



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

Application for Water Right Transfer

Part 1 of 4 – Minimum Requirements Checklist

This transfer 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.

FOR ALL TRANSFER APPLICATIONS

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Completed Transfer Application – Applicant Information and Signature.
- Part 4 – Completed Transfer Application – Water Right Information. Please include a separate Part 4 for each water right. List all water right certificates to be transferred here:

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- Fees – Amount enclosed: \$ **1150**.
 See <http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml#fees> or call (503) 986-0883.
- N/A Affidavit(s) of Consent.
- N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, Water Well Report/Well Log.

(For Staff Use Only)

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

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Part _____ is incomplete
<input type="checkbox"/> Additional signature(s) required	
Other/Explanation _____	
Staff: _____ 503-986-0 _____	Date: ____/____/____

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Part 2 of 4 – Transfer Application Map Checklist

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Your transfer application will be returned if any of the map requirements listed below are not met.

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is 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 Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), 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 right, 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 water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, 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 right certificate or 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°).

Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME CHRISTOPHER JAMES RAY		PHONE NO. 541-446-3265	ADDITIONAL CONTACT NO. 208-880-6344
ADDRESS 6144 MOLTHAN RD			FAX NO.
CITY Ironside	STATE OR	ZIP 97908	E-MAIL** CHRISRAY@RAYBROTHERS.NET

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

AGENT/BUSINESS NAME Nancy Rorick / Nancy Rorick Consulting		PHONE NO. 541-519-3644	ADDITIONAL CONTACT NO.
ADDRESS 645 L Loop			FAX NO.
CITY Baker City	STATE OR	ZIP 97814	E-MAIL** nrorick@yahoo.com

** BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.

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 water right, or portion thereof, proposed for transfer is located? Yes No

If NO, include signatures of all landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) has been conveyed.

Permanent Transfers Only (check one box)

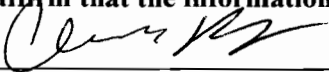
- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I 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 affirm that the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

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I understand that prior to Department approval of the transfer, 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 water right 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.



 Applicant signature	Christopher Ray owner Print Name (and Title if applicable)	4/17/2012 Date
_____	_____	_____
Applicant signature	Print Name (and Title if applicable)	Date

In your own words tell us what change(s) you want made and the reason for the change(s): **The purpose of the transfer is to provide a supplement groundwater right to a proposed irrigation pivot. The proposed transfer would allow the water right holder to improve irrigation efficiency by switching from furrow to a pivot irrigation system.**

Check the following boxes that apply:

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

At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. (To learn about sale agreements please visit our web site at: <http://www1.wrd.state.or.us/pdfs/Transfer-PropertyTransactions.pdf>)

RECEIVING LANDOWNER NAME n/a			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	

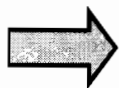
Describe any special ownership circumstances here: _____

- Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (**Tip:** Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME n/a	ADDRESS	
CITY	STATE	ZIP

- Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME n/a	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 Malheur County	ADDRESS 251 "B" St. West	
CITY Vale	STATE OR	ZIP 97918

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 4 of 4 – Water Right Information

Please use a separate Part 4 for each water right being changed. See instructions at http://www.wrd.state.or.us/OWRD/PUBS/docs/Hints_Forms_MS_Word.doc

CERTIFICATE # 85564

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Description of Water Delivery System

System capacity: 1.35 cubic feet per second (cfs) OR
605.88 gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines and sprinklers used to divert, convey and apply the water at the authorized place of use. **The primary rights are surface-water rights to divert water from Willow Creek. The surface water is pumped from the points of diversion through eight- and ten-inch PVC pipes to the places of use as shown on the transfer application map. The existing supplemental groundwater right (certificate 85564) is for wells 1 (Malh 023) and 2 (Malh 026). Water from these two wells is piped to the places of use via the same pipelines used for surface water.**

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate 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	MALH 23	14 S	39 E	20	SE SE	3400	240 feet north and 1,260 feet west of the SW 1/4 of Section 21
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MALH 26	14 S	39 E	21	SW SE	3400	370 feet north and 2,715 feet east of the SW 1/4 of Section 21
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

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

- | | |
|--|---|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

Will all of the proposed changes affect the entire water right?

- 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 water right to be changed.

Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Right Certificate # 85564

List only the part of the right 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.

Authorized ("from" lands) as they appear BEFORE THE CHANGES										Proposed ("to" lands) AFTER THE CHANGES																									
Twp	Rng	Sec	1/4 1/4	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	1/4 1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date															
2 S	E	15	NE NW	140	500	15.0	Irrigation	POD#1 POD#2	1911	POU	2 S	E	1	NW NW	500	1	10.0		POD#5	1901															
							EXAMPLE				2 S	E	1	SW NW	500		5.0		POD#6	1901															
14 S	39 E	20	SE SE	3400		7.1	Irrigation		1989	POU	14 S	39 E	21	NE SW	3400		14.0			1989															
14 S	39 E	21	SW SW	3400		0.1	Irrigation		1989	POU	14 S	39 E	21	SE SW	3400		1.9			1989															
14 S	39 E	21	SE SW	3400		21.6	Irrigation		1989	POU	14 S	39 E	21	NW SE	3400		22.8			1989															
14 S	39 E	21	SW SE	3400		10.0	Irrigation		1989	POU	14 S	39 E	21	SW SE	3400		0.1			1989															
TOTAL ACRES																	38.8	TOTAL ACRES																	38.8

Additional remarks: _____

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: **The primary certificate numbers are 46694, 47308, 56139 and the supplemental rights are certificates 31086 and 45777.**



Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # N/A ;
Surface water primary Certificate # N/A .

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # N/A

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://apps.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	Malh 023	319 ft	12 in	+1 - 173 ft	0 to 18 ft	52 ft to 172 ft	40 feet	alluvial: gravel with clay layers	not on log
Well 2	Yes	Malh 026	374 ft	12 in	+1 to 236 ft	0 to 18 ft	30 to 230 ft	31 ft	alluvial: gravel with clay layers	not on log

Application for Water Right Transfer

Evidence of Use Affidavit



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

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss
 County of MALHEUR)

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I, CHRISTOPHER JAME RAY, in my capacity as _____,

mailing address 6144 MOLTHAN ROAD, IRONSIDE, OR 97908

telephone number (541)446-3265, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

- Water was used during the previous five years on the **entire** place of use for Certificate # 85564; **OR**
- My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township		Range		Mer	Sec	¼ ¼		Gov't Lot or DLC	Acres (if applicable)
85564	14	S	39	E	W	20	SE	SE		20.5
85564	14	S	39	E	W	21	NE	SW		5.2
85564	14	S	39	E	W	21	NW	SW		8.4
85564	14	S	39	E	W	21	SW	SW		39.5
85564	14	S	39	E	W	21	SE	SW		8.3
85564	14	S	39	E	W	21	NW	SE		1.2
85564	14	S	39	E	W	21	SW	SE		15.6

OR

- Confirming Certificate # 85564 has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____ (For Historic POD/POA Transfers)

(continues on reverse side)

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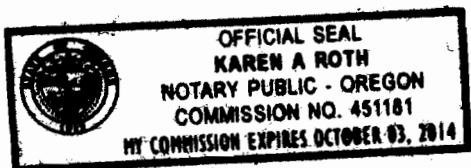
3. The water right was used for: (e.g., crops, pasture, etc.): _____

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

Christina Smith
Signature of Affiant

April 16/2012
Date

Signed and sworn to (or affirmed) before me this 16th day of April, 2012.



Karen A Roth
Notary Public for Oregon

My Commission Expires: October 03, 2014

Supporting Documents	Examples
<input checked="" type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> ● Power usage records for pumps associated with irrigation use ● Fertilizer or seed bills related to irrigated crops ● Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> ● District assessment records for water delivered ● Crop reports submitted under a federal loan agreement ● Beneficial use reports from district ● IRS Farm Usage Deduction Report ● Agricultural Stabilization Plan ● CREP Report
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terra-server.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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

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(1) OWNER: Owner's Well Number: _____
Name JOHN-MALTHAN
Address BOY 23
City TRONSIDE State ORE Zip 97908

(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:
Depth of Completed Well 319 ft.
Special Standards date of approval _____

HOLE		SEAL		Amount sacks or pounds		
Diameter	From To	Material	From To			
16"	0	18'	Bentonite	0	18'	14-SACKS
12"	18'	319'				

How was seal placed? Method A B C D E
 Other DRY-FROM-SURFACE
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	12"	1'	173'	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) 173

(7) PERFORATIONS/SCREENS:

Perforations Method MECHANICAL
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
52	122'	3/16"	480			<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min _____ Pumping level _____ Drill stem at _____ Time 1/4 hr _____
WELL - Pump TEST - ATCP 1 hr

Temperature of water 56 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 MALHEUR Latitude _____ Longitude _____
Township 14 North S, Range 39 E or WM.
Section 20 SE 1/4 SE 1/4
Tax Lot 3400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) SAMC

(10) STATIC WATER LEVEL:
40 ft. below land surface. Date 10-17-88
Artesian pressure _____ lb. per square inch. Date _____

(11) WELL LOG: Ground elevation _____

Material	From	To	WB?	SWL
Top-Soil	0	4		
CLAY-GRAY-DARK	4	18		
GRAVEL-MD	18	23		
CLAY-LT-BR	23	29		
CLAY-LT-BR-FINE GRAV	29	53		
CLAY-LT-BR/MD GRAVEL	53	82	WB	40
CLAY-LT-BR	82	92	WB	40
CLAY-FINE GRAVEL	92	95	WB	40
GRAVEL-FINE	95	100	WB	40
GRAVEL-FINE + some 2 1/2"	100	137		
CLAY-GRAY-TO-BP	137	167		
GRAVEL	167	169		
GRAVEL	169	172		
CLAY-LT-TAN	172	233		
CLAY-LT-BR-STICKY	233	253		
CLAY-LT-BR-STICKY	253	283		
GRAVEL-MD	283	285		
CLAY-LT-BR & GRAVEL	285	314		
GRAVEL-MD	314	319		

Date started 10-15-88 Completed 11-3-88

(unbonded) Water Well Constructor Certification:
I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed Jenny Schaffer Date 11-14-88

Company _____ Co. Job No. _____

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

Malt 026

Well # 145/390/21 ad

(1) OWNER: John Moltan, Owner's Well Number: _____ Name: JOHN MOLTAN Address: P.O. Box 23 City: IRONSIDE State: ORE Zip: 97908

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

(3) DRILL METHOD: [] Rotary Air [] Rotary Mud [X] Cable [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION: Depth of Completed Well: 374 ft. Special Standards date of approval: _____

Table with columns: HOLE Diameter, SEAL From, SEAL To, Material, Amount sacks or pounds. Row 1: 16" 0' 18' Baronite 0 18' 13-SACKS. Row 2: 12" 8' 374

How was seal placed? Method: [] A [] B [] C [] D [] E [] Other: DRY-FROM-SURFACE Backfill placed from: _____ ft. to _____ ft. Material: _____ Gravel placed from: _____ ft. to _____ ft. Size of gravel: _____

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 12 1' 236 250 [X] [] [X] [] Liner: [] [] [] []

Final location of shoe(s): 236'

(7) PERFORATIONS/SCREENS: [X] Perforations Method: MECHANICAL [] Screens Type: _____ Material: _____

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: 30' 230 5/16 2 510 [X] []

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [] Air [] Flowing Artesian Yield gal/min: _____ Pumping level: _____ Drill stem at: _____ Time 1/2 hr: 1 hr

Temperature of water: 66 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: MALHEUR Latitude: _____ Longitude: _____ Township: 14 N or S, Range: 39 E or W, M. Section: 21 SE 1/4 SW 1/4 Tax Lot: 3400 Lot: _____ Block: _____ Subdivision: _____ Street Address of Well (or nearest address): SAMC

(10) STATIC WATER LEVEL: _____ ft. below land surface. Date: 9-20-88 Artesian pressure: _____ lb. per square inch. Date: _____

(11) WELL LOG: Ground elevation: _____

Table with columns: Material, From, To, WB?, SWL. Rows include: Top-Soil, CLAY-DARK-GRAY, CLAY-LT.BR, GRAVEL-MD, CLAY-LT.BR, GRAVEL, CLAY-LT.GRAY, GRAVEL, CLAY-LT.BR+GRAY, GRAVEL, CLAY-LT.BR, GRAVEL-MD-TO-2", CLAY-LT-TO-DARK-BR, GRAVEL-MD, CLAY-LT.BR+GRAVEL-MIX, GRAVEL-MD, CLAY-LT.BR-TO-DARK-B, CLAY-GRAY-TO-BR, CLAY-GRAY, CLAY-BR, CLAY-BR-TO-GRAY, CLAY-LT.BR-W/PER-GR

RECEIVED

APR 27 2012

WATER RESOURCES DEPT SALEM, OREGON

Date started: 9-15-88 Completed: 10-15-88

(unbonded) Water Well Constructor Certification: I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed: _____ Date: _____

(bonded) Water Well Constructor Certification: I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed: Harry Schaffer Date: 11-12-88

Company: _____ Co. Job No. _____