

Groundwater Application Review Summary Form

Application # G- 18781

GW Reviewer Phil Marcy Date Review Completed: 1/25/2019

Summary of GW Availability and Injury Review:

Groundwater for the proposed use is either over appropriated, will not likely be available in the amounts requested without injury to prior water rights, OR will not likely be available within the capacity of the groundwater resource per Section B of the attached review form.

Summary of Potential for Substantial Interference Review:

There is the potential for substantial interference per Section C of the attached review form.

Summary of Well Construction Assessment:

The well does not appear to meet current well construction standards per Section D of the attached review form. Route through Well Construction and Compliance Section.

8/1/31/19

This is only a summary. Documentation is attached and should be read thoroughly to understand the basis for determinations and for conditions that may be necessary for a permit (if one is issued).



MEMO

To: Kristopher Byrd, Well Construction and Compliance Section Manager
From: Joel Jeffery, Well Construction Program Coordinator
Subject: Review of Water Right Application G-18781
Date: March 14, 2019

The attached application was forwarded to the Well Construction and Compliance Section by Water Rights. Phil Marcy reviewed the application. Please see Phil's review and the well log.

Applicant's Well #1 (MALH 2845): Based on a review of the Well Report, Applicant's Well #1 seems to protect the groundwater resource.

The construction of Well #1 may not satisfy hydraulic connection issues.

PUBLIC INTEREST REVIEW FOR GROUNDWATER APPLICATIONS

TO: Water Rights Section Date 01/25/2019
 FROM: Groundwater Section Phillip I. Marcy
 Reviewer's Name
 SUBJECT: Application G- 18781 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: Jan and Derik Drake County: Malheur

A1. Applicant(s) seek(s) .0001 cfs from 1 well(s) in the Owyhee Basin,
 _____ subbasin

A2. Proposed use Nursery Seasonality: Year-round (365 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 2845	1	Alluvium	.0001	20S/46E-23 NE-NE	823'S, 902'W fr NE cor S 23
2						
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	2298	80	62	09/25/1992	240	0-24	0-79	NA	NA	5	NA	Air

Use data from application for proposed wells.

A4. **Comments:** The applicant proposes to use existing domestic well MALH 2845 for year-round irrigation of nursery crop.

A5. **Provisions of the** Owyhee 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) _____;
 - 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:** There is no evidence to suggest that groundwater declines are occurring in the area of proposed use. Limited time series data is available for nearby wells, but groundwater elevation reported on the Driller’s log for the proposed POA well suggest that groundwater elevations echo land surface elevations toward the Snake River to the east in the unconfined alluvium. The nearest irrigation right is 3,800’ west of the proposed POA location, and considering the small rate of appropriation, undue interference with that right is not expected as a result of the proposed use.

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	Quaternary alluvium/Glenns Ferry Fmn.	<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"/>

Basis for aquifer confinement evaluation: The proposed POA well is sealed to a depth of 24' BLS, producing groundwater from a combination of Quaternary sediments (Bonneville Flood deposits and layered fine-grained fluvial sediments) and older Glenns Ferry Formation sediments (Ferns, 1993a). Though some degree of confinement may exist when tapping the deeper portions of the Glenns Ferry Formation, MALH 2845 displays little to no confining pressure in the shallow alluvial aquifer system, with resulting static water level similar to the depth at which it was first reported.

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?			Potential for Subst. Interfer. Assumed?	
						YES	NO	ASSUMED	YES	NO
1	1	Snake River	2236	2183	7300	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<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"/>

Basis for aquifer hydraulic connection evaluation: The hydraulic gradient in the area surrounding the proposed POA well is sloping toward the Snake River in the unconfined alluvial aquifer system. As there is little to no confinement suggested by the well log, and no lithology reported that would substantiate a significant barrier to groundwater movement, our conceptual understanding leads to the conclusion that groundwater pumped from the proposed aquifer would otherwise be inevitably discharged to the Snake River.

Water Availability Basin the well(s) are located within: Owyhee R > Snake R – At Mouth (ID# 31111001)

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	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>	156	<input type="checkbox"/>	<<25%	<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"/>

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?
	<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"/>

Comments: Impacts to the Snake River from pumping at the proposed POA well are expected to be much less than 25% of the pumping rate at 30 days. This is mainly due to distance from the stream and thickness of the Glens Ferry aquifer materials accessed by the well.

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													
(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: 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:** _____

References Used: _____

Gannett, M. W. 1999. Hydrogeology of the Ontario Area Malheur County, Oregon. Oregon Water Resources Dept. Ground Water Report No. 34. 39p.

Ferns, M.L., H.C. Brooks, J.G. Evans, M.L. Cummings. 1993. Geologic map of the Vale 30x60 minute quadrangle, Malheur County, Oregon and Owyhee County, Idaho. Oregon Dept. of Geology and Mineral Industries Geological Map Series 77.

Application file G-18781. OWRD water level database.

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) _____

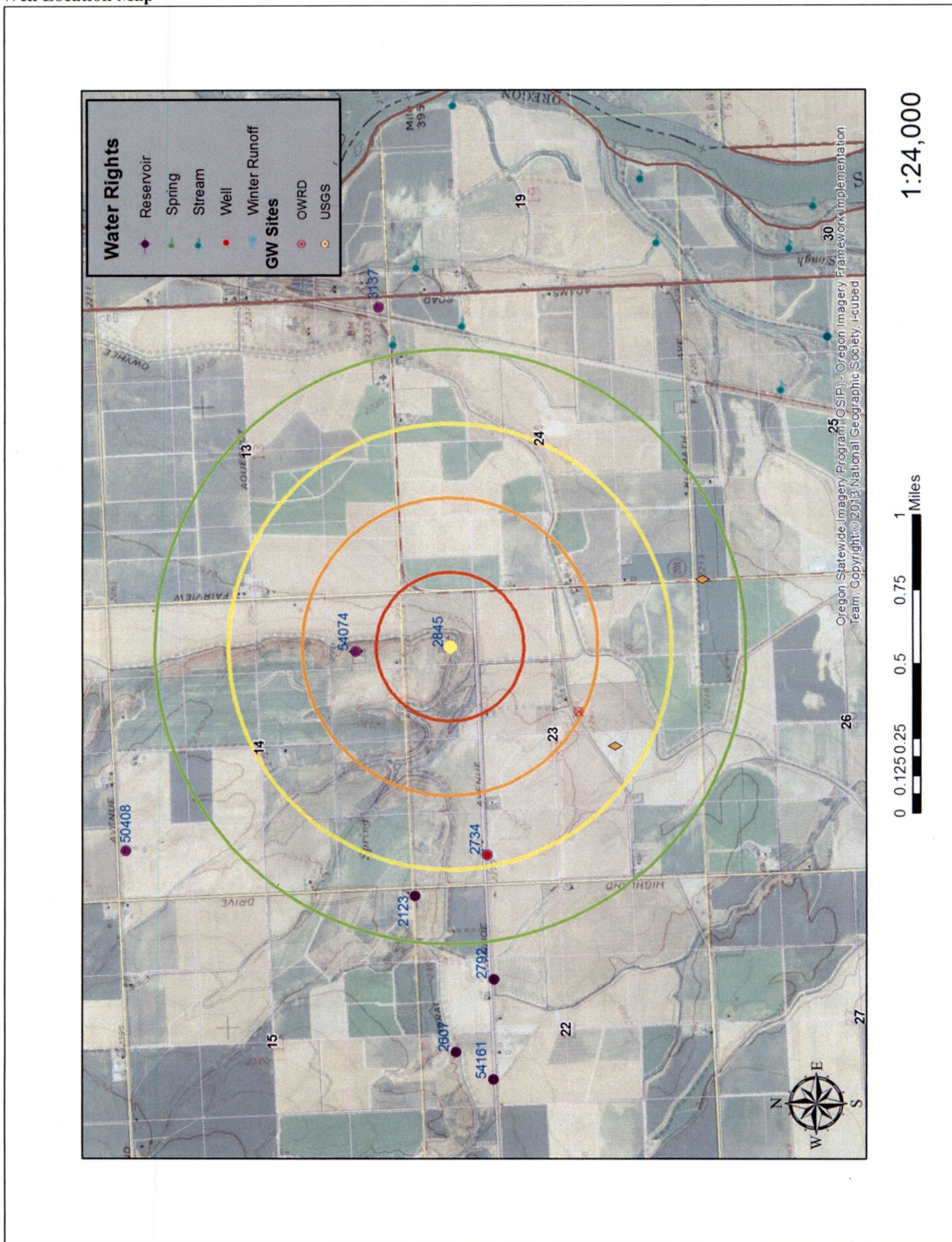
D3. **THE WELL construction deficiency or other comment is described as follows:** _____

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

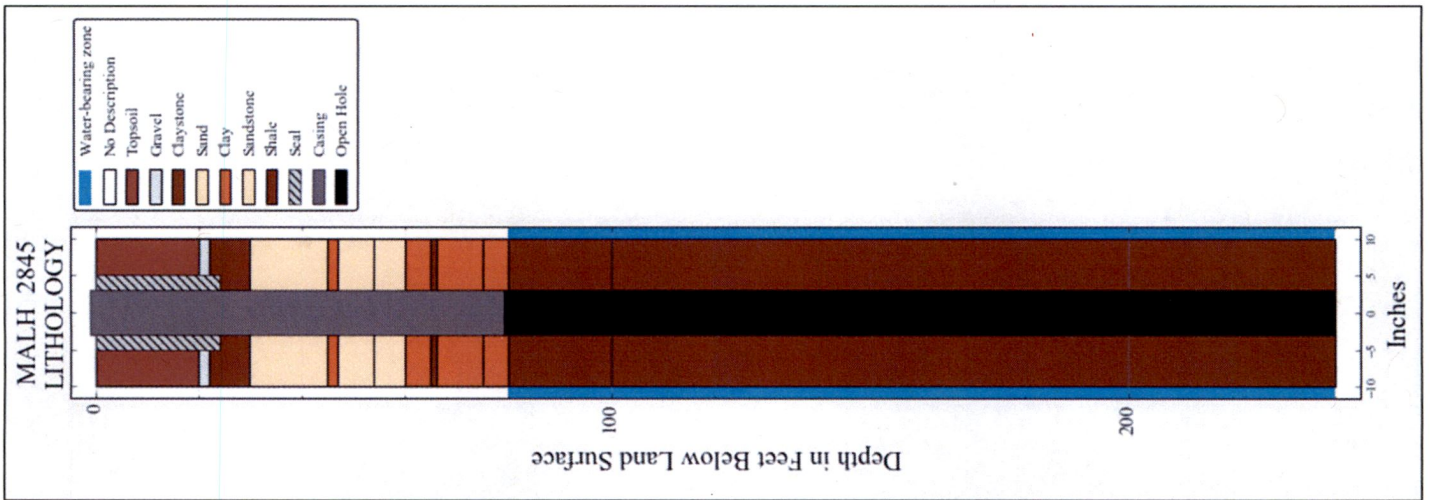
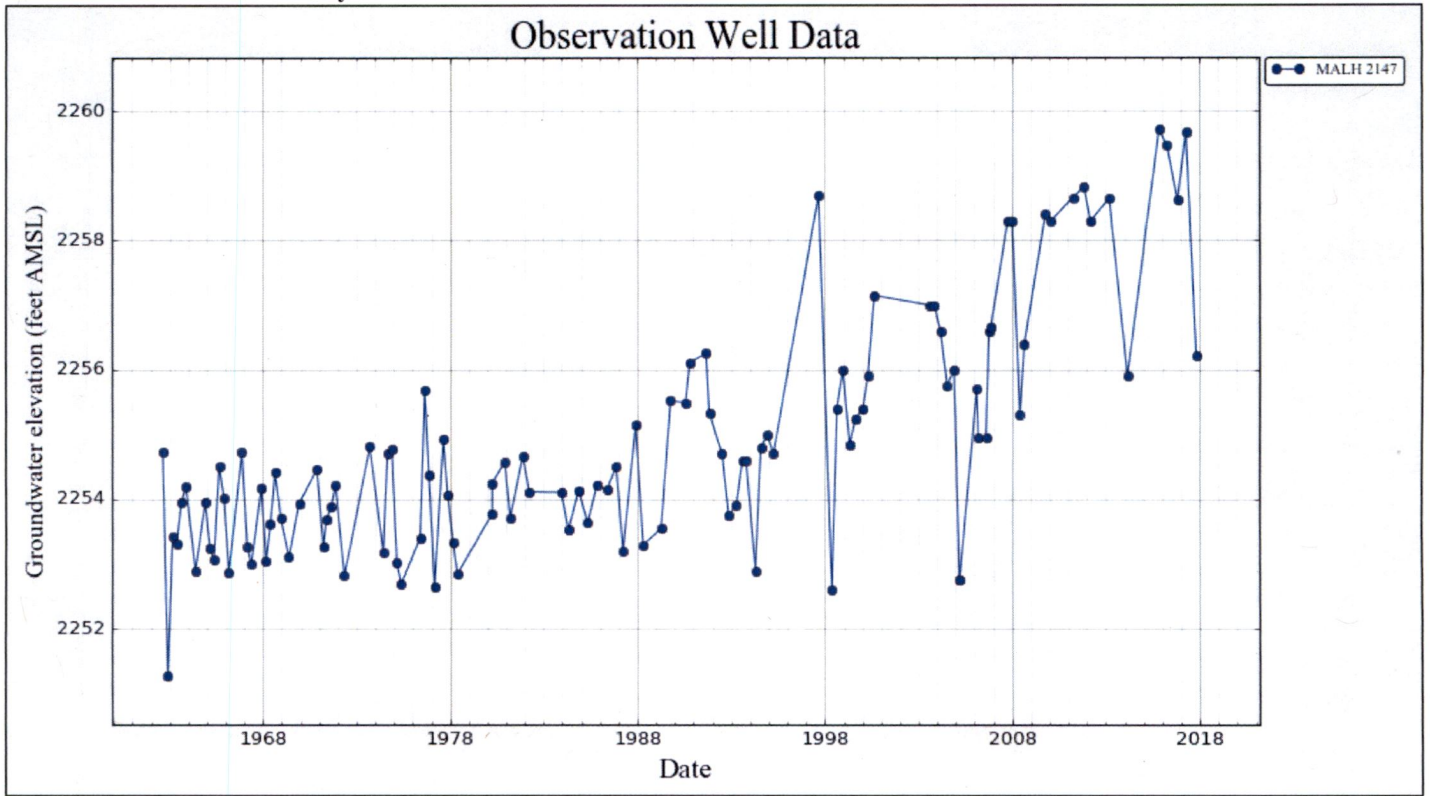
Water Availability Tables

DETAILED REPORT ON THE WATER AVAILABILITY CALCULATION						
watershed ID #: 31111001 Time: 12:50 PM		OWYHEE R > SNAKE R - AT MOUTH Basin: OWYHEE			Exceedance Level: 80 Date: 01/25/2019	
Month	Natural Stream Flow	Consumptive Use and Storage	Expected Stream Flow	Reserved Stream Flow	Instream Requirements	Net water Available
Monthly values are in cfs. Storage is the annual amount at 50% exceedance in ac-ft.						
JAN	264.00	714.00	-450.00	0.00	0.00	-450.00
FEB	636.00	1,090.00	-453.00	79.40	0.00	-532.00
MAR	736.00	1,440.00	-707.00	380.00	0.00	-1,090.00
APR	1,360.00	1,750.00	-390.00	459.00	0.00	-849.00
MAY	1,190.00	2,210.00	-1,020.00	79.20	0.00	-1,100.00
JUN	518.00	1,890.00	-1,370.00	0.00	0.00	-1,370.00
JUL	298.00	1,500.00	-1,200.00	0.00	0.00	-1,200.00
AUG	230.00	1,310.00	-1,080.00	0.00	0.00	-1,080.00
SEP	170.00	875.00	-705.00	0.00	0.00	-705.00
OCT	156.00	460.00	-304.00	0.00	0.00	-304.00
NOV	232.00	396.00	-164.00	0.00	0.00	-164.00
DEC	303.00	569.00	-266.00	0.00	0.00	-266.00
ANN	694,000	857,000	106,000	60,000	0	45,800

Well Location Map



Water-Level Trends in Nearby Wells



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

MALH
2845

(START CARD) # **45387**

20s/46e/23aa

(1) OWNER: Well Number: _____
 Name **Bill Morrison**
 Address **101 N 5th St**
 City **Nyssa** State **OR** Zip **97913**

(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 **240** ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	24	Bentonite	0	24	900 #
6"	24	240				

How was seal placed: Method A B C D E
 Other **690-210-340 (1)**
 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: 6"	+1	79	.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) **79'**

(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"/>
						<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 **5 gpm** Drawdown _____ Drill stem at **220** Time **1 hr.**

Temperature of water **72** 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 **Malheur** Latitude _____ Longitude _____
 Township **20** N or S, Range **46** E or W, WM.
 Section **23** NE 1/4 NE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) **Ivanhoe & Hwy 201**

(10) STATIC WATER LEVEL:
62 ft. below land surface. Date **9/25/92**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found **80'**

From	To	Estimated Flow Rate	SWL
80	100	2 gpm	62
100	240	5 gpm	62

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Top soil	0	20	-
Gravel	20	22	-
Claystone	22	30	-
Brown sand	30	45	-
Clay	45	47	-
Brown sand	47	54	-
Sandstone	54	60	-
Brown clay	60	65	62
Brown shale	65	66	"
Brown clay	66	75	"
Blue clay	75	80	"
Blue claystone	80	240	"

RECEIVED
OCT 23 1992
 WATER RESOURCES DEPT.
 SALEM, OREGON

Date started **9/25/92** Completed **9/25/92**

(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.
 Signed **[Signature]** WWC Number **1510** 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 **[Signature]** WWC Number **1506** Date _____