

State of Oregon

Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900

# Application for **Permit Amendment**

Part 1 of 4 - Minimum Requirements Checklist

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

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

Che	ck all it	ems included with this application. $(N/A = Not Applicable)$	MECEIVED
$\boxtimes$		Part 1 – Completed Minimum Requirements Checklist.	MAR 26 2012
$\boxtimes$		Part 2 – Completed Permit Amendment Application Map Checklist.	WATER RESOURCES DEPT
$\times$		Part 3 – Completed Permit Amendment Application – Applicant Information	and Signature.
$\boxtimes$		Part 4 – Completed Permit Amendment Application – Water Use Permit Info Please include a separate Part 4 for each permit. List all permit(s) to be amendment.	rmation.
		Attachments:	
$\boxtimes$		Completed Permit Amendment Application Map (Does not have to be preparation Water Right Examiner).	ed by a Certified
$\boxtimes$		Permit amendment fees – Amount enclosed: \$ 1,600. See http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml#fees or call (503)	986-0883.
	⊠ N/A	Request for Assignment Form and statutory fee. The request for assignment completed if the applicant is <b>not</b> the permit holder of record and needs to be a permit; <b>or</b> the landowner of the proposed place of use is <b>not</b> the permit holder needs to be assigned to the permit (the Request for Assignment Form is availant://www.wrd.state.or.us/OWRD/PUBS/forms.shtml). Assignment is not no applicant is the permit holder of record.	ssigned to the r of record and able online at
$\boxtimes$	□ N/A	Affidavit(s) of Consent are required from all permit holder(s) of record if the to the applicant, or other permit holders of record that are not listed as applicant.	
$\boxtimes$	□ N/A	Land Use Information Form with approval and signature (or signed land use stub). Land use form is not required if any of the following apply:	form receipt
		☐ Water is to be diverted, conveyed, and/or used only on federal land	ds.
		All of the following apply: a) a change in place of use only, b) no changes, c) the use of water is for irrigation only, and d) the use is an irrigation district or an exclusive farm use zone.	
		The proposed changes are all located on the property reviewed in lenclosed in Water Right Application Folder #	Land Use form
$\boxtimes$	□ N/A	For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation (well(s)) well Report(s)/Well Log(s)	propriation, Water
		(For Staff Use Only)  WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REAS  Application fee not enclosed/insufficient Map not included or incomp  Land Use Form not enclosed or incomplete Assignment Form and fee not Additional signature(s) required Part is incomplete  Other/Explanation	lete
		Staff: 503-986-0 Date: / /	

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.  MAR 2 6 2012
$\boxtimes$		Permanent quality printed with dark ink on good quality paper.  WATER RESOURCES DEPT
$\boxtimes$		The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, SALTIMI, OREGONO inches. For 30 x 30 inch maps, one extra copy is required.
$\boxtimes$		A north arrow, a legend, and scale.
		The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$ , $1 \text{ inch} = 1,320 \text{ feet}$ , the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$ , or a scale that has been preapproved by the Department.
$\boxtimes$		Township, Range, Section, 1/4 1/4, 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.
		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 $-42^{\circ}32'15.5''$ ) or degrees-decimal with five or more digits after the decimal (example $-42.53764^{\circ}$ ).

### Part 3 of 4 - Applicant Information and Signature

### **Applicant Information**

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Gerrit and Patricia Jager	_		541.548.6455	
ADDRESS			-	FAX NO.
6829 NE 41 <sup>st</sup> Street				
CITY	STATE	ZIP	E-MAIL	
Redmond	OR	97756		

AGENT/BUSINESS NAME Sun Country Engineeri	na & Surveyina I	lna.	PHONE NO. <b>541.382.8882</b>	ADDITIONAL CONTACT NO.
ADDRESS	ng & Surveying, I	<u> </u>	341.302.0002	FAX NO.
920 SE Armour Road				The No.
CITY	STATE	ZIP	E-MAIL	
Bend	OR	97702	sce_rob@benbroa	dband.com
Check this b	ox if this projec nt Act. (Federal	t is fully or pa stimulus dolla	artially funded by the ars)	MENTS WILL ALSO BE MAILED.  American Recovery and
Check this be Reinvestmen  Is the applicant t	ox if this projec nt Act. (Federal he permit hold	t is fully or pa stimulus dolla	artially funded by the ars)	
Check this b	ox if this projec nt Act. (Federal he permit hold	t is fully or pa stimulus dolla	artially funded by the ars)	
Check this be Reinvestmen  Is the applicant to If NO, include  A com	ox if this project at Act. (Federal he permit hold either:	t is fully or pastimulus dollater of record?	artially funded by the ars)  Yes No required statutory ass	

I understand that prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following paper: . .



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

GEIRRIT A. Jager 03/03)2012

Print Name (and Title if applicable)

Date

23/03/2012

Date

In your own words tell us what change(s) you want made and the reason for the amendment(s): To replace the original well that failed with the two new wells and to change the places of use to the areas actually being irrigated.

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WATER RESOURCES DEPT SALEM, OREGON

The applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to be sent to the applicant is responsible for continue to the applicant is responsible for cont	completion of change(s). It	Notices and correspondence should
The permit holder(s) of record final order is issued. Copies of of record.	will be responsible for comp notices and correspondence	oleting the proposed change(s) after the should be sent to the permit holder(s)
Check the appropriate box, if applic	able:	
Check here if any of the permits by an irrigation or other water dis		or will be located within or served
IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP
Check here if water for any of the property contract for stored water with a fed		er service agreement or other
CITY	STATE	ZIP
To meet State Land Use Consistency R city, municipal corporation, or tribal go conveyed or used.		
ENTITY NAME Harney County	ADDRESS 450 N. Buena Vista #	11
CITY Burns	STATE OR	ZIP 97720
ENTITY NAME	ADDRESS	

STATE

MAR 2 6 2012
WATER RESOURCES DEPT
SALEM, OREGON

ZIP

CITY

Check one of the following:

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

Instructions: <a href="http://www.wrd.state.or.us/OWRD/PUBS/docs/Hints\_Forms\_MS\_Word.doc">http://www.wrd.state.or.us/OWRD/PUBS/docs/Hints\_Forms\_MS\_Word.doc</a>

### PERMIT # G-15432

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	vp	Rı	ng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Original	<ul><li>✓ Authorized</li><li>✓ Proposed</li></ul>	27/34-7D1	27	s	34	E	7	NW	NW	900	1000' S, 600' E NW Cor. Sec. 7
Well #1	☐ Authorized ☐ Proposed	L-05041	27	s	33	E	12	NW	NE	401	20' S, 1302 E S 1/4 Cor. Sec. 1
Well #2	☐ Authorized ☐ Proposed	L-05040	27	s	33	E	12.	NE	NW	400	9' S, 48' W S 1/4 Cor. Sec 1
	☐ Authorized ☐ Proposed										

Check a	ıll typ	e(s) of change(s) proposed below (cl	hange	"CODES" are provided in parentheses):
$\boxtimes$	Place	e of Use (POU)	$\boxtimes$	Point of Appropriation/Well (POA)
	Point	of Diversion (POD)		Additional Point of Appropriation (APOA)
	Addi	tional Point of Diversion (APOD)		Surface water POD to Ground Water POA (SW/GW)
Will all	of the	proposed changes affect the entire	wate	r use permit?
⊠ `	Yes	Complete only the proposed ("to" lar "CODES" listed above to describe the		ection of Table 2 on the next page. Use the posed changes.
	No	Complete all of Table 2 to describe to	he poi	rtion of the permit to be changed.

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Table 2. Description of Changes to Water Use Permit # G-15432

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

ı									_				 	_	
		Priority Date													
	ges	POD(s) or POA(s) to be used (from Table 1)	POD #5	POD #6	Well #2	Well #2	Well #2	Well #2	Well #1	Well #1	Well #1	Well #1			
	Proposed ("to" lands) after the changes	Acres (if applicable)	0.0	5.0	37.72	19.62	2.73	0.07	8.16	7.92	22.91	0.43		99.56	
	nds) af	Gvt Lot or DLC												ES	
מכוו די	("to" la	Gvt Tax Lot Lot or DLC	100	200	400	400	200	200	401	401	006	006		TOTAL ACRES	
MIII W	posed	7, 7,	Ħ,	ž	S.W	SW	SW	SW	NE	NE	š	N W		TOT/	
arce	Pro	7,4	W. M.	SW	NE	SE	N N	SW	NE	š	WN WN	SW			
200		Sec	10	5	_	_	_	_	1	_		7			
3		Rng	LJ.	لغا	豆	<b>H</b>	<b>E</b>	田	E	<b>Ξ</b>	<u> </u>	E E			
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ਰ 2		Twp	r4	<u>را</u>	27	27	27	27	27	27	27	27			
1 OD/1 OA, Specify the acteage associated with each 1 OD/1 OA.		Proposed Changes (see "CODES" from previous page)	POU/POD	3					•						
1/00	ş	Priority Date													
	Authorized ("from" lands) as they appear before the changes	POD(s) or POA(s) (name or number from Table	POD #1 POD #2	***	Original	Original			Original	Original	Original				
acticage associated with each change. It more than one	pear befor	Got Acres Lot or (if DLC applicable)	15.0	EXMPLE	40.0	30.0			35.0	35.0	25.0			165.0	
ang.	hey at	Gvt Lot or DLC		;							900 GL2			ES	
	ds) as t	Tax Lot	100	;	400	400			401	401	006			TOTAL ACRES	
וו	" lano	1/4	1	.2	SW	SW			NE	NE	WN			OTAI	
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age	AL		<u>σ</u> σς	:	S 33	S 33			S 33	S 33	S 34				
		Twp	<i>e</i> 1	;	27	27			27	27	27				

Additional remarks:

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WATER RESOURCES DEPT
Permit Amendment Application – Page 6 of 7 SALEM, OREGON

11385

Revised 2/1/2012

TACS

For a	change i	n place of us	e:							
	the perm es □ No	it holder of r	ecord ow	n or cont	rol the la	nd TO whi	ich the plac	ce of use is	being move	ed?
per	mit as a p	downer of the ermit holder tory fee for a	r of recor	<b>d</b> by subn						
Is the	propose	d place of use	e contigu	ous to the	authoriz	ed place of	f use? 🔲 Y	es 🗌 No		
unle for t 496 listi	the purposes. 192 or the general three thr	I place of use ange to non-c ses of benefiti e federal End c. Contiguous orized by roa	ontiguous ing a spec angered S s land bei	s lands is it ies listed a species Ac ng either a	n furthera as sensitiv t of 1973 adjacent la	nce of mitigge, threatened (16 U.S.C. and or land)	gation or co ed, or endar 1531 to 154 separated fr	onservation ngered undo 44), as dete om the lan	efforts under ORS 496. ermined by the detection of the de	ertaken 171 to he
		r water right " or "to" lan				mits or gro	ound water	r registrati	ons associa	ted
If Y	ES, list th	e other certifi	icate, peri	mit, or gro	und water	r registratio	n numbers:			
land to a appl	l for irriga water rigilication or	s) are for irrigation that are so that certificate or ground wate n point(s) of	subject to or ground r registrat	transfer m water reg tion modif	nust either istration r ication ap	change con nust be file oplication, re	ncurrently of d separately espectively.	or be cance in a water	lled. Any ch right transfe	nange
$\boxtimes$	associat map. (7	g(s) are attached with the corie; You may ops2.wrd.state	orrespond search fo	ing well(s or well log	) in Table s on the D	1 above an Department'	d on the ac	companyin		n
OR □	Describe	e the construction	ction of th	e authoriz	ed and pr	oposed wel	l(s) in Table	e 3 for any	wells that do	o not
Any well( accompar your trans	Construc (s) in this nying apples efer applic	tion of Pointe listing must b ication map. ation. For pr ght examiner	be clearly Failure to oposed w	tied to cor provide a cells, we re	respondir adequate i commend	information that you co	is likely to onsult a lice	delay the pensed well	processing o	f
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
NA							0 1000 00 10 10 10 11100 00 10 1000 00 0	_		

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Original Well	
PINAL THE	LERS REPORT   Do Not State Well No. 27/34-7 D ]
Original, and blicate with the	
ATE ENGINEER, ALEM, OREGON  1900  STATE OF OR	LEGON G   88   Fill In State Permit No.
	11101
(1) OWNER	(10) WELL TESTS: MARK 149
Name ULIMAN	Was a pump test made? Tes   No If yes, by whom?
Address PRINCETON	Yield: 700 gal./min. with /// ft. draw down after /4 hrs.
OREGON	" 350 " 14 " 140 "
	" 800 " 12 " 52 "
(2) LOCATION OF WELL:	Artesian flow g.p.m.
County Harney Owner's number, if any-	Shut-in pressurelbs, per square inch.
R. F. D. or Street No.	Bailer test g.p.m. with ft. drawdown
Bearing and distance from section or subdivision corner	Temperature of water
1300 FT SOUTHEAST FROM	Was electric log made of well?  Yes No
NW GORNER SEC 7 TUPOTS KANGERY	
EWM	(11) WELL LOG:
(4)	Diameter of well, inches.
(3) TYPE OF WORK (check):	Total depth 176 ft. Depth of completed well 176 ft.
New well Deepening Reconditioning Abandon	
andonment, describe material and procedure in Item 11.	Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.
(4) PROPOSED USE (check): (5) EQUIPMENT:	
Domestic ☐ Industrial ☐ Municipal ☐ Rotary ☐	
Cable	40" 50 " comented gravel
Irrigation Test Well   Other   Dug Well	50" 60 " House sall + gravel itel
CASING INSTALLED: If gravel packed	IA" DO " IA
Threaded  Welded &	as to wown say were aspect
Gage	DP " Q = " ) I mifey en
FROM ft. to ft. Diam. or Diameter from to wall of Bore ft. ft.	18 15 mark clay
" 0 " 83½" 14" ×32" " " "	75 140 mulli- covered rock + purner
11 11 11 11 11	believen layers of Alan
n n n n	140"170 "multi-colored sock & prince
11 11 11 11 11	- propellago some arralis
D D D D D D	170" 176 " same with strong
Type and size of shoe or well ring / Size of gravel:	- flow of water
Describe joint welded	11 11
(7) PERFORATIONS:	15 15
Type of perforator used	" "
	n n
SIZE of perforations in., length, by in.  FROM ft. to ft. perf per foot No. of rows	1) ))
H H H H H H H H H H	BEARNED
n n n n n n n n	NEGEIVED
n n n n n n n n n	
" " " " " " " " " " " " " " " " " " "	MAR 2 6 2012
SCREENS: Give Manufacturer's Name, Model No. and Size	AAVIEU DESOURCES DES
Give mandidenter a Maine, model No. and Size	SALEM, OREGON
	n n
ONSTRUCTION:	n n
Was a surface sanitary seal provided? ☐ Yes ☐ No To what depth ft.	
Were any strata sealed against pollution? ☐ Yes ☐ No.  If yes, note depth of strata	Ground elevation at well site
FROM ft. to ft.	Work started 3 _ 2 4 19 60 Completed 4 _ 12 19 60
n n	Well Driller's Statement:
	This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
METHOD OF SEALING	
(9) WATER LEVELS:	NAME FORREST SKINNER  (Person, firm, or corporation) (Typed or printed)
Depth at which water was first found 50 ft.	
Standing level before perforating 33 it.	Address CRANE OREGON
Standing level after perforating ft.	Driller's well number
Log Accepted by:	
	[Signed] (Well Driller)
[Signed] Dated, 19	License No. 45 Dated 4-24 1960
•	

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harn Well #1

STATE OF OREGON 50135 MAR - 7 1997
WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.
(As required by ORS 537.765)

MAR - 7 1997

(START CARD) # 2/85990

WELL I.D.# L05041

Name R09eV HQWO/Th Address P.O. Box 30 30  City PV.nceTen State OV Zip9772/ (2) TYPE OF WORK    New Well   Deepening   Alteration (repair/recondition)   Abandonment   Abandonment   Street Address of Well (or nearest address)   M.     W.		dy ∏Odor ∏Co	olored	Other			construction standards. T	his report is true to the	best of my kn	owledge and	d belief.
Name ROSS   Longitude   Longit	Did any strata cont		•		Too li	tile	performed on this well du performed during this tim	ring the construction d	ates reported a Oregon water	above. All w	vork Ll
Name ROSS	-		-		ound		1			andonment	work
Name   Rog er   Ha awalth   Address   P. C. Box 3 0 3 0     Cony PL per for   State   Computer   State   Computer   Com											
Name ROSS   Haward The Address P.O. Box 20.30    County Harney   Latitude   Longitude   Toomship 27   Nor Grange 33   Gov N. Nor Grange 34   Nor Grange 34   Nor Grange 34   Nor Grange 35   Nor Grange 36   Nor Grange 37   Nor G		Drawdown	_	n at	1	l'i <u>me</u>	of this well is in complian Materials used and inform	ce with Oregon water	supply well or re true to the l	onstruction s best of my k	standards.
Name ROGE! Hazaoth  Address P.C. Bex 30.30  Sign Prince Fan State 01" Zip 977.21  (3) TYPE OF WORK Since Will Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD: Auger Are Color Society Completed Well 30 DRILL METHOD: Amount Deepening Alteration (repair/recondition) Abandonment  [] Demertic Community Industrial Firingation  [] Thermal Discision Livestock Other  [] Demertic Construction approacy Yes [No Depth of Completed Well 300 ft. Explosives used Yes [No Depth of Completed Well 300 ft. Explosives used Yes [No Depth of Completed Well 300 ft. Explosives used No Depth of Completed Well 300 ft. Explosives used No Depth of Completed Well 300 ft. Explosives used No Depth of Completed Well 300 ft. Explosives used No Depth of Completed Well 300 ft. Explosives used No Depth of Completed Well 300 ft. Explosives used No Depth of Completed Well 300 ft. If I are the second No Depth of Completed Well 300 ft. If I are the second No Depth of Completed Well 300 ft. If I are the second No Depth of Completed Well 300 ft. If I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the second No Depth of Completed Well 300 ft. I are the sec		_	_		Flow		(unbonded) Water Well I certify that the work	Constructor Certification on the con	struction, alte	ration, or ab	andonment
Name ROGEY Hawolth  Address P.O. Rex 2020  State Of Zip9772.  (3) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:    Roary Air   Roary Mud   Cable   Auger	(8) WELLTES	TS: Minimum tes	ting time	s 1 hour			Date started 1 - 25 -	97 Com	pleted 2-	24-	97
Name ROGEY HOLOTTO  Address P.O. Rex 30.30  State Of Zip 977.2.  (3) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandooment  (3) DRILL METHOD:    Rotary Air   Rotary Mud   Cable   Auger     Other     Othe	140.							SALEM, ORE	:UN		
Name ROGEY HOLD'TO Address P.O. Bex 30.30  Stype From To State Or Zip 977.2.    County Agree Fan	- NON	10-			_ 🛮	_	<del></del>	1 14 44 mo 1 1 1 mm 2 m - 1	- 1	-	<del>                                     </del>
Name   ROGE   Havar   Havar   Longitude   Longitude   Address   Row				_	_			MINIT W.O.			
Name   ROGE   Haworth     Address   Ros   Ros   Ros   Ros   Ros   Ros     County   Harne   Latitude   Longitude     Township   2.7   Not   Rosage   3.3   Dor W. W.     County   Mr.   I/4   Not   I/4     Tax Lot   Hoo   Lot   Block     Street Address of Well (or nearest address)   Mr.   I/2     Tax Lot   Hoo   Lot   Block     Street Address of Well (or nearest address)   Mr.   I/2     Tax Lot   Hoo   Lot   Block     Street Address of Well (or nearest address)   Mr.   I/2     Tax Lot   Hoo   Lot     County   Harne   Latitude   Longitude     Township   2.7   Not   Rosage   3.3     Dor W. W.     Section   Lot   Mr.   I/4     Tax Lot   Hoo   Lot     Rotary Air   Rosary Mud   Cable   Auger     Other   Hoo   Lot   Rotary     County   Harne   Latitude   Longitude     Township   2.7   Not   Rosage   3.3     Dor W. W.     Section   Lot   Mr.   I/4     Tax Lot   Hoo   Lot   Block   Studivision     Street Address of Well (or nearest address)   Mr.   I/4     Tax Lot   Hoo   Lot   Block   Studivision     Street Address of Well (or nearest address)   Mr.   I/4     Tax Lot   Hoo   Lot   Block   Studivision     Street Address of Well (or nearest address)   Mr.   I/4     Tax Lot   Hoo   Lot   Block   Studivision     Street Address of Well (or nearest address)   Mr.   I/4     Tax Lot   Hoo   Lot   Block   Studivision     Street Address of Well (or nearest address)   Mr.   I/4     Tax Lot   Hoo   Lot   Block   Studivision     Street Address of Well (or nearest address)   Mr.   I/4     Tax Lot   Hoo   Lot   Block   Studivision     Street Address of Well (or nearest address)   Mr.   I/4     Tax Lot   Hoo   Lot   Block   Studivision     Tax Lot   Hoo   Lot   I/4     Tax Lot   Ho	From To		Diameter		Casing	Liner		MAD D C	2012	<del> </del>	<del> </del>
Name ROSE Hawarth Address P. C. Bex 30.30  City Pr. no En State Or Zip 777.21  (2) TYPE OF WORK  New Well Depening Alteration (repair/recondition) Abandonment    Name   Rotary Mul   Depening   Alteration (repair/recondition)   Abandonment   Rotary Air   Rotary Mul   Cable   Auger   Demonstrate	_	Туре						RECEN	ED		
Name   Roge   Hawolth	• •		:								
Name   Roge   Hawolth   Address   Ros											
Name   Roger   Hawaith   Address   P.C.   Rex   30.30   State   Or   Zip97721							UFOWN C		1/6	500	, w
Name ROGEY HQWOTTO Address P.O. Bex 30 30  City Prince Ion State Or Zip97721  (3) TYPE OF WORK New Well   Deepening   Alteration (repair/recondition)   Abandonment (3) DRILL METHOD:   Rotary Image:   Rotary Mud   Cable   Auger     Other   Rotary Mud   Cable   Auger     Other   Thermal   Injection   Livestock   Other     Other   Special Construction approval   Yes   No Depth of Completed Well 300 ft.   Explosive used   Yes   No Type   Amount     HOLE   SEAL     Diameter From To   Material   From To   Sacks or paints     How was seal placed:   Method   A   B   C   D   E     Other   Backfül placed from   ft. to   ft. Material     Gravel placed from   ft. to   ft. Size of gravel     Go CASING/LINER:     Diameter From To   Gauge Steel   Plastic Welded Threaded Casing   12 ''   2   98   250   R       Casing   12 ''   12   98   250   R       Casing   12 ''   12   98   250   R       Casing   13   Eor W. W. Town Inventor   Invento	Liner										16
Name Roger Hawaith Address P.O. Box 3030  City PrinceTen State Or Zip97721  (2) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:    Rotary Air   Rotary Mud   Cable   Auger							Brown CL	2 with			
Name ROGEY HQWO/Th  Address P.O. Bex 30.30  City Prince Ion State O/ Zip97721  (2) TYPE OF WORK  Mew Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:    County Mid   Deepening Alteration (repair/recondition)   Abandonment   Other	Casing: 10	10 1						re Brown			16
Name ROSEY Haworth Address P.O. Bex 30 30  City Prince Ion State Or Zip97721  (2) TYPE OF WORK  Mew Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:    Rotary Air   Rotary Mud   Cable   Auger     Other     Domestic   Community   Industrial   Mirrigation     Thermal   Injection   Livestock   Other     (5) BORE HOLE CONSTRUCTION:  Special Construction approval   Yes   No Type   Amount     HOLE   SEAL     Diameter   From   To   Material   From   To   Sacks or     12''   22'   300     How was seal placed:   Method   A   B   C   D   Material     Gravel placed from   ft. to   ft. Size of gravel     Grav	Diameter	From To G	suge Steel	Plastic				e Brown			16
Name Roger Haworth  Address P.O. Box 30 30  City Prince Ion State Or Zip 97721  (2) TYPE OF WORK  Mew Well Depending Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:    Rotary Air   Rotary Mud   Cable   Auger   Other     Other   Other   Other     Domestic   Community   Industrial   Mirrigation   Depth of Completed Well 300 ft.    Explosives used   Yes   No Type   Amount     HOLE   SEAL     Diameter   From   To   Material   From   To   Sacks or panells     13'   O 21'   Cement   -2'   21'   21'     22'   300   How was seal placed:   Method   A   B   C   D   Material     Gravel placed from   ft. to   ft. Material     Gravel placed from   ft. to   ft. Size of gravel     County   Harney   Latitude   Longitude     Township   2.7'   No f Range   33   Elor W. W. Scation     Township   2.7'   No f Range   33   Elor W. W. Scation     Township   2.7'   No f Range   33   Elor W. W. Scation     Township   2.7'   No f Range   33   Elor W. W. Scation     Township   2.7'   No f Range   33   Elor W. W. Scation     Township   2.7'   No f Range   33   Elor W. W. Scation     Address   County   Harney   Latitude     Township   2.7'   No f Range   33   Elor W. W. Scation     Address   County   Industrial   Street   Address of Well (or nearest address)   Write   OF									_		16
Name ROGEY HQWO/Th  Address P.O. Box 30 30  City Prince Ion State Or Zip 1772   (2) TYPE OF WORK    New Well   Deepening   Alteration (repair/recondition)   Abandonment								Loam	0	3	
Name Roger Haworth  Address P.O. Box 3030  City Princeton State Or Zip97721  (2) TYPE OF WORK    New Well   Deepening   Alteration (repair/recondition)   Abandonment   Ab		om ft. to	ft.	Material			Materi	al	From	То	SWL
Name ROSEY Hawolth  Address P.O. Box 3030  City Prince Ton State Or Zip 97721  (2) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD: Rotary Air Rotary Mud Cable Auger  (4) PROPOSED USE: Domestic Community Industrial Trigation Thermal Injection Livestock Other  (5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well 300 ft.  Explosives used Yes No Type Amount  HOLE SEAL  Diameter From To Material From To Sacks or parallel  176' 17' 5 Gepm  176' 0 22' Cement - 2' 22' 21'  264' 276' 200 Gept  176' 200 Gept  200 County Harney Latitude Longitude Township 27 N or S Range 33 Eor W.	_	ced: Method	A	]B 🗀	C D	<b>⊠</b> E		Elevation			
Name ROSEY HOWOITH  Address P.O. Bex 30 30  City Prince Ion State Or Zip 97721  (2) TYPE OF WORK    New Well   Deepening   Alteration (repair/recondition)   Abandonment   (3) DRILL METHOD:   Tax Lot 400 Lox   Block   Subdivision      Rotary Air   Rotary Mud   Cable   Auger							(12) WELL LOG:				
Name ROGEN HOWONTO  Address P.O. BOX 3030  City Prince Ton State Or Zip 97721  (2) TYPE OF WORK  Mew Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:  Rotary Air Rotary Mud Cable Auger  Other  (4) PROPOSED USE:  Domestic Community Industrial From To Sacks or panels  HOLE SEAL  Diameter From To Material From To Sacks or panels  County Harrey Latitude Longitude  Township 2.7 N or SRange 33 Eor W. W.  Section 12 NW 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) And It of Fore It of I	12"22"	300		<del>  - -</del>			7.64	2.76	20	OPM	16
Name ROGEN HOWONTO  Address P.O. Box 30 30  City PrinceTon State O/ Zip97721  (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 Airrigation  Thermal Injection Livestock Other  (5) BORE HOLE CONSTRUCTION:  Special Construction approval Yes No Depth of Completed Well 300 ft.  Explosives used Yes No Type Amount  HOLE SEAL  Diameter From To Material From To Sacks or page 164 ft. Section 12 Nw 1/4 NE 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) Am, 16 OF  Old PrinceTon  (10) STATIC WATER LEVEL:  Artesian pressure 1b. per square inch. Date  (11) WATER BEARING ZONES:  Depth at which water was first found 16 Fee7	18' 0	22' Cemen	7 -2	27,	<u>27</u>		176'				
Name ROGEY HOWOKT  Address P.O. Box 30 30  City Prince Ion State Or Zip 977 21  (2) TYPE OF WORK  Mew 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 300 ft.  Explosives used Yes No Type Amount  County Harry Latitude Longitude Township 2.7 N or Range 33 Eor W. W.  Section 12 NW 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision Street Address of Well (or nearest address) M. (e Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision  Other 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) M. (e Subdivision	Diameter From		From			De Mile	64'	87'	100	GPM	16
County   Harney   Latitude   Longitude		Ties Miles Table		Am	Junt			17			swl.
County   Harney   Latitude   Longitude								То	Estimate	d Flow Pote	CWI
Name ROGEN Haworth  Address P.O. Box 30 30  City Prince Ton State Or Zip 97721  (2) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:  Rotary Air Rotary Mud Cable Auger  Other  Other  (4) PROPOSED USE:  Domestic Community Industrial Airrigation  County Harney Latitude Longitude  Township 2.7 N or Range 33 Eor W. W.  Section 12 Nw 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) 4 M. (e OF	(5) BORE HO	LE CONSTRUCT					-	s first found	FeeT		
Name ROGEN Hawolto  Address P.O. Box 30 30  City Prince Ton State ON Zip 97721  (2) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:  Rotary Air Rotary Mud Cable Auger  Other  (4) PROPOSED USE:  County Harney Latitude Longitude  Township 2.7 N or S Range 33 E or W. W.  Section 12 Nw 1/4 NE 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) 4 M. (o F)  Old Prince Ton  (10) STATIC WATER LEVEL:  Artesian pressure 1b. per square inch. Date	_		•				(II) WAIER BEAR	NG AUNES;			
Name ROGEN HOWONTO  Address P.O. Box 30 30  City Prince Ton State ON Zip 97721  (2) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:  Rotary Air Rotary Mud Cable Auger  Other			I To duce = 'a'	r⊂/r	iantia-		Artesian pressure	lb. per squ	are inch.	Date	
Name ROGEN HOWONTO  Address P.O. BOX 30 30  City Prince Ton State ON Zip97721  (2) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandonment  (3) DRILL METHOD:  County Harney Latitude Longitude  Township 2.7 N or Range 3.3 Eor W. W.  Section 12 NW 1/4 NE 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) 471/16 5000 OF	Other										24-9
Name ROGEN HOWONTO  Address P.O. BOX 30 30  City Prince Ton State Or Zip 97721  (2) TYPE OF WORK  New Well Deepening Alteration (repair/recondition) Abandonment  County Horney Latitude Longitude  Township 2.7 N or Sange 3.3 Eor W. W.  Section 12 Nw 1/4 NF 1/4  Tax Lot 400 Lot Block Subdivision  Street Address of Well (or nearest address) Amile OF			Cable	Auger	•		(10) STATIC WATE	R LEVEL:	· <u>-</u>		
Name         ROGEY         Haworth         County         Harney         Latitude         Longitude           Address         P.O. Box 30 30         Township 2.7 N or S Range 33         E or W. W           City Prince Ten         State 0/ Zip 9772/         Section 12         N W 1/4 N E 1/4           (2) TYPE OF WORK         Tax Lot 400 Lot Block Subdivision			tion (repair/	reconditio	n) Abar	ndonment		- (01 11041001 4041011)	77.11.		OF
Name         ROGEY         Haworth         County         Harney         Latitude         Longitude           Address         P.O. 80x 30 30         Township 2.7 N or Sange 33         Eor W. W           City Prince Ton         State 0/         Zip 9772/         Section 12         N W 1/4 N E 1/4	(2) TYPE OF V	WORK					Tax Lot 400 I	otBlock_	ş	ubdivision	
Name Roger Hawol'Th County Harney Latitude Longitude	City Prince	Ton	State O		Zip	7721	Section 12	NW 1/4	NE	1/4	**. ** 141.
							County Harne	N or ORange	Lo		w ww
(1) OWNER: Well Number (9) LOCATION OF WELL by legal description:					ber		1		-		
(as required by ORS 537.765)  Instructions for completing this report are on the last page of this report. (START CARD) # 40 95 170							i e				

## Well #2

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

WELL #_ LO5040
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HURN	KEWEIVEL	1.1611 4	1 00 5 0 1	
TARN 50151	APR 2 8 1997	WELL #_	LO504	
5010	,	(START CARD) #_85989		

Instructions for completing this report are on the last page of this form.	R RESOURCES DEP	<u>′1.                                    </u>		_	
(1) OWNER: Well Number 2	SALEM OREGON (9) LOCATION OF V	VELL by legal descrip	otion:		
Name ROGEY HOWOTTH	•	Latitude		gitude	
Address P.O. BOX 3030 PrinceTon	Township 2-7				. WM.
Sity Of Prince Ton State Or Zip 97/2-1		E+ 1/4 5		1/4	
2) TYPE OF WORK	Tax Lot 400 L			bdivision	
New Well Deepening Alteration (repair/recondition) Abandonment		(or nearest address)			
3) DRILL METHOD:	old Prince 1		THE WE	937 01	
	(10) STATIC WATER				<del></del>
☐ Rotary Air ☐ Rotary Mud    Cable ☐ Auger	1 ' '			ate 4//9	1,07
Other	30 ft. belo			ate <u>+/ / /</u>	771
() PROPOSED USE:	Artesian pressure (11) WATER BEARD	<del></del>	nich. D	<u> </u>	
Domestic Community Industrial Irrigation  Thermal Injection Livestock Other	(II) WAIER BEARE	NO DOMES.			
Thermal Injection Livestock Other  5) BORE HOLE CONSTRUCTION:	Depth at which water was	first found 30			
*	Depui at witten water was	institution			
pecial Construction approval Yes No Depth of Completed Well 5/4 ft.		To	Estimated	Flow Rate	SWL
Explosives used Yes No Type Amount	From 30	3 6 °			30'
HOLE SEAL	72'	81,		6-P/7	30
lameter From To Material From To Sacks or product 18" 0 20 CENENT 0 20 19	190'	196	50	GPM	
				GPM	30'
12" 20 514	230'	2331	70	590	30'
	471	499		GPM	30'
	(12) WELL LOG:				
ow was seal placed: Method A B C D ME	Ground	Elevation			
Other ft. to ft. Material	Materia	_ <del></del>	Fene	To	SWL
			From	3,	3#L
ravel placed from ft. to ft. Size of gravel	Sandy	Loam	3	721	30 '
6) CASING/LINER:	Brown	CLAY	72'	81	30'
Diameter From To Gauge Steel Plastic Welded Threaded	Brown	Sand Clara	81'	514'	30'
Casing: 12'' +2' 128' 250 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Gray Sans	ione	01	3/7	50
			-		
ner:	<del>-</del> -				
inal location of shoe(s) / 2.8 /		DEARNIEN			
		HERENER			
Perforations Method		MAD o a num			
Screens Type Material Slot Tele/ptpe		MAR 26 2012			
From To size Number Diameter size Casing Liner	74147	ER RESOURCES D	EDT		
	WAI		-F.		
		SALEM, OREGON	-		
<del></del>					
			-		
A STORY OFFICE AND A STORY OF THE STORY OF T				<i>a.</i>	
WELL TESTS: Minimum testing time is 1 hour			ted <u>4//</u>	9/97	
Flowing	(unbonded) Water Well (				
Pump Bailer Air Artesian	I certify that the work I of this well is in compliant	performed on the construction			
Yleid gal/min Drawdown Drill stem at Time	Materials used and inform				
50 3' 1hr.	and belief.	-		•	
	44	2001.1.4	wwe Nun	nber <u>16</u>	75
	Signed Device	MUDERNIN	<u>-/ı</u>	Date <u>4/</u>	19/47
emperature of water 55 Depth Artesian Flow Found	(bonded) Water Well Con	nstructor Certification:			
/as a water analysis done?		for the construction, altere			
oid any strata contain water not suitable for intended use? X Too little	performed on this well dur performed during this time	ring the construction dates to it is compliance with O	s reported at regon water	oove. All w supply well	ork 
Saity Muddy Odor Colored Other	construction standards. The	his report is true to the be	st of my kno	wledge and	belief.
Depth of strata: 72'			WWC Nun	nber <u>143</u>	5
	Signed Jac Va	legtino		Date 4//	9/97
	Signed Jae Va	<u>legline</u>		Date 4//	9/97