

Application for a Permit to Use Ground Water



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

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME: Jennifer & Eric Miller		PHONE (HM): 503.460.0354	
PHONE (WK): 503.499.0576	CELL: 503.367.2698		FAX:
ADDRESS: 3925 N. Kerby			
CITY: Portland	STATE: OR	ZIP: 97227	E-MAIL: larchcreek@yahoo.com

Organization Information

NAME:		PHONE:	FAX:
ADDRESS:			CELL:
CITY:	STATE:	ZIP:	E-MAIL:

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

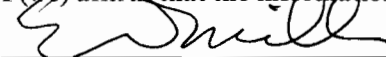
AGENT / BUSINESS NAME:		PHONE:	FAX:
ADDRESS:			CELL: NOV 15 2010
CITY:	STATE:	ZIP:	E-MAIL:

Note: Attach multiple copies as needed

By my signature below I confirm that I understand:

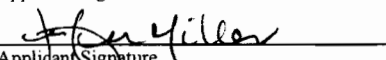
- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application.
- I cannot use water legally until the Water Resources Department issues a permit.
- Oregon law requires that a permit be issued before beginning construction of any proposed well, unless the use is exempt. Acceptance of this application does not guarantee a permit will be issued.
- 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 cancelled.
- 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 (we) affirm that the information contained in this application is true and accurate.


Applicant Signature

Eric Miller
Print Name and title if applicable

11/11/10
Date


Applicant Signature

Jennifer Miller
Print Name and title if applicable

11/11/10
Date

For Department Use		
App. No. <u>G-17437</u>	Permit No. _____	Date _____

SECTION 2: PROPERTY OWNERSHIP

Please indicate if you own all the lands associated with the project from which the water is to be diverted, conveyed, and used.

Yes

- There are no encumbrances.
- This land is encumbered by easements, rights of way, roads or other encumbrances.

No

- 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 irrigation and/or domestic use only (ORS 274.040).
- Water is to be diverted, conveyed, and/or used only on federal lands.

NOV 15 2010
 RECEIVED
 WATER DIVISION

List the names and mailing addresses of all affected landowners (*attach additional sheets if necessary*).

SECTION 3: WELL DEVELOPMENT

WELL NO.	NAME OF NEAREST SURFACE WATER	IF LESS THAN 1 MILE:	
		DISTANCE TO NEAREST SURFACE WATER	ELEVATION CHANGE BETWEEN NEAREST SURFACE WATER AND WELL HEAD
	Larch Creek	0.24 miles	215'

Please provide any information for your existing or proposed well(s) that you believe may be helpful in evaluating your application. For existing wells, describe any previous alteration(s) or repair(s) not documented in the attached well log or other materials (*attach additional sheets if necessary*).

Well drilled in 1979. Larch Creek is seasonal; flows from approx. March - June. Water stored in small, covered concrete cistern.

SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Domestic	Jan - Dec.	.008 AF
Irrigation	June - Sept.	13.75 AF

Exempt Uses: Please note that 15,000 gallons per day for single or group **domestic** purposes and 5,000 gallons per day for a single **industrial or commercial** purpose are exempt from permitting requirements.

For irrigation use only:

Please indicate the number of primary and supplemental acres to be irrigated (*must match map*).

Primary: 5.45 Acres Supplemental: _____ Acres

List the Permit or Certificate number of the underlying primary water right(s): _____

Indicate the maximum total number of acre-feet you expect to use in an irrigation season: NOV 15 2010

- If the use is **municipal or quasi-municipal**, attach **Form M**
- If the use is **domestic**, indicate the number of households: _____
- If the use is **mining**, describe what is being mined and the method(s) of extraction: _____

SECTION 5: WATER MANAGEMENT

A. Diversion and Conveyance

What equipment will you use to pump water from your well(s)?

Pump (give horsepower and type): solar-powered, 1-3 kw

Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. _____

B. Application Method

What equipment and method of application will be used? (e.g., drip, wheel line, high-pressure sprinkler)

drip w/ emitters e 3'

C. Conservation

Please describe why the amount of water requested is needed and measures you propose to: prevent waste; measure the amount of water diverted; prevent damage to aquatic life and riparian habitat; prevent the discharge of contaminated water to a surface stream; prevent adverse impact to public uses of affected surface waters.

Irrigation occurs only e each plant. No runoff.

SECTION 3: WELL DEVELOPMENT, CONTINUED

Source (aquifer), if known: _____

Total maximum rate requested: ~ 10 gpm (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below). *(not sure what potential for site may be)*

Complete the table below. If this is an existing well, the following information may be found on the applicable well log. *(If a well log is available, please submit it in addition to completing the table.)* If this is a proposed well, or well-modification, consider consulting with a licensed well driller, geologist, or certified water right examiner.

OWNER'S WELL NAME OR NO.	PROPOSED	EXISTING	WELL ID (WELL TAG) NO.* OR WELL LOG ID**	FLOWING ARTESIAN	CASING DIAMETER	CASING INTERVALS (IN FEET)	PERFORATED OR SCREENED INTERVALS (IN FEET)	SEAL INTERVALS (IN FEET)	MOST RECENT STATIC WATER LEVEL & DATE (IN FEET)	PROPOSED USE			
										SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL-SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FEET)
	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	6"	0-85'		0-25'	6/13/1979 101'		215'	5-10	13.75
	<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"/>									
	<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"/>									

* Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.
 ** A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.
 *** Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR

If you would like to store ground water in a reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Reservoir name: _____ Acreage inundated by reservoir: _____

Use(s): _____

Volume of Reservoir (acre-feet): _____ Dam height (feet, if excavated, write "zero"): _____

Note: If the dam height is greater than or equal to 10.0' above land surface AND the reservoir will store 9.2 acre feet or more, engineered plans and specifications must be approved prior to storage of water.

SECTION 7: USE OF STORED GROUND WATER FROM THE RESERVOIR

If you would like to use stored ground water from the reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Annual volume (acre-feet): _____

USE OF STORED GROUND WATER	PERIOD OF USE

NOV 15 2010
 BUREAU OF WATER RESOURCES
 DIVISION

SECTION 8: PROJECT SCHEDULE

Date construction will begin: 2011

Date construction will be completed: 2016 - Full build-out

Date beneficial water use will begin: June 2011

SECTION 9: REMARKS

Use this space to clarify any information you have provided in the application (*attach additional sheets if necessary*).

Land Use Information Form



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

NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

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) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; **and**
 - d) The application involves irrigation water uses only.

NOV 15 2010

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

Land Use Information Form



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

Applicant: Jennifer and Eric Miller
First Last

Mailing Address: 3925 N. Kerby Ave
Portland OR 97227 Daytime Phone: 503 367-2698
City State Zip

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. 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	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
2S	13E	19	SE SE	100	A-160/ EPD-8	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<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, and/or used or developed:

Wasco County
Dufur, OR
 NOV 15 2010

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 Permit Amendment or Ground Water Registration Modification
 Limited Water Use License Allocation of Conserved Water Exchange of Water

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

Estimated quantity of water needed: 13.75 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:

WATER RIGHT FOR IRRIGATION OF HOPS.

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

See bottom of Page 3. →

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 the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): WASCO Co. ULOS 3.210, B.1.

Land uses to be served by the 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:	
		<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
		<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.

Name: DAWN BAIRD Title: ASSOCIATE PLANNER
 Signature: Dawn Baird Phone: 541-506-2560 Date: 10/25/10
 Government Entity: WASCO COUNTY PLANNING & DEVELOPMENT

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: _____

Herb Mosgar

From: Eric Miller [larchcreek@yahoo.com]
Sent: Wednesday, November 17, 2010 10:33 AM
To: Herb Mosgar
Subject: Re: additional map info for Millers' permit application

Attachments: Ground Water App, new page 7001.pdf; Ground Water App, new page 5001.pdf; Dufur overhead map 1.ppt



Ground Water App, Ground Water App, Dufur overhead
new page 700... new page 500... map 1.ppt (2 MB..

Hi Herb,

Please find attached the revised Page5 and Page7 of the ground water application. Also included is a revision of the Area of Use map which includes the proposed Well #2.

I'll send the check in shortly.

Can you tell me, in the area where our project is located, have there been any water rights issues? Any applications denied? Any users required to cut back their allocation due to low water levels? Just curious.

Thanks,

Eric

RECEIVED

NOV 17 2010

**WATER RESOURCES DEPT
SALEM, OREGON**

----- Original Message -----

From: Eric Miller <larchcreek@yahoo.com>
To: Herbert.L.Mosgar@wrd.state.or.us
Sent: Tue, November 16, 2010 1:55:53 PM
Subject: additional map info for Millers' permit application

Hello,

Included is a revised map with the location of the existing well w/r/t the section corner. Also included is a copy of the original well log.

As part of the application process, we would also like to request consideration of another well being drilled for irrigation supply to the 5.5 acre Area of Use.

The second well would be in the vicinity of ~ 500' to the west of the existing well, and drilled to a depth of ~315'.

Thank you for your help with our application.

Eric and Jennifer Miller

RECEIVED

NOV 17 2010

WATER RESOURCES DEPT
SALEM, OREGON

SECTION 3: WELL DEVELOPMENT, CONTINUED

Source (aquifer), if known: _____

Total maximum rate requested: 70 gpm (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

Complete the table below. If this is an existing well, the following information may be found on the applicable well log. (If a well log is available, please submit it in addition to completing the table.) If this is a proposed well, or well-modification, consider consulting with a licensed well driller, geologist, or certified water right examiner.

OWNER'S WELL NAME OR NO.	PROPOSED	EXISTING	WELL ID (WELL TAG NO. OR WELL LOG ID)**	FLOWING ARTESIAN	CASING DIAMETER	CASING INTERVALS (IN FEET)	PERFORATED OR SCREENED INTERVALS (IN FEET)	SEAL INTERVALS (IN FEET)	MOST RECENT STATIC WATER LEVEL & DATE (IN FEET) †	PROPOSED USE			
										SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL-SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACR-FEET)
Dave Hard well	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	6"	0-85'		0-25'	6/13/1979 101'		215'	5-10	
WASC 51530	<input type="checkbox"/>	<input checked="" type="checkbox"/>	85698	<input type="checkbox"/>	6"	1.5'-38.5'	4'-318'	0-38.5'	2/10/2007 200'		318'	50	
WASC 50997	<input type="checkbox"/>	<input checked="" type="checkbox"/>	143362	<input type="checkbox"/>	6"	1'-25'	270'-310'	0-25'	9/19/2001 108'		310'	60	
Proposed well #2	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	To be	designed similar to WASC 51530 & WASC 50997 (above)						60	
	<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"/>									

* Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.
 ** A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.
 *** Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR

If you would like to store ground water in a reservoir, complete this section (if more than one reservoir, reproduce this section for each reservoir).

Reservoir name: _____ Acreage inundated by reservoir: _____

Use(s): _____

Volume of Reservoir (acre-feet): _____ Dam height (feet, if excavated, write "zero"): _____

Note: If the dam height is greater than or equal to 10.0' above land surface AND the reservoir will store 9.2 acre feet or more, engineered plans and specifications must be approved prior to storage of water.

SECTION 7: USE OF STORED GROUND WATER FROM THE RESERVOIR

If you would like to use stored ground water from the reservoir, complete this section (if more than one reservoir, reproduce this section for each reservoir).

Annual volume (acre-feet): _____

USE OF STORED GROUND WATER	PERIOD OF USE

RECEIVED
NOV 17 2010
WATER RESOURCES DEPT
SALEM, OREGON

SECTION 8: PROJECT SCHEDULE

Date construction will begin: 2011

Date construction will be completed: 2016 - Full build out

Date beneficial water use will begin: June 2011

SECTION 9: REMARKS

Use this space to clarify any information you have provided in the application (attach additional sheets if necessary).

The total flow for the irrigation project will be made up of any combination of flows from the two wells.

20050241

After recording return to: (Name, Address, Zip)
Eric and Jennifer Miller
3925 North Kerby
Portland OR 97227

Until requested otherwise, send all tax statements to:
(Name, Address, Zip)
Eric and Jennifer Miller
3925 North Kerby
Portland OR 97227

Microfilm No. 20050241
FILED
WASCO COUNTY
2005 JAN 14 A 10:07
KAREN LEBRETON COATS
COUNTY CLERK
STATE OF OREGON, } ss
County of Wasco,
I certify that this document was received
and recorded in the DEED records.
Karen LeBreton Coats, County Clerk
Deputy
A+T 10/1 LC 16 Recording 5

**WARRANTY DEED
(Individual Grantor)**

GREG ANDERSON, Grantor, conveys and warrants to ERIC A. MILLER and JENNIFER D. MILLER, husband and wife, Grantee, the following described real property free of encumbrances, except as specifically set forth herein, situated in Wasco County, State of Oregon, described as follows, to-wit:

That portion of the East half of Southeast quarter of Section 18, lying South of County Road; East half of Northeast quarter of Northeast quarter of Section 19, Township 2, South, Range 13 East of the Willamette Meridian; SUBJECT TO easement over the East 30 feet of Southeast quarter of Southeast quarter of Section 18, all in the County of Wasco and State of Oregon;

The property is free from encumbrances, except (if none, so state): EXCEPT THOSE OF RECORD, IF ANY

The true consideration for this conveyance is \$120,000.00. (Here comply with requirements of ORS 93.030.)

Dated: January 8, 2004

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITES AGAINST FARMING OR FOREST PRACTICES IN ORS 30.930.



GREG ANDERSON

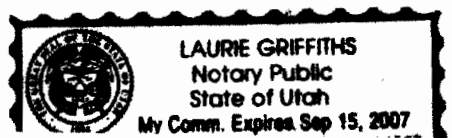
RECEIVED
NOV 15 2010

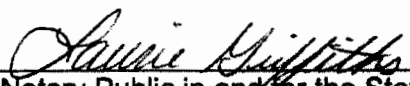
STATE OF UTAH }
County of Salt Lake }

PLANNING DEPT
WASCO COUNTY

The foregoing instrument was acknowledged before me on this 8th day of January, 2004 by GREG ANDERSON.

G-17437





Notary Public in and for the State of UTAH
My commission expires: 9/15/07

The original and first copy of this report are to be filed with the
WATER RESOURCES DEPARTMENT
SALEM, OREGON 97310
within 30 days from the date of well completion.

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

State Well No. _____

State Permit No. _____

(1) OWNER:

Name: David Hurd
Address: Rt 1 Box 149
Del Rio, Or 97021

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) CASING INSTALLED:

Threaded Welded

6" Diam. from 0 ft. to 85 ft. Gage 250
" 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?

Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.

" " " " " " " " " " " "

" " " " " " " " " " " "

Artesian flow _____ g.p.m.

Temperature of water 54° Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used Cement grout

Well sealed from land surface to 25 ft.

Diameter of well bore to bottom of seal 10 in.

Diameter of well bore below seal 6 in.

Number of sacks of cement used in well seal 11 sacks

How was cement grout placed? pressure grouted
with pump

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 Wasco Driller's well number _____

SE ¼ SE ¼ Section 18 T. 2 S. R. 13 E W.M.

Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 145 ft.

Static level 101 ft. below land surface. Date 6-13-79

Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG: Diameter of well below casing 6"

Depth drilled 215 ft. Depth of completed well 215 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, brown	0	4	
Sandstone, Lite Brown	4	10	
Sandstone, Brown	10	15	
Clay, light yellow	15	45	
Clay, rocky	45	60	
Rock, decomposed	60	65	
Rock, conglomerate	65	82	
Rock / seams	82	100	
Rock, decomposed	100	135	
Rock, grey hard	135	145	
Rock, grey porous	145	155	
Rock, grey/seams	155	165	
Rock, grey porous	165	200	
Rock, black/seams	200	215	

Work started June 7 1979 Completed June 13 1979

Date well drilling machine moved off of well June 13 1979

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 7-12, 1979

(Drilling Machine Operator)

Drilling Machine Operator's License No. 129

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 Gilbert Clayton Well Drilling

(Person, firm or corporation)

(Type or print)

Address Rt 1 Box 6-A, The Dalles, OR 97058

[Signed] _____

(Water Well Contractor)

Contractor's License No. 569 Date July 12, 1979

(USE ADDITIONAL SHEETS IF NECESSARY)

SP-6656-119

SUBMITTED BY EMAIL - BY APPLICANT
11-16-2010

G-17437

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

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date
of well completion.

WATER WELL REPORT

RECEIVED
JUL 16 1979

STATE OF OREGON
(Please type or print)

WASCO
003975

State Well No. 2.5/13E-15 dd

State Permit No.

(1) OWNER: WATER RESOURCES DEPT

Name Dave Hurd SALEM, OREGON
Address Rte 1 Box 149
Dufur, Or 97021

(2) TYPE OF WORK (check):

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

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
" Diam. from 0 ft. to 85 ft. Gage 250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

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?
Yield: gal./min. with ft. drawdown after hrs.
" " " " " "
" " " " " "
xxxx Air 5 gal./min. with 30 ft. drawdown after 1 hrs.
Artesian flow g.p.m.

Temperature of water 54° Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Cement grout
Well sealed from land surface to 25 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in.
Number of sacks of cement used in well seal 11 sacks
How was cement grout placed? pressure grouted
with pump

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 Wasco Driller's well number
SE ¼ SE ¼ Section 18 T. 2 S. R. 13 E W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 145 ft.
Static level 101 ft. below land surface. Date 6-13-79
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 6"

Depth drilled 215 ft. Depth of completed well 215 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, brown	0	4	
Sandstone, Lite Brown	4	10	
Sandstone, Brown	10	15	
Clay, light yellow	15	45	
Clay, rocky	45	60	
Rock, decomposed	60	65	
Rock, conglomerate	65	82	
Rock / seams	82	100	
Rock, decomposed	100	135	
Rock, grey hard	135	145	
Rock, grey porous	145	155	
Rock, grey/seams	155	165	
Rock, grey pourous	165	200	
Rock, black/seams	200	215	

Work started June 7 1979 Completed June 13 1979

Date well drilling machine moved off of well June 13 1979

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] Gilbert Clayton Date 7-12, 1979
(Drilling Machine Operator)

Drilling Machine Operator's License No. 129

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 Gilbert Clayton Well Drilling
(Person, firm or corporation) (Type or print)
Address Rt 1 Box 61-A, The Dalles, OR 97058

[Signed] Gilbert Clayton
(Water Well Contractor)

Contractor's License No. 569 Date July 12, 1979

G77437

WASC 51530

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

WELL I.D. # L 85298
 START CARD # 188941

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

(1) **LAND OWNER** Well Number _____
 Name ED WOODRILL
 Address 6297 ROBERTS MKT RD.
 City TILLAMOOK State OR Zip 97058

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

(3) **DRILL METHOD:**
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) **PROPOSED USE:**
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) **BORE HOLE CONSTRUCTION:**
 Special Construction approval Yes No Depth of Completed Well 318 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Sack or pounds	
Diameter	From	To	Material	From	To
10	0	38.5	Blended	0	35.5
6	38.5	318			17

How was seal placed: Method A B C D E
 Other Rods

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

(6) **CASING/LINER:**

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6	+1.5	38.5	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4.5	-4	318		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) _____

(7) **PERFORATIONS/SCREENS:**
 Perforations Method Drilled
 Screens Type _____ Material 40

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
-4	318	3/8	60	5/8	4.5	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
50	100%	317	1 hr.

Temperature of water 68 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 Wasco Latitude _____ Longitude _____
 Township 25 N or S Range 13 E E or W. WM.
 Section 4 SW 1/4 SW 1/4
 Tax Lot 700 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 82333 RTR HOLLOW RD TILLAMOOK OR 97021

(10) **STATIC WATER LEVEL:**
200 ft. below land surface. Date 2-10-07
 Artesian pressure _____ lb. per square inch Date _____

(11) **WATER BEARING ZONES:**
 Depth at which water was first found 302

From	To	Estimated Flow Rate	SWL
302	318	50	200

(12) **WELL LOG:**
 Ground Elevation 1200

Material	From	To	SWL
SOIL	0	27	
GREY BROWN BASALT	27	187	
GREY BASALT	187	302	
BROKEN, TAN CLAY (WB)	302	318	200

RECEIVED

MAR 16 2007

**WATER RESOURCES DEPT
 SALEM, OREGON**

Date started 1-13-07 Completed 2-10-07

(unbonded) **Water Well Constructor Certification:**
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
 Signed BEN TIBBETS WWC Number _____ Date 2-10-07

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.
 Signed Joe Volk WWC Number 1782 Date 2-10-07

G-17437

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

WELL I.D. # L 143362
 START CARD # 134183

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

(1) OWNER: Well Number _____

Name DONALD SMOUGH
 Address 81414 DUFEUR VALLEY RD.
 City DUFUR State OR Zip 97021

(2) TYPE OF WORK

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 310 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks engaged
Diameter	From	To	Material	From	To	
10	0	25	CEMENTITE	0	25	22
6	25	310				

How was seal placed: Method A B C D E

Other Puddled
 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	Material			
					Steel	Plastic	Welded	Threaded
Casing: <u>6</u>	<u>+1</u>	<u>25</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Liner: <u>4 1/2</u>	<u>-10</u>	<u>310</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations Method Dry H
 Screens Type _____ Material Plastic

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>270</u>	<u>310</u>	<u>2/4</u>	<u>30</u>	<u>4 1/2</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
<u>60</u>	<u>107'</u>	<u>310</u>	<u>1 hr.</u>

Temperature of water 58 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 WASCO Latitude _____ Longitude _____
 Township 25 N or S Range 13 E or W. WM.
 Section 6 NW 1/4 NE 1/4
 Tax Lot 300 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 81414 DUFUR VALLEY RD

(10) STATIC WATER LEVEL:

108 ft. below land surface. Date 9-14-01
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 298

From	To	Estimated Flow Rate	SWL
<u>298</u>	<u>310</u>	<u>60</u>	<u>108</u>

(12) WELL LOG:

Ground Elevation 1600'

Material	From	To	SWL
SOIL	0	10	
CONGLAMERATE	10	15	
BASALT + BONDERS	15	51	
BASALT BROWN + BONDERS	51	80	
CLAY BROWN + ROLL	80	90	
BASALT GREY	90	155	
ROCK BLACK	155	165	
BASALT GREY	165	298	
BASALT BROWN W3	298	310	108

RECEIVED

SEP 24 2001

WATER RESOURCES DEPT.
 SALEM, OREGON

Date started 9-12-01 Completed 9-15-01

(unbonded) Water Well Constructor Certification:

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

WWC Number _____
 Signed _____ 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 606
 Signed Richard J. M... Date 9/19/01

G-17437