# 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

## A fee of \$230 must accompany this form for <u>permits</u> with priority dates of July 9, 1987, or later.

#### 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:

https://www.oregon.gov/OWRD/Forms/Pages/default.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 503-979-9103.

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

#### **GENERAL INFORMATION**

#### 1. File Information:

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
G-16959	G-16476	T-11015

2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME		PHONE NO.	Additional Contact No.
Oregon Military Department 503-584-3493		Chris Richardson, P.E.	
Address			
P.O. Box 14350			
CITY	STATE	ZIP	E-Mail
Salem	em OREGON 97309-5047 christian.a.richardson8.r		christian.a.richardson8.nfg@
			mail.mil

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. <u>Each</u> 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		-	
<b>Oregon Military Depart</b>	ment		
ADDRESS			
P.O. Box 14350			
Сіту	STATE	ZIP	***************************************
Salem	OREGON	97309-5047	

ADDITIONAL PERMIT HOLDE N/A	R OF RECORD		
Address			
CITY	STATE	ZIP	

#### 4. Date of Site Inspection:

August 25, 2021

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

Conrad Tester   August 25, 2021   Facilities Maintenance	Conrad Tester	August 25, 2021	Facilities Maintenance
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-		
6.	County	
v.	County	

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NASI	heur			
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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)):

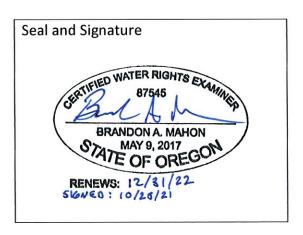
OWNER OF RECORD			
N/A			
Address			
CITY	STATE	ZIP	

Add additional tables for owners of record as needed

## SECTION 2 SIGNATURES

#### **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.		Additional Contact No.
Brandon A. Mahon, P.E., CV	VRE	541-963-8	309	
Address				
1901 N. Fir Street/P.O. Box	1107			
Сіту	STATE	ZIP	E-MAIL	
La Grande	OREGON	97850	bmahon@a	andersonperry.com

#### Permit Holder of Record Signature or Acknowledgement

**<u>Each</u>** 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.

Sı	IGNATURE , /	PRINT OR TYPE NAME	TITLE	DATE
~~	1.Cld	James G. Arnold	Oregon Military Department; Installations Division (AGI); Chief, Environmental Branch	Z>EX]2

#### **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 L-100201 (Production) (14a)	MALH 53555	L-100201
Well L-100207 (Injection) (16a)	MALH 53625	L-100207
Well L-100204 (Production) (15b)	MALH 53568	L-100204
Well L-100202 (Production) (15a)	MALH 53556	L-100202
Well L-100208 (Injection) (16b)	MALH 53626	L-100208
Well L-100209 (Injection) (16c)	MALH 53627	L-100209

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings) See Attachment A, Well Logs and Pump Test. The well tag numbers listed are those recorded with the Oregon Water Resources Department. Two wells are missing tags, and one is incorrectly labeled.

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

POA Name or Number	Source Basin Located Within	Tributary
Well L-100201 (Production) (14a)	Snake River Basin	N/A
Well L-100207 (Injection) (16a)	Snake River Basin	N/A
Well L-100204 (Production) (15b)	Snake River Basin	N/A
Well L-100202 (Production) (15a)	Snake River Basin	N/A
Well L-100208 (Injection) (16b)	Snake River Basin	N/A
Well L-100209 (Injection) (16c)	Snake River Basin	N/A

.

#### 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 L-100201 (Production) (14a)	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	Year-round	40 gallons per minute (gpm)
Well L-100207 (Injection) (16a)	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	Year-round	N/A
Well L-100204 (Production) (15b)	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	Year-round	40 gpm
Well L-100202 (Production) (15a)	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	Year-round	39 gpm
Well L-100208 (Injection) (16b)	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	Year-round	N/A
Well L-100209 (Injection) (16c)	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	Year-round	N/A
Total Quantity of three wells are or	Water Used (Assuming perating.)	high demand po	eriod when all	119 gpm (0.27 cubic feet per second [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:

The three production wells are located south of the readiness center building. The three wells pump into a common header. This single pipe is routed through a geothermal heating and cooling system in the readiness center building. Prior to entering the heating and cooling system, the water flows through a single totalizing flowmeter. The system's computer and SCADA systems allow the Owner to track the flow from each individual well. The return water is then distributed to the north end of the readiness center building, where it is split into three injection wells. See Attachment B and Figure 1 for well locations. The heating and cooling system is an "on demand" system. During periods of low demand, a single well can generally provide enough flow to meet the system's needs. During high demand periods, multiple wells will operate. According to the Oregon Military Department staff, there have been times when all three wells were operating simultaneously to meet demands.

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.



(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.")

Due to sand concentrations within the production water, the rate of withdrawal was decreased from 2.0 cfs to 0.27 cfs.

#### 6. Claim Summary:

POA	Махімим	CALCULATED	AMOUNT OF	USE	# OF ACRES	# OF ACRES
NAME OR #	RATE AUTHORIZED	THEORETICAL RATE BASED ON SYSTEM	WATER MEASURED		ALLOWED	DEVELOPED
Well L- 100201 (Production) (14a)	1.0 cfs	0.18 cfs	40 gpm (0.11)	Industrial Use (Geo-Thermal Heating and Cooling)	N/A	N/A
Well L- 100207 (Injection) (16a)	N/A	N/A	N/A	Industrial Use (Geo-Thermal Heating and Cooling)	N/A	N/A
Well L- 100204 (Production) (15b)	0.5 cfs	0.18 cfs	39 gpm (0.10)	Industrial Use (Geo-Thermal Heating and Cooling)	N/A	N/A
Well L- 100202 (Production) (15a)	0.5 cfs	0.18 cfs	40 gpm (0.11)	Industrial Use (Geo-Thermal Heating and Cooling)	N/A	N/A
Well L- 100208 (Injection) (16b)	N/A	N/A	N/A	Industrial Use (Geo-Thermal Heating and Cooling)	N/A	N/A
Well L- 100209 (Injection) (16c)	N/A	N/A	N/A	Industrial Use (Geo-Thermal Heating and Cooling)	N/A	N/A

#### SYSTEM DESCRIPTION

Are there multi	iple POAs?
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YES)

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 L-100201	(Production) (	(14a)	

#### A. Place of Use

1. Is the right for municipal use?

YES



If "YES" the table below may be deleted.

TWP	RNG	Mer	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTA L ACRES
185	47E	WM	9	NE SE	N/A	N/A	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	N/A
Total A	res Irrig	gated	<u> </u>					N/A	N/A

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?



NO

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:

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
N/A - See Attachment A, Well Logs and Pump Test						

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.

N/A

#### C. Groundwater Source Information (Sump)

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

#### 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?

NO

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

2. Pump Information:

Manufacturer	Model	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARG E SIZE
Grundfos	45S30-7-BP	98998561	Submersible	2 inches	2 inches

#### 3. Motor Information:

Manufacturer	Horsepower
Grundfos	3 horsepower

4. Theoretical Pump Capacity:

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO	TOTAL PUMP
		*IF A WELL, THE WATER LEVEL	PLACE OF USE	OUTPUT
		DURING PUMPING		(IN CFS)
3	32	25 feet	N/A	0.18

#### 5. Provide pump calculations:

With current infrastructure, the facility is unable to measure a direct pumping pressure upstream of the heating/cooling equipment. The motors are also operated on a variable frequency drive (VFD) that varies the frequency to the motor based on demand. This demand is constantly fluctuating and is controlled by the heating/cooling computers. Therefore, standard theoretical pump capacity calculations are not expected to reflect actual pumping capacity.

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

	2.12	OBSERVED	(IN CFS)
N/A	N/A	10 minutes	0.09 cfs (instantaneous flowmeter)

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

#### 7. Is the distribution system piped?

YES) NO

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

#### 8. Mainline Information:

Mainline Size	LENGTH	Type of Pipe	Buried or Above Ground
6-inch main line	450 feet	Unknown	Buried

#### 9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	Type of Pipe	BURIED OR ABOVE GROUND
N/A			

#### 10. Sprinkler Information:

Size	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
N/A					

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)
N/A					
	EEE-				

12. Drip Tape Information:

DRIPPER SPACING IN	GPM PER 100 FEET	TOTAL LENGTH OF	MAXIMUM LENGTH OF TAPE		Additional Information
INCHES N/A		Таре	USED	(CFS)	

13. Pivot Information:

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

#### E. Storage

1.	Does the distribution system include in-system storage (e.g. storage tank,	
bu	ge in system / reservoir)?	

ES NO

F. 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?

YES NO

**G. Gravity Flow Canal or Ditch** 

(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?

/FS



#### SYSTEM DESCRIPTION

Are th	nere	multi	ple f	POAs?
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(YES)

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):

#### A. Place of Use

1. Is the right for municipal use?

YES



If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	If Irrigation, # Primary Acres	IF IRRIGATION, # SUPPLEMENTA L ACRES
185	47E	WM	9	NE SE	N/A	N/A	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	N/A
Total A	res Irrig	ated						N/A	N/A

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)

NO

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:

Standard pitless adapter

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
N/A - See Attachment A, Well Logs and Pump Test						

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.

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N	•	Δ

#### C. Groundwater Source Information (Sump)

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

YES N



#### 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 <u>and</u> apply the water from the point of appropriation to the place of use.

1. Is a pump used?

/ES



7. Is the distribution system piped?

Υ	ES)	
Ć.		

NO

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

8. Mainline Information:

Mainline Size	LENGTH	Type of Pipe	Buried or Above Ground
6-inch main line	450 feet	Unknown	Buried

#### 9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	Buried or Above Ground
N/A			

10. Sprinkler Information:

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

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)
N/A	1	The second secon			

12. Drip Tape Information:

DRIPPER	GPM PER	TOTAL	MAXIMUM	TOTAL TAPE	Additional Information
SPACING IN	100 FEET	LENGTH OF	LENGTH OF TAPE	OUTPUT	
INCHES		TAPE	USED	(CFS)	
N/A					

#### 13. Pivot Information:

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
N/A				

#### E. Storage

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

YES



#### F. 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?

YES



#### G. Gravity Flow Canal or Ditch

(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?

YES



#### SYSTEM DESCRIPTION

Are there	multip	ole POAs?
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(YES)

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 L-100204 (Production) (15b)		
A.		Place of Use	
1. Is the	e right for municipal use?	YES (	$oldsymbol{(NO)}$

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMEN TAL ACRES
185	47E	WM	9	NE SE	N/A	N/A	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	N/A
Total Ac	res Irrig	ated						N/A	N/A

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)

OV

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:

Stand	ard	nit	ععما	che	nte	r
വഷവ	aı u	UIL	E33	aua	DLC	1

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
N/A - See Attachment A, Well Logs and Pump Test						

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.

N/A

#### C. Groundwater Source Information (Sump)

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

YES

### 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?

NO

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
Grundfos	45S30-7-BP	98998561	Submersible	2 inches	2 inches

3. Motor Information:

MANUFACTURER	Horsepower
Grundfos	3 Hp

4. Theoretical Pump Capacity:

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO	TOTAL PUMP
		*IF A WELL, THE WATER LEVEL	PLACE OF USE	Оитрит
		DURING PUMPING		(IN CFS)
3	32	25 feet	N/A	0.18

#### 5. Provide pump calculations:

With current infrastructure, the facility is unable to measure a direct pumping pressure upstream of the heating/cooling equipment. The motors are also operated on a VFD that varies the frequency to the motor based on demand. This demand is constantly fluctuating and is controlled by the heating/cooling computers. Therefore, standard theoretical pump capacity calculations are not expected to reflect actual pumping capacity.

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

			flowmeter)
N/A	N/A	10 minutes	0.09 cfs (instantaneous
		OBSERVED	(IN CFS)
Initial Meter Reading	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT

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

7. Is the distribution system piped?

YES

NO

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

#### 8. Mainline Information:

Mainline Size	LENGTH	TYPE OF PIPE	Buried or Above Ground
6-inch main line	450 feet	Unknown	Buried

#### 9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	Buried or Above Ground
N/A			

#### 10. Sprinkler Information:

Size	OPERATING	Sprinkler	TOTAL NUMBER	MAXIMUM	TOTAL SPRINKLER OUTPUT
	PSI	OUTPUT	OF SPRINKLERS	NUMBER USED	(CFS)
		(GPM)			
V/A					

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

11. Drip Emitter Information:

Size	OPERATING PSI	Оитрит	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
N/A		(GPM)			

12. Drip Tape Information:

DRIPPER SPACING IN	GPM PER 100 FEET	TOTAL LENGTH OF	MAXIMUM LENGTH OF TAPE	TOTAL TAPE OUTPUT	Additional Information
INCHES	1001111	TAPE	USED	(CFS)	
N/A					

13. Pivot Information:

	Radius	PSI	Оитрит (дрм)	OUTPUT (CFS)
N/A				(6,9)

#### E. Storage

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

YES



F. 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?

YES



**G.** Gravity Flow Canal or Ditch

(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?

YES



#### SYSTEM DESCRIPTION

#### Are there multiple POAs?

(YES)

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 L-100202 (Production) (15a)

#### A. Place of Use

1. Is the right for municipal use?



NO

If "YES" the table below may be deleted.

Тwр	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENT AL ACRES
185	47E	WM	9	NE SE	N/A	N/A	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	N/A
Total Ac	res Irrig	ated			<u> </u>	1		N/A	N/A

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?



NO

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:

Standard pitless adapter

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
N/A - See Attachment A, Well Logs and Pump Test						

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.

N/A

#### C. Groundwater Source Information (Sump)

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

ES ( NC

#### 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 <u>and</u> apply the water from the point of appropriation to the place of use.

1. Is a pump used?

YES) NO

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

2. Pump Information:

Grundfos 45S30-7-BP	98998561	Submersible	2 inches	2 inches
MANUFACTURER MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARG E SIZE

#### 3. Motor Information:

Manufacturer	Horsepower
Grundfos	3 Hp

4. Theoretical Pump Capacity:

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO	TOTAL PUMP
		*IF A WELL, THE WATER LEVEL	PLACE OF USE	OUTPUT
3	32	DURING PUMPING  25 feet	N/A	(IN CFS) 0.18

#### 5. Provide pump calculations:

With current infrastructure, the facility is unable to measure a direct pumping pressure upstream of the heating/cooling equipment. The motors are also operated on a VFD that varies the frequency to the motor based on demand. This demand is constantly fluctuating and is controlled by the heating/cooling computers. Therefore, standard theoretical pump capacity calculations are not expected to reflect actual pumping capacity.

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

INITIAL METER READING	Ending Meter Reading	DURATION OF TIME	TOTAL PUMP OUTPUT
		OBSERVED	(IN CFS)
N/A	N/A	10 minutes	0.09 cfs (instantaneous
			flowmeter)

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

7. Is the distribution system piped?



NO

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

#### 8. Mainline Information:

Mainline Size	LENGTH	TYPE OF PIPE	Buried or Above Ground	
6-inch main line	450 feet	Unknown	Buried	

#### 9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	Buried or Above Ground
N/A			

#### 10. Sprinkler Information:

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

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)
N/A		•			

12. Drip Tape Information:

GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	Additional Information
200				
		100 FEET LENGTH OF	100 FEET LENGTH OF LENGTH OF TAPE	100 FEET LENGTH OF LENGTH OF TAPE OUTPUT

13. Pivot Information:

Manufacturer	MAXIMUM WETTED	Operating	TOTAL PIVOT	TOTAL PIVOT
	RADIUS	PSI	OUTPUT (GPM)	OUTPUT (CFS)
N/A				

E. Storage

1. Does the distribution system include in-system storage (e.g. storage tank,		
bulge in system / reservoir)?	YES	(NO

F. 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?

YES NO

**G. Gravity Flow Canal or Ditch** 

(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?

YES NO

٧,

#### SYSTEM DESCRIPTION

Are there m	ultip	le PC	)As?
-------------	-------	-------	------

(YES)

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):

#### A. Place of Use

1. Is the right for municipal use?

YES



If "YES" the table below may be deleted.

TWP	RNG	MER	Sec	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
185	47E	WM	9	NE SE	N/A	N/A	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	N/A
Total A	res Irrig	ated						N/A	N/A

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?

VES



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:

Standard pitless adapter

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
N/A - See Attachment A, Well Logs and Pump Test						

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.

N	1	۸
IV	1	н

#### C. Groundwater Source Information (Sump)

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

YES NO

#### 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 <u>and</u> apply the water from the point of appropriation to the place of use.

1. Is a pump used?

YES



7. Is the distribution system piped?

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



NO

#### 8. Mainline Information:

Mainline Size	LENGTH	Type of Pipe	Buried or Above Ground
6-inch main line	450 feet	Unknown	Buried

#### 9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	Type of Pipe	Buried or Above Ground
N/A			

10. Sprinkler Information:

PSI	OUTPUT (GPM)	OF SPRINKLERS	Number Used	(crs)

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

11. Drip Emitter Information:

Size	OPERATING	EMITTER	TOTAL NUMBER	MAXIMUM	TOTAL EMITTER OUTPUT
	PSI	OUTPUT	OF EMITTERS	Number Used	(CFS)
		(GPM)			
N/A					

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
N/A					

#### 13. Pivot Information:

Manufacturer	MAXIMUM WETTED RADIUS	Operating PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
N/A		Participant of the second of t		

#### E. Storage

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

YES



#### F. 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?

YES



#### **G.** Gravity Flow Canal or Ditch

(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?

YES



#### SYSTEM DESCRIPTION

Are there mu	ltip	le P	OAs?
--------------	------	------	------

YES

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 L-100209 (Injection)	(16c)
***************************************	\=

#### A. Place of Use

1. Is the right for municipal use?

YES



If "YES" the table below may be deleted.

TWP	RNG	Mer	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
185	47E	WM	9	NE SE	N/A	N/A	Industrial Use (Geo- Thermal Heating and Cooling)	N/A	N/A
Total Ac	res Irrig	gated						N/A	N/A

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?



NO

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:

Standard pitless adapter

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
N/A - See Attachment A, Well Logs and Pump Test						

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.

N	. /	'Λ
-13	•	-

#### C. Groundwater Source Information (Sump)

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

YES



#### 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 <u>and</u> apply the water from the point of appropriation to the place of use.

1. Is a pump used?

YES



7. Is the distribution system piped?

(Y	FS)	
7.		

NO

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

8. Mainline Information:

Mainline Size	LENGTH	Type of Pipe	Buried or Above Ground
6-inch main line	450 feet	Unknown	Buried

#### 9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	Buried or Above Ground
N/A			

10. Sprinkler Information:

Size	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
N/A					

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

11. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT	TOTAL NUMBER OF EMITTERS	MAXIMUM Number Used	TOTAL EMITTER OUTPUT (CFS)
N/A		(GРМ)			

12. Drip Tape Information:

GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	Additional Information
		100 FEET LENGTH OF	100 FEET LENGTH OF LENGTH OF TAPE	100 FEET LENGTH OF LENGTH OF TAPE OUTPUT

#### 13. Pivot Information:

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

#### E. Storage

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

YES



#### F. 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?

YES



#### G. Gravity Flow Canal or Ditch

(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?

YES



#### **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	April 23, 2009		
Begin construction (A)	N/A	N/A	N/A
COMPLETE CONSTRUCTION (B)	N/A	N/A	N/A
COMPLETE APPLICATION OF WATER (C)	April 23, 2014	July 31, 2013	Prior to the "C-Date," the water user completed the construction of the wells and installed submersible pumps and motors, VFDs, and piping, as well as the geothermal heating and cooling equipment, which was installed during construction of the building in 2009-2010.

COMPLETELY APPLY WATER		<u> </u>
2. Is there an extension final order(s)?	YES	(NO)
3. Initial Water Level Measurements:		
a. Was the water user required to submit an initial static water level measuren	nent? Y	'ES NO
4. Annual Static Water Level Measurements:		
a. Was the water user required to submit annual static water level measurement	nts? Yl	ES (NO
5. Pump Test:	_	_
a. Did the permit require the submittal of a pump test?	YES	) NO
Ground water permits with priority dates on or after <b>December 20, 1988</b> , requi of a pump test prior to issuance of a certificate. In some cases, the permit holde for a multiple well exemption or an unreasonable burden exemption.		
For additional information regarding pump tests see: <a b="" be="" deleted.<="" e="" href="https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestPrograms/gwwl/GW/Pages/PumpTestPrograms/gwwl/GW/Pages/PumpTestPrograms/gwwl/GW/Pages/PumpTestPrograms/gwwl/Gw/Pages/PumpTestPrograms/gww/gw/Pages/pw/gw/gw/gw/gw/gw/gw/gw/gw/gw/gw/gw/gw/gw&lt;/td&gt;&lt;td&gt;am.asp&lt;/td&gt;&lt;td&gt;&lt;u&gt;×&lt;/u&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;If " items="" may="" no",="" relating="" section="" td="" this="" through="" to=""><td></td><td>_</td></a>		_
b. Has the pump test been previously submitted to the Department?	YES	(NO)
c. Is the pump test attached to this claim?	YES	) NO
d. Has the pump test been approved by the Department?	YES	(NO)
e. Has a pump test exemption been approved by the Department?	YES	(NO)
** Claims will not be reviewed until a pump test or exemption has been approved by the Dep	artmen	t Ú
6. Measurement Conditions:		
a. Does the permit, permit amendment, or any extension final order require the	ne inista	llation of

 $^{st}$  must be within period between permit, or any extension final order issuance and the date to

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

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	MANUFACTURER	SERIAL#	Condition	CURRENT METER	DATE INSTALLED
NAME OR #			(WORKING OR NOT)	READING	
All three	Veris Industries	94473	Working	6,658,028	Unknown
pumps*					

<sup>\*</sup>All three pumps pump into a common header pipe that has a single totalizing flowmeter. The computer and SCADA systems allow the water user to track the flow from each individual well.

7.	Recording	and re	porting	conditions:

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

YES NO

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

b. Have the reports been submitted?

YES

NO

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?

YES

NO

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

YES (NO

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

(NO

d. Was a Well Identification Number (Well ID tag) assigned and attached

YES

NO

WELLID#	DATE ATTACHED TO WELL		
L-100201	Unknown (currently mislabeled)		
L-100207	Unknown		
L-100204	Unknown (currently missing)		
L-100202	Unknown		
L-100208	Unknown (currently missing)		
L-100209	Unknown		

(YES) NO

e. Other conditions?

to the well?

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

- 1 Underground injection control (UIC) permitted through the Oregon Department of Environmental Quality Yes UIC Number 13258.
- 2 Documentation that all applicable Chapter 690 Division 230 Rules have been met to the best of our knowledge the Chapter 690 Division 230 rules have been met by the Owner.
- 3 Well tags are attached (see additional information in Attachment C).

#### **ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Attachment A	Well Logs and Pump Test
Attachment B	Site Plan
Attachment C	Well Tags
Attachment D	Pump Rate Calculations
Figure 1	Claim of Beneficial Use Map

#### **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.

See attached Figure 1.		

#### **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.)

$\boxtimes$	Map on polyester film
	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map) - See map scale waiver request
$\boxtimes$	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
$\boxtimes$	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
$\boxtimes$	Point(s) of diversion or appropriation (illustrated and coordinates)
$\boxtimes$	Tax lot boundaries and numbers
	Source illustrated if surface water
$\boxtimes$	Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
$\boxtimes$	Application and permit number or transfer number
$\boxtimes$	North arrow
$\boxtimes$	Legend
$\boxtimes$	CWRE stamp and signature

### **FIGURE**

#### **Jamie Grove**

Subject:

FW: COBU Map Waiver Request

Sent: Friday, October 1, 2021 7:37 AM

To: Gerry Clark - OWRD (gerald.e.clark@wrd.state.or.us) < gerald.e.clark@wrd.state.or.us>

Cc: Dana Kurtz <dkurtz@andersonperry.com>

Subject: COBU Map Waiver Request

#### Good morning Gerry,

Per our conversation yesterday, we are preparing a Claim of Beneficial Use Map for the Oregon Military Department at their Ontario Readiness Center. We are proposing to provide the map at a scale of 1''=200' on 11x17 paper. Please let me know if this will be acceptable.

Also, we currently have an aerial photograph on the map in order to show the Place of Use more clearly, as it is a building. We have heard that historically OWRD didn't allow aerial photos on Claim maps, so I wanted to be sure to ask.

Thanks for all your help Gerry,

#### **Brandon**



Brandon Mahon, P.E., C.W.R.E. Project Engineer Anderson Perry & Associates, Inc. 1901 N Fir Street/PO Box 1107 La Grande, OR 97850 541-963-8309 office / 541-963-5456 fax 541-263-1547 cell

Web

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# ATTACHMENT A Well Logs and Pump Test

# STATE OF OREGON WATER SUPPLY WELL REPORT WATER SUPPLY WELL REPORT WATER SUPPLY WELL REPORT WELL STAF

WELL LABEL # L	100201
START CARD#	1006369

	<del></del>
(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
Pirst Namo Lest Namo	County MALHEUR Twp 18 S N/S Rango 47 E E/W WM
Company STATE OF OREGON OREGON MILITARY DEPARTMENT	Sec 9 NB 1/4 of the SB 1/4 Tax Lot 500
Address 1330 S.W. 4TH ST	Tax Map Number Lot
City ONTARIO State OR Zip 97914	Lat DMS of DD
	Long Of DMS or DD
(2) TYPE OF WORK Now Well Deepening Conversion	G. Street address of well Nearest address
Alteration (repair/recondition) Abandonment	
(3) DRILL METHOD	1330 S.W. 4TH ST, ONTARIO, OR
Rotary Air Rotary Mud Cable Auger Cable Mud	
X Reverse Relary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
	Existing Woll / Predesponing
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 05-12-2009 10.8
X Industrial/Commercial   Livertock   Dawatering	Flowing Artesian? Dry Hote?
Thermal Injection Other	WATER BEARING ZONES Dopth water was first found 77
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	SWL Date From To Est Flow SWL(psi) + SWL(ft)
Depth of Completed Well 197 ft.	03-16-2009 8.3 25 102 10.8
BORE HOLE SEAL socks/	03-17-2009 77 79 102 10.8
Dia From To Material From To Amt Ibs	03-17-2009 80 82 102 10.8
20 0 165 Cement 0 50 6	03-17-2009 83 85 102 10.8
18 165 200	03-17-2009 95 108 102 10.8
	(11) WELL LOG Ground Stavation
	Crowned Browner
How was seal placed: Method A B C D B	Material From To
Other	TOP SOIL 0 7
Backfill placed from R. to R. Malerial	SAND, GRAVEL 7 25   171   HARD BLUE CLAY 25   171
Filter pack from 50 ft. to 200 ft. Material SAND Size 12/20	FINE SAND 77 79
Explosives used: Yes Type Amount	HARD BLUE CLAY
	PINE SAND 80 82
(6) CASING/LINER Casing Liner Dia + From To Gauge Sti Plate Wid Thrd	HARD CLAY 82 83
	FINE SAND 83 85
IO       IO <t< td=""><td>HARD CLAY 85 90</td></t<>	HARD CLAY 85 90
0 10 108 118 365 0 X 128 133 365 Q X	SOFT SANDY CLAY W/ FINE SAND 90 95   108
10 138 192 365	( III O O O O O O O O O O O O O O O O O
	HARD BLUE CLAY
Shoe Inside Outside Other Location of shoe(s)	GREY CLAY 127 134
	FINE SAND 134 - 137
Temp casing Yes Dia From To To	GRBY CLAY 137 165
(7) PERFORATIONS/SCREENS	SILTSTONE, CLAYSTONE 165 167
Perforations Method	OREY CLAY 167 182
Screens Type WIRB WRAP Moterial S.S.	SILTSTONE, CLAYSTONE 182 183
Peril'S Casing/Screen Som/slot Slot # of Tele/	Date Started 04-16-2009 Completed 05-12-2009
croon Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification
Screen Casing 10 78 108 .015	I certify that the work I performed on the construction, deepening, alteration, or
Octobril Olympia	abandonment of this well is in compliance with Oregon water supply well
Screen Casing   10   133   138   .015	construction standards. Materials used and information reported above are true to
ECHOCAL CASINE TO 122 137	the best of my knowledge and bellef.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date
The state of the s	Password : (if filing electronically)
Pump Bailer Air Flowing Artesian	Signed
Yield sal/min Drawdown Drill stern/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification
102 35 108 3	I accept responsibility for the construction, deepening, alteration, or abandonment
	I work performed on this wall during the construction dates reported above. All WORK
Temporature 58 °F Lab analysis Yes By	I performed during this time it in compliance with Oregon water supply well
Ves (describe below)	construction standards. This report is true to the best of my knowledge and belief.
Water quality concerns? Yes (describe below) ECEMED Units	License Number 1505 Date 06-08-2009
	Password: (if filling electronically)
10N 1 5 2009	Signed Mark
7011-114 1404	Contact Info (optional)
THIS REPORT MUST BE SUBMITTED TO WAS WATER HESDINGS DEPARTM SALEM, OREGON	DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO WIN WATER RESOURCES DEPARTM	ABNT WITHIN 30 DAYS OF COMPLISTION OF WORK Form Version: 0.89
SALEM, UNICOUN	

T 11015

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FEB 0.8 2016

#### **MALH 53555**

WATER SUPPLY WELL REPORT - continuation page

WELL I,D. # L	100201
START CARD	# 1006369

(5) BORE HOLE CONSTRUCTION  BORE HOLE SEAL SEAL	(10) STATIC WATER LEVEL Water Bearing Zones
Dia From To Material From To Amt the	The state of the s
	SWL Date   From   To   Est Flow   SWL(psi)   + SWL(ft)
	03-17-2009 134 135 102 10.8
	03-18-2009 193 195 102 10.8
	<del>                                 </del>
FILTER PACK	
From To Material Size	
	<del>                                   </del>
	(11) WELL LOG
(6) CASING/LINER	Material From To
Casing Lines Dia + From To Gauge Sil Pisto Wid Third	OREY CLAY 183 193
N'ACTION ON O	SILTSTONE   193   195   195   195   200
	GREY CLAY 195 200
	CED A 0 2010
	FED 0 8 7,010
	VALUE SEED SEED SEED SEED SEED SEED SEED SE
(7) PERFORATIONS/SCREENS	
PerUS Casing/Screen Som/slot Slot # of Tele/	
xeen Uner Dia From To width length slots pipe 1)26	\
	RECEIVED
	UN 1 5 2009
	WATER RESOURCES DEPT
	SALEM, OREGON
	`  <del> </del>
to surery y protected. Rifelinesses tenting time to 1 hours	
(8) WELL TESTS: Minimum testing time is 1 hour	,
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Comments/Remarks
Water Quality Concerns	
From To Description Amount Units	
	<u> </u>

# Well No.3 - West Shallow MALH 53556 MALH 53556

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537,765 & OAR 690-205-0210)

(L-100202) (15 A)

WELL LABEL # L 100202 START CARD # 1006499

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
First Name Last Name	
Company STATE OF OREGON MILITARY DEPARTMENT	County   MALHEUR   Tup   18   S   N/8   Range 47   E   E/W WM
Address 1310 SQUTH WEST 4TH ST	Tax Map Number Lot
City ONTARIO State OR Zip 97914	LAI O O DMS of DD
(2) TYPE OF WORK New Well Desponing Conversion	Long " " or DMS or DD
Alteration (repair/recondition) Abandonment	( Street address of woll ( Nearest address
	1330 SOUTH WEST 4TH ST ONTARIO, OR 97914
(3) DRILL METHOD	
Rolary Air Rolary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL Date SWI(DII) + SWI(DI
Roverse Rolary Other	Date SWL(psi) + SWL(ft)     Bxisting Well / Predospening
(4) PROPOSED USE Domestic Imagelian Community	Completed Well 05-19-2009 8.3
Industrial/Commercial   Livestock   Downleting	Flowing Artesian? Dry Hole?
Thermal Injection Other	WATER BEARING ZONES Depth water was first found 3.3
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy	
Depth of Completed Well 31 ft.	04-21-2009 8.3 25 70 8.3
BORE HOLE SEAL SACKAY	┃ ┞╼─── <b>┤</b>
Dia         From         To         Material         From         To         Aml         bs           20         0         31         Bentonite         0         10         5,000         P	
20 0 31   545-510	
	(11) WELL LOG Ground Flavation
	Giodila Dibianoli
How was seal placed: Mothod A B C D E	Material From To
X Other DRY POUR   Packfill blaced from   fl. to   ft. Malerial	SAND, GRAVEL 7 25
Backfill placed from ft. to ft. Material  Piliet pack from 10 ft. to 31 ft. Material 1/8 Size pea gravel	HARD BLUE CLAY 25 31
Explasives used: Yes Typo Amount	
(6) CASING/LINER Casing Liner Din + From To Gauge St Plate Wid Thed	
(a) (	RECEIVED
(a) (	RECEIVED
(a) (	JUN-1 6 2009 RECEIVED
(a) (	RECEIVED
○       ○	JUN-1 6 2009 RECEIVED WATER RESOURCES DEPT JUL 1 7 2009
10       26   3i   365	JUN-16-2009 RECEIVED  WATER RESOURCES DEPT JUL 1 7-2009  SALEM, OREGON WATER RESOURCES DEPT
Shoo inside Outside Other Location of shoe(s)  Tomp casing Yes Dia From To  (7) PERFORATIONS/SCREENS  Perforations Method	JUN-1 6 2009 RECEIVED WATER RESOURCES DEPT JUL 1 7 2009
Shoo inside Outside Other Location of shoe(s)  Tomp casing Yes Dia From To  (7) PERFORATIONS/SCREENS	JUN-16-2009 RECEIVED  WATER RESOURCES DEPT JUL 1 7-2009  SALEM, OREGON WATER RESOURCES DEPT
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Shoo inside Outside Other Location of shoe(s)  Tomp casing Yes Dia From To  (7) PERFORATIONS/SCREENS  Perforations Method  Screens Type WIRE WRAP Material S.S.  Peti/S Casing/Screen creen Liner Dia From To width length alots pipe size  Screen Casing 10 16 26 .1  (8) WELL TESTS: Minimum testing time is 1 hour  Yield gal/min Drawdown Drill stem/Pump depth Duration (tur)  70 11.1 23 4  Temperature 58 °F Lab analysis Yes By  Water quality concerns? Yes (describe below)	UNTER RESOURCES DEPT SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON  Unbonded) Water Well Constructor Certification I carify 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 Password: (if filling electronically) Signed  (bonded) Water Well Constructor Certification I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the penstruction 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 ballef.  License Number 1505 Date 06-10-2009  Password: (if filling electronically)
Shoo inside Outside Other Location of shoe(s)  Tomp casing Yes Dia From To  (7) PERFORATIONS/SCREENS  Perforations Method  Screens Type WIRE WRAP Material S.S.  Peti/S Casing/Screen creen Liner Dia From To width length alots pipe size  Screen Casing 10 16 26 .1  (8) WELL TESTS: Minimum testing time is 1 hour  Yield gal/min Drawdown Drill stem/Pump depth Duration (tur)  70 11.1 23 4  Temperature 58 °F Lab analysis Yes By  Water quality concerns? Yes (describe below)	WATER RESOURCES DEPT SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON  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 Password: (if filling electronically) Signed  (bonded) Water Well Constructor Certification I scept responsibility for the construction detes 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 ballef.  License Number 1505 Date 06-19-2009

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK
Form Version: 0.89

FEB 0 8 2010

Configuration of the pro-

## Well No.4 - East Jacllow

MALH 53568

WATER SUPPLY WELL REPORT	09-02-2	009 WELL LABEL # L 10020	rage   Or 2
(at required by ORS 537.765 & OAR 690-205-0210)	(1-100	704) STAPT CAPP (	
	(15	(10077 R) START CARD # [10077	23
(1) LAND OWNER Owner Well I.D. WELL 3	<u> </u>	(9) LOCATION OF WELL (legal description	-Intlan)
First Name Last Name		County Malhaur Twp 18.00 S N/S	
Company STATE OF OREGON MILITARY DEPARTMENT		Sec o NB 1/4 of the SB 1/4	Tax Lot 500
Address 1330 S.W. 4th STREET		Tax Map Number	Lot
City ONTARIO State OR Zip 979		Lat or or	DMS or DD
(2) TYPE OF WORK New Well Deepening	Conversion	Long o o or	DMS or DD
Alteration (repair/recondition) Abandonment		Street address of well	address
(3) DRILL METHOD		[330 8,W, 4th STREET	
Rotary Air Rotary Mud Cable Auger Cable h	Mud	(10) STATIC WATER LEVEL Date S	
Reverse Rotary Other			SWL(psi) + SWL(n)
(4) PROPOSED USE Domestic Irrigation Commi	unity	Existing Well / Predeepening Completed Well 08.13.2009	
Industrial Commercial Livestock Dewatering			Ory Hole?
Thormal Injection Other			ea first found 8
(5) BORE HOLE CONSTRUCTION Special Standard	Attach copy		·
Depth of Completed Well 24.00 ft.	_	08-12-2009 8 24	
BORE HOLE SEAL Dia From To Material From To	aackav∕ o Amtiba		<del></del>
12 0 18 Restorite Chips 0 18	12 8		<del></del>
8 18 26			
		(11) WELL LOG Ground Elevation	
How was seal placed: Method A B C D	) [B	Material	From To
Other DRY POUR		TOP SOIL	0 2
Backfill placed from fl. to ft. Material		CLEACHY	2 8
Filter pack from ft. Material S	ilze	ORAVEL HARD BLUE CLAY	8 24
Explosives used: Yes Type Amount		THE DESCRIPTION OF THE PROPERTY OF THE PROPERT	24 26
		Control of the second	
(6) CASING/LINER Casing Liner Dia + From To Gauge Sti Pi	sto Wld Thrd		<del>                                     </del>
⊗     B     ≥     19     .322       Id     19     .280	H WK	550 00	
6   14   19   .280   10	an H	FEB 0.8 2010	
			<b></b>
Shoe Inside Outside Other Location of shoe(s	19		
Temp casing Yes Dia From To	<del></del> ,		
(7) PERFORATIONS/SCREENS			
Perforations Method Method Screens Type WIRE WRAP Material S	2.2		
· · · · · · · · · · · · · · · · · · ·			<u> </u>
10:22 2:4:40	of Tole/	Date Started 08-12-2009 Completed	08-13-2009
Screen Casing 7.5 19 24 1		(unbonded) Water Well Constructor Certification	
		I certify that the work I performed on the construct abandonment of this well is in compliance with	
		construction standards. Materials used and informa-	
		the best of my knowledge and belief.	·
(8) WELL TESTS: Minimum testing time is I hour		License Number Date	
Pump Bailer Air Flowin	g Artesian	Electronically Filed	
Yield gal/min Drawdown Drill stem/Pump depth Duralic		Signed	
62 6 22 4	8	(bonded) Water Well Constructor Certification	
		I accept responsibility for the construction, deepen work performed on this well during the construction	
Temperature 58 °F Lab analysis Yes By		performed during this time is in compliance with	
Water quality concerns? Yes (describe below)		construction standards. This report is true to the best	
From To Description Amor	unt Units	License Number 1505 Date 193.  Biectronically Filed	02-2009
		Signed TERRY DAUGHERTY (E-filed)	
		Contact Info (optional)	
ORIGINAL - WATER	RESOURCES D	EPARTMENT	
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOUR	CES DEPARTM	IDM ATTHIN 33 DAYS OF COMPERTION OF MO	Form Version: 0.95

T 11015

WATER SUPPLY WELL REPORT - continuation page	MALH 535 09-02-2009		LL I.D, # L RT CARD			_ Page 2 of _
(5) BORE HOLE CONSTRUCTION  BORE HOLE SEAL  Dia From To Material From To		CATIC WATE		Est Flow	SWL(psi)	+ swl(n)
FILTBR PACK From To Material Size	(11) W	ELL LOG				
	c Wid Three	Material FEB 0.8			From	To
	# of Tele/ elots pipe size					
(8) WELL TESTS: Minimum testing time is 1 hour Yield gal/min Drawdown Drill stem/Pumo depth Dur	ration (hr) Comm	nents/Remarks				

NOTE: 7"x 8" K-PACKER AT 14"

Water Quality Concerns

Description

Amount Units

STAT	g of Oregon	MALH	53625	Page 1 of 2
WATE	er supply well report	12-14-2	009 WELL LABEL # L 10	
(us req	ilred by ORS \$37.765 & OAR 690-205-0210)	(1-100		
745 8		(1-100 (1-100	1)	10001
(1) L/ Pint No	ND OWNER Owner Well I.D. WBLL#		(9) LOCATION OF WELL (legal de	
Compa	TIC LASI NEME  V. STATE OF OREGON, OREGON MILITARY DEPARTM	(ENT	County Molhaur Twp 18 00 8 N/S Sec 9 NE 1/4 of the SE 1	Rongo <u>47 00 B.                                  </u>
Mulas	1030 S.W. 4 1H BI KEBI		The Maria Maria Maria	• •
	TARIO State OR Zip 970		Lat " or 44.01573600	CLCI to RMCI
	PE OF WORK Now Well Deepening training (repair/recondition) Abandonment	Convention	Long or 116 9705470	est address
(3) DR	ILL METHOD		1330 8.W. 4TH STREET, ONTARIO, OREGO	1
Roy	ry Ali Rutury Mud Cable Auger Cabla h orse Rotury Other	Aud	(10) STATIC WATER LEVEL Date	SWL(psl) + SWL(ft)
(4) PR	OPOSED USE Domania Irrigation Commi	unity	Existing Well / Predosponing Completed Well 12-09-2009	<del>           </del>
(ndu	triel/Commericial Livestook Downtoring		Plowing Artestan?	Dry Holo?
	RE HOLE CONSTRUCTION Special Standard	Mayor		was first found B
Dopth o	f Completed Well 21.00 ft.	Tytoren cob)	SWI, Date From . To Eat P	low SWI/psi) + SWI/O).
Dia Dia	ore hole seal	ядока Amt Ibs		
12	A 18 Republic 0 18	550 P		
	18 23			
			(11) WELL LOG Ground Elevelinn	
	pen) placad: Method A B C D DRY POUR	, <u> </u>	Material Material	From To
	laced from 1. to fl. Material		BROWN CLAY	3 7
Pilter pao	k nom tr to tr Whielial	i ze	GRAVBL BLUE CLAY	7 23 23
	used: Yes Type Amount		6402231337	
(6) CA Casing	SING/LINER Liner Dia + From To Gaugo 5tl Pl	leto Wid Thed		
Q	8 🗵 2 18 332		FEB 0.8 2010	
8	6 13 18 .250	8PH		
Q		$A \Box B$	VM: CONTROL OF CONTROL	
SP5	Nation Other Location of shoe(s)	┗-4   <sub> </sub>	SARA Chesas	
	sing Yes Dia From To	, , , , , , , , , , , , , , , , , , , ,		
	FORATIONS/SCREENS			
	Perforations Method Screens Type JOHNSON Material S	3.9,		
Porf/S C	using/Screen Somethie Stot #	af Tolal	Date Started 11-30-2009 Comple	ated 12-19-2009
troon L	ther Die From To width length a	inta pipo aize	(uubonded) Water Well Constructor Certifies	
Sewan C	sing 7 1.18 23 1		I confit that the work I performed on the cons	truction, decreating, alteration, or
<del></del>			abandonment of this well is in compliance construction standards. Materials used and info	with Oregon water supply woll mation reported above are true to
			the best of my knowledge and belief.	
	LL TESTS: Minimum testing time is 1 hour		Liconso Number Date Ricetronically Filed	
Pump Yldd	Baller Alr Plowin    Baller District County County Durate	•	9igned	
	5 9 20		(bonded) Water Well Constructor Certification	d
, <del> </del>			I recept responsibility for the construction, dec work performed on this well during the construct	ion dates reported above. All work
Temperatu	of 60 *P Lab analysis Vcs By	· · · · · · · · · · · · · · · · · · ·	performed during this time is in compliance construction standards. This report is true to the	with Oregon Wiles supply Well best of my knowledge and bellef.
Water gu	olity concerns? Yes (describe below)  Th. Description Amo	unt Units.	Liconse Number 1505 Date	12.14.2009
			Blootronically Filed  8igned THRRY DALIGHERTY (E-filed)	
			Contact Info (optional)	
THIS REP	original - water ort must be submitted to the water resour	resources i Ces departi	EPARTMENT CENT WITHIN 30 DAYS OF COMPLETION OF V	WORK Form Version: 0,95

110 5

WATER SUPPLY WELL REPORT -	IALH 53625 WELL I.D. W	L_160207 Page 2 of 2
continuation page	12-14-2009 START CAF	ID# 1008631
(5) BORE HOLE CONSTRUCTION BORE HOLE DIA From To Material From To And FI TER PACK From To Material Size  (6) CASING/LINER  Casing Liner Dia + From To Gauge Sti Pisic Wideler	(10) STATIC WATER LEVE Water Bearing Zones SWL Dato From To  (11) WELL LOG Material  FEB 0 8 70000	Eat Pigw SWL(psi) + SWL(ft)
(7) PERFORATIONS/SCREENS  Port/S Casin / Screen croen Lintr Dis From To width length slots	Sloving Contraction of the Contr	
(8) WELL TESTS: Minimum testing time is 1 hour  Yield saidmin Drawdown Drill stem/Pumu depth Durstion of the saidmin of the sa	Comments/Remarks  6°x8° K-PACKER LOCATED AT I	13'

FATE	e of oregon	MALH	53626	Page 1 of 2
WAT	er supply well report	12-14-	I DISC DIND BIS II IS THOUGH	
(## FRC	uired by OR8 537.765 & OAR 690-203-0210)	( L-10	00208) START CARD # 1008832	
751	AND OWNER Owner Well LD, WELL #	<u> </u>	(68)	
First N	•	<u></u>	- (9) LOCATION OF WELL (legal description County Malbour Two 18 to 9 N/S Registration	
Compa	Y STATE OF OREGON OREGON MILITARY DEPARTM 1330 S.W. 4TH STREET	FNT	Soo o NE 1/4 of the SE 1/4 Tax U	ot 300
	NTARIO State OR Zip 979	14	Tax Map Number I.ot Lat ar 44.01573600	DMS or DD
	PR OF WORK Now Well Doopening C	Convention	Long 07 116.97054700	DM\$ or DD
,	eration (repair/recondition) Abandonment	<del></del>	(6. 8treet address of wall Nossest address 1330 S.W. 4TH STREET, ONTARIO, OREGON	<del></del>
(3) DI ○ Ro	K <b>ILL METHO</b> D ary Air   Rodriy Mikl   Cable   Auger   Cable M	lud		
Rev	orso Rotary Dther		(10) STATIC WATER LEVEL Date SWL(ps)	+ SWL(ft)
	OPOSED USE Domastic Irrigation Commu	nlty	Sxisting Wall / Predeopening   Completed Wall   12.10.2009	
Thu	plital/Commercial Livestock Desystering		Plowing Artesian? Dry Holo WATER BEARING 20NBS Depth water was first f	
	RE HOLE CONSTRUCTION Special Standard	Attach co	py) SWL Date From To Est Ploy SWL	
Dopth o	of Completed Well <u>24.09</u> ft. CORE HOLE SBAL	sack	CV 12-01-2009. 8. 24	
Din	From To Material From To	Amt 16		
- 8	18 24			
			(11) WELL LOG Ground Elevation	
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#### **TECHNICAL MEMORANDUM**

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To:

Terry Daugherty - Riverside, Inc.

From:

Terry Scanlan -- SPF Water Engineering

CC:

Bob Tikker - Tikker Engineering

Hal Maxey - Maxey Tookey Architects

Subject:

Analysis of Two-Day Hydronic Well Pumping Test and

Recommendations for Additional Wells and Mechanical Equipment -

Ontario Readiness Center Project

Date:

September 8, 2009

Project No.:

739.0010

Three hydronic system wells have been completed and test pumped at the Ontario Readiness Center project site. This memo provides analysis of a recent two-day pumping test of the third well. Recommendations for additional well construction are included. This memo builds on previous analyses presented by SPF Water Engineering irr documents dated May 28, 2009 and September 12, 2008.

#### BACKGROUND

**Existing Wells.** There are currently a total of four wells on the property, including three wells drilled for the hydronic system in 2009 and a well drilled for irrigation purposes in 2005 for Treasure Valley Community College (TVCC).

Three of the wells tap the shallow aquifer and one well taps the deep aquifer. The shallow aquifer consists of sand and gravel and extends from a depth of approximately 7 feet to a depth of 20 to 25 feet. The deep aquifer extends from approximately 70 to more than 200 feet, and consists of intermittent fine sand layers between thicker layers of clay and shale. The deep aquifer has different water chemistry than the shallow aquifer. There is no direct hydraulic connection between the shallow and deep aquifers.

For purpose of this memorandum, the four wells are numbered and described as follows.

• Well No. 1 (Construction Well or TVCC Well) – Well No. 1 was drilled using the cable-tool method in 2005 for TVCC. The well is completed with 10-inch diameter casing to 40 feet. The casing is perforated from 18.5 to 28 feet. The well taps the shallow aquifer. Well No. 1 is located in the northwest portion of the project site, approximately 300 to 400 feet from Wells 2, 3, and 4.

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- Well No. 2 (ORC Deep Well, ORC Hydronic Well 1) Well No. 2 was drilled to a
  total depth of 200 feet using the reverse-rotary method in April and May 2009 and is
  completed to a total depth of 197 feet. Well screen intervals are 78 to 108 feet, 118
  to 128 feet, 133 to 138 feet, and 192 feet to 197 feet. The well taps the deep aquifer.
- Well No. 3 (ORC Shallow West Well, ORC Hydronic Well 2) Well No. 3 was drilled using the reverse-rotary method in April and May 2009 to a total depth of 31 feet, and is completed with a single string of 10-inch casing and well screen from +2 to 31 feet. The screen is 0.100-inch slot pipe-size well screen placed from approximately 16 to 26 feet. The well taps the shallow aquifer, and is located a few feet adjacent to Well No. 2.
- Well No. 4 (ORC Shallow East Well, ORC Hydronic Well 3) Well No. 4 was drilled using the air-rotary method in August 2009 to a total depth of 26 feet. The well is completed with 8-inch casing from +2 to 19 feet, with a separate string of 6-inch or 7-inch casing from 14 to 19 feet and 8-inch telescope well screen from 19 to 24 feet. A 7x8-inch neoprene packer at 14 feet is used to seal the two casing strings together. The well screen is 0.100-inch slot size. The well taps the shallow aquifer, and is located approximately 100 feet east of Wells Nos. 2 and 3.

Note that the well identification numbers used during this test differ from the well identifications numbers used to identify the wells in my previous memo of May 8, 2009. Well reports are provided as Attachment A.

#### **PUMPING TEST DESCRIPTION**

The test consisted of pumping Well No. 4 for 49.5 hours at an average rate of 64 gpm. . Water levels were measured in the pumping well (Well No. 4), and in three observation wells (Well Nos. 1 through 3). Water levels were measured using electric-line well sounders in all four wells. In addition, the water level was monitored using a data logging pressure transducer in Well No. 3. Pumping equipment consisted of a 4-inch submersible pump with electric motor powered by a portable generator. Water from the pump was discharged to an adjacent agricultural field, approximately 200 feet to the south. Flow rate was monitored using a 2.5-inch x 4-inch circular orifice weir.

The pumping test began on August 19, 2009 at 12:40 pm, and was concluded on August 21, 2009 at 2:10 pm. Pumping rate was held constant between 62 and 66 gpm for the duration of the test except for short-periods of generator failure during the late evening of August 19 and early morning of August 20. The generator failure was apparently due to clogged fuel filters. Following replacement of the filters at approximately 9:00 am on August 20, the generator and pump operated continuously until the end of the pumping test.

Following the conclusion of pumping, water-level recovery was measured for 70 minutes in all four wells. The transducer was left in Well No. 3 for one additional week, after

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which the transducer was removed and all four wells were measured with an electric-line well sounder. Test data are provided as Attachment B.

#### **PUMPING TEST RESPONSES**

Well No. 4. Static water level at the start of the test was 3.38 feet below ground surface in Well No. 4. Pumping water level at the end of the pumping period was 12.58 feet below ground surface, for a total drawdown of 9.2 feet. Specific capacity at 4 hours and again at 49.5 hours was 7.0 gpm per foot. This specific capacity is similar to the 6.3 gpm/ft capacity measured at Well No. 3 during the pumping test of that well in May 2009.

Pumping water levels after the first hour of pumping showed a total fluctuation of approximately 1.2 feet. This fluctuation was partially due to generator failure. However, much of the fluctuation is likely caused by barometric or other influences.

Although the pumping water level after four hours of pumping was equal to the pumping water level at 49.5 hours, the logarithmic trend suggests that water levels were declining over the test period. The apparent trend appears to be approximately 0.4 feet per log cycle. Therefore, continuous pumping of the well at 65 gpm for a period of two or more months would have likely resulted in total drawdown approaching 10 feet.

Analysis of the drawdown response of Well No. 4 Indicates an apparent aquifer transmissivity of approximately 44,000 gpd/ft. Analysis of the recovery response of Well No. 4 Indicates an apparent aquifer transmissivity of approximately 34,000 gpd/ft.

Well No. 3. Static water level in Well No. 3 was 4.58 feet below ground surface at the start of the test. Drawdown in the well after 49.5 hours was 1.58 feet.

The logarithmic trend suggests that continuous pumping of Well No. 4 for period of two or more months would have likely resulted in total interference drawdown of approximately 2.5 feet at Well No. 3.

Analysis of the drawdown response in Well No. 3 suggests a transmissivity of approximately 24,000 gpd/ft and a storage coefficient of 0.005. Analysis of the recovery response of Well No. 4 indicates an apparent aquifer transmissivity of approximately 34,000 gpd/ft for the first 6 hours of recovery, and a transmissivity of approximately 20,000 gpd/ft for the remainder of the recovery period.

Well No. 2. Well No. 2 is completed in a deep-aquifer zone that is not in direct hydraulic connection with the shallow aquifer tapped by the pumping well (Well No. 4). As a result, no response was anticipated in Well No. 2. However, monitoring during the test period showed fluctuations in excess of 3 feet. The cause of the fluctuation is unknown, but assumed to be related to barometric pressure changes, pumping of other deep-aquifer wells in the area, or other unidentified factors. There was no apparent direct water-level response to pumping of Well No. 4.

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During the test it was noted that gas could be seen bubbling to the surface of the well. The nature of this gas in not known, but could be methane or carbon dioxide. The presence of gas coming out of solution in the well should be noted in the design of mechanical equipment.

Well No. 1. The water-level response, if any, at Well No. 1 to pumping of Well No. 4 appears to be 0.25 feet or less. Therefore, pumping from shallow aquifer production wells is not anticipated to significantly reduce water levels in the vicinity of shallow aquifer injection wells.

#### DISCUSSION

Groundwater Production. Sustained pumping of Well No. 4 at approximately 65 gpm will result in approximately 2.5 feet of interference drawdown at Well No. 3. Similarly, simultaneous sustained pumping of Well No. 3 at 65 gpm should result in a minimum of 2.5 feet of interference drawdown at Well No. 4. The actual interference drawdown may be greater, because as the aquifer water level is lowered in the vicinity of the pumping wells, the saturated aquifer thickness decreases thereby decreasing the effective aquifer transmissivity.

Pumping of a third shallow well at 65 gpm, located equidistant from Well Nos. 3 and 4, will result in a minimum of 2.5 feet of additional interference drawdown at both Well Nos. 3 and 4. Therefore, the result of sustained pumping of three equidistant shallow-aquifer wells at 65 gpm-each (195 gpm total) will be approximately 10 feet of pumping drawdown in each well and 5 feet of interference drawdown at each well. Assuming static water levels of 5 feet in each well, the calculated pumping water level will be 20 feet in each well (i.e., 10' pumping drawdown + 5' interference drawdown + 5 feet static depth to water). These wells are generally screened between 16 and 26 feet, and drawing down water levels to approximately 20 feet is probably not practical. Therefore, it will be necessary to pump at a lower rate in each well. Reducing the pumping rate to approximately 50 gpm per well (150 gpm total) appears to be feasible. Therefore, production of up a maximum of 150 gpm from the shallow aquifer is recommended.

As noted in the May 28, 2009 memo, two deep-aquifer wells spaced 100 feet or more apart should produce a total of 200 gpm. Therefore, three shallow-aquifer wells and two deep-aquifer wells should produce approximately 350 gpm, very close to the target capacity of 360 gpm. Note that this total capacity does not allow for any redundancy or for future declines in well productivity.

Groundwater Injection. Within an aquifer, injection of groundwater generally results in the opposite hydraulic response as production of groundwater. Thus, if sustained shallow-aquifer pumping of 65 gpm results in 2.5 feet of water-level drawdown at a distance of 100 feet, injection of 65 gpm will result in 2.5 feet of water-level rise at a distance of 100 feet. Furthermore, the water-level rise should be proportional to injection rate. Therefore, if 130 gpm (i.e., double the 65 gpm rate) is injected into the shallow aquifer, water-level rise at a radius of 100 feet will be about 5 feet (i.e., double the water-

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level rise at 65 gpm). Water-level rise at a distance of less than 100 feet from the injection well will be more than 5 feet, while the water-level rise at a distance of more than 100 feet from the injection well will be less than 5 feet. This magnitude of water-level rise is significant at the ORC because the depth to the water table ranges from 6.34 feet below ground surface at Well No. 1 to 3.38 feet below ground surface at Well No. 4. Therefore, water logging of soils in the vicinity of a shallow injection well is possible at injection rates of more than about 75 gpm.

Given the issues associated with water table rise, shallow injection wells should be spaced as widely as possible within the site. Furthermore, shallow injection wells should be operated such that the average injection rate is limited to prevent water logging of surrounding solls. The maximum rate can likely be determined through operation, and will depend on spacing of the wells. However, assuming two wells spaced 200 feet apart, maximum average injection rates of approximately 50 to 100 gpm per well should be assumed

Injection into the deep aquifer does not pose the issues associated with water-table rise that occur with the shallow aquifer. The clay layers located between the shallow and deep aquifer zones are adequate to prevent deep-aquifer injection activities from raising the water table in the shallow aquifer. It is reasonable to assume that the deep aquifer can accept the full 360 gpm target flow rate with initial injection pressures of less than 100 psi. Two deep injection wells, spaced a minimum of 200 feet apart, are recommended.

Injection Well Plugging. A common problem with injection wells is plugging. Although all wells have a tendency to lose capacity over time due to various physical and biochemical mechanisms, injection wells are especially problematic in this regard because fluids are forced into the well which tends to promote plugging. At the ORC, plugging is more likely to occur in deep-aquifer injection wells due to the low-permeability, fine-grained sands that comprise the deep aquifer. Conversely, all other things being equal, plugging of shallow-aquifer injection wells should be less likely to occur due to the coarser, more permeable, sands and gravel that form the shallow aquifer.

To combat plugging, it is strongly recommended that each injection well be equipped with a high-capacity submersible pump for periodic flushing of each well to waste. Reversing the flow by pumping tends to unplug an injection well. Although loss of injection capacity will likely still occur over time, the rate of loss will be diminished by frequent flushing. The pumps should be automated to flush at intervals.

Water Chemistry Issues. It is not known if the chemistry of the deep-aquifer water is compatible with the chemistry of the shallow-aquifer water, and vice versa. As a result, mixing of the two waters within the injection wells and surrounding aquifer zones could result in undesirable chemical reactions, resulting in precipitation of inorganic compounds or release of dissolved gasses. Such chemical reactions may cause plugging of a well that cannot be cured simply by flushing. For this reason, it may be

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injection Well Mechanical Issues. Mechanical equipment required for proper operation of the injection wells include individual flow meters, pressure gages, pressure sustaining valves, flushing pumps, injection tubes, isolation valves (manual and solenoid controlled), and throttling valves. Well heads must be configured for injection operations.

- Flow meters and pressure gages at each injection well are needed for assessing well performance.
- Pressure sustaining valves are needed to maintain pressure within the hydronic system. Without pressure sustaining valves (or a similar device), there is the potential for the injection piping from the building to drain each time the pumps cycle off.
- · Flushing pumps are necessary to minimize well plugging.
- Injection tubes are useful to prevent cascading and air entrainment in the wells.
   At this project site, static water levels are relatively high so that injection tubes can be short (i.e., 10 feet or less).
- Manual Isolation valves allow wells to be serviced while the system is operational.
- Solenoid controlled isolation valves are needed to allow automatic flushing.
- Throttling valves or other flow control devices are needed to prevent excessive injection into the shallow-aquifer zone.
- Well heads must be configured to accept injection pressures of up to 100 psi. To
  do so may require flanged casing, air and vacuum release valves, and sealed
  electrical penetrations. In addition, freeze protection may be required.

#### RECOMMENDATIONS

#### **Production Wells**

1. Drill one additional shallow production well and one additional deep production well to maximize groundwater production at this site. The two wells can be located side-by-side, but the well pair should be located as far as practical from the existing wells, and in no case should the well pair be less than 100 feet from existing wells. Estimated maximum production from five wells is 350 gpm.

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- Equip the shallow production wells with nominal 50 gpm pumps. Assuming pumping water levels of approximately 15 feet, and typical injection pressures of 25 psi, nominal 2 hp pump motors are required. To allow for higher injection pressures (in the event of well plugging), 3 hp pumps could be considered if the hydronic system pressure sustaining valve is set for 40 to 50 psi. Grundfos 40S pump are applicable for this purpose. Pump setting depths of at least 20 feet are recommended.
- Equip the deep production wells with nominal 100 gpm pumps. Assuming pumping water levels of 70 feet and injection pressures of 50 psi, 7.5 hp pump motors are required. Grundfoss 85S pumps are applicable for this purpose. Pump setting depths of approximately 110 feet are recommended.
- 4. Pumps should be equipped with motor shrouds for cooling purposes. Flow switches (or other devices) should be provided for low-flow rate protection. Pumps should be equipped with check valves. Isolation valves should be provided for each well.
- Reserve space and stub piping for future production wells if the two additional production wells are insufficient or if the five wells lose productivity over time.

#### Injection Wells

- 6. Construct two shallow and two deep injection wells. The deep and shallow injection well pairs should be spaced a minimum of 200 feet apart. In addition, it may be possible to equip Well No. 1 for injection purposes.
- 7. Provide pumps and flush lines in each injection well.
  - Deep injection well pumps should be 150 gpm, 5 hp. Grundfos 150S pumps are applicable for the deep wells.
  - Shallow injection well pumps should be 75 gpm, 1.5 hp or 2 hp. Grundfos 75S or Sta-Rite 70 Series pumps are applicable for the shallow wells. These pumps may need to be throttled to prevent overpumping.
- 8. Set up the injection well pumps for automated flushing to waste. Control wires between the mechanical room and well sites are recommended to provided start and stop signals to pumps and valves. Solenoid valves can be used to open flush lines.
- Provide the necessary mechanical equipment (flow meters, pressure gages, pressure sustaining valves, injection tubes, isolation valves, throttling valves, and air and vacuum venting, freeze protection) to allow operation of the injection wells.

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#### **General Recommendations**

- 10. Attempt to reconfigure the design or operation of the hydronic system to reduce the water demand. A maximum system demand of 150 gpm is much more practical at this location than a maximum system demand of 360 gpm. If maximum hydronic water system demands are reduced to 150 gpm, well operational and maintenance problems will be reduced and redundancy will be provided. Shallow wells can be operated with deep wells as back up (and vice versa). Alternatively, a maximum demand of 150 gpm could reduce the number of wells required (although redundancy will be limited).
- Significant monitoring of injection well and production well water levels, pressures, and flow rates will be necessary during initial operation of the system. Modifications in operations will likely be necessary based on system responses to pumping and injection. Long-term monitoring will be necessary to detect and remedy well plugging or other issues.



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**48-Hour Pumping Test Data** 

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70:51   6002/61/8	72															removed junction box and conduit  @ construction well, mp changed to	conduit hanged to
8027,617,8	ន			13,36	11.99	3.61										money couple	
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	Comments						noticed cascading water or gas in deep well		Riverside nomenciature: construction-1, deep-2,	shallowwest-3, shallowess:-4				Riverside to measure WLs, Well No.								-\	n.v				Q between 62 & 66 mark			Qr64gpm					Service Service			FEB 0.8 2017:
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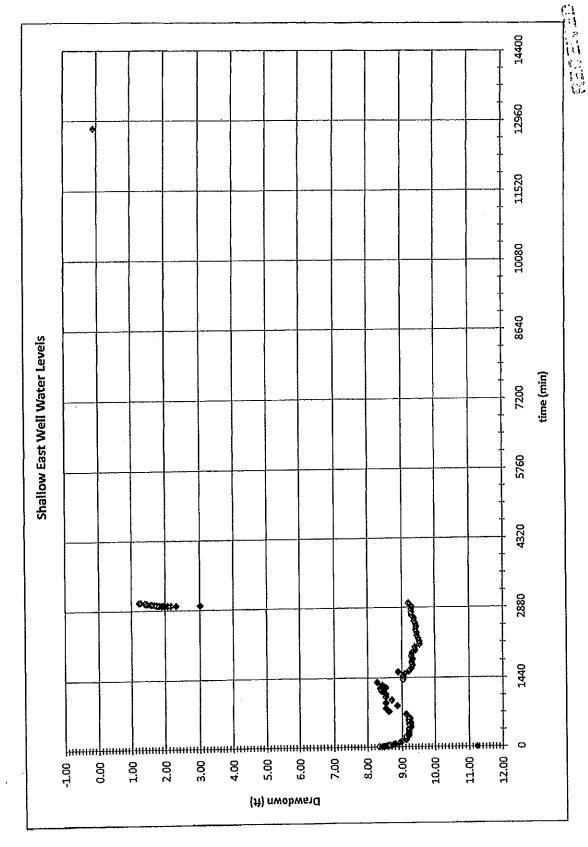
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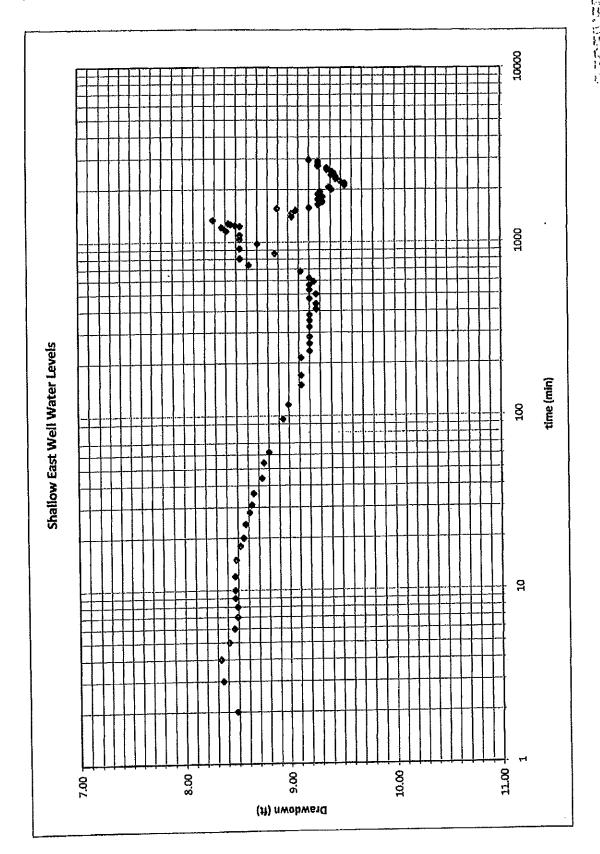
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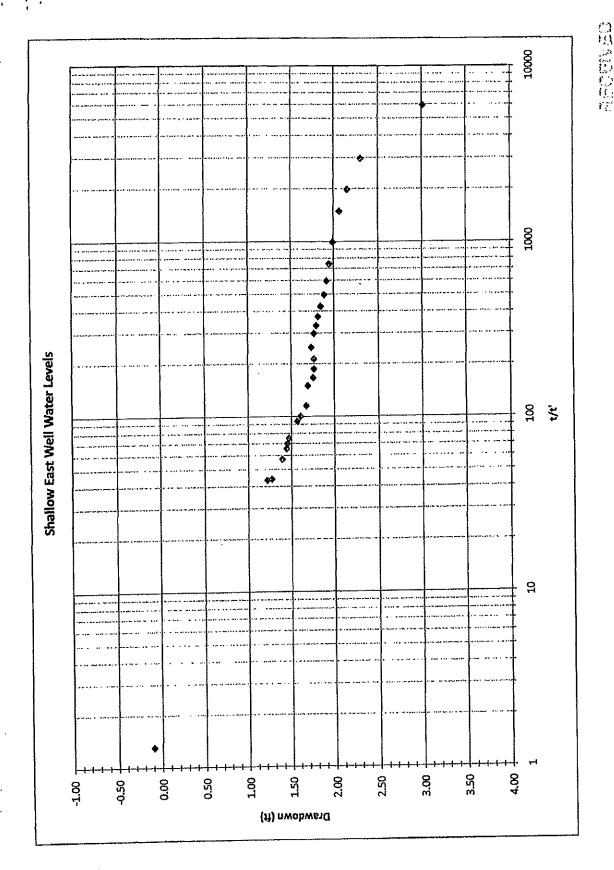
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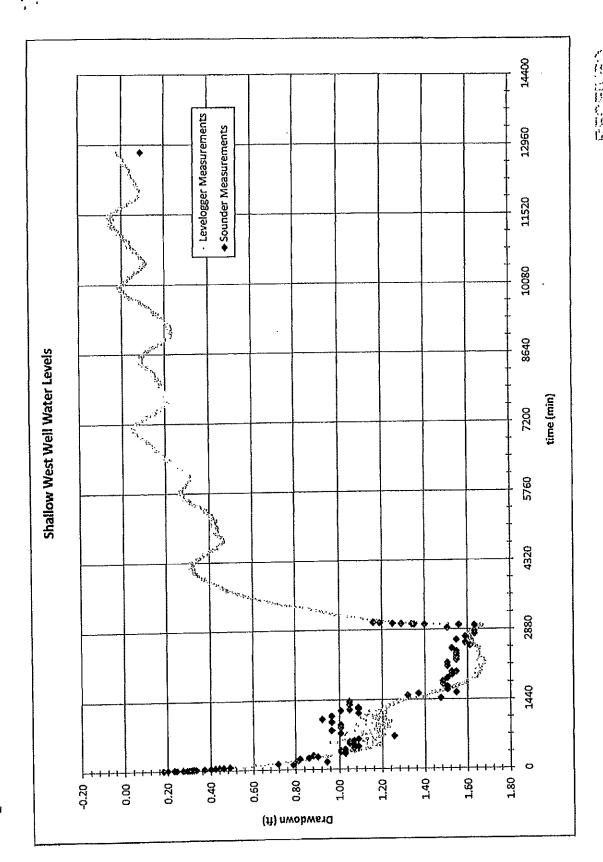
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		E E		-			12.87					12.83						14.55			
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		# € # €				5.77				5.74	5.74						4.67				
	DTW from	top of mp (ft)				8.85				멾	8.82						7.75				
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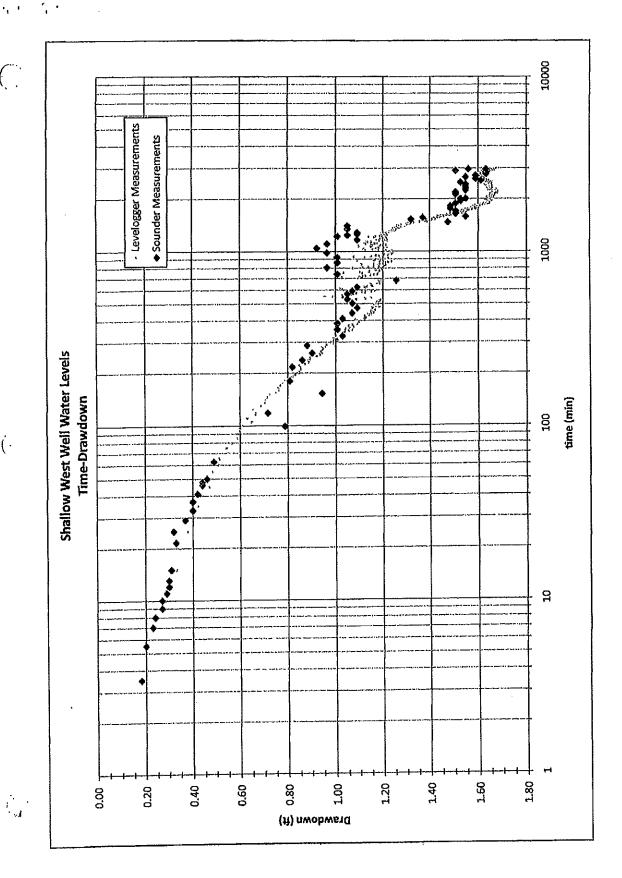




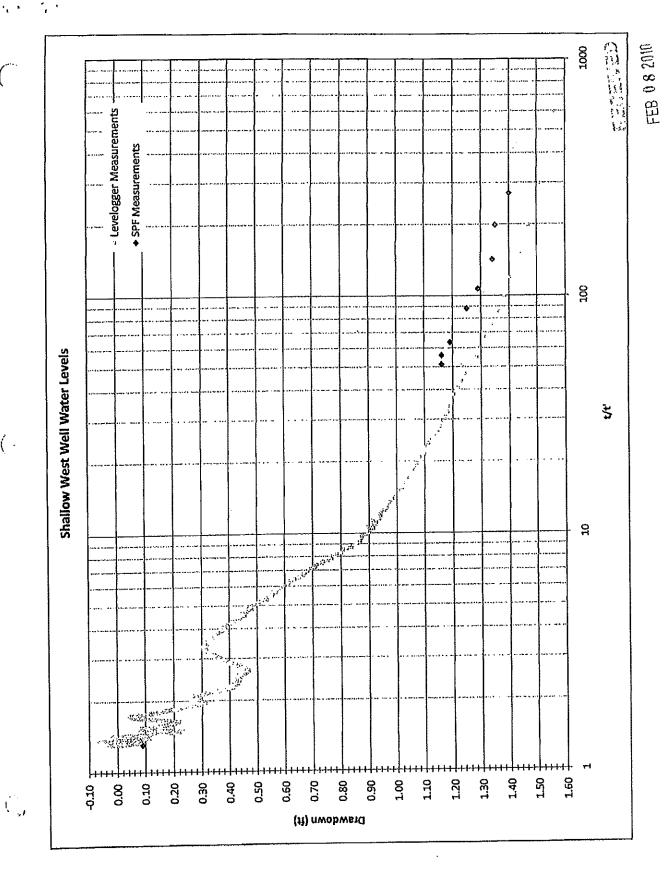




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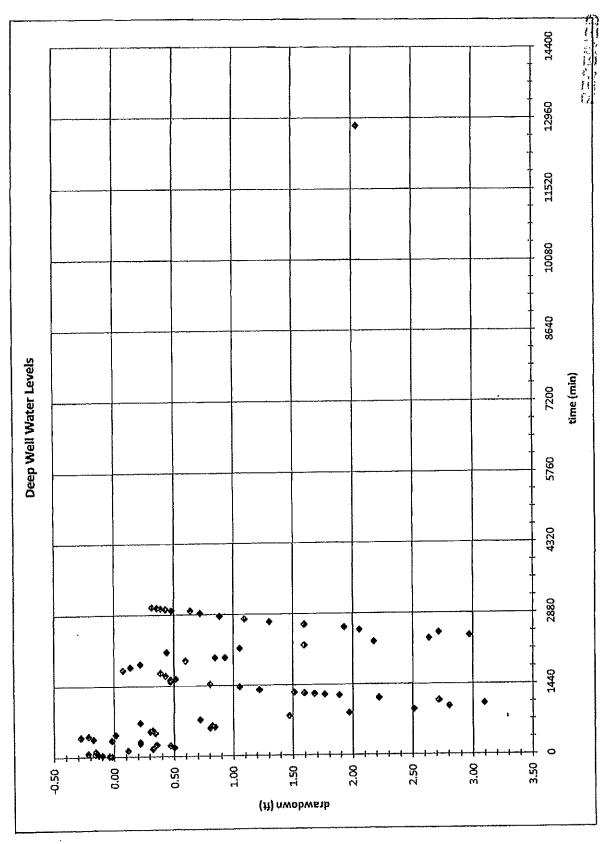


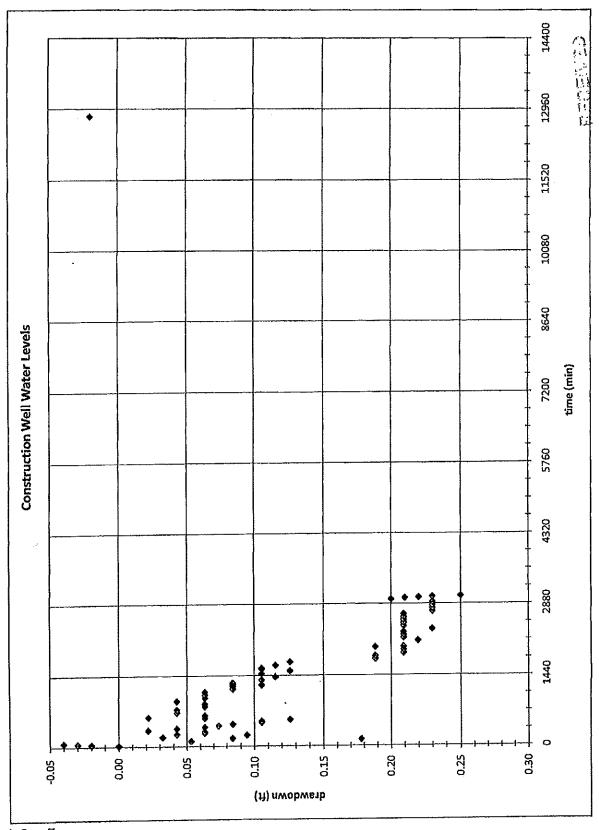
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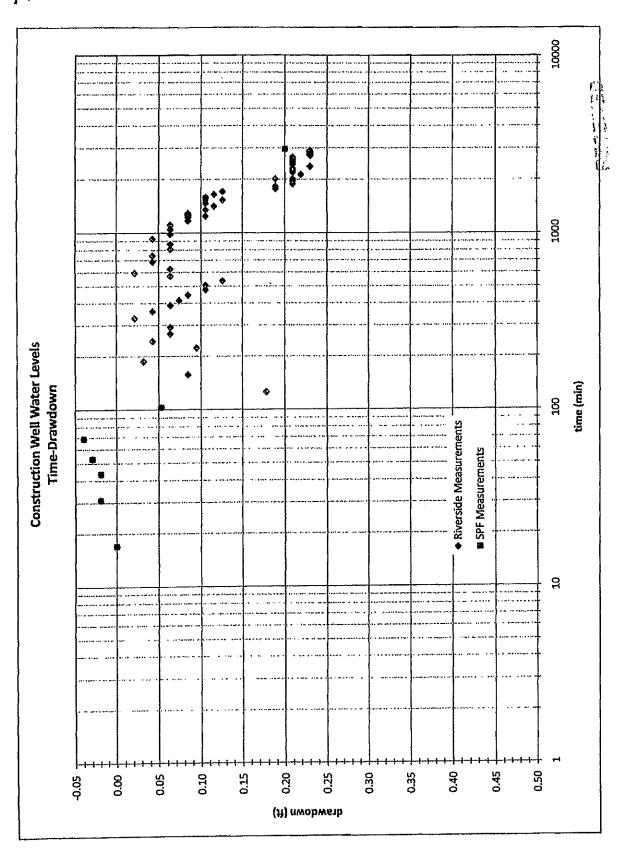
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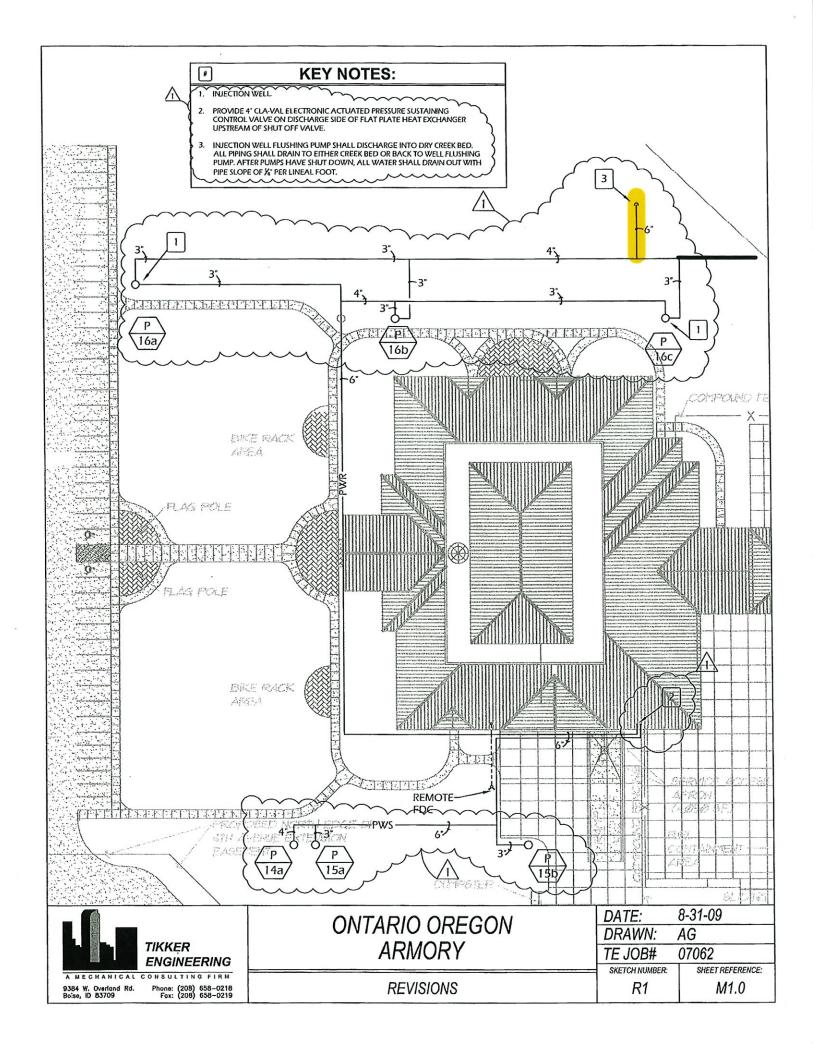


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### ATTACHMENT B Site Plan



### ATTACHMENT C Well Tags

#### Jamie Grove

Subject:

FW: OMD water rights map

From: Brandon Mahon <a href="mahon@andersonperry.com">bmahon@andersonperry.com</a>>

Sent: Wednesday, September 29, 2021 1:58 PM To: Dana Kurtz <dkurtz@andersonperry.com>

Subject: RE: OMD water rights map

Ok, just another weird nuance that we need to note in the COBU. I was trying to document which wells had the Well ID Tags missing. Here is what I came up with:

L100207 (Injection) attached, have a picture L100208 (Production) is missing a tag, no picture L100209 (Injection) attached, have a picture

L100201 (Production) has a tag, have a picture, but the tag reads L106328, which doesn't even show up in OWRD's Well Log Database

L100202 (Production) has a tag, have a picture

L100204 (Production) is missing a tag

The ones without tags I think we can just note that the tag is missing and needs to be replaced. The one that I highlighted seems odd, but we should make note of it.

#### Brandon

----Original Message----

From: Dana Kurtz <<u>dkurtz@andersonperry.com</u>>
Sent: Wednesday, September 29, 2021 12:46 PM
To: Brandon Mahon <<u>bmahon@andersonperry.com</u>>

Subject: RE: OMD water rights map

I found here: https://hdcgcx1.deq.state.or.us/Html5viewer291/?viewer=FacilityProfilerLite

That there is a UIC on site UIC Number 13258. Would there only be 1 number for the UIC? I guess I was expecting 3. No additional info from the website. I copied it into the form with a note for us. Maybe verify with Gerry,

Figure is back in drafting with Friday deadline. I will turn in form now to secretarial and C C you.,

----Original Message-----

From: Brandon Mahon <br/>
Sent: Wednesday, September 29, 2021 10:38 AM<br/>
To: Dana Kurtz <dkurtz@andersonperry.com>

Subject: RE: OMD water rights map

Cool. One other thing that Gerry brought up in this voicemail that I've attached is the requirement for the injection wells to be permitted through DEQ, and that they need to meet all the rules associated with that. It might be easiest to just start with DEQ and see if they are permitted. Is that something you'd have time to chase down?

#### Brandon

# **ATTACHMENT D Pump Rate Calculations**

#### **Pump Capacity Calculation Sheet**

using Department designed formula:

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

Efficiency:

Centrifugal = 6.61 Turbine = 7.04

#### Data Entry (fill in underlined blanks)

$$\begin{array}{c|c} HP = & 3 \\ Efficiency = & 7.04 \\ Lift = & 25 \\ PSI = & 36 \end{array}$$

#### **Results Calculated**

(hp)(efficiency) = 21.12 Head based on psi = 91.5 Total dynamic head = 116.5 (head + lift)

Pump Capacity =

0.18 feet per second