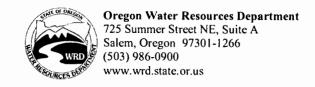
Application for

Permit Amendment



Part 1 of 4 - Minimum Requirements Checklist

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)AUG 04 2010 \boxtimes Part 1 – Completed Minimum Requirements Checklist. WATER RESOURCES DEFT \boxtimes Part 2 – Completed Permit Amendment Application Map Checklist. SALEM, OTTEGON \boxtimes Part 3 – Completed Permit Amendment Application – Applicant Information and Signature. \boxtimes 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: G-16071. Attachments: \boxtimes Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). \boxtimes Permit amendment fees – Amount enclosed: \$ 1200.00. See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0883. \Box 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: П 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. \boxtimes The proposed changes are all located on the property reviewed in Land Use form enclosed in Water Right Application Folder # G-16531. \boxtimes 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/infectiveD Land Use Form not enclosed or incomplete Additional signature(s) required Part ____ is incomplete Other/Explanation JUN 28 2011 503-986-0 Date: _ Staff: WATER RESOURCES DEPT

This permit amendment application will be returned if Parts 1 through 4

Part 2 of 4 - Permit Amendment Map Checklist

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. AUG 042010
\boxtimes		Permanent quality printed with dark ink on white or clear paper or film. WATER RESOURCES LEPT SALEM, OREGON
\boxtimes		The size of the map can be 8½ x 11 inches, 8½ x 14 inches, or up to 30 x 30 inches EEEIVED 30 x 30 inch maps, three (3) paper copies and an electronic copy in a .pdf, .tiff or .jpg format are required.
\boxtimes		A north arrow, a legend, and scale.
\boxtimes		SALEM, OREGON 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.
\boxtimes		Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
\boxtimes		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
\boxtimes		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.
\boxtimes		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.
\boxtimes	□ 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°).

Part 3 of 4 - Applicant Information and Signature

APPLICANT/BUSINESS NA			PHONE NO.	ADDITIONAL CONTACT NO.
Audric Enterprises, Inc			831-427-2727	
ADDRESS				FAX NO.
C/O James Thompson,	Comstock Thomp	oson Kontz & B	renner	831-458-1165
340 Soquel Ave Suite 2				
CITY	STATE	ZIP	E-MAIL	
Santa Cruz	CA	95065	jamest2643@msn	.com
Agent Information –	The agent is aut	horized to repre	esent the applicant in all	l matters relating to this application
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Martha Pagel, Schwabe	Williamson & W	'yatt	503-540-4260	
ADDRESS				FAX NO.
	400			-00 mo / -000
530 Center St. NE, Suit	e 400			503-796-2900
CITY	STATE	ZIP	E-MAIL	
	STATE OR d above, please d all correspond	97301 check <u>one</u> of lence to Agen	mpagel@schwabe the following: t. Send copies of cor	respondence to Applicant; OR
If an agent is listed Please sen Please sen Check this b Reinvestmer	d above, please d all correspond all correspond to a f this project Act. (Federal	check <u>one</u> of lence to Agen lence to Applit is fully or pastimulus dollar	mpagel@schwabe the following: t. Send copies of cont cant. Send copies of artially funded by the ars)	.com
If an agent is lister Please sen Please sen Check this b Reinvestmer Is the applicant t	state OR d above, please d all correspond all correspond ox if this project t Act. (Federal	check <u>one</u> of lence to Agen lence to Applit is fully or pastimulus dollar	mpagel@schwabe the following: t. Send copies of cont cant. Send copies of artially funded by the ars)	respondence to Applicant; OR correspondence to Agent.
If an agent is listed Please sen Please sen Check this b Reinvestmer	state OR d above, please d all correspond all correspond ox if this project t Act. (Federal	check <u>one</u> of lence to Agen lence to Applit is fully or pastimulus dollar	mpagel@schwabe the following: t. Send copies of cont cant. Send copies of artially funded by the ars)	respondence to Applicant; OR correspondence to Agent.
If an agent is listed Please sen Please sen Check this b Reinvestmer Is the applicant t If NO, include A com	state OR d above, please d all correspond all correspond ox if this project t Act. (Federal he permit hold either:	check <u>one</u> of lence to Agen lence to Applit is fully or pastimulus dollarer of record?	the following: t. Send copies of conticant. Send copies of artially funded by the ars) Yes No	respondence to Applicant; OR correspondence to Agent.

Applicant signature

Eric T. Miyasaka, President
Name (and title if applicable) (print)

7/30/l

Applicant signature

Name (and title if applicable) (print)

Date

In your own words tell us what change(s) you want made and the reason for the amendment(s): <u>The applicant is adding a point of appropriation to achieve the maximum authorized rate under this permit.</u>

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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 a 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.	d for amendment are or will l	be located within or served				
IRRIGATION DISTRICT NAME ADDRESS N/A						
CITY	STATE	ZIP				
Check here if water for any of the permits contract for stored water with a federal age	• •	ee agreement or other				
ENTITY NAME N/A	ADDRESS					
CITY	STATE	ZIP				
To meet State Land Use Consistency Requirementary, municipal corporation, or tribal governmentary conveyed or used.						
III and the Country	205 Main Street					



ENTITY NAME Klamath County	ADDRESS 305 Main Street	
CITY	STATE	ZIP
Klamath Falls	OR	97601

ENTITY NAME	ADDRESS	
N/A		
CITY	STATE	ZIP

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Part 4 of 4 - Water Use Permit Information

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

PERMIT # G-16071

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Tv	хр	R	ng	Sec	1 /2	4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1			41	s	11	Е	17	NW	sw	200	1320 feet north and 100 feet east from SW corner, Section 17
Well 2	☐ Authorized ☐ Proposed		41	s	11	E	17	SE	NW	200	1430 feet north and 2430 feet east from SW corner, Section 17
	Authorized Proposed										
Authorized Proposed											
Check	k all type(s) of c	change(s) pr	opos	ed b	elow	v (ch	ange	"COL	ES" a	are pro	vided in parentheses):
	Place of Use	(POU)						Point o	of App	ropriat	ion/Well (POA)
	Point of Div	ersion (POD))				\boxtimes	Additi	onal P	oint of	Appropriation (APOA)
	Additional P	oint of Diver	rsion	(AF	OD))		Surfac (SW/C		er POD	to Ground Water POA
Will a	all of the propos	sed changes	affe	et th	e ent	tire '	water	use p	ermit'	?	
\boxtimes	-	ete only the p ES" listed ab	_		•		•				the next page. Use the

Complete all of Table 2 to describe the portion of the permit to be changed.

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☐ No

Table 2. Description of Changes to Water Use Permit # G-16071

List only the part of the permit that will be changed. For the acreage in each 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.

[왕]	appear before f	cfore the changes POD(s) or Cres POA(s) (name	ges Proposed ('to".l. (s) or Changes (see "CODES")		Propo	sed ("to"	ands) a Tax	ffer the	Proposed ("to" lands) after the changes	POD(s)/POA(s)
Lot DLC applie	t on LC applicable)	or number from f	from previous page)	O.	gm	26	*	Lot	5 U	applicable)	DEC applicable) Table 1)
NE NW 100	15.0	POD #1 POD #2	POU/POD	2 S	<u>э</u>	15 N	NN NN	100	-	10.0	POD #5
3	" EXAMPLE	77		2 S	9 E	15 8	SW NW	200	Property .	5.0	POD #6
			APOA	41 S 1	11 E	o 2	SW NE			8.0	WELLS 1, 2
						∞	SE NE			1.0	WELLS 1, 2
						∞	NE SW			30.0	WELLS 1, 2
						∞	SE SW			35.0	WELLS 1, 2
						∞	NE SE			26.0	WELLS 1, 2
						∞	NW SE			40.0	WELLS 1, 2
						∞ ∞	SW SE			40.0	WELLS 1, 2
						∞	SE SE			39.0	WELLS 1, 2
AUG 0 = 2510				ne sobaddoni ndildii i		6	SW SW			4.0	WELLS 1, 2
WATER RESOURCES BEFT SALEM, OFESON				***************************************							
TOTAL ACRES							TOTA	TOTAL ACRES	ES		

Additional remarks: This is Table 2, Page 1 of 3. The additional point of appropriation will serve the entire place of use described in the permit, RECEIVED with no changes.

JUN 28 2011

WATER RESOURCES DEPT
Permit Amendment Application – Page 6 of 8 SALEM, OREGON

Revised 2/5/2010

Table 2. Description of Changes to Water Use Permit # G-16071

List only the part of the permit that will be changed. For the acreage in each ½ ½, 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.

	POD(s)/POA(s) to be used (from Table 1)	POD #5	POD #6	WELLS 1, 2										
3:	POD(s)/PO/ to be used (f	PO	PO	WEL										
Proposed ("to" lands) after the changes	Gvi Acres Lot or DLC applicable)	10.0	5.0	10.0	25.0	40.0	22.0	40.0	40.0	40.0	40.0	40.0	28.0	
ıfter tf	Gwt Lot or DLC	-	en ani sanajani sasayan											ES
ands)	Tax GW Lot or Lot DLC a	100	200											ACR
("to"]	7/ 7/	NN NN	SW NW	WN	NW WN	N N	WN	Z	NE	Z	NE	WN	WN	TOTAL ACRES
peso	7	WW	SW	NE	WN	SW	SE	NE	WN	SW	SE	NE	NW NW	I
Prop	30S	15	15	16	16	16	16	17	17	17	17	17	17	
	Rng	9 E	9 E	11 E										
	Twp	S	S	S										
) 2	2	4							5. 1 1			
Proposed	U E	doa/noa	*	APOA										
efore the changes Proposed ("to" lands) after the	Tax Lot or (if or number from Table 1)	POD #1 POD #2	**************************************											
	Acres (if applicable)	15.0	EXAMPLE											
/ appe	Gvt Lot or DLC		"											ES
as the	Tex Lot	100	3											TOTAL ACRES
ands)	7, 7,	NW	"											OTAL
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933377728				1		1								
horize	Rng	9 E	" "											
Authorized ("from" lands) as they appear be	Twp Rng	2 S 9 E	" " " "											

Additional remarks: Table 2 Page 2 of 3.

AUG 04 2010

WATER RESOURCES DEPT SALEM, OREGON

SALEM, OREGON
Revised 2/5/2010

WATER RESOURCES DEPT

JUN 2.8 2011

Table 2. Description of Changes to Water Use Permit # G-16071

List only the part of the permit that will be changed. For the acreage in each ½¼, 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 appear before the changes Proposed
"CODES" from previous page)
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Sec., 13.18
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Additional remarks: Table 2 Page 3 of 3.

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JUN 28 2011

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JUN 28 2011

WATER RESOURCES DEPT

Permit # G-16071

	the permit holder of record own or control the land TO which the place of use is S \sum No	being moved?
peri	O, the landowner of the land TO which the place of use is being moved must be assignit as a permit holder of record by submitting a completed Request for Assignment ired statutory fee for an assignment.	
Is the	proposed place of use contiguous to the authorized place of use? Yes No	
unle for t 496. listir	permitted place of use can be moved only to lands that are contiguous to the authorized sess the change to non-contiguous lands is in furtherance of mitigation or conservation the purposes of benefiting a species listed as sensitive, threatened, or endangered under 192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as detering agency. Contiguous land being either adjacent land or land separated from the land it is authorized by roads, utility corridors, irrigation ditches or publicly owned rights	efforts undertaken r ORS 496.171 to rmined by the I to which a
	nere other water rights certificates, water use permits or ground water registration he "from" or "to" lands? 🛛 Yes 🗌 No	ons associated
	ES, list the other certificate, permit, or ground water registration numbers: <u>VAN BRII</u> (SEE KLAMATH BASIN ADJUDICATION CLAIMS 321-324)	MMER DITCH
land to a appl	e permit(s) are for irrigation or supplemental irrigation use, other water rights existing for irrigation that are subject to transfer must either change concurrently or be cancel water right certificate or ground water registration must be filed separately in a water ication or ground water registration modification application, respectively.	led. Any change right transfer
For a	change in point(s) of appropriation (well(s)) or additional point(s) of appropriati	
\boxtimes	Well log(s) are attached for each authorized and proposed well(s) that are clearly lab associated with the corresponding well(s) in Table 1 above and on the accompanying	eled and ECEIVED
	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)	AUG 04 2010
OR		WATER RESOURCES CEPT SALEM, OREGIN
\boxtimes	Describe the construction of the authorized and proposed well(s) in Table 3 for any have a well log.	wells that do not
Any well(accompanyour trans	Construction of Point(s) of Appropriation s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and ying application map. Failure to provide adequate information is likely to delay the paper of the proposed wells, we recommend that you consult a licensed well of water right examiner for the proper information needed to complete the table.	rocessing of
Proposed or Authorized POA	Is well already well, OWRD well D Tag well Casing Intervals depth(s) Geal of completed with Casing Intervals (in completed)	Source specific rate (cfs or gpm). If less than

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)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	specific rate (cfs or gpin). If less than full rate of water right
Well 2	No	N/A	±700'	24"	20'	0-20'		±60'	basalt	9.388cfs
				20"	322'	+2-320'				
				16"	325'	305'-630'				
				14"	80'	615'-695'	630'-695'			

For a change in place of use:

Amendment

STATE OF OREGON

WATER SUPPLY WELL REPORT

KLAM 55767

KLAM 55767

WELL ID # L 8	11588
WELLID* LO	
START CARD #	162568

(9) LOCATION OF WELL by legal description: One Audress: E.O. Doz. 1418. Oil: Historicile Oil: Originate in Latitude: Longinude: Oil: Originate in Latitude: Longinude: Oil: Originate in Company Air (Richards) Electric Mills of Completed (Longinude: Open Air (Sheards) Electric Mills of Completed (Longinude: Open Air (Sheards) Originate in Latitude: Longinude: Open Boll: Completed (Longinude: Open Boll: Octobro Completed (Longinude: Open Boll: Completed (Longinude:	(as required	•	RS 537.7	765)				(9) I OCATION		المحمدات المحمدات			
Name Author Enterprises Dec. Author Community	(1) OWNE	KK:		Wel	l Wambe	- 1-20*	ı	County: klem	UE WELL D	A legal gescu	ption:		
Address: FQ. Box 1418. City: Without 1500. City: Without 1500. City: Company Alberton reconditions Abandonment City: Depth of Work: Domestic Community Industrial Cother City: District Community Industrial District Cother City: Cother	Name: Au	dric P	nternrise		Numbe	1-20					outenance	·	_
Street Adjugued (Well (or nearest address)	Address: P	O. B	ox 1418					Section: 17	nw	110	8W	¼	
Street Adjugued (Well (or nearest address)				State: C	`a 2	Zip: 950	77	Tax Lot: uk	Lot:	Block: _	Subd	ivision:	
O DRILL MSTHOD: Cable Ca	-		_		(reselv)			Street Address o	f Well (or near	est address)		·	
Secretary Air Secretary May Cable Auger	New We		Deenenin	g []Alteration	n recondit	ion)[[A	handonment				Malone	nd.	
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The performance of water 61 Depth Artesian Flow Found Did any strata contain water not suitable for intended use? (explain) PERFORATIONS/SCREENS: Perforations Method: mechanical sir Holte Screen Type: Material: Serveen Type: Material: Destination Destination Material: Destination Destinati	Final location	on of	Shoe(e):		_								ļ
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basaltic rubble, volcanics, loose, caving Large round very hard cobble size		_	Mat	1081	T.	-							59
Large round very hard cobble size 671 700 59						May Same				e, caving	1000	1	-
Date Started: 11-30-06 Completed: 3-30-07	030 0	33	1/4 %	300							671	700	59
Date Started: 11-30-06 Completed: 3-30-07	-			 	111N 2) 8 -4 0	NH H						
(8) WELL TESTS: Minimum testing time is 1 hour Pump	-			 	30,1		j j						
(8) WELL TESTS: Minimum testing time is 1 hour Pump				MATE	A ALS	OURCE	13-17						
(inclonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is incompliance with Oregon water supply well construction standards. Market and information reported above are true to the best of my knowledge and belief. WWC Number 723 WWC Number 723 WWC Number 723 Depth of Strata: Depth of Strata: RECEIVED WATER RESOURCES DEPT WATER RESOURCES DEPT PART 2 6 2007 WATER RESOURCES DEPT SALEM OPERANT WE Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment to this well is in compliance with Oregon water supply well construction standards. Market Well Constructor Certification: I accept responsibility for the construction dates reported above. All work 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. PECEIVED WWC Number 723 Water RESOURCES DEPT SALEM OPERANT					CALEM	OREG	<u> 00</u>				Neted: 3	-30-07	
Pump Bailer Air Flowing Artesian Yheld grees Drawdown Drill Steem at Time 3000 200 1 hr. 2500 110 24 WWC Number 723 Temperature of water 61 Depth Artesian Flow Found Was a water analysis done? By where CEIVED Did any strata contain water not suitable for intended use? (explain) APR 2 6 2007 RECEIVED WATER RESOURCES DEPT SALEM OPERON	(8) WELL	LTE	STS: M								4	-14	
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2500 110 24 Temperature of water 61 Depth Artesian Flow Found Was a water analysis done? By where CEIVED Did any strata contain water not suitable for intended use? (explain) APR 2 6 2007 WATER RESOURCES DEPT SALEM OPERANT WWC Number 723 (bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work 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. RECEIVED WWC Number 723 WWC Number 723 The 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. RECEIVED WWC Number 723 Y-2 5-07		_		na Deffil	fitem at			construction stands	rds Meterials u	sed and informs	trion repo	rted above	e are true
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Temperature of water 61 Depth Artesian Flow Found Was a water analysis done? By where CEIVED Did any strata contain water not suitable for intended use? (explain) APR 2 6 2007 Depth of Strata: WATER RESOURCES DEPT SALEM OPERANT WATER RESOURCES DEPT SALEM OPERANT Well Constructor Cartification: I accept responsibility for the construction, alteration, or abandoument work 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 standard. This report is true to the best of my knowledge and belief. WECEIVED WWC Number 723 Y-2 5-07	2500 110 24						Signed					-	
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Did any strata contain water not suitable for intended use? (explain) APR 2 6 2007 RECEIVED WATER RESOURCES DEPT SALEM OPERON				7 By	WRE	CEN	/ED	I accept res	consibility for the	construction, a			
PECEIVED APR 2 6 2007 well construction standard. This report is true to the best of my knowledge and belief. RECEIVED www. Number 723 9-2 5-07	Did any stre	nte co	ntain wat	er not suitable	for inten	ded use?	(explain)	work performed or	this well during	the construction	a detes rep	corted abo	ove. All
RECEIVED WATER RESOURCES DEPT SALEM OPERON PECEIVED WWC Number 723 9-25-07								work performed du	tandards. This re	n compliance w nort is true to th	nus Urego so best of	m water s my know	uppty deden and
WATER RESOURCES DEPT 9-25-07	Depth of St	rata:		***	AFR	. 20	7401	belief.	//				
SMEN ODEGON		F	1ECE	:IVED	VATED D	ESOUR	CEC DEDT		- MEN			_	723
ORIGINAL & ATTEST COPPY (Mater Resources Department SECOND COPY - Constructor (1) 1 THIRD COPY - Customer				-	DAI	EN ODI	ECON	12					
	ORIGINA	L&	TKSTX	PP (H) (atc	r Resou	rces De	partment	SECOND COPY - Co	nstructor AUG	THURD	COPY	- Custor	mer

(12) WELL LOG: Ground Ele		To	ens.
Soil med sandy brn	From	2	SWI
	1 2	6	
hard pan dense brn	-	"	
clay soft bm	6	19	+
silt sandy brn	19	24	1
clay sticky brn-yellow mix	24	61	\top
conglmerate mix brn	61	63	1
clay soft brn	63	74	1
conglomerate sand mix brn, gry blk	74	77_	
claystone med brngry strks	77	101	
clay med brn	101	114	
claystone conglmerate brn	114	141	
sand packed med fine grain blk	141	219	
clay soft grey	219	262	
conglomerate med brn gry mix	262	276	
clay soft grey	276	310	
claystone conglomerate brn	310	336	
clay sandy brn	336	370	
clay sandy gry	370	523	
clay sticky gry	523	622	
basalt hard blk	622	631	
basalt fract blk	631	660	<u> </u>
loss circ zone no returns	660	671	59
basaltic rubble, volcanics, loose, caving			
large round very hard cobble size	671	700	59
	1	-	
eate Started: 11-30-06 Com	pleted; 3	30-07	

(2) TYPE OF WORK: New Well Deepening Alteration recondition) Abandonment (3) DRILL METHOD: ☑Rotary Air ☑Rotary Mud ☐Cable ☐Auger Other: (4) PROPOSED USE: Domestic ☐ Thermal (5) BORE HOLE CONSTRUCTION: Special Construction approval ☐ Yes ☒ No Depth of Completed Well 696 Explosives Used ☐ Yes ☒No Type Diameter From 28 23 19 How was seal placed: Method □A □B ☒C ☑ Other lower seal pumped frominside 16" up the Backfill placed from Gravel placed (6) CASING/LINER: CASING: Diameter 24 \boxtimes 21 .375 ls .375 \boxtimes 20 + 1 322 \boxtimes \boxtimes -306 .375 \boxtimes 16 628 LINER: -354 .250 12 \boxtimes Final location of Shoe(s): (7) PERFORATIONS/SCREENS: × Perforations Method: mechanical air Holte Screen Type: Material: Size From To ing Liner No. 630 693 1/4"2 500 (8) WELL TESTS: Minimum testing time is I nour ✓ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian Pump Yield gpm Drawdown Drill Stem at Time 3000 200 1 hr. 2500 110 24 Depth Artesian Flow Found By wh RECEIVED Temperature of water 61 Was a water analysis done? Did any strata contain water not suitable for intended use? (explain) APR 26 2007 Depth of Strata:

to the best of my knowledge and belief.

Signed

WWC Number 723 Date 4-25-07

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

AUG 04 2010

WWC Number 723

18525-07