

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.

Chec	ck all iten	ns included with this application. $(N/A = Not Applicable)$
\boxtimes		Part 1 – Completed Minimum Requirements Checklist.
		Part 2 – Completed Transfer Application Map Checklist.
		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.
\boxtimes		Part 4 – Completed Applicant Information and Signature.
		Part 5 – Information about Water Rights to be Transferred: How many water rights are to be transferred? 1 List them here: 36301 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.
\boxtimes	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.
	□ N/A	Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if all of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
	N/A	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.
RECEIV	/ED	(For Staff Use Only)
JUN 082		WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Land Use Form not enclosed or incomplete Additional viscon fee to the complete of t
OWR	D	Additional signature(s) requiredPart is incomplete Other/Explanation Staff:503-986-0 Date:/

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. \bowtie N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre license view/. CWRE stamp and signature are not required for substitutions. 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. X The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30 x 30 inch maps, one extra copy is required. X 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. X 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. \boxtimes Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged. \boxtimes Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. X Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit. N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location

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, 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 cfs)	1	\$1,160
	Types of change proposed: ⊠ Place of Use RECEI	/ED	<i>\$</i> 2,233
	☐ Character of Use ☐ Point of Diversion/Appropriation ☐ Use ☐ Diversion/Appropriation ☐ Use ☐ Diversion/Appropriation	018	
	Number of above boxes checked = $\frac{2(2a)}{1(2b)}$ If only one change, this will be $\frac{2(2a)}{1(2b)}$	D	
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » »	2	\$930
	Number of water rights included in transfer $\underline{1 (3a)}$ Subtract 1 from the number in 3a above: $\underline{0 (3b)}$ If only one water right this will		
3	be 0 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 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*): 0.01 (5a)		
	Subtract 1.0 from the number in 5a above: -0.99 (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: (5c)	-	0
5	and multiply 5c by \$350, then enter on line 5 » » » » » » » » » Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	5	\$2500
0	Is this transfer:	0	\$2300
	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	\$2500
_	le for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 10	0 acres) a	

*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	\$840.00
	Number of wells included in substitution (2a)		
	Subtract 1 from the number in 3a above: (2b) If only one well this will be 0		
2	Multiply line 2b by \$410 and enter » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » Fee for Substitution:	3	

$Part\ 4\ of\ 5-Applicant\ Information\ and\ Signature$

Applicant Information

APPLICANT/BUSINESS N	IAME	PHONE NO.	ADDITIONAL CONTACT NO.						
MARGARET & THO	OMAS BARNETT		503.866.9024						
ADDRESS				FAX NO.					
12814 ARNDT ROA	D NE								
CITY	STATE	ZIP	E-MAIL						
AURORA	OR	97002	thomasebarnet	t@yahoo.com					
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE									
DEPARTMENT ELEC	CTRONICALLY, CO	PIES OF THE I	INAL ORDER DOCUME	NTS WILL ALSO BE MAILED.					

Agent Information – The ag	ent is auth	orized to represent	the applicant in all ma	atters relating to this application.							
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.							
JEANNE BOATWRIGHT			503.363.9225								
ADDRESS				FAX NO.							
BOATWRIGHT ENGINEERIN	G, INC	2613 12TH STRE	EET SE	503.363.1051							
CITY	STATE	ZIP	E-MAIL								
SALEM	OR	97302	jeanne@boatwrig	htengr.com							
BY PROVIDING AN E-MAIL AI DEPARTMENT ELECTRONICA											
Explain in your own words	what you	propose to accon	nplish with this trans	sfer application, and why:							
We need water to irrigate											
March 1-October 31. We											
Operation for the period b											
period when the bedding p											
If you need additional space, cont			er and attach to the applic	cation as "Attachment 1".							
Check this box if this pre Reinvestment Act. (Fede			inded by the America	an Recovery and							
		Check Or	ne Box								
By signing this application, I											
1	0 11	10 11 010 000 0	00 1010(E) OT	rmation and evidence that I am							
authorized to pursue the trans	ster as iden	titled in OAK 690-38	30-4010(5); UK 3 510(3)(b) and that the i	right is in the RECEIVE							
name of the municipality or a	nredecess	or: OR	7.510(5)(0) and that the 1	right is in the							
I affirm the applicant is an encondemnation the property to	tity with th	e authority to conder	nn property and is acquirely for transfer is appurtent	ring by ant and have JUN 0 8 2018							
supporting documentation.			9	OWPD							
				OWIND							
I understand that prior to Depa the Department for publication right is located, once per week suggest publishing the notice i	of a notice for two co	ce in a newspaper vonsecutive weeks.	vith general circulation								
I (we) affirm that the inform	ation con	tained in this app	lication is true and ac	ccurate.							
		Thomas Barne	tt, owner								



TACS

Print Name (and Title if applicable)

Margaret Barnett, owner Print Name (and Title if applicable)

Date

Date

Applicant signature

Applicant signature

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
MARGARET & THOMAS B.	ARNETT		503.866.9024	
ADDRESS				FAX NO.
12814 ARNDT ROAD NE				
CITY	STATE	ZIP	E-MAIL	
AURORA	OR	97002	thomasebarnett(ayahoo.com
BY PROVIDING AN E-MAIL A	DDRESS,	CONSENT IS GI	VEN TO RECEIVE ALL CO	DRRESPONDENCE FROM THE
DEPARTMENT ELECTRONIC	CALLY. CO	PIES OF THE F	INAL ORDER DOCUMEN	TS WILL ALSO BE MAILED.

AURORA	OR	97002	thomasebarnett@yahoo.com									
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE												
DEPARTMENT ELECTRONIC	ALLY. CO	PIES OF THE FINAL	L ORDER DOCUMENTS	S WILL ALSO BE MAILED.								
Agent Information – The ag	ent is auth	norized to represent	the applicant in all ma	atters relating to this application.								
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.								
JEANNE BOATWRIGHT			503.363.9225									
ADDRESS				FAX NO.								
BOATWRIGHT ENGINEERIN	G, INC	2613 12TH STRE	EET SE	503.363.1051								
CITY	STATE	ZIP	E-MAIL									
SALEM	OR	97302	jeanne@boatwrig	htengr.com								
BY PROVIDING AN E-MAIL A	DDRESS, C	CONSENT IS GIVEN	TO RECEIVE ALL COR	RESPONDENCE FROM THE								
DEPARTMENT ELECTRONICA	ALLY. CO	PIES OF THE FINAL	L ORDER DOCUMENTS	S WILL ALSO BE MAILED.								
Explain in your own words We need water to irrigate March 1-October 31. We Operation for the period be period when the bedding pure of the period when the period when the bedding pure of the period when the bedding pure of the period when the period when the bedding pure of the period when the bedding pure of the period when the per	our 1.0 a are simu etween Jolants are inue on a s	Icre greenhouse. Itaneously filing Ianuary 1 - May e started. eparate piece of pape	This transfer will property for a new ground was 31 for the 1.0 acressor and attach to the applications.	provide water from water permit for Nursery greenhouse. That is the cation as "Attachment 1".								
Check One Box By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); OR I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; OR I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.												
the Department for publication right is located, once per week suggest publishing the notice i	of a notice for two connections the following	te in a newspaper wonsecutive weeks. It wing newspaper:	with general circulation of more than one quality with the transfer of the circulation of	fying newspaper is available, I Ependen t								
I (we) affirm that the inform	ation con	tained in this appl	ication is true and ac	curate.								

Applicant signature

Muscard Reserved

Thomas Barnett, owner Print Name (and Title if applicable)

Margaret Barnett, owner 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 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.

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JUN 08 2018



Check the following boxes to	hat apply	:			
The applicant is resp continue to be sent to			etion of	change(s). Notice	es and correspondence should
					proposed change(s) after the ld be sent to this landowner.
					for completion of change(s). lowner and the applicant.
At this time, are the lands in	this tran	sfer appli	cation in	the process of b	eing sold? Yes No
	. If you do	o not knov	w who t		elete the receiving landowner or will be, then a request for
If a property sells, the counless a sale agreement					





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 #36301

Description of Water Delivery System

System capacity: 0.55

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. 50 hp turbine pump, 6" transmission main, drip irrigation system.

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)	Т	Twp		Rng		1/4	1/4	Tax Lot, DLC or Gov't Lot	(from a recognized				
Well 1	□ Authorized □ Proposed	Mari 286	4	S	1	W	4	NE	NE	100	100' S & 440' W NE COR SEC 4				
Well 2	☐ Authorized ☐ Proposed	Mari 62290	4	S	1	W	3	NE	NW	800	1440' S & 1995' W NE COR SEC 4				
	☐ Authorized ☐ Proposed														
	☐ Authorized ☐ Proposed														

Check a	ll type(s) of change(s) proposed below (c	hange	"CODES" are provided in parentheses):
\boxtimes	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.
	RECEIVED		

JUN 0 8 2018

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 # 36301

List the change proposed for the acreage in each ½ ½. 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 "CODES"	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												ES								
Tv	vp	Rn	g	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)			Rr	ng	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
													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
														2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
4	S	1	W	4	NE	NE	100		1.0	IR	WELL 1	1964	POU/POA	4	S	1	W	3	NE	NW	800		1.0	IR	WELL 2	1964
_																										
																										D
					,	ТОТА	L ACI	RES:	1.0										,	ТОТА	L AC	RES:	1.0		2 5	

Additional remarks: _____.

For Pla	ce of Use o	r Character	of Use C	Changes						
		_				or ground	water regist	rations ass	sociated	
If YE	If YES, list the certificate, water use permit, or ground water registration numbers:									
a prir to a gr	nary right pround water	roposed for t	ransfer m	nust be inc	cluded in	the transfe	r or be can	celled. Any	change	
For Sul	`	_	supplem	ental irrig	gation wi	ll be substit	tuted for su			
					e#	:		F	RECE	IVED
For a c	hange fron	ı Supplemen	tal Irrig	ation Use	to Prim	ary Irriga	tion Use		JUN 08	2018
Identi	fy the prima	ary certificate	e to be ca	ncelled. (Certificate	e#			OWF	RD
For a c	hange in p	oint(s) of app	propriati	ion (well(s)) or ad	ditional po	oint(s) of a	ppropriati	ion:	
	with the cor Tip : You m	rresponding v nay search for	well(s) in well log	Table 1 ags on the I	bove and Departme	l on the acc nt's web pa	ompanying	clearly lab application	peled and asson map.	sociated
AND	OR									
_	have a well requested in driller, geol	log. For <i>prop</i> nformation el logist, or cert	posed we ement in	lls not yet the table.	t construct The Der	<i>cted or buil</i> partment re	t, provide "commends	a best esti you consu	mate" for ea lt a licensed	ich I well
Any well accomparapplication well(s) w	(s) in this ling in this ling application in the state of	sting must be cation map. For received. The series same source	c clearly to cailure to the information	tied to con provide the ation is not as the au	respondi he inform ecessary t athorized	nation will of for the depa point(s) of	delay the prartment to a appropriati	rocessing on Assess when A (POA).	of your trans ther the proj	sier posed
	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 han full rate of water right
	Are the with the with the with the lif YE. Pursua a print to a grapplice. For Sulfactor Surfactor Surfac	Are there other we with the "from" of If YES, list the company right person a primary right person a ground water application. For Substitution (For Substi	Are there other water right cerwith the "from" or the "to" lar If YES, list the certificate, was Pursuant to ORS 540.510, and a primary right proposed for to a ground water registration application. For Substitution (ground water irrigation) Ground water supplemental Posurface water primary Certificate Identify the primary certificate Identify the primary certificate Well log(s) are attached with the corresponding water irrigation. Well log(s) are attached with the corresponding water if it is a well log. For proprequested information eld riller, geologist, or cert to complete Table 3. Table 3. Construction of Point(s) Any well(s) in this listing must be accompanying application map. Fapplication until it is received. The well(s) will access the same source prohibited by law from approving well: Owrd Well Identify approving well: Owrd Well Identify Well Identified Well Identify Well Identified Well Identifi	Are there other water right certificates, with the "from" or the "to" lands? If YES, list the certificate, water use portion of the primary right proposed for transfer into a ground water registration must be application. For Substitution (ground water supplemental permit or of Surface water primary Certificate # For a change from Supplemental Irrigate Identify the primary certificate to be care. Well log(s) are attached for each with the corresponding well(s) in Tip: You may search for well log http://apps.wrd.state.or.us/apps/gr. AND/OR Describe the construction of the analyse a well log. For proposed were requested information element in driller, geologist, or certified wat to complete Table 3. Fable 3. Construction of Point(s) of Apple Any well(s) in this listing must be clearly accompanying application map. Failure to application until it is received. The inform well(s) will access the same source aquifer prohibited by law from approving POA challers are sured and the poar and proving poar and proving poar and proving poar and po	with the "from" or the "to" lands? Yes No. If YES, list the certificate, water use permit, or a Pursuant to ORS 540.510, any "layered" water use a primary right proposed for transfer must be into a ground water registration must be filed separapplication. For Substitution (ground water supplemental irrigation) Ground water supplemental Permit or Certificate Surface water primary Certificate # For a change from Supplemental Irrigation Use Identify the primary certificate to be cancelled. Compared to the corresponding well(s) in Table 1 at Tip: You may search for well logs on the Inttp://apps.wrd.state.or.us/apps/gw/well log. AND/OR Describe the construction of the authorized have a well log. For proposed wells not yet requested information element in the table. driller, geologist, or certified water right exto complete Table 3. Fable 3. Construction of Point(s) of Appropriation Any well(s) in this listing must be clearly tied to conaccompanying application map. Failure to provide the application until it is received. The information is not well(s) will access the same source aquifer as the authorized PoA laready built? If an existing well OWRD Well Well Casing well OWRD Well Well Casing well Total well Casing well well.	Are there other water right certificates, water use permits with the "from" or the "to" lands?	Are there other water right certificates, water use permits or ground with the "from" or the "to" lands? Yes No If YES, list the certificate, water use permit, or ground water registration Pursuant to ORS 540.510, any "layered" water use such as an irrigar a primary right proposed for transfer must be included in the transfe to a ground water registration must be filed separately in a ground wapplication. For Substitution (ground water supplemental irrigation will be substitution) Ground water supplemental Permit or Certificate #; Surface water primary Certificate #; For a change from Supplemental Irrigation Use to Primary Irrigate Identify the primary certificate to be cancelled. Certificate # For a change in point(s) of appropriation (well(s)) or additional point with the corresponding well(s) in Table 1 above and on the acc Tip: You may search for well logs on the Department's web point http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx AND/OR Describe the construction of the authorized and proposed well have a well log. For proposed wells not yet constructed or built requested information element in the table. The Department redriller, geologist, or certified water right examiner to assist with to complete Table 3. Fable 3. Construction of Point(s) of Appropriation Any well(s) in this listing must be clearly tied to corresponding well(s) accompanying application map. Failure to provide the information will application until it is received. The information is necessary for the department of the poon approving POA changes that do not access the same source aquifer as the authorized point(s) of prohibited by law from approving POA changes that do not access the same source aquifer as the authorized point(s) of prohibited by law from approving POA changes that do not access the same source aquifer as the authorized point(s) of prohibited by law from approving POA changes that do not access the same source aquifer as the authorized point(s) of prohibited by law from approvi	Are there other water right certificates, water use permits or ground water regist with the "from" or the "to" lands? Yes No If YES, list the certificate, water use permit, or ground water registration numb Pursuant to ORS 540.510, any "layered" water use such as an irrigation right the a primary right proposed for transfer must be included in the transfer or be cand to a ground water registration must be filed separately in a ground water registration. For Substitution (ground water supplemental irrigation will be substituted for su irrigation) Ground water supplemental Permit or Certificate #; Surface water primary Certificate #; For a change from Supplemental Irrigation Use to Primary Irrigation Use Identify the primary certificate to be cancelled. Certificate # For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation. And Dord Describe the construction of the authorized and proposed well(s) in Table have a well log. For proposed wells not yet constructed or built, provide requested information element in the table. The Department recommends driller, geologist, or certified water right examiner to assist with assembling 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 accompanying application map. Failure to provide the information will delay the pupilication until it is received. The information is necessary for the department to a well well well of the proposed or a proposed or a well well wel	Are there other water right certificates, water use permits or ground water registrations ass with the "from" or the "to" lands? Yes No If YES, list the certificate, water use permit, or ground water registration numbers:	Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands?

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 han full rate of water right

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WATER WELL REPORT

Well No. 1

File Original and
First Copy with the
STATE ENGINEER
SALEM, OREGON
SALEM, OREGON

STATE OF OREGON 32818

State Permit No. .

(1) OWNER:	(11) WELL TESTS: Drawdown is amount to lowered below static le	vater level	is
Name Glen Tergen	Was a pump test made? Yes No If yes, by whom	ngel . L' . 1	MILLE
Address Rt.2, BOX 142, Aurora Oregon	Yield: Sal/min. with Ju ft. drawdow	m after	hrs.
	85		
(2) LOCATION OF WELL:			**
County Marien Owner's number, if any—	Bailer test gal./min. with ft. drawdow	n after	hrs.
NE 14 NE 14 Section 4 T. WS R. 14 W.M.	Artesian flow g.p.m. Date	oden CV	
Bearing and distance from section or subdivision corner	Temperature of water Was a chemical analysis ma		
100'S + 500'W	(12) WELL LOG: Diameter of well	TO*0	inches.
82'5 8 430'w from 5E	Depth drilled ~06 ft. Depth of completed w	rell Lut	<u>6 #t.</u>
Cor of sec. 33, T315, 1812	Formation: Describe by color, character, size of materia show thickness of aquifers and the kind and nature of stratum penetrated, with at least one entry for each of	ıl and stru	cture, and
	stratum penetrated, with at least one entry for each c	hange of	formation.
	MATERIAL	FROM	то
(3) TYPE OF WORK (check):	# 1915 PA	0	2
New Well. ☐ Deepening ☐ Reconditioning ☐ Abandon ☐	yellow clay	5	21
f abandonment, describe material and procedure in Item 11.	sandy clay, med.gray	K.T	20
TO THE PARTY OF TH	Cray olly	20	23
PROPOSED USE (check): (5) TYPE OF WELL:	1:1.,1. ;	63	78
Domestic Industrial Municipal Rotary Driven Cable	The state of the s	78	120
Irrigation 🔲 Test Well 🗆 Other 🗆 Dug 🗀 Bored 🗆	blue clay	120	130
	coarse black sand	130	1,33
(6) CASING INSTALLED: Threaded Welded	sand and gravel ,black	1.33	135
10" Diam. from	med.gravel black	135	139
" Diam. from ft. to ft. Gage	gray clay	139	187
	coarse black gravel	187	192
	blue clay	192	TUI
(7) PERFORATIONS: Perforated? No Ves No Type of perforator used mill knife		7.94	2.05
Type of perioration and		11)6	12 1/3
SIZE of perforations in. by in.			
in. by in. 12 perforations from 136 ft. to 139 ft. 15 perforations from 189 ft. to 193 ft.			
	The View View Land		
91 perforations from 194 ft. to 200 ft.			
4.9 perforations from 202 ft. to 205 ft.	IIIN 0 8 2018		
perforations from ft. to ft.	3011 00 2010	-	
(8) SCREENS: Well screen installed Yes No	OIAIDE		
(),	I OWHD		
Manufacturer's Name	10 10 10 10 1000	-	
Type			
Slot size Set from ft, to ft.	Work started Feb. 14 1962. Completed a		10 4-
Stot size	Work started FeD. 14 1902. Completed	Mar.10) 18 62
(9) CONSTRUCTION:	(13) PUMP:		
Was well gravel packed? Yes No Size of gravel:	Manufacturer's Name	***************************************	
Gravel placed from ft. to ft.	Type:	H.P	
Was a surface seal provided? 🗌 Yes 📋 No To what depth? ft.			
Material used in seal— <u>heavy mud</u>	Well Driller's Statement:		
Did any strata contain unusable water? Yes No	This well was drilled under my jurisdiction	and this	report is
Type of water? Depth of strata	true to the best of my knowledge and belief.		
Method of sealing strata off	NAME J.T.Miller		
(10) WATER LEVELS:	(Person firm or corporation) Box 175 Aurora Ore	ype or prin	it)
Static level 45 ft. below land surface Date	Address		
Artesian pressure lbs. per square inch Date			
IND. PLE DESIGN CHILL DESC	Driller's well number	***************************************	
Log Accepted by:	[Signed]		
[Signed] Blina & Gerja Date March 12, 1962	(Well Driller)		
Owner Date 11 Lune, 19 Lake	License No. 7 Date 3-10t	<u> </u>	19.62

MARI 62290

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

1,7

Well No. 2

WELL LABEL # L	93531
START CARD#	190387

Company Address 23301 Schultz Rd. NE City Aurora State OR Zip 97002 (2) TYPE OF WORK New Well Deepening Conversion Alteration (repair/recondition) Abandonment (3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other (4) PROPOSED USE Domestic Irrigation Community Industrial/ Commericial Livestock Dewatering Thermal Injection Other (5) BORE HOLE CONSTRUCTION Special Standard Attach copy) Depth of Completed Well 240 BORE HOLE SEAL SEC 3 NE 1/4 of the NW 1/4 Tax Lot 800 Lot Lot Conversion (6) Street address of well Nearest address 12814 Arndt Rd. NE Aurora, OR 97002 (10) STATIC WATER LEVEL Existing Well / Predeepening Completed Well DI-05-2009 53 Flowing Artesian? Dry Hole? WATER BEARING ZONES Depth water was first found / 182 SWL Date From To Est Flow SWL(psi) + SWL(ft) SWL Date From To Est Flow SWL(psi) + SWL(ft) 182 235 1,000 75 SWL Date From To Amt Ibs	
Company Address 23301 Schultz Rd. NE City Aurora State OR Zip 97002 (2) TYPE OF WORK New Well Deepening Conversion Alteration (repair/recondition) Abandonment (3) DRILL METHOD Reverse Rotary Mud Cable Auger Cable Mud Reverse Rotary Other (4) PROPOSED USE Domestic Irrigation Community Industrial/ Commercical Livestock Dewatering Thermal Injection Other (5) BORE HOLE CONSTRUCTION Special Standard Attach copy) Depth of Completed Well 240 BORE HOLE SEAL SEC 3 NE 1/4 of the NW 1/4 Tax Lot 800 Lot Lot Lat O ' OF OF OF OF OF OTHER LEVEL Lat O Street address of well Nearest address 12814 Arndt Rd. NE Aurora, OR 97002 (10) STATIC WATER LEVEL Existing Well / Predeepening Completed Well DI-05-2009 Dry Hole? WATER BEARING ZONES Depth water was first found / Sale Prom To Est Flow SWL(psi) + SWL(psi)	W W
Address 2330 Schultz Rd. NE City Aurora	
City Aurora State OR Zip 97002 (2) TYPE OF WORK New Well Deepening Conversion Alteration (repair/recondition) Abandonment (3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other (4) PROPOSED USE Domestic Industrial/ Commericial Livestock Dewatering Thermal Injection Other (5) BORE HOLE CONSTRUCTION Special Standard Attach copy) Depth of Completed Well 240 Reverse Rotary To Material From To Amt Ibs	
Conversion	DD
Alteration (repair/recondition) Abandonment (3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other (4) PROPOSED USE Domestic Injection Other Industrial/ Commercial Livestock Dewatering Thermal Injection Other (5) BORE HOLE CONSTRUCTION Special Standard Attach copy) Depth of Completed Well 240 ft. BORE HOLE SEAL Sacks/ Dia From To Material From To Amt Ibs	
12814 Arndt Rd. NE Aurora, OR 97002	00
Rotary Air	
Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other (4) PROPOSED USE Domestic Industrial/ Commercial Livestock Dewatering Thermal Injection Other (5) BORE HOLE CONSTRUCTION Special Standard Attach copy) Depth of Completed Well 240 ft. BORE HOLE SEAL Sacks/ Dia From To Material From To Amt Ibs (10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Predeepening Completed Well D1-05-2009 Dry Hole? WATER BEARING ZONES Depth water was first found / \$\frac{1}{2}\$\$	1
Reverse Rotary Other (4) PROPOSED USE Domestic Irrigation Community Industrial/ Commercial Livestock Dewatering Thermal Injection Other (5) BORE HOLE CONSTRUCTION Special Standard Attach copy) Depth of Completed Well 240 ft. BORE HOLE SEAL Sacks/ Dia From To Material From To Amt Ibs (10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Predeepening Completed Well DI-05-2009 53 Flowing Artesian? Dry Hole? WATER BEARING ZONES Depth water was first found / SAL SWL Date From To Est Flow SWL(psi) + SWL(ft) 182 235 1,000 75 Depth of Completed Well 240 ft. BORE HOLE SEAL Sacks/ Dia From To Material From To Amt Ibs	
(4) PROPOSED USE Domestic Irrigation Community Industrial/ Commercial Livestock Dewatering Thermal Injection Other (5) BORE HOLE CONSTRUCTION Special Standard Attach copy) Depth of Completed Well 240 ft. BORE HOLE SEAL Sacks/ Dia From To Material From To Amt Ibs Existing Well / Predeepening Completed Well DI-05-2009 53 Flowing Artesian? Depth water was first found /\$\frac{1}{3}\$\frac	
Industrial/ Commericial Livestock Dewatering Thermal Injection Other WATER BEARING ZONES Depth water was first found WATER BEARING ZONES Depth water was first found WATER BEARING ZONES Depth water was first found SWL Date From To Est Flow SWL(psi) TO Est Flo	\neg
Thermal Injection Other WATER BEARING ZONES Depth water was first found /\$\times\$ SWL Date From To Est Flow SWL(psi) + SWL(psi) + SWL(psi) Popth of Completed Well 240 ft. BORE HOLE Dia From To Material From To Amt Ibs	
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy) Depth of Completed Well 240 ft. BORE HOLE SEAL Sacks/ Dia From To Material From To Amt Ibs	. 40%
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy) SWL Date From To Est Flow SWL(psi) + SWL(psi)	
Depth of Completed Well 240 ft. BORE HOLE SEAL sacks/ Dia From To Material From To Amt Ibs)
Dia From To Material From To Amt lbs	
	4
14 0 122 Cement 0 122 48 S	_
(11) WELL LOG Ground Elevation	
Harmon and about Market DA DB MC DD DC	
	7
Other	\dashv
Dacktin placed from it to it. Windowski	-
Clay gray silty 94 96	-
Explosives used: Yes Type Amount Clay brown 96 103	
(6) CASING/LINER Clay brown, sand 103 123	
(6) CASING/LINER Casing Liner Dia + From To Gauge Sti Piste Wid Thrd Clay gray, gravel & sand 123 141	0.1
(•) C 10 × 2.5 199.75 .250 (•) C × Sand & silt gray 141 152	
Clay green & gray 152 154	
	_
Sand brown, gravel with silt 182 186	-
Clay gray, sand with gravel 186 190 Sand black & gravel 50% 190 202	-
Shoe Inside Outside Other Location of shoe(s) 199.75 Sand brown & gravel 50% 202 205	-
Sand blook & beauty	-
Sand black 50% & gravel 209 217	_
(7) PERFORATIONS/SCREENS Sand black 70% & gravel 217 220	
Perforations Method Sand black 70% & gravel 220 227	
Screens Type tele., wire wrap Material stainless Sand black 227 230	
Perf/ Casing/Screen Scrn/slot Slot # of Tele/ Date Started 09-25-2008 Completed 01-05-2009	
Secret Lines Dia 17011 10 Wildli Jengti alota Pilo 3120	_
Casing 8 189.66 196.66 (unbonded) Water Well Constructor Certification Screen 8 196.66 220.66 .065 (unbonded) Water Well Constructor Certification	
. Settily that the work i performed on the construction, deepening, anteracto	
Screen 8 220.66 235 .015 abandonment of this well is in compliance with Oregon water supply construction standards. Materials used and information reported above are tr	
the best of my knowledge and belief.	JC 10
(8) WELL TESTS; Minimum testing time is 1 hour License Number 1704 Date 01-26-2009	
	_
Pump Bailer Air Flowing Artesian Password: (if filing electronically)	_
Yield gal/min Drawdown Drill sten/Pump depth Duration (nr)	
600 230 6 (bonded) Water Well Constructor Certification	
I accept responsibility for the construction, deepening, alteration, or abando	
work performed on this well during the construction dates reported above. All	
Temperature 53 °F Lab analysis RECEIVED performed during this time is in compliance with Oregon water supply construction standards. This report is true to the best of my knowledge and be	
Water quality concerns? Yes (describe below) construction standards. This report is true to the best of my knowledge and be	ici.
From To Description 0 4 2009 License Number 783 Date01-26-2009	-
Password . (In unit dictionically)	-
RECEIVED WATER RESOURCES DEPT Signed Contact Info (optional) Grosslaw Well Drilling (503) 982-2060	
SALEMININE GONE DESCRIBERS DEPARTMENT	_

THIS REPOR MARKT BEST AND THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

Form Version: 0.88

WATER RESOURCES DEPT SALEM, OREGON

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