

**Application for  
Ground Water Registration  
Modification  
Part 1 of 4 - Minimum Requirements Checklist**

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

WATER RESOURCES DEPT  
SALEM, OREGON

**This ground water registration modification 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.

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**Check all included with this application (N/A = Not Applicable)**

- Part 1 - Completed Minimum Requirements Checklist.
- Part 2 - Completed Ground Water Registration Modification Application Map.
- Part 3 - Completed Ground Water Registration Modification Application - Applicant Information and Signature.
- Part 4 - Completed Ground Water Registration Modification Application - Ground Water Registration Information. (Only one ground water registration per application, **unless** the ground water registrations to be modified are layered).
- Completed Ground Water Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).

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- Ground water registration modification fees - Amount enclosed: \$ \_\_\_\_\_. See the Department's Fee Schedule at [www.wrd.state.or.us](http://www.wrd.state.or.us) or call (503) 986-0900.

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**Attachments:**

- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is the owner of the land to which the registration is appurtenant and is **not** the registration certificate holder of record. The Request for Assignment Form is available online at <http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml>. Assignment is not needed for any other person or entity who can demonstrate that they are authorized to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) or the applicant is named on the certificate of registration or has been assigned to the certificate of registration.
- N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form not required if any of the following apply:
  - Water is to be diverted, conveyed, and/or used only on federal lands.
  - 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.
- N/A For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, Water Well Report/Well Log.

(For Staff Use Only)

**WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):**

- Application fee not enclosed/insufficient
- Map not included or incomplete *scale # of acres*
- Land Use Form not enclosed or incomplete
- Assignment Form and fee not enclosed/insufficient
- Additional signature(s) required
- Part \_\_\_\_ is incomplete

Other/Explanation Application Not Signed - page 3 of 7  
Staff (Lew) Aranda 503-986-0 881 Date: 2/24/11

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Part 2 of 4 - Ground Water Registration Modification Map Checklist

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Your ground water registration modification 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 not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

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Permanent quality printed with dark ink on white or clear paper or film. FEB 24 2011

The size of the map can be 8 1/2 x 11 inches, 8 1/2 x 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. WATER RESOURCES DEPT SALEM, OREGON

A north arrow, a legend, and scale.

The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.

Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines.

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.

Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.

Existing place of use that includes hachuring, 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 registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.

If you are proposing a modification in place of use, show the proposed place of use with hachuring including 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.

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Existing point(s) of appropriation with distance and bearing or coordinates from a recognized survey corner. WATER RESOURCES DEPT SALEM, OREGON

If you are proposing a modification in point(s) of appropriation, 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°).

**Part 3 of 4 – Applicant Information and Signature**

**Applicant Information**

APPLICANT/BUSINESS NAME <i>Patricia Sue Elmenhurst Trust</i>		PHONE NO. <i>541-938-7662</i>	ADDITIONAL CONTACT NO. <i>541-861-0042</i>
ADDRESS <i>P.O. Box 1040</i>		FAX NO. <i>n/a</i>	
CITY <i>Milton-Freewater</i>	STATE <i>OR</i>	ZIP <i>97862</i>	E-MAIL <i>n.elmenh@msn.com</i>

**Agent Information** – The agent is authorized to represent the applicant in all matters relating to this application

APPLICANT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS		FAX NO.	
CITY	STATE	ZIP	E-MAIL

If an agent is listed above, please check one of the following:

- Please send all correspondence to Agent. Send copies of correspondence to Applicant; **OR**
- Please send all correspondence to Applicant. Send copies of correspondence to Agent.
- Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

Is the applicant the sole owner of the land on which the ground water registration modification, or portion thereof, is located?  Yes  No

If NO, include signatures of all landowners on this form or attach affidavits of consent from all landowners or individuals/entities to which the ground water registration has been conveyed.

(Check one box)

By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the ground water modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a); **OR**

- I (we) affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the ground water registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

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**I (we) affirm that the information contained in this application is true and accurate.**

*Patricia Sue Elmenhurst*      *Patricia Sue Elmenhurst*      *5/11/11*  
Applicant signature      Name and title if applicable (print)      Date

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Applicant signature      Name and title if applicable (print)      Date

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In your own words tell us what modifications you want made to this ground water registration:  
*pasture irrigation with 2" buried pipe & 3 risers. We already have the system in place that irrigates tax lots 4000 and 4005. Existing system will stay the same.*

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**Check the appropriate box, if applicable:**

Check here if the ground water registration proposed for modification is or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

Check here if water for the ground water registration is supplied under a water service agreement or other contract with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME <i>Umatilla Co.</i>	ADDRESS <i>216 S.E. 4th Street</i>	
CITY <i>Pendleton</i>	STATE <i>Pendleton OR</i>	ZIP <i>97801</i>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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**Part 4 of 4 – Ground Water Registration Information**

Please use a separate Part 4 for each registration being modified.

**CERTIFICATE OF REGISTRATION # GR 3575**

**Table 1. Location of Authorized and Proposed Point(s) of Appropriation (POA)**  
 (Note: If the POA name is not specified in the registration, assign it a name or number here.)

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	OWRD Well Log ID# (or Well ID Tag # L-_____)	Twp	Rng	Sec	1/4	Tax Lot, DEC or Gov't Lot	Measured Distances (from a recognized survey corner)
	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	UMAT 56225	6 N	35 E	25	SE NW	4000	613' E. from a point 7' N. from SW corner
	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	UMAT 4616	6 N	35 E	25	SE NW	4004	S.E. 1/4 of NW 1/4 Sec. 25 " " " " " " " "
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

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

- |   |   |
|---|---|
| <input type="checkbox"/> Place of Use (POU)     | <input checked="" type="checkbox"/> Point of Appropriation (well) (POA) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Additional Point of Appropriation (APOA)       |

Will all of the proposed changes affect the entire ground water registration?

- Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the registration to be changed.

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Please use additional pages of Table 2 as needed

**Table 2. Description of Modifications to Registration Certificate # 3575**

List only the part of the registration that will be modified. For the acreage in each 1/4 1/4, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

Authorized ("from" lands) as they appear before the modification(s)						Proposed ("to" lands) after the modification(s)																										
Twp	Rng	Sec	1/4 1/4	Tax Lot	Cvt Lot or DLC	Acreage (if applicable)	Type of USE listed on registration	POA(s) (name or number from Table 1)	Proposed Modifications (see "CODES" from previous page)	Twp	Rng	Sec	1/4 1/4	Tax Lot	Cvt Lot or DLC	Acreage (if applicable)	New Type of USE	POA(s) to be used (from Table 1)														
2	S	9	NE NW	100	"	15.0	Irrigation	POA #1 POA #2	POU/POA	2	S	9	NW	500	1	10.0		POA #5														
"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	SW	500		5.0		POA #6														
<del>6</del>	35E	25	SE NW	4005		2.0	irrigation	POA #1	POA																							
TOTAL ACRES																2.0	TOTAL ACRES															

Additional remarks:

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Revised 2/3/2010

**For a modification in place of use or character of use:**

Are there other water right certificates, water use permits, or ground water registrations associated with the "from" or "to" lands?  Yes  No

If YES, list the other certificate, water use permit, or other ground water registration numbers:



Pursuant to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a ground water registration on the "to" lands must be filed separately with a ground water registration modification.

**For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:**

Well log(s) are attached for each well that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

(Tip: You may search for well logs on the Department's web page at:

[http://apps2.wrd.state.or.us/apps/gw/well\\_log/Default.aspx](http://apps2.wrd.state.or.us/apps/gw/well_log/Default.aspx))

OR

Describe the construction of the well(s) in Table 3 for any wells that do not have a well log.

**Table 3. Construction of Point(s) of Appropriation**

Any well(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 No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Scal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
see attached well logs										

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WELL I.D. # L \_\_\_\_\_

(1) LAND OWNER Well Number \_\_\_\_\_  
Name Luke H Brooks  
Address Rt 3 Box 274 G  
City Milton-Freewater State OR Zip 97862

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 62 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing: <u>6</u>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_

Screens		Type	Material				
From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing	Time
			<input type="checkbox"/> Artesian	1 hr.
			<input type="checkbox"/> Pump <input type="checkbox"/> Bailor <input type="checkbox"/> Air	

Temperature of water \_\_\_\_\_ Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County Waukena Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 6 N N or S Range 35 E E or W. WM.  
Section 25 SE 1/4 NW 1/4  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
<u>None by walls indicate alluvium at this depth.</u>			

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Date started \_\_\_\_\_ Completed 1983  
SOURCE OF DATA/INFO  
Application file G-11185. Depth from pump test submitted in 1974. listed as prod 1 on certificate 64042  
COMPILED BY: Karl L. Wozniak  
Ground Water Section  
DATE: 9-11-2008



STATE ENGINEER  
Salem, Oregon

UMAT  
4666

# Well Record

STATE WELL NO. 6N/35-25F  
COUNTY Umatilla  
APPLICATION NO. CR-3575

OWNER: W. C. Mason

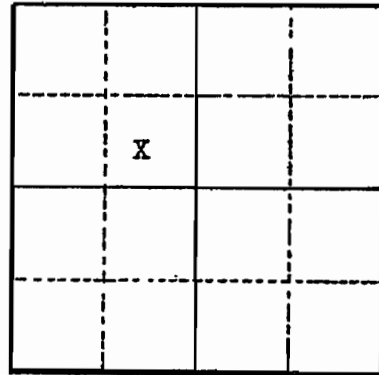
MAILING ADDRESS: Route 3, Box 275

LOCATION OF WELL: Owner's No. \_\_\_\_\_

CITY AND STATE: Milton-Freewater, Oregon

SE 1/4 NW 1/4 Sec. 25 T. 6 N. R. 35 E. W., W.M.

Bearing and distance from section or subdivision  
corner 613 ft. E. from a point 7 ft. N. from SW  
corner SE 1/4 of NW 1/4 Sec. 25



Section 25

Altitude at well \_\_\_\_\_

TYPE OF WELL: Drilled & Date Constructed 1915 & 1922

Depth drilled 65 ft. Depth cased 42 ft.

### CASING RECORD:

6 inch casing set from 22 ft. to 42 ft. Dug 22 ft. Feb., 1915  
Drilled 43 ft. June, 1922

### FINISH:

### AQUIFERS:

### WATER LEVEL:

PUMPING EQUIPMENT: Type 3 in. Krough pump centrifugal H.P. 5  
Capacity 300 G.P.M.

### WELL TESTS:

Drawdown 40 ft. after \_\_\_\_\_ hours 337 G.P.M.  
Drawdown \_\_\_\_\_ ft. after \_\_\_\_\_ hours \_\_\_\_\_ G.P.M.

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USE OF WATER Irrigation Temp. \_\_\_\_\_ °F. MAY 13 2011, 19

SOURCE OF INFORMATION Well Registration Statement

DRILLER or DIGGER \_\_\_\_\_ WATER RESOURCES DEPT

ADDITIONAL DATA: Log x Water Level Measurements \_\_\_\_\_ Chemical Analysis \_\_\_\_\_ SALEM, OREGON  
Aquifer Test

### REMARKS:

Log: Dug 22' - 6' top soil 16' - gravel  
drilled 45' thru gravel  
10' cement curving  
drill casing 20'

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