

Application for Permit Amendment

Part 1 of 4 – Minimum Requirements Checklist



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

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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.

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

- Part 1 – Completed Minimum Requirements Checklist.
- 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: **G-14939.**

Attachments:

- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- Permit amendment fees – Amount enclosed: \$ **400.00**. See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0883. *Required \$1200 BALANCE + \$800*
- 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.
 - 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.
 - The proposed changes are all located on the property reviewed in Land Use form enclosed in Water Right Application Folder # _____.
- 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):

<input checked="" type="checkbox"/> Application fee not enclosed/ <u>insufficient</u>	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Assignment Form and fee not enclosed/insufficient
<input type="checkbox"/> Additional signature(s) required	Part _____ is incomplete

Other/Explanation: *REQUIRES \$1200*

Staff: *KELLY STARNES* 503-986-0 *886* Date: *9/25/2011*

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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 not 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.
- Permanent quality printed with dark ink on white or clear paper or film.
- 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.
- 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, ¼ ¼, 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 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.
- 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.
- 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°).

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Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Travis Singhose		PHONE NO. 541-493-2772	ADDITIONAL CONTACT NO.
ADDRESS 29327 Weaver Springs Lane		FAX NO. n/a	
CITY Burns	STATE OR	ZIP 97720	E-MAIL n/a

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

AGENT/BUSINESS NAME Darryl Anderson –Anderson Engineering & Surveying, Inc.		PHONE NO. 541-947-4407	ADDITIONAL CONTACT NO.
ADDRESS PO Box 28 / 17681 Hwy 395		FAX NO. 541-947-2321	
CITY Lakeview	STATE OR	ZIP 97630	E-MAIL darryla@andersonengineering.com

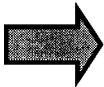
If an agent is listed above, please check **one** of the following:

- 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 permit holder of record? Yes No

If NO, include either:

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.



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

Travis Singhose
Applicant signature

Travis Singhose
Name (and title if applicable) (print)

6-25-11
Date

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): **The permit amendment will add an additional existing well to existing permit G-14055. The well is already part of the current distribution system along with 2 wells listed on the permit, and needs to be added to the permit to accurately reflect current conditions.**

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Check one of the following:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.

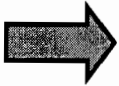
Check the appropriate box, if applicable:

- Check here if any of the permits proposed for amendment are 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 any of the permits supplied under a water service agreement or other contract for stored water 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 Harney County	450 N BUENA VISTA	
CITY Burns	OREGON	97720

ENTITY NAME	ADDRESS	
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-14055

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-_____)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		25 S	30 E	27	SW SW	2400	526.7' East and 3927.6' South of the NW corner of Section 27
Well #2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1990	25 S	30 E	27	SE SW	2300	1909.5' East and 4543.2' South of the NW corner of Section 27
Well #3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 51288	25 S	30 E	22	SW SW	1600	630.0' East and 69.7' North of the SW Corner of Section 22
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

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

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> 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 "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the permit to be changed.

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Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Use Permit # G-14055

List only the part of the permit that will be changed. For the acreage in each ¼ ¼, 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 Changes (see "CODES" from previous page)	Proposed ("to" lands) after the changes											
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acre(s) (if applicable)	POD(s) or POA(s) (name or number from Table 1)		Priority Date	Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acre(s) (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date	
2	S	9	E	15	NE	NW	100	15.0	POD #1 POD #2	POU/POD	2	S	9	E	15	NW	NW	100	1	10.0	POD #5
"	"	"	"	"	"	"	"	EXAMPLE	"	"	2	S	9	E	15	SW	NW	200		5.0	POD #6
TOTAL ACRES										TOTAL ACRES											

Additional remarks: _____

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Permit # G-14055

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?

Yes No


If NO, the landowner of the land TO which the place of use is being moved **must be assigned to the permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? Yes No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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

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

 If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application 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. (**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 authorized and proposed 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
Well # 1 3	YES	NA								
Well #2	Yes	NA	100	12"	100	18	60-100	34	cinders	300 gpm
Well # 1	Yes	L83217	120	16"	121		75-115	34	Cinders	1500 gpm

HARN 51288

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

WELL I.D. # L 83217
START CARD # 185150

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

(1) LAND OWNER
Name Travis Singhose Well Number _____
Address 29327 Wedder Springs Ln
City Burns State OR Zip 97720

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

HOLE		SEAL		Sacks or pounds
Diameter	From To	Material	From To	
<u>existing</u>	<u>75 105</u>	<u>g</u>		
<u>16</u>	<u>105 120</u>			

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

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>16</u>	<u>120</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>75</u>	<u>115</u>	<u>.150</u>	<u>contin</u>	<u>16</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Artesian
Flowing Artesian
Yield gal/min 100 Drawdown 0 Drill stem at _____ Time 1 hr.

Temperature of water 57° Depth Artesian _____
Was a water analysis done No Yes By whom _____
Did any strata contain water not suitable for intended use? Salty Muddy Odor Colored Other Too little
Date of strata: 7-11-06 **RECEIVED**
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(9) LOCATION OF WELL by legal description:
County Harney Latitude _____ Longitude _____
Township 25S N or S Range 30E E or W. WM.
Section 27 SW 1/4 SW 1/4
Tax Lot 2400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Wedder Springs Rd

(10) STATIC WATER LEVEL:
65 ft. below land surface. Date 7-16-06
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found existing

From	To	Estimated Flow Rate	SWL
<u>65</u>	<u>120</u>	<u>1500</u>	<u>65</u>

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
<u>(cleanout)</u>			
<u>Cinders blk</u>	<u>75</u>	<u>115</u>	<u>65</u>
<u>clay, claystone yellow</u>	<u>115</u>	<u>120</u>	<u>65</u>

Date started 7-10-06 Completed 7-16-06
(unbonded) Water Well Constructor Certification:
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 and belief.
WWC Number _____
Signed _____ 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.
WWC Number 1424
Signed Timothy K. Aly Date 7-17-06

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.765)

HARNEY
~~2009~~
1990

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MAY 24 1993

25S/30E/27d

(START CARD) # 49106

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(1) **OWNER:** Well Number _____
 Name Doug Stills
 Address P.O. Box 247
 City Culver State OR Zip 97734

(2) **TYPE OF WORK:**
 New Well Deepen Recondition Abandon

(3) **DRILL METHOD:**
 Rotary Air Rotary Mud Cable
 Other _____

(4) **PROPOSED USE:**
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) **BORE HOLE CONSTRUCTION:**
 Special Construction approval Yes No Depth of Completed Well 100 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
18"	0 18	Bentonite	0 18	28sacks	
12"	18 100				

How was seal placed: Method A B C D E
 Other poured and tamped

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: 12"	+1	100	.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) _____

(7) **PERFORATIONS/SCREENS:**
 Perforations Method factory cut
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60	100	1/8X3/16	1920	12		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
300	45	82	5 hr.

Temperature of Water 50° Depth Artesian Flow Found _____
 Was a water analysis done? Yes No 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 Harney Latitude _____ Longitude _____
 Township 25S N or S. Range 30 E E or W. WM. _____
 Section 27 SE SW NW _____
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Weaver Springs RD

(10) **STATIC WATER LEVEL:**
34 ft. below land surface. Date 5-19-93
 Artesian pressure _____ lb. per square inch. Date _____

(11) **WATER BEARING ZONES:**

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
34'	100'	300	34

(12) **WELL LOG:** Ground elevation _____

Material	From	To	SWL
Topsoil	0	2	
Clay brn	2	20	
Clay sand fine	20	25	
clay yellow	25	45	34
claystone gravel	45	57	34
cinders bkl	57	78	34
clay tan	78	83	34
cinder brn	83	100	34

Date started 5-13-93 Completed 5-19-93

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed Timothy K. Reber WWC Number 1424
 Date 5-20-93

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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-14055

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 # 12-)	Twp	Rng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51288	25 S	30 E	27	SW	SW	2400	526.7' East and 3927.6' South of the NW corner of Section 27
Well #2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1990	25 S	30 E	27	SE	SW	2300	1909.5' East and 4543.2' South of the NW corner of Section 27
Well #3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		25 S	30 E	22	SW	SW	1600	630.0' East and 69.7' North of the SW Corner of Section 22
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed								

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

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> 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 "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the permit to be changed.

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APR 16 2012

WATER RESOURCES DEPT
SALEM, OREGON

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?

Yes No

If NO, the landowner of the land TO which the place of use is being **moved must be assigned to the permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? Yes No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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

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



If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application 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. (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 authorized and proposed 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
Well #1	Yes	L83217	120	16"	121		75-115	34	Cinders	1500 gpm
Well #2	Yes	NA	100	12"	100	18	60-100	34	cinders	300 gpm
Well #3	YES	NA								

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STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.765)

1990

MAY 24 1993

LOS/JOE/27
 (START CARD) # 49106

WATER RESOURCES DEPT.

Well #2

(1) OWNER: Doug Stills Well Number _____
 Name _____
 Address P.O. Box 247
 City Culver State OR Zip 97734

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No - Depth of Completed Well 100 ft.
 Explosives used Yes No - Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
18"	0	18	Bentonite	0	18	28sacks
12"	18	100				

How was seal placed: Method A B C D E
 Other poured and tamped

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: 12"	+1	100	.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) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method factory cut
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60	100	1/8X3/16	20	12		<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
300	45	82	5 hr.

Temperature of Water 50° Depth Artesian Flow Found _____
 Was a water analysis done? No 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 Harney Latitude _____ Longitude _____
 Township 25S N or S. Range 30 E E or W. WM _____
 Section 27 SE 1/4 SW 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Weaver Springs

(10) STATIC WATER LEVEL:
34 ft. below land surface. Date 5-19-93
 Artesian pressure _____ lb. per square inch. Date _____

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

From	To	Estimated Flow Rate	SW
34'	100'	300	3'

(12) WELL LOG:
 Ground elevation _____

Material	From	To	SW
Topsoil	0	2	
Clay brn	2	20	
Clay sand fine	20	25	
clay yellow	25	45	3'
claystone gravel	45	57	3'
cinders blk	57	78	3'
clay tan	78	83	3'
cinder brn	83	100	3'

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WATER RESOURCES DEPT
 SALEM OREGON

Date started 5-13-93 Completed 5-19-93

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Material used and information reported above are true to my best 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed Timothy K. Ribby WWC Number 142
 Date 5-20-93

HARN 51288

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765)

WELL I.D. # L 693217
START CARD # 185150

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

(1) LAND OWNER Well Number _____
Name Travis Singhose
Address 29327 Wedder Springs Ln
City Burns State OR Zip 97720

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

HOLE		SEAL			
Diameter	From To	Material	From To	Sacks or pounds	
<u>existing</u>					
<u>20</u>	<u>75</u>	<u>105</u>			
<u>16</u>	<u>105</u>	<u>120</u>			

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

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>16</u>	<u>75</u>	<u>120-250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type ROSCHEMOSZ Material stainless steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>75</u>	<u>115</u>	<u>.150</u>	<u>contin</u>	<u>16</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
<u>100</u>	<u>0</u>		<u>1 hr.</u>

Flowing Artesian

Temperature of water 57° Depth Artesian Flow Found _____
Was a water analysis done NO 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 Harney Latitude _____ Longitude _____
Township 25S N or S Range 30E E or W. WM.
Section 27 SW 1/4 30 SW 1/4
Tax Lot 2400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Wedder Springs Rd

(10) STATIC WATER LEVEL:
65 ft. below land surface. Date 7-16-06
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found existing

From	To	Estimated Flow Rate	SWL
<u>65</u>	<u>120</u>	<u>1500</u>	<u>65</u>

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
<u>(cleanest)</u>			
<u>Cinders blk</u>	<u>75</u>	<u>115</u>	<u>65</u>
<u>clay, claystone yellow</u>	<u>115</u>	<u>120</u>	<u>65</u>

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WATER RESOURCES DEPT SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON

Date started 7-10-06 Completed 7-16-06

(unbonded) Water Well Constructor Certification:
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 and belief.
WVC Number _____
Signed _____ 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.
WVC Number 1424
Signed Timothy K. Rely Date 7-17-06