

Application for Permanent Water Right Transfer

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.
- 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: C-95837**
 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.

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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.

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°).

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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 PO Box 255			FAX NO.
CITY Christmas Valley	STATE OR	ZIP 97641	E-MAIL
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 Scott D Montgomery		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401
ADDRESS PO Box 767			FAX NO.
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.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:
Add additional & existing wells in the nearby vicinity.

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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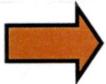
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By my signature below, I confirm that I understand:

- 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.



Tim Pucket

 Applicant signature

Tim Pucket, President
 Print Name (and Title if applicable)

3-24-22
 Date
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 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

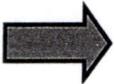
RECEIVING LANDOWNER NAME NA		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.
CITY	STATE	ZIP	E-MAIL
Describe any special ownership circumstances:			
The confirming Certificate shall be issued in the name of: <input checked="" type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner			

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 NA	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 NA	ADDRESS	
CITY	STATE	ZIP



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	ADDRESS 360 N ALVORD	
CITY Burns	STATE OR	ZIP 97720

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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 # 95837

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Description of Water Delivery System

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System capacity: 7.37 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 wells & conveyed to center pivot sprinklers that irrigate the 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		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
A1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51265	25	S	31	E	28	SE SW	6102	1240' N & 2750' W from SE cor, Sec 28
18	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 50777	25	S	31	E	33	NW NW	6100	770' S & 1320' E fom NW cor, Sec 33
18A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50501	25	S	31	E	33	NE NW	6100	1120' S & 3695' W from NE cor, Sec 33
A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50358	25	S	31	E	28	NE SE	5700	1365' N & 100' W from SE cor, Sec 28
B	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 51784	25	S	31	E	33	NW NE	5600	365' S & 2405' W from NE cor, Sec 33

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

- | | |
|--|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> 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.

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										

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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 PUCKET, GOLDEN RULE FARMS, in my capacity as PRESIDENT,
 mailing address PO BOX 255, CHRISTMAS VALLEY, OR 97641
 telephone number (541)576-2273, being first duly sworn depose and say:

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

- Personal observation Professional expertise

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2. I attest that:

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

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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 # C-95837 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)

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

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.

Timothy P. Richards
Signature of Affiant

3-28-22
Date

Signed and sworn to (or affirmed) before me this 28 day of March, 2022.



Rachel Cooper
Notary Public for Oregon

My Commission Expires: August 16, 2024

Supporting Documents	Examples
<input checked="" 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 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	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. Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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STATE OF OREGON

COUNTY OF HARNEY

CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

GOLDEN RULE FARMS INC.
PO BOX 255
CHRISTMAS VALLEY OR 97641

confirms the right to the use of water perfected under the terms of Permit G-18413. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the point of diversion from the source. The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-15118

SOURCE OF WATER: SIX WELLS IN MALHEUR LAKE BASIN

PURPOSE or USE: IRRIGATION OF 590.1 ACRES

MAXIMUM RATE: 7.37 CUBIC FEET PER SECOND (CFS); FURTHER LIMITED AS FOLLOWS:

NO MORE THAN 3.06 CFS IN ANY COMBINATION FROM WELLS 1A AND 18 FOR IRRIGATION OF 245.0 ACRES; AND

NO MORE THAN 1.47 CFS IN ANY COMBINATION FROM WELLS 1 AND 2 FOR IRRIGATION OF 117.6 ACRES; AND

NO MORE THAN 2.84 CFS IN ANY COMBINATION FROM WELLS 3 AND 16 FOR IRRIGATION OF 227.5 ACRES

PERIOD OF USE: MARCH 1 THROUGH OCTOBER 31

DATE OF PRIORITY: APRIL 5, 2000

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The wells are located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25 S	31 E	WM	28	SE SW	WELL 1A - 1240 FEET NORTH AND 2750 FEET WEST FROM SE CORNER, SECTION 28
25 S	31 E	WM	31	NW SE	WELL 1 - 1310 FEET NORTH AND 1505 FEET WEST FROM SE CORNER, SECTION 31
25 S	31 E	WM	31	SW SE	WELL 2 - 130 FEET NORTH AND 210 FEET EAST FROM S1/4 CORNER, SECTION 31

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NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484 and ORS 536.075. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 183.484, ORS 536.075 and OAR 137-004-0080, you may petition for judicial review and petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied. In addition, under ORS 537.260 any person with an application, permit or water right certificate subsequent in priority may jointly or severally contest the issuance of the certificate within three months after issuance of the certificate.

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25 S	31 E	WM	33	NW NW	WELL 18 - 770 FEET SOUTH AND 1320 FEET EAST FROM NW CORNER, SECTION 33
26 S	30 E	WM	1	SW NE	WELL 3 - 2160 FEET SOUTH AND 2340 FEET WEST FROM NE CORNER, SECTION 1
26 S	30 E	WM	1	SW NW	WELL 16 - 250 FEET NORTH AND 730 FEET EAST FROM W1/4 CORNER, SECTION 1

The amount of water used for irrigation under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 3 acre-feet for each acre irrigated during the irrigation season of each year.

The place of use is located as follows:

WELL 1A AND WELL 18 – 245.0 ACRES					
Twp	Rng	Mer	Sec	Q-Q	Acres
25 S	31 E	WM	28	SW NE	30.1
25 S	31 E	WM	28	SE NW	29.8
25 S	31 E	WM	28	NE SW	30.4
25 S	31 E	WM	28	NW SE	30.8
25 S	31 E	WM	33	NE NW	25.4
25 S	31 E	WM	33	NW NW	27.9
25 S	31 E	WM	33	SW NW	35.1
25 S	31 E	WM	33	SE NW	31.5
25 S	31 E	WM	33	NE SW	2.0
25 S	31 E	WM	33	NW SW	2.0

WELL 1 AND WELL 2 – 117.6 ACRES					
Twp	Rng	Mer	Sec	Q-Q	Acres
25 S	31 E	WM	31	NE SE	30.8
25 S	31 E	WM	31	NW SE	28.3
25 S	31 E	WM	31	SW SE	31.1
25 S	31 E	WM	31	SE SE	27.4

WELL 3 AND WELL 16 – 227.5 ACRES						
Twp	Rng	Mer	Sec	Q-Q	GLot	Acres
26 S	30 E	WM	1	NE NE	1	32.5
26 S	30 E	WM	1	NW NE	2	32.5
26 S	30 E	WM	1	SW NE		32.5
26 S	30 E	WM	1	SE NE		32.5
26 S	30 E	WM	1	NE NW	3	32.5
26 S	30 E	WM	1	NW NW	4	32.5
26 S	30 E	WM	1	SW NW		32.5

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The quantity of water diverted at the new point of appropriation (Well 16), shall not exceed the quantity of water lawfully available at the original point of appropriation (Original Well 16) located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
26 S	30 E	WM	1	SW NW	ORIGINAL WELL 16 - 25 FEET NORTH AND 1300 FEET EAST FROM W1/4 CORNER, SECTION 1

The combined quantity of water diverted at the new points of appropriation (Wells 1, 1A, 2, 3, and 18), together with that diverted at the old points of appropriation (Wells 15, Original Well 16, and Well 17) shall not exceed the quantity of water lawfully available at the original points of appropriation (Wells 15, Original Well 16, and Well 17) located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25 S	30 E	WM	36	SE SE	WELL 15 - 30 FEET NORTH AND 20 FEET WEST FROM SE CORNER, SECTION 36
26 S	30 E	WM	1	SW NW	ORIGINAL WELL 16 - 25 FEET NORTH AND 1300 FEET EAST FROM W1/4 CORNER, SECTION 1
26 S	30 E	WM	1	SW NW	WELL 17 - 16 FEET NORTH AND 100 FEET EAST FROM W1/4 CORNER, SECTION 1

Water use measurement conditions:

- a. The water user shall maintain, in good working order, a totalizing flow meter, or another suitable measuring device approved by the Director, at each point of appropriation (new and existing), shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the water user to report general water use information, including the place and nature of use of water under the right.
- b. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

Water shall be acquired from the same aquifer as the original points of appropriation.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this right, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The wells shall be maintained in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine the water level elevation in the well at all times.

The Director may require water level or pump test results every ten years.

Failure to comply with any of the provisions of this right may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the right.

This right is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The right to the use of the water for the above purpose is restricted to beneficial use on the place of use described.

Issued SEP 14 2021

Dwight French
 Water Right Services Division Administrator, for
 Thomas M. Byler, Director
 Oregon Water Resources Department

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APR 04 2022

OWRD

HARN 51265

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

WELL LABEL # L 83208

START CARD # 176018

(1) LAND OWNER Owner Well I.D. #4

First Name Jett Last Name Blackburn
 Company _____
 Address 707 Ponderosa Village
 City Burns State OR Zip 97720

(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 112 ft.

BORE HOLE			SEAL				sacks/ lbs	
Dia	From	To	Material	From	To	Amt		
26	0	20	Bentonite	0	20	35	S	
22	20	112						

How was seal placed: Method A B C D E
 Other poured dry and tam
 Backfill placed from 112 ft. to 0 ft. Material 3/8 pea gravel
 Filter pack from _____ ft. to _____ ft. Material _____ Size pea gravel
 Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Std	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22		1	21	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	14		2	112	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

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

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type roscoe moss Material stainless steel

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrns/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Liner	14	62	102	100		<u>cont.</u>	

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
100	3		

Temperature 59 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 25 S N/S Range 31 E E/W WM
 Sec 28 NW 1/4 of the NE 1/4 Tax Lot 100
 Tax Map Number _____ Lot _____
 Lat _____ ° 0' _____ " or _____ DMS or DD
 Long _____ ° 0' _____ " or _____ DMS or DD
 Street address of well Nearest address

Hwy 205 L5 Lane

(10) STATIC WATER LEVEL Date _____ SWL(psi) + SWL(ft)

Existing Well / Predeepening	Date	SWL(psi)	SWL(ft)
Completed Well	04-28-2006		55

Flowing Artesian?

WATER BEARING ZONES Depth water was first found 60

SWL Date	From	To	Est Flow	SWL(psi)	SWL(ft)
04-28-2006	60	105	500		55

(11) WELL LOG Ground Elevation _____

Material	From	To
clay loom topsoil	0	1
sand med brn	1	12
clay brn	12	48
clay grey	48	65
sand fine blk	65	105
clay blue	105	112

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MAY 02 2006

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 04-17-2006 Completed 04-28-2006

(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 _____
 Password: (if filing electronically) _____
 Signed _____

(bonded) Water Well Constructor Certification

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

License Number 1424 Date 05-01-2006
 Password: (if filing electronically) _____
 Signed [Signature]
 Contact Info (optional) _____

13968

STATE OF OREGON
WATER SUPPLY WELL REPORT MAR 22 2002
 (as required by ORS 537.765)

WELL ID # L **52341**
 (START CARD) # **144375**

Instructions for completing this report are on the last page of this form.

(1) OWNER:

Name **Carpenter Ranch, LLC**
 Address **1930 Lewis Street, SE**
 City **Salem** State **OR** Zip **97302**

(2) TYPE OF WORK:

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well **126** ft.
 Explosives used Yes No Type Amount

HOLE			SEAL			Amount	
Diameter	From	To	Material	From	To	sacks or pounds	Amount
10	0	50	Bentonite	0	50	28	sks
6	50	82					

Didn't disturb existing seal around 14" casing.

How was seal placed: Method A B C D E
 Other **Poured & probed.**
 Backfill placed from **133** ft. to **126** ft. Material **Sand & clay**
 Gravel placed from **80** ft. to **126** ft. Size of gravel **pea**

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6	+2	82	.250	X		X	
Existing	14	+2	80	.250	X		X	
Liner:	12	1	126	.250	X		X	

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations		Method		Factory		Material		
From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner	Material
85	125	.125	con't	12			X	SS

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

Pump	Bailer	X Air	Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
1500		70	1 hr.

Temperature of Water **54** 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 **25S** N or S. Range **31E** E or W. of WM.
 Section **33** Lot **NW** Block **1/4** NW Subdivision **1/4**
 Tax lot **6100** Lot Block Subdivision
 Street Address of Well (or nearest address) **Weaver Springs Rd, Burns, OR 97720**

(10) STATIC WATER LEVEL:

38 ft. below land surface. Date **3/8/2002**
 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found **83**

From	To	Estimated Flow Rate	SWL
83	124	2500	38

(12) WELL LOG:

Material	From	To	SWL
Clay brown firm	0	7	
Sand brown	7	24	
Clay green	24	42	
Sandstone brown soft	42	61	
Claystone blue soft	61	83	
Gravelloosely cemented	83	86	
Sand eroded out	86	95	
Gravel & sand loosely cemented	95	96	
Sand eroded out	96	108	
Gravel loosely cemented	108	124	
Claystone blue & gray	124	133	

Video camera down well. There was 80' of 14" casing. bottom of well was 110'. Air lifted bottom of well from 110 down to 133'. Re-vidoeed the well, there was a 20' piece of 12" perforated pipe set in the bottom 133'. Used 12" spear to fish out. Drilled in a 6" gravel feed pipe next to 14" casing. Cleaned out 14" hole down to 126'. Re-vidoeed the well. Installed well screen & 15 tons of pea gravel.

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Date started **2/26/2002**

Completed **3/8/2002**

(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 water supply well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed *[Signature]* WWC Number **1394**
 Date **3/20/2002**
Mack Drilling Company, Inc.

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed *[Signature]* WWC Number **1394**
 Date **3/20/2002**
Mack Drilling Company, Inc.

13968

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

HARN
50501

WELL I.D. # L 26601
START CARD # 116923

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number 11
Name Carpenter Ranch
Address P.O. Box 607
City Seaside State OR Zip 97138

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILLING METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 120 ft.
Explosives used Yes No Type None Amount None

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
18	0	102	Bentonite	42	0	63 Sacks
14	102	125	-	-	-	-
10	125	145	-	-	-	-

How was seal placed: Method A B C D E
 Other Air Engine
Backfill placed from 102 ft. to 42 ft. Material Native
Gravel placed from - ft. to - ft. Size of gravel -

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 14	13	102	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"/>

(7) PERFORATIONS/SCREENS:

Perforations Method Touch
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
102	87	250	50	1 1/2		<input checked="" 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
1500	23	100	2 1/2 hr.

Temperature of water _____ 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 25 S N or S Range 31 E W. or W. M. 14
Section 33 NE 1/4 NW 1/4
Tax Lot 5600 Block _____ Subdivision _____
Street Address of Well (or nearest address) 178 W. Main St. Seaside, Or.

(10) STATIC WATER LEVEL:
27 ft. below land surface. Date 2-10-00
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 42'

From	To	Estimated Flow Rate	SWL
42	61	700	27
82	105		27
115	123		27

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Top Soil	0	6	27
Brown Sand	6	28	27
Green Clay	28	42	27
Brown Sand Stone	42	61	27
Blue Clay Stone w/ Gravel	61	82	27
Grey Sand w/B	82	105	27
Blue Clay Stone	105	115	27
Brown Sand Stone w/ Gravel	115	123	27
Grey Clay	123	145	27

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FEB 17 2000 APR 04 2022
WATER RESOURCES DEPT. OWRD
SALEM, OREGON

Date started 2-8-00 Completed 2-10-00
(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 water supply well construction standards. Materials used and information reported above are true to the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
Signed Danald H. Reed WWC Number 1521 Date 2-14-00

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WELL I.D.#

STATE OF OREGON WATER SUPPLY WELL REPORT NOV 12 1998

(START CARD) # L-26594

Instructions for completing this report WATER RESOURCES DEPT. SALEM, OREGON

(1) OWNER: Name Carpenter Ranch Address P.O. Box 607 City Burns State Ore Zip 97720

(9) LOCATION OF WELL by legal description: County Harney Latitude Longitude Township 25 N or S Range 31 E or W. WM. Section 34 SW 1/4 SW 1/4 Tax Lot 5700 Lot Block Subdivision Street Address of Well (or nearest address) Weaver Springs Rd.

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(10) STATIC WATER LEVEL: 26 ft. below land surface. Date 10-26-98 Artesian pressure lb. per square inch. Date

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

(11) WATER BEARING ZONES: Depth at which water was first found 52

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

Table with 4 columns: From, To, Estimated Flow Rate, SWL. Data rows: 52 to 96 (1000, 26), 131 to 145 (500, 26)

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 45 ft. Explosives used [] Yes [X] No Type Amount

HOLE SEAL table with columns: Diameter, From, To, Material, Sacks or pounds. Data: 16 to 98 (Bentonite, 46), 12 to 98 (145)

(12) WELL LOG: Ground Elevation

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

Well Log table with columns: Material, From, To, SWL. Data: Top Soil (0-8), Brown Sand (8-27), Brown Clay (27-52), Grey Sandstone (52-96), Blue Clay (96-131), Grey Sandstone (131-145)

(6) CASING/LINER table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Data: Casing 12 to 98 (210)

Final location of shoe(s)

(7) PERFORATIONS/SCREENS table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Data: 58 to 98 (125, 200, 12)

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

Well Tests table with columns: Pump/Bailer/Air/Flowing, Yield gal/min, Drawdown, Drill stem at, Time. Data: 1500+ yield, 36 drawdown, 80 drill stem, 1 hr time

Date started 10-25-98 Completed 10-26-98 (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 water supply well construction standards.

Temperature of water 54 Depth Artesian Flow Found Was a water analysis done? NO Yes By whom Did any strata contain water not suitable for intended use? NO Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

(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 water supply well construction standards. Signed Donald H. Reed Date 10-22-98

STATE OF OREGON
WATER SUPPLY WELL REPORT

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

05-24-2011

WELL LABEL # L 101835

START CARD # 205801

(1) LAND OWNER Owner Well I.D. 101835

First Name _____ Last Name _____
Company CARPENTER RANCH LLC
Address 1930 LEWIS ST
City SALEM State OR Zip 97302

(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 AIR LIFT PUMP

(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 189.00 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
30	0	25	Bentonite Chips	0	25	52	S
24	25	80					
18	80	170					
14	170	189					

How was seal placed: Method A B C D E

Other POURED & PROBED

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

Filter pack from 0 ft. to 168 ft. Material WELL ROC Size 3/4"

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	24	<input checked="" type="checkbox"/>	1	80	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	14	<input checked="" type="checkbox"/>	1.5	189	.250	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) 189

Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method MILLS KNIFE

Screens Type _____ Material _____

Perf/S	Casing/Screen	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/pipe size
Perf	Casing		95	160	.375	3	1,140	

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

Pump Bailer Air Flowing Artesian

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

800	23	150	4
1,000	26	180	2

Temperature 62 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Harney Twp 25.00 S N/S Range 31.00 E E/W WM
Sec 34 SE 1/4 of the NW 1/4 Tax Lot 7400
Tax Map Number _____ Lot _____
Lat _____ ' _____ " or _____ DMS or DD
Long _____ ' _____ " or _____ DMS or DD
 Street address of well Nearest address

198 WEAVER SPRINGS RD, BURNS, OR 1.5 MI W OF HWY 205

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+	SWL(ft)
Completed Well	05-18-2011			60

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 78

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
05-18-2011	95	160	1,000			60

(11) WELL LOG

Ground Elevation _____

Material	From	To
CLAY BR. SILTY	0	3
SAND BR SILTY FIRM	3	9
SAND GRAY SILTY FIRM	9	20
CLAY BLUE STICKY	20	33
CLAY BR SILTY SOFT	33	45
CLAY GREEN STICKY SOME SILTY	45	48
CLAY GRAY W/SAND FINE	48	50
CLAY BROWN & GRAY FIRM	50	51
GRAVEL W/CLAY GRAY	51	53
CLAY GRAY SILTY & STICKY	53	56
CLAY GRAY FIRM FLAKEY	56	61
CLAY BLUE STICKY W/SAND FINE BLK	61	64
CLAY BLUE FIRM	64	68
CLAY SANDY BLUE FINE	68	73
CLAY GRAY MED-HARD	73	78
CLAY DARK GRAY SANDY	78	80
CLAY GRAY SANDY BLK	80	89
SAND M-COARSE W/CLAY BLUE	89	93
SANDSTONE BLK COARSE	93	95

Date Started 09-27-2010 Completed 05-18-2011

(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 1394 Date 05-24-2011

Electronically Filed

Signed EUGENE MACK (E-filed)

(bonded) Water Well Constructor Certification

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

License Number 1394 Date 05-24-2011

Electronically Filed

Signed EUGENE MACK (E-filed)

Contact Info (optional)

13968

05-24-2011

START CARD # 205801

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amt	sacks/lbs
6.12	189	370	Cement	189	370	18	S

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

(7) PERFORATIONS/SCREENS

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

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

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

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

Water Bearing Zones

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

(11) WELL LOG

Material	From	To
CLAY GREEN SANDY W/SAND STREAKS	95	100
SANDSTONE GREY COARSE SOFT	100	102
SAND GREY COARSE W/CINDERS	102	103
CLAYSTONE & SANDSTONE LAYERED	103	106
CLAYSTONE GREEN W/GRAVEL	106	112
CLAYSTONE GRAY SOFT W/FRXS	112	116
CLAY SOFT STICKY	116	119
SAND BLK W/SILT FINE	119	123
CLAYSTONE SOFT & SILTY	123	128
SANDSTONE M-COARSE W/SHELLS	128	137
SAND FINE TO MED W/CLAY M-HARD	137	143
CLAY GRAY W/SAND FINE LAYERS SOFT	143	154
CLAY GREEN SILTY SANDY FINE	154	158
CLAY GREY STICKY SOME SILT	158	164
CLAY STICKY BLUE GRAY	164	167
SANDROCK HARD	167	168
CLAY DARK GREEN STICKY SWELLING	168	174
CLAYSTONE FIRM	174	176
CLAY GREEN & GRAY	176	184
CLAYSTONE GRAY M-HARD	184	189
CLAYSTONE GRAY HARD	189	210
CLAYSTONE WHITE & LIGHT GRAY	210	226
CLAYSTONE GRAY W/HARD SEAMS	226	245
CLAYSTONE GRAY W/BR LAYERS HARD	245	360
CLAY BROWN W/CLAYSTONE BR SOFT	360	370

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Comments/Remarks

OWRD

24" SHOE AT 80 FEET. NO WATER FOUND BELOW 160 FEET.

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

RECEIVED
 APR 04 2022
 OWRD

TRANSMITTAL

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

Date: 4/1/22
 Attention: Transfer
 RE: App Transfer

[X] Prints Plans Plat Specifications.

Attached is a Application for Permanent Transfer on C-95837 for Golden Rule Farms.

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

Copies	No.	Description
1	1	Application for Transfer (9 pages letter bond)
1	2	Transfer Map (1 page legal bond)
1	3	Land Use Form (2 pages letter bond)
1	4	Evidence of use (2 pages letter bond)
1	5	Check for \$2660.00
1	6	Well Logs (7 pages letter bond)
1	7	Certificate #95837

Signed: Deise Montgomery

13968

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 # 95837

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Description of Water Delivery System

System capacity: 7.37 cubic feet per second (cfs) OR

_____ gallons per minute (gpm)

OWRD

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 wells & conveyed to center pivot sprinklers that irrigate the 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.)

A1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 50339	25	S	31	E	28	SE	SW	6102	1240' N & 2750' W from SE cor, Sec 28
1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1837	25	S	31	E	31	NW	SE	6600	1310' N & 1505' W fom SE cor, Sec 31
2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51504	25	S	31	E	31	SW	SE	6600	130' N & 210' E fom S 1/4 cor, Sec 31
3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51772	26	S	30	E	1	SW	NE	100	2160' S & 2340' W fom NE cor, Sec 1
16	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51555	26	S	30	E	1	SW	NW	200	250' N & 730' E fom W 1/4 cor, Sec 1
18	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 50777	25	S	31	E	33	NW	NW	6100	770' S & 1320' E fom NW cor, Sec 33
18A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50501	25	S	31	E	33	NE	NW	6100	1120' S & 3695' W from NE cor, Sec 33
A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50358	25	S	31	E	28	NE	SE	5700	1365' N & 100' W from SE cor, Sec 28
B	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 51784	25	S	31	E	33	NW	NE	5600	365' S & 2405' W from NE cor, Sec 33