



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

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-13005
 Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(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: ___/___/___

Part 2 of 5 – Permit Amendment Map Checklist

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

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

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- N/A If **more than three** permits are involved, separate maps for each permit.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- 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 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.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water use permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
- N/A If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,160
2	Types of change proposed: <input checked="" type="checkbox"/> Place of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	\$930
3	Number of permits included in Permit Amendment <u>1 (3a)</u> Subtract 1 from the number in 3a: <u>0 (3b)</u> <i>If only one permit this will be 0</i> Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » »	3	0
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input checked="" type="checkbox"/> Yes: enter \$410 »	4	\$410
5	Do you propose to change the place of use? <input type="checkbox"/> No: enter 0 on line 5 » <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the permits to be amended (see example below*): <u>2.67 (5a)</u> Subtract 1.0 from the number in 5a above: <u>1.67 (5b)</u> If 5b is 0, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: <u>2 (5c)</u> and multiply 5c by \$350, then enter on line 5 » » » » » » » » » »	5	\$700
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	
7	Is this permit amendment: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »	7	
8	Subtract line 7 from line 6 » » » » » » » » » » Permit Amendment Fee:	8	\$3,200

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*Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:

- For irrigation calculate cfs for each permit involved as follows:
 - Divide total authorized cfs by total acres in the permit (*for S-12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be changed to get the application cfs (*x 45 ac = 0.56 cfs*).
 - If the water right permit does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (*For S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
- Add cfs for the portions of permits on all the land included in the application; however **do not count cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land.** The fee should be assessed only once for each “on the ground” acre included in the application. (*In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0.*)

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Drost Land Co. LLC		PHONE NO. 806-717-7337	ADDITIONAL CONTACT NO.
ADDRESS 24624 Schaupp Rd.			FAX NO.
CITY Klamath Falls	STATE OR	ZIP 97603	E-MAIL drostland15@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME Hollie Cannon / Water Right Solutions LLC		PHONE NO. 541-821-5848	ADDITIONAL CONTACT NO.
ADDRESS 3246 Hammer St.			FAX NO.
CITY Klamath Falls	STATE OR	ZIP 97603	E-MAIL hcannon@waterrightsolutions.com
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.			

<p>Explain in your own words what you propose to accomplish with this permit amendment; and why: See “Attachment 1”</p> <p>If you need additional space, continue on a separate piece of paper and attach to the application as “Attachment 1”.</p>

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

Is the applicant the permit holder of record? Yes No

If NO, include either:

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

Has the Completion (“C”) Date of the permit(s) in this application expired? Yes No

If YES, this application will not be accepted by the Department.

If NO, what are the completion dates of the permit(s)? October 1, 2020

- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing of this Permit Amendment Application if the completion date of the permit expires within 6 months of the date of filing this application.

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By my signature below, I confirm that I understand:

- Prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit 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: Herald and News.



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

[Handwritten Signature]
Applicant Signature

Lawrence Drost
Print Name (and Title if applicable)

7/26/2019
Date

Applicant Signature

Print Name (and Title if applicable)

Date

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Check one of the following:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.

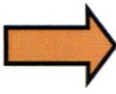
Check the appropriate box, if applicable:

- Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME Klamath Basin Improvement District	ADDRESS 6640 KID Lane	
CITY Klamath Falls	STATE OR	ZIP 97603

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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME Klamath County	ADDRESS 305 Main Street	
CITY Klamath Falls	STATE OR	ZIP 97601

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please **save the application form to your computer**. Unlock the document by using one of the following instructions for your Microsoft Word software version:

Microsoft Word 2003

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;
- OR**
- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the **Tools** menu => click **Protect Document**;
- OR**
- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

Microsoft Word 2007

- Unlock the document by clicking the **Review** tab, then click **Protect Document**, then click **Stop Protect**
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

Microsoft Word 2010

- Unlock the document by clicking the **Review** tab, toggle the **Restrict Editing icon** at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the “**Allow only this type of editing in the document: Filling in forms**” in the “Editing restrictions” section on the right-hand list of options.
- To relock the document, check the **Editing Restrictions/Allow Only This Type of Editing/Filling In Forms** box from the drop-down menu, then check **Yes, Start Enforcing Protection**. You do not need to assign a password for the editing restrictions.

Other Alternatives:

- Photocopy pages or tables in Part 5, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

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Part 5 of 5 – Water Use Permit Information

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

PERMIT # G-13005

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

(Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp	Rng	Sec	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)		
POA	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	KLAM 10988	40	S	11	E	2	SW	SW	1200	<i>Authorized location:</i> 585 ft North & 25 ft East from SW Cor Sec 2
Well #1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	KLAM 10988	40	S	11	E	2	SW	SW	1200	<i>Actual well location:</i> 480 ft. North & 485 ft. East from SW Cor Sec 2
Well #2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	KLAM 52918	40	S	11	E	3			Lot 19	3960.4 ft. North & 2646.5 ft. West from SW Cor Sec 2
Well #3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	KLAM 50623	40	S	11	E	3			900	5328.9 ft. North and 2695 ft. West from SW Cor Sec 2
Well #4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	KLAM 53080	40	S	11	E	3			1300	2550.5 ft. North and 2805 ft. West from SW Cor Sec 2

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

- | | |
|---|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Surface water POD to Ground Water POA (SW/GW) |

Will all of the proposed changes affect the entire water use permit?

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

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For a change in place of use:

Does the permit holder of record own or control the land TO which the place of use is being moved?

Yes No

If NO, the landowner of the land TO which the place of use is being **moved must be assigned to the permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? Yes No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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Table 2. Description of Changes to Water Use Permit # G-13005

List the change proposed for the acreage in each ¼ 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.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.													
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date			Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date					
40	S	11	E	2	SW	NW		20	10.5	POA	6/7/1994	APOA/POU	40	S	11	E	3	NE	SE	1300		26.64	Wells#2, #3, and #4	6/7/1994
40	S	11	E	2	SE	NW		19	27.4	POA	6/7/1994	APOA/POU	40	S	11	E	3	NW	SE	1300		1.09	Wells#2, #3, and #4	6/7/1994
40	S	11	E	2	NE	SW	1000		0.21	POA	6/7/1994	APOA/POU	40	S	11	E	3	SW	SE	1300		0.24	Wells#2, #3, and #4	6/7/1994
40	S	11	E	2	SE	SW	1000		1.04	POA	6/7/1994	APOA/POU	40	S	11	E	3	SE	SE	1300		19.08	Wells#2, #3, and #4	6/7/1994
40	S	11	E	11	NE	NW	1000		1.51	POA	6/7/1994	APOA	40	S	11	E	2	SW	NW		20	8.36	Wells#2, #3, and #4	6/7/1994
40	S	11	E	11	NE	NW	1001		1.33	POA	6/7/1994	APOA	40	S	11	E	2	SE	NW		19	9.72	Wells#2, #3, and #4	6/7/1994
40	S	11	E	11	NW	NW	1000		.15	POA	6/7/1994	APOA	40	S	11	E	2	NE	SW	1000		39.49	Wells#2, #3, and #4	6/7/1994
40	S	11	E	11	NW	NW	200		21.22	POA	6/7/1994	APOA	40	S	11	E	2	NW	SW	1000		35.2	Wells#2, #3, and #4	6/7/1994
40	S	11	E	11	NW	NW	200		1.77	POA	6/7/1994	APOA	40	S	11	E	2	SW	SW	1000		23.55	Wells#2, #3, and #4	6/7/1994
40	S	11	E	11	NW	NW	1200		11	POA	6/7/1994	APOA	40	S	11	E	2	SE	SW	1000		24.06	Wells#2, #3, and #4	6/7/1994
40	S	11	E	2	NE	SW	1000		39.49	POA	6/7/1994	APOA	40	S	11	E	2	SW	SW	1200		15	Well #1	6/7/1994
40	S	11	E	2	NW	SW	1000		35.2	POA	6/7/1994	APOA	40	S	11	E	11	NW	NW	1200		11	Well #1	6/7/1994
40	S	11	E	2	SW	SW	1000		23.55	POA	6/7/1994													
40	S	11	E	2	SW	SW	1200		15	POA	6/7/1994													
40	S	11	E	2	SE	SW	1000		24.06	POA	6/7/1994													
TOTAL ACRES						213.43				TOTAL ACRES						213.43								

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Additional remarks: Authorized water right per the permit is 47.8 acres primary and 168.4 acres supplemental.

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Are there other water rights certificates, water use permits or ground water registrations associated with the “from” or “to” lands? Yes No

If YES, list the other certificate, permit, or ground water registration numbers: KA1000

 If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (Tip: You may search for well logs on the Department’s web page at: http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx)

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right

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There are three purposes of this Permit Amendment

- 1) Allow the property to be split between the farmland and the home and pasture so that each new landowner will have a well or wells to serve the water right on their land. Therefore, this application is for four additional POAs. There is no well at the site of the "authorized POA". Only the portion of the water right permit not owned by the applicant will continue to have a right to the Authorized POA. It is anticipated at the time to the COBU that the water right on the neighboring land will not be included in the COBU.
- 2) Specify which land will have a right to irrigate from each POA
- 3) Transfer POU so as to increase the efficiency of the use of the water. The water on the pivot corners is being moved to be used under a pivot. Also the primary water right on the portion of the property that has not yet been developed for irrigation will be moved to be used under an existing pivot and changed to supplemental irrigation.

Land Use Information Form



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

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NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; **OR**
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and **all** of the following apply:
 - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; **and**
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

Land Use Information Form



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

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Applicant(s): Drost Land Co. LLC

Mailing Address: 24624 Schaupp Rd.

City: Klamath Falls

State: OR

Zip Code: 97603

Daytime Phone: 806-717-7337

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
<u>40 S</u>	<u>11 E</u>	<u>2</u>	<u>SW SW</u>	<u>1200</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>3</u>	<u>SE NW</u>	<u>LOT 19</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>3</u>	<u>NE NW</u>	<u>900</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>3</u>	<u>NE SW</u>	<u>1300</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>irrigation</u>
<u>See attached</u>									

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

Klamath

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water
 Water Right Transfer
 Permit Amendment or Ground Water Registration Modification
 Limited Water Use License
 Allocation of Conserved Water
 Exchange of Water

Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: 640.29 cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-Municipal Instream Other _____

Briefly describe:

See "Attachment 1"

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s):

Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Name: Erik Nobel Title: Planner III
 Signature: [Signature] Phone: 541-851-3648 Date: May 10 2019
 Government Entity: Klamath County

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: Drost Land Co, LLC
 City or County: Klamath County Staff contact: Erik Nobel
 Signature: [Signature] Phone: 541-851-3648 Date: 5-10-19

Table A CONTINUATION

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
<u>40 S</u>	<u>11 E</u>	<u>3</u>	<u>NE SE</u>	<u>1300</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>3</u>	<u>NW SE</u>	<u>1300</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>3</u>	<u>SW SE</u>	<u>1300</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>3</u>	<u>SE SE</u>	<u>1300</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>2</u>	<u>SW NW</u>	<u>Lot 20</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>2</u>	<u>SE NW</u>	<u>Lot 19</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>2</u>	<u>NE SW</u>	<u>1000</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>2</u>	<u>NW SW</u>	<u>1000</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>2</u>	<u>SW SW</u>	<u>1000</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>2</u>	<u>SE SW</u>	<u>1000</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>2</u>	<u>SW SW</u>	<u>1200</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>40 S</u>	<u>11 E</u>	<u>11</u>	<u>NW NW</u>	<u>1200</u>		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>

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There are three purposes of this Permit Amendment

- 1) Allow the property to be split between the farmland and the home and pasture so that each new landowner will have a well or wells to serve the water right on their land. Therefore, this application is for four additional POAs. There is no well at the site of the "authorized POA". Only the portion of the water right permit not owned by the applicant will continue to have a right to the Authorized POA. It is anticipated at the time to the COBU that the water right on the neighboring land will not be included in the COBU.
- 2) Specify which land will have a right to irrigate from each POA
- 3) Transfer POU so as to increase the efficiency of the use of the water. The water on the pivot corners is being moved to be used under a pivot. Also the primary water right on the portion of the property that has not yet been developed for irrigation will be moved to be used under an existing pivot and changed to supplemental irrigation.

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

KLAMATH 10988

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MAY 19 1994

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AUG 05 2019

40S/11E/11da

(START CARD) # 40990

(1) OWNER: Well Number _____
Name LLOYD L. NELSON
Address 24625 SCHAUPP RD.
City KLAMATH FALLS State OR Zip 97603

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 883 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
14"	0	39	BENTON.	0	39	21 SKS
10"	39	883				

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

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

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10"	+1	39	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) NONE

(7) PERFORATIONS/SCREENS:
 Perforations Method NONE
 Screens Type _____ Material _____

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

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
200		450	1 hr.
100		200	1 HR

Temperature of Water 80 F Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: NONE

(9) LOCATION OF WELL by legal description:
County KLAMATH Latitude _____ Longitude _____
Township 40 S N or S. Range 11 E E or W. WM. _____
Section 11 NE 1/4 SE 1/4
Tax Lot 2001 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 24624 SCHAUPP RD.
KLAMATH FALLS, OR 97603

(10) STATIC WATER LEVEL:
38 FT. ft. below land surface. Date 05-12-94
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 31 FT.

From	To	Estimated Flow Rate	SWL
31	35	3 GPM	21
499	531	200 GPM	38
664	775	50 GPM	38

(12) WELL LOG: Ground elevation 4050

Material	From	To	SWL
TOP SOIL	0	1	
BROWN CLAY	1	3	
YELLOW CLAY	3	10	
BLUE CLAY	10	31	
JOINTED BLUE CLAY	31	35	
BLUE CLAY	35	124	
GRAY CLAYSTONE	124	217	
GRAY CLAY	217	346	
GRAY CLAYSTONE	346	453	
HARD GRAY CLAYSTONE	453	486	
GRAY CLAYSTONE	486	499	
HARD GRAY CLAYSTONE	499	517	38
FRACTURED BLACK ROCK	517	531	38
BLUE CLAYSTONE	531	653	
BLACK ROCK	653	664	
STREAKS OF FRACTURED ROCK & BLUE CLAYSTONE	664	775	38
GRAY CLAYSTONE	775	830	
BLACK ROCK	830	859	
GRAY CLAYSTONE	859	883	

Date started 04-28-94 Completed 05-12-94

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed _____ Date _____ WWC Number _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.
Signed Naim S. Saway WWC Number 408
Date 5/16/94

13237

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

Instructions for completing this report are on the last page of this form.

WELL I.D. # L 19964
START CARD # 132170

Klam
52918

(1) OWNER: Well Number 2
Name NEISON'S JUNIPER RIDGE RANCH
Address 24624 Schapp Rd
City KLAMATH FALLS State OR Zip 97603

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 740'
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Material		Sacks or pounds	
Diameter	From To	From To	From To	From To	From To	From To	From To
22	300-392	Cement	300-392	8 yds	300-392	8 yds	300-392
22	-15-300	Sand Gravel	-15-300	4 yds	-15-300	4 yds	-15-300
22	0-15	Barroath	0-15	20 SACKS	0-15	20 SACKS	0-15
14	392-730						

How was seal placed: Method A B C D E
 Other pumped U.A Tremie
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 14	+2	392	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS:

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing
Yield gal/min 2500+- Drawdown 100' Drill stem at 720' Time 4 hr.
Temperature of water 80 Depth Artesian Flow Found 530'
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County KLAMATH Latitude _____ Longitude _____
Township 40S N or S Range 11E E or W. WM.
Section 3 SW 1/4 SW 1/4
Tax Lot 1400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 24624 Schapp Rd
KLAMATH FALLS

(10) STATIC WATER LEVEL:
35' ft. below land surface. Date 7-18-01
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 530'

From	To	Estimated Flow Rate	SWL
530	600	2500 +-	35

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Top Soil	0	2	
Brown Clay	2	22	
Black Clay	22	210	
Hard Green Clay	210	246	
Black Clay	246	370	
Black Clay	246	370	
Grey Basalt	370	530	35
Fractured Basalt	530	600	"
Grey Basalt	600	642	"
Fractured Basalt	642	670	"
Black Basalt	670	740	"

Date started 6-28-01 Completed 7-18-01

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

Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Scott A. Baker WWC Number 1557 Date 7-18-01

WELL I.D.# L-19970

(START CARD) # 132175

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AUG 05 2019

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number 3
Name Nelson's Juniper Ridge RANCH
Address 24624 Schapp Rd
City KLAMATH FALLS State OR Zip 97603

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 650'
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
22	0	220	Cement	0	220	5 yds Slurry
14	220	320				
8	320	650				

How was seal placed: Method A B C D E
 Other pumped via Tremie
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: 16"	+2	220	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 0"				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method — 0 —

Screens Type _____ Material _____

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

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

BOTH

	Yield gal/min	Drawdown	Drill stem at	Flowing Time
<input checked="" type="checkbox"/> Pump	<u>850</u>	<u>170'</u>	<u>Pump 280'</u>	<u>8 hrm.</u>
<input checked="" type="checkbox"/> Air	<u>2000+</u>	<u>410'</u>	<u>Stem @ 650'</u>	<u>3 h</u>

Temperature of water 85 Depth Artesian Flow Found 640'

Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Klamath Latitude _____ Longitude _____
Township 40S N or S Range 11E E or W. WM _____
Section 3 SW 1/4 SW 1/4
Tax Lot 11650 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 24624 Schapp Rd
Klamath Falls, OR.

(10) STATIC WATER LEVEL:
85 ft. below land surface. Date 10-25-01
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 640'

From	To	Estimated Flow Rate	SWL
640	642	2000+-	85

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Top Soil	0	2	
Brown Clay	2	20	
Sticky Black Clay	20	210	
Green Clay	210	250	85'
Black Clay	250	390	"
Soft Grey Basalt	390	640	"
Fractured Basalt	640	642	"
Soft Grey Basalt	642	650	85'

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NOV 15 2001

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 10-11-01 Completed 10-23-01

(unbonded) Water Well Constructor Certification:

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

Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Carol Weiler WWC Number 1557 Date 10-28-01