

Application for Ground Water Registration Modification

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

Part 1 of 4 – Minimum Requirements Checklist

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.

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

- X Part 1 – Completed Minimum Requirements Checklist.
- X Part 2 – Completed Ground Water Registration Modification Application Map Checklist.
- X Part 3 – Completed Ground Water Registration Modification Application – Applicant Information and Signature.
- X 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).
- X Completed Ground Water Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- X Ground water registration modification fees – Amount enclosed: \$ **1125.00**. See the Department’s Fee Schedule at www.wrd.state.or.us or call (503) 986-0883.

Attachments:

- X 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.
- X X 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.
- X 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):

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input checked="" type="checkbox"/> Land Use Form not enclosed or incomplete	<input checked="" type="checkbox"/> Assignment Form and fee not enclosed/insufficient
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> Part _____ is incomplete
Other/Explanation: <i>No Land Use form or Assignment (see enclosed) + \$75 for assignment</i>	
Staff: <i>Dorothy Pedersen 503-986-0890</i>	Date: <i>9/7/2011</i>

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Part 2 of 4 – Ground Water Registration Modification Map Checklist

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.

- X Permanent quality printed with dark ink on white or clear paper or film.
- X The size of the map can be 8½ x 11 inches, 8½ 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.
- X A north arrow, a legend, and scale.
- X 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.
- X Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- X Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- X Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads and railroads.
- X Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.
- X 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.
- N/A 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.
- Existing point(s) of appropriation with distance and bearing or coordinates from a recognized survey corner.
- 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°).

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Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Rendata Industrial Park, LLC		PHONE NO. 541 476 1841	ADDITIONAL CONTACT NO.
700 MERLIN RD.			503 961 0910
GRANTS PASS	OR	97526	RENDA@YAHOO.COM

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

APPLICANT/BUSINESS NAME Quantum Engineering/James S. De Smet, PE, PG		208 765 2308	208 661 5200 (CELL)
2641 S. SILVER BEACH LOOP			206 653 9794
COEUR D'ALENE	ID	83814	QUANTUMENG@CDA.TWCBC.COM

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)

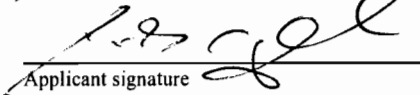
Is the applicant the sole owner of the land on which the ground water registration modification, or portion thereof, is located? Yes No

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.

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


Applicant signature

Patrick Engel/Gen Manger
Name and title if applicable (print)

9/6/2011
Date

Applicant signature

Name and title if applicable (print)

Date

In your own words tell us what modifications you want made to this ground water registration: **Two additional points of appropriation are being added to the existing groundwater certification and registrations (GR3519, GR3520, GR 3521 and C52994**

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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 Josephine County	501 NW 4 TH St.	
GRANTS PASS	OR	97526

ENTITY NAME US Department of Interior-BLM	ADDRESS 3040 Biddle Road	
MEDFORD	OR	97504

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Part 4 of 4 – Ground Water Registration Information

Please use a separate Part 4 for each registration being modified. See instructions at <http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml>.

CERTIFICATE OF REGISTRATION # GR3519

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	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
J18107 (GR3519)	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	J18107	35 S	6 W	21	SW NE	209	320' E, 47°30'N OF CENTER OF SEC 21
J18106 (GR3520)	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	J18106+	35 S	6 W	21	SW NE	209	325' E 2°N OF CENTER SEC 21
J18105 (GR3521)	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	J18105	35 S	6 W	21	SW NE	200	1360'E 36°10'N of CDNTER SEC 21
J3079	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	J3079	35 S	6 W	21	SW NE	200	470'N, 2320' E FROM SW COR OF SE1/4 NW1/4, SEC 21
J9938*	<input checked="" type="checkbox"/> PROPOSED	J9938	35 S	6 W	21	SE NE	200	1591' N 89.655° E OF CENTER SEC 21
LO2341	<input checked="" type="checkbox"/> PROPOSED	L02341	35 S	6 W	21	SW NE	200	1606' N 45.276° E OF CENTER SEC 21

*Location on well log differs from actual well location.

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation (well) (POA) |
| <input type="checkbox"/> Character of Use (USE) | <input checked="" 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 # GR3519

List only the part of the registration that will be modified. For the acreage in each $\frac{1}{4}$ $\frac{1}{4}$, 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.

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Authorized ("from" lands) as they appear BEFORE THE CHANGES										Proposed ("to" lands) AFTER THE CHANGES										
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Proposed Changes (see "CODES" from previous page)	Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
										APOA/POU	35 S	6 W	21	NE NW	700/600		6	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA/POU	35 S	6 W	21	NW NE			40	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA	35 S	6 W	21	SE NW	700		7	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA	35 S	6 W	21	SW NE			40	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA/POU	35 S	6 W	21	SE NE			40	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA/POU	35 S	6 W	21	NW SE	209		8	GI/C/QM	J18105, J18106, J18107, J3079	1956

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										APOA/POU	35 S	6 W	21	NW SE	209		8	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA/POU	35 S	6 W	21	NE SE	100/2 00/30 0/301/ 302		21	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA/POU	35 S	6 W	21	NE NE	100/B LM P ON D		2	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA/POU	35 S	6 W	22	SW NW	207/2 08/60 0/601		10	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA/POU	35 S	6 W	22	NW SW	207/2 08/50 0/600/ 601		19	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956
										APOA/POU	35 S	6 W	21	NW SE	200/2 00		9	GI/C/QM	J18105, J18106, J18107, J3079, J9938, L02341	1956

GI=General Industrial, C=Commercial

Note: Acreage designations in Table 2 above include only that acreage in Rendata Industrial Park, formerly bate Lumber Co.

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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? X Yes No

If YES, list the other certificate, water use permit, or other ground water registration numbers:
GR3520, GR3521 AND C52994



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:

X 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)

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)	Seal 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

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WATER WELL REPORT
STATE OF OREGON

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State Well No. 355/kw-21ac

State Permit No. _____

(1) OWNER:

Name MILLER REDWOOD CO.
Address P.O. Box 840
City GRANTS PASS State ORE

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rocky Air Driven Domestic Industrial Municipal
Rotary Mud Dug Irrigation Test Well Other
Cable Bored Thermal: Withdr. ml Reinflection

(5) CASING INSTALLED:

Steel Plastic
Threaded Welded
8" Diam. from 0 ft. to 140 ft. Gauge 250
" Diam. from _____ ft. to _____ ft. Gauge _____

LINER INSTALLED:

" Diam. from _____ ft. to _____ ft. Gauge _____

(6) PERFORATIONS:

Perforated? Yes No
Type of perforator used TORCH
Size of perforations 4 in. by 1/4 in.
40 perforations from 130 ft. to 140 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.

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.
Test 25 gal./min. with drill stem at 299 ft. 2 hrs.
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m.
Temperature of water 54.0 Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Special standards: Yes No
Well seal—Material used PORTLAND CEMENT
Well sealed from land surface to 30 ft.
Diameter of well bore to bottom of seal 12 in.
Diameter of well bore below seal 8 in.
Number of sacks of cement used in well seal 10 sacks
How was cement grout placed? PUMPED

Was pump installed? _____ Type _____ HP _____ Depth _____ ft.

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.

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the

(10) LOCATION OF WELL:

County JOSEPHINE Driller's well number _____
SW 1/4 NE 1/4 Section 21 T. 35S R. 6W W.M.
Tax Lot # 200 Lot _____ Blk _____ Subdivision _____
Address at well location: MERLIN-GALICE RD.

(11) WATER LEVEL: Completed well.

Depth at which water was first found 130 ft.
Static level 40 ft. below land surface. Date 8-7-80
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____ " 8"
Depth drilled 300 ft. Depth of completed well 300 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
GRAY BOULD/W			
GRAY CLAY	0'	15'	
BRO CLAY W/			
MED GRAVEL	15'	85'	40'
BOULDERS W/			
BRO. CLAY	85'	95'	40'
CLAY BRO W/			
COURSE SAND	95'	130'	40'
BLK & WHT GRANITE			
W/ WHITE MED. HARD.	130'	300'	40'

Work started 7-30 1980 Completed 8-7 1980
Date well drilling machine moved off of well 8-7 1980

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are to the best of my knowledge and belief.
[Signed] Henry C. Clemen Date 8-13, 1980
(Drilling Machine Operator)
Drilling Machine Operator's License No. 1451

Water Well Contractor's Certification:

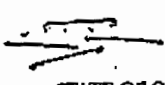
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name CLEMEN'S WELL DRILLING CO.
(Person, firm or corporation) (Type or print)
Address 2075 N.W. VINE - GRANTS PASS
[Signed] P. J. Clemen
(Water Well Contractor)
Contractor's License No. 643 Date 8-13 1980

WATER RESOURCES DEPARTMENT, SP-12658-690
SALEM, OREGON 97310
within 30 days from the date of well completion.

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STATE OF OREGON
WATER WELL REPORT
(as required by ORS 337.765)

16809 JOSE
Amended 50369

355/0600/21AD
Satote D.D. L02341

(START CARD) # 89709

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number 922-96
Name Romdata Ind Park
Address 700 Merlin Rd
City Hamlet Park State OR ZIP 97152

(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 165 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	23	Cement	0	23	14 Sacks
8"	23	60	+	23	60	Bentonite
6"	60	165	Bentonite			1 Sack

How was seal placed: Method A B C D E
 Other poured dry + capped with cement
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	+1	86	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 86

(7) PERFORATIONS/SCREENS:

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

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

Yield gal/min	Drawdown	Drill stem at	Time
70	129	165	1 hr

Temperature of water 58° 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 Joseph Latitude _____ Longitude _____
Township 35 N or S Range 6 E. W. WM.
Section 21 S.E. 1/4 NE 1/4
Tax Lot _____ Lot 14 Block _____ C. Division _____
Street Address _____ Well (or nearest address) Jonathan

(10) STATIC WATER LEVEL:
36 ft. below land surface. Date 7-29-96
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 82'

From	To	Estimated Flow Rate	SWL
86	165	70+	36

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Brown clay - used to coarse gravel			
small to med boulders	0	35	
Brown clay	35	47	
Brown clay - used to coarse gravel			
some med boulders	47	82	
Brown sand	82	165	36

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Date started 7-26-96 Completed 7-29-96

(unbonded) Water Well Constructor Certification:
I certify that the work 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 and belief.

Signed _____ WWC Number _____ Date _____

(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.

Signed _____ WWC Number 260 Date _____

ORIGINAL & FIRST COPY WATER RESOURCES DEPARTMENT SECOND COPY CONSTRUCTOR THIRD COPY CUSTOMER

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