

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

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OCT 27 2008

WATER RESOURCES DEPT
 SALEM, OREGON

Application for a Permit to Use
Ground Water

Please type or print in dark ink. If your application is found to be incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "n/a." Please read and refer to the instructions when completing your application. A summary of review criteria and procedures that are generally applicable to these applications is available at www.wrd.state.or.us/OWRD/PUBS/forms.shtml

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1. APPLICANT INFORMATION

A. Individuals

Applicant: Curtis Papineau
First Last

Mailing Address: PO Box 563
Lexington Ore. 97839
City State Zip

Phone: 541-989-8251 541-989-9500
Home Work Other

*Fax: _____ *Email Address: _____

B. Organizations

(Corporations, associations, firms, partnerships, joint stock companies, cooperatives, public and municipal corporations)

Name of Organization: _____

Name and Title of Person Applying: _____

Mailing Address or Organization: _____

City State Zip

Phone : _____
Day Evening

*Fax: _____ *Email Address: _____

*Optional

For Department Use			
App. No. _____	Permit No. _____	Date _____	

Last Updated: 6/26/2008

Assisted By Joel Clark - Dist 21 Watermaster

2. PROPERTY OWNERSHIP

Yes (Please check appropriate box below then skip to section 3 'Ground Water Development')

- There are no encumbrances
This land is encumbered by easements, rights of way, roads or other encumbrances (please provide a copy of the recorded deed(s))

No (Please check the appropriate box below)

- I have a recorded easement or written authorization permitting access.
I do not currently have written authorization or easement permitting access.
Written authorization or an easement is not necessary, because the only affected lands I do not own are state-owned submersible lands, and this application is for irrigated and/or domestic use only (ORS 274.040).

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You must provide the legal description of: (1) the property from which the water is to be diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used as depicted on the map.

List the names and mailing addresses of all affected landowners.

[Empty box for listing names and mailing addresses of affected landowners]

3. GROUND WATER DEVELOPMENT

A. Well Information

Number of well(s): 1

Name of nearest surface water body: Willow Creek

Distance from well(s) to nearest stream or lake:

- 1) 1/2 mile + 2) 3) 4)

If distance from surface water is less than one mile, indicate elevation difference between nearest surface water and well head:

- 1) 150 ft 2) 3) 4)

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B. Well Characteristics

Wells must be constructed according to standards set by the Department for the construction and maintenance of water wells. If the well is already constructed, please enclose a copy of the well constructor's log and the well ID number, if available, for each well with this application. Identify each well with a number corresponding to the wells designated on the map and proceed to section 4 of the form. If the well has not been constructed, or if you do not have a well log, please complete the following:

Well(s) will be constructed by:

See copy

Mailing Address:

City State Zip

Completion Date: 3-20-1971

Please provide a description of your well development. (Attach additional sheets if needed.)

Well No.	Diameter	Type and size of casing	No. of feet of casing	Intervals casing is perforated (in feet)	Seal depth	Est. depth to water	Est. depth to water bearing stratum	Type of access port or measuring device	Total well depth
1	6"	6" steel	30'		30'	80'	135'	access port	335'

Note: Well numbers in this listing must correspond to well locations(s) shown on accompanying map.

If well log is not available, or well is not yet constructed, you must provide: proposed total depth, depth of casing and seal, and the anticipated perforation and open intervals.

C. Artesian Flows

If your water well is flowing artesian, describe your water control and conservation works:

4. WATER USE

Please read the instruction booklet for more details on "type of use" definitions, how to express how much water you need and how to identify the water source you propose to use. You must fill out a supplemental form for some uses as they require specific information for that type of use.

A. Type(s) of Use(s)

See list of beneficial uses provided in the instructions.

- If your proposed use is **domestic**, indicate the number of households to be supplied with water: _____
- If your proposed use is **irrigation**, please attach **Form I**
- If your proposed use is **mining**, attach **Form R**
- If your proposed use is **municipal or quasi-municipal**, attach **Form M**
- If your proposed use is **commercial/industrial**, attach **Form Q**

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NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the

WATER WELL REPORT

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

STATE OF OREGON
(Please type or print)
(Do not write above this line)

State Well No. _____
State Permit No. _____

(1) OWNER:

Name 1st 1/2 1/2 1/2
Address 1st 1/2 1/2 1/2

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe the material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):

Rotary Driven Domestic Industrial Municipal
Cable Jetted Irrigation Test Well Other
Dug Bored

(5) CASING INSTALLED:

Threaded Welded
" Diam. from 2 ft. to 30 ft. Gage 200
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

(6) PERFORATIONS:

Perforated? Yes No.
Type of perforator used _____
Size of perforations in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? COARSEN
Yield: 100 gal./min. with 40 ft. drawdown after 1 hrs.
" 100 " " 60 " " 2 "
" 100 " " 80 " " 5 "
Baller test gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow g.p.m. _____
Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used _____
Well sealed from land surface to _____ ft.
Diameter of well bore to bottom of seal _____ in.
Diameter of well bore below seal _____ in.
Number of sacks of cement used in well seal _____ sacks
Number of sacks of bentonite used in well seal _____ sacks
Brand name of bentonite _____
Number of pounds of bentonite per 100 gallons
of water _____ lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County MORRIS Driller's well number _____
1/4 2E 1/4 Section - 7 T. 18 R. _____ W.M.
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found _____ ft.
10 ft. below land surface. Date 3/24
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____
Depth drilled 335 ft. Depth of completed well 200 ft.

Formation: Describe color, texture, grain size and structure of materials and show thickness and nature of each stratum and aquifer penetrated with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata

MATERIAL	From	To	SWL
SOIL	0	1	
COARSE GRAVEL	1	10	
BLACK BASALT	10	30	
GRAY BASALT	30	175	9
BLACK BASALT	175	280	
RED CLINDERS	280	335	8

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Work started 1/10 1971 Completed 3/26 1971
Date well drilling machine moved off of well 1/10 1971

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision
Materials used and information reported above are true to my
best knowledge and belief.
[Signed] _____ Date _____ 1971
(Drilling Machine Operator)
Drilling Machine Operator's License No. _____

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is
true to the best of my knowledge and belief.
Name _____ (Person, firm or corporation) (Type or print)
Address _____
[Signed] _____ (Water Well Contractor)
Contractor's License No. _____ Date _____ 1971

B. Amount of Water

Provide the production rate in gallons per minute (gpm) and the total annual amount of water you need from each well, from each source or aquifer, for each use. You do not need to provide source information if you are submitting a well log with your application.

Well No.	Source or aquifer	Type of use	Total rate of water requested (in gpm)	Total annual quantity (in gallons)	Production rate of well (in gpm)
1	Gray Basalt red Cinders	Irrigation	200	12,000,000	200

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 0.5 CFS
 (The fees for your application will be based on this amount.)

D. Period of Use

Indicate the time of year you propose to use the water: March 1st - Oct 31st
 (For seasonal uses like irrigation give dates when water use would begin and end, e.g. March 1-October 31.)

E. Acreage

If you will be applying water to land, indicate the total number of acres where water will be applied or used: 12.25
 (This number should be consistent with your application map.)

5. WATER MANAGEMENT

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A. Diversion

What method will you use to divert water from the source?

- Pump (give horsepower and pump type): 7 1/2 h.
- other means (describe): _____

B. Transport

How will you transport water to your place of use?

- Ditch or canal (give average width and depth):

Width _____ Depth _____

Is the ditch or canal to be lined? Yes No

- Pipe (give diameter and total length):

Diameter 3" Length 1200'

- other, describe: _____

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C. Application/Distribution Method

What equipment will you use to apply water to your place of use?

Hand lines

Irrigation or land application method (check all that apply):

- Flood
- High pressure sprinkler
- Low pressure sprinkler
- Drip
- Water Cannons
- Center pivot system
- Hand Lines
- Wheel Lines
- Siphon tubes or gated pipe with furrows
- other, describe: _____

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Distribution method

- Direct pipe from source
- In-line storage (tank or pond)
- Open Canal

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E. Conservation

What methods will you use to conserve water? Why did you choose this distribution or application method? Have you considered other methods to transport, apply, distribute or use water? For example, if you are using sprinkler irrigation rather than drip irrigation, explain. If you need additional space, attach a separate sheet.

Don't Sprinkle in High wind - Availability
No

6. PROJECT SCHEDULE

Indicate the anticipated dates that the following construction tasks should begin. If construction has already begun, or is completed, please indicate that date.

Proposed date construction will begin: _____

Proposed date construction will be completed: 1971

Proposed date beneficial water use will begin: _____

7. REMARKS

If you would like to clarify any information you have provided in the application, please do so here and reference the specific application question you are addressing.

8. MAP REQUIREMENTS

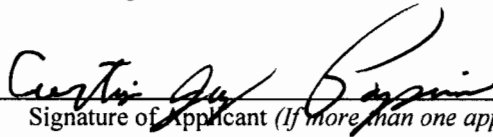
The Department cannot process your application without accurate information showing the source of water and location of water use. You must include a map with this application form that clearly indicates the township, range, section, and quarter/quarter section of the proposed well location and place of use. The map must provide tax lot numbers. See the map guidelines sheet for detailed map specifications.

9. SIGNATURE

By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application packet.
- I cannot legally use water until the Water Resources Department issues a permit to me.
- If I get a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be canceled.
- The water use must be compatible with local comprehensive land use plans.
- Even if the Department issues a permit, I may have to stop using water to allow senior water right holders to get water to which they are entitled.

I swear that all information provided in this application is true and correct to the best of my knowledge:



Signature of Applicant (If more than one applicant, all must sign.)

9-25-08

Date

Before you submit your application be sure you have:

- Answered each question completely.
- Attached a legible map which includes township, range, section, quarter/quarter and tax lot number.
- Included a Land Use Information Form or receipt stub signed by a local official.
- Included the legal description of all the property involved with this application. You may supply a copy of the deed, land sales contract, or title insurance policy, to meet this requirement.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount. The Department's fee schedule can be found at www.wrd.state.or.us or call (503) 986-0900.

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WRD on the web:
www.wrd.state.or.us



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FORM I

FOR IRRIGATION WATER USE

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1. Please indicate whether you are requesting a primary or supplemental irrigation water right.

Primary Supplemental

If supplemental, please indicate the number of acres that will be irrigated for each type of use.

Primary: 12.25 Acres

Secondary: _____ Acres

List the permit or certificate number of the primary water right: No. _____

2. Please list the anticipated crops you will grow and whether you will be irrigating them for a full or partial season:

- 1. Pasture Full season Partial season (from: _____ to _____)
- 2. Hay Full season Partial season (from: _____ to _____)
- 3. _____ Full season Partial season (from: _____ to _____)
- 4. _____ Full season Partial season (from: _____ to _____)

3. Indicate the maximum total number of acre-feet you expect to use in an irrigation season:

36.75 acre-feet
(1 acre-foot equals 12 inches of water spread over 1 acre, or 43,560 cubic feet, or 325,851 gallons.)

4. How will you schedule your applications of water? Will you be applying water in the evenings, twice a week, daily?

- Daily during daytime hours Daily during nighttime hours
- Two or three times weekly during daytime Two or three times weekly during nighttime
- Weekly, during daytime hours Weekly, during nighttime hours
- Other, explain: _____

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Oregon Water Resources Department
Land Use Information Form

THIS FORM IS NOT REQUIRED IF: 1) water is to be diverted, conveyed, and/or used only on federal lands; or 2) the application is for a water-right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and all of the following apply: a) only the place of use is proposed for change, b) there are no structural changes, c) the use of water is for irrigation, and d) the use is located in an irrigation district or exclusive farm-use zone.

Applicant Name: Curtis J Papineau
Mailing Address: PO Box 563
City: Lexington State: Or Zip: 97939 Day Phone: 541-989-8251

This application is related to a Measure 37 claim. [] Yes [] No

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), or used. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Table with 8 columns: Township, Range, Section, 1/4, Tax Lot #, Plan Designation, Water to be (Diverted, Conveyed, Used), Proposed Land Use. Includes handwritten entries for tax lots 400, 500, and 600.

List all counties and cities where water is proposed to be diverted, conveyed, or used. Morrow County, Lexington Or

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water, Water-Right Transfer, Exchange of Water, Allocation of Conserved Water, Limited Water Use License, Permit Amendment or Ground Water Registration Modification

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Source of water: [] Reservoir/Pond [x] Ground Water [] Surface Water (name)

Estimated quantity of water needed: .5 CFS [x] cubic feet per second [] gallons per minute [] acre-feet

Intended use of water: [x] Irrigation [] Commercial [] Industrial [] Domestic for household(s) [] Municipal [] Quasi-municipal [] Instream [] Other

Briefly describe: Irrigate pasture around home

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt below and include it with the application filed with the Water Resources Department.

Receipt for Request for Land Use Information

State of Oregon
Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301-1266

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WATER RESOURCES DEPT SALEM, OREGON

For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form.

This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

() Land uses to be served by proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): 3.041

() Land uses to be served by proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.)
If approvals have been obtained but all appeal periods have not ended, check "Being pursued".

Type of Land-Use Approval Needed (e.g. plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
<u>MOZO Farming Allowed Outright</u>	<u>MOZO 3.041 Farm Residential</u>	<input checked="" type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

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SALEM, OREGON

Name: Cori Timmons Title: Assoc. Planner
Signature: [Signature] Phone: 541-922-4624 Date: 9/29/08
Government Entity: Morrow County Planning Dept

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

Lexington

For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form.

This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

Land uses to be served by proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): 3.20

Land uses to be served by proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.)
If approvals have been obtained but all appeal periods have not ended, check "Being pursued".

Type of Land-Use Approval Needed (e.g. plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
<i>Farming Allowed outright</i>	<i>City Ordinance 3.20 FARM Residential</i>	<input checked="" type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued

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Name: Dee Burch Title: Town Recorder
 Signature: Dee Burch Phone: 989-8515 Date: 9-29-08
 Government Entity: Town of Lexington

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____
 City or County: _____ Staff contact: _____
 Signature: _____ Phone: _____ Date: _____



Oregon Water Resources Department Land Use Information Form

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Applicant Name: Curtis J Papinow
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 City: Lexington State: Or Zip: 97939 Day Phone: 541-999-8251

This application is related to a Measure 37 claim. Yes No

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), or used. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	1/4	Tax Lot #	Plan Designation (e.g. Rural Residential/RR-5)	Water to be:	Proposed Land Use:
<u>15</u>	<u>2SE</u>	<u>27</u>	<u>DA</u>	<u>400</u>	<u>FR</u>	<input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>FR</u>
"	"	"	<u>DA</u>	<u>500</u>		<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>FR</u>
"	"	"	<u>DB</u>	<u>600</u>		<input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>FR</u>
						<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	

List all counties and cities where water is proposed to be diverted, conveyed, or used. Morrow County
Lexington Or

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water Water-Right Transfer Exchange of Water
 Allocation of Conserved Water Limited Water Use License
 Permit Amendment or Ground Water Registration Modification

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Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: 2.5 CFS cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-municipal Instream Other _____

Briefly describe: Irrigate pasture around Home

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt below and include it with the application filed with the Water Resources Department.

Receipt for Request for Land Use Information

State of Oregon
 Water Resources Department
 725 Summer Street NE, Suite A
 Salem, OR 97301-1266

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EXHIBIT "A"

A parcel of land located in Section 27, Township 1 South, Range 25, East of the Willamette Meridian, in the County of Morrow and State of Oregon, described as follows:

Commencing at a point on the West side of the County Road 7.18 chains West of the Northeast Corner of the Southeast Quarter of Section 27, Township 1 South, Range 25, East of the Willamette Meridian, running thence West 14.59 chains, thence South 10.02 chains, thence West 2.75 chains, thence South 11°44' West 3.14 chains, thence South 39°00' East along the East side of the street 7.49 chains to the corner of the street, thence South 51°00' West along the South side of the street 1.92 chains to the intersection with the North line of the Southwest Quarter of the Southeast Quarter of Section 27 in the aforesaid Township, thence East along the fence on said line 1.64 chains, thence North 55°14' East 8.06 chains, along the fence on the North side of the County Road, thence North 27°14' East 8.52 chains, along the fence on the North side of the County Road, thence North 22°13' East 8.76 chains along the fence at the side of the County Road to the place of beginning.

EXCEPTING everything to the North and West of the State Highway.

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Do Not Scan

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

MORR 51418
11-07-2006

WELL LABEL # L 87755

START CARD # 1000235

(1) LAND OWNER Owner Well I.D. _____
First Name MARK Last Name LEMMON
Company _____
Address PO BOX 816
City HEPPNER State OR Zip 97836

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

(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 170.00 ft.

BORE HOLE SEAL

Dia	From	To	Material	From	To	Amt	sacks/ lbs
12	0	18	Bentonite	0	18	16	S
8	18	170					

How was seal placed: Method A B C D E
 Other POURED BENTONITE
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8		2	18	25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perf/	Casing/	Screen	From	To	Scrns/slot	Slot	# of	Tele/
Screen	Liner	Dia	From	To	width	length	slots	pipe size

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
100		70	1
300		170	1

Temperature 67 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County Morrow Twp 1.00 S N/S Range 25.00 E E/W WM
Sec 27 NW 1/4 of the SW 1/4 Tax Lot 900
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
58206 HWY 74 LEXINGTON, OR

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+	SWL(ft)
Completed Well	11-06-2006			23

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 45

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
11-06-2006	45	50	30			23
11-06-2006	60	100	75			23
11-06-2006	100	115	50			23
11-06-2006	125	170	100			23

(11) WELL LOG

Material	From	To
SOIL/BOULDERS	0	4
BLACK BASALT	4	45
SOFT BLACK BASALT	45	50
BLACK BASALT	50	60
SOFT BLACK BASALT	60	100
BROWN SCORIA W/GREEN CLAYSTONE	100	115
BLACK BASALT W/ GREEN CLAYSTONE	115	125
SOFT BLACK	125	170

Date Started 11-06-2006 Completed 11-06-2006

(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 1735 Date 11-07-2006
Electronically Filed
Signed CHAD COURTNEY (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 544 Date 11-07-2006
Electronically Filed
Signed LARRY BURD (E-filed)
Contact Info (optional)

Do NOT SCAN RECEIVED

MORR 108

19/25E-27ab
3731

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

JUL 18 1988

(START CARD) #

WATER RESOURCES DEPT
Well Number: MORR 108

(1) OWNER:

Name Roger Campbell
Address Box 372
City Lexington State OR Zip 97839

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 435 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount
Diameter	From To	Material	From To	sacks or pounds
12"	0 36	Cement	0 36	14 sacks
6"	36 435			

How was seal placed: Method A B C D E

Other _____

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

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Steel		Plastic		Welded		Threaded	
					✓				✓			
Casing:	8"	71	36	.250	✓				✓			
Liner:												

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
45		435	1 hr.

Temperature of water _____ Depth Artesian Flow Found _____

Was a water analysis done? Yes By whom _____

Did any strata contain water not suitable for intended use? Too little

Salty Muddy Odor Colored Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Morrow Latitude _____ Longitude _____
Township 1S N or S, Range 25E E or W, WM.
Section 27 NW ¼ NE ¼
Tax Lot _____ Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) Beside airport in Lexington, OR

(10) STATIC WATER LEVEL:

212 ft. below land surface. Date 4-30-88
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 262

From	To	Estimated Flow Rate	SWL
262	273	3	
401	435	40	

(12) WELL LOG:

Material	From	To	SWL
Fill dirt	0	3	
Cemented gravel	3	10	
Gravel + brown clay	10	16	
Soft brown basalt	16	32	
Gray basalt	32	98	
Soft brown basalt	98	122	
Gray basalt	122	241	
Gray basalt	241	262	
Soft black basalt	262	273	WB
Gray basalt	273	401	
Soft black basalt	401	435	WB
with soapstone			

Date started 4-27-88 Completed 4-30-88

(unbonded) Water Well Constructor Certification:

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

Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:

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

Signed Patrick Walker WWC Number 1218 Date 5-10-88