

**CLAIM OF
BENEFICIAL USE
for Transfer New or Additional
POA Only**



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

A fee of \$345 must accompany this form for transfers where the application was submitted on July 9, 1987, or later.

Enter the date the transfer application was submitted:

September 6, 2024

A separate form shall be completed for each transfer.

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

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

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**SECTION 1
GENERAL INFORMATION**

Type of Authorized Change

This Claim is being submitted for a transfer where the only authorized change was a change in point(s) of appropriation or additional point(s) of appropriation, or a combination of both.

YES

If additional changes were authorized, you will need to select a different form.

1. File Information

APPLICATION #

T-14528

Revised 7/1/2025

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WR

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Chuck Eder Leasing LLC 50%, Gerald Eder 25%, & Eder-Deshon Family Trust 25%		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS 7776 North Howell Rd NE			
CITY Silverton	STATE OR	ZIP 97381	E-MAIL

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

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

TRANSFER HOLDER OF RECORD Chuck Eder Farms, Inc.		
ADDRESS 11580 Hook Rd. NE		
CITY Mt. Angel	STATE OR	ZIP 97362

4. Date of Site Inspection:**June 9, 2026****5. Person(s) interviewed and description of their association with the project:**

NAME	DATE	ASSOCIATION WITH THE PROJECT
Ryan Eder	June 9, 2026	Operator and part owner

6. County**Marion County**

7. If any property described in the place of use of the transfer final order 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 Doann@McGillWaterRights.com

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Transfer Holder of Record Signature or Acknowledgement

Each transfer 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
<i>Chuck Eder</i>	<i>Chuck Eder</i>	<i>President</i>	<i>6-23-26</i>

SECTION 3 CLAIM DESCRIPTION

Note: The Claim only needs to describe the new or additional point(s) of appropriation. This Claim does not need to provide information for the original point(s) of appropriation unless the original point of appropriation is either a new or additional point of appropriation on another right involved in this transfer.

1. New or additional 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)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
Well 2	MARI 71887	L-157441	A well a tributary of Pudding River

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

If well logs are available, items A and B below can be deleted

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2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final?

YES

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

1. The authorized Wells 1 has not been constructed and is, therefore, not included in this Claim of Beneficial Use.
2. Old Well (MARI 3249) latitude and longitude is better describe from what is on WRIS as: 45.039044, -122.848919, WGS 84

3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
Well 2	0.28 cfs	0.54 cfs	Not measured

SECTION 4**SYSTEM DESCRIPTION**

Are there multiple new or additional Points of Appropriation (POA)?

NO

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

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

Well 2**A. POA System Information**

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Franklin	STS 0336F355F	Unknown	Submersible	6inch	3 inch

2. Motor Information:

MANUFACTURER	HORSEPOWER
Franklin	30 Hp

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3. 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)
30 Hp	70 psi	215 feet (from air test recorded on well log)	0 feet	0.54 cfs

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

4. Provide pump calculations:

$$Q \text{ Pump} = \frac{(30 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(215 \text{ ft lift} + 177.8 \text{ ft pressure head})} = 0.54 \text{ cfs}$$

5. 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			

6. Theoretical Pump Capacity – Pump at Sump:

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

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

7. Provide pump calculations:

NA

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

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

9. Additional notes or comments related to the system:

Access port is: 3/4 inch galvanized pipe through the vent/access port of the sanitary seal on the south side of the well casing.

B. Groundwater Source Information (Well and Sump)

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

If "NO", items 4 through 6 relating to this section may be deleted.

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NO

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Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

2. If the appropriation involves a **SUMP, provide the following information for each **SUMP**:**

LENGTH	WIDTH	AVERAGE DIAMETER	MAXIMUM DEPTH	SURFACE AREA (IN ACRES)	VOLUME IN CUBIC FEET OR ACRE FEET
NA					

3. If the sump is curbed constructed with watertight surface curbing, describe the curbing:

CURBING MATERIAL (CONCRETE, CONCRETE TILES, OR STEEL)	IF CONCRETE, PROVIDE THE THICKNESS OF THE WALL
NA	

C. Additional notes or comments related to the system:

None

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SECTION 5 CONDITIONS

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

1. Time Limits:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE NEW AND/OR ADDITIONAL POA(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	June 23, 2025	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2028	May 2026

* MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

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

NO

If "NO", you may delete the following table.

3. Measurement Conditions:

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

YES
new and existing

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 appropriation.

b. Has a meter been installed?

YES

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Old Well	Seametics	0526045 or 03262619	Working	127,571 gallons (June 9, 2026)	May 2026
Well 2	McCrometer	25-03572-04	Working	1,054,400 gallons (June 9, 2026)	May 2026

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

4. Recording and reporting conditions

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

NO

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

5. Other conditions required by the transfer final order or extension final order:

a. Were there special well construction standards?

NO

b. Was submittal of a ground water monitoring plan required?

NO

c. 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):

c) Condition (T-12539):

Water shall be acquired from the same aquifer (water source) as the original point of appropriation.

Compliance:

Old Well Cert 39904 (MARI 3249) was drilled to a depth of 208 feet, cased from 0 to 206 feet, perforated from 105 to 112, 128 to 135, 144 to 148, and 179 to 204 feet in medium conglomerate with sand and gravels.

Well 2 (MARI 71887 / L-157441) was drilled to 219 feet, cased to 219 feet, perforated 159 to 212 feet in cemented gravels and sand.

It appears this well obtains water from the alluvial aquifer; therefore, this condition has been met.

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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, modified Certificate 39904
State Water Well Report – MARI 71887	Well log and driller's notes for MARI 71887 – Well 2
BLM Cadastral Map	BLM Cadastral Map T. 6S. R. 1W. showing DLC and Government Lot locations

SECTION 7

CLAIM OF BENEFICIAL USE MAP

For the purpose of this Claim, the map identifying the location of the place of use does not require a new survey. The location of the place of use identified on the Claim map should be based on the original right of record at the time the transfer final order was issued. In transfers approved for additional points of appropriation, the original points must be identified the map based on the original right of record at the time the transfer final order was issued.

In order to properly examine your claim, the Department must have an accurate map that meets the criteria described in OAR 690-014-0170 and OAR 690-305-0010, which are provided below for your convenience:

OAR 690-014-0170 Minimum Requirements for Maps for Permit or Transfer Final Order Claims of Beneficial Use

- (1) Maps submitted by a CWRE as part of the Claim of Beneficial Use shall meet the standards in OAR chapter 690, division 305. In addition, the map shall meet the following criteria:
 - (a) Horizontal accuracy is required only to ten feet for the purpose of locating and quantifying water rights. Maps shall be developed from any standard survey method. Traverse closures are not required.
 - (b) Maps shall clearly designate the place of use and point of diversion or appropriation for each source and use.
 - (c) The map shall indicate by description, in relation to the point of diversion or appropriation, the location of any fish screens, by-pass devices, and measuring devices required by the permit or transfer final order.
 - (d) The following statement shall be placed on the map: "This map is not intended to provide legal dimensions or locations of property ownership lines."
- (2) A CWRE may make a written request to the Director for a waiver of one or more mapping standards. The Director will determine whether the waiver shall be allowed and will respond to such requests in writing.

OAR 690-305-0010 General Map Criteria

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Each map submitted to the Department shall meet the following general criteria in addition to any specific criteria identified in the rules for the relevant water right transaction:

- (1) Drawing
 - (a) The map shall be drafted on paper or polyester film with ink or otherwise printed in an indelible form with sufficient clarity so as to be easily reproduced or scanned. Maps may be submitted electronically in portable document format (pdf) and must be prepared consistent with, and include the same information as, a paper map.
 - (b) The preferred paper size is 8.5 inches by 11 inches and should be no larger than 30 inches by 30 inches. A map greater than 30 inches by 30 inches may be submitted if the Department grants, by mail or electronic means, advance approval of the larger size.
 - (c) Beginning April 1, 2029, regardless of whether the map is submitted electronically, on paper, or on polyester film, for any map that OAR chapter 690 requires be prepared by a Certified Water Right Examiner, a digital file containing the coordinate system and geospatial features of the map as specified by the Department shall be submitted in addition to the map, unless the Department provides a waiver. The digital file shall be submitted as a shapefile or other approved format in a manner required by the Department.
 - (d) A platted and recorded subdivision map, deed description survey map, or county assessor map may be submitted as the application map if all of the required information included in sections (2) and (3) of this rule is clearly shown.
 - (e) An aerial image may be provided in addition to the map to aid the Department in understanding the proposal.
 - (f) The map submitted under subsection (a) shall be the official record of the water right. An aerial image or digital file shall not be the official record of the water right.
- (2) Scale
 - (a) The map shall be drawn to a standard, even-numbered scale and one-inch shall not exceed 1320 feet.
 - (b) The map scale may exceed 1320 feet per inch if the Department grants, by mail or electronic means, advance approval of the requested scale.
 - (c) Notwithstanding subsection (a) and (b), for maps identifying the location of a municipal use place of use, one-inch can exceed 1320 feet; provided that the scale is sufficient to identify the quarter-quarters involved in the place of use.
- (3) Features: Features shall be clearly identified and labeled. Unless otherwise indicated in rule, the following features must be included in each map submitted to the Department:
 - (a) Mapping scale.
 - (b) North directional symbol.
 - (c) Legend.
 - (d) General location of main canals, ditches, flumes, pipelines, pumps, or other water delivery features used to transport water from the point(s) of diversion

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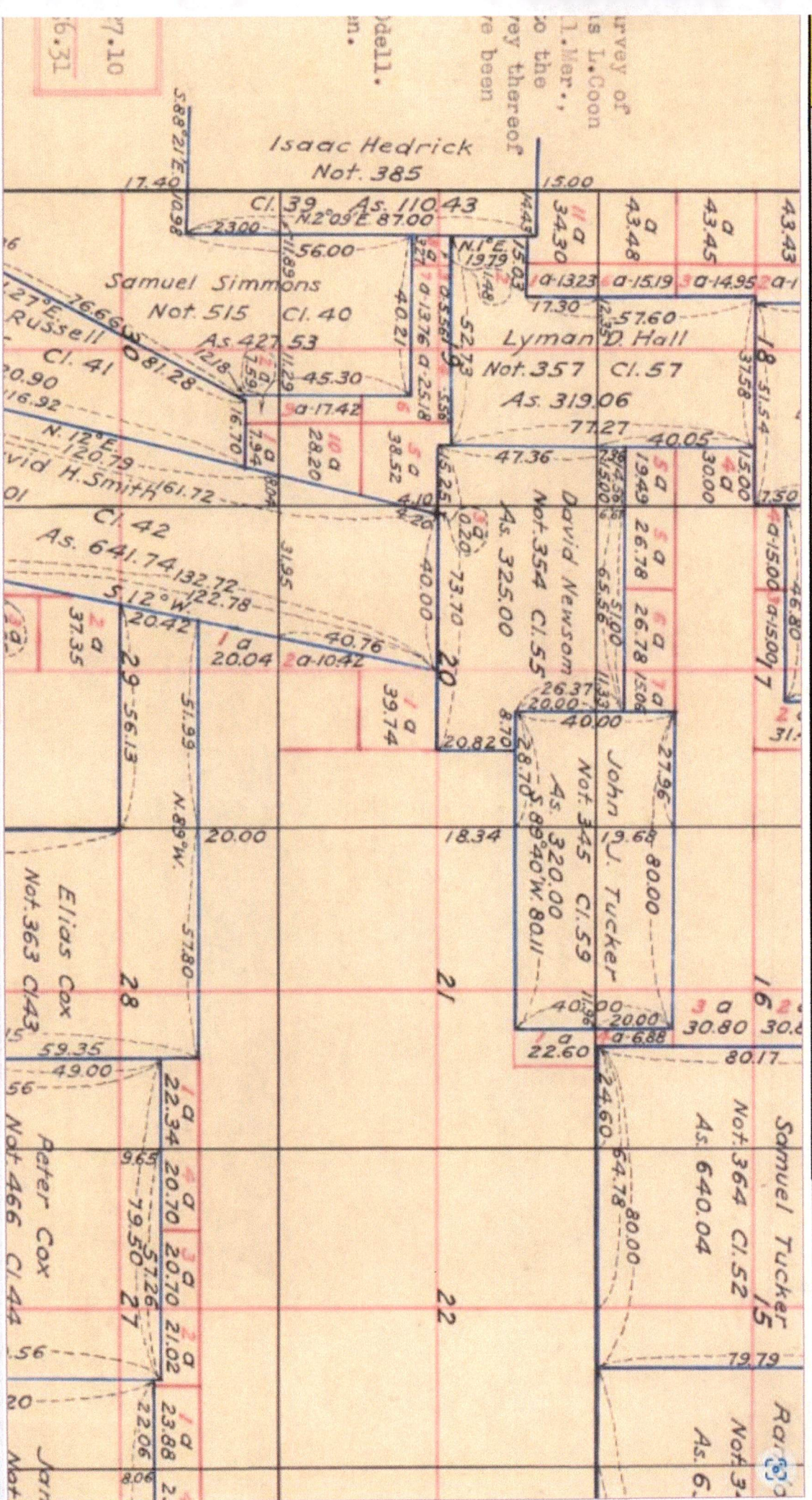
- or appropriation to the place use and to include the delivery features at the place of use.
- (e) Other topographical features such as rivers, creeks, streams, lakes, reservoirs, ponds, roads, or railroads that may be helpful to clarify and identify the location of points of diversion, wells, dams, and places of use.
 - (f) Location and flow direction of the water way if the source is surface water. If multiple water ways exist in the area of the proposed diversion and use, the map must identify the location and flow direction of the additional water ways.
 - (g) Township, range, section, quarter-quarter, and tax lot(s), donation land claims, or government lots where water will be or has been diverted, conveyed, and used. If the map is for municipal use the map:
 - (A) Must identify but does not need to label the quarter-quarters,
 - (B) Does not need to identify or label tax lots, donation land claims, or government lots.
 - (h) Location of each proposed or developed diversion point, well (point of appropriation), or dam by reference to a recognized public land survey corner. For a reservoir without a dam, the center of the reservoir shall be referenced to a recognized public land survey corner.
 - (A) The locations shall be shown by distance and bearing, or by coordinates (distance north or south and distance east or west from the corner). In addition, they shall also include latitude and longitude as established by a global positioning system.
 - (B) Latitude and longitude coordinates shall be expressed as degrees-decimal with five or more digits after the decimal (e.g., 42.53764^o). The datum used to establish the coordinates shall be indicated on the map. Examples of datums include NAD 83, NAD 27 and WGS84.
 - (i) Location of the proposed or developed place of use by township, range, section, and nearest quarter-quarter section.
 - (A) For irrigation or nursery use, the map shall additionally indicate the place of use in each quarter-quarter of a section by shading or hatchuring and indicate the number of acres in each quarter-quarter section, donation land claim, government lot, or other recognized public land survey lines.
 - (B) For places of use that are limited to a point, such as a stock watering tank, the location may also be identified by distance and bearing, or by coordinates (distance north or south and distance east or west from the corner). In addition, they shall include latitude and longitude as established by a global positioning system.
 - (C) Latitude and longitude coordinates shall be expressed as degrees-decimal with five or more digits after the decimal (e.g., 42.53764^o). The datum used to establish the coordinates shall be indicated on the map. Examples of datums include NAD 83, NAD 27 and WGS84.
 - (D) Where more than one point of diversion or well is included, the map must clearly identify the place(s) of use served by each point of diversion or well.

- (j) If for a supplemental irrigation application or claim of beneficial use, the location and water right reference number of the underlying primary right, registration or claim.
- (k) Any other information the Department requests and considers necessary to evaluate the water right transaction.

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STATE OF OREGON
WATER SUPPLY WELL REPORT

WELL 2
MARI 71887

WELL I.D. LABEL# 157441
START CARD # 1079948
ORIGINAL LOG #

Page 1 of 3

11/17/2025

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

(1) LAND OWNER

Owner Well I.D. DR-3817
First Name _____ Last Name _____
Company CHUCK EDER FARMS INC
Address 11580 HOOK RD NE.
City MT ANGEL State OR Zip 97362

(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

Special Standard ☐ (Attach copy)

Depth of Completed Well 219.00 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
14	0	39	Bentonite	0	39	27	S
10	39	219			Calculated	26.43	
					Calculated		

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: POURED DRY

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____

Seal Placement Begin Date 11/4/2025 Begin Time 13:00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

C/L	Dia	+ From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	10	☒ 1.6	219	0.250	ST	☒		IN.	219

Temp casing ☐ Yes Dia _____ From+ _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method Holte Air Perforator

Screens Type		Material							
Perf/ Screen	Casing/ Screen	Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/ Pipe size	
Perf	Casing	10	159	212	.25	1	2544		

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	300		215	2

Temperature 53 °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS amount 150 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County MARION Twp 6.00 S N/S Range 1.00 W E/W WM
Sec 19 NE 1/4 of the NE 1/4 Tax Lot 200
Tax Map Number _____ Lot _____
Lat _____ " or 45.03831887 DMS or DD
Long _____ " or -122.84938122 DMS or DD
☒ Street address of well ☐ Nearest address

7776 NORTH HOWELL RD. NE
SILVERTON OR. 97381

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+ SWL(ft)
Existing Well / Pre-Alteration			
Completed Well	11/12/2025		60

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES

Depth water was first found 105.00

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

11/12/2025	105	219	300		60

(11) WELL LOG

Ground Elevation 188.15 FT

Material	From	To
Topsoil	0	1
Clay Brown Sticky	1	15
Clay Brown/Gray Tint Soft	15	37
Clay Gray Silty w/ Cobbles	37	67
Sand Packed w/ Wood and Clay Gray	67	95
Gravel w/ Clay Gray	95	105
Sand w/ Small Gravel Gray	105	116
Gravel w/ Sand Brown Cemented-Sandy	116	150
Sand Brown w/ Cobbles	150	158
Gravel Brown Medium Cemented	158	191
Gravel Black/Brown w/ Course Sand	191	212
Clay Gray Soft Silty w/ Gravel	212	219
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Construction

Begin Date 11/4/2025 Begin Time 10:00 End Date 11/12/2025

(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 1974 Date 11/17/2025

Signed CJ NUGENT (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 664 Date 11/17/2025

Signed CHARLES NUGENT (E-filed)

Drilling Company: Nugent Drilling Co. Lebanon OR. 541-258-7816

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:
New exempt use wells must be submitted with a map and recording fee.

**WATER SUPPLY WELL REPORT -
continuation page**

MARI 71887

WELL I.D. LABEL# L157441

START CARD # 1079948

ORIGINAL LOG #

11/17/2025

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								
								

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL			sacks/ lbs	
Dia	From	To	Material	From	To		Amt
					Calculated		
					Calculated		
					Calculated		
					Calculated		
					Calculated		

FILTER PACK		Material	Size
From	To		

(6) CASING/LINER

[illegible]

(7) PERFORATIONS/SCREENS

[illegible]

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)

Water Quality Concerns

[illegible]

(10) STATIC WATER LEVEL

[illegible]

(11) WELL LOG

[illegible]

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Name of person(s) who assisted with construction and Trainee License # / Helper #

Assistant Name	Type	#
KYLE MOORE	WATER	2107
TIM NICHOLSON	HELPER WATER	8888849

Comments/Remarks

Gallons per minute are approximate. Mitsubishi Ultra max drive shoe was used in this well. Transfer 14528

**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: 45.03831887 Datum: WGS84

Longitude: -122.84938122

Township/Range/Section/Quarter-Quarter Section:

WM6.00S1.00W19NENE

Address of Well:

7776 NORTH HOWELL RD. NE
SILVERTON OR. 97381

Well Label: 157441

Printed: November 17, 2025

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



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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Chuck Eder Leasing LLC, Gerald Eder, & Eder-Deshon Family Trust, 7776 North Howell Rd Silverton, OR 97381

Transaction Type: COBU

Fees Received: \$ 345.00

☐ Cash

☒ Check:

Check No. 2653

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:

Arla Davis

(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.