

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

**A fee of \$230 must accompany this form for permits  
with priority dates of July 9, 1987, or later.**

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

*In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.*

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**

**1. File Information:**

APPLICATION # <b>G-16210</b>	PERMIT # (IF APPLICABLE) <b>G-15773</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>T-</b>
---------------------------------	--	---

**Received**  
**JUN 06 2025**  
**OWRD**

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

APPLICANT/BUSINESS NAME <b>Austin D. Baumgardner</b>		PHONE NO. <b>1 509 876 1377</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>53881 Walla Walla River Rd</b>			
CITY <b>Milton Freewater</b>	STATE <b>OR</b>	ZIP <b>97862</b>	E-MAIL <b>danzer2120@gmail.com</b>

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>Austin D. Baumgardner</b>		
ADDRESS <b>53881 Walla Walla River Rd</b>		
CITY <b>Milton Freewater</b>	STATE <b>OR</b>	ZIP <b>97862</b>

ADDITIONAL PERMIT HOLDER OF RECORD <b>Not Applicable</b>		
ADDRESS		
CITY	STATE	ZIP

**4. Date of Site Inspection:**

<b>Feb 22, 2025</b>
---------------------

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Austin Baumgardner</b>	<b>Feb 22, 2025</b>	<b>Property Owner</b>

**6. County:**

<b>Umatilla</b>
-----------------

**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 <b>Not Applicable</b>		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

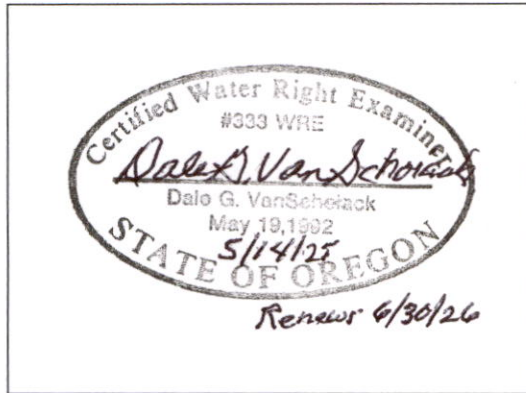
**Received**  
**JUN 06 2025**  
**OWRD**



## 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.

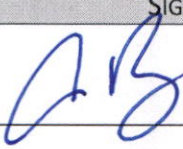


CWRE NAME <b>Dale VanSchoiack</b>		PHONE NO. <b>506 627 8717</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>2141 South Lyle St</b>			
CITY <b>Kennewick</b>	STATE <b>WA</b>	ZIP <b>99337</b>	E-MAIL <b>dalevconsulting@gmail.com</b>

### 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
	<b>Austin D. Baumgardner</b>	<b>Property Owner</b>	<b>6-2-2025</b>

Received  
 JUN 06 2025  
 OWRD

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 2	UMAT 55735	44050

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 2	Walla Walla River Basin	

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 2	Irrigation	Pasture grass	Mar 1 – October 31	187.2 gpm (0.42 cfs) (Based on Lower Pasture sprinkler capacity all being operated at the same time.)
Total Quantity of Water Used				187.2 gpm (0.42 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:

Water is pumped from Well 2 with a 25 hp submersible pump. From the pump the water flows south through a buried main pipeline 1060± ft along the westerly property line (east side of the Walla Walla River Rd). Approximately 200 ft south of the well, buried lateral pipelines start branching off the main line and extend to the east. There are buried shutoff valves at the beginning of each of the lateral pipelines. The laterals are spaced at 58± ft along the mainline. There are sprinklers installed along the laterals at 58± ft spacings. The sprinklers are located such that they create a triangular spacing across the irrigated area. This configuration of pipelines and sprinklers irrigate a parcel of ground (the lower pasture) along the east side of Walla Walla River Road. Approximately 540 ft south of the well there is a 2.5" PVC above grade main pipe that connects to the mainline along the road. This mainline pipe extends easterly for 580± ft up a slope to an upper pasture area. There are two above ground laterals that connect to this mainline. One extends to the north 990± ft and one extends to the south 1290± ft. Sprinklers are located along these laterals at a spacing of 33± ft and are used to provide irrigation water to the upper pasture area.

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.")

The permit authorized the use of two POAs, Well 1 and Well 2. Only Well 2 was used to irrigate the ground authorized under this permit. The permit authorized the irrigation of 33.78 acres and supplemental irrigation on 0.74 acres. The water user only developed 18.2 acres of primary irrigation and no supplemental irrigation.

The permit lists Well 2 as being located 410 ft North and 490 ft East from the SW corner of Section 7. While preparing this report the location of Well 2 was determined to be 380 ft North and 510 ft East from the SW corner of Section 7.

**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 2	0.43 cfs	187.2 gpm (0.42 cfs) (Based on Lower Pasture sprinkler capacity all being operated at the same time.)	Not Applicable	Primary Irrigation & supplemental irrigation	33.78 ac primary 0.74 ac Supple- mental ac	18.2 ac of primary irrigation, 0.0 ac of supp irrigation

**Received**

**JUN 06 2025**

**OWRD**

## SECTION 4 SYSTEM DESCRIPTION

Are there multiple POAs?

NO

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

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

Well 2

### 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
5 N	36 E	W.M.	7	SWSW			Irrigation	3.8	
5 N	36 E	W.M.	18	NENW			Irrigation	0.9	
5 N	36 E	W.M.	18	NWNW			Irrigation	13.5	
Total Acres Irrigated								18.2 ac	0.0 ac

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:

There is a 1" diameter hole in the top seal on the well that is used for measuring the water level in the well.

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
Not Applicable						

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.

UMAT 55735

### 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.

Items 2 through 4 relating to this section were deleted.

Received

JUN 06 2025

#### D. Diversion and Delivery System Information

OWRD

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

1. Is a pump used?

YES

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

##### 2. Pump Information:

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

##### 3. Motor Information:

MANUFACTURER	HORSEPOWER
Unknown	25 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)
25 hp	70± psi for the lower pasture, 151 psi for the upper pasture	150 ft (estimated SWL with 50 ft drawdown)	Lower pasture 14' (1130'-1116') Upper pasture 214' (1330'-1116')	0.55 when irrigating the lower pasture, 0.22 cfs when irrigating the upper pasture

##### 5. Provide pump calculations:

###### WELL PUMP 25 hp submersible

###### LOWER PASTURE

###### Estimated Pumping head (TDH ft)

Lift (WL to pump head) 100 ft SWL plus assumed 50 ft drawdown.	150 ft
Lift (from well head to POU)	14 ft
Misc. loss - valves, fittings, and column pipe	20 ft
Mainline loss to lower pasture (estimated)	13 ft
Lateral loss to sprinklers (estimated)	7 ft
Pressure @ sprinklers 50 psi	116 ft
Total TDH	320 ft

$$Hp = \frac{TDH \times gpm}{3960 \times \text{eff.}} \text{ or } gpm = \frac{3960 \times \text{eff} \times hp}{TDH} = \frac{3960 \times 80\% * \times 25 \text{ hp}}{320 \text{ ft}} = 247.5 \text{ gpm or } 0.55 \text{ cfs}$$

\*Assumed pump efficiency when operating at 313 ft TDH

#### UPPER PASTURE

Estimated Pumping head (TDH ft)

Lift (WL to pump head) 100 ft SWL plus assumed 50 ft drawdown.	150 ft
Lift (from well head to POU)	214 ft
Misc. loss - valves, fittings, and column pipe	20 ft
Mainline loss to upper pasture (estimated)	10 ft
Lateral loss to sprinklers (estimated)	47 ft
Pressure @ sprinklers 25 psi	<u>58 ft</u>
<b>Total TDH</b>	<b>499 ft</b>

$$Hp = \frac{TDH \times gpm}{3960 \times \text{eff.}} \text{ or } gpm = \frac{3960 \times \text{eff} \times hp}{TDH} = \frac{3960 \times 50\% ** \times 25 \text{ hp}}{499 \text{ ft}} = 99.2 \text{ gpm or } 0.22 \text{ cfs}$$

\*\*Assumed pump efficiency when operating at 498 ft TDH

From the analysis above the 25 hp submersible pump is sufficient to deliver 0.56 cfs when operating at 80% efficiency and a head suitable for irrigating the lower pasture and 0.22 cfs when operating at 50% efficiency and a head suitable for irrigating the upper pasture.

**Received**  
**JUN 06 2025**  
**OWRD**

#### 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)
Not Applicable			

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

#### 7. Is the distribution system piped?

YES NO

If "NO" items 8 through item 13 may be deleted.



**8. Mainline Information:**

MAINLINE SIZE	LENGTH (FT ±)	TYPE OF PIPE	BURIED OR ABOVE GROUND
4"	540 ft	PVC	Buried
3"	280 ft	PVC	Buried
2.5" Lower pasture	180 ft	PVC	Buried
2.5" Upper pasture	580 ft	PVC	Buried
2"	120 ft	PVC	Buried
1.5"	120 ft	PVC	Buried

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH (FT±)	TYPE OF PIPE	BURIED OR ABOVE GROUND
1.25" Lower Pasture	2040 ft	PVC	Buried
1.5" Upper Pasture	1520 ft	Poly pipe	Above ground
1.25" Upper Pasture	760 ft	Poly pipe	Above ground

**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (cfs)
Lower Pasture					
Nelson 33 Impact w/0.125" dia nozzles	50 psi average	3.2 gpm±	46±	46±	147.2 gpm ± (0.33 cfs)
Nelson 2000 Rotator	50 psi average	2.5 gpm±	16±	16±	40 gpm ± (0.09 cfs)
Upper Pasture					
Nelson R10 Rotator P4 9° White	25 psi average	0.43 gpm±	69±	69±	29.7 gpm ± (.07 cfs)

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

**Received**  
JUN 06 2025  
OWRD

**11. Drip Emitter Information:**

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
Not Applicable					

**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
Not Applicable					

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
Not Applicable				

**E. Storage**

1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)?

NO

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

Items 2 and 3 relating to this section were deleted.

**F. Gravity Flow Pipe**

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

NO

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

Items 2 through 4 relating to this section were 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.



Items 2 through 4 relating to this section were deleted.

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

The irrigation system is constructed in a manner that allows the water user to irrigate either the lower or upper pastures or a combination of the upper pasture along with sprinklers in the lower pasture. In the lower pasture there are valves at the base of all the sprinklers which allows the water user maximum flexibility in which sprinklers are operated. In the upper pasture all the sprinklers along each lateral are operated at the same time. If only the lower pasture is being irrigated the 25 hp submersible pump is sufficient to operate all the lower pasture sprinklers at the same time. If the upper pasture is being irrigated there is sufficient system capacity to operate all the upper pasture sprinklers and provide 70 gpm± to operate some of the lower pasture sprinklers at the same time.

Received  
JUN 06 2025  
OWRD

## 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 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	November 18, 2004		
BEGIN CONSTRUCTION (A)	Not Stated	April, 2006	The water user started and completed the construction of Well 2. The water user started construction of the irrigation system.
COMPLETE CONSTRUCTION (B)	Not Stated	Oct 1, 2023	The water user completed construction of the irrigation system.
COMPLETE APPLICATION OF WATER (C)	Permit date Oct 1, 2009 extended to Oct 1, 2024	Oct 1, 2024	The water user irrigated ground authorized in the permit.

\* 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

An extension was issued on November 21, 2014 which extended the time of completion for the permit to October 1, 2024.

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

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

b. Were the Progress Reports submitted?

YES

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?

YES

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



b. What month was the initial measurement to be taken in?

March

c. Was the measurement submitted to the Department?

YES

d. If the initial measurement was not submitted, provide that measurement now, if available:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
Not Applicable			

#### 4. Annual Static Water Level Measurements:

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

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

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

March

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

YES

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

YES

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
Not Applicable			

#### 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.

**The permit includes a statement that prior to receiving a certificate a pump test is required. The permit holder has been made aware of this requirement.**

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?

NO

d. Has the pump test been approved by the Department?

NO

e. Has a pump test exemption been approved by the Department?

NO

**\*\* Claims will not be reviewed until a pump test or exemption has been approved by the Department**

#### 6. Measurement Conditions:

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? YES

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

**Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion or appropriation.**

b. Has a meter been installed?

YES

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 2	McCrometer	1-04942-4	Working	404847ac ft x .0001	2016

*If a meter has been installed, items d through f relating to this section may be deleted.*

**Items d through f relating to this section were 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.*

b. Have the reports been submitted?

**Not Applicable**

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

**8. Other conditions required by permit, permit amendment final order, or extension final order:**

a. Were there special well construction standards?

NO

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

NO

c. Was submittal of a water management and conservation plan required?

NO

d. Was a Well Identification Number (Well ID tag) assigned and attached to the well?

YES

WELL ID #	DATE ATTACHED TO WELL
Well 1	1338
Well 2	44050

e. Other conditions?

NO

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

**Well tag numbers were attached to the well casings.**

**Received**

**JUN 06 2025**

**OWRD**



**SECTION 6**  
**ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
COBU Map	COBU Map
Well 1 (UMAT 50156)	Well Log for UMAT 50156
Well 2 (UMAT 55735)	Well Log for UMAT 55735

**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 the application map, the tax assessor's map, a google image, and measurements and observations made during the site visit.

Received  
JUN 06 2025  
OWRD

## 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
- NA** 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
- NA** 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  
JUN 06 2025  
OWRD



STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765)

JUN 13 1996

WELL I.D.# 601338

(START CARD) # 68638

Instructions for completing this report are on the last page of this form.

SALEM, OREGON

(1) OWNER:

Well Number \_\_\_\_\_  
Name SANDY HUBERT - SMITH  
Address RT 1 BOX 3A  
City MILTON-FREewater State OR Zip 97862

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:

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

(4) PROPOSED USE:

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

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 155 ft.  
Explosives used ☐ Yes ☐ No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
16"	0	26	Portland			
8"	26	50	Cement	0	50	21 sacks
4"	50	155				

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

☐ Other \_\_\_\_\_

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

Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8"	0	26	14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: 6"	78	50	14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 50

(7) PERFORATIONS/SCREENS:

☐ Perforations Method \_\_\_\_\_  
☐ Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

<input type="checkbox"/> Pump Yield gal/min	<input type="checkbox"/> Bailor Drawdown	<input checked="" type="checkbox"/> Air Drill stem at	<input type="checkbox"/> Artesian Time
30		155	1 hr.
30		121	1 hr.
30		96	1 hr.

Temperature of water 60°F Depth Artesian Flow Found \_\_\_\_\_

Was a water analysis done? ☐ Yes By whom \_\_\_\_\_

Did any strata contain water not suitable for intended use? ☐ Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other \_\_\_\_\_

Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:

County Lincoln Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 5N N or S Range 36E E or W. WM.  
Section 7 1/4 36 1/4 56 1/4  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_  
1700 - 134106 - 134309

(10) STATIC WATER LEVEL:

66 ft. below land surface. Date 5-28-96  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found	89		
From	To	Estimated Flow Rate	SWL
66	74	1/2	
89	97	30	68

(12) WELL LOG:

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

Material	From	To	SWL
Soil	0	14	
Gravel	14	28	
Scoria	28	35	
Black w/ Blue	35	40	
Black	40	56	
Black w/ Brown	56	60	
Black	60	63	
Black w/ Brown	63	66	
Black	66	89	68
Black Scoria w/ Blue	89	97	
Black	97	118	
Black/Red w/ Blue	118	133	
Black	133	153	

Received

JUN 06 2025

OWRD

Date started 5-22-96 Completed 5-28-96

(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 Gary Dinnis WWC Number 1588 Date 5/28/96

(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 Garry Beard WWC Number 544 Date 5-28-96



UMAT 55735

Received

JUN 06 2025

Umat 55735

STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number 3  
Name NITA STOCKE  
Address 53881 Walla Walla River Road  
City Milton Freeewater State ORE Zip 97862

(2) TYPE OF WORK  
☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:  
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger  
☐ Other \_\_\_\_\_

(4) PROPOSED USE:  
☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation  
☐ Thermal ☐ Injection ☐ Livestock ☐ Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 244 ft.  
Explosives used ☐ Yes ☒ No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE				SEAL			
Diameter	From	To	Material	From	To	Material	or pounds
12	0	19	Neat Cement	0	90	Neat Cement	34
10	19	90	Neat Cement				
8 1/2	90	244					

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

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8	0	90	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used ☐ Inside ☐ Outside ☒ None  
Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

☐ Perforations Method \_\_\_\_\_  
☐ Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
250		235	1 hr.
100		180	1/2

☐ Pump ☐ Bailer ☒ Air ☐ Flowing  
☐ Artesian

Temperature of water 52 Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done? ☐ Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use? ☐ Too little  
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

OWRD

WELL I.D. # L 44650  
START CARD # W183736

(9) LOCATION OF WELL by legal description:  
County Umatilla Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 5 or S Range 36 or W. WM.  
Section 7 SW 1/4 SW 1/4  
Tax Lot 800 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 53881 Walla Walla River Road

(10) STATIC WATER LEVEL:  
120 ft. below land surface. Date 4-24-06  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 15

From	To	Estimated Flow Rate	SWL
15	47	20	15
198	244	250+	120

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Soil - Cabbles	0	35	
Soft Brown Basalt	35	47	15
Black Basalt - HARD	47	57	
Med-Black Basalt	57	100	
Black with Brown Basalt	100	106	
Brown Basalt	106	108	
Black Basalt	108	125	
Brown Basalt	125	135	
Black Basalt	135	198	
Soft Black Basalt	198	244	120

RECEIVED

MAY 18 2006

WATER RESOURCES DEPT  
SALEM, OREGON

RECEIVED

OCT 10 2006

WATER RESOURCES DEPT  
SALEM, OREGONDate started 4-17-06 Completed 4-24-06

(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 \_\_\_\_\_ WWC Number \_\_\_\_\_  
Date \_\_\_\_\_

(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 Mike Hardline WWC Number 1639  
Date 5-11-06