

engineering · surveying · natural resources

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Oregon Water Resources Department

ATTN:

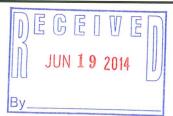
Carrie Matthews

1995 Third Street Suite 180

Baker City, Oregon 97814

### LETTER OF TRANSMITTAL

DATE	6/17/2014 JOB NO. 562-08
RE	City of Island City, Oregon
	Application for Permanent Water Right Transfer



### WE ARE SENDING YOU:

COPIES	DATE	DESCRIPTION	
1		Application for Permanent Water Right Trans	fer (T-11760)
THESE AF	RE TRANSMIT	TED AS CHECKED:	
	As requested		
	For your use	☐ For your files	
_	For approval	☐ For Bids Due	

### **REMARKS**

Carrie:

I have enclosed the final Transfer Application (T-11760) for the City of Island City. Please review the application and let me know if you have any questions.

We have mailed a check for \$450 to the Transfer Section in Salem for the increased fee for this transfer.

As always, thank you for your assistance.

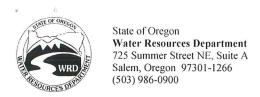
BAM/cd

cc: Dave Wildman, AP (w/o encl.)
Brandon Mahon, AP (w/o encl.)
File No. 562-08-22 (w/encl.)

Signed

Brandon A. Mahon, E.I

☑ La Grande, Oregon 97850-0939 / 1901 N. Fir, P.O. Box 1107 / (541) 963-8309, Fax (541) 963-5456
 ☑ Walla, Washington 99362-0032 / 214 E. Birch, P.O. Box 1687 / (509) 529-9260, Fax (509) 529-8102



# Application for Permanent Water Right Transfer Part 1 of 5 – Minimum Requirements Checklist

	Tł	nis transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.  For questions, please call (503) 986-0900, and ask for Transfer Section Fig. 1. The section of the complete section of th
Ch	eck all ite	ms included with this application. (N/A = Not Applicable)
$\boxtimes$		Part 1 – Completed Minimum Requirements Checklist.
$\boxtimes$		Part 2 – Completed Transfer Application Map Checklist.
		Part 3 – Application Fee, \$1,800 payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: <a href="http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator">http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator</a> . If you have questions, call Customer Service at (503) 986-0801.
$\boxtimes$		Part 4 – Completed Applicant Information and Signature.
		Part 5 – Information about Water Rights to be Transferred: <b>How many water rights are to be transferred? 2 List them here:</b> <u>Certificate No. 62005, Certificate No. 89288</u> Please include a separate Part 5 for each water right. (See instructions on page 6)
		Attachments:
$\boxtimes$		Completed Transfer Application Map.
		Completed Evidence of Use Affidavit and supporting documentation.
	N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
	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.
$\boxtimes$	□ 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 <b>all</b> of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
$\boxtimes$	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
	N/A N/A	Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.
		(For Staff Use Only)  WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):  Application fee not enclosed/insufficient Map not included or incomplete  Land Use Form not enclosed or incomplete  Additional signature(s) required Part is incomplete
		Other/Explanation

### 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. X 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 X inches. For 30 x 30 inch maps, one extra copy is required. JUN 19 2014 $\boxtimes$ A north arrow, a legend, and scale. X The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet. We 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. X Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines. X Tax lot boundaries (property lines) are required. Tax lot numbers are recommended. X Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads. X Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches. $\boxtimes$ 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. X 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. $\boxtimes$ N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or

more digits after the decimal (example  $-42.53764^{\circ}$ ).

12			
Paril 1	FEE WORKSHEET for PERMANENT TRANSFER ( Part 3 of 5	5 – Fee	Workshee
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,000
	Types of change proposed:	DEI	MEM
	☐ Place of Use	BE [] JUN 19	
	Character of Use	ILINI 1 9	2014
	Point of Diversion/Appropriation	ONIO	2011
	Number of above boxes checked = $\frac{1}{2a}$		
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0 By	THE RESIDENCE AND ADDRESS OF THE PARTY.	
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » »	2	0
	Number of water rights included in transfer 2 (3a)		
	Subtract 1 from the number in 3a above: 1 (3b) If only one water right this will		
	be 0		
3	Multiply line 3b by \$450 and enter » » » » » » » » » » » » » » »	3	\$450
	Do you propose to add or change a well, or change from a surface water POD		
	to a well?		
	No: enter 0 »» » » » » » » » » » » » » » » » » »		
4	Xes: enter \$350	4	\$350
	Do you propose to change the place of use or character of use?		
	No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »		
	Yes: enter the cfs for the portions of the rights to be transferred (see		
	example below*): (5a)		
	Subtract 1.0 from the number in 5a above: (5b)		
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » » » »		
5	and multiply 5c by \$300, then enter on line 5 » » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	5	\$1,800
0	Is this transfer:	0	\$1,800
	necessary to complete a project funded by the Oregon Watershed		
	Enhancement Board (OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net		
	benefit to fish and wildlife habitat?		
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » » Transfer Fee:	8	\$1,800
	for Line So calculation to transfer 45.0 cause of Driver Carifford, 12045 (4.4.1.1.25. C.C. 10.		1.45.0

\*Example for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

- 1. For irrigation calculate cfs for each water right involved as follows:
  - a. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs  $\div$ 100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac= 0.56 cfs).
  - b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of water rights on all the land included in the transfer; however do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land. The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

	FEE WORKSHEET for SUBSTITUTION		
1	Base Fee (includes change to one well)	1	\$725.00
	Number of wells included in substitution (2a)		
	Subtract 1 from the number in 3a above: (2b) If only one well this will be 0		
2	Multiply line 2b by \$350 and enter » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » Fee for Substitution:	3	N/A

## Part 4 of 5 – Applicant Information and Signature

### **Applicant Information**

Island City Oregon 97850 judy@islandcityhall.com  BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE							
Island City	Orogon	07950	indu@ialandai4b	-n			
CITY	STATE	ZIP	E-MAIL				
10605 Island Avenue			541-963-3482				
ADDRESS			FAX NO.				
City of Island City (Jud	y Rygg - City Reco	541-963-5017					
APPLICANT/BUSINESS NAM	ME	PHONE NO.	ADDITIONAL CONTACT NO.				

<b>Agent Information</b> – The a	gent is auth	orized to represent	the applicant in all	matters relating to this application				
AGENT/BUSINESS NAME Anderson Perry & Associates,	Inc (Mike	PHONE NO. <b>541-963-8309</b>	ADDITIONAL CONTACT NO.					
ADDRESS 1901 N. Fir Street			FAX NO. <b>541-963-5456</b>					
CITY <b>La Grande</b>	STATE Oregon	E-MAIL mposada@anderso						
La Grande Oregon 97850 mposada@andersonperry.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.								
Explain in your own words what								
Certificate 62005. Island City's Well No. 4 is POA1 for Certificate 89288 and is proposed as APOA3 for Certificate 62005. The proposed Well No. 5 will be APOA4 for Certificate 62005 and APOA2 for Certificate 89288. Proposed Well No. 5 will have a new steel aboveground reservoir adjacent to the well to help better supply the City's water distribution system. There will also be a new pump station building with new pumping system controls that will be located adjacent to the well. These transfers will allow the City to use the maximum allowable water rights from any combination of the City wells. All of these water system improvements are part of the City's effort to complete necessary upgrades to the existing Island City water distribution system.								
Check this box if this process Reinvestment Act. (Fed			nded by the Amer	rican Recovery and				
<ul> <li>□ By signing this application, I Department approval of the authorized to pursue the tran</li> <li>□ I affirm the applicant is a muname of the municipality or</li> <li>□ I affirm the applicant is an error condemnation the property to approve the authorized documentation.</li> </ul>	ransfer, I wasfer as ident nicipality as a predecessoritity with the	ill be required to pro ified in OAR 690-38 defined in ORS 540 or; <b>OR</b> e authority to conden	the draft preliminary vide landownership in (0-4010(5); <b>OR</b> 0.510(3)(b) and that then property and is account of the draft of the draf	nformation and evidence that I am Entering the right is in the JUN 19 2014 quiring by				

I understand that prior to Department approval of the transfer application, 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 newspaper: The La Grande Observer.

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



	• • •	
Applicant signature	<u>Dale DeLong, Mayor</u> Print Name (and Title if applicable)	6-12-2014 Date
Applicant signature	Print Name (and Title if applicable)	Date

supporting documentation.

EN N// CIT	Check here if any of the an irrigation or other was rigation or other was rigation district name.  Check here if water for a for stored water with a featury name.  TITY NAME  TY  TITY NAME  TY  and City  TITY NAME  TITY NAME  TITY NAME  TO STATE THE STATE	water rig	hts proport. ( <b>Tip</b> :  rights such carrier or o	ADDRESS STATE  ADDRESS STATE  ADDRESS STATE  ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ransfer are or we and attach Suppose and attach Suppose and attach Suppose are a water servity.	zip vice agree	rment or other contract  r, municipal ed, conveyed or used.			
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	Check here if any of the	water rig	hts propo	osed for t	ransfer are or w	ill be loca	ted within or served by	y		
_	_			_			By			
	Describe any special ownership circumstances here: N/A									
D	escribe any special owners	ship circu	matanaa		1.4		JON 10 2014			
							HIN 1 9 2014			
CI	TY	STATE	ZIP		E-MAIL		101666104			
Al	DDRESS					FAX				
N	/A				THORE NO.	ADDI	THOMAL CONTACT NO.			
RI	ECEIVING LANDOWNER NAME				PHONE NO.		ITIONAL CONTACT NO.			
	unless a sale agreement <a href="http://www.oregon.gov/">http://www.oregon.gov/</a>	or other of owrd/doc	aocumen <u>es/transf</u> e	t states o r-proper	therwise. For material the	nore inforr df	nation see:			
	If a property sells, the co	ertificated	d water ri	ight(s) lo	cated on the land	d belong t	o the new owner,			
	assignment will have to									
	information table below	. If you	do not kn	ow who	the new landow	ner will be	e, then a request for			
	If YES, and you know v	who the n	ew lando	wner wi	ll be, please com	nplete the	receiving landowner			
Α	At this time, are the lands in	n this tran	nsfer appl	lication i	n the process of	being solo	d? ☐ Yes ⊠ No			
	Copies of notices and correspondence should be sent to this landowner and the applicant.									
	Both the receiving landowner and applicant will be responsible for completion of change(s).									
	final order is issued. Copies of notices and correspondence should be sent to this landowner.									
	The receiving landowner will be responsible for completing the proposed change(s) after the									
	The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.									
				1 ^	7 73					
	Check the following boxes that apply:									
(	transfer is located? $\boxtimes$ Yes $\square$ No If NO, include signatures of all deeded 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) were conveyed.									
(	and/or e-mail addr	esses if diff	erent than	the applic	ant's) or attach affi	idavita of co	a tanaowners tana maiiing			
	and/or e-mail addr	ed? ⊠ Y esses if diff	es Nowerent Indian	O If NO, the applic	include signatures o ant's) or attach affi	of all deeded	d landowners (and mailing			

JUN 19 2014

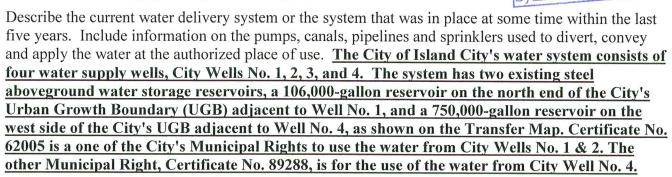
Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

### **CERTIFICATE** # 62005

### **Description of Water Delivery System**

System capacity: 1 cubic feet per second (cfs) OR

449 gallons per minute (gpm)



The water flow from Well No. 1 is connected with a 10-inch diameter PVC water transmission line that leads through a series of valves into the adjacent storage reservoir and then eventually into the City's water distribution system. The water flow from Well No. 2 is connected with a 6-inch diameter PVC water transmission line that leads into the City's water distribution system. The water flow from Well No. 4 is connected with a 8-inch diameter ductile iron water transmission line that leads through a flowmeter and a series of valves into the adjacent storage reservoir and then through a booster pump station and finally into the City's water distribution system.

The City of Island City currently utilizes Wells No. 1 and 2 in conjunction with Well No. 4 to meet water demands in the City's water use area. Wells No. 1 and 2 are operated as part of an ondemand system based on set points at the water booster pump station. The booster pump station is located at the 750,000-gallon reservoir site. The on-demand system is activated through telemetry as needed to keep the water level in the distribution system at a pre-set operating level.

**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	1/4 1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
POA1 (Well No.1)	□ Authorized     □ Proposed	UNIO 639	2 S	38 E	34	SE SW		90 feet North and 2,240 feet East from Southwest corner of Section 34, T.2S., R.38E., W.M.
POA2 (Well No.2)	□ Authorized     □ Proposed	UNIO 2477	3 S	38 E	3	NW NE		970 feet South and 2,050 feet West from Northeast corner, Section 3, T.3S., R.38E., W.M.

5 5										
APOA3 (Well No.4)	☐ Authorized ☑ Proposed	UNIO 2496	3	S	38	E	3	NW	SW	530 feet South and 100 feet East from the West One-quarter corner, Section 3, T. 3S., R.38E., W.M.
APOA4 (Well No. 5)	☐ Authorized ☐ Proposed		3	S	38	E	3	SW	SE	920 feet North and 90 feet East from the South One-quarter corner, Section 3, T.3S., R.38E., W.M.
Check	all type(s) of c	hange(s) pro	pos	ed b	elow	(cha	ange '	'CODI	ES" are	provided in parentheses):
	Place of Use	(POU)						Suppler	nental U	se to Primary Use (S to P)
	Character of	Use (USE)					F	Point of Appropriation/Well (POA)		
	Point of Dive	ersion (POD)					X A	Additional Point of Appropriation (APOA)		
	Additional Po	oint of Divers	sion	(APo	OD)			Substitution (SUB)		
	Surface Water POA (SW/G	er POD to Gre W)	ounc	d Wa	ter			Govern	ment Ac	tion POD (GOV)
Will all	of the propos	ed changes a	ffec	et the	enti	ire w	ater	right?		
⊠ Yes	Complete on	ly the Propos	ed ('	"to" (	or "o	n" la	nds)	section	of Table	e 2 on the next page. Use the

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

"CODES" listed above to describe the proposed changes.



No

Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

Do you have questions about how to fill-out the tables? Contact the Department at 503-986-0900 and ask for Transfer Staff.

# Table 2. Description of Changes to Water Right Certificate # 62005

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

				2 ( ) ( ) ( ) ( ) ( ) ( )		
ES	Priority Date		POA1 2-24-77	2-24-77	6-21-93	
CHANG	CHANG] POD(s)/ POA(s) to be used (from Table 1)		POA1	POA2	APOA3	APOA4
PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.	New Type of USE			Municipal POA2 2-24-77	Municipal APOA3 6-21-93	Municipal APOA4
or "on .R PR(				4	R	
(the "to" cear AFTEI are made.	Tax Gvt Lot or Acres					
D (the opear are	ax Lc					
POSE			W	Æ	W	SE
PRO)	1/4 1/4	USE	SE SW	3 NW NE	3 NW SW	SW
ting as	Sec	E OF	34	3	3	8
he lis	Rng	LAC	<b>E</b>	8	8 E	8 E
	Тwp	ITY	2 S 38 E	3 S 38 E	3 S 38	3 S 38
- Q		NDC	2	8	3	B
Proposed Changes (see	"CODES" from previous page)	FOR ISLA	POA	POA	APOA	APOA
ANGES	Priority Date	NT "A" I	2-24-77	2-24-77		
(s) OSED CHA	POD(s) or POA(s) (name or number from Table 1)	SEE ATTACHMENT "A" FOR ISLAND CITY PLACE OF USE	POA1	POA2		
AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.	Type of USE POD(s) or listed on Or number Date Certificate from Table 1)	SEEA	Municipal	Municipal		
rom" e BEF water r	Tax Gvt Acres Lot or DLC					
(the "f tificat of the	Gvt Lot or A DLC					
ZED he cer	Cot L					
HORI rs on t	11		AS MS	NE NE		
AUT appea that pa	7, 4,		SE	3 NW NE		$\dashv$
that tonly	Sec		34			
listing Lis	Rng		S 38 E 34	S 38 E		
The	Twp			S		
	L	PARTY.	7	3		

Additional remarks: This Certificate is a municipal water right. The change requested by this Transfer is adding two APOAs, which would be APOA3 (Well No. 4) and APOA4 (Well No. 5). The place of use does not change; it is the Urban Growth Boundary of the City of Island City.



### 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: <u>Island City</u> <u>Municipal Water Rights</u>; <u>Certificate 89288 (Well No. 4) and Permit G-14999 (Well No. 3).</u>



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 # <u>N/A;</u> Surface water primary Certificate # <u>N/A.</u>

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 Logs for Wells No. 1, 2 and 4 are attached

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: <a href="http://apps.wrd.state.or.us/apps/gw/well\_log/Default.aspx">http://apps.wrd.state.or.us/apps/gw/well\_log/Default.aspx</a>

### AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

### 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 the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

APOA4 (Well No.5)	(Yes or No) No	N/A	depth 500'+/-	Diameter 20" Upper 10"Lower	(feet) 250'+/- 250'+/-	(intervals) 230'+/-	(in feet) 80'+/-	(in feet) N/A	basalt, etc.)  N/A	water righ N/A
Proposed or Authorized POA Name or Number		If an existing well: OWRD Well ID Tag No.	Total well	Casing	Casing Intervals	Seal depth(s)	Perforated or screened intervals	Static water level of completed well	Source aquifer (sand, gravel,	Well -speci rate (cfs o gpm). If le han full rate

JUN 19 2014

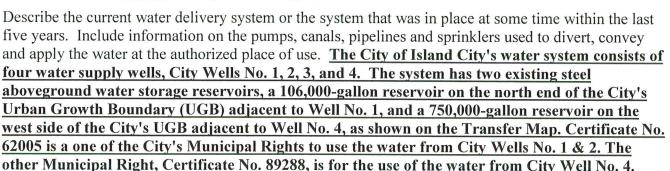
Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

### **CERTIFICATE #89288**

### **Description of Water Delivery System**

System capacity: 2.67 cubic feet per second (cfs) OR

1,198 gallons per minute (gpm)



The water flow from Well No. 1 is connected with a 10-inch diameter PVC water transmission line that leads through a series of valves into the adjacent storage reservoir and then eventually into the City's water distribution system. The water flow from Well No. 2 is connected with a 6-inch diameter PVC water transmission line that leads into the City's water distribution system. The water flow from Well No. 4 is connected with a 8-inch diameter ductile iron water transmission line that leads through a flowmeter and a series of valves into the adjacent storage reservoir and then through a booster pump station and finally into the City's water distribution system.

The City of Island City currently utilizes Wells No. 1 and 2 in conjunction with Well No. 4 to meet water demands in the City's water use area. Wells No. 1 and 2 are operated as part of an ondemand system based on set points at the water booster pump station. The booster pump station is located at the 750,000-gallon reservoir site. The on-demand system is activated through telemetry as needed to keep the water level in the distribution system at a pre-set operating level.

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	Rng Sec 1/4 1/4		Lc DL 1/4 1/4 0 Go:		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
POA1 (Well No.4)	□ Authorized     □ Proposed	UNIO 2496	3 8	3	38 E		3	NW	sw		90 feet North and 2,240 feet East from Southwest corner of Section 34, T.2S., R.38E., W.M.
APOA2 (Well No. 5)	☐ Authorized ☑ Proposed		3 8	3	38 E	6	3	SW	SE		920 feet North and 90 feet East from the South One-quarter corner, Section 3, T.3S., R.38E., W.M.

Check a	all type(s) of change(s) proposed below (c	hange	e "CODES" are provided in parentheses):
	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
	Character of Use (USE)		Point of Appropriation/Well (POA)
	Point of Diversion (POD)	$\boxtimes$	Additional Point of Appropriation (APOA)
	Additional Point of Diversion (APOD)		Substitution (SUB)
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV)
Will all	of the proposed changes affect the entire	wate	r right?
X Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the pro		) section of Table 2 on the next page. Use the changes.
No	Complete all of Table 2 to describe the po	rtion (	of the water right to be changed.
			DEGEIVEN

Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

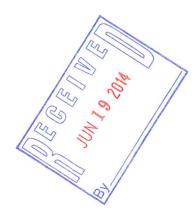
Do you have questions about how to fill-out the tables? Contact the Department at 503-986-0900 and ask for Transfer Staff.

# Table 2. Description of Changes to Water Right Certificate # 62005

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

		Priority Date		5-21-93	
PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES		New Type of POA(s) to USE (from Table 1)		Municipal POA1 6-21-93	Municipal APOA2
PROPOSED (the "to" or "on" lands) it would appear AFTER PROPOSEI		New J		Mun	Mun
o" or 'TER I	ade.	Gvt Lot or Acres DLC			
the "tar AF	are made.	Gvt Lot o DLC			
SED (		Tax Lot			
OPO		1/4 1/4		SW	SE
PR as it			USE	3 S 38 E 3 NW SW	3 S 38 E 3 SW SE
sting		Twp Rng Sec	EOF	ю	n
The li		Rng	LAC	80 E	∞ ⊞
		Q.	TY F	S	S
		Τw	D CI	m	т
Pronosed	Changes (see	Type of USE POD(s) or listed on or number Certificate from Table 1)	SEE ATTACHMENT "A" FOR ISLAND CITY PLACE OF USE	POA	APOA
ANGES		Priority Date	"A" IN	6-21-93	
ds) OSED CH/	be changed.	POD(s) or POA(s) (name or number from Table 1)	TTACHME	POA1	
AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES	List only that part or portion of the water right that will be changed.	Type of USE listed on Certificate	SEEA	Municipal	
e "from" icate BE	the water	Tax Lot or Acres			
D (th	on of	Gvt Lot or DLC			
RIZE) the o	- porti	Tax			
THOI ars or	oart or	1/4		SW	
AU	y that	7, 4,		3 S 38 E 3 NW SW	
g that	st only	Sec		3	
listin		Twp Rng Sec		38 E	
The		d <sub>v</sub>		S	
		T	100	8	

Additional remarks: This Certificate is a municipal water right. The change requested by this Transfer is adding one APOAs, which would be APOA2 (Well No. 5). The place of use does not change; it is the Urban Growth Boundary of the City of Island City.



Certificate #89288

### 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?  $\boxtimes$  Yes  $\square$  No

If YES, list the certificate, water use permit, or ground water registration numbers: <u>Island City</u> <u>Municipal Water Rights</u>; <u>Certificate No. 62005 (Wells No. 1 and 2) and Permit G-14999 (Well No. 3).</u>



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 # <u>N/A;</u> Surface water primary Certificate # <u>N/A.</u>

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 Logs for Wells No. 1, 2 and 4 are attached

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.

### AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

### 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 the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well	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 -speci rate (cfs o gpm). If le han full rate water righ
APOA4 (Well No.5)	No	N/A	500'+/-	20" Upper 10"Lower	250'+/- 250'+/-	230'+/-	80'+/-	N/A	N/A	N/A

# Application for Water Right **Transfer**



### **Evidence of Use Affidavit**

	Please print l	egibly or typ	e. Be as specif Supportin	fic as pos g docum	sible. Att entation i	ach additiona nust be attach	l pages if you led.	need more spacing.	
State o	of Oregon		)						
Count	y of Union)		) ss						
I, <u>Dal</u>	E DELONG, in m	ny capacity	as Mayor,						
mailir	ng address 1060	05 ISLAND AV	ENUE, ISLAND	CITY, OR	EGON 978	<u>50</u>			
teleph	one number ( <u>:</u>	541) <u>963-5017</u>	, being first	duly sw	orn depo	ose and say:			
	y knowledge o  Perso  ttest that:	of the exerc	*	of the w	·	nt is based or sional expert		JUN 19	₩ L3 2014
2. Ta	Water was u Certificate #	62005 AND 8	9288; <b>OR</b>	·		•			
							Gov't Lot	Acres	;
	Certificate #	Township	Range	Mer	Sec	1/4 1/4	or DLC	(if applicable)	
				-					
			-	-					
OR	C C : /	O4:641	1 1		1 2413				
	Confirming (					•			
	instream leas	se number i	s: (Not	e: If the	entire r	ight propose	d for	five years. The not leased instream.)	; OR
	The water rig						at a presump	otion of forfeiture for	•
	Water has be 10 years for 6					*		for more than	

Revised 2/5/2010

(continues on reverse side)

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

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.

Signed and sworn to (or affirmed) before me this /2 day of



My Commission Expires: \_ //- 28-15

Supporting Documents	Examples				
Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of <b>confirming</b> water right certificate that shows issue date				
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul> <li>Power usage records for pumps associated with irrigation use</li> <li>Fertilizer or seed bills related to irrigated crops</li> <li>Farmers Co-op sales receipt</li> </ul>				
Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul> <li>District assessment records for water delivered</li> <li>Crop reports submitted under a federal loan agreement</li> <li>Beneficial use reports from district</li> <li>IRS Farm Usage Deduction Report</li> <li>Agricultural Stabilization Plan</li> <li>CREP Report</li> </ul>				
Aerial photos containing sufficient detail to establish location and date of photograph	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.  Sources for aerial photos: OSU –www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com				
Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number				

# **Land Use Information Form**



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

### NOTE TO APPLICANTS

DEGEOVED

JUN 19 2014

By

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

### This form is NOT required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; OR
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and <u>all</u> of the following apply:
  - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
  - b) The application involves a change in place of use only;
  - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; and
  - d) The application involves irrigation water uses only.

### NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

## **Land Use Information Form**

Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266

(503) 986-0900

www.wrd.state.or.us

Applicant(s): City of Island City, Oregon

Mailing Address: 10605 Island Avenue

City: Island City

State: Oregon Zip Code: 97850

Daytime Phone: 541-963-5017

### A. Land and Location - See Attachment A

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	V4 V4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:
						☐ Diverted	☐ Conveyed	Used	
						☐ Diverted	☐ Conveyed	Used	
						☐ Diverted	☐ Conveyed	Used	
						☐ Diverted	☐ Conveyed	Used	
			water is p	roposed to be o	liverted, conveyed, and	or used or d	eveloped:		
11-85.11-95.21-95.21-95.21-95.21	ounty, Or sland City		n						
			_						
D D		D							
B. Descri				D					
☐ Permit	to Use or Sto Water Use	ore Water	Wate     Wate     ■ Wate	er Resources I r Right Transfer cation of Conser	☐ Permit	Amendment on the Amendment of Water	or Ground Wate	er Registrat	ion Modification
Source of w	ater: 🗌 Re	eservoir/Poi	nd 🖂	Ground Water	☐ Surface Water (n	ame)			
Estimated q	uantity of v	vater need	ed: <u>3.67</u>	cubic feet pe	r second	gallons per m	inute	icre-feet	
Intended use	e of water:	☐ Irriga ☑ Muni		Commercial Quasi-Munic	☐ Industrial		estic for	_ househol	d(s)
Briefly desc	ribe:				3				

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3.  $\rightarrow$ 

# For Local Government Use Only

The following section must be completed by a pentirely within the city limits. In that case, only land-use plan. Do not include approval for activ	the city planning agency must complete this frities such as building or grading permits.	orm. This deals	reject will be located only with the local JUN 19 2014
Please check the appropriate box be		name of the last o	
☐ Land uses to be served by the proposed wate your comprehensive plan. Cite applicable or	r uses (including proposed construction) are a dinance section(s):	llowed outright	or are not regulated by
☐ Land uses to be served by the proposed wate listed in the table below. (Please attach docu Record of Action/land-use decision and acceperiods have not ended, check "Being pur	mentation of applicable land-use approvals whompanying findings are sufficient.) If approva	nich have alread	ly been obtained.
Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land	-Use Approval:
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
Local governments are invited to express specia regarding this proposed use of water below, or o	I land-use concerns or make recommendations on a separate sheet.	s to the Water R	esources Department
Name:	Title:		
Signature:	Phone:	Date:	
Government Entity:			
Note to local government representative: Pleasign the receipt, you will have 30 days from the Form or WRD may presume the land use associated	Water Resources Department's notice date to	return the compl ble with local co	leted Land Use Information omprehensive plans.
Receipt fo	or Request for Land Use Informa	<u>tion</u>	The state of the s
Applicant name:			
City or County:	Staff contact:		
Signature:	Phone:	Date:	



WELL NO. 1

# OBSERVATION WELL UNIO

4N/O 1639

The original and first copy of this report are to be	LL REPORT	# PM
of this report are to be filed with the state engineer, salem 10, oregon ED within 30 days from the date of well completion.	e or print) CANC State Well No	***************************************
(1) OWNER: GLEN LasteR City of ISTAND CITY	(11) WELL TESTS: Drawdown is amount water level lowered below static level lowered lo	1 is M Equip, &
Address Island City	Yield: /000 gal./min. with 115 ft. drawdown after 1300 " 125"	6 hrs.
(2) LOCATION OF WELL:	" " " Bailer test - gal./min. with ft. drawdown after	hrs,
County UNION Driller's well number 265  'S 14 SW 14 Section 34 T. 3 S R. 38 E W.M.	Artesian flow g.p.m. Date  Temperature of water 54 Was a chemical analysis made?	Yes M No
Bearing and distance from section or subdivision corner 79' NoRTh ANG 401' W FROM	(12) WELL LOG: Diameter of well below casing	11"
3 to 7 SW to 9 Sectro'N 34		5 ft.
	Formation: Describe by color, character, size of material and stristow thickness of aquifers and the kind and nature of the mater stratum penetrated, with at least one entry for each change of	1
(3) TYPE OF WORK (check):	, MATERIAL FROM	13
New Well Deepening Reconditioning Abandon	Boulders (hard) 9 RAVE SMILL 13	
nandonment, describe material and procedure in Item 12.	SANDY Clay (MOOD Traz limbs) 48	51
(4) PROPOSED USE (check): (5) TYPE OF WELL:  Domestic   Industrial   Municipal   Rotary   Driven	Bouldins, SAND COARSE 57	141
Cable   Jetted   Irrigation   Test Well   Other   Dug   Bored	COARSI SAND (HARD) 191  9RAUL COARSI LOO	200
(6) CASING INSTALLED: Threaded [] Welded []	SAND FINE 204	210
(6) CASING INSTALLED: Threaded Welded F	SAND COARSE 210	1
12 " Diam, from 0 ft. to 201 ft. Gage - 250	GIRANZ LOOSE (PER SIZE) 224 Clay Brown dark 243	248
8 "Diam. from / 94/ ft. to 3/.5 ft. Gage . 250	Pangraval 249	263
(7) PERFORATIONS: Perforated? Yes   No	Clay BROWN dARK 263	273
Type of perforator used TORCh Cut	9 RAVA (P2 A Size) 223	315
Size of perforations in. by 6 in.  perforations from ft. to ft.		
800 perforations from 100 ft. to 201 ft.		MEMI
6 90 perforations from 200 ft. to 3/5 ft.	JUN 19 a	0044
perforations fromft. toft,		<del>                                      </del>
	By	ļ.,
(8) SCREENS: Well screen installed ☐ Yes ☐ No Manufacturer's Name		1
Manufacturer's Name Model No.	- I I	
Slot size Set from ft. to ft.	Work started MAY 9 1963 Completed June 7	1963
Diam. Slot size Set from ft. to ft.	Date well drilling machine moved off of well July	1963
(9) CONSTRUCTION:  Well seel Material used in seel CLM2N†	(13) PUMP:	
Well seal—Material used in seal	Manufacturer's Name Type:	
Diameter of well bore to bottom of seal	Type, and that a second that a	
Were any loose strata cemented off? Yes   No Depth	Water Well Contractor's Certification:	
Was a drive shoe used? ☐ Yes No	This well was drilled under my jurisdiction and this true to the best of my knowledge and belief.	report is
Was well gravel packed? ☐ Yes ☐ No Size of gravel:	NAME Otto Ellsworth	
Did any strata contain unusable water? Yes No	(Person, firm or corporation) (Type or pr	rint)
Type of water? Sunflice Depth of strata 6 - 48'	Address Rt. 2 PARMA Idaho	
Method of sealing strata off COM2NT	Drilling Machine Operator's License No. 282	
(10) WATER LEVELS:	[Signed] (978 Elloworth	····
Static level 20 ft. below land surface Date June 7/63  Artesian pressure lbs. per square inch Date	(Water Well Contractor) Contractor's License No. 3.18	19.63
	,	,

# WELL NO. 2



### **UNIO 2477**

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

STATE ENGINEER, SALEM 10, OREGON within 30 days from the date of well completion.

### WATER WELL REPORT

STATE OF OREGON (Please type or print)



State Well No. 3/38-34

State Permit No. (11) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? 
Yes Viv No If yes, by whom? Yield: gal./min. with ft. drawdown after ' hrs. ,, ,, ,, ,, ,, ,, Bailer test 30 gal./min. with 72 ft. drawdown after 4 Artesian flow g.p.m. Date Temperature of water 54/ Was a chemical analysis made? \( \subseteq \text{Yes} \) (12) WELL LOG: Diameter of well below casing Depth drilled 302 25 3 ft. Depth of completed well ft. 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. MATERIAL FROM DARK SANdy 0 Ġ CLAY 6 42110W 10 9RAUL 10 13 Clay Bluz 15 CAMINITED GRAVEL (HARD) 5-3 (he HUING) 74 (SOME SAND FIMI 74 85 85 123 (Pap SIZZ) WATER BEGG 123 197 SMIALL TO CORRESSAND 197 237 237 SMIAII 258 250 BROWN 275 258 275 290 GRAVAL FINZ (CLAYZY) Boulders Small with gravel Cla 1066 19 66 Work started 1 Completed Date well drilling machine moved off of well 1966 (13) PUMP: Manufacturer's Name Туре: ..... Water Well Contractor's Certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Ellsworth NAME .. (Person, firm or corporation) Island Address 4/7/ CRIGON Drilling Machine Operator's License No. 282 Contractor's License No. 398 Date 7/10

of well completion.
(1) OWNER:  Name ( ) Ly L2 S LK  Address 909 MANY St.  LA GRANd: ORLSON
(2) LOCATION OF WELL:  County While W Driller's well number 667  S 14 S W 14 Section 3 4 T. 3 5 R. 3 5 F W.M.  Bearing and distance from section or subdivision corner
Housing Douzlopment Unit ISLAND CITY LOTS.
(3) TYPE OF WORK (check):  Now Well Deepening Reconditioning Abandon Dandonment, describe material and procedure in Item 12.
(4) PROPOSED USE (check): (5) TYPE OF WELL:
Domestic   Industrial   Municipal   Rotary   Driven   Cable   Jetted   Irrigation   Test Well   Other   Dug   Bored
(6) CASING INSTALLED: Threaded Welded The Diam from 0-120 ft. to ft. Gage 2.50 ft. to 2.3 ft. Gage 2.50 ft. Threaded Thr
Perforated?   Yes   No
(8) SCREENS; Well screen installed ☐ Yes ☐-No
Manufacturer's Name
Model No.  Land Slot size Set from ft. to ft.  Diam Slot size Set from ft. to ft.
(9) CONSTRUCTION:  Well seal—Material used in seal  Depth of seal 0 = /3 \( \) ft. Was a packer used?  Diameter of well bore to bottom of seal \( \) in.  Were any loose strata cemented off? Yes \( \) No \( \) Depth \( \) 53 = /32  Was a drive shoe used? \( \) Yes \( \) No \( \) Size of gravel:  Was well gravel packed? \( \) Yes \( \) No \( \) Size of gravel:  Gravel placed from \( \) ft.  Did any strata contain unusable water? \( \) Yes \( \) No  Type of water?  Depth of strata  Method of sealing strata off
(10) WATER LEVELS:
Static level / 8 ft. below land surface Date 6/15/66
Artesian pressure lbs. per square inch Date

# WELL NO. 4



JNIO 2496 SEP 1 2 1994

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	SIMED		2	120	121
2496	L 2 1994		$\mathcal{I}_{\mathcal{N}}$	SKE	130h
oer.	1 4 1994		<i>f</i>		

STATE OF OREGON WATER WELL REPORT /

(as required by ORS 537.765)  Instructions for completing this report are on the last page of this form.	SALEM, OREGON	
(1) OWNER: Well Number 4	(9) LOCATION OF WELL by legal description:	
Name City of Island City	Courty I'm i on Latitude	
Address 10202 S. McAlister Road	County Union Latitude Longitude Township 3 NoXXRange 38 E or XX	
City Island City State OR Zip 97850	Township 3 North Range 30 E or W.2	WM.
(2) TYPE OF WORK	Section 3 NW 1/4 SW 1/4	
AND THE REPORT OF THE PROPERTY	Tax Lot Block Subdivision_	
New Well Deepening Alteration (repair/recondition) Abandonment	Street Address of Well (or nearest address) Walton Road	
(3) DRILL METHOD:		
Ager Cable Auger	(10) STATIC WATER LEVEL:	
Other	50' ft. below land surface. Date 7/29	1/94
(4) PROPOSED USE:	Artesian pressure lb. per square inch. Date	7
Domestic XXCommunity Industrial Irrigation	(11) WATER BEARING ZONES:	***
Thermal Injection Livestock Other	Sec. 4	
(5) BORE HOLE CONSTRUCTION:	Depth at which water was first found 8	-
Special Construction approval Yes X No Depth of Completed Well 490 ft.	•	
Explosives used Yes XXNo Type Amount	From To Estimated Flow Rate	SWL
HOLE SEAL		1000
Diameter From To Material From To Sacks or pounds		1
28"   0   8   Granular   0   8   2400#	SEE ATTACHED	+
Bentonite	PARTITION PARTIT	+
28" 8 230 Concrete 8 230 30 yards		+
19" 230 490		
How was seal placed: Method A B XXC D E	(12) WELL LOG:	
Other Colorado	Ground Elevation	
Backfill placed from ft. to ft. Material Silica san	d Material From To	ONT
Gravel placed from 200 ft. to 460 ft. Size of gravel 6-9	G Material From To	SWL
(6) CASING/LINER: 5/16 gravel from 460-490'		
Diameter From To Gauge Steel Plastic Welded Threaded	77	
A A COLOR DE LA CO	SEE ATTACHED	
	SEE ATTACHED	
	DE OS	
Liner: 10" 205 460.365KX XX		
Liner: 10" 205 460.365 XX	13-3411111	
	JUN 1 9 20 1 1 1 1 1	
Final location of shoe(s)  (7) PERFORATIONS/SCREENS:	2014	
	. D.,	
Perforations Method	By	
Slot Tele/pipe	A THE COUNTY OF	
From To size Number Diameter size Casing Liner		
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(O) TYPEY X CONCORD AND AND AND AND AND AND AND AND AND AN		
(8) WELL TESTS: Minimum testing time is 1 hour	Date started 6-13-94 Completed 7-29-94	4
Flowing	(unbonded) Water Well Constructor Certification:	
Pump Bailer Air Artesian	I certify that the work I performed on the construction, alteration, or aband	lonment
Yield gal/min Drawdown Drill stem at Time	of this well is in compliance with Oregon water supply well construction stan Materials used and information reported above are true to the best of my know	dards. wledge
1000 108' 36hrHu:-	and belief.	
1500 120' 5 hr.	WWC Number 1506	6,
2000 192' 4 hr.	Signed Date 8-3	1-94
Temperature of water 550 Depth Artesian Flow Found	(bonded) Water Well Constructor Certification:	
Was a water analysis done? Yes By whom Coffey Labs,	I accept responsibility for the construction, alteration, or abandonment wo	rk
Did any strata contain water not suitable for intended Pend le to hitle OR	performed on this well during the construction dates reported above. All wor performed during this time is in compliance with Oregon water supply well	k
Salty Muddy Odor Colored Other	construction standards. This report is true to the best of my knowledge and be	elief.
Depth of strata:	WWC Number 150	
	Signed Date 8-3	31-94
ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SE		

# TRANSFER APPLICATION MAP

