PUBLIC INTEREST REVIEW FOR GROUNDWATER APPLICATIONS

TO: Water Rights Section Date **06/17/2015**

FROM: Groundwater Section **Phillip I. Marcy / Ivan K. Gall**
Reviewer's Name

SUBJECT: Application G- **18004** 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 groundwater 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: **Scott R. Gressley** County: **Malheur**

A1. Applicant(s) seek(s) **0.998** cfs from **2** well(s) in the **Malheur** Basin, _____ subbasin

A2. Proposed use: **Supplemental Irrigation (238 acres)** Seasonality: **March 1st – October 31st (245 days)**

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	MALH 54121	1	Alluvium	0.436	18S/43E-7 NE-SW	2535'N, 1386'E fr SW cor S 7
2	MALH 54198	2	Alluvium	0.55	18S/43E-7 NE-SW	2605'N, 1848'E fr SW cor S 7
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	2276	48	41	03/24/2014	76	0-18	+1-65	None	58-65	200	20	Pump
2	2277	55	43	02/16/2015	85	0-26	+2-62	None	55-62	250	7	Pump

Use data from application for proposed wells.

A4. **Comments:** Both of the proposed POAs on the application are constructed to develop water from Quaternary alluvium (Qal) of Brooks and others (1976) overlying the Glenns Ferry Formation. Well specific rates proposed on the application correspond with yields achieved on pump tests noted on the driller's logs for both wells.

A5. ☒ **Provisions of the** Malheur (690-510) Basin rules relative to the development, classification and/or management of groundwater 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. GROUNDWATER AVAILABILITY CONSIDERATIONS, OAR 690-310-130, 400-010, 410-0070

B1. **Based upon available data**, I have determined that groundwater* 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 groundwater 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 groundwater 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 groundwater resource; or

d. ☒ **will, if properly conditioned**, avoid injury to existing groundwater rights or to the groundwater resource:
   i. ☒ The permit should contain condition #(s) **7T-measuring tube condition, "Large water use reporting"** ;
   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 groundwater production from no deeper than _____ ft. below land surface;

b. ☐ **Condition** to allow groundwater production from no shallower than _____ ft. below land surface;

c. ☐ **Condition** to allow groundwater production only from the _____ groundwater 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 Groundwater 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. **Groundwater availability remarks:** Groundwater elevation have been stable in nearby State Observation Well 576 (MALH 1222), located about 2.25 miles south of the proposed POAs (see attached hydrograph). Water level measurements from the applicant's well 1 (MALH 54121) in 2014 show less than 1 foot of decline in July from the elevation reported on the driller's report in March. Recharge to the shallow sand and gravel aquifer from canal losses and surplus irrigation water are likely responsible for minimal drawdown observed during the irrigation season (Gannett, 1990) as this unit is poorly confined beneath 20-30 feet of semi-permeable silt.

Due to the lack of thickness of the sand and gravel aquifer in this area, nearby senior right holders may be injured if significant declines occur. Therefore, if a permit is issued, the following special condition should apply:

Modified Condition 7N – The water user shall discontinue the use of, or reduce the rate or volume of withdrawal from, the well(s) if any of the following events occur:

A. Annual water-level measurements reveal an average water-level decline of **two or more feet per year for three consecutive years**; or
B. Annual water-level measurements reveal a water level decline of **6 or more feet** in fewer than five consecutive years; or
C. Annual water-level measurements reveal a water-level decline of **10 or more feet**; or
D. Hydraulic interference leads to a decline of **10 or more feet** in any neighboring well with senior priority.

C. GROUNDWATER/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 overlying Glenns Ferry Formation**	☐	☒
2	**Sand and Gravel overlying Glenns Ferry Formation**	☐	☒
		☐	☐
		☐	☐
		☐	☐

Basis for aquifer confinement evaluation: Groundwater Report #34 describes this shallow aquifer as unconfined to poorly confined, with downward percolation of surface water occurring with relative ease (Gannett, 1990).

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? YES	NO	ASSUMED	Potential for Subst. Interfer. Assumed? YES	NO
1	1	**Malheur River**	**2235**	**2194**	**4885**	☒	☐	☐	☐	☒
2	1	**Malheur River**	**2234**	**2194**	**5025**	☒	☐	☐	☐	☒
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐

Basis for aquifer hydraulic connection evaluation: The shallow sand and gravel aquifer system here is in efficient connection to the Malheur River, which incises the confining silt layer at or near the land surface. Groundwater is discharged through the Glenns Ferry Formation upward through the sand and gravels towards the river to the south, in addition to contributions from the downward percolation of irrigation water (Gannett, 1990).

Water Availability Basin the well(s) are located within: Malheur R > Snake R – At Mouth (31011701)

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	☐	☐	**None**	**None**	☐	**83.80**	☐	**0.06**	☐
2	1	☐	☐	**None**	**None**	☐	**83.80**	☐	**0.05**	☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐

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?
	1		☐	**None**	**None**	☐	**83.80**	☒	**0.11**	☒
			☐			☐		☐		☐
			☐			☐		☐		☐
			☐			☐		☐		☐

Comments: The full proposed pumping rate from both wells on the application calculates to 0.986 cfs, based on the well-specific rates of 198 gpm (0.436 cfs) for well 1 and 250 gpm (0.550 cfs) for well 2. 1 percent of 80 percent of natural flow in the Malheur River during the month of September is 0.838 cfs.

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													
		%	%	%	%	%	%	%	%	%	%	%	%
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: Wells are located within 1 mile of the Malheur River, so this section does not apply.

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 groundwater 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:** Due to the proposed pumping rate exceeding 1 percent ~~of 80 percent of minimum~~ streamflow in the Malheur River, potential for Substantial Interference (PSI) has been triggered. The applicant could lower the total requested rate to less than 0.838 cfs to avoid triggering PSI.

References Used:

Gannett, M. W. 1990. Hydrogeology of the Ontario Area Malheur County, Oregon. Oregon Water Resources Dept. Ground Water Report No. 34. 39p.

Brooks, H.C., McIntyre, J.R., Walker, G.W., 1976. Geology of the Oregon Part of the Baker 1^0 by 2^0 Quadrangle. Oregon Department of Geology and Mineral Industries Geological Map Series 7.

Local well logs, application file G-18004.

D. WELL CONSTRUCTION, OAR 690-200

D1. **Well #:** _____ **Logid:** _____

D2. **THE WELL does not appear to 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 or other comment is described as follows:** _____

D4. ☐ **Route to the Well Construction and Compliance Section for a review of existing well construction.**

Water Availability Tables

DETAILED REPORT ON THE WATER AVAILABILITY CALCULATION

MALHEUR R > SNAKE R - AT MOUTH
Basin: MALHEUR

Watershed ID #: 31011701
Time: 11:25 AM

Exceedance Level: 80
Date: 06/17/2015

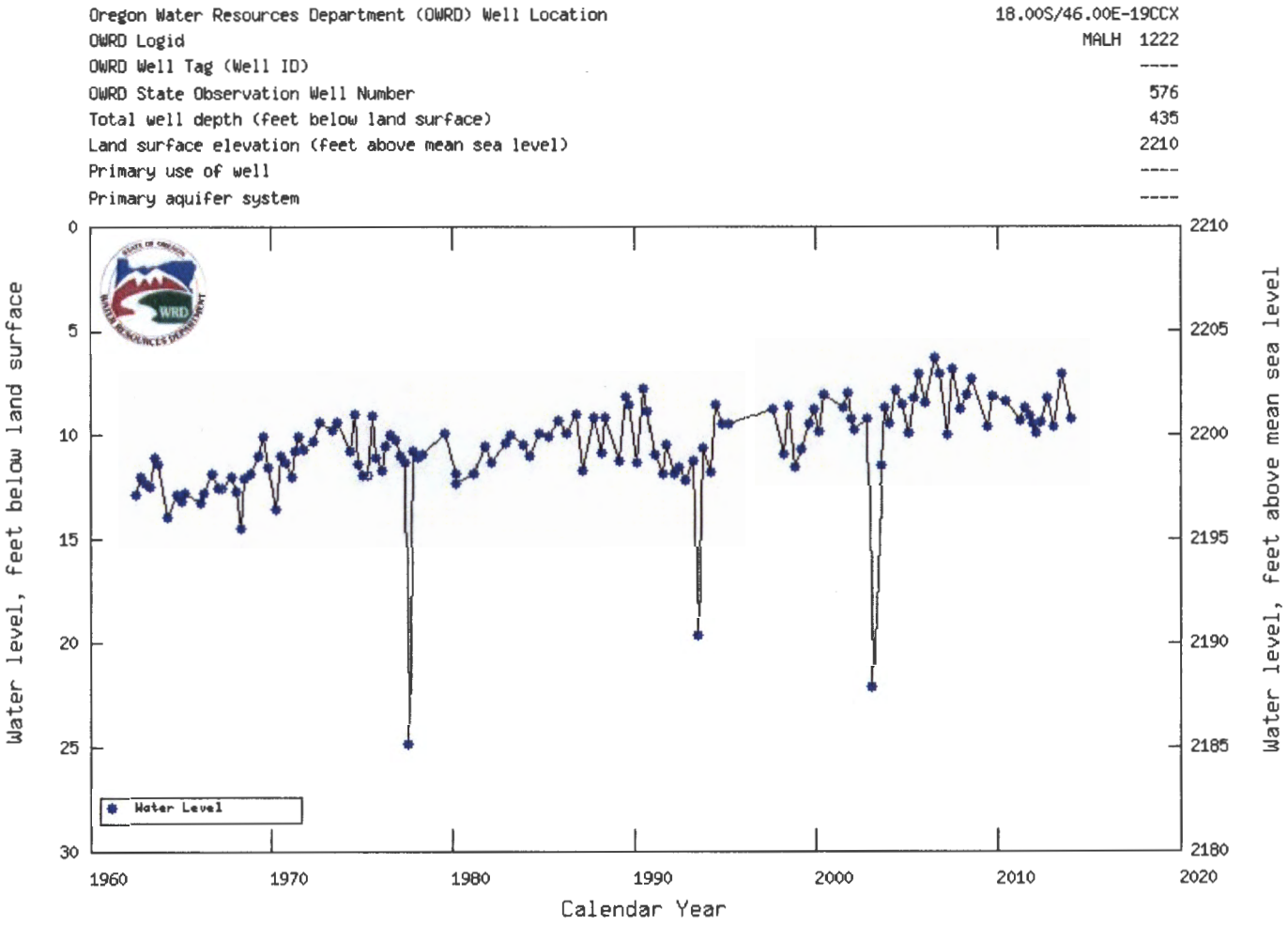
Monthly values are in cfs.
Storage is the annual amount at 50% exceedance in ac-ft.

Month	Natural Stream Flow	Consumptive Use and Storage	Expected Stream Flow	Reserved Stream Flow	Instream Requirements	Net Water Available
JAN	154.00	427.00	-273.00	0.00	0.00	-273.00
FEB	267.00	626.00	-359.00	0.00	0.00	-359.00
MAR	467.00	911.00	-444.00	329.00	0.00	-773.00
APR	780.00	1,060.00	-278.00	470.00	0.00	-748.00
MAY	524.00	957.00	-433.00	0.00	0.00	-433.00
JUN	324.00	857.00	-533.00	0.00	0.00	-533.00
JUL	150.00	686.00	-536.00	0.00	0.00	-536.00
AUG	99.90	540.00	-440.00	0.00	0.00	-440.00
SEP	83.80	376.00	-292.00	0.00	0.00	-292.00
OCT	106.00	209.00	-103.00	0.00	0.00	-103.00
NOV	135.00	223.00	-87.90	0.00	0.00	-87.90
DEC	132.00	297.00	-165.00	0.00	0.00	-165.00
ANN	338,000	432,000	29,500	48,200	0	0

Well Location Map

Version: 04/20/2015

Water-Level Trends in Nearby Wells



Well logs attached:
MALH 54121 (Well 1)
MALH 54198 (Well 2)

MALH 54121

MALH 54121

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

APR 18 2014

SALEM, OR

WELL LABEL # L ~~111636~~ 11636

START CARD # 209632

(1) LAND OWNER Owner Well I.D.

First Name Sage Last Name Nishihara

Company Nishihara Farms

Address 1175 Hillcrest Drive

City Vale State OR Zip 97918

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

(3) DRILL METHOD [X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud [ ] Reverse Rotary [ ] Other

(4) PROPOSED USE [ ] Domestic [X] Irrigation [ ] Community [ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering [ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION Special Standard [ ] Attach copy

Depth of Completed Well 76 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/ lbs
18	0	18	Bentonite	0	18	1,950	P
18	18	65					
10	65	76					

How was seal placed Method [ ] A [ ] B [X] C [ ] D [ ] E

[ ] Other

Backfill placed from ft. to ft. Material

Filter pack from 18 ft. to 74 ft. Material 1/2 minus Sand pea gravel

Explosives used: [ ] Yes Type Amount 100LB 4/4255

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
[X]	[ ]	10	[X]	1	65	250	[X]	[ ]	[X]	[ ]
[ ]	[ ]		[ ]				[ ]	[ ]	[ ]	[ ]
[ ]	[ ]		[ ]				[ ]	[ ]	[ ]	[ ]
[ ]	[ ]		[ ]				[ ]	[ ]	[ ]	[ ]
[ ]	[ ]		[ ]				[ ]	[ ]	[ ]	[ ]

Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 76

Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Torch

Screens Type Material

Perf/S creen	Casing/ Liner	Screen Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Casing	10	58	65	5	188	322	10

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

[ ] Pump [ ] Bailer [ ] Air [ ] Flowing Artesian

Pump AIR

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
200	20		4
120		75	4

Temperature 61 °F Lab analysis [ ] Yes By

Water quality concerns? [ ] Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County MALHEUR Twp 18 S N/S Range 46 E E/W WM

Sec 7 NW 1/4 of the SE 1/4 Tax Lot 1100

Tax Map Number Lot

Lat ° ' " or DMS or DD

Long ° ' " or DMS or DD

[ ] Street address of well [ ] Nearest address

1175 Hillcrest Drive Vale Oregon

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening	03-24-2014			41
Completed Well				

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 48

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
03-24-2014	48	64	200			41

(11) WELL LOG Ground Elevation

Material	From	To
Brown Clay	0	22
Pea Gravel	22	25
Hard Sand	25	38
Brown Silty Clay	38	48
Sand and Gravel	48	61
Silt and Gravel	61	64
Blue Clay	64	76

RECEIVED BY OWRD

MAY 27 2014

SALEM, OR

Date Started 03-24-2014 Completed 03-26-2014

(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 Date

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 682 Date

Password (if filing electronically)

Signed

Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

Form Version: 0.89

State

MALH 54198

MALH54198

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

WELL I.D. LABEL# L 111639
START CARD # 211424
ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D.
First Name Scott Last Name Gressely
Company Gressley Farms
Address 4010 Frese Ln
City Ontario State Or Zip 97918

(2) TYPE OF WORK [X] New Well [ ] Deepening [ ] Conversion [ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Std	Plstc	Wld	Thrd
Casing:									

	Material	From	To	Amt	sacks/lbs
Seal:					

(3) DRILL METHOD
[X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE [ ] Domestic [X] Irrigation [ ] Community
[ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION Special Standard [ ] (Attach copy)
Depth of Completed Well 82 ft

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/ lbs
17	0	26	Bentonite Chips	0	26	2,200	P
17	26	62			Calculated	1,650	
10	62	82					
					Calculated		

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[X] Other bentonite
Backfill placed from ft. to ft. Material
Filter pack from 26 ft. to 62 ft Material 3/8 pea gravel Size pea gravel
Explosives used: [ ] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Std	Plstc	Wld	Thrd
(•)		10		2	62	.250	(•)		[X]	

Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 62
Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method Torch
Screens Type Material

Perf/S creen	Casing/ Liner	Screen Dia	From	To	Scm/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Casing	10	55	62	188	5	300	10

(8) WELL TESTS: Minimum testing time is 1 hour
(•) Pump [ ] Bailer (•) Air [ ] Flowing Artesian

	Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
A	150		82	4
P	250	7		4

Temperature 62 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County MALHEUR Twp 18 S N/S Range 47 E E/W WM
Sec 7 SE 1/4 of the NW 1/4 Tax Lot 500
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
( ) Street address of well (•) Nearest address
north of 1170 hillcrest Vale Or

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	02-16-2015			43

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 55

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
01-16-2015	55	62	150			43

(11) WELL LOG Ground Elevation

Material	From	To
Brown Clay	0	25
Sandy Brown Clay	25	53
Course Sand	53	55
Sand and Gravel	55	62
Blue Clay	62	85

RECEIVED BY OWRD
RECEIVED BY OWRD
MAR 19 2015
FEB 17 2015
SALEM, OR
SALEM, OR

Date Started 01-14-2015 Completed 01-16-2015

(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 Date
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 1082 Date 2/12/15
Signed
Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version 0 95