



Oregon Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem Oregon 97301-1271  
 (503) 986-0900  
 www.wrd.state.or.us

# Application for Limited Water Use License

RECEIVED

JUN 11 2020

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License No.: LL-1834

**Applicant Information**

NAME Marc Kramer		PHONE (HM)	
PHONE (WK) 4156088712	CELL 4156088712	FAX	
ADDRESS <b>5814 Mill Creek Road, The Dalles Oregon</b>			
CITY Portland Oregon	STATE CA	ZIP 97215	E-MAIL * marc@oakflatvineyards.com

**Agent Information**

NAME		PHONE	FAX
ADDRESS			CELL
CITY	STATE	ZIP	E-MAIL *

I (We) make application for a Limited License to use or store the following described surface waters or groundwater – not otherwise exempt, or to use stored water of for a use of a short-term or fixed-duration:

- SOURCE(S) OF WATER:** Well a tributary of \_\_\_\_\_
- AMOUNT OF WATER** to be diverted;  
 Maximum and instantaneous rate (cubic feet or gallons per minute): 20 gpm  
 Total volume (gallons or acre-feet): 20,000 per day (maximum) If water is to be used from more than one source, give the quantity from each: \_\_\_\_\_
- INTENDED USE(S) OF WATER:** (check all that apply)
  - Road construction or maintenance
  - General construction
  - Forestland and rangeland management; or
  - Other: provide water to establish a dry farm vineyard

4. **DESCRIPTION OF PROPOSED PROJECT:** Include a description of the place of use as shown on the accompanying site map, the method of water diversion, the type of equipment to be used (including pump horsepower, if applicable), length and dimensions of supply ditches and pipelines:

We are proposing to use subsurface irrigation and drought tolerant rootsocks to establish an 11 acre dry farm vineyard. We are requesting a limited water use to get the vineyard established and promote deep rooting (via subsurface irrigation). We expect it will take 3 to 4 years to fully establish the vineyard. Year 5 is a contingency plan in case additional subsurface irrigaton is needed. The system is 4 hp solar power pump on a 20 gpm combined with a 7500 gravity fed cistern.

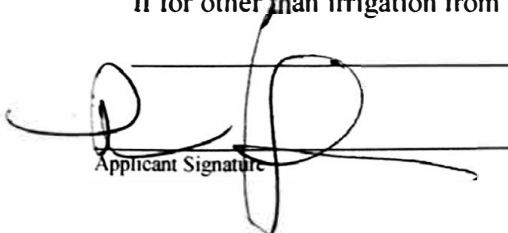
5. **PROJECT SCHEDULE:** (List day, month, and year)

Date water use will begin: 7/15/2020

Date water use will be completed: 7/14/20205

Months of the year water would be diverted and used: April - October

If for other than irrigation from stored water, how and where will water be discharged after use:

  
 Applicant Signature

**Marc G Kramer**

Print Name and title if applicable

**06-11-2020**

Date

**This page to be completed by the local Watermaster.**

**WATER AVAILABILITY STATEMENT**

Name of Applicant: Marc G Kramer Limited License Number: \_\_\_\_\_

1. To your knowledge, has the stream or basin that is the source for this application ever been regulated for prior rights?

Yes  No

If yes, please explain: *Source is groundwater. I am not aware of any issues with groundwater that would be made worse if this Limited License is approved.*

2. Based on your observations, would there be water available in the quantity and at the times needed to supply the use proposed by this application?

Yes  No

3. Do you observe this stream system during regular fieldwork?

Yes  No

If yes, what are your observations for the stream? *w/a source is groundwater*

4. If the source is a well and if WRD were to determine that there is the potential for substantial interference with nearby surface water sources, would there still be ground water and surface water available during the time requested and in the amount requested without injury to existing water rights?

Yes  No  N/A

What would you recommend for conditions on a limited license that may be issued approving this application? *I would recommend this application be reviewed by OWRD Groundwater staff.*

5. Any other recommendations you would like to make? *no*

Signature *Bob Wood* WM District #: 3 Date: 6/10/2020

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

WELL I.D. LABEL# L 122792
START CARD # 214463
ORIGINAL LOG #

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10/12/2017

(1) LAND OWNER

Owner Well I.D.
First Name MARC Last Name KRAMER
Company
Address 1704 SE 54TH AVE
City PORTLAND State OR Zip 97215

(2) TYPE OF WORK

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

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
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

[X] Domestic [ ] Irrigation [ ] Community
[ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)
Depth of Completed Well 420.00 ft.

BORE HOLE

Table with columns: Dia, From, To, Material, From, To, Amt, Sacks/lbs. Includes rows for Bentonite and Calculated values.

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

[X] Other POUR-IN

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: [ ] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes a diagram of casing sections.

Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s) 18

Temp casing [X] Yes Dia 10 From + 1 To 5

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type Material

Table with columns: Perf/Screen, Casing/Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size.

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

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

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Includes a row with values 20, 410, 1.

Temperature 62 °F Lab analysis [ ] Yes By

Water quality concerns? [ ] Yes (describe below) TDS amount 0.09 ppm

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County WASCOW Twp 1.00 N N/S Range 12.00 E E/W WM
Sec 2524 SE 1/4 of the NW 1/4 Tax Lot 3600
Tax Map Number Lot

Lat " or " DMS or DD
Long " or " DMS or DD

[X] Street address of well [ ] Nearest address

5814 MILL CRK RD, THE DALLES

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Includes rows for Existing Well / Pre-Alteration and Completed Well.

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES

Depth water was first found 325.00

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Includes a row for 10/9/2017.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Includes rows for TOP SOIL, SANDSTONE, TAN, COARSE, SANDSTONE, GRAY, COARSE, SANDSTONE, BROWN, COARSE, SANDSTONE, BROWN, CARSE.

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OCT 30 2017

SALEM, OR

Date Started 10/10/2017 Completed 10/10/2017

(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 1256 Date 10/12/2017

Signed KARL F MOORE JR (E-filed)

Contact Info (optional) WI:MA BENSON

7011

921-20-000082

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# 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

Applicant: Marc Kramer  
First Last

Mailing Address: 1704 se 54th ave  
Portland OR 97215 Daytime Phone: 4156088712  
City State Zip

## 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:
1N	12E	0	3600	01N12E000360000	A-1 Large Scale Agriculture Zone	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	agriculture
						<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:

## 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: 20 gpm  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 \_\_\_\_\_

Briefly describe:

Irrigate to establish a 10 acre dry farm Vineyard

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →



## 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): Wasco Co. LUDO 3.212.A

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

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.

Name: Lisa Johnson Title: Associate Planner  
 Signature: Lisa Johnson Phone: 541-506-2560 Date: 6.10.2020  
 Government Entity: Wasco Co.

**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: Marc Kramer  
 City or County: Wasco Co. Staff contact: Lisa Johnson  
 Signature: Lisa Johnson Phone: 541-506-2560 Date: 6.10.2020



Lisa Johnson <lisaj@co.was

OWRD

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**Scan Jun 10, 2020 at 11.02 AM**

1 message

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**Marc Kramer** <marc@oakflatvineyards.com>

Wed, Jun 10, 2020 at 11:04 AM

To: lisaj@co.wasco.or.us

Hi Lisa

Here is the land use information form for 5814 mill creek road

Best

Marc

415-608-8712



**Scan Jun 10, 2020 at 11-02 AM.pdf**

712K



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Wasco County Planning JUN 11 2020

## Transaction Receipt

921-20-000082-PLNG

IVR Number: 921062794151

2705 E. OWRD

The Dalles, OR 97058

541-506-2560

Fax: 541-506-2651

wcplanning@co.wasco.or.us

Receipt Number: 65762

Receipt Date: 6/10/20

[www.co.wasco.or.us/departments/planning/index.php](http://www.co.wasco.or.us/departments/planning/index.php)

Worksite address: 5814 MILL CREEK RD, THE DALLES, OR 97058

Parcel: 1N 12E 0 3600

### Fees Paid

Transaction date	Units	Description	Account code	Fee amount	Paid amount
6/10/20	1.00 Ea	Type I - Ministerial - Non-Structural sign-off - MNN	101.21.5124.411.154	\$90.00	\$90.00

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Payment Method:	Credit card authorization: 021961	Payer: Marc G Kramer	Payment Amount:	\$90.00
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Cashier: Lisa Johnson

Receipt Total:

\$90.00

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Transaction Code: 100620ED2-65899145-3D93-461B-  
90FE-AFEC0817A76E  
Date: 06/10/2020 02:50:32 PM  
Card Type: Visa  
Card Number: xxxxxxxxxxxx3452  
Authorization Code: 021961  
Total Amount: \$90.00  
Operator ID: LJOHNSON  
Cash Drawer ID :  
Record: 921-20-000082-PLNG

I agree to pay the above amount according to the Credit  
Card issuer agreement.

Sign Below:

-----  
*Authorized by phone*