

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist



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

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

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

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- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-18126 Attachment #2
 Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). **Attachment #1**
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone. **Attachment #4**
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. **Attachment #3**
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

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

Part 2 of 5 – Permit Amendment Map Checklist

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

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

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- N/A If **more than three** permits are involved, separate maps for each permit.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- 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 use permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
- N/A If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

Applicant Information

APPLICANT/BUSINESS NAME Sunnyside Dairy, LLC (Rosalia Brambila, Manager)			PHONE NO. (509) 837-4779 office	ADDITIONAL CONTACT NO. Cell (509) 840-4099
ADDRESS 4581 Maple Grove Road				FAX NO.
CITY Sunnyside	STATE WA	ZIP 98944	E-MAIL rosalio@sunnysidedairy.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

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

AGENT/BUSINESS NAME GeoEngineers, Inc. (Jon Travis, Molly Reid)			PHONE NO. (509) 979-0332 JON CELL	ADDITIONAL CONTACT NO. (541) 310-7264 Molly Cell
ADDRESS 8019 W. Quinault Avenue, Suite 201				FAX NO.
CITY Kennewick	STATE WA	ZIP 99336	E-MAIL jtravis@geoengineers.com; mreid@geoengineers.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this permit amendment; and why:
Replacing an existing well (well 3) with a new well (HARN 52875). The Eckley well is no longer in use and will not be used on this water right.

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

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

Is the applicant the permit holder of record? Yes No

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

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

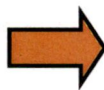
If NO, what are the completion dates of the permit(s)? 10-1-2025

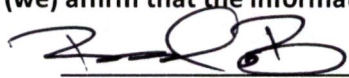
- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing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

By my signature below, I confirm that I understand:

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

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





Applicant Signature

Rosalio Brambila, Manager

Print Name (and Title if applicable)

4-21-22

Date

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Check one of the following:

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

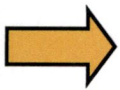
Check the appropriate box, if applicable:

- Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME Non-Applicable	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME Non-Applicable	ADDRESS	
CITY	STATE	ZIP



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

ENTITY NAME Harney County Planning Department	ADDRESS 450 North Buena Vista Avenue	
CITY Burns	STATE OR	ZIP 97720

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 5 of 5 – Water Use Permit Information

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

PERMIT # G-18126

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 3R Replacement	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52875	26	S	30	E	2	SE	SE	400	43.33833, -119.08057
Eckley Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1318	26	S	30	E	1	NW	SW	300	260 Feet South and 40 Feet East from the W ¼ Corner of Section 1
2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 50516/51788	26	S	30	E	2	NE	SW	400	43.3452880 -119.0889330
3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51603	26	S	30	E	2	SE	SE	400	43.3383244 -119.0804376
1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 50741	26	S	30	E	11	SE	NW	600	43.3343870 -119.0933000
13	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 52197	26	S	30	E	11	SW	NW	3100	43.3311394 -119.0985218

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

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU) | <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"/> Surface water POD to Ground Water POA (SW/GW) |

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

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

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For a change in place of use:

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

- Yes No **Non-Applicable**

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

Is the proposed place of use contiguous to the authorized place of use? Yes No **Non-Applicable**

Table 2. Description of Changes to Water Use Permit # G-18126

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 (if applicable)	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 (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date				
26	S	30	E	2	NE	SW	400		34.4	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	2	NE	SW	400		34.4	1, 2, 3R, 13	6-7-1991
26	S	30	E	2	NW	SW	400		16.3	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	2	NW	SW	400		16.3	1, 2, 3R, 13	6-7-1991
26	S	30	E	2	SW	SW	600		12.7	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	2	SW	SW	600		12.7	1, 2, 3R, 13	6-7-1991
26	S	30	E	2	SE	SW	400		23.0	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	2	SE	SW	400		23.0	1, 2, 3R, 13	6-7-1991
26	S	30	E	2	NE	SE	400		31.9	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	2	NE	SE	400		31.9	1, 2, 3R, 13	6-7-1991
26	S	30	E	2	NW	SE	400		31.9	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	2	NW	SE	400		31.9	1, 2, 3R, 13	6-7-1991
26	S	30	E	2	SW	SE	400		37.9	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	2	SW	SE	400		37.9	1, 2, 3R, 13	6-7-1991
26	S	30	E	2	SE	SE	400		31.9	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	2	SE	SE	400		31.9	1, 2, 3R, 13	6-7-1991
26	S	30	E	3	SE	SE	500		1.0	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	3	SE	SE	500		1.0	1, 2, 3R, 13	6-7-1991
26	S	30	E	10	NE	NE	600		2.0	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	10	NE	NE	600		2.0	1, 2, 3R, 13	6-7-1991
26	S	30	E	11	NW	NE	600		8.0	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	11	NW	NE	600		8.0	1, 2, 3R, 13	6-7-1991
26	S	30	E	11	NE	NW	600		11.0	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	11	NE	NW	600		11.0	1, 2, 3R, 13	6-7-1991
26	S	30	E	11	NW	NW	600		13.0	Eckley, 1, 2, 3, 13	1991	POA	26	S	30	E	11	NW	NW	600		13.0	1, 2, 3R, 13	6-7-1991
TOTAL ACRES							255.0											TOTAL ACRES	255.0					

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Additional remarks: The Eckley well (HARN 1318) is no longer in use and will not be used on this water right. It should also be noted that Permit G-18126 incorrectly identifies the Eckley Well as being in the NESW of Section 2, when it is actually located in the NWSW of Section 1. Well 3 (HARN 51603) is being replaced by Well 3-R (HARN 52875). Well 3 will no longer be used under this groundwater permit. No change in place of use.


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

If YES, list the other certificate, permit, or ground water registration numbers: N/A

 If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (Tip: You may search for well logs on the Department's web page at: http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx)

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 3-R	Yes	HARN 52875 L-139923	See	Well	Log					
Eckley Well	Yes	HARN 1318	See	Well	Log		No	Longer	In	Use
1	Yes	HARN 50741	See	Well	Log					
2	Yes	HARN 50516/51788	See	Well	Logs					
3	Yes	HARN 51603	See	Well	Log		No	Longer	In	Use
13	Yes	HARN 52197	See	Well	Log					

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Attachment #2
Permit G-18126 and Map
POA Permit Amendment Application for G-18126

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COUNTY OF HARNEY

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PERMIT TO APPROPRIATE THE PUBLIC WATERS

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THIS PERMIT IS HEREBY ISSUED TO

SUNNYSIDE DAIRY, LLC
ROSALIO BRAMBILA, MANAGER
4581 MAPLE GROVE ROAD
SUNNYSIDE, WA 98944

This superseding permit is issued to describe an amendment for additional points of appropriation and a change in place of use proposed under Permit Amendment Application T-12505 and approved by Special Order Vol. 112, Page 585, entered February 12, 2019, and to describe an extension of time for complete application of water approved July 22, 2016 and an assignment to a new permittee approved February 22, 2010 and August 8, 2013. This permit supersedes Permit G-12301.

The specific limits for the use are listed below along with conditions of use.

APPLICATION FILE NUMBER: G-12559

SOURCE OF WATER: FIVE WELLS WITHIN MALHEUR LAKE BASIN

PURPOSE OR USE: IRRIGATION OF 255.0 ACRES

RATE OF USE: 3.19 CUBIC FEET PER SECOND

PERIOD OF ALLOWED USE: WATER MAY BE APPROPRIATED FOR IRRIGATION FROM MARCH 1 THROUGH OCTOBER 31

DATE OF PRIORITY: JUNE 7, 1991

WELL LOCATIONS:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
26 S	30 E	WM	2	NE SW	260 FEET SOUTH AND 40 FEET EAST FROM THE W 1/4 CORNER OF SECTION 1
26 S	30 E	WM	2	NE SW	Lat. 43.3452880, Long. -119.0889330
26 S	30 E	WM	2	SE SE	Lat. 43.3383244, Long. -119.0804376
26 S	30 E	WM	11	SE NW	Lat. 43.3343870, Long. -119.0933000
26 S	30 E	WM	11	SW SW	Lat. 43.3311394, Long. -119.0985218

The amount of water used for irrigation under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 3.0 acre-feet for each acre irrigated during the irrigation season of each year.

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THE PLACE OF USE IS LOCATED AS FOLLOWS:

IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
26 S	30 E	WM	2	NE SW	34.4
26 S	30 E	WM	2	NW SW	16.3
26 S	30 E	WM	2	SW SW	12.7
26 S	30 E	WM	2	SE SW	23.0
26 S	30 E	WM	2	NE SE	31.9
26 S	30 E	WM	2	NW SE	31.9
26 S	30 E	WM	2	SW SE	37.9
26 S	30 E	WM	2	SE SE	31.9
26 S	30 E	WM	3	SE SE	1.0
26 S	30 E	WM	10	NE NE	2.0
26 S	30 E	WM	11	NW NE	8.0
26 S	30 E	WM	11	NE NW	11.0
26 S	30 E	WM	11	NW NW	13.0
Total					255.0

Permit Amendment T-12505 Conditions:

The combined quantity of water diverted at the new points of appropriation, together with that diverted at the old point of appropriation, shall not exceed the quantity of water lawfully available at the original point of appropriation.

Water use measurement conditions:

- a. Before water use may begin under this order, the water user shall install a totalizing flow meter, or, with prior approval of the Director, another suitable measuring device at each point of appropriation (new and existing).
- b. The water user shall maintain the meters or measuring devices in good working order.
- c. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

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

Extension of Time Conditions

Last Extension Condition

This is to be the last extension of time granted for Permit G-12301. Any future extension of time requests will be denied.

Existing Permit Conditions

Measurement, recording and reporting conditions:

- A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order, shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water use information, including the place and nature of use of water under the permit.
- B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

STANDARD CONDITIONS

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

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

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

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

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

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

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

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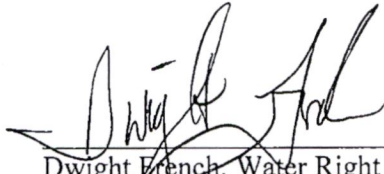
Actual construction of the well was to begin within one year from permit issuance and was to be completed on or before October 1, 1998. Complete application of the water to the use was to be made on or before October 1, 1999. By extension of Time Final Order dated July 22, 2016, the completion of construction and application of water was extended to on or before October 1, 2025.

Issued FEB 12 2019

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

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Attachment #3

Well Logs

POA Permit Amendment Application for G-18126



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

Application for OWRD
Well ID Number

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Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

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Current Owner Name (please print): Sunnyside Dairy, LLC
Mailing Address: 4581 Maple Grove Road
City, State, Zip: Sunnyside, WA 98944
Mail Well ID to: [] SAME AS ABOVE [X] In Care Of (C/O)
Name & Address: Andy Root - 524 N. Highway 20
City, State, Zip: Hines, OR 97738

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 26S (North / South) Range: 30E (East / West) Section: 2 SE 1/4 of the SE 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 400 County Harney
GPS Coordinates: 43.33837, -119.08057
Street Address of Well, City: 30042 Weaver Springs Road, Burns, OR 97720
If the property had a different street address in the past: Well log incorrectly identifies well in NWNW Section 7 - should be SESE Section 2.

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation
Date Well Constructed (or property built): 2/5/2020 Total Well Depth: 510 feet Casing Diameter: 12-20 inch
Owner at time the well was constructed (if known): Sunnyside Dairy, LLC Well Report # (if known): HARN 52875
Other Information: Start Card # 1045711; We are requesting a new well tag as the original one was cut off (w casing) by pump installers
SUBMITTED BY (please print): Molly Reid for Sunnyside Dairy, LLC
PHONE: (509) 209-2846 EMAIL &/or FAX: mreid@geoengineers.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.
Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

* Replacement Well ID *
L 133824 LOST!

For Official Use Only by the Oregon Water Resources Department:
Received Date: 9-14-2020
Well Report Number: HARN 52875
Well Identification #: L 139923

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

HARN 52197

WELL I.D. LABEL# L 117171
START CARD # 1026122
ORIGINAL LOG #

6/9/2015

(1) LAND OWNER

Owner Well I.D.
First Name Last Name
Company SUNNYSIDE DAIRY, LLC
Address 4581 MAPLE GROVE RD.
City SUNNYSIDE State WA Zip 98944

(2) TYPE OF WORK

[X] New Well [] Deepening [] Conversion

[] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD

[X] Rotary Air [X] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE

[] Domestic [X] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION

Special Standard [] (Attach copy)

Depth of Completed Well 230.00 ft.

BORE HOLE

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 26, 0, 79, Bentonite Chips, 0, 50, 104, S. Row 2: 20, 79, 172, Calculated, 94. Row 3: 12, 172, 230, Calculated.

How was seal placed: Method [] A [] B [] C [] D [] E

[X] Other POURED DRY

Backfill placed from 50 ft. to 79 ft. Material CINDERS

Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, +, From, To, Gauge, Stl, Plstc, Wld, Thrd. Row 1: [X], [X], 20, [X], 1, 79, .250, [X], [X], [X], [X]. Row 2: [], [], 14, [], 1, 172, .250, [], [], [], [].

Shoe [] Inside [] Outside [] Other Location of shoe(s)

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Factory

Screens Type Material

Table with columns: Perf/ Screen, Casing/ Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Row 1: Perf, Liner, 14, 91, 172, .093, 3, 2280.

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

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

Table with 4 columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 2500, , 170, 2.

Temperature 68 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below) TDS amount

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 26.00 S N/S Range 30.00 E E/W WM
Sec 11 NW 1/4 of the SW 1/4 Tax Lot 3300
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [] Nearest address

30042 WEAVER SPRINGS LN.
BURNS, OR.

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Row 1: Existing Well / Pre-Alteration. Row 2: Completed Well, 5/19/2015, 117.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 117.00

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

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 5/19/2015, 117, 230, 2500, 117.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Row 1: Sandy soil, 0, 2. Row 2: multi colored cinders, 2, 70. Row 3: cinders and bolders, 70, 74. Row 4: Broken Basalt, 74, 160. Row 5: Broken Basalt and cinders, 160, 230.

RECEIVED
MAY 06 2022
OWRD

Date Started 4/20/2015 Completed 5/19/2015

(unbonded) Water Well Constructor Certification

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

License Number 1739 Date 6/9/2015

Signed CHARLES M FRY (E-filed)

(bonded) Water Well Constructor Certification

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

License Number 1355 Date 6/9/2015

Signed ARTHUR L FRY (E-filed)

Contact Info (optional)

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

06-15-2011

WELL LABEL # L 41297
START CARD # 1013761

(1) LAND OWNER Owner Well I.D.
First Name Jim Last Name Robie
Company
Address 30042 Weaver Springs Lane
City Burns State Or Zip 97720

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well 247.00 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, sacks/lbs

How was seal placed: Method [] A [] B [] C [] D [] E

[] Other
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [] Yes Type Amount

(6) CASING/LINER
Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd

Shoe [] Inside [] Outside [] Other Location of shoe(s)

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material

Table with columns: Perf/S creen, Casing/ Liner, Dia, From, To, Scm/slot width, Slot length, # of slots, Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [] Bailer [X] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr)

Temperature 52 °F Lab analysis [] Yes By

Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)
County Hamey Twp 26.00 S N/S Range 30.00 E E/W WM
Sec 2 NE 1/4 of the SW 1/4 Tax Lot 400
Tax Map Number Lot
Lat 0 ' " or DMS or DD
Long 0 ' " or DMS or DD
[] Street address of well [] Nearest address

30042 Weaver Springs Lane

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Existing Well / Predeepening
Completed Well 06-14-2011 91
Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft)

(11) WELL LOG
Ground Elevation
Material From To
clean out 107 115
cinders black 115 140
clay sand 140 170
cinders black 170 215
cinders green 215 247

Date Started 06-10-2011 Completed 06-14-2011

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number Date
Electronically Filed
Signed

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

License Number 1424 Date 06-15-2011
Electronically Filed
Signed TIMOTHY K RILEY (E-filed)
Contact Info (optional)

HARN 51603

HARN 51603

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

WELL I.D. # 81445
START CARD # 184720

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

(1) LAND OWNER Well Number 5
Name Gordon Bloomquist
Address 30042 Wheeler Springs
City _____ State _____ Zip _____

(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 340 ft. 325
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL		
Diameter	From	To	Material	From	To
<u>14</u>	<u>0</u>	<u>50</u>	<u>1 1/2 in.</u>	<u>0</u>	<u>50</u>
<u>14</u>	<u>50</u>	<u>325</u>			<u>300</u>

How was seal placed: Method A B C D E
Other Poured
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: <u>14</u>	<u>0</u>	<u>160</u>	<u>250</u>	<input checked="" 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 Method Factory

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>100</u>	<u>160</u>	<u>1/4</u>	<u>2000</u>	<u>14</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 600 Drawdown 10 Drill stem at _____ Time 4 HR

Temperature of water 61 ° 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 Harris
Tax Lot 45054 Lot 400
Township 26S N or S Range 30C E or W WM
Section 7 NE 1/4 NE 1/4

Lat _____ ° _____ ' _____ " or _____ (degrees or decimal)
Long _____ ° _____ ' _____ " or _____ (degrees or decimal)
Street Address of Well (or nearest address) 30042

(10) STATIC WATER LEVEL
80 ft. below land surface. Date 2-7-09
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWI
<u>60</u>	<u>130</u>	<u>1000+</u>	<u>80</u>

(12) WELL LOG Ground Elevation _____

Material	From	To	SWI
<u>SOIL</u>	<u>0</u>	<u>5</u>	<u>80</u>
<u>Brown CLAY</u>	<u>5</u>	<u>50</u>	
<u>BLACK SAND</u>	<u>50</u>	<u>130</u>	<u>WR</u>
<u>Hard Grey CLAY</u>	<u>130</u>	<u>305</u>	

RECEIVED
OCT 08 2009
WATER RESOURCES DEPT
SALEM, OREGON
Date Started 6-25-09 completed 7-209

(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 1557 Date RECEIVED
Signed Paul Wiers
MAR 30 2010

MAY 06 2022

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 55711
START CARD # 140092

Harn
50741

OWRD

(1) LAND OWNER Well Number Bowl 1
Name Joseph REckley Lois E. Eckley
Address HC 71 Box 441
City Burns State OR Zip 97720

(9) LOCATION OF WELL by legal description:
County Harney Latitude _____ Longitude _____
Township 26 N or S Range 30 E or W. WM.
Section 11 SE 1/4 NW 1/4
Tax Lot 600 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) HC 71 Box 441 Burns, OR.

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

(10) STATIC WATER LEVEL:
53' ft. below land surface. Date 11-30-01
Artesian pressure _____ lb. per square inch Date _____

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

(11) WATER BEARING ZONES:
Depth at which water was first found 68'

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 132 ft.
Explosives used Yes No Type _____ Amount _____

From	To	Estimated Flow Rate	SWL
<u>68'</u>	<u>73'</u>	<u>1500 gpm.</u>	<u>52'</u>
<u>122'</u>	<u>140'</u>	<u>1100 gpm</u>	<u>53'</u>

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>32"</u>	<u>0'</u>	<u>30'</u>	<u>Bentonite</u>	<u>0'</u>	<u>30'</u>	<u>12, 50# Sacks</u>
<u>16"</u>	<u>30'</u>	<u>110'</u>				
<u>14"</u>	<u>110'</u>	<u>130'</u>				
<u>14"</u>	<u>110'</u>	<u>140'</u>				

(12) WELL LOG:
Ground Elevation _____

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 _____

Material	From	To	SWL
<u>Sandy Brown Soil</u>	<u>0'</u>	<u>5'</u>	
<u>Cinders medium-Black</u>	<u>5'</u>	<u>30'</u>	
<u>Clay-Black-grey</u>	<u>30'</u>	<u>68'</u>	
<u>Sand Stone-Tan</u>	<u>68'</u>	<u>73'</u>	<u>52'</u> <i>stink</i>
<u>Cinders - Red-Coarse</u>	<u>73'</u>	<u>80'</u>	<u>52'</u>
<u>Sand-Black-Fine</u>	<u>80'</u>	<u>90'</u>	<u>52'</u>
<u>Basalt-Black-Hard</u>	<u>90'</u>	<u>112'</u>	<u>52'</u>
<u>Sand-Black-Fine</u>	<u>112'</u>	<u>115'</u>	
<u>Sand Stone-Tan</u>	<u>115'</u>	<u>122'</u>	
<u>Red Cinders w/ pieces</u>	<u>122'</u>	<u>130'</u>	<u>53'</u>
<u>Sand-Black-Fine-Coarse</u>	<u>130'</u>	<u>140'</u>	<u>53'</u>
<u>Water Bearing</u>			

(6) CASING/LINER:
Diameter From To Gauge Steel Plastic Welded Threaded
Casing: 16" 0 110' 250
Liner: 14" 0 121' 250

Drive Shoe used Inside Outside None
Final location of shoe(s) 110', 121'

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>None</u>						<input checked="" 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

Yield gal/min	Drawdown	Drill stem at	Time
<u>1500 gpm</u>	<u>52' - 63'</u>	<u>110'</u>	<u>2 hr.</u>
<u>1100 gpm</u>	<u>53' - 99'</u>	<u>140'</u>	<u>6 hrs.</u>

Temperature of water 56° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom self
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy, Odor Colored Other _____
Depth of strata: 68' - 73'

Date started 4-14-01 Completed 11-30-01

(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: Land Owner
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 _____
Signed Joseph R. Eckley Date 12-1-01

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

HARN
 S0516

WELL I.D.# 41297

(START CARD) # 102213

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

(1) OWNER: Well Number #3
 Name Joseph RECKLEY
 Address HC 71, Box 491
 City BURNS State OR Zip 97720

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
20"	0'	4'	Bentonite	0	20'	22-50# sacks
16"	4'	20'				

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from _____ ft. to _____ ft. Material Bentonite
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	0'	76'	2.50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 76'

(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
50	0		1 hr.

Temperature of water 52° Depth Artesian Flow Found NA
 Was a water analysis done? Yes By whom NO
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other None
 Depth of strata: None

(9) LOCATION OF WELL by legal description:
 County Harney Latitude _____ Longitude _____
 Township 26 N or S Range 30 E or W. W.M.
 Section 2 NE 1/4 SW 1/4
 Tax Lot 400 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
66' ft. below land surface. Date 2/2/2000
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 70 feet

From	To	Estimated Flow Rate	SWL
70'	75'	50 gpm	70'
81'	89'	50 gpm	67'
92'	99'	50 gpm	67'

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
sandy soil	1'	4'	
Black Cinders (Fine)	4'	36'	
Black & Red Cinders (Coarse)	36'	50'	
Black Cinders w/white pumice	50'	62'	
Sandstone (Brown)	62'	70'	
Sandstone - Pumice & Diatomite layers	70'	75'	70'
Black Basalt	75'	81'	70'
Clay (aqua blue)	81'	89'	67'
Sandstone medium	89'	92'	67'
Black sand (water bearing)	92'	99'	67'
Black Cinders w/pumice layers	99'	115'	67'

Date started 9-23-98 Completed 4-20-2000

(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 Joseph R. Eckley WWC Number _____ Date 4-23-2000

(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 Joseph R. Eckley WWC Number _____ Date 4-23-2000

RECEIVED

MAY 06 2022

OWRD

Attachment #4
Land Use Information Form
POA Permit Amendment Application for G-18126

Land Use Information Form

RECEIVED
 MAY 06 2022
 OWRD

Applicant(s): Sunnyside Dairy LLC (Rosalio Brambila, Manager)

Mailing Address: 4581 Maple Grove Road

City: Sunnyside State: WA Zip Code: 98944 Daytime Phone: (509) 837-4779

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>26S</u>	<u>30E</u>	<u>2</u>	<u>S 1/2</u>	<u>400 & 600</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>26S</u>	<u>30E</u>	<u>3</u>	<u>SESE</u>	<u>500</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>26S</u>	<u>30E</u>	<u>10</u>	<u>NENE</u>	<u>500</u>	_____	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>26S</u>	<u>30E</u>	<u>11</u>	<u>NE & NW 1/4</u>	<u>400</u>	_____	<input checked="" 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:

Harney

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: 1.0 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:

Replacing one well on existing permit (G-18126), and removing one well from permit. No change in place of use.



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

See bottom of Page 3. →

For Local Government Use Only

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

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): *Acro 3020 / EFLV-2*
- 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

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

Name: Brandon McMiller Title: Planning Director

Signature: [Signature] Phone: (541) 573-6655 Date: 5/3/2022

Government Entity: Harney County

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



Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____



8019 West Quinault Avenue, Suite 201
Kennewick, Washington 99336
509.209-2846

May 4, 2022

RECEIVED

MAY 06 2022

OWRD

ATTN: Transfer Section
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301

RE: Permit Amendment Application for G-18126 (Sunnyside Dairy, LLC)

To Whom It May Concern:

Enclosed please find a completed Permit Amendment Application and Map for permit G-18126 submitted on behalf of our client, Sunnyside Dairy, LLC. A check in the amount of \$1840 for application fees is also enclosed.

Should you have any questions regarding this permit amendment application, please do not hesitate to contact me.

Sincerely,

Molly Reid
Senior Planner

Cc: Sunnyside Dairy, LLC
File

Enclosures: Permit Amendment Map and Attachments

