

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



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

**A fee of \$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:

November 23, 1994

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

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Salem, OR

1. File Information:

APPLICATION # G-13890	PERMIT # (IF APPLICABLE) G-18899	PERMIT AMENDMENT # (IF APPLICABLE) T-8864, T-14331
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Kurtis T. and Brenda D. Loen		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS 19205 SW Cipole Rd			
CITY Sherwood	STATE OR	ZIP 97140	E-MAIL

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

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

PERMIT HOLDER OF RECORD Loen Nursery Co.			
ADDRESS 19205 SW Cipole Rd			
CITY Sherwood	STATE OR	ZIP 97140	

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

February 4, 2026

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Gustavo Aguilar	February 4, 2026	Manager

6. County

Washington County

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

OWNER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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**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.



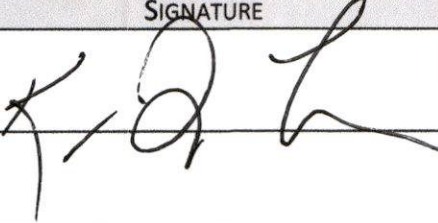
CWRE NAME Doann Hamilton		PHONE NO. (503) 349-6946 cell	ADDITIONAL CONTACT NO. 503-931-0210
ADDRESS 15333 Pletzer Rd. SE			
CITY Turner	STATE OR	ZIP 97392	E-MAIL phgdmh@gmail.com

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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
	Kurtis T Loen	President	4-10-26

SECTION 3

CLAIM DESCRIPTION

1. Point of appropriation name or number:

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well 2	WASH 50714	L-1713
Well 6	WASH 50715	L-1712

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

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

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
Well 2	Tualatin River Basin	Willamette River
Well 6	Tualatin River Basin	Willamette River

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

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
Well 2	Agricultural use for Nursery Stock	NA	Year round	0.11 cfs
Well 6		NA		0.18 cfs
Total Quantity of Water Used				0.29 cfs

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

Water is conveyed from Well 6 (WASH 50715) using a 5 Hp submersible pump to convey water out the top of the casing well seal through approximately 2 feet of 2 inch galvanized pipe with a meter before elbowing down about 3 feet into the ground where it connects to the 2 inch buried PVC mainline heading south connecting to Well 2.

Water is conveyed from Well 2 (WASH 50714) using a 5 Hp submersible pump to convey water out the top of the casing well seal through approximately 2 feet of 2 inch galvanized pipe with a meter before elbowing down about 3 feet into the ground where it connects to the 2 inch buried PVC mainline from Well 6. The 2 inch buried PVC continues from Well 2 and turns west to the east side of the shed north of Reservoir B. At that location, the 2 inch PVC mainline elbows south and above ground, discharging the water from Well 6 and Well 2 into Reservoir B.

Water from Reservoir B has been pumped in the past with two centrifugal pumps but now only one is being used. The 20 Hp centrifugal pump conveys water through 8 inch poly reinforced flex hose from the 10 foot deep reservoir up about 5 feet onto the platform the pump is sitting. The 8 inch poly reinforced flex hose reduces down to 2.5 inch into the pump and discharges into 2 inch PVC pipe to the east about 10 feet and elbows north connecting to 4 inch PVC before entering into the shed. Inside the shed the water goes through 3 filters before splitting into two 4 inch PVC lines exiting the shed on the west side. Both lines extend west about 5 feet before elbowing down and going underground. One of the 4 inch PVC mainline continues east to supply the southernmost section. A 2 inch PVC pipe tees off this 4 inch mainline before the 4 inch PVC goes underground. This 2 inch PVC line heads south then elbows east going underground about 30 feet then up a pole to supply water for filling equipment for fertilizing. The other 4 inch buried PVC mainline elbows north extending to the northern end of the property with three additional 4 inch buried PVC lines teeing off in east-west direction.

For the southernmost portion of the property, a 2 inch PVC above ground lateral comes off the 4 inch buried PVC mainline and supplies a 10 x 20 grid made of one inch above ground PVC. At each corner of the grid a one inch PVC pipe extending up 4 to 8 feet to support Rain Bird Maxi-paw impact sprinklers on top.

For the 4 inch mainline heading north, the first row of laterals consist of 3 inch above ground PVC reducing down to 2.5 inch above ground PVC to the east. The east end of the 2.5 inch PVC continues east below ground and reduces down to buried 2 inch PVC that elbows north above ground at the eastern edge of the property. This 2 inch above ground PVC continues north along the eastern edge of the property to supply different sections of the 10 x 20 grid with the Rain Bird Maxi-paw or spot-spitter layout described below.

The southern row, the 3 inch and 2.5 inch PVC above ground lateral supply a 2 inch above ground PVC running parallel east-west direction. Every 10 feet a one inch polyethylene above ground tubing extends north about 100 feet with two ¼ inch tubing about 3 feet long each approximately every 2 to 3 feet with a green spot spitter at the end of each tubing to be inserted either one to two per potted plant depending on the plant. The west end of this section , the 2 inch above ground PVC supplies the 10 x 20 grid system with the Rain Bird Maxi-paw impact sprinklers extended up about 3 feet on 1 inch PVC pipe.

Additional section within the nursery are supplied by additional 2 inch buried and above ground PVC pipe to supply additional 2 inch above ground PVC with some 1.5 inch PVC to supply additional areas of either the layout for spitters or the 10 X 20 or smaller grid layout for Rain bird Maxi paws. There are in addition, 35 greenhouses. Each green house is supplied by 1 inch PVC line off the 2 inch PVC. Inside the greenhouse, the 1 inch PVC runs above ground along the ground down the middle of each greenhouse with 9 yellow Whiz head sprinklers or Rain Bird Maxi paw on 3 foot high ½ inch PVC pipe in each greenhouse.

Note:

Additional areas round the site are used as staging areas while waiting to ship and are irrigated with additional sprinkler system while they wait.

All areas can be irrigated in any combination to maximize the full water use.

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).

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5. Variations:

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

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

1. Per Extension Final order issued August 18, 2023:

"Use of water under this permit is limited to the water appropriated from WASH 50714, and WASH 50715, AFTER repairs to the wells has been determined sufficient enough to meet the requirement in the permit, being no more than 0.17 cubic feet per second, being 0.08 cfs from WASH 50714, and 0.09 cfs from WASH 50715. Additional, no more than 18.5 acres of agricultural use of nursery stock and other associated uses authorized by the permit, may be developed."

Per the extension final order:

- Authorized Wells 1, 3, 4, 5, 6, C/7, and H/8 have therefore been removed and will not be included in this Claim of Beneficial Use.
- Only the 18.5 acres of agricultural use of nursery stock approved by the extension will be evaluated in this claim of beneficial use.

2. Per Permit Amendment T-14331 final order issued June 10, 2024

Approving the requests to change in point of appropriation from Well 2 (WASH 53928) to WASH 50714.

Per Permit Amendment T-14331 final order:

- This Claim of Beneficial use will only describe Well 2 (WASH 50714) not Well 2 (53928) in this report.

3. After field verifying the location of crops being irrigated, and per Extension FO issued August 18, 2023, the place of use was reduced from the originally authorized acreage.

Original authorized place of use:

2S	1W	21	NE SW	24.0
2S	1W	21	NW SW	<u>2.5</u>
Total:				26.5

Revised place of use:

2S	1W	21	NE SW	17.2
2S	1W	21	NW SW	<u>1.3</u>
Total:				18.5

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6. Claim Summary:

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well 2	Per Extension FO – 0.08 cfs	0.11 cfs	Not measured	Agricultural use for Nursery Stock	Per Extension FO – 18.5 acres	18.5 acres
Well 6	Per Extension FO – 0.09 cfs	0.18 cfs	Not measured			

**SECTION 4a of 4b
SYSTEM DESCRIPTION**

Are there multiple POAs? YES

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

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

Well 2

A. Place of Use

1. Is the right for municipal use? NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
2S	1W	WM	21	NESW	NA	NA	Agricultural use for Nursery Stock	17.2	NA
2S	1W	WM	21	NWSW	NA	NA		1.3	NA
Total Acres Irrigated								18.5	NA

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

B. Groundwater Source Information (Well)

1. Is the appropriation from a well? YES

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

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

After removing the ½ inch PVC angled vent pipe in the access port of the sanitary seal on the east side of the well casing.

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See Well Log (WASH 50714)						

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

See Well Log (WASH 50714)

C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)? NO

If "NO", items 2 through 4 relating to this section may be deleted.
 Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

D. Diversion and Delivery System Information

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

1. Is a pump used? YES

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

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Berkeley	L50P4JMGS-05	Unknown	Submersible	2 inch	2 inch

3. Motor Information:

MANUFACTURER	HORSEPOWER
Pentair	5 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)
5 Hp	0 psi	333.08 feet (from permit condition pump test)	0 feet	0.11 cfs

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

5. Provide pump calculations:

$$Q \text{ Pump} = \frac{(5 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(333.08 \text{ ft lift} + 0 \text{ ft pressure head})} = 0.11 \text{ cfs}$$

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not measured – pump test was being conducted not at full rate			

7. Theoretical Pump Capacity – Pump at Sump:

POND PUMPS	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)
Pond Pump 1	20 Hp	45 psi	15 feet	0 feet	1.02 cfs

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

8. Provide pump calculations:

$$Q \text{ Pump} = \frac{(20 \text{ Hp}) \times (6.61 \text{ ft}^4/\text{sec Hp})}{(15 \text{ ft lift} + 114.3 \text{ ft pressure head})} = 1.02 \text{ cfs}$$

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)
Not running during site visit			

10. Is the distribution system piped?

YES

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

11. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch	~ 5 feet	Galvanized pipe	Above ground
2 inch to Reservoir B	~ 500 feet	PVC	Buried
Rest common with Well 6			
8 inch	~25 feet	poly reinforced flex hose	Above ground and submerged
4 inch	~3,900 feet	PVC	Buried

12. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
3 inch	~ 500 feet	PVC	Above ground
2 inch	~ 5,000 feet	PVC	Above ground and buried
2.5 inch	~ 200 feet	PVC	Above ground and buried
1.5 inch	~ 500 feet	PVC	Above ground
1 inch	~ 20,000 feet	PVC	Above ground and buried
1 inch	~ 15,000 feet	Polyethylene	Above ground
½ inch	~ 500 feet	PVC	Above ground
¼ inch	~ 55,000 feet	Polyethylene	Above ground

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13. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
Rainbird Maxi paw – Blue	45 psi	6.7 gpm	~ 1,500	~ 50	0.75 cfs
Weathermatic Whiz Head - yellow	30 psi	3.4 gpm	~ 900	~90	0.68 cfs

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

14. Drip Emmitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
Spot-Spitter dark green	25 psi	0.22 gpm	~ 15,000	1,300	0.64 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
NA					

16. Pivot Information:

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

E. Storage

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

YES

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

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

NO
YES

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

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Reservoir B – constructed under Permit R-12759 (Certificate 90555)	5.5 feet per COBU submitted 2006 for Permit R-12759	2.4 AF

F. Gravity Flow Pipe

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

1. Does the system involve a gravity flow pipe?

NO

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

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G. Gravity Flow Canal or Ditch

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

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

NO

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

H. Additional notes or comments related to the system:

Even though the COBU submitted 2006 for Permit R-12759 seems to suggest Reservoir A and B are connected by 8 inch conduit, personnel on site says they have to pump water from Reservoir A into Reservoir B.

Also note:

Estimates for total number of sprinkler and emitter that can be used are also in reference to Certificate 90555. The wells help supply additional water to pond when needed to maintain full rate allowance of the certificate when the capacity of the pond reduces in the summer.

SECTION 4b of 4b

SYSTEM DESCRIPTION

Are there multiple POAs?

YES

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

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

Well 6

A. Place of Use

1. Is the right for municipal use?

NO

If “YES” the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
2S	1W	WM	21	NESW	NA	NA	Agricultural use for Nursery Stock	17.2	NA
2S	1W	WM	21	NWSW	NA	NA		1.3	NA
Total Acres Irrigated								18.5	NA

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

B. Groundwater Source Information (Well)

1. Is the appropriation from a well?

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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:

After removing the ½ inch PVC angled vent pipe in the access port of the sanitary seal on the west side of the well casing.

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See Well Log (WASH 50715)						

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

See Well Log (WASH 50715)

C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)? NO

If "NO", items 2 through 4 relating to this section may be deleted.
 Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

D. Diversion and Delivery System Information

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

1. Is a pump used? YES

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

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Franklin	45FH5S4-PE	Unknown	Submersible	2 inch	2 inch

3. Motor Information:

MANUFACTURER	HORSEPOWER
Franklin Electric	5 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)
5 Hp	0 psi	196.58 feet (from permit condition pump test)	0 feet	0.18 cfs

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

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5. Provide pump calculations:

$$Q \text{ Pump} = \frac{(5 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(196.58 \text{ ft lift} + 0 \text{ ft pressure head})} = 0.18 \text{ cfs}$$

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)
Not running during site visit			

7. Theoretical Pump Capacity – Pump at Sump:

POND PUMPS	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)
Pond Pump 1	20 Hp	45 psi	15 feet	0 feet	1.02 cfs

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

8. Provide pump calculations:

$$Q \text{ Pump} = \frac{(20 \text{ Hp}) \times (6.61 \text{ ft}^4/\text{sec Hp})}{(15 \text{ ft lift} + 114.3 \text{ ft pressure head})} = 1.02 \text{ cfs}$$

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)
Not running during site visit			

10. Is the distribution system piped?

YES

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

11. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch	~ 5 feet	Galvanized pipe	Above ground
2 inch to Reservoir B	~ 650 feet	PVC	Buried
See Well 2 for rest of the mainlines common to both			

12. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
See Well 2 for rest of the mainlines common to both			

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13. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
See Well 2					

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)
See Well 2					

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				

E. Storage

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

YES

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

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

NO
YES

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

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Reservoir B – constructed under Permit R-12759 (Certificate 90555)	5.5 feet per COBU submitted 2006 for Permit R-12759	2.4 AF

F. Gravity Flow Pipe

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

1. Does the system involve a gravity flow pipe?

NO

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

G. Gravity Flow Canal or Ditch

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

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

NO

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

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H. Additional notes or comments related to the system:

Even though the COBU submitted 2006 for Permit R-12759 seems to suggest Reservoir A and B are connected by 8 inch conduit, personnel on site says they have to pump water from Reservoir A into Reservoir B.

Also note:

Estimates for total number of sprinkler and emitter that can be used are also in reference to Certificate 90555. The wells help supply additional water to pond when needed to maintain full rate allowance of the certificate when the capacity of the pond reduces in the summer.

**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	Permit G-12326 issued: April 15, 1996 Permit G-18899 issued June 10, 2024		
BEGIN CONSTRUCTION (A)	April 15, 1997	May 29, 1996	Well 6 (WASH 50715) construction began and was completed May 30, 1996.
COMPLETE CONSTRUCTION (B)	October 1, 1998 extended to October 1, 2006 extended to October 1, 2026	June 21, 2024	Totalizing flow meters install on both wells
COMPLETE APPLICATION OF WATER (C)	October 1, 1999 extended to October 1, 2006 extended to October 1, 2026	October 2024	Reported water use from both Well 2 and 6 completing the permit condition and putting water to use.

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

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

YES

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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? **NO**

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

3. Initial Water Level Measurements:

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

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

4. Annual Static Water Level Measurements:

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

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

5. Pump Test:

a. Did the permit require the submittal of a pump test? **YES**

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

For additional information regarding pump tests see:

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

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

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

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

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

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

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

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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**

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

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

b. Has a meter been installed? **YES**

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 2	Netafim	21-50069208	Working	6,500,390 gallons (February 4, 2026)	June 2024
Well 6	Netafim	21-50064840	Working	13,747,380 gallons (February 4, 2026)	June 2024

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

7. Recording and reporting conditions:

a. Is the water user required to report the water use to the Department? **YES**

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

b. Have the reports been submitted? **YES**

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? **NO**

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

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

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

WELL	WELL ID #	DATE ATTACHED TO WELL
Well 2	L-1713	June 1996
Well 6	L-1712	May 1996

e. Other conditions? **YES**

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

1. Condition: Per Permit G-12326

"Prior to use of groundwater from wells listed on this permit, applicant must provide well reports that detail information which is sufficient to establish that a confined aquifer is developed. Groundwater production from any well listed on this permit may not be from the targeted basalt aquifer of the Sherwood –Dammach-Wilsonville Groundwater Limited Area but more specifically only from the confined alluvial groundwater reservoir between approximately 100 feet and 300 feet below land surface."

Compliance: Per the groundwater review for PA T-14331 issued November 7, 2023:

As for Well 2 (WASH 50714) item1 on page 1 of 3

"Thus, the purpose of this groundwater review is to confirm that WASH 50714 meet relevant conditions of permit G-12326 and its corresponding extension FO issued in August 2023."

As for both Well 2 (WASH 50714) and Well 6 (WASH 50715) item3 on page 2 of 3

"However, the logs for both WASH 50714 and WASH 50715 indicate that the alluvial sediments extend deeper than stated in the permit, to about 400 feet and 415 feet bls, respectively. It is also notable that both wells extend through about 15-30 feet of "decomposed brown basalt" and another 5-10 feet into "basalt." Despite both wells extending slightly into the basalt underlying the alluvial sediments, this is not considered aquifer commingling as the wells do not penetrate a distinct water-

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bearing interflow zone ("aquifer") within the basalt. Furthermore, the weathered ("decomposed") basalt recorded on both well logs is consisted to be essentially part of the overlying alluvial aquifer system."

2. Condition: Per Extension final order issued August 18, 2023. Item #1

"The permit Holder shall submit an Application for Permit Amendment by no later than October 1, 2023, requesting the change in point of appropriation from Well 2 (WASH 53928) to WASH 50714....."

Compliance:

Permit Amendment T-14331 was submitted September 26, 2023.

3. Condition: Per Extension final order issued August 18, 2023. Item #2

"This will be the last extension of time granted for Permit G-12326. Any future extension of time request will be denied, unless the Department determines the need for an extension of time is due to a delay in the processing of the timely submitted Application for Permit Amendment required above, or a delay in confirmation from the department that the repairs to the wells, completed prior to October 1, 2026 are sufficient to meet the requirement of the conations...."

Compliance:

No other extensions have been submitted.

4. Condition: Per Extension final order issued August 18, 2023. Item #3

"Use of water under this permit is limited to the water appropriated from WASH 50714, and WASH 50715, AFTER repairs to the wells has been determined sufficient enough to meet the requirement in the permit, being no more than 0.17 cubic feet per second, being 0.08 cfs from WASH 50714, and 0.09 cfs from WASH 50715. Additional, no more than 18.5 acres of agricultural use of nursery stock and other associated uses authorized by the permit, may be developed."

Compliance:

- Authorized Wells 1, 3, 4, 5, 6, C/7, and H/8 have been removed from this Claim of Beneficial Use and only Well 2 (WASH 50714) and Well 6 (WASH 50715) were evaluated.
- Only the 18.5 acres of agricultural use of nursery stock approved by the extension were evaluated during this claim of beneficial use.

5. Condition: Per Extension final order issued August 18, 2023. Item #4

"Use of water under this permit shall be suspended, and no water may be appropriated from any well listed on this permit until the well is altered to meet the condition contained in the permit, AND the Department has determined, in writing, the alteration(s) is sufficient to meet the requirements in the permit."

Compliance: Per the groundwater review for PA T-14331 issued November 7, 2023:

As for Well 2 (WASH 50714) item1 on page 1 of 3

"Thus, the purpose of this groundwater review is to confirm that WASH 50714 meet

relevant conditions of permit G-12326 and its corresponding extension FO issued in August 2023."

As for both Well 2 (WASH 50714) and Well 6 (WASH 50715) item3 on page 2 of 3
"However, the logs for both WASH 50714 and WASH 50715 indicate that the alluvial sediments extend deeper than stated in the permit, to about 400 feet and 415 feet bls, respectively. It is also notable that both wells extend through about 15-30 feet of "decomposed brown basalt" and another 5-10 feet into "basalt." Despite both wells extending slightly into the basalt underlying the alluvial sediments, this is not considered aquifer commingling as the wells do not penetrate a distinct water-bearing interflow zone ("aquifer") within the basalt. Furthermore, the weathered ("decomposed") basalt recorded on both well logs is consisted to be essentially part of the overlying alluvial aquifer system."

6. Condition: Per Permit Amendment T-14331. Item #5

"Before water use may begin under this order, the water user shall install a totalizing flow meter, or with prior approval of the Director, another suitable measuring device, at each new point of appropriation"

Compliance:

A totalizing flow meter has been installed on each individual wells.

7. Condition per Permit Amendment T-8864 and T-14331. Item #6:

Water shall be acquired from the same aquifer (water source) as the original point of appropriation (Well A-H) of which only Well C and H remained after T-8864 and no well logs can be confirmed.

But per Permit G-12326 groundwater review for Permit Amendment T-14331, page 2 item3:

"Permit G-12326 prohibits the acquisition of groundwater from the basalt aquifer system, limiting pumping 'only from the confined alluvial groundwater reservoir between 100 and 300 feet below land surface."

Compliance:

Well 2 (WASH 50714) develops within the depth intervals of 340 to 380 feet with in layers of decomposed basalt. Per the groundwater review of November 7, 2023 item1 page 1 of 3:

"Thus, the purpose of this groundwater review is to confirm that WASH 50714 meet relevant conditions of permit G-12326..."

Well 6 (WASH 50715) develops within the depth intervals of 280 to 420 feet with in layers of decomposed basalt above basalt. Per the groundwater review of November 7, 2023: item3 on page 2 of 3:

"However, the logs for both WASH 50714 and WASH 50715 indicate that the alluvial sediments extend deeper than stated in the permit, to about 400 feet and 415 feet bls, respectively. It is also notable that both wells extend through about 15-30 feet of

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“decomposed brown basalt” and another 5-10 feet into “basalt.” Despite both wells extending slightly into the basalt underlying the alluvial sediments, this is not considered aquifer commingling as the wells do not penetrate a distinct water-bearing interflow zone (“aquifer”) within the basalt. Furthermore, the weathered (“decomposed”) basalt recorded on both well logs is consisted to be essentially part of the overlying alluvial aquifer system.”

SECTION 6 ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	Claim of Beneficial Use Map
State Water Well Report – WASH 50714	Well log and driller’s notes for WASH 50714 – Well 2
State Water Well Report – WASH 50715	Well log and driller’s notes for WASH 50715 – Well 6
Pump Test Form Cover Sheet and Pump Test Data Sheet	Pumping Test Results for Well 2 (WASH 50714) conducted February 4, 2026
Pump Test Form Cover Sheet and Pump Test Data Sheet	Pumping Test Results for Well 6 (WASH 50715) conducted January 22, 2026
OWRD: Groundwater review form dated November 7, 2023	Groundwater review for permit amendment T-14331 stating Well 2 (WASH 50714) meets relevant conditions of Permit G-12326.

SECTION 7 CLAIM OF BENEFICIAL USE MAP

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

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

The COBU map was prepared using tax assessor’s map 2S121 and 2S121C, overlain by a 2014 aerial photo titled USDA-FSA-APFO NAIP County Mosaic and obtained on line from the Natural Resources Conservation Service, Image Metadata:

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

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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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WASH 50714

XXXXXX L01713

STATE OF OREGON JUN 10 1996 WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.

(START CARD) # 85673 85637

Instructions for completing this report are on the reverse of this form.

(1) OWNER: Well Number 363 Name Loen Nursery Co. Address 18710 SW Pacific Dr. City Sherwood State OR Zip 97140

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

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

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 400 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds. Rows include bentonite and cement.

How was seal placed: Method [] A [X] B [] C [] D [] E [] Other Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Rows for Casing and Liner.

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tubing size, Casing, Liner. Method: cutting touch.

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [X] Air [] Artesian. Yield 36 gal/min, Drawdown, Drill stem at 380, Time 1 hr. Temperature of water 58, Depth Artesian Flow Found.

(9) LOCATION OF WELL by legal description: County Wash. Latitude Longitude Township 2 N or S Range 1 E or W. WM. Section 15 NW 1/4 SE 1/4 Tax Lot 100 Lot Block Subdivision Street Address of Well (or nearest address) SW Cipole Rd.

(10) STATIC WATER LEVEL: 0 ft. below land surface. Date 6/3/96 Artesian pressure 0 lb. per square inch. Date 6/3/96

(11) WATER BEARING ZONES: Depth at which water was first found 340

Table with columns: From, To, Estimated Flow Rate, SWL. Row: 340, 380, 36, 0

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Rows: clay brown, clay/sand/gravel brown, clay gray, clay blue/gray gravel, clay gray, sand cemented brown, decomposed basalt brown, basalt gray.

Date started 5/30/96 Completed 6/3/96

(unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief. WWC Number 1622 Date 6/4/96 Signed [Signature]

(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 on this well is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief. WWC Number 663 Date 6/4/96 Signed [Signature]

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER Received by OWRD

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Owner Information:

OWNER NAME/BUSINESS NAME: LOEN NURSERY INC.		PHONE No.: (503) 453-7196	ADDITIONAL CONTACT No.: (503) 750-5308
ADDRESS: 19205 SW CIPOLE RD			
CITY: SHERWOOD	STATE: OR	ZIP: 97140	E-MAIL: THATCHER@LOENNURSERY.COM

Pump Test Conducted By (If Different From Owner):

TEST CONDUCTED BY NAME: JEREMIAH HATCHER		QUALIFICATION: (SELECT) Pump Installer	LICENSE #: 24-502CPI
COMPANY: STETTLER SUPPLY CO.		PHONE No.: (503) 585-5550	ADDITIONAL CONTACT No.: (971) 707-2409
ADDRESS: 4420 RIDGE DR. NE			
CITY: SALEM	STATE: OR	ZIP: 97301	E-MAIL: JEREMIAHH@STETTLERSUPPLY.COM

Tested Well Information (please attach well log(s) if available):

WELL LOG # (Ex: MARI 99999)	WELL TAG # (Ex: L-999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
WASH 50714	L- 01713	2	400	LOEN NURSERY	06/04/1996	02/04/2026

(CONTINUED)

TWP (Ex: 25S)	RNG (Ex: 31E)	SEC (Ex: 12)	QQ (Ex: SE/SW)	SURVEYED LOCATION (Ex: 100 ft N & 735 ft E fr SE cor, sec 5)	LATITUDE (Ex: 44.94473859)	LONGITUDE (Ex: -123.02787000)
2S	1W	15	NW/SE	SW CIPOLE RD.	45.380687	-122.816735

List all water rights for which you are submitting this test. Please indicate if the tested well is listed as an authorized source of water on each water right. If not, you may also need to fill out a multiple well exemption (MWE) request form.

APPLICATION	PERMIT	TRANSFER	CERTIFICATE	IS THE TESTED WELL AN AUTHORIZED POA ON THIS RIGHT?
G-13890	G-18899	T- T-14331		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
G-	G-	T-		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
G-	G-	T-		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)

Nearby Wells and Streams: Please check yes or no. Do not leave blank.

Are there any wells, other than domestic or stock wells, within 1000 feet of the tested well?
If yes, identify the well by OWRD log number or attach a copy of the well log. Note the approximate distance to each well from the tested well and the approximate pumping rate of each.
If possible, indicate if they were turned on or off during the test or within 24 hours prior to the test (Indicate Not Pumped, if applicable).

WELL LOG # (Ex: MARI 99999)	BEARING & DISTANCE FROM PUMPED WELL (FT)	DATE & TIME PUMP ON	DATE & TIME PUMP OFF	PUMPING RATE (GPM)
WASH 50715	110' NORTH	NOT PUMPED	N/A	23

Is there a lake, stream or other surface water body within 1/4 mile of the tested well?
If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head.
Well elevation is above the surface water body.
Approximate distance: 250 ft.
Approximate elevation difference: 15 ft.

Was the test conducted during normal use of the well?
Please indicate where pumped water was discharged: ON ROAD DOWN HILL
How far from the pumped well was water discharged? 50' ft.

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OREGON WATER RESOURCES DEPARTMENT

Salem, OR

PUMP TEST FORM COVER SHEET

Water-Level Measurement Method: POWERS WELL SOUND

Length of air line (if used): 500

*Verify here: Airline: N/A psi _____ feet. E-Tape: _____ feet.

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

Pressure transducer (if used):

Manufacturer: N/A Serial #: _____

Date Last Calibrated: _____ Units: _____

Pump Type: Submersible

HP: 5 Pump set at: 360 feet.

Pump idle time: 24HRS

Discharge Measurement Method: Flowmeter

Flowmeter (if used):

Manufacturer: NETAFIM Serial #: 21-50069208

Date Last Calibrated: _____ Units: GPM

Note: Well must be idle for at least 16 hours prior to the test. Additional forms can be obtained from our web site at: https://www.oregon.gov/OWRD/Forms/Pages/default.aspx

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

Description (e.g., top port of 1 inch port pipe, west side) 1/2" WELL SEAL PORT, EAST SIDE

Time pump turned on: Date 02/04/2026 Time 7:50

Time pump turned off: Date 02/04/2026 Time 12:20

Total pumping time: 4 hours 30 minutes.

Remember, your pump test may not be approved unless it meets the following criteria*:

- Checklist of criteria for pump test approval, including discharge rate, pump duration, measurement accuracy, and well idle time.

*This checklist is intended for information purposes only and does not guarantee a pump test approval. The Department reserves all authority pertaining to the implementation of the rules under OAR 690-217.

Pump tests are intended to provide aquifer and well information for ground water resource characterization and to help solve well problems (OAR 690-217-0015(9)).

Pump test requirements for OAR 690-217 can be found online at:

https://secure.sos.state.or.us/oard/displayDivisionRules.action;JSESSIONID_OARD=1BdwLynsYAPNSQIW330ZiSFZuMscp4Hfil-1ftsDAAEsMC2 ROSsl-277278532?selectedDivision=3186.

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

Forms may additionally be sent to WRD_DL_pumptestsupport@oregon.gov

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

OPERATOR SIGNATURE: [Signature] DATE: 2/12/26

OWNER SIGNATURE: _____ DATE: _____



WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
WASH 50714	L- 01713	2	400	LOEN NURSERY	06/04/1996	02/04/2026

Date	Time	Time Since Pumping Started (min)	Depth to Water Below MP	Discharge Rate (gpm, cfs,)	Phase (Pre-Test, Pumping, Recovery)	Airline or Shut-in Pressure (psi)	Flowmeter Reading (if available)	Comments
02/04/2026	7:05	- 45	2' 6"	0	Pre-test	N/A		AM
"	7:25	- 25	2' 6"	0	Pre-test			
"	7:45	-5	2' 6"	0	Pre-test			Start @ 7:50
"	7:52	2	89'	44	Pumping			
"	7:54	4	150'	44	Pumping			VALVED BACK
"	7:56	6	195' 2"	38	Pumping			VALVED BACK
"	7:58	8	232' 1"	32	Pumping			
"	8:00	10	248' 3"	32	Pumping			VALVED BACK
"	8:05	15	276' 6"	18	Pumping			
"	8:10	20	285' 9"	18	Pumping			
"	8:15	25	290' 2"	18	Pumping			
"	8:20	30	300' 4"	18	Pumping			
"	8:35	45	313' 1"	18	Pumping			
"	8:50	60	319' 1"	18	Pumping			
"	9:05	75	322' 2"	18	Pumping			
"	9:20	90	324' 6"	18	Pumping			
"	9:35	105	327'	18	Pumping			
"	9:50	120	328' 9"	18	Pumping			
"	10:05	135	330' 3"	18	Pumping			Received by OWRE
"	10:20	150	331' 5"	18	Pumping			APR 13 2026
"	10:35	165	332' 5"	18	Pumping			
"	10:50	180	334' 2"	18	Pumping			Salem, OR
"	11:05	195	334' 7"	18	Pumping			
"	11:20	210	334' 9"	18	Pumping			
"	11:35	225	334' 11"	18	Pumping			
"	11:50	240	335'	18	Pumping			
"	12:05	255	335' 1"	18	Pumping			END PUMPING
"	12:07	257	241'		Recovery			
"	12:09	259	189' 10"		Recovery			
"	12:11	261	156' 6"		Recovery			
"	12:13	263	132' 1"		Recovery			
"	12:15	265	115' 1"		Recovery			
"	12:20	270	91' 3"		Recovery			
"	12:25	275	76' 10"		Recovery			
"	12:30	280	64' 8"		Recovery			
"	12:35	285	51' 6"		Recovery			
"	12:50	300	35' 11"		Recovery			
"	13:05	315	28' 10"		Recovery			90%
"	13:20	330	21' 3"		Recovery			



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**PUMP TEST FORM
COVER SHEET**

Owner Information:

OWNER NAME/BUSINESS NAME: LOEN NURSERY INC.		PHONE No.: (503) 453-7196	ADDITIONAL CONTACT No.: (503) 750-5308
ADDRESS: 19205 SW CIPOLE RD			
CITY: SHERWOOD	STATE: OR	ZIP: 97140	E-MAIL: THATCHER@LOENNURSERY.COM

Pump Test Conducted By (If Different From Owner):

TEST CONDUCTED BY NAME: JEREMIAH HATCHER		QUALIFICATION: (SELECT) Pump Installer	LICENSE #: 24-502CPI
COMPANY: STETTLER SUPPLY CO.		PHONE No.: (503) 585-5550	ADDITIONAL CONTACT No.: (971) 707-2409
ADDRESS: 4420 RIDGE DR. NE			
CITY: SALEM	STATE: OR	ZIP: 97301	E-MAIL: JEREMIAHH@STETTLERSUPPLY.COM

Tested Well Information (please attach well log(s) if available):

WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
WASH 50715	L- 01712	6	420	LOEN NURSERY	06/04/1996	01/22/2026

(CONTINUED)

TWP (EX: 25S)	RNG (EX: 31E)	SEC (EX: 12)	QQ (EX: SE/SW)	SURVEYED LOCATION (EX: 100 ft N & 735 ft E fr SE cor, sec 5)	LATITUDE (EX: 44.94473859)	LONGITUDE (EX: -123.02787000)
2S	1W	21C	NW/SE	SW CIPOLE RD.	45.380960	-122.816784

List all water rights for which you are submitting this test. Please indicate if the tested well is listed as an authorized source of water on each water right. If not, you may also need to fill out a multiple well exemption (MWE) request form.

APPLICATION	PERMIT	TRANSFER	CERTIFICATE	IS THE TESTED WELL AN AUTHORIZED POA ON THIS RIGHT?
G- 13890	G- 18899	T- T-14331		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
G-	G-	T-		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
G-	G-	T-		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)

Nearby Wells and Streams: Please check yes or no. Do not leave blank.

Are there any wells, other than domestic or stock wells, within 1000 feet of the tested well?

If yes, identify the well by OWRD log number or attach a copy of the well log. Note the approximate distance to each well from the tested well and the approximate pumping rate of each.

If possible, indicate if they were turned on or off during the test or within 24 hours prior to the test (Indicate Not Pumped, if applicable).

WELL LOG # (EX: MARI 99999)	BEARING & DISTANCE FROM PUMPED WELL (FT)	DATE & TIME PUMP ON	DATE & TIME PUMP OFF	PUMPING RATE (GPM)
WASH 50714	110' SOUTH	NOT PUMPED	N/A	18

Is there a lake, stream or other surface water body within 1/4 mile of the tested well?

If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head.

Well elevation is the surface water body. Approximate distance: 250 ft.

Approximate elevation difference: 6 ft.

Was the test conducted during normal use of the well?

Please indicate where pumped water was discharged: ON ROAD DOWN HILL

How far from the pumped well was water discharged? 50' ft.

Additional forms can be found at: <https://www.oregon.gov/owrd/Forms/Pages/default.aspx>.

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Salem, OR

PUMP TEST FORM COVER SHEET



OREGON WATER RESOURCES DEPARTMENT

Water-Level Measurement Method: POWERS WELL SOUND

Length of air line (if used): 500

*Verify here: Airline: N/A psi _____ feet. E-Tape: _____ feet.

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

Pressure transducer (if used):

Manufacturer: N/A Serial #: _____

Date Last Calibrated: _____ Units: _____

Pump Type: Submersible

HP: 5 Pump set at: TBD feet.

Pump idle time: 24HRS

Discharge Measurement Method: Flowmeter

Flowmeter (if used):

Manufacturer: NETAFIM Serial #: 21-500648

Date Last Calibrated: _____ Units: GPM

Note: Well must be idle for at least 16 hours prior to the test. Additional forms can be obtained from our web site at: https://www.oregon.gov/OWRD/Forms/Pages/default.aspx

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

Description (e.g., top port of 1 inch port pipe, west side) 1/2" WELL SEAL PORT, WEST SIDE

Time pump turned on: Date 01/22/2026 Time 7:50

Time pump turned off: Date 01/22/2026 Time 12:05

Total pumping time: 4 hours 15 minutes.

Remember, your pump test may not be approved unless it meets the following criteria*:

- Checklist of 12 criteria for pump test approval, including discharge rate, pump operation, measurement accuracy, and well idle time.

*This checklist is intended for information purposes only and does not guarantee a pump test approval. The Department reserves all authority pertaining to the implementation of the rules under OAR 690-217.

Pump tests are intended to provide aquifer and well information for ground water resource characterization and to help solve well problems (OAR 690-217-0015(9)).

Pump test requirements for OAR 690-217 can be found online at:

https://secure.sos.state.or.us/oard/displayDivisionRules.action;JSESSIONID_OARD=1BdwLynsYAPNSQtW330ZiSFZuMscp4Hfil-1ftsDAAEsMC2_ROSS!-277278532?selectedDivision=3186

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

Forms may additionally be sent to WRD_DL_pumptestsupport@oregon.gov

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

OPERATOR SIGNATURE: [Signature] DATE: 2/12/26

OWNER SIGNATURE: _____ DATE: _____



WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
WASH 50715	L- 01712	6	420	LOEN NURSERY	06/04/1996	01/22/2026

Date	Time	Time Since Pumping Started (min)	Depth to Water Below MP	Discharge Rate (gpm, cfs,)	Phase (Pre-Test, Pumping, Recovery)	Airline or Shut-in Pressure (psi)	Flowmeter Reading (if available)	Comments
01/22/2026	7:05	- 45	2'	0	Pre-test	N/A		AM
"	7:25	- 25	2'	0	Pre-test			
"	7:45	-5	2'	0	Pre-test			Start @ 7:50
"	7:52	2	83'	60	Pumping			
"	7:54	4	131' 6"	60	Pumping			VALVED BACK
"	7:56	6	111'	38	Pumping			
"	7:58	8	118' 8"	38	Pumping			
"	8:00	10	152' 4"	38	Pumping			VALVED BACK
"	8:05	15	174' 9"	23	Pumping			
"	8:10	20	187' 5"	23	Pumping			
"	8:15	25	191' 11"	23	Pumping			
"	8:20	30	195'	23	Pumping			
"	8:35	45	195' 6"	23	Pumping			
"	8:50	60	195' 10"	23	Pumping			
"	9:05	75	196'	23	Pumping			
"	9:20	90	196' 6"	23	Pumping			
"	9:35	105	196' 9"	23	Pumping			
"	9:50	120	197'	23	Pumping			
"	10:05	135	197' 3"	23	Pumping			
"	10:20	150	197' 6"	23	Pumping			
"	10:35	165	197' 9"	23	Pumping			
"	10:50	180	197' 11"	23	Pumping			
"	11:05	195	198' 1"	23	Pumping			
"	11:20	210	198' 3"	23	Pumping			
"	11:35	225	198' 5"	23	Pumping			
"	11:50	240	198' 6"	23	Pumping			
"	12:05	255	198' 7"	23	Pumping			END PUMPING
"	12:07	257	168'		Recovery			
"	12:09	259	138'		Recovery			
"	12:11	261	112'		Recovery			
"	12:13	263	97' 2"		Recovery			
"	12:15	265	82' 6"		Recovery			
"	12:20	270	53' 1"		Recovery			
"	12:25	275	39' 1"		Recovery			
"	12:30	280	29'		Recovery			
"	12:35	285	19' 11"		Recovery			
"	12:50	300	17' 10"		Recovery			90%

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Groundwater Transfer Review Summary Form

Transfer/PA # T- 14331

GW Reviewer Dennis Orłowski Date Review Completed: 11/07/2023

Summary of Same Source Review:

The proposed change in point of appropriation is not within the same aquifer as per OAR 690-380-2110(2).

Summary of Injury Review:

The proposed transfer will result in another, existing water right not receiving previously available water to which it is legally entitled or result in significant interference with a surface water source as per 690-380-0100(3).

Summary of GW-SW Transfer Similarity Review:

The proposed SW-GW transfer doesn't meet the definition of "similarly" as per OAR 690-380-2130.

This is only a summary. Documentation is attached and should be read thoroughly to understand the basis for determinations.

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Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1271
 (503) 986-0900
 www.wrd.state.or.us

Ground Water Review Form:

- Water Right Transfer
- Permit Amendment
- GR Modification
- Other

Application: T-14331

Applicant Name: Loen Nursery Co. – Kurtis Loen

Proposed Changes: POA APOA SW→GW RA
 USE POU OTHER

Reviewer(s): Dennis Orłowski

Date of Review: 11/07/2023

Date Reviewed by GW Mgr. and Returned to WRSD: 11/07/2023

The information provided in the application is insufficient to evaluate whether the proposed transfer may be approved because:

- The water well reports provided with the application do not correspond to the water rights affected by the transfer.
- The application does not include water well reports or a description of the well construction details sufficient to establish the ground water body developed or proposed to be developed.
- Other _____

1. Basic description of the changes proposed in this transfer: This proposed amendment pertains to permit G-12326, which originally authorized the use of up to eight wells in the Tualatin River basin to pump groundwater for year-round nursery use on 26.5 acres (maximum combined rate 3.56 cfs (~1598 gpm)).

However, a recent (8/18/2023) extension final order for permit G-12326 significantly modified/reduced certain provisions of the original permit. Most relevant of those extension FO changes to this proposed permit amendment are: (1) reduction of POA from eight to only two wells, WASH 50714 and WASH 50715; (2) reduction of maximum combined pumping rate to 0.17 cfs; and (3) reduction of POU area to 18.5 acres.

According to the application, "Well 2" was previously mis-identified as WASH 53928, whereas it was subsequently confirmed by the applicant's agent to instead be WASH 50714. Thus, the purpose of this groundwater review is to confirm that WASH 50714 meets relevant conditions of permit G-12326 and its corresponding extension FO issued in August 2023.

2. Will the proposed POA develop the same aquifer (source) as the existing authorized POA?
 Yes No Comments: See response to 3a below.

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3. a) Is there more than one source developed under the right (e.g., basalt and alluvium)?
 Yes No The POA/POU are located within the Sherwood-Dammasch-Wilsonville GWLA, in which use of groundwater from the local basalt aquifer is restricted. Consequently, permit G-12326 prohibits the acquisition of groundwater from the basalt aquifer system, limiting pumping “only from the confined alluvial groundwater reservoir between approximately 100 and 300 feet below land surface.”

However, the logs for both WASH 50714 and WASH 50715 indicate that the alluvial sediments extend deeper than stated in the permit, to about 400 feet and 415 feet bls, respectively. It is also notable that both wells extend through about 15-30 feet of “decomposed brown basalt”, and another 5-10 feet into “basalt.” Despite both wells extending slightly into the basalt underlying the alluvial sediments, this is not considered aquifer commingling as the wells do not penetrate a distinct water-bearing interflow zone (“aquifer”) within the basalt. Furthermore, the weathered (“decomposed”) basalt recorded on both well logs is considered to be essentially part of the overlying alluvial aquifer system.

b) If yes, estimate the portion of the right supplied by each of the sources and describe any limitations that will need to be placed on the proposed change (rate, duty, etc.): N/A

4. a) Will this proposed change, at its maximum allowed rate of use, likely result in an increase in interference with **another ground water right**?

Yes No Comments: Not relevant to this review, because the only change evaluated was the comparison and correction of the “Well 2” log, from the previously-erroneous WASH 53928 to the correct WASH 50714. Furthermore, the FO significantly reduced the maximum authorized pumping rate, thus decreasing the likelihood of injury.

b) If yes, would this proposed change, at its maximum allowed rate of use, likely result in another groundwater right not receiving the water to which it is legally entitled?

Yes No If yes, explain: N/A

1. a) Will this proposed change, at its maximum allowed rate of use, likely result in an increase in interference with **another surface water source**?

Yes No Comments: Not relevant to this review, because the only change evaluated was the comparison and correction of the “Well 2” log, from the previously-erroneous WASH 53928 to the correct WASH 50714. Furthermore, the FO significantly reduced the maximum authorized pumping rate, thus decreasing the likelihood of injury.

b) If yes, at its maximum allowed rate of use, what is the expected change in degree of interference with any **surface water sources** resulting from the proposed change?

Stream: _____ Minimal Significant

Stream: _____ Minimal Significant

Provide context for minimal/significant impact: N/A

2. For SW-GW transfers, will the proposed change in point of diversion affect the surface water source similarly (as per OAR 690-380-2130) to the authorized point of diversion specified in the water use subject to transfer?

Yes No Comments: N/A

3. What conditions or other changes in the application are necessary to address any potential issues identified above: None

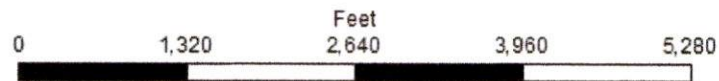
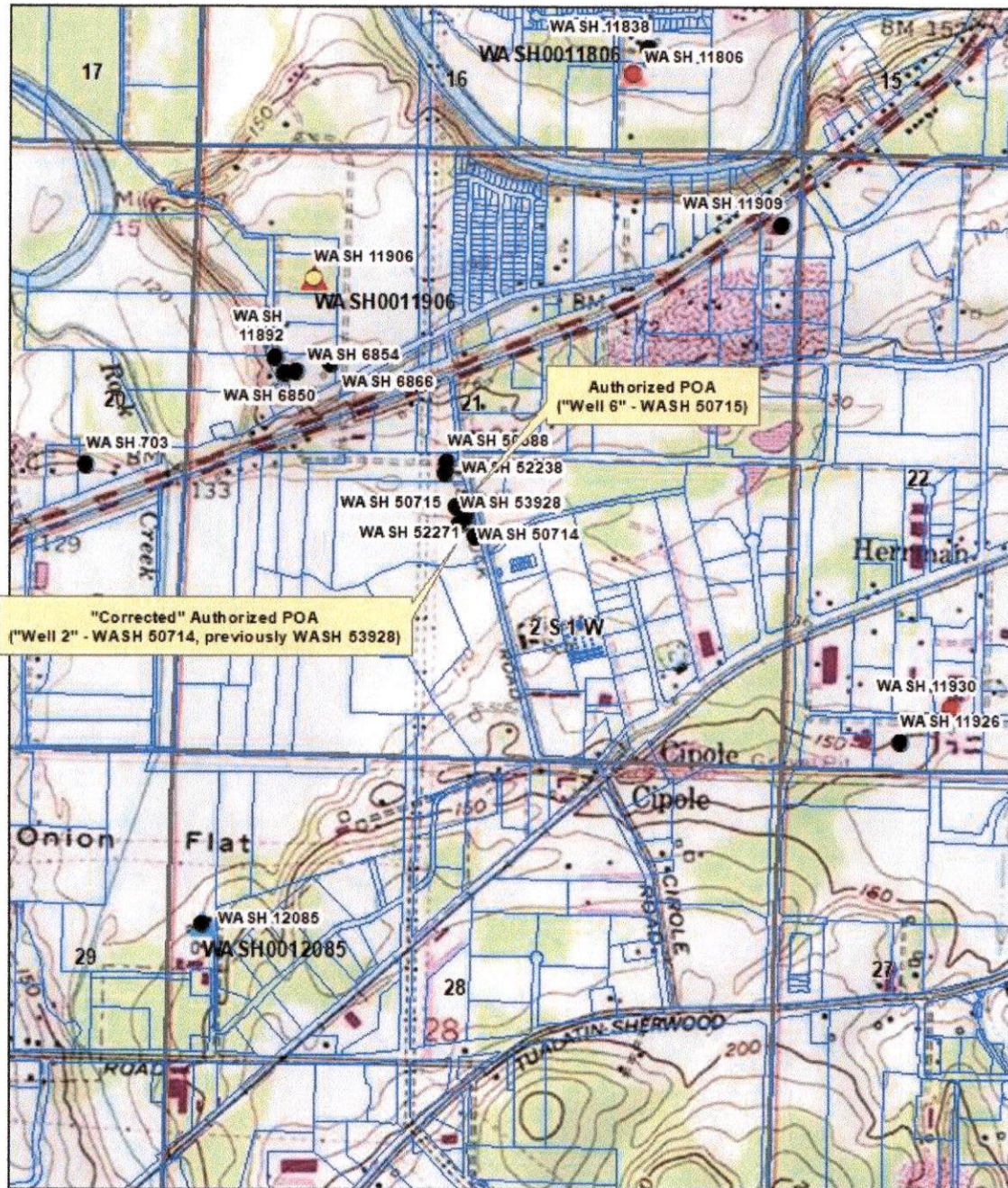
4. Any additional comments: None

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T-14331 Loen Nursery T2S R1W Section 21



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Salem, OR

Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Loen Nursery Co.

19205 SW Cipole Rd, Sherwood OR 97140

Transaction Type: Claim

Fees Received: \$ 345.00

Cash



Check:

Check No. 2588

Name(s) on Check: Will McGill Surveying

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: Conie Lornien

(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.