#### Checklist for Claims of Beneficial Use Received at CSG Counter

Application #	WRD Reviewer ( om M
Transfer # \28\9	
Date Received 3.4.2021	
CWRE Name Gang Detamost	
Priority Date: 1976 31982 Fees Required:	

YES NO A fee of \$200 must accompany this form for <u>permits</u> with priority dates of July 9, 1987, or later.

YES NO A fee of \$200 must accompany this form for any <u>transfers</u> including a water right with a priority date of July 9, 1987, or later.

Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

#### Map Review:

- X Map on polyester film (OAR 690-014-0170(1) & 310-0050(1)(b))
- Application & permit #; or transfer # (OAR 690-014-0100(1))
- Disclaimer (OAR 690-014-0170(5))
- North arrow (OAR 690-310-0050(2)(c))
- **X** CWRE stamp and signature (OAR 690-014 & 310-0050)
- Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map) (014 & 310)
- Township, range, section, and tax lot numbers (OAR 690-310-0050(4))

#### **Report Review:**

- \_\_\_\_\_\_On form provided by the Department (OAR 690-014-0100(1))
- X Application & permit #; or transfer # (OAR 690-014)
- Ownership information (OAR 690-014)
- Date of survey (OAR 690-014)
- Y Person interviewed (OAR 690-014)
- \_**X**\_\_County (OAR 690-014)
- CWRE stamp and signature (OAR 690-014-0100)
- Signature(s) of <u>all</u> permittee of transfer holder (OAR 690-014-0100)

# MONEY SLIP DATE: RECEIPT #: RECEIVED FROM: PERMIT | PER

RETURN TO APPLICANT -- LETTER ATTACHED

Fill in App or Transfer Number

## Groundwater File Review: NIA

Pump Test Required?

YES NO

Pump Test Submitted?

YES NO\*

<sup>\*</sup>If no, include pump test flyer w/acknowledgment letter

# **CLAIM OF BENEFICIAL USE** for Transfer with Multiple **Changes - Groundwater**

1



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

www.oregon.gov/OWRD

A fee of \$200 must accompany this form for any Transfer final orders including a water right with a priority date of July 9, 1987, or later.

> Example - A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

#### A separate form shall be completed for each transfer.

This form is subject to revision. Begin each new claim by checking for a new version of this form at: https://www.oregon.gov/OWRD/Forms/Pages/default.aspx

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. Every item must have a response. If any requested information does not apply to the claim, insert "NA." Do not delete or alter any section of this form unless directed by the form. The Department may require the submittal of additional information from any water user or authorized agent.

"Section 7" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-986-0900 and ask for the Certificate Section.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see:

https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx

#### **GENERAL INFORMATION**

#### Type of Authorized Change

Ih	s Claim is being submitted for a transfer involving mu	Itiple changes.	YES	NO
Ma	rk all that apply:			
	1. Change in POA(s) or Additional POA(s)	2. Change in Place	of Use	
	3. Change in Character of Use			
,	separate section will be completed for each type of c	hange authorized in the tro	ansfer final	order
1.	File Information			

APPLICATION #	
T-12819	

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Revised 3/2/2020

Transfer GW Multiple - Page 1 of 19



2. Property Owner (current owner)	information)			OWRD
APPLICANT/BUSINESS NAME		PHONE NO.		Additional Contact No.
Travis L. & Kelly R. Singhose		541-493-27	72	=
ADDRESS				
29327 Weaver Springs Lane				
CITY	STATE	ZIP	E-MAIL	
Burns	OR	97720		

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. <u>Fach</u> transfer holder of record must sign this form.

3. Transfer holder of record (this may, or may not, be the current property owner)

TRANSFER HOLDER OF RECORD		
Same		
ADDRESS		
Сіту	STATE	ZIP

4. Date of Site Inspection:

8-27-2020
8-27-2020

5. Person(s) interviewed and description of their association with the project:

NAME	DATE	Association with the Project
Travis Singhose	8-27-2020	Owner

6. County:

Неиме	
Harney	

**7.** If any property described in the place of use of the transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

OWNER OF RECORD N/A			
ADDRESS			
Сіту	STATE	ZIP	

Add additional tables for owners of record as needed

# SECTION 2 SIGNATURES

**OWRD** 

#### **CWRE Statement, Seal and Signature**

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.



CWRE NAME Gary DeJarnatt	Job # 20080	PHONE NO	).	Additional Contact No.  John Short 541-389-2837
ADDRESS 20735 Double Peaks D	rive			
CITY	STATE	ZIP	E-MAIL	4
Bend	OR	97701		

### <u>Transfer Holder of Record Signature or Acknowledgement</u>

**<u>Each</u>** transfer holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

Signature	PRINT OR TYPE NAME	TITLE	DATE
Transsinance	Travis Singhose	Ovner	2-29-21
Kelz Si	Welly Singhose	duner	2-29-21

#### **SECTION 3**

#### **Changes Made**

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Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

#### Change #1

#### Change in POA(s) or Additional POA(s)

Did the transfer order authorize a change in the points of appropriation or additional points of appropriation?

YES NO

If "NO", this Section can be deleted.

1. New or additional point of appropriation name or number:

POINT OF APPROPRIATION	WELL LOG ID # FOR ALL WORK	WELL TAG#	Source
(POA) NAME OR NUMBER	PERFORMED ON THE WELL	(IF APPLICABLE)	(IF LISTED IN TRANSFER FINAL
(CORRESPOND TO MAP)	(IF APPLICABLE)		ORDER)
Well 1	HARN 1116		<b>Malheur Lake Basin</b>
Well 2	HARN 51588	L-94026	u
Well 3	HARN 1118	L-121032	и
Well 11	HARN 1115		и
Well 12	HARN 52930	L-132034	и
Well 13	HARN 52897	L-132039	и
Well 14	HARN 52901	L-132048	и
Well 15	HARN 1117		u
Well A	HARN 52934	L-124611	u
Well B	HARN 52835	L-132138	и

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

If well logs are available, items A and B below can be deleted

A. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	Casing Depth	TOTAL DEPTH	COMPLETION  DATE OF  ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY

В.	In addition to the information requested in item "A" above, provide any other information which
ma	ay help the Department locate any well logs associated with this appropriation.

#### 2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final?

OWRD NO

YES

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

Robey Well 1, Robey Well 2, Well 6, Well 10, & Well 16 were not developed as APOA wells for either C-55574 or C-82391. Well 5, already authorized under C-55574, was not developed as an APOA well for C-82391. Well 4, already authorized under C-82391, was not developed as an APOA well for C-55574.

#### 3. Claim Summary:

NEW OR ADDITIONAL POA	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
NAME OR #			
Well 1	5.79 CFS	2.09 CFS	N/A
Well 2	5.79 CFS	3.32 CFS	u
Well 3	5.79 CFS	1.21 CFS	u
Well 11	5.79 CFS	2.56 CFS	u
Well 12	5.79 CFS	2.04 CFS	u
Well 13	5.79 CFS	2.00 CFS	и
Well 14	5.79 CFS	1.93 CFS	u
Well 15	5.79 CFS	1.22 CFS	и
Well A	5.79 CFS	1.26 CFS	и
Well B	5.79 CFS	2.37 CFS	и

#### **System Description**

Are there multiple new or additional Points of Appropriation (POA)?

YES NO

If "YES" you will need to copy and complete either Section A or B in this Section for each POA.

POA Name or Number this section describes (only needed if there is more than one):

Moll 1	HARN 1116	
MAGILT	LINKIA TITO	- 1

#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

#### 1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
			Submersible		

#### 2. Motor Information

MANUFACTURER	Horsepower
	25

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3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
25	15	37'	9'	2.09 CFS

4. Provide pump calculations:

See attached OWRD Pump Calculations	See attached	OWRD Pump Calculations	
-------------------------------------	--------------	------------------------	--

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a			

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

#### **B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

Well 2 HARN 51588/L-94026

#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
Flowserve	10EHM	0906CGC84635-1	Turbine		

#### 2. Motor Information

MANUFACTURER	Horsepower
	40

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
40	15	37.83'	9'	3.32 CFS

4. Provide pump calculations:

See attached OWRD Pump Calculations	٦
	- 1

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a			

Reminder: For pump calculations use the reference information at the end of this document.

**6.** Additional notes or comments related to the system:

D	Groundwater	C	Information	/\A/-!!	C
к	Groundwater	Source	intormation	IWEII and	Sumni

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

Well 3 HARN 1118/L-121032

#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
			Submersible		

#### 2. Motor Information

MANUFACTURER	Horsepower
	15

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT
		DURING PUMPING		(IN CFS)
15	15	38.3′	11'	1.21 CFS

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4. Provide pump calculations:

See attac	had O	A/RD D	ımn Ca	doulat	ions
see allal	illeu Ov	VNDF		IICUIAL	10113

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a			•

Reminder: For pump calculations use the reference information at the end of this document.

**6.** Additional notes or comments related to the system:

#### B. Groundwater Source Information (Well and Sump)

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

Well 11 HARN 1115

#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
Johnston		IJ-15318	Turbine		

#### 2. Motor Information

MANUFACTURER	Horsepower	
US Motors	20	

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT
		DURING PUMPING	r lace of ose	(IN CFS)
20	15	10'	7'	2.56 CFS

4. Provide pump calculations:

See attached OWRD Pump Calculations	
-------------------------------------	--

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a			

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MAA	D,	•	1 7	117

Reminder: For pump calculations use the reference information at the end of this document.

6.	Additional notes or comments related to the system:	OMPD
		OWRD

#### **B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

Well 12 HARN 52930/L-132034

#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (centrifugal, turbine or	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
j			Submersible		

#### 2. Motor Information

MANUFACTURER	Horsepower
	25

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
25	15	40'	8'	2.04 CFS

<ol><li>Provide pump calculations:</li></ol>	4.	Provid	le pump	calcul	ations:
--	----	--------	---------	--------	---------

See attached OWRD	<b>Pump Calculations</b>	

5. Measured Pump Capacity (using meter if meter was present and system was operating)

Initial Meter Reading	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a		OBSERVED	(III CI J)

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

#### **B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

Well 13	<b>HARN 52897</b>	/L-132039
	111111111111111111111111111111111111111	

#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
			Submersible		

#### 2. Motor Information

MANUFACTURER	Horsepower
	25

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
25	15	42'	8'	2.00 CFS

4. Provide pump calculations:

See attached	OWRD	Pump C	alculat	ions
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5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a			

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

#### **B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

Well 14 HARN 52901/L-132048

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#### A. POA System Information

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Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	Model	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
			Submersible		

#### 2. Motor Information

MANUFACTURER	HORSEPOWER
	25

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
25	15	45'	8'	1.93 CFS

4.	Provide	pump ca	lculations:
•••		Partip ou	icaia ci oi isi

See attache	OWRD Pum	p Calculations
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5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a			

Reminder: For pump calculations use the reference information at the end of this document.

6.	Additiona	l notes or	comments re	lated	to tl	he sy	stem:
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#### **B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

Well 13 HARN 1117		Well 15	HARN 1117	
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#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
			Submersible		

#### 2. Motor Information

MANUFACTURER	Horsepower
	15

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
15	15	39.5'	9'	1.22 CFS

4.	Provide	amua	calcu	lations:

#### **See attached OWRD Pump Calculations**

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
		OBSERVED	(IN CFS)
n/a			

Reminder: For pump calculations use the reference information at the end of this document.

5.	Additional	notes or	comments	related	to tl	ne sy	ster	n

#### **B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

WEIL W LINKIN 25234/ 1-154011	Well A	HARN 52934	L-124611
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#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (centrifugal, turbine or	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
			Submersible		

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#### 2. Motor Information

MANUFACTURER	Horsepower
	20

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3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
20	15	60′	14'	1.26 CFS

4. Provide pump calculations:

d OWRD Pump Calculations	
d	<b>OWRD Pump Calculations</b>

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a			

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

#### **B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

Well B HARN 52835/L-132138

#### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE
Fairbanks-Morse	10A6STG	1.00.1.02.11	Turbine		0,22

#### 2. Motor Information

MANUFACTURER	Horsepower
US Motors	30

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
30	15	40'	11'	2.37 CFS

4. Provide pump calculations:

1 10 1100 bentile entententente	
	See attached OWRD Pump Calculations

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
n/a			

Reminder: For pump calculations use the reference information at the end of this document.

**6.** Additional notes or comments related to the system:

#### **B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

#### Change #2

#### **Change in Place of Use**

Did the transfer order authorize a change in the place of use?

YES NO

If "NO", this Section can be deleted.

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
463.0	463.0

If the new use(s) was not irrigation or nursery:

New Use(s)	Was the New Place of USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER? (INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)			
	YES	NO	NA	
	YES	NO	NA	

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2. Variations:	
Was the use developed differently from what was authorized by the transfer final order? YES	NO
If yes, describe below.	
(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")	

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#### Change #3

#### **Change in Character of Use**

Did the transfer order authorize a change in character of use?

YES NO

If "NO", this Section can be deleted.

#### **SECTION 4**

#### **CONDITIONS**

All conditions contained in the transfer final order, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

#### 1. Time Limits:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE AUTHORIZED CHANGES WERE COMPLETED  *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND  THE "COMPLETENESS DATE"
ISSUANCE DATE	11-27-2018	
COMPLETENESS DATE FROM ORDER (C)	10-1-2020	10-1-2020

<sup>\*</sup> MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

**2.** Is there an extension final order(s)? If "NO", you may delete the following table.

YES NO

- 3. Measurement Conditions:
- a. Does the transfer final order, or any extension final order require the installation YES NO of a meter or other approved measuring device?

If "NO", items b through f relating to this section may be deleted.

Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of appropriation.

b. Has a meter been installed?

YES NO

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#### c. Meter Information

POA NAME OR#	Manufacturer	SERIAL#	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1	Aclara	84-281-890	Working	None	2020
Well 2	McCrometer	12-02502	Working	558961	2015
Well 3	Aclara	84-281-891	Working	None	2016
Well 5	McCrometer	12-02503	Working	227704	2015
Well 11	GF	61709201025	Working	None	2020
Well 12	GF	SB12009	Working	None	2020
Well 13	GF	NONE	Working	None	2020
Well 14	GF	NONE	Working	None	2020
Well 15	Aclara	82-815-722	Working	23663	2020
Well A	GF	62001151588	Working	27	2020
Well B	GF	NONE	Working	2	2020

If a meter has been installed, items d through f relating to this section may be deleted.

4.	Recording a	and reporting	conditions
----	-------------	---------------	------------

a.	Is the water user require	to report the water use to the Department?	YES	NO
----	---------------------------	--	-----	----

If "NO", item b relating to this section may be deleted.

5. Other conditions required by the transfer final order or extension final order:

d.	were there special well construction standards?	YES	NC
b.	Was submittal of a ground water monitoring plan required?	YES	NO
c.	Other conditions?	YES	NO

If "YES" to any of the above,	identify the condition and	d describe the water	user's actions to
comply with the condition(s	):		

#### **SECTION 5**

#### **ATTACHMENTS**

Provide a list of any additional documents you are attaching to this report:

ATTACHMENT NAME	DESCRIPTION
Pump Calcs	OWRD Pump Calculations
Well Logs	HARN 1116, HARN 51588, HARN 1118, HARN 1128, HARN 1115, HARN 52930, HARN 52897, HARN 52901, HARN 1117, HARN 52934, HARN 52835
CBU Map	Claim of Beneficial Use Map

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#### **SECTION 6**

#### **CLAIM OF BENEFICIAL USE MAP**

The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on poly film at a scale of 1'' = 1320 feet, 1'' = 400 feet, or the original full-size scale of the county assessor map for the location.

The changes that were authorized under the transfer final order must be mapped based on the developed locations; new or additional points of appropriation and place of use.

In cases where the order involved additional points of appropriation, the additional points should be mapped based on their developed locations. The original points of appropriation should be mapped based on the original right of record at the time the transfer final order was issued.

In cases where the order involved changing the place of use for a portion of a water right, the portion of the place of use being changed should be mapped based on the developed location. If the transfer also included portions of the place of use that were not being modified, but were receiving a new or additional point of appropriation, the place of use for those lands should be mapped based on the original right of record at the time the transfer final order was issued.

Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

On-site direct measurement and NAIP imagery.

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## **Map Checklist**

Please be sure that the map you submit includes ALL the items listed below. (Reminder: Incomplete maps and/or claims may be returned.)

$\boxtimes$	Map on polyester film
$\boxtimes$	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
$\boxtimes$	Township, Range, Section, Donation Land Claims, and Government Lots
$\boxtimes$	If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
N/A	Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
$\boxtimes$	Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
$\boxtimes$	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
$\boxtimes$	Point(s) of diversion or appropriation (illustrated and coordinates)
$\boxtimes$	Tax lot boundaries and numbers
N/A	Source illustrated if surface water
$\boxtimes$	Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
$\boxtimes$	Application and permit number or transfer number
$\boxtimes$	North arrow
$\boxtimes$	Legend
$\boxtimes$	CWRE stamp and signature

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<b>Pump Capa</b>	acity Calc	ulation SI	neet	WELL 1 T-12819		
using Departn						
(hp)(efficiency	) / (lift + psi	head) = cap	acity in cfs			
Efficiency:						
Centrifugal = 6	3 61					
Turbine = 7.04						
Data Entry (fi	ill in underli	ned blanks				
HP =	25					
Efficiency =	7.04					
Lift =	46					
PSI =	15					-
Results Calc	ulated					
results Calc	uiateu					
(hp)(efficiency	·) =	176				
Head based o		38.1				
Total dynamic		84.1				
(head + lift)						
						-
Pump Capaci	itu =	2.09	cfs			
Fullip Capaci	ity –	2.09	UIS	-	-	

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Pump Capa	acity Calc	ulation Sh	eet	WELL 2 T-12819	and the same of th
using Departn	The second secon	7-			
(hp)(efficiency	/) / (lift + psi	head) = capa	city in cfs		
Efficiency:					
Centrifugal = 6	6.61				
Turbine = 7.04	1				
Data Entry (fi	ill in underli	ned blanks)			
HP = Efficiency =	40 7.04			-	
Lift =	46.83				
PSI =	15				
Results Calc	ulated				
(hp)(efficiency	v) =	281.6			
Head based o		38.1			
Total dynamic		84.9			
(head + lift)		Parameter Company			
Pump Capaci	ity =	3.32	cfs		

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Pump Cap	acity Calc	ulation S	heet	WELL 3 T-12819			
using Departn	nent designe	ed formula:					
(hp)(efficiency	/) / (lift + psi	head) = cap	acity in cfs				
Efficiency:							
Centrifugal =							
Turbine = 7.04	4					-	
Data Entry (fi	ill in underl	ined blanks	)				
					-		
HP =	15				-		
Efficiency =	7.04						
Lift =	49.3						
PSI =	15						
Populto Colo	ulotod						
Results Calc	uiated				_	1	-
(hp)(efficiency	() =	105.6		1			
Head based o		38.1					
Total dynamic	head =	87.4					
(head + lift)							
Pump Capac	itv =	1 21	cfe				
Pump Capac	ity =	1.21	cfs				

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Pump Capac	ity Calc	ulation Sh	eet	WELL 5 T-12819		
using Departme		the same of the sa				
(hp)(efficiency) /	(lift + psi	head) = capa	city in cfs			
Efficiency:						
Centrifugal = 6.6	31					The state of the s
Turbine = 7.04						
Data Entry (fill	in underli	ned blanks)				Opposite Control of Co
HP =	60					
Efficiency =	7.04					
Lift =	49.3					
PSI =	15					Parameter and the second
Results Calcula	ated					
(hp)(efficiency) =		422.4				
Head based on		38.1				
Total dynamic head =		87.4				
(head + lift)						
<b>Pump Capacity</b>	=	4.83	cfs			

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Pump Capa	acity Calc	ulation Sh	WELL 11 T	<u>-12819</u>			
using Departn							- Control of the Cont
(hp)(efficiency	/) / (lift + psi	head) = capa	city in cfs				
Efficiency:							
   Centrifugal = 6							
Turbine = 7.04	1						or control of
Data Entry (fi	ll in underl	ined blanks)					
HP=	20						
Efficiency =	7.04						
Lift = PSI =	17 15						To a constant
101	10						
Results Calc	ulated						
(hp)(efficiency	n) =	140.8					
Head based o		38.1					CALL THE COLUMN TWO IS NOT THE COLUMN TWO IS
Total dynamic		55.1					
(head + lift)							
Pump Canasi	4., -	2 50	ofo				
Pump Capaci	ity =	2.56	cfs				

<b>Pump Capa</b>	acity Calc	ulation Sh	neet	WELL 12 T-12819			
using Departm	nent designe	ed formula:					
(hp)(efficiency	) / (lift + psi	head) = capa	acity in cfs				autoria autoria
		I					
Efficiency:							
Centrifugal = 6	3.61						
Turbine = $7.04$							
Data Entry (fi	ll in underli	ined blanks)					
HP =	25						
Efficiency =	7.04						
Lift =	48						
PSI =	15						
							**Company
Results Calcu	ulated						
(h -) ( - 65 - i i	\	470					The state of the s
(hp)(efficiency		176		-	PAGE		
Head based o		38.1		-		-	
Total dynamic	neau =	86.1					-
(head + lift)							
Pump Capaci	tu -	2.04	cfs				The Control of the Co
- unip Capaci	ty –	2.04	CIS		-	-	-

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Pump Capa	city Calc	ulation Sh	eet	WELL 13 T-12819			
using Departm	ent designe	ed formula:					
(hp)(efficiency	) / (lift + psi	head) = capa	city in cfs		***************************************		
Efficiency:							
Centrifugal = 6	3.61						-
Turbine = 7.04							
Data Entry (fil	ll in underl	ined blanks)					
Data Litti y (iii	THE GIRGOTT						- Control Control
					-	-	
HP =	25					-	-
Efficiency = Lift =	7.04 50				-	ļ	-
PSI =	15						
Results Calcu	ılated						
(hp)(efficiency)	<b>)</b> =	176			1		
Head based or		38.1			<del> </del>	<b>†</b>	
Total dynamic head =		88.1			1		†
(head + lift)							
<b>Pump Capaci</b>	ty =	2.00	cfs				

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acity Calc	ulation Sh	eet	WELL 14 T-128	19		
) / (lift + psi	head) = capa	city in cfs				
5.61						
ll in underli	ned blanks)					
15						
ulated						
	470	-				
						-
Head based on psi = Total dynamic head =						1
neau –	91.1					
ity =	1.93	cfs				
	25 7.04 5.81 11 in underli 25 7.04 53 15	25 7.04 53 15  ulated ) = 176 n psi = 38.1 head = 91.1	25 7.04 53 15 15 19 176 19 176 19 18 18 18 18 18 18 18 18 18 18 18 18 18	nent designed formula:  (a) / (lift + psi head) = capacity in cfs  (b) / (lift + psi head) = capacity in cfs  (c) / (lift + psi head) = capacity in cfs  (d) / (lift + psi head) = capacity in cfs  (		nent designed formula:  () / (lift + psi head) = capacity in cfs  () (lift + psi head) = capacity in cfs  () (lift + psi head) = capacity in cfs  () (lift + psi head) = capacity in cfs  () () (lift + psi head) = capacity in cfs  () (lift + psi he

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Pump Capa	acity Calc	ulation Sh	eet	WELL 15 T-12819			
using Departn		the same of the sa					
(hp)(efficiency	/) / (lift + psi	head) = capa	city in cfs	<u> </u>			-
Efficiency					-		
Efficiency:						-	
Centrifugal =	6.61						
Turbine = 7.04							
Data Entry (fi	ill in underli	ned blanks)					
							-
HP =	15	-					
Efficiency =	7.04						
Lift =	48.5						
PSI =	15						
						-	
Results Calc	ulated						
Trocurs out	anato a						1
(hp)(efficiency	() =	105.6					1
Head based o		38.1					
Total dynamic head =		86.6					
(head + lift)							
					-	-	
Pump Capaci	ity =	1.22	cfs		1		

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Pump Capacity Calculation Sheet			WELL A T-12819			
using Departm						
(hp)(efficiency	) / (lift + psi	head) = capa	city in cf	3		
Efficiency:						
Centrifugal = 6						
Turbine = 7.04	1					-
Data Entry (fi	ll in underli	ned blanks)				
			***************************************			
HP=	20					
Efficiency =	7.04					
Lift =	74					
PSI =	15				1	
Results Calcu	ulated					
(hp)(efficiency	) =	140.8				
Head based o		38.1				
Total dynamic		112.1				
(head + lift)						
Pump Capaci	it., -	1.26	cfs			

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Pump Capacity Calculation Sheet			WELL B T-	12819		And the state of t	
using Department designed formula:							
(hp)(efficiency	y) / (lift + psi	head) = capa	city in cfs				
Efficiency:							
Centrifugal = 6							
Turbine = 7.04	1						
Data Entry (fi	ill in underli	ned blanks)				Taxable Transition	Nacional Property Control of the Con
				•			
HP =	30						
Efficiency =	7.04						
Lift = PSI =	51 15					]	Accession of the Control of the Cont
Results Calc	ulated						
(hp)(efficiency	') =	211.2					Managara Managara
Head based o		38.1					-
Total dynamic		89.1					
(head + lift)							
Pump Capacity = 2.37 cfs		2.37	cfs				

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NOTICE TO WATER WELL CONTRACTOR DER LATER WILL	116 Lile doted 10/1/29 KE;=	'O	,	
The original and first copy of this report	T BEDORA	8z 55/	31	1E-99
See the see of the see	OREGON State Well No.	311	255	900
WATER RESOURCES DEPARTMENT, SALEM, OREGON 97310	or print) FEB2 3 1980		·	
SALEM, OREGON 97310 within 30 days from the date of well completion.  SALEM, OREGON 97310 Within 30 days from the date of well completion.  JUL 2 7 1979lease type (Do not write ab	State Permit N	10.	: 4 4	2000
WATER RESOURCES DEPT	ove this line ATER RESOURCES DEPT	HAMN	4.	6
(1) OWNER: SALEM, OREGON	(10) LOCATION OF WELL:		•	
Name J.W. McAllister and Jett C. Blackburn	County HARNEY Driller's well n	umber	村1	
Address 771 PONDEROSA VILLAGE	SE 4 NE 4 Section 9 T. 255	R. 31	B	W.M.
BURNS, OREGON 97720	Bearing and distance from section or subdivis	DE	CFIV	FD
(2) TYPE OF WORK (check):	Searing and distance from Bestion of Subdivis	ion gorner	VLIV	
New Well 🔀 Deepening 🗆 Reconditioning 🗅 Abandon 🗀		MAR	012	021
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed w	zell.	/	041
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found 3	2	MIDE	ft.
Rotary The Driven Domestic K Industrial Municipal Domestic	Static level 8 ft. below land	surface. D	Date 77	25/79
Dug Bored I Irrigation Test Well Other	Artesian pressure Îlbs. per squa	re inch. D	Date	
ASING INSTALLED: Threaded   Welded M		to the same of the		
ASING INSTALLED: Threaded Welded M	(12) WELL LOG: Diameter of well	below casi	ng . 30	)11
"Dlam from ft. to ft. Gage ft. Gage	Depth drilled 205 ft. Depth of comp	leted well	156	ft.
	Formation: Describe color, texture, grain size	and struct	ure of n	naterials;
	and show thickness and nature of each stratu with at least one entry for each change of forms	tion. Repor	rt each c	hange in
PERFORATIONS: Perforated? Yes No.	position of Static Water Level and indicate prin	ncipal wate	er-bearin	g strata.
Type of perforator used FACTORY LUVERD	MATERIAL	From	То	SWL
Size of perforations 3 in. by 1/8 in.	top soil	0	4	
23.04 perforations from	tan_sand	4	10	
perforations from ft. to ft.	tan_clay	10	32	
perforations from ft. to ft.	tan_sandstone	32	34	
(7) SCREENS: Well screen installed?   Yes Y No	sand	34	40	
Manufacturer's Name	grey clay black sand	52	56	
Type Model No	green clay	56	20	
Diam Slot size Set from ft. to ft.	sandstone course	20	89	
Diam. Slot size Set from ft. to ft.	claystone	89	93	
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	<u>hard tan claystone</u>	93	94	
Was a pump test made?  Yes No If yes, by whom?	course sand	94	97	
770 00 10	claystone soft sandy clay	171	43	
rield: 550 gal./min. with 90 ft. drawdown after 12 hrs.	tan claystone	1 -1-1-	50	<del></del>
y_ , , , , , , , , , , , , , , , , , , ,	course sand		55	
Pollon And	hard fine sandstone	-	60	
A. I. C. M.	green claystone	160 1	69	
Artesian flow None g.p.m.  perature of water 63 Depth artesian flow encountered	green clay	1169 12	205	
Derature of water (1) Depth artesian flow encountered ft.	Work started 7/24 1979 Complete	ed 7/2	25	1979
(9) CONSTRUCTION:	Date well drilling machine moved off of well	7/26		1979
Well seal-Material used <u>Cement grout</u>	Drilling Machine Operator's Certification:			. ,
Well sealed from land surface toft.	This well was constructed under my Materials used and information reported	direct	super	vision.
Diameter of well bore to bottom of seal30 in.	best knowledge and belief.	201-217		
Diameter of well bore below seal	[Signed] ( / Curr / ) (Xur	Date!	7/25	, 197.9
Number of sacks of cement used in well seal 00 sacks  How was cement grout placed?	Drilling Machine Operator's License No.			
now was cement grout placed?	The state of the s		<del>,,,,</del>	
in the second se	Water Well Contractor's Certification:			
The state of the s	This well was drilled under my jurisd	iction and	l this re	eport is
Was a drive shoe used? 🗌 Yes 🛣 No Plugs Size: location ft.	true to the best of my knowledge and bel			
Did any strata contain unusable water?   Yes No	Name WESTERN WATER WELLIS (Person jim or corporation)		e or prin	t)
Type of water? depth of strata	Address P. O. ROX 294 BURNS	COREG	ON 9	7720.
Method of sealing strata off	[Signed] Chur	Zu.		
Was well gravel packed? Y Yes No Size of gravel:	[Signed] Water Worl fonts	ractor)	····	***************************************
Gravel placed from	Contractor's License No. 659 Date	7/25	••••••	., 197.9
/HIGH ADDIMINAT CIT	PPMA TO AMANAGA ANTO			

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# **Application for** Well ID Number

**OWRD** 

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Do not complete if the well already has a Well Identification Number.

JAN 20 2016

				01 11 10 ° 20	10
I. OWNER INFO				WATER RESOURCE	SDEPT
Current Owner Name (ple	ase print): Travis L. & Kelly R.	Singhose		SALEM, OREGO	ONNC
Mailing Address: 29327	Weaver Springs Road				
City, State, Zip: Burns,	OR 97720-9403				
Mail Well ID Tag to:	✓ SAME AS ABOVE	In Care Of (C/O)			
Name & Address:				·	
					-
Township: 25 S		31 E	(East / West)	Section: 9	
			SE	1/4 NE	1/4
GPS Coordinates: 43.42	1296, -119.001333				_
Street Address of Well, C	ty:				
	rent street address in the past:				
Use of Well (domestic, in Date Well Constructed (o	LL INFORMATION (Please fill igation, commercial, industrial, me property built): 7/25/1979 as constructed (if known): McAllis N 1116 - Well # 1	onitoring): Irrigation Total Well Dept	on h: 205'	Casing Diameter: _	16"
	print): John A. Short / Water	Right Services 111	Ċ.		
SUBMITTED BY (please	7 EMAIL &	iohnshr	ort@usa.com		
PHONE: OTT GOOD AGE	EMAIL 8	dor KAX:	7169404100111	<del></del>	-
	on Water Resources Department 7: ocessed in the order they are recei				
	For Official Use Only by t	he Oregon Water Res	ources Departm	ent:	
Received Date:		Well Log Number:		Well Identi	
1-20-16	<u></u>	1ARN 1116	-	L-121	031
				·····	

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

06-19-2009

WELL LABEL # L 94026		
START CARD#	1006752	

(A) T LATE OWNER OF WHAT	r
(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
First Name Tim Last Name Clemens	County Harney Twp 25.00 S N/S Range 31.00 E E/W WM
Company	Sec 9 NE 1/4 of the SW 1/4 Tax Lot 1400
Address 235 Hwy 20 N	m 1/ 1/ 1
City Hines State OR Zip 97738	Lato' DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Long ° ' "or DMS or DD
Alteration (repair/recondition) Abandonment	Street address of well Nearest address
	Dog Mountain Lane off Hwy 205, 12 miles south of
(3) DRILL METHOD	Burns
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Reverse Rotary Other	
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening
Industrial/ Commercial Livestock Dewatering	Completed Well 06-12-2009 20
Thermal Injection Other	Flowing Artesian? Dry Hole?
	WATER BEARING ZONES Depth water was first found 25
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy	SWL Date From To Est Flow SWL(psi) + SWL(ft)
Depth of Completed Well 135.00 ft.	06-12-2009 25 135 850 20
BORE HOLE SEAL sacks/	
Dia From To Material From To Amt Ibs	
20 0 18 Bentonite Chips 0 18 30 S	
16 18 135	
	(11) WELL LOG  Ground Elevation
How was seal placed: Method A B C D E	Material From To
	Top Soil 0 1
Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material Size	Sandstone 1 3
Filter pack from ft. to ft. Material Size	Brown Clay 3 25
Explosives used: Yes Type Amount	Blue Clay 25 43
	Brown Clay with some Coarse Sand 43 94
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plste Wld Thrd	Gray Clay with Small Gravel 94 135
<u> </u>	
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Shoe Inside Outside Other Location of shoe(s)	10/11 V ± 20/21
Temp casing Yes Dia From To	
(7) PERFORATIONS/SCREENS	OWRD
Perforations Method Factory Perforated	34440
Screens Type Material	
Perf/S Casing/ Screen Scm/slot Slot # of Tele/	Date Started oc as 2000 Completed oc 12 2000
creen Liner Dia From To width length slots pipe size	Date Started 06-02-2009 Completed 06-12-2009
Perf Casing 14 38 118 .25 3 3,840	(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.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date
	Electronically Filed
Pump Bailer Air Flowing Artesian	Signed
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	
850 40 60 8	(bonded) Water Well Constructor Certification
	I accept responsibility for the construction, deepening, alteration, or abandonmen work performed on this well during the construction dates reported above. All world
Temperature 59 °F Lab analysis Yes By	performed during this time is in compliance with Oregon water supply well
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.
From To Description Amount Units	License Number 1675 Date 06-19-2009
	Electronically Filed
	Signed GEORGE VALENTINE (E-filed)
	Contact Info (optional) George Valentine, 541-493-2065
ORIGINAL - WATER RESOURCES I	
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTM	MENT WITHIN 30 DAYS OF COMPLETION OF WORK
	Form Version: 0.89

**HARN 1118** NOTICE TO WATER WELL CONTRACTOR The original and first copy of this report are to be filed with their WATER WELL REPORT State Well No. 25s /31E -9 dd SALEM, OREGON 97310 AUG 3 - 1979 (Please type or print) within 30 days from the date State Permit No. ....... of well completion, WATER RESOURCES (DE for write above this line) SALEM, OREGON (10) LOCATION OF WELL: (1) OWNER: J.W. MCALLISTER & JETT C. BLACKBURN County HARNEY Driller's well number Name Address 771 PONDEROSA VILLAGE SE 14 SE 14 Section 9 T. 25S R. 31E BURNS ORFCON 97720 Bearing and distance from section or subdivision corner (2) TYPE OF WORK (check): New Well X Deepening [ Reconditioning [ Abandon If abandonment, describe material and procedure in Item 12. (11) WATER LEVEL: Completed well (3) TYPE OF WELL: (4) PROPOSED USE (check): Depth at which water was first found Driven | Rotary Domestic | Industrial | Municipal | Static level ft. below land surface. Date Cable Jetted Bored 🗆 Irrigation [3] Test Well [ Other Dug Artesian pressure none lbs. per square inch. Date CASING INSTALLED: Threaded | Welded | (12) WELL LOG: Diameter of well below casing .....3.0.. 6..." Diam, from +1 ft. to 168 ft. Gage • 312 ft. Depth of completed well 168 Depth drilled 180 Formation: Describe color, texture, grain size and structure of materials; ....." Diam. from ...... ft. to ...... ft. Gage ...... and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in PERFORATIONS: position of Static Water Level and indicate principal water-bearing strata. Perforated? Yes No. Luvered MATERIAL Type of perforator used in. by 1/8 4 Size of perforations top soil 3840 perforations from 72 ft. to ..... 8 tan sand tan claystone .... perforations from ..... green claystone ..... perforations from ...... ft. to tan clay (7) SCREENS: Well screen installed? ☐ Yes XXNo 38 63 gray clay Manufacturer's Name ..... <u>green sandstone</u> 80 tan claystone Diam. Slot size Set from ft, to ft. 80 90 sandstone & gravel Diam. ..... Slot size ...... Set from ..... ft. to ..... ft. 90 993 sandy claystone 99 104 green sand Drawdown is amount water level is lowered below static level (8) WELL TESTS: 104 110 green claystone 110 | 112 sandstone & gravel Was a pump test made? 
Yes YNo If yes, by whom? 112 1117 gal./min. with / 45 ft. drawdown after sandy claystone fractured claystone " sandstone & gravel 130 146 sand & gravel Bailer test gal./min. with ft. drawdown after hrs. 146 | 152 sandy claystone sand & gravel Artesian flow none g.p.m. perature of water 63 Depth artesian flow encountered ...... ft. 1979 Completed 1979 Date well drilling machine moved off of well 1979 (9) CONSTRUCTION: Well seal-Material used .....cement\_grout Drilling Machine Operator's Certification: Well sealed from land surface to \_\_\_\_\_\_\_ft. How was cement grout placed? gravity flow V SE, 111979 Water Well Contractor's Certification:

[Signed]

WATER MEDUUNCED

Was a drive shoe used? ☐ Yes XXNo Plugs ...... SizsAppetton ORECON

Was well gravel packed? X Yes | No Size of gravel: 3/8-

Did any strata contain unusable water? 

Yes X No

Type of water?

Gravel placed from ....

Method of sealing strata off

OREGON 97720

True to the best of my knowledge and belief.

Name WESTERN WATER WELLS INC.
(Person, firm or corporation) (Type or print)

Address P.O. BOX 294 BURNS OREGON 97720

Contractor's License No. 659 Date 7/31 1979

MAR 0 4 2021



# Application for Well ID Number

OWRD

## RECEIVED

Do not complete if the well already has a Well Identification Number.

JAN 20 2016

C.	OWNER INFORMATION		WATER RESOURCES	DEPT			
Current	Current Owner Name (please print): Travis L. & Kelly R. Singhose SALEM, OREGON						
Mailing	g Address: 29327 Weaver Springs Road	······					
City, St	tate, Zip: Burns, OR 97720-9403	·					
Mail W	Vell ID Tag to: ✓ SAME AS ABOVE In Care	Of (C/O)					
Name &	& Address:	s•:					
City, St	tate, Zip:						
II.	WELL LOCATION INFORMATION (Please fill out as combined in the	npletely as possible)(East / West)	Section: 9				
			Section: 5	1/4			
	t: 1500 County Harney oordinates: 43.413888, -119.005048		1/4	1/4			
			······································				
	Address of Well, City:						
Date W		Irrigation /ell Depth: 180'	Casing Diameter:	400			
	at time the well was constructed (if known): McAllister / Black information: HARN 1118 - Well # 3			16"			
Other I	information: HARN 1118 - Well # 3	ourn		10"			
Other I		ces, LLC		10"			
Other Is SUBM PHON Send ap	ITTED BY (please print): John A. Short / Water Right Serv.  E: 541-389-2837  EMAIL &/or FAX:  pplication to: Oregon Water Resources Department 725 Summer Applications are processed in the order they are received, and We	ices, LLC johnshort@usa.com St NE, Suite A, Salem, O	regon 97301; or fax to ( I within 4-5 business da	503) 986-			
Other I SUBM PHON Send ap 0902.	INTED BY (please print): John A. Short / Water Right Serv.  E: 541-389-2837 EMAIL &/or FAX:  pplication to: Oregon Water Resources Department 725 Summer Applications are processed in the order they are received, and Wester Resources Department 725 Summer Applications are processed in the order they are received, and Wester Resources Department 725 Summer Applications are processed in the order they are received, and Wester Resources Department 725 Summer Applications are processed in the order they are received, and Wester Resources Department 725 Summer Applications are processed in the order they are received.	johnshort@usa.com  St NE, Suite A, Salem, O ell ID Numbers are mailed	regon 97301; or fax to ( I within 4-5 business day	503) 986- /s.			
Other I SUBM PHON Send ap 0902.	ITTED BY (please print): John A. Short / Water Right Serv.  E: 541-389-2837  EMAIL &/or FAX:  pplication to: Oregon Water Resources Department 725 Summer Applications are processed in the order they are received, and We	johnshort@usa.com  St NE, Suite A, Salem, O ell ID Numbers are mailed	regon 97301; or fax to ( I within 4-5 business da	503) 986- rs.			

WATER WELL REPORTS CEIVE DWEIL No. 2.58/3/2-16 NOTICE TO WATER WELL CONTRACTOR The original and first copy of this report are to be STATE OF OREGON
SEP 201976 State Permit No. filed with the STATE ENGINEER, SALEM, OREGON 975 (Do not write above this line)? RESOURCES DEPT within 30 days from the date of well completion. (10) LOCATION OF GWELL: (1) OWNER: Driller's well number County Name Tom Clemens 255 R. Address 90 W. Adams 14 NE 14 Section 19 T. 31 E NW 97720 Burns, Oregon Bearing and distance from section or subdivision corner (2) TYPE OF WORK (check): 584 ft. east and 20 ft. north Reconditioning [ New Well K Deepening [ Abandon [7] of southwest corner If abandonment, describe material and procedure in Item 12 (11) WATER LEVEL: Completed well. (3) TYPE OF WELL: (4) PROPOSED USE (check): Depth at which water was first found Rotary Driven 🗆 Domestic | Industrial | Municipal | Static level ft. below land surface. Date 11ft. Jetted 🛚 Irrigation Test Well Other Bored [ Artesian pressure lbs. per square inch. Date CASING INSTALLED: Threaded | Welded | (12) WELL LOG: Diameter of well below casing .. " Diam. from 41 ft. to 142 ft. Gage 250 Depth drilled ft. Depth of completed well .." Diam. from ...... ft. to ..... ft. Gage .... Formation: Describe color, texture, grain size and structure of materials; .." Diam. from ...... ft. to ..... ft. Gage .... and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in (ELPERFORATIONS: position of Static Water Level and indicate principal water-bearing strata. Perforated? X Yes No. MATERIAL Type of perforator used Saw From To SWT. Factory Size of perforations 1/8 12 in. by top soil, brown 28 \_\_\_\_\_ perforations from \_\_\_\_\_60 \_\_\_ ft, to \_\_\_72 \_\_\_ ft. clay, green 12 10 sand stone, brown 28 44 shale, gray 44 46 perforations from ..... clay, blue (7) SCREENS: Well screen installed? | Yes | No 52 sandstone, gray 68 Manufacturer's Name ..... clay, brown 89 Model No. .. sandstone, brown blue 89 92 Diam. ..... Slot size ..... Set from ..... small gravel 92 108 Diam. ..... Slot size ..... Set from ..... fractured shale, gray 108 129 129 134 coarse gravel Drawdown is amount water level is lowered below static level (8) WELL TESTS: 134 sandstone, blue 142 Yas a pump test made? 🗖 Yes 🗌 No. If yes, by whom? 869 gal./min. with 53 ft. drawdown after 8 ailer test gal./min. with ft, drawdown after rtesian flow Temperature of water Depth artesian flow encountered ..... Work started Awa 1976 Completed Aug 19 Date well drilling machine moved off of well 19 (9) CONSTRUCTION: Drilling Machine Operator's Certification: Well seal-Material used ..... cement This well was constructed under my direct supervision. Materials used and information reported above are true to my Well sealed from land surface to \_\_\_\_\_\_18\_\_\_\_ Diameter of well bore to bottom of seal ..... best knowledge and helief. Diameter of well bore below seal 24 in. Date Sept 10, 19.76 Number of sacks of cement used in well seal ......21 sacks Drilling Machine Operator's License No. .... Number of sacks of bentonite used in well seal .....sacks Brand name of bentonite ..... Water Well Contractor's Certification: Number of pounds of bentonite per 100 gallons This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Was a drive shoe used? Tyes No Plugs ...... Size: location ...... ft. Name Wastariv DRIIIIAG. (Person, firm or corporation) Did any strata contain unusable water? 🗆 Yes 💆 No Type of water? good depth of strata Method of sealing strata off -[Signed] . Was well gravel packed? Yes No Size of gravel: ..... Contractor's License No. 426 Date SapT 10 19.1 Gravel placed from ......18................ ft. to .......142........... ft.

MAR 0 4 2021



# Application for Well ID Number OWRD

#### RECEIVED

Do not complete if the well already has a Well Identification Number.

JAN 20 2016

	JAN & COLO
I. <u>OWNER INFORMATION</u>	WATER RESOURCES DEPT
Current Owner Name (please print): Travis L. & Kelly R. Singh	ose SALEM, OREGON
Mailing Address: 29327 Weaver Springs Road	
City, State, Zip: Burns, OR 97720-9403	
Mail Well ID Tag to: SAME AS ABOVE In	Care Of (C/O)
Name & Address:	
City, State, Zip:	
II. WELL LOCATION INFORMATION (Please fill out a	
Township: 25 S (North / South) Range: 31 E	(East / West) Section: 16
Tax Lot: 3000 County Harney	NW 1/4 NE 1/4
GPS Coordinates: 43.406627, -119.007775	
Street Address of Well, City:	
If the property had a different street address in the past:	
III. GENERAL WELL INFORMATION (Please fill out as  Use of Well (domestic, irrigation, commercial, industrial, monitori  Date Well Constructed (or property built): 8/10/1976 To  Owner at time the well was constructed (if known): Clemens  Other Information: HARN 1128 - Well # 5	
SUBMITTED BY (please print): John A. Short / Water Right	Services, LLC
PHONE: 541-389-2837 EMAIL &/or FA	X: johnshort@usa.com
Send application to: Oregon Water Resources Department 725 Sun 0902. Applications are processed in the order they are received, an	nmer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986- id Well ID Numbers are mailed within 4-5 business days.
For Official Use Only by the Ore	gon Water Resources Department:
Received Date: Well I	Log Number: Well Identification #:
	N 1128 L-121034

#### "-WEIVEII

WATER WELL REPORT STATE OF OREGON DEC 1 3 1984

	0 - 0 1304
TAT	ER RESOURCES DEDT
5	ER RESOURCES DEPT SALEME CERTIFIED OF PRINT IN INK

State Well No.	25s/31E-916
----------------	-------------

State Permit No.

(1) OWNER:	(10) LOCATION OF WELL:	
Name OMNI ENTERPRISES	TTA TAYFUE	
Address 771 PONDEROSA VILLAGE	NW 4 SE 4 Section 9 T. 25S	7477
City BURNS, State ORE.	Tax Lot # Lot Blk	111112
(2) TYPE OF WORK (check):	Address at well location:	Subdivision
	The state of the s	
New Well ☑ Deepening □ Reconditioning □ Abandon □	(11) WATER LEVEL G	
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed w	page and the second sec
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found	14 ft.
Rotary Air Driven Domestic Industrial Municipal		and surface. Date 11-18-8
Retary Mud Dug	Artesian pressure lbs. per	r square inch. Date
Bored  Thermal: Withdrawal  Reinjection	(12) WELL LOG: Diameter of well below of	casing .0
(5) CASING INSTALLED: Steel E Plastic	Depth drilled 100 ft. Depth of c	completed well 100 ft.
Threaded □ Welded □	Formation: Describe color, texture, grain size and structhickness and network of each structure, grain size and structhickness and network of each structure, grain size and structure.	cture of materials; and show
30"Diam.from.+0.5ft. to19.5ft. Gauge375	thickness and nature of each stratum and aquifer penet for each change of formation. Report each change in p	rated, with at least one entry osition of Static Water Level
16 "Diam from +0.8 ft. to 99.2 ft. Gauge .250	and indicate principal water-bearing strata.	
LINER INSTALLED:	MATERIAL	From To SWL
	Top soil & brown sand	0 3
(a) PEPEOP ASSOCIA	Clay, brown	3 14
(6) PERFORATIONS: Perforated? Yes No Type of perforator used MILL CUT	Rock, sand stone	14 16 15
Size of perforations 3/16 in. by 5 in.	Clay, grey	16 30 15
960 perforations from 20 ft. to 100 ft.	Gravel with clay	30 40 15
t. to	Clay, grey	40 45 15
perforations from	Claystone	45 55 15
	Gravel, coarse	55 65 10
(7) SCREENS: Well screen installed? ☐ Yes # No	Rock & claystone	65 68 10
Manufacturer's Name	Gravel, large	68 77 10
Type Model No.	Clay, brown	77 83 10
Diam. Slot Size Set from ft. to ft.	Gravel, small	83 90 10
Diam. Slot Size Set from ft. to ft.	Coarse sand	90 100 10
(8) WELL TESTS: Drawdown is amount water level is lowered below static level		
		RECEIVED
a pump test made? ☑ Yes □ No If yes, by whom? 6WNER  1150 gal/min with 32 ft drawdown after 13 hrs		
Neid: 1150 gal/min with 32 ft drawdown after 13 hrs.		MAR 0 4 2021
Aintent		
Patterna van de la		
The state of the s		OWRD
20pm at constitution encountered	Work started 11-18 1984 Completed	11-30 1984
(9) CONSTRUCTION: Special standards: Yes \( \text{No} \( \text{IN} \)	Date well drilling machine moved off of well	11-30 19 84
Well seal—Material used CEMENT	(unbonded) Water Well Constructor Certific	ation (if applicable)
rven sealed from land surface to	This well was constructed under my direct cur	nomicion Matariala
Diameter of well bore to bottom of seal	and information reported above are true to my bes	st knowledge and belief.
Diameter of well bore below seal	[Signed]	Date, 19
Number of sacks of cement used in well seal	Bonded Water Well Constructor Certification	n·
How was cement grout placed? TRAVIS PIPE	Bond 9615691 Issued by Fadility	
27	(number) Surety	y Company Name
Vas pump installed? YES Type DWT HP 30 Depth 55 ft	This well was drilled under my jurisdiction a the best of my knowledge and belief.	
	Name Ralph Killinger	
Vas a drive shoe used? ☐ Yes  X No Plugs Size: location ft.  Did any strata contain unusable water? ☐ Yes ■ No	D : 2	(Type or print)
Type of Water? depth of strata	Address Frinceton, Ore.	
Method of sealing strata off	[Signed]	112
Vas well gravel packed?	Water Well Constructor	1
Street placed from 0 Size of gravel: 100	Date Dec.	, 19.84

WELL I.D. LABEL# L STATE OF OREGON START CARD# WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) **ORIGINAL LOG#** (1) LAND OWNER Owner Well I.D. First Name TRAVIS
Company 35 RH Last Name S, nyhose (9) LOCATION OF WELL (legal description) Runchas. County HAMLY Twp 25 NS Range 29327 WEGVER NE1/4 of the 5E 1/4 Tax Lot 1500 Tax Map Number New Well Deepening Conversion (2) TYPE OF WORK DMS or DD Alteration (complete 2a & 10) (2a) PRE-ALTERATION
Dia + From DMS or DD C Street address of well Material From 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 (4) PROPOSED USE Domestic Airrigation Community Flowing Artesian? Industrial/ Commericial Livestock Dewatering WATER BEARING ZONES Depth water was first found Thermal Injection Other SWL Date Est Flow SWL(psi) From To + SWL(ft) (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 12-31-20 150 Depth of Completed Well \_\_\_\_\_\_\_\_\_ ft. **BORE HOLE** SEAL Dia Amt Ibs Bentinite 18 Calculated (11) WELL LOG Calculated **Ground Elevation** Method LA B C D How was seal placed: From X Other Bowell DRY TOP SOIL Backfill placed from \_ \_ ft. to \_ \_ ft. Material 45 Filter pack from ft. Material 70 125 Explosives used: Yes Type\_ Amount (5a) ABANDONMENT USING UNHYDRATED BENTONITE RECEIVED **Pounds** Proposed Amount **Actual Amount** (6) CASING/LINER Dia Casing From To Gauge Ŧ OWRD Outside Other Inside Location of shoe(s) Temp casing Yes Dia\_ From\_ (7) PERFORATIONS/SCREENS Perforations Method Date Started 4/15/20 Completed 12/30/20 Screens Type Material Perf/S Casing/ Screen Scm/slot Tele/ Slot # of creen Liner Dia (unbonded) Water Well Constructor Certification From 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 (8) WELL TESTS: Minimum testing time is 1 hour Signed O Pump W Bailer Flowing Artesian O Air Yield gal/min 2 5 9 (m Drawdown Drill stem/Pump depth Duration (hr) (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 54 °F Lab analysis ☐ Yes By. construction standards. This report is true to the best of my knowledge and belief. Temperature Yes (describe below) TDS amount 7 05 Description Amount Units Water quality concerns? Description

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

WELL I.D. LABEL# L	
START CARD#	215744
ORIGINAL LOG#	

(1) LAND OWNER Owner Well I.D.			
First Name Last Name Sin 4 hase	(9) LOCATION OF WELL (legal description)		
Company 35 RAnches	County Harney Twp 25 NS Range 31 (BW WM		
Address 29327 WEAVER SPYS. LN.	Sec 10 5W 1/4 of the SW 1/4 Tax Lot 1600		
City Burns State OR. Zip 97720	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 DMS or DD		
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address		
Dia + From To Gauge Stl Plstc Wld Thrd Casing:	Contest address of well Contest address		
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 7/2/28 42 72		
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?		
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found		
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)		
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	7/2/20 42 248 300 424		
Depth of Completed Well 248 ft.	1/2/20 42 248 200 42.		
BORE HOLE SEAL sacks/			
Dia From To Material From To Amt lbs			
14 0 20 Bentinite 0 20 32 5KS			
12" 20 248 Calculated 25 5x5			
	WANTED TO S		
Calculated	(11) WELL LOG Ground Elevation		
How was seal placed: Method A B C D E	Material From To		
Rother poured DRY	TOP SOIL OS		
Backfill placed from ft. to ft. Material	TAN C/AY 5 35		
Filter pack from ft. to ft. Material Size	GREEN CLAY, 35 50		
	TAN CIAY W/ SAND 50 135		
	GREEN 2144 W/SAND 135 240		
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	white C/49 248		
Proposed Amount Pounds Actual Amount Pounds			
(6) CASING/LINER			
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd			
$\otimes$ 0 10° $\oplus$ 2 248 259 $\otimes$ 0 $\times$	RECEIVED RECEIVED		
	RECEIVED RECEIVED		
	JUL 0 6 2020 MAR 0 4 2021		
	1 2021		
Shoe Inside Outside Other Location of shoe(s)			
Temp casing Yes Dia From To	W OWRD		
TO DEDEOD A TIONS (CODEENS	b OWRD		
Perforations Method Factory			
Screens Type Material	Date Started 6/18/20 Completed 7/2/20		
Perf/S Casing/Screen Scrn/slot Slot # of Tele/	Date Started V/100/ Completed 1/2/		
creen Liner Dia From To width, length slots pipe size	(unbonded) Water Well Constructor Certification		
creen 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	Signed		
Pump	oigica		
Yield gal/min . Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification		
25 gm " B 1 HR.	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		
Temperature °F Lab analysis	construction standards. This report is true to the best of my knowledge and belief.		
	Signed Date 7/2/20 Contact Info (optional)		
Water quality concerns? Yes (describe below) TDS amount 78 From To Description Amount Units	2		
	Signed B Whi		
	Contact Info (optional)		

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

AND OWNER
Owner Well I.D.

WELL I.D. LABEL# L	132048
START CARD#	217737
ORIGINAL LOG#	

(1) LAND OWNER First Name TRAVIS Last Name Singhole	-
First Name TRAVIS Last Name Singhole Company 35 Ranches	(9) LOCATION OF WELL (legal description)
Address 29327 Weaver Spas Lw.	County HATNEY Twp 25 NO Range 31 DW WM
City Burns State OR. Zip 977212	Sec 9 NE 1/4 of the SE 1/4 Tax Lot 1500
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot DMS or DD
Alteration (complete 2a & 10)   Abandonment(complete 5a)	Long o DMS or DD
Dia + From To Gauge Stl Plate Wid Thrd	Street address of well (Nearest address
Casing:	2.000 0. 40\$ 141 0
Material From To Amt sacks/lbs Seal:	31597 Day Mit LN. Burns OR,
(3) DRILL METHOD	(10) STATIC WATER LEVEL
Rotary Air Rotary Mud Cable Auger Cable Mud	Existing Well / Pre-Alteration Date SWL(psi) + SWL(ft)
Reverse RotaryOther	Completed Well 8-3-20 45 FT
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found
ThermalInjectionOther	SWL Date From To Est Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	8-3-20 45 6 248 250 69 45 6
Depth of Completed Well 248 ft.  BORE HOLE SEAL Strekt	
Dia From To Material From To Amt lbs	
14" 0 18 Bentinde 0 18 21 six	7 1 1 1 1 11 1
12 18 250 Calculated 15 5x5	1
Calculated	(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D E	Material From To
Backfill placed from ft. Material	From Clary 5 45
Filter pack from ft. to ft. Material Size	Green Clay IN SAND US 65
Explosives used: Yes Type Amount	TAN CIAN W/ SAND 15 195
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	GREEN 01 My W/ Sand, 195 248
Proposed Amount Pounds Actual Amount Pounds	
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	
Casing Liner Dia + From To Gauge Stl Plste Wld Thrd	DECENTER
	RECEIVED
	AUG 0 6 2020
	11110 \ 0 \ 1 \ 1 \ 1 \ 1 \ 1 \ 1 \ 1 \
Shoe Inside Outside Other Location of shoe(s)	MAR <b>0 4</b> 202
Temp casing Yes Dia From To	OWRD
(7) PERFORATIONS/SCREENS Perforations Method Fuet or /	OWRD
	71.1.
Perf/S Casing Screen Type Material Perf/S Casing Screen Screen Screen Screen	Date Started 7/6/20 Completed 8/3/20
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification
10" 90 248 3/3" 315 3040	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.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date
Pump	Signed
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification
25 6Pm D- 1HR	I accept responsibility for the construction, deepening, alteration, or abandonment
	work performed on this well during the construction dates reported above. All work
Temperature °F Lab analysis Yes By	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.
Water quality concerns?   Ves (describe below) TDS amount 165	License Number 1882 Date 8/3/20
From To Description Amount Units	
	Signed W. Contact Info (optional)
	Contact and (opitolial)

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

WATER RESOURCES DEPARTM SALEM, OREGON 97310 within 30 days from the date

STATE OF OREGON (Please type or print)

RECEN

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WATER RESOURCES DEPTWEE of well completion.

ite ab	ove this line)	AR <b>0</b> 4	2021	7
RN	(10) LOCATION OF WE COUNTY HARNEY THE COUNTY	OWE	RD)	3
	SE 4 NE 4 Section Q	9 000		M.
_	Bearing and distance from section or subdivisi	on corne	r	
			<u>-</u>	
1				
-	(11) WATER LEVEL: Completed w	ell.		
:	Depth at which water was first found	12		ft.
	Static level 12 ft. below land s	urface.	Date 7/	/29/79
ㅁ	Artesian pressure NONE lbs. per squar			
	(12) WELL LOG: Diameter of well b	elow cas	30 <sup>t</sup>	1
2	Depth drilled 165 ft. Depth of compl	eted wel	1 156	ft.
	Formation: Describe color, texture, grain size and show thickness and nature of each stratus with at least one entry for each change of format position of Static Water Level and indicate principles.	m and a tion. Rep	quifer pe	netrated,
	. MATERIAL	From	To	swL
	top soil	0	4	
ft_	fine sand	4	14	
ft.	tan claystone	14	24	
ft.	sand&sandstone	24	36	
-	gray clay	_36	40	
-	gray sandstone	40	54	
	green claystone	54	72	
	soft sandy claystone	72	100	
ft.	green sandstone	100	107	
ft.	hard cemented gravel	107	109	
- 1	soft sandstone gravel	109	116	
	hard sandy claystone	116	122	
	sandstone & gravel	122	124	
rs.	sandy claystone	124	129	
<u>"</u>	soft green sandstone	100	120	
"	&medium gravel	129	137	
ırs.	green sand & sandstone			
	green clay	150	165	
ft.	Work started 7/26 1979 Complete	d 7/2	8	1979
_	Date well drilling machine moved off of well	7/28		1979
	Drilling Machine Operator's Certification:			
ft.	This well was constructed under my Materials used and information reported best knowledge and belief	direct	super are true	vision. to my
ks	Signed (Drilling Mychine Querator)	Date?.	/30	, 19.7.2.
	Drilling Machine Operator's License No.	1035		
979 s	Water Well Contractor's Certification:		1.2	. છ
GON ft.	This well was drilled under my jurisdiction and this report is			
	Address P.O. BOX 294 BURNS		GON 9	7720

659 Date 7/30

Contractor's License No. ..

# STATE OF OREGON WATER SUPPLY WELL REPORT

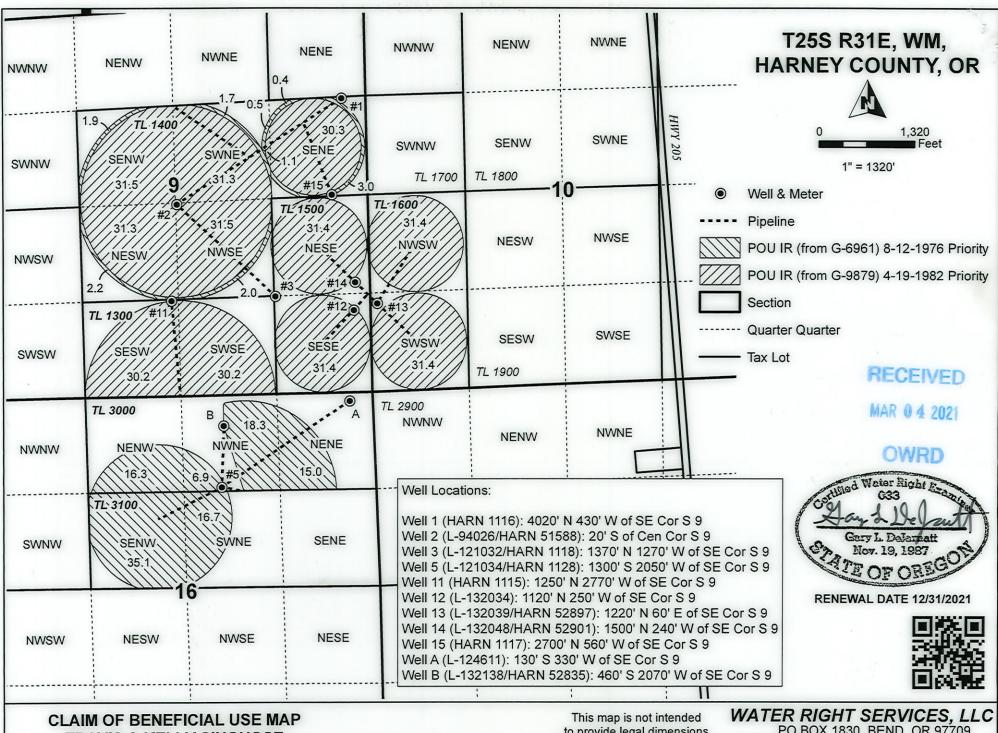
(as required by ORS 537.765)

WELL I.D. # L 124611 START CARD # 196485

Instructions for completing this report are on the last page of this form.			
(1) LANDOWNER Name Travis Sing Mose Well Number  Address 29327 Weavay Springs Rd  City Buyns State OR Zip 977 20	(9) LOCATION OF WELL (legal description)  County HO, YNCY  Tax Lot 3000 Lot  Township 25 5 No Sange 31 6 for W WM		
(2) TYPE OF WORK New Well  Conversion Abandonment Conversion	Section         NE         1/4         NE         1/4           Lat         _ ' _ " or		
(3) DRILL METHOD  ☐ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud ☐ Other	Street Address of Well (or nearest address) Dog Mountain Rd Buns On 47720		
(4) PROPOSED USE  Domestic Community Industrial Irrigation Thermal Injection Livestock Other	(10) STATIC WATER LEVEL  ft. below land surface.  Date  ft. below land surface.  Date		
(5) BORE HOLE CONSTRUCTION Special Construction:  Yes No Depth of Completed Well 6. Explosives used: Yes No Type Amount	Artesian pressure lb. per square inch lt. per square inch		
BORE HOLE  Diameter From To Material From To Sacks or Pounds  10" 0 60 Devember 0 60 5000 pts	Depth at which water was first found		
How was seal placed: Method ABBCDDE	(12) WELL LOG Ground Elevation		
Backfill placed from	Material From To SWL		
(6) CASING/LINER  Diameter From To Gauge Steel Plastic Welded Threaded  Casing: 12 +1 300 023	Sandy gray clay 60 300		
Drive Shoe used Inside Outside None	JAN 2 5 2021 RECEIVED		
Final location of shoe(s) 300 feek  (7) PERFORATIONS/SCREENS Method 1000	OWRD		
Screens Type Material	Date Started 8/22/2017 Completed 9/15/2017		
From To Slot Number Diameter Tele/pipe Casing Liner  240 300 VB 1,440 12	(unbonded) Water Well Constructor Certification 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.		
(8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian	WWC Number Date		
Vield gal/min Drawdown Drill stem at 24 hvs	(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.		
Temperature of water Depth Artesian Flow Found Was a water analysis done?	and belief.  WWC Number 5 57  Signed The March 1721/2		

WELL I.D. LABEL# I STATE OF OREGON START CARD# WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) **ORIGINAL LOG#** (1) LAND OWNER HARN 52835 Last Name Singhose First Name (9) LOCATION OF WELL (legal description)

County The Ray Two 25 No Range 30 Company\_ NR 1/4 of the NW 1/4 Tax Lot 3000 Tax Map Number New Well (2) TYPE OF WORK DMS or DD Lat Alteration (complete 2a & 10) Abandonment(complete 5a) " or DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address Casing: DOY Mt. From (10) STATIC WATER LEVEL (3) DRILL METHOD Date Rotary Air Rotary Mud Cable Auger Cable Mud Existing Well / Pre-Alteration Reverse Rotary Other Completed Well (4) PROPOSED USE Domestic Inrigation Community Flowing Artesian? Dry Hole? Industrial/ Commericial Livestock Dewatering Depth water was first found WATER BEARING ZONES Thermal Injection Other Est Flow SWL(psi) + SWL(ft) SWL Date From To (5) BORE HOLE CONSTRUCTION Special Standard 250 40 250 4 Pain Depth of Completed Well \_250 ft. BORE HOLE SEAL From Material From Bentinite 30 Calculated 12 (11) WELL LOG Calculated Ground Elevation How was seal placed: Method A B C From Other PUIRED DRY. Backfill placed from \_ \_\_ ft. to \_\_\_ \_ ft. Material CREY Clay Filter pack from \_ ft. to ft. Material Explosives used: Yes Type\_ Amount (5a) ABANDONMENT USING UNHYDRATED BENTONITE **Pounds** Proposed Amount **Actual Amount** (6) CASING/LINER Dia To Gauge Stl Plstc From RECEIVED OCT. 2 1 2019 MAR 0 4 2021 OWRD Shoe Inside Outside Other Location of shoe(s) Temp casing Yes (7) PERFORATIONS/SCREENS FACTURY Perforations Method\_ 14 Completed 10 Screens Type Material Date Started Scm/slot Perf/S Casing Screen # of Tele/ Slot (unbonded) Water Well Constructor Certification width 3/16 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 (8) WELL TESTS: Minimum testing time is 1 hour Signed Flowing Artesian , O Air (X) Bailer ield gal/min Drawdown Drill stem/Pump depth Duration (hr) (bonded) Water Well Constructor Certification Same 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 52 °F Lab analysis Yes By-Water quality concerns? Yes (describe below) TDS amount Signed Contact Info (optional)



TRAVIS & KELLY SINGHOSE

T-12819

Date: 2/10/2021

Project #20080

to provide legal dimensions or locations of property ownership lines.

PO BOX 1830, BEND, OR 97709 WWW.OREGONWATER.US CCB # 197121 iohnshort@usa.com 541-389-2837