Checklist for Claims of Beneficial Use Received at CSG Counter

Application	#:	WRD Review	er:	
Transfer #:				
Date Recei	ved:			
CWRE Nan	ne:			
Priority Dat	e (s):			
Fees Required	l:			
□ YES NO □	A fee of \$230 must accompany th 1987, or later.	is form for <u>permits</u>	with priority dates of	July 9,
□ YES NO □	A fee of \$230 must accompany th with a priority date of July 9, 198' Example – A transfer involves has a priority date of July 9, 19	7, or later. 5 rights and one of	the rights	Fill in App
Map Review:				Number
☐ Application & pe☐ Disclaimer (OAR☐ North arrow (OA☐ CWRE stamp and☐ Appropriate scale of the cou	film (OAR 690-014-0170(1) & 310-0050(1) rmit #; or transfer # (OAR 690-014-0100(1) 690-014-0170(5)) R 690-310-0050(2)(c)) I signature (OAR 690-014 & 310-0050) (1" = 1320', 1" = 400', or the original full-s nty assessor map) (014 & 310) section, and tax lot numbers (OAR 690-310)	ize scale	MONEY SLIP DATE: RECEIPT #: APPLICA APPLICA CASH CHECK # OTHER (DENTIFY) CASH CHECK # OTHER	ER
Report Review	v :		0201 SURFACE WATER \$ 020 0203 GROUND WATER \$ 020 0205 TRANSFER \$	
☐ Application & pe	ed (OAR 690-014)))	WELL CONSTRUCTION 218 WELL DRILL CONSTRUCTION 219 WELL DRILL CONSTRUCTION 210 OTHER (IDENTIFY) 0007 THEASURY 06607 THEASURY 0467 HYDROCLECTRIC 02231 HYDRO LICENSE FEE (IPWWRD) HYDRO LICENSE FEE (IPWWRD) HYDRO APPLICATION SPECIAL INSTRUCTIONS:	\$ \$ 200.00
☐ CWRE stamp and	l signature (OAR 690-014-0100) l permittee of transfer holder (OAR 690-014	l-0100)	☐ RETURN TO APPLICANT LETTER ATTA	CHED
	quired (Priority Date prior to December 20, ed (Priority Date on or after December 20, 1 tted		pump test flyer w/acknow	ledgment letter

CLAIM OF BENEFICIAL USE for Transfer New or Additional **POA Only**



OREGON 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 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.

> **SECTION 1** GENERAL INFORMATION

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Type of Authorized Change

This Claim is being submitted for a transfer where the only authorized change was a change in point(s) of appropriation or additional point(s) of appropriation, or a combination of both.

YES

If additional changes were authorized, you will need to select a different form.

				•	
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- .				OILLIC	

APPLICATION #	
T-12982	

2a. Property Owner (current owner information) TL 7 1W 06 2100 – Well 1

APPLICANT/BUSINESS NAM	E	PHONE NO		ADDITIONAL CONTACT NO.
Loren and Marleen De	ttwyler			
ADDRESS				
4306 Desart Rd NE				
CITY	STATE	ZIP	E-MAIL	
Silverton	OR	97381		

2b. Property Owner (current owner information) TL 7 1W 06 2200 - convey

APPLICANT/BUSINESS NAM	E	PHONE NO).	ADDITIONAL CONTACT NO.
Loren and Marleen Det	ttwyler			
ADDRESS				
4306 Desart Rd NE				
CITY	STATE	ZIP	E-MAIL	
Silverton	OR	97381		

2c. Property Owner (current owner information) TL	7	1W 07	400 -	POU,	Well	2
---	---	-------	-------	------	------	---

APPLICANT/BUSINESS NAME Kevin and Jill Dettwyler and Myron & Diane Kuenzi Family Farm LLC		PHONE NO		Additional Contact No.
Address			11	
4076 Desart Rd NE				
CITY	STATE	ZIP	E-MAIL	
Silverton	OR	97381		

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. <u>Each</u> transfer holder of record must sign this form.

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

TRANSFER HOLDER OF RE	CORD		
Myron & Diane Kuen			
ADDRESS			
6475 State St.			
CITY	STATE	ZIP	
Salem	OR	97317	

4. Date of Site Inspection:

June 11, 2020	
September 2, 2020	
May 20, 2021	

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

Tyler Kuenzi	June 11, 2020	Operator
NAME	DATE	Association with the Project

_	_	
6.	Cou	ntv.

Market Control of the		
Marion		

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

Tacheny the owner of reco	to to the property to	110 007 1200(07)1	
OWNER OF RECORD			
NA			
ADDRESS			
Сіту	STATE	ZIP	
		Account of the control of the contro	

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.



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CWRE NAME		Phone No	١.	Additional Contact No.
Doann Hamilton		(503) 632	2-5013	(503) 349-6946
Address		·		-
18487 S. Valley Vista Ro	ad			
CITY	STATE	ZIP	E-MAIL	
Mulino	OR	97042	phgdmh@	gmail.com

Transfer Holder of Record Signature or Acknowledgement

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<u>Each</u> transfer holder of record must sign this form in the space provided below.

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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
Myon Duong.	MYRON KNEWZ;	MANAGER	10-20 202,
	4 20 20		1 2

SECTION 3 CLAIM DESCRIPTION

Note: The Claim <u>only</u> needs to describe the new or additional point(s) of appropriation. This Claim does not need to provide information for the original point(s) of appropriation unless the original point of appropriation is either a new or additional point of appropriation on another right involved in this transfer.

1. New or additional point of appropriation name or number:

Additional Well 2	MARI 6130	NA	Pudding River
(CORRESPOND TO MAP)	WELL (IF APPLICABLE)		ORDER)
POINT OF APPROPRIATION (POA) NAME OR NUMBER	WELL LOG ID # FOR ALL WORK PERFORMED ON THE	WELL TAG # (IF APPLICABLE)	Source (If Listed In Transfer Final

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

If well logs are available, items A and B below can be deleted

-								
2.	- \/	1	r	2	Ť١	0	n	S:
	v	α			LI		11	Э.

Was the use developed differently from what was authorized by the transfer final order, or extension final?

NO

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

п			1	
1	n	v		A
-1	г	ч	r	٦

3. Claim Summary:

NEW OR ADDITIONAL POA	MAXIMUM RATE	CALCULATED THEORETICAL	AMOUNT OF WATER MEASURED
NAME OR #	AUTHORIZED	RATE BASED ON SYSTEM	
Well 2	0.23 cfs	0.74 cfs	Not measured

SECTION 4

SYSTEM DESCRIPTION

Are there multiple new or additional Points of Appropriation (POA)?

NO

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

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

Well 2

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A. POA System Information

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Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	Model	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
		工作量量	SUBMERSIBLE)		SIZE
Goulds	7WAHC-3STG	Unknown	Submersible	6 inch	4 inch

2. Motor Information

Manufacturer	Horsepower
Franklin Electric	25 Hp

3. Theoretical Pump Capacity

25 Hp	60-80 psi	86 feet (from pump test recorded on well log)	0 feet	(IN CFS) 0.61 to 0.74 cfs
Horsepower	OPERATING PSI	*IF A WELL, THE WATER LEVEL	PLACE OF USE	TOTAL PUMP OUTPUT

4. Provide pump calculations:

5. 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)
6,004,940	6,005,920	September 2, 2020 for 5 minutes	196 gpm = 0.44 cfs running at 72 psi Not running at full capacity

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

B. Groundwater Source Information (Well and Sump)

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

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If "NO", items 4 through 6 relating to this section may be deleted.

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C. Additional notes or comments related to the system:

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Well 2 MARI 6130 also supplies Certificate 27110

Note: A meter has been installed recording all use out of Well 2 (MARI 6130) (Netafim SN 19-100082185 reading 11,580,537 gallons on May 20, 2021)

SECTION 5

CONDITIONS

All conditions contained in the 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:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE NEW AND/OR ADDITIONAL POA(s) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	January 2, 2020	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2021	May 15, 2020

^{*} MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

2. Is there an extension final order(s)? If "NO", you may delete the following table.

NO

- 3. Measurement Conditions:
- a. Does the transfer final order, or any extension final order require the installation of a meter or other approved measuring device?

NO

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

4. Recording and reporting conditions

a. Is the water user required to report the water use to the Department?	NO	
a. Is the water user required to report the water use to the Department.	110	RECEIVED
If "NO", item b relating to this section may be deleted.		
5. Other conditions required by the transfer final order or extension final order:		NOV 1 2 2021
a. Were there special well construction standards?	NO	OMBB
b. Was submittal of a ground water monitoring plan required?	NO	OWRD

YES

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

c) Condition:

Water shall be acquired from the same aquifer (water source) as the original point of appropriation.

Compliance:

c. Other conditions?

Original Well (MARI 3055) was drilled to a depth of 119 feet, cased from 0 to 119 feet. The lithology was not recorded but according to WRIS data base the aquifer is listed as Quaternary-Late Tertiary Sedimentary Aquifer.

Additional Well 2 (MARI 6130) was drilled to a depth of 140.5 feet, cased from 0 to 140.5 feet, perforated from 61 to 68 and 74 to 106 feet in cemented gravels.

It is our understanding that the OWRD considers the entire saturated column of alluvium in this part of the Willamette Valley to be a single aquifer. It appears that both wells obtain water from the alluvial aquifer; therefore, this condition has been met.

SECTION 6

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION	
Claim of Beneficial Use Map	Claim of Beneficial Use Map	
State Water Well Report - MARI 6130	Well log and driller's notes for MARI 6130 - Well 2	
BLM Cadastral Map	BLM Cadastral Map T.7S. R. 1W. showing DLC and	
	Government Lot locations	

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 polyester 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.

For the purpose of this Claim, the map identifying the location of the place of use does not require a new survey. The location of the place of use identified on the Claim map should be based on the original right of record at the time the transfer final order was issued. In transfers approved for <u>additional</u> points of appropriation, the original points must be identified the map based on the original right of record at the time the transfer final order was issued.

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

The COBU map was prepared using tax assessor's maps 07 1W 06 and 07, overlain by a 2014 aerial photo titled USDA-FSA-APFO NAIP County Mosaic and obtained on line from the Natural Resources Conservation Service, Image Metadata:

http://datagateway.nrcs.usda.gov/Catalog/ProductDescription/NAIPM.html

Map Checklist

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Please be sure that the map you submit includes ALL the items listed below. (Reminder: Incomplete maps and/or claims may be returned.)

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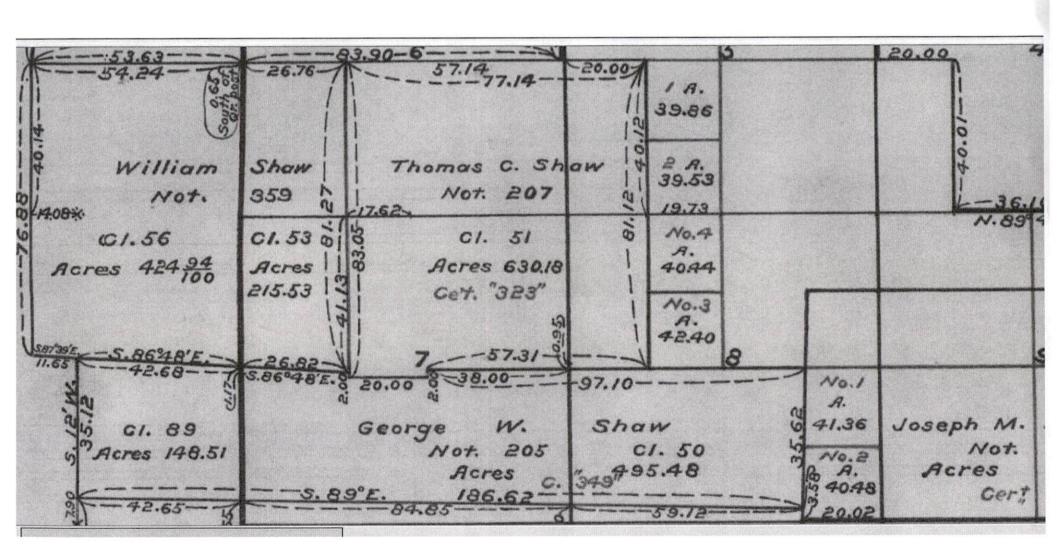
\boxtimes	Map on polyester film	
\boxtimes	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the count assessor map)	У
\boxtimes	Township, Range, Section, Donation Land Claims, and Government Lots	
\boxtimes	If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters	
	Locations of fish screens and/or fish by-pass devices in relationship to point of diversion	
	Locations of meters and/or measuring devices in relationship to point of diversion or appropriation	
	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.) *Not require for this type of Claim of Beneficial Use	ed
\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	

∇	1
\boxtimes	Legend

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MERKINED	Total	1-70	(1)	
ORIGINAL WATER WEL	L REPORT (Spate Well No			
File Original and Duplicate with the UI JIIN 16 1958 STATE OF	OREGORA ANI.	515		
Duplicate with the STATE OF STATE OF	CREPORT State Well No. 1 V			
SALEM, OREGON STATE ENGINEER	Decudous is smount wat	er level i	s	
(1) OWNER: SAI FM. OREGON.	lowered below static level	STOT	TLCR	
(1) OWNER: Name DETTWIYLER + SCHATTOGE BY BRIEF	Was a pump test made? Yes \(\) No If yes, by whom?	SUL	PLY	
	151	after	Krs.	
Address RT-2 Box 280		10	2 ,	
SIL VERTON OREGON	" 3/0 " 1/			
	. 400 " 51 "		 .	
(2) LOCATION OF WELL:	Bailer test gal./min. with ft. drawdown	after	hrs.	
County MARION Owner's number, if any 3/3	70-1-		344	
- 1/1/ www		02 D Vot	No	
Section	Temperature of water 56 Was a chemical analysis mad	st C res	-	
Bearing and distance from section or subdivision corner		5 1-1	2inches.	
986 CHAINSE. FROM N. W CORNER	(12) WELL LOG: Diameter of well			
THENCE 445 CHAINS S.	Depth drilled 140'6 ft. Depth of completed wel		0 6tt.	
CHEWAGE THE PROPERTY OF THE PARTY OF THE PAR	Formation: Describe by color, character, size of material show thickness of aquifers and the kind and nature of th stratum penetrated, with at least one entry for each character.	and struc	ture, and	
1	show thickness of aquifers and the kind and nature of th	e materia	rmation.	
The state of the s			- Day	
	MATERIAL	PROM	TO	
N. N. W. Street I. Committee in the Committee of the Comm	7098014	3'	2'	
TYPE OF WORK (check):			24	
Abandon []	CLAY YELLOW COLOR	22		
Well M Deepeling	CLAY BLUE COLOR	16	40	
If abandonment, describe material and procedure in Item 11.	SAND MUERY. YELLOW COLOR	15	55	
(4) PROPOSED USE (check): (5) TYPE OF WELL:		6	61	
(4) 1101 0022 002		- 19	1 -2	
estic Industrial Municipal Rotary Driven Rotary Industrial Industrial Rotary Industrial I	WATER GRAVEL +SAND HO	-	62	
_ Cable	CEMENTED ERAVEL	6	68.	
ation Test Well Other Dug Bored	PLAY YELLOW EOLOR	5"	73	
Tribad N	CEMENTED GRAVEL # 2" YELLOW	25	98	
(6) CASING INSTALLED: Threaded Welded	CEMENTED ORNOCE PER TURE	7.6.1	105'6"	
10" 1." Biam, from ft. to ft. Gage	CEMENTOD GRAVEL # 2"- BLUS			
"Diam. fromft. toft. Gage	ERAULL + JAHD W.B. 60 G.P.M.	6.	1061	
" Diam. fromft. toft. Gage	DEMENTED GRAVEL BLUE	1'_	107	
Diam. From	CLAY BLUE COLOR	4.	111	
(7) PERFORATIONS: Perforated? X Yes \(\square\) No	CLAY DENCE WILL	3.	114	
(1)	CENENTED CRAVEL HU"-	11	115	
	WHTER SAHO			
SIZE OF PETOTAGOTO	SAND MUCKY GRAYCULUR	121	127	
320 perforations from 74 ft to 6 ft.	SHALE GRAY COLUR	10'	137	
G. v. 628' "		41	140.	
portoruzona z-	MUCKY SA40	-	-	
periorations from				
perforations fromft_ toft.				
perforations fromft. toft.	CASING PLUGGED AT BO	TTO	Ar .	
	TO SHUT OUT MUCKY SA	NA		
(8) SCREENS: Well screen installed □ Yes X No				
(4) 502222	WHICH IS WATER BEAR	120	-	
acturer's Name	(CEMENT PLUE)		-	
Model No.				
Diam. Slot size Set from ft. to ft.	Work started 5 - 9 1957 Completed	-11	10 7	
Diam, Slot size Set from ft, to ft,	Work started 3 - 9 1957 Completed		/	
Diani, and the second s	440		201 521	
ONSTRUCTION:	(13) PUMP: 7712 BANKS	PU.	MP CO.	
ell gravel packed? Yes No Size of gravel:	Manufacturer's Name			
	Type: TURBINE	H.P	2017	
Gravel placed fromft, toft	Туре:		1.0 mg. mg.	
Was a surface seal provided? XYes No To what depth?ft				
Material used in seal— STEEL PLATE	Well Driller's Statement:			
Did any strata contain unusable water? XYes \(\sigma\) No	This well was drilled under my jurisdiction and this report is			
Type of water? COOD Depth of strata 6	true to the best of my knowledge and belief.			
Type of water?	TA SUPER + SONS			
Method of sealing strata off DHCK TICE	Method of sealing strata off BACK FILL 741 70 106 NAME J. A. SNEED + SONS (Person, firm, or corporation) (Type or print)			
(10) WATER LEVELS.				
Static level 30 ft. below land surface Date 0 121				
Artesian pressure lbs. per square inch Date Driller's well number				
All alal & ball cas	m som I and			
Log Accepted by: Melluy Cr Selama (Esigned) [Signed]				
Bis 10 00 1 Well Driller)				
Signed and Exclemitable. Date	License No Date	17-	, 19.0	
(Owner)				
CTION A DISTRICTION AT	SHEETS IF NECESSARY)			
. (USE ADDITIONAL	A CONTRACTOR OF THE CONTRACTOR		(90)	



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