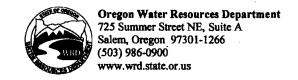
### **Application for**

## **Permit Amendment**



Part 1 of 4 - Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

RECEIVED Check all items included with this application. (N/A = Not Applicable)MAR 3 1 2011 Part 1 – Completed Minimum Requirements Checklist. WATER RESOURCES DEP Part 2 – Completed Permit Amendment Application Map Checklist. Part 3 - Completed Permit Amendment Application - Applicant Information and Signature. Part 4 – Completed Permit Amendment Application – Water Use Permit Information. Please include a separate Part 4 for each permit. List all permit(s) to be amended here: Attachments: Ø Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). Permit amendment fees – Amount enclosed: \$ 1200. See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0883. N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is not the permit holder of record and needs to be assigned to the permit; or the landowner of the proposed place of use is not the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml). Assignment is not needed if applicant is the permit holder of record. N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant, or other permit holders of record that are not listed as applicants. N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form is not required if any of the following apply: Water is to be diverted, conveyed, and/or used only on federal lands. П All of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone. X The proposed changes are all located on the property reviewed in Land Use form enclosed in Water Right Application Folder # 4-13800. N/A For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. Water Well Report(s)/Well Log(s) (For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete \_\_ Assignment Form and fee not enclosed/insufficient Land Use Form not enclosed or incomplete Additional signature(s) required Part \_\_\_\_ is incomplete Other/Explanation Staff: 503-986-0 Date:

Permit Amendment Application - Page 1 of 7

Revised 2/5/2010

Your permit amendment application will be returned if any of the map requirements listed below are not met.

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

	N/A	If more than three permits are involved, separate maps for each permit.
Z		Permanent quality printed with dark ink on white or clear paper or film.
ď		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, or up to 30 x 30 inches. For 30 x 30 inch maps, three (3) paper copies and an electronic copy in a .pdf, .tiff or .jpg format are required.
Ø		A north arrow, a legend, and scale.
Ø		The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$ , $1 \text{ inch} = 1,320 \text{ feet}$ , the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$ , or a scale that has been preapproved by the Department.
Ø		Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
Ø		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
Z		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
		Existing place of use that includes separate hachuring for each water use permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
	□ N/A	If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
Ø		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
Ø	□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°). <b>RECEIVED</b>

## Part 3 of 4 - Applicant Information and Signature

Applicant Information				
APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Flord and Fudor	-a Wi	son	541-443-6592	541-379-3104
ADDRESS		1 0 1	220	FAX NO.
66532 East Birch	STATE	d. R. B.		541-443-2029
P. Pock	OR	2IP 97868	Sheeps she	arr & Yahoo com
Agent Information - The ag	ent is auth	norized to represen	it the applicant in all n	natters relating to this application
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
СПҮ	STATE	ZIP	E-MAIL	
Check this box if the Reinvestment Act.  Is the applicant the period of the completed at the complete at	is project (Federal s mit holden assignme	t is fully or partia stimulus dollars) er of record?	ally funded by the A Yes \sum No	prrespondence to Agent.  merican Recovery and  gnment fee), assigning all or a
An affidavit o applicant to a	f consent nend the	permit.	holder(s) of record	that gives permission for the
I (we) affirm that the info	rmation o	contained in this	application is true an	d accurate.
Applicant signature	Hilo	Name (and ti	tle if applicable) (print)	3-28 <sup>2</sup> 011 Date 3-28-11
Applicant signature	ZW	Name (and ti	tle if applicable) (print)	328- 11 Date
Add a well for final extension 04/11/1994 was not We also updated I of This we need to	of ti able he old o tran	lemental ume for per to meet the water sys sfer water	vater use and mit 6-12413 water deman stem to irriga red Ae we had	for the amendment(s):  I to comeplee tare  The well dr. lled on  I needed for The 300 Ac.  From circles as a result  I under Weellines to The
Area that is now a	nder Kanar	to The real	This area is	shown on The map Pervaded water right, map in cluded
THE WITH DE IVOC	J		7 77	RECEIVED

MAR 8 1 2011

FS

Check one of the following:		
The applicant is responsible for comple continue to be sent to the applicant.	etion of change(s). Notices a	nd correspondence should
The permit holder(s) of record will be the final order is issued. Copies of not holder(s) of record.		
Check the appropriate box, if applicable:		
Check here if any of the permits propose by an irrigation or other water district.	ed for amendment are or will	be located within or served
IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP
Check here if water for any of the permits contract for stored water with a federal age		ce agreement or other
ENTITY NAME	ADDRESS	
СПҮ	STATE	ZIP
To meet State Land Use Consistency Requirer city, municipal corporation, or tribal government conveyed or used.		
Unatilla county	ADDRESS 2/6 SE 4Th	st.
crry	STATE	2IP 97882
ENTITY NAME	ADDRESS	
СПҮ	STATE	ZIP

**RECEIVED** 

MAR 3 1 2011

WATER RESOURCES DEPT SALEM, OREGON

1 11220

Please use a separate Part 4 for each permit being amended.

#### PERMIT # 6 12413

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

AT . TOU DAD DAY	. ,	1 1 1 1 1	n it a name or number here.)
(Note: It the U() 1/U()A	name is not specified	in the nermit accim	i it a name or niimber bere \
mole. If the robit OA	manic is not specific		i it a manic of mumber nere.
(	<b>I</b>	, J	,

POD/POA Number Mumber	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag#L)	T <b>w</b>	R S	3	A SE		A LOUIS SELECTION	Measured Distances (from a recognized survey corner)
	Authorized		9	-					330'E \$ 595'N
Well I	Proposed		15	32 E	28	SU	NW		From w 1/4 cor. Section 28
^	Authorized		-	*					45.45 605
<i>H</i>	✓ Proposed		1 5	32 E	28	SW	Nω		118.832640
	Authorized								
	Proposed								
	Authorized		:						
	Proposed								

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

☐ Place of Use (POU) ☐ Point of Appropriation/Well (POA)
☐ Point of Diversion (POD) ☐ Additional Point of Appropriation (APOA)
☐ Additional Point of Diversion (APOD) ☐ Surface water POD to Ground Water POA (SW/GW)

Will all of the proposed changes affect the entire water use permit?
☐ Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the

No Complete all of Table 2 to describe the portion of the permit to be changed.

"CODES" listed above to describe the proposed changes.

RECEIVED

MAR 3 1 2011

WATER RESOURCES DEPT SALEM, OREGON

1 11220

Table 2. Description of Changes to Water Use Permit # (2-124/3

11220

Ţ

List only the part of the permit that will be changed. For the acreage in each 1/4 1/4, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, specify the acreage associated with each POD/POA.

Authorized ("from" lands) as they	horized ("from" lands	ed ("from" lands	from" lands	" lands	<b>∫</b> 22	as T	hey appe	At Dear	before th Acres	appear before the changes  Gw Acres POD(s) or  Got of (if Pod(s) (name				Rng	F. S	bosed	od ("to" // //	lands)	after the Gyr	Proposed ("to" lands) after the changes  Tax Gvt Acres Sec 1/4 1/4 Lot on (if	changes Acres POD(s)/POA(s) (if to be used (from
Lot DLC app	Lot	Lot	Lot	Lot	Lot		C applicable) 0	oplicable)	0	r number from Table 1)	nom previous page)			•		4.4		<u>Ş</u>	DIC	applicable)	Lot DLC applicable) Table 1)
S 9 E 15 NE NW 100 15.0	E 15 NE NW 100	15 NE NW 100	NE NW 100	NW 100	100		15.0	15.0		POD #1 POD #2	POU/POD	61	S 9	Ħ	15		NW NW		1	10.0	POD #5
u u u u u u u u u EXAMPLE	1 1 1	3 3 3	3 3	3	3	3		XAMPLE		#		2	8 8	田	15	SW	SW NW	200		5.0	POD #6
S 32 E 29 NE NE 500 2.28	500	500	500	500	500		2.28	2.28		Poa-I		/	- <u>2</u> 2	E	28	×	J NW	S 32 E 28 NW NW 600		3.90	Pra 1 A POA-A
S 32 E 29 NW NE 500 6,18	29 NW NE 500 6,18	29 NW NE 500 6,18	81.9	81.9	81.9	81.9				Pca - I			53	Z. E	29	ΝÉ	N	532 E 29 NE NE 500		1,89	Poa-1 A POA-A
5 32 E 29 SW NE 500 10,97 F	500 10,97	500 10,97	500 10,97	500 10,97	500 10,97	10,97			9	Poa-1			53	E	29	Na	NE	532 E 29 NW NE 500		2,23	Poa - I APOA - A
601 005	601 005	601 005	601 005	601 005	601 005	607			🗸	Poa-1		7	5 3	? E	29	بای	NE	5 32 E 29 SW NE 500		1,00	Ap04-A
S 32 E 29 NE SW 500 /6.61	16.61	16.61	16.61	16.61	16.61	16.61			Į	Poa-1			5	LE	79	NE	NU	S 82 E 29 NE NW 500		8.52	Poc -1 APOA-A
5 22 E 29 NW SE 500 8.33	2.33	2.33	2.33	2.33	2.33	2.33	7.33	2.33	_ ~	Poa-1		~	3	2 E	29	SE	<b>∑</b>	S 32 E 29 SE NW 500		6.53	100-1 APOA-A
5 32 E 29 SE SE 500 , 23	500 , 23	500 , 23	500 , 23	500 , 23	500 , 23	, 23				Poa-1		-5	3.	Z E	29	NE	Sω	S 32 E 29 NE SW 500		3,40	Pca-1 APOA-A
												1	5 3	2 E	29	Nu	Mw	5 32 E 29 NW NW 500		1.10	Po a -2 APOR -A
													53	7	73	გთ	3	532 E 29 SW NW 500		16.08	P. c 1 APOB-A
TOTAL ACRES 45, 19	ES	ES	ES	ES	ES	ES		45.19									TOTA	TOTAL ACRES	ŒS	45019	

# RECEIVED

MAR S 1 2011

WATER RESOURCES DEPT SALEM, OREGON are being moved to cover The ground Now under excles That was not

Additional remarks: The Acremoved

For a	change in place of use:
Does	the permit holder of record own or control the land TO which the place of use is being moved?
per	O, the landowner of the land TO which the place of use is being moved must be assigned to the mit as a permit holder of record by submitting a completed Request for Assignment form and the wired statutory fee for an assignment.
Is the	proposed place of use contiguous to the authorized place of use? X Yes No
unle for t 496 listi	permitted place of use can be moved only to lands that are contiguous to the authorized place of use ess the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the ng agency. Contiguous land being either adjacent land or land separated from the land to which a nit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.
	here other water rights certificates, water use permits or ground water registrations associated the "from" or "to" lands?   Yes  No
If Y	ES, list the other certificate, permit, or ground water registration numbers:
land to a	the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same of for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change water right certificate or ground water registration must be filed separately in a water right transfer lication or ground water registration modification application, respectively.
For a	change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:
	Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. ( <b>Tip</b> : You may search for well logs on the Department's web page at: <a href="http://apps2.wrd.state.or.us/apps/gw/well_log/Default.aspx">http://apps2.wrd.state.or.us/apps/gw/well_log/Default.aspx</a> )
OR	
	Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log.
	Construction of Point(s) of Appropriation (s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the

accompanying application map. Failure to provide adequate information is likely to delay the processing of your transfer application. For proposed wells, we recommend that you consult a licensed well driller, geologist or certified water right examiner for the proper information needed to complete the table.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag.	Total well depth	Casing Diameter	Casing Intervals (feet)	Scal <sup>T</sup> depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of il completed well (in feet)	Source aquifer (sand, if gravel, basalt, etc.)	Well- specific rate (cfs or gpm). If less than full rate of water right
We 1/I	Ves		410	10"	20'	18'	NA	151	basult	6506pm
WellA	No		410	10"	20'	36'	NA	Some	basalt	650 GPM
		_								

Revised 2/5/2010

Permit Amendment Application - Page 7 of 7

RECEIVED

FS

WATER WELL REPORT

RECEIVED STATE OF OREGON

APR 1 5 1994

Instructions for completing this report are on the last page of this form. Well Number (9) LOCATION OF WELL by legal description: Name FLOYD WILSON County Limatelle Latitude Longitude BIRCH CREEK Address Township / 5 N or S Range E or W. WM. PILOT ROCK State Zip 97868 1/4 1/4 (2) TYPE OF WORK Tax Lot Block Subdivision New Well Deepening Alteration (repair/recondition) Abandonment Street Address of Well (or nearest address) (3) DRILL METHOD: (10) STATIC WATER LEVEL: Rotary Air Rotary Mud Cable 4-13-94 Other 15 ft. below land surface. Date (4) PROPOSED USE: Artesian pressure lb. per square inch. Date (11) WATER BEARING ZONES: Domestic Community Industrial Irrigation ☐ Injection Thermal Livestock Other (5) BORE HOLE CONSTRUCTION: Depth at which water was first found Special Construction approval Yes FNo Depth of Completed Well 410 ft. Explosives used Yes No Type To **Estimated Flow Rate** SWL From 80 SEAL HOLE 15 186 187 230 100 Sacro or pounds 221 Material 18 15 ð PTO COM 0 257 280 300 10 9/18 18 410 700 345 280 408 1000 + 385 (12) WELL LOG: How was seal placed: Method  $\square$ A ΠE Ground Elevation TRAMME Other. Backfill placed from fL. Material Prom SWL Material To fL Gravel placed from ft. to Size of gravel Sall 3 (6) CASING/LINER: 3 SEND 7 Steel Welded Threaded GRAT BASALT 7 21 Ть Conce 25ء 18 O 21 Casing: 10 +2 BROWN BASALT 79 BLECH BASALT 79 145 187 Rep 145 Black 187 195 Liner: Rep 195 205 П Black 205 221 Final location of shoe(s) BROWN 221 230 (7) PERFORATIONS/SCREENS: BLZCH 230 257 Method Perforations ReD 157 280 Screens Type Material BROWN 280 348 348 385 BLZCH From 385 408 BROWN 408 410 BASALT BLACK  $\Box$ . . . 🗀 (8) WELL TESTS: Minimum testing time is 1 hour 4-5-94 4-11-94 Date started Completed (unbonded) Water Well Constructor Certification: **Howing** Pump Bailer Air I certify that the work I performed on the construction, 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 Yield gal/min Drawdown Drill stem at Time 1000+ 400 1 hr. and belief. WWC Number \_\_\_ 1532 Perry STORHAMP Date 4-13-94 (bonded) Water Well Constructor Certification: Temperature of water Depth Artesian Flow Found Was a water analysis done? Yes By whom I accept responsibility for the construction, alteration, or abandonment work Salty Muddy Odor Colored Date OF WED performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief. WWC Number \_ 544 Depth of strata: MAR SIZIII Signed James Sund Date 4-13-94 ORIGINAL & FIRST COPY-WATER RESOURCES DERARDATES COND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

11220