

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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Che	eck all it	tems included with this application. $(N/A = Not Applicable)$	MAY 2 6 2020
$\leq$		Part 1 - Completed Minimum Requirements Checklist.	
		Part 2 – Completed Application Map Checklist.	OWRD
		Part 3 – Application Fee, payable by check to the Oregon Water Resources Department 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 (503) 986-0801.	
$\leq$		Part 4 – Completed Applicant Information and Signature.	
		Part 5 – Information about Permits to be Amended: <b>Number of permits to be amended:</b> List the Permits here: <u>G-17966 &amp; S-54843</u> Please include a separate Part 5 for each permit. (See instructions on page 6)	nded:
$\leq$		Completed Permit Amendment Application Map (Does not have to be prepared by a Examiner).	a Certified Water Right
	N/A	Request for Assignment Form and statutory fee. The request for assignment form happlicant is <b>not</b> the permit holder of record and needs to be assigned to the permit; <b>or</b> the landowner of the proposed place of use is <b>not</b> the permit holder of records to be assigned to the permit (the Request for Assignment Form is available or https://www.oregon.gov/OWRD/Forms/Pages/default.aspx). Assignment is not need permit holder of record.	cord and nline at
	N/A	Affidavit(s) of Consent are required from all permit holder(s) of record if the permit applicant <b>or</b> other permit holders of record that are not listed as applicants.	is not assigned to the
	N/A	Oregon Water Resources Department's Land Use Information Form with approval a land use form receipt stub) from each local land use authority in which water is to be and/or used. Not required if water is to be diverted, conveyed, and/or used only on f the following apply: a) a change in place of use only, b) no structural changes, c) the irrigation only, and d) the use is located within an irrigation district or an exclusive	e diverted, conveyed, rederal lands or if <b>all</b> of e use of water is for
$\leq$	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or adappropriation.	lditional point(s) of
	N/A	Geologist Report for a change from a surface water point of diversion to a ground wappropriation (well), if the proposed well is more than 500 feet from the surface wat 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or	ter source and more than
		(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 Stoff:    Stoff:   SO3 986 0   Date:   // / /	-

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# Part 2 of 5 - Permit Amendment Map Checklist

# **OWRD**

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

	N/A	If more than three permits are involved, separate maps for each permit.
$\boxtimes$		Permanent quality printed with dark ink on good quality paper.
$\boxtimes$		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
$\boxtimes$		A north arrow, a legend, and scale.
$\boxtimes$		The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$ , $1 \text{ inch} = 1,320 \text{ feet}$ , the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$ , or a scale that has been pre-approved by the Department.
$\boxtimes$		Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines.
$\boxtimes$		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
$\boxtimes$		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
$\boxtimes$		Major water delivery system features from the point(s) of 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 ₁	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.
$\boxtimes$		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized
	□ N/A	survey corner. This information can be found in your water use permit.  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

# OWRD

	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	a fi	
	Point of Diversion/Appropriation		
	Number of above boxes checked = $\frac{2(2a)}{2}$		
	Subtract 1 from the number in line $2a = 1(2b)$ If only one change, this will be 0		
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » »	2	\$930
	Number of permits included in Permit Amendment 2 (3a)		
	Subtract 1 from the number in 3a: $\underline{1 (3b)}$ If only one permit this will be 0		100-100-100
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » »	3	\$520
	Do you propose to add or change a well, or change from a surface water POD		
	to a well?		
	No: enter 0 »» » » » » » » » » » » » » » » » »		
4		4	\$410
	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*): 11.34 (5a)		
	Subtract 1.0 from the number in 5a above: 10.34 (5b)		
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » » » »		
_	If 5b is greater than 0, round up to the nearest whole number: 11 (5c) and	_	\$2.950
5	multiply 5c by \$350, then enter on line 5 » » » » » » » » » Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	5	\$3,850 \$6,870
0	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal: Is this permit amendment:	0	\$0,870
	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 »		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » »	7	
8	Subtract line 7 from line 6 » » » » » » » » » Permit Amendment Fee:	8	\$6,870

- \*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  $\div$ 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).

# Part 4 of 5 - Applicant Information and Signature

APPLICANT/BUSINESS NAME Andy Root, Managing Member Cattle, LLC	/Rattlesna	ke Creek Land &	PHONE NO. <b>541-573-3615</b>	ADDITIONAL CONTACT NO.	RECI
ADDRESS				FAX NO.	MAY S
<b>524 Hwy 20 N</b> CITY	STATE	ZIP	E-MAIL		
Hines	OR	97738		CORDEGROUDENCE EDOM THE	O
				CORRESPONDENCE FROM THE ENTS WILL ALSO BE MAILED.	
DEI ARTMENT EEECTRONICA	LETT CO	TIES OF THE THAT	L ONDER DOCUME		J
<b>.gent Information</b> – The ag	ent is autl	norized to represen	t the applicant in al	Il matters relating to this applicat	ion.
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.	
Scott D Montgomery  ADDRESS			541-548-5833	541-420-0401 FAX NO.	-
PO Box 767				844-273-9878	
CITY	STATE	ZIP	E-MAIL		
Terrebonne	OR	97760	scott@apeands.co		-
DEPARTMENT ELECTRONICA				CORRESPONDENCE FROM THE	
s the applicant the permit h If NO, include either:	older of r	ecord? 🛚 Yes 🗆	No		
A completed assign the applicant(s), C		rm (with required s	tatutory assignmen	at fee), assigning all or a portion	of the per
An affidavit of copermit.	nsent fron	the permit holder	(s) of record that g	ives permission for the applicant	to amend
Has the Completion ("C") D	ate of the	permit(s) in this	application expire	ed? 🗌 Yes 🔯 No	
If YES, this application wi	ll not be a	ccepted by the Dep	partment.		
If NO, what are the comple	tion dates	of the permit(s)?	January 31, 2023.		
• If the permit completic approve the Permit A	on date ex mendmer	pires while the Per it Application until	mit Amendment A an Extension of T	pplication is pending, the Depart ime Application is approved for	tment wil
				pedite the processing of this Permonths of the date of filing this app	
By my signature below, I con	ifirm tha	I understand:			
Prior to Department appropublication of a notice in	oval of the a newspay f more tha	permit amendmen per with general cin n one qualifying no	rculation in the area	ed to submit payment to the Depa a where the permit is located, one ble, I suggest publishing the notice	ce per we

I (we) affirm that the informa	ntion contained in this application is true and accurate	te. Sign a
Applicate/Signature	Andy Root, Managing Mbr Print Name (and Title if applicable) Date	- Check for \$168
Check one of the following:		
□ The applicant is response to the applicant.	sible for completion of change(s). Notices and corre	espondence should continue to
	record will be responsible for completing the proposition notices and correspondence should be sent to the	
Check the appropriate box, if	applicable:	
Check here if any of the poby an irrigation or other w	permits proposed for amendment are or will be located vater district.	ted within or served
IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP
19	by of the permits supplied under a water service agree with a federal agency or other entity.	eement or other
ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP
To meet State Land Use Cormunicipal corporation, or tribused.	nsistency Requirements, you must list all local gove bal government) within whose jurisdiction water w	ernments (each county, city, vill be diverted, conveyed or

 $\Rightarrow$ 

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

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# Part 5 of 5 - Water Use Permit Information

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# PERMIT # G-17966

**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/I Authorized by the is it Propose	permit or	OW Log	POA, RD We g ID# (d /ell ID # L	or	Tv	vp	Rng	Sec	c	1/4 1/4	Tax Lot, DLC or Gov't Lot  Tax Lot, Measured Distances (from a recognized survey corner)
#1	☐ Authorized ☐ Proposed	HARN 52834		22	s	33	E	21	NW	NW	900	265' S & 1025' E from NW cor, Sec 21
#2	☐ Authorized ☐ Proposed	HARN 52827		22	S	33	E	32	NW	SW	900	2250' N & 90' E from SW cor, Sec 32
#3	□ Authorized     □ Proposed	NOT BUIL		22	s	33	E	29	NE	NE	900	4150' N & 640' W from SE cor, Sec 29
#3	☐ Authorized ☐ Proposed	HARN 227/518		22	s	33	E	32	NE	NE	900	590' S & 1280' W from NE cor, Sec 32
#4	☐ Authorized☐ Proposed	NOT BUIL		22	s	33	E	20	NE	SE	900	6940' N & 680' W from SE cor, Sec 29
#5		NOT BUIL		22	s	33	E	20	NE	NE	900	9560' N & 620' W from SE cor, Sec 29
#5	☐ Authorized ☐ Proposed	HARN 52187		22	s	33	E	20	SW	NE	900	1330' S & 1570' W from NE cor, Sec 20
#6		NOT BUIL		22	s	33	E	30	SW	NE	1700	3900' N & 6700' W from SE cor, Sec 29
#6	☐ Authorized ☐ Proposed	HARN 52708		22	s	33	E	31	NE	SE	900	2345' N & 1160' W from SE cor, Sec 31
#7		NOT BUIL		22	s	33	E	30	NW	SE	1700	1420' N & 6720' W from SE cor, Sec 29
#7	☐ Authorized ☐ Proposed	HARN 52767		22	s	33	E	31	NE	SE	900	1665' N & 615' W from SE cor, Sec 31
#8	☐ Authorized☐ Proposed	NOT BUIL		22	s	33	E	29	NW	SW	900	1420' N & 4050' W from SE cor, Sec 29
#9	<ul><li>✓ Authorized</li><li>✓ Proposed</li></ul>	NOT BUIL		22	s	33	E	31	SW	NE	900	1920' S & 7850' W from SE cor, Sec 29
#9	☐ Authorized ☐ Proposed	HARN 52754		22	s	33	E	31	NE	SW	900	1790' N & 2165' E from SW cor, Sec 31
#10	☐ Authorized☐ Proposed	NOT BUIL		22	s	33	E	32	SW	NW	900	1950' S & 5180' W from SE cor, Sec 29

#10	☐ Authorized ☐ Proposed	HARN 52765	22	S	33	E	31	NW	SW	900	1670' N & 655' E from SW cor, Sec 31
#11	☐ Authorized☐ Proposed	NOT BUILT	22	s	33	E	32	SE	NW	900	1960' S & 2760' W from SE cor, Sec 29
#11	☐ Authorized ☐ Proposed	HARN 52805	22	s	33	E	32	NE	SW	900	1405' N & 1350' E from SW cor, Sec 32
#12	□ Authorized     □ Proposed	NOT BUILT	22	s	33	E	31	NW	SE	900	3940' S & 7800' W from SE cor, Sec 29
#12	☐ Authorized ☐ Proposed	HARN 52783	22	S	33	E	31	SE	SE	900	1045' N & 1135' W from SE cor, Sec 31
#13	□ Authorized     □ Proposed	NOT BUILT	22	s	33	E	32	NW	sw	900	3940' S & 5160' W from SE cor, Sec 29
#14		NOT BUILT	22	s	33	E	32	NW	SE	900	3940' S & 2480' W from SE cor, Sec 29
#14	☐ Authorized ☐ Proposed	HARN 52789	22	S	33	E	32	NW	SE	900	1400' N & 1505' W from SE cor, Sec 32
#16	☐ Authorized☐ Proposed	NOT BUILT	22	s	33	E	28	SE	SE	1100	148' N & 73' W from SE cor, Sec 28

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Check a	all type(s) of change(s) proposed below (c	hange	e "CODES" are provided in parentheses): M	AY 26 2020
$\boxtimes$	Place of Use (POU)	$\boxtimes$	Point of Appropriation/Well (POA)	OWIDD
	Point of Diversion (POD)		Additional Point of Appropriation (APOA)	OWRD
	Additional Point of Diversion (APOD)		Surface water POD to Ground Water POA (S	W/GW)
Note	e: Authorized Wells 4, 8, 13, and 16 are bei	ng rep	laced by Proposed Wells 1 and 2	
Will all	of the proposed changes affect the entire	wate	r use permit?	
	Yes Complete only the proposed ("to" la listed above to describe the proposed		ection of Table 2 on the next page. Use the "C ges.	ODES"
	No Complete all of Table 2 to describe to	the po	rtion of the permit to be changed.	
or a change	in place of use:			
oes the peri		and T	O which the place of use is being moved?	
	ler of record by submitting a completed Re		s being <b>moved must be assigned to the perm</b> for Assignment form and the required statutor	
the propos	ed place of use contiguous to the authoriz	zed pl	ace of use? ⊠ Yes □ No	
unless the cl	hange to non-contiguous lands is in further	ance o	re contiguous to the authorized place of use of mitigation or conservation efforts undertaker eatened, or endangered under ORS 496.171 to to 1544), as determined by the	

listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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Table 2. Description of Changes to Water Use Permit # G-17966

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.

IGES	Priority Date	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012
PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.	POD(s) or POA(s) to be used (from Table 1)	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14	#1 - #14
PROPOSED (the "to" or "on" lands) it would appear AFTER PROPOSE are made.	Acres (if applicable)	0.4 IR 18.9 IS*	0.3 IR 23.1 IS*	0.2 IR 30.7 IS*	34.1 IS*	0.2 IR 17.6 IS*	0.3 IR 14.8 IS*	1.9 IR 14.8 IS*	0.1 IR 1.5 IS*	1.9 IR	8.1 IR 27.6 IS*	4.2 IR 32.7 IS*	2.1 IR	23.7 IR
(the "to" cear AFTE are made.	Gvt Lot or DLC													
SED (the appear, are	Gwt Tax Lot Lot or DLC	006	006	006	006	006	006	006	006	006	006	006	006	006
SOAC	7, 7,	NE	NE	SE	SE	š	N	SW	SW	š	NW	WN	WN	SW
PR(	74	NE	SE	Z	SE	N X	SW	WN	SW	Z	N	SW	SE	NE
sting	Sec	20	20	20	20	21	21	21	21	28	28	28	28	28
he lis	Rng	33 E	33 E	33 E	33 E	33 E	33 E	33 E	33 E	33 E	33 E	33 E	33 E	33 E
	Twp	S	S	S	S	S	S	S	N	S	S	S	S	S
		22	22	22	22	22	22	22	22	, 22	22	22	22	22
Proposed Changes (see	"CODES" from previous page)	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA	POU/POA/ APOA
OSED seed.	Priority Date													
lands) RE PROP	POD(s) or POA(s) (name or number from Table													
" or "off" ate BEFO r right that	Got Acres Lot or (if DLC applicable)												D	0.
from' ertification and a MGES	Gvt Lot or DLC												INE	6 202
the "from" on the certifical CHANGES	Tax												RECEIVED	MAY 2 6 2020
H o H		_												
HORIZ Appears	7, 4,	g.											Œ	
AUTHORIZ that appears	Sec 1/4 1/4	ø											Œ	
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.	Rng Sec 1/4 1/4												<u> </u>	

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2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	E 28 NW SW 900 2.9 IR 31.6 IS*	E 28 SW SW 900 0.8 IR 17.9 IS*	E 28 SE SW 900 10.6 IR #1	E 29 NE NE 900 1.8 IR #1 - #14	E 29 SE NE 900 31.0 IS* #1 - #14	E 29 SW NW 900 0.5 IR #1	E 29 SE NW 900 0.7 IR #1	E 29 NE SW 900 34.9 IR #1	E 29 NW SW 900 32.7 IR #1 - #14	E 29 SW SW 900 30.5 IR #1 - #14	E 29 SE SW 900 33.8 IR #1 - #14	E 29 NE SE 900 35.1 IS* #1	E 29 NW SE 900 1.0 IR #1	E 29 SW SE 900 1.5 IR #1 - #14	E 29 SE SE 900 0.2 IR #1 - #14	E 30 SW NE 1700 3.7 IR #1 - #14	E 30 SE NE 1700 3.6 IR #1 - #14	F 30 NF SW 1800 141B #1	2001
	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	S 33	22 S 33	
	SPENS T		100000	100000000000000000000000000000000000000	36.0000	2000			A TOTAL OF			LANCE OF	200	75310315	A COLUMN		POU/POA/ APOA	POU/POA/	

6/11/2012 6/11/2012 6/11/2012 6/11/2012 6/11/2012	#1 - #14 #1 - #14 #1 - #14 #1 - #14 #1 - #14	31.6 IR 28.8 IR 33.1 IR 31.2 IR 31.1 IR	006 006 006 006		SE S		+ + + + +		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	APOA APOA APOA APOA APOA APOA APOA APOA
6/11/2012	- #1	31.6 IR	006	SW	SE	31	1		22	POU/PO APOA
6/11/2012	#1 - #14	27.9 IR	006	SW	SW	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	20.2 IR	006	SW	Š Z	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	28.5 IR	006	SW	ZE	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	30.1 IR	006	N N	SE	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	20.0 IR	006	N N	SW	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	22.4 IR	006	N	ž	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	36.1 IR	006	N N	NE	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	30.5 IR	006	NE	SE	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	38.5 IR	006	NE	SW	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	39.9 IR	006	NE	WN	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	36.9 IR	006	NE	Z	31	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	36.9 IR	006	SE	SE	30	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	35.3 IR	006	SE	SW	30	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	38.0 IR	006	SE	Š	30	33 E	S	22	POU/POA/ APOA
6/11/2012	#1 - #14	38.4 IR	006	SE	Z	30	33 E	S	22	POU/POA/ APOA

	III.	1190.6 IR 582.0 IS	TOTAL ACRES	TAL	TO							1261.3 IR 511.3 IS*	TOTAL ACRES
4 6/11/2012	#1 - #14	1.1 IR	006		SW	SW	33	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	36.5 IR	006		SE	SE	32	33 E	S	22	POU/POA/ APOA		-
4 6/11/2012	#1 - #14	33.4 IR	006		SE	SW	32	33 E	S	22	POU/POA/ APOA	OWRD	-
4 6/11/2012	#1 - #14	2.9 IR 22.7 IS*	006		V SE	N N	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	1.0 IR 25.4 IS*	006		SE	NE	32	33 E	S	22	POU/POA/ APOA	MAY 9.6 2020	
4 6/11/2012	#1 - #14	32.6 IR	006		SW	SE	32	33 E	S	22	POU/POA/ APOA	RECEIVED	
4 6/11/2012	#1 - #14	32.1 IR	006		NS /	SW	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	28.4 IR	006		NS /	N N	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	33.1 IR	006		SW	NE	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	37.0 IR	006		WN	SE	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	28.2 IR	006		NW /	SW	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	33.6 IR	006		NN /	W	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	39.0 IR	006		N	Z	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	4.2 IR 28.1 IS*	006		NE	SE	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	0.9 IR 30.3 IS*	006		NE NE	SW	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	3.3 IR 25.9 IS*	006		/ NE	WN	32	33 E	S	22	POU/POA/ APOA		
4 6/11/2012	#1 - #14	1.5 IR 30.5 IS*	006		NE	NE	32	33 E	S	22	POU/POA/ APOA		

Additional remarks: 70.7 acres "IR" to be diminished to 70.7 acres "IS" Wells #1-#14 represent Wells 1, 2, 3, 5, 6, 7, 9-12, and 14.

	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: <b>S-54843</b>
1	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. ( <b>Tip</b> : 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
#1	YES	HARN52834								
#2	YES	HARN52827							8	
#3	YES	HARN51858								
#5	YES	HARN52187							REC	EIVED
#6	YES	HARN52708								
#7	YES	HARN52767							MAY	2 6 2020
#9	YES	HARN52754							01	WRD
#10	YES	HARN52765							0	AAND
#11	YES	HARN52805								
#12	YES	HARN52783								
#14	YES	HARN52789							381	

# PERMIT # <u>S-54843</u>

**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	1/4 1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
POD 1 (Rock Creek Reservoir)	□ Authorized     □ Proposed	NA	22 S	33 E	16	SE SW	900	210' N & 1340' E from SW COR, Sec 16

Reservoir)									
Check	all typ	e(s) of change(	(s) proposed	below (	change	"COD	ES" are pro	vided i	n parentheses):
	Place	e of Use (POU)				Point o	f Appropriat	ion/We	ll (POA)
	Poin	t of Diversion (	POD)			Additio	onal Point of	Approp	oriation (APOA)
	Addi	itional Point of	Diversion (A	APOD)		Surface (SW/G		to Grou	and Water POA
Will al	ll of the	proposed cha	nges affect t	he entir	e water	use pe	rmit?		
	Yes	Complete only "CODES" liste						the nex	t page. Use the
$\boxtimes$	No	Complete all o	of Table 2 to	describe	the por	tion of t	the permit to	be char	nged.
For a chang	e in pla	ace of use:							
	-		own or con	trol the l	and T	O which	the place o	f use is	being moved?
⊠ Yes □ N									
permit as	a perm	ner of the land tit holder of red fee for an assig	cord by subr						
Is the propo	sed pla	ice of use conti	guous to the	authori	ized pla	ace of u	se? ⊠ Yes	□No	
unless the for the purp 496.192 or listing ager	change poses o the fed ncy. Co	to non-contigue	ous lands is in pecies listed d Species Ac being either a	in further as sensiti at of 1972 adjacent	rance or ive, thro 3 (16 U land or	f mitigate eatened, .S.C. 15 land sep	tion or conse or endanger 531 to 1544), parated from	ervation red under as deter the lan	d to which a
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Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

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

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# Table 2. Description of Changes to Water Use Permit # S-54843

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. 2 6 2020 If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

OWRD	Priority Date	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012
NGE	THE RESERVE OF THE PARTY OF THE	1/9	1/9	1/9	1/9	1/9	1/9	1/9	1/9	1/9	1/9	1/9	1/9	1/9
PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.	POD(s) or POA(s) to be used (from Table 1)	POD 1												
PROPOSED (the "to" or "on" lands) it would appear AFTER PROPOSEI are made.	Acres (if applicable)	19.3 IS*	23.4 IS*	30.9 IS*	34.1 IS*	17.8 IS*	15.1 IS*	16.7 IS*	1.6 IS*	*SI 6.1	35.7 IS*	36.9 IS*	2.1 IS*	23.7 IS*
(the "to" car AFTE) are made.	Gvt Lot or DLC													
SED (the appear are	Gvt Tax Lot Lot or DLC	006	006	006	006	006	006	006	006	006	006	006	006	006
SOAC	7.	NE	NE	SE	SE	N N	N.	SW	SW	š	N	N N	š	SW
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ting a	Sec	20	20	20	20	21	21	21	21	28	28	28	28	28
le list	Rng	田	豆	<b>E</b>	田	田	ഥ	四	<b>E</b>	田	田	田	田	표
Ę	ALC:	S 33	S 33	S 33	S 33	33	33	33	33	33	33	33	33	33
	Twp	22	22	22	22 8	22 S								
Proposed Changes	"CODES" from previous page)	POU												
OSED nged.	Priority Date	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012
AUTHORIZED (the "from" or "off" lands)  The listing that appears on the certificate BEFORE PROPOSEJ  CHANGES  List only that part or portion of the water right that will be changed.	POD(s) or POA(s) (name or number from Table 1)	POD 1												
AUTHORIZED (the "from" or "off" lands) that appears on the certificate BEFORE PR CHANGES	Gvt Acres Lot or (if DLC applicable)	10.4	40.0	10.0	9.1	40.0	11.0	9.0	40.0	40.0	10.0	40.0	0.7	40.0
(the "from" the certific CHANGES	Gvt Lot or DLC													
the c CHA	Tax	006	006	006	006	006	006	006	006	006	006	006	006	006
IZEE ars or portio	74	NE	NE	NE	SE	N N	3	N N	N N	SW	SW	SW	Z	NE
HOR appe	1, 4,	NE	SW	SE	NE	NE	N N	SW	SE	NE	SW	SE	NE	×
AUT; that	Sec	20	20	20	20	28	28	28	28	28	28	28	29	29
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ne li	Δ.	33	33	33	33	33	33	33	33	33	33	33	33	33
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	the state of the s													

1					T															
/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012
PODGWRPh/2012	6/11	6/11	6/11	6/11	6/11	6/11	6/11	6/11	6/11	6/11	6/11	6/1	6/1	6/1	6/1	1/9	6/1	1/9	6/1	6/1
Š	D 1	D 1	D 1	POD 1	POD 1	POD 1	D 1	POD 1	D 1	D 1	D 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1
РО	POD 1	POD 1	POD	ЬО	ЬО	PO	POD	PO	POD	POD	POD	PO								
34.5 IS*	18.7 IS*	10.6 IS*	29.9 IS*	31.0 IS*	0.5 IS*	0.7 IS*	34.9 IS*	32.7 IS*	30.5 IS*	33.8 IS*	35.1 IS*	6.0 IS*	26.6 IS*	29.7 IS*	3.7 IS*	3.6 IS*	1.4 IS*	0.4 IS*	2.0 IS*	38.4 IS*
34.	18.	10.0	29.	31.	0.5	0.7	34.	32.	30.	33.	35.	9.9	26.	29.	3.	3.0		0,.	2.0	38.
006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	1700	1700	1800	1800	1800	900
SW	SW	SW	Z	Z	N	N N	SW	SW	SW	SW	SE	SE	SE	SE	Z	NE	SW	SW	SW	SE
N N	SW	SE	NE	SE	SW	SE	Z	š	SW	SE	Z	N N	SW	SE	SW	SE	Z	SW	SE	NE
28	28	28	29	29	29	29	29	29	29	29	29	29	29	29	30	30	30	30	30	30
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33	33	33	33	33	33	33	33	33	33	33	33	33	33	S 33	S 33	S 33	S 33	S 33	S 33	S 33
22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 S	22 8	22 8	22 8	22 8	22 8
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POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU	POU
11/2012	2012	2012	11/2012	2012	11/2012	11/2012	11/2012	11/2012	11/2012	11/2012	11/2012	11/2012	11/2012	11/2012	2012	2012	2012	2012	2012	11/2012
6/11/2	6/11/2012	6/11/2012	6/11/2	6/11/2012	6/11/2	6/11/2	6/11/2	6/11/2	6/11/2	2/11/9	2/11/9	2/11/9	6/11/2	2/11/9	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	2/11/9
POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1	POD 1
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39.1	9.0	38.0	39.4	40.0	40.0	40.0	40.0	28.0	10.8	0.4	25.7	40.0	38.2	40.0	40.0	40.0	40.0	40.0	40.0	40.0
006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006
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33				S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
22 S 33	22 S	22 S	22 S	22	22	22	22	22	22	22	22	22	22	22	22	22	47	22	22	22

6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	6/11/2012	
/11/9	/11/9	/11/9	/11/9	/11/9	/11/9	/11/9	/11/9	/11/9	/11/9	/11/9	6/11/9	6/11/	6/11/	6/11/	6/11	6/11	6/11	6/11	6/11	
POD 1																				
38.0 IS*	35.3 IS*	36.9 IS*	36.9 IS*	39.9 IS*	38.5 IS*	30.5 IS*	36.1 IS*	22.4 IS*	20.0 IS*	30.1 IS*	28.5 IS*	20.2 IS*	27.9 IS*	31.6 IS*	28.8 IS*	33.1 IS*	31.2 IS*	31.1 IS*	32.0 IS*	
006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	
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POD 1																				
40.0	40.0	40.0	40.0	40.0	38.0	38.0	40.0	40.0	38.0	38.0	40.0	40.0	40.0	40.0	40.0	40.0	38.0	38.0	40.0	
006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	006	
NE	3	N N	N N	N N	SW	SW	SW	SW	SE	SE	S	SE	N N	N N	N N	N	SW	SW	SW	-
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S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	F
22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	9 6	3	ART	22	22	1

# Additional remarks: The applicant proposes to extinguish and will voluntarily relinquish 136.3 acres 'IS' that fall outside of the center pivot Sprinkler fields on the "to" lands.

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								I CI IIII	t # 5-54045	t.
		er water righ m" or "to" la				ermits or	ground wa	ater regist	rations asso	ociated
			2	1000000				C 170		
If Y	ES, list	the other certi	ficate, p	ermit, or g	round wa	iter registra	ition numbe	ers: <u>G-1/90</u>	00	
lanc to a	l for irrig water ri	(s) are for irrigation that are ght certificate or ground wat	subject or groun	to transfer	must eitlegistration	her change n must be f	concurrent iled separa	ly or be car tely in a wa	ncelled. An	y change
For a	change	in point(s) of	f approp	oriation (v	vell(s)) o	r additiona	al point(s)	of approp	riation:	
	associa map. (	og(s) are attace ated with the of <b>Tip</b> : You manapps.wrd.state	correspo y search	nding well for well lo	l(s) in Tal	ble 1 above Departme	and on the ent's web pa	accompar		
AN	D/OR									
	d e y	Describe the co o not have a v stimate" for e ou consult a l ssembling the	well log. ach requicensed	For <i>propo</i> nested info well drille	osed wells rmation e r, geologi	not yet co element in t ist, or certif	nstructed of the table. The fied water r	<i>r built</i> , pro he Departn	ovide "a bes	t mends
Ar or yc wl ap	ny well(so the account transf hether the opropriate	ction of Poin s) in this listing empanying application e proposed we ion (POA). The same source a	ng must be plication until it ell(s) wine Depart	be clearly to map. Fai is received ll access the	tied to con lure to pr d. The inf ne same s	ovide the incomment of the overall over the overall overall over the overall overall over the overall overall over the overall over the overall	nformation s necessary fer as the au	will delay for the dep athorized p	the process partment to point(s) of	ing of assess
Proposed or Authorized POA Name or	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	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of

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full rate of water right

(in feet)

No)

Number

	HARN 52834
STATE OF OREGON HARN 52	2834
WATER SUPPLY WELL REPORT	WELL LABEL # L
(ORS 537.765 & OAR 690-205-0210)	START CARD#
Instructions for completing this report are on the last page of this form.	ORIGINAL LOG #
(1) LANDOWNER First Name Last Name Local Field +	(9) LOCATION OF WELL (legal description)  County Harn Twp 22 N or S Range 33 E or W W.M.
ompany Address 885 Hill shorough Blvd CityHill Shorough State A Zip 94010	Sec 32 2 1/4 of the 1/4 Tax Lot 900
	Tax Map Number         Lot           Lat         ' "or DMS or DD
(2) TYPE OF WORK  Conversion Deepening	Long ° ' or DMS or DD
Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a)	Street Address of Well (or nearest address) 40637 Huy 20E, Burns
(2a) PRE-ALTERATION: Well Depth ft.	Street Address of Well (or nearest address) (CO) I HW QUE, ENTIN
Seal Material	
Casing Type:	(10) STATIC WATER LEVEL
Casing Gauge Casing Diameter	Date SWL(psi) + SWL (ft)
	Existing Well/Pre-Alteration
(3) DRILL METHOD Rotary Air Rotary Mud Auger	Completed Well 3-10-16
Cable Cable Mud Reverse Rotary Other	Flowing Artesian? Yes Dry Hole? Yes
(4) PROPOSED USE Domestic Purigation Community	WATER BEARING ZONES Depth water was first found
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection	SWL Date   From   To   Est Flow   SWL (psi)   + SWL (ft)
☐ Thermal ☐ Other	3-10-16
(5) BORE HOLE CONSTRUCTION	
Depth of Completed Well ft. Special Standard: \( \subsection Yes \) (attach copy)	
A STORY CONTROL OF THE PROPERTY OF THE PROPERT	
BORE HOLE SEAL Dia From To Material From To Amount Scks/lb	
18 0 200 Bertint @ 100	(11) WELL LOG Ground Elevation
14 200 450	Material From To
	5014 0 10
	GRAC Broken
How was seal placed: Method A B C D E	GRAC BROK-1
Dother Pource - Packer	CIAY W/Croce 220 450
Backfill placed from ft. to ft. Material	
"ilter pack from ft. to ft. Material Size	Dro-
(5a) ABANDONMENT USING UNHYDRATED BENTONITE:	RECEIVED RECEIVED
Calculated Amount Proposed to be Used:sacks/lbs	
Actual Amount Used: sacks/lbs	OCT 0 3 2019 MAY 2 6 2020
Sacks/108	2013 MAT 2 10 ZUZU
(6) CASING/LINER	
Csng Linr Dia + From To Gauge Steel Plastic Welded Thrd	OWRD
14 A 1 220 250 X	OVIND
	Date Started 3-10-16
	(unbonded) Water Well Constructor Certification
Shoe Inside Outside Other Location of shoe(s)	I certify that the work I performed on the construction, deepening, alteration, or
Temporary casing Yes Diameter From To	abandonment of this well is in compliance with Oregon water supply well
(7) PERFORATIONS/SCREENS	construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

the best of my knowledge and belief.

License Number	Date	
Signed		

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number	Sut-Air	Date 3	-20-16
Signed Zan	Win	7	
Contact Info. (optional)			

(8) WELL TESTS: Minimum testing time is 1 hour ☐ Pump ☐ Bailer Air ☐ Flowing Artesian

From

Perforations

Perf Scrn Csng Linr

Screens

Method

Screen

Туре

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) emperature °F Lab analysis Yes By 1660 Water quality concerns? Tyes (describe below) TDS ppm From Description To Amount Units

Material Screen/

slot

width

Slot

length

# of

slots

Tele/

pipe

size

RECENSED MAY 2 0 2020

GRIMO.

# STATE OF OREGON

### **HARN 52827**

WELL LABEL # L START CARD # 2/

WATER SUPPLY WELL REPORT (ORS 537.765 & OAR 690-205-0210) ORIGINAL LOG# Instructions for completing this report are on the last page of this form. (1) LANDOWNER Owner Well I.D.
Last Name //Orenfeld-(9) LOCATION OF WELL (legal description) First Name County Harn Twp 22 Nor S Range 33 Eor W W.M. ompany ddress 885 Hilshorough Blv C CityHilsborough State CA 1/4 of the \_\_\_\_\_ 1/4 Tax Lot 900 Sec 32\_\_ Tax Map Number Lat (2) TYPE OF WORK New Conversion Deepening ☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a) Street Address of Well (or nearest address) 40637 Hwy 20E, Burns (2a) PRE-ALTERATION: Well Depth Seal Material Benton Casing Type: Steel Plastic Other (10) STATIC WATER LEVEL Casing Diameter 18 Casing Gauge Date SWL(psi) SWL (ft) 20 Existing Well/Pre-Alteration 20 (3) DRILL METHOD ☐ Rotary Air ☐ Rotary Mud ☐ Auger Completed Well Flowing Artesian? Yes Dry Hole? Yes Cable Cable Mud Reverse Rotary Other WATER BEARING ZONES Depth water was first found (4) PROPOSED USE Irrigation ☐ Domestic Community Community Livestock ☐ Industrial/Commercial ☐ Dewatering ☐ Injection SWL Date From To Est Flow SWL (psi) + SWL (ft) ☐ Thermal 60 Other 100 40 33 (5) BORE HOLE CONSTRUCTION

Depth of Completed Well \_\_\_\_\_\_\_\_\_ ft. Special Standard: \_\_\_\_\_ Yes (attach copy) 20 500 160 BORE HOLE Dia From Material From To Amount Scks/lbs (11) WELL LOG Ground Elevation Balton, + 16000 LBS Material How was seal placed: Method □ A □ B □ C □ D □ E Dother Faures Backfill placed from \_\_\_ \_\_\_ ft. to \_ ft. Material 05 lter pack from \_\_\_\_ ft. to ft. Material (5a) ABANDONMENT USING UNHYDRATED BENTONITE: Calculated Amount Proposed to be Used: Actual Amount Used: 0 3 2019 sacks/lbs MAY 2 6 2020 (6) CASING/LINER Csng Linr Dia + From To Gauge | Steel | Plastic | Welded | Thrd OWRD OWRL 120 250 160 4-1-15 Date Started Completed (unbonded) Water Well Constructor Certification Shoe Inside Outside Other Location of shoe(s) I certify that the work I performed on the construction, deepening, alteration, or Temporary casing Yes Diameter abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to (7) PERFORATIONS/SCREENS the best of my knowledge and belief. Screens Material License Number Screen/ Tele/ Signed Screen slot # of pipe Scrn Csng Linr Dia To width length slots size (bonded) Water Well Constructor Certification 1/4 120 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. (8) WELL TESTS: Minimum testing time is 1 hour Date 4-30-15 Pump Bailer ☐ Air ☐ Flowing Artesian Drawdown | Drill stem/Pump depth Yield gal/min Com lote Signed Contact Info. (optional) emperature 62 °F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS ppm From To Description Amount Units

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.

RECVETED REPORT
STATE OF OREGON
DEC 3010 Jetype or print)

of well completion.  WATER RESOURCES	DEC 301977	NO		
(1) OWNER: SALEM, OREGO	(10) LOCATIONSOURCELIDEPT			
	1			BECCI
TOOL STREETS RANGE	County Harney OREGORIE's well		76-77	-SIECEI
Address S.R. 2-15141 Hwy. 20  Burns. Oregon 97720	NE 14 NE 14 Section 32 T. 225		33E	W.M.
(2) TYPE OF WORK (check):	Bearing and distance from section or subdivi	sion corn	er	MAY 2 6
				<u> </u>
New Weil X Deepening  Reconditioning  Abandon  If abandonment, describe material and procedure in Item 12.				CHA/E
	(11) WATER LEVEL: Completed	well.		OWF
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found		-30	ft.
Rotary Driven Domestic Industrial Municipal [	Static level 10 ft. below land	surface.		121/77
Durg Cl Board Cl Todaylin C market	Artesian pressure lbs. per squa			13111
VACUNG TRIGHTALL TO	ins. per squa	ire inch.	Date	<del></del>
ASING INSTALLED: Threaded Welded	(12) WELL LOG: Diameter of well	helow ca	sin a	12
12." Diam. from2+ ft. to116 ft. Gage250	. 5-4 200			
" Diam, from ft. to ft. Gage	_ and show thickness and nature of each strat	um and a	quifer n	enetrated
PERFORATIONS: Perforated? P Vec   No.	with at least one entry for each change of form	ation Ren	ort each	change in
Tottofated: 2 Tes 110.	position of Static Water Level and indicate pri	ncipal wa	ter-beari	ng strata.
WIGHT TACKOLY	MATERIAL	From	То	SWL
Size of perforations 1/4 +3/16in. by 6+3 in.	Top soil	0	4	
1332 perforations from 49 ft. to 116 ft		1	20	
perforations from ft. to ft		30	35	
perforations from ft. to ft	Gravel Cemented + Sand	35	43	
(7) SCREENS: Well screen installed?   Yes No	Sand + Gravel w/ Clay	43	63	
Manufacturer's Name	Gravel heavy Sanded	63	71	
Type Model No.	Clay heavy Sanded	71	92	
Diam. Slot size Set from ft. to ft.		92	96	
Diam. Slot size Set from ft. to ft.		96	98	
t. to	- ALSAST	98	104	
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Send Black Coarse	104	110	
	Clay Green Sandy	110	175	
Was a pump test made? Yes No If yes, by whom?	Clay Green	175	195	
Yield: 850 gal./min. with 190 ft. drawdown after 2½ hrs.	- Tay around	195	205	
" " "	-Clay Green	205	225	
" " "	Black Sand 1/8 Gravel	225	240	
Bailer test gal./min. with ft. drawdown after hrs.	Clay Green Gray	240	260	
Artesian flow g.p.m.	Gravel + Sand	260	270	
erature of water 52° Depth artesian flow encountered ft.	Claystone Gray Green Hard	2701	280	•
	Work started Aug. 30 19 77 Complete	ed De	c. 14	19 77
9) CONSTRUCTION:	Date well drilling machine moved off of well	De	c. 14	19 77
Vell seal—Material usedcement grout	Drilling Machine Operator's Certification:			
Well sealed from land surface to18ft.	This well was constructed under my	direct	super	vision.
Diameter of well bore to bottom of seal	Materials used and information reported	above a	re true	to my
liameter of well bore below seal	best knowledge, and belief	1:	/10	77
Tumber of sacks of cement used in well seal	[Signed] (Orilling Magding Operator)	Date	710	19.//
low was cement grout placed?	Drilling Machine Operator's License No.	91	8	
5 gal. water 100 lbs. cement	Water Well Contractor's Certification:			
and the second s	This well was drilled under my jurisdi	ation a-	d +b:	mant to
Vas a drive shoe used? ☑ Yes ☐ No Plugs Size: location ft.	true to the best of my knowledge and bel	ief.	ı mıs re	port is
id any strata contain unusable water? 🔲 Yes 🏗 No	WO			
	Name Bob Scheler Drilling			
ype of water? depth of strata	Address 405 N Burkhart Albany	-,Ore	30n9	7321
lethod of sealing strata off	[Signed] Bot Scheler			
as well gravel packed? Tyes No Size of gravel:	[Signed] (Water Well Contr	actor)		
ravel placed from	Contractor's License No610 Date	12/	18	10 77
	Date			19

# **HARN 227**



# Application for Repl: 134027 Well ID Number

D

			RECEIVED BY OWR
Do not complete if	the well already has a We	ll Identification Number.	JUN 03 2014
	FORMATION		SALEM, OR
Current Owner Name (	(please print): Bo Thorenfeldt		
Mailing Address: 888	Hillsborough Blvd		RECEIVED
City, State, Zip: Hillsb	orough, CA 94010		WAY 6 6 2020
Mail Well ID Tag to:	SAME AS ABOVE	✓ In Care Of (C/O)	MAY 2 6 2020
Name & Address: Eric	Bauer		OWIDD
City, State, Zip: 40	0637 Hwy 20 E, &	BURNS, OV 97726	OWND
II. WELL LOCA	ATION INFORMATION (Ple	ase fill out as completely as possible)	
222		ange: 33E (East / West)	Section: 32
	O County Harn	ey NE	1/4 NE 1/4
GPS Coordinates:			X/ X/
	City: HWV 20 (~	fof), Burns	
	fferent street address in the past:		
		se fill out as completely as possible)	
	irrigation, commercial, industria		40"
		/18/77 Total Well Depth: 600	Casing Diameter: 10"
Owner at time the well	was constructed (if known): Los	st Springs Ranch	
Other Information: HA Tagged at De	RN 51858, L109028, HARN :	227 IGINAL	
	ease print): Denise Montgome		
PHONE: 541-548-58		IL &/or FAX: neecee@apeands.com	1
		ent 725 Summer St NE, Suite A, Salem, O received, and Well ID Numbers are mailed	
	For Official Use Only	by the Oregon Water Resources Departm	ent:
Received Date:		Well Log Number:	Well Identification #:
6-3-14		HARN 227 + 51858 ORIG / DEEPEN	L-109028 A
		7	raded tag#
Last Update: 4/30/14		Well I.D. Number/2	baria, log
		3 / / '/ -	/ / /



Last Update: 5/15/18

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

# Application for Well ID Number

RECEIVED

Do not complete if the well already has a Well Identification Number	Do	not	complete	if the	well e	already	has a	ı Well	Identi	fication Number
--	----	-----	----------	--------	--------	---------	-------	--------	--------	-----------------

APR 2 5 2019

	OWRD
I. OWNER INFORMATION And Post	
Current Owner Name (please print): Andy Root	DECENTER
Mailing Address: 524 Hwy 20 N	RECEIVED
City, State, Zip: Hines, OR 97738	MAY 2 6 2020
<del></del>	re Of (C/O)
Name & Address: All Points Engr & Surveying, Inc, PO Box 767	OWRD
City, State, Zip: Terrebonne, OR 97760	
II. WELL LOCATION INFORMATION (Please fill out as completely	
Township: 22S (North / South) Range: 33E (East / West) S	Section: 32 NE 1/4 of the NE 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 900	County Harney
GPS Coordinates: 43.6216692 - 118.6731822	
Street Address of Well, City: 40637 Hwy 20 E Burns, OR	
If the property had a different street address in the past:	
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):  Date Well Constructed (or property built): 7/16/12,12/18/77 Total W	rrigation ell Depth: 600 Casing Diameter: 10"
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):  Date Well Constructed (or property built): 7/16/12,12/18/77 Total W.  Owner at time the well was constructed (if known): Lost Springs Rand	rrigation  ell Depth: 600
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):  Date Well Constructed (or property built): 7/16/12,12/18/77 Total W.  Owner at time the well was constructed (if known): Lost Springs Rand Other Information: This is for a replacement TAG. TAG L-10	rrigation  ell Depth: 600
Use of Well (domestic, irrigation, commercial, industrial, monitoring):  Date Well Constructed (or property built): 7/16/12,12/18/77 Total W.  Owner at time the well was constructed (if known): Lost Springs Rand  Other Information: This is for a replacement TAG. TAG L-10	rrigation  ell Depth: 600
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):	rrigation  ell Depth: 600 Casing Diameter: 10"  ch Well Report # (if known): HARN 227 & 51858  9028 Lost.
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):	rrigation  ell Depth: 600
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):  Date Well Constructed (or property built):  Owner at time the well was constructed (if known):  Lost Springs Rand Other Information:  This is for a replacement TAG. TAG L-10 SUBMITTED BY (please print):  Denise Montgomery  PHONE:  541-548-5833  EMAIL &/or FAX:  Send application to: Oregon Water Resources Department 725 Summer St NI	rrigation  ell Depth: 600 Casing Diameter: 10"  Well Report # (if known): HARN 227 & 51858  9028 Lost.  neecee@apeands.com  E. Suite A. Salem. Oregon 97301: or fax to (503) 986-0902.
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):  Date Well Constructed (or property built):  Owner at time the well was constructed (if known):  Lost Springs Rand Other Information:  This is for a replacement TAG. TAG L-10 SUBMITTED BY (please print):  Denise Montgomery  PHONE:  541-548-5833  EMAIL &/or FAX:  Send application to: Oregon Water Resources Department 725 Summer St NI	rrigation  ell Depth: 600 Casing Diameter: 10"  Well Report # (if known): HARN 227 & 51858  9028 Lost.  neecee@apeands.com  E. Suite A. Salem. Oregon 97301: or fax to (503) 986-0902.
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):  Date Well Constructed (or property built):  Owner at time the well was constructed (if known):  Lost Springs Rand Other Information:  This is for a replacement TAG. TAG L-10 SUBMITTED BY (please print):  Denise Montgomery  PHONE:  541-548-5833  EMAIL &/or FAX:  Send application to: Oregon Water Resources Department 725 Summer St NI	rrigation  ell Depth: 600 Casing Diameter: 10"  Well Report # (if known): HARN 227 & 51858  9028 Lost.  neecee@apeands.com  E. Suite A. Salem. Oregon 97301: or fax to (503) 986-0902. ers are mailed within 4-5 business days.
III. GENERAL WELL INFORMATION (Please fill out as completely Use of Well (domestic, irrigation, commercial, industrial, monitoring):	rrigation  ell Depth: 600 Casing Diameter: 10"  Well Report # (if known): HARN 227 & 51858  9028 Lost.  neecee@apeands.com  E. Suite A. Salem. Oregon 97301: or fax to (503) 986-0902.  ers are mailed within 4-5 business days.  **Replacement tag **  atter Resources Department:
Use of Well (domestic, irrigation, commercial, industrial, monitoring):  Date Well Constructed (or property built):  Owner at time the well was constructed (if known):  Cother Information:  This is for a replacement TAG. TAG L-10 (SUBMITTED BY (please print)):  Denise Montgomery  PHONE:  541-548-5833  EMAIL &/or FAX:  Send application to: Oregon Water Resources Department 725 Summer St NI Applications are processed in the order they are received, and Well ID Number 10 (Please Print) (Please Print	rrigation  ell Depth: 600 Casing Diameter: 10"  Well Report # (if known): HARN 227 & 51858  9028 Lost.  Deecee@apeands.com  E. Suite A. Salem. Oregon 97301: or fax to (503) 986-0902. ers are mailed within 4-5 business days.  **Replacement + ag **  cater Resources Department:  Number: Well Identification #:

13447 -Well I.D. Number/2 WCC

# AMENDED 7-18-12 STATE OF OREGON WATER SUPPLY WELL REPORT

# **HARN 51858**

		Page 1 of 1
WELL I.D. LABEL# L	109028	LOST! Repl: L 134027
START CARD#	1017105	
ORIGINAL LOG #		

(as required by ORS 537.765 & OAR 690-205-0210)	7/16/2012	ORIGINAL LOG #		
(1) LAND OWNER Owner Well I.D.				
First Name BO Last Name THORENFELDT	(9) LOCATI	ON OF WELL (legal des	cription)	
Company LOST SPRINGS RANCH		Twp 22.00 S N/S		E E/W WM
Address 885 HILSBORO BLVD	Sec 32 N	E 1/4 of the NE 1/4	4 Tax Lot 76	5778
City HILSBORO State CA Zip 94010	Tax Map Number		Lot	
(2) TYPE OF WORK New Well Deepening Conversion	Lat°			DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Long	" or		DMS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd	€ Stre	et address of well Neare	st address	
Casing:	HWY 20 EAST			
Material From To Amt sacks/lbs	BURNS, OR. 97	7720		
Seal:				
(3) DRILL METHOD	(10) STATIC	WATER LEVEL Date	SWL(psi) +	- SWL(ft)
Rotary Air Rotary Mud Cable Auger Cable Mud	Existing We	II / Pre-Alteration 7/12/2012	SWL(psi) +	16
Reverse Rotary Other	Completed V		+-+	16
(4) PROPOSED USE Domestic Irrigation Community		Flowing Artesian?	Dry Hole?	
Industrial/Commercial Livestock Dewatering	WATER BEARIN	NG ZONES Depth water	r was first found	35.00
Thermal Injection Other	SWL Date		ow SWL(psi)	
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy	7/16/2012	35 280 500	)	16
Depth of Completed Well 600.00 ft.  BORE HOLE SEAL sacks/				<del>    -                                  </del>
Dia From To Material From To Amt lbs				<del>     </del>
12 0 275	]			
10 275 600				
	(11) WELL L	OG Crownd Flavotion		
How was seal placed: Method A B C D E	4	Ground Elevation	From	То
	exsisting hole	Material	0	275
Other ft. to ft. Material	claystone green		275	600
Filter pack from ft. to ft. Material Size				
Explosives used: Yes Type Amount				
	I	RECEIVED	)—	
(5a) ABANDONMENT USING UNHYDRATED BENTONITE		11202	_	
Proposed Amount Actual Amount		MAY 2 6 2020		
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd		WAI		
Casing Ellier 5th + From 10 Gauge Sti Fish Will Find				
		OWRD		
		01111		
Shoe Inside Outside Other Location of shoe(s)				
Temp casing Yes Dia From To				
(7) PERFORATIONS/SCREENS				+
Perforations Method	D . C 12	ua anna Commi	ata 7/16/2012	
Screens Type Material Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	Date Started 7	/12/2012 Comple	ete <u>7/16/2012</u>	
Screen Liner Dia From To width length slots pipe size		ter Well Constructor Certifica		
		e work I performed on the cons		
	construction star	f this well is in compliance and and information of the compliance	mation reported	above are true to
		nowledge and belief.	mation reported	doore are true to
		Date	į.	
(8) WELL TESTS: Minimum testing time is 1 hour				
Pump Bailer • Air Flowing Artesian	Signed			
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water	Well Constructor Certification	n	
500 600	I accept respons	ibility for the construction, deep	pening, alteratio	n, or abandonmen
	work performed	on this well during the constructi	ion dates reported	d above. All work
		ng this time is in compliance		
Temperature 58 °F Lab analysis Yes By	. [	dards. This report is true to the b		leage and belief.
Water quality concerns? Yes (describe below) TDS amount Prom To Description Amount Units	License Number	1424 Date	7/16/2012	
From To Description Amount Units	Signed TIMO	THY K RILEY (E-filed)		
	111110	tional) rileywells@centurytel.ne	t	

# WATER RESOURCES DEPARTMENT

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

# **Application for Well ID Number**

RECEIVED

Do not complete if the well alread	y has a Well Identificat	ion Number.
------------------------------------	--------------------------	-------------

APR 2 5 2019

			OWRD
I. OWNER INFORMATION	ndy Poot		
Current Owner Name (please print): A	ridy Root		<b>RECEIVED</b>
Mailing Address: 524 Hwy 20 N			11111 0 0 0000
City, State, Zip: Hines, OR 97738			MAY 2 6 2020
	AS ABOVE In Care Of (C/	O)	OWDD
Name & Address: All Points Engr &			OWRD
City, State, Zip: Terrebonne, OR 9	7760		
Township: 22S (North / South)  Tax Lot (usually last 3-5 numbers of Tomore South)  GPS Coordinates: 43.6216692 - 116  Street Address of Well, City: 40637 In the property had a different street address of Well (domestic, irrigation, communication)  Date Well Constructed (or property build Constructed)  Owner at time the well was constructed.	3.6731822	County Harney  Harney  County Harney  County Harney  County Harney  Casing Well Report # (if known):	g Diameter: 10"
SUBMITTED BY (please print): Der	nise Montgomery		
PHONE: 541-548-5833	EMAIL &/or FAX: neecee	@apeands.com	
Send application to: Oregon Water Resou Applications are processed in the order th	rces Department 725 Summer St NE. Suite a cy are received, and Well ID Numbers are n	A. Salem. Oregon 97301: or formalled within 4-5 business day	S.
For C	fficial Use Only by the Oregon Water Res	ources Department:	
Received Date:	Well Report Number		Well Identification #:
4-25-19	HARN 227 + HARN 518	<u> </u>	L-134027
	ORIG DEEPEN		

Last Update: 5/15/18

Well I.D. Number/2

WCC

# **Revisions Requested**

**HARN 52187** 

HARN 52187

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

Repl: L 134030 WELL LABEL # L 9

START CARD# 184 811

Instructions for completing this report are on the last page of this form.				
1) LAND OWNER Owner Well I.D.  First Name 60  Last Name 7 Horen Fellot	(9) LOCATION OF WELL (legal description)			
Company Last Name A PETET	County HATALY Twp 225 Nor S Range 33 (For W W.M.			
Address 855 Hills Bours 8/10	Sec			
City Hills Borought State CA Zip 94010	Tax Map Number Lot			
(2) TYPE OF WORK New Well Deepening Conversion	Lat° or DMS or DD			
☐ Alteration (repair/recondition) ☐ Abandonment	Long°' or DMS or DD			
A SPILL METHOD	Street Address of Well (or nearest address) 40637 Hwy 20 F			
(3) DRILL METHOD  ★ Rotary Air	134 AS OR 97720			
Reverse Rotary Other	(10) STATIC WATER LEVEL			
	Date   SWL(psi)   +   SWL (ft)			
(4) PROPOSED USE Domestic Irrigation Community	Existing Well/Predeepening 100			
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection ☐ Thermal ☐ Other ☐ Dewatering ☐ Injection	Completed Well 100			
- Thermat - Other	Flowing Artesian? Yes Dry Hole? Yes			
(5) BORE HOLE CONSTRUCTION Special Standard: ☐ Yes (attach copy)	WATER BEARING ZONES Depth water was first found			
Depth of Completed Well 400 ft.	SWL Date   From   To   Est Flow   SWL (psi)   + SWL (ft)			
BORE HOLE SEAL	5-3-15 100 350			
Dia From To Material From To Amount Scks/lbs				
18 0 100 Boston 0 100 11000 1BS				
How was seal placed: Method A B C D E	(11) WELL LOG Ground Elevation			
Other Pourch Dry	Material From To			
Backfill placed from ft. to ft. Material	Brown CHY 5 50			
Filter pack from ft. to ft. Material Size	GAU CLAV , 50 100			
Explosives used:  Yes Type Amount	Green CYAY WLIAM 100 275			
6) CASING/LINER	GAVE1/SANY 275 370			
Csng Linr Dia + From To Gauge Steel Plastic Welded Thrd	G-20 (1A) 370 400			
X 14 + 1 130 250 X				
	RECEIVED BY OWRD			
	RECEIVED			
·	NAV 2 2 2 2 2			
	MAY 2 0 2015 MAY 2 6 2020			
Shoe Inside Outside Other Location of shoe(s)	III/A1 2 0 2020			
Temporary casing Yes Diameter From To	SALEM, OR			
(7) PERFORATIONS/SCREENS	Date Started Completed OWRD			
Perforations Method PIAZMA Cuttor				
Screens Type Material	(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			
Screen slot Slot # of pipe	construction standards. Materials used and information reported above are true to			
Perf Scrn Csng Linr Dia From To width length slots size	the best of my knowledge and belief.			
100 170 1/4 6" (000	License Number Date			
	Signed			
(8) WELL TESTS: Minimum testing time is 1 hour	(bonded) Water Well Constructor Certification			
☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian	I accept responsibility for the construction, deepening, alteration, or			
Yield gal/min   Drawdown   Drill stem/Pump depth   Duration (hr)	abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water			
500 + 44 Kerun 400 1	supply well construction standards. This report is true to the best of my knowledge			
	and belief.			
T	License Number 1557 Date 5-13-15			
Temperature 5 6 °F Lab analysis  Yes By	Signed Date 5-13-15			
From To Description Amount Units	Signed Signed			
	Contact Info. (optional)			



Last Update: 5/15/18

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

# **Application for** Well ID Number

RECEIVED

0

Do not complete if the well aire	aay nas a well Identificati	on Number.	APR 2 5 2019	RECEIV
I. OWNER INFORMATION			OWRD	MAY 26
Current Owner Name (please print):	Andy Root			
Mailing Address: 524 Hwy 20 N	94.	= -		OWF
City, State, Zip: Hines, OR 97738				
	AS ABOVE In Ca	are Of (C/O)		
Name & Address: All Points Engr &	Surveying, Inc, PO Box 76	67		
City, State, Zip: Terrebonne, OR 9	7760	y - 10		4
Township: 228 (North / South)  Tax Lot (usually last 3-5 numbers of Tomore Coordinates: 43.6485948 - 118	Range: 33E (East / West) ax Map #): 900	Section: 20	SW 1/4 of the rney	NE 1/4
Street Address of Well, City: 40637				
	Hwy 20 E Burns, OR			
Street Address of Well, City: 40637 If the property had a different street add III. GENERAL WELL INFORMAT Use of Well (domestic, irrigation, compate Well Constructed (or property build)	Hwy 20 E Burns, OR  Iress in the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total V	Irrigation Well Depth: 400	Casing Diamete	er: 14"
III. GENERAL WELL INFORMAT Use of Well (domestic, irrigation, compate Well Constructed (or property build) Owner at time the well was constructed	Hwy 20 E Burns, OR  Iress in the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total V  I (if known): Bo Thorenfeldt	Irrigation  Well Depth: 400  Well Report	Casing Diamete	er: 14"
Street Address of Well, City: 40637	Hwy 20 E Burns, OR  Iress in the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total V  I (if known): Bo Thorenfeldt	Irrigation  Well Depth: 400  Well Report	Casing Diamete	er: 14"
If the property had a different street add the property had been added to the property but the property had been at time the well was constructed to the property but the property had been at time the well was constructed to the property had been a property but the property had been a property but the property had been a property but the property had a different street add the property had a different st	Hwy 20 E Burns, OR  Iress in the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total V  I (if known): Bo Thorenfeldt accement TAG. TAG L 92	Irrigation  Well Depth: 400  Well Report	Casing Diamete	er: 14"
Street Address of Well, City: 40637 In the property had a different street address.  III. GENERAL WELL INFORMAT Use of Well (domestic, irrigation, commonate Well Constructed (or property build Downer at time the well was constructed Other Information: This is for a replacement of the property of the Submitted By (please print): Der	In the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Volume of the complete mercial industrial control of the complete mercial industrial industrial monitoring):  It (if known): Bo Thorenfeldt accement TAG. TAG L 92 in the complete mercial industrial industria	Irrigation Well Depth: 400 Well Repor	Casing Diametert # (if known): HARN	er: 14"
Street Address of Well, City: 40637 In the property had a different street address.  III. GENERAL WELL INFORMAT Use of Well (domestic, irrigation, commonate Well Constructed (or property build Downer at time the well was constructed Other Information: This is for a replacement of the property of the Submitted By (please print): Der	In the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Volume of the complete mercial industrial control of the complete mercial industrial industrial monitoring):  It (if known): Bo Thorenfeldt accement TAG. TAG L 92 in the complete mercial industrial industria	Irrigation  Well Depth: 400  Well Report	Casing Diametert # (if known): HARN	er: 14"
III. GENERAL WELL INFORMAT Use of Well (domestic, irrigation, compate Well Constructed (or property build) Owner at time the well was constructed (other Information: This is for a replacement of the Information: This is for a replacement of the Information: December 1941–541–548–5833  Send application to: Oregon Water Resources	In the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Volume accement TAG. TAG L 92  Take Montgomery  EMAIL &/or FAX:  Trees Department 725 Summer St N	Well Depth: 400 Well Report	Casing Diameter # (if known): HARN 5	er: 14" 52187
III. GENERAL WELL INFORMAT Use of Well (domestic, irrigation, compate Well Constructed (or property build) Owner at time the well was constructed	In the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Volume accement TAG. TAG L 92  Take Montgomery  EMAIL &/or FAX:  Trees Department 725 Summer St N	Well Depth: 400 Well Report	Casing Diameter # (if known): HARN 5	er: 14" 52187
III. GENERAL WELL INFORMAT Use of Well (domestic, irrigation, compate Well Constructed (or property build) Owner at time the well was constructed (other Information: This is for a replacement) SUBMITTED BY (please print): Der PHONE: 541-548-5833 Send application to: Oregon Water Resonance of the order the other the order the other the order the other than the other tha	In the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Volume accement TAG. TAG L 92  Take Montgomery  EMAIL &/or FAX:  Trees Department 725 Summer St N	Well Depth: 400 Well Report We	Casing Diameter # (if known): HARN 5	er: 14" 52187
III. GENERAL WELL INFORMAT Use of Well (domestic, irrigation, compate Well Constructed (or property build) Owner at time the well was constructed (other Information: This is for a replacement) SUBMITTED BY (please print): Der PHONE: 541-548-5833 Send application to: Oregon Water Resonance of the order the other the order the other the order the other than the other tha	Interest in the past:  ION (Please fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial, industrial, monitoring):  It): 5/13/15 Total Value of the fill out as complete mercial out as	Well Depth: 400 Well Report We	Casing Diameter t# (if known): HARN 5  com  gon 97301: or fax to (502)  1-5 business days.  Hag A	er: 14" 52187

WCC Well I.D. Number/2

# STATE OF OREGON

HARN 52708

WELL I.D. LABEL# L

ge 1 of 1

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

3/7/2018

START CARD# ORIGINAL LOG #

A STATE OF THE PRODUCT OF THE PRODUC		THE STATE OF THE S
(1) LAND OWNER Owner Well I.D.		
First Name ANDY Last Name ROOT	(9) LOCATION OF WELL (legal description)	
Company ACW	County HARNEY Twp 22.00 S N/S Range 33.00	E E/W WM
Address 524 N HWY 20 City HINES State OR Zip 97738	Sec 31 NE 1/4 of the SE 1/4 Tax Lot 90	00
City HINES State OR Zip 97738  (2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number         Lot           Lat         " or           Long         " or	DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Lat or	DMS or DD
(2a) PRE-ALTERATION	Street address of well Nearest address	DIVIS OF DD
Dia + From To Gauge Stl Plstc Wld Thrd Casing:	40637 HWY 20 E BURNS OR 97720	
Material From To Amt sacks/lbs	40037 HW 1 20 E BORNS OR 77720	
Seal:		
(3) DRILL METHOD	(10) STATIC WATER LEVEL	OHT (A)
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) +	- SWL(ft)
Reverse Rotary Other	Completed Well 2/28/2018	22
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?	
Industrial/ Commericial Livestock Dewatering	WATER BEARING ZONES Depth water was first found	22.00
Thermal Injection Other	SWL Date From To Est Flow SWL(psi)	
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	***	
Depth of Completed Well 400.00 ft.	2/28/2018 22 400 800	22
BORE HOLE SEAL sacks/		
Dia From To Material From To Amt lbs		
20 0 152 Cement 0 122 105 S		
14 152 260 Calculated 103		
Calculated	(11) WELL LOG Ground Elevation	
How was seal placed: Method A B XC D E	Material From	То
Other	top soil 0	2
Backfill placed from 122 ft. to 152 ft. Material BENTONITE	brown clay 2	22
Filter pack from ft. to ft. Material Size	sandy grey 22 grey clay with gravel 40	40
Explosives used: Yes Type Amount	brown sand and gravel 46	70
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	brown clay 70	90
Proposed Amount Actual Amount	black sand and gravel 90	93
(6) CASING/LINER	grey clay with sand and pumice seams 93	400
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd		+
● ☐ 14 × 2 152 250 ● ☐ × ☐	RECEIVED	
	11202112	
	MAY 2 6 2020	
	MAI 2 0 2020	
Shoe Inside Outside Other Location of shoe(s)		
Temp casing Yes Dia From + To	OWRD	
(7) PERFORATIONS/SCREENS		
Perforations Method		
Screens Type Material	Date Started <u>2/5/2018</u> Completed <u>2/28/2018</u>	
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/ Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification	
Tion To Widin Telligin Stone Pipe Store	I certify that the work I performed on the construction, deepen	
	abandonment of this well is in compliance with Oregon w	
	construction standards. Materials used and information reported the best of my knowledge and belief.	above are true to
	License Number 1739 Date 3/7/2018	
(8) WELL TESTS: Minimum testing time is 1 hour	1739 546 3/1/2018	
Pump Bailer Air Flowing Artesian	Signed CHARLES FRY (E-filed)	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification	
800   400   2	I accept responsibility for the construction, deepening, alteration	or abandonment
	work performed on this well during the construction dates reported	
	performed during this time is in compliance with Oregon was	ater supply well
Temperature 65 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge.	eage and belief.
Water quality concerns? Yes (describe below) TDS amount 345 ppm From To Description Amount Units	License Number 1355 Date 3/7/2018	
Description Amount Office	Signed ARTHUR FRY (E-filed)	
	Contact Info (optional)	
	19 4 4 79	

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

# HARN 52767

WELL I.D. LABEL# L 131955 START CARD# 1041566 ORIGINAL LOG#

Page 1 of 1

1/1/2019

A STATE OF THE PROPERTY OF THE	
(1) LAND OWNER Owner Well I.D.	4
First Name ANDY Last Name ROOT	(9) LOCATION OF WELL (legal description)
Company ACW	County HARNEY Twp 22.00 S N/S Range 33.00 E E/W WM
Address 524 N HWY 20	Sec 31 NE 1/4 of the SE 1/4 Tax Lot 900
City HINES State OR Zip 97738  (2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot
(2) TYPE OF WORK	Lat o DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Long or DMS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address
Casing:	40637 HWY 20 E BURNS OR 97720
Material From To Amt sacks/lbs	
Seal:	(40) CTATIC WATER LEVEL
(3) DRILL METHOD	(10) STATIC WATER LEVEL  Date SWL(psi) + SWL(ft)
Rotary Air Rotary Mud Cable Auger Cable Mud	Existing Well / Pre-Alteration
Reverse Rotary Other	Completed Well 12/31/2018 32
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 35.00
Thermal Injection Other	New York Control (1997)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy	12/31/2018 35 93 50 32
Depth of Completed Well 510.00 ft.	12/31/2018 110 510 500 32
BORE HOLE SEAL sacks.	
Dia From To Material From To Amt lbs	J
20   0   174     Cement w/1% Bentonity   0   173   175   S     12   174   510     Calculated   150	
12 1/4 310	
Calculated	Ground Elevation
How was seal placed: Method A B XC D E	Material From To
Other	top soil 0 3
Backfill placed from ft. to ft. Material	brown clay 3 15
Filter pack from ft. to ft. Material Size	grey clay 15 35
Explosives used: Yes Type Amount	brown sand and gravel 35 93 brown clay 93 110
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	brown clay   93   110
	black sandstone fractured 475 510
	order sandstone nactured
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	
	RECEIVED
(a) 12   X   2   174   .250   (b)   X	
	MAY 2 6 2020
	MAI 2 0 ZOZO
Shoe Inside Outside Other Location of shoe(s)	OWRD
Temp casing Yes Dia From + To	- United
(7) PERFORATIONS/SCREENS Perforations Method	
Screens Type Material	Date Started 12/17/2018 Completed _12/31/2018
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	
Screen Liner Dia From To width length slots pipe size	(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 1739 Date 1/1/2019
(8) WELL TESTS: Minimum testing time is 1 hour	1737
Pump Bailer Air Flowing Artesian	Signed CHARLES FRY (E-filed)
	(bonded) Water Well Constructor Certification
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)  500 180 2	I accept responsibility for the construction, deepening, alteration, or abandonment
300	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
Temperature 65 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.
	License Number 1355 Date 1/1/2019
Water quality concerns? Yes (describe below) TDS amount 371 ppm From To Description Amount Units	
	Signed ARTHUR FRY (E-filed)
	Contact Info (optional)
ORIGINAL - WATER RESOURCES	DEPARTMENT 19 / / / / =
ORIGINAL - WATER RESOURCES THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPART	MENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:
THIS REPORT MOST BE SUDMITTED TO THE WATER RESOURCES DEPART	The residence of the period of the residence of the resid

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

HARN 52754 W

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			Page 1 of 1
ELL I.D. LAI	BEL# L <sub>13</sub>	0100	9.14
START CA	RD # 10	41219	100
ORIGINAL L	OG#		
		3 190 2	
OF WELL (	legal desc	eription)	
Twp 22.00 S	SN/S	Range 33.00 E	E/W WM
1/4 of the S'	W 1/4	Tax Lot 900	
		Lot	

(as required by oxide to	
(1) LAND OWNER Owner Well I.D.	(a) A O CATION OF WELL (local description)
First Name ANDY Last Name ROOT	(9) LOCATION OF WELL (legal description)
Company ACW	County HARNEY Twp 22.00 S N/S Range 33.00 E E/W WM
Address 524 N HWY 20  City HINES State OR Zip 97738  (2) TYPE OF WORK New Well Deepening Conversion  About the state of th	Sec 31 NE 1/4 of the SW 1/4 Tax Lot 900
City MINES State St. Zip Conversion	Tax Map Number         Lot           Lat         o         o         o         DMS or DD           Long         o         o         o         DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Lat Or DMS or DD
(2a) PRE-ALTERATION	Construction of the street address of well Construction of the street address of the str
Dia + From To Gauge Stl Plstc Wld Thrd	(• Street address of Well Nearest address   1900
Casing:	40637 HWY 20 E BURNS OR 97720
Material From To Amt sacks/lbs	
Seal:	(10) STATIC WATER LEVEL
(3) DRILL METHOD  Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(ft)
	Existing Well / Pre-Alteration
Reverse Rotary Other	Completed Well 11/19/2018 33  Flowing Artesian? Dry Hole?
(4) PROPOSED USE Domestic Irrigation Community	
Industrial/ Commericial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 33.00
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy	11/19/2018 33 510 500 33
Depth of Completed Well 510.00 ft.	11/19/2018 33 310 300
BORE HOLE SEAL sacks/	
Dia From To Material From To Amt Ibs	
20 0 173 Cement w/1% Bentonit 0 173 175 S	
12 173 510 Calculated 175	
Colvilated	(11) WELL LOG Ground Elevation
Calculated	Ground Elevation
How was seal placed: Method A B XC D E	Material From To top soil 0 3
Other ft. to ft. Material	brown clay 3 12
Backfill placed from ft. to ft. Material	brown sand 12 16
Filter pack from ft. to ft. Material Size	brown clay 16 21
Explosives used: Yes Type Amount	grey clay and sand 21 35
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	brown clay and sand 35 80
Proposed Amount Actual Amount	grey pumice 80 102 sand and brown clay 102 110
(6) CASING/LINER	Said and brown endy
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	brown claystone 110 150 168
12 X 2 173 .250 X X	black sandstone fractured 168 178
	grey claystone fractured 178 510
	RECEIVED
	MAY 2 6 2020
Shoe Inside Outside Other Location of shoe(s)	MAY 2 6 2020
Temp casing Yes Dia From + To	
(7) PERFORATIONS/SCREENS	OWRD
Perforations Method	
Screens Type Material  Perf/ Casing/Screen Screen Material	Date Started 11/1/2018 Completed 11/19/2018
Tell Casing Selecti	(unbonded) Water Well Constructor Certification
Screen Liner Dia From To width length slots pipe size	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 1739 Date 11/30/2018
(8) WELL TESTS: Minimum testing time is 1 hour	Signed CHARLES FRY (E-filed)
Pump Bailer Air Flowing Artesian	- CHINESE THE CONTRACT OF THE
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification
500 510 2	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.
Temperature 60 °F Lab analysis Yes By	-1
Water quality concerns? Yes (describe below) TDS amount 250 ppm	License Number 1355 Date 11/30/2018
From To Description Amount Units	Signed ARTHUR FRY (E-filed)
	Contact Info (optional)
	Commercial (opinional)
ORIGINAL - WATER RESOURCES	DEPARTMENT 13/47

## STATE OF OREGON

HARN 52765

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

12/19/2018

	ff	Page 1 of 1
VELL I.D. LABEL# I	131954	
START CARD #	1041379	
ORIGINAL LOG #		

(1) LAND OWNER Owner Well I.D.	
First Name ANDY Last Name ROOT	(9) LOCATION OF WELL (legal description)
Company ACW	County HARNEY Twp 22.00 S N/S Range 33.00 E E/W WM
Address 524 N HWY 20	Sec 31 NW 1/4 of the SW 1/4 Tax Lot 900
City HINES State OR Zip 97738	Tax Map Number Lot
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Long Omega DMS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address
Casing:	40637 HWY 20 E BURNS OR 97720
Material From To Amt sacks/lbs	
Seal:	
(3) DRILL METHOD	(10) STATIC WATER LEVEL
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(ft)  Existing Well / Pre-Alteration
Reverse Rotary Other	Completed Well 12/1/2018 33
	Flowing Artesian? Dry Hole?
	22.00
Industrial/Commericial Livestock Dewatering	
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy	7) 11/19/2018 33 390 500 🗙 33
Depth of Completed Well 410.00 ft.	
BORE HOLE SEAL sacks.	
Dia From To Material From To Amt Ibs	
20 0 175   Cement w/5% Bentonit 0 175 153 S	
12 175 410 Calculated 150	1
Calculated	(11) WELL LOG Ground Elevation
How was seal placed: Method A B XC D E	Material From To
	top soil 0 3
Other ft. to ft. Material	brown clay 3 14
Filter pack from ft. to ft. Material Size	brown sand 14 20
	grey clay and sand 20 80
Explosives used: Yes Type Amount	brown clay and sand 80 95
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	brown pumice 95 147
Proposed Amount Actual Amount	grey pumice and sand 147 168
(6) CASING/LINER	grey pumice 168 260
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	fractured claystone and black sandstone 260 410
● 12 × 2 176 .250 ● X	DEOCIVED.
	REGEIVED
	MAY 2 6 2020
	III/(I = = = = = = = = = = = = = = = = = = =
Shoe Inside Outside Other Location of shoe(s)	
Temp casing Yes Dia From + To	OWRD
(7) PERFORATIONS/SCREENS	
Perforations Method	
Screens Type Material	Date Started 11/15/2018 Completed 12/2/2018
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	(unbonded) Water Well Constructor Certification
Screen Liner Dia From To width length slots pipe size	I certify that the work I performed on the construction, deepening, alteration, or
	abandonment of this well is in compliance with Oregon water supply well
	construction standards. Materials used and information reported above are true to
	the best of my knowledge and belief.
	License Number Date
(8) WELL TESTS: Minimum testing time is 1 hour	
Pump Bailer • Air Flowing Artesian	Signed
	(bonded) Water Well Constructor Certification
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)  500 260 2	I accept responsibility for the construction, deepening, alteration, or abandonment
200 2	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
Temperature 65 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.
· — ¬ -	
Water quality concerns? Yes (describe below) TDS amount 304 ppm From To Description Amount Units	License Number 1355 Date 12/19/2018
	Signed ARTHUR FRY (E-filed)
	Contact Info (optional)
	, , , , , , , , , , , , , , , , , , , ,

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

# HARN 52805

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		Page 1 of 1
VELL I.D. LABEL# I		
START CARD #	1043473	
ORIGINAL LOG #		

(1) LAND OWNER Owner Well I.D.	
First Name ANDY Last Name ROOT	(9) LOCATION OF WELL (legal description)
Company ACW	County HARNEY Twp 22.00 S N/S Range 33.00 E E/W WM
Address 524 N HWY 20  City HINES State OR Zip 97738	Sec         32         SE         1/4 of the         SW         1/4         Tax Lot         900
City	Tax Map Number         Lot           Lat         " or         DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion  Alteration (complete 2a & 10) Abandonment(complete 5a)	Lat or DMS or DD
(2a) PRE-ALTERATION	Long or DD
Dia + From To Gauge Stl Plstc Wid Thrd	Street address of well Nearest address
Casing:	40637 HWY 20 E BURNS OR 97720
Material From To Amt sacks/lbs	
Seal:	(10) STATIC WATER LEVEL
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(ft)
Reverse Rotary Other	Existing Well / Pre-Alteration Completed Well 7/10/2019 39
	Completed Well 7/10/2019 39  Flowing Artesian? Dry Hole?
(4) PROPOSED USE Domestic Irrigation Community	
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 42.00
Thermal Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	7/10/2019 42 510 500 39
Depth of Completed Well 510.00 ft.	
BORE HOLE SEAL sacks/ Dia From To Material From To Amt lbs	
Dia         From         To         Material         From         To         Amt         lbs           20         0         138         Cement w/5% Bentonit         0         138         105         S	
12 138 510 Calculated 97	
	(11) WELL LOG Ground Flevation
Calculated	Ground Elevation
How was seal placed: Method A B XC D E	Material From To
Other	top soil   0   4     brown sand   4   17
Backfill placed from ft. to ft. Material	grey clay 17 42
Filter pack from ft. to ft. Material Size	sand and gravel 42 115
Explosives used: Yes Type Amount	brown clay stone fractured 115 255
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	fractured green clay stone 255 420
Proposed Amount Actual Amount	broken green clay stone 420 495 fractured green clay stone 495 510
(6) CASING/LINER	fractured green clay stone
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	DEOFUE
○ 12 × 2 138 .250 ○ ○ ×	RECEIVED
	MAY 2 6 2020
Shoe Inside Outside Other Location of shoe(s)	OWIDD
Temp casing Yes Dia From + To	OWRD
(7) PERFORATIONS/SCREENS	
Perforations Method	
Screens Type Material	Date Started_6/30/2019
Perf/ Casing/Screen Scrn/slot Slot # of Tele/ Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification
Scient Ellier Dia 11011 10 width length 51015 p.pe 5125	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 1739 Date 7/21/2019
(O) WELL TESTS ME : A C C C C C C C C C C C C C C C C C C	7/21/2019
(8) WELL TESTS: Minimum testing time is 1 hour	Signed CHARLES FRY (E-filed)
Pump Bailer Air Flowing Artesian	(bonded) Water Well Constructor Certification
Yield gal/min         Drawdown         Drill stem/Pump depth         Duration (hr)           500         280         2	I accept responsibility for the construction, deepening, alteration, or abandonmer
500	work performed on this well during the construction dates reported above. All wor
	performed during this time is in compliance with Oregon water supply we
Temperature 65 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.
Water quality concerns? Yes (describe below) TDS amount 263 ppm	License Number 1355 Date 7/21/2019
From To Description Amount Units	Signed ARTHUR FRY (F-filed)
	Signed ARTHUR FRY (E-filed)  Contact Info (optional)
	13447

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HARN 52783

WELL I.D. LABEL# I START CARD #

ORIGINAL LOG#

	Page 1 of 1
131965	
1042279	H

HARN 32/
4/23/2019

(1) LAND OWNER Owner Well I.D.	
First Name ANDY Last Name ROOT	(9) LOCATION OF WELL (legal description)
Company ACW	County HARNEY Twp 22.00 S N/S Range 33.00 E E/W W
Address 524 N HWY 20  City HINES State OR Zip 97738	Sec 31 SW 1/4 of the SE 1/4 Tax Lot 900
City HINES State OR Zip 97738  2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number         Lot           Lat         " or         DMS or DE
Alteration (complete 2a & 10)   Abandonment(complete 5a)	Lat or DMS or DD
(2a) PRE-ALTERATION	Long or DMS or DE
Dia + From To Gauge Stl Plstc Wld Ihrd	Street address of well Nearest address
Casing: 16 × 3 89 .250 • ×	40637 HWY 20 E BURNS OR 97720
Material From To Amt sacks/lbs	
Seal: Other 0 18 4 Sacks	(10) STATIC WATER LEVEL
(3) DRILL METHOD  Rotary Air Rotary Mud Cable Auger Cable Mud	Date $SWL(psi) + SWL(ft)$
Reverse Rotary Other	Existing Well / Pre-Alteration 4/2/2019 26
	Completed Well 4/19/2019 26  Flowing Artesian? Dry Hole?
(4) PROPOSED USE Domestic Irrigation Community	
Industrial/Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 30.00
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	4/2/2019 30 210 100 26
Depth of Completed Well 505.00 ft.	4/22/2019 210 465 750 26
BORE HOLE SEAL sacks/	
Dia From To Material From To Amt lbs	
22 0 18 Bentonite Chips 0 18 220 S	
16 18 241 Calculated 28 12 241 505 Cement 18 125 50 S	
12 241 505 Cement 18 125 50 S Calculated 42	(11) WELL LOG Ground Elevation
How was seal placed: Method A B XC D E	Material From To
Other	
Backfill placed from 125 ft. to 127 ft. Material CEMENTING BASK	fractured green claystone with pumice 210 400
Filter pack from ft. to ft. Material Size	burnt green clay 400 465
Explosives used: Yes Type Amount	green clay 465 505
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	
Proposed Amount Actual Amount	
(6) CASING/LINER	
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	DEOEIVED
○ 12 X 2 241 .250 ○ X	RECEIVED
	MAY 2 6 2020
Shoe Inside Outside Other Location of shoe(s)	OWIDD
Temp casing Yes Dia From + To	OWRD
(7) PERFORATIONS/SCREENS	
Perforations Method	
Screens Type Material	Date Started 3/28/2019 Completed 4/22/2019
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	
Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification I certify that the work I performed on the construction, deepening, alteration,
	abandonment of this well is in compliance with Oregon water supply we
	construction standards. Materials used and information reported above are true
	the best of my knowledge and belief.
	License Number 1739 Date 4/23/2019
(8) WELL TESTS: Minimum testing time is 1 hour	
Pump Bailer Air Flowing Artesian	Signed CHARLES FRY (E-filed)
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification
750 200 2	I accept responsibility for the construction, deepening, alteration, or abandonm
	work performed on this well during the construction dates reported above. All w
	performed during this time is in compliance with Oregon water supply v
Temperature 60 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belie
Water quality concerns? Yes (describe below) TDS amount 372 ppm	License Number 1355 Date 4/23/2019
From To Description Amount Units	
	Signed ARTHUR FRY (E-filed)
	Contact Info (optional)
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### STATE OF OREGON

## HARN 52789

		Page 1 of 1
WELL I.D. LABEL# L		
START CARD #	1042658	

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

5/22/2019

ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D.	
First Name ANDY Last Name ROOT	(9) LOCATION OF WELL (legal description)
Company ACW	
Address 524 HWY 20 E	County HARNEY Twp 22.00 S N/S Range 33.00 E E/W W
City HINES State OR Zip 97738	Sec         32         SE         1/4 of the         SE         1/4         Tax Lot         900
	Tax Map Number         Lot           Lat         o         '         " or         DMS or DD           Long         o         " or         DMS or DD
	Lat ° ' " or DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Long o ' " or DMS or DD
(2a) PRE-ALTERATION	Street address of well Nearest address
Dia + From To Gauge Stl Plstc Wld Thrd	
Casing:	40637 HWY 20 E BURNS OR 97720
Material From To Amt sacks/lbs	
Seal:	
(3) DRILL METHOD	(10) STATIC WATER LEVEL
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(ft)
Reverse Rotary Other	Existing Well / Pre-Alteration
	Completed Well 5/20/2019 26
(4) PROPOSED USE Domestic X Irrigation Community	Flowing Artesian? Dry Hole?
Industrial/Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 26.00
Thermal Injection Other	
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy	5/20/2019 26 95 10 26
Depth of Completed Well 510.00 ft.	5/20/2019 215 500 500 26
BORE HOLE SEAL sacks/	3/20/2019 213 300 300
Dia From To Material From To Amt lbs	
20 0 154   Cement w/5% Bentonit 0 154 140 S	
12 154 510 Calculated 102	
12 134 310 Calculated 102	
Calculated	(11) WELL LOG Ground Florestion
	Giouna Elevation
How was seal placed: Method A B XC D E	Material From To
Other	top soil 0 3
Backfill placed from ft. to ft. Material	brown sand and gravel 3 95
Filter pack from ft. to ft. Material Size	brown clay and gravel 95 135
_	green clay with pumice layers 135 155
Explosives used: Yes Type Amount	black clay 155 161
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	green clay 161 210
Proposed Amount Actual Amount	fractured grey clay stone with sandstone 210 510
(6) CASING/LINED	
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	
<u>12</u> <u>X</u> 2 154 .250 (• X )	RECEIVED
	The last and the l
	1414 0 0
	MAY 2 6 2020
Shoe Inside Outside Other Location of shoe(s)	
Temp casing Yes Dia From + To	OWRD
	OTTIO .
(7) PERFORATIONS/SCREENS	
Perforations Method	
Screens Type Material	Date Started 5/7/2019 Completed 5/20/2019
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/ Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification
Screen Liner Dia From To width length slots pipe size	
	I certify that the work I performed on the construction, deepening, alteration, o
	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 1739 Date 5/22/2019
(8) WELL TESTS: Minimum testing time is 1 hour	
Pump Bailer (a) Air Flowing Artesian	Signed CHARLES FRY (E-filed)
	(banded) Water Well Constructor Contification
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)  500 200 3	(bonded) Water Well Constructor Certification
500 200 3	I accept responsibility for the construction, deepening, alteration, or abandonment
	work performed on this well during the construction dates reported above. All wor
	performed during this time is in compliance with Oregon water supply we
Temperature 65 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.
Water quality concerns? Yes (describe below) TDS amount 372 ppm From To Description Amount Units	License Number 1355 Date 5/22/2019
From To Description Amount Units	5/22/2017
	Signed ARTHUR FRY (E-filed)
	Contact Info (optional)



# 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.

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.

TYPE	FILE NUMBER
Transfer Application	Transfer Number

	Applicant Information	Applicant's Representative/Contact
Name:	Andy Root	Scott D. Montgomery
Address:	524 Hwy 20 N	PO Box 767
	Hines, OR 97738	Terrebonne, OR 97760
Phone:	541-573-3615	541-548-5833
Fax:		
E-Mail Addre	ess:	scott@apeands.com

### I understand the following:

Nama:

- There is a non-refundable application fee of \$ 125.00 per request.
- That upon receipt of my non-refundable application fee of \$\sumenterne{\$125.00}\$, OWRD will assign my request to the next contractor in the pool of contractors performing expedited services.
- That this fee covers the copying, the mailing cost, as well as the cost for the contractor to evaluate and provide the estimate for processing of the request.
- That OWRD will provide all pertinent information to the assigned contractor within one (1) business day.
- That OWRD will, within fourteen (14) 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 increase the cost to process my request.
- Expedited processing does not guarantee a favorable review of my request.
- Oregon Water Resources Department Transfer Reimbursement Authority Program 725 Summer St. NE, Suite A

• Send completed Application and payment to:

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)

MAY 2 6 2020	
OWPD	
OWND	

Name.	1/16	The state of the s
Signature: _	MAM	

OWRD USE ONLY Reimbursement Authority Number: R11260 - 21