

# Application for Groundwater Registration Modification

Part 1 of 5 - Minimum Requirements Checklist

This Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

| ا<br>م      |            | 1 1 1 (d. d.;, P. d.;, OV/A - Not Applicable)   |
|-------------|------------|---|
|             | ck all inc | Part 1 – Completed Minimum Requirements Checklist.  |
| $\boxtimes$ |            | •   |
| $\boxtimes$ |            | Part 2 – Completed Application Map Checklist.   |
| $\boxtimes$ |            | Part 3 – Completed Applicant Information and Signature.   |
| $\boxtimes$ |            | Part 4 – Completed Groundwater Registration Modification Application – Groundwater Registration Information. (Only one Groundwater registration per application, unless the Groundwater registrations to be modified are layered).  |
| $\boxtimes$ |            | Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).   |
| $\boxtimes$ |            | Groundwater registration modification fees – Amount enclosed: \$ 1,250. (\$875.00 for a place of use change only; \$1,250.00 for any other change or combination).  |
|             |            | Attachments:  |
|             | ⊠ N/A      | Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is <b>not</b> the registration certificate holder of record. The Request for Assignment Form is available at <a href="https://www.oregon.gov/OWRD/Forms/Pages/default.aspx">https://www.oregon.gov/OWRD/Forms/Pages/default.aspx</a> .  Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) |
|             |            | <b>or</b> the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.   |
|             | □ 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 <b>all</b> of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.                                   |
|             | □ N/A      | Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.  |
|             |            | (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  Assignment Form and fee not enclosed/insufficient  Assignment Form and fee not enclosed/insufficient  |
|             |            | Additional signature(s) required Part is incomplete   |
|             |            | Other/Explanation FEB 0 4 2020  |
|             |            | Staff: 503-986-0 Date: / /  |

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### Part 2 of 4 - Groundwater Registration Modification Map Checklist

Your Groundwater Registration Modification 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 <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

| $\boxtimes$ |       | 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 $30 \times 3$ inches. For $30 \times 30$ inch maps, one extra copy is required.   | 0       |
| $\boxtimes$ |       | A north arrow, a legend, and scale.  |         |
| $\boxtimes$ |       | The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$ , $1 \text{ inch} = 1,320 \text{ feet}$ , the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$ , or a scale that has been preapproved by the Department.  | у<br>е- |
| $\boxtimes$ |       | Township, Range, Section, $\frac{1}{4}$ $\frac{1}{4}$ , DLC, Government Lot, and other recognized public land survey lines.  |         |
| $\boxtimes$ |       | Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.   |         |
| $\boxtimes$ |       | Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads and railroads.  |         |
| $\boxtimes$ |       | Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.   |         |
|             |       | Existing place of use that includes hachuring, 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 registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged. |         |
| $\boxtimes$ | □ N/A | If you are proposing a modification in place of use, show the proposed place of use with hachuring including priority date and use including number of acres in each quarter-quarte section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.  | r       |
| $\boxtimes$ |       | Existing point(s) of appropriation with distance and bearing or coordinates from a recognized survey corner.   |         |
|             | □ N/A | If you are proposing a modification in point(s) of appropriation, 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-secon 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°).                        | ds      |
|             |       | FEB 0 4 2020   |         |
|             |       |  |         |

| Applicant Information   |   | Part 5 0  | 4 – Applicant I  | nformation and Signature   |
|---|---|---|--|--|
| APPLICANT/BUSINESS NAME Osprey Corner LLC   |   |   | PHONE NO. 505-400-3397   | ADDITIONAL CONTACT NO.   |
| ADDRESS PO Box 4967   |   |   | 300 100 0071   | FAX NO.  |
| CITY<br>Kansas City   | STATE<br>MO                               | ZIP<br><b>64120</b>   | E-MAIL<br>shonda@chesscap  | italpartners.com   |
| BY PROVIDING AN E-MAIL AD<br>DEPARTMENT ELECTRONICA                                 | DRESS, CO                                 | ONSENT IS GIVEN   | ORDER DOCUMEN  | ORRESPONDENCE FROM THE   |
|   |   |   |  | matters relating to this application   |
| APPLICANT/BUSINESS NAME Will McGill Surveying, LLC                                  |   | orized to represent   | PHONE NO. 503-510-3026   | ADDITIONAL CONTACT NO.   |
| ADDRESS   |   |   | 200 210 2020   | FAX NO.  |
| 15333 Pletzer Rd. SE CITY Furner  | STATE<br>OR                               | ZIP<br>97392  | E-MAIL<br>willmcgill.surveyi                                       | ng@gmail.com   |
|   | DRESS, C                                  | ONSENT IS GIVEN   | TO RECEIVE ALL C   | CORRESPONDENCE FROM THE  |
| Department approval of the information and evidence                                 | n, I (we) un                              | (Check derstand that, upon vater modification,  | I (we) will be require   | eliminary determination and prior to<br>d to provide landownership<br>dentified in OAR 690-382-0400(16)(a                              |
| OR  I (we) affirm the applicant the name of the municipal                           |   |   | ORS 540.510(3)(b)  | and that the right is in RECEIV  |
| I (we) affirm that the applitude the property to which the condemnation and have at | Groundwat                                 | ter registration propo  | osed for modification  |  |
| submit payment to the Depa<br>where the groundwater regi                            | artment fo<br>stration is<br>ailable, I s | r publication of a r<br>located, once per<br>uggest publishing<br>contained in this a<br>Print Name ( | notice in a newspap<br>week for two conse<br>the notice in the fol | tion modification, I may be required the with general circulation in the accurate weeks. If more than one allowing paper: 500 Tribune. |

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located? 

Yes 

No If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has been conveyed.

| Check the appropriate box, if applie   | cable:  |  |
|--|---|--|
| Check here if the Groundwater reg<br>within or served by an irrigation o                               | gistration proposed for moder other water district. | ification is or will be located                                |
| IRRIGATION DISTRICT NAME   | ADDRESS   |  |
| CITY   | STATE   | ZIP  |
| Check here if water for the Ground or other contract with a federal ago                                |   | ied under a water service agreeme                              |
| ENTITY NAME  | ADDRESS   |  |
| CITY   | STATE   | ZIP  |
| To meet State Land Use Consistency county, city, municipal corporation, or diverted, conveyed or used. | r tribal government) within                         | t all local governments (each whose jurisdiction water will be |
| ENTITY NAME  Marion County   | ADDRESS 5155 Silverton Rd.                          | NE   |
| CITY Salem   | STATE OR  | ZIP<br>97305   |
| ENTITY NAME  | ADDRESS   |  |

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# Part 4 of 4 - Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

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

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

| POA Name<br>or Number | Is this POA Authorized by the registration or is it Proposed? | OWRD Well<br>Log ID# (or<br>Well ID<br>Tag # L) | og ID# (or<br>Well ID Twp |   | Rng |   | Sec | 1/4 1/4 |    | Tax<br>Lot,<br>DLC<br>or<br>Gov't<br>Lot | Measured Distances<br>(from a recognized<br>survey corner) |  |
|-----------------------|---|---|---------------------------|---|-----|---|-----|---------|----|--|--|--|
| Pump Well<br>#2       | ☐ Authorized☐ Proposed  | MARI<br>16285                                   | 10 S                      |   | 3   | w | 14  | NE      | NE | 100                                      | 929' S and 610' W<br>from the NE corner of<br>Section 14   |  |
| North Well            | ☐ Authorized ☐ Proposed                                       | MARI<br>65465                                   | 10                        | S | 3   | w | 14  | NE      | NE | 200                                      | 1190' S and 800' W<br>from the NE corner of<br>Section 14  |  |
| South Well            | ☐ Authorized ☐ Proposed                                       | MARI<br>65448                                   | 10                        | S | 3   | w | 14  | SE      | NE | 300                                      | 2560' S and 1210' W<br>from the NE corner of<br>Section 14 |  |

| Check all type(s) of modifications(s) proposed below (modification "CODES" are provided in parentheses):                                |        |                                    |             |  |  |  |  |  |
|---|--------|------------------------------------|-------------|--|--|--|--|--|
| $\boxtimes$   | Place  | of Use (POU)                       |             | Point of Appropriation (well) (POA)      |  |  |  |  |
|   | Char   | acter of Use (USE)                 | $\boxtimes$ | Additional Point of Appropriation (APOA) |  |  |  |  |
| Will all  | of the | proposed changes affect the entire | Grou        | indwater registration?                   |  |  |  |  |
| Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. "CODES" listed above to describe the proposed changes. |        |                                    |             |  |  |  |  |  |
| No Complete all of Table 2 to describe the portion of the registration to be changed.   |        |                                    |             |  |  |  |  |  |

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Table 2. Description of Modifications to Registration GR-2193 (Certificate # GR-2098)

|        | AUTHORIZED (the "from" or "off" lands) |     |     |     |       |         |                      |       |   | Proposed                                   | PROPOSED (the "to" or "on" lands) |  |    |    |   |    |     |     |     |         |                      |       |                 |   |                  |
|--------|--|-----|-----|-----|-------|---------|----------------------|-------|---|--|-----------------------------------|--|----|----|---|----|-----|-----|-----|---------|----------------------|-------|-----------------|---|------------------|
| Twp    | I                                      | Rng | Sec | 1/2 | 4 1/4 | Tax Lot | Gvt<br>Lot or<br>DLC | Acres | Type of USE<br>listed on<br>Certificate | POA(s) (name<br>or number from<br>Table 1) | Priority<br>Date                  | Changes (see<br>"CODES" from<br>previous page) | Tv | vp | R | ng | Sec | 1/4 | 1/4 | Tax Lot | Gvt<br>Lot or<br>DLC | Acres | New Type of USE | POA(s) to<br>be used<br>(from Table<br>1) | Priority<br>Date |
| 10 S   | 3                                      | w   | 14  | NE  | NE    | 100/    |                      | 17    | Irrigation                              | Pump Well<br>#2                            | 1948                              | APOA   | 10 | s  | 3 | w  | 14  | NE  | NE  | 100     |                      | 5.6   | Irrigation      | Pump Well<br>#2/ North/<br>South          | 1948             |
| 0 S    | 3                                      | w   | 14  | SE  | NE    | 200     |                      | 8     | Irrigation                              | Pump Well<br>#2                            | 1948                              | APOA/POU                                       | 10 | s  | 3 | w  | 14  | NE  | NE  | 100     |                      | 0.4   | Irrigation      | South                                     | 1948             |
|        |  |     |     |     |       |         |                      |       |   |  |                                   | APOA   | 10 | s  | 3 | w  | 14  | NE  | NE  | 200     |                      | 8.9   | Irrigation      | South                                     | 1948             |
|        |  |     |     |     |       |         |                      |       |   |  |                                   | APOA/POU                                       | 10 | s  | 3 | W  | 14  | NE  | NE  | 200     |                      | 0.05  | Irrigation      | South                                     | 1948             |
|        |  |     |     |     |       |         |                      |       |   |  |                                   | APOA/POU                                       | 10 | s  | 3 | W  | 14  | NW  | NE  | 200     |                      | 0.15  | Irrigation      | Pump Well<br>#2/ North/<br>South          | 1948             |
|        |  |     |     |     |       |         |                      |       |   |  |                                   | APOA   | 10 | s  | 3 | W  | 14  | SE  | NE  | 200     |                      | 6.0   | Irrigation      | South                                     | 1948             |
|        |  |     |     |     |       |         |                      |       |   |  |                                   | APOA/POU                                       | 10 | S  | 3 | W  | 14  | NE  | SE  | 1100    |                      | 2.2   | Irrigation      | South                                     | 1948             |
|        |  |     |     |     |       |         |                      |       |   |  |                                   | APOA/POU                                       | 10 | s  | 3 | w  | 13  | NW  | sw  | 1100    |                      | 1.7   | Irrigation      | Pump Well<br>#2/ North/<br>South          | 1948             |
|        | -                                      |     |     |     |       |         |                      |       |   |  |                                   |  |    |    |   |    |     |     |     |         |                      |       |                 |   |                  |
|        |  |     |     |     | -     |         |                      |       |   |  |                                   |  |    | -  |   |    | 10  |     |     |         |                      |       |                 |   |                  |
|        |  |     |     |     |       |         |                      |       |   |  |                                   |  |    |    |   |    |     |     |     |         |                      |       |                 |   |                  |
| 2<br>2 |  |     |     |     | -     |         |                      |       |   |  |                                   |  |    |    |   |    |     |     |     |         |                      |       |                 |   |                  |
| 3<br>3 |  |     |     |     | TOT   | AL AC   | RES                  | 25    |   |  |                                   |  |    |    |   |    |     |     | TOT | AL AC   | RES                  | 25    |                 |   |                  |

Additional remarks:

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Groundwater Registration Modification – Page 6 of 7

TACS

# Groundwater Registration # GR-2193 (Certificate # GR-2098)

For a modification in place of use or character of use: Are there other water right certificates, water use permits, or Groundwater registrations

| associated w   | ith the "from" or "to" lands? ☐ Yes ☒ No  |
|--|---|
| If YES,  | list the other certificate, water use permit, or other Groundwater registration numbers:  |
| suppler<br>transfer<br>separate<br>separate                    | nt to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is mental to a primary irrigation right proposed for transfer, must be concurrently red with the registration or be cancelled. Any change to a water right must be filed ely in a transfer application. Any change to a water use permit must be filed ely with a permit amendment. Any modification to a Groundwater registration on the "to" nust be filed separately with a Groundwater registration modification. |
| For modificatio  | ns in point(s) of appropriation (well(s) or additional point(s) of appropriation:   |
| corres<br>( <b>Tip</b> :                                       | log(s) are attached for each well that are clearly labeled and associated with the sponding well(s) in Table 1 above and on the accompanying application map. You may search for well logs on the Department's web page at:  /apps.wrd.state.or.us/apps/gw/well_log/)   |
| AND/OR   |   |
| do no<br>estim<br>you c  | ribe the construction of the authorized and proposed well(s) in Table 3 for any wells that thave a well log. For proposed wells not yet constructed or built, provide "a best ate" for each requested information element in the table. The Department recommends onsult a licensed well driller, geologist, or certified water right examiner to assist with abling the information necessary to complete Table 3.   |
| Table 3. Construct   | ion of Point(s) of Appropriation  |
| Any well(s) in this little accompanying apof your modification | isting must be clearly tied to corresponding well(s) described in Table 1 and shown on oplication map. Failure to provide adequate information is likely to delay the processing application until it is received. The information is necessary for the department to assess d well(s) will access the same source aquifer as the authorized point(s) of appropriation (PO.   |

An the of A). wh The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

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

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|   |               | PUMP WELL # 2  |        |
|---|---------------|--|--------|
| STATE ENGINEER Salem, Oregon WARL Well R  | ecord         | STATE WELL NO. 10/3W COUNTY MARION APPLICATION NO. GR-21 |        |
| OWNER. W. F. Weddle   |               | erson,   |        |
| - 40  | CITY AND Oreg | on   |        |
| LOCATION OF WELL: Owner's No. #2  No. |               |  |        |
|   | 1 12724       |  |        |
| Bearing and distance from section or subdivision corner 929 S. and 610 W.   |               |  |        |
|   |               |  |        |
| Altitude at well  |               |  |        |
| TYPE OF WELL: Drilled Date Constructed 19   |               |  |        |
| Depth drilled 20 Depth cased 20   |               | Section  |        |
| CASING RECORD:  |               |  |        |
| 8_Inch  |               |  |        |
| FINISH:   |               |  |        |
| AQUIFERS:   |               |  |        |
| WATER LEVEL: 9° 9"  |               |  |        |
| PUMPING EQUIPMENT: Type Fairbanks Mors Capacity 400 G.P.M.  | e             | H.P. 15  |        |
| WELL TESTS: Drawdown ft. after  |               |  |        |
| Drawdown ft. after  | hours         |  | G.P.M. |
| USE OF WATER Irrigation SOURCE OF INFORMATION GR-2098 DRILLER or DIGGER   | Temp°F.       |  | , 19   |
| ADDITIONAL DATA: Log  |               |  |        |
| REMARKS.  |               |  |        |

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WELL LABEL # L

#### **MARI 65465**

STATE OF OREGON WATER SUPPLY WELL REPORT

| (1) LANDOWER   Last Norm Well ID   SaleST   Compare    | (ORS 537.765 & OAR 690-205-0210)                  |         |                    |                        |                   |  |  |          |   |               | START CARD# 1034377  |  |  |  |  |  |  |
|--|---|---------|--------------------|------------------------|-------------------|--|--|----------|---|---------------|--|--|--|--|--|--|--|
| First Name   | Instruction                                       | s for c | omple              | ting t                 | his report        |  |  |          |   |               | ORIGINAL LOG#  |  |  |  |  |  |  |
| Courte   Control   Control |   |         | ER                 |                        |                   |  |  |          |   |               | (9) LOCATION OF WELL (legal description)   |  |  |  |  |  |  |
| City   Deft   Concession   December   Dece   | First Name  |         |                    | ^                      | Las               | st Name                                    |  |          |   |               | County Marian Tun 10 Not Pance 3 For WWM   |  |  |  |  |  |  |
| City   Deft   Concession   December   Dece   | Company C   | Sp      | rey                | 50                     | rner              |  |  |          |   |               | County 114 161 1 1W 10 NOW Range 5 201 W W.W.  |  |  |  |  |  |  |
| 2) TVPE OF WORK  | City lo   | 20.     | 20%                | 11                     |                   | State                                      | 70   | 7in (    | 725                                     | 2             | Toy Man Number   |  |  |  |  |  |  |
| Alterition complete Sections 2 at 10   20 Abandormore (complete Section 5)   | City JI'  | 517     | OLI                |                        |                   | _ State _C                                 |  | Zip _    | 1133                                    | _             | Lot  |  |  |  |  |  |  |
| Alteration (complete Sections 2a & 10)   | (2) TYPE  | OF V    | VORE               | ( [                    | New               | ☐ Conver                                   | rsion  | ☐ Deep   | ening                                   |               | Lat Or DMS or DD   |  |  |  |  |  |  |
| Tab PRE-ALTERATION:   Well Depth   |   |         |                    |                        |                   |  |  |          | _                                       | ion 5a)       | Long DMS or DD   |  |  |  |  |  |  |
| Seal Material   Penderio   Pleasite   Other   Cashing Caupe   Cashing Caupe   Cashing Caupe   Cashing Diameter   Cashing Caupe   Cashing Diameter   Cashing Diameter   Cashing Diameter   Cashing Caupe   Cashing Diameter   Cashing Diameter   Cashing Diameter   Cashing Caupe   Cashing Material   Community   Cashing Well/Pro-Attention   Complexed Well   Cashing Cashing Well/Pro-Attention   Cashing Well/Pro-Attention   Complexed Well   Cashing Well/Pro-Attention   Cashing Well/Pro-Attent   |   |         |                    |                        |                   | 1  | Vella  | #b       | 74                                      | 4             | Street Address of Well (or pearest address) A Joy + +n 17201   |  |  |  |  |  |  |
| Casing Clauge  |   |         |                    | 4                      |                   | ,  | A CII IDC                                    | All      | <u>se</u>                               | n.            | Lucadie Rd SP Jefferson OD 97352   |  |  |  |  |  |  |
| Casing Clauge  |   |         |                    |                        |                   |  |  |          |   |               | WORTHER NO. JE , JETTER SOT, OR 11552  |  |  |  |  |  |  |
| Casing Dimeter   | Casing Ty   | pe:     |                    | teel                   | ☐ PI              | astic [                                    | Other_                                       |          |   | printernatura | (10) STATIC WATER LEVEL  |  |  |  |  |  |  |
| 3) DRILL METHOD   28 Rotary Air   Rotary Mod   Auger   Completed   Cable Mod   Reverse Rotary   Other   Community   Cable Mod   Reverse Rotary   Other   Community   Completed   Campleted   Camplet   | Casing Gau  | ige     |                    |                        | Ca                | sing Diam                                  | eter   |          |   |               |  |  |  |  |  |  |  |
| 3) DRILLMETHOD   | -   |         |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| Cable Mud   Reverse Rotary   Other   Flowing Artesian?   Yes Dry Holf:   Yes   WATER BEARING ZONES   Depth water was first found   Natural   Flowing Artesian?   Yes Dry Holf:   Yes   WATER BEARING ZONES   Depth water was first found   SWI. Date   From   To   Est Flow   SWI. (ps)   +    | (3) DRILI   | ME      | THO                | D                      | XI Rotary         | Air DR                                     | otary M                                      | ud 🗖     | Auger                                   |               |  |  |  |  |  |  |  |
| A) PROPOSED USE   Domestic   Domestic   Community   Livestock   Dewatering   Injection   Community   Livestock   Dewatering   Injection   Community   Livestock   Dewatering   Injection   Community   Computed Well   |   |         |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| PRIPOSED USE   Domestic   Domestic   Community   Injection   Community   Domestic        | Cable   | L Ca    | DIE MU             | u _                    | Reverse           | Rotary _                                   | Other_                                       |          |   |               |  |  |  |  |  |  |  |
| Industrial/Commercial   Livestock   Dewatering   Injection   Thermal   Other   | (4) PROP  | OSEI    | LISE               |                        | Domesti           | r Di Irri                                  | ation  | Псо      | mmunits                                 | ,             | WATER BEARING ZONES Depth water was first found  |  |  |  |  |  |  |
| Special Standard:   District      |   |         |                    |                        |                   |  |  |          |   |               | SWI, Date   From   To   Est Flow   SWI (nsi)   +   SWI (A)   |  |  |  |  |  |  |
| Second   S   |   |         |                    |                        | _                 |  | atoring                                      | ,        | Juon                                    |               | The state of the s |  |  |  |  |  |  |
| Depth of Completed Well  |   |         | E 00               |                        | _                 | 787  |  |          |   |               |  |  |  |  |  |  |  |
| BORE HOLE    B   |   |         |                    |                        |                   |  |  | rte.     |   |               |  |  |  |  |  |  |  |
| Die From To Material From To Amount (Schlabs)  8   | Depth of Co                                       | mplet   | ed Wel             | ·                      | Ø_f               | . Special S                                | tandard:                                     | Yes Yes  | (attach                                 | сору)         |  |  |  |  |  |  |  |
| Die From To Material From To Amount (Schlabs)  8   | RO  | RE H    | OLE                |                        |                   |  | SEA  | r.       |   |               |  |  |  |  |  |  |  |
| Secretarian   Control      | 1   |         |                    | 0 1                    | Mate              | erial   I                                  |  |          | mount                                   | Scks/lbs      |  |  |  |  |  |  |  |
| Material   From   To   Court Co   D   E   Country   Discription   To   Material   Size   Country   Discription   To   Material   Size   Country   Discription   To   Material   Size   Country   Discription   To   Gauge   Steel   Plastic   Welded   Thrd   Size   Discription   To   Gauge   Steel   Plastic   Welded   Thrd   SALEM, OP!   Date   Started   Discription   Started   Discription   Saleman   Size   Date   Size   Date   Size   Date   Size   Date    |   | -       |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| How was seal placed:   Method   A   B   C   D   E   Backfill placed from   ft to   ft. Material   Size   Backfill placed from   ft to   ft. Material   Size   Backfill placed from   ft. to   ft. Material   Size   Backfill placed from   ft. to   ft. Material   Size   Backfill placed from   ft. to   ft. Material   Size   Backfill placed Amount Proposed to be Used:   12.532 kS   sacks/lbs   sacks/lbs   sacks/lbs   Size   From   To   Gauge   Steel   Plastic   Welded   Thrd   SALEM; OR   Date Started   O.3-2.014   Completed   O03-2014   SALEM; OR   Date Started   O.3-2.014   Completed   O03-2014   Canbonded)   Water Well Constructor Certification   Certify that the work   performed on the construction, deepening, alteration, or abandonnent of this well is in compliance with Oregon water supply well constructions Method   Screens   Type   Material   Size   Size   Monded)   Water Well Constructor Certification   Certify that the work   performed on the construction, deepening, alteration, or abandonnent of this well is in compliance with Oregon water supply well construction standards. Materials and information reported above are true to the best of my knowledge and belief.   License Number   Well Constructor Certification   Construction standards. This report is true to the best of my knowledge and belief.   License Number   Well Constructor Certification   Construction standards. This report is true to the best of my knowledge and belief.   License Number   Well Constructor Certification   Construction standards. This report is true to the best of my knowledge and belief.   License Number   Well Construction standards. This report is true to the best of my knowledge and belief.   License Number   Well Construction standards. This report is true to the best of my knowledge and belief.   License Number   Well Construction standards. This report is true to the best of my knowledge and belief.   License Number   Well Construction standards. This report is true to the best of my knowledge and belief.   License Numbe       |   |         | 1                  |                        | LATINZ.           | -  | -  |          |   | AObadin.A.    | 1  |  |  |  |  |  |  |
| How was seal placed: Method   A   B   C   D   E   Durach   Method   A   B   C   D   Durach   B   Durach   A   Durach   B   Durach   Durach   B   Durach   |   |         |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| How was seal placed: Method   A   B   C   D   E   Backfill placed from   ft to   ft. Material   Size   Backfill placed from   ft to   ft. Material   Backfill placed |   |         |                    |                        |                   |  |  |          |   |               | Cient out well to 25'  |  |  |  |  |  |  |
| Backfill placed fromft_toft. Material  | Uam mag sa  | al alas | ad.                | Math                   | J 🗆               | Пр   | ПС   |          | ПЕ                                      |               | Privaced bootsouts   |  |  |  |  |  |  |
| Filter pack from   |   |         |                    |                        |                   | ПВ   | ПС   |          |   |               | Homisto Screen and   |  |  |  |  |  |  |
| Filter pack from   | M Other   | cou     | rea                | -OII                   | 4                 |  |  |          |   |               | Display of Filled  |  |  |  |  |  |  |
| Second   S   |   |         |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| Salandonnment Using Unhydrated Bentonite:   Calculated Amount Proposed to be Used:   12 5 acks   sacks/lbs   | Filter pack f                                     | rom _   |                    | ft. to                 | ft                | . Material                                 |  | Siz      | e                                       |               | RECEIVED BY OWR  |  |  |  |  |  |  |
| Calculated Amount Proposed to be Used: 12 Sacks sacks/bs  | 4.00  |         |                    |                        |                   |  |  |          |   |               | REGEIVED   |  |  |  |  |  |  |
| Actual Amount Used:   10½ Sack S   sacks/lbs   |   |         |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| Cass      |   |         |                    |                        |                   |  |  |          | saci                                    | ks/lbs        | DED 0 4 2020 00 10 10 2014   |  |  |  |  |  |  |
| Cang   Linr   Dia  | Actual Amo  | unt Us  | led:               |                        | 10%               | sack                                       | 5  |          |   | ks/lbs        | FED 0 5 7070   |  |  |  |  |  |  |
| Cang   Linr   Dia  |   |         |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| Date Started   D3-2014   Completed   D-C3-2014   |   |         |                    |                        |                   |  |  |          |   |               | SALEM OF   |  |  |  |  |  |  |
| Shoe   Inside   Outside   Other Location of shoe(s)   Temporary casing   Yes Diameter   From   To   To   To   To   To   To   To  | Csng Linr   | Dia     | +                  | From                   | To                | Gauge                                      | Steel  | Plastic  | Welded                                  | Thrd          | O/ILLIVI; OIT  |  |  |  |  |  |  |
| Shoe   Inside   Outside   Other Location of shoe(s)   Temporary casing   Yes Diameter   From   To   To   To   To   To   To   To  |   |         |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| Shoe   Inside   Outside   Other Location of shoe(s)   Temporary casing   Yes Diameter   From   To   To   To   To   To   To   To  |   |         |                    |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| Shoe   Outside   Other Location of shoe(s)   Temporary casing   Yes Diameter   From   To   abandonment of this well is in compliance with Oregon water supply well on the best of my knowledge and belief.    Contact Info (options)   From   To   Description   Amount   Units  |   |         |                    |                        |                   |  |  |          |   |               | Date Started 10-3-2014 Completed 10-03-2014  |  |  |  |  |  |  |
| Shoe   Outside   Other Location of shoe(s)   Temporary casing   Yes Diameter   From   To   abandonment of this well is in compliance with Oregon water supply well on the best of my knowledge and belief.    Contact Info (options)   From   To   Description   Amount   Units  |   |         |                    |                        |                   |  |  |          |   |               | ( A A A A A A A A A A A A A A A A A A A  |  |  |  |  |  |  |
| Temporary casing   | Shoe I Ins  | side [  | 7 Outs             | ide [                  | Other I           | ocation of s                               | hoe(s)                                       |          |   |               |  |  |  |  |  |  |  |
| construction standards. Materials used and information reported above are true to the best of my knowledge and belief.    Construction standards   |   |         |                    |                        |                   |  |  | Т        | 0                                       |               |  |  |  |  |  |  |  |
| Contact Info. (options)   Contact Info. (o   | . строи   | mig     | L. I               | - D                    |                   | ri(  | ,,,,   |          |   |               |  |  |  |  |  |  |  |
| Perforations Screens Type    Material  | (7) PERFO   | DRAT    | TONS               | SSCI                   | REENS             |  |  |          |   |               |  |  |  |  |  |  |  |
| Screen   Screen   Screen   Screen   Slot   # of pipe   Signed      |   |         |                    |                        |                   |  |  |          |   |               | 11.11  |  |  |  |  |  |  |
| Perf Scm Csng Linr   Dia   From   To   width   length   slots   size   |   |         |                    |                        |                   | M  | aterial                                      |          |   |               | License Number Pate  |  |  |  |  |  |  |
| Screen   Screen   Solot   Slot   From   To   Width   length   Slots   Size   Size   Chonded)   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.    WELL TESTS: Minimum testing time is   hour   | , ,   |         |                    |                        |                   | 1  |  |          | ,                                       | L             | 1/2/1/   |  |  |  |  |  |  |
| Perf Scm Csng Linr   Dia   From   To   width   length   slots   size   (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.    WELL TESTS: Minimum testing time is 1 hour   Flowing Artesian   Yield gal/min   Drawdown   Drill stem/Pump depth   Duration (hr)   Signed   Contact Info. (option)   Temperature   °F Lab analysis   Yes By   Water quality concerns?   Yes (describe below) TDS   Domes Drilling Output   Contact Info. (option)   Tones Drilling Output   Contact Info. (option)   Contact Info. (   | 1 1   |         |                    |                        |                   |  | Company of the second                        |          |   | 1             | Signed V   |  |  |  |  |  |  |
| 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.    WELL TESTS: Minimum testing time is 1 hour   |   | 1       | Sc                 |                        |                   | _  | N. A. S. |          | 100000000000000000000000000000000000000 |               |  |  |  |  |  |  |  |
| 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.    WELL TESTS: Minimum testing time is 1 hour   |   |         |                    | Jia                    | From              | To   | width  | length   | slots                                   | size          | 1 ,  |  |  |  |  |  |  |
| 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.    WELL TESTS: Minimum testing time is 1 hour   Pump   Bailer   Air   Flowing Artesian   Pied gal/min   Drawdown   Drill stem/Pump depth   Duration (hr)   | Perf Scm C  | Sng L   | inr I              | -                      |                   | 1  |  |          |   | -             |  |  |  |  |  |  |  |
| supply well construction standards. This report is true to the best of my knowledge and belief.    Signed   Sig | Perf Scm C  | Csng L  | inr [              |                        |                   |  | -  |          |   |               | apandonment work performed on this well during the construction dates reported   |  |  |  |  |  |  |
| (8) WELL TESTS: Minimum testing time is 1 hour   Pump  | Perf Scm C  | Csng L  | inr I              |                        |                   |  |  |          |   |               |  |  |  |  |  |  |  |
| WELL TESTS: Minimum testing time is 1 hour   Pump   Bailer   Air   Flowing Artesian   Yield gal/min   Drawdown   Drill stem/Pump depth   Duration (hr)   | Perf Scm C  | Csng L  | inr I              |                        |                   |  |  |          |   |               | above. All work performed during this time is in compliance with Oregon water  |  |  |  |  |  |  |
| Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)  Temperature °F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS 67 ppm From To Description Amount Units  License Number 1684 Date  Signed Contact Info. (options)  Jones Drilling Co Holling  29400 Sun Jones Proposition Flowy.  Lebanon, 68 97355   | Perf Scm C  | Csng L  | inr [              |                        |                   |  |  |          |   |               | 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  |  |  |  |  |  |  |
| Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)   Temperature °F Lab analysis   Yes By  |   |         |                    |                        | um testi          | ng time is                                 | 1 hour                                       |          |   |               | 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  |  |  |  |  |  |  |
| Temperature °F Lab analysis   Yes By   | (8) WELL  | TES     | TS: N              | linin                  |                   |  |  |          | sian                                    |               | above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  |  |  |  |  |  |  |
| Temperature °F Lab analysis   Yes By   | (8) WELL  | TES     | TS: N              | <b>1inin</b> iler      | □ A               | ir   | Flow   | ing Arte |   |               | above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  |  |  |  |  |  |  |
| Temperature °F Lab analysis   Yes By   | (8) WELL  | TES     | TS: N              | <b>1inin</b> iler      | □ A               | ir   | Flow   | ing Arte |   | hr)           | above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  License Number  |  |  |  |  |  |  |
| From To Description Amount Units Lebanon, of 97355   | (8) WELL  | TES     | TS: N              | <b>1inin</b> iler      | □ A               | ir   | Flow   | ing Arte |   | hr)           | above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  License Number  |  |  |  |  |  |  |
| From To Description Amount Units Lebanan, of 97355   | (8) WELL Pump Yield gal                           | TES'    | TS: M  Ba          | finin<br>iler<br>awdow | vn Drii           | ir<br>II stem/Pum                          | Flow   | ing Arte |   | hr)           | above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  License Number Date  Signed Contact Info. (optional)  |  |  |  |  |  |  |
| Lebanon, of 97355  | (8) WELL Pump Yield gal                           | TES'    | TS: N  Ba  Dra  oF | finimaliler awdow      | nalysis           | ir<br>Il stem/Pum                          | Flow   | ing Arte |   |               | 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 1084 Date  Signed Contact Info. (options)  |  |  |  |  |  |  |
|  | (8) WELL Pump Yield gal Temperature Water quality | TES'    | TS: M Ba           | finimaliler awdow      | nalysis (describe | ir<br>Il stem/Pum<br>Yes By _<br>below) TD | Flow p depth                                 | ing Arte | uration (                               | ppm           | 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 Date  Signed Contact Info. (optional)  Jones Drilling Orthon Huy   |  |  |  |  |  |  |
|  | (8) WELL Pump Yield gal Temperature Water quality | TES'    | TS: M Ba           | finimaliler awdow      | nalysis (describe | ir<br>Il stem/Pum<br>Yes By _<br>below) TD | Flow p depth                                 | ing Arte | uration (                               | ppm           | 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 1684 Date  Signed Contact Info. (optional)  Jones Dr. H. 1984 Lebanon, SR 97355  |  |  |  |  |  |  |
| SUBMITTER TO THE WATER RESOLUCES BEFARINGEN TO THE COLLEGE OF CONSTRUCTOR OF COMPLETION OF WORK 01/02/2009   | (8) WELL Pump Yield gal Temperature Water quality | TES'    | TS: M Ba           | finimaliler awdow      | nalysis (describe | ir<br>Il stem/Pum<br>Yes By _<br>below) TD | Flow p depth                                 | ing Arte | uration (                               | _ppm<br>its   | 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 1684 Date  Signed Contact Info. (options)  Jones Drilling 20 And.  29400 South and Huy.  Le banon, 68 97355  |  |  |  |  |  |  |

MARI 65448

STATE OF OREGON WATER SUPPLY WELL REPORT

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

FEB 0 4 WELL LABEL # L 113620

| SALEM   | START CARD # 1024376   |
|---|--|
| (1) LAND OWNER Owner Well I.D. 5456   | (9) LOCATION OF WELL (legal description)   |
|   |  |
| First Name Last Name Company Osprey Corner LLC  | County MARION Twp 10 S N/S Range 3 W E/W WM  |
| Address P.O. Box 717  | Sec 14 NW 1/4 of the SE 1/4 Tax Lot 300   Tax Map Number   Lot .   |
| City Jefferson State OR Zip 97352   | Tax Map Number Lot .  Lat ° ' " or DMS or DD   |
|   | Long o ' "or DMS or DD   |
| (2) TYPE OF WORK New Well Deepening Conversion  Alteration (repair/recondition) Abandonment   | Street address of well Nearest address   |
|   | next to 17301 Weddle Rd. SE, Jefferson, OR 97352   |
| (3) DRILL METHOD  Rotary Air Rotary Mud Cable Auger Cable Mud   | (10) STATIC WATER LEVEL  |
| Reverse Rotary Other  |  |
| (4) PROPOSED USE Domestic Irrigation Community  | Existing Well / Predeepening Completed Well 09-19-2014 10  |
| Industrial/ Commercial Livestock Dewatering   | Flowing Artesian? Dry Hole?  |
| Thermal Injection Other   | WATER BEARING ZONES Depth water was first found 10   |
| (5) BORE HOLE CONSTRUCTION Special Standard Attach copy   |  |
| Depth of Completed Well 60 ft.  | 09-19-2014 10 19 50 10   |
| BORE HOLE SEAL sacks/   | 09-19-2014 20 45 500 10  |
| Dia From To Material From To Amt lbs  |  |
| 16 0 59 Bentonite 0 19 30 S   |  |
|   | THE LOC  |
|   | (11) WELL LOG Ground Elevation   |
| How was seal placed: Method A B C D E   | Material From To   |
| ➤ Other Poured dry  | Topsoil   0   2     Brown clay   2   7   |
| Backfill placed fromft. toft. Material  | Sand and gravel 7 19   |
| Filter pack from ft. to ft. Material Size   | Small sand and gravel 19 30  |
| Explosives used: Yes Type Amount  | Medium cemented sand and gravel 30 45  |
| (6) CASING/LINER  | Blue claystone 45 50   |
| Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd   | Brown clay with gray claystone 50 55 Red clay 55 60  |
| ● ○ 12 × 2 59 250 ● ○ ×   | Red clay   55   60   |
|   | Gravel naturally caved from 19' to 45'   |
| R + H + H + H + H + H + H + H + H + H +   | RECEIVED BY OWF  |
| R A H H H H K A H H   | JONES DRILLING CO., INC.   |
| Shoe Inside Outside Other Location of shoe(s)   | COLOR CLASSES AND VALVEY   |
|   |  |
| Temp casing Yes Dia From To   | LEBANON, OR 97355  |
| (7) PERFORATIONS/SCREENS  Perforations Method Torob cut   | 541-367-2560 541-451-2686 SALEM, OR  |
| Perforations Method Torch cut Screens Type Material   | 1-800-915-8388 SALLIVI, OTT  |
| THE REPORT OF THE PARTY OF THE |  |
| Perf/S Casing/ Screen Scrn/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size  | Date Started 09-17-2014 Completed 09-19-2014   |
| Perf         Casing         12         19         59         .375         12         400  | (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. |
| (8) WELL TESTS: Minimum testing time is 1 hour  | License Number 1888 Date 09-25-2014  |
|   | Password: (if filing electronically)   |
| Pump Bailer   | Signed Man Millett   |
| 500   58   1  | (bonded) Water Well Constructor Certification  |
|   | I accept responsibility for the construction, deepening, alteration, or abandonmen                                     |
|   | work performed on this well during the construction dates reported above. All work                                     |
| Temperature 52 °F Lab analysis Yes By   | performed during this time is in compliance with Oregon water supply well  |
| Water quality concerns? Yes (describe below)  | construction standards. This report is true to the best of my knowledge and belief.                                    |
| From To Description Amount Units  | License Number 1684 Date 09-25-2014  |
|   | Password : (if filing electronically)  |
|   | Signed Contact Info (optional) (onesdefining@hotmail.com   |
| ORIGINAL - WATER RESOURCES D  | EPARTMENT 4/0  |
| THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTM  | IENT WITHIN 30 DAY OF COMPLETION OF WORK Form Version: 0.95  |

## Business Registry Business Name Search

New Search Business Entity Data 01-30-2020 13:17

| Registry Nbr | <b>Entity Type</b>       | Entity<br>Status | Jurisdiction | Registry Date | Next Renewal<br>Date | Renewal Due? |
|--------------|--------------------------|------------------|--------------|---------------|----------------------|--------------|
| 1017056-97   | 17056-97 FLLC ACT PENNSY |                  | PENNSYLVANIA | 05-07-2014    | 05-07-2020           |              |
| Entity Name  | OSPREY COR               | NER LLC          |              |               |                      |              |
| Foreign Name |                          |                  |              |               |                      |              |

#### **New Search**

### **Associated Names**

| Туре   | PPB PRINCIPAL PLACE OF BUSINESS |    |       |  |         |               |            |  |
|--------|---------------------------------|----|-------|--|---------|---------------|------------|--|
| Addr 1 | 2701 GUINOTTE AVE               |    |       |  |         |               |            |  |
| Addr 2 |                                 |    |       |  |         |               |            |  |
| CSZ    | KANSAS CITY                     | MO | 64120 |  | Country | UNITED STATES | OF AMERICA |  |

Please click here for general information about registered agents and service of process.

| Туре      | AGT REGISTERE                         | D AGE | NT    |  | Start Date | 05-07-2014    | Resign Date |  |
|-----------|---------------------------------------|-------|-------|--|------------|---------------|-------------|--|
| Of Record | 158720-88 CORPORATION SERVICE COMPANY |       |       |  |            |               |             |  |
| Addr 1    | 1127 BROADWAY STREET NE STE 310       |       |       |  |            |               |             |  |
| Addr 2    |                                       |       |       |  |            |               |             |  |
| CSZ       | SALEM                                 | OR    | 97301 |  | Country    | UNITED STATES | OF AMERICA  |  |

| Туре   | MAL MAILING | ADDRE | SS    |         |               |            |  |
|--------|-------------|-------|-------|---------|---------------|------------|--|
| Addr 1 | PO BOX 4967 |       |       |         |               |            |  |
| Addr 2 |             |       |       |         |               |            |  |
| CSZ    | KANSAS CITY | МО    | 64120 | Country | UNITED STATES | OF AMERICA |  |

| Туре   | MGR MANAGER |    |       |    | Resign Date |              |               |  |  |
|--------|-------------|----|-------|----|-------------|--------------|---------------|--|--|
| Name   | SHONDA      |    | WARN  | ER |             |              |               |  |  |
| Addr 1 | PO BOX 4967 |    |       |    |             |              |               |  |  |
| Addr 2 |             |    |       |    |             |              |               |  |  |
| CSZ    | KANSAS CITY | MO | 64120 |    | Country     | UNITED STATE | ES OF AMERICA |  |  |

**New Search** 

## Name History

| Business Entity Name | Name<br>Type | Name<br>Status | Start Date | End Date |
|----------------------|--------------|----------------|------------|----------|
| OSPREY CORNER LLC    | EN           | CUR            | 05-07-2014 |          |

#### Please read before ordering Copies.

**New Search** 

#### **Summary History**

|                    |                                       |                     | 2                 | 2             |                      |              |
|--------------------|---------------------------------------|---------------------|-------------------|---------------|----------------------|--------------|
| Image<br>Available | Action                                | Transaction<br>Date | Effective<br>Date | <u>Status</u> | Name/Agent<br>Change | Dissolved By |
| <b>(E)</b>         | AMENDED ANNUAL REPORT                 | 04-03-2019          |                   | FI            |                      |              |
| (E)                | AMENDED ANNUAL REPORT                 | 04-13-2018          |                   | FI            |                      |              |
|                    | AMENDED ANNUAL REPORT                 | 03-30-2017          |                   | FI            |                      |              |
| •                  | AMENDED ANNUAL REPORT                 | 03-24-2016          |                   | FI            |                      |              |
| <b>(</b>           | AMENDED ANNUAL REPORT                 | 04-20-2015          |                   | FI            |                      |              |
|                    | CHANGE OF REGISTERED<br>AGENT/ADDRESS | 03-24-2015          |                   | FI            |                      | ECEIVED      |
| E                  | APPLICATION FOR<br>AUTHORITY          | 05-07-2014          |                   | FI            | Agent                | EED 0.4 2020 |

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13362 - OWRD

# Narrative for GR 1260, GR 2193, and GR 207 Groundwater Registration Modification Applications:

This narrative is intended to add clarification of the reasoning used for mapping done in conjunction with the following three applications:

#### **GR 1260**

I have chosen to use the original mapping for this GR which uses Section 13/14 as its East boundary line because the 19.0 acre footprint fits within the NE 1/4 NE 1/4 and matches up with GR 2193 to the South.

#### **GR 2193**

I have chosen to use Weddle Road as the East boundary of this GR for mapping as opposed to the Section 14 line for the following reasons:

 A Well's property deed (Reel 674 Page 94) from the time of the claim filing was found in the OWRD file which described the East boundary of the Well's property as Weddle Road. By using Weddle Rd., the acreage footprints of 17 ac. in the NENE and 8 ac. in the SENE fit the property intended to be covered by the claim. The North line of GR 2193 matches up to GR 1260.

#### **GR 207**

I feel that on the original GR claim, it was thought that the section line was on Weddle Rd. We have based our mapping on this fact and offer the following reasons for doing so:

- By using Weddle Rd., the East 45 acres of GR 207 fit the John Wells property footprint. If we
  used the section line, it would push the GR footprint to the East onto neighboring property.
- On the Registration Statement document for GR 207, on each of the four map pages (GR 192C, GR 192G, GR 192K, GR 192O) there is a notation "see enclosed map". We found the attached map in the OWRD GR 207 file folder. This map shows the GR footprint outlined in red and the dividing line between the West and East 45 acre portions as Weddle Rd.
- This map also shows well sites 1, 2, 3, and 4 marked in red which fits what we found while on a site visit to the farm. For example, on page GR 192D of the Registration Statement document, pump site Well 2 is shown 2600' S and 20' W from the NE corner of Section 14. On the ground, the well is 20' W of Weddle Rd.

William E. McGill, CWRE

William E. M. Sill

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