

G-13229

RECEIVED

OCT 05 1998
WATER RESOURCES DEPT.
SALEM, OREGON

Tom "Mac" Kerns
45296 Pocahontas Rd.
Haines, Oregon 97833

September 30, 1998

Martha Pagel
Oregon Water Resources Department
Commerce Building
158 12th Street
Salem, Oregon 97310-0210

Dear Martha,

Reference File G-12023 in the name of Brad E.; Blane E.; Jay and Ann Allen.

Enclosed is the revised Final Proof Survey.

Sincerely,

Tom Mac Kerns

TOM "MAC" KERNS
CWRE

11/26/2001
COBU Rept lacks
Calc's, may not be std's
description of water
system (ie wheel lines
& ctr pivots).....
check done
[Signature]

FINAL PROOF SURVEY
FOR PERMIT G-12023

1/3

GENERAL INFORMATION: This is a Final Proof Survey for four wells under G-12023 in the name of Brad E.; Blane E.; Jay and Ann Allen.

SOURCE: These wells are for supplemental irrigation. The land is covered by a primary surface water right. The primary right has been historically used for irrigation of agricultural crops and has been used to the fullest extent possible, however, it does not provide season long water.

WELL LOCATIONS:

Wells constructed under the Permit are located as follows:

NE 1/4 SW 1/4 SECTION 8, NW 1/4 SW 1/4, SECTION 9, NE 1/4 NW 1/4, SECTION 15, SW 1/4 NW 1/4, SECTION 17, T 8 S, R 39 E, W.M.; Well 1-1420 FEET SOUTH AND 1220 FEET EAST, WELL 2 - 2590 FEET NORTH AND 2590 FEET EAST, BOTH FROM THE SW CORNER OF SECTION 8, WELL 3 - 80 FEET SOUTH AND 80 FEET WEST FROM THE N 1/4 CORNER OF SECTION 15, WELL 4 - 20 FEET SOUTH AND 800 FEET WEST FROM THE W 1/4 CORNER OF SECTION 9.

LAND BEING IRRIGATED: Land being irrigated is as follows:

NE 1/4 NE 1/4 40.0 ACRES
NW 1/4 NE 1/4 40.0 ACRES
SW 1/4 NE 1/4 40.0 ACRES
SE 1/4 NE 1/4 40.0 ACRES
NE 1/4 SW 1/4 40.0 ACRES
NW 1/4 SW 1/4 40.0 ACRES
SW 1/4 SW 1/4 39.5 ACRES
SE 1/4 SW 1/4 40.0 ACRES
SECTION 8
NE 1/4 SW 1/4 40.0 ACRES
NW 1/4 SW 1/4 40.0 ACRES
SW 1/4 SW 1/4 40.0 ACRES
SE 1/4 SW 1/4 40.0 ACRES
NE 1/4 SE 1/4 40.0 ACRES
NW 1/4 SE 1/4 40.0 ACRES
SW 1/4 SE 1/4 40.0 ACRES
SE 1/4 SE 1/4 40.0 ACRES

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SECTION 9

NW 1/4 SW 1/4 40.0 ACRES

SECTION 10

NE 1/4 NW 1/4 38.4 ACRES

NW 1/4 NW 1/4 40.0 ACRES

SECTION 15

NE 1/4 NW 1/4 40.0 ACRES

NW 1/4 NW 1/4 40.0 ACRES

SW 1/4 NW 1/4 40.0 ACRES

SE 1/4 NW 1/4 40.0 ACRES

SECTION 17

TOWNSHIP 8 SOUTH, RANGE 39 EAST, W.M.

WELLS: Wells are described in the attached drillers logs.

DISTRIBUTION AND APPLICATION SYSTEM: Distribution system is as shown on the attached final proof map. Application is by center pivots, wheel lines, and with hand lines and flood irrigation in the pivot corners.

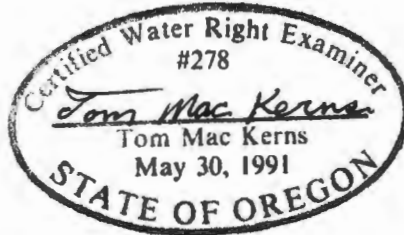
PUMPS: Pumps are a 75 Hp 8T900 Berkley submersible in wells 1, 2, and 4, and a 75 Hp line shaft turbine in well number 3.

LIFT: Lift varies by how the system is being operated. From the lowest water surface to the highest point of use is approximately 150 feet.

QUANTITY OF WATER: Quantity of water each well is capable of producing is as follows:

well No. 1	925	GM
well No. 2	925	GM
well No. 3	850	GM
well No. 4	925	GM

The Final Proof Survey and inspection of the use was found to be 3/3 completed under the terms and conditions of permits G-12023 and was completed by the applicant in July 1997. Facts contained in the report and accompanying Final Proof Map are correct to the best of my knowledge.



I Brad E. Allen, etal, agree to the findings of the CWRE and do submit this site report and map as our claim of beneficial use of the water as provided under the terms and conditions of permits G-12023.


BRAD E. ALLEN

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WATER RESOURCES DEPT.
SALEM, OREGON

Yellow Pringle Root

RECEIVED 75HY
WELL #1 Berkeley 8T900 8S/39E/1760
APR 22 1992 (START CARD) 135081

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

BAKE
1864

(1) OWNER: Well Number: WATER RESOURCES DEPT SALEM, OREGON
Name: BLAIN ALLEN
Address: RT 1 Box 9J
City: HAINES State: ORE Zip: 97433

(9) LOCATION OF WELL by legal description:
Latitude _____ Longitude _____
Township 8 N or S Range 39 E or W, WM.
Section 17 SW 1/4 NW 1/4
Tax Lot: 3200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) NONE

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

HOLE SEAL Amount
Diameter From To Material From To sacks or pounds
16 0 19 CEMENT 0 19 14
10 19 300

How was seal placed: Method A B C D E
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: 12 +1 19 250
Liner: 10 +1 291 250

Final location of sheets) EP-291

(7) PERFORATIONS/SCREENS:
 Perforations Method: HOLT DOWN HOLE PERFORATOR
 Screens Type _____ Material _____

From To Slot size Number Diameter Tele/pipe size Casing Liner
80 290 1" #250 1/4 10"

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min: 800 Drawdown: 125 Drill stem at: 290 Time: 1 hr.

Temperature of water 52 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: 70-71

(10) STATIC WATER LEVEL:
65 ft. below land surface. Date: 3-24-92
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 70

From	To	Estimated Flow Rate	SWL
70	71	5	65
86	88	10	65
115	120	50	65
135	146	150	65

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
CLAY	0	24	
CLAY + GRAVEL	24	56	
CLAY + SAND	56	70	
SAND - m-B	70	71	65
CLAY + SAND	71	86	
SAND - m-B	86	88	65
CLAY + GRAVEL	88	115	
SAND med - m-B	115	120	65
CLAY + GRAVEL	120	140	
GRAVEL - m-B	140	157	65
CLAY + GRAVEL	157	284	
SAND + GRAVEL - W-B	284	300	65
filled - SAND + GRAVEL	291	300	

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WATER RESOURCES DEPT.
SALEM, OREGON

Date started 2-10-92 Completed 3-24-92

(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.
WWC 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 well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 591
Signed [Signature] Date 3-24-92

#8

NEW TOM BROCK'S Pond
WELL #2 75 HP 8T900 Berkeley
8S/39E/8 Ca
APR -1 1991

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

BAKE
1742

(START CARD) # 17398

(1) OWNER: Well Number: _____
Name Allen Bros.
Address RT 1 Box 90
City HAINES State ORC Zip 97833

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

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
16	0 14	CEMENT	0 18	10	
10	20 240				

How was seal placed: Method A B C D E
 Other _____
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:	12	+1	20	1.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	10	+1	216		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoets) 216

(7) PERFORATIONS/SCREENS:
 Perforations Method Slotted Pipe
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
0	216	10	490	1/4	10	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian
Yield gal/min 670 Drawdown 93 Drill stem at _____ Time 2 hr.

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: 25

(9) LOCATION OF WELL by legal description:
County Willamette Latitude _____ Longitude _____
Township 9 N or S Range 39 E or W. WM.
Section 4 NE 1/4 SW 1/4
Tax Lot 3200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
25 ft. below land surface. Date 3-16-91
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 25

From	To	Estimated Flow Rate	SWL
24	25	2	25
47	48	10	25
76	80	20	25
96	99	100	25

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
TOP SOIL	0	3	
CLAY yellow	3	22	
SAND + GRAVEL	22	25	25
CLAY + GRAVEL	25	47	
SAND + GRAVEL	47	48	25
CLAY + GRAVEL	48	76	
SAND + GRAVEL	76	80	25
SAND + CLAY	80	96	
SAND + GRAVEL	96	99	25
CLAY yellow	99	112	
GRAVEL	112	116	25
CLAY yellow	116	135	
SAND + GRAVEL	135	138	25
CLAY yellow	138	145	
SAND + GRAVEL + CLAY	145	160	
CLAY yellow	160	175	
SAND + GRAVEL	175	178	25
CLAY yellow	178	194	
SAND + GRAVEL	194	201	25
CLAY yellow	201	214	
SAND + GRAVEL	214	223	25
CLAY yellow	223	240	

Date started 2-13-91 Completed 3-16-91

(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.

WWC Number _____
Signed _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment of work performed on this well during the construction dates reported above. A 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.

WWC Number 591
Signed Tracy Dennis Date 3-16-91

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WATER RESOURCES DEPT.
SALEM, OREGON

Stoker Turbine Pump on 80
75 HP
American
STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

WELL #3

BAKER CITY

DEC 11 1994

85/39E/15
76247

WATER RESOURCES DEPT.

(START CARD) # 76247

SALEM, OREGON

(1) OWNER: Well Number _____
Name BLAINY, AILEN
Address RT 1 - Box 90
City HAINES State OR Zip 97127

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

HOLE Diameter	From	To	Material	SEAL		Amount sacks or pounds
				From	To	
14	0	18	CONCRETE	0	18	21
10	18	300				

How was seal placed: Method A B C D E
 Other DRY BENTONITE
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	10	+3	277	257	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 277

(7) PERFORATIONS/SCREENS:
 Perforations Method DOWN HOLE PERFORATION
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tube/pipe size	Casing	Liner
40	277	1"	6048	4"	10"	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
8000	282	300	1 hr.

Temperature of Water 51 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any screens contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: 16

(9) LOCATION OF WELL by legal description:
County BAKER Latitude _____ Longitude _____
Township 8 N Range 39 E W. V
Section 15 NE 1/4 NW 1/4
Tax Lot 200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) NONE

(10) STATIC WATER LEVEL:
16 ft. below land surface. Date 11-5-94
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 16

From	To	Estimated Flow Rate	S
16	300	1000	6

(12) WELL LOG: Ground elevation _____

Material	From	To	S
TAP 3011	0	3	
CLAY	3	16	
SAND + GRAVEL - 4-B	16	240	1
SAND - 2W-B	240	300	1

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WATER RESOURCES DEPT.
SALEM OREGON

Date started 10-21-94 Completed 11-9-94

(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. Material 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 Blainy Donnan WWC Number 5791
Date 11-9-94

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

BAKE
2012
Trailer Well

75 HP 87 900
JAN 18 1994
WELL # 4
WATER RESOURCES DEPT

Barkley SS/57E/4C
(START CARD) # 44453

(1) OWNER: Well Number SALEM, OREGON

Name: BRAD ALLEN
Address: Rt 1 Box 90
City: HAINES State: ORC Zip: 97433

(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 215 ft.
Explosives used Yes No Type Amount

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
14	0	20	BENTONITE	0	20	21
10	20	320				

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

Backfill placed from ___ ft. to ___ ft. Material
Gravel placed from ___ ft. to ___ ft. Size of gravel

(6) CASING/LINER:

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
10	+1	299	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>

Liner: _____

Final location of shoe(s) 299

(7) PERFORATIONS/SCREENS:
 Perforations Method DOWN HOLE PERFORATOR
 Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60	299	1"	5760	7/8"	10"	<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<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 at	Time
800	90	200	1 hr.

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: 20

(9) LOCATION OF WELL by legal description:

County: Baker Latitude Longitude
Township: 8 N or S Range: 39 E or W. WM
Section: 9 NW 1/4 54 1/4
Tax Lot: 3301 Lot Block Subdivision
Street Address of Well (or nearest address): NONE

(10) STATIC WATER LEVEL:
18 ft. below land surface. Date 1-11-94
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 20

From	To	Estimated Flow Rate	SW
20	21	1	18

(12) WELL LOG:

Ground elevation

Material	From	To	SW
CLAY	0	20	
GRAVEL - W-B	20	21	18
SAND + GRAVEL + CLAY	21	48	
SAND + GRAVEL - W-B	48	51	18
SAND + CLAY	51	74	
SAND + GRAVEL - W-B	74	78	1
SAND + GRAVEL - W-B	78	180	1
SAND MED - W-B	180	260	1
SAND + GRAVEL - W-B	260	265	1
SAND W-B	265	280	1
SAND + GRAVEL W-B	280	294	1
SAND W-B	294	295	1
SAND + CLAY	295	315	
SAND + GRAVEL - W-B	315	320	1

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OREGON

Date started 12-3-93 Completed 1-11-94

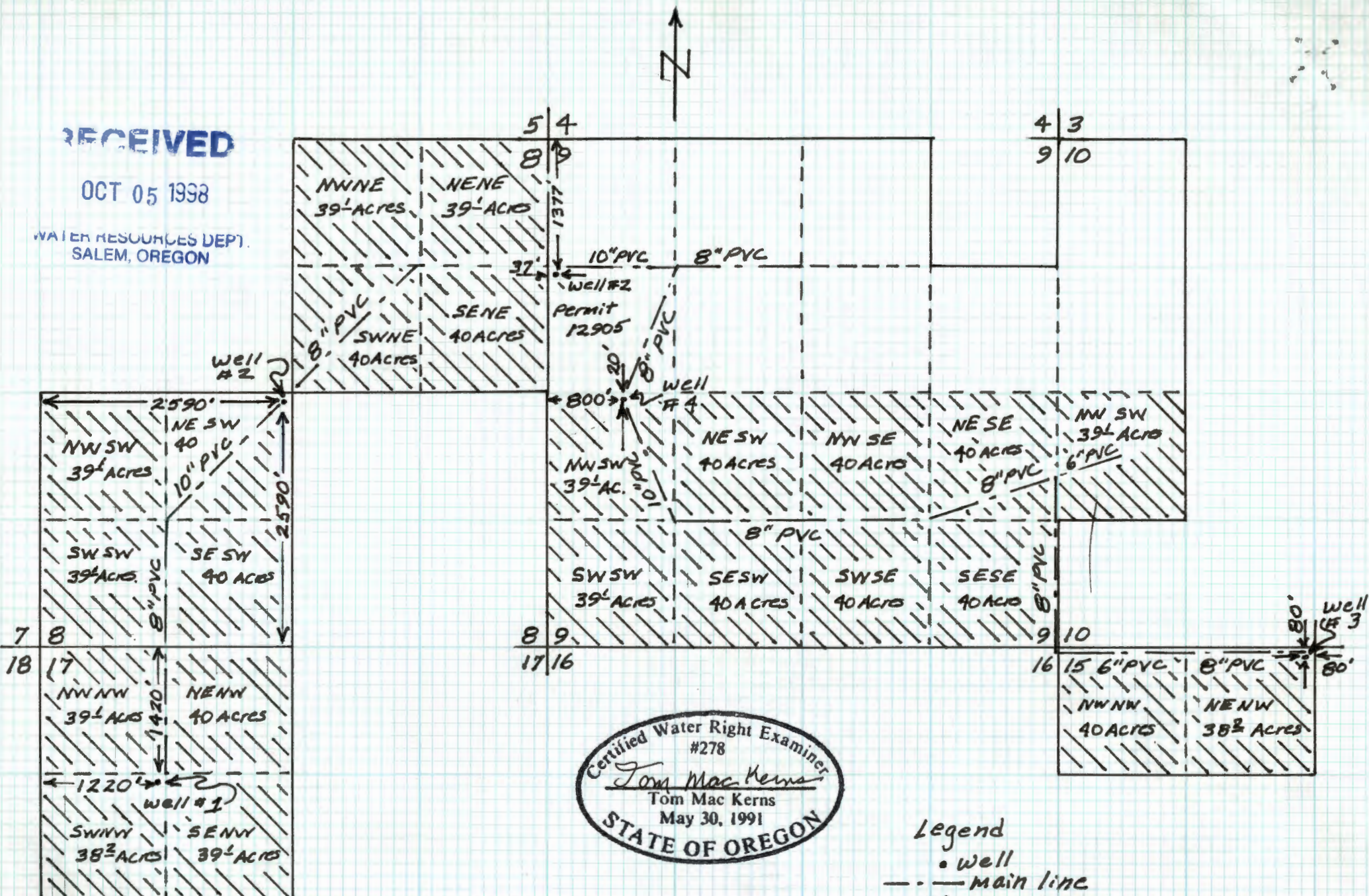
(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials and information reported above are true to my best knowledge and belief.
WWC Number
Signed 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 well construction standards. This is true to the best of my knowledge and belief.
WWC Number 59
Signed Wiley Dennis Date 1-11-94

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WATER RESOURCES DEPT.
SALEM, OREGON



Certified Water Right Examiner
#278
Tom Mac Kerns
Tom Mac Kerns
May 30, 1991
STATE OF OREGON

FINAL PROOF MAP
FOR PERMIT G-12023
T.8S.; R.39E.; W.M.

Legend
 • well
 - - - main line
 // Land being irrigated
 scale 4" = 1 mile
 Drawn 9-29-98 By TMK