

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 ATTILA KOPPANY		PHONE (HM) (541)567-7992	
PHONE (WK)	CELL (541)561-6001	FAX	
ADDRESS 80014 RIKER LANE			
CITY HERMISTON	STATE OR	ZIP 97838	E-MAIL*

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 WILLIAM PORFELY		PHONE (541) 449-1327	FAX (541) 449-1327
ADDRESS P.O. BOX 643			CELL (541) 561-7259
CITY STANFIELD	STATE OR	ZIP 97875	E-MAIL* WPORFELY@GMAIL.COM

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.)

RECEIVED BY OWRD

By my signature below I confirm that I understand:

FEB 24 2014

- 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. SALEM, OR
- 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

Print Name and title if applicable

Date

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. <u>G-17773</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*).

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.

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
Well # 1	Hermiston Drain (Ditch)	2200± Ft	35 ft
Well #2	Hermiston Drain (Ditch)	2200± Ft	35 ft
There are no streams within a one-mile radius of the well. There are several canal and/or ditches. The Hermiston Ditch is mapped as intermittent. (See Mark Norton Review of Permit G-16859)			

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*).

RECEIVED BY OWRD

FEB 24 2014

SALEM, OR

SECTION 3: WELL DEVELOPMENT, CONTINUED

Source (aquifer), if known: Alluvial

Total maximum rate requested: 23 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.

57219-2

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)
Well #1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	UMAT 57219	<input type="checkbox"/>	Please refer to attached Well Log						11.0 gpm	6 acre-ft
Well #2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	UMAT 57218	<input type="checkbox"/>	Please refer to attached Well Log						13.0 gpm	7 acre-ft
	<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"/>						RECEIVED BY OWRD		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>						FEB 24 2014		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>						SALEM, OR		
	<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 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Irrigation	March 1 st - Oct 31 st	13 acre-ft

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: 4.1 Acres Supplemental: Acres
 List the Permit or Certificate number of the underlying primary water right(s): N/A
 Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 13.0 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: RECEIVED BY OWRD

SECTION 5: WATER MANAGEMENT

FEB 24 2014

A. Diversion and Conveyance

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

SALEM, OR

Pump (give horsepower and type): 2-1 hp electrical submersible pumps (one in each well)

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)

Small Pasture sprinklers

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 will take place as crops require water fom maximum growth

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: N/A Acreage inundated by reservoir: N/A

Use(s): N/A

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): N/A

USE OF STORED GROUND WATER	PERIOD OF USE

SECTION 8: PROJECT SCHEDULE

Date construction will begin: Started

Date construction will be completed: Oct 1st 2016

Date beneficial water use will begin: Oct 1st 2018

RECEIVED BY OWRD

FEB 24 2014

SALEM, OR

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.

Irrigation District Name <u>Hermiston Irrigation District</u>	Address <u>366 E. Hurlburt Ave</u>	
City <u>Hermiston</u>	State <u>OR</u>	Zip <u>97838</u>

SECTION 10: REMARKS

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

I file a Permit Amendment T-11653 for Permit G-16859 requesting two additional POA for the partials of land I purchased from the original permit holder. I drilled the two alluvial wells described in this application only to learn the well described in G-16859 was a basalt well. Upon the approval of this application for a permit I will withdraw T-11653. I will also request the acres described in this application with water rights under Permit G-16859 be cancelled. I would hopefully have a good portion of the filling fees for T-11653 be refunded. Please put T-11653 on "Administrative Hold" while this application is being processed.

2/9



2013-6070316 1 of 1

RECORDED IN ANY FORM C State of Oregon County of Umatilla



BE

Atilla Koppany
80014 Riker Lane
Hermiston, OR 97838
Grantor's Name and Address
Atilla & Jackie L. Koppany
80014 Riker Lane
Hermiston, OR 97838
Grantee's Name and Address

After recording, return to (Name, Address, Zip):
Atilla & Jackie Koppany
80014 Riker Lane
Hermiston, OR 97838

Until requested otherwise, send all tax statements to (Name, Address, Zip):
Atilla & Jackie L. Koppany
80014 Riker Lane
Hermiston, OR 97838

STATE OF Oregon
County of Umatilla

Instrument received and recorded on 7/15/2013 11:07:35 AM

I received in the record of instrument code type DE-B&S

Instrument number 2013-6070316
Fee \$49.00

SPACE RESERVED FOR RECORDER'S USE

Umatilla County Received: 7/15/2013



1001546

Office of County Records

Witness Signature: Jean Hampton

Records Officer 1001546 P1

BARGAIN AND SALE DEED

KNOW ALL BY THESE PRESENTS that Atilla Koppany

hereinafter called grantor, for the consideration hereinafter stated, does hereby grant, bargain, sell and convey unto Atilla Koppany and Jackie L. Koppany, husband and wife

hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in Umatilla County, State of Oregon, described as follows, to-wit:

Parcel 2, PARTITION PLAT NO. 2013-06, recoded March 29, 2013, Instrument No. 2013-6030353, Office of County Records, Umatilla County, Oregon, located in Northwest Quarter of Southwest Quarter of Section 6, Township 4 North, Range 29, East, Willamette Meridian, Umatilla County, Oregon.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 0.00. However, the actual consideration consists of or includes other property or value given or promised which is part of the the whole (indicate which) consideration.

In construing this deed, where the context so requires, the singular includes the plural, and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals.

IN WITNESS WHEREOF, the grantor has executed this instrument on July 10, 2013; if grantor is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so by order of its board of directors.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2008. THIS INSTRUMENT DOES 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2008.

Signature of Atilla Koppany

ATILLA KOPPANY

STATE OF OREGON, County of Umatilla ss.
This instrument was acknowledged before me on July 10, 2013
by Atilla Koppany
This instrument was acknowledged before me on _____
by _____
as _____
of _____



Signature of Notary Public
Notary Public for Oregon
My commission expires 7-11-2013

RECEIVED BY OWRD

FEB 24 2014

SALEM, OR

PIONEER TITLE CO. CLP 123 SE Court, Pend. OR, 97801

G-17773

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: Altila Koppany

First

Last

Mailing Address: 80014 riker Lane

Hermiston
City

OR
State

97838
Zip

Daytime Phone: (541)561-6001Cell

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:
4N	29E	6	NW SW	4001	RR-2	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Irr
						<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:

RECEIVED BY OWRD

Umatilla County	FEB 24 2014
-----------------	-------------

SALEM, 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
 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: 12.3 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:

My intention was to do a permit amendment adding two wells as sources of water for Permit G-16859. The wells I drilled were Alluvial wells. The well describe in Permit G-16859 is considered a Basalt Well making me to have to refile for a permit to irrigate from my alluvial wells.

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): _____.
- 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.

Water use for domestic + farm irrigation.

RECEIVED BY OWRD

FEB 24 2014

SALEM, OR

Name: Carol Johnson Title: Planner Phone: 541-278-6252
 Signature: *Carol Johnson* Date: 2-4-14
 Government Entity: Umatilla 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: _____
 City or County: _____ Staff contact: _____
 Signature: _____ Phone: _____ Date: _____

UMAT 57219

UMAT 57219

west well
#1

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

WELL ID. # L 106754
START CARD # 208464

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

(1) LAND OWNER Attila Koppany Well Number _____
Name Attila Koppany
Address 80014 Riker Lane
City Hermiston State OR Zip 97838

(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 54 ft.
Explosives used Yes No Type _____ Amount _____

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
12"	0	20	Bentonite	0	20	16 sacks	
8"	20	54					

How was seal placed: Method A B C D E
 Other Paired 3/8" bentonite chips
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:	8"	0	54	230	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 54

(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"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem size	Time
100		54	1 hr.

Temperature of water 60° 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 Umatilla Latitude _____ Longitude _____
Township 4N N or S Range 29E E or W. WM.
Section 6 NW 1/4 SW 1/4
Tax Lot 4000 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Hope Lane Hermiston, OR 97838

(10) STATIC WATER LEVEL:
15 ft. below land surface. Date 7-22-13
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 53

From	To	Estimated Flow Rate	SWL
53	54	100	15

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Sandy soil	0	1	
Sand	1	53	
Gravel	53	54	WB
RECEIVED BY OWRD			
NOV 12 2013			
SALEM, OR			
RECEIVED BY OWRD			
AUG 12 2013			
FEB 24 2014			
SALEM, OR			
SALEM, OR			

Date started 7-19-13 Completed 7-22-13
(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.
WVC 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.
WVC Number 1218
Signed Petruska Wellco Date 8-12-13

East well # 2

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.763)

WELL ID. # L 106757 START CARD # 208463

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

(1) LAND OWNER: Name Allita Koppany, Address 80014 Riker Lane, City Hermiston, State OR, Zip 97838

(2) TYPE OF WORK: New Well

(3) DRILL METHOD: Rotary Air

(4) PROPOSED USE: Domestic

(5) BORE HOLE CONSTRUCTION: Depth of Completed Well 56 ft.

Table with columns for HOLE Diameter, SEAL Material, and Sacks or pounds.

How was seal placed: Method Other, Porred 3/8" bentonite chips

(6) CASING/LINER: Casing 8" diameter, 11 5/8 gauge steel, 250 plastic, welded threaded.

(7) PERFORATIONS/SCREENS: Perforations Method, Screens Type, Material

(8) WELL TESTS: Minimum testing time is 1 hour. Yield 100 gal/min, Drawdown, Drill stem at 56, Time 1 hr.

Temperature of water 58.0, Depth Artesian Flow Found, Was a water analysis done?

(9) LOCATION OF WELL by legal description: County Umatilla, Township 4N, Range 29E, Section 6 NW 1/4 SW 1/4, Tax Lot 4000, Street Address of Well Hope Lane, Hermiston, OR 97838

(10) STATIC WATER LEVEL: 16 ft. below land surface, Date 7-17-13

(11) WATER BEARING ZONES: Depth at which water was first found 53

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 53, 56, 100, 16

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Includes entries for Sandy soil, Sand, Gravel and multiple 'RECEIVED BY OWRD' stamps.

Date started 7-16-13, Completed 7-17-13, (unbonded) Water Well Constructor Certification

(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.