

CLAIM OF BENEFICIAL USE for Ground Water Permits claiming 0.1 cfs or less



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
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:

May 15, 2019

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.

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>

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SECTION 1 GENERAL INFORMATION

1. File Information:

APPLICATION # G-18808	PERMIT # (IF APPLICABLE) G-18400	PERMIT AMENDMENT # (IF APPLICABLE)
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Pearlstad Vineyard, LLC Ken Pearlman, Manager		PHONE NO. 541.309.6752 Ken Pearlman	ADDITIONAL CONTACT NO.
ADDRESS 6675 Bethel Road			
CITY Rickreall	STATE OREGON	ZIP 97371	E-MAIL ken@pearlstad.com

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

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

PERMIT HOLDER OF RECORD Pearlstad Vineyard		
ADDRESS 6675 Bethel Road		
CITY Rickreall	STATE OREGON	ZIP 97371

ADDITIONAL PERMIT HOLDER OF RECORD None		
ADDRESS		
CITY	STATE	ZIP

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4. Date of Site Inspection:

October 22, 2025

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Ken Pearlman	October 22, 2025	Manager of LLC
Ezéquiél Arcos	October 22, 2025	Vineyard Manager

6. County:

Polk

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

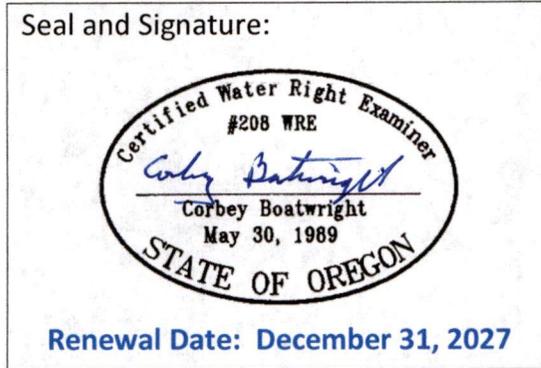
OWNER OF RECORD None		
ADDRESS		
CITY	STATE	ZIP

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.



CWRE NAME Corbey Boatwright		PHONE NO. 503.363.9225	ADDITIONAL CONTACT NO.	
ADDRESS Boatwright Engineering, Inc. 2613 12th Street SE				
CITY Salem	STATE OR	ZIP 97302	CITY Salem	

Permit Holder's 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
	Kenneth Neil Pearlman	Manager, Pearlstad Vineyard, LLC	2-6-26

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SECTION 3

CLAIM DESCRIPTION

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1. Point(s) of Appropriation (POA):

POA NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well 1	POLK 54111	L 128065

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

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

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
Well 1	Irrigation	Vineyard	July 1 – Sept 30	8.5 gpm (0.02 cfs)
Total Quantity of Water Used				8.5 gpm (0.02 cfs)

3. 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:

A buried 2" pipe runs from the well, north to the bulge tanks area. The pipe emerges west of the south 5,000 gal bulge tank and continues to the east with a 1" pipe, through a 5/8" meter and a 10 gpm flow restrictor, then into the south tank. From that tank, water is distributed through a network of above ground pipes to the four additional 5,000 gal bulge tanks to the north. A 2" pipeline draws water from the bulge tanks and runs south to the edge of the vineyard. The vineyard rows are aligned from northeast to southwest at an approximately 65° angle. The 2" pipeline extends along the north and east sides of the field to reach the east end of each of the rows of vines. The vineyard is divided into 8 irrigation zones with each having a separate manifold with 1-1/2" lateral lines that supply the drip emitter lines. The emitters deliver at 1/2-gal per hour and the maximum number used is 1000. The south end of the vineyard crests at the center and is downhill to both the east and west. A portable pump is used to prime the lateral lines. It is turned off when 5-10 psi is reached. Once primed, the water flows by gravity. All pipes in the vineyard flow by gravity.

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).

4. Variations:

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below.

YES

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

The permit authorized the use of 0.03 cfs (13.46 gpm). The permit holder's well pumps 0.019 cfs (8.5 gpm). This was confirmed by both the measured and calculated data.

5. Claim Summary:

POD / POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well 1	0.03 cfs (13.5 gpm)	0.019 cfs (8.5 gpm)	0.019 cfs (8.5 gpm)	Irrigation	17.7	17.7

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SECTION 4
SYSTEM DESCRIPTION

Are there multiple POAs?

NO

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

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

Well 1 Polk 54111 L-128065

A. Place of Use

Attach Claim of Beneficial Use map.

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

B. Groundwater Source Information (Well)

1. Is the appropriation from a well?

YES

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

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

Remove top of well cap

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See	Attached	Well	Log	POLK 54111		

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.

None

C. Groundwater Source Information (Sump)

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

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

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2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Grundfos	98315253	Unknown	Submersible	2"	2"

3. Motor Information:

MANUFACTURER	HORSEPOWER
Grundfos	1 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)
1	75 psi	146'	17'	0.019 cfs (8.5 gpm)

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

5. Provide pump calculations:

$$75 \text{ psi} (2.54) = 190.5$$

$$Q = \frac{1(6.61)}{146+17+190.5} = \frac{6.61}{353.5} = 0.019 \text{ cfs} = 8.5 \text{ gpm}$$

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)
0175584.25	0175592.75	1 min	8.5 gpm (0.019 cfs)

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)
NA				

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

8. Provide pump calculations:

NA

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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)
NA			

10. Is the distribution system piped?

YES

11. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2"	1770'	PVC	Buried

12. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
1-1/2"	573'	PVC	Buried
0.620" (5/8")	27,570'	PE (TORO Blue Stripe Clipperhose)	Above Ground

13. Sprinkler Information:

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

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

14. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
None Designated (Netafim) (Defined by Emitter Flow Rate in GPH)	14-58 psi	1/2 gph (0.008 gpm)	6893	1000 (Zone 4)	0.019 cfs (8.5 gpm)

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
NA					

16. Pivot Information:

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

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E. Storage

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

YES

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

YES

NO

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Five - PE Tanks	5,000 gal/each = 25,000 gal	Above

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

2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)
2"	PVC	150	39'	280'	0.1393'/ft	Exceeds outflow
1-1/2"	PVC	150	5'	282'	0.0177'/ft	Exceeds outflow

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3. Provide calculations:

The numbers in F. 2. are from Zone 1, near the top.

Even though the pipes are under gravity flow, the total outlet is small. The water backs up in the pipe to where the pipe acts as a pressure pipe.

There are sections in some of the zones that create air locks that need to be pump pressurized to push the air over high points in the line. Once that is accomplished, the system is then gravity fed.

Zone 1

2,552 LF with drip emitters at 4' OC, 0.5 GPH

Maximum flow $2552/4 \times 0.5/60 = 5.32$ gpm or 0.0118 cfs

If pipes were to flow half full:

$Q = VA$

A = half pipe volume $A_2 = 0.0109$ SF

Used online "calctool"

<https://www.calctool.org/fluid-mechanics/hydraulic-radius#what-is-the-hydraulic-radius>

$v = 1.31 (c) (r^{0.63}) (s^{0.54})$

2" PVC pipe

$c = 150$

$r = 0.04888$ Ft

$s = 0.1393$ '/ft

$v = 9.153$ ft/s

$Q = 0.0998$ cfs or 44.8 gpm > 5.32 gpm water will back up in pipe

To flow by gravity, the water in the pipe would need to have a depth of flow of 0.336 inches

$A_2 = 0.002304$ SF

$r = 0.01666$ Ft

$v = 5.1372$ ft/s

FOR 1 1/2" PVC pipe

Upper drip line 64 LF at 4' OC 0.5 GPH

Flow $64/4 \times 0.5/60 = 0.133$ gpm or 0.0003 cfs

To flow by gravity, the water in the pipe would need to have a depth of flow of 0.101 inches

$A_{1.5} = 0.000356$ SF

$r = 0.005433$ Ft

$s = 0.177$ '/ft

$v = 0.833$ ft/s

$Q = 0.133$ gpm

All Zones below Zone 1 will have a head resulting in the pipes acting under a pressure system.

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

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)
None Taken			

Attach measurement notes.

G. Gravity Flow Canal or Ditch

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

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

NO

H. Additional notes or comments related to the system:

The northing and easting dimension for the location of the well on the permit are in error, due to the fact that the preparer of the application map erroneously mistook the East line of the Harvey DLC for the Centerline of the Section.
The ownership area and the irrigation area locations suffer from the same error. There is no ownership or irrigation in the NE ¼ of Section 22. The ownership is in TL 6.4.22 201 which is wholly within the E ½ of the NW ¼. It does not extend north, into Section 15. That is a separate tax lot.

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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 any 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 extension final order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	04-28-2020		
BEGIN CONSTRUCTION (A)	04-28-2025	04-28-2020	**Well 1 was constructed 03-07-2018, prior to the construction window defined in the permit. It has not been altered and is the sole water source authorized for this permit.
COMPLETE CONSTRUCTION (B)	None	09-30-2020	Meter, distribution pipe, & application system fully installed.
COMPLETE APPLICATION OF WATER (C)	04-28-2025	09-30-2021	Water put to beneficial use in full compliance with permit conditions, including commencement of static water level measuring and reporting.

* 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)? NO

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? YES

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

March

c. Was the measurement submitted to the Department? YES

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

4. Annual Static Water Level Measurements:

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

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

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

March

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

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

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

5. Pump Test:

a. Is a pump test required? YES

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

For additional information regarding pump tests see:

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

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

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

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

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

****The Claim 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

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 appropriation.

b. Has a meter been installed? YES

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1	MasterMeter	242243746	Working	0,175,600 gal	A Replacement Meter was installed May 2025

7. Recording and reporting conditions:

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

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

- a. Were there special well construction standards? **NO**
- b. Was submittal of a ground water monitoring plan required? **NO**
- c. Was a Well Identification Number (Well ID tag) assigned and attached to the well? **YES**

WELL ID #	DATE ATTACHED TO WELL
L-128065	03-15-2018

- d. Other conditions? **YES**

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

Condition 3. *Groundwater production shall be only from the marine sedimentary rock groundwater reservoir.*
In Compliance. **The existing well is the one that was evaluated and approved by the OWRD Groundwater Review for this permit. No changes, or modifications, have been made to the well since its construction in 2018.**

**SECTION 6
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use	Map
Well Tag Verification	Photo - dated and L# listed
Irrigation Zones	Illustrates 8 IR zones w/ground elevations from DOGAMI Lidar at each corner of the zones.
OWRD Pump Form	Pump Test report prepared by Stettler Supply Co., Jan 8, 2026
OWRD Pump Form	Cover Sheet, only. Water Right Application & Permit numbers identified. Added by Corbey Boatwright, CWRE.

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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.

The location of the well was established using Polk County Survey Record 15911, which identifies the 3-inch aluminum cap at the North 1/4 corner of Section 22. The location of the well was field measured from this monument. Google Earth aerial photography, dated 07/13/2022 and 06/18/2024, were used to establish the extent of the vineyard irrigation area.

NOTE:

The northing and easting dimensions for the location of the well on the permit are in error. This is due to the fact that the preparer of the application map erroneously mistook the East line of the Harvey DLC for the Centerline of Section 22.

The ownership area and the irrigation area locations suffer from the same error. There is no ownership or irrigation in the NE 1/4 of Section 22.

Tax Lot 6.4.22 201, which is identified on the application map as the requested permit area, is wholly within the E 1/2 of the NW 1/4. The tax lot does not extend north, into Section 15. That north property is under the same ownership, but is a separate Tax Lot that is completely tree covered and does not have any water rights located upon it.

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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 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 an

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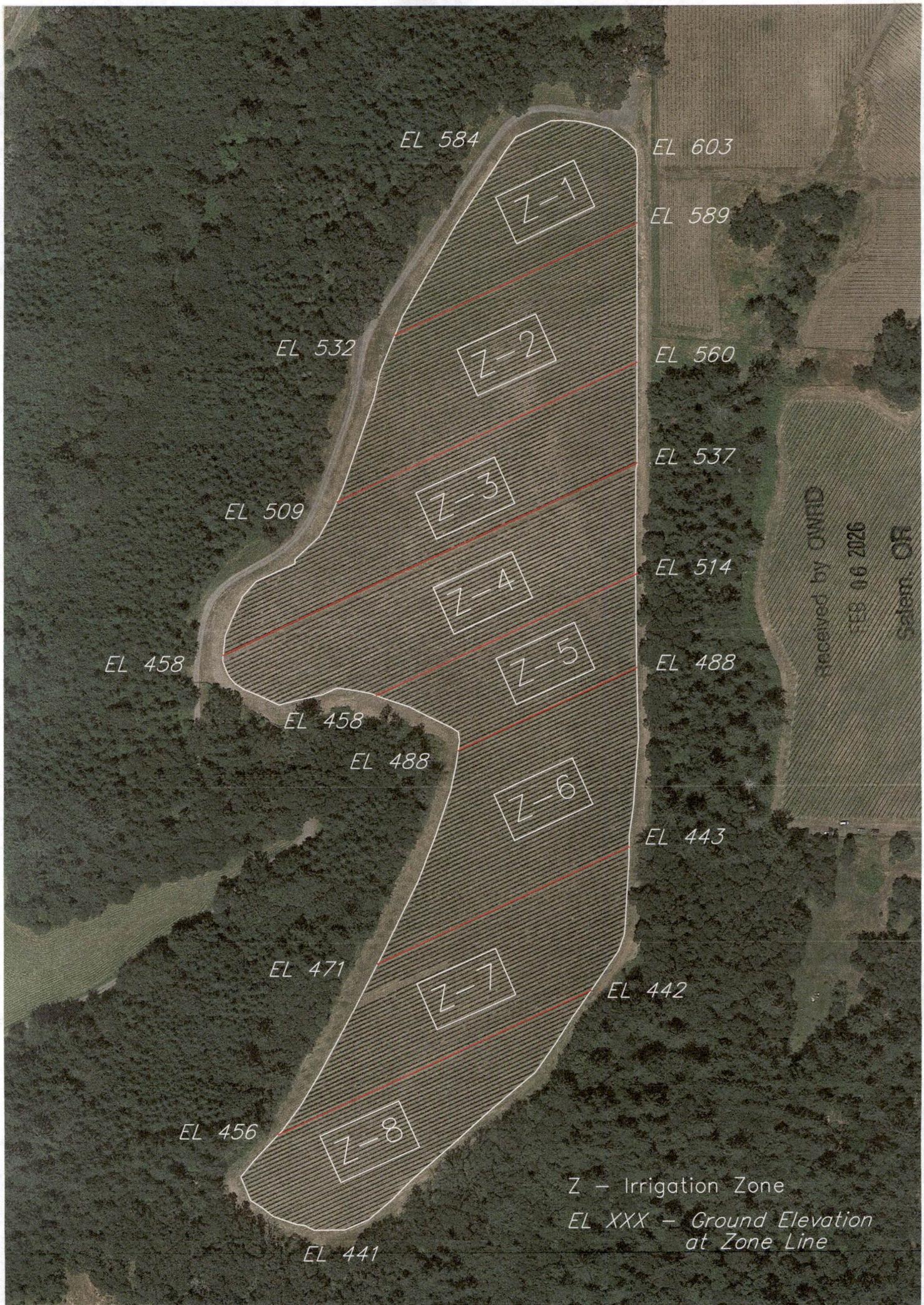


WELL TAG VERIFICATION

Pearlstad Vineyard - PERMIT G-18400
WELL 1
Well Log: POLK 54111
Tag: L-128065

Photo Date: October 22, 2025, Claim of Beneficial Use field visit
Photo by: Corbey Boatwright, CWRE No. 208

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EL 584
EL 603
EL 589
EL 532
EL 560
EL 509
EL 537
EL 458
EL 514
EL 488
EL 458
EL 488
EL 443
EL 471
EL 442
EL 456
EL 441

Z-1

Z-2

Z-3

Z-4

Z-5

Z-6

Z-7

Z-8

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Z - Irrigation Zone
EL XXX - Ground Elevation
at Zone Line



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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Pearlstad Vineyard LLC
6075 Bethel Road Rickreall, OR 97371

Transaction Type: COBU

Fees Received: \$ 345.00

Cash Check: Check No. 1015

Name(s) on Check: Pearlstad Vineyard LLC

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,
OWRD Customer Service Staff

Submission received by: Sarah Benham
(Name of OWRD staff)

Instructions for OWRD staff:

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Fold and put one copy of the Submission Receipt with check/cash into the Safe slot. Place the other copy of the Submission Receipt with submission (application/other document) in the top drawer of filing cabinet.