

**CLAIM OF
BENEFICIAL USE
for Permits claiming more
than 0.1 cfs and All Transfers**



ARNOLDUS COPY
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

A fee of \$175 must accompany this form for permits
with priority dates after July 8, 1987.

A fee of \$175 must accompany this form for any Transfer final orders
including a water right with a priority date of July 9, 1987, or later.

Example – A transfer involves 5 rights and one of the rights
has a priority date of July 9, 1987, or later, the fee is required.

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.

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

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**SECTION 1
GENERAL INFORMATION**

I. File Information

APPLICATION # (G, R, S or T) G-17508	PERMIT # (IF APPLICABLE) G-16963	PERMIT AMENDMENT # (IF APPLICABLE)
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2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME TODD ARNOLDUS		PHONE No. 541-805-8912	ADDITIONAL CONTACT No.
ADDRESS 990 CRECENT ROAD			
CITY IMBLER	STATE ORE	ZIP 97841	E-MAIL

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

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

PERMIT OR TRANSFER HOLDER OF RECORD TODD ARNOLDUS				RECEIVED NOV 08 2021 OWRD
ADDRESS 990 CRECENT ROAD				
CITY IMBLER	STATE ORE	ZIP 97841		

ADDITIONAL PERMIT OR TRANSFER HOLDER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection: April 27, 2016

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Todd Arnoldus	April 27, 2016	Property Owner, Grower

6. County: Union County

7. If any property described in the place of use of the permit or transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(4)):

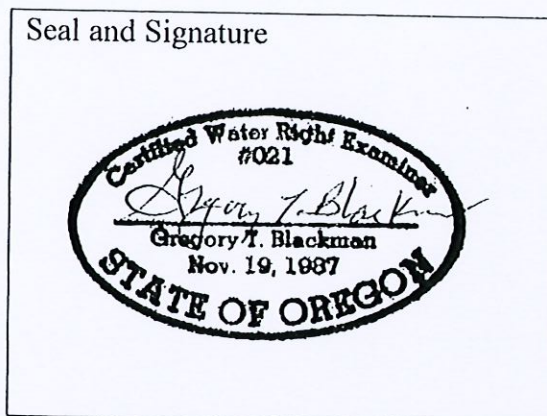
OWNER OF RECORD CLINTON TODD & NICHOLLE M ARNOLDUS		
ADDRESS 990 CRECENT ROAD		
CITY IMBLER	STATE ORE	ZIP 97841-9710

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 GREGORY T BLACKMAN		PHONE NO. 541-963-6771	ADDITIONAL CONTACT NO. 541-786-2859 CELL
ADDRESS 126 RIDGE DRIVE			
CITY LA GRANDE	STATE ORE	ZIP 97850	E-MAIL gtblackman@yahoo.com

Permit or Transfer Holder's of Record Signature or Acknowledgement

Each permit or transfer 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
	Clinton Todd Arnoldus	Property Owner	
	Nicholle M Arnoldus	Property Owner	

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SECTION 3

CLAIM DESCRIPTION

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1. Point of diversion/appropriation name or number:

POINT OF DIVERSION/APPROPRIATION (POD/POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well 173	UNIO 173	None visible

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 diversion/appropriation source and, if from surface water, the tributary:

POD/POA NAME OR NUMBER	SOURCE	TRIBUTARY

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

POD/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 173	Irrigation	Grass seed, Grain	March 1- October 31	64.360 Af.
Total Quantity of Water Used				64.360 Af.

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

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 diversion. 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.")

Permit authorized 80.0 acres. The final acreage was 79.1 after deleting the existing ½ of Webster Road.

6. Claim Summary:

POD/POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well 173	1.33 cfs.	3.25 cfs	Meter 700 GPM	Irrigation	80.00 Ac	79.1 Ac

SECTION 4 SYSTEM DESCRIPTION

Are there multiple PODs or POAs?

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

POD/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?

NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
Total Acres Irrigated									

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 diversion/appropriation to the place of use.

1. Is a pump used?

YES

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

2. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
No information found on pump	No information	unknown	Turbine	10"	10"

3. Motor Information

MANUFACTURER	HORSEPOWER
US Motor	75 HP

4. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *If A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
75 hp	60 psi	Artesian	+10	3.25 cfs

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5. Provide pump calculations:

See attached comps of Pump Capacity Calculation Sheet

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

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
700 gpm meter	700 gpm meter	30 sec observed meter	1.55 cfs

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

7. Is the distribution system piped?

YES

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

8. Mainline Information

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
8"	2600'	steel	buried
6"	1380	PVC	buried

9. Lateral or Handline Information

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
5" handline	440'	aluminum	Above ground
5" wheel line	880	aluminum	Above Ground

10. Sprinkler Information

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
3/16	60 psi	7.8 gpm	14	14	0.24 cfs
3/16	60 psi	7.8 gpm	19	19	0.33 cfs

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

11. Pivot Information

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
Valley 8000 series 1/2 pivot	1320	60 psi	700 gpm	1.56 cfs

12. Additional notes or comments related to the system:

It should be noted that the corners of this parcel is watered by above ground hand lines and wheel lines. The westerly corner is watered by using the adapter on the pivot to water the corners several times per year according to Mr. Arnoldus. The meter on this pivot is located 8' above the ground on the pivot riser pipe. One must climb up the pivot ladder to read the meter.

C. Groundwater Source Information (Well and Sump)

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

YES

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:

No access port observed. Air line is used as the well is Artesian.

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See attached Log						

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.

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

NO

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

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

6. If the appropriation involves a **SUMP**, provide the following information for each **SUMP**:

LENGTH	WIDTH	AVERAGE DIAMETER	MAXIMUM DEPTH	SURFACE AREA (IN ACRES)	VOLUME IN CUBIC FEET OR ACRE FEET

7. If the sump is curbed constructed with watertight surface curbing, describe the curbing:

CURBING MATERIAL (CONCRETE, CONCRETE TILES, OR STEEL)	IF CONCRETE, PROVIDE THE THICKNESS OF THE WALL

8. Provide sump volume calculations:

--

D. Storage

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

NO

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

If "YES" is it a: Storage Tank

YES NO

Bulge in System / Reservoir

YES NO

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

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED

3. Bulge in System / Reservoir:

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

E. Gravity Flow Pipe

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

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1. Does the system involve a gravity flow pipe?

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

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2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)

3. Provide calculations:

4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)

Attach measurement notes.

F. 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?

NO

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

2. Complete the table:

CANAL OR DITCH TYPE (MATERIAL)	TOP WIDTH OF CANAL OR DITCH	BOTTOM WIDTH OF CANAL OR DITCH	DEPTH	"N" FACTOR	AMOUNT OF FALL	LENGTH OF CANAL/ DITCH	SLOPE	COMPUTED RATE (IN CFS)

3. Provide calculations:

4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)

Attach measurement notes.

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G. Reservoir

1. Does the claim involve a reservoir modified through a transfer?

Reminder: Complete this section if the reservoir right has been modified through the transfer process. If the claim is for a permitted reservoir use the Claim of Beneficial Use form for reservoirs.

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NO

If "NO", items 2 through 9 relating to this section may be deleted.

2. Does the reservoir require the submittal of as-built plans and specifications?

YES NO

If "YES", answer items 3; items 4 through 9 relating to this section may be deleted.

If "NO", skip items 3; answer items 4 through 9.

3. Complete the table:

HAVE THE DOCUMENTS BEEN SUBMITTED? YES OR NO	WHEN WERE THE DOCUMENTS SUBMITTED?	HAVE THEY BEEN APPROVED BY THE DEPARTMENT?	NUMBER OF ACRE FEET STORED

4. If the reservoir stores less than 9.2 acre-feet of water or if the dam is less than 10 feet in height, and as-built plans and specifications are not required, complete the table and items 5 through 9.

MAXIMUM DEPTH	AVERAGE DEPTH	SURFACE AREA (IN ACRES)	VOLUME (IN ACRE FEET)

5. Provide reservoir volume calculations:

--

6. Provide the following information concerning the physical characteristics of the dam:

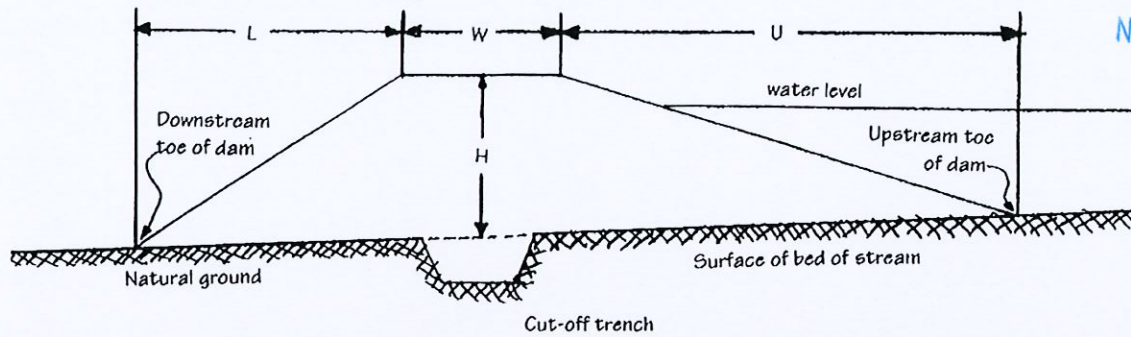
CREST WIDTH (W)	DAM HEIGHT AT CENTERLINE (H)	DISTANCE FROM DOWNSTREAM TOP OF DAM TO DOWNSTREAM TOE (L)	DISTANCE FROM UPSTREAM TOP OF DAM TO UPSTREAM TOE (U)	WATER LEVEL AT INSPECTION	DOWN-STREAM SLOPE	UP-STREAM SLOPE

Example Dam Profile *This box may be deleted from the form*

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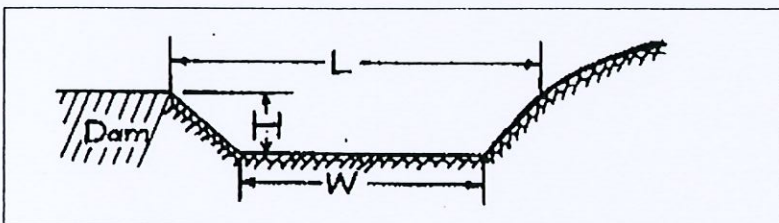


7. Provide a drawing showing the cross section of the dam at the maximum section indicating details and dimensions. The drawing should be drawn at a standard even scale.

8. Describe the outlet works (size and type of the outlet conduit and location):

9. Describe the emergency spillway (dimensions and location):

BOTTOM WIDTH (W)	TOP WIDTH (L)	SPILLWAY DEPTH (H)



SECTION 5 CONDITIONS

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

1. Time Limits:

Permits, transfer final orders, and any 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, extension or transfer final order:

	DATE FROM PERMIT OR TRANSFER	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	Sept 20, 2012		
BEGIN CONSTRUCTION (A)	Not specified	Spring of 2013	½ pivot plus wheel lines and meter installed in spring of 2013
COMPLETE CONSTRUCTION (B)	Within 5 years of issuance. Sept 20, 2017	Complete installation of pivot and underground pipe mainline completed spring 2013	
COMPLETE APPLICATION OF WATER (C)	Within 5 years of issuance. Sept 20, 2017	Construction completed and water applied to ground during the year of 2014	Water applied and reporting completed for 2014 year. All items completed. I believe that a well test has been completed and approved by WRD, as well has been in use since 1978

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

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

NO

If "NO", you may delete item 3 in this section.

3. If for a transfer extension order, provide the following information:

VOLUME	PAGE	DATE EXTENDED TO

4. Initial Water Level Measurements:

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?

YES

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
3/14			

5. 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.

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

March 2014

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

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

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

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

6. 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? YES

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

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

c. Is the pump test attached to this claim? NO

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

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

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

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7. Measurement Conditions:

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

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? YES

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well # 173	Micrometer	13-12749-08	Working	64.360 Ac. Ft.	Spring of 2013

If a meter has been installed, items 7d through 7f relating to this section may be deleted.

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? YES NO

- e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

NAME	TITLE	APPROXIMATE DATE

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED

8. Recording and reporting conditions

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

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YES

If "NO", item 8b relating to this section may be deleted.

- b. Have the reports been submitted?

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YES

METHOD OF SUBMITTING REPORT (PAPER OR ELECTRONIC)	WATER USER REPORTING ID
electronic	65319

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

9. Fish Screening

- a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion?

NO

If "NO", items 9b through 9e relating to this section may be deleted.

Reminder: If fish screening devices were required, the COBU map must indicate their location in relation to the point of diversion.

- b. Has the fish screening been installed?

YES NO

- c. When was the fish screening installed?

DATE	BY WHOM

Reminder: If the permit or transfer final order was issued on or after February 1, 2011, the fish screen is required to be approved by the Oregon Department of Fish and Wildlife regardless of the rate of diversion.

- d. If the diversion involves a pump *and* the total diversion rate of all rights at the point of diversion is less than 225 gpm (0.5 cfs) and the permit was issued prior to February 1, 2011:

- Has the self-certification form previously been submitted to the Department? NA YES NO
- If not, go to <http://www.oregon.gov/owrd/Pages/pubs/forms.aspx>, complete and attach a copy of the self-certification form to this claim, and send a copy of it to the Oregon Department of Fish and Wildlife (ODFW).

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. The ODFW self certification form needs to have been previously submitted or be attached to this form.

e. If the diversion does **not involve a pump** or the **total** diversion rate of all rights at the point of diversion is 225 gpm (0.5 cfs) or greater:

- Has the ODFW approval been previously submitted? NA YES NO
- If not, contact and work with ODFW to ensure compliance. To demonstrate compliance, provide signed documentation from ODFW. A form is available at:
<http://www.oregon.gov/owrd/Pages/pubs/forms.aspx>

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. In order to receive a favorable approval, the ODFW/WRD "Fish Screen Inspection" form needs to have been previously submitted or be attached to this form.

10. By-pass Devices

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a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion? NOV 08 2021

NO

If "NO", items 10b and 10c relating to this section may be deleted.

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Reminder: If by-pass devices were required, the COBU map must indicate their location in relation to the point of diversion.

b. Have by-pass devices been installed? YES NO

c. Describe the diversion works as related to whether a by-pass device is installed or unnecessary:

(Provide a letter from ODFW indicating the device is approved or is unnecessary. If there is no letter from ODFW, explain whether or not a by-pass device is necessary.)

DESCRIPTION (E.G. "ODFW HAS APPROVED THE BY-PASS DEVICE" OR "NO BY-PASS DEVICE IS NECESSARY BECAUSE THERE IS A DIRECT DIVERSION FROM THE STREAM VIA A PUMP ON RIVER LEFT STREAM BANK WITH FOOT VALVE DESCENDING DIRECTLY INTO NATURAL POOL.") IN ADDITION, YOU MAY ATTACH PHOTOS TO THIS CLAIM.	IF INSTALLED (DATE)	IF INSTALLED, BY WHOM

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

- a. Were there special well construction standards? NO
- b. Was submittal of a ground water monitoring plan required? NO
- c. Was the water user required to restore the riparian area if it was disturbed? NO
- d. Was a fishway required? NO
- e. Was submittal of a letter from an engineer required prior to storage of water? NO
- f. Was submittal of a water management and conservation plan required? NO
- g. Other conditions? NO

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

This well was constructed in 1978 and was required to adhere to the requirements of an Artesian well. I find no tag on the well indicating the well ID. It was required by the application, however the well was drilled in 1978. I am not sure that a tag would fit on the well head with all the valving on the top.

SECTION 6
ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Well log # Unio 173	Describes basalt well construction and artesian construction
Facility Water use report	End water year 2015
Pump capacity calculation sheet	Theoretical pump capacity

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.

I used a Leica GS 14 GPS receiver to tie the existing well to a monumented NW corner of Section 36. I find that the tie results are favorable with the original tie to the same corner. My tie shows the Well at S 1310' and East 1290' from the monumented Section corner. The original ties showed the same well as being S 1320' and E 1290' from a position that was not monumented. The ties are very similar and accurate. I find all of the work completed and done in an excellent manner.

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.)

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

- x Legend
- x CWRE stamp and signature

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Facility Water Use Report

• excel
• text

A WELL (UNIO 173)
Report ID 65319

2015 1320 FEET SOUTH AND 1290 FEET EAST FROM NW CORNER, SECTION 36
begin water year
UNIO 173;
(1S-38E-36-NW NW)
Permit: G 16963 *
TODD ARNOLDUS

2015
end water year

Records per page: 10

Water Year	Method of Measurement	Acre-feet (AF) of Water Used												Total Water Used	Irrigated Acres
		Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
2015	FMT	24.80	0.00	0.00	0.00	0.00	0.00	10.90	14.50	15.57	39.10	24.98	51.22	181.07	

*The water year is named for the calendar year in which it ends. Example: the 2014 water year begins Oct. 1, 2013 and ends Sep. 30, 2014.

Method(s) of Measurement:

FMT Flowmeter (recording monthly readings and then reporting the difference between one month's reading and the next)

- Monthly amounts indicate:
 - For diverted rights, the total amount diverted during the month;
 - For storage rights, the amount generally stored in the reservoir/pond during the month, as represented by the volume of water impounded on approximately the same day each month.
- Water Use amounts have all been converted to "acre-feet" (AF), regardless of the original measurement unit reported. One AF is the volume of water that will cover an acre of ground one foot deep = 325,850 gallons.
- Zeros indicate that a report was received, stating that no water was used during those months; if a year is not listed, no report of water use was received for that year.

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Pump Capacity Calculation Sheet

using Department designed formula:

$(\text{hp})(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

Data Entry (fill in underlined blanks)

HP = 75
Efficiency = 7.04
Lift = 10
PSI = 60

Results Calculated

$(\text{hp})(\text{efficiency}) = 528$
Head based on psi = 152.4
Total dynamic head = 162.4
(head + lift)

Pump Capacity = 3.25 feet per second

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

WATER WELL REPORT

Page 1

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

STATE OF OREGON

(Please type or print)

(Do not write above this line)

State Well No. 15/38 E-36b

State Permit No.

(1) OWNER:

Name **B. L. Davis**

Address **Adams, Oregon 97810**

(2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary ☒ Driven ☐
Cable ☐ Jetted ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

CASING INSTALLED:

Threaded ☐ Welded ☒

8" Diam. from +1 ft. to 362 ft. Gage 250
12" Diam. from 0 ft. to 1026 ft. Gage 250
10" Diam. from 1026 ft. to 1394 ft. Gage 250

PERFORATIONS:

Perforated? ☒ Yes ☐ No.

Type of perforator used

Machine

Size of perforations 4 in. by 2 in.
4800 perforations from 1294 ft. to 1394 ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? ☐ Yes ☒ No

Manufacturer's Name

Type Model No.

Diam. Slot size Set from ft. to ft.

Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is
lowered below static level

Was a pump test made? ☐ Yes ☒ No If yes, by whom?

Yield: gal./min. with ft. drawdown after hrs.

" " " "

Ball test gal./min. with ft. drawdown after hrs.

Artesian flow 1700 g.p.m.

Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

*SEE ATTACHMENT.

Well seal—Material used Neat cement

Well sealed from land surface to 18 ft.

Diameter of well bore to bottom of seal 26 in.

Diameter of well bore below seal 26 in.

Number of sacks of cement used in well seal 45 sacks

Number of sacks of bentonite used in well seal sacks

Brand name of bentonite

Number of pounds of bentonite per 100 gallons

of water lbs./100 gals.

Was a drive shoe used? ☐ Yes ☒ No Plugs Size: location ft.

Did any strata contain unusable water? ☐ Yes ☒ No

Type of water? depth of strata

Method of sealing strata off

Was well gravel packed? ☒ Yes ☐ No Size of gravel: 3/8-

Gravel placed from 18 ft. to 355 ft.

(10) LOCATION OF WELL:

County **Union** Driller's well number

1/4 NW 1/4 Section 36 T. 15. R. 38 E. W.M.

Bearing and distance from section or subdivision corner

Center of

(11) WATER LEVEL: Completed well.

Depth at which water was first found 100 ft.

Static level ft. below land surface. Date

Artesian pressure 32 lbs. per square inch. Date 12/11/78

(12) WELL LOG:

Cased to bottom.

Depth drilled 1394 ft. Depth of completed well 1394 ft.

Formation: Describe color, texture, grain size and structure of materials;
and show thickness and nature of each stratum and aquifer penetrated,
with at least one entry for each change of formation. Report each change in
position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Top soil	0	3	
Clay brown	3	73	
Clay soft brown	73	100	
Clay and sand	100	105	
Clay and sandstone	105	112	
Clay blue	112	160	
Clay and sand	160	168	
Sand and clay	168	176	
Clay blue and sandstone	176	183	
Clay and sand	183	193	
Clay blue	193	206	
Sand	206	210	
Clay and sand	210	213	
Sand	213	223	
Clay blue and sand	223	228	
Clay brown	228	257	
Sand	257	270	
Clay and sand	270	284	
Sand and gravel	284	300	

Work started 12/1 1977 Completed 12/11 1978

Date well drilling machine moved off of well 12/11 1978

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision.
Materials used and information reported above are true to my
best knowledge and belief.

[Signed] *Steve Moon* Date 6/11, 1979.
(Drilling Machine Operator)

Drilling Machine Operator's License No. 755

Water Well Contractor's Certification:

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

Name **Steve Moon**
(Person, firm or corporation) (Type or print)

Address **P. O. Drawer P, Moses Lake, Wa. 98837**

[Signed] *Steve Moon*
(Water Well Contractor)

Contractor's License No. 628 Date 6/11, 1979

WATER WELL REPORT

Page 3

STATE OF OREGON

(Please type or print)

(Do not write above this line)

JUN 1 1979

State Well No. 15/38E-366

Permit No. UN90173

(1) OWNER:

Name B. L. Davis

Address Adams, Oregon

(2) TYPE OF WORK (check):

New Well ☐ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary ☐ Driven ☐
Cable ☐ Jetted ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☐ Test Well ☐ Other ☐

CASING INSTALLED:

Threaded ☐ Welded ☐

" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? ☐ Yes ☐ No.

Type of perforator used

Size of perforations	in. by	in.
..... perforations from ft. to ft.		
..... perforations from ft. to ft.		
..... perforations from ft. to ft.		

(7) SCREENS:

Well screen installed? ☐ Yes ☐ No

Manufacturer's Name

Type Model No.

Diam. Slot size Set from ft. to ft.

Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☐ No If yes, by whom?

Yield: gal./min. with ft. drawdown after hrs.

" " " " " "

" " " " " "

Ballor test gal./min. with ft. drawdown after hrs.

Artesian flow g.p.m.

Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used

Well sealed from land surface to ft.

Diameter of well bore to bottom of seal in.

Diameter of well bore below seal in.

Number of sacks of cement used in well seal sacks

How was cement grout placed?

Was a drive shoe used? ☐ Yes ☐ No Plugs Size: location ft.

Did any strata contain unusable water? ☐ Yes ☐ No

Type of water? depth of strata

Method of sealing strata off

Was well gravel packed? ☐ Yes ☐ No Size of gravel:

Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County

Driller's well number

1/4 1/4 Section T. R.

Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found

Static level ft. below land surface. Date

Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing

Depth drilled ft. Depth of completed well ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Basalt blk w/gray & grn clay	666	698	
Clay gray w/soft blk basalt	698	706	
Basalt blk broken w/clay	706	721	
Basalt black	721	724	
Basalt gray hrkn w/gray clay	724	771	
Basalt black soft	771	779	
Basalt blk w/grn clay	779	820	
Clay grn hard w/blk basalt	820	830	
Basalt gray hard	830	850	
Basalt gray with tan clay	850	859	
Basalt gray & green clay	859	864	
Clay brown soft	864	865	
Clay red w/blk basalt	865	897	
Clay red	897	902	
Basalt blk w/red & grn clay	902	903	
Basalt blk hard & broken	903	910	
Basalt black w/grn clay	910	945	
Basalt blk w/gray clay soft	945	951	
Clay red w/black basalt	951	973	

Work started 19 Completed 19

Date well drilling machine moved off of well 19

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Date , 19.....

(Drilling Machine Operator)

Drilling Machine Operator's License No.

Water Well Contractor's Certification:

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

Name (Person, firm or corporation) (Type or print)

Address

[Signed] (Water Well Contractor)

Contractor's License No. Date , 19.....

15/380 - 36

Attachment to B. L. Davis well:

Set 18" casing to 362'

18' surface seal and neat cement from 340' to 362'

Casing Set - 1026' of 12"
368' of 10"

A B & W float collar was welded in at 1284' with a cement basket at 1286' on the outside of the casing.

200 sacks of cement mixed with 5 gals. of water to the sack was pumped out through the float collar.

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WATER RESOURCES
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