

# Application for Permanent Water Right Transfer

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

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

RECEIVED

JUL 18 2022

OWRD

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

- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Transfer Application Map Checklist.
- ☒ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at:  
[http://apps.wrd.state.or.us/apps/misc/wrd\\_fee\\_calculator](http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator).
- ☒ Part 4 – Completed Applicant Information and Signature.
- ☒ Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: 64041**

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: \_\_\_\_/\_\_\_\_/\_\_\_\_

JUL 18 2022

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

14047

# Part 3 of 5 – Fee Worksheet

## FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)

|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |   |         |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---------|
| 1 | Base Fee (includes one type of change to one water right for up to 1 cfs)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 1 | \$1,360 |
| 2 | Types of change proposed:<br><input checked="" type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation<br>Number of above boxes checked = <u>2 (2a)</u><br>Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i><br>Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » » » » »                                                                                                                                                           | 2 | \$1,090 |
| 3 | Number of water rights included in transfer <u>1 (3a)</u><br>Subtract 1 from the number in 3a above: <u>0 (3b)</u> <i>If only one water right this will be 0</i><br>Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » » » » » » » »                                                                                                                                                                                                                                                                                                                                            | 3 | 0       |
| 4 | Do you propose to add or change a well, or change from a surface water POD to a well?<br><input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: enter \$480 for the 1 <sup>st</sup> well to be added or changed <u>\$480 (4a)</u><br><br>Do you propose to add or change additional wells?<br><input checked="" type="checkbox"/> No: enter 0 <input type="checkbox"/> Yes: multiply the number of additional wells by \$410 <u>0 (4b)</u><br>Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » » » » » » »                                              | 4 | \$480   |
| 5 | Do you propose to change the place of use or character of use?<br><input type="checkbox"/> No: enter 0 on line 5<br><input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see below*): <u>0.285 (5a)</u><br>Subtract 1.0 from the number in 5a above: <u>-0.718 (5b)</u><br>If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » » » » » » » »<br>If 5b is greater than 0, round up to the nearest whole number: <u>0 (5c)</u> and multiply<br>5c by \$410, then enter on line 5 » » » » » » » » » » » » » » » » » » » » » » | 5 | 0       |
| 6 | Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 6 | \$2,930 |
| 7 | Is this transfer:<br><input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932?<br><input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat?<br>If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »                                                                                                                                                                                                                  | 7 |         |
| 8 | If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » » » » » » » »<br>Subtract line 7 from line 6 » » » » » » » » » » » » » » » » » » » » » » <b>Transfer Fee:</b>                                                                                                                                                                                                                                                                                                                                                                                                         | 8 | \$2,930 |

RECEIVE  
JUL 18 2022  
OWRD

\*Example for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

- For irrigation calculate cfs for each water right involved as follows:
  - Divide total authorized cfs by total acres in the water right (for C12345,  $1.25 \text{ cfs} \div 100 \text{ ac}$ ); then multiply by the number of acres to be transferred to get the transfer cfs ( $\times 45 \text{ ac} = 0.56 \text{ cfs}$ ).
  - If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654,  $45.0 \text{ ac} \times 0.0125 \text{ cfs/ac} = 0.56 \text{ cfs}$ )
- Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land**. The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

## FEE WORKSHEET for SUBSTITUTION

|   |                                                                                                                                                                                                                                     |   |          |
|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----------|
| 1 | Base Fee (includes change to one well)                                                                                                                                                                                              | 1 | \$990.00 |
| 2 | Number of wells included in substitution _____ (2a)<br>Subtract 1 from the number in 2a above: _____ (2b) <i>If only one well this will be 0</i><br>Multiply line 2b by \$480 and enter » » » » » » » » » » » » » » » » » » » » » » | 2 |          |
| 3 | Add entries on lines 1 through 2 above » » » » » » <b>Fee for Substitution:</b>                                                                                                                                                     | 3 |          |

14047

## Part 4 of 5 – Applicant Information and Signature

### Applicant Information

|                                                                                                                                                                             |                    |                                  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------|------------------------|
| APPLICANT/BUSINESS NAME<br><b>Scott &amp; Geraldine Campbell</b>                                                                                                            |                    | PHONE NO.<br><b>541-576-4822</b> | ADDITIONAL CONTACT NO. |
| ADDRESS<br><b>PO Box 192</b>                                                                                                                                                |                    | FAX NO.                          |                        |
| CITY<br><b>Christmas Valley</b>                                                                                                                                             | STATE<br><b>OR</b> | ZIP<br><b>97641</b>              | 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<br><b>Scott D Montgomery</b>                                                                                                                            |                    | PHONE NO.<br><b>541-548-5833</b> | ADDITIONAL CONTACT NO.<br><b>541-420-0401</b> |
| ADDRESS<br><b>PO Box 767</b>                                                                                                                                                |                    | FAX NO.                          |                                               |
| CITY<br><b>Terrebonne</b>                                                                                                                                                   | STATE<br><b>OR</b> | ZIP<br><b>97760</b>              | E-MAIL<br><b>scott@apeands.com</b>            |
| 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:  
Moving corner areas from partial center pivot field to full center pivot field two miles north.

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

### Check One Box

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

**RECEIVED**

**JUL 18 2022**

**OWRD**

**14047**

**By my signature below, I confirm that I understand:**

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

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

Scott I Campbell  
Applicant signature

Scott Campbell, Owner  
Print Name (and Title if applicable)

6/27/22  
Date

Geraldine L Campbell  
Applicant signature

Geraldine Campbell, Owner  
Print Name (and Title if applicable)

6/27/22  
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](https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf)

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

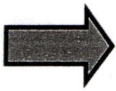


☐ Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

|                                       |         |     |
|---------------------------------------|---------|-----|
| IRRIGATION DISTRICT NAME<br><b>NA</b> | 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<br><b>NA</b> | 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<br><b>Lake County</b> | ADDRESS<br><b>513 Center St</b> |                     |
| CITY<br><b>Lakeview</b>           | STATE<br><b>OR</b>              | ZIP<br><b>97630</b> |

RECEIVED

JUL 18 2022

OWRD

14047



## 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 # **64041**

**RECEIVED**

### Description of Water Delivery System

**JUL 18 2022**

System capacity: **0.95** cubic feet per second (cfs) OR

**OWRD**

\_\_\_\_\_ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from the authorized wells & conveyed by buried conduit to a partial center pivot sprinkler and handlines that irrigate the place of use.**

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

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

| POD/POA<br>Name or<br>Number | Is this POD/POA<br>Authorized on<br>the Certificate or<br>is it Proposed?           | If POA, OWRD<br>Well Log ID#<br>(or Well ID<br>Tag # L-___) | Twp |   | Rng |   | Sec |    | ¼ ¼ |     | Tax<br>Lot,<br>DLC<br>or<br>Gov't<br>Lot  | Measured Distances<br>(from a recognized<br>survey corner) |
|------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------|-----|---|-----|---|-----|----|-----|-----|-------------------------------------------|------------------------------------------------------------|
| #1                           | <input checked="" type="checkbox"/> Authorized<br><input type="checkbox"/> Proposed | LAKE 1125                                                   | 27  | S | 18  | E | 12  | SE | NW  | 500 | 2420' S & 220' W from N<br>¼ cor, Sec 12  |                                                            |
| #2                           | <input checked="" type="checkbox"/> Authorized<br><input type="checkbox"/> Proposed | LAKE 3105                                                   | 27  | S | 18  | E | 12  | NE | NW  | 200 | 1320' S & 200' W from N<br>¼ cor, Sec 12  |                                                            |
| POA                          | <input type="checkbox"/> Authorized<br><input checked="" type="checkbox"/> Proposed | LAKE 52587                                                  | 26  | S | 18  | E | 26  | SE | SW  | 200 | 1327' S & 1335' W from W<br>¼ cor, Sec 26 |                                                            |
|                              | <input type="checkbox"/> Authorized<br><input type="checkbox"/> Proposed            |                                                             |     |   |     |   |     |    |     |     |                                           |                                                            |

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

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

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

- ☐ Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- ☒ No Complete all of Table 2 to describe the portion of the water right to be changed. **14047**

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 # 64041**

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

| AUTHORIZED (the "from" or "off" lands)<br>The listing that appears on the certificate BEFORE PROPOSED CHANGES<br>List only that part or portion of the water right that will be changed. |     |     |     |         |                      |      |                                         |                                                         |                  |     | Proposed<br>Changes (see<br>"CODES" from<br>previous<br>page) | PROPOSED (the "to" or "on" lands)<br>The listing as it would appear AFTER PROPOSED CHANGES<br>are made. |         |     |         |                      |      |                    |                                                      |                  |     |      |      |    |     |      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|-----|---------|----------------------|------|-----------------------------------------|---------------------------------------------------------|------------------|-----|---------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|---------|-----|---------|----------------------|------|--------------------|------------------------------------------------------|------------------|-----|------|------|----|-----|------|
| Twp                                                                                                                                                                                      | Rng | Sec | ¼ ¼ | Tax Lot | Gvt<br>Lot or<br>DLC | Acre | Type of USE<br>listed on<br>Certificate | POD(s) or<br>POA(s) (name<br>or number<br>from Table 1) | Priority<br>Date | Twp |                                                               | Rng                                                                                                     | Sec     | ¼ ¼ | Tax Lot | Gvt<br>Lot or<br>DLC | Acre | New Type of<br>USE | POD(s)/<br>POA(s) to<br>be used<br>(from<br>Table 1) | Priority<br>Date |     |      |      |    |     |      |
| 27                                                                                                                                                                                       | S   | 18  | E   | 12      | NE                   | NW   | 200                                     |                                                         | 11.5             | IR  | #1 & #2                                                       | 1983                                                                                                    | POU/POA | 26  | S       | 18                   | E    | 26                 | NW                                                   | SW               | 200 |      | 22.8 | IR | POA | 1983 |
| 27                                                                                                                                                                                       | S   | 18  | E   | 12      | SE                   | NW   | 500                                     |                                                         | 11.3             | IR  | #1 & #2                                                       | 1983                                                                                                    | POU/POA |     |         |                      |      |                    |                                                      |                  |     |      |      |    |     |      |
| TOTAL ACRES:                                                                                                                                                                             |     |     |     |         |                      |      |                                         |                                                         | 22.8             |     | TOTAL ACRES:                                                  |                                                                                                         |         |     |         |                      |      |                    |                                                      |                  |     | 22.8 |      |    |     |      |

Additional remarks: \_\_\_\_\_.

RECEIVED

JUL 18 2022

OWRD

14047



**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 # \_\_\_\_\_.

**For a change from Supplemental Irrigation Use to Primary Irrigation Use**

Identify the primary certificate to be cancelled. Certificate # \_\_\_\_\_

**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](http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx)

**AND/OR**

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

**Table 3. Construction of Point(s) of Appropriation**

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

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

RECEIVED

JUL 18 2022

14047

OWRD

DE 5098

1994-1-1

0000

# 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 )  
County of LAKE ) ss

County of LAKE)

I, SCOTT CAMPBELL, in my capacity as OWNER,

mailing address PO BOX 192, CHRISTMAS VALLEY, OR 97641

telephone number (541)576-4822, being first duly sworn depose and say:

RECEIVED

JUL 18 2022

OWRD

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 # 64041; **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<br>or DLC | Acres<br>(if applicable) |
|---------------|----------|-------|-----|-----|-----|---------------------|--------------------------|
|               |          |       |     |     |     |                     |                          |
|               |          |       |     |     |     |                     |                          |
|               |          |       |     |     |     |                     |                          |
|               |          |       |     |     |     |                     |                          |
|               |          |       |     |     |     |                     |                          |
|               |          |       |     |     |     |                     |                          |
|               |          |       |     |     |     |                     |                          |

OR

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

(continues on reverse side)

14047

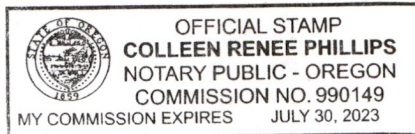
3. The water right was used for: (e.g., crops, pasture, etc.): CROPS

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.

Satt I Campbell  
Signature of Affiant

7-7-22  
Date

Signed and sworn to (or affirmed) before me this 7 day of July, 2022.



Colleen R Phillips  
Notary Public for Oregon

My Commission Expires: July 30, 2023

| Supporting Documents                                                                                                                                                                            | Examples                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)                                                 | Copy of <b>confirming</b> 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"><li>• Power usage records for pumps associated with irrigation use</li><li>• Fertilizer or seed bills related to irrigated crops</li><li>• Farmers Co-op sales receipt</li></ul>                                                                                                                                                                                                                                                                                                                                                                                 |
| <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"><li>• District assessment records for water delivered</li><li>• Crop reports submitted under a federal loan agreement</li><li>• Beneficial use reports from district</li><li>• IRS Farm Usage Deduction Report</li><li>• Agricultural Stabilization Plan</li><li>• CREP Report</li></ul>                                                                                                                                                                                                                                                                         |
| <input checked="" type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph<br><br><b>RECEIVED</b><br><br><b>JUL 18 2022</b><br><br><b>OWRD</b> | Multiple photos can be submitted to resolve different areas of a water right.<br>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.<br><br>Sources for aerial photos:<br>OSU – <a href="http://www.oregonexplorer.info/imagery">www.oregonexplorer.info/imagery</a><br>OWRD – <a href="http://www.wrd.state.or.us">www.wrd.state.or.us</a><br>Google Earth – <a href="http://earth.google.com">earth.google.com</a><br>TerraServer – <a href="http://www.terraserver.com">www.terraserver.com</a> |
| <input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years                                                                                                     | Copy of instream lease or lease number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

14047

GE 1009

0058111

000000



HELENA AGRICULTURAL ENTERPRISES, LLC. WAHMAN IS TO THE EXTENT OF THE PURCHASE PRICE THAT THE GOODS SOLD ARE AS DESCRIBED ON THE CONTAINER WITHIN RECOGNIZED TOLERANCES. SELLER GIVES NO FURTHER WARRANTY, EXPRESSED OR IMPLIED OF THOSE GOODS SOLD.

NON-HAZARDOUS  
MATERIAL

P.O. Box 117 • 505 "C" Street  
Culver, Oregon 97734  
(541) 546-5222 • Fax 546-2237

20512 Nels Anderson, Bldg. 3, Ste. E  
Bend, Oregon 97701  
(541) 385-7001 • Fax: 617-9843

1225 NW Gardner Rd., Ste. 200  
Prineville, Oregon 97754  
(541) 447-5609 • Fax: 447-1403

87210 Christmas Valley Hwy.  
Christmas Valley, Oregon 97641  
(541) 576-3094

This invoice is due and payable 10th of month following billing. This company reserves the right to claim a crop lien as provided by local law. The **SERVICE CHARGE** is computed by a **PERIODIC RATE OF 1-1/2% PER MONTH**. This is an **ANNUAL PERCENTAGE RATE of 18%** applied to all past due amounts. Customer agrees to pay all reasonable attorneys fees and other costs incurred in collections.

Date 6-28-22

Sold To Scott Campbell Truck # \_\_\_\_\_ Trailer # \_\_\_\_\_

Work Order No. \_\_\_\_\_ Sold By SP

☒ CHARGE ☐ CASH ☐ RETURNED

| QTY.                                                                                                                                                             | DESCRIPTION | PRICE                 | AMOUNT |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------|--------|
| Bulk                                                                                                                                                             | Amidas      | ID 59                 |        |
|                                                                                                                                                                  |             | GROSS 9340 lb INBOUND |        |
| 1020                                                                                                                                                             |             | 06/28/2022 03:44PM    |        |
|                                                                                                                                                                  | 1 Tote      | ID 59                 |        |
|                                                                                                                                                                  |             | GROSS 10360 lb        |        |
|                                                                                                                                                                  |             | TARE 9340 lb RECALLED |        |
|                                                                                                                                                                  |             | NET 1020 lb           |        |
|                                                                                                                                                                  |             | 06/28/2022 03:46PM    |        |
| Kind of package, description of articles, special marks and exceptions.<br>D.O.T. proper shipping names and hazard class in red, freight classification in blue. |             |                       |        |

Shipping Location

Ending Location

Culver OR

Christmas Valley OR

IMPORTANT: IT IS ILLEGAL TO TRANSPORT MATERIAL MARKED AS OR KNOWN TO BE POISON CLASS A OR B IN THE SAME VEHICLE WITH MATERIAL WHICH IS MARKED AS OR KNOWN TO BE FOOD STUFFS, FEED OR ANY OTHER EDIBLE MATERIAL INTENDED FOR CONSUMPTION BY HUMANS OR ANIMALS.

NOTE: Federal and/or state regulations, require the vehicle driver shall ensure shipping paper availability to authorities in the event of accident or inspection.

SHIPPER PER  
(Signature)

LOADED BY  
(Initial)

DELIVERED BY  
(Initial)

RECEIVED BY  
(Signature)

FOR HELP IN CHEMICAL TRANSPORTATION EMERGENCIES INVOLVING SPILL, LEAK,  
FIRE OR EXPOSURE, PHONE TOLL FREE, DAY OR NIGHT  
ISOLATE THE SPILL, CARGO AND VEHICLES INVOLVED.

CHEM-  
TREC (800) 424-9300

TRIP TICKET ☐ COMPANY TRUCKS  
☒ CUSTOMER PICK-UP

F 91959  
PLANT COPY

RECEIVED

JUL 18 2022

OWRD

14047

## Church Family Farms, Inc

# INVOICE

88451 Raven Ridge Lane  
PO Box 751  
Christmas Valley, OR 97641  
Phone

INVOICE # 040122  
DATE April 2022

TO  
Scott and Jeri Campbell  
91497 Christmas Valley Highway  
Christmas Valley, OR 97641

FOR: Dirt work and plant corners

| Description                                   | Amount  |
|-----------------------------------------------|---------|
| Disk and Pack Corners to prepare for planting | 1260.00 |
| Drill Grain Seed                              | 625.00  |
| 1560 lbs Oat Seed                             | 592.80  |

**RECEIVED**

**JUL 18 2022**

**OWRD**

**Total**

**\$ 2,477.80**

Make all checks payable to Church Family Farms, Inc  
Payment is due within 30 days.

If you have any questions concerning this invoice, contact Buck Church @ 541-408-6747

THANK YOU FOR YOUR BUSINESS!

**14047**



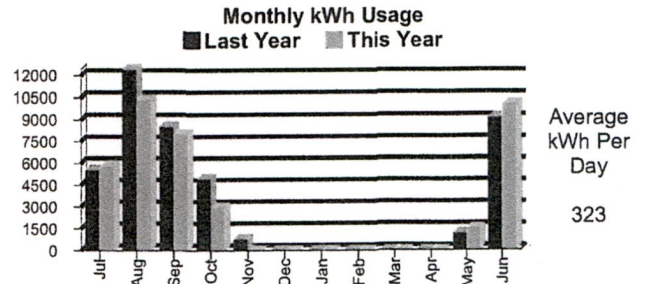
A Touchstone Energy® Cooperative

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

**IMPORTANT INFORMATION****Co-Op News**

Smarthub is the center of member engagement. Manage your electric account 24/7 by accessing Smarthub at [www.mse.coop](http://www.mse.coop).  
**OUR OFFICE WILL BE CLOSED MONDAY JULY 4, 2022 FOR INDEPENDENCE DAY. OUR AFTER-HOURS OUTAGE LINE, (800) 752-5935, IS AVAILABLE 24 HOURS A DAY TO ASSIST YOU.**

SCOTT L CAMPBELL  
GERALDINE L CAMPBELL  
PO BOX 192  
CHRISTMAS VALLEY OR 97641-0192



Account Number: 2872911

Service Location: 37 HP

Billing Date: 06/21/2022 Billing Cycle: 3 Rate: Irr-Seasonal Bill Type: Regular

**Account Detail**

|                                       |                 |
|---------------------------------------|-----------------|
| Previous Balance                      | 125.04          |
| Payments Received 05/25/2022          | 125.04 Credit   |
| <b>Balance Forward</b>                | <b>\$0.00</b>   |
| Energy Charge (kWh) 10,021 @ \$0.0449 | 449.94          |
| Demand Charge (kW) 30.859 @ \$5.20    | 160.47          |
| Facilities Charge                     | 64.00           |
| Prompt Pay Discount                   | 1.95 Credit     |
| <b>Current Charges</b>                | <b>\$672.46</b> |

**Total Amount Due \$672.46****Electric Service Detail**

Meter Number: 68409  
Reading Dates: 04/30/2022 - 05/31/2022  
Number of Days: 31  
Current Reading: 434896  
Last Reading: 424875  
kWh: 10,021  
kW: 30.859

Multiplier: 1.0

**RECEIVED****JUL 18 2022****OWRD**

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

Account Number: 2872911 Billing Cycle: 3

Current Charges Due Date: 07/11/2022

Total Amount Due: \$672.46

Relief Fund Contribution: (optional)

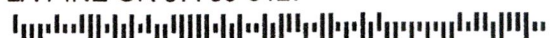
Total Amount Paid:



A Touchstone Energy® Cooperative

SCOTT L CAMPBELL  
GERALDINE L CAMPBELL  
PO BOX 192  
CHRISTMAS VALLEY OR 97641-0192

MIDSTATE ELECTRIC COOPERATIVE INC  
PO BOX 127  
LA PINE OR 97739-0127



0390390621220002872911006724600672461

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

RECEIVED BY OWRD  
LAKE 52587

DEC 12 2014

WELL LABEL # L

START CARD #

LAKE 52581

115912

211204

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

SALEM, OR

(1) LAND OWNER

Owner Well I.D. \_\_\_\_\_  
First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Company FLOWERRE Flax & Grain  
Address 800 Bay 820  
City Bend State OR Zip 97708

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

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud  
☐ Reverse Rotary ☐ Other \_\_\_\_\_

(4) PROPOSED USE ☐ Domestic ☒ Irrigation ☐ Community  
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection  
☐ Thermal ☐ Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION Special Standard: ☐ Yes (attach copy)  
Depth of Completed Well 600 ft.

| BORE HOLE |      |     |          | SEAL |    |        |          |
|-----------|------|-----|----------|------|----|--------|----------|
| Dia       | From | To  | Material | From | To | Amount | Scks/lbs |
| 24"       | 0    | 10  | Cement   | 60   | 60 | 15     | 8cm      |
| 18"       | 60   | 260 | Bent     | 50   | 0  | 96     | SCM      |
| 10"       | 260  | 600 |          |      |    |        |          |

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

| Csg | Linr | Dia | + | From | To  | Gauge | Steel | Plastic | Welded | Thrd |
|-----|------|-----|---|------|-----|-------|-------|---------|--------|------|
| X   |      | 18" | + | 91   | 59  | 1.250 | X     |         |        |      |
|     | X    | 16" | - | 20   | 260 | 1.250 | Y     |         | X      |      |
|     |      |     |   |      |     |       |       |         |        |      |
|     |      |     |   |      |     |       |       |         |        |      |
|     |      |     |   |      |     |       |       |         |        |      |
|     |      |     |   |      |     |       |       |         |        |      |
|     |      |     |   |      |     |       |       |         |        |      |
|     |      |     |   |      |     |       |       |         |        |      |
|     |      |     |   |      |     |       |       |         |        |      |

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) \_\_\_\_\_

Temporary casing ☐ Yes Diameter \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS

Perforations Method \_\_\_\_\_  
Screens Type \_\_\_\_\_ Material \_\_\_\_\_

| Perf | Scrn | Csg | Linr | Screen Dia | From | To | Screen/slot width | Slot length | # of slots | Tele/pipe size |
|------|------|-----|------|------------|------|----|-------------------|-------------|------------|----------------|
|      |      |     |      |            |      |    |                   |             |            |                |
|      |      |     |      |            |      |    |                   |             |            |                |
|      |      |     |      |            |      |    |                   |             |            |                |
|      |      |     |      |            |      |    |                   |             |            |                |
|      |      |     |      |            |      |    |                   |             |            |                |
|      |      |     |      |            |      |    |                   |             |            |                |
|      |      |     |      |            |      |    |                   |             |            |                |
|      |      |     |      |            |      |    |                   |             |            |                |
|      |      |     |      |            |      |    |                   |             |            |                |

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

| Yield gal/min | Drawdown | Drill stem/Pump depth | Duration (hr) |
|---------------|----------|-----------------------|---------------|
| 2000+         |          | 600                   | hr 2          |
|               |          |                       |               |
|               |          |                       |               |
|               |          |                       |               |

Temperature 53 °F Lab analysis ☐ Yes By \_\_\_\_\_

Water quality concerns? ☐ Yes (describe below)

| From | To | Description | Amount | Units |
|------|----|-------------|--------|-------|
|      |    |             |        |       |
|      |    |             |        |       |
|      |    |             |        |       |
|      |    |             |        |       |

(9) LOCATION OF WELL (legal description)

County Lake Twp 26 Nor S Range 18 E or W W.M.  
Sec 26 1/4 of the SW 1/4 Tax Lot 200  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Street Address of Well (or nearest address) 57764 F. 5514  
Lake Rd Christmas Valley 97611

(10) STATIC WATER LEVEL

|                            | Date     | SWL (psi) | + | SWL (ft) |
|----------------------------|----------|-----------|---|----------|
| Existing Well/Predeepening |          |           |   |          |
| Completed Well             | 11-15-14 |           |   | 28"      |

Flowing Artesian? ☐ Yes Dry Hole? ☐ Yes  
WATER BEARING ZONES Depth water was first found 60'

| SWL Date | From | To  | Est Flow | SWL (psi) | + | SWL (ft) |
|----------|------|-----|----------|-----------|---|----------|
| 11-10-14 | 60   | 15  | 50+      |           |   | 28"      |
| 11-10-14 | 160  | 190 | 800+     |           |   | 28"      |
| 11-10-14 | 450  | 600 | 2000+    |           |   | 28"      |
|          |      |     |          |           |   |          |
|          |      |     |          |           |   |          |
|          |      |     |          |           |   |          |
|          |      |     |          |           |   |          |
|          |      |     |          |           |   |          |
|          |      |     |          |           |   |          |

(11) WELL LOG

| Material        | From | To  |
|-----------------|------|-----|
| Brown Clay      | 0    | 2   |
| Gray Clay       | 2    | 140 |
| Black Sand      | 140  | 235 |
| Gray Clay       | 235  | 340 |
| Green Clay      | 340  | 395 |
| Brown Clay      | 395  | 450 |
| Black Lava Rock | 450  | 610 |
| Pumice          | 510  | 540 |
| Black Gneiss    | 540  | 600 |

RECEIVED BY OWRD  
JUL 18 2022  
JUL 10 2017  
SALEM, OR

Date Started 11-8-14 Completed 11-15-14

(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 \_\_\_\_\_

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 16541 Date 11-19-14

Signed [Signature]

Contact Info. (optional) \_\_\_\_\_

14047

RECEIVED

OFFICE

Q611

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

# WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

State Well No. 275/18E-12

State Permit No. \_\_\_\_\_

## (1) OWNER:

Name Joe Wade  
Address 780 N.E. 19TH  
Gresham Oregon 97030

## (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 ☒  
2" Diam. from 0 ft. to 63 ft. Gage 25  
" Diam. from ft. to ft. Gage  
" Diam. from ft. to ft. Gage

## PERFORATIONS:

Perforated? ☐ Yes ☒ No

of perforator used

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

## (7) SCREENS:

Well screen installed? ☐ Yes ☒ No

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

## (8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☒ No If yes, by whom?

Yield: \_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

" " " " " "

" " " " " "

Bailer test 12 gal./min. with 5 ft. drawdown after 2 hrs.

Artesian flow \_\_\_\_\_ g.p.m.

Temperature of water 60 Depth artesian flow encountered \_\_\_\_\_ ft.

## CONSTRUCTION:

Well seal—Material used Cement

Well sealed from land surface to 18 ft.

Diameter of well bore to bottom of seal 20 in.

Diameter of well bore below seal 12 in.

Number of sacks of cement used in well seal 19 sacks

How was cement grout placed? pumped

Was a drive shoe used? ☒ Yes ☐ No Plugs \_\_\_\_\_ Size: location \_\_\_\_\_ ft.

Did any strata contain unusable water? ☐ Yes ☒ No

Type of water? \_\_\_\_\_ depth of strata \_\_\_\_\_

Method of sealing strata off \_\_\_\_\_

Was well gravel packed? ☐ Yes ☒ No Size of gravel: \_\_\_\_\_

Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

## (10) LOCATION OF WELL:

County Lake Driller's well number #2  
SE 1/4 NW 1/4 Section 12 T. 27S R. 18E W.M.  
Bearing and distance from section or subdivision corner

## (11) WATER LEVEL: Completed well.

Depth at which water was first found 180 ft.  
Static level 21' 6" ft. below land surface. Date 25 May  
Artesian pressure \_\_\_\_\_ lbs. per square inch. Date \_\_\_\_\_

## (12) WELL LOG:

Diameter of well below casing 12"  
Depth drilled 197 ft. Depth of completed well 197 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    |
|--------------------------|------|-----|--------|
| Top Soil Sandy Brown     | 0    | 3   |        |
| Drift                    | 3    | 16  |        |
| Clay gray                | 16   | 180 |        |
| Cinders Black            | 180  | 187 | 21' 6" |
| From 100' - 197' 6" hole |      |     |        |
| RECEIVED                 |      |     |        |
| JUL 18 2022              |      |     |        |
| OWRD                     |      |     |        |
| MAY 30 1979              |      |     |        |
| WATER RESOURCES DEPT.    |      |     |        |
| SALEM, OREGON            |      |     |        |

Work started 21 May 19 79 Completed 26 May 19 79

Date well drilling machine moved off of well 26 May 19 79

## 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] Claude Blackman Date 26 May, 19 79  
(Drilling Machine Operator)

Drilling Machine Operator's License No. 1003

## 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 Claude Blackman  
(Person, firm or corporation) (Type or print)

Address P.O. Box 100 Xmas Valley Ore. 99638

[Signed] Claude Blackman  
(Water Well Contractor)

Contractor's License No. 657 Date 26 May, 19 79



## Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

**(Reminder: Incomplete maps and/or claims may be returned.)**

- ☒ Map on polyester film
- ☒ Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- ☒ Township, Range, Section, Donation Land Claims, and Government Lots
- ☒ If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- ☐ Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- ☒ Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- ☒ Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- ☒ Point(s) of diversion or appropriation (illustrated and coordinates)
- ☒ Tax lot boundaries and numbers
- ☐ Source illustrated if surface water
- ☒ Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- ☒ Application and permit number or transfer number
- ☒ North arrow
- ☒ Legend
- ☒ CWRE stamp and signature

RECEIVED

JUL 18 2022

OWRD

14047



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

RECEIVED

JUL 18 2022

OWRD

## TRANSMITTAL

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

Date: 7/8/2022  
Attention: Transfer Section

☒ Prints ☐ Plans ☒ Map/Plat ☐ Specifications ☐ Change order ☐ Other

| Copies | No. | Description                                                        |
|--------|-----|--------------------------------------------------------------------|
| 1      | 1   | App for Transfer (9 sheets letter bond)                            |
| 1      | 2   | Transfer Application Map (1 sheet letter bond)                     |
| 1      | 3   | Land Use Information Form (2 sheets letter bond)                   |
| 1      | 4   | Well ID Reports (3 sheets letter bond)                             |
| 1      | 5   | Evidence of Use Affidavit & Supporting Docs (5 sheets letter bond) |
| 1      | 6   | Application Fee (check for \$2930)                                 |

These are transmitted as checked below:

☒ For OWRD approval ☐ Approved as submitted ☐ Approved as noted  
☐ Copies for distribution ☐ Returned for corrections ☐ Returned corrected prints  
☐ Review and comment ☐ For bids due ☐ Other

Remarks:

Thanks, and if you have questions please don't hesitate to call (541) 548-5833.

Signed:

*Devin Montgomery*

14047