Application for Water Right Temporary or Drought Temporary Transfer



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

Part 1 of 5 – Minimum Requirements Checklist

This temporary transfer 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.

EOR.	ALL T	FMPORA	RV TRANSFER	APPLICATIONS	

		RECEIVED	
Ch	eck all item	s included with this application. (N/A = Not Applicable)	
\boxtimes		Part 1 – Completed Minimum Requirements Checklist. MAR 1 1 2020	
\boxtimes		Part 2 – Completed Temporary Transfer Application Map Checklist.	
\boxtimes		Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, an	d
		completed Fee Worksheet, page 3. Try the 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.	
\boxtimes		Part 5 – Information about Transferred Water Rights: How many water rights are to be transferred? 1 List them here: 87373	
		Please include a separate Part 5 for each water right. (See instructions on page 6)	
\boxtimes	□ N/A	For standard Temporary Transfer (one to five years) Begin Year: 2020 End Year: 2020.	
	⋈ N/A	Temporary Drought Transfer (Only in counties where the Governor has declared drought)	
Att	achments:		
\boxtimes		Completed Temporary Transfer Application Map.	
\boxtimes		Completed Evidence of Use Affidavit and supporting documentation.	
\boxtimes		Current recorded deed for the land from which the authorized place of use is temporarily	
		being moved.	
\boxtimes	□ N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land upon	
		which the water right is located.) *See Page 4 of Application for Landowner Consent	
		Signature	
\boxtimes	☐ N/A	Supplemental Form D – For water rights served by or issued in the name of a district.	
	□ N/A	Complete when the temporary transfer applicant is not the district.	
\boxtimes	☐ N/A	Oregon Water Resources Department's Land Use Information Form with approval and signature (o signed land use form receipt stub) from each local land use authority in which water is to be	r
		diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used or	ıly
		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.	
\boxtimes	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s)	
		of appropriation (if necessary to convey water to the proposed place of use).	
		(For Staff Use Only)	
		WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
		Application fee not enclosed/or is insufficient Map not included or incomplete	
		Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete	
		Other/Explanation 1999 -	
	Revised 5/13/	Staff: 503-986-0 Date: / / 1000 TA	22

Part 2 of 5 - Temporary Transfer Application Map Checklist

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

Please be sure that the temporary transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

	⋈ N/A	If more than three water rights are involved, separate maps are need	ded for each water i	right.
\boxtimes		Permanent quality printed with dark ink on good quality paper.		
\boxtimes		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches. For 30×30 inch maps, one extra copy is required.	RECEIVED X	30
\boxtimes		A north arrow, a legend, and scale.	MAR 1 1 2020	
\boxtimes		The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet Proof/Claim of Beneficial Use Map (the map used when the permit scale of the county assessor map if the scale is not smaller than 1 in scale that has been pre-approved by the Department.	was certificated); the	he
\boxtimes		Township, Range, Section, ¼ ¼, DLC, Government Lot, and other resurvey lines.	cognized public land	d
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers a	re recommended.	
\boxtimes		Major physical features including rivers and creeks showing direction reservoirs, roads, and railroads.	on of flow, lakes and	d
\boxtimes		Major water delivery system features from the point(s) of diversion main pipelines, canals, and ditches.	/appropriation sucl	h as
		Existing place of use that includes separate hachuring for each water and use including number of acres in each quarter-quarter section, each quarter-quarter section as projected within government lots, other recognized public land survey subdivisions. If less than the entire is being changed, a separate hachuring is needed for lands left unchanged.	government lot, or donation land claim ntirety of the water	in is, or
	□ N/A	Proposed temporary place of use that includes separate hachuring priority date, and use including number of acres in each quarter-quarterment lot, or in each quarter-quarter section as projected with donation land claims, or other recognized public land survey subdiving	arter section, hin government lot	
		Existing point(s) of diversion or well(s) with distance and bearing or recognized survey corner. This information can be found in your warpermit.		
	□ N/A	If you are proposing a change in point(s) of diversion or well(s) to contemporary place of use, show the proposed location and label it clearing or coordinates. If GPS coordinates are used, latitude-longity expressed as either degrees-minutes-seconds with at least one digit (example $-42^{\circ}32'15.5''$) or degrees-decimal with five or more digit (example -42.53764°).	arly with distance a ude coordinates ma t after the decimal	and
	Revised 5/13/	/2019 Temporary Transfer Application – Page 2 of 9		TAC

Part 3 of 5 - Fee Worksheet

WORKSHEET for TEMPORARY (not drought) TRANSFEI emporary change to one water right for up to 1 cfs)	RS		
emporary change to one water right for up to 1 cfs)			
emperary enange to one mater ngmerer up to a every		1	\$810.00
ghts included in transfer: <u>1 (2a)</u>			
e number in 3a above: 0 (2b) If only one water right this	will be 0		
\$260.00 and enter » » » » » » » » » » »	»	2	0
change the place of use for a non-irrigation use?			
line 3 » » » » » » » » » » » » » » » » » »			
cfs for the portions of the rights to be transferred:	(3a)		
Subtract 1.0 from the number in 3a above:	(3b)		
0 on line 3 » » » » » » » » » » » » » » »	»		
than 0, round up to the nearest whole number:	(3c)		
c by \$200.00, then enter on line 3		3	0
change the place of use for an irrigation use?			
line 4 » » » » » » » » » » » » » » » » » »			
number of acres for the portions of the rights to be			
<u>29.5 (4a)</u>			
number of acres in 4a above by \$2.30 and enter on line	e 4 » »	4	\$ 67.85
1 through 4 above » » » » » » » » » » Su	ubtotal:	5	\$ 877.85
omplete a project funded by the Oregon Watershed			
Board (OWEB) under ORS 541.932?			
iting by ODFW as a change that will result in a net ber	efit to		
habitat?			
s is checked, multiply line 5 by 0.5 and enter on line 6	»		
le, enter 0 on line 7» » » » » » » » » » » »	»	6	0
line 5 » » » » » » » » » » » Transfer Fee	:	7	\$ 877.85
	change the place of use for a non-irrigation use? line 3 » » » » » » » » » » » » » » » » » »	the number in 3a above: O (2b) If only one water right this will be 0 y \$260.00 and enter >> > > > > > > > > > > > > > > > > >	ghts included in transfer: 1 (2a) the number in 3a above: 0 (2b) If only one water right this will be 0 y \$260.00 and enter » » » » » » » » » » » » » » change the place of use for a non-irrigation use? line 3 » » » » » » » » » » » » » » » » » »

	FEE WORKSHEET for TEMPORARY DROUGHT TRANSFERS		
1	Base Fee (includes drought application and recording fee for up to 1 cfs)	1	\$200.00
	Enter the cfs for the portions of the rights to be transferred (see example below*):		
	(2a)		
	Subtract 1.0 from the number in 2a above:(2b)		
	If 2b is 0, enter 0 on line 2 » » » » » » » » » » » » » » »		
	If 2b is greater than 0, round up to the nearest whole number:(2c)		
2	and multiply 2c by \$50, then enter on line 2 » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » » » » » Transfer Fee:	3	

^{*}Example for Line 2a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

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



RECEIVED

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Farmland Reserve, Inc.			(509) 734-1195	
ADDRESS				FAX NO.
PO Box 2308				
CITY	STATE	ZIP	E-MAIL	
Pasco	WA	99302		
BY PROVIDING AN E-M	AIL ADDRESS, CONSE	NT IS GIVEN TO RE	CEIVE ALL CORRESPONDENC	E FROM THE DEPARTMENT
ELECTRONICALLY. COP	IES OF THE FINAL ORD	DER 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 Jens Rasmussen			PHONE NO. (509) 820-3234	ADDITIONAL CONTACT NO.
ADDRESS		(000) 000	FAX NO.	
(same)				
CITY	STATE	ZIP	E-MAIL	
			jrasmussen@agrin	w.com
BY PROVIDING AN E-N	AAIL ADDRESS, CONSE	NT IS GIVEN TO	RECEIVE ALL CORRESPONDENC	CE FROM THE DEPARTMENT
			S WILL ALSO BE MAILED.	

Explain in your own words what you propose to accomplish with this transfer application and why: Irrigate certain lands using Cert. 87373, which is leased from Vernon Cook

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

Land Owner Information

AGENT/BUSINESS NAME Verdon, LLC (Vernon Cook)			PHONE NO. (541) 571-7784	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
34801 HWY 320				
CITY	STATE	ZIP	E-MAIL	
Echo	OR	97826	vernon123@centur	rytel.net

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

Applicant signature	Patrick Tolman, Vice President Print Name (and Title if applicable)	for Farmland Reserve, Inc.	3/6/202 Date
Land Owner signature	Print Name (and Title if applicable)	Date	
the applicant the sole owner	of the land on which the water right	t, or portion thereof, pro	posed for

transfer is located?
Yes No

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

RECEIVED

MAR 1 1 2020



Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Farmland Reserve, Inc.			(509) 734-1195	
ADDRESS				FAX NO.
PO Box 2308				
CITY	STATE	ZIP	E-MAIL	
Pasco	WA	99302		

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

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Jens Rasmussen			(509) 820-3234	
ADDRESS				FAX NO.
(same)				6
CITY	STATE	ZIP	E-MAIL	
			jrasmussen@agr	inw.com
BY PROVIDING AN E-I	MAIL ADDRESS, CONSEN	IT IS GIVEN TO	RECEIVE ALL CORRESPONDE	NCE FROM THE DEPARTMENT
			S WILL ALSO BE MAILED.	

Explain in your own words what you propose to accomplish with this transfer application and why: Irrigate certain lands for a period of two years or until a permanent change can be completed

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

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

	Patrick Tolman, Vice Preside	nt for Farmland Reserve, Inc.	
Applicant signature	Print Name (and Title if applicable)		Date
L. Dernon Cook Applicant signature	Print Name (and Title if applicable)	$\frac{g_{-2}}{2}$	

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located?

✓ Yes

No

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

> RECEIVED MAR 1 1 2020 OWRD

☑ Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (NOTE: If this box is checked, you must complete and attach Supplemental Form D.)

DISTRICT NAME	ADDRESS					
Echo Irrigation District	PO Box 2308					
CITY	STATE	ZIP				
Pasco	WA	99302				

☐ Check here if water for any of the rights 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 and/or used.

ENTITY NAME	ADDRESS							
Umatilla County	216 SE Fourth Street							
CITY	STATE	ZIP						
Pendleton	OR	97818						

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

RECEIVED

MAR 1 1 2020

OWRD

13392 -

Part 5 of 5 – Water Right Information

							CE	RTIFIC	CATE	#				
						Wa	ater I	Right C	Certif	icate	# <mark>8737</mark> 3			
	Descrip	tion o	f Water De	iver	y Sys	tem						RECEIVED		
	System	capac	ity: <u>0.40</u> co	ubic	feet	per s	ecor	nd (cfs)	OR			MAR 1 1 2020		
				gall	ons p	er m	inute	e (gpm)			OWRD		
	five yea	rs. Inc	lude inform water at th	in place at some time within the last I sprinklers used to divert, convey, com a well with a 20 hp rrigation system										
(Not							•			-		n (POD) or Appropriation (POA) name or number here.)		
POD/POA Name or Number	Is this POI Authorize the Certi or is Propos	ed on ficate it	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Т	wp	R	ng	Sec	7/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)		
Cook Well #4	☐ Author		UMAT 2515	4	N	28	E	24	SE	NE	107	660' N & 670' W from E1/4 cor. Sec. 24		
Seibel Well	☐ Author		UMAT 54154	3	N	29	E	9	SE	s W	3600	380' N & 3120' W from SE cor., Sec. 9		
	Author													
	☐ Propos								-					
	□ Propos													
	Check a			ora	ry ch	ange	(s) p	ropose	ed be	low	(change	"CODES" are provided in		
	\boxtimes	Place	e of Use (PC	OU)					\boxtimes	A	ppropria	tion/Well (POA)		
		Poin	t of Diversion	on (F	POD)					A	dditiona	Point of Appropriation (APOA)		
		Addi	tional Point	of	Diver	sion	(APC	D)						
		771.00 Sept. 197.00	e(s) of temp arentheses		ry ch	ange	(s) d	ue to d	droug	ght p	roposed	below (change "CODES" are		
		-	e of Use (PC						П	Po	oint of A	ppropriation/Well (POA)		
			acter of Us		SE)							Point of Appropriation (APOA)		
			t of Diversion									l Point of Diversion (APOD)		
	Will all	of the	proposed o	han	iges a	affect	t the	entire	wat	er ris	zht?			
	⊠ Yes			only	the	Prop	osed	("to"	lands	s) sec	tion of T	able 2 on the next page. Use the ges.		
	☐ No		Complete	all o	f Tab	le 21	to de	scribe	the	oorti	on of the	e water right to be changed.		

Temporary Transfer Application – Page 6 of 9

(page intentionally left blank for formatting)

MAR 1 1 2020

OWRD

Please use an	d attach	additional	pages c	of Table	2 as	needed
See page 6 fo	r instruc	tions.				

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 Temporary Changes to Water Right Certificate # _____

List only the part of the right that will be changed. For the acreage in each ¼ ¼, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, 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.								GES	Proposed Changes (see								;								
Tw	vр	Rr	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Tw	'p	Rr	g	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
													EXAMPLE													
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
"	"	"	"	"	"	"	"	"	"	EXAMPLE	"	· · ·	"	2	S	9	E	2	sw	NW	500		5.0		POD #6	1901
4	N	28	E	24	SE	NE	107		29.5	Irrigation	Cook Well #4 (POD #1)	1977	POU & POA	3	N	29	E	13	SE	SE	3700		29.5	Irrigation	Seibel Well	1977
_																										
			2																							
		0	9			ТО	TAL A	CRES	29.5											ТО	TAL AC	CRES	29.5			

Additional remarks:_____

Revised 5/13/2019

Temporary Transfer Application - Page 8 of 9

MAR 1 1 2020

TACS



For Place of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands? \square Yes \square No

If YES, list the certificate, water use permit, or ground water registration numbers: _____



Pursuant to ORS 540.525, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for temporary transfer can be included in the transfer or remain unused on the authorized place of use. If the primary water right does not revert soon enough to allow use of the supplemental right within five years, the supplemental right shall become subject to cancellation for nonuse under ORS 540.610.

If a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation is necessary to convey the water to the new temporary place of use you must provide:

Well log(s) 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

OWRE

RECEIVED

Describe the construction of the authorized and proposed well(s) in Table 3 below for any well that does not have a well log. For a *proposed well(s)* 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

13392 -

Application for Water Right **Transfer**

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

Evidence of Use Affidavit

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State o	f Washington)	66						
County	of Benton))	SS						-17
l, Jens	Rasmussen,	in my	capaci	ity as l	Echo I	rrigatio	n Distri	ct Manager,		RECEIVE	
mailin	g address PO	Box 2	308, I	Pasco,	WA 9	9302				MAR 11 20	20
eleph	one number (:	509)82	20-323	84, bei	ng firs	t duly s	sworn de	epose and sag	y:	OWRD	
1. M	y knowledge	of the	exerci	se or s	tatus	of the w	ater rig	ht is based or	n (check one	e):	
	⊠ Perso	onal ol	oserva	tion			Profes	sional expert	ise		
2. I at	test that:										
	Water was u Certificate #			he pre	vious	five yea	ars on th	e entire plac	ce of use for		
\boxtimes	My knowled	lge is s	specifi	c to th	e use	of wate	r at the	following lo	cations with	in the last five years:	:
	Certificate #	Tow	nship	Ra	nge	Mer	Sec	1/4 1/4	Gov't Lot or DLC	Acres (if applicable)	
	87373	3	N	29	Е	W M	13	SE N W		29.5	
OR											
	Confirming	Certifi	cate #		has be	een issu	ed with	in the past fi	ve years; OI	R	
	instream leas	se nun	iber is	s:	_(Note	e: If the	entire i	ight propose	d for	t five years. The not leased instream.)	; OR
	The water rig			-					at a presump	otion of forfeiture for	r
	Water has be 10 years for									for more than	
					(c	ontinues	on rever	se side)		13392	

(continues on reverse side)

- 3. The water right was used for: (e.g., crops, pasture, etc.):
- 4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

		Same
Signature	f Affiant	

3-6-2020 Date

Signed and sworn to (or affirmed) before me this 4th day of March, 20 2 0.



RECEIVED

MAR 1 1 2020

OWRD

My Commission Expires: 5/23/2023

Supporting Documents	Examples
Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	 Power usage records for pumps associated with irrigation use Fertilizer or seed bills related to irrigated crops Farmers Co-op sales receipt
Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	 District assessment records for water delivered Crop reports submitted under a federal loan agreement Beneficial use reports from district IRS Farm Usage Deduction Report Agricultural Stabilization Plan CREP Report
Aerial photos containing sufficient detail to establish location and date of photograph	Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added. Sources for aerial photos: OSU –www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com
Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

GOOGLE EARTH IMAGERY DATE: 8/13/2016



RECEIVED

MAR 1 1 2020

OWRD

13392 -

	And the same of th			
NO PART OF ANY STE	VENS-I		Y ANY ELECTRONIC OR MECHAN	ICAL MEANS.
2000 4730280	2006-4950280	1 of 1	State of Oregon County of Usatilia	}
		0 01 6		
Grantor's Name and Address		I certi	This instrument we f and recorded on	is received
	100 and 10 and 10	received for a	81-28-08 at 18:02	
Granice's Name and Address		book/reel/vo	in the record of in	natrument
After recording, ristum to (Name, Address, Zip):	SPACE RESERVE	and/or as te	code type DE-B&S	
L. Vernon & Donna F. Cook	FOR RECORDER'S USE	No		
34801 Hwy 320		Witness	Instrument Number	2005-4858288
Echo, OR 97826				28.00
Until requested otherwise, send all lax statements to (Herre, Address	e, Zioi:	*******	Office of County	Records
L, Vernon & Donna F. Cook	-,,-	NAME		
34801 Hwy 320		D.	1	
Echo. OR 97826		Бу	The Ven	phu_
			Records Of	ficer
			and the second second	
	BARGAIN AND SALE D			
KNOW ALL BY THESE PRESENTS the	at L. Vernon Coo	k and Donn	a_ECook	***********
hereinafter called grantor, for the consideration he				
hereinafter called grantee, and unto grantee's heir	don, L.L.C.	Il of the to-delegate	al manager of the short of	manufacture,
itaments and appurtenances thereunto belonging	s, successors and assigns, a	ill of that certain re	Ilmatilla	County
State of Oregon, described as follows, to-wit:	or in any way apperunning	g, situated in	United Land	County,
orace of Oregon, described as follows, to-wit.				
Parcels 1 and 3, PA March 18, 1997, as of the County Recor in the Southeast Qu the South Half of S of the Southeast Qu Range 28, East of the County, Oregon.	Instrument No. ds, Umatilla Co arter of the No ection 24, and arter of Section	1997-22913: ounty, Orego rtheast Qua the Souther on 23. Town!	2, Office on, located arter and ast Quarter	
RECEIVED JAN 2 6 20061				
UMATILLA COUNTY				
PECGROS				
To Have and to Hold the same unto grant The true and actual consideration paid for xactual consideration consists after the lates when xuchicles consideration R superconnections accordences	this transfer, stated in term newspectors was desprised as https://doi.org/10.1001/j.j.com/ https://doi.org/10.1001/j.j.com/ https://doi.org/10.1001/j.j.com/ https://doi.org/10.1001/j.j.com/ https://doi.org/10.1001/j.j.com/ https://doi.org/10.1001/j.j.com/ https://doi.org/ http	cessors and assigns as of dollars, is \$ *******************************	-0	
In construing this deed, where the context made so that this deed shall apply equally to corp IN WITNESS WHEREOF, the grantor ha grantor is a corporation, it has caused its name to to do so by order of its board of directors.	t so requires, the singular in corations and to individual as executed this instrument	ncludes the plural, s. on Janua	and all grammatical cha	: if

STATE OF OREGON, County of Umatilla)ss.

This instrument was acknowledged before me on January 5, 200 6

byd. Derion Cook and Denna 7. Cook

This instrument was acknowledged before me on

by

as

of

OFFICIAL SEAL

GLENDA R PELLOW
NOTARY PUBLIC - OREGON
COMMISSION NO. 378878
IN COMMISSION SUPPRES FER. 12 2008

STATE OF OREGON
We commission expires Oct - 12 - 08

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACCURRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.330.

Supplemental Form D

Water Right Transfers Within the Boundaries of or Served by an Irrigation District or other Water Supplier (Association, Ditch Co., etc.)



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

www.oregon.gov/OWRD

[For transfers submitted under OAR Chapter 690 Division 380]

The Department requires non-district applicants to communicate with districts/water suppliers during the planning and preparation of transfer applications involving water rights having a point of diversion or appropriation (POD/POA) or place of use (POU) served by or located within the boundaries of an irrigation district, or other type of water supplier to which assessments are paid. In some cases consent will be required from the district or water supplier.

This form must be included with any transfer application that involves rights served by or located within the boundaries of a district or other type of water supplier.

RECEIVED

1. APPLICANT INFORMATION

		0020
MAR	11	2020

NAME				PHONE (HM)
FARMLAND RESERVE, INC.			OWRD	
PHONE (WK)	CELL			FAX
(509) 734-1195				
ADDRESS				
PO Box 2308				
CITY	STATE	ZIP	E-MAIL**	
PASCO	WA	99302		

2. DISTRICT or WATER SUPPLIER INFORMATION

DISTRICT/WATER SUPPLIER NAME				PHONE (HM)	
ECHO IRRIGATION DISTRICT					
PHONE (WK)	CELL				FAX
(541) 289-5206					
ADDRESS					
PO Box 2308					
CITY	STATE	ZIP	E-MAIL**		
PASCO	WA	99302			

3. WATER RIGHTS ISSUED IN THE NAME OF, or LOCATED WITHIN, or SERVED BY AN IRRIGATION DISTRICT, OTHER DISTRICT, OR WATER SUPPLIER

a. List the water right(s) involved in this transfer:

	Application / Decree	Permit / Previous Transfer	Certificate	Is the water right in the name of a district, water supplier, or BOR*?
1.		-	87373	YES
2.		-		YES
3.		-		YES

Attach additional pages for additional water rights if necessary.

*Bureau of Reclamation

^{**} By providing an e-mail address, the applicant and/or the district/water supplier consents to receive all correspondence from the Department electronically. Copies of final order documents will also be mailed.

			of diversion (POD) or appropriation ur district/water supplier.]
CURRENT ASSOCIA	TIONS Please answer to	he following "yes" or "no	" questions:
YES NO 🖂	One or more of the curr district/water supplier of		lved in the transfer are served by a
YES NO 🖂	for either primary or su	pplemental irrigation fro	is proposed transfer receives water m the district/water supplier; i.e., R water supplied water right(s).
PROPOSED ASSOC	ATIONS Please answer	the following "yes" or "no	o" questions:
YES NO 🖂			volved in the transfer are currently lier if the transfer is approved, or
YES NO 🔀	receives or will receive	either primary or suppler i.e., the POU will be layer ter right(s).	this proposed transfer currently mental irrigation from the red with a district/water supplier or
COMMENTS OR ADDIT	IONAL INFORMATION	RE	CEIVED
		MAF	R 1 1 2020
4. APPLICANT'S SIGNA			WDD
application by [ch	eck one]:	ter supplier about the presson, or \square other (ple	ase specify)
(2) I certify that to the true and accurate		the information containe	d in this Supplemental Form D is
Plalma	m Pa	t Tolman	03/06/2020
Applicant Signature	Name (p		Date
5. (WHEN REQUIRED)	DISTRICT or WATER SUPI	PLIER CONSENT TO THE F	PROPOSED WATER RIGHT TRANSFER
District Manager or Wa	ater Supplier consent is r o	equired if any box on this	form is marked "YES."
	olier certifies the followin		
			water right transfer application and
	P		f
		proposed water right tra	W-1 -
YES NO		tion, the confirming water au of Reclamation or the	er right certificate is to remain in the district/water supplier.
YES NO		plier will be responsible t tified Water Rights Exam	for submitting the claim of beneficial iner (CWRE).
			13392 -
Signature of District Man	ager /Water Supplier Nan	ne (print), Title	Date

RECEIVED

NOTICE TO WATER WELL CONTRACTOR The original and first copy of the Aproil 2020 are to be filed with the

WATER TEST REPORTED TO THE D

water resources department SALEM, OREGON 97310 WAR 20 1980 within 30 days from the date

STATE OF OREGON

of well completion.

(Please type or print) WATER RESOURCES DEPT (Do not write above this line)

Let 1	- CAEGON	7500	191	
(1) OWNER: STARTA OREGON	(10) LOCATION OF WELL:			
Name Circle "C" Farms, Inc.	County Umatilla Driller's well no	ımher	01	
AddressRt. 1, Box 1961, Hermiston, Oregon	SE 14 NE 14 Section 24 T. 4N		28E	W.M.
Addressive 1, Don 1701, intriduction, 514851				W.M.
(2) TYPE OF WORK (check):	Bearing and distance from section or subdivisi	on corne	r	
New Well Deepening □ Reconditioning □ Abandon □				
If abandonment, describe material and procedure in Item 12.				
	(11) WATER LEVEL: Completed w			
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found	94		ft.
y X Driven Domestic Industrial Municipal	Static level 290 ft. below land	urface.	Date 3	-8-80
Bored Irrigation Test Well Other	Artesian pressure lbs. per squar	e inch.	Date	
CASING INSTALLED:	(12) WELL LOG: Diameter of well it Depth drilled 765 ft. Depth of compl Formation: Describe color, texture, grain size and show thickness and nature of each stratu with at least one entry for each change of forma position of Static Water Level and indicate print	eted well and struc m and a tion. Rep	ture of quifer port each	enetrated, change in
Type of perforator used	MATERIAL	From	То	SWL
	Fine sand	O	12	547
Size of perforations in. by in.	Coarse sand	12	18	
perforations fromft. toft.	Cemented gravel	18	61	
perforations fromft. toft.	Coarse sand & gravel	61	194	WB ls
perforations from ft. to ft.	Coarse white sand	194	224	WB
(7) SCREENS: Well screen installed? ☐ Yes No	Broken Brown basalt	224	230	WB
Manufacturer's Name	Black basalt (med)	230	291	
Type Model No.	Brown baslat (med-soft)	291	305	WB
Diam. Slot size Set from ft. to ft.	Black basalt (med)	305	370	
Diam Slot size Set from ft. to ft.	Porous Blk basalt w/claystone	370	385	
(A) YYYDY myddia Dawlan i gaelli y barlin	Black basalt (med-hard)	385	519	
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Gray basalt (hard)	519	540	
a pump test made? Yes No If yes, by whom?	Porous black basalt	540	545	WB
Viold: gal./min, with ft. drawdown after hrs.	Brown basalt	545	585	
Estimated 300 GPM " "	Black basalt	585	635	
" Air Test " " "	Gray basalt	635	644	
	Porous red basalt	644	659	WB
ler test gal./min. with ft. drawdown after hrs.	Porous balck basalt	659	752	7.70
Artesian flow g.p.m.	Porous brown basalt	752	765	WB
Imperature of water Depth artesian flow encountered ft.	Work started 2/29 19 80 Complete	ed .	3-8	1980
(9) CONSTRUCTION:	Date well drilling machine moved off of well	3	-8	1980
Well seal—Material used Neat Cement Well sealed from land surface to 234 ft. Diameter of well bore to bottom of seal 14 in. Diameter of well bore below seal 8 in. Number of sacks of cement used in well seal 110 sacks How was cement grout placed? Grout Pipe outside of	Drilling Machine Operator's Certification: This well was constructed under my Materials used and information reported best knowledge and fields. [Signed] (Drilling Machine Operator) Drilling Machine Operator's License No.	direct above	are tru	e to my
casing	West-West Contract to Contract			
	Water Well Contractor's Certification: This well was drilled under my jurisd		nd this	report is
Was a drive shoe used? ☐ Yes 🍎 No Plugs Size: location ft.	true to the best of my knowledge and bel		~	
Did any strata contain unusable water? Yes No	Name Columbia Basin Well D: (Person, firm or corporation)		pe or pri	nt)
Type of water? depth of strata	Address Rt. 1, Box 1961, Hermi			
Method of sealing strata off	d 11			
Was well gravel packed? ☐ Yes ☐XNo Size of gravel:	[Signed] Water Well Control	actor)		***********
	Contractor's License No. 772 Date	/	2/	10 00
Gravel placed from ft. to ft.	Contractor's Literise No Date		/	, 19.6.



March 6, 2020

State of Oregon Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, OR 97301-1266

Re: Temporary Water Right Transfer for Certificate 87373

To Whom It May Concern,

Pleased find the enclosed Application for Water Right Temporary Transfer for AgriNorthwest and Farmland Reserve, Inc (FRI). The purpose of this transfer is to temporarily change the place of use and point of appropriation for certificate 87373, which FRI leases from Verdon, LLC (Vernon Cook), to irrigate lands within the Echo Irrigation District.

All required application documents and the filing fee are included in this packet and Mr. Cook has signed the application.

If you have any questions regarding this application, please contact Nathan Rau by phone at (509) 820-3231 or by email at nrau@agrinw.com.

Sincerely,

Jens Rasmussen

Land and Governmental Affairs Manager

Office: (509) 820-3234 Mobile: (509) 222-8621

P.O. Box 2308, Tri-Cities, WA 99302

jrasmussen@agrinw.com

RECEIVED

MAR 11 2020

OWRD

Business Registry Business Name Search

New Search			Business En	tity Data		03-11-2020 13:57
Registry Nbr	Entity Type	Entity Status	Jurisdiction	Registry Date	Next Renewal Date	Renewal Due?
118769-92	FNP	ACT	UTAH	12-13-2002	12-13-2020	
Entity Name	FARMLAND	RESERVE, INC	Z.			
Foreign Name						
Non Profit Type	RELIGIOUS					

New Search	Associated Names
------------	------------------

Туре	PPB PRINCIPAL	PLACE	OF BUSINES	S				
Addr 1	79 S MAIN STREET	ΓSUIT	E 1000					
Addr 2								
CSZ	SALT LAKE CITY	UT	84111		Country	UNITED STATES	OF AMERICA	

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

Type	AGT REGI	STERED AG	ENT		Start Date	12-13-2002	Resign Date	
Of Record	158720-88	CORPORAT	ΓΙΟΝ SERVIC	E COMPANY				
Addr 1	1127 BROA	DWAY STRE	ET NE STE 3	10				
Addr 2								
CSZ	SALEM	OR	97301		Country	UNITED STATES (OF AMERICA	

Туре	MAL MAILING AD	DRE	SS				
Addr 1	50 E NORTH TEMPI	LE ST	2WW				
Addr 2							
CSZ	SALT LAKE CITY	UT	84150	Country	UNITED STATES	S OF AMERICA	

Туре	PRE	PRESIDENT				Resign	Date	
Name	DON		M	SLEIGHT				

Addr 1	79 S MAIN ST STE	1000			/	
Addr 2						
CSZ	SALT LAKE CITY	UT	84111	Country	UNITED STATES OF AMERICA	

Туре	SEC SECRETARY					Resign Date
Name	PAUL		L	ALLEN		
Addr 1	79 S MAIN ST			24		
Addr 2						
CSZ	SALT LAKE CITY	UT	84111		Country	UNITED STATES OF AMERICA

New Search

Name History

Business Entity Name	Name Type	Name Status	Start Date	End Date
FARMLAND RESERVE, INC.	EN	CUR	12-13-2002	

Please <u>read</u> before ordering <u>Copies</u>.

New Search

Summary History

Image Available	Action	Transaction Date	Effective Date	<u>Status</u>	Name/Agent Change	Dissolved By
	AMENDED ANNUAL REPORT	11-14-2019		FI		
	AMENDED ANNUAL REPORT	12-07-2018		FI		
	AMENDED ANNUAL REPORT	11-02-2017		FI		
	AMENDED ANNUAL REPORT	11-09-2016		FI		
	AMENDED ANNUAL REPORT	11-19-2015		FI		
	CHANGE OF REGISTERED AGENT/ADDRESS	03-24-2015		FI		
	AMENDED ANNUAL REPORT	12-09-2014		FI		
	AMENDED ANNUAL REPORT	11-19-2013		FI		
	AMENDED ANNUAL REPORT	12-10-2012		FI		
	AMENDED ANNUAL REPORT	11-15-2011		FI		

į	
	9
	a
	တ
_	က
	ଟ
	4-1

	AMENDED ANNUAL REPORT	12-17-2010	1	FI		
	AMENDED ANNUAL REPORT	11-25-2009		FI		
	ANNUAL REPORT	12-05-2008		FI		
	ANNUAL REPORT	11-27-2007		FI		
	ANNUAL REPORT	12-21-2006		FI		
	AMNDMT TO ANNUAL RPT/INFO STATEMENT	12-09-2005		FI		
-	ANNUAL REPORT PAYMENT	11-18-2005	11-17-2005	SYS		-
	ANNUAL REPORT PAYMENT	11-09-2004	11-08-2004	SYS		
	AMENDED ANNUAL REPORT	11-20-2003		FI		
	APPLICATION FOR AUTHORITY	12-13-2002		FI	Agent	

© 2020 Oregon Secretary of State. All Rights Reserved.

UMAT 54154 RECEIVED

STATE OF OREGON WATER SUPPLY WELL REPORT

MAR 2 9 2001

WELL ID # L 46763 START CARD # 111251

(as required by ORS 537.765) DES@FEOCATION OF WELL by legal description: (1) OWNER: Well Number: Sieble Well SALEM, OREGO Name: H4 Farms Address: 115 W Hermiston Ave State: OR Zip: 97838 City: Hermiston (2) TYPE OF WORK: (repair/ New Well ☐Deepening ☐Alteration recondition)☐Abandonment (3) DRILL METHOD: Rotary Air □Rotary Mud □Cable □Auger Other: (4) PROPOSED USE: □ Domestic Community Industrial **⊠**Irrigation Thermal Other ■Injection Livestock (5) BORE HOLE CONSTRUCTION: Special Construction approval ☐Yes ☑No Depth of Completed Well 1150 Explosives Used ☐Yes ☒No Type ---Amount ---HOLE SEAL sacks or Diameter From To Material From To pounds 20 24" 0 Cement 0 40 Bags 19" 319 Cement 200 200 319 200 Bags 19" 50 200 Back Fill 50 200 270 Bags 19" 0 50 Bent Chip 0 50 90 Bags How was seal placed: Method A ΠE ☐ Other Backfill placed from 50 to 200 Material Bent Chips from--to <u>---</u> Material ---Gravel placed from--to ---Size of gravel ---(6) CASING/LINER: CASING: Diameter From To Gauge Steel Plastic Welded Threaded 20 20 .375 \boxtimes \boxtimes 16 319 375 \boxtimes LINER: \Box ◱ Final location of Shoe(s): (7) PERFORATIONS/SCREENS: Perforations Method: Screen Type: Material: Slot Tele/pipe From Size No. Diameter Casing Liner size (8) WELL TESTS: Minimum testing time is 1 hour □ Pump ☐ Flowing Artesian ☐ Bailer Air Yield gpm Drawdown Drill Stem at Time 1 hr. 1800 1500 10 Depth Artesian Flow Found ---Temperature of water 56 Was a water analysis done? ---By whom: ---Did any strata contain water not suitable for intended use? (explain)

	<u>lla</u> Latitude:				
Township: 3N	Range: 29	PE -	<i>G</i>		-
Section: 9	SE		SW	1/4	
Tax Lot: 3200	Lot: B	llock:		vision:	
Street Address	of Well (or nearest	t address)	·	•	
Cemetary Rd		, .			
	WATER LEVEL				
369 Ft. belo		•	Date	3-22-0	11
	re lb. per	ea in	Date	<u> </u>	<u></u>
7 intestan pressu	10 10. pci	oq. m.	Daic	·	
/11) WATED	BEARING ZONE	·e.			
	water was first for				
From	To		w Rate		SWL
289	302	500+	711 Zeate		234
	 •••	500.			234
681	689	200			369
1025	1041	500			
1092					369
1092	1150	1000+			369
(12) WELL I		round Elev			
	Material		From	To	SWL
Top Soil & Sa			0	10	
Basalt Broken			10	14	
	ish Black Med Sof	<u> </u>	14		
w/some Bro				58	
Basalt Gray N			58	118	T
Basalt Black			118	138	
Basalt Gray H	ard		138	152	
Basalt Black I	Med to Soft		152	182	
Basalt Gray H			182	203	
Basalt Black	v/Clay Blue		203	242	
Basalt Gray H			242	289	
Basalt Vic Bla		· -	289	302	┽
	sh Gray Med Hard		302	318	┿
Basalt Gray N	led Hard		318	340	
Basalt Black I	Med Hard		340	380	+
Basalt Gray H			380	475	 -
Basalt Gray M			475		+
Basalt Black N			570	570	∔——
Basalt Gray H				605	
Basalt Med So			605	630	
Basalt Hard B			630	635	
			635	669	<u> </u>
Basalt Hard G	<u> </u>		669	681	
Basalt Fract C			681	689	H2O
Basalt Hard B			689	696	
Basalt Fract B			696	728	
Basalt Med H			728	740	
Basalt Fract B			740	766]
Date Started: 1		Comp	leted: 3/	22/01	
(unbonded) Wate	r Well Constructor C	Certification:			
l certify th	at the work I perform	ned on the co	nstruction	, alteratio	on., or
abandonment of t	his well is in compli	ance with On	egon wate	rsupply	well
construction stand	dards. Materials use	d and informa	ation repor	rted abov	e are true
~	knowledge and belie	it.			
Signed Dany	1 Rosenti		WWC Nu		-
~ <i>_</i>)ate <u>3/27</u>	/01
(conded) Water V	Vell Constructor Cert	uncation:			
work performed o	sponsibility for the continue the third this well during the	onstruction, a	uteration,	or aband	onment
work performed d	uring this time is in:	fomoliance v	with Oregon	n water	manafa.
well construction	standards. This repo	ort is true to th	ne best of	mv knou	Juppiy Jedge and
belief.	1				.voge and
			11/11/03		

Depth of Strata:

Signed

WWC Number 723

Date 3/27/01

UMAT 54154

STATE OF OREGON ***PAGE 2 of 2*** WATER SUPPLY WELL REPORT (as required by ORS 537.765) (1) OWNER: Well Number: MAR 2	MAKE A.		START	D# L CARD#		
(a) OWNER:	a 2001	(9) LOCATION	OF WELL by legal	description:		
Well Number:MAR &		County:	Latitude:	_ Longitude:		
Well Number: MAR 2 Name: MAR 2 Address:	SCURUES.	Ilownship:	Range:	1	,	
Address: WATER HE	M QUECU	Section:			/4 .iaiamı	
City: State: Zip: V SALL.	· '	Tax Lot:	Lot: Block	Subdiv	ision:	
(repair/	i i	Street Address of	Well (or nearest add	ress)		
New Well □Deepening □Alteration recondition)□Abandonmen	t l		Composition of the control of the co		_	
(3) DRILL METHOD:	-		ATER LEVEL:	Data		
Rotary Air Rotary Mud Cable Auger		Ft. below	land surface	Date Date		
Other:	Ì	Artesian pressure	lb. per sq. i	n, Date		_
(4) PROPOSED USE:	-					
Domestic Community Industrial Irrigation			EARING ZONES:			
Thermal Injection Livestock Other	l		vater was first found	Est. Flow Rate		SWL
		From	To	ESt. Flow Rate		SWL
(5) BORE HOLE CONSTRUCTION:						
Special Construction approval Yes No				. <u></u>		
Depth of Completed Well Amount	l					
HOLE SEAL sacks or	İ					
Diameter From To Material From To pounds			<u> </u>			
	 	(12) WELL LO		nd Elevation:	Del -	CHAIT
	 Ì	Basalt Mesd Bl	Material	From	To	SWL
				766	781	
		Basalt Fract Gr		781	816	
How was seal placed: Method A B C D E		Basalt Med Bla		816	844	<u> </u>
Other	_ İ	Basalt Hard Gr		844	888	<u> </u>
Backfill placed from to Material		Basalt Fract Bl		888	935	
from to Material Gravel placed from to Size of gravel		Basalt Very Fra		935	942	
Gravel placed from to Size of gravel		Basalt Fract Gr	ay	942	961	
(6) CASING/LINER:		Basalt Black	7-3	961	985	
CASING:		Basalt Black M		985	1003	<u> </u>
Diameter From To Gauge Steel Plastic Welded Three	aded	Basalt Gray Ha		1003	1025	260
		Bsalt Black Fra		1025	1041	369
	j	Basalt Gray M		1041	1092	100
		BasaltRed Soft		1092	1114	369
		Basalt Fract Ha		1114	1120	369
LINER:		Basalt Fract G	ray Soit	1120	1150	369
				 	ļ	-
Final location of Shoe(s):				<u> </u>		
(7) PERFORATIONS/SCREENS:	_					
Perforations Method:					ļ . <u> </u>	ļ
Screen Type: Material:						
Slot Tele/pipe						
From To Size No. Diameter size Casing Line	er	· · · · · ·		 	-	
			<u>-</u>			
					ļ	.
					 -	
		Data Ctardadi		0: 1::1		
		Date Started:		Completed: _		
			Well Constructor Certi			
(8) WELL TESTS: Minimum testing time is 1 hour	_		at the work I performed his well is in compliance			
Pump Bailer Air Flowing Artesia	en l		lards. Materials used an			
Yield gpm Drawdown Drill Stem at Time			knowledge and belief.			· ·
I hr.		•		WWC N	umber	
		Signed		Date		
	\neg	(bonded) Water W	ell Constructor Certific	ation:		
Temperature of water Depth Artesian Flow Found			sponsibility for the cons			
Was a water analysis done? By whom:			n this well during the co			
Did any strata contain water not suitable for intended use? (explain)	1		uring this time is in con			
,		well construction belief.	standards. This report i	s true to the best of	ту квоч	rieoge and
Depth of Strata:				WWC?	Number _	
· ———		Signed		Date		
	•					