



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

# 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.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Completed Applicant Information and Signature.
- 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).
- Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- 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 **not** the registration certificate holder of record. The Request for Assignment Form is available at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>.  
 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.) **or** 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 **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.

(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"/> Assignment Form and fee not enclosed/insufficient
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> Part _____ is incomplete

Other/Explanation \_\_\_\_\_

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 not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.**

- 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 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.
- 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-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 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-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 3 of 4 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>Osprey Corner LLC</b>		PHONE NO. <b>505-400-3397</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>PO Box 4967</b>		FAX NO.	
CITY <b>Kansas City</b>	STATE <b>MO</b>	ZIP <b>64120</b>	E-MAIL <b>shonda@chesscapitalpartners.com</b>
<b>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.</b>			

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

APPLICANT/BUSINESS NAME <b>Will McGill Surveying, LLC</b>		PHONE NO. <b>503-510-3026</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>15333 Pletzer Rd. SE</b>		FAX NO.	
CITY <b>Turner</b>	STATE <b>OR</b>	ZIP <b>97392</b>	E-MAIL <b>willmcgill.surveying@gmail.com</b>
<b>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.</b>			

Explain in your own words what you propose to accomplish with this modification; and why:  
*This application proposes to add the North Well and South Well as APOAs to GR 1260 and move some of GR 1260 to established crop areas.*

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)

(Check one box)

- By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a);  
**OR**
- I (we) affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

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I understand that prior to Department approval of the groundwater registration modification, 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 groundwater registration 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 paper: Scio Tribune.

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

Applicant Signature

Print Name (and Title if applicable)

Date

Applicant Signature

Print Name (and Title if applicable)

Date

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.*

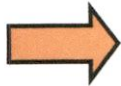
**Check the appropriate box, if applicable:**

Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

Check here if water for the Groundwater registration is supplied under a water service agreement or other contract 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 <b>Marion County</b>	ADDRESS <b>5155 Silverton Rd. NE</b>	
CITY <b>Salem</b>	STATE <b>OR</b>	ZIP <b>97305</b>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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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 or Number	Is this POA Authorized by the registration or is it Proposed?	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)
Pump Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 16286	10	S	3	W	14	NE	NE	100	340' S and 480' W from the NE corner of Section 14
North Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 65465	10	S	3	W	14	NE	NE	200	1190' S and 800' W from the NE corner of Section 14
South Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 65448	10	S	3	W	14	SE	NE	300	2560' S and 1210' W from the NE corner of Section 14

Check all type(s) of modifications(s) proposed below (modification "CODES" are provided in parentheses):

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation (well) (POA)                 |
| <input type="checkbox"/> Character of Use (USE)        | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |

Will all of the proposed changes affect the entire Groundwater registration?

- 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 registration to be changed.

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**Table 2. Description of Modifications to Registration GR-1260 (Certificate # GR-1216)**

AUTHORIZED (the "from" or "off" lands)											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands)														
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POA(s) to be used (from Table 1)	Priority Date				
10	S	3	W	14	NE	NE	100/ 4100/ 2200/ 2400	19	Irrigation	Pump Well	1940	10	S	3	W	14	NE	NE	4100/ 2200/ 2400	9.3	Irrigation	Pump Well	1940			
TOTAL ACRES							19	TOTAL ACRES							19											

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Additional remarks:

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**Groundwater Registration # GR-1260 (Certificate # GR-1216)**

**For a modification in place of use or character of use:**

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

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:



Pursuant to OAR 690-382-0200, any “layered” water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the “to” lands must be filed separately with a Groundwater registration modification.

**For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:**

Well log(s) are attached for each well 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/](http://apps.wrd.state.or.us/apps/gw/well_log/))

**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 adequate information is likely to delay the processing of your modification 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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STATE ENGINEER  
Salem, Oregon

MARION  
Nezelle

# Well Record

GR- 1216

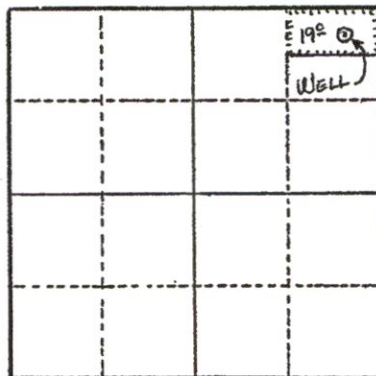
Pump Well  
STATE WELL NO. 10/3W-14A  
COUNTY Marion  
APPLICATION NO. GR-1260

OWNER: W. A. & Goldie M. Stephenson MAILING ADDRESS:

LOCATION OF WELL: Owner's No. CITY AND STATE: Jefferson, Oregon

NE 1/4 NE 1/4 Sec. 14 T. 10 S., R. 3 W., W.M.

Bearing and distance from section or subdivision  
corner 340' S. & 480' W. from NE cor. Sec. 14.



Section 14

Altitude at well 205 ft.

TYPE OF WELL: Drilled Date Constructed 1940

Depth drilled 26 ft. Depth cased 26 ft.

### CASING RECORD:

8 inch

### FINISH:

### AQUIFERS:

### WATER LEVEL:

14 ft.

PUMPING EQUIPMENT: Type Pacific 2 in. Cent. H.P. 10  
Capacity 200 G.P.M.

### WELL TESTS:

Drawdown ft. after hours G.P.M.  
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F. 19

SOURCE OF INFORMATION G. R. Record

DRILLER or DIGGER

### ADDITIONAL DATA:

Log N.A. Water Level Measurements Chemical Analysis Aquifer Test

### REMARKS:

Irrigation of 19 acres.

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STATE OF OREGON WATER SUPPLY WELL REPORT

(ORS 537.765 & OAR 690-205-0210)

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

WELL LABEL # L \_\_\_\_\_

START CARD # 1024377

ORIGINAL LOG # \_\_\_\_\_

(1) LANDOWNER Owner Well I.D. 5457
First Name \_\_\_\_\_ Last Name \_\_\_\_\_
Company Osprey Corner
Address P.O. Box 717
City Jefferson State OR Zip 97352

(2) TYPE OF WORK [ ] New [ ] Conversion [ ] Deepening
[ ] Alteration (complete Sections 2a & 10) [X] Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth 0 ft.
Seal Material Bentonite
Casing Type: [ ] Steel [ ] Plastic [ ] Other \_\_\_\_\_
Casing Gauge \_\_\_\_\_ Casing Diameter \_\_\_\_\_

(3) DRILL METHOD [X] Rotary Air [ ] Rotary Mud [ ] Auger
[ ] Cable [ ] Cable Mud [ ] Reverse Rotary [ ] Other \_\_\_\_\_

(4) PROPOSED USE [ ] Domestic [X] Irrigation [ ] Community
[ ] Industrial/Commercial [ ] Livestock [ ] Dewatering [ ] Injection
[ ] Thermal [ ] Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 0 ft. Special Standard: [X] Yes (attach copy)

Table with columns: Dia, From, To, Material, From, To, Amount, Scks/lbs. Row 1: 8, 0, 25, Bentonite, 0, 25, 9, sacks

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[X] Other Poured dry
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_
Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: 12 sacks sacks/lbs
Actual Amount Used: 10 1/2 sacks sacks/lbs

(6) CASING/LINER Table with columns: Casing/Linr, Dia, +, From, To, Gauge, Steel, Plastic, Welded, Thrd

Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s) \_\_\_\_\_
Temporary casing [ ] Yes Diameter \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS Table with columns: Perf, Scrm, Casing, Linr, Screen Dia, From, To, Screen/slot width, Slot length, # of slots, Tele/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) \_\_\_\_\_

Temperature \_\_\_\_\_ °F Lab analysis [ ] Yes By \_\_\_\_\_
Water quality concerns? [ ] Yes (describe below) TDS 67 ppm
From \_\_\_\_\_ To \_\_\_\_\_ Description \_\_\_\_\_ Amount \_\_\_\_\_ Units \_\_\_\_\_

(9) LOCATION OF WELL (legal description)
County Marion Twp 10 N or (S) Range 3 E or (W) W.M.
Sec 14 NW 1/4 of the SE 1/4 Tax Lot 300
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_
Lat \_\_\_\_\_ ' \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD
Long \_\_\_\_\_ ' \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Street Address of Well (or nearest address) Next to 17301
Wardle Rd. SE, Jefferson, OR 97352

(10) STATIC WATER LEVEL Table with columns: Date, SWL (psi), +, SWL (ft)

WATER BEARING ZONES Table with columns: SWL Date, From, To, Est Flow, SWL (psi), +, SWL (ft)

(11) WELL LOG Ground Elevation \_\_\_\_\_
Material From To
Covered hose in to
Cleanout well to 25'
Poured bentonite
through screen and
probed as filled

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OCT 10 2014
SALEM, OR

Date Started 10-3-2014 Completed 10-03-2014

(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 1411 Date \_\_\_\_\_
Signed [Signature]

(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 11084 Date \_\_\_\_\_
Signed [Signature]

Contact Info. (optional)
Jones Drilling Co., Inc.
29400 Southbark Hwy.
Lebanon, OR 97355
1 800 915 8388 jonesdrilling@hotmail.com

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

SEP 30 2014

WELL LABEL # L 113620

START CARD # 1024376

SALEM, OR

(1) LAND OWNER Owner Well I.D. 5456  
First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Company Osprey Corner LLC  
Address P.O. Box 717  
City Jefferson State OR Zip 97352

(9) LOCATION OF WELL (legal description)  
County MARION Twp 10 S N/S Range 3 W E/W WM  
Sec 14 NW 1/4 of the SE 1/4 Tax Lot 300  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address  
next to 17301 Weddle Rd. SE, Jefferson, OR 97352

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

(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 \_\_\_\_\_

(10) STATIC WATER LEVEL Date \_\_\_\_\_ SWL(psi) + SWL(ft)  
Existing Well / Predeepening \_\_\_\_\_  
Completed Well 09-19-2014 \_\_\_\_\_ 10  
Flowing Artesian?  Dry Hole?

(5) BORE HOLE CONSTRUCTION Special Standard  (Attach copy)  
Depth of Completed Well 60 ft.

WATER BEARING ZONES Depth water was first found 10

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
09-19-2014	10	19	50		10
09-19-2014	20	45	500		10

BORE HOLE SEAL sacks/ lbs

Dia	From	To	Material	From	To	Amt	lbs
16	0	59	Bentonite	0	19	30	S

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 \_\_\_\_\_

(11) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To
Topsoil	0	2
Brown clay	2	7
Sand and gravel	7	19
Small sand and gravel	19	30
Medium cemented sand and gravel	30	45
Blue claystone	45	50
Brown clay with gray claystone	50	55
Red clay	55	60
Gravel naturally caved from 19' to 45'		

JONES DRILLING CO., INC.  
29400 SANTIAM HWY.  
LEBANON, OR 97355  
541-367-2560 541-451-2686  
1-800-915-8388

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	12	<input checked="" type="checkbox"/>	2	59	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_  
Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS  
Perforations Method Torch cut  
Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf	Casing	Screen	Liner	Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/ pipe size
				12	19	59	.375	12	400	

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
500		58	1

Temperature 52 °F Lab analysis  Yes By \_\_\_\_\_  
Water quality concerns?  Yes (describe below)  
From \_\_\_\_\_ To \_\_\_\_\_ Description \_\_\_\_\_ Amount \_\_\_\_\_ Units \_\_\_\_\_

Date Started 09-17-2014 Completed 09-19-2014

(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 1888 Date 09-25-2014  
Password: (if filing electronically) \_\_\_\_\_  
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 1684 Date 09-25-2014  
Password: (if filing electronically) \_\_\_\_\_  
Signed \_\_\_\_\_  
Contact Info (optional) jonesdrilling@hotmail.com

## Business Registry Business Name Search

[New Search](#)

## Business Entity Data

01-30-2020 13:17

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

[New Search](#)

## Associated Names

Type	PPB	PRINCIPAL PLACE OF BUSINESS					
<b>Addr 1</b>	2701 GUINOTTE AVE						
<b>Addr 2</b>							
<b>CSZ</b>	KANSAS CITY	MO	64120		<b>Country</b>	UNITED STATES OF AMERICA	

Please click [here](#) for general information about registered agents and service of process.

Type	AGT	REGISTERED AGENT		Start Date	05-07-2014	Resign Date	
<b>Of Record</b>	158720-88	CORPORATION SERVICE COMPANY					
<b>Addr 1</b>	1127 BROADWAY STREET NE STE 310						
<b>Addr 2</b>							
<b>CSZ</b>	SALEM	OR	97301		<b>Country</b>	UNITED STATES OF AMERICA	

Type	MAL	MAILING ADDRESS					
<b>Addr 1</b>	PO BOX 4967						
<b>Addr 2</b>							
<b>CSZ</b>	KANSAS CITY	MO	64120		<b>Country</b>	UNITED STATES OF AMERICA	

Type	MGR	MANAGER			Resign Date	
<b>Name</b>	SHONDA		WARNER			
<b>Addr 1</b>	PO BOX 4967					
<b>Addr 2</b>						
<b>CSZ</b>	KANSAS CITY	MO	64120		<b>Country</b>	UNITED STATES OF AMERICA







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## Name History

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

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## Summary History

Image Available	Action	Transaction Date	Effective Date	Status	Name/Agent Change	Dissolved By
	AMENDED ANNUAL REPORT	04-03-2019		FI		
	AMENDED ANNUAL REPORT	04-13-2018		FI		
	AMENDED ANNUAL REPORT	03-30-2017		FI		
	AMENDED ANNUAL REPORT	03-24-2016		FI		
	AMENDED ANNUAL REPORT	04-20-2015		FI		
	CHANGE OF REGISTERED AGENT/ADDRESS	03-24-2015		FI		RECEIVED
	APPLICATION FOR AUTHORITY	05-07-2014		FI	Agent	FEB 04 2020

Feb. 4, 2020

**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 ¼ NE ¼ 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*

William E. McGill, CWRE

RECEIVED

FEB 04 2020

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