

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

Application for Water Right Temporary or Drought Temporary Transfer

Part 1 of 5 – Minimum Requirements Checklist

This temporary 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.

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FOR ALL TEMPORARY TRANSFER APPLICATIONS

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

- X Part 1 – Completed Minimum Requirements Checklist.
- X Part 2 – Completed Temporary Transfer Application Map Checklist.
- X 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.
- X Part 4 – Completed Applicant Information and Signature.
- X Part 5 – Information about Transferred Water Rights: **How many water rights are to be transferred? 1 List them here: Permit G-16156**
 Please include a separate Part 5 for each water right. (See instructions on page 6)
- X N/A For standard Temporary Transfer (one to five years) **Begin Year** ____ **End Year** ____.
- X N/A Temporary Drought Transfer (Only in counties where the Governor has declared drought)

Attachments:

- X Completed Temporary Transfer Application Map.
- X Completed Evidence of Use Affidavit and supporting documentation.
- X Current recorded deed for the land **from** which the authorized place of use is temporarily being moved.
- X N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- X N/A Supplemental Form D – For water rights served by or issued in the name of a district. Complete when the temporary transfer applicant is not the district.
- X N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- X N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation (if necessary to convey water to the proposed place of use).

(For Staff Use Only)

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

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

Part 2 of 5 – Temporary Transfer Application Map Checklist

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

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

- X 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.
- X The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- X A north arrow, a legend, and scale.
- X 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.
- X Township, Range, Section, ¼ ¼, 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.
- X 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.
- X N/A Proposed temporary 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.
- X N/A If you are proposing a change in point(s) of diversion or well(s) to convey water to the new temporary place of use, 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°).

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Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for TEMPORARY (not drought) TRANSFERS
1 Base Fee (includes temporary change to one water right for up to 1 cfs) 1 \$810.00
2 Number of water rights included in transfer 1 (2a) Subtract 1 from the number in 3a above: 0 (2b) If only one water right this will be 0 Multiply line 2b by \$260.00 and enter 2 \$0
3 Do you propose to change the place of use for a non-irrigation use? X No: enter 0 on line 4 ... (4a) Subtract 1.0 from the number in 4a above: (4b) If 4b is 0, enter 0 on line 4 ... If 4b is greater than 0, round up to the nearest whole number: (4c) and multiply 4c by \$200.00, then enter on line 4 (or \$0.50 if submitted in a Department approved digital format) 4 \$0
4 Do you propose to change the place of use for an irrigation use? X No: enter 0 on line 5 ... (5a) Multiply the number of acres in 5a above by \$2.30 and enter on line 5 5 \$0
5 Add entries on lines 1 through 5 above 6 \$0
6 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 ... If no box is applicable, enter 0 on line 7 7 \$0
7 Subtract line 7 from line 6 ... Transfer Fee: 8 \$0

FEE WORKSHEET for TEMPORARY DROUGHT TRANSFERS
1 Base Fee (includes drought application and recording fee for up to 1 cfs) 1 \$200.00
2 Enter the cfs for the portions of the rights to be transferred (see example below*): 0.72 (2a) Subtract 1.0 from the number in 2a above: 0 (2b) If 2b is 0, enter 0 on line 2 ... If 2b is greater than 0, round up to the nearest whole number: (2c) and multiply 2c by \$50, then enter on line 2 2 \$0
3 Add entries on lines 1 through 2 above ... Transfer Fee: 3 \$200.00

*Example for Line 2a 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. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs ÷ 100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac = 0.56 cfs).
2. 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)
3. 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 2a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 2b would be 0 and Line 2 would then also become 0).

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME MLM Property LLC		PHONE NO. 541-205-1191	ADDITIONAL CONTACT NO.
ADDRESS PO Box 195			FAX NO.
CITY Merrill	STATE OR	ZIP 97633	E-MAIL
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.			

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

AGENT/BUSINESS NAME N/A		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.
CITY	STATE	ZIP	E-MAIL
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 you propose to accomplish with this transfer application; and why:

Due to the drought, Permit G-16156 will be reduced. Therefore, we are requesting permission to use only as much ground water as necessary for the crops already planted. With surface water being our only permitted alternative for an irrigation water supply, when the surface water supply is reduced or not provided we cannot produce crops to pay our bills, feed our family, pay our mortgages on property and equipment, taxes, and also will not be able to satisfy product delivery required in previously executed food supply agreement. There are no surface reservoirs to obtain water from. The decision to deliver all, a portion, or no water to us is made by the Federal and State Agencies, and is out of our control.

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

- Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

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

MLM Property LLC by [Signature]
Applicant signature

Richard Nelson, President
Print Name (and Title if applicable)

5/3/12
Date

Applicant signature

Print Name (and Title if applicable)

Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No

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

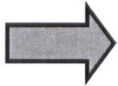
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X Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

DISTRICT NAME Klamath Irrigation District	ADDRESS 6640 Kid Ln	
CITY Klamath Falls	STATE Oregon	ZIP 97603

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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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PERMIT # G-16156

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Description of Water Delivery System

System capacity: 0.72 cubic feet per second (cfs) OR
 _____ 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.

Currently, water is applied to the NE ¼ NE ¼, SE ¼ NE ¼, and NE ¼ SE ¼ of Section 16 through aboveground pipe that leads to wheel lines.

Irrigated land in NW ¼ NW ¼, NE ¼ NW ¼, SW ¼ NW ¼, SE ¼ NW ¼, NW ¼ SW ¼, and NE ¼ SW ¼, of Section 15 are irrigated by pivot line.

Irrigated land in SW ¼ SW ¼ of Section 11 is irrigated by wheel line.

Irrigated land in NW ¼ NW ¼, NE ¼ NW ¼, SW ¼ NW ¼, and SE ¼ NW ¼ of Section 14 are irrigated by wheel lines.

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	X Authorized <input type="checkbox"/> Proposed	KLAM 53043	41	S	11	E	7	SW	NE	100	1360' south and 1860' west from NE corner of Section 7
Well 2	X Authorized <input type="checkbox"/> Proposed	KLAM 10518	40	S	10	E	29	SW	NW	300	1420' south and 20' east from NW corner of Section 29
Well 3	<input type="checkbox"/> Authorized X Proposed	KLAM 57387	41	S	11	E	16	NE	SE	1501	1240' north and 30' west from SE corner of Section 16

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

- Place of Use (POU)
- Point of Diversion (POD)
- Additional Point of Diversion (APOD)
- Appropriation/Well (POA)
- Additional Point of Appropriation (APOA)

Check all type(s) of temporary change(s) due to drought proposed below (change “CODES” are provided in parentheses):

- Place of Use (POU)
- Character of Use (USE)
- Point of Diversion (POD)
- X Point of Appropriation/Well (POA)
- Additional Point of Appropriation (APOA)
- Additional Point of Diversion (APOD)

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

- Yes Complete only the Proposed (“to” lands) section of Table 2 on the next page. Use the “CODES” listed above to describe the proposed changes.
- X No Complete all of Table 2 to describe the portion of the water right to be changed.

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 Temporary Changes to Water Right Permit G-16156

List only the part of the right that will be changed. For the acreage in each ¼ ¼, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, specify the acreage associated with each POD/POA.

AUTHORIZED (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 "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp	Rng		Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9		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
"	"	"	"	"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
41	S	11	E	16	NW	NE	600	9	6.4	Supplemental Irrigation	Well 1 Well 2	2005	POA	41	S	11	E	16	NW	NE	600	9	6.4	Supplemental Irrigation	Well 3	2005
41	S	11	E	16	NE	NE	600	6	15.2	Supplemental Irrigation	Well 1 Well 2	2005	POA	41	S	11	E	16	NE	NE	600	6	15.2	Supplemental Irrigation	Well 3	2005
41	S	11	E	16	SW	NE	600	9	1.7	Supplemental Irrigation	Well 1 Well 2	2005	POA	41	S	11	E	16	SW	NE	600	9	1.7	Supplemental Irrigation	Well 3	2005
41	S	11	E	16	SE	NE	600	10	32.7	Supplemental Irrigation	Well 1 Well 2	2005	POA	41	S	11	E	16	SE	NE	600	10	32.7	Supplemental Irrigation	Well 3	2005
41	S	11	E	16	NE	SE	1501	11	1.5	Supplemental Irrigation	Well 1 Well 2	2005	POA	41	S	11	E	16	NE	SE	1501	11	1.5	Supplemental Irrigation	Well 3	2005
TOTAL ACRES									57.5	TOTAL ACRES										57.5						

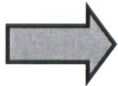
Additional remarks: _____.

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For Place 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: _____



Pursuant to ORS 540.525, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for temporary transfer can be included in the transfer or remain unused on the authorized place of use. If the primary water right does not revert soon enough to allow use of the supplemental right within five years, the supplemental right shall become subject to cancellation for nonuse under ORS 540-610.

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation if necessary to convey the water to the new temporary place of use:

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). If less than full rate of water right

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17

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

KLAMATH
10518

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(START CARD) #

40S/10E/296C
39904

(1) OWNER:

Name Sam Waga & Son
Address 17600 HIGHWAY 39
City KLAMATH FALLS State OR Zip 97603

Well Number WATER RESOURCES DEPT
SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County KLAMATH Latitude _____ Longitude _____
Township 40S N. or S. Range 10E E or W. WM.
Section 29 SW 1/4 NW 1/4
Tax Lot R4010 Lot 02900 Block 00300 Subdivision 000-00
Street Address of Well (or nearest address) 17817 CHEWIE RD. K. FALLS, OR.

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 913 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
22	0	162	CONCRETE	0	162	150 SKS
12 1/4	162	778				
7 7/8	778	913				

How was seal placed: Method A B C D E
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
16 1/2	+1.4	162	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 162 FEET

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
1000	57		1 hr. 4 hrs

Temperature of Water 69°F Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(10) STATIC WATER LEVEL:

45 ft. below land surface. Date 7/12/92
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 97 FT

From	To	Estimated Flow Rate	SWL
97	121	UNK	
869	913	1800 GPM	

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Brown SANDY TOPSOIL	0	2	
YELLOW CHALK WITH STRAWS SAND	2	52	
Brown SAND STONE	52	87	
BLACK SAND (COARSE)	87	97	
BLACK SAND & POX GRAVEL	97	121	
GREY STICKY CLAY	121	669	
HARD BROWN BLACK BASALT	669	805	
RED LAVA	805	809	
HARD BLACK BASALT	809	854	
HARD BROWN GREY BASALT	854	854	
HARD BROWN BASALT	854	857	
BLACK BASALT/BROWN LAVA & ASH	857	869	
BROWN LAVA & ASH CLAY	869	879	
BLACK BASALT	879	886	
BLACK BASALT & BROWN LAVA	886	913	

Date started 6/29/92 Completed 7/10/92

(unbonded) Water Well Constructor Certification:

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.

WWC Number _____
Signed _____ Date _____

(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 601
Signed [Signature] Date 7/14/92

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Page 1 of 2

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

05-12-2010

OWRD

WELL LABEL # L 92055

START CARD # 1009942

(1) LAND OWNER Owner Well I.D.
First Name LEE Last Name MCKOEN
Company THREE M MINT, INC.
Address P.O. BOX 195
City MERRILL State OR Zip 97633

(2) TYPE OF WORK [X] New Well [] Deepening [] Conversion
[] Alteration (repair/recondition) [] Abandonment

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

(4) PROPOSED USE [] Domestic [X] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION Special Standard [] Attach copy
Depth of Completed Well 1,224.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Rows include Bentonite and Cement seal data.

How was seal placed: Method [] A [] B [X] C [] D [] E

[X] Other BEN. POURED DRY

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes a diagram of casing connections.

Shoe [] Inside [] Outside [] Other Location of shoe(s)

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type Material

Table with columns: Perf/S, Casing/Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tel/pipe size.

(8) WELL TESTS: Minimum testing time is 1 hour

[] Pump [] Bailer [X] Air [] Flowing Artesian

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Table with 4 columns: Yield, Drawdown, Drill stem/Pump depth, Duration. Row 1: 1,000, 180, 1.

Temperature 74 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below)

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)
County Klamath Twp 41.00 S N/S Range 11.00 E E/W WM
Sec 16 NE 1/4 of the SE 1/4 Tax Lot 100
Tax Map Number Lot
Lat 0 0 " or DMS or DD
Long 0 0 " or DMS or DD
[] Street address of well [X] Nearest address

HIGHWAY 39 AND STATE LINE RD.

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Existing Well / Predeepening
Completed Well 05-06-2010 46
Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 184

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Rows include 04-26-2010 and 05-05-2010.

(11) WELL LOG

Table with columns: Material, From, To. Lists various soil types like Sand, Yellow Clay, Blue Clay, etc.

Date Started 04-23-2010 Completed 05-06-2010

(unbonded) Water Well Constructor Certification

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

License Number Date

Electronically Filed

Signed

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1844 Date 05-12-2010

Electronically Filed

Signed COLTER CHANCELLOR (E-filed)

Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

Form Version: 0.95

