

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

### Application for Permit Amendment

Part 1 of 5 - Minimum Requirements Checklist

This permit amendment 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. RECEIVED BY OWRD

Check all-items included with this application. (N/A = Not Applicable)NOV 2 7 2017  $\boxtimes$ Part 1 - Completed Minimum Requirements Checklist. Part 2 – Completed Application Map Checklist. SALEM, OR F 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: http://apps.wrd.state.or.us/apps/misc/wrd fee calculator. If you have questions, call Customer Service at (503) 986-0801. Part 4 – Completed Applicant Information and Signature. Part 5 – Information about Permits to be Amended: Number of permits to be amended: 1 List them here: G-15335 Please include a separate Part 5 for each permit. (See instructions on page 6) Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is not the permit holder of record and needs to be assigned to the permit; or the landowner of the proposed place of use is not the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at http://www.oregon.gov/owrd/pubs/docs/forms). Assignment is not needed if the applicant is the permit holder of record. N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant or other permit holders of record that are not listed as applicants. N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form is not required if any of the following apply: Water is to be diverted, conveyed, and/or used only on federal lands. All of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone. The proposed changes are all located on the property reviewed in Land Use form enclosed in Water Right Application Folder # \_\_\_\_ N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. (For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): \_\_\_ Map not included or incomplete Application fee not enclosed/insufficient Land Use Form not enclosed or incomplete Assignment Form and fee not enclosed/insufficient Additional signature(s) required Part is incomplete Other/Explanation 503-986-0 Date: Staff:

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

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

□ ⊠N/A	If more than three permits are involved, separate maps for each permit.
	Permanent quality printed with dark ink on good quality paper.
	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.
$\boxtimes$	A north arrow, a legend, and scale.
	The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$ , $1 \text{ inch} = 1,320 \text{ feet}$ , the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$ , or a scale that has been preapproved by the Department.
	Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines.
	Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
	Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
	Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
xyd/John	Existing place of use that includes separate hachuring for each water use permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
□ ⊠ N/A	If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
	Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).
	I 12774 RECEIVED BY OWRD

NOV 2 7 2017

	FEE WORKSHEET for PERMIT AMENDMENT									
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,160							
	Types of change proposed:  Place of Use  RECEIVED BY	OWR	D							
	Point of Diversion/Appropriation  Number of above boyes checked = 1 (2a)	n17								
	Number of above boxes enceked — 1 (2a)	017								
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0	ND								
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » SALEM, C	2	0							
	Number of permits included in Permit Amendment 1 (3a)	-								
	Subtract 1 from the number in 3a: 0 (3b) If only one permit this will be 0									
3	Multiply line 3b by \$520 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	\$410							
	Do you propose to change the place of use?		× 3							
	No: enter 0 on line 5 » » » » » » » » » » » » » » » »									
	Yes: enter the cfs for the portions of the permits to be amended (see									
	example below*): (5a)									
	Subtract 1.0 from the number in 5a above: (5b)									
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » » » »									
-	If 5b is greater than 0, round up to the nearest whole number: (5c)	5	0							
5	and multiply 5c by \$350, then enter on line 5 » » » » » » » » » Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	U							
0	Is this permit amendment:	U								
	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 » » » » » » » » Permit Amendment Fee:	8	\$1,570							

- \*Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:
- 1. For irrigation calculate cfs for each permit involved as follows:
  - a. Divide total authorized cfs by total acres in the permit (for S-12345, 1.25 cfs  $\div$ 100 ac); then multiply by the number of acres to be changed to get the application cfs (x 45 ac = 0.56 cfs).
  - b. If the water right permit 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 S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of permits on all the land included in the application; however do not count cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land. The fee should be assessed only once for each "on the ground" acre included in the application. (In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

## Part 4 of 5 - Applicant Information and Signature

Tangent O BY PROVIDING AN E-MAIL ADDI DEPARTMENT ELECTRONICALL Agent Information — The agent AGENT/BUSINESS NAME ADDRESS	RESS, CONSENT IS ON. COPIES OF THE IS AUTHORIZED TO THE IS ATE IS	PHONE NO.  E-MAIL  GIVEN TO RECEIVE ALL OF	CORRESPONDENCE FROM THE ENTS WILL ALSO BE MAILED.  I matters relating to this applica ADDITIONAL CONTACT NO.  FAX NO.  CORRESPONDENCE FROM THE
B3660 Ridge Drive CITY ST Fangent O  BY PROVIDING AN E-MAIL ADDITED AGENT/BUSINESS NAME  ADDRESS  CITY ST  BY PROVIDING AN E-MAIL ADDITED ADDRESS  CITY ST  BY PROVIDING AN E-MAIL ADDITED ADDRESS  Explain in your own words who Correct the location of the permap is 800 feet East and 550 feet	R 97389 RESS, CONSENT IS ON. COPIES OF THE SATE ZIP RESS, CONSENT IS ON. COPIES OF THE	larry.ruckert@y GIVEN TO RECEIVE ALL C FINAL ORDER DOCUME present the applicant in al PHONE NO.  E-MAIL  GIVEN TO RECEIVE ALL C	CORRESPONDENCE FROM THE ENTS WILL ALSO BE MAILED.  I matters relating to this applicate ADDITIONAL CONTACT NO.  FAX NO.  CORRESPONDENCE FROM THE
Fangent O BY PROVIDING AN E-MAIL ADDITED TO THE AGENT/BUSINESS NAME ADDRESS CITY ST BY PROVIDING AN E-MAIL ADDITED TO THE ADDITED TO THE AGENT/BUSINESS NAME Explain in your own words who Correct the location of the permap is 800 feet East and 550 feet.	R 97389 RESS, CONSENT IS ON. COPIES OF THE SATE ZIP RESS, CONSENT IS ON. COPIES OF THE	larry.ruckert@y GIVEN TO RECEIVE ALL C FINAL ORDER DOCUME present the applicant in al PHONE NO.  E-MAIL  GIVEN TO RECEIVE ALL C	CORRESPONDENCE FROM THE ENTS WILL ALSO BE MAILED.  I matters relating to this applicate ADDITIONAL CONTACT NO.  FAX NO.  CORRESPONDENCE FROM THE
BY PROVIDING AN E-MAIL ADDITED AGENT/BUSINESS NAME ADDRESS  BY PROVIDING AN E-MAIL ADDITED ARTHMENT ELECTRONICALIE  Explain in your own words who Correct the location of the perman is 800 feet East and 550 feet.	RESS, CONSENT IS ON. COPIES OF THE IS AUTHORIZED TO THE IS ATE IS	PHONE NO.  E-MAIL  GIVEN TO RECEIVE ALL OF THE PROPERTY OF THE	CORRESPONDENCE FROM THE ENTS WILL ALSO BE MAILED.  I matters relating to this applicate ADDITIONAL CONTACT NO.  FAX NO.  CORRESPONDENCE FROM THE
DEPARTMENT ELECTRONICALI  Gent Information — The agent AGENT/BUSINESS NAME  ADDRESS  CITY ST  BY PROVIDING AN E-MAIL ADDI  DEPARTMENT ELECTRONICALI  Explain in your own words wh  Correct the location of the permap is 800 feet East and 550 feet	is authorized to repart of the second	PHONE NO.  E-MAIL  GIVEN TO RECEIVE ALL OF	I matters relating to this applicate ADDITIONAL CONTACT NO.  FAX NO.  CORRESPONDENCE FROM THE
gent Information — The agent GENT/BUSINESS NAME  ADDRESS  BY PROVIDING AN E-MAIL ADDI DEPARTMENT ELECTRONICALI  Explain in your own words wh Correct the location of the permap is 800 feet East and 550 feet	is authorized to repart to	PHONE NO.  E-MAIL  GIVEN TO RECEIVE ALL	I matters relating to this applicate ADDITIONAL CONTACT NO.  FAX NO.  CORRESPONDENCE FROM THE
AGENT/BUSINESS NAME ADDRESS  BY PROVIDING AN E-MAIL ADDI DEPARTMENT ELECTRONICALI Explain in your own words wh Correct the location of the permap is 800 feet East and 550 feet	ATE ZIP RESS, CONSENT IS A.Y. COPIES OF THE	E-MAIL GIVEN TO RECEIVE ALL	ADDITIONAL CONTACT NO.  FAX NO.  CORRESPONDENCE FROM THE
AGENT/BUSINESS NAME ADDRESS  BY PROVIDING AN E-MAIL ADDIT DEPARTMENT ELECTRONICALIE  Explain in your own words wh  Correct the location of the permap is 800 feet East and 550 feet	ATE ZIP RESS, CONSENT IS A.Y. COPIES OF THE	E-MAIL GIVEN TO RECEIVE ALL	ADDITIONAL CONTACT NO.  FAX NO.  CORRESPONDENCE FROM THE
BY PROVIDING AN E-MAIL ADDI DEPARTMENT ELECTRONICALI Explain in your own words wh Correct the location of the permap is 800 feet East and 550 feet	RESS, CONSENT IS	E-MAIL GIVEN TO RECEIVE ALL	FAX NO.  CORRESPONDENCE FROM THE
BY PROVIDING AN E-MAIL ADDI DEPARTMENT ELECTRONICALI Explain in your own words wh Correct the location of the permap is 800 feet East and 550 feet	RESS, CONSENT IS	GIVEN TO RECEIVE ALL	CORRESPONDENCE FROM THE
BY PROVIDING AN E-MAIL ADDI DEPARTMENT ELECTRONICALI Explain in your own words wh Correct the location of the permap is 800 feet East and 550 feet	RESS, CONSENT IS	GIVEN TO RECEIVE ALL	CORRESPONDENCE FROM THE
BY PROVIDING AN E-MAIL ADDI DEPARTMENT ELECTRONICALI Explain in your own words wh Correct the location of the permap is 800 feet East and 550 feet	RESS, CONSENT IS	GIVEN TO RECEIVE ALL	
Explain in your own words who Correct the location of the permap is 800 feet East and 550 feet.	Y. COPIES OF THE		
Explain in your own words who correct the location of the perman is 800 feet East and 550 feet.	Y. COPIES OF THE		
Explain in your own words wh Correct the location of the perr nap is 800 feet East and 550 fe		FINAL ORDER DOCUME	ENTS WILL ALSO BE MAILED.
Correct the location of the perrnap is 800 feet East and 550 fe	at you propose to		
Check this box if this proje Act. (Federal stimulus doll	· · · · · · · · · · · · · · · · · · ·	ally funded by the Ame	RECEIVED BY DWI
			NOV 27 2017
Is the applicant the permit he	oldon of noond?	✓ Vac ☐ Na	MOA \$ i von
is the applicant the permit ho	oluer of recoru:	✓ Ies ☐ No	(3.0.) F. 2.1 (3.0.)
If NO, include either:			SALEM, OR
A completed assign portion of the perm		_	nment fee), assigning all or a
An affidavit of consapplicant to amend	_	mit holder(s) of record t	that gives permission for the



Applicant Signature

Print Name (and Title if applicable)

Check one of the following:		
The applicant is responsible for concontinue to be sent to the applicant		Notices and correspondence should
	•	pleting the proposed change(s) after the should be sent to the permit holder(s)
Check the appropriate box, if applicable	2:	
Check here if any of the permits prop by an irrigation or other water distric		e or will be located within or served
IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP
Check here if water for any of the pern contract for stored water with a federal	* *	ater service agreement or other
ENTITY NAME	ADDRESS	
CITY	STATE	ZIP
To meet State Land Use Consistency Requirity, municipal corporation, or tribal gover conveyed or used.		
ENTITY NAME Linn County, Planning and Building	ADDRESS Box 100	
CITY Albany	STATE OR	ZIP 97321
ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

RECEIVED BY OWNO

NOV 2 7 2017

SALEM, OF

### **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.

#### 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.

RECEIVED BY OWRD

NOV 2 7 2017

SALEM, OR

TACS

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

#### **PERMIT # G15335**

NOV 2 7 2017

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag#L)	r Twp		R	ng	Sec	1/4	14	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
WELL		L-140421	12	S	3	w	27	NW	NW	200	800 ft East & 550 ft South of NW corner, Section 27
WELL	☐ Authorized ☐ Proposed	L-140421	12	S	3	w	27	NW	NW	200	1290 ft East ;& 490 ft South of NW corner, Section 27
	☐ Authorized ☐ Proposed			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
Chec	ck all type(s) of change Place of Use (POU)		l bel	ow (	chan	_			_		in parentheses):
	Point of Diversion	(POD)				A	dditio	nal Po	oint of	Appro	priation (APOA)
	Additional Point of	Diversion (A	APO	D)			urface SW/G		r POD	to Gro	und Water POA
Will	all of the proposed cha	anges affect	the e	entir	e wa	ter ı	ıse pe	rmit?			
Σ	Yes Complete only "CODES" list		•			,				the nex	t page. Use the
	No Complete all	of Table 2 to	desc	ribe	the 1	orti	on of	the pe	rmit to	be cha	nged.
For a char	nge in place of use:										
Does the p ⊠ Yes □	permit holder of record No	l own or con	trol	the l	land	TO	which	the p	place o	of use is	s being moved?
as a peri	ne landowner of the land mit holder of record by fee for an assignment.										
Is the proj	posed place of use cont	iguous to th	e au	thor	ized	plac	e of u	se?	] Yes	□ No	
unless the	nitted place of use can be change to non-contiguour poses of benefiting a sor the federal Endanger	ous lands is species listed	in fu	rthe ensit	rance	e of r	nitiga tened,	tion of	r conse	ervation red und	efforts undertaken er ORS 496.171 to

listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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 Use Permit # G-15335

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.

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.						Proposed Changes (see	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.																	
Tw	/p	Rng	S	ec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) (name or number from Table	Priority Date	"CODES" from previous page)	T	wp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date
	S	. 2-2	-24	0.		p de			(200) Am			EXAMI	LE	P.A.	i i			Trans.						
2	s	9 E	1	5	NE	NW	100		15.0	POD#1 POD#2		POU/POD	2	8	9	E	15	NW	NW	100	1	10.0	POD #5	
46	**	4		7	٠,٠	7-		1	EXAMPLE	711	77.17	35 / <b>4</b> / 5 .	2	s	9	E	15	SW	NW	200		5.0	POD#6	
		1										POD	12	S	3	W	27	NE	NW	200		19.0	WELL	12/13/2001
***************************************												POD	"	**	**	**	**	NW	NW	"		39.0	**	"
- Carrier About 1989 Annie 1980 A												POD	"	**	**	**	**	sw	NW	"		39.0	"	"
												POD	"	**	**	**	17	SE	NW	***		19.0	**	11
		-	-	+												-			111111111111111111111111111111111111111					
1	-		+	+									Name of Street, or other Persons of Street, or other Persons or other Pers						***					
	-		+	+								1		1		-								
the water-b																			*******				CEIVED	BY OWR
-					Т	OTAI	L ACR	ES											TOT	AL ACR	RES	116.0Pl	FOEIVED	0: 0

Additional remarks: .

NOV 2 7 2017

ge
t do
1

#### 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	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm) If less than full rate of water right

RECEIVED BY OWRD

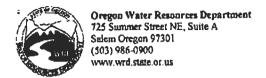
NOV 2 7 2017

SALEM, OR

#### **LINN 1363**

10/11/2015 18:55 5419287966

RUCKERT



Do not complete if the well already has a Well Identification Number.

### Application for

# Well ID Number

RECEIVED BY OWRD

OCT 13 2015

SALEM OD

I. OWNER INFORMATION	OU
Current Owner Name (please print): Larry Ruckert	
Mailing Address: 33660 Ridge Dr.	
City, State, Zip: Tangent, Or 97389	
Mail Well ID Tag to: SAME AS ABOVE In Care Of (C/O)	RECEIVED BY OWRD
Name & Address:	
City, State, Zip:	NOV 2 7 2017
	110 / 20 / 201/
11. WELL LOCATION INFORMATION (Please fill out as completely as possible)	SALEM, OR
Township: 12 (North / South) Range: 3 (East / West) Section:	27
Tax Lot: 200 County Lina 1/4	1/4

Other Information:

SUBMITTED BY (please print): Larry Ruckert

PHONE: (541) 979 - 4121 EMAIL & for FAX: larry . ruckert Qyaloo.com

fax (541) 928 - 7966 (call first)

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

Date Well Constructed (or property built): \_\_\_\_\_ Total Well Depth: \_\_\_\_\_ Casing Diameter:

Use of Well (domestic, irrigation, commercial, industrial, monitoring):

Owner at time the well was constructed (if known):\_\_\_\_

Street Address of Well, City: 33660 Ridge Dr. Tangent, a 97389

If the property had a different street address in the past: Rt 1, Box 201 Tangent, Or 97389

Last Update: 4/30/14

GPS Coordinates:

Well I D Number/2

WCC

STATE OF OREGON WATER WELL REPORT 1363 RECEIVED
| 1.0V 22 (\$4) | 25 | 1.0V 22 (\$5) |

(as required by ORS 537 765)			TART CARD) #				
(1) OWNER: Well Number: WA	TER RES	(9) COCR <b>ITO</b> N LOREGONTINA	OF WELL by le	gal de	script	ion:	
Address 33660 Ridge Dr.		I, OREGON <sub>Linn</sub>	Latitude Nor S. Range	TAJ Z	Longitude	*	
City Tangent State OR Zip 97	7389	Township 12 D	N or S. Range	NW		_E or W.	WM.
(2) TYPE OF WORK:			Lot Block				
• •			ell (or nearest address)				
		same	en (of nearest address)				
(3) DRILL METHOD			AMEDIANA.				
Rotary Air Rotary Mud Cable		(10) STATIC W				11-4	LΩ7
Other		12'06" ft.t					<u> </u>
(4) PROPOSED USE:  Domestic Community Industrial Irrigation			lb. per squa		Date .		
☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation ☐ Thermal ☐ Injection ☐ Other ☐ Other ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		(11) WATER B	EARING ZONE	S:		-	
		Depth at which water was	first found 25				
(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well	150 n	From	Τσ	Estin	ated Flow	Rate	SWL
Yes No U		251	441	60	gpm		12'6
Explosives used Type Amount Amount							
	nount						
Diameter From To Material From To sacks of	or pounds						
14" 0 18' cement 0 18" 10%	sacks	(12) WELL LO	G: Ground elevati	on			
10" 18' 150'			Material	· · · · · · · · · · · · · · · · · · ·	From	То	SWL
		Top soil	Wateriat		0	2	347
How was seal placed: Method		Brown clay			2	12	<u> </u>
Other		Brown clay			12	25	
Backfill placed fromft. toft. Material			sand & grav	el	25		12'6
Gravel placed fromft, toft. Size of gravel	-	Brown sandy			44	55	
(6) CASING/LINER:		Brown clay			55	76	
Diameter From To Gauge Steel Plastic Welded	Threaded	Blue clay &	gravel		76	88	
Casing:			<u>clay &amp; grave</u>	1	88	93	ļ
10" +15"1231.250		Dark gray c			93	105	<del>                                     </del>
05"		Blue clay			105	115	-
		Brown clay Black clay			115	120	+
Liner:		Brown clay			128	133	<del> </del>
Final location of shoe(s) 123105#		Dark gray s		133	140		
(7) PERFORATIONS/SCREENS:		Black sandy	140	150	<del></del>		
A Perforations Method Acetylene torch			RECEIVED BY	7 (C)/V			
<del>-</del> -			RECEIVED		1 1 100		
Screens Type Material  Slot Tele/pipe							
From To size Number Diameter size Casing	Liner		NOV 2 7	2017			
700 700 700 700 700					ļ		1
13'01'123' 3/8" 80 10" <b>X</b>				<u>د ۲</u> ۳۰	<del></del>		+
05" x12"			SALEM.	Uri	<del> </del>		<del> </del>
		Date started 10-18	<b>_01</b>		11-4	-91	
		Date started	Com	pleted			
(8) WELL TESTS: Minimum testing time is 1 hour			Well Constructor Ce			14	
Flowi			e work I performed o well is in complianc				
□ Pump 🛣 Bailer □ Air □ Artes	ian	standards. Materials t	ised and information i				
Yield gal/min Drawdown Drill stem at Ti	me	knowledge and belief.		v	WWC Nu	mbar	
60 gpm 50'	hr.	Signed			Date	moer _	
		Signed					
			Il Constructor Certi			on che-	don
Temperature of water 54 Depth Artesian Flow Found		work performed on th	ibility for the construction well during the con-	struction	n dates re	eported :	above. al
Was a water analysis done? Yes By whom		work performed dur	ing this time is in	compl	iance w	ith Ore	gon wel
Did any strata contain water not suitable for intended use?   Too little		construction standard	ls. This report is true		best of m WWC Nu		
□ Salty □ Muddy □ Odor □ Colored □ Other □		And it	merson.		wwc.Nu Date 11		
Depth of strata:	200	Signed Savempus	00				
ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT	SECO	ND COPY/CONSTRUCT	OR THIRD CO	FA - CO	PLOWER		8809C 318