

**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

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

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Enter the date the priority date of the permit:

Salem, OR

October 21, 2005

A separate form shall be completed for each permit.

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

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

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

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

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

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

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

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

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

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

SECTION 1

GENERAL INFORMATION

1. File Information:

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
G-16557	G-16073	T-NA

2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Bullfrog Properties LLC		PHONE NO. (503) 209-3687	ADDITIONAL CONTACT NO.
ADDRESS PO Box 98			
CITY Hubbard	STATE OR	ZIP 97032	E-MAIL brett@earthworks-landscape.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 Bullfrog Properties LLC c/o Brett Kacalek		
ADDRESS 2917 4th St. -----Please update to PO Box 98		
CITY Hubbard	STATE OR	ZIP 97032

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

October 16, 2025

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Brett Kacalek	October 16, 2025	President

6. County

Marion

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.

Seal and Signature



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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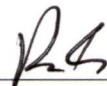
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Permit Holder of Record Signature or Acknowledgement

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
	Brett Kacalek	Partner	1-21-26
	Rod Kacalek	Partner	1/21/26

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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	MARI 60579	L-84749

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	Deer Creek 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	Nursery	NA	December through April	0.10 cfs
			May	
			June	
			July	
			August	
			September	
			October	
			November	
Total Quantity of Water Used				0.10 cfs

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

Water is pumped from Well (MARI 60579) using a 3 Hp submersible pump to convey water through 2 inch PVC pipe approximately 20 feet to the east into a shed where the line connects to 2 inch galvanized pipe continuing east and connecting to a 52 gallon fiberglass pressure tank. After the tank the 2 galvanized pipe continues east with one line teeing off to the south extending out the shed and is disconnected. After the tee the line continues and tees to the north about a foot and connecting to 1.5 inch PVC pipe that angles down and extends underground and to the office area. After that tee, the line continues east with a meter (note office area is not metered) before connecting to 2 inch PVC pipe that angles down and extends underground to the west connecting to the mainline.

The mainline separates off, one line angles north west in the same trench as the 1.5 inch PVC to the office. This line then connects to a valve box and faucets that supplies the area around the office with garden hoses and pop up sprinklers before heading to the west.

At the western edge there is a valve box where the Water Wheel can connect to irrigate the field to the north. Another line off the valve box heads to the south to a valve box that supply pop up sprinkler heads along the entrance. Further south, another valve box is located where the water wheel can connect to irrigate the field on the south side of the entrance.

A second line off the mainline by the shed extends west and supplies the pond area for water plants they use in their landscaping operations for their clients.

A third line off the mainline by the shed extends south-east to supply the area by the shed. The line then continues to the east before teeing to the north and south. The north line continues north then turns to the east into the eastern field where a valve box is locate for the Water Reel can connect to irrigate this area. The southern tee extends south to a valve box where the Water Reel can connect and irrigate the area to the west and the field to the south. The line also extends to the east to other valve boxes where the Water Reel can irrigate the area to the north.

Irrigation is done as needed and any combination of the pop up sprinklers and Water Wheel can be used to maximize the water use of this water right.

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. After field verifying, Well (MARI 60579) is more correctly located at:

- 190 feet north and 360 feet east from the South 1/4 corner, Section 2

2. After field verifying the location of crops being irrigated, the place of use was reduced from the originally authorized acreage.

Original authorized place of use:

4S	1W	2	SWSE	5.5
4S	1W	11	NW NE	<u>4.0</u>
Total:				9.5

Revised place of use:

4S	1W	2	SWSE	3.2
4S	1W	11	NW NE	<u>3.3</u>
Total:				6.5

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	December through April – 0.24 cfs	0.10 cfs	Not measured	Nursery	9.5	6.5
	May – 0.137 cfs					
	June – 0.087 cfs					
	July – 0.037 cfs					
	August – 0.02 cfs					
	September – 0.018 cfs					
	October – 0.023 cfs					
	November – 0.06 cfs					

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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):

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Well

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
4S	1W	WM	2	SWSE	NA	NA	Nursery	3.2	NA
4S	1W	WM	11	NWNE	NA	NA	Nursery	3.3	NA
Total Acres Irrigated								6.5	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:

Top of casing beneath pitless adaptor 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 Well Log MARI 60579						

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 MARI 60579

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 Electric	5870204154 SubDrive	07G22 92527015	Submersible	1.5 inch	1.5 inch

3. Motor Information:

MANUFACTURER	HORSEPOWER
Franklin Electric	3.0 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)
3.0 Hp	50- 60	84.8 feet (from permit condition pump test)	0 feet	0.09-0.10 cfs

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

5. Provide pump calculations:

PSI 50	$Q \text{ Pump} = \frac{(3.0 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(84.8 \text{ ft lift} + 127.0 \text{ ft pressure head})} = 0.10 \text{ cfs}$
PSI 60	$Q \text{ Pump} = \frac{(3.0 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(84.8 \text{ ft lift} + 152.4 \text{ ft pressure head})} = 0.09 \text{ cfs}$

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			

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

7. Is the distribution system piped?

YES

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

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8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch	~1,575 feet	PVC	Buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
¾ inch Garden hoses	~500 feet	Polyurethane	Above Ground
½ inch to connect to pop up sprinklers	~1,000 feet	polyethylene	Buried
Water reel 1.1 inches	280 feet	Polyethylene	Above ground

10. Sprinkler Information:

TYPE	SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
Rainbird 5000 #3		35	2.71 gpm	4	3	0.018 cfs (8.13 gpm)
Rainbird Maxi #8	Blue	35	3.3 gpm	15	6	0.044 cfs (19.8 gpm)
Garden hose		40	~ 9 gpm	~ 5	2	0.04 cfs
Hunter PGJ #2	Blue	35	1.7 gpm	1	1	0.004 cfs (1.7 gpm)
Rainbird 15-VAN 1/2	Black	30	1.85 gpm	20	5	0.02 cfs (9.25 gpm)
Water reel	7mm	57	14 gpm		1	0.03 cfs (14 gpm)
Rainbird 15-VAN 1/4	Black	30	0.93 gpm	3	1	0.002 cfs (0.93 gpm)
Rainbird 8-VAN 1/4	Green	30	0.29 gpm	4	2	0.0013 cfs (0.58 gpm)
Rainbird 8-VAN 1/2	Green	30	0.59 gpm	6	5	0.0066 cfs (2.95 gpm)
Rainbird 12-VAN 1/4	Brown	30	0.59 gpm	4	4	0.005 cfs (2.36 gpm)
Rainbird 10-VAN 1/2	Blue	30	0.89 gpm	7	5	0.0099 cfs (4.45 gpm)
Rainbird Maxi #6	Red	35	2.0 gpm	3	2	0.0089 cfs (4.0 gpm)
Rainbird 15SST	Black	30	1.21 gpm	4	4	0.01 cfs (4.84 gpm)

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

11. Drip Emitter Information:

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

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12. Drip Tape Information:

DRIPPER SPACING IN INCHES	GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	ADDITIONAL INFORMATION
NA					

13. 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

YES

YES

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

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Fiberglass	52 gallon	Above ground

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Bulge in the system reservoir	0 feet	~ 9 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.

H. Additional notes or comments related to the system:

None	Received by OWRD APR 22 2026
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SECTION 5 CONDITIONS

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

1. Time Limits:

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

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	July 6, 2006		
BEGIN CONSTRUCTION (A)	NA	NA	NA
COMPLETE CONSTRUCTION (B)	October 1, 2010 extended to: October 1, 2026	October 2025	Completed construction of the entire system and applied water to the full allowed rate.
COMPLETE APPLICATION OF WATER (C)	October 1, 2010 extended to: October 1, 2026	October 2025	All the permit conditions were met and water was put to full 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

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

a. Did the Extension Final Order require the submittal of Progress Reports?

YES

One due October 1, 2020 and second October 1, 2025

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

b. Were the Progress Reports submitted?

YES

Progress Report due October 1, 2020 was received September 23, 2020

Progress Report due October 1, 2025 was received – see attached

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

3. Initial Water Level Measurements:

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

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.

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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?

YES

c. Is the pump test attached to this claim?

NO

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

YES

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

NO

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

6. Measurement Conditions:

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

YES

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

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

b. Has a meter been installed?

YES

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well	Hersey	0710365	Working	1,140,231.9 gallons (October 16, 2025)	2008

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

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WELL ID #	DATE ATTACHED TO WELL
L-84749	June 2007

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.

e) Condition:

The well shall produce water only from the alluvial groundwater reservoir between land surface and approximately 700 feet below land surface.

Compliance:

Well (MARI 60579) was screened from 119 to 134 feet and 144 to 165 feet.

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 – MARI 60579	Well log and driller's notes for MARI 60579 – Well
Extension of Time Progress Report Form due October 1, 2025	Extension of Time Progress Report Form due October 1, 2025 – completed by client

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 04 1W 2D, 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.

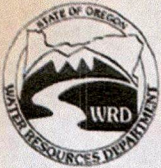
(Reminder: Incomplete maps and/or claims may be returned.)

- ☒ 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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Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

Extension of Time
Progress Report Form
For Checkpoints

TO THE DIRECTOR OF THE OREGON WATER RESOURCES DEPARTMENT

Permit Holder: Brett Kacalek; Bullfrog Properties LLC

Application G-16557

Permit G-16073

Progress Report for 2025

Report Due no later than October 1, 2025

DO NOT SUBMIT PRIOR TO 30 DAYS BEFORE DUE DATE

As authorized in ORS 690-315-0050(6), this progress report is required in order to ensure diligence is exercised in the development and perfections of Permit G-16073.

DATES	LIST ALL WORK ACCOMPLISHED and FINANCIAL INVESTMENTS For the period of time between October 1, 2020 and October 1, 2025	FINANCIAL INVESTMENT
	No additional work during this period	

Use back of form if needed

2. Describe actions to achieve compliance with conditions of the permit and/or previous extension (including continuance of measurement, recording and reporting conditions).

Recorded water use for MARI 60579 / L-84749) 2020-2024 (have reports for 2025 ready)

3. Total number of acres of nursery use to date: 6.8 acres

4. Provide the maximum rate, or duty if applicable, of water diverted for beneficial use under this permit, if any, to date.

Maximum rate used to date = 0.1 cfs

Maximum Rate per Month:

December through April 0.1 cfs May 0.1 cfs June 0.087 cfs

July 0.037 cfs August 0.02 cfs September 0.018 cfs

October 0.023 cfs November 0.06 cfs

Report the rate in the same units of measurement as specified in the permit, being cfs (cubic feet per second), gpm (gallons per minute) or AF (acre-feet). Do not provide daily, monthly or annual water volume totals.

INCOMPLETE REPORTS WILL BE RETURNED. AN ANSWER IS REQUIRED IN EACH ITEM.

FAILURE TO SUBMIT THIS REPORT WILL MOST LIKELY RESULT IN ANY FUTURE EXTENSION BEING DENIED.

Signature [Signature] Date 9-8-25

Printed Name/Title Brett Kacalek president

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Diligence Shown ☐ Yes ☐ No

Date Public Noticed: _____
For OWRD use only

Reviewed by:

Date:

APR 22 2026

Salem, OR

MARI 60579

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

Westerberg Drilling, Inc.
36728 S. Kropf Rd.
Molalla, OR 97038

WELL ID. # L 84749

START CARD # 192899

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

(1) LAND OWNER Well Number _____
Name Bullfrog Properties, LLC
Address 2917 Fourth St.
City Hubbard State OR Zip 97032

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

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

(4) PROPOSED USE
☒ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☒ No
Depth of Completed Well 170 ft.
Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE			SEAL		
Diameter	From	To	Material	From	To
10"	0	65	Bentonite	0	19
					29 sacks
6"	65	170	Cement	19	65
					31 sacks

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

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 83 ft. to 170 ft. Size of gravel 8-12 c.s.s.

(6) CASING/LINER

Casing/Liner	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"		+2	115	.250	☒	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner: 4"	83	119	CL200		☐	☒	glued	☐
4"	134	144.5	CL200		☐	☒	glued	☐
4"	165	170	CL200		☐	☒	glued	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None
Final location of shoe(s) 170' cut off

(7) PERFORATIONS/SCREENS
☐ Perforations Method _____
☒ Screens Type V-wire Material stainless

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
119	134	.040		4"	PS	☐	☐
144.5	165	.040		4"	PS	☐	☐
						☐	☐
						☐	☐

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

Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____

15 _____ N/A _____ 113' _____ 1 hr.

Temperature of water 56 Depth Artesian Flow Found _____

Was a water analysis done? ☐ Yes By whom _____

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

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

JUL 11 2007

(9) LOCATION OF WELL (legal description)

County Marion
Tax Lot 1400 Lot _____
Township 4 S Range 1 W WM
Section 2 SW 1/4 SE 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 22540 NE Boones Ferry Rd.
Aurora, OR 97002

(10) STATIC WATER LEVEL

95.5 ft. below land surface. Date 6-20-07

_____ ft. below land surface. Date _____

Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found 25'

From	To	Estimated Flow Rate	SWL
25	32	DNM	17.5'
118	134	25 gpm	95.5'
146	163	DNM	95.5'

(12) WELL LOG

		Ground Elevation		SWL
Soil	Material	From	To	
Clay brown sandy		1	18	
Clay sandy		18	25	
Sand brown packed		25	32	
Packed silt brown		32	43	
Clay blue		43	46	
Clay grey silty		46	51	
Clay grey sticky		51	60	
Clay grey w/ silt		60	65	
Sandy silt grey		65	70	
Sand		70	87	
Clay grey sticky		87	105	
Packed silt grey		105	108	
Clay grey med		108	113	
Wood brown w/ sand		113	118	

continued on page 2

Date Started 6-15-07

Completed 6-20-07

(unbonded) Water Well Constructor Certification

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

WWC Number 1358

Date 7-3-07

Signed _____

(bonded) Water Well Constructor Certification

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

WWC Number 638

Date 7-3-07

Signed _____

A circular logo with a central vertical element and horizontal lines. The central element is a vertical bar with a series of horizontal lines passing through it, creating a grid-like pattern. The entire design is enclosed within a circular border.

36728 S. Kropf Rd., Molalla, OR 97038 • Phone: (503) 829-2526 FAX (503) 829-7514

WELL ID#	OWNER/BUSINESS NAME	MAILING ADDRESS	CITY/STATE/ZIP
L84749	Bullfrog Properties, LLC	2917 Fourth St.	Hubbard, OR 97032

WELL ADDRESS	COUNTY	TOWNSHIP	RANGE	SECTION	1/4	1/4	TAX LOT
22540 NE Boones Ferry Rd. Aurora, OR	Marion	4S	1W	2	SW	SE	1400

[illegible]

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APR 22 2026

Salem, OR

RECEIVED

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WATER RESOURCES DEPT
SALEM, OREGON

OREGON



Received by OWRD

APR 22 2026

Salem, OR

Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Bullfrog Properties LLC

PO Box 98 Hubbard, OR 97032

Transaction Type: COBU

Fees Received: \$ 345.00

☐ Cash

☒ Check:

Check No. 2504

Name(s) on Check: Will McGill Surveying 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.