

**CLAIM OF  
BENEFICIAL USE  
for Groundwater Permits  
claiming more than 0.1 cfs**



**Oregon Water Resources Department**  
725 Summer Street NE, Suite A  
Salem, Oregon 97301-1266  
(503) 986-0900  
[www.oregon.gov/OWRD](http://www.oregon.gov/OWRD)

**A fee of \$345 must accompany this form for permits  
with priority dates of July 9, 1987, or later.**

**Enter the date the priority date of the permit:**

**03/11/2019**

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

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

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at:

<https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

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

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

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

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

If you have questions regarding the completion of this form, please call 503-986-0900.

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

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

**SECTION 1**

**GENERAL INFORMATION**

**1. File Information:**

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
<b>G-18800</b>	<b>G-18350</b>	<b>T-</b>

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

APPLICANT/BUSINESS NAME <b>Crossroads Land, LLC</b> (c/o Blake Crosby)		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS <b>8648 Crosby Rd NE</b>			
CITY <b>Woodburn</b>	STATE <b>OR</b>	ZIP <b>97071</b>	E-MAIL <i>*all communications via mail</i>

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

**3. Permit holder of record (this may, or may not, be the current property owner): *Same as owner***

APPLICANT/BUSINESS NAME <b>Crossroads Land, LLC</b> (c/o Blake Crosby)		
ADDRESS <b>8648 Crosby Rd NE</b>		
CITY <b>Woodburn</b>	STATE <b>OR</b>	ZIP <b>97071</b>

ADDITIONAL PERMIT HOLDER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

**4. Date of Site Inspection:**

<b>11/13/2025</b>
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**5. Person(s) interviewed and description of their association with the project:**

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Blake Crosby</b>	<b>Oct-Nov 2025</b>	<b><i>General Manager</i></b>
<b>Lester Kirk</b>	<b>November 13, 2025</b>	<b><i>Farm Manager</i></b>

**6. County:**

<b>Marion</b>
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**7. If any property described in the place of use of the permit is excluded from this report, identify the owner of record for that property (ORS 537.230(5)): **N/A****

OWNER OF RECORD			<b>Received</b> <b>DEC 11 2025</b> <b>OWRD</b>
ADDRESS			
CITY	STATE	ZIP	

Add additional tables for owners of record as needed

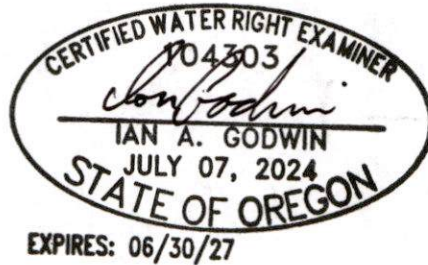


**SECTION 2**  
**SIGNATURES**

CWRE Statement, Seal and Signature

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

Seal and Signature




CWRE NAME <b>Ian Godwin (CwM-H2O, LLC)</b>		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS <b>311 B Avenue, Suite P</b>			
CITY <b>Lake Oswego</b>	STATE <b>OR</b>	ZIP <b>97034</b>	E-MAIL <b>igodwin@cwmh2o.com</b>

Permit Holder of Record Signature or Acknowledgement

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

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

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	<b>Blake Crosby</b>	<b>General Manager</b>	<b>11/26/25</b>

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**SECTION 3**  
**CLAIM DESCRIPTION**

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**1. Point of appropriation name or number:**

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
<b>POA-1</b>	<b>MARI-67957</b>	<b>120925</b>

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

**2. Point of appropriation source, if indicated on permit:**

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
<b>POA-1</b>	<b>Quaternary-Late Tertiary Sediment Aquifers: Well in Little Pudding River Basin</b>	<b>Pudding River → Molalla River → Willamette River</b>

**3. Developed use(s), period of use, and rate for each use:**

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
<b>POA-1</b>	<b>Irrigation</b>	<b>Hops</b>	<b>Mar – Oct</b>	<b>0.42 cfs</b>
<b>Total Quantity of Water Used</b>				<b>0.42 cfs (189 gpm)</b>

*\*This POA is also approved under Permit G-18918 for 1.29 cfs.*

**4. Provide a general narrative description of the distribution works.** This description must trace the water system from **each** point of appropriation to the place of use:

**Water produced at POA-1 (located within the place of use) is pumped through a series of buried and above-ground mainlines and irrigation lines throughout the place of use (see claim map, Attachment 1). Water is applied using one line of drip irrigation tape along each row of hops.**

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

**5. Variations:**

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below. YES **NO**

(e.g. "The permit allowed three points of appropriation. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

**The POA and POU were developed as described.**

**6. Claim Summary:**

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
<b>POA-1</b>	<b>0.42 cfs*</b>	<b>0.413 cfs</b>	<b>1.03 cfs**</b>	<b>Irrigation</b>	<b>25.4 ac</b>	<b>25.4 ac</b>

*\*POA-1 is also an authorized source under G-18918 on the adjacent lot (same ownership). This is the rate authorized under only this water right, Permit G-18350.*

*\*\*Pumping observed for 15 minutes during site survey. Outside of irrigation season and not hooked up to irrigation.*



## SECTION 4 SYSTEM DESCRIPTION

Are there multiple POAs?

YES NO

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

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

POA-1 (MARI-67957)

### A. Place of Use

1. Is the right for municipal use?

YES NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
5S	2W	WM	22	NESE	-	-	Irrigation	12.9	-
			23	NWSW	-	-		12.5	-
Total Acres Irrigated								25.4 ac	

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (GLOT), Quarter Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, GLOT, and QQ.

### B. Groundwater Source Information (Well)

1. Is the appropriation from a well?

YES NO

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

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

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
16" (+2-297.33 ft) 12" (258-343 ft)	Casing: 297.33 ft Liner: 343 ft	343 ft	04/30/2018	-	Blake Crosby	Ivan Grossen

4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

The well log for POA-1 is included as Attachment 2.

### C. Groundwater Source Information (Sump)

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

YES NO

### D. Diversion and Delivery System Information

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

1. Is a pump used?

YES NO

If "NO" items 2 through item 9 may be deleted.

#### 2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Goulds Water Tech	12CMC	MG2624	Turbine	5"	5"

#### 3. Motor Information:

MANUFACTURER	HORSEPOWER
NEMA Premium	100 HP

#### 4. Theoretical Pump Capacity – Pump at Well:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO GROUND SURFACE (THE DEPTH TO WATER FROM THE GROUND SURFACE MEASURED AT THE WELL DURING PUMPING)	LIFT TO PLACE OF USE (THE LIFT FROM THE GROUND SURFACE AT THE WELL TO THE PLACE OF USE)	TOTAL PUMP OUTPUT (IN CFS)
100 HP	50 PSI*	~115 ft (pumping drawdown)	~0 ft (level site)	~2.91 cfs

\*The well's VFD maintains a constant pressure of 50 PSI.

#### 5. Provide pump calculations:

$Q_{\text{Pump}} = \frac{(\text{horsepower})(\text{pump efficiency})}{(\text{total head in feet})} = Q \text{ in cfs}$
$Q_{\text{Pump}} = \frac{(100 \text{ HP})(7.04 \text{ for turbine pump})}{(\sim 127 \text{ ft pressure head} + 115 \text{ ft lift head})} = 2.91 \text{ cfs}$

#### 6. Measured Pump Capacity (using meter if meter was present and system was operating):

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
31,929.25 gal	38,870.28 gal	15.0 minutes	1.03 cfs (463 gpm)

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~~7. Theoretical Pump Capacity — Pump at Sump:~~

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO GROUND SURFACE (THE LIFT FROM THE WATER SURFACE TO THE PUMP)	LIFT TO PLACE OF USE (THE LIFT FROM THE PUMP TO THE PLACE OF USE)	TOTAL PUMP OUTPUT (IN CFS)

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

8. Provide pump calculations:

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)

YES NO

10. Is the distribution system piped?

If "NO" items 11 through item 16 may be deleted.

11. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
~4"	~7,700 ft	PVC	Buried

\*The distribution system is tied into the adjacent property covered by Permit G-18918 from the same well.

12. Lateral or Handline Information: N/A

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND

13. Sprinkler Information: N/A

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

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

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**14. Drip Emitter Information: N/A**

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)

**15. Drip Tape Information:**

DRIPPER SPACING IN INCHES	GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	ADDITIONAL INFORMATION
30"	0.28 gpm <sup>1</sup>	~66,250 ft <sup>2</sup>	~66,250 ft <sup>3</sup>	~0.413 cfs	Approx. 53 rows of hops with an average length of ~1,250 ft per row. 1 line of tape per row.

1. Based on the manufacturer's specifications.
2. Approx. 53 rows of hops, oriented east-west, with an average length of approx. 1,250 ft.
3. Farmer water the entire place of use at one time.

**16. Pivot Information: N/A**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)

**E. Storage**

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

YES NO

**F. Gravity Flow Pipe**

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

1. Does the system involve a gravity flow pipe?

YES NO

**G. Gravity Flow Canal or Ditch**

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

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

YES NO

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

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## SECTION 5 CONDITIONS

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

### 1. Time Limits:

Permits and extension final orders contain any or all of the following dates: the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use was to be completed. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or permit extension order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	02/12/2020		
BEGIN CONSTRUCTION (A)	02/12/2025	01/03/2018	Well constructed by Ivan Grossen (see Attachment 2)
COMPLETE CONSTRUCTION (B)	-	04/30/2018	
COMPLETE APPLICATION OF WATER (C)	02/12/2025	October 2024	Finished developing full beneficial use of water by end of 2024 season.

\* MUST BE WITHIN PERIOD BETWEEN PERMIT, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

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

YES NO

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

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

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

b. Were the Progress Reports submitted? YES NO

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

### 3. Initial Water Level Measurements:

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

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

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

March

c. Was the measurement submitted to the Department? YES NO

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
03/26/2019	CWRE	E-Tape	39.21 ft BLSD

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

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

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

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

March

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

- d. If "YES", were those measurements submitted to the Department? **YES** **NO**

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

#### 5. Pump Test:

- a. Did the permit require the submittal of a pump test? **YES** **NO**

Ground water permits with priority dates on or after **December 20, 1988**, require the submittal of a pump test prior to issuance of a certificate. In some cases, the permit holder may qualify for a multiple well exemption or an unreasonable burden exemption.

For additional information regarding pump tests see:

<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

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

- b. Has the pump test been previously submitted to the Department? **YES** **NO**

- c. Is the pump test attached to this claim? **YES** **NO**

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

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

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

#### 6. Measurement Conditions:

- a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? **YES** **NO**

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

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

- b. Has a meter been installed? **YES** **NO**

- c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POA-1	Seametrics	-	Working	38,873.28 gal	Prior to Nov 2022

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**7. Recording and reporting conditions:**

a. Is the water user required to report the water use to the Department? **YES** **NO**

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

b. Have the reports been submitted? **YES** **NO**

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

**8. Other conditions required by some permits, permit amendment final orders, or extension final orders:**

a. Were there special well construction standards? **YES** **NO**

b. Was submittal of a ground water monitoring plan required? **YES** **NO**

c. Was submittal of a water management and conservation plan required? **YES** **NO**

d. Was a Well Identification Number (Well ID tag) assigned and attached to the well? **YES** **NO**

WELL ID #	DATE ATTACHED TO WELL
L-120925	2018

e. Other conditions? **YES** **NO**

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s) in the box below. If the condition required the approval of a plan, submit documentation that the plan was approved.

**8d: A well tag has been installed.**

**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Attachment 1	Claim of Beneficial Use Map
Attachment 2	Well Log for POA-1 (MARI-67957)
Attachment 3	Evidence of Use for Permit G-18350

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## SECTION 7

### CLAIM OF BENEFICIAL USE MAP

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

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

**This claim and claim map were prepared based on information provided by the Applicant, collected in the field during the CWRE site survey, and based on aerial imagery, including from the following dates and sources:**

- July 2016 – Google Earth
- July 2017 – Google Earth
- July 2018 – Google Earth
- May 2019 – Google Earth
- August 2020 – Google Earth
- April 2021 – Maxar
- July 2022 – Google Earth
- May 2024 – Airbus
- June 2024 – Google Earth

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## Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

(Reminder: Incomplete maps and/or claims may be returned.)

- ☒ Map on polyester film
- ☒ Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- ☒ Township, Range, Section, Donation Land Claims, and Government Lots
- ☒ If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- ☐ ~~Locations of fish screens and/or fish by-pass devices in relationship to point of diversion~~
- ☒ Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- ☒ Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- ☒ Point(s) of diversion or appropriation (illustrated and coordinates)
- ☒ Tax lot boundaries and numbers
- ☒ Quarter-Quarters illustrated and named (NE NE, NW NE, etc.)
- ☐ ~~Source illustrated if surface water~~
- ☒ Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- ☒ Application and permit number or transfer number
- ☒ North arrow
- ☒ Legend
- ☒ CWRE stamp and signature

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## STATE OF OREGON

## WATER SUPPLY WELL REPORT

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

WELL I.D. LABEL# L 120925

START CARD # 215093

ORIGINAL LOG #

## (1) LAND OWNER

Owner Well I.D.

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First Name Blake Last Name Crosby

Company crossroads llc

Address 8648 crosby rd. NE

City Woodburn State OR Zip 97071

## (2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

## (2a) PRE-ALTERATION

Dia + From To Gauge Std Plstc Wld Thrd

Casing: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Material From To Amt sacks/lbs

Seal: ☐ ☐ ☐ ☐ ☐ ☐

## (3) DRILL METHOD

☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger ☐ Cable Mud☐ Reverse Rotary ☐ Other

## (4) PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Community☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering☐ Thermal ☐ Injection ☐ Other

## (5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 343 ft.

## BORE HOLE

## SEAL

sacks/lbs

Dia	From	To	Material	From	To	Amt	lbs
20	0	37	Bentonite Chips	0	37	41	S
16	37	343			Calculated	29	
					Calculated		

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other Our 690-210-0340

Backfill placed from ft. to ft. Material

Filter pack from 297 ft. to 343 ft. Material 1/8 to 3/8 Size pea gravel

Explosives used: ☐ Yes Type Amount

## (5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Pounds Actual Amount Pounds

## (6) CASING/LINER

Casing Liner Dia + From To Gauge Std Plstc Wld Thrd

<input checked="" type="checkbox"/>	<input type="checkbox"/>	16	<input checked="" type="checkbox"/>	2	297.33	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	12	<input type="checkbox"/>	258	343	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 297.33Temp casing ☐ Yes Dia From To

## (7) PERFORATIONS/SCREENS

Perforations Method torch

Screens Type v wire Material stainless

Perf/S	Casing/Screen	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/pipe size
Screen		12	300.17	304.42	.07			12
Screen		12	304.42	308.42	.15			12
Screen		12	308.42	312.8	.25			12
Perf		12	313	324	.375	6	132	12
Perf		12	324	336	.5	6	142	12

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

☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
1,100	81.3	160	2
1,100	83.2	160	5

Temperature 53 °F Lab analysis ☐ Yes ByWater quality concerns? ☐ Yes (describe below) TDS amount 88 ppm

From	To	Description	Amount	Units

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

County MARION Twp 5 S N/S Range 2 W E/W WM

Sec 23 NW 1/4 of the SW 1/4 Tax Lot 2000

Tax Map Number Lot

Lat " or " DMS or DD

Long " or " DMS or DD

☐ Street address of well ☒ Nearest address

7645 Jensen Rd. Gervais, OR

## (10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)

Existing Well / Pre-Alteration			
Completed Well	04-01-2018		37.7

Flowing Artesian? ☐ Dry Hole? ☐

## WATER BEARING ZONES

Depth water was first found 121

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

01-25-2018	121	149	250		34
02-06-2018	188	205	500		35.3
02-20-2018	229	243	300		36.2
03-02-2018	299	235	2,000		37.7

## (11) WELL LOG

Ground Elevation

Material	From	To
top soil	1	2
clay brown	2	20
clay grey	20	37
clay dark grey	37	72
clay dark grey, sandy hard	72	78
sand/silt, dark grey	78	109
clay brown	109	111
clay brown sandy	111	121
gravel 80%, Sand black	121	142
cemented sand and gravel	142	149
clay grey sandy	149	152
sand and silt, greenish grey	152	170
silt grey	170	188
sand and gravel	188	201
sand black	201	205
clay grey sticky	205	211
clay grey, med	211	229
gravel and sand, some clay	229	243
sand black	243	246

Date Started 01-03-2018

Completed 04-30-2018

## (unbonded) Water Well Constructor Certification

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

License Number 1704

Date 05-09-2018

Signed

## (bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 783

Date 05-09-2018

Signed

Contact Info (optional)



**WATER SUPPLY WELL REPORT -**  
**continuation page**

ORIGINAL LOG #

## Water Quality Concerns

MARI 6795

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
					○	○	□	□
					○	○	□	□
					○	○	□	□

Material	From	To	Amt	sacks/lbs
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### (10) STATIC WATER LEVEL

## SEAL

sacks/

Dia	From	To	Material	From	To	Amt	sacks/ lbs
					Calculated		
					Calculated		
					Calculated		
					Calculated		

## FILTER PACK

From	To	Material	Size
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**(11) WELL LOG**

Material	From	To
clay , greenish gery	246	249
clay brown	249	252
clay dark grey	252	257
sand black	257	259
clay dark grey	259	269
claystone grey	269	274
silt dark greenish grey	274	279
sand black	279	286
clay greenish grey	286	293
claystone soft greenish grey	293	296
silt greenish grey	296	299
gravel 70%, sand	299	335
clay greenish grey	235	343

	RECEIVED
	JUN 13 2018
	OWRD

## Perf/S Casing/ Screen

green	Liner	Dia	From	To	width	length	slots	pipe size
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[illegible]

## Comments/Remarks

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
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bottom plate 343  
lifting bar at 341.34

3" side band welded on outside of top end of 12" pipe to reinforce with centering guilds

#5

Received  
DEC 11 2025

OWRD





July 2018 (Google Earth Imagery)  
-prior to permit issuance



August 2020 (Google Earth Imagery)  
-hop rows being developed



July 2022 (Google Earth Imagery)  
-irrigation in use



June 2024 (Google Earth Imagery)  
-irrigation in use

Received  
 DEC 11 2025  
 OWRD



311 B Ave, Suite P  
 Lake Oswego, Oregon 97034  
 (503) 954-1326

### ATTACHMENT 3 Evidence of Use for Permit G-18350

The approximate place of use boundary for Permit G-18350 is shown by the white outline.