

Water Right Conditions Tracking Slip

Groundwater/Hydrology Section

FILE # # G-17597

ROUTED TO: Water Rights - Jeana

TOWNSHIP/

RANGE-SECTION: 10S/3W-27 6d

CONDITIONS ATTACHED?: ☒ yes ☐ no

REMARKS OR FURTHER INSTRUCTIONS:

Reviewer: Mike Zwart

MEMO

February 12, 2003

 YES
 ✓ NO The source of appropriation is within or above a Scenic Waterway

☐ YES
☒ NO

Use the Scenic Waterway condition (Condition 7J)

Per ORS 390.835, the Ground Water Section is **able** to calculate ground water interference with surface water that contributes to a Scenic Waterway. The calculated interference is distributed below.

Per ORS 390.835, the Ground Water Section is **unable** to calculate ground water interference with surface water that contributes to a scenic waterway; **therefore, the Department is unable to find that there is a preponderance of evidence that the proposed use will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway.**

Calculate the percentage of consumptive use by month and fill in the table below. If interference cannot be calculated, per criteria in 390.835, do not fill in the table but check the "unable" option above, thus informing Water Rights that the Department is unable to make a Preponderance of Evidence finding.

[illegible]

PUBLIC INTEREST REVIEW FOR GROUND WATER APPLICATIONS

TO: Water Rights Section Date February 12, 2013

FROM: Ground Water/Hydrology Section Michael Zwart
Reviewer's Name

SUBJECT: Application G- 17597 Supersedes review of _____
Date of Review(s) _____

PUBLIC INTEREST PRESUMPTION; GROUNDWATER

OAR 690-310-130 (1) *The Department shall presume that a proposed groundwater use will ensure the preservation of the public welfare, safety and health as described in ORS 537.525. Department staff review ground water applications under OAR 690-310-140 to determine whether the presumption is established. OAR 690-310-140 allows the proposed use be modified or conditioned to meet the presumption criteria. This review is based upon available information and agency policies in place at the time of evaluation.*

A. GENERAL INFORMATION: Applicant's Name: Wade Cox County: Linn

A1. Applicant(s) seek(s) 0.51 cfs from one well(s) in the Willamette Basin,
_____ subbasin Quad Map: Albany

A2. Proposed use: Irrigation, 40.6 acres Seasonality: March 1 to October 31

A3. Well and aquifer data (attach and number logs for existing wells; mark proposed wells as such under logid):

Well	Logid	Applicant's Well #	Proposed Aquifer*	Proposed Rate(cfs)	Location (T/R-S QQ-Q)	Location, metes and bounds, e.g. 2250' N, 1200' E fr NW cor S 36
1	LINN 60184	5260	Alluvium	0.51	10S/3W-27 SE-NW	1350' S, 2760' W fr NE cor S 27*
2						
3						
4						
5						

* Alluvium, CRB, Bedrock

Well	Well Elev ft msl	First Water ft bls	SWL ft bls	SWL Date	Well Depth (ft)	Seal Interval (ft)	Casing Intervals (ft)	Liner Intervals (ft)	Perforations Or Screens (ft)	Well Yield (gpm)	Draw Down (ft)	Test Type
1	261	27	8	05/31/12	60	0-18	0-60	None	25-45	60	32	P

Use data from application for proposed wells.

A4. Comments: *I called the CWRE regarding the well location and he provided the correct metes and bounds.

A5. ☒ Provisions of the Willamette Basin rules relative to the development, classification and/or management of ground water hydraulically connected to surface water ☐ are, or ☒ are not, activated by this application. (Not all basin rules contain such provisions.)

Comments: _____

A6. ☐ Well(s) # _____, _____, _____, _____, _____, tap(s) an aquifer limited by an administrative restriction.
Name of administrative area: _____
Comments: _____

B. GROUND WATER AVAILABILITY CONSIDERATIONS, OAR 690-310-130, 400-010, 410-0070

B1. Based upon available data, I have determined that ground water* for the proposed use:

- a. ☐ is over appropriated, ☐ is not over appropriated, or ☒ cannot be determined to be over appropriated during any period of the proposed use. * This finding is limited to the ground water portion of the over-appropriation determination as prescribed in OAR 690-310-130;
- b. ☐ will not or ☐ will likely be available in the amounts requested without injury to prior water rights. * This finding is limited to the ground water portion of the injury determination as prescribed in OAR 690-310-130;
- c. ☐ will not or ☐ will likely to be available within the capacity of the ground water resource; or
- d. ☒ will, if properly conditioned, avoid injury to existing ground water rights or to the ground water resource:
- i. ☒ The permit should contain condition #(s) 7C, 7T;
- ii. ☐ The permit should be conditioned as indicated in item 2 below.
- iii. ☐ The permit should contain special condition(s) as indicated in item 3 below;

- B2. a. ☐ Condition to allow ground water production from no deeper than _____ ft. below land surface;
- b. ☐ Condition to allow ground water production from no shallower than _____ ft. below land surface;
- c. ☐ Condition to allow ground water production only from the _____ ground water reservoir between approximately _____ ft. and _____ ft. below land surface;
- d. ☐ Well reconstruction is necessary to accomplish one or more of the above conditions. The problems that are likely to occur with this use and without reconstructing are cited below. Without reconstruction, I recommend withholding issuance of the permit until evidence of well reconstruction is filed with the Department and approved by the Ground Water Section.

Describe injury –as related to water availability– that is likely to occur without well reconstruction (interference w/ senior water rights, not within the capacity of the resource, etc): _____

- B3. Ground water availability remarks: There are no nearby State Observation Wells. There appears to be adequate alluvial groundwater in the area, based on a review of nearby well logs and the proximity of the Willamette and Santiam rivers.

C. GROUND WATER/SURFACE WATER CONSIDERATIONS, OAR 690-09-040**C1. 690-09-040 (1):** Evaluation of aquifer confinement:

Well	Aquifer or Proposed Aquifer	Confined	Unconfined
1	Sand and gravel, likely Quaternary alluvium	☒	☐
		☐	☐
		☐	☐
		☐	☐
		☐	☐

Basis for aquifer confinement evaluation: Review of local well logs indicates that the water levels are typically above the depth where groundwater was first encountered. I suspect that the aquifer is actually rather poorly confined, with overlying silt, clay and sandy clay in hydraulic connection with the water-bearing zone described at a depth of 27 feet.

C2. 690-09-040 (2) (3): Evaluation of distance to, and hydraulic connection with, surface water sources. All wells located a horizontal distance less than ¼ mile from a surface water source that produce water from an unconfined aquifer shall be assumed to be hydraulically connected to the surface water source. Include in this table any streams located beyond one mile that are evaluated for PSI.

Well	SW #	Surface Water Name	GW Elev ft msl	SW Elev ft msl	Distance (ft)	Hydraulically Connected?			Potential for Subst. Interfer. Assumed?	
						YES	NO	ASSUMED	YES	NO
1	1	Crooks Creek at confluence with unnamed tributary	253	244	1700	☒	☐	☐	☐	☒
						☐	☐	☐	☐	☐
1	2	Murder Creek	253	246	1450	☒	☐	☐	☐	☒
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐

Basis for aquifer hydraulic connection evaluation: The shallow water-bearing zone developed and the head relationship strongly suggest that groundwater discharges locally to surface water sources.

Water Availability Basin the well(s) are located within: Willamette R > Columbia R ab Mill Cr at Gage 1419100 (183).

C3a. 690-09-040 (4): Evaluation of stream impacts for each well that has been determined or assumed to be hydraulically connected and less than 1 mile from a surface water source. Limit evaluation to instream rights and minimum stream flows that are pertinent to that surface water source, and not lower SW sources to which the stream under evaluation is tributary. Compare the requested rate against the 1% of 80% natural flow for the pertinent Water Availability Basin (WAB). If Q is not distributed by well, use full rate for each well. Any checked ☒ box indicates the well is assumed to have the potential to cause PSI.

Well	SW #	Well < ¼ mile?	Qw > 5 cfs?	Instream Water Right ID	Instream Water Right Q (cfs)	Qw > 1% ISWR?	80% Natural Flow (cfs)	Qw > 1% of 80% Natural Flow?	Interference @ 30 days (%)	Potential for Subst. Interfer. Assumed?
1	1,2	☐	☐	183	1300	☐	3620	☐	<25%	☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐

C3b. **690-09-040 (4):** Evaluation of stream impacts by total appropriation for all wells determined or assumed to be **hydraulically connected and less than 1 mile** from a surface water source. **Complete only if Q is distributed among wells.** Otherwise same evaluation and limitations apply as in C3a above.

	SW #		Qw > 5 cfs?	Instream Water Right ID	Instream Water Right Q (cfs)	Qw > 1% ISWR?	80% Natural Flow (cfs)	Qw > 1% of 80% Natural Flow?	Interference @ 30 days (%)	Potential for Subst. Interfer. Assumed?
			☐			☐		☐		☐
			☐			☐		☐		☐
			☐			☐		☐		☐
			☐			☐		☐		☐

Comments: _____

C4a. **690-09-040 (5):** Estimated impacts on **hydraulically connected surface water sources greater than one mile** as a percentage of the proposed pumping rate. Limit evaluation to the effects that will occur up to one year after pumping begins. This table encompasses the considerations required by 09-040 (5)(a), (b), (c) and (d), which are not included on this form. Use additional sheets if calculated flows from more than one WAB are required.

Non-Distributed Wells													
Well	SW#	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
Distributed Wells													
Well	SW#	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
(A) = Total Interf.													
(B) = 80 % Nat. Q													
(C) = 1 % Nat. Q													
(D) = (A) > (C)													
(E) = (A / B) x 100		%	%	%	%	%	%	%	%	%	%	%	%

(A) = total interference as CFS; (B) = WAB calculated natural flow at 80% exceed. as CFS; (C) = 1% of calculated natural flow at 80% exceed. as CFS; (D) = highlight the checkmark for each month where (A) is greater than (C); (E) = total interference divided by 80% flow as percentage.

Basis for impact evaluation:

C4b. **690-09-040 (5) (b)** The potential to impair or detrimentally affect the public interest is to be determined by the Water Rights Section.

C5. ☐ If properly conditioned, the surface water source(s) can be adequately protected from interference, and/or ground water use under this permit can be regulated if it is found to substantially interfere with surface water:

- i. ☐ The permit should contain condition #(s) _____;
- ii. ☐ The permit should contain special condition(s) as indicated in "Remarks" below;

C6. **SW / GW Remarks and Conditions**

References Used: Gannett, Marshall W., and Caldwell, Rodney R., 1998, Geologic Framework of the Willamette Lowland Aquifer System, Oregon and Washington: U. S. Geological Survey Professional Paper 1424-A, 32p, 8 plates.

Conlon and others, 2005, Ground-water hydrology of the Willamette Basin, Oregon: U.S Geological Survey Scientific Investigations Report 2005-5168.

Woodward and others, 1998, Hydrogeologic framework of the Willamette lowland aquifer system, Oregon and Washington: U.S. Geological Survey Professional Paper 1424-B.

D. WELL CONSTRUCTION, OAR 690-200D1. Well #: 1 Logid: LINN 60184D2. **THE WELL does not meet current well construction standards based upon:**

- a. ☐ review of the well log;
b. ☐ field inspection by _____;
c. ☐ report of CWRE _____;
d. ☐ other: (specify) _____

D3. **THE WELL construction deficiency:**

- a. ☐ constitutes a health threat under Division 200 rules;
b. ☐ commingles water from more than one ground water reservoir;
c. ☐ permits the loss of artesian head;
d. ☐ permits the de-watering of one or more ground water reservoirs;
e. ☐ other: (specify) _____

D4. **THE WELL construction deficiency is described as follows:** I have no issues with the construction of the well.D5. **THE WELL** a. ☐ was, or ☐ was not constructed according to the standards in effect at the time of original construction or most recent modification.b. ☒ I don't know if it met standards at the time of construction.D6. ☐ **Route to the Enforcement Section.** I recommend withholding issuance of the permit until evidence of well reconstruction is filed with the Department and approved by the Enforcement Section and the Ground Water Section.**THIS SECTION TO BE COMPLETED BY ENFORCEMENT PERSONNEL**D7. ☐ Well construction deficiency has been corrected by the following actions: __________, 200_____
(Enforcement Section Signature)D8. ☐ **Route to Water Rights Section (attach well reconstruction logs to this page).**

LINN 60184

REVISED

STATE OF OREGON WATER SUPPLY WELL REPORT

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

WELL LABEL # L 103574

START CARD # 1016764

(1) LAND OWNER

Owner Well I.D. 5260

First Name Wade Last Name Cox
Company
Address 33927 Berry Dr. NE
City Albany State OR Zip 97322

(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 60 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
12	0	20	Bentonite	0	18	15	S
10	20	42					
8	42	60					

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☒ Other Poured dry
Backfill placed from 18 ft. to 25 ft. Material 3/8 pea gravel
Filter pack from 25 ft. to 60 ft. Material Silica/pea gr Size 10-20 3/8
Explosives used: ☐ Yes Type Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
☒	☐	6	☒	1.5	25	250	☒	☐	☒	☐
☐	☐	6	☐	45	60	250	☐	☐	☒	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)

Temp casing ☒ Yes Dia 12 From 0 To 20

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type Wire wrap Material Stainless stl.

Perf/S	Casing/Screen	Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen			6	25	45	.02			

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

☒ Pump ☐ Bailor ☐ Air ☐ Flowing Artesian
Yield gal/min 60 Drawdown 32 Drill stem/Pump depth Duration (hr) 2

Temperature 54 °F Lab analysis ☐ Yes By

Water quality concerns? ☐ Yes (describe below)

From	To	Description	Amount	Units
------	----	-------------	--------	-------

(9) LOCATION OF WELL (legal description)

County LINN Twp 10 S N/S Range 3 W E/W WM
Sec 27 NW 1/4 of the NE 1/4 Tax Lot 1201
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
☒ Street address of well ☐ Nearest address

Shady Bend Dr., Albany, OR 97322

(10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)
Existing Well / Predeepening
Completed Well 05-31-2012 8
Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 27

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
05-31-2012	27	40	60		8

(11) WELL LOG

Ground Elevation

Material	From	To
Topsoil	0	2
Brown clay	2	18
Brown sandy clay	18	27
Brown sand w/some rock	27	40
Blue sticky blue clay	40	60

RECEIVED

JUN 21 2012

JONES DRILLING CO., INC.

29400 SANTIAM HWY.

LEBANON, OR 97355

541-367-2560 541-451-2686

1-800-915-8388

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 05-29-2012 Completed 05-31-2012

(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 1411 Date 06-05-2012

Password : (if filing electronically)

Signed

(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 1684 Date 06-05-2012

Password : (if filing electronically)

Signed

Contact Info: optional jonesdrilling@hotmail.com

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 90 DAYS OF COMPLETION OF WORK

Form Version: 0.95

LINN 60184

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

WELL LABEL # L 103574
START CARD # 1016764

(1) LAND OWNER Owner Well I.D. _____
First Name Wade Last Name Cox
Company _____
Address 33927 Berry Dr. NE
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(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 60 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
12	0	20	Bentonite	0	18	15	S
10	20	42					
8	42	60					

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☒ Other Poured dry
Backfill placed from 18 ft. to 25 ft. Material 3/8 pea gravel
Filter pack from 25 ft. to 60 ft. Material Silica/pea gr Size 10-20 3/8
Explosives used: ☐ Yes Type _____ Amount _____

(6) CASING/LINER		Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
☒	6	1.5	25	250	☒	☒	☒	☒	☒	☒
☐	6	45	60	250	☐	☐	☐	☐	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____
Temp casing ☒ Yes Dia 12 From 0 To 20

(7) PERFORATIONS/SCREENS								
Perforations Method _____								
Screens			Type	Wire wrap	Material Stainless stl.			
Perf/S	Casing/	Screen			Scrm/slot	Slot	# of	Tele/
creen	Liner	Dia	From	To	width	length	slots	pipe size
Screen		6	25	45	.02			

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

☒ Pump	☐ Bailer	☐ Air	☐ Flowing Artesian
Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
60	32		2

Temperature	54	°F	Lab analysis	☐	Yes	By	
Water quality concerns?	☐	Yes (describe below)					
From	To	Description	Amount	Units			

(9) LOCATION OF WELL (legal description)

County LINN Twp 10 S N/S Range 3 W E/W WM
Sec 27 NW 1/4 of the NE 1/4 Tax Lot 1201
Tax Map Number _____ Lot _____
Lat _____ or _____ DMS or DD
Long _____ or _____ DMS or DD
☒ Street address of well ☐ Nearest address

Shady Bend Dr., Albany, OR 97322

(10) STATIC WATER LEVEL

Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening			
Completed Well 05-31-2012			8

WATER BEARING ZONES				Depth water was first found 27	
SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
05-31-2012	27	40	60		8

(11) WELL LOG

Ground Elevation		From	To
Material			
Topsoil		0	2
Brown clay		2	18
Brown sandy clay		18	27
Brown sand w/some rock		27	40
Blue sticky blue clay		40	60

JONES DRILLING CO., INC.
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541-367-2560 541-451-2686
1-800-915-8388

RECEIVED
JUN 08 2012
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 05-29-2012 Completed 05-31-2012

(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 1411 Date 06-05-2012

Password : (if filing electronically)

Signed

(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.

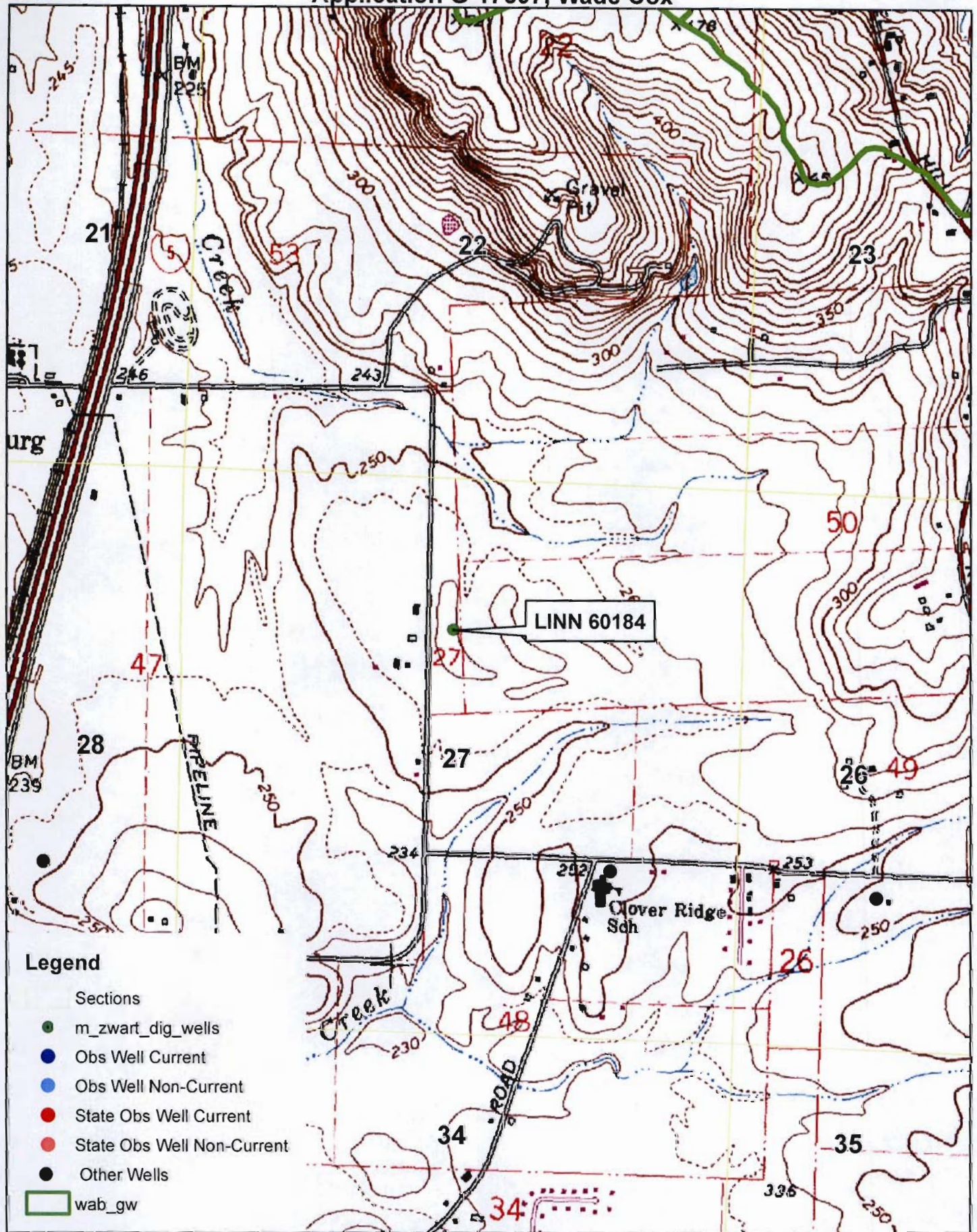
License Number 1684 Date 06-05-2012

Password : (if filing electronically)

Signed

Contact Info: optional@jonesdrilling@hotmail.com

Application G-17597, Wade Cox



0 0.5 1 Miles