FILE#: G 14954

CITY OF HUBBARD; NOGLE, VICKIE
~~3728 2ND ST~~ PO Box 380
HUBBARD, OR 97032

**Application No.** G14954
**Permit No.** G-13857
**Certificate No.** 90150

**Stream Index, Page No.** .....

**FEES PAID**

| Date | Amount | Receipt No. |
|---|---|---|
| 3/4/99 | $200.00 | 28111 |
| 4/15/99 | $200.00 | 28949 |
| 9.15.00 | 175.00 | 40414 |
| | | |
| | Cert. Fee | |

**FEES REFUNDED**

| Date | Amount | Check No. |
|---|---|---|
| | | |

Date filed .....
Priority .....
Action suspended until C04 / FPD
.....
Return to applicant .....
Date of approval .....

**CONSTRUCTION**

Date for beginning 8-15-01
Date for completion .....
Extended to .....
.....
Date for application of water 10-1-04
Extended to .....
.....

**PROSECUTION OF WORK**

Form "A" filed .....
Form "B" filed .....
Form "C" filed .....

**FINAL PROOF**

Blank mailed .....
Proof received COBLE 7/1/2005
Date certificate issued 9/18/15

**ASSIGNMENTS**

| Date | To Whom | Address | Volume | Page |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

**REMARKS**

SP*70900-119

# Mailing List for Certificate

Scheduled Mailing Date:

**Application:** G-14954

**Permit:** G-13857

**Certificate:** 90750

**Copies Mailed**

**by:** JH (STAFF)

**on:** 9/18/15 (DATE)

**Permit/Certificate Holder:**

CITY OF HUBBARD
VICKIE NOGLE
PO BOX 380
HUBBARD OR 97032-0380

**Copies of Final Certificate to be sent to:**

1. Watermaster District 16
2. Data Center (include copy of map)
3. Water Availability
4. Vault
5. File

**Other persons to receive copies: (include map):**

1. 4B ENGINEERING AND CONSULTING
   EDWARD PERRY BUTTS, CWRE

STATE OF OREGON

COUNTY OF MARION

CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

CITY OF HUBBARD
VICKIE NOGLE
PO BOX 380
HUBBARD, OREGON 97032

confirms the right to use the waters of A WELL IN MILL CREEK BASIN for MUNICIPAL USE.

This right was perfected under Permit G-13857. The date of priority is MARCH 29, 1999. The amount of water to which this right is entitled is limited to an amount actually used beneficially, and shall not exceed 0.668 CUBIC FOOT PER SECOND, measured at the well.

The period of use is year round.

The well is located as follows:

| Twp | Rng | Mer | Sec | Q-Q | DLC | Measured Distances |
|---|---|---|---|---|---|---|
| 4 S | 1 W | WM | 33 | NW SE | 55 | 1540 FEET NORTH AND 1720 FEET WEST FROM SE CORNER, SECTION 33 |

The place of use is located as follows:

**WITHIN THE SERVICE BOUNDARIES OF THE CITY**

Measurement, recording and reporting conditions:

A. The water user shall maintain a meter or other suitable measuring device approved by the Director in good working order, shall keep a complete record of the amount of water used each month, and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the water user to report general water-use information, including the place and nature of use of water under the right.

B. The water user shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

**NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW**

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484 and ORS 536.075. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 183.484, ORS 536.075 and OAR 137-004-0080, you may petition for judicial review and 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. In addition, under ORS 537.260 any person with an application, permit or water right certificate subsequent in priority may jointly or severally contest the issuance of the certificate within three months after issuance of the certificate.

The water user shall monitor and report the impact of water use under this right in accordance with the approved water level monitoring plan on file with the Department. If a well listed on this right (or replacement well) displays a total static water-level decline of 25 or more feet over any period of years, as compared to the reference level, then the water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s). Such action shall be taken until the water level recovers to above the 25-foot decline level or until the Department determines, based on the water user's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this right.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this right, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well shall be continuously cased and continuously sealed to a minimum depth of 210 feet below land surface.

The well shall be maintained in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine the water level elevation in the well at all times.

The Director may require water level or pump test results every ten years.

Failure to comply with any of the provisions of this right may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the right.

This right is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

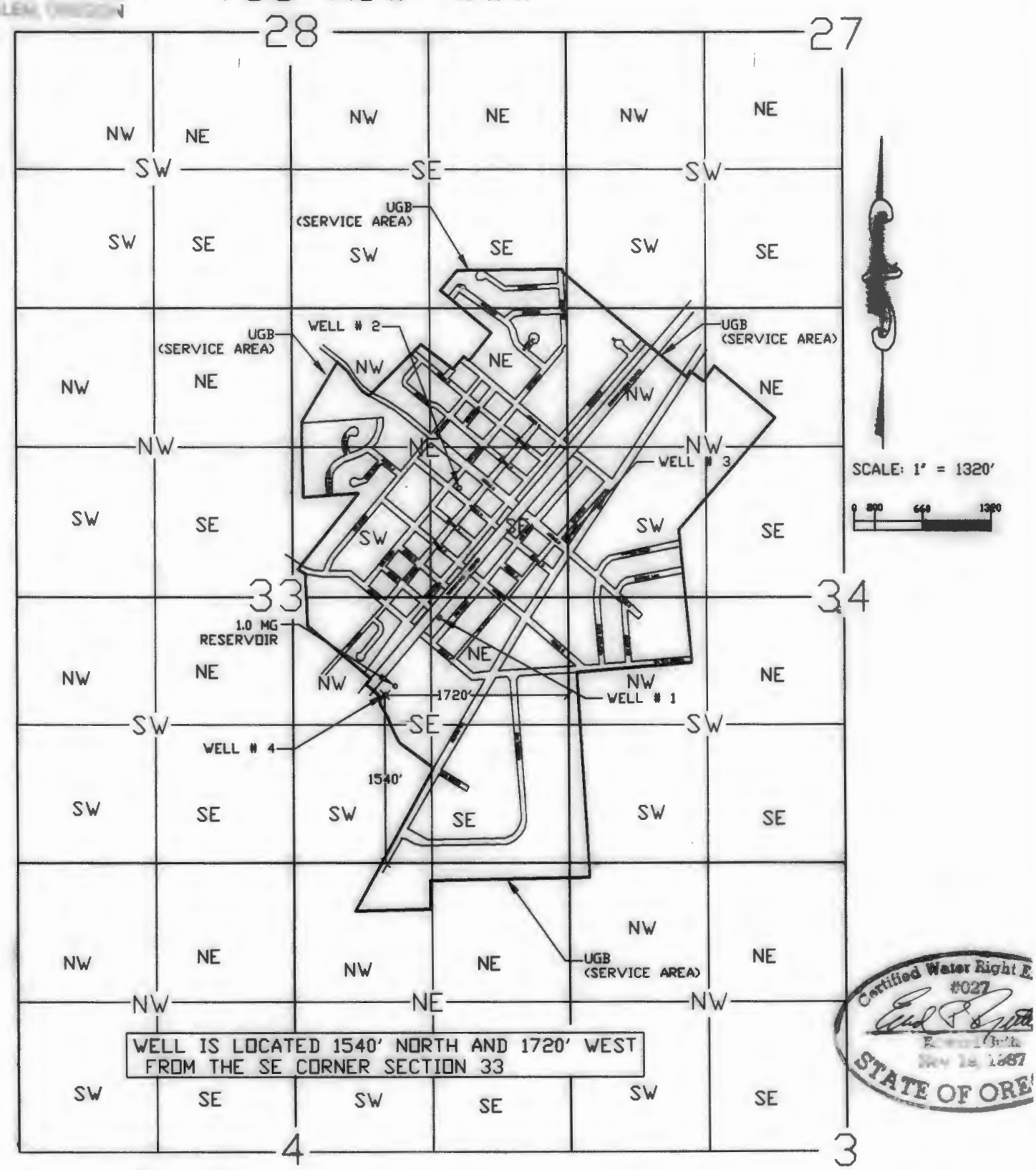
The use of water shall be limited when it interferes with any prior surface or ground water rights.

The right to the use of the water for the above purpose is restricted to beneficial use on the lands or place of use described; however, water may be applied to lands which are not specifically described above, provided the holder of this right complies with ORS 540.510(3).

Issued SEP 18 2015.

Dwight French
Water Right Services Division Administrator, for
Thomas M. Byler, Director
Oregon Water Resources Department

# T4S R1W W.M.
# T5S R1W W.M.




WELL IS LOCATED 1540' NORTH AND 1720' WEST FROM THE SE CORNER SECTION 33



THIS MAP WAS PREPARED FOR THE PURPOSE OF IDENTIFYING THE LOCATION OF A WATER RIGHT ONLY AND IS NOT INTENDED TO PROVIDE LEGAL DIMENSIONS OR LOCATION OF PROPERTY OWNERSHIP LINES.

FINAL PROOF SURVEY

APPLICATION #: G-14954 PERMIT #: G-13857

CITY OF HUBBARD

STATE OF OREGON

COUNTY OF MARION

CERTIFICATE OF WATER RIGHT

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CITY OF HUBBARD
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Issued _____.

_____

Dwight French
Water Right Services Division Administrator, for
Thomas M. Byler, Director
Oregon Water Resources Department

# MEMO – 2014-2015 Certificate Project Proof to Satisfaction (Aug 7, 2014)

| Application # G-14954 | Permit # G-13857 | Transfer # |
|---|---|---|
| WRD Reviewer Brian Creutzburg | | Date 6-4-2015 |
| WRD Peer Reviewer Mary Bjork | | Date 9-1-15 |

**Research**

✓ Organize file in chronological order
✓ Pull CBU Report & Map(s), Application Map, relevant Permit, Certificate, or Transfer Order, most recent Assignments,
Extension Orders, SWL Measurements, Fish Screen Certification Documents, Water Use Reports & Pump Tests
✓ Search for Water Right Location using Interactive Mapper. Identify Tax Lots & check for Area of Interest (AOI)
✓ Water Organization identified using AOI? ✓ No ___ Yes
If "Yes" cc: _____ & Add to Mailing List
MUNI NA Print Tax Lot Map from ormap.net for the original Place of Use, and confirm Current Ownership & Address with County Assessor
If there is a new owner, Add to Mailing List, including the owner(s) name & tax lot number
NA Print Platcard & check for Place of Use Conflict? ___ No ___ Yes
If "Yes", provide copy of certificate & relevant map
✓ Print BLM Cadastral Survey
✓ Does Claim Map identify correct DLC, Gov't Lots, QQ's? ✓ No ___ Yes
If "No", either ✓ WRD amend map OR _____ prepare Order of Certification

**Reviewing Claim**

Have conditions on relevant permit, certificate, or transfer order been complied with? Yes, No, OR N/A

NA Fish Conditions
Yes Meter/measuring device Shall install
Yes Water Use Reporting 2001 onward
Yes Pump Test (post December 19, 1988) → per WRIS approved 9-30-08
Yes Other Conditions Water Conservation Mgt. Plan ~~Approved June 7, 2013 Vol. 89, p. 802~~ 1
Approved June 7, 2013 Vol. 89, p. 802
SWL
Yes C-Date 10-1-04 & A date ok
Yes Water Level monitoring plan - Approved 10-12-01
✓ Run Capacity Calculator and Print Findings (for pump, sprinklers, pipes, ditches, as appropriate)

NOTES: "Plan shall stipulate a reference level": No ref level is given in plan, No SWL in file prior to C-date, GC says OK to go, as condition in permit only requires a plan, and the plan was approved by the department. Agreed

**Determination**

✓ I've determined that the permit/transfer was fully developed as authorized and that a **FINAL** Certificate should be issued.

___ I've determined that the permit/transfer was <u>not</u> fully developed as authorized and that a **PROPOSED** Certificate should be issued. A proposed Certificate should be issued for the following reason(s):

___ I've determined that beneficial use was NOT made within the terms and conditions and that a **Proposed Order of Certification** (denial) should be issued. A proposed Order of Certification should be issued for the following reason(s):

**Processing**

___ Stamp PROPOSED or Assign CERT# _____ or ORDER OF CERTIFICATION (circle one)

___ Draft Certificates or Proposed Order of Certifications are available in the Application directory.

___ Prepare Mailing List. Include Applicant(s); Receiving Landowner(s); Current Owner(s); Water Organizations; CWRE. Indicate records to be marked.

___ Record marking:

| | | | | | |
|---|---|---|---|---|---|
| App | _____ | Permit | _____ | Cert | _____ |
| App | _____ | Permit | _____ | Cert | _____ |
| App | _____ | Permit | _____ | Cert | _____ |
| App | _____ | Permit | _____ | Cert | _____ |

**NOTES:**

# Water Use Report Based on Water Right


• excel
text

Permit: G 13857 *

NOGLE, VICKIE CITY OF HUBBARD PO BOX 380 HUBBARD, OR 97032-0380

**Records per page:** 99

**Acre-feet (AF) of Water Used**

| Water Year* | Report ID | Facility | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Total Water Used | Irrigated Acres |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2014 | 49721 | WELL 4 (MARI 55251/L-45374) | 2.99 | 4.89 | 2.64 | 6.23 | 4.78 | 2.28 | 3.89 | 2.53 | 5.49 | 3.53 | 3.07 | 4.63 | 46.96 | |
| 2013 | 49721 | WELL 4 (MARI 55251/L-45374) | 2.53 | 3.78 | 3.38 | 1.86 | 4.30 | 2.30 | 0.50 | 2.63 | 6.88 | 4.94 | 5.65 | 3.53 | 42.29 | |
| 2012 | 49721 | WELL 4 (MARI 55251/L-45374) | 3.86 | 3.94 | 4.21 | 4.21 | 2.77 | 2.56 | 2.26 | 3.82 | 2.46 | 6.23 | 2.70 | 5.36 | 44.39 | |
| 2011 | 49721 | WELL 4 (MARI 55251/L-45374) | 1.13 | 0.37 | 1.80 | 3.89 | 2.15 | 1.85 | 3.87 | 2.11 | 3.28 | 3.93 | 4.49 | 4.37 | 33.24 | |
| 2010 | 49721 | WELL 4 (MARI 55251/L-45374) | 1.47 | 3.48 | 1.69 | 3.50 | 3.50 | 4.20 | 2.53 | 2.23 | 4.09 | 3.29 | 5.79 | 2.42 | 38.20 | |
| 2009 | 49721 | WELL 4 (MARI 55251/L-45374) | 1.84 | 3.83 | 2.80 | 3.90 | 3.58 | 2.00 | 3.84 | 3.13 | 3.31 | 4.97 | 2.15 | 3.74 | 39.10 | |
| 2008 | 49721 | WELL 4 (MARI 55251/L-45374) | 2.17 | 4.32 | 2.47 | 2.98 | 1.79 | 2.13 | 3.61 | 2.89 | 5.55 | 3.66 | 3.33 | 4.28 | 39.18 | |
| 2007 | 49721 | WELL 4 (MARI 55251/L-45374) | 2.02 | 1.95 | 2.03 | 1.99 | 2.88 | 3.11 | 2.19 | 0.53 | 3.35 | 4.32 | 3.12 | 4.73 | 32.21 | |

| | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2006 | 49721 | WELL 4 (MARI 55251/L-45374) | 1.76 | 3.59 | 3.32 | 2.45 | 3.70 | 2.15 | 4.20 | 3.10 | 4.47 | 3.55 | 3.23 | 5.07 | 40.61 |
| 2005 | 49721 | WELL 4 (MARI 55251/L-45374) | 4.32 | 1.86 | 1.94 | 2.04 | 2.34 | 2.11 | 2.07 | 4.79 | 2.75 | 7.41 | 5.16 | 6.10 | 42.91 |
| 2004 | 49721 | WELL 4 (MARI 55251/L-45374) | 3.14 | 2.03 | 4.11 | 2.19 | 2.51 | 2.38 | 1.89 | 2.30 | 5.05 | 4.26 | 5.92 | 2.27 | 38.05 |
| 2003 | 49721 | WELL 4 (MARI 55251/L-45374) | 4.77 | 2.09 | 2.79 | 13.57 | 1.79 | 2.06 | 4.18 | 2.13 | 6.91 | 4.33 | 7.55 | 3.47 | 55.64 |
| 2002 | 49721 | WELL 4 (MARI 55251/L-45374) | 7.52 | 0.00 | 0.00 | 0.00 | 1.99 | 3.84 | 1.86 | 4.17 | 2.74 | 5.38 | 4.72 | 3.09 | 35.31 |
| 2001 | 49721 | WELL 4 (MARI 55251/L-45374) | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 3.74 | 1.48 | 6.20 | 15.80 | 22.74 | 16.23 | 4.35 | 70.54 |

*The water year is named for the calendar year in which it ends. Example: the 2014 water year begins Oct. 1, 2013 and ends Sep. 30, 2014.

- Water use is reported by point of diversion (POD), rather than by water right.
- If a POD is shared with multiple water rights, it is not feasible to separate out the amount used under the water right being queried from water used by other rights using this same POD.
- Monthly amounts indicate:
  - For diverted rights, the total amount diverted during the month;
  - For storage rights, the amount generally stored in the reservoir/pond during the month, as represented by the volume of water impounded on approximately the same day each month.
- Water Use amounts have all been converted to "acre-feet" (AF), regardless of the original measurement unit reported. One AF is the volume of water that will cover an acre of ground one foot deep = 325,850 gallons.
- Zeroes indicate that a report was received, stating that no water was used during those months; if a year is not listed, no report of water use was received for that year.

## Pump Capacity Calculation Sheet

using Department designed formula:

(hp)(efficiency) / (lift + psi head) = capacity in cfs

Efficiency:

Centrifugal = 6.61
Turbine = 7.04

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

| | |
|---|---|
| HP = | 30 |
| Efficiency = | 7.04 |
| Lift = | 141.3 |
| PSI = | 30 |

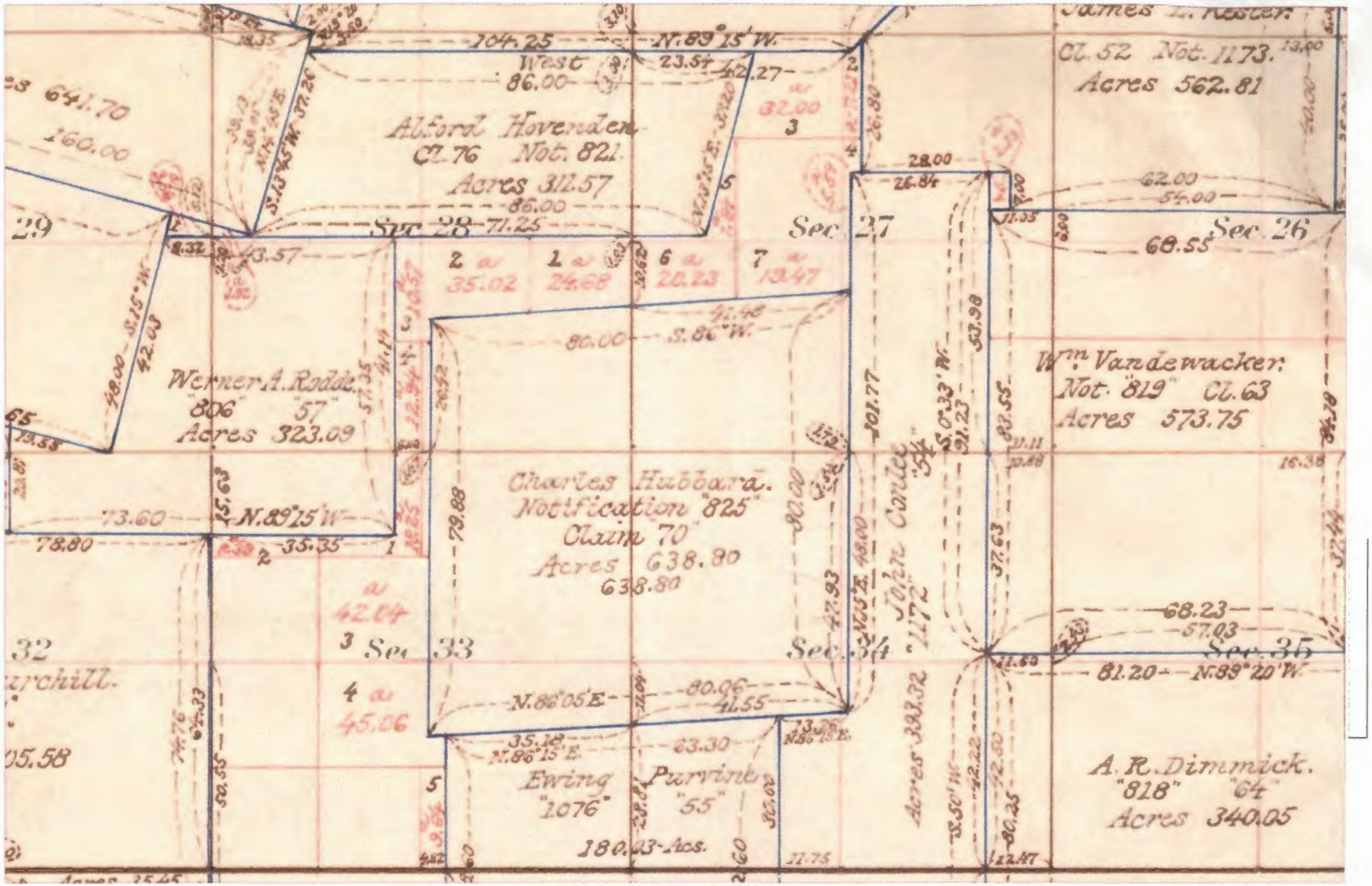
**Results Calculated**

| | |
|---|---|
| (hp)(efficiency) = | 211.2 |
| Head based on psi = | 76.2 |
| Total dynamic head = (head + lift) | 217.5 |

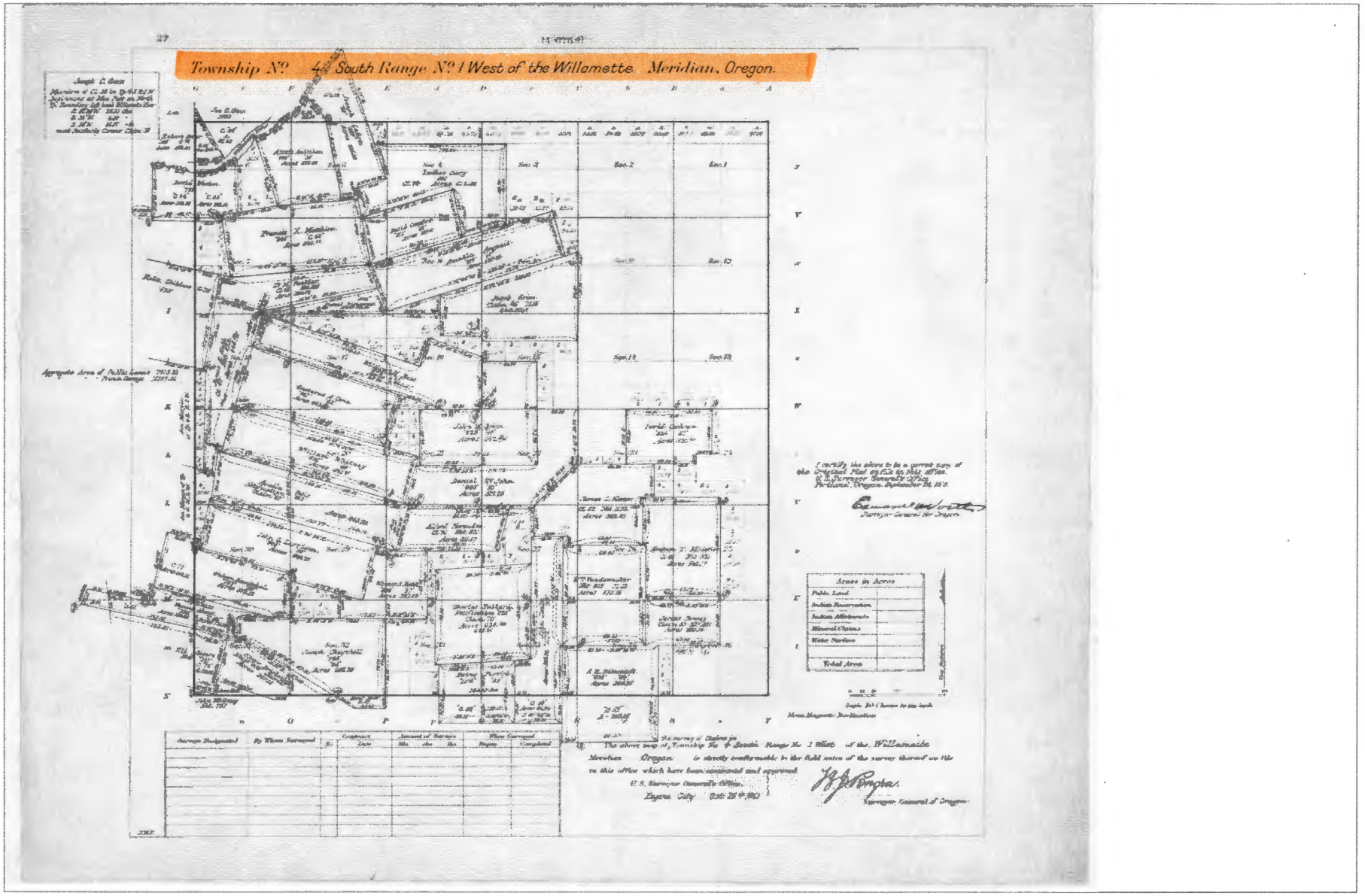
**Pump Capacity = 0.971 feet per second**

Permitted rate = .668 cfs, so pump can deliver full permitted rate.

reset | pan | blowup | reduce | enlarge | print_screen | print_plat | help | about



reset | pan | blowup | reduce | enlarge | print_screen | print_plat | help | about



This form is subject to revision. Begin each new claim by checking for a new version of this form and downloading a new one if necessary.

If you have questions regarding the completion of this form, contact:

Steve Brown by e-mail at Stephen.C.BROWN@wrd.state.or.us or by phone at 503-986-0809

Or Gerry Clark by e-mail at Gerald.E.CLARK@wrd.state.or.us or by phone at 503-986-0811

The Department has a new program that allows a permit holder to pay the cost to have a private contractor review of the claim and, if appropriate, prepare a certificate. This new program means a certificate can be issued in about a month. The Department has a list of trained contractors that are selected on a rotating basis. For more information on this program see: http://www.wrd.state.or.us/programs/index.shtml.

**This box can be deleted

**Oregon Water Resources Department**
**725 Summer St. NE, Suite A**
**Salem, OR 97301-1271**

RECEIVED
JUL 01 2005
WATER RESOURCES DEPT
SALEM, OREGON

# CLAIM OF BENEFICIAL USE

The completion of this form is required by OAR 690-014-010(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 numbered item must have a response. If any requested information does not apply to the Claim, insert "n/a." Do not delete 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. **A separate form shall be completed for each permit or transfer final order.**

## I. General Information

1. File Information

| Application Number (G, R, S or T) | Permit Number (if applicable) |
|---|---|
| G14954 | G13857 |

2. Property owner (current owner information)

a. Individuals

| | |
|---|---|
| Name | |
| Mailing Address | |
| City/State/Zip | |
| Phone # | |
| Fax # | |
| e-mail address | |

b. Businesses/Organizations

| | |
|---|---|
| Name | City of Hubbard Oregon |
| Contact Person and Title | Jaime Estrada - P.W. Superintendent |
| Mailing Address | P.O. Box 380 |
| City/State/Zip | Hubbard, OR 97032 |
| Phone | 503-981-9633 |
| Fax | 503-981-8743 |

| | |
|---|---|
| e-mail | jestrada@cityofhubbard.org |

If the current property owner is not the permittee or transfer holder of record, it is recommended that an assignment be filed with the Department.



3. Permittee / Transferee of record (this may not be the current property owner)

c. Individuals

| | Individual 1 | Individual 2 |
|---|---|---|
| Name | | |
| Mailing Address | | |
| City/State/Zip | | |

d. Businesses/Organizations

| | |
|---|---|
| Name | City of Hubbard, Oregon |
| Contact Person and Title | Jaime Estrada - Public Works Superintendent |
| Mailing Address | P.O. Box 380 |
| City/State/Zip | Hubbard, OR 97032 |

4. Date of Site Inspection: March 28, 2005

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

| Name | Date | Association with the project |
|---|---|---|
| Jaime Estrada | March 28, 2005 | Public Works Superintendent |
| | | |

6. County: Marion

7. Tax Lot Information:

| Tax map number | Tax lot number |
|---|---|
| N/A | N/A |

8. If any property described in the place of use of the permit or transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(3)):

**Mark "NA" if there are no owners of property not included in this claim

| | |
|---|---|
| Name | |
| Contact Person and Title | |
| Mailing Address | N/A |
| City/State/Zip | |
| Phone # | |

| | |
|---|---|
| Name | N/A |

| | |
|---|---|
| Contact Person and Title | |
| Mailing Address | NA |
| City/State/Zip | |
| Phone # | |

RECEIVED
JUL 01 2005
WATER RESOURCES DEPT
SALEM, OREGON

## I. Points of Diversion/Appropriation and Place of Use

For each point of diversion or appropriation, provide the following information. If the claim is for more than one point of diversion/appropriation, copy and complete this section for each point of diversion or appropriation.

1. Provide a general narrative description of the distribution works. This description must trace the water system from the point of diversion or appropriation to and include the place of use:

The new Well covered under this claim (Well #4) delivers water directly to a steel ground level reservoir approximately 100' from the Well. Water is repumped from the reservoir and delivered to city customers via a distribution network.

2. Point of diversion/appropriation name or number (correspond to map):

| Point of diversion/appropriation name or number (correspond to map) | Well log ID # for all work performed on the well (if applicable) | Well tag # (if applicable) |
|---|---|---|
| Well #4 | Mari 55251 | L45374 |
| | | |

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

3. Point of diversion/appropriation source and, if from surface water, the tributary:

| Source | Tributary to |
|---|---|
| Groundwater | N/A |

4. Point of diversion/appropriation location:

| (DLC, Government Lot, ¼ ¼, Section, Township, Range) | Reference to a recognized public land survey corner by distance and bearing or by coordinates |
|---|---|
| NW 1/4 SE 1/4 Sec. 33, T4S, R1W, W.M. | 1540' N & 1720' W from SE Cor. Sec. 33 |

5. Actual use(s), period of use, and rate for each use:

| Uses | If irrigation, list crop type | When water is used | Rate for use |
|---|---|---|---|
| Municipal | N/A | Year Round | .668 CFS (300 GPM) |
| | | | |
| | | | |

**Total Quantity of Water** .668 CFS

6. Place of use for the point of diversion or appropriation: Note: the actual rate of flow was measured at .884 CFS (396 GPM). the difference is being requested through a new application.

| DLC | Gov lot | 1/4 1/4 | Section | Township | Range | Use | ~~# of primary acres~~ | ~~# of supplemental acres~~ |
|---|---|---|---|---|---|---|---|---|

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |
| | | | | See Map | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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**Total Acres Irrigated**

**Groundwater Source Information (Well and Sump)**
**If the appropriation is not from ground water (well or sump), this section, items 1-5, can be deleted.

1. Describe the access port (type and location) or other means to measure the water level in the well in the box below:

Well is equipped with pitless adapter for access - used transducer for measurement of water level

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

| Casing Diameter | Casing Depth | Total Depth | Completion Date of Original Well | Completion Dates of Alterations | Who the well was drilled for | Well drilled by |
|---|---|---|---|---|---|---|
| 12"; 10" | 304' | 304' | 9-20-2000 | N/A | City of Hubbard | Steve Stadeli |

In addition to the information requested in item "2" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

Well I.D.# 45374 / Start Card # 128562 / Well Log ID # Mari 55251

**If the appropriation is not from a sump, the following section, items 3-4, can be deleted. Construction standards for sumps can be found in OAR 690-210-0400.

3. If the appropriation involves a **SUMP**, provide the following information for each **SUMP**:

| Length | Width | Average diameter | Maximum depth | Surface area (in acres) | Volume in cubic feet or acre feet |
|---|---|---|---|---|---|
| N/A | N/A | N/A | N/A | N/A | N/A |

4. If the sump is curbed constructed with watertight surface curbing, describe the curbing in the table below:

| Curbing material (concrete, concrete tiles, or steel) | If concrete, provide the thickness of the wall |
|---|---|
| N/A | N/A |

5. Provide sump volume calculations in the box below:

N/A

**Reservoir Data**
**If this claim is not for a reservoir, or the system does not involve a reservoir as part of the distribution system, this section, items 1-7, can be deleted.

3. If an actual measurement was taken, provide the following:

| Date of Measurement | Who made the measurement | Measurement method | Measured quantity of water |
|---|---|---|---|
| NA | NA | NA | NA |

Attach measurements notes

**Gravity flow canal or ditch** (The Department typically uses Manning's formula for canals and ditches)

**If this claim does not rely on a gravity flow canal or ditch to convey the water as part of the distribution system, this section, items 1-3, can be deleted.

1. If the system involves a gravity canal or ditch, complete the table below.

| Canal or ditch type (material) | Top width of canal or ditch | Bottom width of canal or ditch | Depth | "N" factor | Amount of fall | Length of canal/ditch | Slope | Computed volume |
|---|---|---|---|---|---|---|---|---|
| N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |

2. Provide calculations in the box below:

N/A



3. If an actual measurement was taken, provide the following:

| Date of Measurement | Who made the measurement | Measurement method | Measured quantity of water |
|---|---|---|---|
| N/A | N/A | N/A | N/A |

Attach measurements notes

**System Information:**

Provide the following information concerning the diversion and delivery system. Trace the flow of water from the point of diversion/appropriation to the place of use.

1. Pump information

| Brand | Model | Serial Number | Type (centrifugal, turbine or submersible) | Intake size | Discharge size |
|---|---|---|---|---|---|
| Berkeley | TT30-350 | P1000 | Submersible Turbine | 7" | 6" |

2. Motor information

| Brand | Model | Horsepower | Max RPM | Voltage |
|---|---|---|---|---|
| Franklin | NA | 30 | 3500 | 460V, 30 |

3. Meter information (if required in permit or transfer final order)

| Make | Serial # | Condition (working or not) | Current meter reading | Notes |
|---|---|---|---|---|
| Water Specialty | 201877-6 | Working | 71372 | Mdl ML-06-D-56 |

4. Measurement device description

| Device description | Condition (working or not) | Notes |
|---|---|---|
| Inline propeller flowmeter | working | See 3. above for description |

5. Measured pump capacity (using meter if meter was present and system was operating)

| Initial meter reading | Ending meter reading | Duration of time observed | Total pump output |
|---|---|---|---|
| 71372 (x 1000) gallons | 71383.9 | 30 minutes | 11,900g-396GPM |

6. Theoretical pump capacity

| Horsepower | Operating psi | Lift from source to pump *If a well, the water level during pumping (see pump test results) | Lift from pump to place of use | Total pump output |
|---|---|---|---|---|
| 30 | 30 | 141.3' PWL | NA | 396 GPM |

7. Provide pump calculations in the box below:

TDH = 30psi (discharge pressure) x 2.31 = 69.3'
(+) Water Pumping Level = 141.3'
TDH = 210.6'

Measured flow (Avg) = 396GPM

$$BHP = \frac{396GPM \times 210.6'TDH}{3960 \times .72(pump\ eff.)} = 29.25\ BHP \leq 30\ HP\ motor$$

Conditions stated above can be confirmed by consulting the attached pump curve.

$$Q_{sprinklers} = \frac{(\text{max \# heads})(\text{gpm/head})}{448.8\ gpm/cfs} = \text{cfs}$$



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

## III. CONDITIONS

Please pay special attention to this section. All conditions contained in the permit or transfer final order shall be addressed. Reports that do not address all performance related conditions will be returned.

1. **Time Limits:**

a. Permits or transfer 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 is to be completed by. 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 transfer final order:

| | Dates from permit or transfer final order | Date accomplished | Description of actions taken by water user to comply with the time limits |
|---|---|---|---|
| Begin construction | Aug 15, 2001 | July 24, 2000 | Mobilization and begin well construction |
| Complete construction | Aug. 15, 2002 | Sept. 20, 2000 | Complete construction of well |
| Complete application of water | Oct. 1, 2004 | Sept. 1, 2004 | Complete application of water into the water system. |

2. **Initial Water Level Measurements:**

**If the Claim is for surface water or a reservoir, or if the water user was not required to submit static water level measurements, items b through e relating to this section can be deleted.

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

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

c. Did an authorized individual (as stated in the permit or transfer final order) make the initial static water level measurement in the month required?
(YES) NO

d. If "YES", was the measurement submitted to the Department? (YES) NO

e. If the initial measurement not been submitted, provide that measurement now if available:

| Date of measurement | Who made measurement | Method | Measurement |
|---|---|---|---|
| | | | |

3. **Annual Static Water Level Measurements:**
**If the Claim is for surface water or a reservoir, or if the water user was not required to submit static water level measurements, items b through e relating to this section can be deleted.

a. Was the water user required to submit annual static water level measurements? (YES) NO NA

b. In the box below, provide the month in which the static water level was to be made:
March/April

c. Were the static water level measurements taken in the month required? (YES) NO

d. If "YES", were those measurements submitted to the Department? (YES) NO

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

| Year | Month | Measurement made by | Measurement |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

4. **Measurement, recording, and reporting conditions:**

a. Does the permit or transfer final order require the installation of a meter or approved measuring device?
(YES) NO **If "NO", items b through g relating to this section can be deleted.

b. Has a meter been installed? (YES) NO

c. Provide the date the meter was installed:
February 2001 (Actual date is unknown)

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? YES NO

e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

| Name | Title | Approximate date |
|---|---|---|
| N/A | N/A | N/A |

f. Is the water user required to report the water use to the Department? (YES) NO

g. Have the reports been submitted? (YES) NO

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

5. **Fish Screening and/or By-pass Devices**

a. Are any points of diversion required to be screened and/or have a by-pass device to prevent fish from entering the point of diversion? YES NO (NA)

**If "NO", items b through i relating to this section can be deleted

b. Has the fish screening been installed? YES NO



c. When was the fish screening installed?

| Date | By whom |
|---|---|
| N/A | N/A |

d. Is the **total** diversion rate of all rights at the point of diversion less than 0.5 cfs? YES NO

e. If the diversion rate is less than 0.5 cfs, the water user can self certify the fish screen.

f. Has a self certification form been previously submitted to the Department? YES NO

g. If not, is the self certification form attached to this Claim? YES NO

h. Has the by-pass device been installed? YES NO

i. Describe the by-pass device:

| When installed | By whom | Approved by ODFW | Description |
|---|---|---|---|
| N/A | N/A | N/A | |

6. **Pump Test** (typically required for ground water uses prior to issuance of a certificate, but not a requirement of permit development)

a. Did the permit or transfer final order require the submittal of a pump test? (YES) NO NA

b. Has a pump test been submitted and approved by the Department? YES (NO)

c. If no, is the pump test attached to this Claim? (YES) NO

7. **Other Permit Conditions** (examples: special well construct standards, water conservation plans, no obstructions to fish without a fishway, etc.; number as appropriate.)

## IV. Attachments, Conclusions, Map and Signatures

### Attachments

If you are attaching any documents to this report, provide a list below:

| Attachment name | Description |
|---|---|
| 1 | Final Proof Survey Map |
| 2 & 2A | Well Log & Pump Curve |
| 3 | Pump Test Cover Sheet & Report |

**Permit and Transfer Final Order Rates and System Rates Comparisons:**

| POD or POA name or # | Maximum rate allowed by permit or | Calculated theoretical rate of water based on | Actual amount of water measured (if measured) | Developed use | # of acres allowed by permit or transfer final order | # of acres developed |
|---|---|---|---|---|---|---|

| | transfer final order | system | | | | |
|---|---|---|---|---|---|---|
| Well #4 | .668 CFS | .90 CFS | .89 CFS | .89 CFS | N/A | N/A |
| | | | | | | |
| | | | | | | |
| | | | | | | |

**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', 1" = 400', or the original full-size scale of the county assessor map for the location.

In the following box, 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 map for the final proof survey was prepared using the original application map from 1999 and verified using a GPS (Delorme) receiver and physical verification from a known local structure (water reservoir).

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

Certified Water Right Examiner #0037 Edward Butte Nov 18, 1987 STATE OF OREGON

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Permit or Transfer Holders Signature or Acknowledgement

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 | Date |
|---|---|---|
| Jaime Estrada | Jaime Estrada | 6/29/05 |
| | | |

| Signature | Print or type name | Date |
|---|---|---|
| | | |

RE: Permit G-13857
Application G-14954
City of Hubbard-Well 4

Attachment 2

**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.

WELL I.D. # L _____
START CARD # 128562

**(1) OWNER:** Well Number _____
Name CITY OF HUBBARD
Address 3720 2ND STREET
City HUBBARD State OR Zip 97032

**(2) TYPE OF WORK**
[X] New Well [ ] Deepening [ ] Alteration (repair/recondition) [ ] Abandonment

**(3) DRILL METHOD:**
[ ] Rotary Air [ ] Rotary Mud [X] Cable [ ] Auger
[ ] Other _____

**(4) PROPOSED USE:**
[ ] Domestic [X] Community [ ] Industrial [ ] Irrigation
[ ] Thermal [ ] Injection [ ] Livestock [ ] Other _____

**(5) BORE HOLE CONSTRUCTION:**
Special Construction approval [ ] Yes [X] No Depth of Completed Well 304 ft.
Explosives used [ ] Yes [X] No Type _____ Amount _____

| HOLE Diameter | From | To | SEAL Material | From | To | Sacks or pounds |
|---|---|---|---|---|---|---|
| 16 | 0 | 320 | CEMENT | 0 | 210 | 231 SACKS |
| | | | | | | |
| | | | | | | |
| | | | | | | |

How was seal placed: Method [ ] A [ ] B [X] C [ ] D [ ] E
[ ] Other _____
Backfill placed from 304 ft. to 320 ft. Material CLAY SLOUGH
Gravel placed from 210 ft. to 304 ft. Size of gravel 8/2 & 6/9

**(6) CASING/LINER:**

| | Diameter | From | To | Gauge | Steel | Plastic | Welded | Threaded |
|---|---|---|---|---|---|---|---|---|
| Casing: | 12 | +3 | 208 | 250 | [X] | [ ] | [X] | [ ] |
| | 10 | 208 | 228½ | .250 | [X] | [ ] | [X] | [ ] |
| | 10 | 271 | 289½ | .250 | [X] | [ ] | [X] | [ ] |
| | 10 | 297 | 304 | .250 | [X] | [ ] | [X] | [ ] |
| Liner: | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |

Final location of shoe(s) 301 (16") CUT OFF

**(7) PERFORATIONS/SCREENS:**
[ ] Perforations Method CONTINIOUS V-WIRE
[X] Screens Type _____ Material SS

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|---|---|---|---|---|---|---|---|
| 228½ | 225½ | .070 | | 10" | p/s | [ ] | [ ] |
| 255½ | 271 | .045 | | 10" | p/s | [ ] | [ ] |
| 289½ | 297 | .070 | | 10" | p/s | [ ] | [ ] |
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |

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

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

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| 100 | 19 | | 1 hr. |
| 450 | 124 | | 5 hr. |
| 350 | 96 | | 12 hr. |

Temperature of water _____ Depth Artesian Flow Found _____
Was a water analysis done? [ ] Yes By whom NO
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 MARION Latitude _____ Longitude _____
Township 4S N or S Range 1W E or W. WM.
Section 33 NE 1/4 SE 1/4
Tax Lot 3001 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____
2701 PACIFIC HWY 99E, HUBBARD, OR

**(10) STATIC WATER LEVEL:**
63 ft. below land surface. Date 9-14-00
Artesian pressure _____ lb. per square inch. Date _____

**(11) WATER BEARING ZONES:**
Depth at which water was first found 112'

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| 112 | 142 | N/A | N/A |
| 229 | 294 | 450+ | 63 |
| | | | |
| | | | |
| | | | |

**(12) WELL LOG:**
Ground Elevation _____

| Material | From | To | SWL |
|---|---|---|---|
| FILL DIRT & GRAVEL | 0 | 4 | |
| SILTY BRN SOIL | 4 | 22 | |
| SANDY SILT BRN | 22 | 47 | |
| SILTY CLAY GREY SANDY | 47 | 78 | |
| CLAY GREY STTCKY | 78 | 84 | |
| CLAY GREY SANDY | 84 | 112 | |
| CLAY & GRAVEL | 112 | 121 | |
| CMTD GRVL GREY | 121 | 142 | |
| CLAY GREY STICKY | 142 | 168 | |
| CLAY GREY & BRN | 168 | 177 | |
| CLAY BLUE GRN STICKY | 177 | 194 | |
| CLAY GREY W/GRAVEL | 194 | 210 | |
| CLAY GREY SILTY | 210 | 217 | |
| CLAY GRN STICKY | 217 | 229 | |
| CEMENTED GRAVEL | 229 | 254 | |
| CLAY GREY | 254 | 259 | |
| CLAY GREY W/STRKS OF SAND & PUMICE | 259 | 268 | |
| CLAY GREY BLUE STICKY CONT. | 268 | 277 | |

Date started 7-24-00 Completed 9-20-00

**(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.

WWC Number _____
Signed _____ 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.

WWC Number 688
Signed Steven N. Westerberg Date 9-28-00

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ORIGINAL - WATER RESOURCES DEPT

**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.

WELL I.D. # L _____
START CARD # 128562

**(1) OWNER:** Well Number _____
Name CITY OF HUBBARD
Address 3720 2ND STREET
City HUBBARD State OR Zip 97032

**(2) TYPE OF WORK**
[X] New Well [ ] Deepening [ ] Alteration (repair/recondition) [ ] Abandonment

**(3) DRILL METHOD:**
[ ] Rotary Air [ ] Rotary Mud [X] Cable [ ] Auger
[ ] Other

**(4) PROPOSED USE:**
[ ] Domestic [X] Community [ ] Industrial [ ] Irrigation
[ ] Thermal [ ] Injection [ ] Livestock [ ] Other

**(5) BORE HOLE CONSTRUCTION:**
Special Construction approval [ ] Yes [ ] No Depth of Completed Well ____ ft.
Explosives used [ ] Yes [ ] No Type _____ Amount _____

| HOLE Diameter | From | To | SEAL Material | From | To | Sacks or pounds |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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: | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |
| Liner: | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |

Final location of shoe(s)

**(7) PERFORATIONS/SCREENS:**
[ ] Perforations Method _____
[ ] Screens Type _____ Material _____

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|---|---|---|---|---|---|---|---|
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |

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

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

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| | | | 1 hr. |
| | | | |
| | | | |

Temperature of water _____ 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 MARION Latitude _____ Longitude _____
Township 4S N or S Range 1W E or W. WM.
Section 33 NE 1/4 SE 1/4
Tax Lot 3001 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____
2701 PACIFIC HWY 99E

**(10) STATIC WATER LEVEL:**
____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch. Date _____

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

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

**(12) WELL LOG:**
Ground Elevation _____

| Material | From | To | SWL |
|---|---|---|---|
| CONT. | | | |
| CLAY GREY SILTY | 277 | 289 | |
| GRAVEL W/CLAY GREY | 289 | 294 | |
| CLAY BLUE GRN GREY | 294 | 320 | |

Date started 7-24-00 Completed 9-20-00

**(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.
WWC Number _____
Signed _____ 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.
WWC Number 688
Signed Steven N. Stricker Date 9-28-00

ORIGINAL – WATER RESOURCES DEPARTMENT FIRST COPY – CONSTRUCTOR SECOND COPY – CUSTOMER

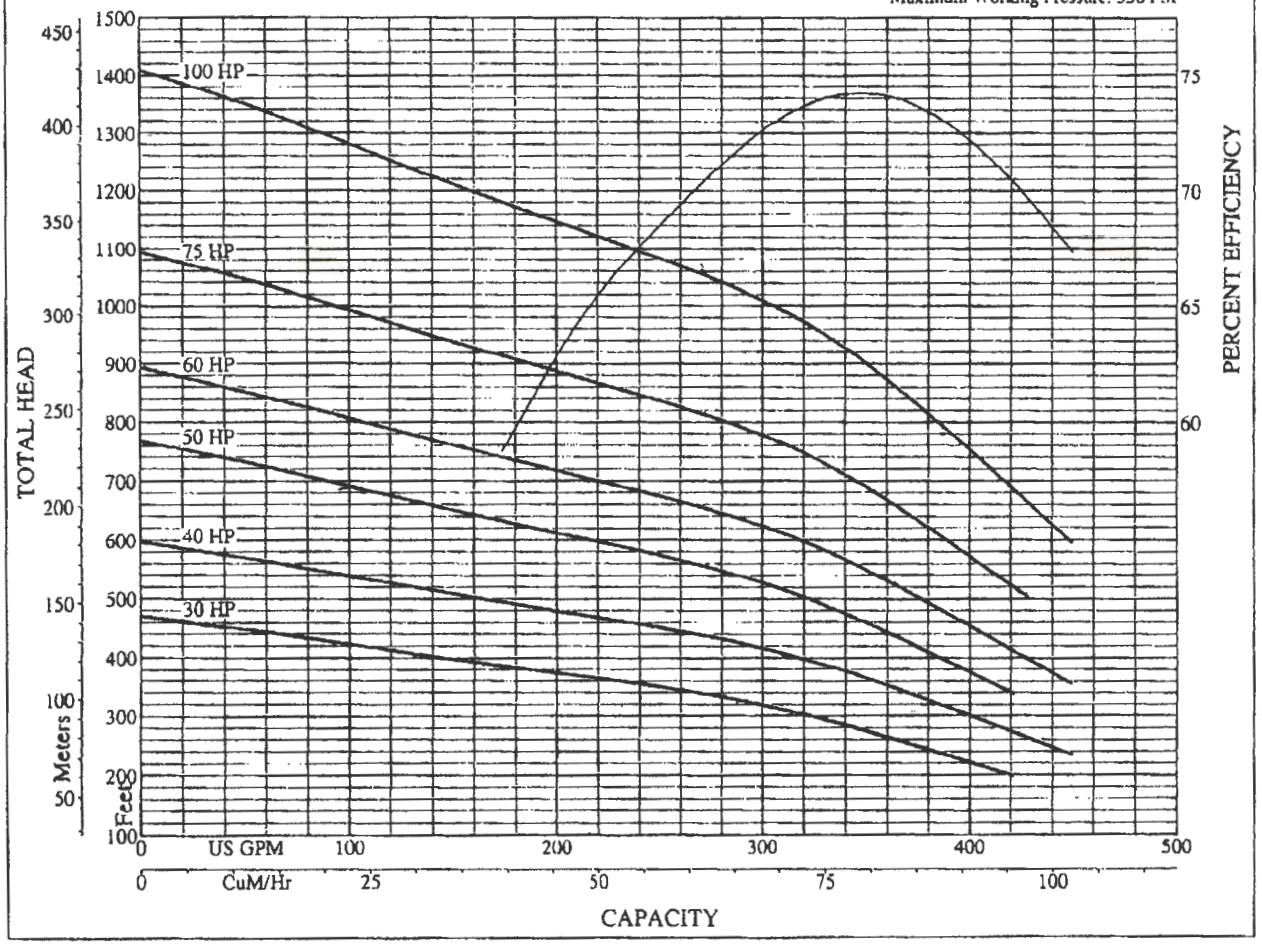
RE: Permit G-13857 City of Hubbard-Well 4 Attachment 2A

BERKELEY®

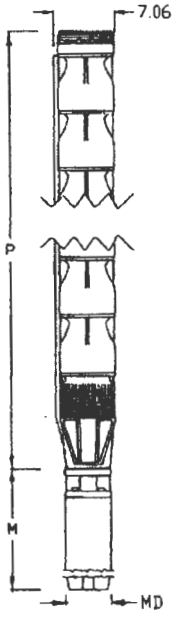
# SUBMERSIBLE TURBINE

## 7T-350

Nominal RPM: 3450
Based on Fresh Water @ 68° F.
Maximum Working Pressure: 550 PSI




### OUTLINE DIMENSIONS / WEIGHTS




| HP | stages | Motor size | P length | M* length | MD* dia. | Mtr. wt. | Pump wt. |
|---|---|---|---|---|---|---|---|
| 30 | 5 | 6" | 45.94 | 35.69 | 5.38 | 162 | 158 |
| 40 | 6 | 6" | 52.44 | 40.81 | 5.38 | 195 | 183 |
| 50 | 8 | 6" | 65.44 | 57.83 | 5.38 | 310 | 232 |
| 60 | 9 | 6" | 71.94 | 63.83 | 5.38 | 340 | 257 |
| 75 | 11 | 8" | 86.44 | 46.79 | 7.58 | 450 | 359 |
| 100 | 14 | 8" | 105.94 | 54.29 | 7.58 | 520 | 434 |

Note: dimensions = inches; weight = U.S. lbs.

M* Maximum length (Franklin Electric Motor)
MD* Motor diameter (Franklin Electric Motor)

### SPECIFICATIONS

| | |
|---|---|
| Minimum Well I.D. | 8.0 Inches |
| Minimum Submergence @ BEP (above inlet) | 10.0 Feet |
| Capacity Range | 147 – 450 GPM |
| Discharge | 5" F x 6" M NPT |

See manufacturer's data for motor cooling requirements



SUPERSEDES
All Previous

Date 04/15/96
Section ST
Page 19.03

Attachment 3

Oregon Water Resources Department

# PUMP TEST FORM COVER SHEET

**Well Owner:**
Name: City of Hubbard
Address: PO Box 380
County: Marion
City: Hubbard State: OR Zip: 97302-0000
Original owner (from well log): City of Hubbard

**Well Location:**
Township: 4 S Range: 1 W
Section: 33 ¼: SE 1/16 NW 1/64: SE
Well depth: 304.0 Date drilled: 9-20-2000
Owners well no. (if any): Well #4
POD ID: 49721

**Water Right Information:**
Application: G-14954 Permit: G-13857 Certificate: NA
Is this well listed on more than one water right? ☐ Yes If yes, list additional water rights below:
Application: _____ Permit: _____ Certificate: _____
Application: _____ Permit: _____ Certificate: _____

**Pump Test:**
Test Conducted by: Edward Butts, PE, CWRE Well Owner? ☐ Yes
Company: 4B Engineering & Consulting LLC
Address: 3000 Market St. NE, Suite 528 Date of Test: 06/29/2005
City: Salem State: OR Zip: 97301-1882
Daytime phone: 503-589-1115

Method of discharge measurement (see our brochure for more information): Flow meter
Method of water-level measurement (pick one or enter other method used): Pressure transducer
Length of air line (if used): _____

Pump type (pick one or enter other method used): Submersible
Was the pump test conducted during normal use of the well? ☑ Yes Note: Pumped to Reservoir

Are you aware of any wells, other than domestic or stock wells, pumping within 1000 feet of the tested well during the test or within 24 hours prior to the test? ☑ Yes Note: City Well #1
If yes, give approximate distances to each and approximate pumping rate of each. If possible, indicate if they were turned on or off during the test: Approximate distance = 950' +/- Well #1 was operating upon arrival at approx. 400 GPM, but was shutdown just before starting Well 4 test

Is there a lake, stream or other surface water body within ¼ mile of the tested well? ☐ Yes If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head. Approx. distance: _____ ft Approx. elevation difference: _____ ft

Well elevation is _____ surface water body.

Description of measuring point (e.g. top port of 1 inch port pipe, west side) Measurements were taken using electronic well sounder-verified with Powers well sounder before starting test--<.5' diff.
Measuring point distance at land surface _____ feet.

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

| Time | Depth to water below meas. point | Depth to water below land surface |
|---|---|---|
| 9:50 am | 61.20 | 61.20 |
| 10:15 am | 59.50 | 59.50 |
| 10:45 am | 59.10 | 59.10 |

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

| Time | Discharge Rate | Discharge Units (e.g. gpm, cfs, etc) |
|---|---|---|
| 10:45 am | 414.00 | gpm (gallons per minute) |
| 11:45 am | 390.00 | gpm (gallons per minute) |
| 12:45 pm | 390.00 | gpm (gallons per minute) |
| 1:45 pm | 385.00 | gpm (gallons per minute) |
| 2:45 pm | 385.00 | gpm (gallons per minute) |

**Time pump turned on:** Date 06/29/2005 Time 10:45 am
**Time pump turned off:** Date 06/29/2005 Time 2:45 pm
**Total pumping time:** 4 hours 0 minutes

**Note:** Well must be idle for at least 16 hours prior to the test.
Additional forms can be obtained from our web site at: http://www.wrd.state.or.us OWRD 2/9/2000

Required Signature: _____

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WATER RESOURCES DEPT
SALEM, OREGON

Oregon Water Resources Department

# PUMP TEST DATA SHEET



Application: G-14954 Permit: G-13857 Certificate: NA Pod_Id: 49721

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

## Drawdown Data

| Date | Time | Time Since Pump Started (minutes) | Depth to Water Below Measuring Pt | Depth to Water Below Land Surface | Comments |
|---|---|---|---|---|---|
| 6-29-05 | 10:45 | Ø | 59.10 | 59.10 | Start Test |
| 6-29-05 | 10:46 | 1 | 129.5' | 129.5 | Flow = 410 GPM |
| 6-29-05 | 10:47 | 2 | 136.4' | 136.4' | |
| 6-29-05 | 10:48 | 3 | 142.7' | 142.7' | |
| 6-29-05 | 10:49 | 4 | 145.4' | 145.4' | Flow = 400 GPM |
| 6-29-05 | 10:50 | 5 | 146.3' | 146.3' | |
| 6-29-05 | 10:51 | 6 | 147.4' | 147.4' | |
| 6-29-05 | 10:52 | 7 | 148.6' | 148.6' | |
| 6-29-05 | 10:53 | 8 | 150.2' | 150.2' | |
| 6-29-05 | 10:54 | 9 | 150.8' | 150.8' | |
| 6-29-05 | 10:55 | 10 | 151.5' | 151.5' | |
| 6-29-05 | 11:00 | 15 | 153.2' | 153.2' | Flow = 395 GPM |
| 6-29-05 | 11:05 | 20 | 154.4' | 154.4' | |
| 6-29-05 | 11:10 | 25 | 155' | 155.0' | |
| 6-29-05 | 11:15 | 30 | 155.6' | 155.6' | Flow = 390 GPM |
| 6-29-05 | 11:30 | 45 | 156.8' | 156.8' | |
| 6-29-05 | 11:45 | 60 | 157.4' | 157.4' | Flow = 390 GPM |
| 6-29-05 | 12:00 PM | 75 | 158.1' | 158.1' | |
| 6-29-05 | 12:15 PM | 90 | 158.4' | 158.4' | |
| 6-29-05 | 12:30 | 105 | 158.7' | 158.7' | Flow = 390 GPM |
| 6-29-05 | 12:45 | 120 | 159.0' | 159.0' | |
| 6-29-05 | 1:00 | 135 | 159.3' | 159.3' | |
| 6-29-05 | 1:15 | 150 | 159.5' | 159.5' | |
| 6-29-05 | 1:30 | 165 | 159.7' | 159.7' | |
| 6-29-05 | 1:45 | 180 | 159.8' | 159.8' | |
| 6-29-05 | 2:00 | 195 | 160.1' | 160.1' | 385 GPM |
| 6-29-05 | 2:15 | 210 | 160.1' | 160.1' | |
| 6-29-05 | 2:30 | 225 | 160.2' | 160.2' | |
| 6-29-05 | 2:45 | 240 | 160.4' | 160.4' | 385 GPM |

## Recovery Data

| Date | Time | Time Since Pump Stopped (minutes) | Depth to Water Below Measuring Pt | Depth to Water Below Land Surface | Comments |
|---|---|---|---|---|---|
| 6-29-05 | 2:45 | Ø | 160.4' | 160.4' | Shutdown |
| 6-29-05 | 2:46 | 1 | 139.7' | 139.7 | Ø Flow |
| 6-29-05 | 2:47 | 2 | 95.9' | 95.9' | |
| 6-29-05 | 2:48 | 3 | 80.4' | 80.4' | |
| 6-29-05 | 2:49 | 4 | 74.6' | 74.6' | |
| 6-29-05 | 2:50 | 5 | 71.7' | 71.7' | |
| 6-29-05 | 2:51 | 6 | 70.2' | 70.2' | |
| 6-29-05 | 2:52 | 7 | 69.2' | 69.2' | |
| 6-29-05 | 2:53 | 8 | 68.5' | 68.5' | |
| 6-29-05 | 2:54 | 9 | 67.9' | 67.9' | |
| 6-29-05 | 2:55 | 10 | 67.4' | 67.4' | |
| 6-29-05 | 2:56 | 11 | 67' | 67' | |
| 6-29-05 | 2:57 | 12 | 66.7' | 66.7' | |
| 6-29-05 | 2:58 | 13 | 66.4' | 66.4' | |
| 6-29-05 | 2:59 | 14 | 66.1' | 66.1' | |
| 6-29-05 | 3:00 | 15 | 65.8' | 65.8' | |

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

OWRD 2/9/2000

RECEIVED
JUL 01 2005
WATER RESOURCES DEPT
SALEM, OREGON

STATE OF OREGON

COUNTY OF MARION

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

CITY OF HUBBARD
VICKIE NOGLE
PO BOX 380 (503)981-9633
HUBBARD, OREGON 97032

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-14954

SOURCE OF WATER: A WELL IN MILL CREEK BASIN

PURPOSE OR USE: MUNICIPAL USE

MAXIMUM RATE: 0.668 CUBIC FOOT PER SECOND

PERIOD OF USE: YEAR ROUND

DATE OF PRIORITY: MARCH 29, 1999

POINT OF DIVERSION LOCATION: NW 1/4 SE 1/4, SECTION 33, T4S, R1W, W.M.; 1540 FEET NORTH AND 1720 FEET WEST FROM THE SE CORNER SECTION 33

THE PLACE OF USE IS LOCATED AS FOLLOWS:

WITHIN THE SERVICE BOUNDARIES OF THE CITY

Measurement, recording and reporting conditions:

A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order, shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently

as may be required by the Director. Further, the Director may require the permittee to report general water use information, including the place and nature of use of water under the permit.

B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

The water user shall develop a plan to monitor and report the impact of water use under this permit on water levels within the aquifer that provides water to the permitted well(s). The plan shall be submitted to the Department within one year of the date the permit is issued and shall be subject to the approval of the Department. At a minimum, the plan shall include a program to periodically measure static water levels within the permitted well(s) or an adequate substitute such as water levels in nearby wells. The plan shall also stipulate a reference water level against which any water-level declines will be compared. If a well listed on this permit (or replacement well) displays a total static water-level decline of 25 or more feet over any period of years, as compared to the reference level, then the water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s). Such action shall be taken until the water level recovers to above the 25-foot decline level or until the Department determines, based on the water user's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

Within 3 years of permit issuance, the permittee shall submit a Water Management and Conservation Plan consistent with OAR Chapter 690, Division 86. The Director may approve an extension of this timeline to complete the required Water Management Conservation Plan.

The well shall be continuously cased and continuously sealed to a minimum depth of 210 feet below land surface.

## STANDARD CONDITIONS

The wells shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

Actual construction of the well shall begin by August 15, 2001. Complete application of the water to the use shall be made on or before October 1, 2004. Within one year after complete application of water to the proposed use, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner (CWRE).

Issued November 9, 2000

Paul R. Cleary, Director
Water Resources Department

NOTE: Pursuant to ORS 537.330, in any transaction for the conveyance of real estate that includes any portion of the lands described in this permit, the seller of the real estate shall, upon accepting an offer to purchase that real estate, also inform the purchaser in writing whether any permit, transfer approval order, or certificate evidencing the water right is available and that the seller will deliver any permit, transfer approval order or certificate to the purchaser at closing, if the permit, transfer approval order or certificate is available.

Oregon
John A. Kitzhaber, MD, Governor

**Water Resources Department**
North Mall Office Building
725 Summer St. NE, Suite A
Salem, OR 97301
Phone: 503-986-0900
FAX: 503-986-0904
www.oregon.gov/owrd

June 7, 2013

City of Hubbard
Attn: Jaime Estrada
PO Box 380
Hubbard, OR 97032

Subject: Water Management and Conservation Plan

Dear Mr. Estrada:

Enclosed, please find the final order approving the City of Hubbard's (City) Water Management and Conservation Plan (plan). The Department appreciates the City's commitment to water conservation.

The attached final order specifies that the City's plan shall remain in effect until **June 3, 2023**. Additionally, the City is required to submit a progress report to the Department by **June 3, 2018**, detailing progress made toward the implementation of conservation benchmarks scheduled in the plan. Finally, the City must submit an updated Water Management and Conservation Plan to the Department by **June 3, 2022**.

***NOTE:*** *The deadline established in the attached final order for submittal of an updated water management and conservation plan (consistent with OAR Chapter 690, Division 086) shall not relieve the City of Hubbard from any existing or future requirement(s) for submittal of a water management and conservation plan at an earlier date as established through other final orders of the Department.*

We appreciate your cooperation in this effort. Please do not hesitate to contact me if I can provide any guidance or information as you update your plan. You may contact me by telephone at 503-986-0880 or by e-mail at *Lisa.J.Jaramillo@wrd.state.or.us*.

Sincerely,

Lisa J. Jaramillo
Water Management and Conservation Analyst
Water Right Services Division

Enclosure

cc: WMCP File
Application G-14954 (Permit G-13857)
Application G-16491 (Permit G-16138)
Mike McCord, District #16 Watermaster
4B Engineering & Consulting; Attn: Brooke Saltarello, 3700 River Road North, Suite #2, Keizer, OR 97303

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

| | | |
|---|---|---|
| In the Matter of the Proposed Water Management and Conservation Plan for the City of Hubbard , Marion County | ) ) ) | FINAL ORDER APPROVING A WATER MANAGEMENT AND CONSERVATION PLAN |

## Authority

OAR Chapter 690, Division 086, establishes the process and criteria for approving water management and conservation plans required under the conditions of permits, permit extensions and other orders of the Department.

## Findings of Fact

1. The City of Hubbard submitted a Water Management and Conservation Plan (plan) to the Department on September 19, 2005. The associated fee for review of the plan was submitted on November 22, 2005. Submittal of the plan was required by conditions set forth in Permits G-13857 and G-16138.

2. The Department published notice of receipt of the plan on November 29, 2005, as required under OAR Chapter 690, Division 086. No comments were received.

3. The Department provided written comments on the plan to the City on March 7, 2006. In response, the City submitted a revised plan on April 25, 2007.

4. Upon review of the revised plan, the Department notified the City on July 29, 2011, that several items outlined in the Department's March 7, 2006 written comments were not addressed. In response, on June 3, 2013, the Department received the City's May 2013 Addendum to the revised plan.

5. The Department reviewed the revised plan, along with the May 2013 Addendum, and finds that it is generally consistent with the relevant requirements under OAR Chapter 690, Division 086.

## Conclusion of Law

The Water Management and Conservation Plan with the May 2013 Addendum submitted by the City of Hubbard is consistent with the criteria in OAR Chapter 690, Division 086.

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.

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

1. The City of Hubbard Water Management and Conservation Plan is approved and shall remain in effect until **June 3, 2023**, unless this approval is rescinded pursuant to OAR 690-086-0920.

2. The City of Hubbard shall submit an updated Water Management and Conservation Plan meeting the requirements of OAR Chapter 690, Division 086 within 10 years and no later than **June 3, 2022**.

3. The City of Hubbard shall submit a progress report containing the information required under OAR 690-086-0120(4) by **June 3, 2018**.

Dated at Salem, Oregon this 3 day of June, 2013.

Dwight French, Water Right Services Administrator *for*
PHILLIP C. WARD, DIRECTOR

*Mailing date:* JUNE 7 2013

Oregon
Theodore R. Kulongoski, Governor

**Water Resources Department**
North Mall Office Building
725 Summer Street NE, Suite A
Salem, OR 97301-1266
503-986-0900
FAX 503-986-0904

January 10, 2007

JAIME ESTRADA
SUPERINTENDANT
CITY OF HUBBARD
PO BOX 380
HUBBARD OR 97032

GW

The Department has reviewed and accepted the pump test results for the following permitted well(s):

| Application | Permit | Certificate | POD | Test Status | Exemption | Test Date | Logid | Owner's Well Name |
|---|---|---|---|---|---|---|---|---|
| G 14954 | G | 13857 | 1 | Approved | None | 06/29/2005 | MARI 55251 | WELL 4 |
| G 16491 | G | 16138 | 1 | Approved | None | 06/29/2005 | MARI 55251 | WELL 4 |

Please contact me if you have any questions.

Sincerely,

Karl Wozniak
Ground Water/Hydrology Section

# Completion Checklist for CWRE Claims of Beneficial Use

Application # G14954
Permit # G13857
Transfer # 7-7-05
Date _____
Reviewer _____


Date Received 7-1-05
CWRE Name Edward Butts
Claim Logged ✓
File Marked _____
Oversized Map # _____
Read and attach copy of permit or transfer

**Map Review:**

_____Map on polyester film
_____Application & permit #; or transfer #
_____Disclaimer
_____North arrow
_____CWRE stamp and signature
_____Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map)
_____Township, range, section, and tax lot numbers
_____Source illustrated if surface water
_____Point(s) of diversion or appropriation (illustrated)
_____Point(s) of diversion or appropriation (coordinates)
_____Conveyance structures illustrated (pump, pipelines, ditches, etc.)
_____Description of the location, in relation to the point of diversion or appropriation, of any fish screens, by-pass devices, and measuring devices required
_____Place of use (1/4 1/4, or projected 1/4 1/4 lines within DLCs, or Gov Lots; if irrigation, # of acres in each subdivision; if for domestic or human consumption, location of dwelling or spigot)
_____Checked to legal description

**Report Review:**

_____On form or format provided by the Department
_____Application & permit #; or transfer #
_____County
_____Tax lot information
_____Date of survey
_____Person interviewed
_____Ownership information
_____Source(s) of water
_____Point of diversion/appropriation location
_____Use, period of use, and rate for use
_____Place of use location
_____Type of use
_____Extent of use
_____Rate and Duty
_____Diversion rate for each use
_____Description of conveyances system (from POD to POU)
_____Diversion works description (pump make, serial model, capacity, and description)
_____System capacity
    _____Calculated capacity of system (required)
    _____Measured amount of use (optional)
_____Permit conditions
    _____Time limits
    _____Initial water level measurements
    _____Annual static water level measurements
    Measurement, recording, and reporting
        _____Meter/measuring device
        _____Water use reporting
    _____Fish screening and/or by-pass
    _____Pump test (ground water)
    Other conditions

    _____ _____
    _____ _____

_____CWRE stamp and signature
_____Signature(s) of permittee of transfer holder

## Certificate Issuance Processing Checklist

_____Map and COBU reviewed
_____Conflict check (include copy of plat card printout) Any Conflicts? _____
_____Check current ownership

## Staff Recommendations:

_____ Proof to the Satisfaction has been established to the full extent as described in the permit or transfer order.

_____ Proof to the Satisfaction has been not been established to the full extent as described in the permit or transfer order and the right should be limited as follows: _____
_____
_____
_____
____

_____ Proof to the Satisfaction has not been established for the following reasons: _____
_____
_____
_____
_____

**Proposed Actions:**
Send letter requesting the following items/information:_____
_____
_____
__

Send letter recommending extension to cure deficiencies:_____
_____
_

Can certificate be processed further?
_____Yes

If "Yes":
_____Proposed
_____Final Certificate #_____

Mailing list:

Proposed:

Final:

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WATER RESOURCES DEPT
SALEM, OREGON

CITY OF HUBBARD
3720 2nd St / PO Box 380 / Hubbard, Oregon 97032
503-981-9633 Fax 503-981-8743

November 1, 2001

TO: Hubbard Police, Hubbard Fire, County Assessor, Marion Co. Building, Elections, NORCOM, Finance Director, Water Resources, Hubbard Public Works, Hubbard Post Office, Roberta Guttry-WVC

FROM: Vickie Nogle - City Recorder

RE: CHANGE OF ADDRESSES FOR WELL SITES - HUBBARD
3053 D Street &
2701 Pacific Highway 99E

4S 1W 34 3 wells

**From 3053 D Street to 3632 1st Street** (Well Permit #10965) App# 11998
**From 2701 Pacific Highway 99E to 2872 J Street** (Well Permit #13857) App# 14954

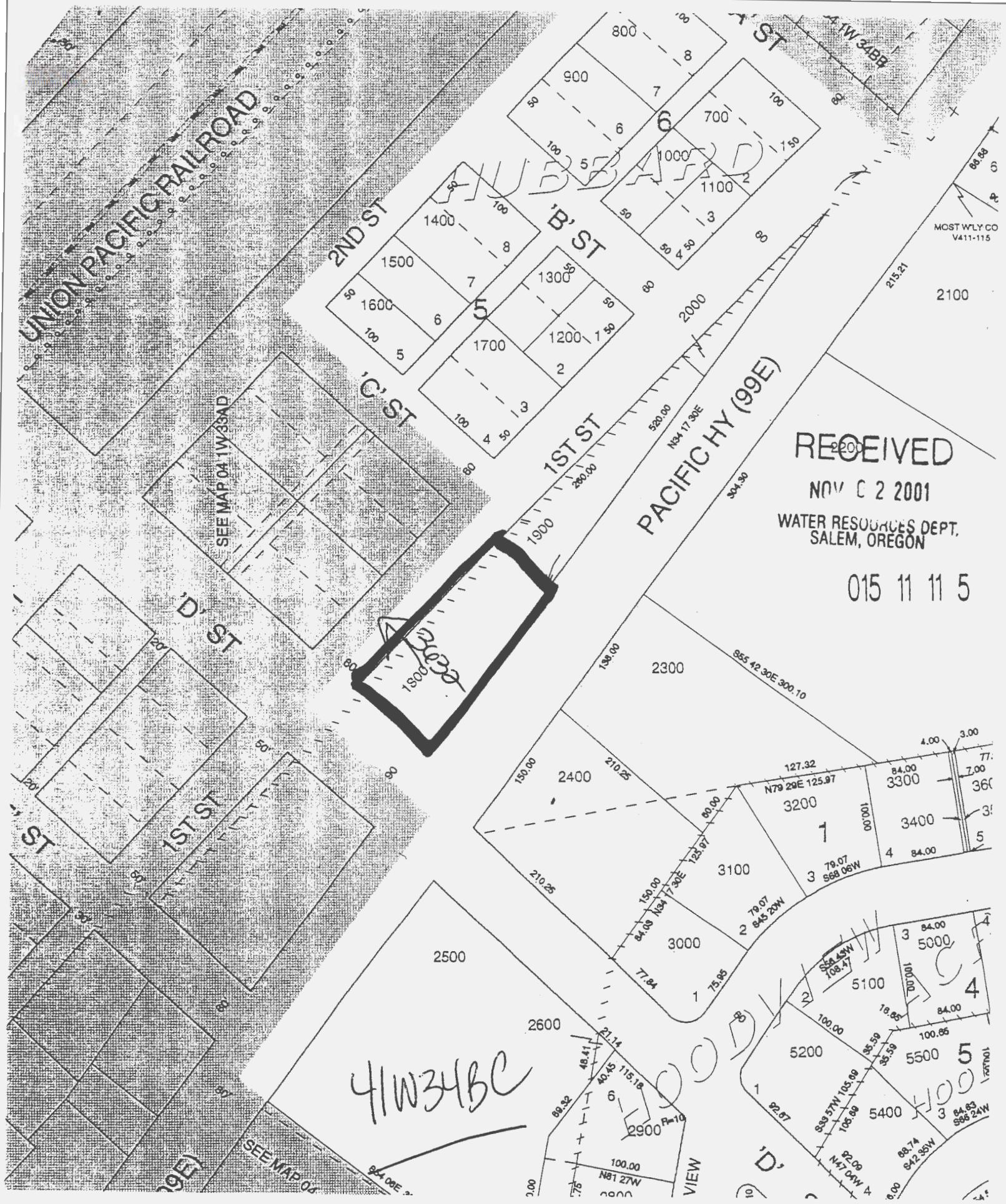
NW SE sec 33

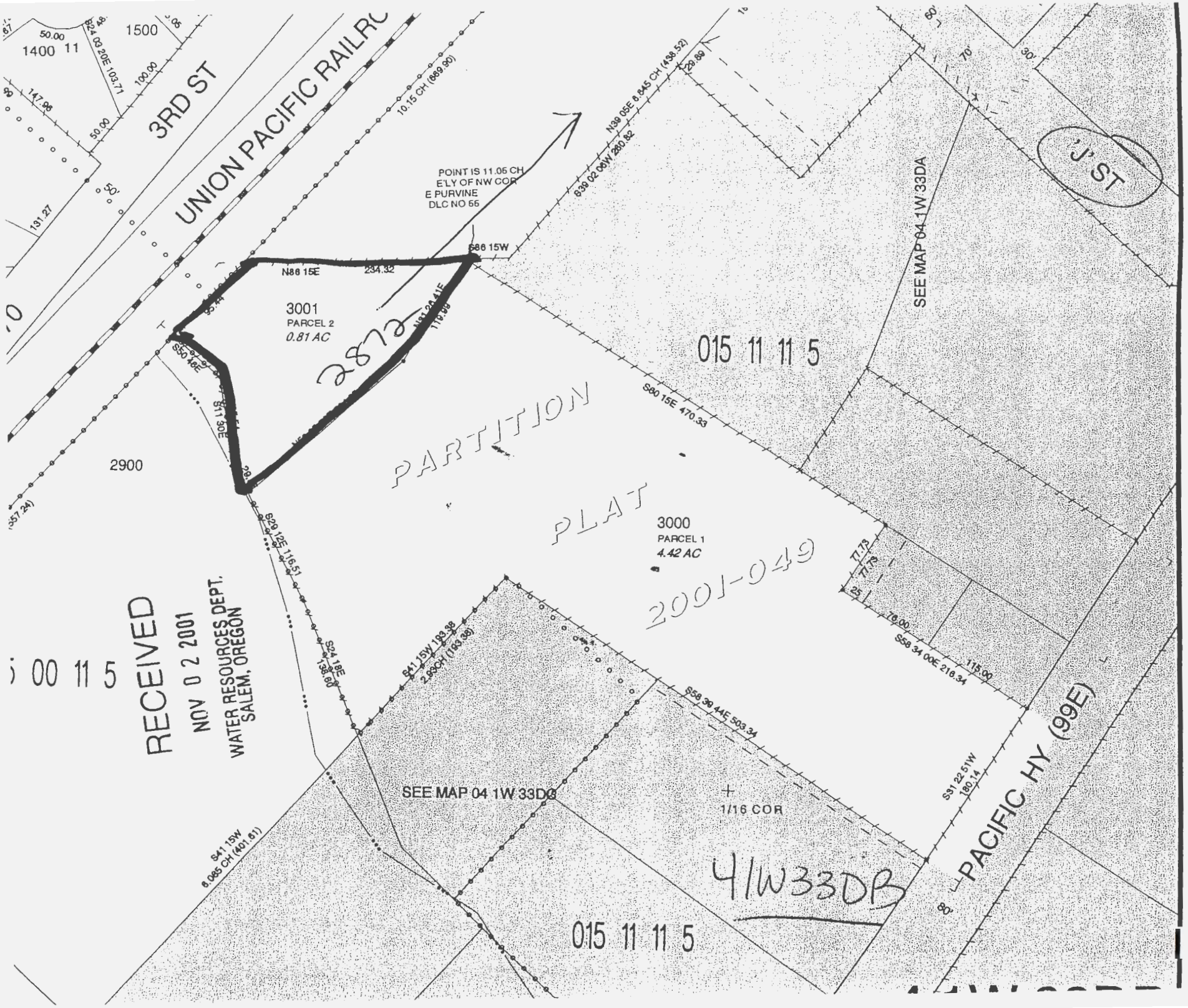
- Please refer to the attached copies of the assessor maps for location of addresses.

If you have any questions, please contact me @ 503-981-9633.

Log#
Mari 987 982
955 - 10965
55251
986
55303
984
923 - 10965
983
985

10965 NE SE sec 33
SE NE
SW NW


UNION PACIFIC RAILROAD
2ND ST
'B' ST
'C' ST
1ST ST
PACIFIC HY (99E)
'D' ST
SEE MAP 04 1W 33AD
SEE MAP 06
MOST WLY CO V411-115
RECEIVED
NOV 0 2 2001
WATER RESOURCES DEPT.
SALEM, OREGON
015 11 11 5
4 1W 34BB
4 1W 34BC
VIEW


3RD ST
UNION PACIFIC RAILRO
1400
1500
50.00
147.98
100.00
50.00
131.27
50'
10.15 CH (669.90)
POINT IS 11.05 CH
E'LY OF NW COR
E PURVINE
DLC NO 55
N39 05E 8.645 CH (438.52)
S39 02 06W 280.82
129.89
80'
70'
30'
'J' ST
SEE MAP 04 1W 33DA
S86 15W
N86 15E
234.32
3001
PARCEL 2
0.81 AC
2873
N51 24 41E
119.88
S50 18E
S11 30E
015 11 11 5
S80 15E 470.33
PARTITION
PLAT
2001-049
2900
3000
PARCEL 1
4.42 AC
7.73
7.73
25
70.00
S58 34 00E 216.34
115.00
S29 12E 116.51
S24 18E
138.60
S41 15W 193.98
2.95CH (193.98)
S58 39 44E 503.34
S31 22 51W
180.14
PACIFIC HY (99E)
SEE MAP 04 1W 33DC
1/16 COR
S41 15W
8.085 CH (401.61)
4/W33DB
015 11 11 5
RECEIVED
NOV 0 2 2001
WATER RESOURCES DEPT.
SALEM, OREGON

**City of Hubbard**
Phone 981-9633
3720 2nd Street
P. O. Box 380
Hubbard, Oregon 97032-0380

NOV 1

USA 34

OR. Water Resources Dept.
Att: Permitting
158 NE 12th St
Salem, OR 97301-4172

G-14154

Oregon
John A. Kitzhaber, M.D., Governor

**Water Resources Department**
Commerce Building
158 12th Street NE
Salem, OR 97301-4172
(503) 378-3739
FAX (503) 378-8130

October 12, 2001

(503) 378-8455 ext. 207

Mr. Jaime Estrada, Superintendent
City of Hubbard
3720 2nd St. / P. O. Box 380
Hubbard, OR 97032

Re: Water Level Monitoring Plan – Permit G-13857

Dear Jaime:

I have reviewed your revised monitoring plan, dated March 29, 2001, and I have approved it. I apologize for the delay in responding, but drought related activities, mostly in the Klamath Basin, have taken up nearly all of my time since April. I look forward to receiving your water-level data in April 2002 and annually thereafter.

Please call me at the above number if you have any questions.

Sincerely,

Michael J. Zwart
Hydrogeologist

CITY OF HUBBARD
3720 2nd St / PO Box 380 / Hubbard, Oregon 97032
503-981-9633 Fax 503-981-8743

March 29, 2001

Attn: Mike
Ground Water/Hydrology
Oregon Water Resources Department
158 12th St., N.E.
Salem, OR 97310-4172

Re: Water-Use Impact Plan on Permit G 13857

To Whom It May Concern:

Enclosed please find the city of Hubbard's Water-Use Impact Plan on Permit G 13857 revisions as requested. Please give us a call at (503) 982-9429 if you require any further information or have any questions. Thank you!

Sincerely,

Jaime Estrada
Superintendent

/mo
Enclosure
owrd2

**February 23, 2001**
**Water-Use Impact Plan on Permit G 13857**
**Certificate 0**
**Application G 14954**
**Priority Date 3/29/1999**

The city of Hubbard will monitor the static water levels and the pumping water rate on a regular basis.

The city of Hubbard will use this established point from the new well to compare with prior readings and to track the static water level.

The methodology use for obtaining the measurement is an airline that is capable of measuring in feet. Measurement will be taken in March of 2002 after the well has been off for 6 hours. The measurement will be taken by one member of our staff that has the certification in water treatment and distribution.

By measuring static water levels once a week keeping a log of the results, we should be able too determined what kind of effect if any this new well will have on the existing wells.

Public work's staff will provide a report in April of 2002

To this date we do not have this well in service.

je/staticwa

FELLERS
ROAD
BOONES
GRIMM
ROAD
Well
Mill
BM 177
Trailer Park
PACIFIC
BM 182
ROAD
BM 186
STAGE
SOUTHERN
2 LANE
2 LANE
ROAD
Trailer Park
BM 184
Drive-in Theater
ROAD
Mile
ROAD
ROAD
Hubbard Mineral Spring
Reservoir
Trailer Park
Hubbard
(BM182)
WT
BM 181
Trailer Park
Cem
FERRY
Creek
PUDDING
RIVER
BARNARDS
ROAD
Topewet
BOONES
BM 179
PACIFIC
T4S R1W
T4S R1W
T4S R1W
MAP CREATED FROM LOCATION FOUND IN FILE
10/4/99
RWK
WELL LOCATION
1720'
1540'
NW SE
NE SE
SW SE
SE SE
E 99
5
69
58
29
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56
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76
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180
179
173
150
182
175
185
181
174
160
170
145
100
151
99
29
28

APPEARS TO BE CLOSER TO S 75° E OF S CORNER DLC 70 NOT S 7° W. USE QUAD OF 11/4/99

4S 1W 33
NWSE

# CITY OF HUBBARD SOURCE WELL IMPROVEMENTS

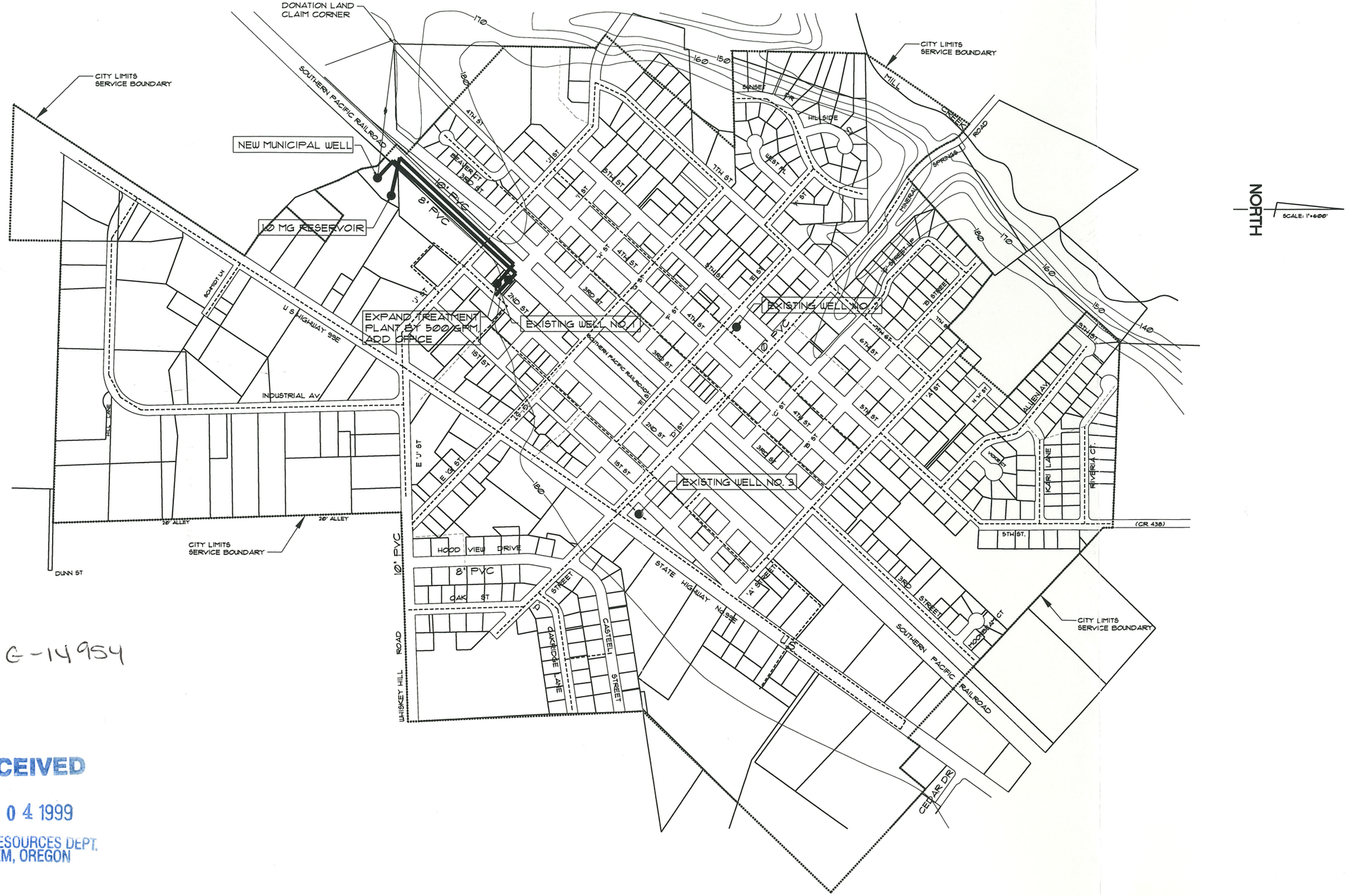

Application No. G-14954
Permit No. -

BST, Inc.
701 main street, suite 209
oregon city, oregon 97045
(503) 650-4919

CITY OF HUBBARD
SOURCE WELL IMPROVEMENTS

SUPERSEDED

# CITY OF HUBBARD SOURCE WELL IMPROVEMENTS




Application No. G-14954
Permit No. -

RECEIVED
MAR 04 1999
WATER RESOURCES DEPT.
SALEM, OREGON


BST, Inc.
701 main street, suite 209
oregon city, oregon 97045
(503) 650-4919


CITY OF HUBBARD
SOURCE WELL IMPROVEMENTS

# Mailing List for Permit Copies

Application# G-14954 Mailing List Print Date October 19, 2000

**Original mailed to(when permit issued, include copy of permit map):**

Applicant: CITY OF HUBBARD, VICKIE NOGEL, PO BOX 380, HUBBARD, OR 97032

**For Permit only - Permit Copies sent to (Remember to reduce copy margins):**

Copies Mailed
By: _____
(SUPPORT STAFF)
on: _____
(DATE)

PLACED IN U.S. MAIL
NOV 13 2000
OREGON WATER RESOURCES DEPT.

1. WRD - File # G-14954
2. WRD - Ken Stahr
3. WRD - Data Center
4. WRD - Watermaster District #:16 (w/copy of permit map)

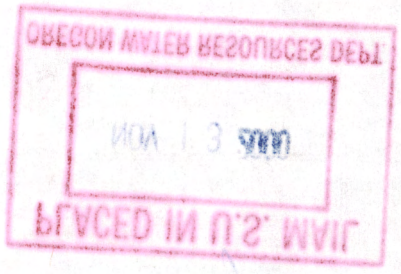
**COPIES TO** Other Interested Persons

5. WESTERBERG DRILLING, 36728 S KROPF RD, MOLALLA, OR 97038_____

6. _____

7. _____

Caseworker:AMH


OREGON WATER RESOURCES DEPT
PLACED IN U.S. MAIL

Oregon Water Resources Department
Water Rights Division

Water Rights Application
Number G-14954

**Final Order**

*Application History*
On March 29, 1999, VICKIE NOGLE for CITY OF HUBBARD submitted an application to the Department for a water use permit. The Department issued a Proposed Final Order on March 7, 2000. The protest period closed April 21, 2000, and no protest was filed.

The proposed use would not impair or be detrimental to the public interest.

**Order**

Upon payment of outstanding permit recording fees, Application G-14954 shall be approved as proposed by the Proposed Final Order and as provided on the attached draft permit.

Permit recording fees are required in the amount of $ 175.00. Said fees are due and payable no later than 60 days from the date of this Final Order. Failure to pay the required permit recording fees within 60 days from the date of this Final Order may result in the proposed rejection of Application G-14954.

*If you need to request additional time to submit the required fees, the written request should be received in the Salem office of the Department by the deadline above. The Department will evaluate the request and determine whether or not the request may be granted.*

**DATED August 15, 2000**

Paul R. Cleary, Director

PLACED IN U.S. MAIL
AUG 22 2000
OREGON WATER RESOURCES DEPT.

RECEIVED
SEP 14 2000
WATER RESOURCES DEPT.
SALEM, OREGON

*Appeal Rights*

This is a final order in other than a contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review of this order must be filed within the 60 day time period specified by ORS 183.484(2).

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filed during the protest period, the final order is not subject to judicial review.

*This document was prepared by Anita Huffman. If you have any questions about any of the statements contained in this document I am the most likely the best person to answer your questions. You can reach me toll free within Oregon at 1-800-624-3199 extension 229. Outside of Oregon you can dial 1-503-378-8455.*

*If you have questions about how to file a protest or if you have previously filed a protest and want to know the status, please contact Renee Moulun. Her extension number is 239.*

*If you have other questions about the Department or any of its programs please contact our Water Rights Information Group at extension 201. Address all other correspondence to: Water Rights Section, Oregon Water Resources Department, 158 12th ST. NE Salem, OR 97301-4172, Fax: (503)378-2496*

STATE OF OREGON

COUNTY OF MARION

DRAFT PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS DRAFT PERMIT IS HEREBY ISSUED TO

CITY OF HUBBARD
VICKIE NOGLE
PO BOX 380 (503)981-9633
HUBBARD, OREGON 97032

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-14954

SOURCE OF WATER: A WELL IN MILL CREEK BASIN

PURPOSE OR USE: MUNICIPAL USE

MAXIMUM RATE: 0.668 CUBIC FOOT PER SECOND

PERIOD OF USE: YEAR ROUND

DATE OF PRIORITY: MARCH 29, 1999



POINT OF DIVERSION LOCATION: NW 1/4 SE 1/4, SECTION 33, T4S, R1W, W.M.; 1540 FEET NORTH AND 1720 FEET WEST FROM THE SE CORNER SECTION 33

THE PLACE OF USE IS LOCATED AS FOLLOWS:

WITHIN THE SERVICE BOUNDARIES OF THE CITY

Measurement, recording and reporting conditions:

A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order, shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as

may be required by the Director. Further, the Director may require the permittee to report general water use information, including the place and nature of use of water under the permit.

B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

The water user shall develop a plan to monitor and report the impact of water use under this permit on water levels within the aquifer that provides water to the permitted well(s). The plan shall be submitted to the Department within one year of the date the permit is issued and shall be subject to the approval of the Department. At a minimum, the plan shall include a program to periodically measure static water levels within the permitted well(s) or an adequate substitute such as water levels in nearby wells. The plan shall also stipulate a reference water level against which any water-level declines will be compared. If a well listed on this permit (or replacement well) displays a total static water-level decline of 25 or more feet over any period of years, as compared to the reference level, then the water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s). Such action shall be taken until the water level recovers to above the 25-foot decline level or until the Department determines, based on the water user's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

Within 3 years of permit issuance, the permittee shall submit a Water Management and Conservation Plan consistent with OAR Chapter 690,

Division 86. The Director may approve an extension of this timeline to complete the required Water Management Conservation Plan.

The well shall be continuously cased and continuously sealed to a minimum depth of 210 feet below land surface.

**STANDARD CONDITIONS**

The wells shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

Actual construction of the well shall begin within one year from issuance of the final order approving the use. Complete application of the water to the use shall be made on or before October 1, 2004. Within one year after complete application of water to the proposed use, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner (CWRE).

Issued _____, 2000

DRAFT - THIS IS NOT A PERMIT

_____
Paul R. Cleary, Director
Water Resources Department

Oregon Water Resources Department
Water Rights Division

Water Rights Application
Number G-14954

**Final Order**

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Dwight Fredl for
Paul R. Cleary, Director

PLACED IN U.S. MAIL
AUG 22 2000
OREGON WATER RESOURCES DEPT.

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COUNTY OF MARION

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Issued _____, 2000

DRAFT - THIS IS NOT A PERMIT

_____
Paul R. Cleary, Director
Water Resources Department

# Mailing List for FO Copies

Application # G14954 Mailing List Print Date July 25, 2000

**Original mailed to(when permit issued, include copy of permit map):**

Applicant: CITY OF HUBBARD, VICKIE NOGLE,
PO BOX 380, HUBBARD, OREGON 97032

Copies Mailed
By: Michelle
(SUPPORT STAFF)
on: 8-22-00
(DATE)

**For FO w/Draft Permit - Copies sent to:**
1. WRD - File # G14954

**For FO w/ Draft Permit - FO and Map Copies sent to:**
2. WRD - Watermaster District #: 16

For FO w/Draft Permit, w/Permit, or for Denial - Copies to Other Interested Persons *(CWRE, Agent, Well Driller, Commenter, etc.)*
1. WESTERBERG DRILLING, 36728 S KROPF RD, MOLALLA, OREGON 97038__

2. _____

3. _____

For FO w/Draft Permit or w/Permit - "$10 LETTER" sent to Interested Persons who have not protested or paid for copies
1. _____

2. _____

CASEWORKER:AMH

# FO CHECKLIST

FILE # G14954
PFO WEEK # 241
FO WEEK # 253

PFO TO FO CONVERSION

REVIEW DATE: 7/25/00
INITIALS: AD

Applicant Name and Mailing Address:

City of Hubbard, Vickie Nagel
PO Box 380
Hubbard, OR 97032

**In preparing to create the FO, you should check the following:**

1. Y / N Were comments or protests received? If so, **from whom** and **when**?

2. ✓ On the PFO CC list, verify names and mailing addresses of **ALL** ~~commentors~~ (regardless of comment date, **affected landowners**, and **those who paid the $10 feet**.

Westerberg Drilling
36728 Sykorff Rd, Molalla, OR 97038

3. Y / N / NA Have affected land owners been notified?

4. Y / N Is the file lacking a signed oath of accuracy for the application?

5. Y / N / NA Has ODFW asked for self certification of screening condition?
If so, write "ODFW CERT" in the permit black on the front of the file.

6. Y / N Is water use prohibited for one or more months of the normal use period?

7. ~~Y~~ / ~~N~~ If #6 = "Y", is short season letter on file? Note: If short season letter is lacking, see item #10 below. Give applicant 60 days to submit required information.

8. ✓ Verify Payment of recording fees (*circle the appropriate option*)

(1) Issue FO w/permit if fees are paid — Prepare refund request for excess fees, **including standing fees if no protest is filed and no modifications are being made to the PFO**.

(2) Issue FO w/o permit if fees are lacking.

1st CFS/AF _____
Add'l _____
**TOTAL Q** _____

| | |
|---|---|
| Exam Fee Paid | ~~400~~ |
| Q fee | 150 |
| Recording fee | 175 |
| **Total** | 575 |
| ~~Amount Paid~~ | 400 |
| **Amount due/refund** | 175 |

9. Y / N Is further processing possible? If not state reason: _____

10. Y / N Do the PFO conclusions require modification? Why? _____
(If YES, circle FOMOD and one other type below)

11. X Correct PFO errors (such as POD or POU location (verify from map), Permit format)

12. ✓ Respond to significant comments, issues, or disputes related to the proposed use of water (see notes, if any, listed above)

13. ✓ Include or exclude permit conditions and management codes. 7B, 7A

14. ____ Assign permit numbers to files with oaths, fees, and no protests or other issues.

FO Type: (circle types) DENIAL (FO w/o PERMIT (REASON: Lacks Fees) Lacks Easement Map Other

FO & PERMIT (Permit # _____ ) FOMOD MGMT CODES:: 7B, 7A

**Once FO document is completed:**

15. ✓ Save WordPerfect document in M:\GROUPS\WR\FO\WEEK 253 & delete duplicates.

16. ✓ Print final draft of document and submit to team leader for review

17. Y / N Team leader review completed

18. ____ Notify applicant of additional information or fees required prior to permit issuance. (**SEND CERTIFIED LETTER** & use standard wording from M:\ ...\FO\TOOLS if possible)

19. Route to Dwight for signature

20. Update folders, E-mail data center, send copy to HTML

21. To support for mailing

Watermaster District 16
Region Manager ✓
ODFW District ✓

# PFO CHECKLIST

Application #: G 14954

County MARION Basin: WILLAMETTE 2

Township 4S Range 1W Section 33 1/4 1/4 NW SE

1. Complete by Minimum Requirements Checklist? **Y / N**

2. Shortcomings (items needed before a permit and/or FO can be issued) **Y / N** Should process continue **Y / N**

~~NEED AFFIDAVIT OF PUBLICATION~~ DONE

~~NEED NEW MAP (ESPECIALLY POD SECTION V4 V4)~~ → MAKE IT LOOK. WE ALREADY REQUESTED A BETTER MAP & RECEIVED WHAT WE ASKED FOR.

3. Groundwater Review **A B C D** River/Stream Name _____
   a. Groundwater Availability **A B C**
   b. Is second groundwater review complete **Y / N** necessary? (comments) **Y / N**
   c. Is the well located in a GWLA or CA? (If applicable, include map with POD) **Y / N** within area

4. Is use from **BOR / Doug Co.** project? **Y / N** Contract in file? **Y / N** Contract # _____

5. Is the use allowed by the **Basin Program**? **Y / N** Limited? **Y / N** _____

6. Water Availability Data **OK / REDONE / NA** (80% live flow & 50% storage) _____

7. Is the source **withdrawn** or limited by statute or Department order? **Y / N** _____

8. Is the Proposed Use located in or above a **SWW**? **Y / N** _____

9. Division 33: **Y / N / NA** Above Bonn (after July 17, 1992) **Y / N**
   Below Bonn (after April 8, 1994; June 3, 1994) **Y / N**
   Statewide - (in shaded areas on T, E, and S Map - after June 3, 1994) **Y / N**

10. IR identifies as on DEQ **303d** List? **Y / N / NA** Comments received? **Y / N**

11. Have **conflicts** been addressed? **Y / N / NA** _____

12. Duty_____ Irrigation Season_____

13. Period of Allowed Use YR RND

14. Allowed Rate 0.668 CFS

summary:

15. **Small** (≤0.1cfs, ≤9.2AF), **Medium** (>0.1 or <1.5cfs, >9.2 or <100AF) or **Large** (≥1.5 cfs, ≥100 AF)
    condition 7I and **municipal** use ≤0.1cfs require the **Large** condition

16. **Conditions** CONDLN 3YRS, 7A, 7B, CASE & SEAL TO Z10
    New River Basin? **Y / N / NA** (see M:\groups\wr\pfo\findings & other lang)

17. **IR** Date 7/23/99 Public Notice Date 8/10/99 Comment Rec'd _____

18. CWRE, representatives or Property owners to notify? **Y / N**

WESTERBERG DRILLING INC
36727 S KROFF
MOLALLA, OR 97038

BST, INC.
4025 RIDGE LN
WEST LINN OR 97068-2917

Initials: RWK Date: 9/23/99

Revised 4/8/99

# IR CHECKLIST

Application # G14954 Priority Date: 3/29/99

Basin: 2-Will County: MARION

Township 4S Range 1W Section 33 1/4 1/4

WAB: POU WAB:

1. Complete by Minimum Requirements checklist (Y) N Items still required:

2. Groundwater Review A B (C) D River/Stream Name

Conditions 7B, 7A Water Availability A B (C)

3. Is the well located in a groundwater limited area? Y (N) Name

4. Is the well located in T1N R3E SEC 20, 21, 28, 29 Y (N)

5. Within or above a Scenic Waterway Y (N) Conditions/Restrictions Y (N)

6. Basin Maps have been checked (Y) N Puddle R

7. Allowed under Basin Program (Y) N Limitations Y N 690-502-410(2)

8. Withdrawn Y (N) Season Allowed

9. Water Availability 80% 50% (N/A)

10. Use MUNI Period of allowed use YR

11. Season requested by applicant YR

12. For Irrigation: Rate Duty Season N/A

13. For Nursery or Cranberry: Rate Duty Season

14. Allowable rate of use: 0.67

Requested Rate: 300.0 gpm 0.67

15. BOR project Y (N) Contract #

16. Subject to Division 33: Y (N) (N/A) Above Bonneville TES Y N

Below Bonneville TES Y N TES only Y N

17. Conflict Y (N)

18. Conditions? (BOR, GW, (other)) Y N Comply - 3yrs - Cont. cased & sealed to 210' min depth

19. Measuring condition Small Medium Large ✓

20. Within Dept. Of Agriculture Water Quality Management Area Y (N) N/A

TUALATIN BEAR CREEK(ROGUE)

21. On DEQ 303d list Y N (N/A)

22. Land use approval (OK'd) Needs Approval County Notified N/A

23. Watermaster Dist: (1 2 (16) 18 20 (WR)) (3 4 5 NCR) (6 8 9 10 ER)

(11 12 17 SCR) (13 14 15 19 SWR)

24. ODFW Biologist Leibowitz

24. Letter will be: (GOOD) LIMITED BAD BAD W/IR SHORT BAD W/HC EXCEPT

Name: AW Date: 7/7/99

Groundwater/Hydrology

FILE ** G-14954

ROUTED TO: W.R

TOWNSHIP/
RANGE-SECTION: 4S/1W-33

CONDITIONS ATTACHED? [X] yes [ ] no

REMARKS OR FURTHER INSTRUCTIONS:

Reviewer: Mark Norton

RECEIVED
FEB 12 1999
WATER RESOURCES DEPT.
SALEM, OREGON

Oregon Water Resources Department

# Application for a Permit to Use Ground Water

*Please type or print in dark ink. If your application is found to be incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "n/a." Please read and refer to the instruction booklet when completing your application. Thank you.*

## 1. Applicant Information

### A. Individuals

*(If more than one person is applying, please attach a sheet providing the information below for each person applying.)*

Name: _____
Last First MI

Mailing address: _____

_____
City State Zip

Phone: _____
Home Work Other

*Fax: _____ *E-Mail address: _____

RECEIVED
MAR 04 1999
WATER RESOURCES DEPT.
SALEM, OREGON

### B. Organizations

*(Corporations, associations, firms, partnerships, joint stock companies, cooperatives, public and municipal corporations)*

Name of organization: City of Hubbard

Name and title of person applying: Vickie Nogle, City Recorder

Mailing address of organization: 3720 2nd Street

Hubbard Oregon 97032
City State Zip

Phone: (503) 981-9633
Day Evening

*Fax: 981-8743 *E-Mail address: _____

**Optional information*

For Department Use

App. No. G14954 Permit No. _____ Date 3/29/99

## 2. Location and Source

*The Department cannot process your application without accurate information showing the source of water and location of water use. You must attach a map to this application form that clearly indicates the township, range, section, and quarter/quarter section of the proposed well location and place of use. The map must provide tax lot numbers. See page 3 in the instruction booklet for detailed map specifications. In addition, please provide the following information:*

### A. County

In what county is the *use* proposed? Marion

In what county is the *appropriation point* proposed? Marion

### B. River Basin

*(See instruction booklet pg.3 for list):* Willamette

### C. Property Ownership

Do you own all the land where you propose to divert, transport, and use water?

- ☐ Yes *(Skip to section 3 "Groundwater Development.")*
- ☒ No Please check the appropriate box below, and on a separate sheet of paper list the names and addresses of all affected landowners.**
  - ☐ I have a recorded easement or written authorization permitting access.
  - ☒ I do not currently have written authorization or easement permitting access.

***If more than 25 landowners are involved, a list is not required. See page 4 in the instruction booklet for more details.*

## 3. Groundwater Development

**A.** Number of wells: 1 **B.** Name of nearest surface water body man-made pond

**C.** Distance from well(s) to nearest stream or lake: 1) man-made pond : 1000 ft.

2) Mill Creek : 1700 ft 3) Reservoir : 3200 ft. 4) _____

**D.** If distance from surface water is less than one mile, indicate elevation difference between nearest surface water and well head. 1) 30 ft below well head.

2) 40 ft below well Head 3) 30 ft below well head 4) _____

## E. Well Characteristics

*Wells must be constructed according to standards set by the Department for the construction and maintenance of water wells. If the well is already constructed, please enclose a copy of the well constructor's log and the well ID number, if available, for each well with this application. Identify each well with a number corresponding to the wells designated on the map and proceed to question **F** in this section of the form. If the well has not been constructed, or if you do not have a well log, please complete the following:*

1. Wells will be constructed by: Qualified contractor through competitive bid process.

   Address: _____

   _____

   Completion date: _____

2. Please provide a description of your well development. *(Attach additional sheets if needed.)*

| Well No. | Diameter | Type and size of casing | No. of feet of casing | Intervals casing is perforated (in feet) | Seal depth | Estimated depth to water | Est. depth to water-bearing stratum | Type of access port or measuring device | Total well depth |
|---|---|---|---|---|---|---|---|---|---|
| 1 | D.K. | 12" | 300'± | D.K. | D.K. | 260' | 280'± | D.K. | 300'± |
| | | | | | | | | | |
| | | | | | | | | | |
| | (well has not yet been drilled.) | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

## F. Artesian Flows

If your water well is flowing artesian, describe your water control and conservation works:

N/A.

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SALEM, OREGON

## 4. Water Use

*Please read the instruction booklet for more details on "type of use" definitions, how to express how much water you need and how to identify the water source you propose to use. You must fill out a supplemental form for some uses as they require specific information for that type of use.*

### A. Type(s) of Use(s)

*(see list of beneficial uses in the instruction booklet):*

Municipal

- If your proposed use is **domestic**, indicate the number of households to be supplied with water:____
- If your proposed use is **irrigation**, please attach Form **I**
- If your proposed use is **mining**, attach Form **R**
- If your proposed use is **municipal**, attach Form **M**
- If your proposed use is **commercial/industrial** or **quasi-municipal**, attach Form **Q**

### B. Amount of Water

Provide the production rate in gallons per minute (gpm) and the total annual amount of water you need from each well, from each source or aquifier, and for each use. You do not need to provide source information if you are submitting a well log with your application.

| Well No. | Source or Aquifer | Type of Use | Total Annual Amount | Production Rate of the Well in gpm |
|---|---|---|---|---|
| 1 | | Municipal | 48 MG. | 300 |
| | | | | |
| | | | | |
| | | | | |

### C. Season of Use

Indicate the time of year you propose to use the water (for seasonal uses like irrigation give dates when water use would begin and end):

continuous use all year

### D. Acreage

If you will be applying water to land, please give the total number of acres where water will be applied or used:

N/A.

## 5. Water Management

### A. Diversion

What equipment will you use to pump water from your well(s)?

☒ Pump (give horsepower and pump type ) to be determined after drilling

☐ Other means (describe) _____

### B. Transport

How will you transport water to your place of use?



☐ Ditch, canal (give average width and depth):
Width _____ Depth _____
Is the ditch or canal to be lined? ☐ Yes ☐ No

☒ Pipe (give diameter and total length)
Diameter(s) 8" Length 1050 ft.

☐ Other (describe) _____

### C. Application/Distribution Method

What equipment will you use to apply water to your place of use?

Irrigation or land application method (check all that apply):

☐ Flood ☐ High-pressure sprinkler ☐ Low pressure sprinkler
☐ Drip ☐ Water cannons ☐ Center pivot system
☐ Hand lines ☐ Wheel lines
☐ Siphon tubes or gated pipe with furrows
☐ Other, describe _____

Distribution method

☒ In-line storage (tank or pond) ☐ Direct pipe from source ☐ Open canal

### D. Conservation

What methods will you use to conserve water? Why did you choose this distribution or application method? For example, if you are using sprinkler irrigation rather than drip irrigation, explain. If you need additional space, attach a separate sheet.

City's water rate structure penalizes excessive use.

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WATER RESOURCES DEPT.
SALEM, OREGON

## 6. Project Schedule

Proposed date construction will begin June 1999

Proposed date construction will be completed Dec. 1999

Proposed date beneficial water use will begin Jan. 2000

## 7. Remarks

*If you would like to clarify any information you have provided in the application, please do so here and reference the specific application question you are addressing.*

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SALEM, OREGON

## Signature

By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application packet.
- I cannot legally use water until the Water Resources Department issues a permit to me.
- If I get a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be canceled.
- The water use is compatible with local comprehensive land use plans.
- Even if the Department issues a permit to me, I may have to stop using water to allow senior water right holders to get water they are entitled to, and

I swear that all statements made and information provided in this application are true and correct to the best of my knowledge:

Vickie L Nogle — Signature of Applicant

1/21/99 — Date

Signature of Co-applicant

Date

Before submitting this application, have you:

- Answered every question?
- Included a Land Use Information Form or receipt stub signed by a local official?
- Attached a legible map that meets all the necessary criteria?
- Included a check made out to WRD for at least the amount of the application fee?

*Last revision: October 31, 1996*

*Water Resources Department*

**MEMO** May 25, 1999

**TO** **Application G-** 14954

**FROM** **GW:** Marc A Norton
(Reviewer's Name)

**SUBJECT** **Scenic Waterway Interference Evaluation**

☐ Yes
☒ No

The source of appropriation is within or above a Scenic Waterway.

☐ Yes
☒ No

Use the Scenic Waterway condition (Condition 7J).

PREPONDERANCE OF EVIDENCE FINDING: (Check box only if statement is true)

☒

At this time the Department is unable to find that there is a preponderance of evidence that the proposed use of ground water will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway in quantities necessary for recreation, fish and wildlife.

FLOW REDUCTION: *(To be filled out only if Preponderance of Evidence box is not checked)*

Exercise of this permit is calculated to reduce monthly flows in _____ Scenic Waterway by the following amounts expressed as a proportion of the consumptive use by which surface water flow is reduced.

| Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |

TO: Water Rights Section

May 25, 1999

FROM: Ground Water/Hydrology Section Marc A Norton
Reviewer's Name

SUBJECT: Application G- 14954

GROUNDWATER/SURFACE WATER CONSIDERATIONS

1. PER THE _____ Basin rules, one or more of the proposed POA's is/is not within _____ feet/mile of a surface water source (_____) and taps a groundwater source hydraulically connected to the surface water.

2. BASED UPON 0AR 690-09 currently in effect, I have determined that the proposed groundwater use
   a. ___ will, or have the potential for substantial interference with the nearest
   b. ___ will not surface water source, namely _____; or
   c. X will if properly conditioned, adequately protect the surface water from interference:
      i. ___ The permit should contain condition #(s)_____;
      ii. X The permit should contain special condition(s) as indicated in "Remarks" below;
      iii. ___ The permit should be conditioned as indicated in item 4 below; or
   d. will, with well reconstruction, adequately protect the surface from substantial interference.

GROUNDWATER AVAILABILITY CONSIDERATIONS

3. BASED UPON available data, I have determined that groundwater for the proposed use
   a. ___ will, or likely be available in the amounts requested without injury to prior rights
   b. ___ will not and/or within the capacity of the resource; or
   c. X will if properly conditioned, avoid injury to existing rights or to the groundwater resource:
      i. X The permit should contain condition #(s) 7B, 7A ;
      ii. X The permit should contain special condition(s) as indicated in "Remarks" below;
      iii. ___ The permit should be conditioned as indicated in item 4 below; or

4. a. ___ THE PERMIT should allow groundwater production from no deeper than_____ft. below land surface;
   b. ___ The permit should allow groundwater production from no shallower than_____ft. below land surface;
   c. ___ The permit should allow groundwater production only from the_____ groundwater reservoir between approximately _____ft. and _____ft. below land surface;
   d. ___ Well reconstruction is necessary to accomplish one or more of the above conditions.
   e. ___ One or more POA's commingle 2 or more sources of water. The applicant must select one source of water per POA and specify the proportion of water to be produced from each source.

REMARKS: The well shall be continuously cased and sealed to a minimum depth of 210 feet

(Well Construction Considerations on Reverse Side)

WELL CONSTRUCTION (If more than one well doesn't meet standards, attach an additional sheet.)

5. THE WELL which is the point of appropriation for this application does not meet current well construction standards based upon:
   a.____review of the well log;
   b.____field inspection by _____;
   c.____report of CWRE _____;
   d.____other: (specify) _____
   _____

6. THE WELL construction deficiency:
   a.____constitutes a health threat under Division 200 rules;
   b.____commingles water from more than one groundwater reservoir;
   c.____permits the loss of artesian head;
   d.____permits the de-watering of one or more groundwater reservoirs;
   e.____other: (specify) _____

7. THE WELL construction deficiency is described as follows: _____
   _____
   _____

8. THE WELL a.____was, or constructed according to the standards in effect at the time of
   b.____was not original construction or most recent modification.
   c.____I don't know if it met standards at the time of construction.

RECOMMENDATION:

A.____I recommend including the following condition in the permit:
"No water may be appropriated under terms of this permit until the well(s) has been repaired to conform to current well construction standards and proof of such repair is filed with the Enforcement Section of the Water Resources Department."

B.____I recommend withholding issuance of the permit until evidence of well reconstruction is filed with the Enforcement Section of the Water Resources Department.

C.____REFER this review to Enforcement Section for concurrence.

THIS SECTION TO BE COMPLETED BY ENFORCEMENT PERSONNEL

I concur in G/H's recommendation A or B above relating to conditioning or withholding the permit

_____ _____, 199__.
(Signature)

I do not concur in G/H's recommendation A or B above relating to conditioning or withholding the permit for the following reasons:_____
_____
_____

_____ _____, 199__.
(Signature)

TO: Water Rights Section

May 25, 1999

FROM: Ground Water/Hydrology Section Marc A Norton
Reviewer's Name

SUBJECT: Application G- 14954

GROUNDWATER/SURFACE WATER CONSIDERATIONS

1. PER THE _____ Basin rules, one or more of the proposed POA's is/is not within _____ feet/mile of a surface water source (_____) and taps a groundwater source hydraulically connected to the surface water.

2. BASED UPON 0AR 690-09 currently in effect, I have determined that the proposed groundwater use
   a. ___ will, or have the potential for substantial interference with the nearest
   b. ___ will not surface water source, namely _____; or
   c. X will if properly conditioned, adequately protect the surface water from interference:
      i. ___ The permit should contain condition #(s)_____;
      ii. X The permit should contain special condition(s) as indicated in "Remarks" below;
      iii. ___ The permit should be conditioned as indicated in item 4 below; or
   d. will, with well reconstruction, adequately protect the surface from substantial interference.

GROUNDWATER AVAILABILITY CONSIDERATIONS

3. BASED UPON available data, I have determined that groundwater for the proposed use
   a. ___ will, or likely be available in the amounts requested without injury to prior rights
   b. ___ will not and/or within the capacity of the resource; or
   c. X will if properly conditioned, avoid injury to existing rights or to the groundwater resource:
      i. X The permit should contain condition #(s) 7B, 7A ;
      ii. X The permit should contain special condition(s) as indicated in "Remarks" below;
      iii. ___ The permit should be conditioned as indicated in item 4 below; or

4. a. ___ THE PERMIT should allow groundwater production from no deeper than_____ft. below land surface;
   b. ___ The permit should allow groundwater production from no shallower than_____ft. below land surface;
   c. ___ The permit should allow groundwater production only from the_____ groundwater reservoir between approximately _____ft. and _____ft. below land surface;
   d. ___ Well reconstruction is necessary to accomplish one or more of the above conditions.
   e. ___ One or more POA's commingle 2 or more sources of water. The applicant must select one source of water per POA and specify the proportion of water to be produced from each source.

REMARKS: The well shall be continuously cased and sealed to a minimum depth of 210 feet

(Well Construction Considerations on Reverse Side)

G-14954

Water Resources Department

**MEMO** May 25, 1999

**TO** Application G-14954

**FROM** GW: Marc A Norton
(Reviewer's Name)

**SUBJECT** Scenic Waterway Interference Evaluation

☐ Yes
☒ No

The source of appropriation is within or above a Scenic Waterway.

☐ Yes
☒ No

Use the Scenic Waterway condition (Condition 7J).

PREPONDERANCE OF EVIDENCE FINDING: (Check box only if statement is true)

☒

At this time the Department is unable to find that there is a preponderance of evidence that the proposed use of ground water will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway in quantities necessary for recreation, fish and wildlife.

FLOW REDUCTION: *(To be filled out only if Preponderance of Evidence box is not checked)*

Exercise of this permit is calculated to reduce monthly flows in _____ Scenic Waterway by the following amounts expressed as a proportion of the consumptive use by which surface water flow is reduced.

| Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |

**Water Right Conditions Tracking Slip**

*Groundwater/Hydrology Section*

FILE ## G-14954

ROUTED TO: W.R

TOWNSHIP/
RANGE-SECTION: 4S/1W-33

CONDITIONS ATTACHED? [✓] yes [ ] no

REMARKS OR FURTHER INSTRUCTIONS:

Reviewer: Mark Norton

WATER RESOURCES DEPARTMENT MEMORANDUM

TO: Ground Water/Hydrology
FROM: Marc Norton
SUBJECT: Groundwater Application G- 14954

Date 5/25/99

Applicant(s) seek 300 gpm (_____cfs) from one wells in the Willamette basin

Applicants Name: City of Hubbard — Pudding sub basin
Proposed Use: Municipal — Mill sub basin

Pertinent 7 & 1/2 minute Quads: Woodburn

Well 2 WRD#_____ T. 4S R. 1W S. 33 QQ DBD County Marion

Legal Description_____

Well is 500 ft from UnNamed to Mill Creek (river/stream)

Well is 1000-1100 ft from Pond & UnNamed Trib to Mill Creek (river/stream)

Well Elevation 175 ft River/Stream elevation 160 ft.

Well Elevation - River/Stream elevation ± 10-20 ft ft.

Well depth 300 ft SWL _____ ft on _____

Sealed to _____ ft Depth first water found _____ ft

Cased to _____ ft Perforations/screens _____ ft

Lined to _____ ft Perforations/screens _____ ft

Well test and types _____

(Confined/Semi-confined/Unconfined) Direct hydraulic connection? YES / NO

Potential to cause substantial interference? _____

Proposed Well with No seal depth

Well _____ WRD#_____ T_____ R_____ S_____ QQ_____ County _____

Legal Description_____

Well is _____ ft from _____ (river/stream)

Well is _____ ft from _____ (river/stream)

Well Elevation _____ ft River/Stream elevation _____ ft.

Well Elevation - River/Stream elevation _____ ft.

Well depth _____ ft SWL _____ ft on _____

Sealed to _____ ft Depth first water found _____ ft

Cased to _____ ft Perforations/screens _____ ft

Lined to _____ ft Perforations/screens _____ ft

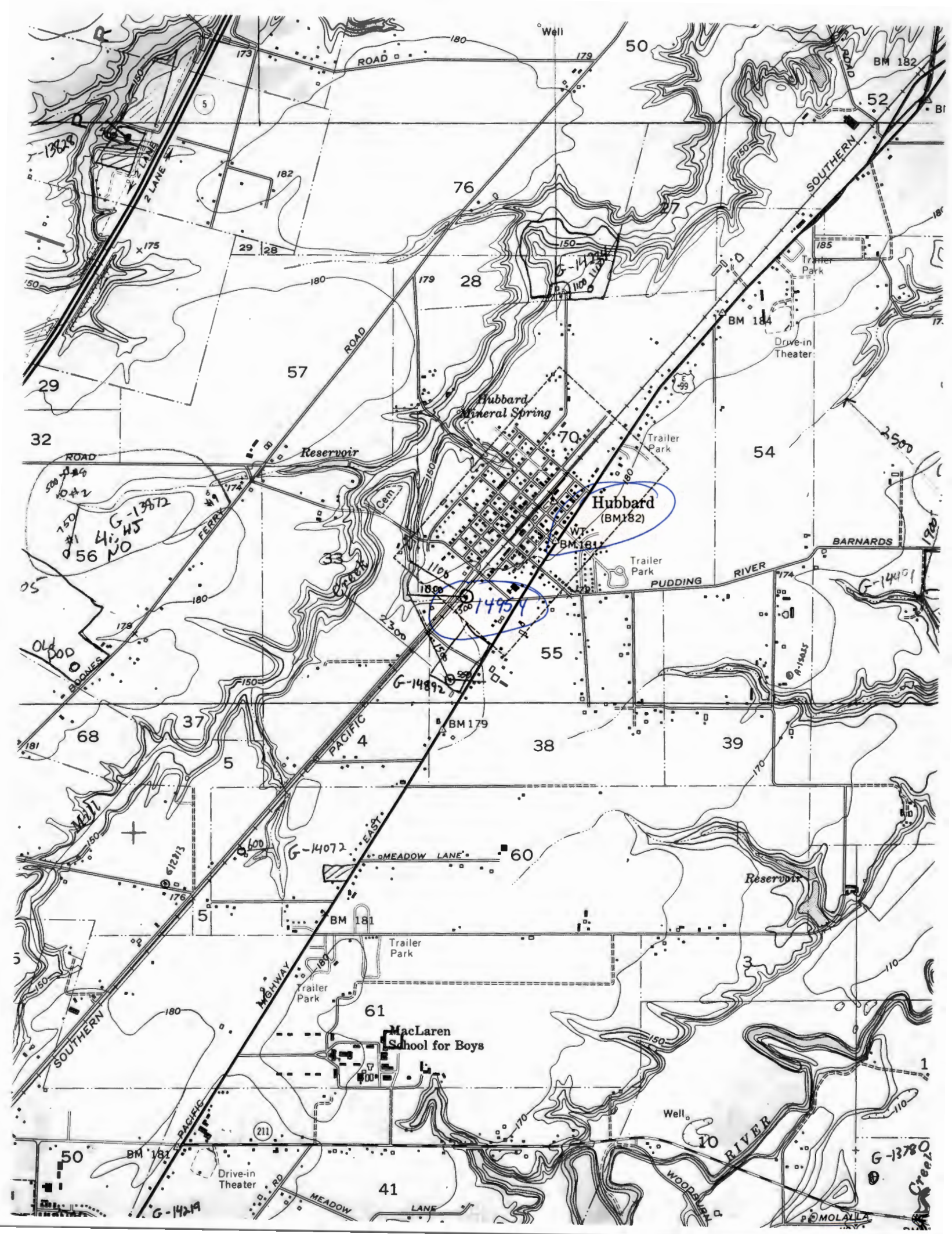
Well test and types _____

(Confined/Semi-confined/Unconfined) Direct hydraulic connection? YES / NO

Potential to cause substantial interference? _____

Comments: Recommend 210 ft. case & seal to minimize interference & impact on Surface Water

References Used: _____


Well
ROAD
BM 182
SOUTHERN
PACIFIC
HIGHWAY
Trailer Park
Drive-in Theater
BM 184
Hubbard Mineral Spring
Reservoir
Hubbard
(BM182)
BM181
BARNARDS
PUDDING
RIVER
Cem
Creek
FERRY
BOONES
BM 179
EAST
MEADOW LANE
BM 181
MacLaren School for Boys
Well
WOODBURN
P.O. MOLALLA
MEADOW
LANE
RD
2 LANE
50
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27
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57
29
32
70
54
55
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68
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61
3
1
10
41

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.

RECEIVED
NOV 13 1967
STATE ENGINEER
SALEM, OREGON

# WATER WELL REPORT
STATE OF OREGON
(Please type or print)
(Do not write above this line)

MARION 923

State Well No. 4/1W-33K

State Permit No. .....

## (1) OWNER:
Name City Of Hubbard, Oregon
Address

## (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 ☒
16" Diam. from 0 ft. to 51 ft. Gage .312
12" Diam. from 0 ft. to 140'6" ft. Gage .375
" Diam. from ft. to ft. Gage

## PERFORATIONS:
Perforated? ☐ Yes ☒ No
Type of perforator used
Size of perforations in. by in.
perforations from ft. to 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 Johnson
Type Johnson Stainless Steel No pipe size
Diam. 10 Slot size 18 Set from 139 ft. to 149 ft.
Diam. Slot size Set from ft. to ft.

## (8) WATER LEVEL: Completed well.
Static level 40 ft. below land surface Date 11-6-67
ian 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: 800 gal./min. with 76 ft. drawdown after 7 hrs.
" " " "
" " " "
Baller 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 Bentonite
Depth of seal 50 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? bad oder depth of strata 115 to 131
Method of sealing strata off heavy bentonite slury
Was well gravel packed? ☐ Yes ☒ No Size of gravel:
Gravel placed from ft. to ft.

## (11) LOCATION OF WELL:
County Marion Driller's well number
NW ¼ SE ¼ Section 33 T. 4S R. 1W W.M.
Bearing and distance from section or subdivision corner

## (12) WELL LOG:
Diameter of well below casing
Depth drilled 263 ft. Depth of completed well 260 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 |
|---|---|---|---|
| brown sandy clay | 0 | 9 | |
| fine brown sandy silt | 9 | 15 | |
| grey-brown sandy silt | 15 | 40 | |
| grey-brown fine sand & water | 40 | 45 | 19 |
| grey-brown clay silt | 45 | 83 | |
| gray sandy clay | 83 | 101 | |
| cemented medium fine sand & gravel | 101 | 103 | |
| Med. fine sand & water with bad oder | 103 | 115 | 32 |
| 2 in coarse sand, 2in. rocky clay,sand & gravel | 115 | 131 | 32 |
| grey-brown rocky clay | 131 | 138½ | |
| med. grey-green sand & water | 138½ | 149½ | 41 |
| gravel,sandy clay binder | 149½ | 152 | |
| fine grey sandy silt | 152 | 158 | |
| fine grey sandy clay | 158 | 173 | |
| 4 to 6 in. layers of fine grey sand & fine grey sandy sandy silt | 173 | 179 | |

Work started 8-29-67 19 Completed 11-[illegible]4 19 67
Date well drilling machine moved off of well 11-[illegible]6 19 67

**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] Martin Zent (Drilling Machine Operator) Date 11-[illegible]7 19 67
Drilling Machine Operator's License No. 213

**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 George Zent & Sons (Person, firm or corporation) (Type or print)
Address 4305 N.E. 44th St. Vancouver, Wash.
[Signed] George Zent (Water Well Contractor)
Contractor's License No. 228 Date 11-[illegible]7, 19 67

(USE ADDITIONAL SHEETS IF NECESSARY)

4/1w-33 K
Marion

CITY OF HUBBARD WELL
11-14-67

Screen , Johnson 10 in pipe size

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| dia. | 10 | slot | size | 18 | set | from | 139 | ft. | to | 149 | ft. |
| " | 10 | " | " | 10 | " | " | 180 | " | " | 182 | " |
| " | 10 | " | " | 15 | " | " | 182 | " | " | 190 | " |
| " | 10 | " | " | 12 | " | " | 250 | " | " | 253 | " |
| " | 10 | " | " | 25 | " | " | 253 | " | " | 260 | " |

FORMATIONS CONTINUED

| | from | to | SWL |
|---|---|---|---|
| fine to med. grey sand & water | 179 | 194 | 35 |
| grey-green shale | 194 | 205 | |
| rocky clay | 205 | 210 | |
| gravel with sandy clay binder | 210 | 215 | |
| Med sand 3/4 gravel with some 4 to 5 in seams of sandy clay binder | 215 | 229 | 50 |
| gravel with grey sandy clay binder | 229 | 249 | |
| fine grey sand & water | 249 | 250 | 50 |
| med. to coarse grey sand & water mixed with some 2 in. minus gravel | 250 | 260 | 50 |
| sandy clay, 4 in. grey-brown sandstone at 260 | 260 | 263 | |

APR 27 1989

MAR1 909

7S/1W/33dd

STATE OF OREGON

# WATER WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DE
SALEM, OREGON

(START CARD) # 7010

**(1) OWNER:** Well Number:
Name Bronec Brothers
Address 11984 Broadacres Rd.NE
City Hubbard State OR Zip 97032

**(2) TYPE OF WORK:**
☒ New Well ☐ Deepen ☐ Recondition ☐ Abandon

**(3) DRILL METHOD**
☐ Rotary Air ☐ Rotary Mud ☒ Cable
☐ Other

**(4) PROPOSED USE:**
☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Other

**(5) BORE HOLE CONSTRUCTION:**
Special Construction approval Yes ☐ No ☒ Depth of Completed Well 280 ft.
Explosives used Yes ☐ No ☒ Type Amount

| HOLE Diameter | From | To | SEAL Material | From | To | Amount sacks or pounds |
|---|---|---|---|---|---|---|
| 16" | 0 | 20 | Bentonite | 0 | 20 | 138sacks |
| 12" | 20 | 280 | | | | |
| | | | | | | |
| | | | | | | |

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Granular bentonite, OAR 690-210-340
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: | 12" | +2' | 249 | .250 | ☒ | ☐ | ☒ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| Liner: | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |

Final location of shoe(s) 249'

**(7) PERFORATIONS/SCREENS:**
☐ Perforations Method
☒ Screens Type telescoping Material stainless

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|---|---|---|---|---|---|---|---|
| 244 | 251½ | | | 10" | pipe | ☐ | ☐ |
| 251½ | 270 | 130 | | 10" | screen | ☐ | ☐ |
| 270 | 280½ | | | 10" | pipe | ☐ | ☐ |
| | | | | | | ☐ | ☐ |
| 280½ | Bail | & bottom | plate | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |

**(8) WELL TESTS: Minimum testing time is 1 hour**
☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| 630 | 124' | | 5½ hr. |
| 500 | 105' | | 6½ hrs. |

Temperature of water 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 Marion Latitude Longitude
Township 4S N or S, Range 1W E or W, WM.
Section 33 NW ¼ SE ¼
Tax Lot Lot Block Subdivision
Street Address of Well (or nearest address) 11984 Broadacres Rd. Hubbard

**(10) STATIC WATER LEVEL:**
24 ft. below land surface. Date 4/20/89
Artesian pressure lb. per square inch. Date

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

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| 251 | 271 | 630gpm | 24' |
| | | | |
| | | | |

**(12) WELL LOG:** Ground elevation

| Material | From | To | SWL |
|---|---|---|---|
| Clay brown | 0 | 36 | |
| Clay grey | 36 | 69 | |
| Sand black | 69 | 73 | |
| Clay grey | 73 | 88 | |
| Sand, silt | 88 | 112 | |
| Sand black | 112 | 117 | |
| Clay sandy grey | 117 | 122 | |
| Clay grey | 122 | 132 | |
| Sand black | 132 | 146 | |
| Clay grey sandy | 146 | 152 | |
| Clay sticky grey | 152 | 172 | |
| Clay brown | 172 | 176 | |
| Clay blue | 176 | 197 | |
| Clay sand grey | 197 | 209 | |
| Clay sticky grey | 209 | 216 | |
| Clay sandy grey | 216 | 222 | |
| Clay sticky grey | 222 | 228 | |
| Clay sandy | 228 | 232 | |
| Gravel clay | 232 | 233 | |
| Gravel sand | 233 | 234 | |
| Sand black | 234 | 235 | |
| Sand & gravel | 235 | 242 | |
| Continued - see Pg.2 | | | |

Date started 12/30/88 Completed 4/20/89

**(unbonded) Water Well Constructor Certification:**
I certify that the work I performed on the construction, alteration, o abandonment of this well is in compliance with Oregon well constructio standards. Materials used and information reported above are true to my bes knowledge and belief.

WWC Number
Signed Date

**(bonded) Water Well Constructor Certification:**
I accept responsibility for the construction, alteration, or abandonmen work performed on this well during the construction dates reported above. a work performed during this time is in compliance with Oregon we construction standards. This report is true to the best of my knowledge an belief.

WWC Number 783
Signed Duane Grossen Date 4/25/89

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STATE OF OREGON

# WATER WELL REPORT

(as required by ORS 537.765)

MAR 1909

APR 27 1999

WATER RESOURCES DEPT.
SALEM, OREGON

Page

4S/1W/33

(START CARD) # 7010

## (1) OWNER:

Well Number:

Name Bronec Brothers

Address 11984 Broadacres Rd

City Hubbard State OR Zip 97032

## (2) TYPE OF WORK:

☐ New Well ☐ Deepen ☐ Recondition ☐ Abandon

## (3) DRILL METHOD

☐ Rotary Air ☐ Rotary Mud ☐ Cable

☐ Other

## (4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation

☐ Thermal ☐ Injection ☐ Other

## (5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes ☐ No ☐ Depth of Completed Well ft.

Explosives used Yes ☐ No ☐ Type Amount

| HOLE Diameter | From | To | SEAL Material | From | To | Amount sacks or pounds |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |

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: | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| Liner: | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |

Final location of shoe(s)

## (7) PERFORATIONS/SCREENS:

☐ Perforations Method

☐ Screens Type Material

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|---|---|---|---|---|---|---|---|
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| | | | 1 hr. |
| | | | |
| | | | |

Temperature of water 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 Marion Latitude ' " Longitude ' "

Township 4S N or S, Range 1W E or W, WM.

Section 33 NW ¼ SE ¼

Tax Lot Lot Block Subdivision

Street Address of Well (or nearest address)

## (10) STATIC WATER LEVEL:

ft. below land surface. Date

Artesian pressure lb. per square inch. Date

## (11) WATER BEARING ZONES:

Depth at which water was first found

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

## (12) WELL LOG:

Ground elevation

| Material | From | To | SWL |
|---|---|---|---|
| Continued from pg. 1 | | | |
| Gravel cemented | 242 | 243 | |
| Gravel clay | 243 | 245 | |
| Clay grey | 245 | 249 | |
| Sand gravel clay | 249 | 251 | |
| Gravel sand | 251 | 260 | |
| Gravel sand cemented | 260 | 266 | |
| Gravel sand black | 266 | 271 | |
| Gravel cemented | 271 | 273 | |
| Clay grey | 273 | 281 | |

Date started Completed

**(unbonded) Water Well Constructor Certification:**

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

WWC Number

Signed Date

**(bonded) Water Well Constructor Certification:**

I accept responsibility for the construction, alteration, or abandonme work performed on this well during the construction dates reported above. work performed during this time is in compliance with Oregon w construction standards. This report is true to the best of my knowledge a belief.

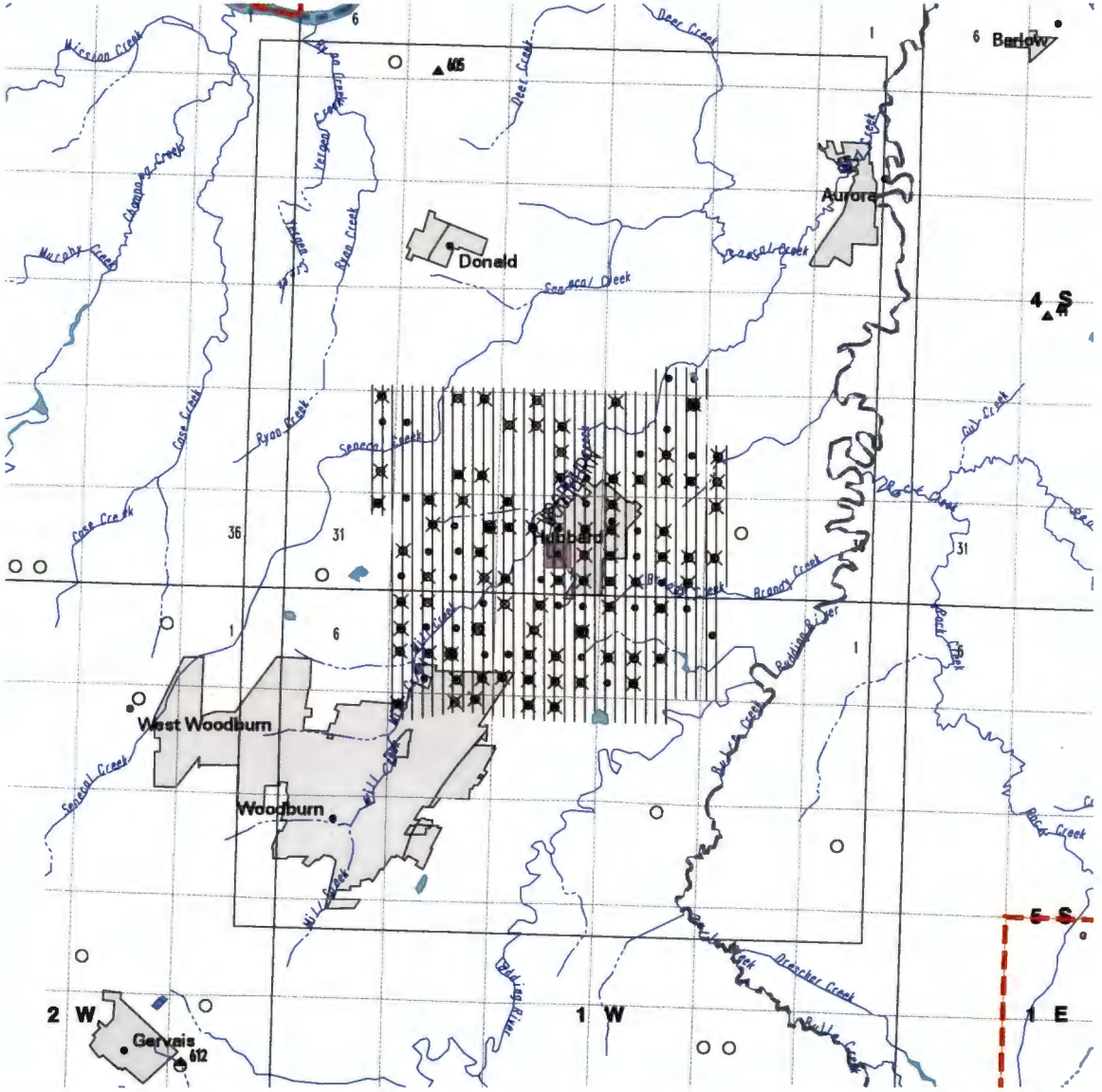
WWC Number 783

Signed Date

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER 9809C 8

# Wells in the vicinity of application G 14954

- Application well(s) in this 1/4-1/4 section
- Well(s) identified in this section from OWRD's well log database within 1 mi. radius of application well(s)
- Well(s) identified in this 1/4-1/4 section from OWRD's well log database within 1 mi. radius of application well(s)
- Permitted well(s) in this 1/4-1/4 section within 1 mi. radius of application well(s)
- Conditioned, permitted well(s) in this 1/4-1/4 section within 5 mi. radius of application well(s)
- OWRD Observation well and well-id within 5 mi. radius of application well(s)
- Critical GW Area
- Regulated GW Area




WELLS WITHIN 1 MILE OF G 14954

| | |
|---|---|
| DO | 176 |
| DS | 6 |
| ID | 40 |
| IL | 2 |
| IM | 2 |
| IR | 126 |
| MO | 18 |
| MU | 6 |

PERMITTED WELLS WITHIN 1 MILE OF APPLICATION G 14954

| $RECNO | APPLICATION | | PERMIT | | LOC-QQ | | USE | RATE | DIV-UNITS |
|---|---|---|---|---|---|---|---|---|---|
| 1 | GR | 3863 | GR | 3516 | 4.00S | 1.00W30NENE | IR | 40.0000 | G |
| 2 | G | 13828 | G | 12554 | 4.00S | 1.00W29NWNE | IR | 0.3700 | C |
| 3 | GR | 1352 | GR | 1308 | 4.00S | 1.00W29NENE | IR | 40.0000 | G |
| 4 | G | 12473 | G | 11851 | 4.00S | 1.00W28NENW | IR | 1.1300 | C |
| 4 | G | 12473 | G | 12113 | 4.00S | 1.00W28NENW | IR | 1.1130 | C |
| 5 | G | 3769 | G | 3555 | 4.00S | 1.00W27NWNW | IR | 0.8900 | C |
| 5 | G | 9233 | G | 8563 | 4.00S | 1.00W27NWNW | IR | 0.3100 | C |
| 6 | G | 13144 | G | 12013 | 4.00S | 1.00W27NENE | IR | 0.3150 | C |
| 7 | G | 4460 | G | 4203 | 4.00S | 1.00W28SWNW | IR | 1.0500 | C |
| 7 | G | 12473 | G | 11851 | 4.00S | 1.00W28SWNW | IR | 1.0900 | C |
| 7 | G | 12473 | G | 12113 | 4.00S | 1.00W28SWNW | IR | 1.0900 | C |
| 8 | G | 12473 | G | 11851 | 4.00S | 1.00W28SENW | IR | 1.0900 | C |
| 8 | G | 12473 | G | 12113 | 4.00S | 1.00W28SENW | IR | 1.0900 | C |
| 9 | G | 9233 | G | 8563 | 4.00S | 1.00W28SWNE | IR | 1.7800 | C |
| 10 | G | 13887 | G | 12517 | 4.00S | 1.00W28NWSE | AG | 0.3750 | C |
| 10 | G | 13887 | G | 12517 | 4.00S | 1.00W28NWSE | IR | 0.2120 | C |
| 11 | GR | 33 | GR | 79 | 4.00S | 1.00W27NWSE | ID | 300.0000 | G |
| 12 | G | 6356 | G | 5956 | 4.00S | 1.00W26NWSW | IR | 0.2500 | C |
| 12 | G | 6406 | G | 5992 | 4.00S | 1.00W26NWSW | IR | 0.9800 | C |
| 13 | G | 12423 | G | 12536 | 4.00S | 1.00W30SESE | IR | 0.1800 | C |
| 13 | G | 12423 | G | 12536 | 4.00S | 1.00W30SESE | IR | 1.1100 | C |
| 14 | G | 5806 | G | 5567 | 4.00S | 1.00W29SWSE | IR | 0.2400 | C |
| 14 | G | 5806 | G | 5567 | 4.00S | 1.00W29SWSE | IR | 0.9000 | C |
| 14 | G | 12275 | G | 11355 | 4.00S | 1.00W29SWSE | IR | 0.2700 | C |
| 15 | G | 3407 | G | 3196 | 4.00S | 1.00W29SESE | IR | 1.5200 | C |
| 15 | G | 8237 | G | 7574 | 4.00S | 1.00W29SESE | IR | 0.1300 | C |
| 16 | G | 12100 | G | 11386 | 4.00S | 1.00W28SWSE | IR | 0.2400 | C |
| 17 | G | 5511 | G | 4925 | 4.00S | 1.00W27SWSW | IR | 0.6700 | C |
| 18 | GR | 3694 | GR | 3384 | 4.00S | 1.00W27SESW | IR | 35.0000 | G |
| 19 | G | 1626 | G | 1494 | 4.00S | 1.00W27SWSE | IR | 0.2200 | C |
| 19 | G | 3022 | G | 2811 | 4.00S | 1.00W27SWSE | IR | 0.1000 | C |
| 19 | G | 3022 | G | 2811 | 4.00S | 1.00W27SWSE | IR | 0.1800 | C |
| 20 | G | 9962 | G | 9047 | 4.00S | 1.00W27SESE | IR | 0.0900 | C |
| 21 | G | 8775 | G | 8128 | 4.00S | 1.00W26SWSW | IR | 0.9000 | C |
| 22 | G | 565 | G | 460 | 4.00S | 1.00W31NENE | IR | 0.2400 | C |
| 22 | G | 565 | G | 460 | 4.00S | 1.00W31NENE | IR | 0.3000 | C |
| 22 | G | 12423 | G | 12536 | 4.00S | 1.00W31NENE | IR | 0.1800 | C |
| 22 | G | 12423 | G | 12536 | 4.00S | 1.00W31NENE | IR | 1.1100 | C |
| 23 | G | 12275 | G | 11355 | 4.00S | 1.00W32NENW | IR | 0.2700 | C |
| 23 | G | 13872 | G | 12409 | 4.00S | 1.00W32NENW | IR | 0.5900 | C |
| 24 | G | 9006 | G | 8387 | 4.00S | 1.00W32NWNE | IS | 0.1000 | C |
| 24 | G | 12275 | G | 11355 | 4.00S | 1.00W32NWNE | IR | 0.2700 | C |
| 25 | G | 8237 | G | 7574 | 4.00S | 1.00W33NWNW | IS | 1.9000 | C |
| 25 | G | 9005 | G | 8441 | 4.00S | 1.00W33NWNW | IR | 0.4700 | C |
| 26 | GR | 1084 | GR | 1045 | 4.00S | 1.00W34NWNW | IR | 72.0000 | G |
| 27 | GR | 751 | GR | 727 | 4.00S | 1.00W35NWNW | IR | 250.0000 | G |
| 28 | T | 5723 | G | 5568 | 4.00S | 1.00W32SENW | IR | 0.6200 | C |
| 28 | T | 5723 | G | 5568 | 4.00S | 1.00W32SENW | IR | 1.3900 | C |
| 28 | G | 12275 | G | 11355 | 4.00S | 1.00W32SENW | IR | 0.2700 | C |
| 28 | G | 13350 | G | 12099 | 4.00S | 1.00W32SENW | IR | 0.1900 | C |
| 28 | G | 13872 | G | 12409 | 4.00S | 1.00W32SENW | IR | 0.5900 | C |
| 29 | G | 13872 | G | 12409 | 4.00S | 1.00W32SENE | IR | 0.5900 | C |
| 29 | GR | 100 | GR | 131 | 4.00S | 1.00W32SENE | IR | 175.0000 | G |
| 30 | GR | 19 | GR | 16 | 4.00S | 1.00W33SWNW | IR | 490.0000 | G |
| 31 | GR | 19 | GR | 16 | 4.00S | 1.00W33SENW | IR | 500.0000 | G |
| 32 | T | 6320 | CG | 5809 | 4.00S | 1.00W33SENE | MU | 1.1000 | C |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 32 | G | 11998 | G | 10965 | 4.00S | 1.00W | 33SENE | MU | 1.5600 C |
| 33 | T | 6320 | CG | 5809 | 4.00S | 1.00W | 34SWNW | MU | 1.1000 C |
| 33 | G | 11998 | G | 10965 | 4.00S | 1.00W | 34SWNW | MU | 1.5600 C |
| 34 | G | 3147 | G | 2964 | 4.00S | 1.00W | 34SWNE | IR | 0.9400 C |
| 35 | G | 6754 | G | 6275 | 4.00S | 1.00W | 32NWSW | IR | 1.2500 C |
| 36 | G | 140 | G | 41 | 4.00S | 1.00W | 32NESE | IR | 0.1900 C |
| 37 | T | 6320 | CG | 5809 | 4.00S | 1.00W | 33NESE | MU | 1.1000 C |
| 37 | G | 6913 | G | 5809 | 4.00S | 1.00W | 33NESE | MU | 1.1000 C |
| 37 | G | 6165 | G | 5848 | 4.00S | 1.00W | 33NESE | IR | 0.0600 C |
| 37 | G | 11998 | G | 10965 | 4.00S | 1.00W | 33NESE | MU | 1.5600 C |
| 38 | G | 4975 | G | 4693 | 4.00S | 1.00W | 34NWSW | DO | 0.0500 C |
| 38 | G | 5916 | G | 7722 | 4.00S | 1.00W | 34NWSW | DO | 0.0100 C |
| 38 | GR | 1843 | GR | 1788 | 4.00S | 1.00W | 34NWSW | IR | 75.0000 G |
| 38 | GR | 3859 | GR | 3515 | 4.00S | 1.00W | 34NWSW | IR | 30.0000 G |
| 38 | GR | 2847 | GR | 3958 | 4.00S | 1.00W | 34NWSW | IR | 40.0000 G |
| 39 | GR | 2572 | GR | 2431 | 4.00S | 1.00W | 34NWSE | IR | 100.0000 G |
| 40 | GR | 3995 | GR | 3602 | 4.00S | 1.00W | 34NESE | IR | 25.0000 G |
| 41 | G | 3977 | G | 3734 | 4.00S | 1.00W | 35NWSW | IR | 0.1700 C |
| 42 | G | 13505 | G | 12307 | 4.00S | 1.00W | 32SESW | AG | 1.1100 C |
| 43 | G | 9014 | G | 8389 | 4.00S | 1.00W | 32SESE | IR | 0.3800 C |
| 44 | GR | 19 | GR | 16 | 4.00S | 1.00W | 33SWSW | IR | 400.0000 G |
| 45 | G | 3957 | G | 3352 | 4.00S | 1.00W | 33SWSE | IR | 0.1000 C |
| 46 | G | 594 | G | 500 | 4.00S | 1.00W | 33SESE | IR | 0.2100 C |
| 47 | G | 1874 | G | 1717 | 4.00S | 1.00W | 34SWSW | IR | 0.1100 C |
| 48 | G | 4435 | G | 4178 | 4.00S | 1.00W | 34SESW | IR | 0.0300 C |
| 49 | G | 13035 | G | 11833 | 4.00S | 1.00W | 34SESE | IR | 0.1300 C |
| 49 | GR | 1997 | GR | 1927 | 4.00S | 1.00W | 34SESE | IR | 120.0000 G |
| 50 | G | 8707 | G | 8079 | 5.00S | 1.00W | 5NWNW | IR | 0.1100 C |
| 51 | G | 9437 | G | 8669 | 5.00S | 1.00W | 5NENW | IR | 0.2800 C |
| 52 | G | 3081 | G | 2878 | 5.00S | 1.00W | 4NWNW | IR | 1.2100 C |
| 53 | G | 5935 | G | 5640 | 5.00S | 1.00W | 4NENW | IR | 0.5600 C |
| 53 | G | 7952 | G | 7347 | 5.00S | 1.00W | 4NENW | IR | 0.0700 C |
| 54 | GR | 2554 | GR | 2413 | 5.00S | 1.00W | 3NWNW | IR | 140.0000 G |
| 55 | GR | 3698 | GR | 3387 | 5.00S | 1.00W | 3NWNE | IR | 30.0000 G |
| 56 | G | 874 | G | 825 | 5.00S | 1.00W | 5SWNW | IR | 0.1000 C |
| 56 | G | 874 | G | 825 | 5.00S | 1.00W | 5SWNW | IR | 0.1400 C |
| 56 | G | 7456 | G | 6948 | 5.00S | 1.00W | 5SWNW | IR | 0.0600 C |
| 56 | G | 7456 | G | 6948 | 5.00S | 1.00W | 5SWNW | IS | 0.0600 C |
| 56 | GR | 418 | GR | 399 | 5.00S | 1.00W | 5SWNW | IR | 60.0000 G |
| 56 | GR | 964 | GR | 935 | 5.00S | 1.00W | 5SWNW | IR | 25.0000 G |
| 57 | G | 12203 | G | 11643 | 5.00S | 1.00W | 5SENE | IR | 0.2700 C |
| 58 | G | 11781 | G | 10882 | 5.00S | 1.00W | 4SENW | IR | 0.6900 C |
| 59 | G | 14072 | G | 12874 | 5.00S | 1.00W | 4SENE | IR | 0.1100 C |
| 60 | G | 493 | G | 378 | 5.00S | 1.00W | 5NWSW | IR | 0.0550 C |
| 60 | G | 7457 | G | 6949 | 5.00S | 1.00W | 5NWSW | IR | 0.0800 C |
| 61 | GR | 867 | GR | 840 | 5.00S | 1.00W | 5NESW | IR | 300.0000 G |
| 62 | G | 12813 | G | 11678 | 5.00S | 1.00W | 5NWSE | IR | 84.2000 G |
| 63 | G | 7269 | G | 6708 | 5.00S | 1.00W | 4NESW | IS | 0.6600 C |
| 64 | G | 2856 | G | 2657 | 5.00S | 1.00W | 4NWSE | IR | 0.2500 C |
| 64 | G | 7738 | G | 7723 | 5.00S | 1.00W | 4NWSE | IR | 0.1900 C |
| 65 | GR | 62 | GR | 81 | 5.00S | 1.00W | 3NWSW | IR | 200.0000 G |
| 66 | G | 1542 | G | 1411 | 5.00S | 1.00W | 3NESW | IR | 0.3600 C |
| 67 | G | 1566 | G | 1448 | 5.00S | 1.00W | 3NWSE | IR | 0.0100 C |
| 68 | GR | 2907 | GR | 2736 | 5.00S | 1.00W | 4SWSW | IR | 40.0000 G |
| 69 | GR | 623 | GR | 591 | 5.00S | 1.00W | 4SESW | ID | 350.0000 G |
| 70 | GR | 259 | GR | 240 | 5.00S | 1.00W | 5SESE | ID | 100.0000 G |
| 71 | GR | 1123 | GR | 1083 | 5.00S | 1.00W | 5SWSE | ID | 50.0000 G |
| 72 | G | 12286 | G | 11449 | 5.00S | 1.00W | 4SWSE | IR | 0.1980 C |
| 72 | G | 13310 | G | 11924 | 5.00S | 1.00W | 4SWSE | IR | 0.1300 C |
| 72 | GR | 2086 | GR | 2004 | 5.00S | 1.00W | 4SWSE | IR | 60.0000 G |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 73 | GR | 4215 | GR | 3760 | 5.00S 1.00W 4SESE | IR | 250.0000 | G |
| 74 | G | 1094 | G | 947 | 5.00S 1.00W 3SESW | IR | 0.0700 | C |
| 75 | GR | 1535 | GR | 1478 | 5.00S 1.00W 8NENE | IR | 320.0000 | G |
| 76 | G | 11240 | G | 10398 | 5.00S 1.00W 8NWNE | IR | 0.0200 | C |
| 77 | GR | 1346 | GR | 1302 | 5.00S 1.00W 8NWNW | IR | 170.0000 | G |
| 78 | GR | 4212 | GR | 3837 | 5.00S 1.00W 9NENW | ID | 650.0000 | G |
| 79 | GR | 4213 | GR | 3838 | 5.00S 1.00W 9NWNE | IR | 385.0000 | G |

**********

CONDITIONED WELLS WITHIN 5 MILES OF APPLICATION G 14954

| $RECNO | APPLICATION | | PERMIT | | LOC-QQ | CONDITION-CODE |
|---|---|---|---|---|---|---|
| 1 | G | 13330 | G | 11721 | 4.00S 2.00W34SESW | 4GG |
| 1 | G | 13330 | G | 11721 | 4.00S 2.00W34SESW | 4GG |
| 1 | GR | 73 | GR | 62 | 4.00S 2.00W34SESW | |
| 2 | G | 13330 | G | 11721 | 4.00S 2.00W34SWSE | 4GG |
| 2 | G | 13330 | G | 11721 | 4.00S 2.00W34SWSE | 4GG |
| 3 | G | 13837 | G | 12616 | 4.00S 1.00W 6SESE | 7BG |
| 3 | G | 13837 | G | 12616 | 4.00S 1.00W 6SESE | 7BR |
| 3 | G | 13837 | G | 12616 | 4.00S 1.00W 6SESE | 7IG |
| 3 | G | 13837 | G | 12616 | 4.00S 1.00W 6SESE | 7IR |
| 4 | G | 13144 | G | 12013 | 4.00S 1.00W27NENE | 4LG |
| 4 | G | 13144 | G | 12013 | 4.00S 1.00W27NENE | 4LW |
| 5 | G | 13872 | G | 12409 | 4.00S 1.00W32SENE | 7BG |
| 5 | G | 13872 | G | 12409 | 4.00S 1.00W32SENE | 7BR |
| 5 | G | 13872 | G | 12409 | 4.00S 1.00W32SENE | 7CG |
| 5 | G | 13872 | G | 12409 | 4.00S 1.00W32SENE | 7CR |
| 5 | GR | 100 | GR | 131 | 4.00S 1.00W32SENE | |
| 6 | G | 13893 | G | 12425 | 4.00S 1.00W35SENW | 7BG |
| 6 | G | 13893 | G | 12425 | 4.00S 1.00W35SENW | 7BR |
| 7 | G | 13166 | G | 11757 | 4.00S 1.00W31SESW | 4IG |
| 7 | G | 13166 | G | 11757 | 4.00S 1.00W31SESW | 4IR |
| 8 | G | 13388 | G | 11708 | 5.00S 2.00W 2SENE | 4GG |
| 8 | GR | 2171 | GR | 2080 | 5.00S 2.00W 2SENE | |
| 9 | G | 13083 | G | 11840 | 5.00S 2.00W11NWNE | 4KG |
| 10 | G | 12921 | G | 11618 | 5.00S 2.00W23NWSW | 4GG |
| 11 | G | 11501 | G | 10599 | 5.00S 2.00W25NENW | 3C |
| 11 | G | 11501 | G | 10599 | 5.00S 2.00W25NENW | 3C |
| 12 | G | 12794 | G | 11613 | 5.00S 2.00W25NWSW | 4GG |
| 12 | GR | 2553 | GR | 2412 | 5.00S 2.00W25NWSW | |
| 13 | G | 12203 | G | 11643 | 5.00S 1.00W 5SENE | 3CW |
| 14 | G | 14072 | G | 12874 | 5.00S 1.00W 4SENE | 7BG |
| 14 | G | 14072 | G | 12874 | 5.00S 1.00W 4SENE | 7BR |
| 15 | G | 12813 | G | 11678 | 5.00S 1.00W 5NWSE | 4GG |
| 16 | G | 12799 | G | 11614 | 5.00S 1.00W15NWNE | 4GG |
| 16 | GR | 771 | GR | 746 | 5.00S 1.00W15NWNE | |
| 17 | G | 13661 | G | 12034 | 5.00S 1.00W13SENW | 4KG |
| 17 | G | 13661 | G | 12034 | 5.00S 1.00W13SENW | 4KG |
| 18 | G | 13260 | G | 11705 | 5.00S 1.00W26SWNW | 4IG |
| 19 | G | 13260 | G | 11705 | 5.00S 1.00W26SENW | 4IG |
| 20 | G | 12985 | G | 11958 | 5.00S 1.00E 8NESE | 4K |
| 20 | G | 12985 | G | 11958 | 5.00S 1.00E 8NESE | 4K |

**********

APPLICATION G 14954 FALLS WITHIN THESE QUAD(S)

WOODBURN

**********

The following OWRD Groundwater Management Areas are within the map extent:

| $RECNO | NAME1 | NAME2 | SUB-AREA | STATUS |
|---|---|---|---|---|
| 1 | PARRETT MOUNTAIN | | | LIMI |
| 2 | GLADTIDINGS | | | LIMI |

**********

**Oregon Water Resources Department**
**Water Rights Division**

Water Rights Application
Number G-14954

# Proposed Final Order

*Summary of Recommendation:* The Department recommends that the attached draft permit be issued with conditions.

*Application History*

On March 29, 1999, VICKIE NOGLE, for CITY OF HUBBARD, submitted an application to the Department for the following water use permit:

- Amount of Water: 300.0 GALLONS PER MINUTE (0.668 CFS)
- Use of Water: MUNICIPAL USE
- Source of Water: A WELL IN MILL CREEK BASIN
- Area of Proposed Use: MARION County within SECTION 33, TOWNSHIP 4 SOUTH, RANGE 1 WEST, W.M.

On 7/23/99, the Department mailed the applicant notice of its Initial Review, determining that *"The use of 0.67 CUBIC FOOT PER SECOND (300.0 GALLONS PER MINUTE) from A WELL IN MILL CREEK BASIN for MUNICIPAL USE is allowable year-round."* The applicant did not notify the Department to stop processing the application within 14 days of that date.

On 8/10/99, the Department gave public notice of the application in its weekly notice. The public notice included a request for comments, and information for interested persons about both obtaining future notices and a copy of the proposed final order.

No written comments were received within 30 days.

In reviewing applications, the Department may consider any relevant sources of information, including the following:
- comments by or consultation with another state agency
- any applicable basin program
- any applicable comprehensive plan or zoning ordinance
- the amount of water available
- the rate and duty for the proposed use
- pending senior applications and existing water rights of record

- designations of any critical groundwater areas
- the Scenic Waterway requirements of ORS 390.835
- applicable statutes, administrative rules, and case law
- any general basin-wide standard for flow rate and duty of water allowed
- the need for a flow rate and duty higher than the general standard
- any comments received

*Findings of Fact*

The Willamette Basin Program allows the following uses: MUNICIPAL USE.

A well in Mill Creek Basin is not within or above a State Scenic Waterway.

An assessment of water availability has been completed by the Department's groundwater section. A copy of this assessment is in the file. This assessment determined that water is available for further appropriation year round.

The Department finds that the amount of water requested, 0.668 CFS, is an acceptable rate.

The proposed well is not within a designated critical ground water area.

The Department determined, based upon OAR 690-09, that the proposed groundwater use will, if properly conditioned, adequately protect the surface water from interference.

The Groundwater Section finds, per OAR 390.835(9), there **is NOT** a preponderance of evidence that the proposed use of groundwater will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway in quantities necessary for recreation, fish and wildlife.

*Conclusions of Law*

Under the provisions of ORS 537.621, the Department must presume that a proposed use will ensure the preservation of the public welfare, safety and health if the proposed use is allowed in the applicable basin program established pursuant to ORS 536.300 and 536.340 or given a preference under ORS 536.310(12), if water is available, if the proposed use will not injure other water rights and if the proposed use complies with rules of the Water Resources Commission.

The proposed use requested in this application is allowed in the Willamette Basin Plan.

No preference for this use is granted under the provisions of ORS 536.310(12).

Water is available for the proposed use.

The proposed use will not injure other water rights.

The proposed use complies with other rules of the Water Resources Commission not otherwise described above.

The proposed use complies with the State Agency Agreement for land use.

No proposed flow rate and duty of water higher than the general basin-wide standard is needed.

For these reasons, the required presumption has been established.

Under the provisions of ORS 537.621, once the presumption has been established, it may be overcome by a preponderance of evidence that either:

(a) One or more of the criteria for establishing the presumption are not satisfied; or

(b) The proposed use would not ensure the preservation of the public welfare, safety and health as demonstrated in comments, in a protest . . . or in a finding of the department that shows:

(A) The specific aspect of the public welfare, safety and health under ORS 537.525 that would be impaired or detrimentally affected; and

(B) Specifically how the identified aspect of the public welfare, safety and health under ORS 537.525 would be impaired or be adversely affected.

In this application, all criteria for establishing the presumption have been satisfied, as noted above. The presumption has not been overcome by a preponderance of evidence that the proposed use would impair or be detrimental to the public interest.

The Department therefore concludes that water is available in the amount necessary for the proposed use; the proposed use will not result in injury to existing water rights; and the proposed use would ensure the

preservation of the public welfare, safety and health as described in ORS 537.525.

Recommendation

The Department recommends that the attached draft permit be issued with conditions.

DATED March 7, 2000

Dwight French
Water Rights Section Manager

*If you have any questions, please check the information box on the last page for the appropriate names and phone numbers.*

*Protest Rights and Standing*

Under the provisions of 537.621(7), you have the right to protest this proposed final order. Your protest must be in writing, and must include the following:

- Your name, address, and telephone number;
- A description of your interest in the proposed final order, and, if you claim to represent the public interest, a precise statement of the public interest represented;
- A detailed description of how the action proposed in this proposed final order would impair or be detrimental to your interest;
- A detailed description of how the proposed final order is in error or deficient, and how to correct the alleged error or deficiency;
- Any citation of legal authority to support your protest, if known; and
- If you are not the applicant, the $200 protest fee required by ORS 536.050 and proof of service of the protest upon the applicant.
- If you are the applicant, a statement of whether or not you are requesting a contested case hearing. If you do not request a hearing, the Department will presume that you do not wish to contest the findings of the proposed final order.
- <u>If you do not protest this Proposed Final Order and if no substantive changes are made in the final order, you will not have an opportunity for judicial review, protest or appeal of the final order when it is issued.</u>

Requests for Standing

Under the provisions of 537.621(6), persons other than the applicant who support a proposed final order may request standing for purposes of participating in any contested case proceeding on the proposed final order or for judicial review of a final order. A request for standing shall be in writing, include a statement that the requester supports the proposed final order, and a statement of how the requester would be harmed if the proposed final order is modified. The fee required at the time of submitting this request is $50.00. If a hearing is scheduled, an additional fee of $150.00 must be submitted along with a request for intervention. Forms to request standing are available from the Department.

Your protest or request for standing must be received in the Water Resources Department no later than **April 21, 2000.**

After the protest period has ended, the Director will either issue a final order or schedule a contested case hearing. The contested case hearing will be scheduled only if a protest has been submitted and if

- upon review of the issues, the director finds that there are significant disputes related to the proposed use of water, or
- the applicant requests a contested case hearing within 30 days after the close of the protest period.

*This document was prepared by* Russell W. Klassen. *If you have any questions about any of the statements contained in this document I am most likely the best person to answer your questions. You can reach me toll free within Oregon at 1-800-624-3199 extension* 266. *Outside of Oregon you can dial 1-503-378-8455.*

*If you have questions about how to file a protest or if you have previously filed a protest and want to know the status, please contact Adam Sussman. His extension number is 262.*

*If you have other questions about the Department or any of its programs please contact our Water Rights Information Group at extension 499*

*Address all other correspondence to:*

Water Rights Section, Oregon Water Resources Department, 158 12th ST NE SALEM, OR 97310
Fax: (503)378-2496 .

RWK- WEEK 241

STATE OF OREGON

COUNTY OF MARION

DRAFT PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS DRAFT PERMIT IS HEREBY ISSUED TO

CITY OF HUBBARD
VICKIE NOGLE
3720 2ND STREET (503)981-9633
HUBBARD, OREGON 97032

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-14954

SOURCE OF WATER: A WELL IN MILL CREEK BASIN

PURPOSE OR USE: MUNICIPAL USE

MAXIMUM RATE: 0.668 CUBIC FOOT PER SECOND

PERIOD OF USE: YEAR ROUND

DATE OF PRIORITY: MARCH 29, 1999

POINT OF DIVERSION LOCATION: NW 1/4 SE 1/4, SECTION 33, T4S, R1W, W.M.; 1540 FEET NORTH AND 1720 FEET WEST FROM THE SE CORNER SECTION 33

THE PLACE OF USE IS LOCATED AS FOLLOWS:

WITHIN THE SERVICE BOUNDARIES OF THE CITY

Measurement, recording and reporting conditions:

A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order, shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded water use

measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water use information, including the place and nature of use of water under the permit.

B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

The water user shall develop a plan to monitor and report the impact of water use under this permit on water levels within the aquifer that provides water to the permitted well(s). The plan shall be submitted to the Department within one year of the date the permit is issued and shall be subject to the approval of the Department. At a minimum, the plan shall include a program to periodically measure static water levels within the permitted well(s) or an adequate substitute such as water levels in nearby wells. The plan shall also stipulate a reference water level against which any water-level declines will be compared. If a well listed on this permit (or replacement well) displays a total static water-level decline of 25 or more feet over any period of years, as compared to the reference level, then the water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s). Such action shall be taken until the water level recovers to above the 25-foot decline level or until the Department determines, based on the water user's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

Within 3 years of permit issuance, the permittee shall submit a Water Management and Conservation Plan consistent with OAR Chapter 690,

Division 86. The Director may approve an extension of this timeline to complete the required Water Management Conservation Plan.

The well shall be continuously cased and continuously sealed to a minimum depth of 210 feet below land surface.

## STANDARD CONDITIONS

The wells shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

Actual construction of the well shall begin within one year from issuance of the final order approving the use. Complete application of the water to the use shall be made on or before October 1, 2004. Within one year after complete application of water to the proposed use, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner (CWRE).

Issued _____, 199_

DRAFT - THIS IS NOT A PERMIT

_____

Martha O. Pagel, Director
Water Resources Department

**Public Notice Requirement:**

ORS 537.130 (3) requires notice to all affected landowners. ORS 537.130 (4) allows this notice to be made through publication for three consecutive weeks in a local newspaper if there are more than 25 landowners involved. The following language should be used:

NOTICE OF WATER USE REQUEST

Regarding application: G-14954

The Oregon Water Resources Department is evaluating the request by City of Hubbard to use 0.67 cubic feet per second of the waters of a well in the Mill Creek Basin for municipal purposes. The proposed source of water is located within Marion County, Township 4S, Range 1W. This process is to determine if the request is in compliance with state water laws and regulations. Public participation and comment is encouraged.

ORS 537.130 (3) requires notice to all affected landowners. ORS 537.130 (4) allows this notice to be made through publication for three consecutive weeks in a local newspaper if there are more than 25 landowners involved.

For further information contact the Water Resources Department Water Rights Information Group at 1 (800) 624-3199 ext. 499. Written information requests may be addressed to the Oregon Water Resources Department at 158 12th Street NE, Salem, Oregon 97310-0210.

See attached

**If A Permit Is Issued It Will Likely Include The Following Conditions:**

1. Measurement, recording and reporting conditions:

   A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order.

   B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

   C. The Director may require the permittee to keep and maintain a record of the amount (volume) of water used and may require the permittee to report water use on a periodic schedule as established by the Director. In addition, the Director may require the permittee to report general water use information, the periods of water use and the place and nature of use of water under the permit. The Director may provide an opportunity for the permittee to submit alternative reporting procedures for review and approval.

# Affidavit Of Publication

**NOTICE OF WATER USE REQUEST**

Regarding application: G-14954

The Oregon Water Resources Department is evaluating the request by City of Hubbard to use 0.67 cubic feet per second of the waters of a well in the Mill Creek Basin for municipal purposes. The proposed source of water is located within Marion County, Township 4S, Range 1W. This process is to determine if the request is in compliance with state water laws and regulations. Public participation and comment is encouraged.

ORS 537.130 (3) requires notice to all affected landowners. ORS 537.130 (4) allows this notice to be made through publication for three consecutive weeks in a local newspaper if there are more than 25 landowners involved.

For further information contact the Water Resources Department Water Rights Information Group at 1 (800) 624-3199 ext. 499. Written information requests may be addressed to the Oregon Water Resources Department at 158 12th Street NE, Salem, Oregon 97310-0210.

Published: October 20, October 27, and November 3, 1999.

STATE OF OREGON, } ss.
County of Marion }

I, Lesi Reitan, being first duly sworn, depose and say I am the PUBLISHER of the Woodburn Independent, a newspaper of general circulation as defined by ORS 193.010 and 193.020, printed and published at Woodburn in the aforesaid county and state, that the Notice of Water Use Request, a printed copy of which is hereto annexed, was published in the entire issue of said newspaper for three week/weeks in the following issues: October 20, October 27, and November 3, 1999

Les Reitan

Subscribed and sworn to before me this 3rd day of November, 1999

Marie C. Bernard
Notary Public for Oregon

(My Commission Expires 9-12-03)

OFFICIAL SEAL
MARIE C BERNARD
NOTARY PUBLIC-OREGON
COMMISSION NO. 325853
MY COMMISSION EXPIRES SEPT 12, 2003

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CITY OF HUBBARD
ATTN: VICKIE NOGLE
3720 2ND ST
HUBBARD OR 97032

S-14954 WR's

2. Article Number *(Copy from service label)*
P 56537

*COMPLETE THIS SECTION ON DELIVERY*

A. Received by *(Please Print Clearly)*

B. Date of Delivery
11/3/00

C. Signature
X
☐ Agent
☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

WATER RESOURCES DEPT
158 12TH ST NE
SALEM OR 97310

Oregon
John A. Kitzhaber, M.D., Governor

Water Resources Department
Commerce Building
158 12th Street NE
Salem, OR 97310-0210
(503) 378-3739
FAX (503) 378-8130

**CERTIFIED MAIL**
**Return Receipt Requested**

January 12, 2000

Attn: Vickie Nogle
City of Hubbard
3720 2nd Street
Hubbard, Oregon 97032

RE: Application File G-14954

Dear Vickie:

On **July 23, 1999**, an Initial Review was sent and on **October 6, 1999**, and **November 18, 1999**, certified letters were sent from the Department which requested evidence of publication of the proposed use in a local newspaper. The publication is necessary to complete your application for water use. The following information still must be received:

- An affidavit of publication from a newspaper having general circulation in the area of proposed diversion and use, or sufficient evidence that the publication is being made. ***The notice must run in the newspaper for three consecutive weeks.*** ( I have copied and attached the portion of the Initial Review that contained a template for the required publication.)

Please submit this item by **January 24, 2000**. If we do not receive the item requested above by this date your application will be rejected. If your application is rejected, any fees submitted in excess of the examination fee will be refunded; however, the examination fee is non-refundable and will not be returned. In addition, the priority date associated with your application will be lost.

*If you need to request additional time to submit the affidavit of publication or sufficient evidence that publication is being made, the written request must be received in the Salem office of the Department by the deadline above. The Department will evaluate timely requests and determine whether or not the request may be granted.*

Should you have any questions regarding the required materials listed above, or if you would like to request an extension of time, please call me at 1-800-624-3199, ext. 266.

Sincerely,

Russell W. Klassen
Senior Water Rights Specialist

enclosure: a copy of a portion of the Initial Review
cc: Watermaster District 16
BST Inc.
4025 Ridge Lane
West Linn, OR 97068-2917

**SENDER:**

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
- ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Attn: Vickie Nogle
City of Hubbard
3720 2nd Street
Hubbard, OR 97032

4a. Article Number P56 441

4b. Service Type

- ☐ Registered
- ☒ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ Return Receipt for Merchandise
- ☐ COD

6-14954

7. Date of Delivery 11/22/93

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)* Vickie Hallock

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

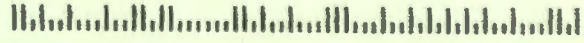
UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

WATER RESOURCES DEPARTMENT
158 12th ST NE
SALEM OR 97310

09



Oregon
John A. Kitzhaber, M.D., Governor

Water Resources Department
Commerce Building
158 12th Street NE
Salem, OR 97310-0210
(503) 378-3739
FAX (503) 378-8130

**CERTIFIED MAIL**
**Return Receipt Requested**

November 18, 1999

Attn: Vickie Nogle
City of Hubbard
3720 2nd Street
Hubbard, Oregon 97032

RE: Application File G-14954

Dear Vickie:

On **July 23, 1999**, an Initial Review was sent and on **October 6, 1999**, a certified letter was sent from the Department which requested evidence of publication of the proposed use in a local newspaper. The publication is necessary to complete your application for water use. The following information still must be received:

- An affidavit of publication from a newspaper having general circulation in the area of proposed diversion and use. ***The notice must run in the newspaper for three consecutive weeks.*** ( I have copied and attached the portion of the Initial Review that contained a template for the required publication.)

Please submit this item by **December 18, 1999**. If we do not receive the item requested above by this date, we may propose rejection of your application consistent with ORS 537.153. If your application is rejected, any fees submitted in excess of the examination fee will be refunded; however, the examination fee is non-refundable and will not be returned. In addition, the priority date associated with your application will be lost.

Should you have any questions regarding the required materials listed above, or if you would like to request an extension of time, please call me at 1-800-624-3199, ext. 266.

Sincerely,

Russell W. Klassen
Senior Water Rights Specialist

enclosure: a copy of a portion of the Initial Review
cc: Watermaster District 16
BST Inc.
4025 Ridge Lane
West Linn, OR 97068-2917

**SENDER:**

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
- ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Attn: Vickie Nogle
City of Hubbard
3720 2nd Street
Hubbard, OR 97032

4a. Article Number P56 386

4b. Service Type

- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery 10-12-99

6-14954

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*

X Thelma D. Gilbert

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

...s your RETURN ADDRESS completed on the reverse side?

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

WATER RESOURCES DEPARTMENT
158 12th ST NE
SALEM OR 97310

Oregon
John A. Kitzhaber, M.D., Governor

Water Resources Department
Commerce Building
158 12th Street NE
Salem, OR 97310-0210
(503) 378-3739
FAX (503) 378-8130

**CERTIFIED MAIL**
**Return Receipt Requested**

October 6, 1999

Attn: Vickie Nogle
City of Hubbard
3720 2nd Street
Hubbard, Oregon 97032

RE: Application File G-14954

Dear Vickie:

On **July 23, 1999**, an Initial Review was sent from the Department which requested evidence of publication of the proposed use in a local newspaper. The publication is necessary to complete your application for water use. The following information still must be received:

- An affidavit of publication from a newspaper having general circulation in the area of proposed diversion and use. ***The notice must run in the newspaper for three consecutive weeks.*** ( I have copied and attached the portion of the Initial Review that contained a template for the required publication.)

Please submit this item by **November 6, 1999**. If we do not receive the item requested above by this date, we may propose rejection of your application consistent with ORS 537.153. If your application is rejected, any fees submitted in excess of the examination fee will be refunded; however, the examination fee is non-refundable and will not be returned. In addition, the priority date associated with your application will be lost.

Should you have any questions regarding your application or the required materials listed above, or to request an extension of time, please call me at 1-800-624-3199, ext. 266.

Sincerely,

Russell W. Klassen
Senior Water Rights Specialist

enclosure: a copy of a portion of the Initial Review
cc: Watermaster District 16
BST Inc.
701 Main Street, Suite 209
Oregon City, OR 97045

STATE OF OREGON
# WATER RESOURCES DEPARTMENT

RECEIPT # 32092

158 12TH ST. N.E.
SALEM, OR 97310-0210
378-8455 / 378-8130 (FAX)

INVOICE # _____

RECEIVED FROM: Westerberg Drilling
BY: _____

| APPLICATION | G-14954 |
|---|---|
| PERMIT | |
| TRANSFER | |

CASH: ☐ CHECK: # ☑ 91-119 OTHER: (IDENTIFY) ☐ _____

TOTAL REC'D $10.00

## 0417 WRD MISC CASH ACCT

| | | | |
|---|---|---|---|
| | ADJUDICATIONS | | $ |
| | PUBLICATIONS / MAPS | | $ |
| _____ | OTHER: (IDENTIFY) | _____ | $ |
| _____ | OTHER: (IDENTIFY) | _____ | $ |

## REDUCTION OF EXPENSE

_____ CASH ACCT. _____ $

_____ PCA AND OBJECT CLASS _____ VOUCHER #

## 0427 WRD OPERATING ACCT

Pd #66111

| | | | |
|---|---|---|---|
| | **MISCELLANEOUS** | | |
| 0407 | COPY & TAPE FEES | | $ |
| 0410 | RESEARCH FEES | | $ |
| 0408 | MISC REVENUE: (IDENTIFY) | PUB/MAL | $10.00 |
| New) TC162 | DEPOSIT LIAB. (IDENTIFY) | | $ |

| | | EXAM FEE | | RECORD FEE |
|---|---|---|---|---|
| | **WATER RIGHTS:** | | | |
| 0201 | SURFACE WATER | $ | 0202 | $ |
| 0203 | GROUND WATER | $ | 0204 | $ |
| 0205 | TRANSFER | $ | 0206 | $ |
| | **WELL CONSTRUCTION** | **EXAM FEE** | | **LICENSE FEE** |
| 0218 | WELL DRILL CONSTRUCTOR | $ | 0219 | $ |
| | LANDOWNER'S PERMIT | | 0220 | $ |

_____ OTHER (IDENTIFY) _____

## 0437 WELL CONST. START FEE

| | | | | |
|---|---|---|---|---|
| 0211 | WELL CONST START FEE | $ | CARD # | |
| 0210 | MONITORING WELLS | $ | CARD # | |

_____ OTHER (IDENTIFY) _____

## 0539 LOTTERY PROCEEDS

| | | |
|---|---|---|
| 1302 | LOTTERY PROCEEDS | $ |

## 0467 HYDRO ACTIVITY

| | | LIC NUMBER | |
|---|---|---|---|
| 0233 | POWER LICENSE FEE (FW/WRD) | | $ |
| 0231 | HYDRO LICENSE FEE (FW/WRD) | | $ |
| _____ | HRDRO APPLICATION | _____ | $ |

RECEIPT # 32092 DATED: 7-16-99 BY: Roger Wright

Distribution-White Copy-Customer, Yellow Copy-Fiscal, Blue Copy-File, Buff Copy-Fiscal

WESTERBERG DRILLING INC
36728 S. Kropf Rd.
Molalla, OR 97038

13 1999

33 USA

WRD
158 12th St. NE
Salem, OR 97310

97310+0700

# OREGON WATER RESOURCES DEPARTMENT

RECEIVED
AUG 16 1999
WATER RESOURCES DEPT
SALEM, OREGON


Commerce Building
158 12th Street NE
Salem OR 97310-0210

## PUBLIC NOTICE COMMENT FORM

**August 10, 1999**

Use the back of this form to offer comments on water use requests or other items in this notice or to order copies of proposed final and final orders. You are welcome to submit comments on a separate sheet, but please be sure to include your name and address and reference the specific request or document that concerns you. Please mail your comments to the address listed above.

**Water Use Request Type & File Number**
(e.g. "Permit Application G-12345" or "Transfer T-1234"):

G-14954

Mail me the Order
(payment enclosed)*

☒

☐

☐

**Your Name, Address, and Phone Number:**

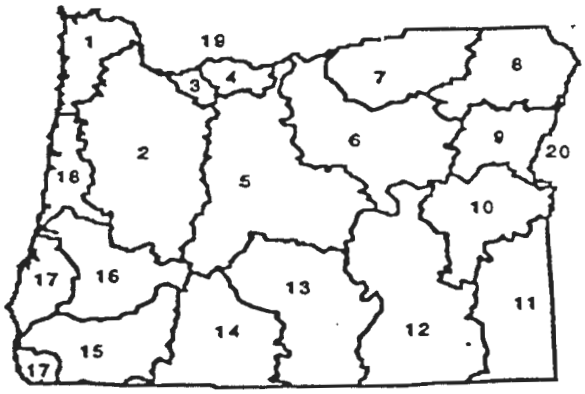
* We are required by law to charge a fee of $10 to mail a copy of a proposed final or final order for a permit application to any interested person. Please include a check made out to the Oregon Water Resources Department in the amount of $10 for each proposed final order you would like mailed to you. This fee entitles you to also receive a copy of the final order, when issued. (Copies of proposed final and final orders are also available for viewing–at no charge–at our Salem office or at the local watermaster office.)

| App# | Basin | Source | Quantity | Use | Cnty/Priority | Pod Vicinity | Name/Address | Stage/Status |
|---|---|---|---|---|---|---|---|---|
| G-14883 | 2 | A WELL>CHAMPOEG CR | 1.8100 C | NU 144.90 | Marion 12/17/1998 | SENW,SECTION 10 T 5S, R2W | BLUE SKY FARM; BUCK, CAM PO BOX 217 WOODBURN,OR 97071 | PFO 2 |
| G-14895 | 2 | A WELL>LITTLE PUDDING R | 300.0000 G | NU | Marion 1/ 4/1999 | NENE,SECTION 31 T 6S, R2W | INTERSTATE ROCK PRODUCTS; 6242 PORTLAND RD NE SALEM,OR 97305 | PFO 3 |
| G-14916 | 2 | A WELL>CLAGGETT CR | 2.2300 C | MU | Marion 1/29/1999 | SESW,SECTION 36 T 6S, R3W | CITY OF KEIZER; KISSLER, 930 CHEMAWA RD NE KEIZER,OR 97307-1000 | PFO 2 |
| G-14942 | 2 | A WELL>SANDY R | 0.5570 C | NU 37.00 | Clackamas 3/ 1/1999 | SWNE,SECTION 13 T 5S, R1W | RYAN J SMITH PO BOX 1001 CANBY,OR 97013 | PFO 2 |
| G-14947 | 2 | A WELL>STAG HOLLOW CR | 0.2670 C | IR 104.40 | Yamhill 3/16/1999 | SENE,SECTION 13 T 3S, R4W | ERIC D LEMELSON 6635 NE DUNIWAY RD DAYTON,OR 97114 | PFO |
| G-14954 | 2 | A WELL>MILL CR | 300.0000 G | MU | Marion 3/29/1999 | NWSE,SECTION 33 T 4S, R1W | CITY OF HUBBARD; NOGLE, V 3720 2ND ST HUBBARD,OR 97032 | IR 2 |
| G-14971 | 2 | A WELL>N SANTIAM R | 15.0000 G | IR 10.00 | Marion 4/14/1999 | NWSE,SECTION 23 T 9S, R2E | RICHARD L POSEKANY JR PO BOX 781 MILL CITY,OR 97360 | IR 2 |
| G-14976 | 2 | WEST WELL>WILLAMETTE R | 198.0000 G | IM | Linn 4/30/1999 | SWSW,SECTION 6 T12S, R3W | K AND D ENGINEERING INC.; 276 NW HICKORY ST ALBANY,OR 97321 | IR 2 |
| | | EAST WELL>WILLAMETTE R | | | | SWSW,SECTION 6 T12S, R3W | | |
| S-84039 | 2 | WILLAMETTE R>COLUMBIA R | 120.0000 A | IR 48.00 | Clackamas 1/12/1999 | NESE,SECTION 29 T 3S, R1W | FRANKLIN MERRILL FARMS LL 300 N POINT RD LAKE OSWEGO,OR 97034 | PFO 2 |
| G-14945 | 5 | A WELL>THREE MILE CR | 0.7900 C<br>1.8700 C | IR 62.80<br>IS 149.90 | Wasco 3/12/1999 | NWSW,SECTION 9 T 4S, R13E | DANE H KLINDT PO BOX 390 PARKDALE,OR 97041 | PFO 2 |
| G-13514 | 14 | A WELL>LOST R | 1.0950 C | WI | Klamath 9/13/1993 | NESW,SECTION 32 T40S, R14E | CIRCLE 5 RANCH INC. 45850 GERBER RD BONANZA,OR 97623 | PFO 2 |
| G-14920 | 17 | A SUMP WELL>ELK RIVER | 0.4460 C | IR 189.50 | Curry 2/ 4/1999 | NWNE,SECTION 30 T32S, R15W | KNAPP RANCHES INC. PO BOX 32 PORT ORFORD,OR 97465 | PFO V |
| R-84100 | 17 | UNN STR/RES>ELK R | 100.0000 A | IR<br>MI | Curry 2/ 4/1999 | SWSW,SECTION 20 T32S, R15W | KNAPP RANCHES INC. PO BOX 32 PORT ORFORD,OR 97465 | PFO V |
| S-84086 | 17 | TENMILE L>TENMILE CR | 0.0050 C | DO | Coos 3/ 8/1999 | NESW,SECTION 21 T23S, R12W | DAVID A WOOD WOOD, LESLIE 21908 FARM POND COURT OREGON CITY,OR 97045 | PFO 2 |

# How To Read the Listing

Applications are organized by Oregon's major river basins, as listed below:

| | | |
|---|---|---|
| 1–North Coast | 8–Grande Ronde | 15–Rogue |
| 2–Willamette | 9–Powder | 16. Umpqua |
| 3–Sandy | 10–Malheur | 17–S. Coast |
| 4–Hood | 11–Owyhee | 18–Mid Coast |
| 5–Deschutes | 12–Malheur L. | 19–Columbia |
| 6–John Day | 13–Goose/Summer | 20–Snake |
| 7–Umatilla | 14–Klamath | |




| G-12345 | 2 | Dry Cr.>Rowe R. | 0.50 | C | IR | 40.00 | Coos 1/1/1995 | SENE,SECTION 9,T16S,R4W | W. Clinton... | PFO | 2 |
|---|---|---|---|---|---|---|---|---|---|---|---|

Application number:
G – groundwater
R – reservoir
S – surface
I – instream

Basin number

The source

What it flows into

Amount

Unit of measure:
C – cubic feet per second
G – gallons per minute
A – acre-feet

Irrigated acres

Type of use
(e.g.: IR – irrigation; see codes below)

County of use; Priority date

Legal description of general area of use: "Southeast quarter of the Northeast quarter of Section 9, Township 16 South, Range 4 West."

Applicant name & address

Stage of Review:
IR initial review
PFO proposed final order

Decision codes:
1 permit may be issued as requested by applicant
2 permit may be issued with appropriate conditions
3 permit unlikely to be issued

Some commonly-used Type of Use abbreviations (for definitions, please consult Oregon Administrative Rules Chapter 690, Division 300):

AG–agriculture
CF,CH,CI,CR–cranberry uses
CM–commercial
CS–campground
DI–domestic, incl. lawn & garden
DN–domestic, incl. non-commercial
DO–domestic
DS–domestic/stock
FI–fish
FP–fire protection
FW–fish & wildlife
GD–group domestic
GR–groundwater recharge
GT–geothermal
IC–irrigation, primary & supplemental
ID,IL–irrigation with Domestic or Livestock use, respectively
IM–industrial, manufacturing
IR–irrigation
IS–supplemental irrigation
LV,LW–livestock/wildlife
MI–mining
MU–municipal
NU–nursery use
PA–pollution abatement
PW–power
QM–quasi-municipal
RC–recreation
RW–road construction
ST–storage
SW–swimming
TC–temperature control
WI–wildlife

Oregon
John A. Kitzhaber, M.D., Governor

Water Resources Department
Commerce Building
158 12th Street NE
Salem, OR 97310-0210
(503) 378-3739
FAX (503) 378-8130

July 23, 1999

CITY OF HUBBARD
VICKIE NOGLE
3720 2ND ST
HUBBARD, OREGON 97032

( 503)981-9633

Reference: File G-14954

Dear Applicant:

## THIS IS NOT A PERMIT AND IS SUBJECT TO CHANGE AT THE NEXT PHASE OF PROCESSING.

This letter is to inform you of the favorable preliminary analysis of your water use permit application and to describe your options. In determining whether a water use permit application may be approved, the Department must consider the factors listed below, all of which must be favorable to the proposed use if it is to be allowed. Based on the information you have supplied, the Water Resources Department has made the following preliminary determinations:

**Initial Review Determinations:**

1. The proposed use is not prohibited by law or rule.

2. The use of water from A WELL IN MILL CREEK BASIN for MUNICIPAL USE **is allowable** under OAR 690-502-160(2), the Willamette Basin Program.

3. The Department has determined, based upon OAR 690-09, that the proposed groundwater use will, if properly conditioned, adequately protect the surface water from interference.

4. The Department has also determined, based upon available data, that the use of groundwater in the amount of 0.67 CUBIC FOOT PER SECOND (300.0 GALLONS PER MINUTE) for MUNICIPAL USE if properly conditioned, will not injure existing

rights or the groundwater resource.

5. The Department finds that the well shall be continuously cased and continuously sealed to a minimum depth of 210 feet below land surface.

6. The Department also finds that within 3 years of permit issuance, the permittee shall submit a Water Management and Conservation Plan consistent with OAR Chapter 690, Division 86. The Director may approve an extension of this timeline to complete the required Water Management Conservation Plan.

7. The applicant must publish notice of the proposed water use in a local newspaper. Refer to Public Notice Requirement below.

## Summary of Initial Determinations

**The use of 0.67 CUBIC FOOT PER SECOND (300.0 GALLONS PER MINUTE) from A WELL IN MILL CREEK BASIN for MUNICIPAL USE is allowable year-round.**

Because of these favorable determinations, the Department can now move your application to the next phase of the water rights application review process. This phase is where public interest factors will be evaluated.

Please reference the application number when sending any correspondence regarding the conclusions of this initial review. Comments received within the comment period will be evaluated at the next phase of the process.

## To Proceed With Your Application:

If you choose to proceed with your application, you do not have to notify the Department. Your application will automatically be placed on the Department's Public Notice to allow others the opportunity to comment. After the comment period the Department will complete a public interest review and issue a proposed final order.

## Withdrawal Refunds:

If you choose not to proceed, you may withdraw your application and receive a refund (minus a $50 processing charge per application.) To accomplish this you must notify the Department in writing by **Friday, August 6, 1999**. For your convenience you may use the enclosed "STOP PROCESSING" form.

**Public Notice Requirement:**

ORS 537.130 (3) requires notice to all affected landowners. ORS 537.130 (4) allows this notice to be made through publication for three consecutive weeks in a local newspaper if there are more than 25 landowners involved. The following language should be used:

NOTICE OF WATER USE REQUEST

Regarding application: G-14954

The Oregon Water Resources Department is evaluating the request by City of Hubbard to use 0.67 cubic feet per second of the waters of a well in the Mill Creek Basin for municipal purposes. The proposed source of water is located within Marion County, Township 4S, Range 1W. This process is to determine if the request is in compliance with state water laws and regulations. Public participation and comment is encouraged.

ORS 537.130 (3) requires notice to all affected landowners. ORS 537.130 (4) allows this notice to be made through publication for three consecutive weeks in a local newspaper if there are more than 25 landowners involved.

For further information contact the Water Resources Department Water Rights Information Group at 1 (800) 624-3199 ext. 499. Written information requests may be addressed to the Oregon Water Resources Department at 158 12th Street NE, Salem, Oregon 97310-0210.

**If A Permit Is Issued It Will Likely Include The Following Conditions:**

1. Measurement, recording and reporting conditions:

   A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order.

   B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

   C. The Director may require the permittee to keep and maintain a record of the amount (volume) of water used and may require the permittee to report water use on a periodic schedule as established by the Director. In addition, the Director may require the permittee to report general water use information, the periods of water use and the place and nature of use of water under the permit. The Director may provide an opportunity for the permittee to submit alternative reporting procedures for review and approval.

2. You will be required to comply with state and federal water quality standards.

3. The water user shall develop a plan to monitor and report the impact of water use under this permit on water levels within the aquifer that provides water to the permitted well(s). The plan shall be submitted to the Department within one year of the date the permit is issued and shall be subject to the approval of the Department. At a minimum, the plan shall include a program to periodically measure static water levels within the permitted well(s) or an adequate substitute such as water levels in nearby wells. The plan shall also stipulate a reference water level against which any water-level declines will be compared. If a well listed on this permit (or replacement well) displays a total static water-level decline of 25 or more feet over any period of years, as compared to the reference level, then the water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s). Such action shall be taken until the water level recovers to above the 25-foot decline level or until the Department determines, based on the water user's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit.

4. If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

5. Within 3 years of permit issuance, the permittee shall submit a Water Management and Conservation Plan consistent with OAR Chapter 690, Division 86. The Director may approve an extension of this timeline to complete the required Water Management Conservation Plan.

6. The well shall be continuously cased and continuously sealed to a minimum depth of 210 feet below land surface.

7. The priority date for this application is March 29, 1999.

<u>If you have any questions:</u>

Questions about the status of your application, processing timelines, or your upcoming Proposed Final Order should be directed to our Water Right Information Group at (800) 624-3199 or (503)

378-8455 extension 499. Feel free to call me at (800) 624-3199 or (503) 378-8455 extension 229 if you have any questions regarding the contents of this letter. Please have your application number available if you call. Address all other correspondence to: Water Rights Section, Oregon Water Resources Department, 158 12th ST. NE Salem, OR 97310, Fax: (503)378-2496

Sincerely,

Anita M. Huffman
Water Rights Specialist

cc: Regional Manager, Watermaster District 16, Water Availability Section
enclosures: Flow Chart of Water Right Process
Stop Processing Form

G-14954
wab 02-
pou 02-
gw c

# APPLICATION FACT SHEET

*Mail to: Applicant, Watermaster, District Biologist (ODFW)*
*If necessary, also mail to : Regional Water quality manager (DEQ), and DOA*

Application File Number: G-14954

Applicant: CITY OF HUBBARD; NOGLE, VICKIE

County: MARION

Watermaster: District 16

Priority Date: March 29, 1999

Source: A WELL IN MILL CREEK BASIN A WELL IN MILL CREEK BASIN

Use: MUNICIPAL USE

Quantity: 300.0 GALLONS PER MINUTE

Basin Name & Number: Willamette, #02

Stream Index Reference: Volume 13 PUDDING R MISC

Point of Diversion Location: NWSE, SECTION 33, T 4S, R1W, W.M.; SOUTH 7 DEGREES 2

MINUTES 27 SECONDS, WEST 753.66 FEET FROM SW CORNER, DLC 70

Place of Use: , SECTION 33, TOWNSHIP 4 SOUTH, RANGE 1 WEST, W.M.

14 DAY STOP PROCESSING DEADLINE DATE: Friday, August 6, 1999

PUBLIC NOTICE DATE: Tuesday, August 10, 1999

30 DAY COMMENT DEADLINE DATE: Thursday, September 9, 1999

To: *wrmuni, Tom Paul, Bill Ferber
From: Bill Fujii <William.H.FUJII@wrd.state.or.us>
Subject: Please propose Div 86 condition for G 14954
Cc:
Bcc:
Attached:

In regards to application G 14954 by the City of Hubbard. Hubbard is the 98 th largest city in Oregon since 1980 the growth has been about 17.5%. The City has supplied a projected 20 year change of approximately 20%. These projections seem reasonable and consistent with the rest of the Willamette Basin. The City's strategy for use of water rates as a means of conserving water are also consistent with other cities in the region.

Because of high growth rates and the proximity to the Pudding River (a 303d listed stream for water quality) it is necessary to have the Division 86 water management and conservation plan condition part of the proposed final order.

At this time Department is developing the language for this condition. Please contact Dwight French or myself for the exact language when the proposed final order is being developed. The current language is as follows:

Within three years of permit issuance, the permittee shall submit a Water Management and Conservation Plan consistent with OAR Chapter 690, Division 86. The Director may approve an extension of this timeline to complete the required Water Management and Conservation Plan.

As always I am printing a copy of this email for the file.

Thank you.....

**BST, Inc.**
701 main street • suite 209 • oregon city, oregon 97045
telephone (503) 650-4919
fax (503) 650-4935



March 26, 1999

**Oregon Water Resources Department**
158 12th Street NE.
Salem, OR 973102

Attn: Anita M. Huffman

Subject: City of Hubbard Application for a Permit to Use Ground Water, H-1071.

Dear Anita:

Attached is a map showing the tie between the Donation Land Corner and the proposed well location.

Thanks so much for your assistance with this project, and if there is anything you need from us, please give us a call.

Sincerely,

**BST, Inc.**

David M. Thomas, PE
Project Manager

Application No. E-14954
Permit No.

## Request for Water

A. Discuss the reason(s) for your request for additional water
*(e.g. loss of current supply, peak demand, growth, or other):* population growth, inability to meet peak demand periods.

B. How long is the amount of water requested in this application expected to meet future needs?
*(e.g. until the year 2040)* until year 2017

C. Briefly discuss operation of water system and the most constraining component of the system:
consists of 3 wells which fill ground-level reservoir, booster pumps to system pressure. Constraining components are supply, ground-level storage, filtration, booster system and distribution

D. Percentage of water use by type:

| | | | |
|---|---|---|---|
| Residential: | 72.5 | Commercial: | 6.5 |
| Public Authority: | 0.8 | Agricultural: | 0 |
| Unaccounted for use: | 17.7 | Industrial: | 2.5 |
| Other (specify use): | | | |

E. List cost to implement proposed request.
*Compare cost and benefits with other water supply, or combination of supply options. This should include water efficiency measures such as replacing current showerheads with low-flow types. (Attach documentation, as available.)*
Surface water supply is limited and expensive to treat. Efficiency measures include recent implementation of a new rate structure which promotes conservation and penalizes waste.

F. How and by how much will your proposed water use efficiency programs increase efficiency?
*(Express as a percentage of per-capita consumption.)*
we estimate at least 10%

RECEIVED
FEB 12 1999
WATER RESOURCES DEPT
SALEM, OREGON

RECEIVED
MAR 04 1999
WATER RESOURCES DEPT.
SALEM, OREGON

*Last revision: April 9, 1996*

Application No. G-14954
Permit No.

# Oregon Water Resources Department

RECEIVED
FEB 12 1999
WATER RESOURCES DEPT.
SALEM, OREGON

## FORM M

### FOR MUNICIPAL AND QUASI MUNICIPAL WATER SUPPLIES

*Unless otherwise noted, water use information should be in acre-feet per year (AFY).*
*1 acre-foot is equal to 325,851 gallons.*

## Background Information

RECEIVED
MAR 04 1999
WATER RESOURCES DEPT.
SALEM, OREGON

Name of water supplier: City of Hubbard

Name and size of area to be served: City of Hubbard,
*(in square miles)*

Present population of service area: 2235
*(Contact county planning staff, if needed.)*

Projected population in 20 years: 3804 (based on County projections)
*(Cite source and year. For example: "20,595 Based upon 1995 Portland State University projections.")*

List present water rights and permits held:

| Date of Issuance: | Natural Source of Water: | Amount Permitted: | Utilization: |
|---|---|---|---|
| 4-28-75 | Wells 1 & 2 | 1.1 cfs | Municipal |
| 12-31-84 | Well 3 | 1.56 cfs | Municipal |
| | | | |
| | | | |

## Water Use

Average **yearly** demand: 320 AFY Year: 1998

Per-capita daily consumption (in gallons): 128
*(Divide average annual water sales by population to arrive at consumption, then divide by 365 to get daily values.)*

**Peak season** (by month/day): Jun. to Sep. Total **peak season** demand: 243 Acre-feet

**Peak season** per-capita daily consumption: 171
*(Divide total peak season demand by population and the number of days during the peak.)*

Annual amount of water:

produced: 101,602,400 gallons
*(diverted or pumped)*

delivered: 86,331,500 gallons

G-14985
Application No.
Permit No.

Is your system fully metered? ☒ Yes ☐ No

Describe your rate structure: increasing block rate
*(e.g. flat rate, increasing or decreasing block rate or combination of different systems)*

STATE OF OREGON
DEPARTMENT OF HUMAN RESOURCES
OREGON STATE HEALTH DIVISION



# HEALTH DIVISION LAND USE COMPATIBILITY STATEMENT

Certain plan review approvals for drinking water projects have been identified by the Department of Land Conservation and Development as Class B permits affecting land use. The Health Division is therefore required by ORS 197-180, OAR 660-30-065 to - 070, OAR 660-31-010-040, the Health Division's state agency coordination program and OAR 333-61-062 to ensure that projects defined in OAR 333-61-062(1) are compatible with city and county comprehensive plans and land use regulations. This form or other acceptable documentation and necessary attachments must accompany each set of project plans to ensure that compatibility.

1. GENERAL INFORMATION

a. Project Title Water System Improvements

b. Applicant City of Hubbard
Name of Water System

c. Type of project Source, treatment, storage, distribution
Treatment, Transmission, Storage, Distribution, Etc.

d. Project contact person BST, Inc.
Engineer, owner, etc., including title
701 Main St.
Street Address
Oregon City, OR 97045 (503) 650-4919
City, State/Zip Code Phone

e. The local government entity* having comprehensive planning authority over the site of the proposed project is:

Agency Name City of Hubbard Phone 981-9633

Address PO Box 380, Hubbard, OR Zip 97032

(*If the proposed project is located within the jurisdiction of more than one planning authority, all entities must certify compatibility.)

f. If a statement of compatibility previously has been submitted to the Division to cover a master water system plan, of which this project is a segment, no further information is required. If such a statement has been filed, the date of the submittal was _____.



Application No. G-14954
Permit No.

(Continued on the back)



**LAND USE COMPATIBILITY DETERMINATION (Complete either 2 or 3)**

PLANNING AUTHORITY STATEMENT: (To be completed by local planning authority)

a. I certify that this project has been reviewed for compatibility with:

1. [X] The acknowledged comprehensive plan and land use regulations.

2. [ ] Statewide planning goals. The goals apply because:

   [ ] There is no acknowledged plan, or
   [ ] Conditions described in OAR 660-31-025(3) apply.



b. I find that this project **(circle one)** IS or IS NOT compatible.
Attach appropriate land use decision(s) written findings as required in ORS 215.416 (8) or (9) or 227.173 (1) OR (2), or OAR 660-31-025 (2) or (3).

igned Vickie L Nogle Title City Recorder Date 1/21/99

APPLICANT REQUEST FOR PLAN REVIEW APPROVAL

I hereby certify that I have applied to the local governments cited in 1.e above for a determination of compatibility with the local acknowledged plan or the statewide planning goals as applicable. I hereby request that the Division issue the plan review approval with the understanding that issuance of said approval is not a finding of compliance with the statewide planning goals or compatibility with the applicable, acknowledged comprehensive plan and land use regulations, but will be conditional, pending the applicant receiving a land use approval from each unit of local government. When signed, such approval shall be forwarded to the Division. I understand that plan review approval for this project will not be effective until and unless the Health Division has received a copy of the land use approval and determined it to be complete and adequate.

igned _____ Title _____ Date _____

Application No. G-14954
Permit No.

MARI 55251

**RECEIVED**
OCT 06 2000
WATER RESOURCES DEPT.

**RECEIVED**
NOV 17 2000
WATER RESOURCES DEPT.
SALEM, OREGON

# STATE OF OREGON
# WATER SUPPLY WELL REPORT

(as required by ORS 537.765) Instructions for completing this report are on the back of this form.

WELL I.D. # L 45374
START CARD # 128562
55251

**(1) OWNER:** Well Number
Name CITY OF HUBBARD
Address 3720 2ND STREET
City HUBBARD State OR Zip 97032

**(2) TYPE OF WORK**
[X] New Well [ ] Deepening [ ] Alteration (repair/recondition) [ ] Abandonment

**(3) DRILL METHOD:**
[ ] Rotary Air [ ] Rotary Mud [X] Cable [ ] Auger
[ ] Other

**(4) PROPOSED USE:**
[ ] Domestic [X] Community [ ] Industrial [ ] Irrigation
[ ] Thermal [ ] Injection [ ] Livestock [ ] Other

**(5) BORE HOLE CONSTRUCTION:**
Special Construction approval [ ] Yes [X] No Depth of Completed Well 304 ft.
Explosives used [ ] Yes [X] No Type ____ Amount ____

| HOLE Diameter | From | To | SEAL Material | From | To | Sacks or pounds |
|---|---|---|---|---|---|---|
| 16 | 0 | 320 | CEMENT | 0 | 210 | 231 SACKS |
| | | | | | | |
| | | | | | | |

How was seal placed: Method [ ] A [ ] B [X] C [ ] D [ ] E
[ ] Other
Backfill placed from 304 ft. to 320 ft. Material CLAY SLOUGH
Gravel placed from 210 ft. to 304 ft. Size of gravel 8/12& 6/9

**(6) CASING/LINER:**

| | Diameter | From | To | Gauge | Steel | Plastic | Welded | Threaded |
|---|---|---|---|---|---|---|---|---|
| Casing: | 12 | +3 | 208 | .250 | [X] | [ ] | [X] | [ ] |
| | 10 | 208 | 228½ | .250 | [X] | [ ] | [X] | [ ] |
| | 10 | 271 | 289½ | .250 | [X] | [ ] | [X] | [ ] |
| | 10 | 297 | 304 | .250 | [X] | [ ] | [X] | [ ] |
| Liner: | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |

Final location of shoe(s) 301 (16") CUT OFF

**(7) PERFORATIONS/SCREENS:**
[ ] Perforations Method CONTINIOUS V-WIRE
[X] Screens Type ____ Material SS

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|---|---|---|---|---|---|---|---|
| 228½ | 225½ | .070 | | 10" | p/s | [ ] | [ ] |
| 255½ | 271 | .045 | | 10" | p/s | [ ] | [ ] |
| 289½ | 297 | .070 | | 10" | p/s | [ ] | [ ] |
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |

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

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

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| 100 | 19 | | 1 hr. |
| 450 | 124 | | 5 hr |
| 350 | 96 | | 12 hr |

Temperature of water 54 Depth Artesian Flow Found ____
Was a water analysis done? [ ] Yes By whom NO
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 MARION Latitude ____ Longitude ____
Township 4S N or S Range 1W E or W WM.
Section 33 NE 1/4 SE 1/4
Tax Lot 3001 Lot ____ Block ____ Subdivision ____
Street Address of Well (or nearest address) ____
2701 PACIFIC HWY 99E, HUBBARD, OR

**(10) STATIC WATER LEVEL:**
63 ft. below land surface. Date 9-14-00
Artesian pressure ____ lb. per square inch. Date ____

**(11) WATER BEARING ZONES:**
Depth at which water was first found 112'

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| 112 | 142 | N/A | N/A |
| 229 | 294 | 450+ | 63 |
| | | | |
| | | | |
| | | | |

**(12) WELL LOG:**
Ground Elevation ____

| Material | From | To | SWL |
|---|---|---|---|
| FILL DIRT & GRAVEL | 0 | 4 | |
| SILTY BRN SOIL | 4 | 22 | |
| SANDY SILT BRN | 22 | 47 | |
| SILTY CLAY GREY SANDY | 47 | 78 | |
| CLAY GREY STICKY | 78 | 84 | |
| CLAY GREY SANDY | 84 | 112 | |
| CLAY & GRAVEL | 112 | 121 | |
| CMTD GRVL GREY | 121 | 142 | |
| CLAY GREY STICKY | 142 | 168 | |
| CLAY GREY & BRN | 168 | 177 | |
| CLAY BLUE GRN STICKY | 177 | 194 | |
| CLAY GREY W/GRAVEL | 194 | 210 | |
| CLAY GREY SILTY | 210 | 217 | |
| CLAY GRN STICKY | 217 | 229 | |
| CEMENTED GRAVEL | 229 | 254 | |
| CLAY GREY | 254 | 259 | |
| CLAY GREY W/STRKS OF SAND & PUMICE | 259 | 268 | |
| CLAY GREY BLUE STICKY | 268 | 277 | |
| CONT. | | | |

Date started 7-24-00 Completed 9-20-00

(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.

WWC Number ____
Signed ____ 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.

WWC Number 688
Signed Steven N. Shields Date 9-28-00

ORIGINAL - WATER RESOURCES DEPARTMENT FIRST COPY - CONSTRUCTOR SECOND COPY - CUSTOMER

MARI 55251

**RECEIVED**

OCT 0 6 2000

WATER RESOURCES DEPT.
SALEM, OREGON

# 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.

WELL I.D. # L 55251

START CARD # 128562

**(1) OWNER:** Well Number

Name CITY OF HUBBARD

Address 3720 2ND STREET

City HUBBARD State OR Zip 97032

**(2) TYPE OF WORK**

[X] New Well [ ] Deepening [ ] Alteration (repair/recondition) [ ] Abandonment

**(3) DRILL METHOD:**

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

[ ] Other

**(4) PROPOSED USE:**

[ ] Domestic [X] Community [ ] Industrial [ ] Irrigation

[ ] Thermal [ ] Injection [ ] Livestock [ ] Other

**(5) BORE HOLE CONSTRUCTION:**

Special Construction approval [ ] Yes [ ] No Depth of Completed Well ___ ft.

Explosives used [ ] Yes [ ] No Type ___ Amount ___

| HOLE Diameter | From | To | SEAL Material | From | To | Sacks or pounds |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |

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: | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |
| Liner: | | | | | [ ] | [ ] | [ ] | [ ] |
| | | | | | [ ] | [ ] | [ ] | [ ] |

Final location of shoe(s)

**(7) PERFORATIONS/SCREENS:**

[ ] Perforations Method ___

[ ] Screens Type ___ Material ___

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|---|---|---|---|---|---|---|---|
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |
| | | | | | | [ ] | [ ] |

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

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

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| | | | 1 hr. |
| | | | |
| | | | |

Temperature of water ___ 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 MARION Latitude ___ Longitude ___

Township 4S N or S Range 1W E or W. WM.

Section 33 NE 1/4 SE 1/4

Tax Lot 3001 Lot ___ Block ___ Subdivision ___

Street Address of Well (or nearest address) ___

2701 PACIFIC HWY 99E

**(10) STATIC WATER LEVEL:**

___ ft. below land surface. Date ___

Artesian pressure ___ lb. per square inch. Date ___

**(11) WATER BEARING ZONES:**

Depth at which water was first found ___

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

**(12) WELL LOG:**

Ground Elevation ___

| Material | From | To | SWL |
|---|---|---|---|
| CONT. | | | |
| CLAY GREY SILTY | 277 | 289 | |
| GRAVEL W/CLAY GREY | 289 | 294 | |
| CLAY BLUE GRN GREY | 294 | 320 | |

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NOV 2 1 2000
WATER RESOURCES DEPT
SALEM, OREGON

Date started 7-24-00 Completed 9-20-00

**(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.

WWC Number ___

Signed ___ 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.

WWC Number 688

Signed Steven N. Stuhlmiller Date 9-28-00

ORIGINAL - WATER RESOURCES DEPARTMENT FIRST COPY - CONSTRUCTOR SECOND COPY - CUSTOMER

**BST, Inc.**
701 main street • suite 209 • oregon city, oregon 97045
telephone (503) 650-4919
fax (503) 650-4935

March 1, 1999

**Oregon Water Resources Department**
158 12th Street NE.
Salem, OR 973102

Attn: Mark Norton

Subject: City of Hubbard Application for a Permit to Use Ground Water

Dear Mark:

Thank you for your comments on the initial submittal of the water rights application for the City of Hubbard. We have made the following changes/additions in response to your request:

1. We have attached a check for an additional $200.00 which, together with the original check for $200.00 sent with the initial application, constitutes the total $400.00 required for the application.

2. The name and title of the person signing the application has been added to Section B. of Page 1 of the application.

3. The location of the diversion point has been referenced to a major and recognized public land survey corner on the attached map, in this particular case a Land Donation Claim Corner on which a large number of the properties within Hubbard are tied.

4. By ordinance, the City of Hubbard has established the service boundary for the water system as the City Limits. These have been added to the attached map.

Thanks so much for your assistance with this project, and if there is anything you need from us, please give us a call.

Sincerely,

**BST, Inc.**

David M. Thomas, PE
Project Manager

G-14954

Application No.

Permit No.

## WATER RIGHT FEE CALCULATION
**Groundwater, Surface Water, Standard Reservoir**

**Fee is figured adding $250 Base Fee *plus* the following calculations:**

| **Groundwater or Surface Water** Live Flow Calculation | | **Storage or to use Stored Water** Rate Calculation | |
|---|---|---|---|
| 1st CFS* or fraction | $ 150 | $10 for 1st AF or fraction up to 10AF | |
| *Plus* | | _____ X $10 *Plus* | _____ |
| Additional CFS or fraction | | $1 each add'l AF (>10AF-1000AF) | |
| _____ X $75 | $_____ | _____ X $1 *Plus* | _____ |
| | | .25 each add'l AF (>1000 +) | |
| | | _____ X .25 | _____ |
| Total Calculation | $ 150 | Total Calculation | $_____ |
| LIVE FLOW EXAMINATION FEE TOTAL | | STORED EXAMINATION FEE TOTAL | |
| $250 + $ 150 = | $ 400 | $250 + $_____ = | $_____ |

**If an application is to appropriate both stored water *and* live flow, use the following calculation:**

| | |
|---|---|
| Base Fee | $250 (Note: use only one base fee) |
| *plus* | |
| Live flow calculation (above) | _____ |
| *Plus* | |
| Storage calculation(above) | + _____ |
| Total Exam Fee | _____ |

**Recording fees for all applications (due at permit):$175**

**ALL EXAMINATION FEES MUST BE PAID BEFORE AN APPLICATION CAN BE ACCEPTED FOR FILING. RECORDING FEES *DO NOT* HAVE TO BE PAID AT APPLICATION FILING.**

*1 CFS equals 448.83 gallons per minute.

RECEIVED
MAR 0 4 1999
WATER RESOURCES DEPT.
SALEM, OREGON

Application No. G-14954
Permit No.

Oregon
John A. Kitzhaber, M.D., Governor

Water Resources Department
Commerce Building
158 12th Street NE
Salem, OR 97310-0210
(503) 378-3739
FAX (503) 378-8130

RECEIVED
FEB 24 1999
CITY OF HUBBARD

City of Hubbard
3720 2nd St.
Hubbard, OR 97032

The Water Resources Department has received your application to use or store water. At this time we are unable to accept your application because it does not meet minimum filing requirements.

**Please provide the following information checked below:**

- ☐ Complete the enclosed application form or page _____.
- ☐ A completed land-use information form that has been signed by the local planning department officials.
- ☐ A metes and bounds legal description of the property where you plan to use the water. *You may use a copy of your deed, land sales contract or title insurance policy.* Do not send a copy of the tax assessor bill.
- ☐ Complete the enclosed form _____.
- ☐ The name and mailing address of the owner of any lands that are not owned by the applicant and that is crossed by the proposed ditch, canal or other works of the applicant. This includes public roads and rights-of-way.
- ✓ ☒ Examination fees of $ 403 —. Please refer to the fee worksheet enclosed.
- ☐ Complete the well information or submit a well log for the well(s) indicated on the application. You may wish to consult with a well constructor for assistance with completing this information if the well has not been constructed yet.
- ✓ ☒ Other: The name & title of the person signing the application

✓ ☐ **Please provide the following information with regard to your map:**

- ☐ The map must be drawn in ink. Please do not use highlighter pens.

RECEIVED
MAR 04 1999
WATER RESOURCES DEPT.
SALEM, OREGON

- ☐ The map is larger than 11"X 17". Four copies must be submitted, or it must be drawn on tracing linen, tracing velum or Mylar.

- ☐ The scale of the map must be a standard, even scale of not less than 4 inches to a mile, and must be indicated on the map. (A tax assessor map is generally the best map to provide for the requirements.)

- ☐ The North directional symbol must be indicated on the map.

- ✓ ☒ The location of each diversion point, well or dam must be referenced to a recognized public land survey corner; **do not measure from property lines unless they are part of the public land survey lines.** The locations may be shown by distance and bearing or by coordinates (EX: "400 feet south and 350 feet west of the Northeast corner of section 27"). (Tied to Donation Land Claim Corner.)

- ☐ The location of main canals, ditches, pipelines or flumes.

- ✓ ☒ The location of the place where water is to be used identified by **tax lot, township, range, section and nearest quarter-quarter section.** If the use is domestic, please show the location of the house to be served. For municipal or quasi-municipal, please show the service boundary on the map.

- ☐ The area to be irrigated in each quarter-quarter section shall be indicated by shading or hatchuring and **the number of acres in each quarter-quarter section,** donation land claim, government lot or other recognized public land survey lines must be indicated.

- ☐ Other: _____

_____

_____

_____

Your application and supporting data are being returned. We can begin processing your application when the information noted above is received.

If you have any questions about the application procedure, you may call the Water Rights Information Group at (503)378-8455 extension 499 or toll-free in Oregon at 1-800-624-3199 ext. 499.

cc: WM DIST 16
GEN CORR
FISCAL



AMH

REV12/98

CITY OF HUBBARD County: MARI Cert#: 0
Permit#: CG 5809 App#: T 6320 Status: V WELL 4

CITY OF HUBBARD County: MARI Cert#: 0
Permit#: G 10965 App#: G 11998 Status: V WELL 1

CITY OF HUBBARD County: MARI Cert#: 47845
Permit#: G 5809 App#: G 6913 Status: C WELL 4

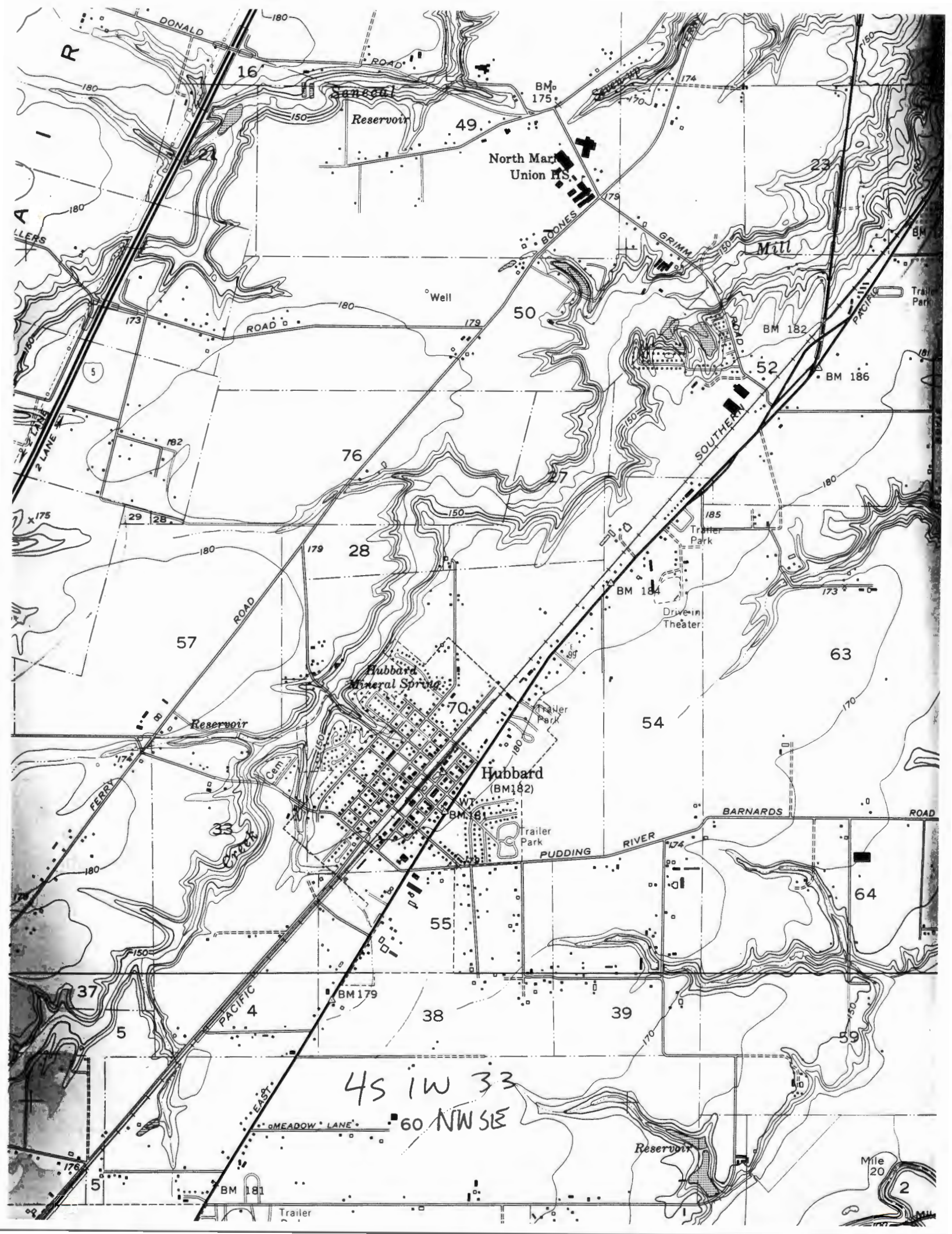
CITY OF HUBBARD; NOGLE, VICKIE County: MARI Cert#: 0
Permit#: G 13857 App#: G 14954 Status: V A WELL

MAILING ADDRESS:

City of Hubbard
Contact Person: Vickie Nogle, City Recorder
PO Box 380
Hubbard, OR 97032-0380

SITE ADDRESS:

3720 2nd Street
Hubbard, OR 97032




4S 1W 33

60 NW SE

Application No. G-14954
Permit No.

281-3991-31

| Obligat'n | Description | Invoice number | Amount |
|---|---|---|---|
| 6123 | WELL SITE REVIEW | 041399 | 200.00 |
| | *** Total *** | | 200.00 |

Subject: H-1071

STATE OF OREGON
**WATER RESOURCES DEPARTMENT**
158 12TH ST. N.E.
SALEM, OR 97310-0210
378-8455 / 378-8130 (FAX)

RECEIPT # **28949**

INVOICE #_____

RECEIVED FROM: City of Hubbard

BY: _____

| APPLICATION | G 14954 |
|---|---|
| PERMIT | |
| TRANSFER | |

CASH: ☐ CHECK: # ☒ 24-201 OTHER: (IDENTIFY) ☐ _____

TOTAL REC'D $ 200.00

## 0417 WRD MISC CASH ACCT

| | | | |
|---|---|---|---|
| | ADJUDICATIONS | | $ |
| | PUBLICATIONS / MAPS | | $ |
| _____ | OTHER: (IDENTIFY) | _____ | $ |
| _____ | OTHER: (IDENTIFY) | _____ | $ |

## REDUCTION OF EXPENSE

_____ CASH ACCT. $

_____ PCA AND OBJECT CLASS _____ VOUCHER #

## 0427 WRD OPERATING ACCT

PA #66111

| | | | |
|---|---|---|---|
| | **MISCELLANEOUS** | | |
| 0407 | COPY & TAPE FEES | | $ |
| 0410 | RESEARCH FEES | | $ |
| 0408 | MISC REVENUE: (IDENTIFY) | _____ | $ |
| New) TC162 | DEPOSIT LIAB. (IDENTIFY) | _____ | $ |

| | | EXAM FEE | | RECORD FEE |
|---|---|---|---|---|
| | **WATER RIGHTS:** | | | |
| 0201 | SURFACE WATER | $ | 0202 | $ |
| 0203 | GROUND WATER | $200.00 | 0204 | $ |
| 0205 | TRANSFER | $ | 0206 | $ |
| | **WELL CONSTRUCTION** | **EXAM FEE** | | **LICENSE FEE** |
| 0218 | WELL DRILL CONSTRUCTOR | $ | 0219 | $ |
| | LANDOWNER'S PERMIT | | 0220 | $ |

_____ OTHER (IDENTIFY) _____

## 0437 WELL CONST. START FEE

| | | | | |
|---|---|---|---|---|
| 0211 | WELL CONST START FEE | $ | CARD # | |
| 0210 | MONITORING WELLS | $ | CARD # | |

_____ OTHER (IDENTIFY) _____

## 0539 LOTTERY PROCEEDS

| | | |
|---|---|---|
| 1302 | LOTTERY PROCEEDS | $ |

## 0467 HYDRO ACTIVITY

| | | LIC NUMBER | |
|---|---|---|---|
| 0233 | POWER LICENSE FEE (FW/WRD) | | $ |
| 0231 | HYDRO LICENSE FEE (FW/WRD) | | $ |
| _____ | HRDRO APPLICATION | _____ | $ |

RECEIPT # **28949** DATED: 4-15-99 BY: Roger Wright

Distribution-White Copy-Customer, Yellow Copy-Fiscal, Blue Copy-File, Buff Copy-Fiscal

STATE OF OREGON
# WATER RESOURCES DEPARTMENT

RECEIPT # 28111

158 12TH ST. N.E.
SALEM, OR 97310-0210
378-8455 / 378-8130 (FAX)

INVOICE # G14954

RECEIVED FROM: City of Hubbard
BY:

| | |
|---|---|
| APPLICATION | |
| PERMIT | |
| TRANSFER | |

CASH: ☐ CHECK: # ☒ 295-3803 ☐ OTHER: (IDENTIFY)

TOTAL REC'D $200.00

## 0417 WRD MISC CASH ACCT

| | | |
|---|---|---|
| | ADJUDICATIONS | $ |
| | PUBLICATIONS / MAPS | $ |
| ____ | OTHER: (IDENTIFY) ____ | $ |
| ____ | OTHER: (IDENTIFY) ____ | $ |

## REDUCTION OF EXPENSE

CASH ACCT. ____ $

PCA AND OBJECT CLASS ____ VOUCHER # ____

## 0427 WRD OPERATING ACCT

PCA 60111

| | | | | | |
|---|---|---|---|---|---|
| | **MISCELLANEOUS** | | | | |
| 0407 | COPY & TAPE FEES | | | | $ |
| 0410 | RESEARCH FEES | | | | $ |
| 0408 | MISC REVENUE: (IDENTIFY) ____ | | | | $ |
| New) TC162 | DEPOSIT LIAB. (IDENTIFY) ____ | | | | $ |
| | **WATER RIGHTS:** | **EXAM FEE** | | **RECORD FEE** | |
| 0201 | SURFACE WATER | $ | 0202 | $ | |
| 0203 | GROUND WATER | $ | 0204 | $ 200.00 | |
| 0205 | TRANSFER | $ | 0206 | $ | |
| | **WELL CONSTRUCTION** | **EXAM FEE** | | **LICENSE FEE** | |
| 0218 | WELL DRILL CONSTRUCTOR | $ | 0219 | $ | |
| | LANDOWNER'S PERMIT | | 0220 | $ | |

____ OTHER (IDENTIFY) ____

## 0437 WELL CONST. START FEE

| | | | | |
|---|---|---|---|---|
| 0211 | WELL CONST START FEE | $ | CARD # | |
| 0210 | MONITORING WELLS | $ | CARD # | |

____ OTHER (IDENTIFY) ____

## 0539 LOTTERY PROCEEDS

| | | |
|---|---|---|
| 1302 | LOTTERY PROCEEDS | $ |

## 0467 HYDRO ACTIVITY

| | | LIC NUMBER | |
|---|---|---|---|
| 0233 | POWER LICENSE FEE (FW/WRD) | | $ |
| 0231 | HYDRO LICENSE FEE (FW/WRD) | | $ |
| ____ | HRDRO APPLICATION ____ | | $ |

RECEIPT # 28111 DATED: 7-4-99 BY: B.C. K.C.R.

Distribution-White Copy-Customer, Yellow Copy-Fiscal, Blue Copy-File, Buff Copy-Fiscal

STATE OF OREGON
**WATER RESOURCES DEPARTMENT**

RECEIPT # 40414

158 12TH ST. N.E.
SALEM, OR 97310-0210
378-8455 / 378-8130 (FAX)

INVOICE # 1

RECEIVED FROM: City of Hubbard
BY:

| | |
|---|---|
| APPLICATION | |
| PERMIT | |
| TRANSFER | |

CASH: ☐ CHECK: # ☒ 24.201 OTHER: (IDENTIFY) ☐

TOTAL REC'D $ 125.00

## 0417 WRD MISC CASH ACCT

| | | |
|---|---|---|
| | ADJUDICATIONS | $ |
| | PUBLICATIONS / MAPS | $ |
| ____ | OTHER: (IDENTIFY) ____ | $ |
| ____ | OTHER: (IDENTIFY) ____ | $ |

## REDUCTION OF EXPENSE

CASH ACCT. ____

PCA AND OBJECT CLASS ____ VOUCHER # ____ $

## 0427 WRD OPERATING ACCT

PCA # 66111

| | | | | | |
|---|---|---|---|---|---|
| | **MISCELLANEOUS** | | | | |
| 0407 | COPY & TAPE FEES | | | | $ |
| 0410 | RESEARCH FEES | | | | $ |
| 0408 | MISC REVENUE: (IDENTIFY) ____ | | | | $ |
| ew) TC162 | DEPOSIT LIAB. (IDENTIFY) ____ | | | | $ |
| | **WATER RIGHTS:** | **EXAM FEE** | | **RECORD FEE** | |
| 0201 | SURFACE WATER | $ | 0202 | $ | |
| 0203 | GROUND WATER | $ | 0204 | $ | 175.00 |
| 0205 | TRANSFER | $ | 0206 | $ | |
| | **WELL CONSTRUCTION** | **EXAM FEE** | | **LICENSE FEE** | |
| 0218 | WELL DRILL CONSTRUCTOR | $ | 0219 | $ | |
| | LANDOWNER'S PERMIT | | 0220 | $ | |

____ OTHER (IDENTIFY) ____

## 0437 WELL CONST. START FEE

| | | | | |
|---|---|---|---|---|
| 0211 | WELL CONST START FEE | $ | CARD # | |
| 0210 | MONITORING WELLS | $ | CARD # | |

____ OTHER (IDENTIFY) ____

## 0539 LOTTERY PROCEEDS

| | | |
|---|---|---|
| 1302 | LOTTERY PROCEEDS | $ |

## 0467 HYDRO ACTIVITY

| | | LIC NUMBER | |
|---|---|---|---|
| 0233 | POWER LICENSE FEE (FW/WRD) | | $ |
| 0231 | HYDRO LICENSE FEE (FW/WRD) | | $ |
| ____ | HRDRO APPLICATION ____ | | $ |

RECEIPT # 40414 DATED: 9/14/00 BY: S. Henderson

Distribution-White Copy-Customer, Yellow Copy-Fiscal, Blue Copy-File, Buff Copy-Fiscal

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

Postage Due 50¢

Oregon Water Resources Dept.
Commerce Bldg.
158 12th St. NE.
Salem, OR 97301-4172

BS 69

## Notice to Mailer of Correction in Address

**Addressee's Account Number** *(All numbers, dates, and letters)*

FILE#: G 14954

☐ No account number on mail
☐ Account number illegible

Addressee's Name

City of Hubbard; Nogle, Vickie

| | |
|---|---|
| **Old Address** *(Include apartment or suite number)* | 3720 2nd. St. |
| City, State, and ZIP Code | Hubbard, OR 97032 |
| **New Address** *(Include apartment or suite number)* | P.O Box 380 |
| City, State, and ZIP Code | |

**This card is furnished:** ☐ For address correction, as requested *(your mailpiece was forwarded).*
☐ In place of Form 3579 *(see reason for nondelivery below).*

The address portion of your mailpiece was not readily detachable. Reason for nondelivery:

☐ Moved, left no address ☐ No such street ☐ No such number
☐ Refused ☐ Attempted, not known ☐ Unclaimed

PS Form **3547,** June 1995

Oregon
WATER RESOURCES
DEPARTMENT
Commerce Building
158 12th Street NE
Salem, OR 97310-0210

Address Service Requested

CERTIFIED
#P5638S
SALEM OR 97301 21 05 10/08/99
RETURN RECEIPT REQUESTED

SALEM OCT-6'99 OR
U.S.POSTAGE ≈2.98≈
PB METER 6855335

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BST Inc.
701 Main Street, Suite 209
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97045X1800 97210/0210

Oregon
John A. Kitzhaber, M.D., Governor

Water Resources Department
Commerce Building
158 12th Street NE
Salem, OR 97310-0210
(503) 378-3739
FAX (503) 378-8130

**CERTIFIED MAIL**
**Return Receipt Requested**

October 6, 1999

Attn: Vickie Nogle
City of Hubbard
3720 2nd Street
Hubbard, Oregon 97032

RE: Application File G-14954

Dear Vickie:

On **July 23, 1999**, an Initial Review was sent from the Department which requested evidence of publication of the proposed use in a local newspaper. The publication is necessary to complete your application for water use. The following information still must be received:

- An affidavit of publication from a newspaper having general circulation in the area of proposed diversion and use. ***The notice must run in the newspaper for three consecutive weeks.*** ( I have copied and attached the portion of the Initial Review that contained a template for the required publication.)

Please submit this item by **November 6, 1999**. If we do not receive the item requested above by this date, we may propose rejection of your application consistent with ORS 537.153. If your application is rejected, any fees submitted in excess of the examination fee will be refunded; however, the examination fee is non-refundable and will not be returned. In addition, the priority date associated with your application will be lost.

Should you have any questions regarding your application or the required materials listed above, or to request an extension of time, please call me at 1-800-624-3199, ext. 266.

Sincerely,

Russell W. Klassen
Senior Water Rights Specialist

enclosure: a copy of a portion of the Initial Review
cc: Watermaster District 16
BST Inc.
701 Main Street, Suite 209
Oregon City, OR 97045

**Public Notice Requirement:**

ORS 537.130 (3) requires notice to all affected landowners. ORS 537.130 (4) allows this notice to be made through publication for three consecutive weeks in a local newspaper if there are more than 25 landowners involved. The following language should be used:

NOTICE OF WATER USE REQUEST

Regarding application: G-14954

The Oregon Water Resources Department is evaluating the request by City of Hubbard to use 0.67 cubic feet per second of the waters of a well in the Mill Creek Basin for municipal purposes. The proposed source of water is located within Marion County, Township 4S, Range 1W. This process is to determine if the request is in compliance with state water laws and regulations. Public participation and comment is encouraged.

ORS 537.130 (3) requires notice to all affected landowners. ORS 537.130 (4) allows this notice to be made through publication for three consecutive weeks in a local newspaper if there are more than 25 landowners involved.

For further information contact the Water Resources Department Water Rights Information Group at 1 (800) 624-3199 ext. 499. Written information requests may be addressed to the Oregon Water Resources Department at 158 12th Street NE, Salem, Oregon 97310-0210.

**If A Permit Is Issued It Will Likely Include The Following Conditions:**

1. Measurement, recording and reporting conditions:

   A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order.

   B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

   C. The Director may require the permittee to keep and maintain a record of the amount (volume) of water used and may require the permittee to report water use on a periodic schedule as established by the Director. In addition, the Director may require the permittee to report general water use information, the periods of water use and the place and nature of use of water under the permit. The Director may provide an opportunity for the permittee to submit alternative reporting procedures for review and approval.

**SENDER:**

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
- ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

BST Inc.
701 Main Street, Suite 209
Oregon City, OR 97045

G-14954

4a. Article Number P 56385

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature *(Addressee or Agent)*

8. Addressee's Address *(Only if requested and fee is paid)*

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt