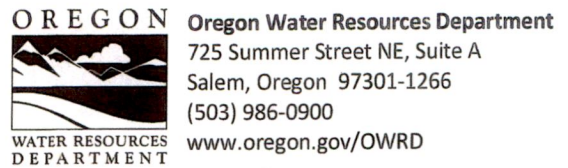


Application for Permanent Water Right Transfer



Part 1 of 5 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: C-64767**
Please include a separate Part 5 for each water right. (See instructions on page 6)
NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

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

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

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Part 2 of 5 – Transfer Application Map

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

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 permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32′15.5″) or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Joseph & Vivian Cronin		PHONE NO. 541-589-0781	ADDITIONAL CONTACT NO.
ADDRESS 35049 N Harney Lane			FAX NO.
CITY Burns	STATE OR	ZIP 97720	E-MAIL
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME Scott D Montgomery/All Points Engr & Surveying, Inc		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401
ADDRESS PO Box 767			FAX NO.
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this transfer application, and why:
Move primary GW irrigation rights to better ground for farming.

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

Check One Box

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

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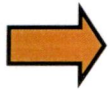
OWRD

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By my signature below, I confirm that I understand:

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

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



Joseph Cronin
Applicant signature

Joseph Cronin, Owner
Print Name (and Title if applicable)

5/6/22
Date

Vivian Cronin
Applicant signature

Vivian Cronin, Owner
Print Name (and Title if applicable)

5/6/22
Date

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

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

Check the following boxes that apply:

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

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

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

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see:

https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

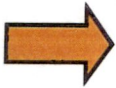
RECEIVING LANDOWNER NAME NA		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO. RECEIVED
CITY	STATE	ZIP	E-MAIL MAY 20 2022
Describe any special ownership circumstances:			OWRD
The confirming Certificate shall be issued in the name of: <input type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner			

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

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP



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

ENTITY NAME Harney County	ADDRESS 360 N Alvord	
CITY Burns	STATE OR	ZIP 97720

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Part 5 of 5 – Water Right Information

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

CERTIFICATE # 64767

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Description of Water Delivery System

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System capacity: 0.52 cubic feet per second (cfs) **OR**
 _____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from the authorized well & conveyed into a flood irrigation system that irrigates the POU.**

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	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 543	23 S	32 .5 E	5	NW NW	4	40' S & 1200' E from NW cor, Sec 5
POA	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50944/50952	22 S	32 E	28	NW NE	1700	485' S & 1369' W from NE cor, Sec 28

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.

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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 # 64767

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.

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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				
23	S	32.	E	5	NE	NW	3		17.5	IR	Well	1978	POU/POA	22	S	32	E	28	SE	SE	1700		28.9	IR	POA	1978
23	S	32.	E	5	NW	NW	4		11.4	IR	Well	1978	POU/POA													
TOTAL ACRES:								28.9	TOTAL ACRES:											28.9						

Additional remarks: _____.

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For Place of Use or Character of Use Changes

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

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



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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department's web page at:

http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
See well log										

Application for Water Right Transfer

Evidence of Use Affidavit



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

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

State of Oregon)
) ss
 County of HARNEY

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I, JOSEPH CRONIN, in my capacity as OWNER/PERMIT HOLDER,
 mailing address 35049 N HARNEY LN, BURNS, OR 97720

telephone number (541)589-0781, 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 # 64767; **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)

OR

- Confirming Certificate # 9 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)

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3. The water right was used for: (e.g., crops, pasture, etc.): CROPS
4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

Vivian G. Cronin
Signature of Affiant

May 11, 2022
Date



Signed and sworn to (or affirmed) before me this 11th day of May, 2022.

Derrin Robinson, Harney County Clerk

[Signature]
Notary Public for Oregon

Notarial Official as per ORS 194.255 (1)(c)

My Commission Expires: upon being elected office

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

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**EBAR OIL
COMPANY**

INVOICE

604 N. HWY 20
HINES, OR 97738

TELEPHONE
541-573-2976

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Name JOE CRODIN Date 8-23-17
 Address (IRRIGATION PUMP)
 P.O. # Truck # Delivered By GORDON PUC

INVOICE INCLUDES APPLICABLE FEDERAL, STATE & LOCAL TAXES ON FUEL UNLESS OTHERWISE INDICATED

# PKGS	SIZE/KIND	PRODUCTS DELIVERED	UNIT PRICE	AMOUNT
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II REGULAR UL MIN OCTANE 87 UN1203 INCLUDING FED AND STATE TAX CONTAINS 10% ETHANOL		140.15
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II NON ETHANOL SUP MIN OCTANE 91 UN1203 INCLUDING FED AND STATE TAX		
	GALLONS	ON ROAD DIESEL #2 ULSD - 15 PG111 UN 1993 COMBUSTIBLE LIQUID CLASS 3, INCLUDING: FED TAX OREGON TAX		
	GALLONS	ON ROAD DIESEL #1 (CLEAR STOVE OIL) ULSD - 15 COMBUSTIBLE LIQUID INCLUDING: FED TAX OREGON TAX		
544	GALLONS	DYED DIESEL #2 NA 1993 500 PPM SULFUR COMBUSTIBLE LIQUID NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE	2.35	1278.40
	GALLONS	DYED DIESEL #1 NA 1993 (DYED STOVE OIL) 500 PPM SULFUR COMBUSTIBLE LIQUID - NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE		
	RIB			
	()	RIB		

CASH SALE	CHARGE SALE	TOTAL	1278.40
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GOODS RECEIVED
IN GOOD CONDITION
BY X

07/10

100-100

100-100

OMR/D

MAY 29 1955

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604 N. HWY 20
HINES, OR 97738

TELEPHONE
541-573-2976

INVOICE

3936

070070

Name Joe Cronin Date 5-1-2018

Address (irrigation Pump)

P.O. # Truck # 85 Delivered By Ben PUC

INVOICE INCLUDES APPLICABLE FEDERAL, STATE & LOCAL TAXES ON FUEL UNLESS OTHERWISE INDICATED

# PKGS	SIZE/KIND	PRODUCTS DELIVERED	UNIT PRICE	AMOUNT
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II REGULAR UL MIN OCTANE 87 UN1203 INCLUDING FED AND STATE TAX CONTAINS 10% ETHANOL		
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II NON ETHANOL SUP MIN OCTANE 91 UN1203 INCLUDING FED AND STATE TAX		
	GALLONS	ON ROAD DIESEL #2 ULSD - 15 PG111 UN 1993 INCLUDING: FED TAX OREGON TAX COMBUSTIBLE LIQUID CLASS 3,		
	GALLONS	ON ROAD DIESEL #1 (CLEAR STOVE OIL) ULSD - 15 INCLUDING: FED TAX OREGON TAX COMBUSTIBLE LIQUID		
310.0	GALLONS	DYED DIESEL #2 NA 1993 500 PPM SULFUR COMBUSTIBLE LIQUID NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE	2.90	899. ⁰⁰
	GALLONS	DYED DIESEL #1 NA 1993 500 PPM SULFUR (DYED STOVE OIL) COMBUSTIBLE LIQUID - NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE		
	RIB			
()	RIB			

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CASH SALE CHARGE SALE

TOTAL 899.⁰⁰

GOODS RECEIVED IN GOOD CONDITION BY X



604 N. HWY 20
HINES, OR 97738

TELEPHONE
541-573-2976

INVOICE

070556

Name Joe Cronin Date 4-9-2018

Address (irrigation Pump)

P.O. # Truck # 85 Delivered By Ben PUC

INVOICE INCLUDES APPLICABLE FEDERAL, STATE & LOCAL TAXES ON FUEL UNLESS OTHERWISE INDICATED

# PKGS	SIZE/KIND	PRODUCTS DELIVERED	UNIT PRICE	AMOUNT
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II REGULAR UL MIN OCTANE 87 UN1203 INCLUDING FED AND STATE TAX CONTAINS 10% ETHANOL		140.1
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II NON ETHANOL SUP MIN OCTANE 91 UN1203 INCLUDING FED AND STATE TAX		141
	GALLONS	ON ROAD DIESEL #2 ULSD - 15 PG111 UN 1993 INCLUDING: FED TAX OREGON TAX COMBUSTIBLE LIQUID CLASS 3,		
	GALLONS	ON ROAD DIESEL #1 (CLEAR STOVE OIL) ULSD - 15 INCLUDING: FED TAX OREGON TAX COMBUSTIBLE LIQUID		
425.0	GALLONS	DYED DIESEL #2 NA 1993 500 PPM SULFUR COMBUSTIBLE LIQUID NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE	2.79	1185. ⁷⁵
	GALLONS	DYED DIESEL #1 NA 1993 500 PPM SULFUR (DYED STOVE OIL) COMBUSTIBLE LIQUID - NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE		
	RIB			
()	RIB			

CASH SALE CHARGE SALE

TOTAL 1185.⁷⁵

GOODS RECEIVED IN GOOD CONDITION BY X



604 N. HWY 20
HINES, OR 97738

TELEPHONE
541-573-2976

INVOICE

#13736 079785

Name Joe Cronin Date 6-4-2018
Address (Irrigation Pump)
P.O. # Truck # 98 Delivered By Ben PUC

INVOICE INCLUDES APPLICABLE FEDERAL, STATE & LOCAL TAXES ON FUEL UNLESS OTHERWISE INDICATED

# PKGS	SIZE/KIND	PRODUCTS DELIVERED	UNIT PRICE	AMOUNT
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II REGULAR UL MIN OCTANE 87 UN1203 INCLUDING FED AND STATE TAX CONTAINS 10% ETHANOL		
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II NON ETHANOL SUP MIN OCTANE 91 UN1203 INCLUDING FED AND STATE TAX		
	GALLONS	ON ROAD DIESEL #2 ULSD - 15 PG111 UN 1993 COMBUSTIBLE LIQUID CLASS 3, INCLUDING: FED TAX OREGON TAX		
	GALLONS	ON ROAD DIESEL #1 (CLEAR STOVE OIL) ULSD - 15 COMBUSTIBLE LIQUID INCLUDING: FED TAX OREGON TAX		
<u>318.4</u>	GALLONS	DYED DIESEL #2 NA 1993 COMBUSTIBLE LIQUID NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE 500 PPM SULFUR	<u>2.92</u>	<u>929.¹³</u>
	GALLONS	DYED DIESEL #1 NA 1993 (DYED STOVE OIL) COMBUSTIBLE LIQUID - NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE 500 PPM SULFUR		
()	RIB			
()	RIB			
		CASH SALE		
		CHARGE SALE	<input checked="" type="checkbox"/>	
TOTAL				

RECEIVED
MAY 20 2022
OVRD

GOODS RECEIVED
IN GOOD CONDITION
BY X



604 N. HWY 20
HINES, OR 97738

TELEPHONE
541-573-2976

INVOICE

079785

Name Joe Cronin Date 5-16-2018
Address (Irrigation Pump)
P.O. # Truck # 98 Delivered By Ben PUC

INVOICE INCLUDES APPLICABLE FEDERAL, STATE & LOCAL TAXES ON FUEL UNLESS OTHERWISE INDICATED

# PKGS	SIZE/KIND	PRODUCTS DELIVERED	UNIT PRICE	AMOUNT
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II REGULAR UL MIN OCTANE 87 UN1203 INCLUDING FED AND STATE TAX CONTAINS 10% ETHANOL		
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II NON ETHANOL SUP MIN OCTANE 91 UN1203 INCLUDING FED AND STATE TAX		
	GALLONS	ON ROAD DIESEL #2 ULSD - 15 PG111 UN 1993 COMBUSTIBLE LIQUID CLASS 3, INCLUDING: FED TAX OREGON TAX		
	GALLONS	ON ROAD DIESEL #1 (CLEAR STOVE OIL) ULSD - 15 COMBUSTIBLE LIQUID INCLUDING: FED TAX OREGON TAX		
<u>246.0</u>	GALLONS	DYED DIESEL #2 NA 1993 COMBUSTIBLE LIQUID NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE 500 PPM SULFUR	<u>2.91</u>	<u>715.⁸⁶</u>
	GALLONS	DYED DIESEL #1 NA 1993 (DYED STOVE OIL) COMBUSTIBLE LIQUID - NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE 500 PPM SULFUR		
()	RIB			
()	RIB			
		CASH SALE		
		CHARGE SALE	<input checked="" type="checkbox"/>	
TOTAL				<u>715.⁸⁶</u>

140.17

GOODS RECEIVED
IN GOOD CONDITION
BY X

192
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604 N. HWY 20
HINES, OR 97738

E BAR OIL
COMPANY

TELEPHONE
541-573-2976

39310

INVOICE
79158

Name Joe Cronin Date 6-22-2018
Address (irrigation Pump)
P.O. # Truck # 98 Delivered By Ben PUC

INVOICE INCLUDES APPLICABLE FEDERAL, STATE & LOCAL TAXES ON FUEL UNLESS OTHERWISE INDICATED

# PKGS	SIZE/KIND	PRODUCTS DELIVERED	UNIT PRICE	AMOUNT
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II REGULAR UL MIN OCTANE 87 UN1203 INCLUDING FED AND STATE TAX CONTAINS 10% ETHANOL		
	GALLONS	GASOLINE FLAMMABLE LIQUID CLASS 3, PG II NON ETHANOL SUP MIN OCTANE 91 UN1203 INCLUDING FED AND STATE TAX		
	GALLONS	ON ROAD DIESEL #2 ULSD - 15 PG111 UN 1993 COMBUSTIBLE LIQUID CLASS 3, INCLUDING: FED TAX OREGON TAX		
	GALLONS	ON ROAD DIESEL #1 (CLEAR STOVE OIL) ULSD - 15 COMBUSTIBLE LIQUID INCLUDING: FED TAX OREGON TAX		
270.0	GALLONS	DYED DIESEL #2 NA 1993 COMBUSTIBLE LIQUID NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE 500 PPM SULFUR	2.95	796.50
	GALLONS	DYED DIESEL #1 NA 1993 (DYED STOVE OIL) COMBUSTIBLE LIQUID - NON TAXABLE USE ONLY OFF HWY USE ONLY, PENALTY FOR TAXABLE USE 500 PPM SULFUR		
	RIB			
()	RIB			
		CASH SALE	CHARGE SALE	TOTAL
				796.50

GOODS RECEIVED
IN GOOD CONDITION
BY X

RECEIVED
MAY 20 2022
OWRD

14017

Invoice

RECEIVED

MAY 20 2022

OWRD

DATE
08/01/2018

BILL TO
Joe and Gay Cronin

INVOICE #
1934

TERMS
Due on recpt

DATE	DESCRIPTION	QTY	UNIT	PRICE	AMOUNT
7/21/2018	LABOR & equ... cut hay at Highway 20 ranch	6		100.00 farm work	600.00
7/23/2018	LABOR & equ... rake hay at highway 20 ranch	4		100.00 farm work	400.00
7/25/2018	LABOR & equ... bale hay at highway 20 ranch, +/- 35 tons in small bales	5		100.00 farm work	500.00

14017

Your customer can't pay this invoice online

CUSTOMER MESSAGE

pay to Fort Harney Ranch, PO Box
1326, Hines, Or. 97738

TOTAL 1,500.00
PAYMENTS APPLIED 0.00
BALANCE DUE 1,500.00

Invoice

RECEIVED

MAY 20 2022

OWRD

DATE 08/02/2017
BILL TO Joe and Gay Cronin
INVOICE # 1933

TERMS
Due on recpt

LABOR & equ...	7/18/2017, mowing hay at highway 20 ranch	5	100.00	farm work	500.00
LABOR & equ...	7/22/2017, raking hay at highway 20 ranch	3	100.00	farm work	300.00
LABOR & equ...	7/24/2017, baling hay at highay 20 ranch, +/- 25 tons in small bales	4	100.00	farm work	400.00

14017

Your customer can't pay this invoice online

CUSTOMER MESSAGE

pay to Fort Harney Ranch, PO Box
1326, Hines, Or. 97738

TOTAL 1,200.00
PAYMENTS APPLIED 0.00
BALANCE DUE 1,200.00

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

WATER WELL REPORT

State Well No. 235/32E-5

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

STATE OF OREGON
 AUG 21 1978
 DEPT. OF RESOURCES
 SALEM, OREGON

State Permit No. _____

RECEIVED

543
 Horn

(1) OWNER:

JUL 25 1978

Name M. M. WATER RESOURCES DEPT.
Dwight K. and Lynn Marie
 Address P.O. Box 349 SALEM, OREGON
BURNS, OR. 97220

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
 Cable Jetted
 Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
 Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded

12" Diam. from 0 ft. to 80 ft. Gage 2.950
 " Diam. from _____ ft. to _____ ft. Gage _____
 " Diam. from _____ ft. to _____ ft. Gage _____

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 _____ Model No. _____
 Type _____ 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? _____
 Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.
 "
 "
 Bailor test _____ 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 Grout
 Well sealed from land surface to _____ ft.
 Diameter of well bore to bottom of seal 18 in.
 Diameter of well bore below seal 12 in.
 Number of sacks of cement used in well seal _____ sacks
 Number of sacks of bentonite used in well seal _____ sacks
 Brand name of bentonite _____
 Number of pounds of bentonite per 100 gallons of water _____ lbs./100 gals.
 Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
 Did any strata contain unusable water? Yes No
 Type of water? _____ depth of strata _____
 Method of sealing strata off _____
 Was well gravel packed? Yes No Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County HARNEY Driller's well number _____
Lot 4, Section 5 T.23 S.R. 32 1/2 E. W.M.
 Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 12 ft.
 Static level 7 ft. below land surface. Date June 30
 Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 12

Depth drilled 170 ft. Depth of completed well 170 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	1	4	
Hard Pan	4	9	
(Sandy) Brown Clay	9	12	
(FINE) SAND GRAVEL	12	16	
BROWN CLAY	16	80	
PUMICE	80	103	WB
Blue Clay	103	107	
PUMICE & SAND	107	132	WB
CLAY STONE	132	146	
PUMICE & SAND	146	166	WB
BROWN CLAY	166	170	

Work started June 25 1978 Completed June 30 1978

Date well drilling machine moved off of wall July 2 1978

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] Dwight K. Mims Date 6-30-1978
 (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 Dwight K. Mims
 (Person, firm or corporation) (Type or print)

Address P.O. Box 349 Burns, OR 977

[Signed] Dwight K. Mims
 (Water Well Contractor)

Contractor's License No. 401 Date 6-30-1978

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

WELL I.D. # L 659173
 START CARD # 144623

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

(1) LAND OWNER Name GREG SHOLL Well Number _____
 Address 1071 N Buena Vista
 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 125 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
18	0	25	bentonite	0	25	30 sacks	
14	25	135					

How was seal placed: Method A B C D E
 Other packed dry & tamped
 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: 14	+1	60	375	<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"/>

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"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
100	4		1 hr.

Pump Bailer Air Artesian

Temperature of water 58° Depth Artesian Flow Found _____
 Was a water analysis done? No Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County Harney Latitude _____ Longitude _____
 Township 22 S N or S Range 32 E E or W. WM.
 Section 28 NW 1/4 NE 1/4
 Tax Lot 1700 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Old Harney Ln

(10) STATIC WATER LEVEL:
17 ft. below land surface. Date 4-29-03
 Artesian pressure _____ lb. per square inch Date _____

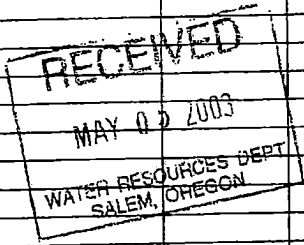
(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
25	130	450	17

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
clay loam topsoil	0	1	
clay brn	1	5	
sandstone	5	6	
clay brn	6	25	
clay gravel	25	35	17
gravel clay	35	45	17
sand fine brn	45	125	17
sand fine caving	125	130	17
clay	130	135	17



Date started 4-24-03 Completed 4-29-03

(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 1424
 Signed Timothy R. Kelly Date 5-1-03

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

WELL I.D. # L L59173
 START CARD # 155555

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

(1) LAND OWNER Well Number _____
 Name Greg Shull
 Address 1071 N. Buena Vista
 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 131 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>28</u>	<u>0</u>	<u>18</u>	<u>pentonite</u>	<u>0</u>	<u>18</u>	<u>20 sacks</u>
<u>22</u>	<u>18</u>	<u>131</u>				

How was seal placed: Method A B C D E
 Other poured dry + tamped

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from 0 ft. to 123 ft. Size of gravel 3/8 pea

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>24</u>	<u>1</u>	<u>20</u>	<u>.250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: <u>12</u>	<u>2</u>	<u>131</u>	<u>.250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type wire wrap Material galv. steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>73</u>	<u>123</u>	<u>.125</u>	<u>continuous</u>	<u>12"</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Artesian
 Yield gal/min 100 Drawdown 3 Drill stem at _____ Time 1 hr.

Temperature of water 58° Depth Artesian Flow Found _____
 Was a water analysis done? NO Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County Harney Latitude _____ Longitude _____
 Township 22S N or S Range 32E E or W. WM.
 Section 28 NW 1/4 NE 1/4
 Tax Lot 1700 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Old Harney Lane

(10) STATIC WATER LEVEL:
17 ft. below land surface. Date 6-2-03
 Artesian pressure _____ lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWL
<u>25</u>	<u>130</u>	<u>450</u>	<u>17</u>

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
<u>EXISTING</u>			

RECEIVED

JUN 16 2003

WATER RESOURCES DEPT
 SALEM, OREGON

Date started 5-27-03 Completed 6-2-03

(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 1424
 Signed Timothy K. Rife Date 6-6-03

STATE OF OREGON
COUNTY OF HARNEY
CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

DWIGHT K. AND LYNN MARIE MIMS
P.O. BOX 349
BURNS, OREGON 97720

confirms the right to use the waters of A WELL in the NINE MILE SLOUGH BASIN for the purpose of PRIMARY IRRIGATION OF 28.9 ACRES AND SUPPLEMENTAL IRRIGATION OF 28.5 ACRES.

The right has been perfected under Permit G-8310. The date of priority is JULY 25, 1978. The right is limited to not more than 0.52 CUBIC FOOT PER SECOND or its equivalent in case of rotation, measured at the well.

The well is located as follows:

LOT 4 (NW 1/4 NW 1/4), SECTION 5, T 23 S, R 32 1/2 E, W.M.;
40 FEET SOUTH AND 1200 FEET EAST FROM THE NW CORNER OF SECTION 5.

The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated and shall be further limited to a diversion of not to exceed 3.0 acre-feet per acre for each acre irrigated during the irrigation season of each year. The right shall be limited to any deficiency in the available supply of any prior right existing for the same land and shall not exceed the limitation allowed herein.

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

A description of the place of use under the right, and to which such right is appurtenant, is as follows:

	<u>PRIMARY</u>	<u>SUPPLEMENTAL</u>
SW 1/4 SW 1/4		1.5 ACRES
SE 1/4 SW 1/4		0.1 ACRE
SECTION 32		
TOWNSHIP 22 SOUTH, RANGE 32 1/2 EAST, W.M.		
LOT 3 (NE 1/4 NW 1/4)	17.5 ACRES	2.6 ACRES
LOT 4 (NW 1/4 NW 1/4)	11.4 ACRES	24.3 ACRES
SECTION 5		
TOWNSHIP 23 SOUTH, RANGE 32 1/2 EAST, W.M.		

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

WITNESS the signature of the Water Resources Director,
affixed this date SEPTEMBER 28, 1990.

/s/ WILLIAM H. YOUNG

Water Resources Director

Recorded in State Record of Water Right Certificates numbered 64767.

G-8904.JW