

Application for Permanent Water Right Transfer



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

Part 1 of 5 – Minimum Requirements Checklist

This transfer 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 Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: [http://apps.wrd.state.or.us/apps/misc/wrd fee calculator](http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator).
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: 32394**
Please include a separate Part 5 for each water right. (See instructions on page 6)
NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- 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’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(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"/> Evidence of Use Form not enclosed or incomplete
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> Part _____ is incomplete

Other/Explanation _____

Staff: _____ 503- _____ Date: ____/____/____

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Part 2 of 5 – Transfer Application Map

Your transfer application will be returned if any of the map requirements listed below are not met. **OWRD**

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- 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 Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water right, 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 water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, 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 right certificate or 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 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Golden Rule Farms, Inc.		PHONE NO. 541-576-2273	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 225			FAX NO.
CITY Christmas Valley	STATE OR	ZIP 97641	E-MAIL goldenrulefarms@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.			

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

AGENT/BUSINESS NAME Elizabeth Howard		PHONE NO. 503-796-2093	ADDITIONAL CONTACT NO.
ADDRESS 1211 SW 5th Ave, Suite 1900			FAX NO.
CITY Portland	STATE OR	ZIP 97204	E-MAIL ehoward@schwabe.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 transfer application, and why:
 This transfer application proposes to move the place of use and the points of appropriation to a nearby property that will allow Golden Rule Farms to more efficiently farm the properties it owns. Transfer T-13363 is currently pending with OWRD and proposes to move the place of use under Certificate 32394. If the transfer that is proposed in this application is approved, Golden Rule Farms will withdraw the portion of T-13363 involving Certificate 32394.

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

Check One Box

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

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By my signature below, I confirm that I understand:

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- Prior to Department approval of the transfer application, 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 water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Burns Times-Herald.
- Amendments to the application may only be made in response to the Department's Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).
- Refunds may only be granted upon request and, as set forth in ORS 536.050(4)(a), if the Director determines that a refund of all or part of a fee is appropriate in the interests of fairness to the public or necessary to correct an error of the Department.

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



Timothy Puckett
 Applicant signature

Timothy Puckett
 Print Name (and Title if applicable)

2-9-22
 Date

 Applicant signature

 Print Name (and Title if applicable)

 Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No*

**If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.*

Check the following boxes that apply:

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

At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see: https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	
Describe any special ownership circumstances:				
The confirming Certificate shall be issued in the name of: <input type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner				

Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME	ADDRESS	
CITY	STATE	CITY



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

ENTITY NAME Harney County Planning Dept.	ADDRESS 360 N. Alvord Avenue	
CITY Burns	STATE OR	CITY Burns

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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INSTRUCTIONS for editing the Application Form

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To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please **save the application form to your computer**. Unlock the document by using one of the following instructions for your Microsoft Word software version:

Microsoft Word 2003

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;

OR

- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the **Tools** menu => click **Protect Document**;

OR

- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

Microsoft Word 2007

- Unlock the document by clicking the **Review** tab, then click **Protect Document**, then click **Stop Protect**
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

Microsoft Word 2010

- Unlock the document by clicking the **Review** tab; toggle the **Restrict Editing** icon at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the "**Allow only this type of editing in the document: Filling in forms**" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the **Editing Restrictions/Allow Only This Type of Editing/Filling In Forms** box from the drop-down menu, then check **Yes, Start Enforcing Protection**. You do not need to assign a password for the editing restrictions.

Other Alternatives:

- Photocopy pages or tables in Part 5, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

Part 5 of 5 – Water Right Information

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

CERTIFICATE # 32394

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Description of Water Delivery System

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System capacity: 0.94 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from the authorized point of appropriation and conveyed by buried conduit to a mainline that supplies wheel line sprinklers to irrigate the authorized place of use.**

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Crow Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1461	27	S	31	E	1	SW	NE	300	1562 feet South and 21 feet East from the North quarter corner of Section 1.
Briggs 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 1893	27	S	32	E	6	NE	NE	100	125 feet South and 915 feet West from the NE corner Section 6.
Briggs 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 1460	27	S	32	E	6	NE	NW	100	1280 feet South and 1 feet West from the North quarter corner Section 6.

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

Will all of the proposed changes affect the entire water right?

- Yes Complete only the Proposed ("to" or "on" 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 water right to be changed.

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 Right Certificate # 32394

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.															
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date							
EXAMPLE																											
2	S	9	E	15	NE	NW	100		15:0	Irrigation	POD #1	POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10:0		POD #5	1901
															2	S	9	E	2	SW	NW	500		5:0		POD #6	1901
														APOA	27	S	31	E	1	NW	NE	300	2	30.7	Irrigation	Crow Well, Briggs 1, Briggs 2	10/2/1959
														POU/APOA	27	S	31	E	1	NW	NE	300	2	0.1	Irrigation	Crow Well, Briggs 1, Briggs 2	10/2/1959
														APOA	27	S	31	E	1	SW	NE	300		30.6	Irrigation	Crow Well, Briggs 1, Briggs 2	10/2/1959
														POU/APOA	27	S	31	E	1	SW	NE	300		0.2	Irrigation	Crow Well, Briggs 1, Briggs 2	10/2/1959
														POU/APOA	27	S	31	E	1	SE	NE	200		13.93	Irrigation	Crow Well, Briggs 1, Briggs 2	10/2/1959
TOTAL ACRES:												TOTAL ACRES:											75.53				

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Additional remarks: 61.3 acres will remain at the current place of use (POU) and 14.23 acres will be transferred to a new POU. Of the 14.23 acres that will be transferred to a new POU: 13.93 acres will be moved to tax lot 200 at the location depicted in the map; 0.1 acres will be moved to the NW1/4, NE1/4 of Section 1 to fill a hole in the existing place of use that otherwise covers that quarter-quarter section; and 0.2 acres will be moved to the SW1/4, NE1/4, Section 1 to fill a hole in the existing place of use that otherwise covers that quarter-quarter section. Well Briggs 1 and Briggs 2 will be added as additional POAs for the remaining POU and for the new POU.

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For Place of Use or Character of Use Changes

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

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



Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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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

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
See Well Logs										

10

W.A.W. 1892

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

AUG 15 1991 WATER RESOURCES DEPT. SALEM, OREGON

26S/32E/3/d/d (START CARD) # 20914

(1) OWNER: Name Fred Briggs, Address HC 72 Box 150, City Princeton, State OR, Zip 97721

(2) TYPE OF WORK: [X] New Well, [] Deepen, [] Recondition, [] Abandon

(3) DRILL METHOD: [X] Rotary Air, [] Rotary Mud, [] Cable, [] Other

(4) PROPOSED USE: [X] Domestic, [] Community, [] Industrial, [] Irrigation, [] Thermal, [] Injection, [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No, Depth of Completed Well 36 ft., Explosives used [] [X] Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Amount sacks or pounds. Row 1: 16", 0, 20, Cement, 0, 20, 4 sacks

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

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 12", +2, 20, .250, [X], [], [X], []

Final location of sheets:

(7) PERFORATIONS/SCREENS: [X] Perforations, [] Screens, Method, Type, Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: 20, 30, 1/8", 192, 12", [], [X], []

(8) WELL TESTS: Minimum testing time is 1 hour. [X] Pump, [] Bailer, [] Air, [] Flowing Artesian. Yield gal/min 1000, Drawdown 2", Drill stem at, Time 1 hr.

Temperature of water 68°, Depth Artesian Flow Found, Was a water analysis done? [] Yes By whom, Did any strata contain water not suitable for intended use? [] Too little, [] Salty [] Muddy [] Odor [] Colored [] Other, Depth of strata:

(9) LOCATION OF WELL by legal description: County Harney, Latitude, Longitude, Township 26, N or S Range 32, E or W. W.M., Section 31, S.E. 1/4 S.E. 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL: 10 ft. below land surface, Date 7/20/91, Artesian pressure lb. per square inch, Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 30', 35', 1,000 gal/min, 10'

(12) WELL LOG: Table with columns: Material, From, To, SWL. Row 1: Soil, 0', 5', 8', Grey Rock, 5', 30', 0', Black cinder (W.B.), 30', 36', 10'

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Date started 7/15/91 Completed 7/20/91

(unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Signed Dan Woodruff, WWC Number 1500, Date 7-20-91

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. Signed Harold Woodruff, WWC Number 1254, Date 7-20-91

NOV 23 1988

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

WATER RESOURCES DEPT.
SALEM, OREGON

(START CARD) # 5237

2832/106

1460
Harney

(1) OWNER:

Name Fred Briggs Well Number: _____
Address Box 582
City Lakeview State Or. Zip _____

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:

Domestic Community Industrial Irrigation & stock
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 35 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
20"	0 18'	cement	0 18'	10 sacks	
16"	18 35'				

How was seal placed: Method A B C D E

Other _____

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 16"	+1	25'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 25

(7) PERFORATIONS/SCREENS: NO

Perforations Method _____
 Screens Type _____ Material _____

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

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
500	0	35'	1 hr.

Temperature of water 51 Depth Artesian Flow Found _____

Was a water analysis done? Yes By whom _____

Did any strata contain water not suitable for intended use? Too little

Salty Muddy Odor Colored Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Harney Latitude _____ Longitude _____
Township 27 S N or S, Range 31 E E or W, WM.
Section 1 NW $\frac{1}{4}$ NE $\frac{1}{4}$
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 35 miles S of Burns near Sodhouse-Princeton Rd at Briggs ranch

(10) STATIC WATER LEVEL:

12 ft. below land surface. Date 11-10-88
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
25	35	500	12

(12) WELL LOG:

Ground elevation 4150

Material	From	To	SWL
Soil	0	1	0
Rock, grey hard	1	25	0
Cinders, red water bearing	25	35	12

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Date started 11-7-88 Completed 11-10-88

(unbonded) Water Well Constructor Certification:

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

Signed _____ WWC Number _____
Date _____

(bonded) Water Well Constructor Certification:

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

Signed Harvey Woodruff WWC Number 1254
Date 11-10-88

NOV 23 1988

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

WATER RESOURCES DEPT.
SALEM, OREGON

(START CARD) # 5237

1460
Harney

27/31E/106

(1) OWNER: Well Number: _____

Name Fred Briggs
Address Box 582
City Lakeview State Or. Zip _____

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:

Domestic Community Industrial Irrigation & stock
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 35 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
20"	0	18'	cement	0	18'	10 sacks
16"	18	35				

How was seal placed: Method A B C D E

Other _____

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing	Diameter	From	To	Gauge	Steel				Plastic		Welded		Threaded	
					□	□	□	□	□	□	□	□		
	16"	+1	25'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Final location of shoe(s) 25

(7) PERFORATIONS/SCREENS: NO

Perforations Method _____

Screens Type _____ Material _____

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

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
500	0	35'	1 hr.

Temperature of water 51 Depth Artesian Flow Found _____

Was a water analysis done? Yes By whom _____

Did any strata contain water not suitable for intended use? Too little

Salty Muddy Odor Colored Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Harney Latitude _____ Longitude _____
Township 27 S N or S, Range 31 E E or W, WM.
Section 1 NW 1/4 NE 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 35 miles S of Burns near Sodhouse-Princeton Rd at Briggs ranch

(10) STATIC WATER LEVEL:

12 ft. below land surface. Date 11-10-88
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____			
From	To	Estimated Flow Rate	SWL
25	35	500	12

(12) WELL LOG: Ground elevation 4150

Material	From	To	SWL
Soil	0	1	0
Rock, grey hard	1	25	0
Cinders, red water bearing	25	35	12

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Date started 11-7-88 Completed 11-10-88

(unbonded) Water Well Constructor Certification:

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

Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:

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

Signed Hersch Woodruff WWC Number 1254 Date 11-10-88

10

1893

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

AUG 15 1991
WATER RESOURCES DEPT.
SALEM, OREGON

265/32E/3/d
(START CARD) # 20914

(1) OWNER: Well Number: _____
Name Fredd Briggs
Address HC 72 Box 150
City Princeton State OR Zip 97721

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

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 36 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
16"	0' 20'	Cement	0' 20'	4 sacks	

How was seal placed: Method A B C D E
 Other

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
12"	0'	20'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Final location of sheets: _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Tele/pipe Diameter	size	Casing	Liner
20	30	1/8"	192	12"		<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 1000 Drawdown 2" Drill stem at _____ Time 1 hr.

Temperature of water 68° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Harney Latitude ° Longitude _____
Township 21° North Range 32 E. W. WM.
Section 31 S.E. 1/4 S.E. 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
10 ft. below land surface. Date 7/20/91
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 30'

From	To	Estimated Flow Rate	SWL
30'	35'	1000 gal/min	10'

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Soil	0'	5'	8'
Grey Rock	5'	30'	8'
Black cinder (W.B.)	30'	36'	10'

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Date started 7/15/91 Completed 7/20/91

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed Dan Woodruff WWC Number 1500 Date 7-20-91

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above, all work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.
Signed Harold Woodruff WWC Number 1254 Date 7-20-91

Application for Water Right Transfer

Evidence of Use Affidavit



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

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss
 County of HARNEY)

I, TIM PUCKETT, in my capacity as PRESIDENT OF GOLDEN RULE FARMS, INC.,
 mailing address P.O. BOX 255, CHRISTMAS VALLEY, OR 97641
 telephone number (541)576-2273, being first duly sworn depose and say:

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1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the entire place of use for Certificate # 32394; OR

My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	1/4 1/4	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # _____ has been issued within the past five years; OR
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); OR
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____ (For Historic POD/POA Transfers)

(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): HAY AND PASTURE

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

[Signature]
Signature of Affiant

2-9-22
Date

Signed and sworn to (or affirmed) before me this 9 day of February, 2022.



Rachel Cooper
Notary Public for Oregon

My Commission Expires: August 16, 2024

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input checked="" type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terra-server.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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May

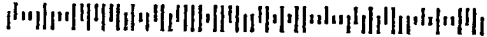


HARNEY ELECTRIC COOPERATIVE INC.
 277 Lottery Lane • PO Box 587
 Hines, Oregon 97738-0587

OWNED BY THOSE WE SERVE

BURNS OFFICE TELEPHONE (541) 573-2061
 OROVADA SERVICE CENTER (775) 272-3336

GOLDEN RULE FARMS INC
 PO BOX 255 C-1 P-5
 CHRISTMAS VALLEY OR 97641-0255



pd 6-20-18
 # 9716

<ul style="list-style-type: none"> • PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT. • FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC. • PLEASE READ YOUR METER BY THE 15TH, IF APPLICABLE, AND RETURN STUB WITH YOUR CURRENT PAYMENT. 		
BILLING SUMMARY	Billing Date	06/06/2018
	Balance Forward	0.00
	Current Billing	7,763.97
	Discount if Paid by	06/25/2018 -1,552.78
	Amount Due if Paid by	06/25/2018 6,211.19
	Amount Due After	06/25/2018 7,763.97

Account #: [REDACTED]

Account#	Meter#	RATE	MULT	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From	Service To	Demand Used	Demand/HP Charge	Tax Charge	Gross Amount
[REDACTED]	16319017	IR1	1.0	83688	87706	4018	281.26		
35 HP Dog Mtn		REG		04/26/18	05/30/18	6			281.26*
[REDACTED]	84411934	IR1	1.0	95754	1901	6147	430.29		
25 HP Sod House		REG		05/04/18	05/31/18				430.29*
[REDACTED]	17531414	IR1	40.0	2950	3016	2640	184.80		
60+5.5hp Dog Mtn		REG		04/27/18	05/30/18	24	195.87		380.67*
[REDACTED]	06280864	IR1	1.0	65576	65732	156	10.92		
#4 60+5hp Dog Mtn		REG		04/27/18	05/30/18	1	422.41		433.33*
[REDACTED]	13030605	IR1	1.0	66208	66250	42	2.94		
#5 30HP Dog Mtn		REG		04/27/18	05/30/18	2	172.28		175.22*

Payments Received Since Last Billing \$2,843.44

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BURNS OFFICE TELEPHONE (541) 573-2061
 OROVADA SERVICE CENTER (775) 272-3336

GOLDEN RULE FARMS INC
 PO BOX 255 C-1 P-5
 CHRISTMAS VALLEY OR 97641-0255

- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.
- PLEASE READ YOUR METER BY THE 15TH, IF APPLICABLE, AND RETURN STUB WITH YOUR CURRENT PAYMENT.

BILLING SUMMARY	Billing Date	07/06/2018
	Balance Forward	0.00
	Current Billing	8,619.01
	Discount if Paid by	07/25/2018 -1,723.80
	Amount Due if Paid by	07/25/2018 6,895.21
	Amount Due After	07/25/2018 8,619.01

June



Account #: [REDACTED]

Account #	Meter #	RATE	MULT	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross Amount
[REDACTED]	16319017	IR1	1.0	87706	91815	4109	287.63		
	35 HP Dog Mtn	REG		05/30/18	07/02/18	5			287.63*
[REDACTED]	84411934	IR1	1.0	1901	1901	0			
	25 HP Sod House	REG		05/31/18	07/06/18				*
[REDACTED]	17531414	IR1	40.0	3016	3144	5120	358.40		
	60+5.5hp Dog Mtn	REG		05/30/18	07/02/18	23	78.26		436.66*
[REDACTED]	06280864	IR1	1.0	65732	65758	26	1.82		
	#4 60+5hp Dog Mtn	REG		05/30/18	07/02/18		431.52		433.34*
[REDACTED]	13030605	IR1	1.0	66250	66906	656	45.92		
	#5 30HP Dog Mtn	REG		05/30/18	07/02/18	2	154.08		200.00*

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Payments Received Since Last Billing \$6,211.19

OWRD

(If you fail to read your meter on any account for 2 consecutive months, HEC will read & charge the acct. \$15.00)

Return This Portion With Your Payment

DATE METERS READ: _____

Read your meter & place the readings on this stub.

Account #	Reading	Meter	Service Description
[REDACTED]	COOP READS MTR	16319017	35 HP Dog Mtn
[REDACTED]	COOP READS MTR	84411934	25 HP Sod House
[REDACTED]	COOP READS MTR	17531414	60+5.5hp Dog Mt
[REDACTED]	COOP READS MTR	06280864	#4 60+5hp Dog M
[REDACTED]	COOP READS MTR	13030605	#5 30HP Dog Mt

Amount Due	6,895.21
Amount Paid	
PAST DUE AFTER	07/25/2018

PAGE 1 OF 3

INV # [REDACTED]

ACCOUNT NAME: GOLDEN RULE FARMS INC

Harney Electric Cooperative, Inc.
 PO Box 587
 Hines, Oregon 97738-0587



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 OROVADA SERVICE CENTER (775) 272-3336

GOLDEN RULE FARMS INC
 PO BOX 255 C-1 P-5
 CHRISTMAS VALLEY OR 97641-0255

- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.
- PLEASE READ YOUR METER BY THE 15TH, IF APPLICABLE, AND RETURN STUB WITH YOUR CURRENT PAYMENT.

BILLING SUMMARY	Billing Date	08/07/2018
	Balance Forward	0.00
	Current Billing	13,700.15
	Discount if Paid by	08/25/2018 -2,740.03
	Amount Due if Paid by	08/25/2018 10,960.12
	Amount Due After	08/25/2018 13,700.15



July

Account #: [REDACTED]

Account #	Meter #	RATE	MULT	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross Amount
[REDACTED]	16319017	IR1	1.0	91815	95359	3544	248.08		248.08*
	35 HP Dog Mtn	REG		07/02/18	07/29/18	5			
[REDACTED]	84411934	IR1	1.0	1901	23736	21835	1,528.46		1,528.46*
	25 HP Sod House	REG		07/06/18	08/01/18				
[REDACTED]	17531414	IR1	40.0	3144	3423	11160	781.20		507.07*
	60+5.5hp Dog Mtn	REG		07/02/18	07/29/18	24	-274.13		
[REDACTED]	06280864	IR1	1.0	65758	65768	10	.70		433.33*
	#4 60+5hp Dog Mtn	REG		07/02/18	07/29/18	5	432.63		
[REDACTED]	13030605	IR1	1.0	66906	67574	668	46.76		200.00*
	#5 30HP Dog Mtn	REG		07/02/18	07/29/18	2	153.24		

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Payments Received Since Last Billing \$6,895.21

OWRD

(If you fail to read your meter on any account for 2 consecutive months, HEC will read & charge the acct. \$15.00)

Return This Portion With Your Payment

DATE METERS READ: _____

Read your meter & place the readings on this stub.

Account #	Reading	Meter	Service Description
[REDACTED]	COOP READS MTR	16319017	35 HP Dog Mtn
[REDACTED]	COOP READS MTR	84411934	25 HP Sod House
[REDACTED]	COOP READS MTR	17531414	60+5.5hp Dog Mt
[REDACTED]	COOP READS MTR	06280864	#4 60+5hp Dog M
[REDACTED]	COOP READS MTR	13030605	#5 30HP Dog Mt

Amount Due	10,960.12
Amount Paid	
PAST DUE AFTER	08/25/2018

PAGE 1 OF 3

INV # 1744

ACCOUNT NAME: GOLDEN RULE FARMS INC

Harney Electric Cooperative, Inc.
 PO Box 587
 Hines, Oregon 97738-0587



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 OROVADA SERVICE CENTER (775) 272-3336

GOLDEN RULE FARMS INC
 PO BOX 255 C-1 P-5
 CHRISTMAS VALLEY OR 97641-0255



pd 9-17-18 \$100.29

- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.
- PLEASE READ YOUR METER BY THE 15TH, IF APPLICABLE, AND RETURN STUB WITH YOUR CURRENT PAYMENT.

BILLING SUMMARY	Billing Date	09/07/2018
	Balance Forward	0.00
	Current Billing	13,763.49
	Discount if Paid by	09/25/2018 -2,752.69
	Amount Due if Paid by	09/25/2018 → 11,010.80
	Amount Due After	09/25/2018 13,763.49

Account #: [REDACTED]

Page 1 of 3

Account#	Meter#	RATE	MULT	Previous Reading	Present Reading	kWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross Amount
[REDACTED]	16319017	IR1	1.0	95359	45	4686	328.02		
	35 HP Dog Mtn	REG		07/29/18	09/02/18	5			328.02*
[REDACTED]	84411934	IR1	1.0	23736	23736	0			
	25 HP Sod House	REG		08/01/18	09/07/18				
[REDACTED]	17531414	IR1	40.0	3423	3645	8880	621.60		
	60+5.5hp Dog Mtn	REG		07/29/18	09/02/18	23			621.60*
[REDACTED]	06280864	IR1	1.0	65768	65768	0			
	#4 60+5hp Dog Mtn	REG		07/29/18	09/02/18				
[REDACTED]	13030605	IR1	1.0	67574	68070	496	34.72		
	#5 30HP Dog Mtn	REG		07/29/18	09/02/18	1	-34.72		

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Payments Received Since Last Billing \$10,960.12

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Sept



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GOLDEN RULE FARMS INC
 PO BOX 255 C-1 P-5
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pd 10-17-18 # 10165

- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.
- PLEASE READ YOUR METER BY THE 15TH, IF APPLICABLE, AND RETURN STUB WITH YOUR CURRENT PAYMENT.

BILLING SUMMARY	Billing Date	10/05/2018
	Balance Forward	0.00
	Current Billing	12,126.73
	Discount if Paid by	10/25/2018 -2,425.35
	Amount Due if Paid by	10/25/2018 ✓ 9,701.38
	Amount Due After	10/25/2018 12,126.73

Account #: [REDACTED]

Account #	Meter #	RATE	MULT	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross Amount
[REDACTED]	16319017	IR1	1.0	45	2962	2917	204.19		
	35 HP Dog Mtn	REG		09/02/18	09/29/18	7			204.19*
[REDACTED]	84411934	IR1	1.0	23736	45506	21770	1,523.90		
	25 HP Sod House	REG		09/07/18	10/05/18				1,523.90*
[REDACTED]	17531414	IR1	40.0	3645	3795	6000	420.00		
	60+5.5hp Dog Mtn	REG		09/02/18	09/29/18	22			420.00*
[REDACTED]	06280864	IR1	1.0	65768	65768	0			
	#4 60+5hp Dog Mtn	REG		09/02/18	09/29/18				*
[REDACTED]	13030605	IR1	1.0	68070	68595	525	36.75		
	#5 30HP Dog Mtn	REG		09/02/18	09/29/18	2	-36.75		*

Payments Received Since Last Billing \$11,010.80

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FEB 06 2020

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GOLDEN RULE FARMS INC
 PO BOX 255 C-1 P-5
 CHRISTMAS VALLEY OR 97641-0255



*pd 11-16-18
 #10250*

- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.
- PLEASE READ YOUR METER BY THE 15TH, IF APPLICABLE, AND RETURN STUB WITH YOUR CURRENT PAYMENT.

BILLING SUMMARY	Billing Date	11/07/2018
	Balance Forward	0.00
	Current Billing	2,414.00
	Discount if Paid by	11/25/2018 -482.80
	Amount Due if Paid by	11/25/2018 ✓ 1,931.20
	Amount Due After	11/25/2018 2,414.00

Account #	Meter #	RATE	MULT	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross Amount
██████████	16319017	IR1	1.0	2962	6177	3215	257.20		257.20*
	35 HP Dog Mtn	REG		09/29/18	10/29/18	5			
██████████	84411934	IR1	1.0	45506	45506	0			
	25 HP Sod House	REG		10/05/18	11/07/18				
██████████	17531414	IR1	40.0	3795	3806	440	35.20		35.20*
	60+5.5hp Dog Mtn	REG		09/29/18	10/29/18	22			
██████████	06280864	IR1	1.0	65768	65768	0			*
	#4 60+5hp Dog Mtn	REG		09/29/18	10/29/18				
██████████	13030605	IR1	1.0	68595	68635	40	3.20		*
	#5 30HP Dog Mtn	REG		09/29/18	10/29/18	2	-3.20		

Payments Received Since Last Billing \$9,701.38

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13363 -

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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FEB 18 2022



Applicant(s): Golden Rule Farms, Inc.

Mailing Address: P.O. Box 255

City: Christmas Valley

State: OR

Zip Code: 97641

Daytime Phone: (541) 576-2273

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>27 S</u>	<u>31 E</u>	<u>1</u>	<u>SW SE</u>	<u>300</u>	<u>EFRU</u>	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Farm Use</u>
<u>27 S</u>	<u>31 E</u>	<u>1</u>	<u>SW NE</u>	<u>300</u>	<u>EFRU</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Farm Use</u>
<u>27 S</u>	<u>31 E</u>	<u>1</u>	<u>SE NE</u>	<u>200</u>	<u>EFRU</u>	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Farm Use</u>
<u>27 S</u>	<u>32 E</u>	<u>6</u>	<u>NE NE</u>	<u>100</u>	<u>EFRU</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>Farm Use</u>
<u>27 S</u>	<u>32 E</u>	<u>6</u>	<u>NW NE</u>	<u>100</u>	<u>EFRU</u>	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>Farm Use</u>
<u>27 S</u>	<u>32 E</u>	<u>6</u>	<u>NE NW</u>	<u>100</u>	<u>EFRU</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>Farm Use</u>
<u>27 S</u>	<u>32 E</u>	<u>6</u>	<u>NW NW</u>	<u>100</u>	<u>EFRU</u>	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>Farm Use</u>

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

Harney 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: 0.94 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:

This transfer proposes to change a portion of the place of use under Certificate 32394 to a more productive field to farm and add two points of diversion.

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

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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): Hezo 3.010 / EPLU-1
- 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
		<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
		<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
		<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.

Name: Brandon McMillon Title: Planning Director

Signature: [Signature] Phone: (571) 573-6655 Date: 1/28/2022

Government Entity: Harney County

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: _____

February 17, 2022

Lindsay Thane

Admitted in Oregon, Washington and
Montana

T: 503-796-2059

C: 406-214-1918

lthane@schwabe.com

VIA FIRST CLASS MAIL

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

RE: Applications for Permanent Water Right Transfers for Certificates: 91644, 32394,
and 91418
Our File No.: 135315-251156

To Whom it May Concern:

Enclosed for filing are three Permanent Water Right Transfer Applications for Certificates 91644, 32394, and 91418. The applications are submitted on behalf of Golden Rule Farms Inc.

The transfer applications are submitted along with the following documents:

1. Application fees for each Permanent Water Right Transfer application via a check made payable to OWRD in the amount of the required filing fee;
2. Land use information forms and attachments completed by Harney County;
3. Evidence of Use Affidavits for each transfer application;
4. Well logs for the proposed wells in each application;
5. Three Transfer Reimbursement Authority Estimate Applications, together with three checks made payable to OWRD in the amount of \$125.00 for each of the required filing fees.

The three water right certificates included in these three transfer applications have been proposed for transfer under transfer application T-13363. T-13363 is still pending and awaiting a contested case hearing on the protest of OWRD's preliminary determination that was filed.

Oregon Water Resources Department
February 17, 2022
Page 2

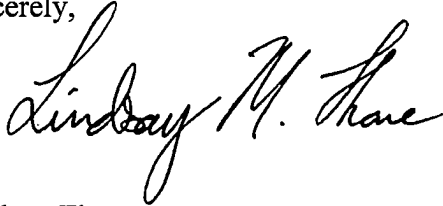
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FEB 18 2022

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Please let me know if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Lindsay M. Thane". The signature is written in a cursive style with a large initial "L" and "M".

Lindsay Thane

LTH

Enclosures

cc: Tim Puckett (via email only)
Scott Montgomery (via email only)
Shonee Langford, Schwabe (via email only)
Elizabeth Howard, Schwabe (via email only)