



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. Salem, OR
- 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](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-17647**  
 Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

**(For Staff Use Only)**

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

___ Application fee not enclosed/insufficient	___ Map not included or incomplete
___ Land Use Form not enclosed or incomplete	___ 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. Received by OWRD**

- N/A If **more than three** permits are involved, separate maps for each permit. MAY 03 2021
- Permanent quality printed with dark ink on good quality paper. Salem, OR
- 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 = <u>1 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	\$0
3	Number of permits included in Permit Amendment <u>1 (3a)</u> Subtract 1 from the number in 3a: <u>0 (3b)</u> <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 » » » » » » » » » » <b>Permit Amendment Fee:</b>	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:

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

## Part 4 of 5 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>Otley Bros., Inc.</b>		PHONE NO. <b>541-493-2702</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>40926 S Diamond Ln</b>			FAX NO.
CITY <b>Diamond</b>	STATE <b>OR</b>	ZIP <b>97722</b>	E-MAIL
<b>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.</b>			

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

AGENT/BUSINESS NAME <b>John A. Short / Water Right Services, LLC</b>		PHONE NO. <b>541-389-2837</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>PO Box 1830</b>			FAX NO.
CITY <b>Bend</b>	STATE <b>OR</b>	ZIP <b>97709</b>	E-MAIL <b>johnshort@usa.com</b>
<b>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.</b>			

Explain in your own words what you propose to accomplish with this permit amendment; and why:  
**Add new wells to the permit.**

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:

N/A A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**

N/A 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)? **8-30-2021**

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

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By my signature below, I confirm that I understand:

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



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

<u>Fred I. Otley for Otley Bros. Inc. President</u> Applicant Signature	<u>Fred I. Otley</u> Print Name (and Title if applicable)	<u>3/1/2021</u> Date
_____	<u>Fred I. Otley</u> Print Name (and Title if applicable)	_____

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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 <b>N/A</b>	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 <b>N/A</b>	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 <b>Harney County Planning Department</b>	ADDRESS <b>360 N Alvord Ave</b>	
CITY <b>Burns</b>	STATE <b>OR</b>	ZIP <b>97720</b>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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## Part 5 of 5 – Water Use Permit Information

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

### PERMIT # G-17647

**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)
#1 (WELL BV1)	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	L-55909 LOG NOT FOUND	29	S	31	E	9	SE	NW	TL 200	1828' S, 1429' E of NW Cor Sec 9
#2 (WELL BV2)	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51892/ L-109045	29	S	31	E	9	SE	NW	TL 200	1657' S, 1608' E of NW Cor Sec 9
#3 (WELL BV3)	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51895/ L-109043	29	S	31	E	9	NW	NW	TL 200	805' S, 891' E of NW Cor Sec 9
#4 (WELL BV4)	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51894/ L-109042	29	S	31	E	9	SE	NW	TL 200	2271' S, 2184' E of NW Cor Sec 9
#5 (WELL BV5)	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		29	S	31	E	9	NE	SE	TL 200	3920' S, 4937' E of NW Cor Sec 9
#6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52808/ L-134205	29	S	31	E	9	NE	SE	TL 200	3320' S, 5280' E of NW Cor Sec 9
#7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52101 & 52885/ L-115029	29	S	31	E	8	NE	SE	TL 101	2770' S, 230' W of NW Cor Sec 9
#8	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52802/ L-134204	29	S	31	E	9	NW	NE	TL 200	460' S, 3930' E of NW Cor Sec 9
#9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52801/ L-134203	29	S	31	E	9	NW	NE	TL 200	1050' S, 3270' E of NW Cor Sec 9
#10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52616/ L-123042	29	S	31	E	9	NW	SE	TL 200	3180' S, 3900' E of NW Cor Sec 9

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

- |   |  |
|---|--|
| <input type="checkbox"/> Place of Use (POU)                   | <input type="checkbox"/> Point of Appropriation/Well (POA)                   |
| <input type="checkbox"/> Point of Diversion (POD)             | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Surface water POD to Ground Water POA (SW/GW)       |

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

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

For a change in place of use:

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

Yes  No

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

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

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

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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-17647**

List the change proposed for the acreage in each ¼ ¼. 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 List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.													
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date				
<b>EXAMPLE</b>																								
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	S	9	E	15	NW	NW	100	1	10.0	POD #5	
"	"	"	"	"	"	"	"	"	EXAMPLE	"		"	2	S	9	E	15	SW	NW	200		5.0	POD #6	
												APOA	29	S	31	E	8	NE	NE	101		26.0	#1-10	8-11-2015
													"	"	"	"	"	SE	NE	101		37.0	"	"
													"	"	"	"	"	NE	SE	101		16.0	"	"
													"	"	"	"	"	NW	SE	101		9.0	"	"
													"	"	"	"	9	SW	NE	200		21.0	"	"
													"	"	"	"	"	NE	NW	200		35.0	"	"
													"	"	"	"	"	NW	NW	200		40.0	"	"
													"	"	"	"	"	SW	NW	101		40.0	"	"
													"	"	"	"	"	SE	NW	200		35.0	"	"
													"	"	"	"	"	NE	SW	200		39.0	"	"


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

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

 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](http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx))

**AND/OR**

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

**Table 3. Construction of Point(s) of Appropriation**

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-_____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
1	Yes	L-55909 (LOG NOT FOUND)	200'	8"	+2-40'	0-20'		27'	Clay, Sand, Pumice	
2	Yes	L-109045	200'	14"	+2-40'	0-20'		27'	Clay, Sand, Pumice	
3	Yes	L-109043	250'	14"	+2-60'	0-20'		35'	Clay, Sand, Pumice	
4	Yes	L-109042	210'	14"	+2-40'	0-40'		29'	Clay, Sand, Pumice	
5	No		220'	10"	+2-18'	0-18'		71'	Clay, Pumice	

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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
6	Yes	L-134205	220'	10"	+2-18'	0-18'		71'	Clay, Pumice	
7	Yes	L-115029	310'	8" & 6"	2-40', 10-310'	0-18'		35'	Clay, Sand	
8	Yes	L-134204	340'	8"	+2-99'	0-40'		33'	Brown Sandy Clay	
9	Yes	L-134203	146'	6"	+1-140'	0-95', 140-145'		59'	Grey Sandstone, Grey Rock	
10	Yes	L-123042	314'	12'	+3-78'	0-45'		39'	Light Brown Sandstone	

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**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_  
 First Name MARY Last Name OTLEY  
 Company \_\_\_\_\_  
 Address 40926 S DIAMOND LANE  
 City DIAMOND State OR Zip 97722

**(2) TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

**(2a) PRE-ALTERATION**  
 Dia + From To Gauge Stl Plstc Wld Thrd  
 Casing: \_\_\_\_\_  
 Material From To Amt sacks/lbs  
 Seal: \_\_\_\_\_

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

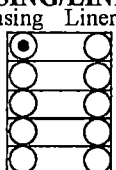
**(4) PROPOSED USE**  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard  (Attach copy)  
 Depth of Completed Well 250.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	Amt lbs
18	0	20	Bentonite Chips	0	20	24 S
14	20	60				
12	60	250				

How was seal placed: Method  A  B  C  D  E  
 Other **POURED & TAMPED**  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
 Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**  
 Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

**(6) CASING/LINER**  
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd  
  
 Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_  
 Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_  
 Perf/ Casing/ Screen Screen Liner Dia From To Scrm/slot width length # of slots Tele/ pipe size  


**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min 300 Drawdown \_\_\_\_\_ Drill stem/Pump depth 240 Duration (hr) \_\_\_\_\_  
 Temperature 60 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount \_\_\_\_\_  

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**  
 County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM  
 Sec 9 NW 1/4 of the NW 1/4 Tax Lot 200  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address

BUENA VISTA  
HWY 205

**(10) STATIC WATER LEVEL**  
 Date SWL(psi) + SWL(ft)  
 Existing Well / Pre-Alteration \_\_\_\_\_  
 Completed Well 10/13/2012 \_\_\_\_\_ 35  
 Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 35.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
10/13/2012	35	215	300		35

**(11) WELL LOG** Ground Elevation \_\_\_\_\_

Material	From	To
Topsoil sandy loam	0	3
sand medium	3	8
clay yellow	8	22
sand cemented <b>Received by OWRD</b>	22	48
pumice	48	69
sand cemented	69	80
pumice and claystone <b>MAY 03 2021</b>	80	95
claystone brown	95	118
claystone yellow	118	127
claystone brown <b>Salem, OR</b>	127	136
claystone green blue	136	157
clay blue	157	210
claystone pumice conglomerent	210	215
clay blue	215	250

Date Started 10/8/2012 Complete 10/13/2012

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

**(bonded) Water Well Constructor Certification**  
 I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
 License Number 1424 Date 11/5/2012  
 Signed TIMOTHY K RILEY (E-filed)  
 Contact Info (optional) \_\_\_\_\_

11/5/2012

**(1) LAND OWNER**

Owner Well I.D. \_\_\_\_\_  
 First Name MARY Last Name OTLEY  
 Company \_\_\_\_\_  
 Address 40926 S DIAMOND LANE  
 City DIAMOND State OR Zip 97722

**(2) TYPE OF WORK**

New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

**(2a) PRE-ALTERATION**

Casing: Dia + From To Gauge Stl Plstc Wld Thrld  
 Material From To Amt sacks/lbs  
 Seal: \_\_\_\_\_

**(3) DRILL METHOD**

Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

**(4) PROPOSED USE**

Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION**

Special Standard  (Attach copy)

Depth of Completed Well 210.00 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
18	0	40	Bentonite Chips	0	40	40	S
12	40	210					

How was seal placed: Method  A  B  C  D  E

Other **POURED & TAMPED**

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

**(6) CASING/LINER**

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrld
<input checked="" type="checkbox"/>	<input type="checkbox"/>	14	<input checked="" type="checkbox"/>	2	40	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_

Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**

Perforations Method \_\_\_\_\_

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/ Casing/ Screen Screen Liner Dia From To Scrn/slot width length Slot # of slots Tele/ pipe size

Perf/ Screen	Casing/ Liner	Dia	From	To	Scrn/slot width	length	Slot slots	Tele/ pipe size

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min \_\_\_\_\_ Drawdown \_\_\_\_\_ Drill stem/Pump depth \_\_\_\_\_ Duration (hr) \_\_\_\_\_

600		200	
-----	--	-----	--

Temperature 60 °F Lab analysis  Yes By \_\_\_\_\_

Water quality concerns?  Yes (describe below) TDS amount \_\_\_\_\_

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**

County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM  
 Sec 9 SE 1/4 of the NW 1/4 Tax Lot 200  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address

BUENA VISTA  
HWY 205

**(10) STATIC WATER LEVEL**

	Date	SWL(psi)	+ SWL(ft)
Existing Well / Pre-Alteration			
Completed Well	10/8/2012		29

Flowing Artesian?  Dry Hole?

**WATER BEARING ZONES**

Depth water was first found 29.00

SWL Date From To Est Flow SWL(psi) + SWL(ft)

10/8/2012	29	210	600		29
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**(11) WELL LOG**

Ground Elevation \_\_\_\_\_

Material	From	To
topsoil sandy loam	0	3
sand medium	3	8
sand cemented	8	48
sandstone brown	48	54
rock grey green	54	63
rock grey	63	86
sandstone tan green grey	86	105
pumice grey	105	117
claystone yellow pumice grey	117	123
claystone brown	123	127
pumice claystone	127	141
claystone yellow	141	145
claystone brown	145	147
claystone yellow	147	153
pumice claystone	153	167
clay blue	167	172
claystone grey	172	208
claystone blue	208	210

Date Started 10/2/2012 Complete 10/8/2012

**(unbonded) Water Well Constructor Certification**

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_

**(bonded) Water Well Constructor Certification**

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

License Number 1424 Date 11/5/2012

Signed TIMOTHY K RILEY (E-filed)

Contact Info (optional) \_\_\_\_\_

**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_  
 First Name FRED Last Name OTLEY  
 Company \_\_\_\_\_  
 Address HC 72 BOX 30  
 City DIAMOND State OR Zip 97722

**(2) TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

**(2a) PRE-ALTERATION**  
 Dia + From To Gauge Stl Plstc Wld Thrd  
 Casing: \_\_\_\_\_  
 Material From To Amt sacks/lbs  
 Seal: \_\_\_\_\_

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

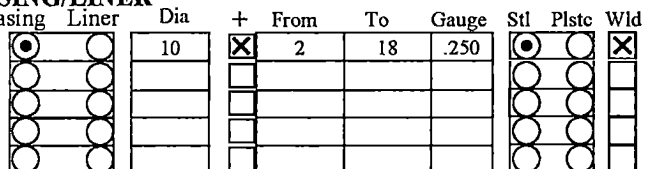
**(4) PROPOSED USE**  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard  (Attach copy)  
 Depth of Completed Well 220.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	Amt lbs
14	0	18	Bentonite	0	18	13 S
10	18	220	Calculated		12.2	
			Calculated			

How was seal placed: Method  A  B  C  D  E  
 Other POURED & TAGGED  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
 Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**  
 Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

**(6) CASING/LINER**  
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd  
  
 Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_  
 Temp casing  Yes Dia \_\_\_\_\_ From + \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_  

Perf/ Screen	Casing/ Screen	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
100		220	2

  
 Temperature 54 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount 295 ppm  

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**  
 County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM  
 Sec 9 NW 1/4 of the NE 1/4 Tax Lot 200  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address

BUEANA VISTA AND HWY 205

**(10) STATIC WATER LEVEL**  

	Date	SWL(psi)	+ SWL(ft)
Existing Well / Pre-Alteration			
Completed Well	<u>7/11/2019</u>		<u>71</u>

  
 Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found \_\_\_\_\_

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
<u>7/11/2019</u>	<u>73</u>	<u>160</u>	<u>100</u>		<u>71</u>

**(11) WELL LOG** Ground Elevation \_\_\_\_\_

Material	From	To
grey white speck sandstone	0	73
yellow clay in strips of pumice	73	160
blue green clay	160	220
Received by OWRD		
MAY 03 2021		
Salem, OR		

Date Started 7/8/2019 Completed 7/11/2019

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

**(bonded) Water Well Constructor Certification**  
 I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
 License Number 1899 Date 7/23/2019  
 Signed SAM KINGREY (E-filed)  
 Contact Info (optional) \_\_\_\_\_



8/26/2014

**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_  
 First Name MARY Last Name OTLEY  
 Company \_\_\_\_\_  
 Address 40926 S DIAMOND LANE  
 City DIAMOND State OR Zip 97722

**(2) TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

**(2a) PRE-ALTERATION**  
 Dia + From To Gauge Stl Plstc Wld Thrld  
 Casing:          
 Material From To Amt sacks/lbs  
 Seal:

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

**(4) PROPOSED USE**  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard  (Attach copy)  
 Depth of Completed Well 310.00 ft.  
 BORE HOLE SEAL sacks/lbs  

Dia	From	To	Material	From	To	Amt	lbs
12	0	18	Bentonite Chips	0	18	20	S
8	18	310					

How was seal placed: Method  A  B  C  D  E  
 Other **POURED & TAMPED**  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
 Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**  
 Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

**(6) CASING/LINER**  

Casing	Liner	Dia	+ From	To	Gauge	Stl	Plstc	Wld	Thrld
<input checked="" type="checkbox"/>	<input type="checkbox"/>	8	<input checked="" type="checkbox"/>	2	40	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

  
 Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_  
 Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_  

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
25		310	1

  
 Temperature 59 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount \_\_\_\_\_  

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**  
 County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM  
 Sec 8 SW 1/4 of the SW 1/4 Tax Lot 101  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or 43.0663 DMS or DD  
 Long \_\_\_\_\_ " or -118.8985 DMS or DD  
 Street address of well  Nearest address

BUENA VISTA HWY 205

**(10) STATIC WATER LEVEL**  

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	8/18/2014		35

  
 Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 35.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
8/18/2014	35	310	25		35

**(11) WELL LOG** Ground Elevation \_\_\_\_\_

Material	From	To
TOPSOIL - SANDY LOAM	0	1
CLAY - YELLOW	1	29
CLAY - GREEN	29	37
CLAY - BLUE	37	90
CLAY - GRAY	90	170
CLAYSTONE	170	190
CLAY - GREEN	190	265
SANDSTONE - BROWN	265	280
CLAY - GRAY	280	287
CLAYSTONE - BLUE	287	310

Received by OWRL  
 MAY 03 2021  
 Salem, OR

Date Started 8/15/2014 Complete 8/18/2014

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

**(bonded) Water Well Constructor Certification**  
 I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
 License Number 1424 Date 8/26/2014  
 Signed TIMOTHY K RILEY (E-filed)  
 Contact Info (optional) TIMOTHY RILEY 541-573-5695





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

HARN 52802

7/10/2019

WELL I.D. LABEL# L134204
START CARD # 1043529
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D.
First Name FRED Last Name OTLEY
Company
Address HC72 BOX 30
City DIAMOND State OR Zip 97722

(2) TYPE OF WORK
New Well Deepening Conversion
Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: Material From To Amt sacks/lbs
Seal:

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

(4) PROPOSED USE
Domestic Irrigation Community
Industrial/ Commercial Livestock Dewatering
Thermal Injection Other

(5) BORE HOLE CONSTRUCTION
Special Standard (Attach copy)
Depth of Completed Well 340.00 ft.
BORE HOLE SEAL sacks/ lbs
Dia From To Material From To Amt lbs

How was seal placed: Method A B C D E
Other POURED & TAGGED
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe Inside Outside Other Location of shoe(s) 99
Temp casing Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/ Screen Screen Liner Dia From To Scrm/slot width length Slot # of slots Tele/ pipe size

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

Temperature 55 °F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 185 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM
Sec 9 NW 1/4 of the NE 1/4 Tax Lot 200
Tax Map Number Lot
Lat 0 0 0 " or 43.07226900 DMS or DD
Long 0 0 0 " or -118.88294200 DMS or DD
Street address of well Nearest address
BUENA VISTA AND HWY 205

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 7/5/2019 33
Flowing Artesian? Dry Hole?

WATER BEARING ZONES
Depth water was first found 105.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
7/5/2019 105 340 5 33

(11) WELL LOG
Ground Elevation
Material From To
brown sand 0 5
brown sandy clay 5 15
brown sandy clay & gravel 15 19
brown sandy clay 19 35
sticky brown clay 35 67
brown clay 67 94
blue & grey clay 94 125
grey clay 125 150
blue & green strips of clay 150 210
blue & grey with hard strips 210 220
grey clay 220 235
grey clay with hard strips 235 245
sticky grey brown clay 245 250
grey clay with hard strips 250 270
green sticky clay 270 340

Date Started 7/3/2019 Completed 7/5/2019

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number 1896 Date 7/10/2019
Signed TONY HACKETT (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 1899 Date 7/10/2019
Signed SAM KINGREY (E-filed)
Contact Info (optional)

7/10/2019

**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_  
 First Name FRED Last Name OTLEY  
 Company \_\_\_\_\_  
 Address HC 72 BOX 30  
 City DIAMOND State OR Zip 97722

**(2) TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

**(2a) PRE-ALTERATION**  
 Dia + From To Gauge Stl Plstc Wld Thrld  
 Casing: \_\_\_\_\_  
 Material From To Amt sacks/lbs  
 Seal: \_\_\_\_\_

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

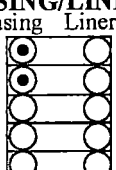
**(4) PROPOSED USE**  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard  (Attach copy)  
 Depth of Completed Well 140.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	Amt
10	0	146	Bentonite	0	95	44 S
						Calculated 43.36
			Bentonite	140	145	4 S
						Calculated 3.95

How was seal placed: Method  A  B  C  D  E  
 Other **POURED & TAGGED**  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Filter pack from 95 ft. to 140 ft. Material SILICA SAND Size 6/9  
 Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**  
 Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

**(6) CASING/LINER**  
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld  
  
 Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_  
 Temp casing  Yes Dia \_\_\_\_\_ From + \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
 Perforations Method \_\_\_\_\_  
 Screens Type factory slotted Material PVC  

Perf/ Screen	Casing/ Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Teel/ pipe size
Screen	Casing	6	100	140	.02			6

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
70		140	1

Temperature 54 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount 189 ppm  
 From \_\_\_\_\_ To \_\_\_\_\_ Description \_\_\_\_\_ Amount \_\_\_\_\_ Units \_\_\_\_\_

**(9) LOCATION OF WELL (legal description)**  
 County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM  
 Sec 9 NW 1/4 of the NE 1/4 Tax Lot 200  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or 43.07090100 DMS or DD  
 Long \_\_\_\_\_ " or -118.88548500 DMS or DD  
 Street address of well  Nearest address  
BUENA VISTA AND HWY 205

**(10) STATIC WATER LEVEL**  

Existing Well / Pre-Alteration	Date	SWL (psi)	+ SWL (ft)
Completed Well	7/1/2019		59

 Flowing Artesian?  Dry Hole?   
 WATER BEARING ZONES Depth water was first found 100.00  

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
7/1/2019	100	140	20		59

**(11) WELL LOG** Ground Elevation \_\_\_\_\_  

Material	From	To
topsoil sand brown	0	2
grey sandstone grey rock	2	76
grey crumbley rock	76	95
yellow clay with rock strip	95	140
blue clay	140	146

Received by OWRD

MAY 03 2021

Salem, OR

Date Started 7/1/2019 Completed 7/1/2019  
**(unbonded) Water Well Constructor Certification**  
 I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
 License Number 1896 Date 7/2/2019  
 Signed TONY HACKETT (E-filed)

**(bonded) Water Well Constructor Certification**  
 I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
 License Number 1899 Date 7/2/2019  
 Signed SAM KINGREY (E-filed)  
 Contact Info (optional) \_\_\_\_\_

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

HARN 52616

WELL I.D. LABEL# L 123042
START CARD # 1032379
ORIGINAL LOG #

1/3/2017

(1) LAND OWNER
Owner Well I.D.
First Name FRED Last Name OTLEY
Company
Address HC 72 BOX 30
City DIAMOND State OR Zip 97722

(2) TYPE OF WORK
New Well Deepening Conversion
Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thr
Seal: Material From To Amt sacks/lbs

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

(4) PROPOSED USE
Domestic Irrigation Community
Industrial/ Commercial Livestock Dewatering
Thermal Injection Other OBSERVATION/TEST WELL

(5) BORE HOLE CONSTRUCTION
Special Standard (Attach copy)
Depth of Completed Well 314.00 ft.
BORE HOLE SEAL sacks/lbs
Dia From To Material From To Amt lbs

How was seal placed: Method A B C D E
Other POURED & TAGGED
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thr
Shoe Inside Outside Other Location of shoe(s) 78
Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/ Screen Scm/slot Slot # of Tel/
Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
Temperature 57 F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 178 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM
Sec 9 NW 1/4 of the SE 1/4 Tax Lot 0200
Tax Map Number Lot
Lat ' ' ' or 43.06511000 DMS or DD
Long ' ' ' or -118.88320000 DMS or DD
Street address of well Nearest address
MM 39.5 ON HWY 205 WEST SIDE APPROX. 1 MILE OFF HWY.

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 12/5/2016 39
Flowing Artesian? Dry Hole?

WATER BEARING ZONES
Depth water was first found 127.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
12/5/2016 127 314 200 39

(11) WELL LOG
Ground Elevation 4118.00
Material From To
brown sandy clay 0 3
brown sand cement 3 19
dark brown clay with pumice 19 30
light brown sandstone 30 80
grey pumicestone 80 107
grey sandstone 107 127
brown sandstone, pumice 127 157
grey sandstone with pumice 157 177
yellow brown sandstone with pumice 177 192
olive coloured sandstone 192 202
olive grey sandstone 202 210
olive grey clay Received by OWRD 210 220
olive grey clay soft 220 259
olive grey clay sticky 259 314
MAY 03 2021
Salem, OR

Date Started 9/26/2016 Completed 12/5/2016

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number 1896 Date 12/15/2016
Signed TONY HACKETT (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 1899 Date 1/3/2017
Signed SAM P KINGREY (E-filed)
Contact Info (optional)

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

HARN 52617

WELL I.D. LABEL# L 123044  
START CARD # 1032848  
ORIGINAL LOG #

1/3/2017

(1) LAND OWNER

Owner Well I.D. \_\_\_\_\_  
First Name FRED Last Name OTLEY  
Company \_\_\_\_\_  
Address HC 72 BOX 30  
City DIAMOND State OR Zip 97722

(2) TYPE OF WORK

New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrld  
Material From To Amt sacks/lbs  
Seal: \_\_\_\_\_

(3) DRILL METHOD

Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

(4) PROPOSED USE

Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other OBSERVATION/TESTWELL

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 902.00 ft. Special Standard  (Attach copy)

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
16	0	45	Bentonite	0	45	37 S
12	45	805	Calculated			35.47
8	805	902	Calculated			

How was seal placed: Method  A  B  C  D  E

Other POURED & TAGGED

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrld
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	<input checked="" type="checkbox"/>	2.5	113	.250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Shoe  Inside  Outside  Other Location of shoe(s) 113

Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS

Perforations Method \_\_\_\_\_

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/ Casing/ Screen \_\_\_\_\_ Serp/slot Slot # of Tele/  
Screen Liner Dia From To width length slots pipe size

Perf/ Screen	Casing/ Liner	Dia	From	To	width	length	slots	Tele/ pipe size

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
300	171	200	4

Temperature 60 °F Lab analysis  Yes By \_\_\_\_\_

Water quality concerns?  Yes (describe below) TDS amount 167 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM  
Sec 9 NW 1/4 of the SE 1/4 Tax Lot 0200  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or 43.06425800 DMS or DD  
Long \_\_\_\_\_ " or -118.88666600 DMS or DD  
 Street address of well  Nearest address

BUENA VISTA & HWY 205

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	12/10/2016			29

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES

Depth water was first found 120.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
12/10/2016	120	902	300			29

(11) WELL LOG

Ground Elevation \_\_\_\_\_

Material	From	To
brown sand	0	3
brown white dry clay	3	13
brown & grey clay	13	35
brown clay	35	65
green clay	65	120
olive green clay with cracks	120	180
brown clay with cracks	180	205
black & brown clay	205	235
green clay	235	277
green clay soft	277	280
green grey clay	280	327
green clay	327	411
green & grey clay	411	482
green clay	482	551
grey clay	551	640
green clay	640	721
grey clay	721	745
green clay	745	824
green & grey clay	824	902

Date Started 11/3/2016

Completed 12/10/2016

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 1896 Date 12/29/2016

Signed TONY HACKETT (E-filed)

(bonded) Water Well Constructor Certification

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

License Number 1899 Date 12/29/2016

Signed SAM P KINGREY (E-filed)

Contact Info (optional) \_\_\_\_\_





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

HARN 52616

WELL I.D. LABEL# L 123042 START CARD # 1032379 ORIGINAL LOG #

1/3/2017

(1) LAND OWNER Owner Well I.D. First Name FRED Last Name OTLEY Company Address HC 72 BOX 30 City DIAMOND State OR Zip 97722

(2) TYPE OF WORK [X] New Well [ ] Deepening [ ] Conversion [ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)

(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrld Casing: Seal:

(3) DRILL METHOD [X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud [ ] Reverse Rotary [ ] Other

(4) PROPOSED USE [ ] Domestic [ ] Irrigation [ ] Community [ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering [ ] Thermal [ ] Injection [X] Other OBSERVATION/TEST WELL

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) Depth of Completed Well 314.00 ft. BORE HOLE SEAL sacks/ Dia From To Material From To Amt lbs

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Rows include Bentonite and Calculated values.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E [X] Other POURED & TAGGED Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material Size Explosives used: [ ] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE Proposed Amount Actual Amount

(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 78 Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Perf/ Casing/ Screen Screen Liner Dia From To Scrm/slot width Slot length # of slots Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour [ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) Temperature 57 °F Lab analysis [ ] Yes By Water quality concerns? [ ] Yes (describe below) TDS amount 178 ppm From To Description Amount Units

(9) LOCATION OF WELL (legal description) County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM Sec 9 NW 1/4 of the SE 1/4 Tax Lot 0200 Tax Map Number Lot Lat Long Street address of well Nearest address MM 39.5 ON HWY 205 WEST SIDE APPROX. 1 MILE OFF HWY.

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Pre-Alteration Completed Well 12/5/2016 39 Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 127.00 SWL Date From To Est Flow SWL(psi) + SWL(ft) 12/5/2016 127 314 200 39

(11) WELL LOG Ground Elevation 4118.00 Material From To brown sandy clay 0 3 brown sand cement 3 19 dark brown clay with pumice 19 30 light brown sandstone 30 80 grey pumicestone 80 107 grey sandstone 107 127 brown sandstone, pumice 127 157 grey sandstone with pumice 157 177 yellow brown sandstone with pumice 177 192 olive colored sandstone 192 202 olive grey sandstone 202 210 olive grey clay 210 220 olive grey clay soft 220 259 olive grey clay sticky 259 314

Date Started 9/26/2016 Completed 12/5/2016

(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. License Number 1896 Date 12/15/2016 Signed TONY HACKETT (E-filed)

(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. License Number 1899 Date 1/3/2017 Signed SAMP KINGREY (E-filed) Contact Info (optional)

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

HARN 52617

WELL I.D. LABEL# L 123044
START CARD # 1032848
ORIGINAL LOG #

1/3/2017

(1) LAND OWNER
Owner Well I.D.
First Name FRED Last Name OTLEY
Company
Address HC 72 BOX 30
City DIAMOND State OR Zip 97722

(2) TYPE OF WORK
New Well [X] Deepening [ ] Conversion [ ]
Alteration (complete 2a & 10) [ ] Abandonment (complete 5a) [ ]

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thr
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD
Rotary Air [X] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud [ ]
Reverse Rotary [ ] Other [ ]

(4) PROPOSED USE
Domestic [ ] Irrigation [ ] Community [ ]
Industrial/ Commercial [ ] Livestock [ ] Dewatering [ ]
Thermal [ ] Injection [ ] Other [X] OBSERVATION/TESTWELL

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 902.00 ft.
Special Standard [ ] (Attach copy)
BORE HOLE SEAL
Dia From To Material From To Amt sacks/lbs

Table with columns: Dia, From, To, Material, From, To, Amt, sacks/lbs. Rows include Bentonite and Calculated values.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E [ ]
[X] Other POURED & TAGGED
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [ ] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thr
Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 113
Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/ Screen Screen Liner Dia From To Scrn/slot width Slot length # of slots # of Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump [X] Bailer [ ] Air [ ] Flowing Artesian [ ]
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
Temperature 60 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 167 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 29.00 S N/S Range 31.00 E E/W WM
Sec 9 NW 1/4 of the SE 1/4 Tax Lot 0200
Tax Map Number Lot
Lat " or 43.06425800 DMS or DD
Long " or -118.88666600 DMS or DD
Street address of well [ ] Nearest address [X]
BUENA VISTA & HWY 205

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 12/10/2016 29
Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES
Depth water was first found 120.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
Table with columns for SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft)

(11) WELL LOG
Ground Elevation
Material From To
brown sand 0 3
brown white dry clay 3 13
brown & grey clay 13 35
brown clay 35 65
green clay 65 120
olive green clay with cracks 120 180
brown clay with cracks 180 205
black & brown clay 205 235
green clay 235 277
green clay soft 277 280
green grey clay 280 327
green clay 327 411
green & grey clay 411 482
green clay 482 551
grey clay 551 640
green clay 640 721
grey clay 721 745
green clay 745 824
green & grey clay 824 902

Date Started 11/3/2016 Completed 12/10/2016

(unbonded) Water Well Constructor Certification
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License Number 1896 Date 12/29/2016
Signed TONY HACKETT (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 1899 Date 12/29/2016
Signed SAM P KINGREY (E-filed)
Contact Info (optional)