

Checklist for Claims of Beneficial Use Received at CSG Counter

Application #:	WRD Reviewer:
Transfer #:	
Date Received:	
CWRE Name:	
Priority Date (s):	

Fees Required:

- YES NO A fee of \$200 must accompany this form for permits with priority dates of July 9, 1987, or later.
- YES NO A fee of \$200 must accompany this form for any transfers including a water right with a priority date of July 9, 1987, or later.
 Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

Fill in App or Transfer Number

Map Review:

- Map on polyester film (OAR 690-014-0170(1) & 310-0050(1)(b))
- Application & permit #; or transfer # (OAR 690-014-0100(1))
- Disclaimer (OAR 690-014-0170(5))
- North arrow (OAR 690-310-0050(2)(c))
- CWRE stamp and signature (OAR 690-014 & 310-0050)
- Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map) (014 & 310)
- Township, range, section, and tax lot numbers (OAR 690-310-0050(4))

Report Review:

- On form provided by the Department (OAR 690-014-0100(1))
- Application & permit #; or transfer # (OAR 690-014)
- Ownership information (OAR 690-014)
- Date of survey (OAR 690-014)
- Person interviewed (OAR 690-014)
- County (OAR 690-014)
- CWRE stamp and signature (OAR 690-014-0100)
- Signature(s) of all permittee of transfer holder (OAR 690-014-0100)

MONEY SLIP

DATE: _____ RECEIPT #: _____

RECEIVED FROM: _____ APPLICATION PERMIT TRANSFER

CASH CHECK # _____ OTHER (IDENTIFY) _____ TOTAL RECD \$ _____

1083 TREASURY 4178 MISC CASH ACCT.

0407 COPIES _____ \$ _____
 OTHER: (IDENTIFY) _____ \$ _____

0243 Instream Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

1083 TREASURY 4270 WRD OPERATING ACCT.

MISCELLANEOUS

0407 COPY & TAPE FEES 4611 \$ _____

0410 RESEARCH FEES \$ _____

0409 MISC REVENUE (IDENTIFY) \$ _____

TC162 DEPOSIT LIAB. (IDENTIFY) \$ _____

0240 EXTENSION OF TIME \$ _____

WATER RIGHTS

	EXAM FEE	RECORD FEE
0201 SURFACE WATER	\$ _____	0202 \$ _____
0203 GROUND WATER	\$ _____	0204 \$ _____
0205 TRANSFER	\$ _____	

WELL CONSTRUCTION

	EXAM FEE	RECORD FEE
0218 WELL DRILL CONSTRUCTOR	\$ _____	0219 \$ _____
LANDOWNER'S PERMIT	\$ _____	0220 \$ _____
OTHER (IDENTIFY)	\$ _____	\$ <u>200.00</u>

0607 TREASURY 0487 HYDROELECTRIC

0233 POWER LICENSE FEE (FWWRD) _____ LIC NUMBER _____ \$ _____

0231 HYDRO LICENSE FEE (FWWRD) _____ \$ _____

HYDRO APPLICATION _____ \$ _____

SPECIAL INSTRUCTIONS:

RETURN TO APPLICANT -- LETTER ATTACHED

Groundwater File Review:

- Pump Test not required (Priority Date prior to December 20, 1988) *If no, include pump test flyer w/acknowledgment letter
- Pump Test required (Priority Date on or after December 20, 1988)
- Pump Test submitted
- Pump Test not submitted

**CLAIM OF
BENEFICIAL USE
for Groundwater Permits
claiming more than 0.1 cfs**



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.oregon.gov/OWRD

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A fee of \$200 must accompany this form for permits
with priority dates of July 9, 1987, or later.

**SECTION 1
GENERAL INFORMATION**

1. File Information:

APPLICATION # G-17954	PERMIT # (IF APPLICABLE) G-17479	PERMIT AMENDMENT # (IF APPLICABLE) T-NA
---------------------------------	--	---

2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Krautmann Family Nursery LLC		PHONE NO.	ADDITIONAL CONTACT NO.	
ADDRESS 4194 71th Ave SE				
CITY Salem	STATE OR	ZIP 97317	E-MAIL	

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. *Each permit holder of record must sign this form.*

3. Permit holder of record (this may, or may not, be the current property owner):

PERMIT HOLDER OF RECORD Mark Krautmann and Heritage Seedling Inc.				
ADDRESS 4194 71st Ave SE				
CITY Salem	STATE OR	ZIP 97317		

ADDITIONAL PERMIT HOLDER OF RECORD NA				
ADDRESS				
CITY	STATE	ZIP		

4. Date of Site Inspection:

March 4, 2020
August 11, 2020

5. Person(s) interviewed and description of their association with the project:

NAME	DATE	ASSOCIATION WITH THE PROJECT
Lynda Boyer	March 4, 2020 August 11, 2020	Native Plant Manager

6. County

Marion

7. If any property described in the place of use of the permit is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

OWNER OF RECORD		
NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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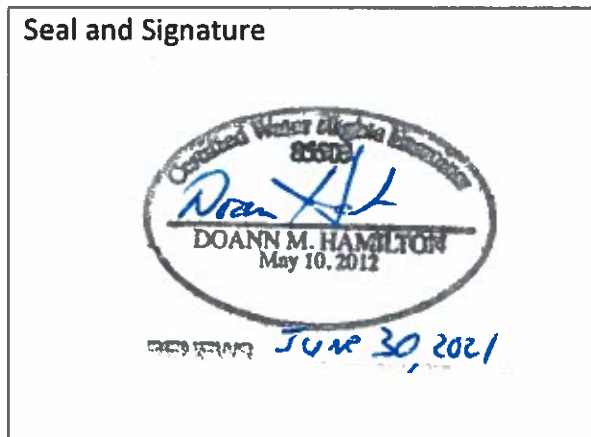
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SECTION 2
SIGNATURES

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CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.



CWRE NAME Doann Hamilton		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946
ADDRESS 18487 S. Valley Vista Road			
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.com

Permit Holder of Record Signature or Acknowledgement

Each permit holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
<i>Heritage Seed Co, Inc by Mark Krautman, Pres</i>	<i>Heritage Seed Co, Inc by Mark Krautman</i>	<i>President</i>	<i>Nov 10 '20</i>

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**SECTION 3
CLAIM DESCRIPTION**

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1. Point of appropriation name or number:

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well	MARI 9910, 9911, 58887, and 59310	L-75019

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

2. Point of appropriation source, if indicated on permit:

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
Well	Little Pudding River Basin	Molalla River

3. Developed use(s), period of use, and rate for each use:

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
Well	Nursery	NA	Year round	0.89 cfs
Total Quantity of Water Used				0.89 cfs

5. Variations:

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below. YES

(e.g. "The permit allowed three points of appropriation. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

1. After field verifying the location of crops being irrigated, the place of use was reduced from the originally authorized acreage.

Original authorized place of use:

8S	2W	1	SWSW	DLC 41	1.3
8S	2W	2	NW SE	DLC 41	0.4
8S	2W	2	SW SE	DLC 41	12.2
8S	2W	2	SE SE	DLC 41	20.3
8S	2W	11	NENE	DLC 41	22.5
8S	2W	11	NWNE	DLC 41	1.2
8S	2W	11	SWNE	DLC 41	11.4
8S	2W	11	SENE	DLC 41	5.7
8S	2W	11	NWNE	DLC 41	1.1
8S	2W	12	NWNW	DLC 41	17.8
8S	2W	12	SWNW	DLC 41	6.6

Total: 100.5

Revised place of use:

8S	2W	1	SWSW	DLC 41	1.3
8S	2W	2	NW SE	DLC 41	0.4
8S	2W	2	SW SE	DLC 41	12.2
8S	2W	2	SE SE	DLC 41	20.3
8S	2W	11	NENE	DLC 41	22.5
8S	2W	11	NWNE	DLC 41	1.2
8S	2W	11	SWNE	DLC 41	11.4
8S	2W	11	SE NE	DLC 41	1.8
8S	2W	11	NWNE	DLC 41	1.1
8S	2W	12	NWNW	DLC 41	17.8
8S	2W	12	SWNW	DLC 41	6.6

Total: 96.6

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6. Claim Summary:

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well	1.10 cfs	0.89 cfs	Not measured	Nursery	100.5	96.6

**SECTION 4
SYSTEM DESCRIPTION**

Are there multiple POAs?

NO

If "YES" you will need to copy and complete a separate Section 4 for each POA.

POA Name or Number this section describes (only needed if there is more than one):

Well

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A. Place of Use

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1. Is the right for municipal use?

NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
8S	2W	WM	1	SWSW	NA	41	Nursery	1.3	NA
8S	2W	WM	2	NWSE	NA	41	Nursery	0.4	NA
8S	2W	WM	2	SWSE	NA	41	Nursery	12.2	NA
8S	2W	WM	2	SESE	NA	41	Nursery	20.3	NA
8S	2W	WM	11	NENE	NA	41	Nursery	22.5	NA
8S	2W	WM	11	NWNE	NA	41	Nursery	1.2	NA
8S	2W	WM	11	SWNE	NA	41	Nursery	11.4	NA
8S	2W	WM	11	SE NE	NA	41	Nursery	1.8	NA
8S	2W	WM	11	NWSE	NA	41	Nursery	1.1	NA
8S	2W	WM	12	NWNW	NA	41	Nursery	17.8	NA
8S	2W	WM	12	SWNW	NA	41	Nursery	6.6	NA
Total Acres Irrigated								96.6	NA

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (GLot), Quarter Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, GLot, and QQ.

B. Groundwater Source Information (Well)

1. Is the appropriation from a well?

YES

If "NO", items 2 through 4 relating to this section may be deleted.

2. Describe the access port (type and location) or other means to measure the water level in the well:

½" port on the south side of the sanitary seal.

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See Well Log MARI 9910, 9911, 58887, and 59310						

4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

See Well Log MARI 9910, 9911, 58887, and 59310

C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)?

NO

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If "NO", items 2 through 4 relating to this section may be deleted.

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Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

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D. Diversion and Delivery System Information

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport and apply the water from the point of appropriation to the place of use.

1. Is a pump used?

YES

If "NO" items 2 through item 6 may be deleted.

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Berkley	6T20225	8051009	Submersible	Unknown	4 inch

3. Motor Information:

MANUFACTURER	HORSEPOWER
Franklin	20 Hp

4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
20 Hp	45 psi	44 feet (from permit condition pump test)	0 feet	0.89 cfs

5. Provide pump calculations:

$$Q \text{ Pump} = \frac{(20 \text{ Hp}) \times (7.04 \text{ ft}^3/\text{sec Hp})}{(44 \text{ ft lift} + 114.3 \text{ ft pressure head})} = 0.89 \text{ cfs}$$

6. Measured Pump Capacity (using meter if meter was present and system was operating):

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not Running during site visit			

Reminder: For pump calculations use the reference information at the end of this document.

7. Is the distribution system piped?

YES

If "NO" items 8 through item 13 may be deleted.

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
8 inch	2,870 feet	PVC	Buried
6 inch	8,580 feet	PVC	Buried
4 inch	4,740 feet	PVC	Buried
4 inch	25 feet	Steel pipe	Above ground

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 inch	4,740 feet	PVC	Buried
2 inch – Lay flat hose	720,000 feet	Vinyl hose	Above

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
Nelson Purple 3/32"	50 psi	1.8 gpm	200	104	0.42 cfs
Rainbird impact 3/32"	50 psi	3.8 gpm	200	104	0.88 cfs

Reminder: For sprinkler output determination use the reference information at the end of this document.

11. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
NA					

12. Drip Tape Information:

DRIPPER SPACING IN INCHES	GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	ADDITIONAL INFORMATION
T-tape 5/8 5C-12-34C	0.567 gpm / 100 feet	15,675 feet / acre	7,000 feet / acres	39.69 gpm/acre x 10.0 acres = 396.9 gpm or 0.88 cfs	
			7,000 feet /acre x 0.567 gpm / 100 feet= 39.69 gpm / acre Note: max acres IR at one time is 10.0 acres		

13. Pivot Information:

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NA				

SECTION 5 CONDITIONS

All conditions contained in the permit, permit amendment, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

1. Time Limits:

Permits and extension final orders contain any or all of the following dates: the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use was to be completed. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or permit extension order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	August 26, 2015		
BEGIN CONSTRUCTION (A)	NA	NA	NA
COMPLETE CONSTRUCTION (B)	August 26, 2020	July 2020	Water system completed, meter installed, and water put to use
COMPLETE APPLICATION OF WATER (C)	August 26, 2020	July 2020	All permit conditions were completed and the water was put to full use.

* MUST BE WITHIN PERIOD BETWEEN PERMIT, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

2. Is there an extension final order(s)?

NO

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If "NO", items a and b relating to this section may be deleted.

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3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement?

YES

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If "NO", items b through d relating to this section may be deleted.

b. What month was the initial measurement to be taken in?

March

c. Was the measurement submitted to the Department?

YES

d. If the initial measurement was not submitted, provide that measurement now, if available:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements?

YES

If "NO", items b through e relating to this section may be deleted.

b. Provide the month, or months, the static water level measurement(s) were to be made:

March

c. Were the static water level measurements taken in the month(s) required? YES

d. If "YES", were those measurements submitted to the Department? YES

e. If the annual measurements were not submitted, provide the measurements now:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

5. Pump Test:

a. Did the permit require the submittal of a pump test? YES

Ground water permits with priority dates on or after December 20, 1988, require the submittal of a pump test prior to issuance of a certificate. In some cases, the permit holder may qualify for a multiple well exemption or an unreasonable burden exemption.

For additional information regarding pump tests see:

<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

If "NO", items b through e relating to this section may be deleted.

b. Has the pump test been previously submitted to the Department? NO

c. Is the pump test attached to this claim? YES

d. Has the pump test been approved by the Department? NO

e. Has a pump test exemption been approved by the Department? NO

** Claims will not be reviewed until a pump test or exemption has been approved by the Department

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6. Measurement Conditions:

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? YES

If "NO", items b through f relating to this section may be deleted.

Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion or appropriation.

b. Has a meter been installed? YES

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well	McCrometer	05-08224-4	Working	84,659,500 gallons March 4, 2020 88,043,000 gallons August 11, 2020	October 12, 2005

If a meter has been installed, items d through f relating to this section may be deleted.

7. Recording and reporting conditions:

a. Is the water user required to report the water use to the Department? YES

If "NO", item b relating to this section may be deleted.

b. Have the reports been submitted? YES

If the reports have not been submitted, attach a copy of the reports if available.

8. Other conditions required by permit, permit amendment final order, or extension final order:

a. Were there special well construction standards? NO

b. Was submittal of a ground water monitoring plan required? NO

c. Was submittal of a water management and conservation plan required? NO

d. Was a Well Identification Number (Well ID tag) assigned and attached to the well? YES

WELL ID #	DATE ATTACHED TO WELL
L-75019	March 2005

e. Other conditions? YES

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

e1) Condition:

The wells shall production shall be limited to a single aquifer within the Columbia River Basalt Group.

Compliance:

Per email from Travis Brown, OWRD, the well construction complies. Dated January 3, 2020.

e2) Condition:

If the riparian area is disturbed in the process of developing a point of appropriation, the permittee shall be responsible for restoration and enhancement of such riparian area in accordance with ODFW's Fish and Wildlife Habitat Mitigation Policy OAR 635-415. For purposes of mitigation, the ODFW Fish and Wildlife Habitat Mitigation Goals and Standards, OAR 635-415, shall be followed.

Compliance:

Well (MARI 9910, 9911, 58887, 59310) was drilled approximately 100 feet from nearest creek to the east and therefore no riparian area was disturbed.

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SECTION 6
ATTACHMENTS

Provide a list of any additional documents you are attaching to this report:

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	Claim of Beneficial Use Map
State Water Well Report – MARI 9910	Well log and driller’s notes for MARI 9910 – Well 1
State Water Well Report – MARI 9911	Well log and driller’s notes for MARI 9911 – deepening of Well 1 (MARI 9910) to 129 feet
State Water Well Report – MARI 58887	Well log and driller’s notes for MARI 58887 – deepening of Well 1 (MARI 9911) to 204 feet
State Water Well Report – MARI 59310	Well log and driller’s notes for MARI 559310 – alteration of Well 1 (MARI 58887) install perforations from 90 to 101 feet
BLM Cadastral Map	BLM Cadastral Map T.8S. R.2W. showing DLC and Government Lot locations
Pump Test Form Cover Sheet and Pump Test Data Sheet	Pumping Test Results for Well 1 (MARI 9911) conducted April 27, 2020
Email from Travis Brown, OWRD	Email from Travis Brown, OWRD, dated January 3, 2020, well complies.

SECTION 7

CLAIM OF BENEFICIAL USE MAP

The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on poly film at a scale of 1" = 1320 feet, 1" = 400 feet, or the original full-size scale of the county assessor map for the location.

Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

The COBU map was prepared using tax assessor’s maps 08 2W 01, 2D, 11A, and 12, overlain by a 2014 aerial photo titled USDA-FSA-APFO NAIP County Mosaic and obtained online from the Natural Resources Conservation Service. Image Metadata:
<http://datagateway.nrcs.usda.gov/Catalog/ProductDescription/NAIPM.html>

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Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

(Reminder: Incomplete maps and/or claims may be returned.)

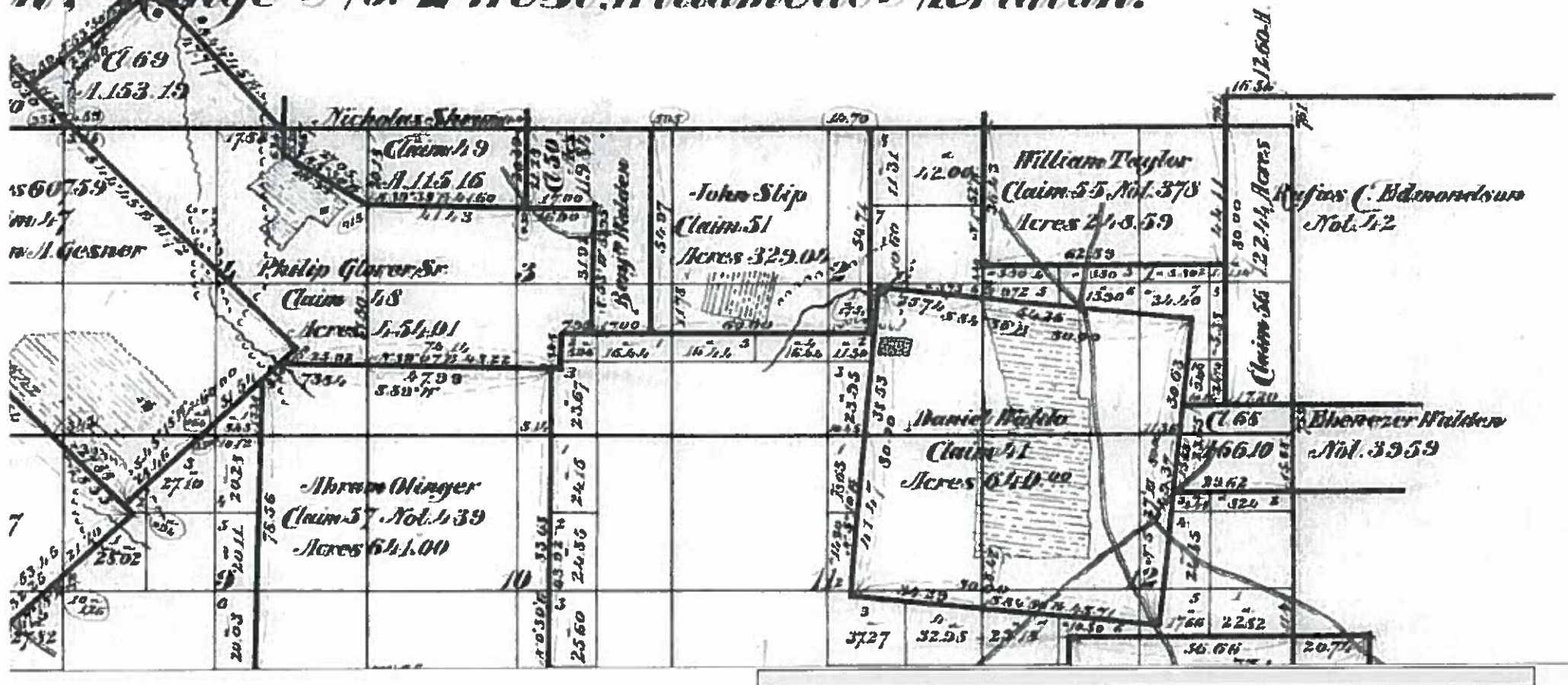
- Map on polyester film
- Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- Township, Range, Section, Donation Land Claims, and Government Lots
- If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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Range No. 2 West, Tullamette Meridian.



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Oregon Water Resources Department
PUMP TEST FORM COVER SHEET

1 of 2

Well Owner: Heritage Seedlings Inc
 Name: Mark and Jilly Krautmann
 Address: 4194 71st Ave SE
 County: Marion
 City: Salem State: OR Zip: 97317
Well Location:
 Township: W (N/S) Range: 2 (E/W)
 Section: 11A12 1/4: _____ 1/16: _____ 1/64: _____
 Well depth: 204 Date drilled: 3/25/2005
 Original owner (from well log): Lloyd M Hill Owners well no. (if any): _____
 POD ID: MAR 59310/L-75014

Water Right Information:
 Application: G-17479 Permit: G-17479 Certificate: _____
 Is this well listed on more than one water right? Yes If yes, list additional water rights below:
 Application: _____ Permit: _____ Certificate: _____
 Application: _____ Permit: _____ Certificate: _____

Pump Test:
 Test Conducted by: Joe Spraver (Employee) Well Owner? Yes
 Company: Heritage Seedlings & Livestock
 Address: 4194 71st Ave SE Date of Test: 4-27-20
 City: Salem State: OR Zip: 97317
 Daytime phone: 503-932-1063

Method of discharge measurement (see our brochure for acceptable methods): Flow Meter
 Method of water-level measurement (pick one or enter other method used): electronic measuring tape
 Length of air line (if used): _____

Pump type (pick one or enter other method used): submersible
 Was the pump test conducted during normal use of the well? Yes Note: _____

Are you aware of any wells, other than domestic or stock wells, pumping within 1000 feet of the tested well during the test or within 24 hours prior to the test? Yes Note: NO
 If yes, give approximate distances to each and approximate pumping rate of each. If possible, indicate if they were turned on or off during the test: _____

Is there a lake, stream or other surface water body within 1/4 mile of the tested well? Yes If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head. Approx. distance: 100 ft Approx. elevation difference: 10' Lake ft
 Well elevation is 0 surface water body. 20

Description of measuring point (e.g. top port of 1 inch port pipe, west side) Top of well plate
 Measuring point distance + 1" land surface 0 feet.

Static water level measurements: (A minimum of three measurements are required in the hour before pumping begins at no less than 20 minutes apart):

Time	Depth to water below meas. point	Depth to water below land surface
<u>9:00</u>	<u>5'</u>	<u>4'</u>
<u>9:20</u>	<u>5'</u>	<u>4'</u>
<u>9:40</u>	<u>5'</u>	<u>4'</u>

Discharge measurements: (A discharge measurement is required at the start of pumping and at least once an hour during the test; additional measurements should be noted on the Pump Test Data Sheet):

Time	Discharge Rate	Discharge Units (e.g. gpm, cfs, etc)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

See next page

Time pump turned on: _____ Date _____ Time _____
 Time pump turned off: _____ Date _____ Time _____
 Total pumping time: _____ hours _____ minutes

Note: Well must be idle for at least 16 hours prior to the test.
 Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

OWRD 2/9/2000

Required Signature: Joseph J Spraver

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Oregon Water Resources Department
PUMP TEST DATA SHEET

Page 2 of 2

Application: G-17954 Permit: G-174709 Certificate: _____ Pod Id: _____

All water-level measurements must either be in feet and inches, or feet and decimal fractions.

Drawdown Data

Recovery Data

Date	Time	Time Since Pump Started (minutes)	Depth to Water Below Measuring Pt	Depth to Water Below Land Surface	Comments	Date	Time	Time Since Pump Stopped (minutes)	Depth to Water Below Measuring Pt	Depth to Water Below Land Surface	Comments
4-27-20	9:40	0	5'	4"	Flow	4-27-20	1:45	0	45	44	
	9:42	2	30		210		1:47	2	18	17	
	9:44	4	31		210		1:49	4	15	14	
	9:46	6	32				1:51	6	14.5	13.5	
	9:48	8	32				1:53	8	14	13	
	9:50	10	33				1:55	10	13	12	
	9:55	15	35				2:00	15	12.3	11.3	
	10:00	20	36		200		2:10	20	11.5	10.5	
	10:05	25	37				2:20	25	10.7	9.7	RECEIVED
	10:10	30	38				2:25	30	10.1	9.1	
	10:15	35	38				2:30	35	9.7	8.7	NOV 20 2020
	10:20	40	39				2:35	40	9.5	8.5	
	10:25	45	40				2:50	55	9.3	8.3	
	10:30	50	41				3:05	70	9	8	OWRD
	10:45	65	42				3:20	85	8.8	7.8	
	11:00	80	43		200		3:35	100	8.1	7.1	
	11:15	95	43.5				3:50	115	7	7	
	11:30	110	44				4:05	130	7.7	6.7	
	11:45	125	44.5				4:20	145	7.5	6.5	
	12:00	140	44.5		200		4:35	160	7.3	6.3	
	12:15	155	44.5				4:50	175	7	6	
	12:30	170	44.8				5:05	190	6.8	5.8	
	12:45	185	44.8				5:20	205	6.6	5.6	
	13:00	200	44.9		200		5:35	220	6.0	5.5	
	13:15	215	44.9				5:50	235	6	5	
	13:30	230	44.8				6:05	250	6	5	
	14:5	245	45		200						

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JUN 15 1960

MIRI... 9910

8/2w-11A

File Original and First Copy with the STATE ENGINEER, SALEM, OREGON

STATE ENGINEER WATER WELL REPORT SALEM, OREGON STATE OF OREGON

State Well No. State Permit No.

(1) OWNER:

Name Lloyd M. Hill, Inc. Address R.T. 5 Box 751H SALEM, ORE.

(2) LOCATION OF WELL:

County MARION Owner's number, if any - 1/4 Section T. R. W.M. Bearing and distance from section or subdivision corner see attached sheet.

(3) TYPE OF WORK (check):

New Well [X] Deepening [] Reconditioning [] Abandon [] If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic [] Industrial [] Municipal [] Irrigation [X] Test Well [] Other []

(5) TYPE OF WELL:

Rotary [] Cable [X] Dug [] Driven [] Jetted [] Bored []

(6) CASING INSTALLED:

Threaded [] Welded [X] 8" Diam. from 1 ft. to 37 ft. Gage STD.

(7) PERFORATIONS:

Perforated? [] Yes [X] No [] Type of perforator used SIZE of perforations in. by in. perforations from ft. to ft.

(8) SCREENS:

Well screen installed [] Yes [X] No [] Manufacturer's Name Type Model No. Slot size Set from ft. to ft.

(9) CONSTRUCTION:

Was well gravel packed? [] Yes [X] No [] Size of gravel: Gravel placed from ft. to ft. Was a water seal provided? [X] Yes [] No [] To what depth? 11 ft. Material used in seal- Did any strata contain unusable water? [] Yes [X] No [] Type of water? Depth of strata Method of sealing strata off

(10) WATER LEVELS:

4 FT. ABOVE SURFACE Static level ft. below land surface Date APRIL 15 Artesian pressure 0 lbs. per square inch Date

Log Accepted by: Lloyd M. Hill, Inc. (Owner) Date APRIL 15, 1960

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level Was a pump test made? [X] Yes [] No If yes, by whom? -STETTLER Yield: 120 gal./min. with 47 ft. drawdown after 2 1/2 hrs.

(12) WELL LOG:

Diameter of well 8 inches. Depth drilled 62 ft. Depth of completed well 62 ft. Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

Table with columns MATERIAL, FROM, TO. Rows: SHALE - YELLOW (1-21), BROWN (21-33), BLACK (33-37), BROWN (37-55), SANDSTONE (55-62)

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Work started MARCH 7 1960 Completed MARCH 15 1960

(13) PUMP:

Manufacturer's Name Type: H.P.

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME H.P. Miller (Person, firm, or corporation) (Type or print)

Address R.T. 5 - Box 112A

Driller's well number

[Signed] Hamilton R. Miller (Well Driller)

License No. 311 Date APRIL 15, 1960

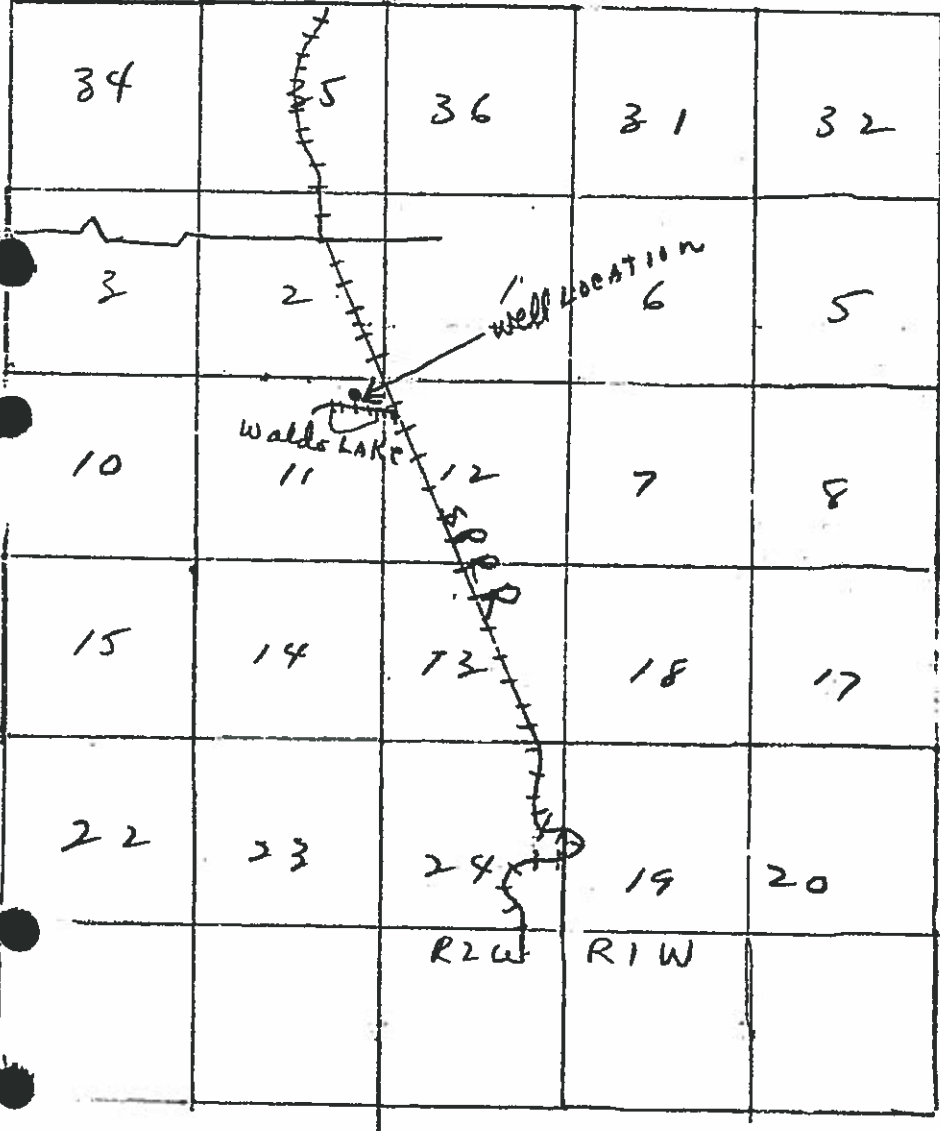
Lloyd M. Hill

B/2w-11 A
Marion

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JUN 15 1960
STATE ENGINEER
SALMON DIVISION

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SALMON DIVISION



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The Original and First Copy with the STATE ENGINEER, SALEM, OREGON

WATER WELL REPORT
STATE OF OREGON

MARION 994

State Well No. 812W/1A(1)
State Permit No. _____

(1) OWNER:

Name RICHARD R. MILL
Address 8289 JARDEN S.E.

(2) LOCATION OF WELL:

County MARION Owner's number, if any--
1/4 Section N.E. 1/4 83 R. 2 W.M.
Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 11.

PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(6) CASING INSTALLED:

Threaded Welded

8" Diam. from _____ ft. to _____ ft. Gage _____
8" Diam. from 37 ft. to 62 ft. Gage 125
" Diam. from _____ ft. to _____ ft. Gage _____

(7) PERFORATIONS:

Perforated? Yes No

Type of perforator used _____
SIZE of perforations in. by in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(8) SCREENS:

Well screen installed Yes No

Manufacturer's Name _____
Type _____ Model No. _____
Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:

Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.
Was a surface seal provided? Yes No To what depth? _____ ft.
Material used in seal _____
Did any strata contain unusable water? Yes No
Type of water? _____ Depth of strata _____
Method of scaling strata off _____

(10) WATER LEVELS:

Static level +1 ft. below land surface Date 8/1/65
Artesian pressure _____ lbs. per square inch Date _____

Log Accepted by: _____

{Signed} _____ Date _____, 19____
(Owner)

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? - STETTER
Yield: 500 gal./min. with 60 ft. drawdown after 4 hrs.

Baller test gal./min. with _____ ft. drawdown after _____ hrs.

Artesian flow _____ g.p.m. Date _____

Temperature of water _____ Was a chemical analysis made? Yes No

(12) WELL LOG:

FROM 62 to 129 inches.

Depth drilled 129 ft. Depth of completed well 129 ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
BASALT ROCK	62	84
RED CLAY STONE	84	90
BASALT ROCK	90	110
BROKEN BASALT ROCK	110	114
BASALT ROCK	114	129

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Work started 7/12 1962 Completed 7/14 1962

(13) PUMP:

Manufacturer's Name _____
Type: _____ H.P. _____

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME H. R. MILLER (Type or print)

Address 5545 JOSEPH ST. S.E.

Driller's well number 9946

{Signed} Richard R. Miller (Well Driller)

License No. 37 Date 8/1/65, 19____

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

Mack Drilling Company, Inc.
PO Box 12067
Salem, OR 97309

WELL I.D. # L 75019 (page one of two)

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START CARD # 172809

NOV 20 2020

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number 75019
Name Mark Krautman
Address 4199 75th Ave SE
City Salem State OR Zip 97301

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 204 ft.
Explosives used: Yes No Type Amount

BORE HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds	
1.5' to 6'	0	20	concrete	0	20	4 yards	
12	20	101	cement	0	20	7 sacks	
8	101	204	bentonite	20	50	33 sacks	
			cement	70	90	9 sacks	

How was seal placed: Method A B C D E
 Other poured & probed concrete tremied in
Backfill placed from 50 ft. to 70 ft. Material Bentonite 22 sacks
Gravel placed from 90 ft. to 101 ft. Size of gravel 1" round

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12	0	20	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	+2	101	.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"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 101

(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"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
400		140	2 hours

Temperature of water 55 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 (legal description)
County Marion
Tax Lot Lot
Township 8 S Range 2 W WM
Section 11A NW 1/4 NE 1/4

Lat " or (degrees or decimal)
Long " or (degrees or decimal)

Street Address of Well (or nearest address) Corner of Harpole St & 82nd SE, Salem, OR 97301, next to & north of Waldo Lake

(10) STATIC WATER LEVEL
4 ft. below land surface. Date 03-25-05
ft. below land surface. Date
Artesian pressure lb. per square inch Date

(11) WATER BEARING ZONES
Depth at which water was first found 4

From	To	Estimated Flow Rate	SWL
90	204	500	4

(12) WELL LOG Ground Elevation

Material	From	To	SWL
See MARI 9910 & 9911			
Pulled out 11' of 10" casing.			
Pulled out 62' of 8" casing w/shoe			
Eroded out bore hole from 3' to 14'. Drilled down w/17" bit then concreted in 12" pipe to fill void in upper bore hole.			
No change in SWL after rebuilding the well			
Basalt gray hard	129	137	4
Basalt blk	137	144	4
Basalt gray	144	156	4
Basalt gray frx	156	158	4
continued on page two			

Date Started 03-21-05 Completed 03-25-05

(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.
WWC Number 1394 Date 03-25-05
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.
WWC Number 1394 Date 03-25-05
Signed

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

Mack Drilling Company, Inc.
PO Box 12067
Salem, OR 97309

WELL I.D. # L Original 75019

START CARD # 180501

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Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number Original 75019
Name Mark Krautman
Address 4199 75th Ave SE
City Salem State OR Zip 97301

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other _____

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION Special Construction Yes No
Depth of Completed Well 204 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
8	0	204	Existing didn't disturb			

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 _____

Casing/Liner	Diameter	From	To	Gauge	SEAL			
					Steel	Plastic	Welded	Threaded
Casing:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS
 Perforations Method Holte Air Rotary
 Screens Type Slots Material Steel

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
90	101	1/4	416	1 1/4		<input checked="" 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
300	72		1 hr

Temperature of water 51 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Yes No
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL (legal description)
County Marion
Tax Lot 600 Lot _____
Township 8 S Range 2 W WM
Section 11A NE 1/4 NE 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) Corner of Harpole St & 82nd SE
Next to and North of Waldo Lake, Salem, OR 97301

(10) STATIC WATER LEVEL
8 ft. below land surface. Date 10-14-05
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 8

From	To	Estimated Flow Rate	SWL
<u>90</u>	<u>204</u>	<u>350</u>	<u>8</u>

(12) WELL LOG Ground Elevation _____
Material From To SWL
SEE "MARI 75019"
Well was rebuilt 03-21-05 to 03-25-05. At that time the bore-hole was questionable to stability around the bottom portion that was cased off.
We gravel packed in case the water from that zone would be needed. We later found out we needed to perforate to increase the yield.
SWL of all zone are the same. Based on information obtained over the last 2 years
Date Started 10-14-05 Completed 10-14-05

(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.

WWC Number 1394 Date 10-21-05
Signed Eugene T. Ulmer

(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.

WWC Number 1394 Date 10-21-05
Signed Eugene T. Ulmer

OCT 31 2005

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WATER RESOURCES DEPT
SALEM, OREGON



Doann Hamilton <phgdmh@gmail.com>

Well Compliance question App G-17954, Permit G-17479

BROWN Travis C * WRD <Travis.C.Brown@oregon.gov>

Fri, Jan 3, 2020 at 2:26 PM

To: Doann Hamilton <phgdmh@gmail.com>

Cc: JEFFERY Joel W * WRD <Joel.W.Jeffery@oregon.gov>, BOUCHIER Aurora C * WRD <Aurora.C.Bouchier@oregon.gov>

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Hi Doann,

Based on the reported well construction and the groundwater review for Application G-17954, MARI 9910/9911/58887/59310 appears to comply with the following conditions from Permit G-17479:

- "Groundwater production in the well shall be limited to a single aquifer within the Columbia River Basalt Group."
- "The source of water for this permit shall be the water-bearing zones in the Columbia River Basalt Group that occur in a well (MARI 9910/L75019) between depths of 90 and 204 feet. The well shall not be deepened or altered such that water is produced from other aquifers in the Columbia River Basalt Group."

Regarding the comment cited in your email, that appears to actually have come from Section 3 of Application G-17954, not from the groundwater review. However, in Section A4 of the groundwater review, it does state: "The well construction video log was reviewed by Karl Wozniak, as the application reports, and borehole flow was not detected." I have not found any other written documentation of the video log or Karl's conclusion regarding MARI 9910/9911/58887/59310 in either the water right file or the well file.

I hope this adequately addresses your questions. Please let me know if I can be of further assistance.

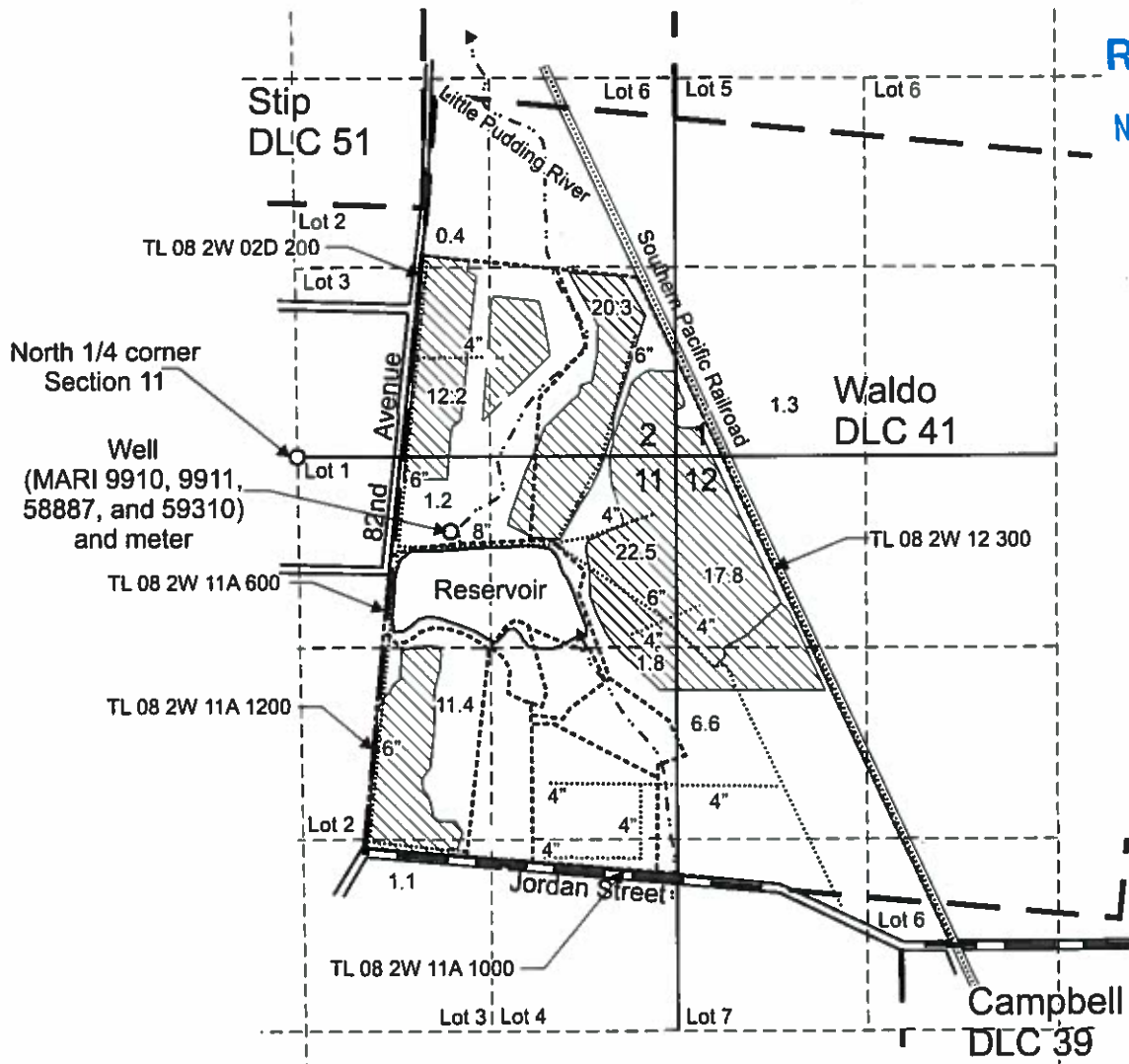
Regards,

Travis Brown, RG | Hydrogeologist – Groundwater Section

Email: Travis.C.Brown@oregon.gov | Phone: 503-986-0843 | Fax: 503-986-0902




T.8S. R.2W. Sec. 1, 2, 11, & 12, W.M.

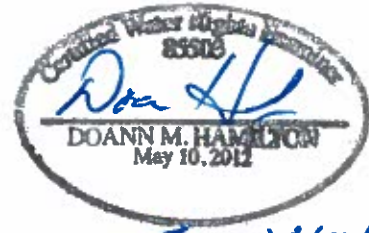
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Well (MARI 9910, 9911, 58887, and 59310) is located 650 feet south and 1,040 feet east from the N 1/4 corner, Section 11.

 Area (96.6 Acres) irrigated under Application G-17954, Permit G-17479.

-  Tax lot boundary
-  Donation Land Claim boundary
-  Mainlines



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This map was prepared for the purpose of identifying the location of a water right only and is not intended to provide legal dimensions or location of property ownership lines.

Scale: 1" = 1,320'



0 1,320 Feet

Claim of Beneficial Use Map
 Application G-17954, Permit G-17479

Pacific Hydro-Geology Inc.

Heritage Seedling
 T.8S. R.2W. Sec. 1, 2, 11, & 12, W.M.

11/2020