

# 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.

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Check	k all ite	ms 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: <a href="http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator">http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator</a> . If you have questions, call Customer Service at (503) 986-0801.
$\boxtimes$		Part 4 – Completed Applicant Information and Signature.
		Part 5 – Information about Water Rights to be Transferred: <b>How many water rights are to be transferred?</b> One List them here: C-63600  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.
	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 <b>all</b> of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
	N/A	Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.
		(For Staff Use Only)
		WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):  Application fee not enclosed/insufficient Map not included or incomplete  Land Use Form not enclosed or incomplete  Additional signature(s) required Part is incomplete  Other/Explanation Staff: 503-986-0 Date: /_ /
		Staff:503-986-0 Date://

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# Part 2 of 5 – Transfer Application Map Checklist

# OWRD

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

	Please be matches	sure that the transfer application map you submit includes all the required items and the existing water right map. Check all boxes that apply.
	□ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see <a href="http://apps.wrd.state.or.us/apps/wr/cwre_license_view/">http://apps.wrd.state.or.us/apps/wr/cwre_license_view/</a> . CWRE stamp and signature are not required for substitutions.
	N/A	If more than three water rights are involved, separate maps are needed for each water right.
$\boxtimes$		Permanent quality printed with dark ink on good quality paper.
$\boxtimes$		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, $11 \times 17$ inches, or up to $30 \times 30$ inches. For $30 \times 30$ inch maps, one extra copy is required.
$\boxtimes$		A north arrow, a legend, and scale.
		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, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines.
$\boxtimes$		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
$\boxtimes$		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
$\boxtimes$		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
		Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
$\boxtimes$	□ N/A	Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
$\boxtimes$		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
$\boxtimes$	□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example $-42^{\circ}32'15.5"$ ) or degrees-decimal with five or more digits after the decimal (example $-42.53764^{\circ}$ ).

	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		
	Character of Use		
	Point of Diversion/Appropriation		
	Number of above boxes checked = $(2a)$		
	Subtract 1 from the number in line $2a = 1 (2b)$ If only one change, this will be 0		
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » »	2	\$ 930
	Number of water rights included in transfer 1 (3a)		
	Subtract 1 from the number in 3a above: <u>0 (3b)</u> If only one water right 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 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*): $0.64 (5a)$		
	Subtract 1.0 from the number in 5a above: <u>-0.36 (5b)</u>		
	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)		
5	and multiply 5c by \$350, then enter on line 5 » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$ 2,500
	Is this transfer:		RECEIVE
	necessary to complete a project funded by the Oregon Watershed		INCOLIVE
	Enhancement Board (OWEB) under ORS 541.932?		JUL 12 201
	endorsed in writing by ODFW as a change that will result in a net		
	benefit to fish and wildlife habitat?		OWRD
	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 » » » » » » » » » » » » » » » » » »	8	\$ 2,500

\*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 NAME			PHONE NO.	ADDITIONAL CONTACT NO.								
Singhose Land & Cattle Compa	any, LLC											
ADDRESS				FAX NO.								
P.O. Box 55												
CITY	STATE	ZIP	E-MAIL									
Riley	OR	97758										
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE												
DEPARTMENT ELECTRONIC												

		_	PHONE NO.	ADDITIONAL CONTACT NO.
John A. Short / Water Rig	ht Services, LL	C	541-389-2837	
ADDRESS P.O. Box 1830				FAX NO.
CITY	STATE	ZIP	E-MAIL	
Bend	OR	97709	johnshort@usa.co	m
				CORRESPONDENCE FROM THE
				NTS WILL ALSO BE MAILED.
				ansfer application, and why:
Per	manent tran	sfer for reco	nfiguration of irriga	ted area.
If you need additional space	, continue on a s	eparate piece o	f paper and attach to the ap	plication as "Attachment 1".
Check this box if the Reinvestment Act. (	-		ly funded by the Ame	rican Recovery and
		Chaol	· One Den	
By signing this applicati	on Lundoustons		k One Box	determination and prior to
Department approval of	transfer as iden	tified in OAR 6	90-380-4010(5)· <b>OR</b>	information and evidence that I am
Department approval of		unica in Orne c		
authorized to pursue the		s defined in OR		ne right is in the
authorized to pursue the  I affirm the applicant is	a municipality a		S 540.510(3)(b) and that the	he right is in the
authorized to pursue the I affirm the applicant is name of the municipality	a municipality a y or a predecess	or; OR	S 540.510(3)(b) and that the	
authorized to pursue the  I affirm the applicant is a name of the municipality  I affirm the applicant is a	a municipality a y or a predecess an entity with th	or; <b>OR</b> e authority to c		quiring by
authorized to pursue the  I affirm the applicant is a name of the municipality  I affirm the applicant is a	a municipality a y or a predecess an entity with the erty to which the	or; <b>OR</b> e authority to c	S 540.510(3)(b) and that the ondemn property and is according to the condemn property and its accor	quiring by
authorized to pursue the I affirm the applicant is a name of the municipality I affirm the applicant is a condemnation the prope	a municipality a y or a predecess an entity with the erty to which the	or; <b>OR</b> e authority to c	S 540.510(3)(b) and that the ondemn property and is according to the condemn property and its accor	quiring by

to right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Burns Times-Herald

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

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Print Name (and Title if applicable)

Date

7-3-18

Date

Trint Name (and Title if applicable)

Print Name (and Title if applicable)

Date

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**OWRD** 

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? X 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 email addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.

☐ The applicant is res		y:				
continue to be sent	sponsible to the app	for comp olicant.	oletion of	change(s). No	tices and co	orrespondence should
The receiving lander final order is issued	owner wil l. Copies o	l be responded	onsible for and cor	or completing trespondence sh	the proposed	d change(s) after the nt to this landowner.
Both the receiving Copies of notices at	landowne	r and app	olicant w	ill be responsib	le for comr	oletion of change(s)
At this time, are the lands i						
If YES, and you know information table below assignment will have to	who the n	ew lando lo not kno	owner wi	ll be, please co	mplete the	receiving landowner
If a property sells, the cunless a sale agreement <a href="http://www.oregon.gov">http://www.oregon.gov</a>	or other	documen	t states o	therwise. For r	nore inform	o the new owner, nation see:
RECEIVING LANDOWNER NAME N/	A			PHONE NO.	ADDI	TIONAL CONTACT NO.
ADDRESS					FAXN	NO.
CITY	STATE	ZIP		E-MAIL		
Describe any special owner  Check here if any of the					vill be lesse	tod within 11
Check here if any of the an irrigation or other wa	water rig	hts propo	osed for t	ransfer are or ve	will be locat	ted within or served by
Check here if any of the an irrigation or other wa	water rig	hts propo	osed for t	ransfer are or ve	will be located by the best section will be located by the best se	ted within or served by
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A	water rig	hts propo et. ( <b>Tip:</b> (	ADDRESS STATE	ransfer are or ve and attach S	Supplement  ZIP	tal Form D.)
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A  CITY  Check here if water for a for stored water with a fentity NAME	water rig	hts propo et. ( <b>Tip:</b> (	ADDRESS STATE	ransfer are or ve and attach S	Supplement  ZIP	tal Form D.)
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A  CITY  Check here if water for a for stored water with a first stored water wat	water rig	hts propo et. ( <b>Tip:</b> (	ADDRESS STATE  applied us ther entire	ransfer are or ve and attach S	Supplement  ZIP	tal Form D.)
CITY  Check here if any of the an irrigation or other was irrigation or other was irrigation district name N/A  CITY  Check here if water for a for stored water with a fentity name  N/A  CITY  To meet State Land Use Co.	water rig	rights su	ADDRESS ADDRESS STATE ADDRESS STATE ADDRESS STATE	ransfer are or ve and attach S	zip  zip  zip  zip  county, city	ment or other contract
CITY  Check here if any of the an irrigation or other was irrigation or other was irrigation district name N/A  CITY  Check here if water for a for stored water with a fentity name  N/A  CITY  To meet State Land Use Concorporation, or tribal government of the concorporation of the conc	water rig	rights su	ADDRESS STATE ADDRESS STATE ADDRESS STATE ADDRESS ADDRESS ADDRESS	ransfer are or ve and attach S  ander a water sety.  but must list all action water with	zip  zip  zip  zip  county, city	ment or other contract
CITY  Check here if any of the an irrigation or other was irrigation or other was irrigation district name N/A  CITY  Check here if water for a for stored water with a fentity name  N/A  CITY  To meet State Land Use Cocorporation, or tribal govern	water rig	rights su	ADDRESS STATE ADDRESS STATE ADDRESS STATE ADDRESS STATE	ransfer are or ve and attach S  ander a water sety.  but must list all action water with	zip  zip  zip  zip  county, city	ment or other contract  y, municipal ed, conveyed or used.
CITY  Check here if any of the an irrigation or other was irrigation or other was irrigation district name N/A  CITY  Check here if water for a for stored water with a fentity name  N/A  CITY  To meet State Land Use Concorporation, or tribal governmental government	water rig	rights su	ADDRESS STATE  ADDRESS STATE  ADDRESS STATE  ADDRESS ADDRESS 360 N. A STATE	ransfer are or ve and attach S  ander a water sety.  but must list all diction water with the sety.	zip  zip  zip  zip  zip  zip  zip	ment or other contract  y, municipal ed, conveyed or used.

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#### **CERTIFICATE # C-63600**

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

System capacity: <u>0.64</u> 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.

## Water is pumped from wells via pipelines to pivots.

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

		-									
POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	T	wp	R	ng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 5	Authorized Proposed	HARN 243	23	s	26	E	10	NE	SW	1900	2178.5' N, 2205.1' E of SW Cor S10
L-125280	☐ Authorized ☐ Proposed	L-125280	23	s	26	E	1	NW	SE	101	50' S, 2620' W of E 1/4 Cor S1
L-125281	☐ Authorized ☐ Proposed	L-125281	23	S	26	E	1	NW	SW	101	130' S, 400' E of W 1/4 Cor S1
L-104459	☐ Authorized ☐ Proposed	L-104459	23	S	26	E	11	SE	SE	102	1,320' N, 1,315' W of SE Cor S11
L-115916	☐ Authorized ☐ Proposed	L-115916	23	s	26	E	12	NE	NE	2100	1,320' S, 1,315' W of NE Cor S12
L-111748	☐ Authorized ☐ Proposed	L-111748	23	s	26	E	12	NW	NW	2100	1,320' S, 1,315' E of NE Cor S12
L-115909	☐ Authorized ☐ Proposed	L-115909	23	s	26	E	12	SE	sw	2100	1,320' N, 1,315' E of SW Cor S12
L-125022	☐ Authorized ☐ Proposed	L-125022	23	s	26	E	12	SE	SE	2100	1,320' N, 1,315' W of SE Cor S12

Check a	all 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

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 # C-63600

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.

]	Γhe		_		appe	ears o	n the	certific	cate BE		nds) POSED CHA	NGES	Proposed Changes (see			Th	e lis	sting			appe		ΓER P	on" lands) ROPOSED	CHANG	ES
Tw	/p	Rng	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)	Tv	vp	Rı	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
23	S	26	E	10	SW	SE	2000		8.8	IR	Well 5	1980	POU / APOA	23	S	26	E	1	SE	sw	101		5.2	IR	L- 125280, 125281, 104459, 115916, 111748, 115909, 125022	1980
23	S	26	E	10	SE	SE	2000		9.1			66		23	S	26	E	1	sw	SE	101		5.3	"	"	66
23	S	26	E	10	NE	NE	3000		20.1	66	66	66	66	23	S	26	E	11	NE	SE	102		1.5	44	"	"
23	S	26	E	10	NW	NE	3000		12.8	66	66	66	66	23	S	26	E	11	NW	SE	102		1.5	"	66	66
										× 2 - 1 -			66	23	S	26	E	11	sw	SE	102		1.5	66	66	66
													66	23	S	26	E	11	SE	SE	102		1.5	66	66	66
													66	23	S	26	E	12	NE	NE	2100		1.5	"	"	66
													66	23	S	26	E	12	NW	NE	2100		1.4	66	"	66
													66	23	S	26	E	12	NW	NE	2100		5.2	"	"	- 66
													66	23	S	26	E	12	SW	NE	2100		1.5	66	"	66
					T	OTA	L ACR	ES:	50.8										SUB-	TOTA	L ACE	RES:	26.1			

Additional remarks:

Revised 7/27/2017

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

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

# Table 2. Description of Changes to Water Right Certificate # C-63600

List the change proposed for the acreage in each ½ ¼. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

Th			hat a	appears o	n the	certific	cate BE		ds) POSED CHA		Proposed Changes (see			Th	e lis	sting	PR as it	OPO	dappe	the "to ar AF"	TER P	on" lands) ROPOSED	CHANG	ES
Twp	Rng	Se	ec	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)	Date	"CODES" from previous page)	Tv	vp	R	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
						7					POU/ APOA	23	S	26	E	12	SE	NE	2100		1.5	IR	L- 125280, 125281, 104459, 115916, 111748, 115909, 125022	1980
											66	23	S	26	E	12	NE	NW	2100		5.3	66	66	66
											66	23	S	26	E	12	NE	NW	2100		1.4	66	"	
											66	23	S	26	E	12	NW	NW	2100		1.5	66	"	66
											66	23	S	26	E	12	sw	NW	2100		1.5	66	66	66
											66	23	S	26	E	12	SE	NW	2100		1.5	66	66	66
											66	23	S	26	E	12	NE	SW	2100		1.5	66	46	66
											66	23	S	26	E	12	NW	SW	2100		1.5	66	46	66
											66	23	S	26	E	12	SW	SW	2200		1.5	66	66	46
											66	23	s	26	E	12	SE	sw	2100		1.5	"	66	66
				TOTA	L ACF	RES:											SUB-	TOTA	L ACR	ES:	18.7			

Additional	remarks:	
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JUL 1 2 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 # C-63600

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.

Th		_		appears	on the	certifi	cate BE		ds) POSED CHA Il be changed.		Proposed Changes (see			The	e lis	sting			d appe		ΓER PI	on" lands) ROPOSED	CHANG	ES
Twp	Rng	g	Sec	1/4 1/4	Tax Lot	I of or	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Tw	vp	Rı	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
											POU/ APOA	23	S	26	E	12	NE	SE	2100		1.5	IR	L- 125280, 125281, 104459, 115916, 111748, 115909, 125022	1980
											"	23	S	26	E	12	NW	SE	2100		1.5	66	66	66
											66	23	S	26	E	12	sw	SE	2100		1.5	"	"	66
											"	23	S	26	E	12	SE	SE	2100		1.5	66	66	66
											"											"	66	66
									22		"											66	"	66
											"											"	"	66
											"											"	"	66
				TOTA	L AC	RES:	50.8										SUB-	TOTA	IL ACE	RES:	6.0	ТОТА	L ACRES	5: 50.8

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

Additional remarks: .	

RECEIVED

JUL 1 2 2018

# For Place of Use or Character of Use Changes

T	of Trace of Use of Character of Use Changes											
	Are there other water right certificates, water use permits or ground water registrations associate with the "from" or the "to" lands? $\square$ Yes $\boxtimes$ No	ciated										
	If YES, list the certificate, water use permit, or ground water registration numbers: N/A.											
>	Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.											
F	or Substitution (ground water supplemental irrigation will be substituted for surface water principal irrigation)	primary										
	Ground water supplemental Permit or Certificate # <u>N/A</u> ; Surface water primary Certificate # <u>N/A</u> .		EIVED									
	or a change from Supplemental Irrigation Use to Primary Irrigation Use	JUL 1	<b>2</b> 2018									
	Identify the primary certificate to be cancelled. Certificate # N/A	OW	'RD									
F	or a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation	n:										
	Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled with the corresponding well(s) in Table 1 above and on the accompanying application at Tip: You may search for well logs on the Department's web page at: <a href="http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx">http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx</a>	ed and ass map.	sociated									
	AND/OR											
	Describe the construction of the authorized and proposed well(s) in Table 3 for any we have a well log. For <i>proposed wells not yet constructed or built</i> , provide "a best estima requested information element in the table. The Department recommends you consult a driller, geologist, or certified water right examiner to assist with assembling the inform to complete Table 3.	ate" for ea a licensed	ich well									
Any acco appl well	e 3. Construction of Point(s) of Appropriation  y well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and ompanying application map. Failure to provide the information will delay the processing of y lication until it is received. The information is necessary for the department to assess whether has been source aquifer as the authorized point(s) of appropriation (POA). The inbitted by law from approving POA changes that do not access the same source aquifer.	your trans or the prop	fer oosed									
100 E 100 S 100 KS	Sed or If an existing Static water		Well -specifi									

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

NOTICE TO WATER WELL CONTRACTOR The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT, SALEM, OREGON 97310 within 30 days from the date of well completion.

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this lin

State Permit No. ...

SP\*45658-119

(1) OWNER:	(10) LOCATION OF WELL:						
Name Steve Hoyt, North Silver Creek Ranch	County Harney Driller's well m	umber					
Address	NE 1/ SW 1/ Section 10 m 230 - 260						
Riley, Oregon 97758	Bearing and distance from section or subdivisi			W.M.			
(2) TYPE OF WORK (check):	Subdivisi	on corne	er	:*			
New Well A Deepening Reconditioning Abandon				-			
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed w	-11					
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found	ен. 20	0				
Retary L Driven Domestic Industrial Municipal Domestic	4 10			ft.			
Dag	A mtoday was a sale of the sal			-4-79			
(5) CASING INSTALLED:  180D Diam from +1½ ft. to 18½ ft. Gage •250  20D Diam from +2½ ft. to 257½ ft. Gage •250  " Diam from ft. to ft. Gage • (6) PERFORATIONS.	(12) WELL LOG: Diameter of well be Depth drilled 550 ft. Depth of comples and show thickness and nature of each stratur with at least one entry for each change of former	eted well	sing 1 550	materials; enetrated,			
Type of perforator used	position of Static Water Level and indicate prin	cipal wa	ter-beari	ng strata.			
Sino of more than the	MATERIAL	From	То	SWL			
	Brown Clay Conglomerate	0	200	149			
perforations from	Brown Clay Stone & Gravel, WB	200	340				
perforations from ft. to ft. to ft.	Brown Sandstone & Gravel, WB Med. Brown Sandstone	340	420				
	Broken Grey Lava Rock	420	448				
(7) SCREENS: Well screen installed?   Yes  No	Med. Brown Sandstone	480	480 550				
Manufacturer's Name	TOWN DESCRIPTION OF THE PROPERTY OF THE PROPER	400	220				
Type Model No							
Diam. Slot size Set from ft.	first 454 ft 18"						
Diam. Slot size Set from ft. to ft. to ft.	454 ft. to 550 ft 12"		REC	EIVED			
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	-						
a pump test made? 🗌 Yes 🖫 No If yes, by whom?	DECEIVED		JUL-	<b>2</b> 2018			
Yield: gal./min. with ft. drawdown after hrs.	RECEIVED						
n n n	SEP 1 2:1979		ON	RD			
11 11 II II II II							
ler test 9 gal./min. with 0 ft. drawdown after 1 hrs.	WATER RESOURCES DEPT						
Artesian flow g.p.m.	SALEM, OREGON						
Temperature of water 60* Depth artesian flow encountered ft.							
	Work started 6-6 19 79 Completed			19 79			
(9) CONSTRUCTION:	Date well drilling machine moved off of well	9-4		19 79			
Well seal—Material used Cement  Well sealed from land surface to 18½ ft.  Diameter of well bore to bottom of seal 22 in.  Diameter of well bore below seal 18 in.  Number of sacks of cement used in well seal 70 sacks  Town was cement grout placed? pumped down	Drilling Machine Operator's Certification:  This well was constructed under my direct supervision.  Materials used and information reported above are true to my best knowledge and belief.  [Signed] Drilling Machine Operator)  Drilling Machine Operator's License No. 4/5						
	Water Well Contractor's Certification:						
Was a drive shoe used? ☐ Yes M No Plugs Size: location ft.	This well was drilled under my jurisdic true to the best of my knowledge and belie Name Orvail Buckner Well Drill;	ef.		eport is			
ype of water? depth of strata	(Person, firm or corporation) Address 1686 N.E. Negus Way, Redn		e or prin				
Method of sealing strata off	Address 1000 N.E. Negus way, Kedi	iona,	ore.	7//30			
	[Signed] was	En	/	*			
	(Water Well Contrac						
ravel placed from ft. to ft.	Contractor's License No. 608 Date	9-4		199			
(USE ADDITIONAL SH	EETS IF NECESSARY)		Spe	45656-119			

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

WELL I.D. LABEL# L	12528	10
START CARD#	21252	7
ORIGINAL LOG#		,

(I) LAND HWNER Owner Well I.D.	
(D) T(1) Owner Well I.D.	Ham 52634
Owner Well I.D. Last Name Singhose	(9) LOCATION OF WELL (legal description)
Company	
Address Pu By 55	County Harry Twp 23 NS Range 26 CE/W WM
City RICY State A Zip 97758	Sec 1 1/4 of the 5/- 1/4 Tax Lot 161
	Tax Map Number Lot
	Lato' or DMS or DD
Alteration (complete 2a & 10)   Abandonment(complete 5a)	
(2a) PRE-ALTERATION	Bird of BB
Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address
Casing:	Landing to the state of
Material From To Amt sacks/lbs	Miller Could no Riley or
Seal:	
(3) DRILL METHOD	(10) STATIC WATER LEVEL
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(ft)
	Existing Well / Pre-Alteration
Reverse RotaryOther	Completed Well
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 250
Thermal Injection Other	
	5 to 2(to)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy	8-1-18 280 255 16691 147
Depth of Completed Well 630 ft.	9-29-16 610 630 3500 147
BORE HOLE SEAL sacks/	7 27 15 670 250 3900
Dia From To Material From To Amt Ibs	
30 0 59 Cement 0 59 35 95	
20 0 59 Cement 0 59 35 25 Calculated 25	
Calculated	
Calculated 2.5	(11) WELL LOG Ground Florestion
	Ground Elevation
How was seal placed: Method A B C D E	Material From To
Other	TOD 50:1 0 30
Backfill placed from ft. to ft. Material	town clay 30 50
Filter pack from ft. to ft. Material Size	Brewn Clay 50 100
	300 m. Glay 100 215
Explosives used: Yes Type Amount	Hard rack 215 250
	red cycles 250 260
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	A STATE OF THE PARTY OF THE PAR
Proposed Amount Pounds Actual Amount Pounds	6/47 Bisult 260 389
(6) CASING/LINER	Sond Star and from 287 610
	Broke Lava Rain 610 630
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Brene Lave Acin 610 630
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Brene Lave Acin 610 630
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	RECEIVED BY OWRD RECEIVED
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	RECEIVED BY OWRD RECEIVED
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    S	RECEIVED BY OWRD RECEIVED
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Structure	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    S	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Strain   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Strain   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018  SALEM, OR OWRD
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Structure	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018  SALEM, OR OWRD
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Structure	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018  SALEM, OR OWRD
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018  SALEM, OR OWRD  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (unbonded) Water Well Constructor Certification
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017  JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 14 Completed 9 - 29 - 14  (unbonded) Water Well Constructor Certification  I certify that the work I performed on the construction, deepening, alteration, or
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017  JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 14 Completed 9 - 29 - 14  (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
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017  JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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.
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017 JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 14 Completed 9 - 29 - 14  (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
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD  RECEIVED  JUL 1 0 2017  JUL 12 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Streem	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017  JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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.
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Structure	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017  SALEM, OR  Date Started 7-27-14 Completed 9-29-14  (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  Signed
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD  RECEIVED  JUL 1 0 2017  JUL 12 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Structure	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017  SALEM, OR  Date Started 7-27-14 Completed 9-29-14  (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  Signed
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Street   St	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017  JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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  Signed  (bonded) Water Well Constructor Certification
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Shoe	RECEIVED BY OWRD RECEIVED  JUL 1 0 2017  JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 14 Completed 9 - 29 - 14  (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  Signed  (bonded) Water Well Constructor Certification  I accept responsibility for the construction, deepening, alteration, or abandonment
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Shoe	RECEIVED BY OWRD  RECEIVED  JUL 1 0 2017  JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 14 Completed 9 - 29 - 14  (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  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
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Shoe	RECEIVED BY OWRD  RECEIVED  JUL 1 0 2017  JUL 1 2 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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  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.
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Shoe	RECEIVED BY OWRD  RECEIVED  JUL 1 0 2017  JUL 12 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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  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
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Shoe	RECEIVED BY OWRD  RECEIVED  JUL 1 0 2017  JUL 12 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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  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 6594 Date 4460. The construction of the construction standards. This report is true to the best of my knowledge and belief.  License Number 6594 Date 4460.
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    Shoe	RECEIVED BY OWRD  RECEIVED  JUL 1 0 2017  JUL 12 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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  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 654 Date 4 10 17  Signed
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd    15	RECEIVED BY OWRD  RECEIVED  JUL 1 0 2017  JUL 12 2018  SALEM, OR  Date Started 7 - 27 - 16 Completed 9 - 29 - 16  (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  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 6594 Date 4460. The construction of the construction standards. This report is true to the best of my knowledge and belief.  License Number 6594 Date 4460.

WATER SUPPLY WELL REPORT	HARN 526	START CARD#	212634
(as required by ORS 537.765 & OAR 690-205-0210)		ORIGINAL LOG#	, in the second
(1) LAND OWNER First Name	ghose.	(9) LOCATION OF WELL (legal desiration)  County Heart Twp 23 N/S	152635
Company		County flow 1 Two 23	Perce 26 FAVINA
Address PU 1344 59 City RICHY State ON Zip		Sec	Range E/W WN
	Conversion	Lat "or	Lot DMS or DD
Alteration (complete 2a & 10) Ab	bandonment(complete 5a)	Long ' " or	DMS or DD
Dia + From To Gauge Stl Plstc	1	Street address of well Neares	st address
Casing:		1. 11.1 1 1 1 1	10 (
Material From To Amt sacks Seal:	/lbs	Miller Camber Rd	Kelly OR
(3) DRILL METHOD		(10) STATIC WATER LEVEL	
Rotary Air Rotary Mud Cable Auger	Cable Mud		SWL(psi) + SWL(ft)
Reverse Rotary Other		Existing Well / Pre-Alteration	
	7	Completed Well	
(4) PROPOSED USE Domestic Irrigation Industrial / Commercial Livestock Dewatering	_]Community		Dry Hole?
Thermal Injection Other	V		was first found 240
		SWL Date From To Est Flo	ow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special S	Standard (Attach copy)	11-18-16 740 245 1000	928 147
Depth of Completed Well 480 ft.  BORE HOLE SEAL		11-18-14 430 480 3500	147
BORE HOLE SEAL  Dia From To Material From			
20" 0 59 Cement 0	59 35 94		
10' 65 35	Calculated 23		
Bentonité 0	3' <b>14</b> 50 - (Calculated 15	11) WELL LOG Ground Flourism	
How was seal placed: Method A B		Ground Elevation	P
Other		Material Top 501	From To
Backfill placed from ft. to ft. Material	1	Georal /Sovid	8 20 20 40
Filter pack from ft. to ft. Material	Size	garrel	20 40
Explosives used: Yes Type Amount		granel	46 4 <b>5</b>
5a) ABANDONMENT USING UNHYDRATED E	BENTONITE	Brown clay	50 600
Proposed Amount Pounds Actual Amoun		sand.	100 150
6) CASING/LINER	-	Block Cyrders	150 170
Casing Liner Dia + From To Gauge	Stl Plstc Wld Thrd	hard Rock Black/rock cynders	190 290
⊗ ○ 18" 4 1 59 315 ○ ⊗ 16" □ 5 85 312		Gray Busalt	240 285
6 16" 5 85 312		Bran Spil STON and El	240 285
	18 AH HI	fune	430 480
Ŏ Ŏ d d d		Ded cion	430 480
Shoe Inside Outside Other Location	of shoe(s)		
Temp casing Yes Dia From	То		
7) PERFORATIONS/SCREENS			
Perforations Method	ED BY OWRD	16.2.11	11 1- 14
TypeWateria	Slot # of Tele/	Date Started 1-1-16 Complet	ed H-18-16
li Bi	3101	(unbonded) Water Well Constructor Certification	
API		I certify that the work I performed on the constr	uction, deepening, alteration, or
		abandonment of this well is in compliance we construction standards. Materials used and information	th Oregon water supply well
SA	LEM, OR	the best of my knowledge and belief.	ment chornstructure acadelic
		License Number Date	
8) WELL TESTS: Minimum testing time is 1 hour			JUL 1 0 2017
Pump Bailer Ø Air	Flowing Artesian	Signed	
Yield gal/min Drawdown Drill stem/Pump depth		bonded) Water Well Constructor Certification	SALEM, OR
1500 gul 480		accept responsibility for the construction, deepe	ning, alteration, or abandonmen
	l v	work performed on this well during the construction performed during this time is in compliance w	ith Oregon water supply wel
Temperature 58 °F Lab analysis Yes By		construction standards. This report is true to the be-	
Water quality concerns? Yes (describe below) TDS an	mount 360	License Number 1654 Date	6-10-247
From To Description	Amount Units		
		Signed Contact Info (optional)	Annual Control of the
ORIGINAL THIS REPORT MUST BE SUBMITTED TO THE WAY	- WATER RESOURCES DEP	PARTMENT	14.7ED
THIS REPORT MUST BE SUBMITTED TO THE WATER R	RESOURCES DEPARTME!	NI WITHIN 30 DAYS OF COMPLET TO THE	Form Version: 0.95

STATE OF OREGON

JUL 1 2 2018

WELL I.D. LABEL# L

#### STATE OF OREGON WATER SUPPLY WELL REPORT

# HARN/51990

HARN 51990	
WELL LABEL # L 10 4459	
START CARD# 20 6058	
ODICINAL LOCA	

(ORS 537.765 & OAR 690-205-0210) Instructions for completing this report are on the last page of this form. ORIGINAL LOG# (1) LANDOWNER Owner Well I.D. (9) LOCATION OF WELL (legal description) Last Name 12 VIC First Name 601/201 County Haviner Twp 23 Nor S Range 26 E or W W.M. Sec 12 5E 1/4 of the Ru 1/4 Tax Lot 2100 ompany 1364 255 City (hrising willy State (1) Zip 4764 Tax Map Number \_ Lat New Conversion Deepening Long ☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a) DMS or DD (2a) PRE-ALTERATION: Street Address of Well (or nearest address) Miller Canyon Well Depth Seal Material Rialey in Casing Type: ☐ Steel □ Plastic Other (10) STATIC WATER LEVEL Casing Gauge Casing Diameter Date SWL(psi) SWL (ft) 4/1-13 Existing Well/Pre-Alteration 15% (3) DRILL METHOD Rotary Air Rotary Mud Completed Well 4-11-13 152 ☐ Cable ☐ Cable Mud ☐ Reverse Rotary ☐ Other Flowing Artesian? Yes Dry Hole? Yes 30 WATER BEARING ZONES (4) PROPOSED USE ☐ Domestic ☐ Livestock ☐ Irrigation ☐ Commun ☐ Community ☐ Industrial/Commercial SWL Date From Est Flow SWL (ft) 21/0 See y ☐ Thermal Other 3-13-13 230 4-11-13 460 (5) BORE HOLE CONSTRUCTION 500 500 Depth of Completed Well 50℃ ft. Special Standard: Yes (attach copy) BORE HOLE SEAL. Dia From From To Material Amount Scks/lbs (11) WELL LOG Cemen Sens Ground Elevation 60 SCF. Material 5011 Brevn How was seal placed: Method A B C D ROCK 6/4/41 luj Backfill placed from 75 ft. to 35 ft. Material 130 1 Wind Sant ilter pack from ft. to \_\_\_\_\_ ft. Material \_ (5a) ABANDONMENT USING UNHYDRATED BENTONITE: Calculated Amount Proposed to be Used: sacks/lbs Actual Amount Used: sacks/lbs OCT 1 0 2013 AUG 0 1 2014 (6) CASING/ Csng Linr Dia Gauge Steel | Plastic | Welded | Thrd 16" 118 ,250 gx SALEM, OR Date Started \_//- 5- 12 Completed (unbonded) Water Well Constructor Certification Shoe Inside Outside Other Location of shoe(s) I certify that the work I performed on the construction, deepening, alteration, or Temporary casing Yes Diameter abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to (7) PERFORATIONS/SCREENS the best of my knowledge and belief. RECEIVED Perforations Method Screens License Number Type Date Material JUL **1 2** 2018 Screen/ Tele Signed Screen # of Slot slot pipe Perf Scrn Csng Dia From width length slots size (bonded) Water Well Constructor Certification I accept responsibility for the construction, deepening, alteraction 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. (8) WELL TESTS: Minimum testing time is 1 hour Date 10-6-13 ☐ Pump ☐ Bailer Air Air License Number ☐ Flowing Artesian Yield gal/min Drawdown Pump depth Duration (hr) 2000 991 500 emperature 33 °F Lab analysis Yes By Contact Info. (optional) Water quality concerns? Yes (describe below) TDS ppm From Description Amount Units

# HARN 52484VRD

#### STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

APR 01 2016

WELL LABEL # L 115916

Instructions for completing this report are on the last page of this form. $\leq \Delta t$	EM. OR SIY84
(1) LAND OWNER First Name Last Name PUC 12-1	(9) LOCATION OF WELL (legal description)
Company	County Harry Twp 23 Nor S Range 26 For W W.M.
Address Pa Box 255	County Harney Twp 23 Nor S Range 26 E or W W.M. Sec 1/4 of the NW 1/4 Tax Lot 2
City Christmas Valley State OR Zip 97641	Tax Map Number         Lot           Lat         "o"         DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Lat O DMS or DD Long O O O O O O O O O O O O O O O O O O O
Alteration (repair/recondition) Abandonment	Long or DMS or DD  Long DMS or DD  Street Address of Well (or nearest address)
(3) DRILL METHOD  Rotary Air Rotary Mud Cable Auger Cable Mud  Reverse Rotary Other	(10) STATIC WATER LEVEL
(4) PROPOSED USE Domestic Irrigation Community	Date   SWL(psi)   +   SWL(ft)
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection	Existing Well/Predeepening /
Thermal Other	Completed Well   12 - 2/9   147   Flowing Artesian?
(5) BORE HOLE CONSTRUCTION Special Standard: ☐ Yes (attach copy) Depth of Completed Well 570 ft.	WATER BEARING ZONES Depth water was first found 180
BORE HOLE SEAL	SWL Date   From   To   Est Flow   SWL (psi)   +   SWL (ft)
Dia From To Material From To Amount Scks/lbs	
16" 99 410 Cement 0 99 130 Ser	
10" 410 370	
calculated for zer	(11) WELL LOG Ground Elevation
How was seal placed: Method ☐ A ☐ B	Material From To
Backfill placed fromft. toft. Material	701 SOIL 0 02
Filter pack from ft. to ft. Material Size	13800 N Clay 30 195
Explosives used:  Yes TypeAmount	Red Luci Rack 195 225
(6) CASING/LINER	Black Laire New 129 295
Csng Linr Dia + From To Gauge Steel Plastic Welded Thrd	Brand Lacu Roak 332 376
X 12 -80 410 ,250 X	13/ach Lora Rack 376 395 120 Light 395 410
	Puniac 410 570
Shoe Inside Outside Other Location of shoe(s)	
Temporary casing Yes Diameter From To	
(7) PERFORATIONS/SCREENS Perforations Method	Date Started 9-9-14 Completed 12-7-14
Screens Type Material	(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
Perf Scrn Csng Linr Dia From To width length slots size	construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
	License Number Date
	Signed JUL 12 2018
	Signed JUL 12 2010
(8) WELL TESTS: Minimum testing time is 1 hour	(bonded) Water Well Constructor Certification
□ Pump □ Bailer ☒ Air □ Flowing Artesian	l accept responsibility for the construction, deepening, alteration, abandonment work performed on this well during the construction dates reported
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	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.
Temperature 50 °F Lab analysis  Yes By	License Number 1659 Date 2-27-16
Temperature   or F Lab analysis    Water quality concerns?   Yes (describe below)	License Number 1657 Date 2-27-16 Signed
From To Description Amount Units	
	Contact Info. (optional)

# STATE OF OREGON WATER SUPPLY WELL REPORT

(ORS 537.765 & OAR 690-205-0210)

**HARN 51991** 

1	
HARN 51991 1171	-/
WELL LABEL #L 1/174	8
START CARD # 206062	
OBICINAL LOCA	

instructions for completing this report are on the last page of this form.	ORIGINAL LOG #
(1) LANDOWNER First Name Time Last Name PUCKETT	(9) LOCATION OF WELL (legal description)
ompany Last Name PUCK T	County HarenT Twp 23 Nor S Range 26 E or W W.N
11 110 1304	Sec 12 1/4 of the 1/4 Tax Lot 2100
City ChrisThus villy State on Zip 97641	Tax Map Number Lot
(2) TYPE OF WORK New Conversion Deepening	Tax Map Number         Lot           Lat         °         '         " or          DMS or DI           Long         °         '         " or          DMS or DI
☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a)	Long ° '" or DMS or DE
	Street Address of Well (or nearest address) Millor Count Ad
(2a) PRE-ALTERATION: Well Depth ft. Seal Material	Railer
	1601
Casing Type:	(10) STATIC WATER LEVEL
Casing Gauge Casing Diameter	Date   SWL(psi)   +   SWL (ft)
O PRIVILLE MARKET MARKE	Existing Well/Pre-Alteration /5 \Lambda
(3) DRILL METHOD Rotary Air Rotary Mud Auger	Completed Well 4- 1/-3
☐ Cable ☐ Cable Mud ☐ Reverse Rotary ☐ Other	Flowing Artesian? Yes Dry Hole? Yes
(4) PROPOSED USE Domestic Irrigation Community	WATER BEARING ZONES Depth water was first found 2 45
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection	
☐ Thermal ☐ Other	SWL Date   From   To   Est Flow   SWL (psi)   + SWL (ft)   / 52   245   620   5000   152
(5) BORE HOLE CONSTRUCTION	132 212 200 172
Depth of Completed Well 620 ft. Special Standard: Yes (attach copy)	
BORE HOLE SEAL	
Dia From To Material From To Amount Scks/lb	
20" 0 230 Cemer 0 230 100 SEAS	
	Material From To
	Glay Grand Brown 2 270
How was seal placed: Method □ A □ B ☑ C □ D □ E	Gray Blasalt 120 245 Bed Cidek his 145
Other	thed lider us 245 260
Backfill placed fromft. toft. Material	Primeruts 260 120
ilter pack fromft. toft. MaterialSize	
	- CAMBD
(5a) ABANDONMENT USING UNHYDRATED BENTONITE:	RECEIVED BY OWRD ECEIVED BY OWRD
Calculated Amount Proposed to be Used:sacks/lbs	HEGEINED BY OMUDIC
Actual Amount Used:sacks/lbs	
	OCT 1 0 2013
(6) CASING/LINER	
Csng Linr Dia + From To Gauge Steel Plastic Welded Thrd	SALEM, OR
X 16" + 1 227 .250 X	SALEM, OR
	11 11 13
	Date Started 4- 17- Completed L/- /5-1)
Shoe Inside Outside Other Location of shoe(s)	(unbonded) Water Well Constructor Certification
Temporary casing Yes Diameter From To	I certify that the work I performed on the construction, deepening, alteration, o
Temporary casing Tes Diameter	abandonment of this well is in compliance with Oregon water supply well
(7) PERFORATIONS/SCREENS	construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
Perforations Method	
Screens · Type Material	License Number Date
Screen   slot   Slot   # of   pipe	Signed
Perf Scrn Csng Linr Dia From To width length slots size	(bonded) Water Well Constructor Certification
NOVE	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.
(8) WELL TESTS: Minimum testing time is 1 hour	
Pump Bailer Air Flowing Artesian	License Number /650/ Date /U - 1. (3
Yield gal/min   Drawdown   Drill stem/Pump depth   Duration (hr)	1 10 0
5000 Fg. 1 8 hr	Signed
.emperature 53°° F Lab analysis  Yes By	Contact Info. (optional)  RECEIVED
Water quality concerns? Yes (describe below) TDS ppm	NEOLIVED
From To Description Amount Units	1 0 0040
, and an office	JUL 1 2 2018

## **HARN 52118**

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

HARN 52118 WELL LABEL #L 115909

START CARD# 209716

Instructions for completing this report are on the last page of this form.		
(1) LAND OWNER First Name Tim Last Name Pucher	(9) LOCATION OF WELL (legal description)	
Company	County Harney Twp 23 Nor S Range 26 E or W W.M.	
Company Address Po Box 255 City Chast Mas Valley State OR Zip 97641	Sec 12 Se 1/4 of the NW 1/4 Tax Lot 2100	
City Chile State OL Zip 9 769!	Tax Map Number	
(2) TYPE OF WORK New Well Deepening Conversion	Long or DMS or DD	
Alteration (repair/recondition)	,	
(3) DRILL METHOD	Street Address of Well (or nearest address) Millar CONYL	
Rotary Air Rotary Mud Cable Auger Cable Mud	10010	
Reverse Rotary Other	(10) STATIC WATER LEVEL	
(4) PROPOSED USE Domestic Irrigation Community	Date SWL(psi) + SWL (ft)	
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection	Existing Well/Predeepening  Completed Well  5-15-19  152	
Thermal Other	Flowing Artesian? Yes Dry Hole? Yes	
(5) BORE HOLE CONSTRUCTION Special Standard: Tyes (attach copy)	WATER BEARING ZONES Depth water was first found 250	
Depth of Completed Well 520 ft.	SWL Date   From   To   Est Flow   SWL (psi)   + SWL (ft)	
BORE HOLE SEAL	5-15-14 250 300 800 90 152	
Dia From To Material From To Amount Scks/lbs	190 520 20091 152	
20° 0 178 Cemont 0 178 100 50		
124 250 300		
10" 3W 520	(11) WELL LOG Ground Elevation	
How was seal placed: Method A B C D E	Material From To	
Other	Clay Brown galil 0 170	
Backfill placed fromft. toft. Material	Lava Rack 170 180	
Filter pack fromft. toft. MaterialSize Explosives used: Yes Amount	Red Cider w/3 280 300 Brown Love Reck 300 480	
Explosives used. Tes Type Amount	ned 15 100 520	
(6) CASING/LINER		
Csng Linr Dia + From To Gauge Steel Plastic Welded Thrd	RECEIVED BY OWED BY OWED	
X 12" - 100 300 . 180 X	NECEIVED BY OWNED	
	DEC 4 #	
	OCT 2 0 2014 DEC 1 7 2014	
Shoe 🔲 Inside 🔲 Outside 🔲 Other Location of shoe(s)	SALEM, OR SALEM, OR	
Temporary casing Yes Diameter From To		
(7) PERFORATIONS/SCREENS	Date Started 4-30-14 Completed 5-15-14	
Perforations Method	(unbonded) Water Well Constructor Certification	
Screens TypeMaterial (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	
Perf Scrn Csng Linr Dia From To width length slots size	the best of my knowledge and belief.	
X X 124 780 300 314 500	D	
	License Number Date	
	Signed	
(O) WELL TESTS. Minimum testing time in I have	(bonded) Water Well Constructor Certification	
(8) WELL TESTS: Minimum testing time is 1 hour  ☐ Pump ☐ Bailer	I accept responsibility for the construction, deepening, alteration, or	
Yield gal/min, Drawdown Drill stem/Pump depth Duration (hr)	abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water	
2000 9-1 520 hr	supply well construction standards. This report is true to the best of my knowledge	
and belief.		
Temperature 53°°F Lab analysis  Yes By	License Number 16 5 9 Date 9 10 - 19	
Water quality concerns? Yes (describe below)	License Number 1684 Date 910-19 Signed TRECEIVED	
From To Description Amount Units		
	Contact Info. (optional)  JUL 1 2 2018	
	002 2 2 2 2010	

#### STATE OF OREGON WATER SUPPLY WELL REPORT

### **HARN 51992**

HARN 51992 WELL LABEL # L

Instructions for completing this report are on the last page of this form.	ORIGINAL LOG#	
First Name I'm Last Name PhoneTT	(9) LOCATION OF WELL (legal description)	
ompany Pu But 255	County Harry Twp 23 Nors Range 26 E or W W.M.	
City Christimus belly State Ql Zip 47641	Sec 12 5E 1/4 of the 5E 1/4 Tax Lot 2100	
City Thirty Duty State 24 Zip 470 City	Tax Map Number Lot	
(2) TYPE OF WORK New Conversion Deepening	Lat         _ ' _ ' or DMS or DD           Long         _ ' or _ DMS or DD	
Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a)		
(2a) PRE-ALTERATION: Well Depth ft.	Street Address of Well (or nearest address) Miller Carlyon K	
Seal Material	NIAl-Y	
Casing Type:   ✓ Steel □ Plastic □ Other	(10) CTATIC WATER I EVEL	
Casing Gauge , 150 Casing Diameter /21	(10) STATIC WATER LEVEL	
	Existing Well/Pre-Alteration	
(3) DRILL METHOD ★ Rotary Air	Completed Well 625 // 1/0	
☐ Cable ☐ Cable Mud ☐ Reverse Rotary ☐ Other	Flowing Artesian? Yes Dry Hole? Yes	
	WATER BEARING ZONES Depth water was first found	
(4) PROPOSED USE Domestic Trrigation Community		
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection	SWL Date From To Est Flow SWL (psi) + SWL (ft)	
Thermal Other		
(5) BORE HOLE CONSTRUCTION		
Depth of Completed Well 476 ft. Special Standard: Yes (attach copy)		
BORE HOLE SEAL		
Dia From To Material From To Amount Scks/lbs		
	(11) WELL LOG Ground Elevation RECEIVED BY OWR	
	Material From To	
	JAN 1 8 2017	
How was seal placed: Method A B C D E	the the bas	
Other	LOVEN IN TO SALEM, OR	
Backfill placed fromft. toft. Material	Cavar In To SALEM, OR	
'ilter pack from ft. to ft. Material Size	16/2	
(5a) ABANDONMENT USING UNHYDRATED BENTONITE:	2 7 PECEIVED BY OWN	
Calculated Amount Proposed to be Used:sacks/lbs	D. T Inex 100 BY OVE	
Actual Amount Used:sacks/lbs		
	1 8 000 gar ( m. v OCT 10 2013	
(6) CASING/LINER	18000	
Csng Linr Dia + From To Gauge Steel Plastic Welded Thrd		
X 12" - 90 280 1250 Y K	SALEM, OR	
x 10" - 260 470,250 X ×	1 2 12 1 25 13	
	Date Started 6- 13- 13 Completed 6- 25- 13	
	(unbonded) Water Well Constructor Certification	
Shoe Inside Outside Other Location of shoe(s)	I certify that the work I performed on the construction, deepening, alteration, or	
Temporary casing	abandonment of this well is in compliance WNO region water supply well construction standards with his ased and information reported above are true to	
(7) PERFORATIONS/SCREENS	construction standards. Tail and information reported above are true to the best of my knowledge and belief.	
Perforations Method		
Screens Type Material	License Number NOV 18 2013 <sub>Date</sub>	
	1101	
Screen   Screen/ Tele/   Slot   # of   pipe	Signed	
Perf Scrn Csng Linr Dia From To width length slots size	(bonded) Water Well Constructor Certification	
3120	l 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	
(8) WELL TESTS: Minimum testing time is 1 hour	and belief.  License Number 1654 Date 936/3	
✓ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian	License Number 1654 Date 9.36.13	
Yield gal/min   Drawdown   Drill stem/Pump depth   Duration (hr)	41	
1800 161 Uhr	Signed	
emperature SS °F Lab analysis  Yes By	Contact Info. (optional)	
Water quality concerns?  Yes (describe below) TDSppm  From To Description Amount Units	JUL <b>1 2</b> 2018	
To Description Amount Units	552 2 3 6010	
	Olumn	

#### **HARN 51992**



# Application for Well ID Number

RECEIVED

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

.

		DEC 01 2016
I. OWNER INFORMATION		WATER RESOURCES DEPT
Current Owner Name (please print):		SALEM, OREGON
Mailing Address: SINGHOSE LAND AND	CATTLE COMPANY, LLC	
City, State, Zip: PO BOX 55 RILEY, OR 9		
Mail Well ID Tag to: SAME AS ABOVE	In Care Of (C/O)	3
Name & Address: JOHN SHORT / WATER	R RIGHT SERVICES, LLC PO BO	X 1830
City, State, Zip: BEND, OR 97709		
		3
II. WELL LOCATION INFORMATION (Please Township: 23S (North / South) Range: 2  Tax Lot (usually last 3-5 numbers of Tax Map #):  GPS Coordinates: 43 35' 12.57" N 119 32'	26E (East / West) Section: 12 County	HARNEY
Street Address of Well, City:		
If the property had a different street address in the		
Use of Well (domestic, irrigation, commercial, ind Date Well Constructed (or property built):	19-12 Total Well Depth: 470'  ABRAHAM PUCKETT Well Log  ** NEED REPLACEMENT ** TA	# (if known): HARN 51867 AG NUMBER L-105484 LOST!
Send application to: Oregon Water Resources Departs Applications are processed in the order they are received	ment 725 Summer St NE, Suite A, Salem, Oreg ved, and Well ID Numbers are mailed within 4	gon 97301; or fax to (503) 986-0902. -5 business days.
For Official Use	Only by the Oregon Water Resources Depar	tment:
Received Date:	Well Log Number:	Well Identification #:
12-1-16	HARN 51867 original	L-125022
	HARN 51992 conversion	
Last Update: 8/1/16	Well I.D. Number/2	RECEIVED wcc
		JUL 1 2 2018