating the NW NW quarter-quarter of Section 7 being 36.90 acres, along with the use of recent aerial photos, the section and sixteenth lines vary from the original permit map, resulting in different acreage values per quarter-quarter section. The place of use was also revised to include reference to the DLC and to show the place of use based on field verification and priority date.

Original authorized place of use:

3S	4E	7	NE NW	12.16
3S	4E	7	NW NW	1.48
3S	4E	7	SE NW	<u>6.10</u>
Total:				19.74

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Revised place of use:

3S	4E	7	NE NW	DLC 43	4.9	priority date 4-25-1994
3S	4E	7	NE NW	DLC 43	2.3	priority date 11-29-1994
3S	4E	7	SE NW	DLC 43	1.5	priority date 4-25-1994
3S	4E	7	SE NW	DLC 43	<u>0.8</u>	priority date 11-29-1994
Total:					9.5	

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		0.10 cfs	Not measured	Irrigation		9.5
				Agriculture		
Well 2		0.11 cfs	Not measured	Irrigation		9.5
				Agriculture		
Total:	0.224 cfs				19.74	9.5

SECTION 4a of 4b
SYSTEM DESCRIPTION

Are there multiple POAs?

YES

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

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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
3S	4E	WM	7	NE NW	NA	43	IR & AG	4.9 priority 4-25-1994	NA
3S	4E	WM	7	NE NW	NA	43	IR & AG	2.3 priority 11-29-1994	
3S	4E	WM	7	SE NW	NA	43	IR & AG	1.5 priority 4-25-1994	NA
3S	4E	WM	7	SE NW	NA	43	IR & AG	0.8 priority 11-29-1994	
Total Acres Irrigated								9.5	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:

½ inch plug installed in the sanitary seal on the east north-east side 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 CLAC 083						

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 CLAC 083

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

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
Jacuzzi	Unknown	Unknown	Submersible	Unknown	2 inch

3. Motor Information:

MANUFACTURER	HORSEPOWER
Unknown	3 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)
3 Hp	70 psi	42.0 feet (from pump test recorded on well log)	0 feet	0.10 cfs

5. Provide pump calculations:

$$Q \text{ Pump} = \frac{(3 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(42.0 \text{ ft lift} + 177.8 \text{ ft pressure head})} = 0.10 \text{ cfs}$$

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)
Irrigation portion of well not running during site visit			

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.

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8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch – in pump house	~ 4 feet	Galvanized	Above ground
1.5 inch – in pump house	~ 30 feet	PVC	Above ground
Both wells:			
1 inch – in pump house for nursery area	~ 3.5 feet	PEX	Above ground
1.5 inch – in pump house for nursery area	~ 0.5 feet	PVC	Above ground
1.5 inch – to nursery area	~ 110 feet	PVC	Buried
2 inch – from pump house to control box	~ 10 feet	PVC	Buried
3 inch – from control box to blueberry fields	~ 650 feet	PVC	Buried
3 inch – at the filter station	~ 15 feet	Steel	Above ground and buried
2 inch off 3 inch to supply berry fields	~ 725 feet	PVC	Buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
1.5 inch – in the nursery area	~ 350 feet	PVC	Above ground
1 inch – in blueberry field to connect drip	~ 300 feet	Polyethylene	Above ground and buried
2 inch – in blueberry for impact	~ 5,250 feet	PVC	Buried
0.5 inch – in blueberry for impact	~ 2,650 feet	Polyethylene	Above ground and buried
0.5 inch – in blueberry for impact	~ 3,200 feet	PVC	Above ground

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
Nelson WF – Green – in blueberry field	40 psi	1.9 gpm	~ 525	~50	0.21 cfs
Rainbird MaxiPaw – red – in nursery area	45 psi	2.3 gpm	9	9	0.046 cfs

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
18 inches	1.12 gpm / 100 feet	~12,040 feet	6,020 feet	0.15 cfs	NA
24 inches	0.44 gpm / 100 feet	~ 66,000 feet	7,640 feet	0.075 cfs	NA

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)?

YES

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

If "YES" is it a: Storage Tank
 Bulge in System / Reservoir

YES

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
Metal tank 1 – same tank as Well 2	81 gallons	Above ground
Metal tank 2 – same tank as Well 2	81 gallons	Above ground

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 1 combined with Well 2 also supplies two houses.

The meters in the pump house record water use from both wells along with the domestic use and irrigation of the garden area.

There is a third meter by the filter station that only records water used from both wells for irrigation of the blueberry fields only.

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SECTION 4b of 4b
SYSTEM DESCRIPTION

Are there multiple POAs?

YES

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 2

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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
3S	4E	WM	7	NE NW	NA	43	IR & AG	4.9 priority 4-25-1994	NA
3S	4E	WM	7	NE NW	NA	43	IR & AG	2.3 priority 11-29-1994	
3S	4E	WM	7	SE NW	NA	43	IR & AG	1.5 priority 4-25-1994	NA
3S	4E	WM	7	SE NW	NA	43	IR & AG	0.8 priority 11-29-1994	
Total Acres Irrigated								9.5	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:

Top of casing beneath pitless adaptor cap.

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 CLAC 75492						

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 CLAC 75492

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

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
Franklin	FPS 4400 35FA3S4-PE	191220600390H	Submersible	2 inch	2 inch

3. Motor Information:

MANUFACTURER	HORSEPOWER
Franklin Electric	3 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)
3 Hp	70 psi	19.4 feet (from permit condition pump test)	0 feet	0.11 cfs

5. Provide pump calculations:

$$Q \text{ Pump} = \frac{(3 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(19.4 \text{ ft lift} + 177.8 \text{ ft pressure head})} = 0.11 \text{ cfs}$$

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)
Irrigation portion of well not running during site visit			

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.

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8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch – to pump house	~ 330 feet	PVC	Buried
1.5 inch – in the pump house	~ 1 foot	Galvanized	Above ground
1.5 inch – in the pump house	~ 5 feet	PVC	Above ground
See Well 1 for the rest mainlines			

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
See Well 1			

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
See Well 1					

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
See Well 1					

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)?

YES

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

If "YES" is it a: Storage Tank
 Bulge in System / Reservoir

YES
NO

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

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2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Metal tank 1 – same tank as Well 1	81 gallon	Above ground
Metal tank 2 – same tank as Well 1	81 gallon	Above ground

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 2 combined with Well 1 also supplies two houses.

The meters in the pump house records water use from both wells along with the domestic use and irrigation of the garden area.

There is a third meter by the filter station that only records water used from both wells for irrigation of the blueberry fields only.

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	December 22, 1995		
BEGIN CONSTRUCTION (A)	December 22, 1996	December 22, 1996	Well 1 (CLAC 083) construction began May 1, 1990, and was

			completed May 23, 1990
COMPLETE CONSTRUCTION (B)	October 1, 1997 extended to: October 1, 2002 extended to: October 1, 2024	Summer 2024	North field planted and irrigated
COMPLETE APPLICATION OF WATER (C)	October 1, 1998 extended to: October 1, 2002 extended to: October 1, 2024	Summer 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)? YES

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

a. Did the Extension Final Order require the submittal of Progress Reports? YES and NO

1. Extension final order dated August 30, 1999, did not require Progress Report

2. Extension final order dated May 10, 2019, did require Progress Report be submitted by October 1, 2023

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

b. Were the Progress Reports submitted? YES

Progress Report due by October 1, 2023, was submitted September 22, 2023.

If the reports have not been submitted, attach a copy of the reports if available.

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? NO

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

4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements? NO

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

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? NO

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

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

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

For Well 1 (CLAC 083): A multi-well exemption is attached to be approved once the pump test result for Well 2 (CLAC 75492) is approved

**** 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

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1	Carlton	18 000172	Working	16,194,913.6 gallons (January 15, 2025)	December 3, 2018
Well 2	Carlton	18 000155	Working	16,640,992.6 gallons (January 15, 2025)	January 14, 2020
Blueberry meter	Netafim	22- 80027069	Working	5,498,661 gallons (January 15, 2025)	March 14, 2024

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

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

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 and NO

WELL	WELL ID #	DATE ATTACHED TO WELL
Well 1	NA	NA
Well 2	L-134521	January 2020

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):

e1) Condition per the extension FO issued May 10, 2019:

"This is to be the last extension of time granted for Permit G-12002. Any future extension of time requests may be denied."

Compliance:

No additional extension applications were submitted.

**SECTION 6
ATTACHMENTS**

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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 – CLAC 083	Well log and driller's notes for CLAC 083 – Well 1
State Water Well Report – CLAC 75492	Well log and driller's notes for CLAC 75492 – Well 2
BLM Cadastral Map	BLM Cadastral Map T. 3S. R. 4E. showing quarter-quarter section measurements.
BLM Cadastral Map	BLM Cadastral Map T. 3S. R. 4E. showing DLC and Government Lot locations
Pump Test Form Cover Sheet and Pump Test Data Sheet	Pumping Test Results for Well 2 (CLAC 75492) conducted January 14, 2025
Pump Test Multiple Well Exemption Request Form	Pump Test Multiple Well Exemption Request Form for Well 1 (CLAC 083)

**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 4E 7, 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:

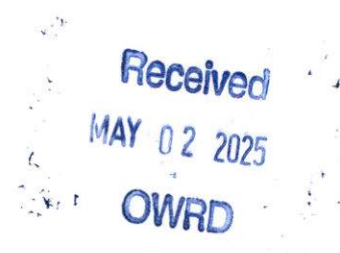
<http://datagateway.nrcs.usda.gov/Catalog/ProductDescription/NAIPM.html>

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 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

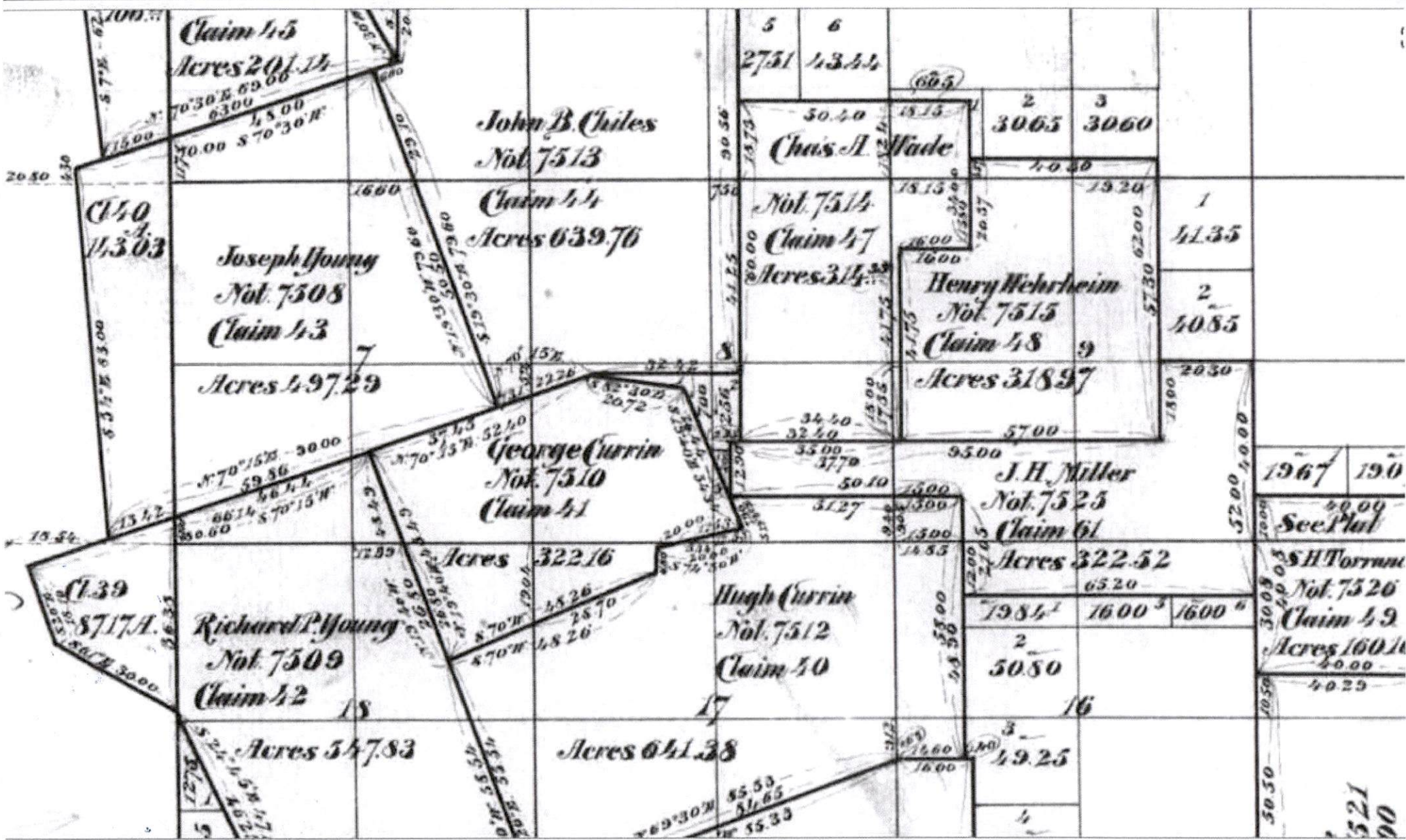




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PUMP TEST FORM
COVER SHEET

Owner Information:

OWNER NAME/BUSINESS NAME: <u>Brian Gibler & Rhoda Gibler</u>	PHONE No.: <u>503-333-8270</u>	ADDITIONAL CONTACT No.: <u>503-807-4219</u>
ADDRESS: <u>28760 SE Folsom Rd</u>		
CITY: <u>Eagle Creek</u>	STATE: <u>OR</u>	ZIP: <u>97022</u>
E-MAIL: <u>CAPTAINBB@CASCADEACCESS.COM</u>		

Pump Test Conducted By (If Different From Owner):

TEST CONDUCTED BY NAME: <u>George Youngberg</u>	QUALIFICATION: (SELECT) <u>WWCL</u>	LICENSE #: <u>1771</u>
COMPANY: <u>Youngberg Pump & Well Drilling LLC</u>	PHONE No.: <u>503-630-3970</u>	ADDITIONAL CONTACT No.: <u>503-269-2341</u>
ADDRESS: <u>36263 SE Kemp Rd</u>		
CITY: <u>ESTACADA</u>	STATE: <u>OR</u>	ZIP: <u>97023</u>
E-MAIL: <u>Youngbergdrilling@gmail.com</u>		

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
<u>C1AC 75492</u>	<u>L134521</u>	<u>#2</u>	<u>80</u>	<u>Gibler</u>	<u>1/2/2020</u>	<u>1-14-25</u>

(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)
<u>3S</u>	<u>4E</u>	<u>7</u>	<u>NE/NW</u>		<u>45.33070896</u>	<u>-122.36707119</u>

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?
<u>G-13672</u>	<u>G-12002</u>			<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
				<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
				<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.

☒ 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)
<u>C1AC 083</u>	<u>330 FT TO THE NE.</u>	<u>1-14-25 8:59 AM</u>	<u>1-14-25 1:09 PM</u>	<u>40</u>

☒ 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.

☒ Was the test conducted during normal use of the well?
Please indicate where pumped water was discharged: ON THE GROUND
How far from the pumped well was water discharged? 350 FT

Additional forms can be found at:

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PUMP TEST FORM COVER SHEET

Water-Level Measurement Method: E-TAPE

Length of air line (if used): _____

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

Pressure transducer (if used): _____

Manufacturer: _____ Serial #: _____
Date Last Calibrated: _____ Units: _____

Discharge Measurement Method: _____

Flowmeter (if used): _____

Manufacturer: CARLON Serial #: 18000155

Date Last Calibrated: 2020 Units: GALLONS

*Verify here: { Airline: _____ psi _____ feet.
E-Tape: 500 _____ feet.

Pump Type: Sub

HP: 3 Pump set at: 62 feet.

Pump idle time: 36 HRS

Note: Well must be idle for at least 16 hours prior to the test. Additional forms can be obtained from our web site at:

Measuring Point (MP): Measuring point distance above land surface 2'8" feet.

Description (e.g., top port of 1 inch port pipe, west side) TOP OF WELL CASING

Time pump turned on: Date 1/14/25 Time 8:59 AM

Time pump turned off: Date 1/14/25 Time 1:09 PM

Total pumping time: 4 hours 12 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:

Submit forms to:

Attn: Certificates Section, Oregon Water Resources Department
725 Summer St NE Suite A, Salem, OR 97301

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I hereby certify that this test has been conducted in accordance with OAR 690-217:

OPERATOR SIGNATURE: George Yangby

DATE: 1-14-25

OWNER SIGNATURE: [Signature]

DATE: 1-14-25

Additional forms can be found at:

OWRD 20200115

Recovery Data \

OWRD 2/9/2000



OREGON
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PUMP TEST MULTIPLE WELL
EXEMPTION REQUEST FORM

OWNER NAME/BUSINESS NAME Rhoda Gibler		PHONE NO. 503-807-4219	ADDITIONAL CONTACT NO.
ADDRESS 28760 SE Folsom Rd			
CITY Eagle Creek	STATE OR	ZIP 97022	E-MAIL captainbb@cascadeaccess.com

NOTE: To qualify for an exemption from testing your well(s), you must meet all of the following criteria (OAR 690-217-0020(3)):

1. You own multiple wells producing water from the same aquifer (to be verified by OWRD);
2. One of the wells has been tested and the test has been approved by OWRD; and
3. The wells are within 5 miles of the tested well.

1. List the *tested* well. If the well is listed on any water right, please provide the water right identification numbers as well as the surveyed location. Note that an exemption cannot be granted until the test has been approved.

WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	OWNER WELL NAME OR #	TEST DATE	APPLICATION	PERMIT	TRANSFER	CERTIFICATE
CLAC 75492	L-134521	Well 2	1-14-25	G-13672	G-12002	T-NA	NA

(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)
3S	4E	7	NENW	1015' S & 1340' E from NW corner DLC 43		

2. List each well and associated water right(s) for which you are requesting a multiple well exemption. This does *not* include the tested well. If a well is listed on more than one water right, be sure to include them all here:

	WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	WELL NAME OR #	APPLICATION	PERMIT	TRANSFER
a	CLAC 083	L-NA	WELL1	G-13672	G-12002	T-NA
b		L-		G-	G-	T-
c		L-		G-	G-	T-
d		L-		G-	G-	T-
e		L-		G-	G-	T-

(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)
a	3S	4E	7	NENW	905' S & 1640' E from NW corner DLC 43		
b							
c							
d							
e							

3. For each well listed in #1 and #2 above, attach all water well reports (i.e. well logs) or, if unavailable, other documentation showing the water-producing zones. If available, please attach a copy of the test and/or approval letter as well as a map showing the locations of all wells listed on this form.

I hereby certify that the tested well and the well(s) requested for exemption(s) are under the ownership listed above and are located within 5 miles of each other.

SIGNATURE: Rhoda Gibler

DATE: 4/20/25

LICENSE #:

PRINTED NAME: RHODA GIBLER

(CIRCLE ONE) OWNER EMPLOYEE, CWRE, RG, PE, WWC, PUMP INSTALLER

PHONE: 503-807-4219

EMAIL: captainbb@cascadeaccess.com

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