

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

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

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

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

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- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Application Map Checklist.
- ☒ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at:
http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- ☒ Part 4 – Completed Applicant Information and Signature.
- ☒ Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-16454
Please include a separate Part 5 for each permit. (See instructions on page 6)
- ☒ Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- ☐ ☒ N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- ☐ ☒ N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- ☒ ☐ N/A Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- ☒ ☐ N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- ☐ ☒ N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

☐ Application fee not enclosed/insufficient ☐ Map not included or incomplete
☐ Land Use Form not enclosed or incomplete
☐ Additional signature(s) required ☐ Part _____ is incomplete

Other/Explanation _____

Staff: _____ 503-986-0 _____

Date: ____/____/____

Part 2 of 5 – Permit Amendment Map Checklist

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

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

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- ☐ ☒ N/A If **more than three** permits are involved, separate maps for each permit.
- ☒ Permanent quality printed with dark ink on good quality paper.
- ☒ The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- ☒ A north arrow, a legend, and scale.
- ☒ The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- ☒ Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- ☒ Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- ☒ Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- ☒ Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- ☒ Existing place of use that includes separate hachuring for each water use permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
- ☐ ☒ N/A If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- ☒ Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
- ☒ ☐ N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,160
	Types of change proposed: ☐ Place of Use ☒ Point of Diversion/Appropriation Number of above boxes checked = <u>1</u> (2a) Subtract 1 from the number in line 2a = <u>0</u> (2b) <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	0
3	Number of permits included in Permit Amendment <u>1</u> (3a) Subtract 1 from the number in 3a: <u>0</u> (3b) <i>If only one permit this will be 0</i> Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » »	3	0
4	Do you propose to add or change a well, or change from a surface water POD to a well? ☐ No: enter 0 » ☒ Yes: enter \$410 »	4	\$ 410
5	Do you propose to change the place of use? ☒ No: enter 0 on line 5 » ☐ Yes: enter the cfs for the portions of the permits to be amended (see example below*): <u> </u> (5a) Subtract 1.0 from the number in 5a above: <u> </u> (5b) If 5b is 0, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: <u> </u> (5c) and multiply 5c by \$350, then enter on line 5 » » » » » » » » » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$ 1,570
7	Is this permit amendment: ☐ necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? ☐ endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » Permit Amendment Fee:	8	\$ 1,570

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

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

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME DJ MILLER RANCHES, INC.			PHONE NO. 541-589-2324	ADDITIONAL CONTACT NO.
ADDRESS 33123 Rock Creek Lane				FAX NO.
CITY Frenchglen	STATE OR	ZIP 97736	E-MAIL	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

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

AGENT/BUSINESS NAME John A. Short / Water Right Services, LLC			PHONE NO. 541-389-2837	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 1830				FAX NO.
CITY Bend	STATE OR	ZIP 97709	E-MAIL johnshort@usa.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this permit amendment; and why:
Add two additional wells

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

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

Is the applicant the permit holder of record? ☒ Yes ☐ No

If NO, include either:

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

Has the Completion ("C") Date of the permit(s) in this application expired? ☐ Yes ☒ No

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

If NO, what are the completion dates of the permit(s)? 10/01/2020

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

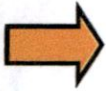
By my signature below, I confirm that I understand:

- Prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Burns Times - Herald

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

D.S. Miller Ranches, Inc.

Applicant Signature

by Gary E. Miller

Applicant Signature

D.S. Miller Ranches, Inc.

Print Name (and Title if applicable)

Date

Gary E. Miller owner/
Pres.

Print Name (and Title if applicable)

3-13-20
Date

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Check one of the following:

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

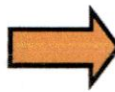
Check the appropriate box, if applicable:

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

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME Harney County Planning Department	ADDRESS 360 N. Alvord	
CITY Burns	STATE OR	ZIP 97720

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 5 of 5 – Water Use Permit Information

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

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PERMIT # G-16454

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

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #1	☒ Authorized ☐ Proposed	L-11070	26	S	29	E	23	SE	NW	2500	1740' S, 2510' E of NW Cor S 23
Well #2	☒ Authorized ☐ Proposed	MALH 2323	26	S	29	E	23	SE	SW	"	65' N, 2375' E of SW Cor S 23
Well #3	☒ Authorized ☐ Proposed		26	S	29	E	23	NW	NW	"	80' S, 950' E of NW Cor S 23
Well #4	☐ Authorized ☒ Proposed	L-125153	26	S	29	E	23	SE	NW	"	1900' S, 2550' E of NW Cor S 23
Well #5	☐ Authorized ☒ Proposed	L-134206	26	S	29	E	23	SE	NW	"	2120' S, 2370' E of NW Cor S 23

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

- | | |
|---|--|
| ☐ Place of Use (POU) | ☐ Point of Appropriation/Well (POA) |
| ☐ Point of Diversion (POD) | ☒ Additional Point of Appropriation (APOA) |
| ☐ Additional Point of Diversion (APOD) | ☐ Surface water POD to Ground Water POA (SW/GW) |

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

- ☒ Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.

- ☐ No Complete all of Table 2 to describe the portion of the permit to be changed.

For a change in place of use:

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

- ☐ Yes ☐ No

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

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

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

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer Staff.

List the change proposed for the acreage in each $\frac{1}{4}$. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

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CONTINUED Table 2. Description of Changes to Water Use Permit # G-16454

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES										PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	Twp		Rng		Sec	¼ ¼		Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date														
									APOA	26	S	29	E	23	NW	SW	2500		30.0	Wells 1,2,3,4,5	2008	
									"	"	"	"	"	"	SW	SW	"	"	40.0	"	"	
									"	"	"	"	"	"	SE	SW	"	"	40.0	"	"	
									"	"	"	"	"	"	NE	SE	"	"	33.8	"	"	
									"	"	"	"	"	"	NW	SE	"	"	40.0	"	"	
									"	"	"	"	"	"	SW	SE	"	"	40.0	"	"	
									"	"	"	"	"	"	SE	SE	2600	"	40.0	"	"	
									"	26	S	29	E	24	SW	NW	2500		28.6	"	"	
									"	"	"	"	"	"	SE	NW	"	"	26.8	"	"	
									"	"	"	"	"	"	NE	SW	2600	"	36.4	"	"	
									"	"	"	"	"	"	NW	SW	2500		39.0	"	"	
									"	"	"	"	"	"	SW	SW	2600		5.9	"	"	
									"	"	"	"	"	"	SE	SW	2600		3.6	"	"	
TOTAL ACRES										TOTAL ACRES										RECEIVED		

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Revised 2/11/2019

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CONTINUED Table 2. Description of Changes to Water Use Permit # G-16454

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the “from” or “off” lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES										PROPOSED (the “to” or “on” lands) The listing as it would appear AFTER PROPOSED CHANGES are made.											
List only that part or portion of the water right that will be changed.										Proposed Changes (see “CODES” from previous page)											
Twp	Rng	Sec	¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date			
									APOA	26	S	29	E	26	NE	NE	2500	30.0	Wells 1,2,3,4,5	2008	
									“	“	“	“	“	“	NW	NE	“	40.0	“	“	
									“	“	“	“	“	“	SW	NE	“	18.0	“	“	
									“	“	“	“	“	“	SE	NE	“	3.8	“	“	
									“	“	“	“	“	“	NE	NW	“	40.0	“	“	
									“	“	“	“	“	“	NW	NW	“	30.0	“	“	
									“	“	“	“	“	“	SW	NW	“	3.8	“	“	
									“	“	“	“	“	“	SE	NW	“	18.0	“	“	
TOTAL ACRES										TOTAL ACRES										800.0	

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Additional remarks: _____

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

If YES, list the other certificate, permit, or ground water registration numbers: N/A

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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
Well #3	No		400'	12"	TBD	TBD	TBD	45'	Black rock	

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

WATER RESOURCES DEPARTMENT.

SALEM, OREGON 97310

within 30 days from the date
of well completion.

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

Do not write above this line

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APR 28 1982

State Well No.

State Permit No.

265/29E-23C

(1) OWNER:

Name ALDRICH FARMS

Address RR BURNS

ORE

(2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary ☒ Cable ☐ Dug ☐

Driven ☐ Jetted ☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐ Irrigation ☒ Test Well ☐ Other ☐

CASING INSTALLED:

12" Diam. from +2 ft. to -248 ft. Gage 250

" Diam. from _____ ft. to _____ ft. Gage _____

" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Perforated? ☐ Yes ☒ No.

Type of perforator used _____

Size of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? ☐ Yes ☒ No

Manufacturer's Name _____

Type _____ Model No. _____

Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☒ Yes ☐ No If yes, by whom? HERVEY CO

Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.

" " " " " "

" " " " " "

Ball test _____ gal./min. with _____ ft. drawdown after _____ hrs.

Artesian flow _____ g.p.m.

Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used PORTLAND CEMENT

Well sealed from land surface to 20' ft.

Diameter of well bore to bottom of seal 16 in.

Diameter of well bore below seal 13 1/2 in.

Number of sacks of cement used in well seal 15 sacks

How was cement grout placed? TRENIE

Was a drive shoe used? ☐ Yes ☒ No Plugs _____ Size: location _____ ft.

Did any strata contain unusable water? ☐ Yes ☒ No

Type of water? _____ depth of strata _____

Method of sealing strata off _____

Was well gravel packed? ☐ Yes ☒ No Size of gravel: _____

Gravel placed from _____ ft. to _____ ft.

WATER RESOURCES DEPT

(10) LOCATION OF WELL:

County Malheur Driller's well number _____

SE 1/4 SW 1/4 Section 23 T. 26S R. 29E W.M.

Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 169 ft.

Static level 32 ft. below land surface. Date 11-15-81

Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____

Depth drilled 400 ft. Depth of completed well 400 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
GRAVEL	0	15	
BLACK CINDERS	15	100	
BRN CLAY	100	134	
" " * GRAY CINDER	134	140	
GREEN CLAY	140	189	
" " * BLK CINDERS	189	218	
RED CINDERS * BRN CINDER	218	226	
BROWN SANDSTONE	226	230	
GREENISH BLACK BASALT	230	260	
GRAY CINDERS	260	268	
GRAY-GREEN BASALT	268	358	
Black	358	361	
GRAY	361	400	

RECEIVED

MAY 10 1982

WATER RESOURCES DEPT
SALEM, OREGON

RECEIVED

MAR 16 2020

OWRD

Work started 11-9 1981 Completed 11-20 1981

Date well drilling machine moved off of well 11-20 1981

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Frank J. Faller Date 11-20, 1981

(Drilling Machine Operator)

Drilling Machine Operator's License No. 1454

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name Don Fory and Well Drilling, INC.

(Person, firm or corporation)

(Type or print)

Address 5543 SW Douglas Road, Astoria, OR

[Signed] Don Fory

(Water Well Contractor)

Contractor's License No. 544 Date 11-20-81, 19

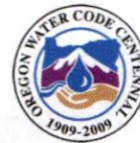
(USE ADDITIONAL SHEETS IF NECESSARY)

SP-45656-119

13397



OREGON WATER RESOURCES DEPARTMENT
TRANSFER REIMBURSEMENT AUTHORITY
ESTIMATE APPLICATION



ORS 536.055 authorizes the Oregon Water Resources Department to expedite or enhance regulatory processes voluntarily requested under the agreement.

Please contact Transfer Personnel before submitting this request; as the application fee is a non-refundable \$125.00 fee per request. Checks submitted for this application should be separate from Transfer fees.

The purpose of this application is to obtain estimates of the cost and time required to process a Transfer Application Request. There is a non-refundable application fee of \$125.00 per request.

<u>TYPE</u>	<u>FILE NUMBER</u>
Transfer Application	Transfer Number T-13397

	<u>Applicant Information</u>	<u>Applicant's Representative/Contact</u>
Name:	DJ Miller Ranches, Inc.	Water Right Services, LLC/ Bryce Withers
Address:	33123 Rock Creek Ln	PO Box 1830
	Frenchglen, OR 97736	Bend, OR 97709
Phone:	541-589-2324	541-389-2837
Fax:		
E-Mail Address:		johnshort@usa.com

I understand the following:

- That upon receipt of my non-refundable application fee of **\$ 125.00**, OWRD will, within fourteen (14) days, notify me in writing of the estimate of costs and time frame for the expedited service.
- That this fee covers the reimbursement authority staff to evaluate and provide the estimate for processing of the request.
- That OWRD will, within fourteen (14) business days, notify me in writing of the estimates of costs and time frame for the expedited service.
- That upon receiving the estimate I may agree or decline to enter into a formal contract to pay the estimated cost in advance to initiate the expedited service.
- An incomplete or inaccurate application may delay the process and
- Expedited processing does not guarantee a favorable review of my request.
- Send completed Application and payment to:

**Oregon Water Resources Department
Transfer Reimbursement Authority Program
725 Summer St. NE, Suite A
Salem, OR 97301-1271**

I certify that I am the (check one):

☐ Applicant ☒ Applicant's Representative ☐ Other (Please specify)

Name: Bryce Withers

Signature: B. Withers

OWRD USE ONLY: Reimbursement Authority Number: R11-254-21