

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.oregon.gov

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APR 13 2012

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME MARLYS PARR		WATER RESOURCES DEPT PHONE SALEM, OREGON 503-266-1521	
PHONE (WK)	CELL	FAX	
ADDRESS 11850 S. MACKSBURG RD			
CITY CANBY	STATE OR	ZIP 97013	E-MAIL* TINA@TINAPARR.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 JIM SCHUETTE - JMS ENGINEERING		PHONE 503.559.1146	FAX
ADDRESS 3000 MARKET ST NE, # 426			CELL
CITY SALEM	STATE OR	ZIP 97301	E-MAIL* JMSENGINEERING@questoffice.net

Note: Attach multiple copies as needed

* By providing an e-mail address, consent is given to receive all correspondence from the department electronically. (paper copies of the final order documents will also be mailed.)

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.

Marlys R. Parr
Applicant Signature

Marlys R. Parr owner
Print Name and title if applicable

April 7, 2012
Date

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. <u>G-17550</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.

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

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SECTION 3: WELL DEVELOPMENT

WATER RESOURCES DEPT
SALEM, OREGON

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
WELL	GRIBBLE CREEK	APPROX. 1200'	± 5'

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*).

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SECTION 3: WELL DEVELOPMENT, CONTINUED

Source (aquifer), if known: SANDS - GRAVELS

Total maximum rate requested: 280 (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).
GPM

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.

SEE ALSO ATTACHED WELL LOG

GHTSSCO

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)
WELL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	LACK 014260	<input type="checkbox"/>	10"	10": 0-182 8: 174-228	73'-78' 128'-148'	0-24'	40' 3/16/73	SANDS - GRAVELS	228'	400	100 (est)
	<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"/>									
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	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									

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* 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 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
IRRIGATION	MARCH 1 - OCTOBER 31	50 AC-FT EST USAGE

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: 50 Acres Supplemental: Acres

List the Permit or Certificate number of the underlying primary water right(s): NONE EXISTING

Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 50 AC-FT

- 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

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SALEM, OREGON

A. Diversion and Conveyance

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

Pump (give horsepower and type): 40 HP SUBMERSIBLE

Other means (describe):

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. 4" x 6" MAIN LINE / BIG GUN

B. Application Method

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

HIGH PRESSURE SPRINKLERS OR BIG GUN

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.

IRRIGATE ONLY WHEN REQUIRED

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*). N/A

Reservoir name: Acreage inundated by reservoir:

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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). *N/A*

Annual volume (acre-feet): _____

USE OF STORED GROUND WATER	PERIOD OF USE

SECTION 8: PROJECT SCHEDULE

Date construction will begin: *SPRING 2012*

Date construction will be completed: *SUMMER 2012*

Date beneficial water use will begin: *SUMMER 2012*

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SECTION 9: WITHIN A DISTRICT

Check here if the point of diversion or place of use are located within or served by an irrigation or other water district. *N/A*

Irrigation District Name	Address	
City	State	Zip

SECTION 10: REMARKS

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

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NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

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

CLACK WATER WELL REPORT RECEIVED
014260 STATE OF OREGON APR 18 1973 State Well No. 4S/2E-31^b
STATE ENGINEER SALEM OREGON State Permit No. _____
(Please type or print) (Do not write above this line)

(1) OWNER:

Name James B. Parr
Address Rt. 3, Box 167
Molalla, Oregon 97038

(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
10" Diam. from 0 ft. to 182 ft. Gage 250
8" Diam. from 174 ft. to 228 ft. Gage 250
" Diam. from " ft. to " ft. Gage

PERFORATIONS:

Perforated? Yes No.

Type of perforator used Mills knife
Size of perforations 1/2 in. by 3 in.
40 perforations from 73 ft. to 78 ft.
180 perforations from 128 ft. to 148 ft.
8 in. cut by torch 7/16 x 8 35 per
190 perforations from 190 ft. to 224 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.
" " " " " "
" " " " " "
Bailer test 50 gal./min. with 16 ft. drawdown after 2 hrs.
Artesian flow 52 g.p.m.
Temperature of water 52 Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used Bentonite
Well sealed from land surface to 23 ft.
Diameter of well bore to bottom of seal 14 in.
Diameter of well bore below seal 10 in.
Number of sacks of cement used in well seal _____ sacks
Number of sacks of bentonite used in well seal 21 1/2 sacks
Brand name of bentonite National
Number of pounds of bentonite per 100 gallons of water 150 lbs./100 gals.
Was a drive shoe used? Yes No Mugs _____ 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 Clackamas Driller's well number _____
Nw 1/4 Section 31 T. 4S R. 2E W.M. _____
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well APR 13 2012

Depth at which water was first found 73 ft.
Static level 40 ft. below land surface
Artesian pressure _____ lbs. per square inch

(12) WELL LOG:

Diameter of well below casing _____

Depth drilled 228 ft. Depth of completed well 228 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
Top soil	0	1	
Clay, brown	1	19	
Gravel, cemented	19	88	40
Gravel with strips of clay, brown	88	128	22
Clay with gravel, blue	128	137	
Gravel, black, cemented	137	148	22
Gravel, small, sand, black	148	153	22
Clay, green	153	155	
Gravel, med., clay, green	155	180	
Clay, blue	180	188	
Clay with gravel	188	198	
Clay, blue	198	213	
Gravel & sand, black	213	220	19
Clay, blue	220	228	

Work started 3/5 1973 Completed 3/29 1973

Date well drilling machine moved off of well 3/29 1973

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] C. G. Westerberg Date 3/30, 1973
(Drilling Machine Operator)

Drilling Machine Operator's License No. 527

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 C. G. Westerberg
(Person, firm or corporation) (Type or print)

Address Rt. 1, Box 151, Mulina, Oregon

[Signed] C. G. Westerberg
(Water Well Contractor)

Contractor's License No. 86 Date 3/30, 1973

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WATER RESOURCES DEPT
SALEM, OREGON

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



Land Use

Information Form

Applicant: MARLYS PARR
First Last

Mailing Address: 11850 S. MACKSBURG Rd.

CANBY OR 97013 Daytime Phone: 503.266.7327
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:
4S	2E	31	SWNW SENW	800	EFU	<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:

CLACKAMAS

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: 300 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 TO BE USED FOR IRRIGATION OF CORN & OTHER CROPS.

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. →

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WATER RESOURCES DEPARTMENT
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 the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): SUBSECTION 401.04 (A)
- 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

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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FOR: MARLYS PARR WATER RIGHTS APPLICATION

WATER RESOURCES DEPT
SALEM, OREGON

Name: GARY HEWITT Title: SR. PLANNER
 Signature: [Signature] Phone: 503-742-4519 Date: 4-4-12
 Government Entity: CLATSOP COUNTY

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: MARLYS PARR - 11850 S. MACKSBURG RD.
 City or County: CLATSOP COUNTY Staff contact: GARY HEWITT
 Signature: [Signature] Phone: 503-742-4519 Date: 4-4-12

SECTION 31 T.4S. R.2E. W.M.

4 2E 31

This map was prepared for assessment purpose only.

CLACKAMAS COUNTY

D.L.C. FRANCIS JACKSON NO.41

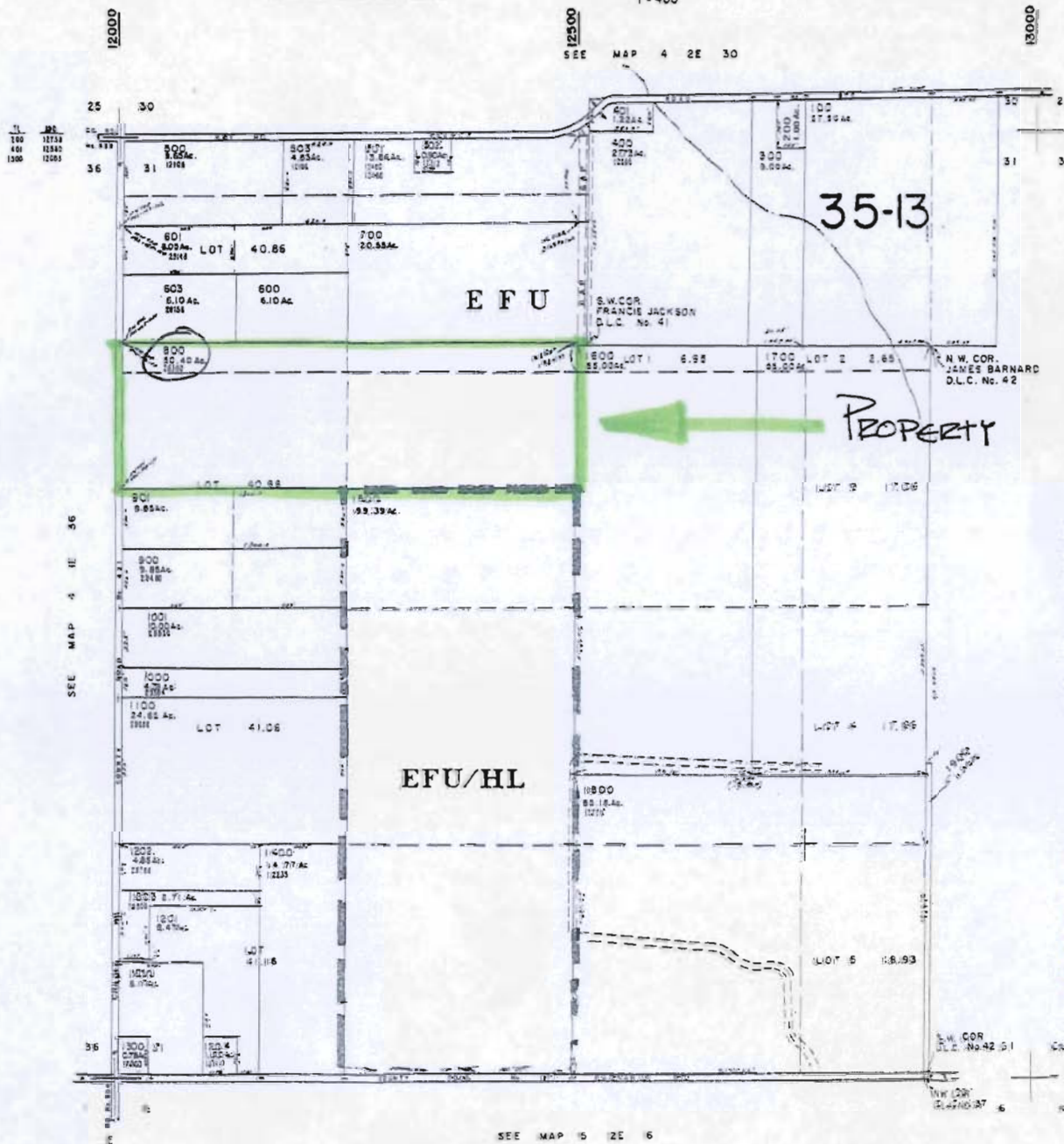
1" = 400'

SEE MAP 4 2E 30

CANCELLED
600
500AC
500AC

29000

CA-17550



29500

SEE MAP 4 2E 32

30000

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SALEM, OREGON

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4 2E 31

SEE MAP 5 2E 16

Jim Schuette

From: Jim Schuette [jmsengineering@qwestoffice.net]
Sent: Wednesday, April 04, 2012 10:26 AM
To: 'Hewitt, Gary'
Subject: RE: LUCS-OWRD-Parr

Gary;

Thanks--I really appreciate your quick action on this--

Jim Schuette, P.E.

From: Hewitt, Gary [mailto:garyh@co.clackamas.or.us]
Sent: Wednesday, April 04, 2012 9:34 AM
To: jmsengineering@qwestoffice.net
Subject: LUCS-OWRD-Parr

Jim,

Attached is the signed LUCS for the water rights.

Sincerely,

Gary Hewitt - Sr. Planner
Clackamas County Planning & Zoning Division
Development Services Building
150 Beaver Creek Road
Oregon City, Oregon 97045
503-742-4519

[Map Directions](#)

New Office Hours: Starting June 1, 2010 - the Permits Lobby hours are from 9:00 am to 4:00 pm, Monday through Thursday. The Planning Division remains open for calls, e-mails and scheduled meetings from 7:00 am - 6:00 pm. The offices are closed on Fridays.

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SALEM, OREGON

G-17550¹

5
10
11

First American Title Insurance Company



THIS SPACE PROVIDED FOR RECORDER'S USE.

RECORDED IN CLACKAMAS COUNTY
JOHN KAUFFMAN, COUNTY CLERK

2000-066433



\$26.00

10/11/2000 02:33:44 PM

M TDS - 1 - 3 BEVERLY
\$5.00 \$11.00 \$10.00

After recording return to:

JAMES PARR SR.

29300 S. CRAMER RD

MOLALLA

OR

97038

Reference Number:

TDC Number: 35749

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WATER RESOURCES DEPT
SALEM, OREGON

DEED OF RECONVEYANCE

FIRST AMERICAN TITLE INSURANCE COMPANY OF OREGON, an assumed business name of Title Insurance Company of Oregon, hereinafter Trustee, under that certain deed dated March 22, 2000, executed and delivered by JAMES B. PARR SR. AND MARLYS R. PARR

as grantor

recorded on April 3, 2000, in the Mortgage Records of CLACKAMAS County, Oregon, in book _____ at page _____, or as file/reel number 2000021116, conveying real property situated in said county described as follows:

All of the North one-half of the South one-half of the Northwest quarter of Section 31 in Township 4 South, Range 2 East, of the W.M., in the County of Clackamas and State of Oregon. Also:

A certain parcel of land adjacent to said North one-half of said South one-half of said Northwest quarter, said parcel being 10 rod wide, and 160 rods long, along the South side of the North half of the Northwest quarter of Section 31 in Township 4 South, Range 2 East, of the W.M., in the County of Clackamas and State of Oregon.

having received from the beneficiary under said trust deed a written request to reconvey, reciting that the obligation secured by said trust deed has been fully paid and performed, hereby does grant, bargain, sell and convey, but without any covenant or warranty, express or implied, to the person or persons legally entitled thereto, all of the estate held by the undersigned in and to said described premises by virtue of said trust deed.

DATED: October 2, 2000, TITLE INSURANCE COMPANY OF OREGON

By *Carolyn Abbott*

STATE OF OREGON, County of MULTNOMAH)ss.

The foregoing instrument was acknowledged before me this 2 day of October, 2000,

by CAROLYN ABBOTT, ASSISTANT VICE PRESIDENT

of Title Insurance Company of Oregon, a corporation, on behalf of the corporation.

Michele Royce-Kiltz

Notary Public for Oregon

My commission expires:



G-17550

FA100 - TDC 35749