

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



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

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

Enter the date the priority date of the permit:

June 22, 2020; the fee is  
included

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

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

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at:  
<https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

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

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

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

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

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

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see  
<https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx>

## SECTION 1 GENERAL INFORMATION

**1. File Information:**

APPLICATION # <b>G-18997</b>	PERMIT # (IF APPLICABLE) <b>G-18552</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>N/A</b>
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>ABG OREGON VINEYARDS LLC</b>		PHONE NO. <b>503-713-1791</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>600 UNIVERSITY ST SUITE 902</b>			
CITY <b>SEATTLE</b>	STATE <b>WA</b>	ZIP <b>98101</b>	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 <b>ABG OREGON VINEYARDS LLC</b>			
ADDRESS <b>600 UNIVERSITY ST SUITE 902</b>			
CITY <b>SEATTLE</b>	STATE <b>WA</b>	ZIP <b>98101</b>	

ADDITIONAL PERMIT HOLDER OF RECORD <b>N/A</b>			
ADDRESS			
CITY	STATE	ZIP	

**4. Date of Site Inspection:**

**October 24, 2025**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Clay Wesson</b>	<b>October 24, 2025</b>	<b>Head of Viticulture</b>
<b>Ivan George</b>	<b>October 24, 2025</b>	<b>Operations Supervisor</b>

**6. County:**

**Yamhill**

**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 <b>N/A</b>			
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.



<b>CWRE NAME</b> Robyn Cook	<b>PHONE NO.</b> 971-200-8505	<b>ADDITIONAL CONTACT NO.</b>	
<b>ADDRESS</b> GSI Water Solutions, Inc., 650 NE Holladay Street, Suite 900			
<b>CITY</b> Portland	<b>STATE</b> OR	<b>ZIP</b> 97232	<b>E-MAIL</b> rcook@gsiws.com

**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
	Brandon Ackley	President	4/3/26

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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 1	YAMH 58187	L133656
Well 2	YAMH 58188	L133657
Well 3	YAMH 58189	L133658
Well 5	YAMH 58191	L133659

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 1	Stag Hollow Creek Basin	-
Well 2	Stag Hollow Creek Basin	-
Well 3	Stag Hollow Creek Basin	-
Well 5	Stag Hollow Creek Basin	-

**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 1	Commercial Use	N/A	January 1 – December 31	0.165 cfs
Well 2				
Well 3				
Well 5				
<b>Total Quantity of Water Used</b>				<b>0.165 cfs</b>

**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 from Wells 1, 2, 3, and 5 is pumped using submersible pumps and conveyed to four storage tanks. From this system bulge, water is distributed through mainlines and a closed pipe system throughout the place of 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).

**5. Variations:**

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

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

N/A

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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 1	0.165 cfs	0.08 cfs	0.028 cfs	Commercial	N/A	N/A
Well 2		0.44 cfs	0.145 cfs			
Well 3		0.07 cfs	0.011 cfs			
Well 5		0.05 cfs	0.006 cfs			

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**SECTION 4  
SYSTEM DESCRIPTION**

Are there multiple POAs? YES NO

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

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

Well 1, Well 2, Well 3, and Well 5

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YES NO

**A. Place of Use**

1. Is the right for municipal use?

If "YES" the table below may be deleted.

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TWP	RNG	MER	SEC	QQ	GLot	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
2S	4W	WM	35	SWNE	-	-	Commercial	N/A	N/A
2S	4W	WM	35	NESW	-	-		N/A	N/A
2S	4W	WM	35	NWSW	-	-		N/A	N/A
2S	4W	WM	35	SWSW	-	-		N/A	N/A
<b>Total Acres Irrigated</b>								N/A	N/A

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

**B. Groundwater Source Information (Well)**

1. Is the appropriation from a well? YES NO

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

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

Well 1	PVC access port on east side of well
Well 2	PVC access port on east side of well
Well 3	PVC access port on west side of well
Well 5	PVC access port on east side of well

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
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N/A – Well logs are provided in Attachment B.

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.

N/A – Well logs are provided in Attachment B.

### C. Groundwater Source Information (Sump)

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

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

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

2. Pump Information:

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WELL NAME	MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Well 1	Grundfos	-	-	Submersible	1.0 in	1.0 in
Well 2	Grundfos	-	-	Submersible	1.5 in	1.5 in
Well 3	Grundfos	-	-	Submersible	1.0 in	1.0 in
Well 5	Grundfos	-	-	Submersible	1.0 in	1.0 in

\*The pumps are submersible and the model and serial number could not be accessed during the site visit.

3. Motor Information:

WELL NAME	MANUFACTURER	HORSEPOWER
Well 1	Grundfos	1.5 HP
Well 2	Grundfos	7.5 HP
Well 3	Grundfos	1.0 HP
Well 5	Grundfos	1.0 HP

4. Theoretical Pump Capacity – Pump at Well:

WELL NAME	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)
Well 1	1.5 HP	5.0 psi	116 ft	5 ft	0.08 cfs
Well 2	7.5 HP	5.0 psi	101 ft	7 ft	0.44 cfs
Well 3	1.0 HP	5.0 psi	94 ft	0 ft	0.07 cfs
Well 5	1.0 HP	5.0 psi	113 ft	13 ft	0.05 cfs

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

5. Provide pump calculations:

Pump calculations are provided in Attachment C.

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

WELL NAME	INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Well 1	2,304,602.0 gal	2,304,614.6 gal	1.0 min	0.028 cfs
Well 2	2,485,300.0 gal	2,485,365.0 gal	1.0 min	0.145 cfs
Well 3	119,900.0 gal	119,904.9 gal	1.0 min	0.011 cfs
Well 5	88,790.0 gal	88,792.7 gal	1.0 min	0.006 cfs

**7. Theoretical Pump Capacity – Pump at Sump:**

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

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

**8. Provide pump calculations:**

N/A

**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)
N/A			

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YES NO

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**10. Is the distribution system piped?**

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

**11. Mainline Information:**

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
1.5 in	713 ft	PVC	Above
2.0 in	1,586 ft	PVC	Above
3.0 in	345 ft	PVC	Above
4.0 in	6,103 ft	PVC	Buried

**12. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
N/A			

**13. Sprinkler Information:**

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

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)
N/A					

**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
N/A					

**16. Pivot Information:**

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

**E. Storage**

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

YES NO

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

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

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YES NO  
YES NO

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Polyurethane	4 tanks; 10,000 gallons each	Above

**3. Bulge in System / Reservoir:**

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
N/A		

**F. Gravity Flow Pipe**

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

1. Does the system involve a gravity flow pipe?

YES NO

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

YES NO

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

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

None.

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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	April 16, 2021		
BEGIN CONSTRUCTION (A)	April 16, 2026	May 10, 2019	Well 1 constructed.
COMPLETE CONSTRUCTION (B)	N/A	September 2025	Facilities constructed.
COMPLETE APPLICATION OF WATER (C)	April 16, 2026	September 2025	Water used for commercial use throughout place of use at full authorized rate.

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

2. Is there an extension final order(s)? YES NO

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

### 3. Initial Water Level Measurements:

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

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

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

March

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

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
N/A – Initial water level measurements were submitted to OWRD.			

### 4. Annual Static Water Level Measurements:

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

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

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

March

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

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

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
N/A – Water level measurements were submitted to OWRD.			

**5. Pump Test:**

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

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

For additional information regarding pump tests see:  
<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

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

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

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

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

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

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

**\* The water user is submitting the pump test to OWRD Pump Test Support concurrently with the submittal of this COBU.**

**6. Measurement Conditions:**

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

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

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

b. Has a meter been installed? YES NO

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1	DLJ	2304602	Working	2,304,614.6 gal	April 2025
Well 2	DLJ	2006156	Working	2,485,365.0 gal	April 2025
Well 3	DLJ	23074603	Working	119,904.9 gal	April 2025
Well 5	DLJ	230748	Working	88,792.7 gal	April 2025

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

**7. Recording and reporting conditions:**

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

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

b. Have the reports been submitted? YES NO

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

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

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

WELL NAME	WELL ID #	DATE ATTACHED TO WELL
Well 1	L133656	5/14/2019
Well 2	L133657	5/16/2019
Well 3	L133658	5/21/2019
Well 5	L133659	5/29/2019

- e. Other conditions? YES NO

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

*Prior to using water from any well listed on this permit, the permittee shall ensure that the well has been assigned an OWRD Well Identification Number (Well ID tag), which shall be permanently attached to the well. The Well ID shall be used as a reference in any correspondence regarding the well, including any reports of water use, water level, or pump test data.*

Well ID tags have been permanently attached to each well and the Well ID is used as a reference in any correspondence regarding the well.

**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Attachment A	Permit G-18552
Attachment B	Well Logs
Attachment C	Pump Calculations
Attachment D	Claim of Beneficial Use Map

**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.

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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 place of use and wells were visited during the site inspection. The extent of the place of use and water system was located using aerial imagery (Google Earth, 2025), and a field survey completed during the site inspection. The map was created using Geographic Information System (GIS) software and spatial datasets obtained from Bureau of Land Management (BLM), Environmental Systems Research Institute (ESRI), Oregon Water Resources Department (OWRD), and United States Geological Survey (USGS). Additional data and information specific to the use of water under the water right described in this Claim of Beneficial Use report were obtained from the water user.

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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
- N/A If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- N/A 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.)
- N/A 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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**Attachment A**

Permit G-18552

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Claim of Beneficial Use – ABG Oregon Vineyards, LLC

STATE OF OREGON

COUNTY OF YAMHILL

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

ABG OREGON VINEYARDS LLC  
600 UNIVERSITY ST, STE 902  
SEATTLE WA 98101

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

APPLICATION FILE NUMBER: G-18997

SOURCE OF WATER: WELL 1 (YAMH 58187/L133656), WELL 2 (YAMH 58188/L133657), WELL 3 (YAMH 58189/L133658, AND WELL 5 (YAMH 58191/L133659) IN STAG HOLLOW CREEK BASIN

PURPOSE OR USE: COMMERCIAL USE

MAXIMUM RATE: 0.165 CUBIC FOOT PER SECOND, FURTHER LIMITED TO 46.8 ACRE-FEET ANNUALLY

THE MAXIMUM ALLOWED RATE UNDER THIS PERMIT, IN COMBINATION WITH USE UNDER APPLICATION G-18859, SHALL NOT EXCEED 0.165 CUBIC FOOT PER SECOND

PERIOD OF USE: JANUARY 1 THROUGH DECEMBER 31

DATE OF PRIORITY: JUNE 22, 2020

AUTHORIZED POINT OF APPROPRIATION:

POA Name	Twp	Rng	Mer	Sec	Q-Q	Measured Distances
WELL 1	2 S	4 W	WM	35	NE SW	1595 FEET NORTH AND 1300 FEET EAST FROM SW CORNER, SECTION 35
WELL 2	2 S	4 W	WM	35	SW SW	1210 FEET NORTH AND 960 FEET EAST FROM SW CORNER, SECTION 35
WELL 3	2 S	4 W	WM	35	NE SW	1820 FEET NORTH AND 1600 FEET EAST FROM SW CORNER, SECTION 35
WELL 5	2 S	4 W	WM	35	NW SW	1435 FEET NORTH AND 1180 FEET EAST FROM SW CORNER, SECTION 35

AUTHORIZED PLACE OF USE:

Twp	Rng	Mer	Sec	Q-Q
2 S	4 W	WM	35	SW NE
2 S	4 W	WM	35	NE SW
2 S	4 W	WM	35	NW SW
2 S	4 W	WM	35	SW SW

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**1. Water Use Measurement, Recording, and Reporting Condition:**

- A. Before water use may begin under this permit, the permittee shall install a totalizing flow meter at each point of appropriation. The permittee shall maintain the device in good working order.
- B. The permittee shall allow the watermaster access to the device; provided however, where any device is located within a private structure, the watermaster shall request access upon reasonable notice.
- C. The permittee shall keep a complete record of the volume of water used each month, and shall submit an annual report which includes the recorded water-use measurements to the Department annually, or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water-use information, including the place and nature of use of water under the permit.
- D. The Director may provide an opportunity for the permittee to submit alternative measuring and reporting procedures for review and approval.

**2. Static Water Level Condition:**

The Department requires the water user to obtain, from a qualified individual (see below), and report annual static water levels for each well on the permit. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.

The permittee shall report an initial March static water-level measurement once well construction is complete and annual measurements thereafter. Annual measurements are required whether or not the well is used. The first annual measurement will establish a reference level against which future measurements will be compared. However, the Director may establish the reference level based on an analysis of other water-level data. The Director may require the user to obtain and report additional water levels each year if more data are needed to evaluate the aquifer system.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board. Measurements shall be submitted on forms provided by, or specified by, the Department. Measurements shall be made with equipment that is accurate to at least the standards specified in OAR 690-217-0045. The Department requires the individual performing the measurement to:

- A. Associate each measurement with an owner's well name or number and a Department well log ID; and
- B. Report water levels to at least the nearest tenth of a foot as depth-to-water below ground surface; and
- C. Specify the method of measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

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The water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s) if any of the following events occur:

- A. Annual water-level measurements reveal an average water-level decline of three or more feet per year for five consecutive years; or
- B. Annual water-level measurements reveal a water-level decline of 15 or more feet in fewer than five consecutive years; or
- C. Annual water-level measurements reveal a water-level decline of 25 or more feet; or
- D. Hydraulic interference leads to a decline of 25 or more feet in any neighboring well with senior priority.

The period of restricted use shall continue until the water level rises above the decline level which triggered the action or the Department determines, based on the permittee's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or causing substantial interference with senior water rights. The water user shall not allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

**3. Well Identification Tag Condition:**

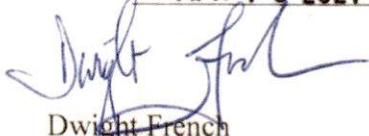
Prior to using water from any well listed on this permit, the permittee shall ensure that the well has been assigned an OWRD Well Identification Number (Well ID tag), which shall be permanently attached to the well. The Well ID shall be used as a reference in any correspondence regarding the well, including any reports of water use, water level, or pump test data.

**STANDARD CONDITIONS**

- 1. Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.
- 2. If the number, location, source, or construction of any well deviates from that proposed in the permit application or required by permit conditions, this permit may be subject to cancellation, unless the Department authorizes the change in writing.
- 3. If substantial interference with surface water or a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

4. The well(s) shall be constructed and maintained in accordance with the General Standards for the Construction and Maintenance of Water Supply Wells in Oregon. The works shall be equipped with a usable access port adequate to determine water-level elevation in the well at all times.
5. Where two or more water users agree among themselves as to the manner of rotation in the use of water and such agreement is placed in writing and filed by such water users with the watermaster, and such rotation system does not infringe upon such prior rights of any water user not a party to such rotation plan, the watermaster shall distribute the water according to such agreement.
6. Prior to receiving a certificate of water right, the permit holder shall submit to the Water Resources Department the results of a pump test meeting the Department's standards for each point of appropriation (well), unless an exemption has been obtained in writing under OAR 690-217. The Director may require water-level or pump-test data every ten years thereafter.
7. This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.
8. By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.
9. Construction of the well shall begin within five years of the date of permit issuance. The deadline to begin construction may not be extended. This permit is subject to cancellation proceedings if the construction deadline to begin is missed.
10. Complete application of the water shall be made within five years of the date of permit issuance. If beneficial use of permitted water has not been made before this date, the permittee may submit an application for extension of time, which may be approved based upon the merit of the application.
11. Within one year after complete application of water to the proposed use, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner.

Issued **APR 16 2021**



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

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## **Attachment B**

Well Logs

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Claim of Beneficial Use - ABG Oregon Vineyards, LLC

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

YAMH 58187

WELL I.D. LABEL# L 133656
START CARD # 1042777
ORIGINAL LOG #

6/11/2019

(1) LAND OWNER Owner Well I.D. 3206-1
First Name Last Name
Company ABG OREGON VINEYARDS, LLC
Address 600 UNIVERSITY ST SUITE 902
City SEATTLE State WA Zip 98101

(2) TYPE OF WORK [X] New Well [ ] Deepening [ ] Conversion
[ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stil Plstc Wld Thrd
Casing: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
Material From To Amt sacks/lbs
Seal: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [ ] (Attach copy)
Depth of Completed Well 238.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Rows include Bentonite Chips and Calculated values.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[X] Other POUR/PROBE/HYDRATE
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [ ] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stil Plstc Wld Thrd
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 78
Temp casing [X] Yes Dia 10 From + 0 To 8

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type machine slot Material PVC
Perf/ Casing/ Screen Dia From To Scrn/slot Slot # of Tel/
Screen Liner 4 118 138 .032 length slots pipe size
Screen Liner 4 218 238 .032

(8) WELL TESTS: Minimum testing time is 1 hour
[ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
11.2 235 2

Temperature 54 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 137 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County YAMHILL Twp 2.00 S N/S Range 4.00 W E/W WM
Sec 35 NE 1/4 of the SW 1/4 Tax Lot 101
Tax Map Number Lot
Lat " or 45.35100981 DMS or DD
Long " or -123.14854069 DMS or DD
[ ] Street address of well [X] Nearest address
NYA, NE LAUGHLIN RD, YAMHILL

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 5/14/2019 76
Flowing Artesian? [ ] Dry Hole? [ ]

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row for 5/14/2019 shows values 183, 224, 11.2, 76.

(11) WELL LOG
Ground Elevation
Material From To
Top Soil 0 3
Clay, Tan/Brown some grit 3 19
Clay, tan w/brown claystone 19 33
Claystone, gray w/layers gray sandstone 33 69
Sandstone, coarse hard 69 83
Claystone, gray w/layers gray sandstone 83 179
Claystone, gray 179 183
Same, w/sandstone strats 183 190
Sandstone, gray w/lavender hard 190 198
Mix of gray claystone/sandstone 198 224
With blue/white/green 198 224
Claystone, gray w/Light gray clay 224 238

Date Started 5/10/2019 Completed 5/14/2019

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number 1977 Date 5/15/2019
Signed JOSE ESTRADA (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 1438 Date 5/22/2019
Signed DAVID PAYSINGER (E-filed)
Contact Info (optional) bluewaterdrilling.com || 503 868 7878

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

YAMH 58187

6/11/2019

Received  
APR 27 2026

OWRD

Map of Hole

STATE OF OREGON  
WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department  
725 Summer St NE, Salem OR 97301  
(503)986-0900



LOCATION OF WELL

Latitude: 45.3510550515 Datum: WGS84

Longitude: -123.14849777806

Township/Range/Section/Quarter-Quarter Section:

WM 6S 2W 34 NWNW

Address of Well:

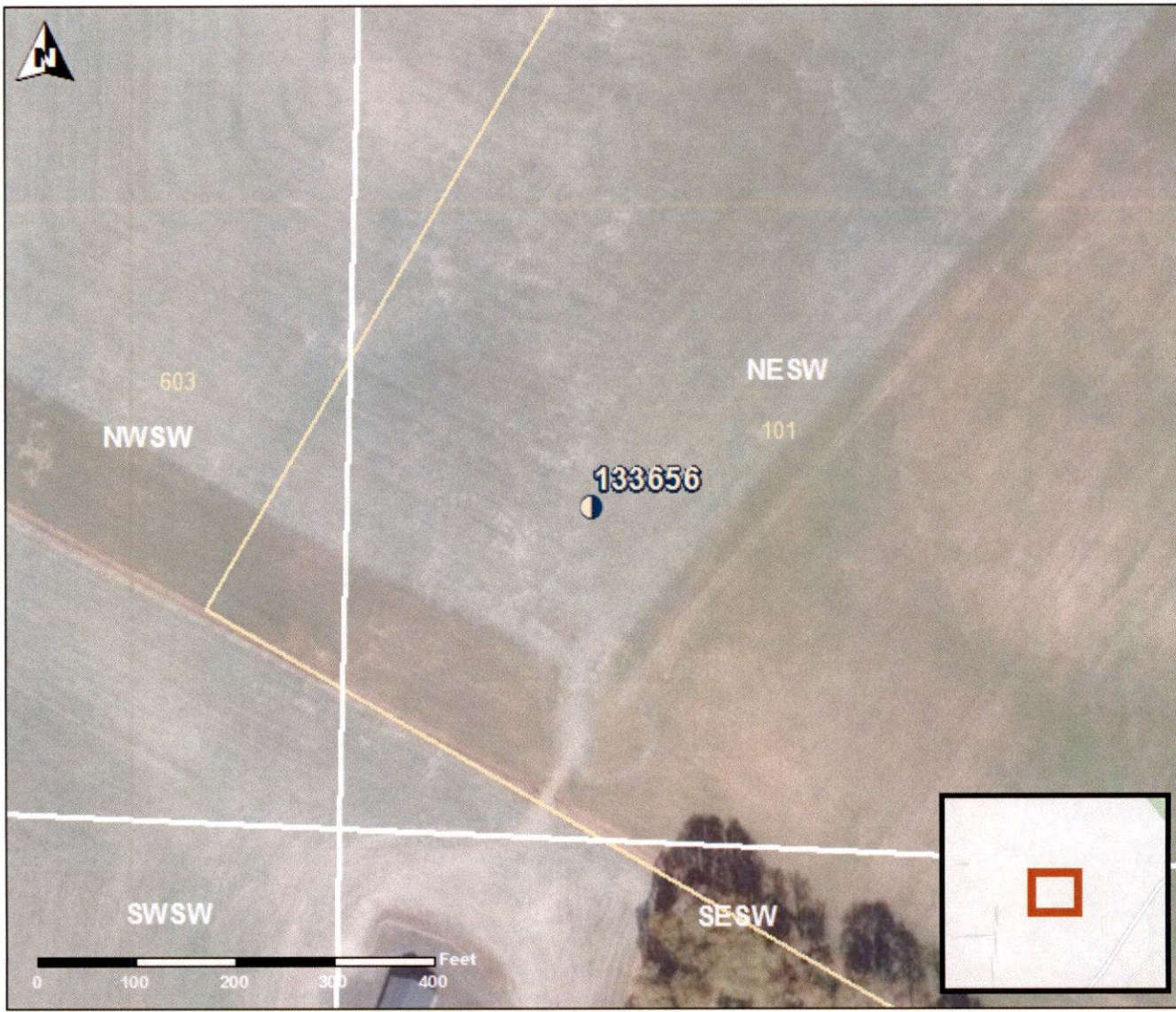
NYA, NE LAUGHLIN RD, YAMHILL

Well Label: 133656

Printed: May 15, 2019

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

YAMH 58188

6/11/2019

WELL I.D. LABEL# L 133657
START CARD # 1042846
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D. 3207-2
First Name Last Name
Company ABG OREGON VINEYARDS LLC
Address 600 UNIVERSITY ST SUITE 902
City SEATTLE State WA Zip 98101

(2) TYPE OF WORK
New Well Deepening Conversion
Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD
Rotary Air Rotary Mud Cable Auger Cable Mud
Reverse Rotary Other

(4) PROPOSED USE
Domestic Irrigation Community
Industrial/ Commercial Livestock Dewatering
Thermal Injection Other

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 281.00 ft.
Special Standard (Attach copy)

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Rows include Bentonite Chips and Calculated values.

How was seal placed: Method A B C D E
Other POUR/PROBE/HYDRATE
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe Inside Outside Other Location of shoe(s) 78
Temp casing Yes Dia 10 From + 1 To 5

(7) PERFORATIONS/SCREENS
Perforations Method skill saw
Screens Type Material
Table with columns: Perf/, Casing/ Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
Temperature 54 °F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 67 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County YAMHILL Twp 2.00 S N/S Range 4.00 W E/W WM
Sec 35 SW 1/4 of the SW 1/4 Tax Lot 603
Tax Map Number Lot
Lat " or 45.34978835 DMS or DD
Long " or -123.15036460 DMS or DD
Street address of well Nearest address
NYA, NE LAUGHLIN RD, YAMHILL

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 5/16/2019 61
Flowing Artesian? Dry Hole?

WATER BEARING ZONES
Depth water was first found 103.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft)

(11) WELL LOG
Ground Elevation
Material From To
Top soil 0 3
Clay, brown and red 3 11
Same, gritty w/some gray clay 11 35
Claystone, tan w/multi colored clay 35 39
Claystone, gray w/some weathering 39 48
Claystone, gray w/sandstone strats 48 61
Sandstone, hard coarse w/some green 61 64
Same w/cemented marine rock 64 67
Claystone, gray w/cemented marine rock 67 75
Marine rock, gray w/some claystone 75 103
Claystone, gray w/marine rock layers 103 259
mixed w/sandstone, gray w/white specks 103 259
Claystone, gray 259 263
Claystone, gray w/clay, getting softer 263 281

Date Started 5/15/2019 Completed 5/16/2019

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number 1977 Date 5/16/2019
Signed JOSE ESTRADA (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 1438 Date 5/22/2019
Signed DAVID PAYSINGER (E-filed)
Contact Info (optional) bluewaterdrilling.com | 503 868 7878

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

YAMH 58188

6/11/2019

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APR 27 2026

OWRD

Map of Hole

STATE OF OREGON  
WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department  
725 Summer St NE, Salem OR 97301  
(503)986-0900



LOCATION OF WELL

Latitude: 45.3497883496 Datum: WGS84

Longitude: -123.15036459553

Township/Range/Section/Quarter-Quarter Section:

WM 2S 4W 35 SWSW

Address of Well:

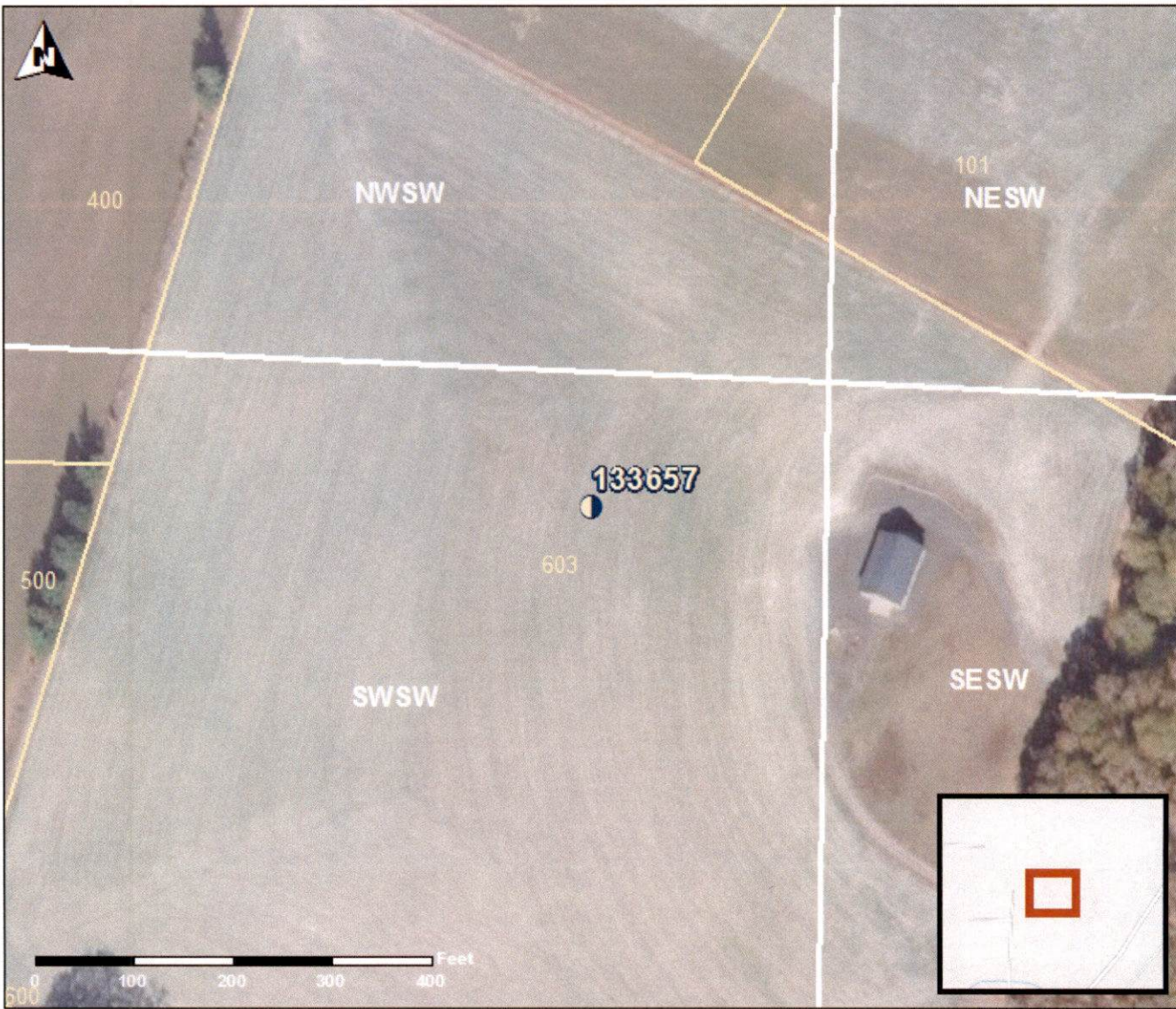
NYA, NE LAUGHLIN RD, YAMHILL

Well Label: 133657

Printed: May 16, 2019

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765 & OAR 690-205-0210)

YAMH 58189

WELL I.D. LABEL# L 133658  
START CARD # 1042847  
ORIGINAL LOG #

6/11/2019

(1) LAND OWNER Owner Well I.D. 3208-3

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Company ABG OREGON VINEYARDS LLC  
Address 600 UNIVERSITY ST SUITE 902  
City SEATTLE State WA Zip 98101

(2) TYPE OF WORK  New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

(2a) PRE-ALTERATION  
Dia + From To Gauge Stl Plstc Wld Thrd  
Casing: \_\_\_\_\_  
Material From To Amt sacks/lbs  
Seal: \_\_\_\_\_

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

(4) PROPOSED USE  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION Special Standard  (Attach copy)  
Depth of Completed Well 399.00 ft.

BORE HOLE SEAL sacks/lbs

Dia	From	To	Material	From	To	Amt	lbs
10	0	58.5	Bentonite Chips	0	58.5	30	S
6	58.5	401			Calculated	27	
					Calculated		

How was seal placed: Method  A  B  C  D  E  
 Other POUR/PROBE/HYDRATE  
Backfill placed from 399 ft. to 401 ft. Material CAVING SHALE  
Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

(5a) ABANDONMENT USING UNHYDRATED BENTONITE  
Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6	<input checked="" type="checkbox"/>	1.5	58.5	.25	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4	<input type="checkbox"/>	19	119	sch40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4	<input type="checkbox"/>	139	179	sch40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4	<input type="checkbox"/>	199	279	sch40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4	<input type="checkbox"/>	299	379	sch40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Shoe  Inside  Outside  Other Location of shoe(s) 58.5  
Temp casing  Yes Dia 10 From +  1 To 5

(7) PERFORATIONS/SCREENS

Perforations Method \_\_\_\_\_  
Screens Type machine slotted Material PVC

Perf/ Screen	Casing/ Screen	Dia	From	To	Scr/slot width	Slot length	# of slots	Teel/ pipe size
Screen	Liner	4	119	139	.032			4
Screen	Liner	4	179	199	.032			4
Screen	Liner	4	279	299	.032			4
Screen	Liner	4	379	399	.032			4

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
7.8		396	4

Temperature 54 °F Lab analysis  Yes By \_\_\_\_\_  
Water quality concerns?  Yes (describe below) TDS amount 317 ppm  
From To Description Amount Units

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)  
County YAMHILL Twp 2.00 S N/S Range 4.00 W E/W WM  
Sec 35 NE 1/4 of the SW 1/4 Tax Lot 101  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or 45.35218601 DMS or DD  
Long \_\_\_\_\_ " or -123.14726396 DMS or DD  
 Street address of well  Nearest address  
17795 NE LAUGHLIN RD, YAMHILL

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	5/21/2019			53.5

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 99.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
5/21/2019	99	375	7.8			53.5

(11) WELL LOG

Material	From	To
tOP sOIL	0	3
Clay, tan/gray	3	7
Sandstone, gray and tan weathered	7	19
Claystone, gray w/sandstone layers	19	28
Sandstone, gray hard	28	31
Claystone, gray hard	31	33
Sandstone, gray w/occ claystone layers	33	41
Claystone, hard Lt/Dk gray strats	41	97
Sandstone, gray	97	103
Sandstone, hard gray w/some lavender	103	136
Claystone, gray w/lavender sandstone	136	366
Same, w/occ hard layers gray sandstone	366	375
Claystone, gray w/hard sandstone layers	375	401

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Date Started 5/17/2019 Completed 5/21/2019

(unbonded) Water Well Constructor Certification  
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
License Number 1977 Date 5/22/2019  
Signed JOSE ESTRADA (E-filed)

(bonded) Water Well Constructor Certification  
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
License Number 1438 Date 5/22/2019  
Signed DAVID PAYSINGER (E-filed)  
Contact Info (optional) bluewaterdrilling.com || 503 868 7878

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

**YAMH 58189**

6/11/2019

Received

APR 27 2026

Map of Hole

OWRD

STATE OF OREGON  
WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301  
(503)986-0900



LOCATION OF WELL

Latitude: 45.3521860114 Datum: WGS84

Longitude: -123.14726396191

Township/Range/Section/Quarter-Quarter Section:

WM 2S 4W 35 NESW

Address of Well:

17795 NE LAUGHLIN RD, YAMHILL

Well Label: 133658

Printed: May 22, 2019

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

YAMH 58191
6/11/2019

WELL I.D. LABEL# L 133659
START CARD # 1042959
ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. 3210-5
First Name Last Name
Company ABG OREGON VINEYARDS LLC
Address 600 UNIVERSITY ST. SUITE 902
City SEATTLE State WA Zip 98101

(2) TYPE OF WORK [X] New Well [ ] Deepening [ ] Conversion
[ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal:

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [ ] (Attach copy)
Depth of Completed Well 382.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Row 1: 10, 0, 68.5, Bentonite Chips, 0, 68.5, 61, S. Row 2: 6, 68.5, 382, Calculated, 33.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[X] Other POUR/PROBE/HYDRATE
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [ ] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 68.5
Temp casing [X] Yes Dia 10 From + [X] 1 To 5

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type machine slot Material PVC
Perf/ Casing/ Screen Dia From To Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
[ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature 54 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 525 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County YAMHILL Twp 2.00 S N/S Range 4.00 W E/W WM
Sec 35 NE 1/4 of the SW 1/4 Tax Lot 101
Tax Map Number Lot
Lat " or 45.35097211 DMS or DD
Long " or -123.14893766 DMS or DD
[ ] Street address of well [ ] Nearest address
17795 NE LAUGHLIN RD, YAMHILL

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 5/29/2019 73
Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 78.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
5/29/2019 78 339 4 73

(11) WELL LOG
Ground Elevation
Material From To
Top soil 0 3
Clay, brown w/some red 3 6
Clay, tan w/some red and blue 6 34
Claystone, gray w/sandstone, siltstone 34 175
Marine rock, gray coarse 175 263
Claystone, gray w/sandstone layers 263 339
Claystone, gray w/more&more gray clay 339 382

Date Started 5/23/2019 Completed 5/29/2019

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number 1977 Date 5/30/2019
Signed JOSE ESTRADA (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 1438 Date 5/30/2019
Signed DAVID PAYSINGER (E-filed)
Contact Info (optional) bluewaterdrilling.com | 503 868 7878

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

YAMH 58191

Received

6/11/2019

APR 27 2026

Map of Hole

OWRD

STATE OF OREGON  
WELL LOCATION MAP

Oregon Water Resources Department  
725 Summer St NE, Salem OR 97301  
(503)986-0900



This map is supplemental to the WATER SUPPLY WELL REPORT

LOCATION OF WELL

Latitude: 45.3509721136 Datum: WGS84

Longitude: -123.14893766033

Township/Range/Section/Quarter-Quarter Section:

WM 2S 4W 35 NESW

Address of Well:

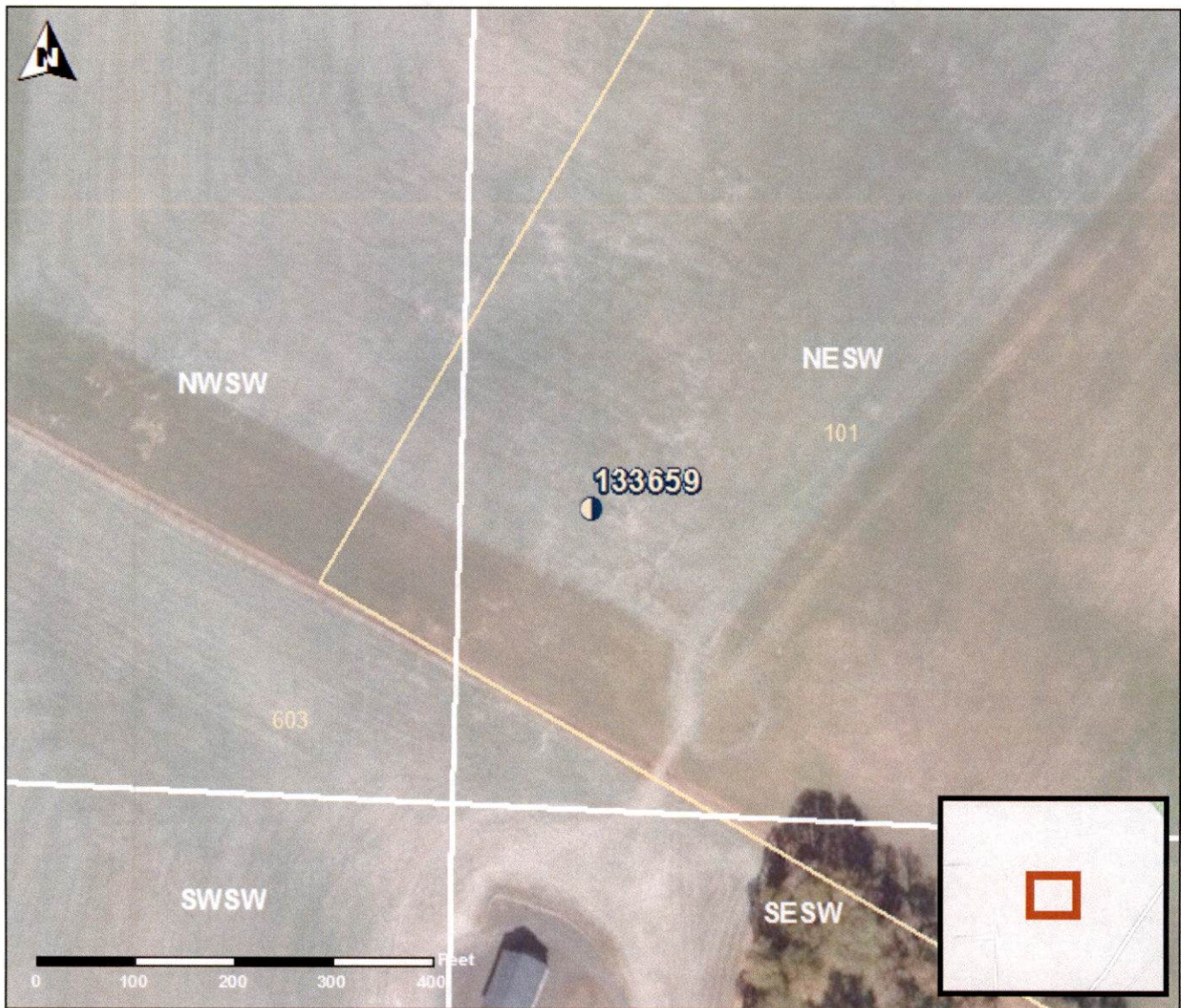
17795 NE LAUGHLIN RD, YAMHILL

Well Label: 133659

Printed: May 30, 2019

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



Received

APR 27 2026

OWRD

## **Attachment C**

Pump Calculations

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Claim of Beneficial Use – ABG Oregon Vineyards, LLC

# Well 1, YAMH 58187/L133656

## Pump Capacity Calculation Sheet

using Department designed formula:

$$(\text{hp})(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

---

### Data Entry (fill in underlined blanks)

---

HP = 1.5  
Efficiency = 7.04  
Lift = 121  
PSI = 5.0

---

### Results Calculated

---

(hp)(efficiency) = 10.56  
Head based on psi = 12.7  
Total dynamic head = 133.7  
(head + lift)

**Pump Capacity = 0.08 cubic feet per second**

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# Well 2, YAMH 58188/L133657

## Pump Capacity Calculation Sheet

using Department designed formula:

$(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

---

### Data Entry (fill in underlined blanks)

---

HP = 7.5  
Efficiency = 7.04  
Lift = 108  
PSI = 5.0

---

### Results Calculated

---

$(hp)(\text{efficiency}) = 52.8$   
Head based on psi = 12.7  
Total dynamic head = 120.7  
(head + lift)

**Pump Capacity = 0.44 cubic feet per second**

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# Well 3, YAMH 58189/L133658

## Pump Capacity Calculation Sheet

using Department designed formula:

$$(\text{hp})(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

---

### Data Entry (fill in underlined blanks)

---

HP = 1.0  
Efficiency = 7.04  
Lift = 94  
PSI = 5.0

---

### Results Calculated

---

(hp)(efficiency) = 7.04  
Head based on psi = 12.7  
Total dynamic head = 106.7  
(head + lift)

**Pump Capacity = 0.07 cubic feet per second**

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# Well 5, YAMH 58191/L133659

## Pump Capacity Calculation Sheet

using Department designed formula:

$$(\text{hp})(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

---

### Data Entry (fill in underlined blanks)

---

HP = 1.0  
Efficiency = 7.04  
Lift = 126  
PSI = 5.0

---

### Results Calculated

---

(hp)(efficiency) = 7.04  
Head based on psi = 12.7  
Total dynamic head = 138.7  
(head + lift)

**Pump Capacity = 0.05 cubic feet per second**

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APR 27 2026  
OWRD

Received  
APR 27 2026  
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APR 27 2026  
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## **Attachment D**

Claim of Beneficial Use Map

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Claim of Beneficial Use - ABG Oregon Vineyards, LLC



April 7, 2026

Jonnine Skaug  
Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem, Oregon 97301-1271

RE: Claim of Beneficial Use for Permit G-18552

Jonnine:

On behalf of ABG Oregon Vineyards LLC, please find enclosed a Claim of Beneficial Use (COBU) report for Permit G-18552.

Please do not hesitate to contact me at 541-753-0933 with questions about the enclosed COBU.

Sincerely,

A handwritten signature in black ink that reads "Zach Westfall".

Zach Westfall  
Water Resources Consultant

A handwritten signature in black ink that reads "Robyn Cook".

Robyn Cook, RG, PG, CWRE  
Principal Hydrologist

Enclosures:  
Claim of Beneficial Use for Permit G-18552 and \$345 fee

Received  
APR 27 2026

OWRD