

# Application for Permanent Water Right Transfer

Part 1 of 5 - Minimum Requirements Checklist

This 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.

Check all iter	ms included with this application. (N/A = Not Applicable)
$\boxtimes \bigvee$	Part 1 – Completed Minimum Requirements Checklist.  OWRD
$\boxtimes \checkmark$	Part 2 – Completed Transfer Application Map Checklist.
$\boxtimes$ $\checkmark$	Part 3 – Application Fee, 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.
$\boxtimes$ $\checkmark$	Part 4 – Completed Applicant Information and Signature.
$\boxtimes$	Part 5 – Information about Water Rights to be Transferred: How many water rights are to be transferred? 1 List them here: Certificate 90564  Please include a separate Part 5 for each water right. (See instructions on page 6)
	Attachments:
$\boxtimes$	Completed Transfer Application Map.
$\boxtimes$	Completed Evidence of Use Affidavit and supporting documentation Cout From.
□ 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.
⊠ M/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 N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
□ 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
	Staff:503-986-0 Date://

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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	CWREs, see <a href="http://apps.wrd.state.or.us/apps/wr/cwre_license_view/">http://apps.wrd.state.or.us/apps/wr/cwre_license_view/</a> . 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.
$\boxtimes$		Permanent quality printed with dark ink on good quality paper.
$\boxtimes$		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, $11 \times 17$ inches, or up to $30 \times 30$ inches. For $30 \times 30$ inch maps, one extra copy is required.
×		A north arrow, a legend, and scale.
$\boxtimes$		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.
$\boxtimes$		Township, Range, Section, ¼ ¼, 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 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°).

	FEE WORKSHEET for PERMANENT TRANSFER   Part 3 of 5	– Fee	Worksheet
1	Base Fee (includes one type of change to one water right for up to 1 cts)	1	\$1,000
	Types of change proposed:  ☑ Place of Use		
	Character of Use JUL 2 5 2017		
	Point of Diversion/Appropriation		
	Number of above boxes checked = $\frac{2 (2a)}{1 (2b)}$ If only one change, this will be 0		
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » »	2	800
	Number of water rights included in transfer 1 (3a)		
	Subtract 1 from the number in 3a above: 0 (3b) If only one water right this will		
	be 0		
3	Multiply line 3b by \$450 and enter » » » » » » » » » » » » » »	3	0
	Do you propose to add or change a well, or change from a surface water POD		
	to a well?		
	No: enter 0 »» » » » » » » » » » » » » » » »		
4		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*): $\underline{1.7 (5a)}$		
	Subtract 1.0 from the number in 5a above: 0.7 (5b)		
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » »		
	If 5b is greater than 0, round up to the nearest whole number: 1 (5c) and		
5	multiply 5c by \$300, then enter on line 5 » » » » » » » »	5	300
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	2450
	Is this transfer:		
	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	2450

\*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 $\underline{0}$ (2a) Subtract 1 from the number in 3a above: $\underline{0}$ (2b) If only one well this will be 0		
2	Multiply line 2b by \$350 and enter » » » » » » » » » » » » » »	2	0
3	Add entries on lines 1 through 2 above » » » » Fee for Substitution:	3	0

# Part 4 of 5 - Applicant Information and Signature

#### **Applicant Information**

APPLICANT/BUSINESS NAM	IE .		PHONE NO.	ADDITIONAL CONTACT NO.
Eagle Crest Master Asso	ciation, Attn: EC	CMA President	541-548-9300	
ADDRESS				FAX NO.
PO Box 1215				
СПУ	STATE	ZIP	E-MAIL	
Redmond	OR	97756	debbieh@eagle-cr	est.com
By providing an e-n	MAIL ADDRESS,	CONSENT IS GIVE	EN TO RECEIVE ALL	CORRESPONDENCE FROM THE
DEPARTMENT ELECTI	RONICALLY, CO	PIES OF THE FIN	AL ORDER DOCUME	NTS WILL ALSO BE MAILED.

iall Boggs, PE, CWRE / Para DDRESS	motrix		PHONE NO. <b>541-508-7710</b>	ADDITIONAL CONTACT NO. <b>541-550-7694</b>
	meurx		341-306-7710	FAX NO.
50 NW Pacific Park Lane, Su	ite 110			N/A
rry	STATE	ZIP	E-MAIL	
end	OR	97701	nboggs@parame	
				CORRESPONDENCE FROM THE ENTS WILL ALSO BE MAILED.
				ransfer application, and why:
dd two points of appropri	ation and	expand place of	use to include all	of Eagle Crest I Service Area.
you need additional space, con	itinua on c o	enerate niese of non	er and attach to the	nnlication as "Attachment 1"
you need additional space, con	unue on a s	eparate piece of pap	er and allach to the a	ppheation as Attachment 1.
Check this box if this p	roject is fi	ully or partially fi	unded by the Am	erican Recovery and
Reinvestment Act. (Fed	leral stimu	ılus dollars)		
		<del></del> -		
Department approval of the authorized to pursue the trans.  I affirm the applicant is a muname of the municipality or I affirm the applicant is an excondemnation the property to supporting documentation.	asfer as iden unicipality a a predecess untity with the	ntified in OAR 690-3 as defined in ORS 54 or; <b>OR</b> are authority to conde	80-4010(5); <b>OR</b> 0.510(3)(b) and that	JUL 25 ZU17 cquiring by
		ce in a newspaper	with general circul	hay be required to submit payment
ne Department for publication is located, once per week uggest publishing the notice	in the follo	owing newspaper:		qualifying newspaper is available
ne Department for publication ght is located, once per week	in the follo	owing newspaper:	lication is true an	qualifying newspaper is available

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 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.

Check the following boxes to	11 /					
The applicant is resp continue to be sent to		_	etion of	change(s). Not	ices and correspondence	should
					ne proposed change(s) aft could be sent to this lando	
				_	e for completion of chan ndowner and the applica	- ' '
At this time, are the lands in	this tran	sfer appli	cation in	the process of	being sold? 🗌 Yes 🛛	No
	. If you d	lo not kno	ow who	-	nplete the receiving land oner will be, then a reque	
If a property sells, the counless a sale agreement <a href="http://www.oregon.gov/">http://www.oregon.gov/</a>	or other d	locument	states o	therwise. For 1		er,
RECEIVING LANDOWNER NAME				PHONE NO.	ADDITIONAL CONTACT	T NO.
ADDRESS				<u> </u>	FAX NO.	
СІТҮ	STATE	ZIP		E-MAIL		
individual properties.	ship circu	mstances	here: Q	uasi-municipa	l water right serving m	<u>any</u>
individual properties.  Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME	water rig	hts propo	esed for the Complete	transfer are or verand attach Su	vill be located within or	
individual properties.  Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME Swalley Irrigation District	water rig	hts propo	osed for Complete	transfer are or vee and attach Su	will be located within or supplemental Form D.)	
individual properties.  Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME	water rig	hts propo	esed for the Complete	transfer are or verand attach Su	vill be located within or	
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### **INSTRUCTIONS** for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please save the application form to your computer. Unlock the document by using one of the following

instructions for your Microsoft Word software version:

#### **Microsoft Word 2003**

Unlock the document by one of the following:

- Using the Tools menu => click Unprotect Document; OR
- Using the Forms toolbar => click on the Protect/Unprotect icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the Tools menu => click Protect Document;
   OR
- Using the Forms toolbar => click on the Protect/Unprotect icon.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

#### **Microsoft Word 2007**

- Unlock the document by clicking the Review tab, then click Protect Document, then click
   Stop Protect
- To relock the document, click Editing Restrictions, then click Allow Only This Type of Editing, select Filling In Forms from the drop-down menu, then check Yes, Start Enforcing Protection.

#### Microsoft Word 2010

- Unlock the document by clicking the Review tab, toggle the Restrict Editing icon at the upper right, then click Stop Protect at the bottom right. Then uncheck the "Allow only this type of editing in the document: Filling in forms" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the Editing Restrictions/Allow Only This Type of Editing/Filling In Forms box from the drop-down menu, then check Yes, Start-Enforcing Protection. You do not need to assign a password for the editing restrictions.

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# OWRD

#### Other Alternatives:

- Photocopy pages or tables in Part 5, mark-through any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

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 # 90564**

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

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System capacity: \_\_\_\_ cubic feet per second (cfs) OR

OWRD

765 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. Well 2A and Well 3 have historically supplied water to Eagle Crest through the community water distribution system under Certificate 90564. Water main sizes range from 2-inch to 10-inch diameter.

Well 2A shifted out of vertical alignment due to lateral geological movement. In order to maintain required water supply, Well 2B was drilled nearby as a replacement in 2007. In 2014 a submersible pressure maintenance pump was installed in the old Well 2A hole to handle low system demands, as the system doesn't have a reservoir. Well 2A and Well 2B pumps do not operate at the same time and are approximately 20 feet apart and of similar construction.

Well 3 encountered a sanding problem and Well 4 was drilled nearby as a replacement. The Well 3 hole currently is not in use. Wells 3 and 4 are approximately 40 feet apart and of similar construction. OWRD was notified prior to construction of the new wells, and considered the new Well 2A and Well 4 to be maintenance items. The intent of this water right transfer application is to update Certificate 90564 to reflect the actual well locations and change the place of use to include all of Eagle Crest I, per OWRD recommendation.

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)	T	wp	R	ng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)	
Well 2A	□ Authorized     □ Proposed	2A	15	S	12	E	23	NE	NE	200	491 FEET SOUTH & 2055 FEET EAST FROM N1/4 CORNER, SECTION 23	
Well 2B	☐ Authorized ☐ Proposed	2B	15	S	12	E	23	NE	NE	200	511 FEET SOUTH & 2055 FEET EAST FROM N1/4 CORNER, SECTION 23	
Well 3	□ Authorized     □ Proposed	3	15	S	12	E	23	NW	NE	6400	104 FEET SOUTH & 696 FEET EAST FROM N1/4 CORNER, SECTION 23	
Well 4	☐ Authorized ☑ Proposed	4	15	S	12	E	23	NW	NE	6400	64 FEET SOUTH & 692 FEET EAST FROM N1/4 CORNER, SECTION 23	

Check a	ll 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?
⊠ 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.

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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 # 90564

List the change proposed for the acreage in each ¼ ¼. 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.

Т	he l		_		appe	ears of	n the c	certific	cate BE		ds) POSED CHA Il be changed.	ANGES	Proposed Changes (see			The	e lis	ting			appea		TER P	on" lands) ROPOSED	CHANC	GES
Twp	,	Rng		Sec		1/4	Tax Lot	Gvt Lot or DLC		Type of USE listed on Certificate	DOD(-)	Date	"CODES" from previous page)	Tv	wp	Rı	ıg	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
	t	П	Ť										EXAMPLE													
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
	T													2	S	9	E	2	sw	NW	500		5.0		POD #6	1901
													APOA	15	s	12	E	23	NE	NE	15122 3A00 0200			Quasi- Municipal	Well 2B	5/20/198:
													APOA	15	s	12	E	23	NW	NE	15122 3A00 6400			Quasi- Municipal	Well 4	5/20/198
													POU	15	S	12	E	14	SE	sw	Multi ple	-		Quasi- Municipal	All	5/20/198
							- 1	5	OF	N/CD			POU	15	s	12	E	14	NE	sw	Multi ple			Quasi- Municipal	All	5/20/198
	T						. 8	1.1	VL	VEL			POU	15	s	12	E	23	SE	NW	Multi ple			Quasi- Municipal	All	5/20/198
									JUL 2	2017			POU	15	s	12	E	23	NW	SE	Multi ple	= 1		Quasi- Municipal	All	5/20/198
								C	W	RD			POU	15	s	12	E	23	NW	NW	Multi ple			Quasi- Municipal	All	5/20/198
						-																				
						ГОТА	L ACF	RES:												ГОТА	L ACE	ES:	n/a			

Additional remarks: Wells 2A, 2b, and 4 contribute to the same community water system serving the entire place of use. Well 3 is not currently used, but ECMA may in the future.

> RECE VED JUL 25 2017

Revised 7/1/2013

#### 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: Certificate 90565, Permit G-11762/T-10929.

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

#### 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 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). <u>If</u> less han full rate of water right
Well 2A	Yes	n/a	330'	12-3/4" 10"	0-25 0-330	0-25	250-330	157	clay, gravel, congl W/B	200 gpm
Well 2B	Yes	89926	334'	12"	(2)-334	0-48	256-336	246	sandstone, gravels WB	300 gpm
Well 3	Yes	n/a	275'	14"	(2)-25	0-25	220-275	226	coarse congl, boulders	600 gpm

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	Well -specific rate (cfs or gpm). If less han full rate of water right
Well 4	Yes	112239	518'	12" 10"	0-445 446- 518	0-31	458-518	245	black sands, basalt congl	500 onm

RECEIVED

JUL 25 2017

**OWRD** 



## District Water Right Transfer Supplemental Form D

# WATER RIGHTS ISSUED IN THE NAME OF OR WITHIN THE BOUNDARIES OF A DISTRICT

The Department encourages applicants to coordinate with districts during the planning and preparation of transfer applications involving water rights issued in the name of a district or involving the transfer of water rights located within the boundaries of a district.

This form must be included with your transfer application if the transfer involves rights issued in the name of a district or rights located within district boundaries. This form can be used for both permanent and temporary transfers.

	1. A	PPLICANT INFORM	MATION	
Name: Eagle Crest	Master Association	, Attn: ECMA Preside	e <u>nt</u>	
Address: PO Box 12	215			
City: Redmond	State: OR	Zip: <u>97756</u>		
Home Phone:	Work P	hone: <u>541-548-9300</u>	Other Phone: 1	<u> </u>
Fax:	**E-Mail	Address: debbieh@eagl	e-crest.com	
District Name: Swa Address: 54272 Coo	lley Irrigation Dist	DISTRICT INFORM	ATION	JUL 2 5 2017 OWRD
City: Bend	State: OR	Zip: <u>97703</u>		OWILD
Home Phone: n/a	Work Phon	e: <u>541-388-0658</u>	Other Phone: n/a	
Fax: <u>n/a</u>	**E-Mail Add	ress: n/a		
By providing an e-m	ail address, the dist	rict and the applicant c	onsent to receive all co	rrespondence from

\*\* By providing an e-mail address, the district and the applicant consent to receive all correspondence from the Department electronically. Copies of final order documents will also be mailed.

Supplemental Form D - 6/2016

District Concurrence

of well completion.

# WATER WELL REPORT ES

water resources department. (Please type or print) within 30 days from the date

AUG 2-1 1979 (Do not write above this line)

State Vell No. 150/12F -2300

State Permit No. 6-9103

well # 2

(1) OWNER: WATER RESOURCES DEPT	(10) LOCATION OF WELL:
Name NEIL CHASE SALEM, OREGON	County Deschutes Driller's well number
Address 1004 Cline Falls Rd. Star Rt.	NE 14 NE 14 Section 23 T. 15S R. 12E W.M.
Redmond, Oregon 97756	Bearing and distance from section or subdivision corner
(2) TYPE OF WORK (check):	A COLOR OF THE PROPERTY OF THE
New Well Deepening Reconditioning Abandon	e
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed well.
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found 307 ft.
Rotary Driven Domestic Industrial Municipal	Static level 157 ft. below land surface. Date 8-20-79
Cable	Artesian pressure   Ibs. per square inch. Date
(c) CASING INSTALLED: Threaded   Welded   X   12 3/4   Diam. from   0   ft. to   25   ft.   Gage   250   10   " Diam. from   0   ft. to   330   ft.   Gage   188     Threaded   Threaded   X   Cage   188   Threaded   Threaded   X   Cage   188   Threaded   Threaded   X   Cage   188   Threaded   Threaded   Threaded   Threaded   X   Cage   Threaded   Threaded   Threaded   Threaded   X   Cage   Threaded   Thre	(12) WELL LOG: Diameter of well below casing 15  Depth drilled 330 ft. Depth of completed well 330 ft.  Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.
Type of perforator used Factory & torch	MATERIAL From To SWL
Size of perforations 3 X 1/8 in. by 6 X 1/8 in.	Boulders/cemented gravel 0 19
480 perforations from 250 ft. to 330 ft.	Congl. hard gray lava 19 37
perforations fromft. toft,	Hard brwn lava 37 51
perforations fromft_ toft.	Brwn lava fractured 51 58
(7) SCREENS: Well screen installed?  Yes X No	Red_cinder_w/seams_of_red_lava5869
	Lava brwn fractured 69 89
Manufacturer's Name Model No.	Firm yellow sandstone 89 97 Hard 51k lava 97 119
Diam. Slot size Set from ft. to ft.	Hard blk lava 97 119 Sandstone gray hard (graywackiel19 123
Diam. Slot size Set from ft. to ft.	Hard blk lava 123 156
	Sandstone soft yellow 156/157
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Hard 51k lava 157 184
Was a pump test made?  Yes No If yes, by whom?	Firm brwn lava 184 212
gal./min. with ft. drawdown after hrs.	Clay, gravel, congl W/B 212 307 157
T	Brwn sandstone (firm) 307 330
n w - H N	- 1 1 1 (18 1 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Bailer test 200 gal./min. with 0 ft. drawdown after 4 hrs.	* ALL CONTRACTOR TO THE SECOND STATE OF THE SECOND
lan flow g.p.m.  1 rerature of water 53 Depth artesian flow encountered	7 25 70 0 20 70
1erature of water 00 Depth artesian flow encountered IL	8_20_ 70
(9) CONSTRUCTION:	Date well drilling machine moved off of well 1975
Well seal—Material used Portland Cement  Well sealed from land surface to 25 ft.  Diameter of well bore to bottom of seal 16 in.  Diameter of well bore below seal 15 in.  Number of sacks of cement used in well seal 21 sacks.  How was cement grout placed?	Drilling Machine Operator's Certification:  This well was constructed under my direct supervision.  Materials used and information reported above are true to my best knowledge and belief.  [Signed] Date 8-20, 19.79.  [Drilling Machine Operator's License No
	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.
Was a drive shoe used? Yes & No Plugs Size: location ft	Name LEWIS & CLARK DRILLING CO., INC.
Did any strata contain unusable water? Yes A No	(Person, firm or corporation) (Type or print)  Address P. O. BOX 583 Redmond, Or. 97756
Type of water? depth of strata	Address 1. 0. Box 300 Redinords 01. 37700
Method of sealing strata off	[Signed]
Was well gravel packed? Tyes XI No Size of gravel:	(Vater Well Contractor)
Gravel placed from	Contractor's License No. 594 Date Aug. 20. 1979
(TIST ADDITIONAL ST	SULAMALINE TO NECESCADU

(1) OWNER:	Well Num	ber: <u>#28</u>		<b>NELL</b> by legal descript			
Name _ Engle Creet Report M	ester Assoc. (E	MCA)		Hora Lattude		Longitud : YV. of Y	_
Address 7886 S. Falcon Creet	Or. State O	22p \$77.00	Becker 23/A) Textot 200 La	ME 1/4	NE		1/4 epile Cr
(2) TYPE OF WORK:			Street Address of Well	(or nearest address) Falgor	Creek	Dr.	
New Well Despening A	leration (repair/recor	dition) Abendonment	Eagle Creat Res				
(3) DRILL METHOD:			(10) STATIC WATE	R LEVEL: ov land autice.	De	m 3/10	V2007
Robery Air Robery Mad	Cable	Auger	Artesian pressure	b. per equare inc		<b>*</b>	
(4) PROPOSED USE:			(11) WATER BEAR				
Domestic E-Community	Industrial	Intention	Depth at which water w	es tractioned 342			
Thermal Injection	Livestock		From 246	To Est	Mind Flor	Rate	5W4.
(6) BORE HOLE CONSTRUC							-
Special Corninuction approval 🏻 Yes Explosives used 🗎 Yes 🛣 No — Type		Completed Well 334 9 Amount	-				+
HOLE	SEAL	Amount	(12) WELL LOG:	· · · · · · · · · · · · · · · · · · ·			-
16h 0 336 Coment	Starry 0	To cests or pounds 48 78 sector		Ground elevation			
			Too Boll	Autorial	From	To	SML
			Cobblee & Send		1	19	
			Gray Baselt		37	37 61	
Howwas seel placed: Method: A	DB []C	D DE	Brown Freetured B		61	58	
Back/III placed from 1. to	R. Material		Red Cinder Consider Brown Fractured B	reek	69	88	
Gravel placed from R. to	_ ft. Size of gr		Yellow Sandstone Black Lave		88	119	-
(6) CASING/LINER: Dismater From To 6	Desgo i Stool Pi	estic Walded Threeded	Black Sandstone		119	123	
County 12in +2 234	250		Black Lave Yallow Sandstone		123	166	
			Hard Mack Lave Prown Beenk		157	184	
Ness			Black Sendstone		212	246	
Liner:			Black Sendstons & Brown Sendstons		244	307	_
Final location of shoe(s)							
(7) PERFORATIONS/SCREEN			TOTAL COLUMN THE REAL PROPERTY.	394' after bottom Z ser	DOC.		
Perforations Method F	Iclory Sew Mil		WESTERN	WATER DEVELOPMEN	-		1
From To stan Number	Diameter sine	Contra Liner		O. Box 1670			
290 330 3/16 1204			Redmi	ond, OR 97756			
			Date started 3/5/2007	Completed 5	116/200	7	
				Constructor Certification			
(8) WELL TESTS: Minimum t			of this well is in compliance	rformed on the construction, all with Oregon water supply well	constructi	on atom	larda.
(0) WELL 15018: MITHINGH T X Pump - Seiter	Delicing with the t	Plouing Artesian	Materials used and informational baller.	illon reported above are true to	my best to	nowledg	
					WC Numb	<b></b>	
Yield gelimin Drawdown	Drift elem et	Time	Signed	O			
				Constructor Certification:			
		<u></u>		the construction, elecation, or ng the construction dates report			
Temperature of Water <u>64</u> D Was a water analysis done? (2) Yes	epth Artesian Flow f	ound	performed during this time	is in compliance with Oregon w is raport is true to the best of m	alor augol	well .	
Old any strate contain water not suitable	for intended use?	Teo Mile	1 60	the L w	AC Humb	w 131	
Bally Mustby Odor Chi	TEVED -		Robert Buckr	More	P 3/30/	2007	
ORIGINAL - WATER RESOURCE	DEPARTMENT	FIRST COPY - CON		COPY - CUSTOMER			
SINGHAF - MAILEL LICOSOFT	A selecte of a s bitter and a						

UCI 28 2008

**OWRD** 

STATE OF OREGON

### **DESC 57946**

WELL ID # L 89926

(START CARD) # 190432

(1) OWNER:		Well Number	#2B	(9) LOCATION OF W		ecription	٠.	Longitud	
Name Eagle	Creat Resort M	laster Assoc. (EM	ICA)			2E	_	W. of V	
City Redm	S. Falcon Crest ond	State OR	Zip 97756	Section 23(A)	NE	_1/4 _NE			14
(2) TYPE OF				Tax lot 200 Lot Street Address of Well (	Block or nearest address)	Ealcon Cn	net i	Dr. Dr. Es	igle Cr
X New Well		Jeration (riidair/meendi	ign) Abendonment	Eagle Crest Res					
(3) DRILL ME				(10) STATIC WATER	LEVEL:				
X Rotary Air	Rotary Mud	Cable		246 ft. below	w land surface.  Ib. per so	quare inch.		te <u>3/16</u>	/2007
			_ 4 5 ZUI/	(11) WATER BEARI	NG ZONES:				
(4) PROPOSE	X Community		AHOJO	Depth at which water wa	s first found 246				
☐ Domestic		Industrial Livestock	Old	From	To	Estimated	Flow	Rate	SWL
(5) BORE HO	LE CONSTRUC	TION		246	336	80	0+		246
• •	ion approval Yes		ompleted Well 334 ft.						
	Yes X No Ty	хе А	mount						
HOLE Diameter From 15in 0	1	SEAL Interial From To Silurry 0	Amount o sacks or pounds 48 78 sacks	(12) WELL LOG:	Ground el	evation			
TOIL O	330 Cement	Sidily V	70 Sacks		laterial	Fn	om	То	SWL
				Top Soil			0	1	OVE
				Cobbles & Sand		-	1	19	
				Gray Basalt Brown Basalt			19 37	37 51	
	ced: Method A	B XC D	□E	Brown Fractured Ba			51	58	
Other Backfill placed from	m ft. to	ft. Material		Red Cinder Conglor Brown Fractured Br			58	69	
Gravel placed fro		ft. Size of grav		Yellow Sandstone	19:411		69 88	88 97	
(6) CASING/L	INER:			Black Lava			97	119	
Diamete		Gauge   Steel Plast	tic Welded Threaded	Black Sandstone Black Lava	~		19	123 155	
Casing: 12in		.250		Yellow Sandstone			55	157	
				Hard Black Lava			57	184	
				Brown Basalt Black Sandstone			84 212	212 246	
Liner:				Black Sandstone &			46	307	246
Final location of sh	hoe(s)			Brown Sandstone C	onglomerate W	B :	107	336	246
	TIONS/SCREE	NS:		Well completed at 3	34' after bottom	2' settled	1		
X Perforation	ns Method E	actory Saw		Western V	VATER DEVELO	CARCALL			
Screens	Type Slot	Meteri Tele/pipe			). Box 1670	hweis.			
From To	size Number	Diameter size	Casing Liner			E /			
256 336	3/16 1286			KEUMO	and, OR 977	70			
				Date started 3/5/2007	Com	pleted 3/16	200	7	
				(unbonded) Water Well					
				I certify that the work I per of this well is in compliance					
	_	testing time is 1 h		Materials used and informat					
X Pump	Beller	Air	Flowing Artesian	belief.		wwc	Marenh		
Yield gal/min	Drawdown	Drill stem at	Time	Signed		Date	101110		
300	.5ft	278	8 hr.						
				(bonded) Water Well Co					
				I accept responsibility for to performed on this well during					
Temperature of W		Depth Artesian Flow fou		performed during this time is					in.
	rais done? XYes	By whom Umpqua		construction standards. The	report is true to the	•		_	
Salty Mud	tain water not suitabl	e for intended use?	Too little	Signed Section	Movel	Date 3		er <u>138</u>	5
Depth of strata:		COCIACD		Robert Buckne	er			- WOLL	
ORIGINAL - WA	TER RESOURCE	DEPARTMENT	FIRST COPY - CONS	STRUCTOR SECOND	COPY - CUSTOM	ER	_		

S/12E/14a (START CARD) (as required by ORS 537.765) WATER RESOURCES DEFICATION OF WELL by legal description: (1) OWNER: Eagle Crest Partners Ltd. County Desch Longitude SALEM. OREGON Address P.O. Box 1215 Nor S, Range Township. Zip 97756 Redmond State Section (2) TYPE OF WORK: \_ Block Subdivision. Tax Lot Street Address of Well (or nearest address) Eagle crest Resort Deepen ... Recondition 1522 Clinefalls Rd.-Redmond, OR (3) DRILL METHOD (10) STATIC WATER LEVEL: Rotary Air Rotary Mud Cable Date 1-10-90 224 ft. below land surface. Other (4) PROPOSED USE: \_ lb. per square inch. Artesian pressure \_\_\_\_ **Community** ☐ Industrial Domestic ☐ Irrigation (11) WATER BEARING ZONES: Other . ☐ Injection ☐ Thermal Depth at which water was first found ... (5) BORE HOLE CONSTRUCTION: 283 Special Construction approval Yes No From Depth of Completed Well. X No X Explosives used Type \_ Amount HOLE Amount Diameter From Material From To sacks or pounds (12) WELL LOG: NO DRITLING DONE Ground elevation Material Other \_ WE INSTALLED A 10" LINER TO ACT AS Backfill placed from \_\_\_ ft. to \_ ft. Material AN EXTENDED RISER PIPE ON TOP Gravel placed from . Size of gravel OF SCREEN. RISER PIPE IS ATTACHED (6) CASING/LINER: TO SCREEN BY CENTERING A 10 1/8" O.T Gauge Steel Plastic Welded Threaded Diameter From To NIPPLE INSIDE SCREEN AND RESTING LINER П П Casing: ON TOP OF SCREEN. SEE ATTACHED DIAGRAM FOR SPECIFIC DETAILS. П WELL SCREEN WAS CLEANED OUT TO ORIGINAL DEPTH OF 282' 8". 25'8 R 1 Final location of shoe(s) . (7) PERFORATIONS/SCREENS: Method original screen ☐ Perforations ☐ Screens Material Slot Tele/pipe To From Number, Diameter Casing Liner size П · 🗖 -9-90 Completed Date started. (unbonded) Water Well Constructor Certification: (8) WELL TESTS: Minimum testing time is 1 hour Flowing Artesian Pump ☐ Bailer ☐ Air

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed .

WWC Number .

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. all work performed during this time is in compliance with Oregon well construction standards, this report is true to the best of my knowledge and belief. **WWC Number** 

Signed \_

SECOND COPY - CONSTRUCTOR

THIRD COPY - CUSTOMER

SWL

Did any strata contain water not suitable for intended use? 

Too little

Yes By whom \_\_\_

Drawdown

39

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other \_

Drill stem at

\_ Depth Artesian Flow Found .

Time

1 hr.

24

Yield gal/min

600

Temperature of water . Was a water analysis done?

Depth of strata:

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537,765)

# MEUSINLA

oep 16 क्षेत्रे ः

5312/55/12E-1/de well log #2

(as required by ORS 537.765)	17304
(1) OWNER:  Name Eagle Crest Resort	(9) LOCATION OF WELL By legal description:
Address 1522 Cline Falls Rd.	160
City Redmond State OR Zip 97756	16 Chi Strange CT
	Section
(2) TYPE OF WORK:	Tax Lot Lot Block Subdivision
New Well Deepen Recondition Abandon	Street Address of Well (or nearest address)
3) DRILL METHOD:	
Rotary Air Rotary Mud Cable Other	(10) STATIC WATER LEVEL:
	226 ft. below land surface. Date 8-15-88
	Artesian pressure lb. per square inch. Date
PROPOSED USE:	(11) WELL LOG: Ground elevation
mestic Community Industrial Irrigation	
☐ Thermal ☐ Injection ☐ Other	Material From To WB? SWL
(5) BORE HOLE CONSTRUCTION:	
Depth of Completed Wellft.	
Special Standards date of approval	
HOLE SEAL Amount Diameter From To Material From To sacks or pounds	
NAME OF PORTOR	
	install casing and sandscreeh
	see well log #1 for Eagle Crest Resort
	start card # 5310
How was seal placed? Method	
Other	
Backfill placed fromft. toft. Material	
Gravel placed fromft. toft. Size of gravel	
(6) CASING/LINER:	
Diameter From To Gauge Steel Plastic Welded Threaded	
Casing:	
iner: 12" +2 -225 .188 K	"  JUL <b>2</b> 5 2017
Final location of shoe(s)	
(7) PERFORATIONS/SCREENS:	
Perforations Method	
Coolea	
XI Screens Type COUKE Material Slot Tele/pipe	
From To size Number Diameter size Casing Liner	
-220   -275   20     12"   Tele	
	Date started 8-29-88 — Completed 8-31-88
	Date started
(8) WELL TESTS: Minimum testing time is 1 hour	(unbonded) Water Well Constructor Certification:
Pump Bailer Air Flowing	I constructed this well in compliance with Oregon well construction
Yleld gal/min Pumping level Drill stem at Time	standards. Materials used and information reported above are true to my best knowledge and belief.
ried gavining rever Drin stem at 11me	AND THE WORLD TO LETTE LETTE AND ADDRESS OF THE ADD
1 hr	SignedDate
700 270 ft. 24 hr.	(bonded) Water Well Constructor Certification:
A & H Pump Services	,
Temperature of water Depth Artesian Flow Found	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
Was a water analysis done? Yes By whom	knowledge and belief.
Did any strata contain water not suitable for intended use?   Too little	P 11 0000
Salty Muddy Odor Colored Other	Signed Yang Grand Date 9-9 8
Depth of strata:	Company Crawford Well Drilling Co Joh No.
	TARREST TO THE TARRES

(1) OWNER	by ORS 537.765)			11	Toki Garage		RT CARD) #			
Name Fanl	: e Crest R		Well Number	r, ·	(9) LOCA	TIONQ	WELL by I	egal descript	ion:	
	Cline Fall				County	155	Latitude	12F	•	
City Redm		State	OR.	Ztp 97756	Township Section	14	Nors, Range	SE	_E or W	, WML
(2) TYPE O					Tax Lot _		otBloc		hvielon	
		Recondition	☐ Abs	ndon			or nearest address) _			
(3) DRILL!										
	☐ Rotary Mud	Cable			(10) STA	TIC WA'	TER LEVEL	:		
Other							v land surface.			
(4) PROPO					Artesian p	ressure	lb. per sq	uare inch. Date		
		Industrial	X Irrigation	on	(11) WAT	ER BEA	RING ZONI	ES:		
		Other			Depth at which					
	OLE CONST				From		To	Estimated Flow	. D.4.	SW
	n approval Yes No	Depth	of Complete	d Well ft.	From		10	Estimated Flov	rate	SW
Explosives used	☐ ☐ Type _	A	mount							+
HOLE		SEAL		Amount					-	
Diameter From	To Mater	ial From	То	sacks or pounds						
		-			(12) WEL	L LOG:	Ground elevat	tion		
						Mat	erial	From	To	SW
				•	well so		d sagged t			1
low was seal placed	l: Method	□B □C		E	-228.	Screen	is now fro			
Other						-283.				
_	ft. to		ial		bailed	out to	a depth of	-256		
(6) CASING	ft_ to	n. Size o	f gravel							-
Casing:	227 235	.188 🖄	00000	/elded Threaded	R	JUL	2.5 2017			
Final location of sh						OW	ADD .			-
	RATIONS/SC	CREENS:				-			-	+
Perforation	- 4							1		+
☐ Screens	Type		Material . le/pipe							
From To				Casing Liner						
_		-								
	1 -								-	-
										+
					Date started.	8-14-	-89	8	-16-8	89
								npleted		
8) WELL T	ESTS: Minin	num testing t	ime is 1	hour			Constructor Cork I performed of		on elte	
	☐ Bailer	☐ Air		Flowing			l is in complian			
Dumn			-		knowledge and		and information	reported above as	e true t	о ту
Pump	Drawdown	Drill stem	<u>a.</u>	Time	anowieuge and	a Dellet.	-	WWC Nu	mber	
Pump Yield gal/min			-	1 hr.	Signed			Date		
		4				4 W-11 C				
Yield gal/min			,				onstructor Cert		or ahar	adon
Yield gal/min Temperature of wat		. Depth Arte	sian Flow F	ound	I accept work perform	responsibilited on this w	ty for the construent during the con	ection, alteration, estruction dates re	ported	above
Yield gal/min Temperature of wat Was a water analysi		By whom			work perform	responsibilited on this water	ty for the constru	ection, alteration, estruction dates re n compliance w	ported ith Ore	abov

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

STATE OF OREGON WATER WELL REPORT	RECEIVED		310 /		RE-
(as required by ORS 537.765)	SEP 16 1000 W				
(1) OWNER: Owner's Well Number: 6	(9) LOCATION OF WELL BY I	egal d	escript Longitude	tion:	,
Address 1522 Cline Falls Rd.	Township 15S Nor S, Range	12	Ε	Lor W.	WM.
City Redmond State OR Zip 97756	Section 14 SW 4	SE	34		
(2) TYPE OF WORK:	Tax Lot Lot Block		Subdi	ivision	
New Well Deepen Recondition. Ahandon	Street Address of Well (or nearest address)				
(3) DRILL METHOD:	1522 Cline Falls Rd. F	Redmon	nd, OF	3	
Rotary Air Rotary Mud Cable Cother	(10) STATIC WATER LEVEL	:		8-15	QΩ
					-00
AN PROPOSED VICE	Artesian pressure lb. per s	quare inc	n. Date		
PROPOSED USE:  mestic	(11) WELL LOG: Ground elevation	Om			
	Material	From	To	WB?	SWI
	topsoil	Ω	2	WDI	DMI
(5) BORE HOLE CONSTRUCTION:		2	37		_
Deput of Companion 11 de Tage	grey hard rock	1 000			-
Special Standards date of approval	brown coarse conglomerate		85	-	-
HOLE SEAL Amount	tan broken lava	85	127		-
Nameter From To Material From To sacks or pounds 8"   +2   -25   cement   0 ·   -25   24   Sacks	brown coarse conglomerate				
6" -25 -290	and boulders	127	226		22
	broken black rack	226	231	yes	
	fine black sand	231 .	271	yes	
	brown coarse conglomerate	271	290		
ow was seal placed? Method					
Other	. Also site				
ackfill pigged fromft. toft. Material					
revel placed fromft. toft Size of gravel					
6) CASING/LINER:	THE VENT OF				
Diameter From To Gauge Steel Plastic Welded Threaded					
asing 14"  +2  -25   250 🕅 🗆 🗆	uu or 2017				-
	JUL 25 70 17 :				
					-
					-
iner:	· · · · · · · · · · · · · · · · · · ·				
	- \				-
nal location of shoe(s)					
7) PERFORATIONS/SCREENS:					
Perforations Method					
Screens Type Material	• • • • • • • • • • • • • • • • • • • •				
Slot Tele/pipe					
From To size Number Diameter size Casing Lines					
	(S.2)				
	Date started 7-27-88 Com	pleted	8-	-15-8	8
	Date states to				
B) WELL TESTS: Minimum testing time is 1 hour Flowing  Pump  Bailer	(unbonded) Water Well Constructor Ce I constructed this well in complianc standards. Materials used and information a knowledge and belief.	e with	Oregon v		
14 hr	91—4		_Date_		
1 hr	Signed		_ LUIG_		
	(bonded) Water Well Constructor Certi	fication	n;		
	I accept responsibility for construction			d its co	mplia
emperature of water Depth Artesian Flow Found	with all Oregon water well standards. This				
/as a water analysis done?	Signed Sorry Sugar	2	ate 9	7-9-	88
Selty Muddy Odor Colored Other	1				
epth of strate:	Company Crawford Well Drill	ing c	o, Job N	0	

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537 765 & OAR 690-205-0210)

**DESC 59818** 

WELL I.D. LABEL# L 112239

START CARD # 1020794

ORIGINAL LOG #

(as required by ORS 537.765 & OAR 690-205-0210)	0/8/2013	ORIGINAL LOG	#		
(1) LAND OWNER Owner Well I.D.					
First Name Last Name	(9) LOCA	TION OF WELL (legs	al descript	tion)	
Company EMCA		CHUTES Twp 15.00 S	_		E/W WM
Address PO BOX 1215	Sec 23	NW 1/4 of the NE	1/4 T	ax Lot 6400	0
City REDMOND State OR Zip 97756	Tax Map Nu	mber		ot	
(2) TYPE OF WORK New Well Deepening Conversion	Lat	o ' or 44.26166	5667		DMS or DD
Alteration (complete 2a & 10) Abandonment(complete (2a) PRE-ALTERATION	Long	" or <u>-121.258</u>	833333		DMS or DD
Dia + From To Gauge Stl Plstc Wld Thrd	•	Street address of well	Nearest add	ress	
Casing:		ON DR WELL#3			
Material From To Amt sacks/lbs	REDMOND	,OR			
Seal: (3) DRILL METHOD	(10) STAT	TIC WATER LEVEL			
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) 5171		Date SWI	(psi) +	SWL(ft)
Reverse Rotary Other		Well / Pre-Alteration			
	Complet	ed Well 10/7/20	013		245
(4) PROPOSED USE Domestic Irrigation Community		Flowing Artesian?		Hole?	
Industrial/Commercial Livestock Dewatering	WATER BEA	RING ZONES Depti	h water was f	irst found 3	00.00
Thermal Injection Other	SWL Date	From To	Est Flow S	WL(psi)	+ SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach	copy) 8/20/2013	300 398	500		245
Depth of Completed Well 518.00 ft.	9/18/2013		500		245
	acks/				
	lbs	- R/~ G.E.V	17-1-		
17.5 0 31 Cement 0 31 38 5	8	5.36m UL	1 62 1 1		
11.5 349 455					
10 455 518	(11) WEL	LLOG John Bleg	fibh 2984.	.00	
How was seal placed: Method A B X C D E		Material		From	То
Other	SAND GRA			0	1.5
Backfill placed from ft. to ft. Material	LAVA BRO		100	1.5	3
Filter pack from ft. to ft. Material Size	LAVA BRO			3	12
Explosives used: Yes Type Amount	LAVA GRA	Y HARD ERATE RED	-+	12 40	75
(5a) ABANDONMENT USING UNHYDRATED BENTONITE		ERATE BROWN		75	100
Proposed Amount Actual Amount		ERATE SANDSTONE BROV	VN	100	150
(6) CASING/LINER		D CONGLOMERATE	-	150	160
Casing Liner Dia + From To Gauge Stl Plate Wld	DITO I	IE CONGLOMERATE		160	186
	SANDBLA		1737	186	202
● ○ 10 □ 0 455 .250 ● ○ X	SAND BLA	IE CONGLOMERATE BROV	VIN	202	211
●       12         ■       10         ■       0         446       518         .250         ■         X         2         31         .250         .250         .250	SAND ROU			250	270
		ERATE SAND BROWN		270	333
		E CONGLOMERATE BROV	VN	333	415
Shoe Inside Outside Other Location of shoe(s)		ESICULAR BROKEN		415	430
Temp casing Yes Dia From To	_ MULTI COL	ORED BASALTS CONGLO	MERATE	430	518
(7) PERFORATIONS/SCREENS					
Perforations Method MACHINE					
Screens Type Material Perf/ Casing/ Screen Scrn/slot Slot # of Te	Date Starte	ed8/20/2013 C	omplete _	10/7/2013	
Perf/ Casing/ Screen Scrn/slot Slot # of Te Screen Liner Dia From To width length slots pipe		Water Well Constructor Ce	rtification		
Perf Liner 8 458 518 .125 3 816		t the work I performed on th	e constructio	n, deepenin	g, alteration, or
		t of this well is in compli			
		standards. Materials used an	d information	n reported al	bove are true to
		ny knowledge and belief.	Data		
	License Nur	10er 758	Date 10/	8/2013	<del></del>
(8) WELL TESTS: Minimum testing time is 1 hour	Signed T	HOMAS R PECK (E-filed)			
Pump Bailer	n				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	1	ater Well Constructor Certif			
500 518 4		consibility for the construction			
		ned on this well during the con turing this time is in compl			
Temperature 55 °F Lab analysis Yes By		standards. This report is true			
	License Nur		Date 10/8/2		
From To Description Amount Units	S		10/8/	PO13	
211 333 BLACK SAND		CK ABBAS (E-filed)	T 1	950	£
	Contact Info	(optional)	1 1	416	<u> </u>