



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.

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: G17519
 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):

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

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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.

- 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°).

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Brad Allen		PHONE NO. 541-962-9127	ADDITIONAL CONTACT NO.
ADDRESS 48748 McCarty Bridge Road			FAX NO.
CITY North Powder	STATE OR	ZIP 97867	E-MAIL bradallen4030@hotmail.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 Nancy L Rorick		PHONE NO. 541-519-3644	ADDITIONAL CONTACT NO.
ADDRESS 645 L Loop			FAX NO.
CITY Baker City	STATE OR	ZIP 97814	E-MAIL nrorick@nlr-water.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.			

Explain in your own words what you propose to accomplish with his permit amendment; and why:

Change the POU to cover a new pivot.

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

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

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)? Original C-Date 4/13/2016 extend to 4/13/2021

- 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.

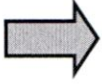
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By my signature below, I confirm that I understand:

- 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: Baker City Herald.



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

Brad Allen
Applicant Signature

Brad Allen
Print Name (and Title if applicable)

Dec 1 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.

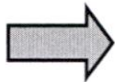
Check the appropriate box, if applicable:

- 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 Baker Valley Irrigation District	ADDRESS 3895 10th Street	
CITY Baker City	STATE OR	ZIP 97814

- 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 Baker County Planning	ADDRESS 1995 Third Street, Suite 131	
CITY Baker City	STATE OR	ZIP 97814

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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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 # G17519

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)
Well B	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	BAKE 52275	7 S	39 E	14	NW SW		2700 feet south and 100 feet east from NW corner, Section 14.
Well E	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	BAKE 51323	7 S	39 E	14	SW NE		1450 feet south and 1820 feet west from NE corner, Section 14.
Well B-1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NOT DRILLED	7 S	39 E	15	NE NE		1206 feet south and 520 feet west from NE corner, Section 15.
Well B-2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	BAKE 52645	7 S	39 E	11	NE SW		1922 feet north and 1481 feet east from SW corner, Section 11.

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

- | | |
|---|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input 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) |

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

- OWRD
- 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.

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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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 Use Permit # G17519

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.
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	1/4 1/4	Tax Lot	Gvt Lot or DLC	Acre (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	1/4 1/4	Tax Lot	Gvt Lot or DLC	Acre (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date	
										7	S	39	E	10	NE NE	1700	34.6	Well B-2	6/5/2014
										7	S	39	E	10	NW NE	1700	19.9	Well B-2	6/5/2014
										7	S	39	E	10	NW NE	1701	14.6	Well B-2	6/5/2014
										7	S	39	E	10	SW NE	1700	34.5	Well B-2	6/5/2014
										7	S	39	E	11	SW NE	299	1.6	Well B-2	6/5/2014
										7	S	39	E	11	SW NE	299	0.4	Well B-2	6/5/2014
										7	S	39	E	11	NE NW	299	10.5	Well B-2	6/5/2014
										7	S	39	E	11	NW NW	299	7.1	Well B-2	6/5/2014
										7	S	39	E	11	SW NW	299	17.7	Well B-2	6/5/2014
										7	S	39	E	11	SE NW	299	33.2	Well B-2	6/5/2014
										7	S	39	E	11	NE SW	299	17.5	Well B-2	6/5/2014
										7	S	39	E	11	NE SE	299	11	Well B-2	6/5/2014
										7	S	39	E	11	NW SE	299	26.2	Well B-2	6/5/2014

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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: CERTIFICATES 28776, 64149, 81739, 81741, 82099, 82100



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
Well B-2	Yes	BAKE 52645	300 ft	20 in 12 in	0-5 ft 0-261 ft	0-69 ft	Not on well log	30 ft	basalt	3 cfs

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

BAKE 52645

WELL I.D. LABEL# L 133900
START CARD # 1041687
ORIGINAL LOG #

5/13/2019

(1) LAND OWNER Owner Well I.D. _____
First Name BRAD Last Name ALLEN
Company _____
Address 48748 MCCARTY BRIDGE RD
City NORTH POWDER State OR Zip 97867

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: _____
Material From To Amt sacks/lbs
Seal: _____

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

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

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 300.00 ft.
BORE HOLE SEAL
Dia From To Material From To Amt sacks/lbs
24 0 5 Bentonite 0 69 7700 P
16 5 264 Calculated 2900
12 264 300 Cement with 4% Benti 69 168 200 S
Calculated 47.5

How was seal placed: Method A B C D E
 Other POURED DRY
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount _____ Actual Amount _____

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
 12 1.5 0 0.375
 20 0 5 0.375
 12 0 261 0.25
Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia _____ From + _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____
Perf/ Casing/Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
2500 _____ 295 2
1800 _____ 240 1
Temperature 58 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 187 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County BAKER Twp 7.00 S N/S Range 39.00 E E/W WM
Sec 11 NE 1/4 of the SW 1/4 Tax Lot 299
Tax Map Number _____ Lot _____
Lat _____ " or 44.96807600 DMS or DD
Long _____ " or -117.90553500 DMS or DD
 Street address of well Nearest address
NEAREST ADDRESS
48748 MCCARTY BRIDGE RD

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration _____
Completed Well 5/9/2019 _____ 30
Flowing Artesian? Dry Hole?
WATER BEARING ZONES Depth water was first found 43.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
1/10/2019 43 72 10 30
1/10/2019 91 111 40 30
1/10/2019 138 151 100 30
1/10/2019 178 183 50 30
1/10/2019 198 233 60 30

(11) WELL LOG
Ground Elevation _____
Material From To
SOIL 0 4
BROKEN BASALT, BROWN 4 5
FRACTURED BASALT, BROWN 5 12
FRACTURED BASALT, TAN 12 43
FRACTURED BASALT, BROWN/BROKEN 43 54
FRACTURED BASALT, TAN/BROKEN 54 72
FRACTURED BASALT, TAN 72 86
BASALT TAN, HARD 86 91
FRACTURED BASALT, BROWN/BROKEN 91 111
FRACTURED BASALT, TAN 111 138
FRACTURED BASALT, RED/BROWN 138 151
BASALT BLACK, HARD 151 178
FRACTURED BASALT, TAN 178 183
BASALT BLACK, HARD 183 198
FRACTURED BASALT TAN, RED CINDERS 198 233
BASALT BLACK, HARD, TAN CLAY 233 254
FRACTURED BASALT, TAN CLAY 254 261
FRACTURED/BROKEN BASALT, TAN CLAY 261 300

Date Started 1/7/2019 Completed 5/9/2019

(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 1775 Date 5/13/2019
Signed JASON ACQUISTAPACE (E-filed)
Contact Info (optional) _____

COURCHANE Corey A * WRD

From: COURCHANE Corey A * WRD
Sent: Tuesday, January 14, 2020 8:16 AM
To: 'bradallen4030@hotmail.com'; 'Nancy Rorick'
Cc: OSBORN Marcy J * WRD
Subject: Brad Allen, Permit Amendment Application

Good morning,

On January 13, 2020, the Department received an application for a Permit Amendment involving Permit G-17519. At this time, the Department cannot accept the application without the signature of June C. Allen, as she is identified on Permit G-17519 as a permit holder, and Brad Allen is the only one who signed the application.

Pursuant to Oregon Revised Statute 537.211(4): 4) The holder of a water right permit may change the point of diversion, change the point of appropriation, change the point of diversion to allow the appropriation of ground water or use the water on land to which the right is not appurtenant. All persons/entities that are identifies as the holder of a water right permit must either sign the application or provide an Affidavit of Consent. In order for the Department to continue processing the application, the signature of June C. Allen is required.

Please resubmit page 5 of the application which includes June C. Allen's signature. You may scan and email back to me once complete.

If the Department does not receive the above requested materials by January 17, 2020, the Department shall return the application for being incomplete.

Thank you,

Corey Courchane

**COREY A COURCHANE | TRANSFER SPECIALIST
TRANSFER AND CONSERVATION SECTION**

Water Resources Department | 725 Summer St. NE, Suite A | Salem, Oregon 97301
Ph: 503 986-0825 | Fax: 503 986-0901
Email: corey.a.courchane@oregon.gov | Web: <http://www.oregon.gov/OWRD>

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COURCHANE Corey A * WRD

From: Brad Allen <Bradallen4030@hotmail.com>
Sent: Thursday, January 16, 2020 11:19 AM
To: COURCHANE Corey A * WRD
Subject: Permit Amendment
Attachments: Permit Amendment.pdf

Corey,

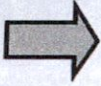
Please see attached.

Thank you,
Brad Allen

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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: Baker City Herald.



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

Brad E. Allen
Applicant Signature

Brad E. Allen
Print Name (and Title if applicable)

1-16-20
Date

June C. Allen
Applicant Signature

June C. Allen
Print Name (and Title if applicable)

1-16-20
Date

Received by OWRD
JAN 16 2020
Salem, OR

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