

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

RECEIVED
APR 11 2022

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

OWRD

- 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? 3 List them here: 53450, 53452, 84982**
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: **13073** / ____ / ____

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°).

13973

Part 4 of 5 – Applicant Information and Signature

Applicant Information

OWRD

APPLICANT/BUSINESS NAME Daniel Roth		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 24		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 Anderson Engineering & Surveying, Inc.		PHONE NO. 541-947-4407	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 28		FAX NO. 541-947-2321	
CITY Lakeview	STATE OR	ZIP 97630	E-MAIL darryla@andersonengineering.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:

Transfer of water from the outer edges of 3 existing pivots to fill in the remaining area of an existing partial pivot not currently covered. Also, change the point of appropriation on one of the pivots to an existing well that is located at the center of the pivot, replacing the approved well which is located approximately ½ mile away.

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.

RECEIVED

APR 11 2022

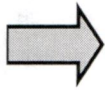
OWRD

13973

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: Lake County Examiner.
- 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.



Daniel Roth
Applicant signature

DANIEL ROTH 4-6-22
Print Name (and Title if applicable) Date

RECEIVED
APR 11 2022

Applicant signature

Print Name (and Title if applicable) Date

OWRD

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.
NA				
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				

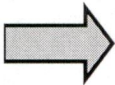
13973

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 Lake County	ADDRESS 513 Center Street	
CITY Lakeview	STATE OR	ZIP 97630

ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP

RECEIVED

APR 11 2022

OWRD

13973

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 # 53450

RECEIVED

Description of Water Delivery System

APR 11 2022

System capacity: 1.60 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 well into a pivot where it is distributed on 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	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 7	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 224, 4578	25	S	18	E	3	SE	SW	300	4050' SOUTH AND 3970' WEST OF THE NE CORNER SECTION 3
Well 8	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 225	25	S	18	E	3	SE	NE	300	1400' SOUTH AND 1320' WEST OF THE NE CORNER SECTION 3
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										

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 checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input 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.

13973

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 # 53450

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		
25	S	18	E 3 NE SW	300		1.77	irrigation	Well 7	12/18/ 1980	POU/POA	25	S	18	E 3 NE NE	300	1	4.1		Well 8	12/18/ 1980		
25	S	18	E 3 NW SW	300		0.75	irrigation	Well 7	12/18/ 1980	POU/POA												
25	S	18	E 3 SW SW	300		0.34	irrigation	Well 7	12/18/ 1980	POU/POA												
25	S	18	E 3 SE SW	300		1.24	irrigation	Well 7	12/18/ 1980	POU/POA												
						TOTAL ACRES:	4.10							TOTAL ACRES:	4.10							

RECEIVED
APR 11 2022
OWRD

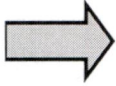
13973

Additional remarks: _____.

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: NA.



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 # NA;
Surface water primary Certificate # NA.

RECEIVED
APR 11 2022

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

OWRD

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
Well 7	yes	Lake 224 Lake 4578	590	14”	Unknown	Unknown	unknown	63’	Basalt	
Well 8	yes	Lake 225	370	14”	+1-20’	0-20	NA	57	Lava rock	

13973

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 # 53452

RECEIVED

APR 11 2022

Description of Water Delivery System

System capacity: 1.61 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 well into a pivot where it is distributed on 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	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 8	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 225	25	S	18	E	3	SE	NE	300	1400' SOUTH AND 1320' WEST OF THE NE CORNER SECTION 3
Well 9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 51691	25	S	18	E	3	NE	SE	300	LOCATED 3934' SOUTH AND 1368' WEST OF THE NE CORNER SECTION 3
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										

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

13973

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 # 53452

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					
25	S	18	E 3 NE SE	300		0.63	irrigation	Well 8	2/24/1981	POU	25	S	18	E 3 NE NE	300	1	5.1		Well 8	2/24/1981					
25	S	18	E 3 SW SE	300		1.67	irrigation	Well 8	2/24/1981	POU	25	S	18	E 3 NE SE	300		30.97	irrigation	Well 9	2/24/1981					
25	S	18	E 3 SE SE	300		2.80	irrigation	Well 8	2/24/1981	POU	25	S	18	E 3 NW SE	300		32.0	irrigation	Well 9	2/24/1981					
25	S	18	E 3 NE SE	300		30.97	irrigation	Well 8	2/24/1981	POA	25	S	18	E 3 SW SE	300		32.33	irrigation	Well 9	2/24/1981					
25	S	18	E 3 NW SE	300		32.0	irrigation	Well 8	2/24/1981	POA	25	S	18	E 3 SE SE	300		28.10	irrigation	Well 9	2/24/1981					
25	S	18	E 3 SW SE	300		32.33	irrigation	Well 8	2/24/1981	POA															
25	S	18	E 3 SE SE	300		28.10	irrigation	Well 8	2/24/1981	POA															
						TOTAL ACRES:	5.10												TOTAL ACRES:	5.10					

Additional remarks: _____

RECEIVED

APR 11 2022

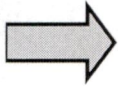
OWRD

13973

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: NA.



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 # NA;
Surface water primary Certificate # NA.

RECEIVED

APR 11 2022

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

OWRD

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
Well 8	yes	Lake 225	370	14"	+1-20'	0-20	NA	57	Lava rock	
Well 9	yes	Lake 51691	220	18"	+1-19	0-19	NA	19	Lava rock	

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 # 84982

Description of Water Delivery System

System capacity: 7.82 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

RECEIVED

APR 11 2022

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 well into a pivot where it is distributed on 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		¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 203	25	S	18	E	1	SE	SE	200	960' NORTH AND 1100' WEST OF THE NE CORNER SECTION 1
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 238	25	S	18	E	18	NW	NE	1900	60' SOUTH AND 1330' WEST OF THE NE CORNER SECTION 18
Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 237 LAKE 51147 LAKE 51503	25	S	18	E	7	SE	NW	1900	1700' SOUTH AND 2930' WEST OF THE NE CORNER SECTION 7
Well 5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 4372	25	S	18	E	2	NE	SW	200	650' SOUTH AND 1130' WEST OF THE E1/4 SECTION 2
Well 8	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 225	25	S	18	E	3	SE	NE	300	1400' SOUTH AND 1320' WEST OF THE NE CORNER SECTION 3

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 checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input 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?

13973

- 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.

RECEIVED

APR 11 2022

OWRD

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 # 84982

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
25	S	18	E	7	NE	SW	1900		1.37	irrigation	Well 2	12/18/1980	POU/POD	25	S	18	E	3	NE	NE	300	1	9.1		Well 8	12/18/1980
25	S	18	E	7	NE	SW	1900		1.13	irrigation	Well 2	12/18/1980	POU													
25	S	18	E	7	NE	SE	1900		2.21	irrigation	Well 2	12/18/1980	POU													
25	S	18	E	7	NW	SE	1900		0.81	irrigation	Well 2	12/18/1980														
25	S	18	E	7	SE	SE	1900		0.06	irrigation	Well 2	12/18/1980														
25	S	18	E	18	NE	NE	1900		1.01	irrigation	Well 2	12/18/1980														
25	S	18	E	18	NW	NE	1900		0.51	irrigation	Well 2	12/18/1980														
25	S	18	E	18	NE	NW	1900		2.00	irrigation	Well 2	12/18/1980														
						TOTAL ACRES:		9.10								TOTAL ACRES:		9.10								

RECEIVED

APR 11 2022

OWRD

Additional remarks: The final proof Survey prepared by the Department for Permit G-9261 (original certificate 80945, cancelled in transfer T-9420 and the remained covered in certificate 84982) incorrectly identified the location of the Government Lots (both numbered and unnumbered) in Section 7. The final proof Map places a tier of number lots on the North end of the Section. The Lots should have been placed on the South end of the Section. Based on the GLO Map, the Section is approximately 80 acres short of being a full Section with the reduced acres located in along the South line of the Section (South half of the South half of the Section).

The Tax Assessor's Map is consistent with the GLO in the placement of these lots along the South border of Section 7. The Tax Assessor's Map and the portion of the GLO showing Section 7 are attached.

Due to the misidentification of the location of these lots, the resulting certificates, Certificate 84982 describes the acres in a manner inconsistent with the GLO map. The total number of irrigated acres in the Section is the same, but the breakdown by quarter quarters is different due to the Department's incorrect final proof mapping.

This transfer application map and Table 2 for Certificate 84982 reflect the correct mapping of acres in Section 7 based on the GLO and Tax Assessor maps, and the acres that are being transferred are based upon this corrected mapping.

RECEIVED

APR 11 2022

OWRD

13973

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: NA.



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 # NA;

Surface water primary Certificate # NA.

RECEIVED

APR 11 2022

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

OWRD

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
Well 2	yes	Lake 238	120	12"	0-33	0-33	NA	40	basalt	
Well 8	yes	Lake 225	370	14"	+1-20'	0-20	NA	57	Lava rock	

13973

NOTICE TO WATER WELL CONTRACTOR

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

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

LAKE 203 RECEIVED WATER WELL REPORT SEP 28 1970

STATE OF OREGON STATE ENGINEER SALEM, OREGON

12/1/81 JCB 25/17-2dd 1bc G 5173

(1) OWNER:

Name F.A. FRAZEE Address Fort Rock, Ore.

(2) TYPE OF WORK (check):

New Well [X] Deepening [] Reconditioning [] Abandon []

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary [] Cable [X] Dug [] Driven [] Jetted [] Bored []

(4) PROPOSED USE (check):

Domestic [] Industrial [] Municipal [] Irrigation [X] Test Well [] Other []

CASING INSTALLED:

Threaded [] Welded [X] 1/4"

Diam. from 0 ft. to 60 ft. Gage 1/4"

PERFORATIONS:

Perforated? [] Yes [X] No

Size of perforations in. by in. perforations from ft. to ft.

(7) SCREENS:

Well screen installed? [] Yes [X] No

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

(8) WATER LEVEL: Completed well.

Static level 53 ft. below land surface Date 6-20-58

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? [X] Yes [] No If yes, by whom? Driller

Flow: 250 gal./min. with 7 ft. drawdown after hrs.

Bailer test gal./min. with ft. drawdown after hrs.

Artesian flow g.p.m. Date

Temperature of water Was a chemical analysis made? [] Yes [X] No

(10) CONSTRUCTION:

Well seal—Material used Depth of seal ft. Diameter of well bore to bottom of seal in. Were any loose strata cemented off? [] Yes [] No Depth Was a drive shoe used? [] Yes [] No Did any strata contain unusable water? [] Yes [] No Type of water? depth of strata Method of sealing strata off Was well gravel packed? [] Yes [] No Size of gravel: Gravel placed from ft. to ft.

(11) LOCATION OF WELL:

County LAKE Driller's well number S1E 1/4 S1E 1/4 Section 2 T. 25 R. 17 E W.M.

Bearing and distance from section or subdivision corner 800' N.W. from SE.C

(12) WELL LOG:

Diameter of well below casing

Depth drilled ft. Depth of completed well ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level as drilling proceeds. Note drilling rates.

Table with columns: MATERIAL, From, To, SWL. Rows include: Surface, Clay Brown, Fina Rock, Black sand.

RECEIVED

APR 11 2022

OWRD

Work started 6-18 1958 Completed 6-20 1958 Date well drilling machine moved off of well 6-22 1958

Drilling Machine Operator's Certification:

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

[Signed] Date 6-20, 1958 (Drilling Machine Operator)

Drilling Machine Operator's License No.

Water Well Contractor's Certification:

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

NAME (Person, firm or corporation) (Type or print)

Address Fort Rock Oregon

[Signed] S.M. Martin (Water Well Contractor)

Contractor's License No. 102 Date 6-20, 1958

WATER WELL REPORT
STATE OF OREGON

Well #2

RECEIVED

State Well No.

255/18E-7aa

OCT 27 1981

WATER RESOURCES DEPT

State Permit No.

SALEM, OREGON

Lake 238

(1) OWNER:

Name Dave & Stephen Roth
Address Christmas Valley
City Oregon State Oregon

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air Driven Domestic Industrial Municipal
Rotary Mud Dug Irrigation Test Well Other
 Bored Thermal: Withdrawal Reinjection

(4) PROPOSED USE (check):

(5) CASING INSTALLED: Steel Plastic
Threaded Welded

14" Diam. from 0 ft. to 33 ft. Gauge 312
" Diam. from ft. to ft. Gauge

LINER INSTALLED:

" Diam. from ft. to ft. Gauge

(6) PERFORATIONS:

Perforated? Yes No

Type of perforator used

Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name
Type Model No.
Diam. Slot Size Set from ft. to ft.
Diam. Slot Size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

a pump test made? Yes No If yes, by whom?
i: gal./min. with ft. drawdown after hrs.
" " " " " "
Air test #000 gal./min. with drill stem at 40 ft. 1 hrs.
Bailer test gal./min. with ft. drawdown after hrs.
ian flow g.p.m.
erature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Special standards: Yes No

Well seal—Material used Cemented
Well sealed from land surface to 33 ft.
Diameter of well bore to bottom of seal 1.9 in.
Diameter of well bore below seal 12 1/4 in.
Number of sacks of cement used in well seal 14 1/2 sacks
How was cement grout placed? pumped
Was pump installed? Type HP Depth ft.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of Water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: ft.
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Lake Driller's well number
NE 1/4 NE 1/4 Section 7 T255 R 18E W.M.
Tax Lot # Lot Blk Subdivision

Address at well location:

(11) WATER LEVEL: Completed well.

Depth at which water was first found 90 ft.
Static level 40 ft. below land surface. Date
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 12 1/4

Depth drilled 120 ft. Depth of completed well 150 ft.

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

MATERIAL	From	To	SWL
Soil	0	4	
Sandy Soil	4	16	
Clay	16	26	
Basalt	26	120	

RECEIVED

APR 11 2022

OWRD

Work started Sept 28 1981 Completed Sept 28 1981
Date well drilling machine moved off of well Sept 28 1981

Drilling Machine Operator's Certification:

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

[Signed] Howard Arms Date 28, 1981
(Drilling Machine Operator)

Drilling Machine Operator's License No. 169

Water Well Contractor's Certification:

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

Name Arms & Schilling Well Drilling
(Person, firm or corporation) (Type or print)

Address 29030 San Taim S.W.E.T.H.C.M.E

[Signed] Howard Arms
(Water Well Contractor)

Contractor's License No. 357 Date Sept 28, 1981

NOTICE TO WATER WELL CONTRACTOR

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

WATER RESOURCES DEPARTMENT,

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

SP*12658-690

13973

WATER WELL REPORT
STATE OF OREGON

Well #3

RECEIVED

MAR 12 1981

State Well No. 12/4181

TEB

State Permit No. 255/NE-76d

WATER RESOURCES DEPT
SALEM, OREGON

Lake 237

(1) OWNER:

Name Pave Roth
Address Furburne Rd
City Sweet Home State Ore

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

ry Air Driven
ry Mud Dug
Cable Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other
Thermal: Withdrawal ReInjection

(5) CASING INSTALLED:

Steel Plastic
Threaded Welded

4" Diam. from 0 ft. to 65 ft. Gauge 312
" Diam. from ft. to ft. Gauge

LINER INSTALLED:

" Diam. from ft. to ft. Gauge

(6) PERFORATIONS:

Perforated? Yes No

Type of perforator used

Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name
Type Model No.
Diam. Slot Size Set from ft. to ft.
Diam. Slot Size Set from ft. to ft.

WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
Air test 1000+ gal./min. with drill stem at 60 ft. 1 hrs.
er test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.

(9) CONSTRUCTION:

Special standards: Yes No

Well seal—Material used Cement
Well sealed from land surface to 20 ft.
Diameter of well bore to bottom of seal 18 in.
Diameter of well bore below seal 14 in.
Number of sacks of cement used in well seal 20 sacks
How was cement grout placed? trami

Was pump installed? Type HP Depth ft.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of Water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel:
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Labe Driller's well number
SE 1/4 NW 1/4 Section 7 T. 25-S R. 17E W.M.
Tax Lot # Lot Blk Subdivision

Address at well location:

(11) WATER LEVEL: Completed well.

Depth at which water was first found 105 ft.

Static level 20 ft. below land surface. Date 2-12-81

Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 12

Depth drilled 120 ft. Depth of completed well 120 ft.

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

MATERIAL	From	To	SWL
<u>Sandy Clay</u>	<u>0</u>	<u>17</u>	
<u>Blue Claystone</u>	<u>17</u>	<u>65</u>	
<u>Basalt</u>	<u>65</u>	<u>120</u>	

RECEIVED

APR 11 2022

OWRD

Work started 2-12 1981 Completed 2-16 1981
Date well drilling machine moved off of well 2-17 1981

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Don Schilling Date 2-25, 1981
(Drilling Machine Operator)

Drilling Machine Operator's License No. 804

Water Well Contractor's Certification:

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

Name A.H.S. Schilling (Type or print)
Address 29011 Santiam Hwy Sweet Home (Person, firm or corporation)
[Signed] Howard Schilling (Water Well Contractor)

Contractor's License No. 357 Date 2-25, 1981

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT, 13973 SP#12658-690
SALEM, OREGON 97310
within 30 days from the date of well completion.

LAKE 51147 Well #3
 LAKE 51147

STATE OF OREGON
 WATER SUPPLY WELL REPORT
 (as required by ORS 517.765)

WELL I.D. # 47604
 START CARD # 133531

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

(1) LAND OWNER
 Name Guthrie North's Well Number _____
 Address PO Box 358
 City Christiansburg State OR Zip 97601

(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 140 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
1 3/4	65	100				
5/8	100	140				

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
1100		140'	(hr)

Temperature of water 55' 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 Linn Latitude _____ Longitude _____
 Township 25 N or S Range 18 E or W. WM.
 Section 7 SE 1/4 NW 1/4
 Tax Lot 1900 Lot _____ Block _____ Subdivision SKIN
 Street Address of Well (or nearest address) Smith Trm LRT

(10) STATIC WATER LEVEL:
20 ft. below land surface. Date 4-11-05
 Artesian pressure _____ lb per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWI

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWI
<u>Lava Rock</u>	<u>120</u>	<u>140</u>	

Date started 4-11-05 Completed 4-17-05

(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 [Signature] WWC Number 16349 Date 4-17-05

RECEIVED
 JUN 13 2005
 WATER RESOURCES DEPT.
 SALEM, OREGON
 RECEIVED
 APR 11 2022
 OWRD
 RECEIVED
 JUN 22 2001
 WATER RESOURCES DEPT.
 SALEM, OREGON

Well #3

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

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

WELL I.D. # L 47604
START CARD # 162617

LAKE 51503

(1) LAND OWNER
Name Cony 1st North Well Number _____
Address 10 Main St
City Christmas Valley State OR Zip 97641

(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 200' ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12"	140	200				

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
				<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"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NO CASING ADD

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

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"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 1500* Drawdown _____ Drill stem at 200' Time 1hr

Temperature of water 56' Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? _____

(9) LOCATION OF WELL by legal description:
County LAKE Latitude _____ Longitude _____
Township 25 N or S Range 18 E or W. WM.
Section 7 SE 1/4 1/4 NW 1/4
Tax Lot 1900 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) CHRISTMAS VALLEY DR 47641

(10) STATIC WATER LEVEL: the same
69' ft. below land surface. Date 3-12-04
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
140	200	1000+	

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Black Lava Rock	140'	163'	
Broken Lava Rock	163'	180'	
Red Limestone	180'	185'	
Gray Basalt	185'	200'	

RECEIVED
JUN 13 2005
WATER RESOURCES DEPT. SALEM, OREGON
RECEIVED
JUN - 3 2004
WATER RESOURCES DEPT. SALEM, OREGON

Date started 1-27-04 Completed 3-12-04

(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: 13973
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. Materials used and information reported above are true to the best of my knowledge and belief.

RECEIVED

FEB 18 2005

WATER RESOURCES DEPT. SALEM, OREGON

WATER WELL REPORT
STATE OF OREGON

Well #5

LAKE 4372

RECEIVED
MAR 12 1981

State Well No. 25s/17E-2ac

WATER RESOURCES DEPT.
SALEM, OREGON

LAKE 4372

(1) OWNER:

Name Dave Roth
Address 7urbyme Rd
City Sweet Home State Ore

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

any Air Driven
Cable Bored
Mud Dug

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other
Thermal: Withdrawal Reinjection

CASING INSTALLED:

Steel Plastic
Threaded Welded
14" Diam. from 0 ft. to 67 ft. Gauge 312

LINER INSTALLED:

" Diam. from ft. to ft. Gauge

(6) PERFORATIONS:

Perforated? Yes No

Type of perforator used
Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name
Type Model No.
Diam. Slot Size Set from ft. to ft.
Diam. Slot Size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?
d: gal./min. with ft. drawdown after hrs.
Air test 1000+ gal./min. with drill stem at 60 ft. 1 hrs.
ler test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
perature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Special standards: Yes No

Well seal—Material used Cement
Well sealed from land surface to 20 ft.
Diameter of well bore to bottom of seal 18 in.
Diameter of well bore below seal 14 in.
Number of sacks of cement used in well seal 18 sacks
How was cement grout placed? Tramit

Was pump installed? Type HP Depth ft.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of Water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: ft.
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Lake Driller's well number
SW 1/4 NE 1/4 Section 2 T. 25-S R. 17-E W.M.
Tax Lot # Lot Blk Subdivision

Address at well location:

(11) WATER LEVEL: Completed well.

Depth at which water was first found 110 ft.
Static level 25 ft. below land surface. Date
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 12

Depth drilled 120 ft. Depth of completed well 120 ft.

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

MATERIAL	From	To	SWL
Sandy Clay	0	15	
Blue claystone	15	67	
Basalt	67	120	

RECEIVED

APR 11 2022

OWRD

Work started 2-17 1981 Completed 2-20 1981
Date well drilling machine moved off of well 2-20 1981

Drilling Machine Operator's Certification:

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

[Signed] Don Schilling Date 2-25, 1981
(Drilling Machine Operator)

Drilling Machine Operator's License No. 804

Water Well Contractor's Certification:

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

Name ALMS & Schilling (Type or print)
(Person, firm or corporation)

Address 29011 Santiam Hwy Sweet Home

[Signed] Howard Alms (Water Well Contractor)

Contractor's License No. 357 Date 2-25, 1981

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT, SALEM, OREGON 97310
within 30 days from the date of well completion.

13973

SP-12658-690

Well #7

WATER WELL REPORT
STATE OF OREGON

Lake 224

RECEIVED
State Well No. 255/18E-3C
NOV 5 1981
State Permit No.
WATER RESOURCES DEPT
SALEM, OREGON deepened

(1) OWNER:
Name Gilbert Crowson
Address Poi. Bal 275
City Christmas Valley State Oregon

(2) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):
Rotary Air Driven Domestic Industrial Municipal
Mud Dug Irrigation Test Well Other
 Bored Thermal: Withdrawal Reinjection

(5) CASING INSTALLED: Steel Plastic
Threaded Welded
1.7" Diam. from ... ft. to ... ft. Gauge add
" Diam. from ... ft. to ... ft. Gauge

LINER INSTALLED:
" Diam. from ... ft. to ... ft. Gauge

(6) PERFORATIONS: Perforated? Yes No
Type of perforator used
Size of perforations in. by in.
perforations from ... ft. to ... ft.
perforations from ... ft. to ... ft.
perforations from ... ft. to ... ft.

(7) SCREENS: Well screen installed? Yes No
Manufacturer's Name
Type Model No.
Diam. Slot Size Set from ... ft. to ... ft.
Diam. Slot Size Set from ... ft. to ... ft.

(8) WELL TESTS: Drawdown is amount water level is lowered below static level
Is a pump test made? Yes No If yes, by whom?
Pump test: gal./min. with ft. drawdown after hrs.
Air test 1200 gal./min. with drill stem at 380 ft. 1 hrs.
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water Depth artesian flow encountered ... ft.

(9) CONSTRUCTION: Special standards: Yes No
Well seal—Material used
Well sealed from land surface to ... ft.
Diameter of well bore to bottom of seal ... in.
Diameter of well bore below seal ... in.
Number of sacks of cement used in well seal sacks
How was cement grout placed?
Was pump installed? Type HP Depth ft.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of Water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: ft.
Gravel placed from ... ft. to ... ft.

(10) LOCATION OF WELL:
County Lake Driller's well number
1/4 S.W. 1/4 Section 3 T. 15 S. R. 18 E. W.M.
Tax Lot # Lot Blk Subdivision
Address at well location: Same

(11) WATER LEVEL: Completed well.
Depth at which water was first found 351 ft.
Static level 55 ft. below land surface. Date
Artesian pressure lbs. per square inch. Date

(12) WELL LOG: Diameter of well below casing 13
Depth drilled 95 ft. Depth of completed well 380 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Black Sand	285	311	
GRAY SAND STONE	311	340	
GRAY STONE	340	351	
BLACK LAVA ROCK W/B	351	380	

RECEIVED
APR 11 2022
OWRD

Work started 9/18 1981 Completed 9/29 1981
Date well drilling machine moved off of well 9/30 1981

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
(Signed) Mel Search (Drilling Machine Operator) Date 10/20 1981
Drilling Machine Operator's License No. 679

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name MEL SEARCH WELL DRILLING (Type or print)
Address P.O. Box 83, Sunnyside, Ore.
(Signed) Mel Search (Water Well Contractor)
Contractor's License No. 567 Date 10/20 1981

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion. SP*12658-690

13973

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

12
LAKE
4578

RECEIVED

Well #7

25S/18E/3CC

JUN 26 1995

(START CARD) # 71206

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

(1) OWNER: Gladys Roth Well Number _____
Name _____
Address PO Box 358
City Chilton Valley State OR Zip 97641

(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 590 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
<u>8 1/2</u>	<u>370</u>	<u>590</u>				

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

no casing added

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

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

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>1500</u>		<u>590</u>	<u>1 hr.</u>

Pump Bailer Air Flowing Artesian

Temperature of water 55 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 LAKE Latitude _____ Longitude _____
Township 25S N or S Range 18E E or W. WM.
Section 3 SW 1/4 SW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
63 ft. below land surface. Date 5-28 95
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
/			

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>Black Basalt</u>	<u>370</u>	<u>445</u>	
<u>GRAY BASALT</u>	<u>445</u>	<u>467</u>	
<u>BLACK BASALT BROKEN</u>	<u>467</u>	<u>471</u>	
<u>GRAY CLAY STONE</u>	<u>471</u>	<u>485</u>	
<u>BROWN CLAY STONE</u>	<u>485</u>	<u>505</u>	
<u>BROWN & BLACK BASALT</u>	<u>505</u>	<u>527</u>	
<u>BROWN GREEN CLAYSTONE</u>	<u>527</u>	<u>545</u>	
<u>BLACK BASALT BROKEN</u>	<u>545</u>	<u>590</u>	<u>WB</u>

RECEIVED

APR 11 2022

OWRD

Date started 5-12-95 Completed 5-28-95

(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.
WWC Number _____
Signed _____ 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.
WWC Number 567
Signed Melvin Search 973 6-10-95

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report
are to be filed with the

WATER RESOURCES DEPARTMENT
SALEM, OREGON 97310
within 30 days from the date
of well completion.

RECEIVED WATER WELL REPORT

STATE OF OREGON
(Please type or print)

AUG 18 1980

write above this line

State Well No. 255/18E-3
State Permit No. _____

WATER RESOURCES DEPT

Well #8

Lake 225

(1) OWNER: SALEM, OREGON
Name Gilbert Crowson
Address Box 402 Christmas Valley, OR.

(2) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):
Rotary Driven Domestic Industrial Municipal
 Jetted Irrigation Test Well Other
 Bored

(5) CASING INSTALLED:
14" Diam. from above ft. to 20 ft. Gage 250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

(6) PERFORATIONS: Perforated? Yes No.
Type of perforator used _____
Size of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS: Well screen installed? Yes No
Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS: Drawdown is amount water level is lowered below static level
a pump test made? Yes No If yes, by whom?
read: _____ gal./min. with _____ ft. drawdown after _____ hrs.
" " 150 lbs. Air " " " "
" " " " " " " "
" " " " " " " "
_____ test 1000 gal./min. with _____ ft. drawdown after _____ hrs.
_____ artesian flow _____ g.p.m.
Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION: Well seal—Material used Cement
Well sealed from land surface to _____ ft.
Diameter of well bore to bottom of seal 18 in.
Diameter of well bore below seal 8 in.
Number of sacks of cement used in well seal 6 sacks
How was cement grout placed? Cement was mixed w. 1" pipe run down along side & pressure grouted in.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:
County Lake Driller's well number _____
1/4 1/4 Section 3 T. 25 R. 18 E. W.M.
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.
Depth at which water was first found 71 ft.
Static level 57 ft. below land surface. Date 5/7/80
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG: Diameter of well below casing 8"
Depth drilled 370 ft. Depth of completed well 370 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Brown Clay	0	4	
Black lava rock	4	67	
Red Cinders	67	74	
Brown Cinders	74	81	
Black lava Rock	81	121	
Camice Water Bearing	121	124	
Black lava Rock	124	136	
Brown Cinders	136	141	
Red lava Rock	141	153	
Black lava Rock	153	185	
Red lava Rock	185	197	
Black lava Rock	197	246	
Black sand	246	248	
Black lava Rock	248	320	
Black sand	320	350	
Grey Stone	350	370	

Work started 4/13 1980 Completed 5/7 1980
Date well drilling machine moved off of well 5/7 1980

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Mel Search Date 5/10, 1980
(Drilling Machine Operator)
Drilling Machine Operator's License No. 699

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name Mel Search Well Drilling
(Person, firm or corporation) (Type or print)
Address 437 Lebanon, OR.
[Signed] Mel Search
(Water Well Contractor)
Contractor's License No. 567 Date 5/10, 1980

RECEIVED

APR 11 2022

(USE ADDITIONAL SHEETS IF NECESSARY)

SP*45656-119

13973

Well #9

Lake
51691

START CARD # 171718

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

(1) LAND OWNER
Name Roth Farms Well Number _____
Address PO Box 358
City CHRISTIANBURG State OK Zip 77611

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

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 220 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
23 1/2"	0	19	Bent	0	19	50 sack
16 1/2"	19	220				

How was seal placed: Method A B C D E
 Other 3/8 Hole Plug
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Casing	Diameter	From	To	Gauge	Steel				Plastic				
					Welded	Threaded	Welded	Threaded	Welded	Threaded			
18"	1 1/2"	19	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside Nonc
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS
 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 Bailer Air Flowing Artesian
Yield gal/mip 2000 gal Drawdown _____ Drill stem at 220 Time 1 hr

Temperature of water 53° 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 (legal description)
County Lake
Tax Lot 300 Lot _____
Township 25 N or S Range 18 E or W WM
Section 3 SE 1/4 SE 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)
Street Address of Well (or nearest address) NO ADDRESS ASSIGNED

(10) STATIC WATER LEVEL
69' ft. below land surface. Date 5-15-05
_____ ft. below land surface. Date same
Artesian pressure _____ lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWL
105	220	2000 gal	

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
TOP Soil	0	2	
Gravel Basalt	2	40	
R-0 Lava Rock	40	60	
Gravel Lava Rock	60	80	
Black Lava Rock	80	105	
Gravel Lava Rock	105	145	
Black Lava Rock	145	189	
Gravel Lava Rock	189	200	
Black RECEIVED	200	220	

SEP 27 2005
WATER RESOURCES DEPT SALEM, OREGON
Date Started 4-27-05 Completed 5-15-05

(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.

WWC Number _____ Date _____
Signed _____

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

WWC Number 165-1 Date 6-15-05
Signed _____

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 LAKE)

RECEIVED
 APR 11 2022
 OWRD

I, DWIGHT ROTH, in my capacity as LEASEE/OPERATOR,
 mailing address P.O. BOX 107
 telephone number (____)____, 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

2. I attest that:

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

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

Certificate #	Township		Range		Mer	Sec	¼ ¼		Gov't Lot or DLC	Acres (if applicable)
53450	25	S	18	E	WM	3	NE	SW		
53450	25	S	18	E	WM	3	NW	SW		
53450	25	S	18	E	WM	3	SW	SW		
53450	25	S	18	E	WM	3	SE	SW		
53452	25	S	18	E	WM	3	NE	SE		
53452	25	S	18	E	WM	3	SW	SE		
53452	25	S	18	E	WM	3	SE	SE		
84982	25	S	18	E	WM	7	NE	SW		
84982	25	S	18	E	WM	7	NE	SW		
84982	25	S	18	E	WM	7	NE	SE		
84982	25	S	18	E	WM	7	NW	SE		
84982	25	S	18	E	WM	7	SE	SE		
84982	25	S	18	E	WM	18	NE	NE		
84982	25	S	18	E	WM	18	NW	NE		
84982	25	S	18	E	WM	18	NE	NW		

13973 1

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)

RECEIVED
APR 11 2022
OWRD

(continues on reverse side)

- 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.

David Roth
 Signature of Affiant

4-6-2022
 Date

Signed and sworn to (or affirmed) before me this 6th day of April, 2022.



Shara Shumway
 Notary Public for Oregon
 My Commission Expires: May 12, 2023

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	Multiple photos can be submitted to resolve different areas of

13973

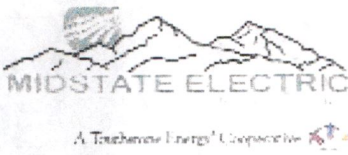
<p>establish location and date of photograph</p>	<p>a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<p><input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years</p>	<p>Copy of instream lease or lease number</p>

RECEIVED

APR 11 2022

OWRD

13973



16755 Finley Butte Rd
 PO Box 127
 LaPine OR 97739-0127

Co-Op News

October is National Co-op Month. Join in the celebration and enter to win a \$100 electric bill credit. Visit Facebook or www.mse.coop for details.

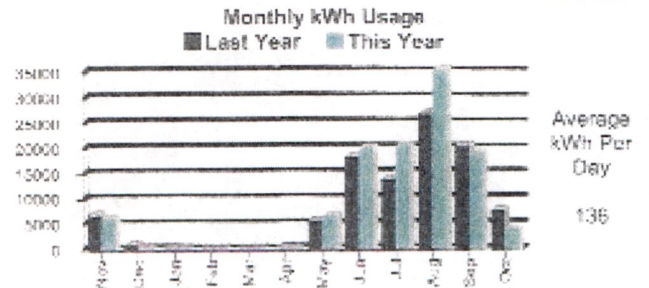
RECEIVED

APR 11 2022

OWRD

Well #9

DAVID ROTH
 GALYN ROTH
 PO BOX 706
 CHRISTMAS VALLEY OR 97641-0000



Account Number: 1236011 Service Location: 75 HP CHRIS
 Billing Date: 10/19/2021 Billing Cycle: 3 Rate: In-Seasonal Bill Type: Regular

Account Detail	
Previous Balance	1,167.96
Payments Received 10/04/2021	1,167.96 Credit
Balance Forward	\$0.00
Energy Charge (kWh) 4,080 @ \$0.0449	183.19
Demand Charge (kW) 54.360 @ \$5.20	282.67
Facilities Charge	64.00
Prompt Pay Discount	17.96 Credit
Current Charges	\$511.90
Total Amount Due	\$511.90

Electric Service Detail	
Meter Number: 68213	Multiplier: 40.0
Reading Dates: 08/31/2021 - 09/30/2021	
Number of Days: 30	
Current Reading: 23859	
Last Reading: 23757	
kWh: 102 x 40 Multiplier =	4,080
kW: 1.359 x 40 Multiplier =	54.360

Prompt Payment Discount - 1.5% will be credited to your next electric bill if your current bill is paid in full and received within 10 days of billing date.
 Late Charge - \$5 or 1.5%, whichever is greater, for outstanding balances not received in our office by 5:30 PM the day prior to your next billing.

13973

YINN

Invoice 1110



16755 Finley Butte Rd
PO Box 127
LaPine OR 97739-0127

IMPORTANT INFORMATION

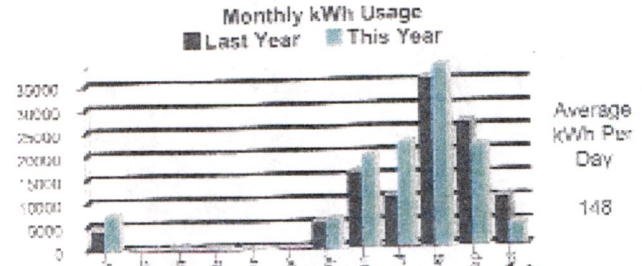
Co-Op News

October is National Co-op Month. Join in the celebration and enter to win a \$100 electric bill credit. Visit Facebook or www.msc.coop for details.

Well #8

DRI

DAVID ROTH
GALYN ROTH
PO BOX 706
CHRISTMAS VALLEY OR 97641-0000



Account Number: 20320700

Service Location: 60 HP CHRIS II

Billing Date: 10/19/2021 Billing Cycle: 3

Rate: Irr-Seasonal Bill Type: Regular

Account Detail

Previous Balance	1,303.74
Payments Received 10/04/2021	1,303.74 Credit
Balance Forward	\$0.00
Energy Charge (kWh) 4,440 @ \$0.0449	199.36
Demand Charge (kW) 58.520 @ \$5.20	304.30
Facilities Charge	64.00
Prompt Pay Discount	20.03 Credit
Current Charges	\$547.63
Total Amount Due	\$547.63

Electric Service Detail

Meter Number: 68154 Multiplier: 40.0
 Reading Dates: 08/31/2021 - 09/30/2021
 Number of Days: 30
 Current Reading: 25957
 Last Reading: 25846
 kWh: 111 x 40 Multiplier = 4,440
 kW: 1,453 x 40 Multiplier = 58,520

5473.67

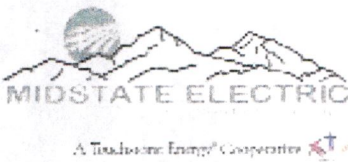
2021
2012

#112
10-30-21

9

Prompt Payment Discount - 1.5% will be credited to your next electric bill if your current bill is paid in full and received within 10 days of billing date.
Late Charge - \$5 or 1.5%, whichever is greater, for outstanding balances not received in our office by 5:30 PM the day prior to your next billing.

13973



16755 Finley Butte Rd
 PO Box 127
 LaPine OR 97739-0127

IMPORTANT INFORMATION

Co-Op News

October is National Co-op Month. Join in the celebration and enter to win a \$100 electric bill credit. Visit Facebook or www.mse.coop for details.

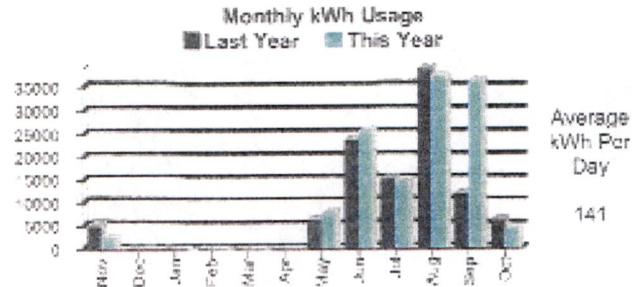
RECEIVED

APR 11 2022

OWRD

Well #7

DAVID ROTH
 GALYN ROTH
 PO BOX 706
 CHRISTMAS VALLEY OR 97641-0000



Account Number: 6391400 Service Location: 75 HP CAROLINE
 Billing Date: 10/19/2021 Billing Cycle: 3 Rate: Irr-Seasonal Bill Type: Regular

Account Detail		Electric Service Detail	
Previous Balance	2,017.68	Meter Number: 68185	Multiplier: 40.0
Payments Received 10/04/2021	2,017.68 Credit	Reading Dates: 08/31/2021 - 09/30/2021	
Balance Forward	\$0.00	Number of Days: 30	
Energy Charge (kWh) 4,240 @ \$0.0449	190.38	Current Reading: 27791	
Demand Charge (kW) 66.760 @ \$5.20	347.15	Last Reading: 27685	
Facilities Charge	64.00	kWh: 106 x 40 Multiplier =	4,240
Prompt Pay Discount	30.73 Credit	kW: 1.669 x 40 Multiplier =	66.760
Current Charges	\$570.80		
Total Amount Due	\$570.80		

Prompt Payment Discount - 1.5% will be credited to your next electric bill if your current bill is paid in full and received within 10 days of billing date.
 Late Charge - \$5 or 1.5%, whichever is greater, for outstanding balances not received in our office by 5:30 PM the day prior to your next billing.

13973



16755 Finley Butte Rd
PO Box 127
LaPine OR 97739-0127

A Tracton Energy Cooperative

IMPORTANT INFORMATION

Co-Op News

October is National Co-op Month. Join in the celebration and enter to win a \$100 electric bill credit. Visit Facebook or www.mse.coop for details.

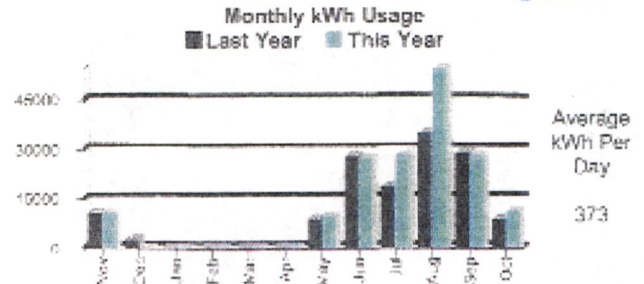
RECEIVED

APR 11 2022

OWRD

Well #2

DAVID ROTH
GALYN ROTH
PO BOX 706
CHRISTMAS VALLEY OR 97641-0000



Account Number: 1219510 Service Location: 75 HP VALLEY
Billing Date: 10/19/2021 Billing Cycle: 3 Rate: Irr-Seasonal Bill Type: Regular

Account Detail		Electric Service Detail	
Previous Balance	1,729.30	Meter Number: 68299	Multiplier: 40.0
Payments Received 10/04/2021	1,729.30 Credit	Reading Dates: 08/31/2021 - 09/30/2021	
Balance Forward	\$0.00	Number of Days: 30	
Energy Charge (kWh) 11,200 @ \$0.0449	502.88	Current Reading: 14562	
Demand Charge (kW) 83.800 @ \$5.20	435.76	Last Reading: 14282	
Facilities Charge	64.00	kWh: 280 x 40 Multiplier =	11,200
Prompt Pay Discount	26.60 Credit	kW: 2.095 x 40 Multiplier =	83.800
Current Charges	\$976.04		
Total Amount Due	\$976.04		

Prompt Payment Discount - 1.5% will be credited to your next electric bill if your current bill is paid in full and received within 10 days of billing date.
Late Charge - \$5 or 1.5%, whichever is greater, for outstanding balances not received in our office by 5:30 PM the day prior to your next billing.

13973

Land Use Information Form



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

RECEIVED

APR 11 2022

OWRD

Applicant(s): Daniel Roth

Mailing Address: P.O. Box 24

City: Christmas Valley

State: OR

Zip Code: 97641

Daytime Phone: _____

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>25S</u>	<u>18E</u>	<u>3</u>	<u>NE NE</u>	<u>300</u>	<u>A-Agricultural</u>	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>irrigation</u>
<u>25S</u>	<u>18E</u>	<u>3</u>	<u>SE NE</u>	<u>300</u>	<u>A-Agricultural</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>irrigation</u>
<u>25S</u>	<u>18E</u>	<u>3</u>	<u>NE SE</u>	<u>300</u>	<u>A-Agricultural</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>irrigation</u>
<u>25S</u>	<u>18E</u>	<u>3</u>	<u>NW SE</u>	<u>300</u>	<u>A-Agricultural</u>	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>irrigation</u>
<u>25S</u>	<u>18E</u>	<u>3</u>	<u>SW SE</u>	<u>300</u>	<u>A-Agricultural</u>	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>irrigation</u>
<u>25S</u>	<u>18E</u>	<u>3</u>	<u>SE SE</u>	<u>300</u>	<u>A-Agricultural</u>	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>irrigation</u>

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

Lake 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: 0.509 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:

Transfer of water from the outer edges of 3 existing pivots to fill in the remaining area of an existing partial pivot not currently covered. Also, change the point of appropriation on one of the pivots to an existing well that is located at the center of the pivot, replacing the approved well which is located approximately ½ mile away.

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. →

13973

For Local Government Use Only

OWRD

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): *Yuba County Zoning Ordinance, Article 3 - A-2 zone.*
- 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.

25-18-3-300

Name: *Darwin Johnson* Title: *Planning Director*

Signature: *[Signature]* Phone: *911-947-6036* Date: *23 Feb 2022*

Government Entity: *Lake County Planning Dept.*

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.

Lucs Pan w/ check #36459

[Signature]

Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____