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MAR 03 2016

SALEM, OR

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME Regald Laird		PHONE (HM) 503-649-0051	
PHONE (WK)	CELL (503)481-8806	FAX	
ADDRESS 22625 SW Murphy Lane			
CITY Aloha	STATE OR	ZIP 97078	E-MAIL* reglaird@msn.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 Stuntzner Engineering & Forestry LLC c/o Jeffrey Kee		PHONE 503-357-5717	FAX
ADDRESS 2137 19th Ave			CELL
CITY Forest Grove	STATE Or	ZIP 97116	E-MAIL* jkee@stuntzner.com


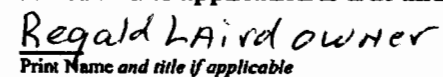
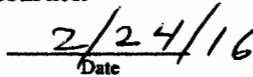
Note: Attach multiple copies as needed

* 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.)

By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application.
- I cannot use water legally until the Water Resources Department issues a permit.
- Oregon law requires that a permit be issued before beginning construction of any proposed well, unless the use is exempt. Acceptance of this application does not guarantee a permit will be issued.
- If I get a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be cancelled.
- The water use must be compatible with local comprehensive land-use plans.
- Even if the Department issues a permit, I may have to stop using water to allow senior water-right holders to get water to which they are entitled.

I (we) affirm that the information contained in this application is true and accurate.

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. <u>G-18209</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
WASH 3191	B utternut Creek	2000 ft	5 ft

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

Well Log WASH 3191

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SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: 0.03 cfs (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

The table below must be completed for each source to be evaluated or the application will be returned. If this is an existing well, the 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 to obtain the necessary information.

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 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	WASH 3191	<input type="checkbox"/>	6"	163'	163' to 173'	na	35' 6/1993	Alluvium	178'	12	0.38 AF
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									

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

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SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Irrigation	Irrigation Season	0.25 AF
Nursery	Year Round	0.13 AF

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

For irrigation use only:

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

Primary: 0.38 Acres Supplemental: _____ Acres

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

Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 0.38 AF

- 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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A. Diversion and Conveyance

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

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Pump (give horsepower and type): submersible 1 hp

SALEM, OR

Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. Water will be pumped using a 1 hp submersible pump into a 119 gallon tank. Water will then be pumped approximately 450 feet through a buried 1" PVC pipe to supply the greenhouse nursery and outdoor irrigation area. Each area will have its own meter to measure and monitor water use.

B. Application Method

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

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.

This small amount of water is all that is necessary to effeciently grow plants. The applicant will be utilizing efficient drip and mist irrigation. Meters will be put in place to measure water use at each location. Water will be reclaimed and re-used where feasible.

SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR

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

Reservoir name: _____ Acreage inundated by reservoir: _____

Use(s): _____

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

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

SECTION 7: USE OF STORED GROUND WATER FROM THE RESERVOIR

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

Annual volume (acre-feet): _____

USE OF STORED GROUND WATER	PERIOD OF USE

SECTION 8: PROJECT SCHEDULE

Date construction will begin: September 2016 estimated.

Date construction will be completed: May 2017

Date beneficial water use will begin: May 2017

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	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*).

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

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Applicant: Regald

First

Laird

Last

MAR 03 2016

Mailing Address: 22325 SW Murphy Lane

Aloha

City

Or

State

97078

Zip

Daytime Phone: (503) 649-0051

SALEM, OR

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:
1s	2w	23	NW OF NW	500	FD-20 (Future Development)	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	agricultural production
						<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:

Washington County

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: 0.32 AF 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 ~~Other~~ Greenhouse

Briefly describe:

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.

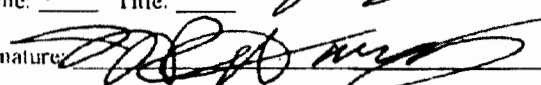
Please check the appropriate box below and provide the requested information

- 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): 201-2.4
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) If approvals have been obtained but all appeal periods have not ended, check "Being pursued."

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

The Growing of AN Agricultural Crop
IN The FD-20 District is AN Outright
Permitted Use

Name: Tom Harry Title: Senior Planner
 Signature:  Phone: 503-846-3841 Date: 2/23/16
 Government Entity: Washington 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: _____

MAR 04 1992

OREGON TITLE INS. CO. 361269w



OREGON TITLE Insurance Company

92013618 Washington County

STATUTORY WARRANTY DEED (Individual.)

ALAN H. FLEMMS

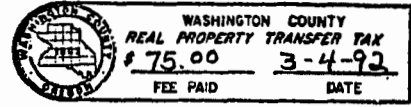
conveys and warrants to REGALD LAIRD and SILVANA LAIRD, husband and wife

the following described real property in the State of Oregon and County of Washington free of encumbrances, except as specifically set forth herein:

Lot 5, according to the duly filed plat of FRUITDALE, filed March 24, 1892 in Plat Book 1, Page 119, Records of the County of Washington and State of Oregon.

Tax Account Number(s): 1S223 00500/Key #R384738

This property is free of encumbrances, EXCEPT: (none)



The true consideration for this conveyance is \$75,000.00

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES.

DATED this 3rd day of March, 1992.

Signature of Alan H. Flemms

STATE OF OREGON, COUNTY OF Washington)es. The foregoing instrument was acknowledged before me this 3rd day of March, 1992, by ALAN H. FLEMMS:

Notary Public for Oregon My Commission Expires: 9-12-92

Order No.: 361269w

After Recording Return To: REGALD LAIRD & SILVANA LAIRD 16940 SW Naples Court Aloha, Oregon 97007

Until a change is requested, tax statements shall be sent to the following address:

(same as above)

STATE OF OREGON } SS County of Washington

I, Jerry R. Hanson, Director of Assessment and Taxation, do hereby certify that the within instrument was received and recorded in the records of said county.



Doc : 92013618 Rect: 72367 108.00 03/04/1992 10:14:15AM

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MAR 03 2013

SALEM, OR

G1-18209

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

WASR 3191

(START CARD) # 54468

(1) OWNER:

Well Number #2
 Name REGALD LAIRD
 Address 16940 SW NAPLES CT.
 City ALOHA State OR Zip 97007

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 178 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
10"	0 178	Cement	0 40	13 aks.	
		Drill gel	40 120		
		Cement	120 138	5 aks.	
		sand pack	138 178	19 aks.	

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

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from 138 ft. to 178 ft. Size of gravel 1C Sand

(6) CASING/LINER:

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: 6"	+2	163	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6"	173	178	250	<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"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type Low Carbon Material Steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
163	173	.020		6"	pipe	<input checked="" 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 at	Time
12	38		2 hr.

Temperature of Water 54°F Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom AMJ
 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 WASHINGTON Latitude _____ Longitude _____
 Township 1S N or S. Range 2W E or W. WM. _____
 Section 23 NW 1/4 NW 1/4
 Tax Lot 500 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) N/A MURPHY LANE

(10) STATIC WATER LEVEL:

35 ft. below land surface. Date 06/24/93
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 166

From	To	Estimated Flow Rate	SWL
166	172	12 gpm	35

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Topsoil	0	2	
Brown clay occ silty w/wood	2	36	
Gray & gray-brown silty clay	36	98	
Red-brown sand	98	100	
Brown clay	100	109	
Gray sandy clay	109	123	
Blue-gray clay	123	128	
Fine-medium gray-brown sand	128	133	
Gray clay occ sandv	133	146	
Sticky blue-gray clay	146	157	
Soft gray-brown & gray sandy clay	157	166	
Fine & medium coarse black sand	166	172	35
Soft gray clay	172	178	

Date started 06/21/93 Completed 06/24/93

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed _____ WWC Number 1492
 Date 06/25/93

(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 well construction standards. This report is true to the best of my knowledge and belief.

Signed _____ WWC Number 1266
 Date 06/25/93

G-18209



TELEPHONE (503) 357-5717
FAX (503) 357-5698
WEBSITE: www.stuntzner.com
2137 19th Avenue
Forest Grove, OR 97116

COOS BAY - FOREST GROVE - DALLAS - JUNCTION CITY

February 29, 2016

Oregon Water Resources Department
725 Summer Street NE, Ste. A
Salem, OR 97301-1266

RE: New Ground Water Application

To Whom It May Concern:

An *Application for Permit to Use Ground Water* has been completed. You will find the following enclosed:

1. Check #3407 in the amount of \$2,200.00 to cover the application fee for the *Application*.
2. The completed and signed *Application for Permit to Use Ground Water*
 - Land Use Information Form
 - Water Right Application Map
 - Property Deed
 - Water Well Report

If you have any questions on this submitted material, please contact Jeffrey Kee at 503-357-5717 or jkee@stuntzner.com

Sincerely,
Stuntzner Engineering & Forestry LLC

Carol Taylor
Office Assistant

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