

MAR 03 2016

Application for a Permit to Use Ground Water



SALEM, OR
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 JON A. BECK		PHONE (HM) 541-899-9187	
PHONE (WK)	CELL 541-944-1492		FAX
ADDRESS PO Box 1716			
CITY JACKSONVILLE	STATE OR	ZIP 97530	E-MAIL* camporelayo@gmail.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		PHONE		FAX
ADDRESS			CELL	
CITY	STATE	ZIP	E-MAIL*	

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.)

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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.

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


Applicant Signature

JON A. BECK
Print Name and title if applicable

3-1-2016
Date

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. _____	Permit No. _____	Date _____

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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
3 5 43			
No. 1	FOREST CREEK	20,000 FT	
No. 2	FOREST CREEK	20,000 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*).

COULD NOT IDENTIFY A STREAM LESS THAN
A MILE

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SECTION 3: WELL DEVELOPMENT, CONTINUED

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Total maximum rate requested: 50 GPM (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)
1	☐	☒	JACK 30043	☐	6"	1' to 19'	N/A	0-19'	8/11/91	SEE WELL LOG	410'	3.5	
2	☒	☐	Proposed	☐	6"	1' to 19'	N/A	0-19'	WELL HAS NOT BEEN DRILLED YET	Hornbrook Formation Limestone sandstone, and basalt	WELL HAS NOT BEEN DRILLED 500'	46.5	
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									

proposed well to be developed
By ~~THE~~ LICENSED WELL DRILLER:

* 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)
Nursery USE	YEAR AROUND	77.3

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: _____ 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: _____

- 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**RECEIVED****MAR 18 2016****OWRD****A. Diversion and Conveyance**

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

☒ Pump (give horsepower and type): 3/4 HP SUBMERSIBLE PUMP

☐ 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)

LOW VOLUME DRIP LINE

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.

SEE ATTACHED COMMENTS.

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: _____

N/A

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

NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; **OR**
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and **all** of the following apply:
 - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; **and**
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

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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): _____

USE OF STORED GROUND WATER	PERIOD OF USE
<u>N/A</u>	

SECTION 8: PROJECT SCHEDULE

Date construction will begin: ASAP

Date construction will be completed: ASAP

Date beneficial water use will begin: ASAP

SECTION 9: WITHIN A DISTRICT

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

Irrigation District Name	Address	
City	State	Zip

SECTION 10: REMARKS

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

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Receipt for Request for Land Use Information

Applicant name: Jon Beck

City or County: Taukson County Staff contact: Tauk Riquar

Signature: Tauk Riquar Phone: 541-774-6907 Date: 02-03-2016

Revised 3/4/2010

Ground Water/10

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

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SEP - 6 1991 (START CARD) #

385/26/8

31032

(1) OWNER: Well Number: WATE

Name: Don Baker
Address: 2551 S. Green Ave
City: Central Point State: Ore Zip: 97502

(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 410' ft.
Explosives used ☐ Type ☐ Amount

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
<u>6"</u>	<u>19</u> <u>410'</u>	<u>Benmore</u>	<u>0</u> <u>19</u>	<u>12</u>	

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

☒ Other Poured in dry

Backfill placed from ft. to ft. Material

Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	<u>6"</u>	<u>19</u>	<u>410'</u>	<u>200</u>	☒	☐	☒	☐
Liner:	<u>n/a</u>				☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method
☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
		<u>n/a</u>				☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>3 1/2</u>	<u>410'</u>	<u>410'</u>	<u>1 hr.</u>

Temperature of water 53° 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: DELAN Latitude Longitude
Township 38 North Range 2 East of W.M.
Section 8 1/4 1/4
Tax Lot 100 Lot Block Subdivision
Street Address of well (or nearest address) 5501 W. Green Ave

(10) STATIC WATER LEVEL:

68' ft. below land surface. Date 8/4/91
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
<u>394</u>	<u>395</u>	<u>32</u>	<u>68</u>

(12) WELL LOG:

Material	From	To	SWL
<u>Chertstone</u>	<u>Brown</u>	<u>0</u> <u>3</u>	
<u>Sandstone</u>	<u>Brown</u>	<u>3</u> <u>12</u>	
<u>Sandstone</u>	<u>Blue</u>	<u>12</u> <u>46</u>	
<u>Basalt</u>	<u>Blue</u>	<u>46</u> <u>394</u>	
<u>Basalt</u>	<u>Blue</u>	<u>394</u> <u>325</u>	<u>68</u>
<u>Basalt</u>	<u>Blue</u>	<u>325</u> <u>410</u>	

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Date started 8/10/91 Completed 8/4/91

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

Signed WWC Number 1857
Date 8/15/91

Attachment Sec. 5 c.

The amount of water requested is required to maintain a functioning year round nursery, a greenhouse and an outdoor propagation site. Drip irrigation, fixed quantities of water, mulch and superior soils that have excellent water retention properties will ensure wise use and prevent waste of water.

Well #1 will be used for both domestic and nursery use. Water use directed to the nursery will be on a flow meter. Well #2 will be used only for greenhouse and outdoor propagation. This well will also be on a flow meter.

With the wise use of water, there will be no run off of water that could adversely effect riparian and aquatic life habitat. Because of efficient watering practices, distances to streams and personnel concern for the environment great care will be taken to ensure no negative impact will take place to surface stream and surface water.

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SALEM, OR

NE

91-02660

BARGAIN AND SALE DEED

KNOW ALL MEN BY THESE PRESENTS, That THOMAS A. GEIGER

, hereinafter called grantor,
for the consideration hereinafter stated, does hereby grant, bargain, sell and convey unto JON A. BECKhereinafter 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 anywise appertaining, situated in the County
of JACKSON, State of Oregon, described as follows, to-wit:

That portion of the Southeast Quarter of the Northeast Quarter of
Section 8 in Township 38 Souht, Range 2 West of the Willamette Meridian in
Jackson County, Oregon, lying SOUTHERLY of the southerly line of the County
road.

Jackson County, Oregon
Recorded
OFFICIAL RECORDS

1:10 FEB 6 1991 P.M.

KATHLEEN S. BECKETT
CLERK and RECORDER

By Samuel [Signature] Deputy

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(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

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

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 9,450.00

① However, the actual consideration consists of or includes other property or value given or promised which is
the whole consideration (indicate which). ① (The sentence between the symbols ①, if not applicable, should be deleted. See ORS 93.030.)

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

In Witness Whereof, the grantor has executed this instrument this 17 day of September, 1990;
if a corporate grantor, it has caused its name to be signed and its seal affixed by an officer or other person duly author-
ized to do so by order of its board of directors.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DE-
SCRIBED 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.

Thomas A. Geiger

STATE OF OREGON, County of Jackson ss.

This instrument was acknowledged before me on September 17, 1990,
by Thomas A. Geiger

This instrument was acknowledged before me on _____, 19____,

by _____

as _____

of _____

[Signature]
Notary Public for Oregon

My commission expires 11/1/92



STATE OF OREGON,

County of _____

ss.



Oregon

Kate Brown, Governor

March 7, 2016

Jon A. Beck
PO Box 1716
Jacksonville, OR 97530

Water Resources Department

North Mall Office Building
725 Summer St NE, Suite A
Salem, OR 97301
Phone (503) 986-0900
Fax (503) 986-0904
www.wrd.state.or.us

Dear Jon:

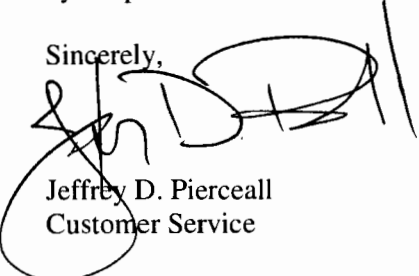
The Water Resources Department has received your application to use or store water. At this time however, we are unable to accept your application, because the minimum filing requirements are not met according to the Oregon Administrative Rules (OAR 690-310-0040 and 0050).

We are hereby returning the incomplete application and the fees submitted. Please return the application, the required information, and this checklist, so the Department may begin processing your application in a timely manner.

This review is based only on the completeness of your application. Any determination of water availability, compliance with basin plan rules, or any other water related issues has not been made.

Should you have any questions, please do not hesitate to contact Customer Service at the address above or by telephone at 503-986-0801.

Sincerely,



Jeffrey D. Pierceall
Customer Service

Cc: OWRD Fiscal

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- ☒ *For a GW Application:* Well Development Tables completed and/or a well log report included (if existing) for all wells. Please complete well development table for well 2.
- ☒ A **Legal Description** of all the properties involved where water is diverted, crossed, and used. The Legal description includes a metes and bounds or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or applicant may submit a lot book report prepared by a title company. Copies of tax bills are not acceptable.

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