



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

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

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

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-18368
 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):

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Part _____ is incomplete
<input type="checkbox"/> Additional signature(s) required	
Other/Explanation _____	
Staff: _____ 503-986-0 _____	Date: ____/____/____

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

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

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- N/A If **more than three** permits are involved, separate maps for each permit.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- N/A Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches. **(NOT YET CONSTRUCTED)**
- 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</u> (2a) Subtract 1 from the number in line 2a = <u>0</u> (2b) <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	0
3	Number of permits included in Permit Amendment <u>1</u> (3a) Subtract 1 from the number in 3a: <u>1</u> (3b) <i>If only one permit this will be 0</i> Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » »	3	0
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input checked="" type="checkbox"/> Yes: enter \$410 »	4	\$410
5	Do you propose to change the place of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 » <input type="checkbox"/> Yes: enter the cfs for the portions of the permits to be amended (see example below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$350, then enter on line 5 » » » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$1,570
7	Is this permit amendment: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » Permit Amendment Fee:	8	\$1,570

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

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 Mike Becker/ Mike Becker General Contractor, Inc.		PHONE NO. 541-963-7096	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 1159			FAX NO.
CITY 97805	STATE OR	ZIP 97850	E-MAIL mbecker@mbeckergc.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME Paul Garvin/Garvin Hydrogeo L.L.C.		PHONE NO. 503-347-7188	ADDITIONAL CONTACT NO.
ADDRESS 1705 MAIN ST STE 101			FAX NO.
CITY Baker City	STATE OR	ZIP 97814	E-MAIL paul.f.garvin@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this permit amendment; and why:
 Last year the water user drilled a well on the eastern portion of the property (BAKE52742 aka Well 5) that did not yield the desired amount of water. In order to reach the permitted rate and increase system flexibility, the water user proposes to add 4 points of appropriation on the western side of the property.

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

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

Is the applicant the permit holder of record? Yes No

If NO, include either:

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

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

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

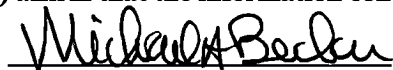
If NO, what are the completion dates of the permit(s)? 10/1/2028

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

By my signature below, I confirm that I understand:

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

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


Applicant Signature

Michael A. Becker
Print Name (and Title if applicable)

3/2/21
Date

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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-18368

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-)	Twp		Rng		Sec	1/4 1/4		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Section 8 Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	L-114087	7	S	39	E	8	SW	NW	800	2,580 ft S and 312 ft E from NW corner of Section 8
Section 17 Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	L-132703	7	S	39	E	17	NW	SE	800	1,439 ft N and 1,700 ft W from SE corner of Section 17
Well #5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	L-132717	7	S	39	E	9	SE	SE	800	646 ft N and 143 ft W from SE corner of Section 9
Well 1P	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NA	7	S	39	E	8	NW	NW	800	299 ft S and 503 ft E from NW corner of Section 8
Well 2P	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NA	7	S	39	E	8	NE	SW	800	2,603 ft N and 1,587 ft E from SW corner of Section 8
Well 3P	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NA	7	S	39	E	8	SE	SW	800	151 ft N and 1,650 ft E from SW corner of Section 8
Well 3P-Alt	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NA	7	S	39	E	17	NE	NW	800	53 ft S and 1,912 ft E from NW corner of Section 17

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

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

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

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

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For a change in place of use: N/A

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

Yes No

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

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

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-18368

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES 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	1/4	1/4	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	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date			
EXAMPLE																							
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	
											POA/APOA	7	S	39	E	4	SE	SW	800		17.25	S8 Well, S17 Well, Well # 5; Wells 1P,2P,3P and 3P-Alt	2/8/13
											APOA	7	S	39	E	4	SW	SE	800		37.4	S8 Well, S17 Well, Well # 5; Wells 1P,2P,3P and 3P-Alt	2/8/13
											APOA	7	S	39	E	8	NE	NW	800		25.6	S8 Well, S17 Well, Well # 5; Wells 1P,2P,3P and 3P-Alt	2/8/13
											APOA	7	S	39	E	8	NW	NW	800		24.7	S8 Well, S17 Well, Well # 5; Wells 1P,2P,3P and 3P-Alt	2/8/13
											APOA	7	S	39	E	8	SW	NW	800		29.6	S8 Well, S17 Well, Well # 5; Wells 1P,2P,3P and 3P-Alt	2/8/13
											APOA	7	S	39	E	8	SE	NW	800		30.9	S8 Well, S17 Well, Well # 5; Wells 1P,2P,3P and 3P-Alt	2/8/13
											APOA	7	S	39	E	8	NE	SW	800		37.1	S8 Well, S17 Well, Well # 5; Wells 1P,2P,3P and 3P-Alt	2/8/13
											APOA	7	S	39	E	8	SE	SW	800		36.4	S8 Well, S17 Well, Well # 5; Wells 1P,2P,3P and 3P-Alt	2/8/13


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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)

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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
Section 8 Well	Yes	L-114087	580'	10", 16"	0-135 250-530	0-135, 135-267	270-323, 385-526	+1.5' (artesian)	Sandstone/ basalt	Full permit rate/6
Section 17 Well	Yes	L-132703	640'	12", 16"	1.5-183, 165-407	0-30, 30-183	205-405	61'	granite	Full permit rate/6
Well #5	Yes	L-132717	808'	16"	1.5-149.5	0-4, 4-148	140-808	44'	granite	Full permit rate/6
Well 1P	No	N/A	600'	16"	0-100, 200-500	0-260	250-300, 350-500	Artesian?	Sandstone/ basalt	Full permit rate/6
Well 2P	No	N/A	600'	16"	0-100, 200-500	0-260	250-300, 350-500	Artesian?	Sandstone/ basalt	Full permit rate/6
Well 3P	No	N/A	600'	16"	0-100, 200-500	0-260	250-300, 350-500	Artesian?	Sandstone/ basalt	Full permit rate/6
Well 3P-Alt	No	N/A	600'	16"	0-100, 200-500	0-260	250-300, 350-500	Artesian?	Sandstone/ basalt	Full permit rate/6

Land Use Information Form



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

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NOTE TO APPLICANTS

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In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; **OR**
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and **all** of the following apply:
 - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; and
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

Land Use Information Form



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Applicant(s): Michael Becker

Mailing Address: 10406 McAlister Road

City: Lagrande

State: OR

Zip Code: 97850

Daytime Phone: 541-963-0626

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:	Proposed Land Use:
<u>See</u>	<u>Attached</u>	<u>Table</u>	_____	_____	_____	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	_____

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

Baker County

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water
 Water Right Transfer
 Permit Amendment or Ground Water Registration Modification
 Limited Water Use License
 Allocation of Conserved Water
 Exchange of Water

Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: _____ cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-Municipal Instream Other _____

Briefly describe:

The water user is not able to reach their desired flow rates from the current wells on Permit G-18368. This land use form will accompany a permit amendment in which four additional well locations are requested for Permit G-18368.

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s):
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	RECEIVED	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	MAR 19 2021	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	OWRD	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

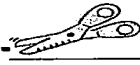
For property identified by the Baker County Planning Dept. as Tax Lot 800 on Map 07s39e. Zoned EFU. Farmland irrigation/farm use permitted outright per BCZO Section 410.03 (Exclusive Farm Use Zone - EFU).

Name: Eva Henes Title: Senior Planner

Signature: *Eva Henes* Phone: 541-523-8219 Date: 02/10/2021

Government Entity: Baker City-County Planning Department

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.



Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

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

BAKE 52657

WELL I.D. LABEL# L 132703
START CARD # 1042410
ORIGINAL LOG #

8/8/2019

(1) LAND OWNER Owner Well I.D.
First Name MIKE Last Name BECKER
Company
Address 10406 NMCALISTER ROAD
City LAGRANDE State OR Zip 97850

(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 Thrd
Casing: [] [] [] [] [] [] [] []
Material From To Amt sacks/lbs
Seal: [] [] [] [] [] [] [] []

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well 640.00 ft.
BORE HOLE SEAL sacks/ lbs
Dia From To Material From To Amt lbs
20 0 183 Bentonite 0 30 30 S
15 183 407 Calculated 30
10 407 640 Cement 30 183 115 S
Calculated 103

How was seal placed: Method [] A [X] B [] C [] D [] E
[] Other
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
[] [] 16 [X] 1.5 183 .375 [] [] [X] []
[] [] 12 [] 165 407 .250 [] [] [X] []
Shoe [] Inside [] Outside [] Other Location of shoe(s)
Temp casing [] Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method Holt perforator
Screens Type Material
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size
Perf Liner 12 205 405 .25 1 14000

(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)
1000 600 6
Temperature 58 F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount 52 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County BAKER Twp 7.00 S N/S Range 39.00 E E/W WM
Sec 17 NW 1/4 of the SE 1/4 Tax Lot 800
Tax Map Number Lot
Lat ' " or " DMS or DD
Long ' " or " DMS or DD
[] Street address of well [X] Nearest address
MAXWELL LANE HAINES OREGON

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration [] []
Completed Well 7/10/2019 [] 61
Flowing Artesian? [] Dry Hole? []
WATER BEARING ZONES Depth water was first found 30.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
6/5/2019 30 35 55 25
7/2/2019 250 620 1000 61

(11) WELL LOG Ground Elevation 3402.00
Material From To
Top soil 0 3
Tan clay and sand Hard 3 30
Tan sand and gravel med hard 30 35
Tan sand and clay hard 35 65
Decomposed tan granite med hard 65 143
Broken gray granite hard 143 151
Gray granite hard 151 250
Broken gray granite caving 250 325
Gray granite broken 325 620
Gray hard granite 620 640
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MAR 19 2021
OWRD
Date Started 4/12/2019 Completed 7/10/2019

(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 1606 Date 8/8/2019
Signed JOHN MARCIEL (E-filed)
Contact Info (optional)

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

BAKE 52742

WELL I.D. LABEL# L 132717
START CARD # 1047075
ORIGINAL LOG #

12/16/2020

(1) LAND OWNER Owner Well I.D. WELL 5
First Name MIKE Last Name BECKER
Company
Address NORTH OF MAXWELL LANE ON HWY 30 HAI
City LAGRANDE State OR Zip 97850

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

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well 808.00 ft.
BORE HOLE SEAL sacks/ lbs
Dia From To Material From To Amt lbs

How was seal placed: Method [] A [] B [] C [X] D [] E
[X] Other POUR IN DRY
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 Stil Plstc Wld Thrd
Shoe [X] Inside [] Outside [] Other Location of shoe(s) 423
Temp casing [] Yes Dia From + To

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

(9) LOCATION OF WELL (legal description)
County BAKER Twp 7.00 S N/S Range 39.00 E E/W WM
Sec 9 SE 1/4 of the SE 1/4 Tax Lot 800
Tax Map Number Lot
Lat " or " DMS or DD
Long " or " DMS or DD
[] Street address of well [X] Nearest address
NORTH OF MAXWELL LANE ON HWY 30 HAINES OREGON 1.5 MILES

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 10/20/2020 23
Flowing Artesian? [] Dry Hole? []
WATER BEARING ZONES Depth water was first found 172.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG Ground Elevation
Material From To
Top soil 0 2
Decomposed tan granite 2 25
Gay granite med hard 25 98
Greenish gray granite 98 103
Gray granite hard 103 105
Gray broken granite 105 118
Gray hard granite 118 120
Gray broken granite 120 125
Gray hard granite 125 172
Tan broken granite 172 180
Gray hard granite 180 270
Gray med hard granite 270 280
Gray hard granite 280 503
Gray broken granite/ tan seams clay 503 519
Gray broken granite 519 540
gray hard granite 540 592
Gray broken granite 592 599
Gray hard granite 599 610
Gray broken granite 610 647

Date Started 4/28/2020 Completed 10/20/2020

(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

(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 1606 Date 12/16/2020
Signed JOHN MARCIEL (E-filed)
Contact Info (optional)

WATER SUPPLY WELL REPORT - continuation page

BAKE 52742

WELL I.D. LABEL# L 132717

START CARD # 1047075

12/16/2020

ORIGINAL LOG #

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
					○ ○			
					○ ○			
					○ ○			
					○ ○			
					○ ○			
					○ ○			

Material	From	To	Amt	sacks/lbs

Water Quality Concerns

From	To	Description	Amount	Units

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amt	sacks/lbs
						Calculated	
						Calculated	
						Calculated	
						Calculated	

(10) STATIC WATER LEVEL

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

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			

(11) WELL LOG

Material	From	To
Gray hard granite	647	680
Gray broken granite	680	735
Gray hard granite	735	765
Gray broken med hard granite	765	778
Gray hard granite	778	808

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(7) PERFORATIONS/SCREENS

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

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

Comments/Remarks

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

WELL I.D. LABEL# 1114087
START CARD # 1026170
ORIGINAL LOG # BAKE 52368

5/22/2015

(1) LAND OWNER
Owner Well I.D.
First Name LARRY Last Name WAGMAN
Company
Address 64980 N POWDER RIVER LANE
City NORTH POWDER State OR Zip 97867

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

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: 8 257 531 188
Material From To Amt sacks/lbs

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

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

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 580.00 ft.
Special Standard [] (Attach copy)
BORE HOLE SEAL
Dia From To Material From To Amt sacks/lbs

How was seal placed: Method [] A [] B [] C [] D [] E []
Other []
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
10 250 530 250
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 Scm/slot Slot # of Tele/ width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump [] Bailer [] Air [x] Flowing Artesian []
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
800 570 1
Temperature 57 °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 BAKER Twp 7.00 S N/S Range 39.00 E E/W WM
Sec 8 SW 1/4 of the NW 1/4 Tax Lot 800
Tax Map Number Lot
Lat or DMS or DD
Long or DMS or DD
Street address of well Nearest address
2580 FT SOUTH AND 312 FT EAST OF NW CORNER SEC 8

(10) STATIC WATER LEVEL
Date SWL (psi) + SWL (ft)
Existing Well / Pre-Alteration 4/9/2015 2 [x] 2
Completed Well 4/21/2015 2 [x] 2
Flowing Artesian? [x] Dry Hole? []

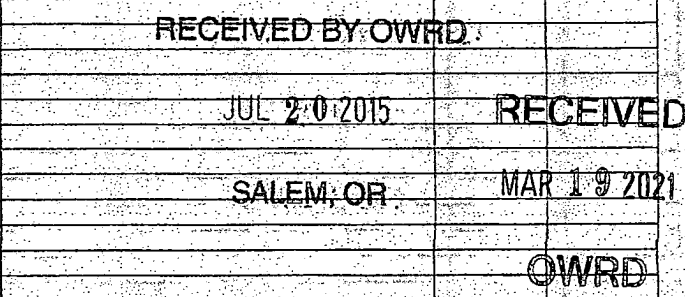
WATER BEARING ZONES
Depth water was first found 53.00
SWL Date From To Est Flow SWL (psi) + SWL (ft)
4/20/2015 385 580 800 2 [x] 2

(11) WELL LOG
Ground Elevation
Material From To
existing well 0 531
Black med hard fractured basalt 531 533
Black med hard broken basalt 533 568
Black med hard fractured basalt 568 580

Date Started 4/9/2015 Completed 4/21/2015

(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

(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 1606 Date 5/22/2015
Signed JOHN MARCIEL (E-filed)
Contact Info (optional)



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

WELL I.D. LABEL# L114087
START CARD # 1022834
ORIGINAL LOG #

9/22/2014

(1) LAND OWNER
Owner Well I.D.
First Name LARRY Last Name WOGMAN
Company
Address 64980 N POWDER RIVER LANE
City NORTH POWDER State OR Zip 97867

(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 Thrd
Casing:
Material From To Amt sacks/lbs
Seal:

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

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

(5) BORE HOLE CONSTRUCTION
Special Standard (Attach copy)
Depth of Completed Well 531.00 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, sacks/lbs. Rows show bore hole details for 20, 16, and 10 inch diameters.

How was seal placed: Method [] A [] B [X] C [] D [] E
[X] Other 12" SEAL PLACED, B
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 [X] Inside [] Outside [] Other Location of shoe(s) 267
Temp casing [X] Yes Dia 20 From 0 To 10

(7) PERFORATIONS/SCREENS
Perforations Method Holt perforator
Screens Type Material
Perf/ Casing/Screen Screen Liner 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)

Temperature 57 °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 BAKER Twp 7.00 S N/S Range 39.00 E E/W WM
Sec 8 SW 1/4 of the NW 1/4 Tax Lot 800
Tax Map Number Lot
Lat " or " DMS or DD
Long " or " DMS or DD
Street address of well Nearest address
2580 FT SOUTH AND 312 FT EAST OF NW CORNER SEC 8

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 7/22/2014 [X] 1.5
Flowing Artesian? [] Dry Hole? []

Table: WATER BEARING ZONES. Depth water was first found 53.00. Columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Rows show data for 3/25/2014 and 7/22/2014.

(11) WELL LOG
Ground Elevation
Material From To
Top soil brown 0 12
Tan clay stone and small sand 12 53
Tan sand and small gravel W/ clay seams 53 200
Gray sand stone hard 200 385
Gray broken sand stone soft 385 405
Black med hard broken basalt 405 430
Black med hard fractured basalt 430 531

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NOV 21 2016
RECEIVED
MAR 19 2021
SALEM, OR
OWRD

Date Started 4/17/2014 Complete 7/22/2014

(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 1606 Date 9/22/2014
Signed JOHN MARCIEL (E-filed)
Contact Info (optional)

