MONEY SLIP

DAT	E: 9-13.2021 F	RECEIPT #: /	36393	
RECEIV	ED FROM: City of	Banks	APPLICATION PERMIT TRANSFER	G-8476
CASH	X 29212		TOTAL REC'D	\$ 230.00
1083 TI	REASURY 4170 MISC	C CASH ACCT.		
0407	COPIES OTHER: (IDENTIFY)			\$
	stream Lease 0244 Mur			ons. Water
1083 TI		O OPERATING ACCT.		
0407 0410 0408 TC162 0240	COPY & TAPE FEES RESEARCH FEES MISC REVENUE (IDENTIFY) DEPOSIT LIAB. (IDENTIFY) EXTENSION OF TIME WATER RIGHTS	EXAM FEE	0000	\$ \$ \$ \$ \$ RECORD FEE
0201 0203 0205	SURFACE WATER GROUND WATER TRANSFER \$		0202 0204	\$
	WELL CONSTRUCTION WELL DRILL CONSTRUCTOR \$ LANDOWNER'S PERMIT OTHER (IDENTIFY)	COBU	0219 0220	RECORD FEE \$ \$
0607 TF	EASURY 0467 HYD	ROELECTRIC		
0233 0231	POWER LICENSE FEE (FW/WRD)		LIC NUMBER	\$
	HYDRO APPLICATION			\$

SPECIAL INSTRUCTIONS:

MONEY SLIP

DAT	E:9-3.2021	RECEIPT #: /	36339	
	ED FROM Mouh	0,	APPLICATION	
	- /) 46	TRANSFER	T 2 6 1
04011	OUTOW #		THANSPER	T-13814
CASH	CHECK # 4/03 A	OTHER (IDENTIFY)		10 / 01/0
	41-10011		TOTAL REC'D	\$ 1,840.00
1083 T	REASURY 4170 M	MISC CASH ACCT.		
0407	COPIES			\$
	OTHER: (IDENTIFY)			\$
	nstream Lease 0244			ons. Water
1083 T	REASURY 4270 V	WRD OPERATING ACCT		
0407	MISCELL ANEOUS COPY & TAPE FEES	46110		\$.
0410	RESEARCH FEES			\$
0408 TC162	MISC REVENUE (IDENTIFY) DEPOSIT LIAB. (IDENTIFY)		-	\$
0240	EXTENSION OF TIME			\$
	WATER RIGHTS	EXAM FEE		RECORD FEE
0201	SURFACE WATER	\$	0202	\$
0203	GROUND WATER	\$	0204	\$
0205	TRANSFER	\$ 1840		
	WELL CONSTRUCTION	EXAM FEE		RECORD FEE
0218	WELL DRILL CONSTRUCTOR	\$	0219	\$
	LANDOWNER'S PERMIT		0220	\$
-	OTHER (IDENTIFY)	- Jack Committee		~ 10 E
0607 TF	REASURY 0467 H	HYDROELECTRIC		
0000	DOWER HOENER FEE	100	LIC NUMBER	
0233	POWER LICENSE FEE (FW/W HYDRO LICENSE FEE (FW/W			\$
0231	DITO LICENSE I EE (I W/W	\		Ψ
	HYDRO APPLICATION	P. Carlotte	\	\$
SPEC	CIAL INSTRUCTIONS		1	
			/	
		/		

RETURN TO APPLICANT -- LETTER ATTACHED



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SEP 1 3 2021

OWRD

August 25, 2021

Oregon Water Resources Department 725 Summer St. NE Ste A Salem, Oregon 97301

RE: CITY OF BANKS - CLAIM OF BENEFICIAL USE PERMIT G-7593 WELL 1

Dear Claim of Beneficial Use Specialist,

Please find enclosed with this letter a completed Claim of Beneficial Use from the City of Banks for Permit G-7593, Well 1. Please note that simultaneously with OWRD's approval of this COBU, the City of Banks withdraws Transfer T-10055.

The City of Banks has attached a check for the Statutory fee of \$230.00.

Please let us know if there are any questions or if any additional information is needed.

Thank you for your assistance.

Sincerely,

CwM H2O, L.L.C.

Robert Long, CWRE

Enclosures (2):

1. Completed and Signed CBU for Permit G-7593

2. Check for \$230.00 fee

Copy: J. Becker

L. Schroeder

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.wrd.state.or.us

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

OWRD

A separate form shall be completed for each permit.

In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at: http://www.oregon.gov/owrd/pages/wr/cwre info.aspx

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. Every item must have a response. If any requested information does not apply to the claim, insert "NA." Do not delete or alter any section of this form unless directed by the form. The Department may require the submittal of additional information from any water user or authorized agent.

"Section 8" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-986-0900 and ask for the Certificate Section.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see http://www.oregon.gov/owrd/pages/mgmt_reimbursement_authority.aspx

SECTION 1 GENERAL INFORMATION

1. File Information

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
G-8476	G-7593	T-10055

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME CITY of BANKS		PHONE No. 503-324-		ADDITIONAL CONTACT NO.
Address		-	'	
13680 NW Main Street				
CITY	STATE	ZIP	E-MAIL	
Banks	OR	97106	jbecker@city	ofbanks.org

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 RECEIVED CITY of BANKS (Jolynn Becker, City Manager) **ADDRESS** SEP 1 3 2021 13680 NW Main Street STATE ZIP CITY OWRD 97106 **Banks** OR ADDITIONAL PERMIT HOLDER OF RECORD **ADDRESS** CITY ZIP STATE April 23, 2019 **4.** Date of Site Inspection: 5. Person(s) interviewed and description of their association with the project: NAME DATE ASSOCIATION WITH THE PROJECT Tom Tulski April 23, 2019 **Public Works Supervisor 6.** County: Washington 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(4)): OWNER OF RECORD **ADDRESS**

ZIP

Add additional tables for owners of record as needed

STATE

CITY

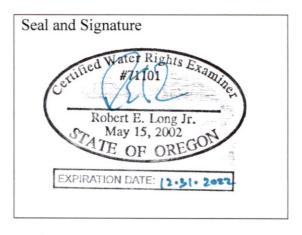
SECTION 2 SIGNATURES

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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		PHONE NO	O.	ADDITIONAL CONTACT NO.
Robert Long		503-954-1	1326	503-799-0304
Address				•
1319 SE MLK JR BLVD,	Suite 204			
CITY	STATE	ZIP	E-MAIL	
Portland	OR	97214	Bob.Lon	g@cwmh2o.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
John Sich	Jolynn Becker	City Manager	9-1-2021

SEP 1 3 2021

SECTION 3

CLAIM DESCRIPTION

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 1 (Behrman Well)	WASH 7651	NA

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 1	West Fork Dairy Creek	West Fork Dairy Creek

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 1 (WASH 7651)	Municipal	-NA-	Year Round	300 GPM
	Total Qua	ntity of Water U	sed	0.67 cfs*

^{*} The recent approval of the City's WMCP (Final/Special Order 120-798, dated 06/14/2021) has given the greenlight for the full rate of 0.67 cfs

4. Provide a general narrative description of the distribution works. This description must trace the water system from **each** point of appropriation to the place of use:

Well 1 (WASH 7651), located 135 FT South and 560 FT West from the ¼ corner on the north line of NENW in Section 31, T. 2N., R. 3W., W.M.* pumps water in a pipe approximately 850 ft west along NW Banks Road and then North up an approximate 1075' driveway to the Carsten Reservoir Storage Tanks. These reservoir tanks then feed the City's water distribution system. *Location based on Permit description.

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

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.")

*Just a quick note, the Permit description of Well 1's location is: 135 FT South and 560 FT West from the ¼ corner on the north line of NENW in Section 31, T. 2N., R. 3W., W.M., however a GIS/Imagery measurement of the location puts it at: approximately 135 FT South and 1875' East from the NW corner, Section 31. The latitude (45.6212) and longitude (-123.1066) coordinate provided for WASH 7651 in OWRD's Well Report Query appears accurate. The use was developed consistently with what was authorized in all issued permits and final orders.

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	0.67 cfs	1.01 cfs	0.76 cfs**	Municipal	-NA-	-NA -

^{**}Daily Production Data recorded by the City of Banks show a pump rate of 0.76 cfs occurred on September 17, 2016 for \sim 32minutes.

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SECTION 4

SYSTEM DESCRIPTION

Are there multiple POAs?

If "YES" you will need to copy and complete Sections 4B through 4F for each POA.

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

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A. Place of Use

1. Is the right for municipal use?

If "YES" the table below may be deleted.



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. 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?

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
-NA-	-NA-	Unknown	Turbine	-NA-	-NA-

3. Motor Information

MANUFACTURER	Horsepower
U.S. Electrical	40 HP

4. Theoretical Pump Capacity

		*IF A WELL, THE WATER LEVEL DURING PUMPING	201110	
40 HP		96 FT	182.5 FT	1.01 CFS

5. Provide pump calculations:

City of Banks Well 1 Behrman Well (WASH 7651)

Pump Capacity Calculation Sheet

using Department designed formula:

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(hp)(efficiency) / (lift + psi head) = capacity in cfs

Efficiency:

Centrifugal = 6.61 Turbine = 7.04 OWRD

Data Entry (fill in underlined blanks)

Results Calculated

(hp)(efficiency) = 281.6 Head based on psi = 0.0 Total dynamic head = 278.5 (head + lift)

Pump Capacity =

1.01 cubic feet per second

Lift numbers and calculations based on a 2/17/2020 email to/from Rob Peacock of Kennedy-Jenks (the City Engineer) and a follow-up phone call on 2/24/2020 between Bob Long (the City's Water Consultant) and Rob Peacock.

Lift = Static water level measurement (measured at 96FT on 2/28/19) + change in elevation between Tank Floor (390') & Wellhead ground surface (231.5') + tank overflow (24')

Lift = 96' + (390' - 231.5') + 24'

Lift = 96' + 158.5' +24'

Lift = 278.5 '

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

INITIAL METER	ENDING METER	DURATION OF TIME	TOTAL PUMP OUTPUT (IN CFS)	
READING	READING	OBSERVED		
		Approx5 hrs	0.76 cfs (Sept. 17, 2016)	

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

7. Is the distribution system piped?



If "NO" items 8 through item 11 may be deleted.

8. Mainline Information

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
~ 6 inches	~1,995 feet	PVC	Buried

9. Lateral or Handline Information NA

LATERAL OR	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
HANDLINE SIZE			

10. Sprinkler Information NA

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)

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

11. Pivot Information NA

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

12. Additional notes or comments related to the system:

Well 1 pumps to a 6" PVC mainline that delivers all ground water to the City's reservoir storage tanks. The mainline is approximately 1,995 feet long and has a total lift from the static water level measurement of 96 FT (2/28/2019) to the top of the reservoir (182.5 ft) of approximately 278.5 feet.

C. Groundwater Source Information (Well and Sump)

1. Is the appropriation from ground water (well) or sump)?

YES I

If "NO", items 2 through 8 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:

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Well 1 has an access port with screw top. SCADA transducers also installed.

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

OWRD

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
8 5/8"	210 FT	450 FT	8/24/1977		City of Banks	A.M. Jannsen Drilling Co.

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.

WASH 7651

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

YES



If "NO", items 6 through 8 relating to this section may be deleted.

D. Storage

1. Does the distribution system include in-system storage (e.g. storage tank, RECEIVED bulge in system / reservoir)



If "NO", item 2 and 3 relating to this section may be deleted.

SEP 1 3 2021

OWRD

If "YES" is it a:

Storage Tank

Bulge in System / Reservoir

Complete appropriate table(s), unused table may be deleted.

2. Storage Tank

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Concrete (Carsten Reservoir Storage Tanks, connected to Well 1)	1.50 MG	Above Ground
Concrete (North Star Reservoir Storage Tank)	0.07 MG	Above Ground
Steel/concrete (Clearwell Reservoir Storage Tank)	0.22 MG	Above Ground

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
-NA-		

E. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?



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

F. Gravity Flow Canal or Ditch -NA-

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?



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

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SECTION 5 CONDITIONS

OWRD

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	DATE	DESCRIPTION OF ACTIONS TAKEN BY
	PERMIT	ACCOMPLISHED*	WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	12/12/1977		
BEGIN CONSTRUCTION (A)	on or before 12/2/1978	8/16/1977	Drilling Started
COMPLETE CONSTRUCTION (B)	on or before 10/01/1979, - extended to 10/01/2027 by Final Order 107- 308	8/24/1977	Well completed
COMPLETE APPLICATION OF WATER (C)	On or before 10/01/1980 extended to 10/01/2027 by Final Order 107- 308	January 1989	Wellhead design and construction completed, Began water use reportin

^{*} 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)?



3. Initial Water Level Measurements: First water depth: 130 ft, post static level: 34 ft

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

YES (

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

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

c. Was the measurement submitted to the Department?



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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	МЕТНОО	MEASUREMENT

4. Annual Static Water Level Measurements:

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

YES



If "NO", items 5b through 5e relating to this section may be deleted.

5. Pump Test (Required for most ground water permits prior to issuance of a certificate)

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



If "NO", items 6b through 6e relating to this section may be deleted.

b. Has the pump test been previously submitted to the Department?

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c. Is the pump test attached to this claim?

SFP 1 3 2021

d. Has the pump test been approved by the Department?

OWRD

e. Has a pump test exemption been approved by the Department?

YES

- **6.** Measurement Conditions:
 - a. Does the permit, permit amendment, or any extension final order require the installation of a meter approved measuring device?

If "NO", items 7b through 7f 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?



c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL#	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1	Siemans		Working		7/24/2012

If a meter has been installed, items 7d through 7f 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?



If "NO", item 7b relating to this section may be deleted.

b. Have the reports been submitted?

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?

b. Was submittal of a ground water monitoring plan required?

c. Was submittal of a water management and conservation plan required?

d. Other conditions?

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

The City of Banks' updated Water Management Conservation Plan (WMCP) was approved by FO 120-798 on June 14, 2021.

^{**} Claims will not be reviewed until a pump test or exemption has been approved by the Department. A Pump test exemption request was submitted to the Department on 3/29/21

SECTION 6 ATTACHMENTS

SEP 1 3 2021

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

OWRD

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	As requested in Section 7
CAD drawing of Well Bining	CAD drawing of Well piping that shows location of the totalizing
CAD drawing of Well Piping	flow meter
	Well 1 (WASH 7651) is only 67' away from Well 2 (WASH
Pump Test Exemption Request	62373), which has an accepted pump test and similar
Form	characteristics. A pump text exemption for Well 1 was submitted to
	OWRD on 3/29/2021 and is under review
Well Log for WASH 7651	

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 map integrates multiple sources:

- The location of Well 1 (WASH 7651) is taken from the description in Permit G7593 and the OWRD Well Report Points geodatabase downloaded on 1/13/2020. The WR GR TRAN map has it located at Latitude 45.6212, Longitude -123.1066
- The Urban Growth Boundary (UGB) (i.e., the City's Service Area) was derived from Metro's RLIS Discovery web resource: http://rlisdiscovery.oregonmetro.gov/?
- The base imagery used for marking the location of the larger Carsten Reservoir Tank was a 2014 USDA-FSA-APFO NAIP MrSID Mosaic covering Washington County (Ortho Image ortho_1-1 ln s or067 2014 1.sid).
- The location of the Totalizing Flow Meter is estimated based on 1.) the description from the CWRE and 2.) the attached CAD drawing of Well Piping.
- StreamNet.org was consulted to identify locations of fish screens or passage devices, none were identified.

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 map)	county assessor
Township, Range, Section, Donation Land Claims, and Government Lots	
If irrigation, number of acres irrigated within each projected Donation Land Claims, CLots, Quarter-Quarters	Government
Locations of fish screens and/or fish by-pass devices in relationship to point of divers	sion
Locations of meters and/or measuring devices in relationship to point of diversion or	appropriation

\boxtimes	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.	2.)
\boxtimes	Point(s) of diversion or appropriation (illustrated and coordinates)	
\boxtimes	(NA for Municipalities) Tax lot boundaries and numbers	
\boxtimes	Source illustrated if surface water	
\boxtimes	Disclaimer ("This map is not intended to provide legal dimensions or locations")	ions of property ownership
\boxtimes	Application and permit number or transfer number	
\boxtimes	North arrow	RECEIVED
\boxtimes	Legend	SEP 1 3 2021
\boxtimes	CWRE stamp and signature	2CL 1 0 5051

OWRD

OMED

296 1 \$ 5051

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SFP 1 3 2021

RECEIVED PUMP TEST UNREASONABLE BURDEN **EXEMPTION REQUEST FORM**

OWRD

OWNER NAME/BUSINESS NAME:		PHONE No.:	ADDITIONAL CONTACT No.:
City of Banks		503-324-5112	Boslova Ro CWRE
ADDRESS: 13680 NW Main Street			503 799 0304
CITY: Banks STATE: OR ZIF		IP: 97106	E-MAIL: jbecker@cityofbanks.org

If there is a reason why a pump test cannot be performed on a well, the owner may request from the Director an exemption from the pump test requirement. Requests shall be in writing and include the reason why a pump test cannot be performed. Exemptions, or conditioned exemptions, shall be granted if the reasons are found to valid and eliminating the problem would place an unreasonable burden on the well owner. Exemptions shall be granted for public water supply wells if pump testing will cause interruption of service to customers. OAR 690-217-0015(3).

1. List each well and associated water right(s) for which you are requesting an exemption. If a well is listed on more than one water right, be sure to include them all here. If additional space is needed, please attach another form. If available, please attach all water well reports (i.e. well logs) and a map showing the locations of all wells listed on this form.

	WELL LOG # (EX. MARI 99999)	WELL TAG # (EX. L-999999)	WELL NAME OR #	APPLICATION	PERMIT	TRANSFER
a	WASH 7651	L-	Well 1 or Behrman Well	G -8476	G -7593	T-10055
b		L-		G-	G-	T-
С		L-		G-	G-	T-
d		L-		G-	G-	T-
е		L-		G-	G-	T-

(CONTINUED)

	TWP (Ex: 258)	RNG (EX: 31E)	SEC (Ex: 12)	QQ (Ex: SE/SW)	SURVEYED LOCATION (Ex: 100 ft N & 735 ft E fr SE cor, sec 5)	LATITUDE (Ex: 44.94473859)	LONGITUDE (Ex: -123,02787000)
a	2N	3W	31	NENW	135 FT S. and 560 FT W. from NW corner of Sect. 31	~45.6212	~123.1066
b							
С							
d							
е							

Please explain why the test cannot be performed:

The City of Banks uses both Well 1 and Well 2 to meet its municipal water requirements.

Well 1 (WASH 7651) is located approximately 67 feet from Well 2 (WASH 62373).

Due to their close proximity, the two wells produce water from shared water-bearing zones. Any pump test on one well requires the other to remain off for an extended period.

A 47-hour 465 gallon per minute (gpm) constant-rate pump test was performed on Well 2 (WASH 62373). The results of this pump test on are on file with OWRD.

In lieu of idling Well 2 for a pump test on Well 1, the results of Well 2's pump test are respectfully submitted as a better overall representation of the characteristics of the basalt aguifer in this area.

I hereby certify that the well(s) requested for exemption(s) are under my o	wnership.	,
I hereby certify that the well(s) requested for exemption(s) are under my o	_ DATE:	3/29/2021
Robert E. Long IR.		Page 1 of 1 OWRD 20:

The original and first copy of this report are to be filed with the

of well completion.

WATER WELL REPORT

WATER RESOURCES DEPARTMENT CF VE PATE OF OREGON
SALEM, OREGON 97310 CF VE PATE OF OREGON
within 30 days from the date
of well completion

SEP - 6 1977(Do not write above this line)



State	Well No	. 2	2N/3W-31
÷.,			1
State	Permit	No.	

(1) OWNER: WIATER RESOURCES DEPT.	(10) LOCATION OF WELL:			
Name City of Banks SALEM, OREGON	County Washington Driller's well nur	mber		
Address Banks, Oregon	34 34 Section 81 T. 2 N	R.	3 W.	W.M.
110100	Bearing and distance from section or subdivision	n corner	ECE	VED
(2) TYPE OF WORK (check):				
New Well A Deepening Reconditioning Abandon		51	EP 1	3 2021
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed we	ell.	,	
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found 13	-	OW	RD ft.
Rotary Z Driven Domestic Industrial Municipal Z	Static level 34 ft. below land st	urface. D		
Cable Jetted	Artesian pressure lbs. per square			
Dug	Artesian pressure	men. D		
CASING INSTALLED: Threaded Welded S 8-5/8 "Diam from plus 2 ft to 210 ft Gage 250 "Diam from ft to ft Gage "Diam from ft to ft Gage	Depth drilled 450 ft. Depth of complete and show thickness and nature of each strature with at least one entry for each change of format position of Static Water Level and indicate prints.	eted well and struct m and aq tion. Report	450 ure of ruifer perteach	o ft. materials; enetrated, change in
PERFORATIONS: Perforated? Yes No.				
Type of perforator used	MATERIAL	From	To	SWL
Size of perforations in. by in.	Dark brown clay topsoil	8	- <u>8</u> - 15	-
perforations from	Silty brown clay	0	10	
perforations fromft. toft.	Red-brown clay w/rotten rock fragments	15	50	
perforations fromft. toft.	Sticky red clay-ooc. rotten			
(7) SCREENS: Well screen installed? Yes No	rock streaks	50	95	
Manufacturer's Name	Brown clay & rotten rock	95	110	
Type Model No	Dark brown & gray-brown clay	330	480	
Diam. Slot size Set from ft. to ft.	organic material	110	120	
Diam. Slot size Set from ft. to ft.	Soft blue-gray cemented gravel	120 130	130 160	20 000
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Rotten brown basalt Soft brown basalt-occ.weatherd		195	20 gpm
	Black-brown basalt	195	215	
Was a pump test made? Yes No If yes, by whom? AMJannsen 275 gal./min. with 224 ft. drawdown after 48 hrs.	Hard gray-black basalt	215	230	
100	Broken brown basalt w/soapstone			
	and lava interbeds	230	245	10 gpm
<i>"</i> " " "	Fractured black basaltocc.			
Bailer test gal./min. with ft. drawdown after hrs.	crevice	245	265	
Artesian flow g.p.m.	Hard gray-black basalt, occ-	<u> </u>		
erature of water 58° Depth artesian flow encountered ft.	Work started 8/16/77 19 Complet		24/77	19
(9) CONSTRUCTION:	Date well drilling machine moved off of well	8/24	/77	19
Well seal-Material used Cement grout & 2% gel	Drilling Machine Operator's Certification:			
Well sealed from land surface toft.	This well was constructed under my Materials used and information reported	above a	supe: are tru	rvision. le to my
Diameter of well bore to bottom of seal 12-1/4" in.	best knowledge and belief.			
Diameter of well bore below seal	[Signed] (Drilling Machine Operator)	Date8	/29/7	7, 19
Number of sacks of cement used in well seal 25 sacks	Drilling Machine Operator's License No.	5	23	
How was cement grout placed? Placed on o.d. of casing through grout pipe - 20 sacks run @ 210',	Water Well Contractor's Certification:			
5 sacks run to top off at ground level upon completion	This well was drilled under my jurisd true to the best of my knowledge and be		nd this	report is
Was a drive shoe used? Yes No Plugs Size: location ft.	Name A. M. Jannsen Drilling C	0.		
Did any strata contain unusable water? 🛣 Yes 🗌 No	(Person, firm or corporation)	(Ty	pe or pr	
Type of water? insufficient depth of strata 130' to 160'	Address 21075 SW Tualatin Valle	y Hwy.	Alok	ia, Orego
Method of sealing strata off cased and cemented	[Signed Sawel W Ja	uns	m	
Was well gravel packed? ☐ Yes ♣No Size of gravel:	(Water Well Cont		·	
Gravel placed from ft. to ft.	Contractor's License No79 Date	8/29/	77	, 19

The original and first copy of this report

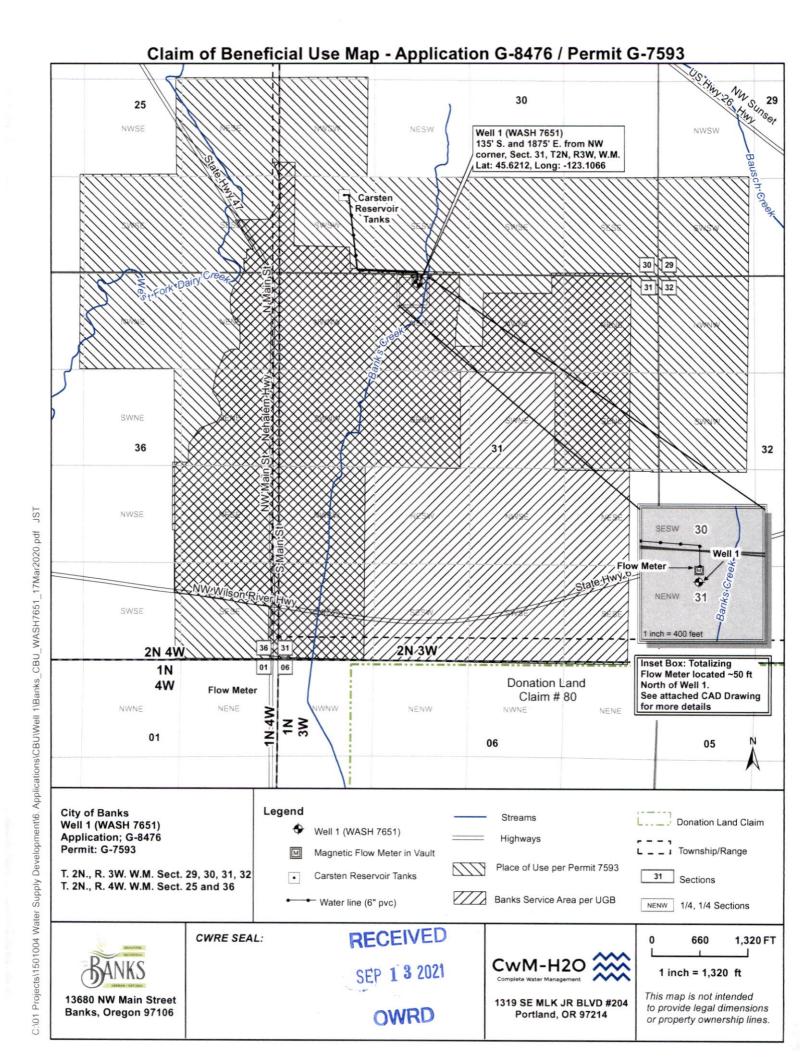
WATER RESOURCES DEPARTMENT TO SALEM, OREGON 97310
within 30 days from the date of well completion.

SEP - 6 1977

			_	. 1	_			_	
State	Well	No.	2	N /	3	W	_	3	1

State	Well No	o		<u> </u>	VV	9	_
State	Permit	No.	 				

RESOURCES DEPT.				
(1) OWNER: SALEM. OREGON	(10) LOCATION OF WELL:			
Name City of Banks Page 2	County Driller's well nu	mber		
Address	1/4 1/4 Section T.	R.		W.M.
	Bearing and distance from section or subdivision	n corner		
(2) TYPE OF WORK (check):				-
New Well □ Deepening □ Reconditioning □ Abandon □				
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed w	-11		
		E11.		
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found			ft.
Rotary Driven Domestic Industrial Municipal Cable Jetted	Static level ft. below land s	urface. I	Date	
Dug	Artesian pressure lbs. per squar	e inch. I	Date	
(CASING INSTALLED: Threaded Welded	(12) WELL LOG: Diameter of well b	alow onei	ng	
" Diam. from ft. to ft. Gage	Depth drilled ft. Depth of compl		11g	ft.
" Diam. from ft. to ft. Gage				
	Formation: Describe color, texture, grain size and show thickness and nature of each stratu			
7	with at least one entry for each change of format	ion. Repo	rt each	change in
PERFORATIONS: Perforated? Yes No.	position of Static Water Level and indicate prin	cipai wat	er-bearn	ng strata.
Type of perforator used	MATERIAL	From	То	SWL
Size of perforations in. by in.	fracture	265	315	5 gpm
perforations from ft. to ft.	Brown basalt-occ.broken	315	325	10 gpm
perforations from ft. to ft.	Hard black & gray-black	805	888	
perforations from ft. to ft.	basalt-occ. crevice	325	360	
(E) CODELIC	Black basaltocc. broken w/	800	200	25
(7) SCREENS: Well screen installed? Yes No	green soapstone	860	380	25 gpm
Manufacturer's Name	Broken black & brown basalt-	380	400	200 gpn
Type Model No	w/ lava & soapstone interbed	300	400	ZOO gpi
Diam. Slot size Set from ft. to ft.	Broken gray-brown basalt w/	400	415	100gpm
Diam Slot size Set from It. to	Hard gray-black basaltocc.	200		
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	crevice RECEIVED	415	450	
Was a pump test made? ☐ Yes ☐ No If yes, by whom?				
y' gal./min. with ft. drawdown after hrs.	SEP 1 3 2021			
" " "				
" " " "				
	OWRD			
Bailer test gal./min. with ft. drawdown after hrs.				-
Artesian flow g.p.m.				<u> </u>
erature of water Depth artesian flow encountered ft.	Work started 19 Complete	ea		19
(9) CONSTRUCTION:	Date well drilling machine moved off of well			
Well seal—Material used	Drilling Machine Operator's Certification		auno	iaian
Well sealed from land surface toft.	This well was constructed under my Materials used and information reported	above	are tru	e to my
Diameter of well bore to bottom of seal in.	best knowledge and belief.			7.0
Diameter of well bore below seal in.	[Signed](Drilling Machine Operator)	Date		, 19
Number of sacks of cement used in well seal sacks	Drilling Machine Operator's License No.			
How was cement grout placed?	Driffing Machine Operator's License No.			***************************************
	Water Well Contractor's Certification:			
	This well was drilled under my jurisc	iction ar	nd this	report is
Was a drive shoe used? ☐ Yes ☐ No Plugs Size: location ft.	true to the best of my knowledge and be			
Did any strata contain unusable water? Yes No Plugs	Name (Person, firm or corporation)	(T)	ype or pr	rint)
Type of water? depth of strata	Address			
Method of sealing strata off	[Signed] (Water Well Con		**********	***************************************
Was well gravel packed? Yes No Size of gravel:	· · · · · · · · · · · · · · · · · · ·			
Gravel placed from ft. to ft.	Contractor's License No Date			, 19



JST

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