

# Checklist for Claims of Beneficial Use Received at CSG Counter

|                            |                             |
|----------------------------|-----------------------------|
| Application #              | WRD Reviewer <i>Cony M.</i> |
| Transfer # 12468           |                             |
| Date Received 5-28-2021    |                             |
| CWRE Name Scott Montgomery |                             |

**Priority Date:** 1977, 1974, 1958, 1974, 1981, 1978

## Fees Required:

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

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

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

## Map Review:

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

## Report Review:

- ☒ On form provided by the Department (OAR 690-014-0100(1))
- ☒ Application & permit #; or transfer # (OAR 690-014)
- ☒ Ownership information (OAR 690-014)
- ☒ Date of survey (OAR 690-014)
- ☒ Person interviewed (OAR 690-014)
- ☒ County (OAR 690-014)
- ☒ CWRE stamp and signature (OAR 690-014-0100)
- ☒ Signature(s) of all permittee of transfer holder (OAR 690-014-0100)

**MONEY SLIP**

DATE: \_\_\_\_\_ RECEIPT #: \_\_\_\_\_

RECEIVED FROM: \_\_\_\_\_ APPLICATION: \_\_\_\_\_  
PERMIT TRANSFER

CASH CHECK # OTHER (IDENTIFY) TOTAL REC'D \$

☐ ☐ ☐ ☐ ☐

1063 TREASURY 4178 MISC CASH ACCT.

0407 COPIES \$  
OTHER (IDENTIFY) \$

0243 Indiv. Lease 0244 Min. Water Right Plan 0245 Cons. Water

1063 TREASURY 4270 WRD OPERATING ACCT.

MISCELLANEOUS 4611

0407 COPY & TAPE FEES \$  
0410 RESEARCH FEES \$  
0408 MISC REVENUE (IDENTIFY) \$  
TC162 DEPOSIT LIND (IDENTIFY) \$  
0240 EXTENSION OF TIME \$

WATER RIGHTS EXAM FEE RECORD FEE

0201 SURFACE WATER \$ 0202 \$  
0203 GROUND WATER \$ 0204 \$  
0205 TRANSFER \$

WELL CONSTRUCTION EXAM FEE RECORD FEE

0218 WELL DRILL CONSTRUCTION \$ 0219 \$  
LANDOWNER'S PERMIT \$ 0220 \$  
OTHER (IDENTIFY) \$

0207 TREASURY 0407 HYDROELECTRIC

0223 POWER LICENSE FEE (FYVWRD) \$  
0231 HYDRO LICENSE FEE (FYVWRD) \$

HYDRO APPLICATION \$

SPECIAL INSTRUCTIONS:

Fill in App or Transfer Number

## Groundwater File Review: *MA*

Pump Test Required? YES NO Pump Test Submitted? YES NO\*

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



**ALL POINTS**  
**ENGINEERING & SURVEYING, INC.**  
P.O. Box 767 (CRR)  
Terrebonne, Oregon 97760

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## **TRANSMITTAL**

To: Oregon Water Resources Dept  
725 Summer St NE, Suite A  
Salem, OR 97301-1266

Date: 5/25/2021  
Attention: Certificates  
RE: Claim of Beneficial Use

☒ Prints ☐ Plans ☐ Plat ☐ Specifications.

Attached is a Claim of Beneficial Use & final proof map for T-12468 for Gillette Living Trust.

If you have any questions, please don't hesitate to call or email me.

| Copies | No. | Description                                    |
|--------|-----|------------------------------------------------|
| 1      | 1   | Claim of Beneficial Use (14 pages letter bond) |
| 1      | 2   | Final Proof Map (10 pages mylar)               |
| 1      | 3   | Well logs (3 pages letter bond)                |
| 1      | 4   | Photo's of POA & POU's (5 pages letter bond)   |
| 1      | 5   | Aerial imagery (1 page letter bond)            |

Signed: \_\_\_\_\_

A handwritten signature in blue ink, appearing to read "Dennis Moulton", written over a horizontal line.

# CLAIM OF BENEFICIAL USE MAP

TO CHANGE PLACE OF USE AND  
CHANGE POINT OF APPROPRIATION PER

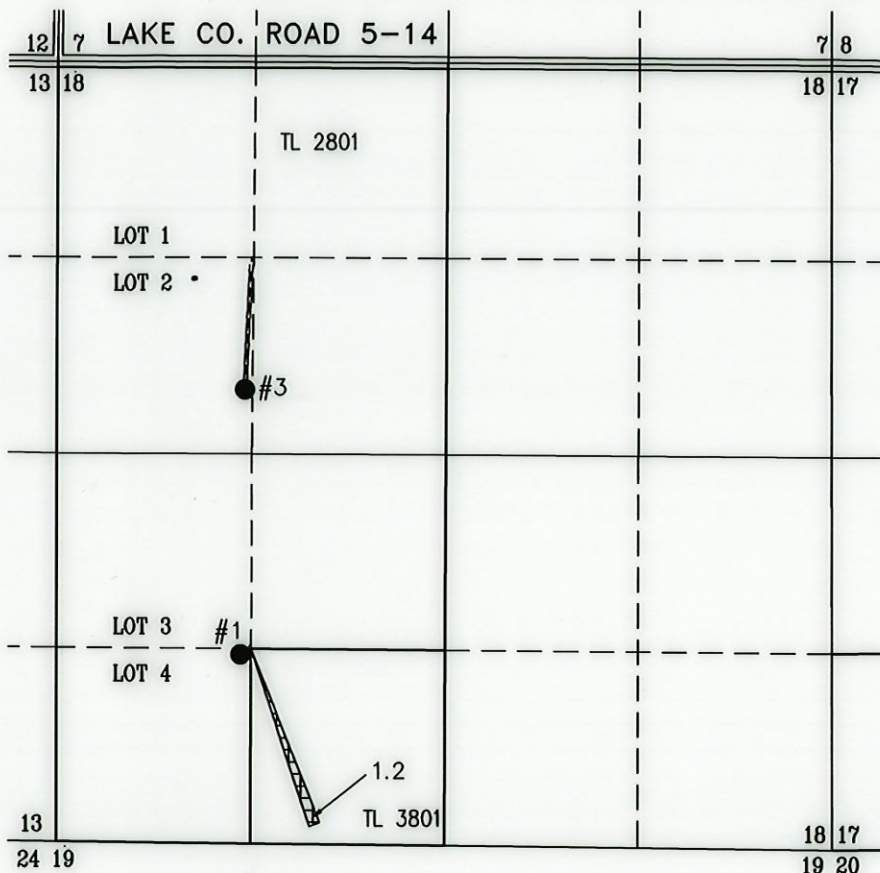
APP T-12468  
GILLETTE LIVING TRUST

SECTION 18, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.  
TAX LOTS: 2801 & 3801 LAKE COUNTY, OREGON

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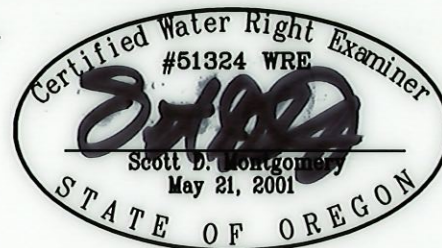
CONRAD



- #1  
EXISTING WELL (LAKE 1135)  
4040' SOUTH & 1240' EAST FROM THE NW CORNER  
SECTION 18. FLOWMETER LOCATED 6 FEET WEST  
FROM CENTER PIVOT SPRINKLER.



1.2 ACRES 'IR' FROM POA 1  
& C#85940, AS SHOWN



RENEWAL DATE: 12/31/2022

THIS MAP IS FOR THE PURPOSE OF LOCATING A WATER  
RIGHT ONLY AND HAS NO INTENT TO PROVIDE LEGAL  
DIMENSIONS OR THE LOCATION OF PROPERTY LINES

PAGE 2 OF 2

PREPARED FOR:

SANDRA OVERTON  
P.O. BOX 556  
CHRISTMAS VALLEY, OR 97641

PREPARED BY:



ALL POINTS ENGINEERING AND SURVEYING, INC.  
P.O. BOX 767  
(541) 548-5833  
TERREBONNE, OR 97760  
www.APEandS.com

# CLAIM OF BENEFICIAL USE MAP

TO CHANGE PLACE OF USE PER

APP T-12468

GILLETTE LIVING TRUST

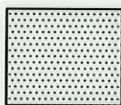
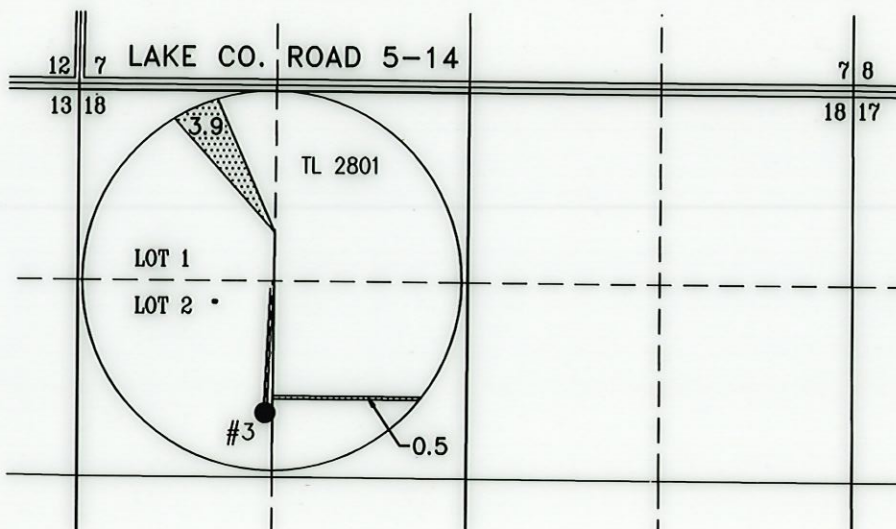
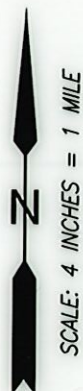
SECTION 18, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.

TAX LOT: 2801 LAKE COUNTY, OREGON

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4.4 ACRES 'IS' FROM POA 3  
& C#75828, AS SHOWN

- #3  
EXISTING WELL (LAKE 1136) TRANSFER: T-12468  
2240' SOUTH & 1290' EAST FROM THE NW CORNER  
SECTION 18. FLOWMETER IS LOCATED 3 FEET WEST  
FROM CENTER PIVOT SPRINKLER.



RENEWAL DATE: 12/31/2022

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# CLAIM OF BENEFICIAL USE MAP

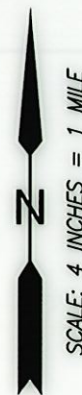
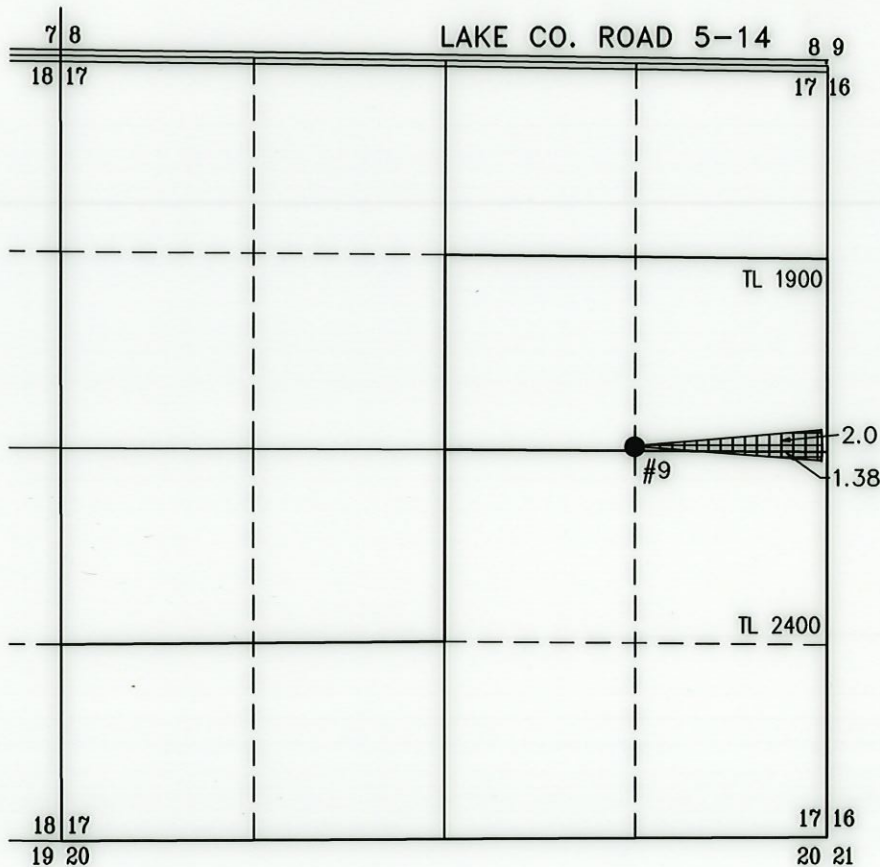
TO CHANGE PLACE OF USE AND  
CHANGE POINT OF APPROPRIATION PER  
APP T-12468  
GILLETTE LIVING TRUST

SECTION 17, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.  
TAX LOT: 1900 & 2400 LAKE COUNTY, OREGON

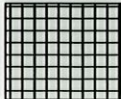
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- #9  
TRANSFER WELL (LAKE 52360)  
0' SOUTH & 1320' WEST FROM THE NE CORNER  
SECTION 17. FLOWMETER LOCATED 12 FEET WEST  
FROM WELL.



3.38 ACRES 'IR' FROM POA 9  
& C#85940, AS SHOWN



RENEWAL DATE: 12/31/2022

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DIMENSIONS OR THE LOCATION OF PROPERTY LINES

PAGE 1 OF 2

PREPARED FOR:

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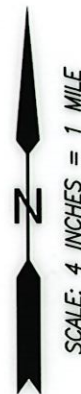
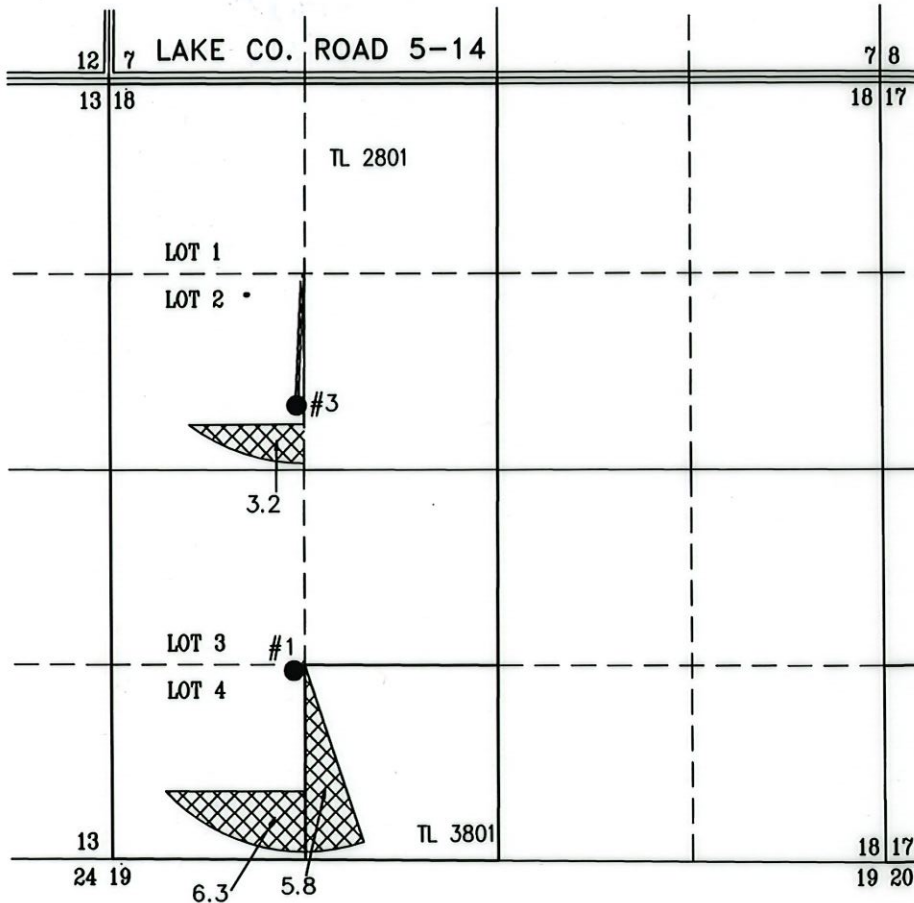
# CLAIM OF BENEFICIAL USE MAP

TO CHANGE PLACE OF USE AND  
CHANGE POINT OF APPROPRIATION PER

APP T-12468  
GILLETTE LIVING TRUST

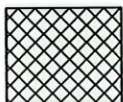
SECTION 18, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.  
TAX LOTS: 2801 & 3801 LAKE COUNTY, OREGON

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- #3  
EXISTING WELL (LAKE 1136) TRANSFER:  
T-12468  
2240' SOUTH & 1290' EAST FROM THE  
NW CORNER SECTION 18. FLOWMETER IS  
LOCATED 3 FEET WEST FROM CENTER  
PIVOT SPRINKLER.

- #1  
EXISTING WELL (LAKE 1135)  
4040' SOUTH & 1240' EAST FROM THE NW CORNER  
SECTION 18. FLOWMETER LOCATED 6 FEET WEST  
FROM CENTER PIVOT SPRINKLER.



15.3 ACRES 'IR' FROM POA 1  
& 3 & C#75828, AS SHOWN



RENEWAL DATE: 12/31/2022

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RIGHT ONLY AND HAS NO INTENT TO PROVIDE LEGAL  
DIMENSIONS OR THE LOCATION OF PROPERTY LINES

PREPARED FOR:

SANDRA OVERTON  
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CHRISTMAS VALLEY, OR 97641

PREPARED BY:



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# CLAIM OF BENEFICIAL USE MAP

TO CHANGE PLACE OF USE AND  
CHANGE POINT OF APPROPRIATION PER

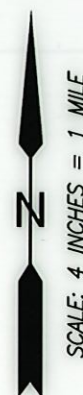
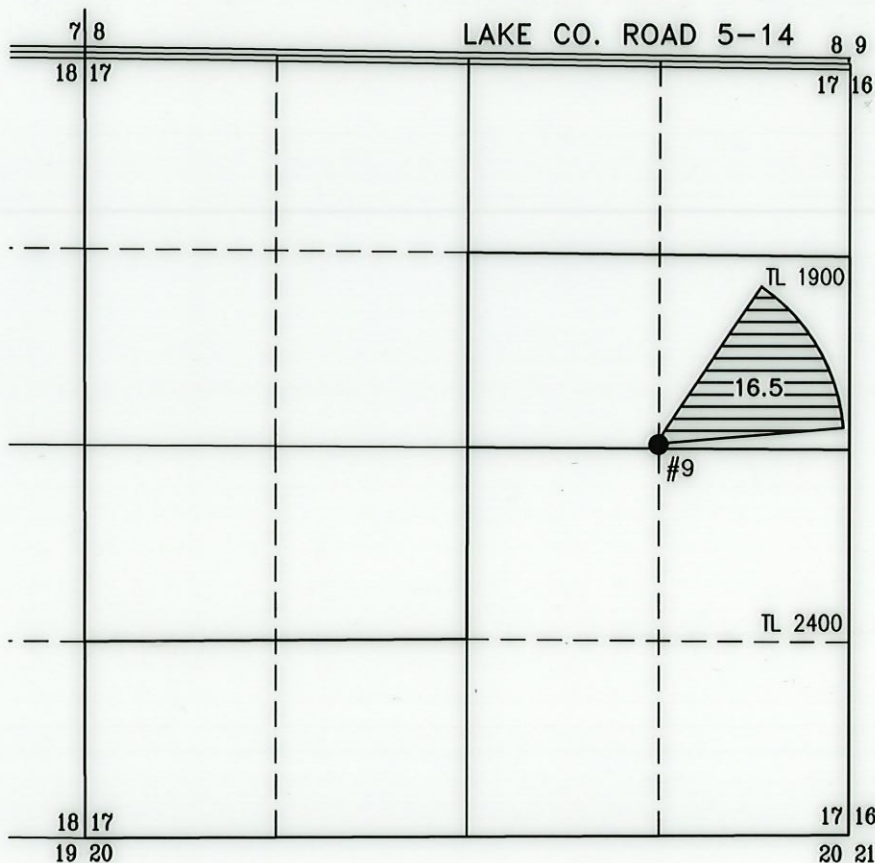
APP T-12468  
GILLETTE LIVING TRUST

SECTION 17, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.  
TAX LOT: 1900 LAKE COUNTY, OREGON

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- #9  
TRANSFER WELL (LAKE 52360)  
0' SOUTH & 1320' WEST FROM THE NE CORNER  
SECTION 17. FLOWMETER LOCATED 12 FEET WEST  
FROM WELL.



16.5 ACRES 'IR' FROM POA 9  
& C#75831, AS SHOWN



RENEWAL DATE: 12/31/2022

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RIGHT ONLY AND HAS NO INTENT TO PROVIDE LEGAL  
DIMENSIONS OR THE LOCATION OF PROPERTY LINES

PREPARED FOR:

SANDRA OVERTON  
P.O. BOX 556  
CHRISTMAS VALLEY, OR 97641

PREPARED BY:



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# CLAIM OF BENEFICIAL USE MAP

TO CHANGE PLACE OF USE AND  
CHANGE POINT OF APPROPRIATION PER

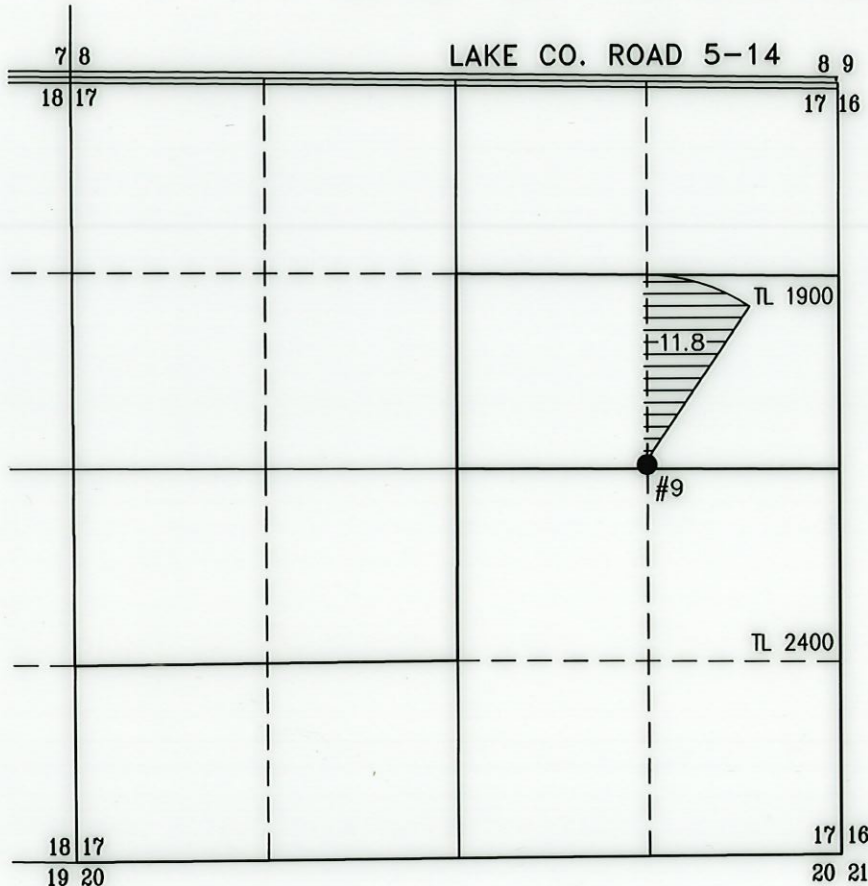
APP T-12468  
GILLETTE LIVING TRUST

SECTION 17, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.  
TAX LOT: 1900 LAKE COUNTY, OREGON

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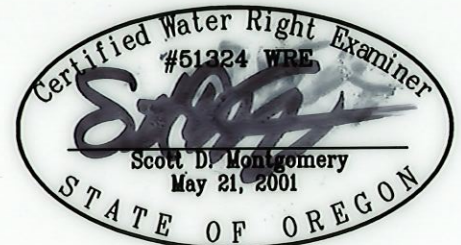
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- #9  
TRANSFER WELL (LAKE 52360)  
0' SOUTH & 1320' WEST FROM THE NE CORNER  
SECTION 17. FLOWMETER LOCATED 12 FEET WEST  
FROM WELL.



11.8 ACRES 'IR' FROM POA 9  
& C#85939, AS SHOWN



RENEWAL DATE: 12/31/2022

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RIGHT ONLY AND HAS NO INTENT TO PROVIDE LEGAL  
DIMENSIONS OR THE LOCATION OF PROPERTY LINES

PREPARED FOR:

SANDRA OVERTON  
P.O. BOX 556  
CHRISTMAS VALLEY, OR 97641

PREPARED BY:



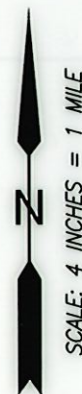
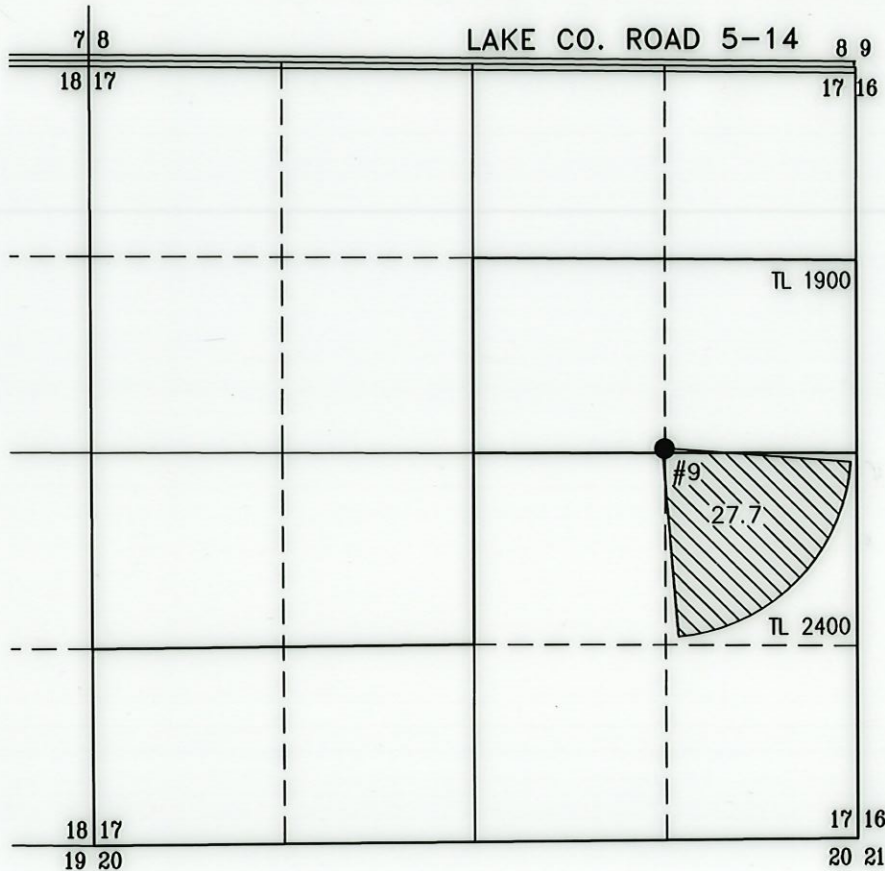
ALL POINTS ENGINEERING AND SURVEYING, INC.  
P.O. BOX 767  
(541) 548-5833  
TERREBONNE, OR 97760  
www.APEandS.com

# CLAIM OF BENEFICIAL USE MAP

TO CHANGE PLACE OF USE AND  
CHANGE POINT OF APPROPRIATION PER  
APP T-12468  
GILLETTE LIVING TRUST

SECTION 17, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.  
TAX LOT: 1900 & 2400 LAKE COUNTY, OREGON

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- #9  
TRANSFER WELL (LAKE 52360)  
0' SOUTH & 1320' WEST FROM THE NE CORNER  
SECTION 17. FLOWMETER LOCATED 12 FEET WEST  
FROM WELL.



27.7 ACRES 'IR' FROM POA 9  
& C#54692, AS SHOWN



RENEWAL DATE: 12/31/2022

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RIGHT ONLY AND HAS NO INTENT TO PROVIDE LEGAL  
DIMENSIONS OR THE LOCATION OF PROPERTY LINES

PREPARED FOR:

SANDRA OVERTON  
P.O. BOX 556  
CHRISTMAS VALLEY, OR 97641

PREPARED BY:



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# CLAIM OF BENEFICIAL USE MAP

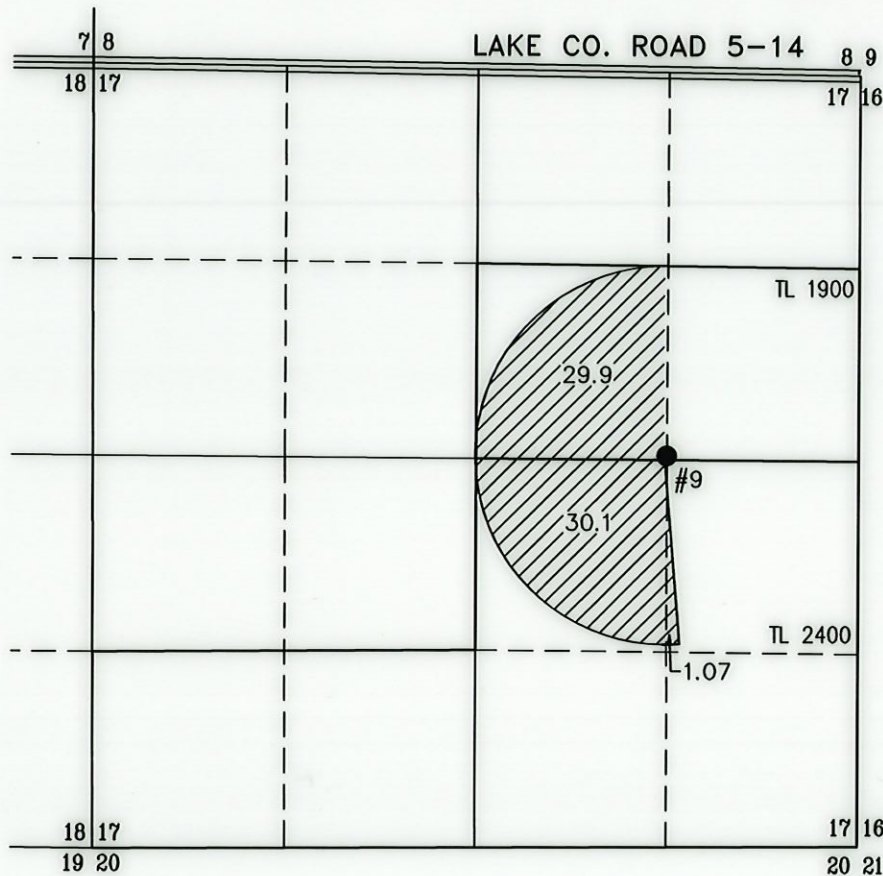
TO CHANGE PLACE OF USE AND  
CHANGE POINT OF APPROPRIATION PER  
APP T-12468  
GILLETTE LIVING TRUST

SECTION 17, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.  
TAX LOT: 1900 & 2400 LAKE COUNTY, OREGON

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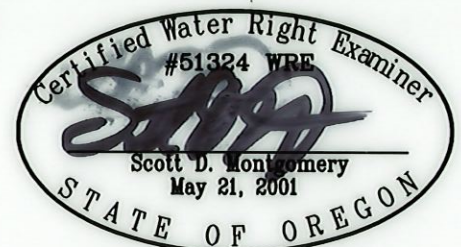


N  
SCALE: 4 INCHES = 1 MILE

- #9  
TRANSFER WELL (LAKE 52360)  
0' SOUTH & 1320' WEST FROM THE NE CORNER  
SECTION 17. FLOWMETER LOCATED 12 FEET WEST  
FROM WELL.



61.07 ACRES 'IR' FROM POA  
9 & C#75829, AS SHOWN



RENEWAL DATE: 12/31/2022

THIS MAP IS FOR THE PURPOSE OF LOCATING A WATER  
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DIMENSIONS OR THE LOCATION OF PROPERTY LINES

PREPARED FOR:

SANDRA OVERTON  
P.O. BOX 556  
CHRISTMAS VALLEY, OR 97641

PREPARED BY:



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P.O. BOX 767 TERREBONNE, OR 97760  
(541) 548-5833 [www.APEandS.com](http://www.APEandS.com)

# CLAIM OF BENEFICIAL USE MAP

TO CHANGE PLACE OF USE AND  
CHANGE POINT OF APPROPRIATION PER

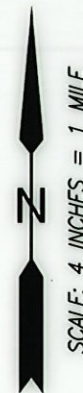
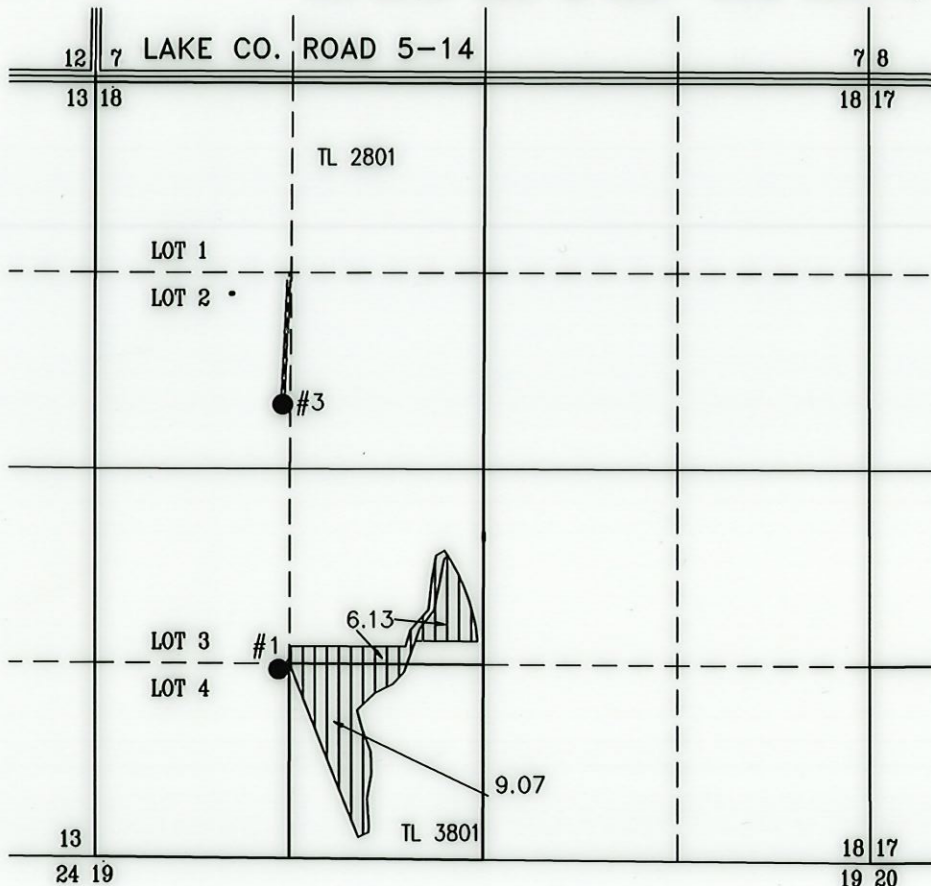
APP T-12468  
GILLETTE LIVING TRUST

SECTION 18, TOWNSHIP 27 SOUTH, RANGE 18 EAST, W.M.  
TAX LOTS: 2801 & 3801 LAKE COUNTY, OREGON

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- #1  
EXISTING WELL (LAKE 1135)  
4040' SOUTH & 1240' EAST FROM THE NW CORNER  
SECTION 18. FLOWMETER LOCATED 6 FEET WEST  
FROM CENTER PIVOT SPRINKLER.



15.2 ACRES 'IR' FROM POA 1  
& C#75830, AS SHOWN



RENEWAL DATE: 12/31/2022

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PREPARED FOR:

SANDRA OVERTON  
P.O. BOX 556  
CHRISTMAS VALLEY, OR 97641

PREPARED BY:



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TERREBONNE, OR 97760  
www.APEandS.com

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



**Oregon Water Resources Department**  
725 Summer Street NE, Suite A  
Salem, Oregon 97301-1266  
(503) 986-0900  
[www.oregon.gov/OWRD](http://www.oregon.gov/OWRD)

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

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

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

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at:

<https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

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

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

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

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

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

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

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

**GENERAL INFORMATION**

**Type of Authorized Change**

This Claim is being submitted for a transfer involving multiple changes.

**YES**

Mark all that apply:

1. ☒ Change in POA(s) or Additional POA(s)      2. ☒ Change in Place of Use  
3. ☐ Change in Character of Use

*A separate section will be completed for each type of change authorized in the transfer final order.*

**1. File Information**

APPLICATION #

**T-12468**

2. Property Owner (current owner information)

|                                                                        |                    |                                  |                                               |
|------------------------------------------------------------------------|--------------------|----------------------------------|-----------------------------------------------|
| APPLICANT/BUSINESS NAME<br><b>Gillette Living Trust/Sandra Overton</b> |                    | PHONE NO.<br><b>541-576-2708</b> | ADDITIONAL CONTACT NO.<br><b>541-420-8173</b> |
| ADDRESS<br><b>PO Box 556</b>                                           |                    |                                  |                                               |
| CITY<br><b>Christmas Valley</b>                                        | STATE<br><b>OR</b> | ZIP<br><b>97641</b>              | E-MAIL                                        |

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. ***Each transfer holder of record must sign this form.***

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

|                                                   |       |     |
|---------------------------------------------------|-------|-----|
| TRANSFER HOLDER OF RECORD<br><b>Same as above</b> |       |     |
| ADDRESS                                           |       |     |
| CITY                                              | STATE | ZIP |

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4. Date of Site Inspection:

|                                |
|--------------------------------|
| <b>6/2/2020 &amp; 3/9/2021</b> |
|--------------------------------|

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

| NAME                  | DATE            | ASSOCIATION WITH THE PROJECT |
|-----------------------|-----------------|------------------------------|
| <b>Sandra Overton</b> | <b>6/2/2020</b> | <b>Trust Beneficiary</b>     |
| <b>Sandra Overton</b> | <b>3/9/2021</b> | <b>Trust Beneficiary</b>     |

6. County:

|             |
|-------------|
| <b>Lake</b> |
|-------------|

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

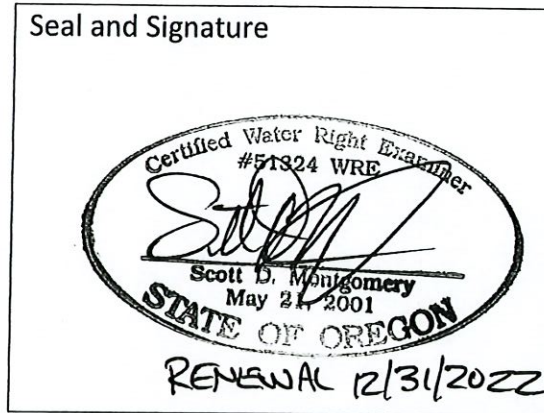
|                              |       |     |
|------------------------------|-------|-----|
| OWNER OF RECORD<br><b>NA</b> |       |     |
| ADDRESS                      |       |     |
| CITY                         | STATE | ZIP |

Add additional tables for owners of record as needed

**SECTION 2**  
**SIGNATURES**

CWRE Statement, Seal and Signature

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



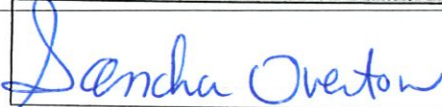
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|                                        |                    |                                  |                                               |
|----------------------------------------|--------------------|----------------------------------|-----------------------------------------------|
| CWRE NAME<br><b>Scott D Montgomery</b> |                    | PHONE NO.<br><b>541-548-5833</b> | ADDITIONAL CONTACT NO.<br><b>541-420-0401</b> |
| ADDRESS<br><b>PO Box 767</b>           |                    |                                  |                                               |
| CITY<br><b>Terrebonne</b>              | STATE<br><b>OR</b> | ZIP<br><b>97760</b>              | E-MAIL<br><b>scott@apeands.com</b>            |

Transfer Holder of Record Signature or Acknowledgement

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

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

| SIGNATURE                                                                           | PRINT OR TYPE NAME    | TITLE                    | DATE |
|-------------------------------------------------------------------------------------|-----------------------|--------------------------|------|
|  | <b>Sandra Overton</b> | <b>Trust Beneficiary</b> |      |

### SECTION 3

#### Changes Made

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

#### Change #1

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

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

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

| POINT OF APPROPRIATION<br>(POA) NAME OR NUMBER<br>(CORRESPOND TO MAP) | WELL LOG ID # FOR ALL<br>WORK PERFORMED ON THE<br>WELL<br>(IF APPLICABLE) | WELL TAG #<br>(IF APPLICABLE) | SOURCE<br>(IF LISTED IN TRANSFER FINAL<br>ORDER) |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------|--------------------------------------------------|
| #9                                                                    | LAKE 52360                                                                |                               | Fort Rock Basin                                  |
| #1                                                                    | LAKE 1135                                                                 |                               | Fort Rock Basin                                  |
| #3                                                                    | LAKE 1136                                                                 |                               | Fort Rock Basin                                  |

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

**2. Variations:**

Was the use developed differently from what was authorized by the transfer final order, or extension final? **NO**

If yes, describe below.

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

### 3. Claim Summary:

| NEW OR ADDITIONAL<br>POA<br>NAME OR # | MAXIMUM RATE<br>AUTHORIZED | CALCULATED THEORETICAL<br>RATE BASED ON SYSTEM | AMOUNT OF WATER<br>MEASURED |
|---------------------------------------|----------------------------|------------------------------------------------|-----------------------------|
| #9                                    | 1.50 cfs                   | 1.55 cfs                                       | Not measured                |
| #1                                    | 0.36 cfs                   | 1.91 cfs                                       | Not measured                |
| #3                                    | 0.10 cfs                   | 2.38 cfs                                       | Not measured                |

### System Description

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

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

#9 (LAKE 52360)

YES

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### A. POA System Information

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

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#### 1. Pump Information

| MANUFACTURER | MODEL | SERIAL NUMBER  | TYPE (CENTRIFUGAL, TURBINE OR<br>SUBMERSIBLE) | INTAKE SIZE | DISCHARGE<br>SIZE |
|--------------|-------|----------------|-----------------------------------------------|-------------|-------------------|
| National     | UNK   | H1627100B0220F | Turbine                                       | 14"         | 8"                |

#### 2. Motor Information

| MANUFACTURER | HORSEPOWER |
|--------------|------------|
| GE           | 50         |

#### 3. Theoretical Pump Capacity

| HORSEPOWER | OPERATING PSI | LIFT FROM SOURCE TO PUMP<br>*IF A WELL, THE WATER LEVEL<br>DURING PUMPING | LIFT FROM PUMP TO<br>PLACE OF USE | TOTAL PUMP<br>OUTPUT<br>(IN CFS) |
|------------|---------------|---------------------------------------------------------------------------|-----------------------------------|----------------------------------|
| 50         | 40            | 125'                                                                      | 0'                                | 1.55                             |

#### 4. Provide pump calculations:

$$Q = \frac{7.04 \text{ ft}^3/\text{sec}/\text{hpxhp}}{\text{Total head, ft}} = \frac{(7.04) (50)}{226.6} = 1.55 \text{ cfs}$$

$$\text{Total head} = 101.6' + 125' + 0' = 226.6'$$

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

| INITIAL METER READING | ENDING METER READING | DURATION OF TIME<br>OBSERVED | TOTAL PUMP OUTPUT<br>(IN CFS) |
|-----------------------|----------------------|------------------------------|-------------------------------|
| Not running           |                      |                              |                               |

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

6. Additional notes or comments related to the system:

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

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

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NO

Change #2

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**Change in Place of Use**

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

YES

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

| THE # OF ACRES ALLOWED | THE # OF ACRES DEVELOPED |
|------------------------|--------------------------|
| 120.45 IR              | 120.45 IR                |

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

| NEW USE(s) | WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT<br>AUTHORIZED UNDER THE ORDER?<br>(INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE<br>CLAIM MAP) |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            | NA                                                                                                                                                            |

2. Variations:

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

NO

If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

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## Change #3

## Change in Character of Use

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

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NO

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

#1 (Lake 1135)

## A. POA System Information

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

## 1. Pump Information

| MANUFACTURER | MODEL  | SERIAL NUMBER | TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE) | INTAKE SIZE | DISCHARGE SIZE |
|--------------|--------|---------------|--------------------------------------------|-------------|----------------|
| Wellline     | TSC048 | UNK           | Turbine                                    | 18"         | 8"             |

## 2. Motor Information

| MANUFACTURER | HORSEPOWER |
|--------------|------------|
| US Motors    | 60         |

## 3. Theoretical Pump Capacity

| HORSEPOWER | OPERATING PSI | LIFT FROM SOURCE TO PUMP<br>*If A WELL, THE WATER LEVEL<br>DURING PUMPING | LIFT FROM PUMP TO<br>PLACE OF USE | TOTAL PUMP<br>OUTPUT<br>(IN CFS) |
|------------|---------------|---------------------------------------------------------------------------|-----------------------------------|----------------------------------|
| 60         | 40            | 120'                                                                      | 0'                                | 1.91                             |

## 4. Provide pump calculations:

$$Q = 7.04 \text{ ft}^3/\text{sec}/\text{hp} \times \text{hp} = (7.04) (60) = 1.91 \text{ cfs}$$

$$\text{Total head, ft} = 221.6$$

$$\text{Total head} = 101.6' + 120' + 0' = 221.6'$$

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

| INITIAL METER READING | ENDING METER READING | DURATION OF TIME<br>OBSERVED | TOTAL PUMP OUTPUT<br>(IN CFS) |
|-----------------------|----------------------|------------------------------|-------------------------------|
| Not running           |                      |                              |                               |

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

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

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

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

NO

**Change #2**

**Change in Place of Use**

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

**YES**

**1. Claim Summary – Authorized Use:**

If Irrigation or Nursery Use:

| THE # OF ACRES ALLOWED | THE # OF ACRES DEVELOPED |
|------------------------|--------------------------|
| <b>43.77 IR</b>        | <b>43.77 IR</b>          |

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

| NEW USE(S) | WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT<br>AUTHORIZED UNDER THE ORDER?<br>(INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE<br>CLAIM MAP) |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            | <b>NA</b>                                                                                                                                                     |

**2. Variations:**

Was the use developed differently from what was authorized by the transfer final order? **YES NO**

If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

|  |
|--|
|  |
|--|

## Change #3

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## Change in Character of Use

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

NO

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#3 (LAKE 1336)

## A. POA System Information

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

## 1. Pump Information

| MANUFACTURER | MODEL | SERIAL NUMBER | TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE) | INTAKE SIZE | DISCHARGE SIZE |
|--------------|-------|---------------|--------------------------------------------|-------------|----------------|
| Wellline     | 12TH  | 45843         | Turbine                                    | 14"         | 8"             |

## 2. Motor Information

| MANUFACTURER | HORSEPOWER |
|--------------|------------|
| US Motors    | 75         |

## 3. Theoretical Pump Capacity

| HORSEPOWER | OPERATING PSI | LIFT FROM SOURCE TO PUMP<br>*IF A WELL, THE WATER LEVEL<br>DURING PUMPING | LIFT FROM PUMP TO<br>PLACE OF USE | TOTAL PUMP<br>OUTPUT<br>(IN CFS) |
|------------|---------------|---------------------------------------------------------------------------|-----------------------------------|----------------------------------|
| 75         | 40            | 120'                                                                      | 0'                                | 2.38                             |

## 4. Provide pump calculations:

$$Q = 7.04 \text{ ft}^3/\text{sec}/\text{hp} \times \text{hp} = (7.04) (75) = 2.38$$

$$\text{Total head, ft} = 221.6$$

$$\text{Total head} = 101.6' + 120' + 0' = 221.6'$$

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

| INITIAL METER READING | ENDING METER READING | DURATION OF TIME<br>OBSERVED | TOTAL PUMP OUTPUT<br>(IN CFS) |
|-----------------------|----------------------|------------------------------|-------------------------------|
| Not running           |                      |                              |                               |

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

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

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

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

NO

Change #2

Change in Place of Use

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

YES

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

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| THE # OF ACRES ALLOWED | THE # OF ACRES DEVELOPED |
|------------------------|--------------------------|
| 3.2 IR                 | 3.2 IR                   |
| 4.4 IS                 | 4.4 IS                   |

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

| NEW USE(S) | WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT<br>AUTHORIZED UNDER THE ORDER?<br>(INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE<br>CLAIM MAP) |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            | NA                                                                                                                                                            |

2. Variations:

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

NO

If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

|  |
|--|
|  |
|--|

Change #3  
Change in Character of Use

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NO

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

SECTION 4  
CONDITIONS

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

1. Time Limits:

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

|                                     | DATE FROM TRANSFER | DATE THE AUTHORIZED CHANGES WERE COMPLETED<br>*THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND<br>THE "COMPLETENESS DATE" |
|-------------------------------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------|
| ISSUANCE DATE                       | 04/23/20           |                                                                                                                               |
| COMPLETENESS DATE<br>FROM ORDER (C) | 10/1/21            | 3/9/21                                                                                                                        |

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

2. Is there an extension final order(s)?

NO

3. Measurement Conditions:

a. Does the transfer final order, or any extension final order require the installation of a meter or other approved measuring device? YES

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

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

b. Has a meter been installed?

YES NO

c. Meter Information

| POA NAME<br>OR # | MANUFACTURER | SERIAL #    | CONDITION<br>(WORKING OR NOT) | CURRENT METER<br>READING | DATE<br>INSTALLED |
|------------------|--------------|-------------|-------------------------------|--------------------------|-------------------|
| #9               | McCrometer   | 12-09665-08 | off                           | 000.000 AF               | March 2021        |
| #1               | McCrometer   | 15-04629-08 | off                           | 947398 gal x 100         | March 2021        |
| #3               | Seametrics   | 05200124    | off                           | 127342.19 gal x 100      | March 2021        |

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

4. Recording and reporting conditions

a. Is the water user required to report the water use to the Department? **NO**

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

a. Were there special well construction standards? **NO**

b. Was submittal of a ground water monitoring plan required? **NO**

c. Other conditions? **NO**

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

|  |
|--|
|  |
|--|

**SECTION 5**  
**ATTACHMENTS**

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

| ATTACHMENT NAME | DESCRIPTION                            |
|-----------------|----------------------------------------|
| Aerial imagery  | June 2016 USDA/FSA imagery             |
| Site photos     | Location/time stamped photos of system |
| Well Reports    | LAKE 1135, LAKE 1136 & LAKE 52360      |

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## SECTION 6

### CLAIM OF BENEFICIAL USE MAP

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

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

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

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

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

**POA 9 & POU around were tied using a Trimble GeoXT 9000 GIS data collector. Point data was imported to ESRI ArcMap GIS software & overlaid with aerial imagery for accuracy. POA's #1 & 3 and POU around each were tied in my 2011 survey using survey grade GPS receivers in RTK autonomous mode.**

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## Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

(Reminder: Incomplete maps and/or claims may be returned.)

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

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12:26 02-06-2020

Lat: 43° 13' 49.20" N Lon: 120° 36' 23.94" W

43°13'49.14"N  
120°36'23.93"W

1291.5 m

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12:25 02-06-2020

Lat: 43° 13' 49.14" N Lon: 120° 36' 24.12" W

EOF ⑨



12:29 02-06-2020

Lat: 43° 13' 48.59" N Lon: 120° 36' 6.77" W

43°13'48.55"N  
120°36'06.75"W

1291.7 m

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15:50 05-08-2020

FILE: 03010108.P00.M FOU: 150.36, 0.22, 0.11

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12:32 02-06-2020

Lat: 43° 13' 58.22" N Lon: 120° 36' 11.23" W

43°13'58.22"N  
120°36'11.23"W

1288.9m

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15/35 05-02-5050

15/35 05-02-5050

RECEIVED

MAY 28 2021

OWRD

12:23 02-06-2020

Lat: 43° 13' 49.4" N Lon: 120° 36' 24.22" W

43°13'48.97" N

120° 36' 24.13" W

1298.7 m

RECEIVED  
MAY 28 2021

OWRD

15:53 05-06-2020

43° 13' 48.97" N 120° 36' 24.13" W 1298.7 m

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T 27 S, R 18 E, W.M.

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Legend

2016 aerial imagery downloaded from NRCS Gateway website and imported into ESRI ArcMap GIS software with Oregon Statewide Lambert Projection

(USE ADDITIONAL SHEETS IF NECESSARY)

State Well No. 27/18-18N(1)  
County LAKE  
Application No. G.1224

OWNER: Jack Gillette OWNER'S NO.                     

Description of measuring point: Top of well port pipe on south side of well - 1 foot above L.S.D.

[illegible]REMARKS: .....  
.....  
.....  
.....

## NOTICE TO WATER WELL CONTRACTOR

The original and first copy  
of this report are to be  
filed with the

STATE ENGINEER, SALEM, OREGON 97310  
within 30 days from the date  
of well completion.

## WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

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NOV 1 1976

State Well No. 273/10-70 bc

State Permit No. G-7191(43)

## (1) OWNER:

Name Jack Gillette  
Address Christmas Valley Or. 97638

## (2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

## (3) TYPE OF WELL:

Rotary ☒ Driven ☐  
Cable ☐ Jetted ☐  
Dug ☐ Bored ☐

## (4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐  
Irrigation ☒ Test Well ☐ Other ☐

## (5) CASING INSTALLED:

Threaded ☐ Welded ☒  
14" Diam. from 1 ft. to 119 ft. Gage 250  
" Diam. from ft. to ft. Gage  
" Diam. from ft. to ft. Gage

## (6) PERFORATIONS:

Perforated? ☒ Yes ☐ No.

Type of perforator used Torch  
Size of perforations 3/8 in. by 3 in.  
80 perforations from 109 ft. to 119 ft.  
perforations from ft. to ft.  
perforations from ft. to ft.

## (7) SCREENS:

Well screen installed? ☐ Yes ☒ No

Manufacturer's Name \_\_\_\_\_  
Type \_\_\_\_\_ Model No. \_\_\_\_\_  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

## (8) WELL TESTS:

Drawdown is amount water level is  
lowered below static level

Was a pump test made? ☐ Yes ☐ No. If yes, by whom?

Test made with Air compressor - about 1800  
gal/min for 7 hrs.

Ball test 35 gal./min. with 0 ft. drawdown after 1 hrs.

Artesian flow g.p.m.

Temperature of water 50° Depth artesian flow encountered \_\_\_\_\_ ft.

## (9) CONSTRUCTION:

Well seal—Material used Cement  
Well sealed from land surface to 55 ft.  
Diameter of well bore to bottom of seal 17 in.  
Diameter of well bore below seal 14 in.  
Number of sacks of cement used in well seal 8 sacks  
Number of sacks of bentonite used in well seal \_\_\_\_\_ sacks  
Brand name of bentonite \_\_\_\_\_  
Number of pounds of bentonite per 100 gallons  
of water \_\_\_\_\_ lbs./100 gals.  
Was a drive shoe used? ☒ Yes ☐ No Plugs \_\_\_\_\_ Size: location \_\_\_\_\_ ft.  
Did any strata contain unusable water? ☐ Yes ☒ No  
Type of water? \_\_\_\_\_ depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_  
Was well gravel packed? ☐ Yes ☒ No Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

## (10) LOCATION OF WELL:

County Lake Driller's well number \_\_\_\_\_  
SW 1/4 NW 1/4 Section 18 T. 27 S. R. 18 E W.M.  
Bearing and distance from section or subdivision corner \_\_\_\_\_

## (11) WATER LEVEL: Completed well.

Depth at which water was first found 65 ft.  
Static level 22 ft. below land surface. Date 8/8/76  
Artesian pressure \_\_\_\_\_ lbs. per square inch. Date \_\_\_\_\_

## (12) WELL LOG:

Diameter of well below casing 14"

Depth drilled 280 ft. Depth of completed well 280 ft.

Formation: Describe color, texture, grain size and structure of materials;  
and show thickness and nature of each stratum and aquifer penetrated,  
with at least one entry for each change of formation. Report each change in  
position of Static Water Level and indicate principal water-bearing strata.

| MATERIAL         | From | To  | SWL |
|------------------|------|-----|-----|
| Top Soil         | 0    | 2   |     |
| Clay Hard Yellow | 2    | 9   |     |
| Gravel Med.      | 9    | 15  |     |
| Rock Lava        | 15   | 60  |     |
| Rock Broken Lava | 60   | 87  | 22  |
| Conglomerate     | 87   | 112 |     |
| Sand Stone       | 112  | 120 |     |
| Conglomerate     | 120  | 195 |     |
| Cinders Black    | 195  | 207 |     |
| Conglomerate     | 207  | 260 |     |
| Sand Stone       | 260  | 271 |     |
| Cinders Black    | 271  | 275 |     |
| Clay Hard White  | 275  | 280 |     |

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Work started 8/3 1976 Completed 10/3 1976

Date well drilling machine moved off of well 10/21 1976

## Drilling Machine Operator's Certification:

This well was constructed under my direct supervision.  
Materials used and information reported above are true to my  
best knowledge and belief.

[Signed] Silas Blaylock Date 10/28, 1976  
(Drilling Machine Operator)

Drilling Machine Operator's License No. 383

## Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is  
true to the best of my knowledge and belief.

Name Blaylock & Woods Well Drilling  
(Person, firm or corporation) (Type or print)

Address P.O. Box 2 Silver Lake Or.

[Signed] Silas Blaylock  
(Water Well Contractor)

Contractor's License No. 425 Date 10/28, 1976

(USE ADDITIONAL SHEETS IF NECESSARY)

SP\*45656-119

## STATE OF OREGON

## WATER SUPPLY WELL REPORT

(as required by ORS 537.765 &amp; OAR 690-205-0210)

01-03-2012

WELL LABEL # L 105478

START CARD # 1015671

## (1) LAND OWNER

Owner Well I.D. #9

First Name Don Last Name Overton  
 Company  
 Address p.o. 556  
 City christmas valley State or Zip 97641

## (2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion  
☐ Alteration (repair/recondition) ☐ Abandonment

## (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 | 20     | S   |
| 14        | 20   | 250 |                 |      |    |        |     |

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other poured dry

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: ☐ Yes Type Amount

## (6) CASING/LINER

| Casing                              | Liner                    | Dia | +                                   | From | To | Gauge | Stl                                 | Plstc                    | Wld                                 | Thrd                     |
|-------------------------------------|--------------------------|-----|-------------------------------------|------|----|-------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 14  | <input checked="" type="checkbox"/> | 2    | 98 | 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/S | Casing/ | Screen |      |    |          |        |       |           |  |  |
|--------|---------|--------|------|----|----------|--------|-------|-----------|--|--|
| creen  | Liner   | Dia    | From | To | Scr/slot | Slot   | # of  | Tele/     |  |  |
|        |         |        |      |    | 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) |
|---------------|----------|-----------------------|---------------|
| 1,200         |          | 245                   | 2             |

Temperature 52 °F Lab analysis ☐ Yes ByWater quality concerns? ☐ Yes (describe below)

| From | To | Description | Amount | Units |
|------|----|-------------|--------|-------|
|------|----|-------------|--------|-------|

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

County Lake Twp 27.00 S N/S Range 18.00 E E/W WM  
 Sec 17 SE 1/4 of the NE 1/4 Tax Lot 2400  
 Tax Map Number Lot  
 Lat " or DMS or DD  
 Long " or DMS or DD  
☐ Street address of well ☒ Nearest address

gloria rd

## (10) STATIC WATER LEVEL

| Date                         | SWL(psi)   | + | SWL(ft) |
|------------------------------|------------|---|---------|
| Existing Well / Predeepening |            |   |         |
| Completed Well               | 12-30-2011 |   | 27      |

Flowing Artesian? ☐ Dry Hole? ☐

## WATER BEARING ZONES

Depth water was first found 30

| SWL Date   | From | To  | Est Flow | SWL(psi) | + | SWL(ft) |
|------------|------|-----|----------|----------|---|---------|
| 12-31-2011 | 27   | 250 | 1,200    |          |   | 27      |

## (11) WELL LOG

Ground Elevation

| Material           | From | To  |
|--------------------|------|-----|
| brn sandy top soil | 0    | 10  |
| green clay         | 10   | 88  |
| grey clay          | 88   | 165 |
| brkn blk basalt    | 165  | 250 |

RECEIVED

MAY 28 2021

OWRD

Date Started 12-30-2011 Completed 12-31-2011

## (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

Electronically Filed

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 1568 Date 01-03-2012

Electronically Filed

Signed DAVID KUHN (E-filed)

Contact Info (optional)