



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

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-12649 – See Attachment A
 Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). **See Attachment B**
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone. **See Attachment C**
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. **See Attachment D**
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(For Staff Use Only)

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

___ Application fee not enclosed/insufficient	___ Map not included or incomplete
___ Land Use Form not enclosed or incomplete	___ Part ___ is incomplete
___ Additional signature(s) required	
Other/Explanation _____	
Staff: _____ 503-986-0 _____	Date: ___ / ___ / ___

Part 2 of 5 – Permit Amendment Map Checklist

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

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

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

Part 3 of 5 – Fee Worksheet

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

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*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:

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

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Water Wonderland Improvement District			PHONE NO. (541) 593-2902	ADDITIONAL CONTACT NO.
ADDRESS 17153 Crane Drive				FAX NO.
CITY Bend	STATE OR	ZIP 97707	E-MAIL wwid@qwestoffice.net	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

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

AGENT/BUSINESS NAME GSI Water Solutions, Inc. ATTN: Owen McMurtrey			PHONE NO. 541 257-9005	ADDITIONAL CONTACT NO.
ADDRESS 1600 SW Western Boulevard, Suite 240				FAX NO.
CITY Corvallis	STATE OR	ZIP 97333	E-MAIL omcmurtrey@gsiws.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this permit amendment; and why:
Water Wonderland Improvement District (WWID) proposes to change the authorized points of appropriation under Permit G-12649 in order to recognize minor changes in the location of water supply wells and provide flexibility for the rate to be used from any individual well.

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

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

Is the applicant the permit holder of record? Yes No

If NO, include either:

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

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

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

If NO, what are the completion dates of the permit(s)? **10/1/2022**

By my signature below, I confirm that I understand:

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

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


Applicant Signature

Leslie Graff - WWID Office Manager
Print Name (and Title if applicable)

02-24-2021
Date

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Check one of the following:

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

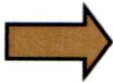
Check the appropriate box, if applicable:

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

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



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

ENTITY NAME Deschutes County	ADDRESS PO Box 6005	
CITY Bend	STATE Oregon	ZIP 97708-6005

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Part 5 of 5 – Water Use Permit Information

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PERMIT # G-12649

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)
 (Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Merganser Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	DESC 6430	20	S	11	E	18	SW	NW	201118B014100	3,070 feet North & 1,080 feet East from SW corner, Section 18 ^b
Merganser Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	DESC 53974	20	S	11	E	18	SW	NW	201118B014100	2,970 feet North & 1,240 feet East from SW corner, Section 18
Crane Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	DESC 1656	20	S	10	E	13 ^a	SE	SE	201013D023100	380 feet North & 990 feet West from the SW corner, Section 18 ^b
Crane Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	DESC 1656	20	S	10	E	13	SE	SE	201013D023100	360 feet North & 755 feet West from the SE corner, Section 13
Seevers Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	DESC 1441	20	S	10	E	25	NW	NW	201025B004100	460 feet South & 30 feet West from W 1/16 corner between sections 24 and 25
Seaborn Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	DESC 52615	20	S	10	E	25	NW	NW	201025B004100	255 feet South & 1,285 feet East from the NW corner of Section 25

^a Note that Permit G-12659 identifies the Crane Well as being within 20S-11E-18-SWSW, but the actual location description refers to a location in 20S-10E-13-SESE.

^b Original well location descriptions for the Merganser and Crane Wells were slightly off at the time of application submittal. The description shown in the table and in Attachment B are consistent with the description on the permit.

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

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

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

- Yes Complete only the proposed (“to” lands) section of Table 2 on the next page. Use the “CODES” listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the permit to be changed.

For a change in place of use: N/A

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

Yes No

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

Is the proposed place of use contiguous to the authorized place of use? Yes No N/A

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

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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.

Table 2. Description of Changes to Water Use Permit # G-12649

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES										PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.									
Twp	Rng	Sec	1/4	Tax Lot	Gvt Lot or DLC	Acre(s) (if applicable)	POA(s) or (name or number from Table 1)	Priority Date	Proposed Changes (see "CODES" from previous page)	Twp	Rng	Sec	1/4	Tax Lot	Gvt Lot or DLC	Acre(s) (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date	
EXAMPLE																			
2	S	9	E	15	NE	100	15.0	POD #1 POD #2	POU/POD	2	S	9	E	15	NW	100	1	10.0	POD #5
"	"	"	"	"	"	"	EXAMPLE	"	"	2	S	9	E	15	SW	200		5.0	POD #6
										No change in place of use - WWID Water Service Area									
										Merganser Well Crane Well Seaborn Well									
										2/25/1994									
TOTAL ACRES										TOTAL ACRES									

Additional remarks: Permit G-12649 currently authorizes the use of up to 3.12 cfs for quasi-municipal use, being 1.11 cfs from the Seevers (Seaborn) Well, 1.25 cfs from the Crane Well, and 0.76 cfs from the Merganser Well. In addition to the minor proposed changes to location of the points of appropriation identified in Table 1, above, the applicant proposes to add each well to the authorized rate for the other wells. The result of this change will be that the permit authorizes the use of up to 3.12 cfs for quasi-municipal use from the Seaborn, Merganser, and Crane Wells, without further limitations on the rate from any individual well.

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Are there other water rights certificates, water use permits or ground water registrations associated with the “from” or “to” lands? Yes No N/A – Water right is for quasi-municipal use, so there is no ‘layering.’

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



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

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

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

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

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Attachment A
Permit G-12649

Application for Permit Amendment – Water Wonderland Improvement District

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COUNTY OF DESCHUTES

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PERMIT TO APPROPRIATE THE PUBLIC WATERS

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THIS PERMIT IS HEREBY ISSUED TO

WATER WONDERLAND IMPROVEMENTS DISTRICT
17153 CRANE DR
BEND, OREGON 97707

(541)593-2902

The specific limits for the use are listed below along with conditions of use.

APPLICATION FILE NUMBER: G-13627

SOURCE OF WATER: SEEVERS WELL, CRANE WELL AND MERGANSEER WELL WITHIN DESCHUTES BASIN

PURPOSE OR USE: QUASI-MUNICIPAL

MAXIMUM RATE: 3.12 CFS, BEING 1.11 CFS FROM SEEVERS WELL, 1.25 FROM CRANE WELL AND 0.76 CFS FROM MERGANSEER WELL

PERIOD OF USE: YEAR ROUND

DATE OF PRIORITY: February 25, 1994

POINT OF DIVERSION LOCATION: SW 1/4 NW 1/4, SW 1/4 SW 1/4, SECTION 18, T20S, R10E, W.M., NW 1/4 NW 1/4, SECTION 25, T20S, R10E, W.M.; MERGANSEER WELL - 3070 FEET NORTH & 1080 FEET EAST; CRANE WELL - 380 FEET NORTH & 990 FEET WEST BOTH FROM SW CORNER, SECTION 18; SEEVERS WELL - 460 FEET SOUTH & 30 FEET WEST FROM W 1/16 CORNER BETWEEN SECTIONS 24 AND 25.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

SW 1/4 SE 1/4
SE 1/4 SE 1/4
SECTION 13
SE 1/4 SE 1/4
SECTION 23
NE 1/4 NE 1/4
NW 1/4 NE 1/4
SW 1/4 NE 1/4
SE 1/4 NE 1/4
SW 1/4 SW 1/4
SECTION 24
NW 1/4 NW 1/4
SW 1/4 NW 1/4
NW 1/4 SW 1/4
SECTION 25
NE 1/4 NE 1/4
SE 1/4 NE 1/4

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Application G-13627 Water Resources Department

PERMIT G-12649

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NE 1/4 SE 1/4

NW 1/4 SE 1/4

SECTION 26

TOWNSHIP 20 SOUTH, RANGE 10 EAST, W.M.

SW 1/4 NE 1/4

SE 1/4 NE 1/4

NE 1/4 NW 1/4

NW 1/4 NW 1/4

SW 1/4 NW 1/4

SE 1/4 NW 1/4

NE 1/4 SW 1/4

NW 1/4 SW 1/4

SW 1/4 SW 1/4

SE 1/4 SW 1/4

NW 1/4 SE 1/4

SW 1/4 SE 1/4

SECTION 18

NE 1/4 NW 1/4

NW 1/4 NW 1/4

SW 1/4 NW 1/4

SE 1/4 NW 1/4

NW 1/4 SW 1/4

SW 1/4 SW 1/4

SECTION 19

TOWNSHIP 20 SOUTH, RANGE 11 EAST, W.M.

Measurement, recording and reporting conditions:

- A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order, shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water use information, including the place and nature of use of water under the permit.
- B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

Within one year of permit issuance, the permittee shall submit a water management and conservation plan consistent with OAR Chapter 690, Division 86.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of

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water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

Use of water under authority of this permit may be regulated if analysis of data available after the permit is issued discloses that the appropriation will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway in quantities necessary for recreation, fish and wildlife in effect as of the priority date of the right or as those quantities may be subsequently reduced.

STANDARD CONDITIONS

The wells shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

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Attachment B
Permit Amendment Map

Application for Permit Amendment – Water Wonderland Improvement District

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Seevers Well (now Seaborn Well) Permitted: DESC 1441
Seaborn Well Proposed: DESC 52615
Crane Well Permitted: DESC 1656
Merganser Well Permitted: DESC 6430
Merganser Well Proposed: DESC 53974

Attachment D Well Logs

Application for Permit Amendment – Water Wonderland Improvement District

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STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.765)

AUG 17 1992

DESC
 1441

20s/10E/25b

WATER RESOURCES DEPARTMENT
 SALEM, OREGON

(START CARD) # 33160

(1) OWNER: Well Number 577-20-92
 Name Oregon Water Wonderland Water Imp. Dist.
 Address P.O. Box 3584
City Sun River State Oregon Zip 97707

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 753 ft.
 Explosives used Yes No Type _____ Amount _____

Diameter	HOLE		Material	SEAL		Amount sacks or pounds
	From	To		From	To	
8"	410	745	undisturbed			
6"	745	753				

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	6"	+2	-745	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method Machine
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
-720	-740	1/8x3	239	6		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
200	60	630	1 hr.
100	30	745	1hr
30	0	615 & 738	1 hr. each

Pump

Temperature of Water 46° Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: 575 to 600

(9) LOCATION OF WELL by legal description:
 County Deschutes Latitude _____ Longitude _____
 Township 20 ~~N~~ or S. Range 10 E ~~25~~ W. WM. _____
 Section 25 NW ~~1/4~~ NW ~~1/4~~ _____
 Tax Lot 4100 Lot 27 Block 3 Subdivision OWW#1
 Street Address of Well (or nearest address) Big River Drive
 Unit 1 Well #2

(10) STATIC WATER LEVEL:
11 ft. below land surface. Date 7-16-92
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 11

From	To	Estimated Flow Rate	SWL
685	753	200+	11

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Cement	410	685	
Red Cinder, Boulders & Sand	685	753	11
IK&H formation packers	640		
"	645		
"	590		
"	595		

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Date started 7-16-92 Completed 8-12-92

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed David J. Kuhn WWC Number 1568
 Date 8-12-92

(bonded) Water Well Constructor Certification:
 I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed [Signature] WWC Number 685
 Date 8-12-92

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PAGE 1 of 2

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NOV 24 1999

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

DESC
52615

SEP 13 1999

WELL I.D.# L 36273
WATER RESOURCES DEPT/02300
SALEM, OREGON

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

(1) OWNER: Well Number _____
Name Oregon Water Wonderland
Address P.O. Box 3584
City Sun River State OR Zip 97707

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

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 650 ft.
Explosives used Yes No Type _____ Amount _____

HOLE SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
20"	0	6	Cement	0	38	56 sacks
18"	6	38				
14"	38	352				

SEE 2nd PAGE

How was seal placed: Method A B C D E
 Other
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
14"	+2	38	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12"	+2	352	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10"	+2	565	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	-450	650	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method Factory cut
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
550	650	1/8" x 3/16"	3040	8"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
600	50'	630	1 hr.

Temperature of water 49° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Desc Latitude _____ Longitude _____
Township 20 S N or S Range 10 E E or W. WM.
Section 25 NW 1/4 NW 1/4
Tax Lot 400 Lot _____ Block 3 Subdivision OWWT
Street Address of Well (or nearest address) _____
Big River Or

(10) STATIC WATER LEVEL:
13 ft. below land surface. Date 8-18-99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 6

From	To	Estimated Flow Rate	SWL
6	10	10 gpm	6
517	530	200 gpm	28
Cement slurry pumped down to seal off above zone			
585	650	600 gpm	13

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Sandy loam top soil	0	6	
Top soil + small gravel	6	10	
Hard brown clay	10	60	
Causing brown clay	60	75	
Hard brown clay	75	90	
Yellow clay	90	135	
Green clay	135	165	
Hard brown clay	165	195	
Yellow clay	195	235	
Green clay	235	245	
Hard pink clay	245	327	
Boulders + cobbles	327	345	
Hard Pink clay	345	385	
Heaving black sand + Pumice	385	438	
Hard Pink clay	438	475	
Boulders + broken lava	475	495	
Brown clay	495	517	
Black sand + Pumice	517	530	

See 2nd Page

Date started _____ Completed _____

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, 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.
Signed Mark Kital WWC Number Trucee Date 8-28-99

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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.
Signed David Kuhn WWC Number 1568 Date 9-8-99

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STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765)

DESC 52615

SEP 13 1999

WATER RESOURCES DEPT. SALEM, OREGON

WELL I.D. # L

START CARD #

OWRD

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

(1) OWNER: Well Number Name Address City State Zip

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

(3) DRILL METHOD: Rotary Air Rotary Mud Cable Auger Other

(4) PROPOSED USE: Domestic Community Industrial Irrigation Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well ft.

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Includes handwritten entries for 12" and 10" diameters.

How was seal placed: Method A B C D E Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes checkboxes for Casing and Liner.

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Includes checkboxes for Perforations and Screens.

(8) WELL TESTS: Minimum testing time is 1 hour. Pump, Bailer, Air, Flowing Artesian. Yield gal/min, Drawdown, Drill stem at, Time.

Temperature of water, Depth Artesian Flow Found, Was a water analysis done?, Did any strata contain water not suitable for intended use?, Depth of strata.

(9) LOCATION OF WELL by legal description: County, Latitude, Longitude, Township, N or S Range, E or W. WM., Section, 1/4, 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well.

(10) STATIC WATER LEVEL: ft. below land surface, Date, Artesian pressure, lb. per square inch, Date

(11) WATER BEARING ZONES: Depth at which water was first found

Table with columns: From, Estimated Flow Rate, SWL. Includes handwritten date NOV 24 1999.

(12) WELL LOG: SALEM, OREGON Ground Elevation

Table with columns: Material, From, To, SWL. Includes handwritten entries: Hard grey clay + Pumice, Grey Basalt, Fractured gray lava, 22 sack slurry mix was used to seal 10" liner pipe at 565', K-Packers were placed between the 12" and 14" pipes at 26' and 29', K-Packers between the 10" and 12" pipes are at 75' and 85', K-Packers between the 8" and 10" pipes are at 455', 460', 465' and 470'.

Date started May 17, 99 Completed August 20, 99 (unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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.

Signed Mark Kuter WWC Number Trainee Date 8-28-99

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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.

Signed David Kuter WWC Number 1568 Date 9-8-99

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.765)

Desc 1656

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MAR 15 1993

20s/10E/13dd
 start card # 28954

(1) **OWNER:**
 Name W.W.I.D. Well Number: 596-5-93
 Address P.O. Box 3584 Well # 4
 City Sun River State Or. Zip 97707

(9) **LOCATION OF WELL by legal description:**
 County Deschutes Latitude _____ Longitude _____
 Township 20 N or S, Range 10 E of W. WM.
 Section 13D SE $\frac{1}{4}$ SE $\frac{1}{4}$
 Tax Lot 23000 Lot 2 Block 28 Subdivision Unit II
 Street Address of Well (or nearest address) Oregon water wonderland
17153 Crane Drive, Bend, Or. 97707

(2) **TYPE OF WORK:**
 New Well Deepen Recondition Abandon

(10) **STATIC WATER LEVEL:**
2 ft. below land surface. Date 2-16-93
 Artesian pressure _____ lb. per square inch. Date _____

(3) **DRILL METHOD**
 Rotary Air Rotary Mud Cable
 Other _____

(11) **WATER BEARING ZONES:**
 Depth at which water was first found 565

(4) **PROPOSED USE:**
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) **BORE HOLE CONSTRUCTION:**
 Special Construction approval Yes No Depth of Completed Well 628 ft.
 Explosives used Yes No Type _____ Amount _____

From	To	Estimated Flow Rate	SWL
565	628	300+	2'

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	cement
6"	0 -30	type 1&2	0 -30	98	sks
12"	30 250				
10"	250 628				

(12) **WELL LOG:** Ground elevation _____

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Material	From	To	SWL
Tan Pumice & Clay	0	6	
Yellow Clay & Silt	6	50	
Grey Clay & Silt	50	63	
Fine Black Sand	63	85	
Hard Grey Clay	85	92	
Black Sand & Silt	92	155	
Brown sand & Silt	155	185	
Black Sand & Silt	185	233	
Pinkish/Tan Clay & Silt	233	255	
Black Sand & Silt	255	307	
Brown Clay & Tan Pumice	307	317	
Medium Gravel, Sand, Clay	317	324	
Hard, Brown Clay & Silt	324	335	
Hard Pink & Brown Clay	335	375	
Black Clay & Small Gravel	375	451	
Fine, Black Sand	451	460	
Tan Pumice & Silt	460	532	
Grey Lava	532	565	
Broken Grey Lava/Tan Clay	565	596	2
Broken Grey Lava/fractured	596	616	
Broken Rock Conglomerate/clay (tan)	616	628	

(6) **CASING/LINER:**

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	1 1/2 +	-240	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10"	1 1/2 +	-532	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date started 9-28-92 Completed 2-21-93

Location of shoe(s) _____

(7) **PERFORATIONS/SCREENS:**

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(unbonded) **Water Well Constructor Certification:**
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed _____ WWC Number _____
 Date _____

(8) **WELL TESTS: Minimum testing time is 1 hour**
 Pump Bailer Air Flowing Artesian
 Yield gal/min Drawdown Drill stem at Time

bailer	50	0	bailer	1 hr.
air	300	15'	628	5 hr.
pump	560	40'	235	4 hr.

(bonded) **Water Well Constructor Certification:**
 I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed *[Signature]* WWC Number 685
 Date 3-11-93

Temperature of water 46° Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom Century test. lab.
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other CH4, H2S, Iron, sandy
 Depth of strata: 6' to 532'

**STATE OF OREGON
Water Supply Well Report**

DESC

Well ID Tag # L 108

(as required by ORS 537.765)

Start Card # 138716

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

(1) Owner Well Number: Z
Name: OREGON WATER WONDERLAND
Street: 17153 CRANE DR
City: SUNRIVER State: OR Zip Code: 97707

(2) Type of Work
 New Alter (Recondition) Alter (Repair)
 Deepening Abandonment

(3) Drill Method
 Rotary Air Rotary Mud Cable Auger
Other:

(4) Proposed Use
 Domestic Community Industrial Irrigation Injection
 Livestock Thermal Other:

(5) Bore Hole Construction
 Special Standards: Depth of completed well: 666.00 ft.
 Explosives Used: Amount: Type:

Diameter	Hole		Mtrl	Seal		Sacks/lba
	From	To		From	To	
16	0	350	CE	0	360	1384
12	360	530	CE	470	530	35
10	530	666				

How was seal placed? C Other:
Back fill placed from: Material:
Filter pack from: Size:

(6) Casing / Liner

Casing/ Liner	Diameter	From	To	Gauge	Mtrl	Weld	Thrd	Shoe at	Shoe used
C	10	470	530	.250	S	X			
C	12	2	512	.250	S	X		512	

(7) Perforation / Screens
Perforations:
Mtrl From To Width Height #Slots Dia. UpSize Casing/
Lnr Method

Screens:
Mtrl From To S Size #Slots Dia. UpSize Type Gauge

(8) Well Tests (Minimum testing time is one hour)

Type	Yield	Units	Drawdown	Stem at	Duration
A	600.00	G		660	2.00

Temperature of Water: 48.00 F
Was water analysis done? Depth of artesian flow:
by whom?
Did any strata contain water unsuitable for use? Too Little Salty
 Muddy Odor Colored other: SILT, FINE SAND
Depth of strata: 510

(9) Location of Hole by legal description
County DESC Latitude: Longitude:
Township: 20.00 S Range: 11.00 E
Section: 18 SWNW Lot: Block:
Tax Lot: 14100 Subdivision:
Street Address of Well (or nearest address):
66208 BUFFELHEAD
MAP, with location identified, must be attached.

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(10) Static Water Level
Feet below land surface: 6.00 Date: 06 / 16 / 2001
Artesian Pressure: Date:

OWRD

(11) Water Bearing Zones
Depth at which water was first found: 68.00 ft.

From	To	est Flow	swf
64	76	60	10
288	278	60	4
308	316	60	24

(12) Well Log Ground Elevation:

Material	From	To	swf
CLAY SAND BROWN	0	8	
CLAY SILT GRAY	8	46	
CLAY SILT BROWN	46	64	
GRAVELS SAND FINE	64	68	10
SAND GRAVELS	68	76	10
SAND FINE GRAY	76	123	
SAND FINE BLACK	123	148	
SAND/PUMICE	148	180	
BLACK SAND SILT	180	183	
PUMICE	183	208	
SAND SILT CLAY	208	216	
CLAY GRAY	216	228	
SAND CLAY LAYERS	228	240	
SAND BROWN PACKED	240	248	
SAND BROWN	248	268	
SAND GRAY	268	278	4
PINK BROWN CLAY	278	286	
CLAY GRAY	286	292	
RED BROWN CLAY	292	306	
SAND GRAY	306	316	24
RED CLAY	316	338	
PUMICE	338	348	
CLAY RED/GRAY	348	368	

Date Started: 03 / 16 / 2001 Date Completed: 06 / 19 / 2001

(unbonded) Water Well Constructor Certification:
I certify that the work I perform on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to the best knowledge and belief.
Signed by: THOMAS R PECK MWC #: 768

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.
Signed by: JACK ABBAS MWC #: 1720

ABBAS WELL DRILLING CO Phone: 641-648-2787

13633

STATE OF OREGON
Water Supply Well Report
(as required by ORS 537.765)

DESC
53974

Well ID Tag # L 108

Start Card # 135715

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

(1) Owner Well Number:
Name:
Street:
City: State: Zip Code:

(9) Location of Hole by legal description
County: Latitude: Longitude:
Township: Range:
Section: Lot: Block:
Tax Lot: Subdivision:
Street Address of Well (or nearest address):

(2) Type of Work
 New Alter (Recondition) Alter (Repair)
 Deepening Abandonment

MAP, with location identified, must be attached.

(3) Drill Method
 Rotary Air Rotary Mud Cable Auger
Other:

(10) Static Water Level
Feet below land surface: Date:
Artesian Pressure: Date:

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(4) Proposed Use
 Domestic Community Industrial Irrigation Injection
 Livestock Thermal Other:

(11) Water Bearing Zones

MAR 01 2021

Depth at which water was first found:

From	To	est Flow	swl
548	555	600	6

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(5) Bore Hole Construction
 Special Standards: Depth of completed well:
 Explosives Used: Amount: Type:
Hole Seal
Diameter From To Mtrl From To Sacks/lbs
How was seal placed? 0 Other:
Back fill placed from: Material:
Filter pack from: Size:

(12) Well Log

Ground Elevation:

Material	From	To	swl
CLAY BROWN	368	380	
SILT	380	388	
CLAY GRAY	388	396	
CLAY BLACK	396	410	
SILT BROWN	410	425	
SAND BROWN	425	435	
PUMICE SAND BROWN	435	492	
PUMICE CINDERS SAND	492	505	
CLAY PUMICE	505	508	
CLAY BLUE	508	512	
LAVA	512	525	
BASALT	525	548	
BASALT BROKEN	548	555	6

(6) Casing / Liner
Csng/ Shoe Shoe
Liner Diameter From To Gauge Mtrl Weld Thrd at used

(7) Perforation / Screens
Perforations: Csng/
Mtrl From To Width Height #Slots Dia. t/pSize Lnr Method
Screens: Mtrl From To S Size #Slots Dia. t/pSize Type Gauge

(8) Well Tests (Minimum testing time is one hour)
Type Yield Units Drawdown Stem at Duration

Date Started: Date Completed:

Temperature of Water:
Was water analysis done? Depth of artesian flow:
by whom?
Did any strata contain water unsuitable for use? Too Little Salty
 Muddy Odor Colored other:
Depth of strata:

(unbonded) Water Well Constructor Certification:
I certify that the work I perform on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to the best knowledge and belief.
Signed by: MWC #:

(bonded) Water Well Constructor Certification:
I accept responsibility for the constuction, 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 well construction standards. This report is true to the best of my knowledge and belief.
Signed by: MWC #:

Phone:

August 1, 2000

Attachment 2.3

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Oregon Water Resources Department

REQUEST FOR WRITTEN APPROVAL TO USE CONSTRUCTION METHODS NOT INCLUDED IN OREGON ADMINISTRATIVE RULES 690-200 THROUGH 690-240

Before request can be considered, the following must be answered. Requests shall be submitted to the Well Construction Specialist, Water Resources Department. Requests may also be considered by the appropriate Region Manager.

Date of request: 6/8/01 Oral approval date (if applicable):

Bonded Well Constructor (name, license #, and mailing address):

Abbas Well Drilling # 1720
Po Box 2130
Terrebonne, OR 97760

(1) Location of Well SW 1/4 NW 1/4 of Section 18
Township 20 N (S) Range 11 (E) W, Deschutes County.
Address at well site: 56209 Buffalohead Fall River
Merganser Well

(2) Start Card Number(s): 135715

(3) Name and Address of Land Owner: Oregon Water Wonder Land
17153 Crane Dr Sunriver, OR

(4) Distance to the nearest well, septic tank or drainfield (if water supply well): 100'

(5) The unusual conditions which necessitate this request: 12" casing driven
further than 500' to reach Basalt

(6) The proposed construction methods that the well constructor believes will be adequate for this well (attach additional pages if needed): Drill 12" rod
Basalt from 512 to 530 cement 60' of 10" casing
470-530

This is a final order in other than contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review of the order must be filed within the time specified by ORS 183.484 (2).

WRD Field Enforcement Manual

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Page 1

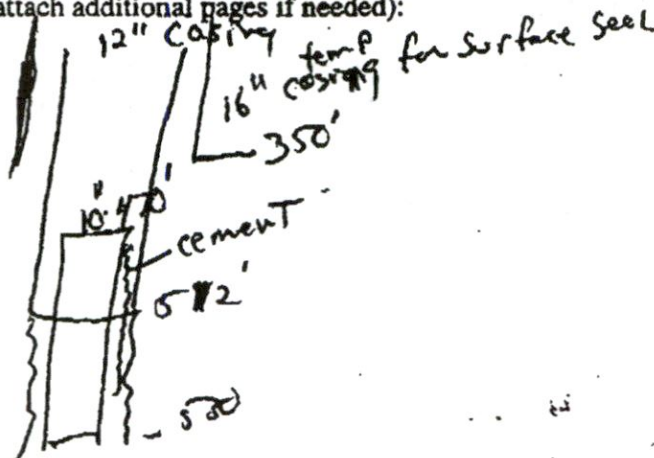
JUN 13 2001

WATER RESOURCES DEPT 1-3633
SALEM, OREGON

W-CA

August 1, 2000

- (7) Diagram showing the pertinent features of the proposed well design and construction (attach additional pages if needed):



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PLEASE NOTE:

- (1) If approved, all other phases of well construction must comply with the appropriate standards described in OAR 690-200 through 690-240.
- (2) If it should be determined at some future date that the well, due to its construction, is allowing groundwater contamination, waste or loss of artesian pressure, the undersigned shall return to the site and rectify the problem.
- (3) If oral approval was granted, a written request must be submitted to the Department either within three (3) working days of the date of oral approval or prior to the completion of the associated well work. Failure to submit a written request as described above may void prior approval.

I have read and understand the above information. I further attest that the information provided is accurate to the best of my knowledge.

Bonded Constructor Signature: [Signature]

For Water Resources Department Use Only

Approved Denied Date: 6-8-01

Signature: [Signature]

Remarks:



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February 10, 2021

Oregon Water Resources Department
725 NE Summer Street, Suite A
Salem, OR 97301

RE: Application for Permit Amendment in the Name of Water Wonderland Improved District

To whom it may concern:

GSI Water Solutions, Inc. (GSI) is submitting the enclosed Application for Permit Amendment on behalf of Water Wonderland Improvement District (WWID). Permit G-12649 authorizes use of 3.12 cfs for quasi-municipal use from three wells, with well-specific rates as follows:

- 1.11 cfs from Seevers Well
- 1.25 cfs from Crane Well
- 0.76 cfs from Merganser Well

WWID is requesting to amend Permit G-12649 to correct the location of the above wells and increase flexibility in the pumping rate of individual wells to account for fluctuations in well production that may occur over time. The proposed permit amendment seeks to limit the combined pumping rate of all three wells combined to no more than 3.12 cfs. In addition, the Seevers Well has been renamed the Seaborn Well.

The required application documents and fee of \$1,570 are enclosed.

Please contact me if you have any questions. You can reach me at 541-257-9005 or at omcmurtrey@gsiws.com

Sincerely,

A handwritten signature in black ink that reads "Owen McMurtrey". The signature is written in a cursive, slightly slanted style.

Owen McMurtrey
Water Resources Consultant

Enclosures: Application for Permit Amendment for Permit G-12649
Check in the amount of \$1,570

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