

# Application for Permanent Water Right Transfer

Part 1 of 5 - Minimum Requirements Checklist

# This transfer application <u>will be returned</u> 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.

Chook all its	ems included with this application. (N/A = Not Applicable)
	Part 1 – Completed Minimum Requirements Checklist.
$\boxtimes$	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> <u>1</u> List them here: <u>C-90309</u> 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 □ 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)
CEIVED	WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):  Application fee not enclosed/insufficient  Land Use Form not enclosed or incomplete  Map not included or incomplete
3 1 2018	Additional signature(s) required Part is incomplete  Other/Explanation Staff: 503-986-0 Date: /
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#### Your transfer application will be returned if any of the map requirements listed below are not met.

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply. Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of  $\bowtie$ 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 x 30 inch maps, one extra copy is required.  $\boxtimes$ A north arrow, a legend, and scale.  $\boxtimes$ The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.  $\boxtimes$ Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.  $\boxtimes$ Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.  $\boxtimes$ Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads. X 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.  $\boxtimes$ 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.  $\boxtimes$ If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example  $-42.53764^{\circ}$ ).

	FEE WORKSHEET for PERMANENT TRANSFER   Part 3 of 5	- Fee	Workshee
1	Base Fee (includes one type of change to one water right for up to 1 cts)	1	\$1,000
	Types of change proposed:		
	Place of Use		
	Character of Use		
	Point of Diversion/Appropriation		
	Number of above boxes checked = $\frac{3(2a)}{}$		
	Subtract 1 from the number in line $2a = 2(2b)$ If only one change, this will be 0		
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » » »	2	\$1600
	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 \$450 and enter » » » » » » » » » » » » » »	3	00
	Do you propose to add or change a well, or change from a surface water POD		
	to a well?		
١.	No: enter 0 » » » » » » » » » » » » » » » » » »		***
4		4	\$350
	Do you propose to change the place of use or character of use?		
	No: enter 0 on line 5 » » » » » » » » » » » » » » » » »		
	Yes: enter the cfs for the portions of the rights to be transferred (see		
	example below*): $\frac{2.04 (5a)}{2.04 (5a)}$		
	Subtract 1.0 from the number in 5a above: 1.04 (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: 2.00 (5c)	_	Φ.co.o
5	and multiply 5c by \$300, then enter on line 5 » » » » » » » »	5	\$600
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$3550
	Is this transfer:		
i	necessary to complete a project funded by the Oregon Watershed	lan.	
	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?	i	
7	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »	7	_
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » Transfer Fee:	8	\$3550

- 1. For irrigation calculate cfs for each water right involved as follows:
  - a. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs  $\div$ 100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac= 0.56 cfs).
  - b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of water rights on all the land included in the transfer; however do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land. The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

	FEE WORKSHEET for SUBSTITUTION		
1	Base Fee (includes change to one well)	1	\$725.00
	Number of wells included in substitution (2a)		
	Subtract 1 from the number in 3a above:(2b) If only one well this will be 0		
2	Multiply line 2b by \$350 and enter » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » Fee for Substitution E	CBIV	ED

<sup>\*</sup>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:

# Part 4 of 5 – Applicant Information and Signature

## **Applicant Information**

APPLICANT/BUSINESS	NAME	PHONE NO.	ADDITIONAL CONTACT NO.							
Andy Root/Rattlesn										
ADDRESS	FAX NO.									
524 Hwy 20 N/2972										
CITY	STATE	ZIP	E-MAIL							
Hines	OR	97738	sdavis@acwinc.ne	et						
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE										
DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.										

Hines	OR	97738	sdavis@acwinc.net		
BY PROVIDING AN E-MAIL A					
DEPARTMENT ELECTRONIC	ALLY. CO	PIES OF THE FINA	L ORDER DOCUMEN	TS WILL A	ALSO BE MAILED.
Agent Information – The ag	ent is auth	norized to represent	the applicant in all	matters rel	ating to this application
AGENT/BUSINESS NAME Scott D. Montgomery			PHONE NO. <b>541-548-5833</b>	ADDITIO 541-420	ONAL CONTACT NO. 0-0401
ADDRESS PO Box 767				FAX NO	
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.con	1	
BY PROVIDING AN E-MAIL AS DEPARTMENT ELECTRONICA			TO RECEIVE ALL C	ORRESPON	
Explain in your own words	what you	propose to accor	nplish with this tra	nsfer appl	lication, and why:
Change the character of use miles south.	from Ind	ustrial to irrigatio	on to accommodate	existing	irrigated fields 6
If you need additional space, cont	inue on a s	eparate piece of pape	er and attach to the app	lication as '	"Attachment 1".
Check this box if this pr Reinvestment Act. (Fede			•	ican Reco	very and
<ul> <li>By signing this application, I Department approval of the transauthorized to pursue the transauthorized to pursue the transauthorized to pursue the transauthorized is a municipality or a laffirm the applicant is an encondemnation the property to supporting documentation.</li> </ul>	ransfer, I was fer as identicipality as predecessed ity with the	that, upon receipt of ill be required to pro tified in OAR 690-38 s defined in ORS 540 or; <b>OR</b> e authority to conden	The draft preliminary vide landownership in 80-4010(5); <b>OR</b> 0.510(3)(b) and that the property and is acq	formation a e right is in uiring by	nd evidence that I am
I understand that prior to Depa the Department for publication right is located, once per week suggest publishing the notice in	of a notic	e in a newspaper vonsecutive weeks.	vith general circulati If more than one qu	on in the a	rea where the water
I (we) affirm that the inform	ation cont	ained in this appl	ication is true and	accurate.	
Applicant signature		Scott D. Montg	omery, Agent	Date	
Applicant signature		rime (and 1 ft	с п аррисаоте)	Date	RECEIVED
Applicant signature		Print Name (and Tit	le if applicable)	Date	MAY <b>3 1 2018</b>



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and/or e-mail addre	d? ⊠ Ye esses if diffe m all lande	es	If NO, i he applica	nclude signatures og ant's) or attach affic	f all deed lavits of	nthereot, proposed for ded landowners (and mailing consent (and mailing and/or right(s) were conveyed.Chec
The applicant is resp continue to be sent t			etion of	change(s). Notic	ces and	correspondence should
						sed change(s) after the sent to this landowner.
Both the receiving la Copies of notices an						npletion of change(s). r and the applicant.
At this time, are the lands in	n this tran	sfer appl	ication i	n the process of l	being s	old? 🗌 Yes 🔀 No
If YES, and you know vinformation table below assignment will have to	. If you	do not kn	ow who			
If a property sells, the counless a sale agreement <a href="http://www.oregon.gov/">http://www.oregon.gov/</a>	or other	document	states o	therwise. For m	ore info	
RECEIVING LANDOWNER NAME NA	l			PHONE NO.	ĄĮ	ODITIONAL CONTACT NO.
ADDRESS					FA	AX NO.
CITY	STATE	ZIP		. E-MAIL		
Describe any special owners  Check here if any of the an irrigation or other wa	water rig	thts propo	sed for			
IRRIGATION DISTRICT NAME			ADDRES	S		
NA CITY			STATE		Z	IP
Check here if water for a for stored water with a f					vice ag	reement or other contrac
ENTITY NAME NA			ADDRES	S		
CITY			STATE		Z	IP
To meet State Land Use Corporation, or tribal govern		_	-		-	<u>.</u>
ENTITY NAME			ADDRES	S .		
Harney County CITY			STATE	_	ZI	IP
			1		ı	

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#### **CERTIFICATE # 90309**

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

System capacity: 3.23 for industrial use 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 Well #2 & conveyed by closed conduit into a geothermal heating system for the large fabrication building.

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 2	Authorized	HARN	-	· · · · · · · · · · · · · · · · · · ·	<del> </del>	·					2544' north & 907' west
Monaco	☐ Proposed	50176	23	S	30	E	26	SE	NE	105	from the SE cor, Sec 26
Well 10	☐ Authorized ☑ Proposed	HARN 51765	26	s	30	E	3	NW	NW	800	6310' south & 415' east from the NW cor, Sec 34
Well 11	☐ Authorized ☐ Proposed	HARN 51760	26	s	30	E	3	NW	NW	800	6340' south & 330' east from the NW cor, Sec 34
Well 13	☐ Authorized ☐ Proposed	HARN 51445	26	S	30	E	4	NE	NW	900	6415' south & 2745' west from the NE cor, Sec 33
Well 14	☐ Authorized ☐ Proposed	HARN 51871	25	S	30	E	33	SE	SE	3600	4314' south & 870' west from the NE cor, Sec 33
Well 15	☐ Authorized ☐ Proposed	HARN 51970	25	s	30	E	33	SE	SE <sub>.</sub>	3600	4314' south & 920' west from the NE cor, Sec 33
Well 16	☐ Authorized ☐ Proposed	HARN 52121	25	s	30	E	29	NE	SE	2600	1200' north & 900' west from the South 1/16 <sup>th</sup> cor, Sec 28 & Sec 29
Well 17	☐ Authorized ☐ Proposed	HARN 52154	26	S	30	E	3	NW	NW	800	6300' south & 440' east from NW cor, Sec 34
Well 18	☐ Authorized ☐ Proposed	HARN 52170	25	s	30	E	29	NE	SE	2600	1200' north & 850' west from the South 1/16th cor, Sec 28 & Sec 29
Well 21	☐ Authorized ☐ Proposed	HARN 52590	25	s	30	E	29	NE	SE	2600	400' north & 800' west a from the South 1/16th cor, Sec 28 & Sec 29
Well 22	☐ Authorized ☐ Proposed	HARN 52591	25	s	30	E	29	NE	SE	2600	1300' north & 850' west from the South 1/16 <sup>th</sup> cor, Sec 28 & Sec 29
Well 23	☐ Authorized ☐ Proposed	HARN 52674	25	s	30	E	33	NE	SW	2500	2690' south & 2870' west from the NE cor, Sec 33

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Check a	ill type(s) of change(s) proposed below (c	hange	e "CODES" are provided in parentneses):							
$\boxtimes$	Place of Use (POU)		Supplemental Use to Primary Use (S to P)							
	Character of Use (USE)	$\boxtimes$	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	ces Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.									
⊠ No	Complete all of Table 2 to describe the po	rtion (	of the water right to be changed.							

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List the change proposed for the acreage in each ½½. 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.

Twp				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			The	e lis	ting	as it v	would	d appea	ar AF re ma	ΓER PI	on" lands) ROPOSED	CHANGE	S.	
	Rr	ng	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	γp	Rn	ıg	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC		New Type of USE	POD(s)/ POA(s) to be used (from Table	Priority Date
23 S	30	E	26	NE	SE	105		3.23 cfs	ID	#2 Monaco	1997		23	s	30	E	26	NE	SE	105		1.19 cfs	ID	#2 Monaco	1997
												POU/USE/ POA/APOA	25	s	30	E	32	SE	sw	3500		32.3	IR	10,11,14- 18,21-23	1997
										·		POU/USE/ POA/APOA	25	s	30	E	32	SW	SE	3500		2.8	IR	10,11,14- 18,21-23	1997
												POU/USE/ POA/APOA	26	s	30	E	5	NE	NE	1300		17.2	IR	10,11,14- 18,21-23	1997
												POU/USE/- POA/APOA	26	s	30	E	5	NW	NE	1300		34.7	IR	10,11,14- 18,21-23	1997
												POU/USE/ POA/APOA	26	s	30	E	5	SW	NE	1300		36.7	IR	10,11,14- 18,21-23	1997
										·		POU/USE/ POA/APOA	26	s	30	E	5	SE	NE	1300		19.9	IR	10,11,14- 18,21-23	1997
	,											POU/USE/ POA/APOA	26	s	30	E	5	NE	NW	1300		19.3	IR	10,11,14- 18,21-23	1997

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## Certificate # 90309

#### For Place of Use or Character of Use Changes

wa	ter registratio	certificate, wons associated or the "to" la	i			er right cer	tificates, w	ater use pe	ermits or gro	ound
pe	rmit, or grou	nd water regi	stration i	numbers:		•				
a p to a	rimary right	S 540.510, a proposed for registration	transfer	must be in	ncluded i	n the transf	er or be car	ncelled. A	ny change	)
For S	Substitution	(ground wate irrigation)	er supple	mental irr	igation w	ill be subst	ituted for s	urface wat	er primary	
		upplemental l rimary Certif			te #	<u>.</u>				
For a	change fro	m Suppleme	ntal Irri	gation Us	se to Prin	nary Irriga	ation Use			
Ide	ntify the prin	nary certifica	te to be c	ancelled.	Certifica	te #				
For a	change in p	point(s) of ap	propria	tion (well	(s)) or ac	lditional p	oint(s) of a	ppropria	tion:	
	with the co <b>Tip</b> : You	) are attached orresponding may search fo wrd.state.or.	well(s) in or well lo	n Table 1 gs on the	above an Departme	d on the ace	companyin			ssociated
AŅ	D/OR									
	have a wel requested i	he construction log. For <i>pr</i> information en logist, or cer en Table 3.	<i>oposed</i> ห element ii	<i>vells not ye</i> n the table	et constri c. The De	<i>icted or but</i> partment re	<i>ilt</i> , provide commends	"a best est you const	imate" for each	each d well
Any we accomp applica well(s)	ell(s) in this leanying applition until it is will access the	on of Point(s isting must b cation map. s received. The same sour om approving	e clearly Failure to the inform ce aquife	tied to control provide nation is read at the au	rrespondi the inforn necessary uthorized	nation will for the dep point(s) of	delay the partment to appropriat	orocessing assess who ion (POA)	of your tranether the pro	nsfer oposed
Proposed of Authorized POA Name or Number		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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See well logs

han full rate of

STATE OF OREGON WATER SUPPLY WELL REPORT HARN 52674 NEXT TO HIZ

Page 1 of 1 **WELL I.D. LABEL#** L 126386 START CARD# 1035610

(as required by ORS 537.765 & OAR 690-205-0210)	9/10/	0/2017 ORIGINAL LOG #
(1) LAND OWNER Owner Well I.D.		
First Name ANDY Last Name ROOT		(9) LOCATION OF WELL (legal description)
Company ACW		County HARNEY Twp 25.00 S N/S Range 30.00 E E/W
Address P.O. BOX 3  City BURNS State OR Zip 97720		Sec 33 SW 1/4 of the NE 1/4 Tax Lot 2600
	ersion	Tax Map Number         Lot           Lat
(2) TYPE OF WORK New Well Deepening Convo		Lat° ' ' or DMS or D
(2a) PRE-ALTERATION	mpiece say	- I Long OI DIVIS OF L
Dia + From To Gauge Stl Plstc Wld Thrd		Street address of well Nearest address
Casing:		29062 WEAVER SPRINGS LN. BURNS OR. 97720
Material From To Amt sacks/lbs Seal:		
(3) DRILL METHOD	<del></del>	(10) STATIC WATER LEVEL
Rotary Air Rotary Mud Cable Auger Cable Mud		Date SWL(psi) + SWL(ft)
Reverse Rotary Other		Existing Well / Pre-Alteration Completed Well 8/30/2017 142
(4) PROPOSED USE Domestic XIrrigation Community		Flowing Artesian? Dry Hole?
Industrial/ Commercial Livestock Dewatering		
Thermal Injection Other		
<u> </u>	<del></del> .	-
(5) BORE HOLE CONSTRUCTION Special Standard (A	Attach copy)	y) 8/30/2017 142 400 1000 142
Depth of Completed Well 400.00 ft.  BORE HOLE SEAL	sacks/	.,
	mt lbs	
	60 S	] <del>                                    </del>
12 190 400 Calculated 5	56	<b> </b>
Calculated		(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D	E	Material From To
XOther POURED DRY		sandy soil 0 3
Backfill placed from 35 ft. to 35 ft. Material CEMENTING	G BASK	brown sand and cinders 3 80
Filter pack from ft. to ft. Material Size		black cinders 80 130
Explosives used: Yes Type Amount		black cinders   80   130   1
(5a) ABANDONMENT USING UNHYDRATED BENTONIT	TE.	broken basalt with cinders   130   360
Proposed Amount Actual Amount	L	Traviared outsit
(6) CASING/LINER		
Casing Liner Dia + From To Gauge Stl Plstc V	Wld Thrd	ı II <del></del>
	$\boxtimes$	
	_	RECEIVED
	$\dashv$ $H$	INCOLI VE
	$\dashv$ $\dashv$	10040
Shoe Inside Outside Other Location of shoe(s)		MAY 3 1 2018
Temp casing Yes Dia From + To		
(7) PERFORATIONS/SCREENS	<del></del>	OWRD
Perforations Method Factory		OVVIID
Screens Type Material		Date Started 8/17/2017 Completed 8/30/2017
Perf/ Casing/ Screen Scrn/slot Slot # of	Tele/	
Screen Liner         Dia         From         To         width         length         slots           Perf         Casing         16         130         190         .125         3         870	pipe size	I certify that the work I performed on the construction, deepening, alteration,
1972   040115   170   172   3   070		abandonment of this well is in compliance with Oregon water supply w
		construction standards. Materials used and information reported above are true
	-	the best of my knowledge and belief.
AN ALIAN A GENERAL AND A SECOND A SECOND AND A SECOND A SECOND AND A SECOND ASSECT AND A SECOND A SECOND ASSECT AND A SECOND ASSECT ASSECT AND A SECOND ASSECT ASSECTI		License Number Date
(8) WELL TESTS: Minimum testing time is 1 hour		Signed
Pump Bailer • Air Flowing Ar		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr	<u>r)                                    </u>	(bonded) Water Well Constructor Certification
1000 300 3	┥.	I accept responsibility for the construction, deepening, alteration, or abandonn work performed on this well during the construction dates reported above. All v
		performed during this time is in compliance with Oregon water supply
Temperature 61 °F Lab analysis Yes By		construction standards. This report is true to the best of my knowledge and belie
Water quality concerns? Yes (describe below) TDS amount 356	ppm	License Number 1355 Date 9/10/2017
From To Description Amount	Units	
<del>                                     </del>	<b>   </b>	Signed ARTHUR L FRY (E-filed)
		Contact Info (optional)

STATE OF OREGON WATER SUPPLY WELL REPORT HARN 52591

MORTH OF HICE HIS WELL I.D. LABEL# L 122964 START CARD # 1032027

(as required by ORS 537.765 & OAR 690-205-0210)	10/4/2016	ORIGINAL LOG#			
(1) LAND OWNER Owner Well I.D.					
First Name ANDY Last Name ROOT	- (9) LO	(9) LOCATION OF WELL (legal description)			
Company ACW	1 ' '	HARNEY Twp 25.00 S N		E/W WM	
Address P.O BOX 326		SE 1/4 of the SE			
City BURNS State OR Zip 97720					
(2) TYPE OF WORK New Well Deepening Conversion	n Lat	Number or	DMS	S or DD	
Alteration (complete 2a & 10)   Abandonment(complete 2a)   PRE-ALTERATION	Long	or "or	DMS	S or DD	
Dia + From To Gauge Stl Plstc Wld Thrd		Street address of well Ne			
Casing:	29062 V	VEAVER SPRINGS LN. BURNS OR	97720		
Material From To Amt sacks/lbs	L				
Seal:	(10) \$7	TATIC WATER LEVEL			
Rotary Air Rotary Mud Cable Auger Cable Mud	(10)51	Date	SWL(psi) + SWL	.(ft)	
Reverse Rotary Other	Exis	sting Well / Pre-Alteration			
• — — — — — — — — — — — — — — — — — — —	Com	ipleted Well 10/3/2016		6	
(4) PROPOSED USE Domestic Irrigation Community		Flowing Artesian?	<b>—</b>		
Industrial/Commericial Livestock Dewatering	WATER	BEARING ZONES Depth wa	iter was first found 155.00		
Thermal Injection Other	SWLI	Date From To Est	Flow SWL(psi) + SW	L(ft)	
(5) BORE HOLE CONSTRUCTION Special Standard (Attack	h copy) 10/3/2	2016   155   330   2	2500	116	
Depth of Completed Well 330.00 ft.	107			-	
	sacks/				
Dia From To Material From To Amt	lbs				
22         0         249         Bentonite Chips         0         48         75           12         249         330         Calculated         74	S				
12 249 330 Culculated 74	<u> </u>				
Calculated	(11) W	ELL LOG Ground Elevatio	n		
How was seal placed: Method A B C D E		Material	From To		
X Other POURED DRY	sandy so		0 2		
Backfill placed from 48 ft. to 49 ft. Material CEMENTING BA	ASK brown sa	and and cinders	38 15		
Filter pack from ft. to ft. Material Size		nder stone ay and fractured cinder stone	155 33		
Explosives used: Yes Type Amount		ay and nactared ender stone			
(5a) ABANDONMENT USING UNHYDRATED BENTONITE				,	
Proposed Amount Actual Amount					
(6) CASING/LINER					
Casing Liner Dia + From To Gauge Stl Plstc Wld	Thrd				
<u> </u>			GEIVED		
	$H \parallel$	RE	ا ا		
	$H \Vdash$		√ 3   2018   <u> </u>		
	$\sqcap \Vdash$	'Alvi	<del>√ 3 / 50/8</del>		
Shoe Inside Outside Other Location of shoe(s)					
Temp casing Yes Dia From To			OWRD		
(7) PERFORATIONS/SCREENS	_		OABLOOM		
Perforations Method					
Screens Type Material		arted <u>9/1/2016</u> Comp	pleted 10/3/2016		
Perf/ Casing/ Screen Scm/slot Slot # of Te Screen Liner Dia From To width length slots pipe	ele/ e size (unbond	led) Water Well Constructor Certifi	cation		
Server Biller Bill 110m 10 Width length 310ts bibt	, ,	that the work I performed on the co		ation, or	
	abandon	ment of this well is in compliance	e with Oregon water supp	ply well	
		tion standards. Materials used and in	formation reported above are	e true to	
		of my knowledge and belief.			
(O) WELL TESTS AT 1	License	Number 1739 Da	ite 10/4/2016		
(8) WELL TESTS: Minimum testing time is 1 hour	Signed	CHARLES M FRY (E-filed)			
Pump Bailer Air Flowing Artesia		Water Well Constructor Certificati			
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 1500 200 3	¬ ' '				
		responsibility for the construction, de formed on this well during the constru-			
	performe	d during this time is in compliance	e with Oregon water sup	oply well	
Temperature 65 °F Lab analysis Yes By		ion standards. This report is true to the			
Water quality concerns? Yes (describe below) TDS amount	License 1	Number 1355 Da	te 10/4/2016		
From To Description Amount Unit	ts			<del></del>	
		ARTHUR L FRY (E-filed) nfo (optional)			
	Contact I	то (орионат)			

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

HARN 52590

(as required by ORS 537.765 & OAR 690-205-0210)	10/4/2016	ORIGINAL LOG #			
(1) LAND OWNER Owner Well I.D.					
First Name ANDY Last Name ROOT	- (9) LO	(9) LOCATION OF WELL (legal description)			
Company ACW	, , ,	County HARNEY Twp 25.00 S N/S Range 30.00 E E/W WM			
Address P.O BOX 326		SE 1/4 of the SE 1/4			
City BURNS State OR Zip 97720  (2) TYPE OF WORK New Well Deepening Conversion	Tax Map	Number	Lot		
	Lat	Number " or	DMS or DD		
Alteration (complete 2a & 10)   Abandonment(complete 2a)   PRE-ALTERATION	Long	o _ ' " or	DMS or DD		
Dia + From To Gauge Stl Plstc Wld Thrd		Street address of well Nearest			
Casing:	29062 V	29062 WEAVER SPRINGS LN. BURNS OR. 97720			
Material From To Amt sacks/lbs Seal:	<u> </u>				
(3) DRILL METHOD	(10) ST	TATIC WATER LEVEL			
Rotary Air Rotary Mud Cable Auger Cable Mud	` `	Date	SWL(psi) + SWL(ft)		
Reverse Rotary Other		sting Well / Pre-Alteration			
	—   Lon	ripleted Well 10/4/2016 Flowing Artesian? I	Dry Hole?		
(4) PROPOSED USE Domestic Irrigation Community			• 🗀		
Industrial/ Commericial Livestock Dewatering Thermal Injection Other		WATER BEARING ZONES Depth water was first found 140.00			
	SWL1	Date From To Est Flow	w SWL(psi) + SWL(ft)		
(5) BORE HOLE CONSTRUCTION Special Standard (Attack	h copy) 10/2/2	2016 140 318 1000	111		
Depth of Completed Well 340.00 ft.	, ,				
BORE HOLE SEAL Dia From To Material From To Amt	sacks/ lbs		<del>                                     </del>		
26 0 38 Bentonite Chips 0 38 82	s -		<del>                                      </del>		
20 38 311 Calculated 78					
12 311 340 Calculated	$\overline{(11)}$ W	(11) WELL LOG Ground Elevation			
How was seal placed: Method A B C D E	, (,	Ground Elevation  Material	From To		
XOther POURED DRY	sandy so		0 2		
Backfill placed from ft to ft Material	black cir		2 17		
Filter pack from ft. to ft. Material Size	soft brov	vn cinderstone	17 140		
Explosives used: Yes Type Amount	l order on	black cinderstone with brown sand 140 290			
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	basalt wi	ith grey clay	290 340		
Proposed Amount Actual Amount					
(6) CASING/LINER_	— I				
Casing Liner Dia + From To Gauge Stl Plstc Wld	Thrd		31 2018		
			NEW PARTY		
12 X 3 311 .250 X		REG	-10		
		* * * * * * * * * * * * * * * * * * * *	1 7010		
	H II	k	1 3 2		
Shoe Inside Outside Other Location of shoe(s)	└┤	··	170		
Temp casing Yes Dia From To	_		OMbi		
	_				
(7) PERFORATIONS/SCREENS Perforations Method Factory					
Screens Type Material	Date St	arted8/18/2016 Complete	ed 10/4/2016		
•	ele/	•			
Screen Liner Dia From To width length slots pip Perf Liner 12 211 311 .093 3 1700	·	led) Water Well Constructor Certification that the work I performed on the constru-			
101 Enter 12 211 311 .093 3 1700		ment of this well is in compliance wi			
		tion standards. Materials used and information	ation reported above are true to		
	<b></b>	of my knowledge and belief.			
	License	Number 1739 Date	10/4/2016		
(8) WELL TESTS: Minimum testing time is 1 hour	Signed	CHARLES M FRY (E-filed)			
Pump Bailer • Air Flowing Artesia	in				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	¬ ' '	) Water Well Constructor Certification			
500 500 3 I accept responsibility for the construction, deepening, alteration, or					
	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				
Temperature 65 °F Lab analysis Yes By	The second secon				
Water quality concerns? Yes (describe below) TDS amount From To Description Amount Uni	ts	<u> </u>			
		ARTHUR L FRY (E-filed)			
	Contact 1	Info (optional)			
	<del></del> -				



All Points Engineering and Surveying, Inc.

P.O. Box 767 (CRR) Terrebonne, OR 97760 (541) 548-5833 PH (541) 585-4602 FX Scott@APEandS.com RECEIVED

APR 0 9 2018

OWRD

April 3, 2018

Attn: Arla Heard, Transfer Case Worker Oregon Water Resources Department 725 Summer St. NE, Suite A Salem, OR 97301-1266

SUBJECT: Withdrawal of Chris and Dani Gregg from Transfer Application T-12359 and acceptance of conditions from Rattlesnake Creek Land and Cattle, LLC

Dear Ms. Heard:

As agent for Rattlesnake Creek Land and Cattle, LLC and Chris and Dani Gregg, I have been asked to reply for both in regard to our teleconference with Lisa Jaramillo on March 9th.

Rattlesnake Creek Land and Cattle, LLC is willing to accept the additional conditions recommended by the OWRD Groundwater Section. However, the Gregg's would like to respectively withdraw from the transfer, as they aren't willing to accept the additional conditions. Please advise me as to how we need to move forward to complete this transfer application.

If you have any questions, please don't hesitate to call at 541-548-5833.

Sincerely,

Scott Montgomery

All Points Engineering and Surveying

P.O. Box 767

Terrebonne, OR 97760

scott@apeands.com

PH: 541-548-5833

FAX: 541-585-4602



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