

# Application for Groundwater Registration Modification



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

## Part 1 of 5 – Minimum Requirements Checklist

**This Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.**  
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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

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- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Completed Applicant Information and Signature.
- Part 4 – Completed Groundwater Registration Modification Application – Groundwater Registration Information. (Only one Groundwater registration per application, unless the Groundwater registrations to be modified are layered).
- Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- Groundwater registration modification fees – Amount enclosed: \$ **1,250**. (\$875.00 for a place of use change only; \$1,250.00 for any other change or combination).

**Attachments:**

- N/A Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is **not** the registration certificate holder of record. The Request for Assignment Form is available at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>.  
 Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) or the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.
- 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.

(For Staff Use Only)

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

___ Application fee not enclosed/insufficient	___ Map not included or incomplete
___ Land Use Form not enclosed or incomplete	___ Assignment Form and fee not enclosed/insufficient
___ Additional signature(s) required	___ Part ___ is incomplete

Other/Explanation \_\_\_\_\_

Staff: \_\_\_\_\_ 503-\_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Part 2 of 4 – Groundwater Registration Modification Map Checklist

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

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

- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads and railroads.
- Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes hachuring, 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 registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.
- N/A If you are proposing a modification in place of use, show the proposed place of use with hachuring including 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 appropriation with distance and bearing or coordinates from a recognized survey corner.
- N/A If you are proposing a modification in point(s) of appropriation, 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 3 of 4 – Applicant Information and Signature**

**Applicant Information**

APPLICANT/BUSINESS NAME <b>Thomas G. Johnson and Kirk A. Hansen</b>		PHONE NO. <b>(503) 569-4522</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>PO Box 9058</b>		FAX NO.	
CITY <b>Brooks</b>	STATE <b>OR</b>	ZIP <b>97305</b>	E-MAIL <b>midamerg@me.com</b>
<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.</b>			

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

APPLICANT/BUSINESS NAME <b>Will McGill Surveying, LLC</b>		PHONE NO. <b>(503) 931-0210</b>	ADDITIONAL CONTACT NO. <b>(503) 510-3026</b>
ADDRESS <b>15333 Pletzer Rd. SE</b>		FAX NO.	
CITY <b>Turner</b>	STATE <b>OR</b>	ZIP <b>97392</b>	E-MAIL <b>willmcgill.surveying@gmail.com</b>
<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.</b>			

Explain in your own words what you propose to accomplish with this modification; and why:  
It is proposed to modify GR 1550 in preparation for a lot line adjustment, to cover nursery crops, and to authorize the respective wells for the areas that need irrigation.

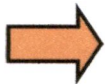
Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

(Check one box)

- By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a); **OR**
- I (we) 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 (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

I understand that prior to Department approval of the groundwater registration modification, 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 groundwater registration 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 paper: Woodburn Independent.

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



Thomas G Johnson  
Applicant Signature

Kirk Hansen  
Applicant Signature

Thomas G Johnson  
Print Name (and Title if applicable)

Kirk Hansen  
Print Name (and Title if applicable)

May 31, 23  
Date

May 31, 2023  
Date

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, 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 Groundwater registration has been conveyed.*

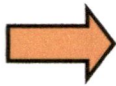
**Check the appropriate box, if applicable:**

- Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

- Check here if water for the Groundwater registration is supplied under a water service agreement or other contract with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



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

ENTITY NAME <b>Marion County</b>	ADDRESS <b>5155 Silverton Rd. NE</b>	
CITY <b>Salem</b>	STATE <b>OR</b>	ZIP <b>97305</b>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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## Part 4 of 4 – Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

### Groundwater Registration # GR-1550 (Certificate # GR-1494)

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

(Note: If the POA name is not specified in the registration, assign it a name or number here.)

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	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)
1550 Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 4573	6	S	2	W	30	SE	NE	37	2450' S & 300' W from NE cor., sec. 30
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 4510	6	S	2	W	29	SW	NW	37	515' N & 1255' E from W ¼ cor., sec. 29
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 59174	6	S	2	W	29	SE	NW	70	1020' N & 1855' E from W ¼ cor., sec. 29
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 4548	6	S	2	W	30	SW	NE	37	1900' S & 1360' W from NE cor., sec. 30

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

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Point of Appropriation (well) (POA)      |
| <input type="checkbox"/> Character of Use (USE)        | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |

Will all of the proposed changes affect the entire Groundwater registration?

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

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Please use and attach additional pages of Table 2 as needed.  
See page 5 for instructions.

Do you have questions about how to fill-out the tables?  
Contact the Department at 503-986-0900 and ask for Transfer

**Table 2. Description of Modifications to Registration GR-1550 (Certificate # GR-1494)**

List only the part of the registration that will be modified. For the acreage in each ¼ ¼, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration 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	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	POA(s) to be used (from Table 1)	Priority Date				
6	S	2	W	30	SE	NE	1300	37	7.0	Irrigation	1550 Well	1947	POU/POA	6	S	2	W	29	NE	NW	600	70	0.8	Irrigation	Well 2	1947
6	S	2	W	30	NE	SE	1300/1400	37	6.0	Irrigation	1550 Well	1947	POU/POA	6	S	2	W	29	SW	NW	700	70	1.0	Irrigation	Well 2	1947
6	S	2	W	29	SW	NW	1300	37	7.0	Irrigation	1550 Well	1947	POU/POA	6	S	2	W	29	SE	NW	700	70	3.5	Irrigation	Well 2	1947
6	S	2	W	29	NW	SW	1300/1400	37	10.0	Irrigation	1550 Well	1947	POU/POA	6	S	2	W	29	SE	NW	600	70	3.2	Irrigation	Well 2	1947
													POU/POA	6	S	2	W	29	SW	NW	1200	37	0.5	Irrigation	Well 1	1947
													POU/POA	6	S	2	W	29	SW	NW	1300	37	5.0	Irrigation	Well 1	1947
													POA	6	S	2	W	29	SW	NW	1300	37	6.3	Irrigation	Well 1	1947
													POU/APOA	6	S	2	W	30	SW	NE	1300	37	2.8	Irrigation	1550 Well, Well 3	1947
													POU/APOA	6	S	2	W	30	SE	NE	1300	37	6.9	Irrigation	1550 Well, Well 3	1947
TOTAL ACRES							30.0	TOTAL ACRES										30.0								

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

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**Groundwater Registration # GR-1550 (Certificate # GR-1494)**

**For a modification in place of use or character of use:**

**Are there other water right certificates, water use permits, or Groundwater registrations associated with the “from” or “to” lands?**  Yes  No

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:



Pursuant to OAR 690-382-0200, any “layered” water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the “to” lands must be filed separately with a Groundwater registration modification.

**For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:**

- Well log(s) are attached for each well 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/](http://apps.wrd.state.or.us/apps/gw/well_log/))

**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 adequate information is likely to delay the processing of your modification 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



Grant McGill <grantmcgill.wr@gmail.com>

# GR Mod Map Scale Waiver

**STARNES Patrick K \* WRD** <Patrick.K.STARNES@water.oregon.gov>

Thu, Jun 1, 2023 at 4:31 PM

To: Grant McGill <grantmcgill.wr@gmail.com>

Good Afternoon Grant,

The Department grants a map scale waiver for that attached GR Modification application map.

Please include a printed copy of this e-mail when you submit the GR Modification application.

Sincerely,

Kelly

\*\*\*\*\*

Kelly Starnes, Transfer Program Analyst

Oregon Water Resources Department

725 Summer St NE Suite A

Salem OR 97301-1271

Cell phone: 503-979-3511 Fax: 503-986-0903

E-mail: [patrick.k.starnes@water.oregon.gov](mailto:patrick.k.starnes@water.oregon.gov)

Please Note: Under Oregon Law, messages to and from this e-mail address may be available to the public.

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STATE ENGINEER  
Salem, Oregon

MAR 1 1957

# Well Record

1550 Well

STATE WELL NO. 6/2W-30H  
COUNTY Marion  
APPLICATION NO. GR-1550

GR- 1494

OWNER: J. J. Mathis

MAILING ADDRESS: Rt. 2, Box 338

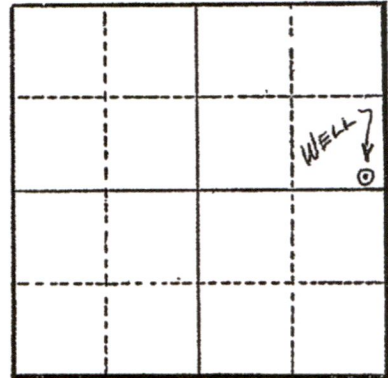
LOCATION OF WELL: Owner's No.

CITY AND STATE: Salem, Oregon

SE 1/4 NE 1/4 Sec. 30 T. 6 S. R. 2 W., W.M.

Bearing and distance from section or subdivision

corner 2450' S. & 300' W. from NE cor. Sec. 30



Altitude at well 155'

Section 30

TYPE OF WELL: Drilled Date Constructed 1947

Depth drilled 74' Depth cased 74'

### CASING RECORD:

8"

### FINISH:

### AQUIFERS:

### WATER LEVEL:

21.00 (7-28-60)

PUMPING EQUIPMENT: Type Cent. H.P. 24  
Capacity 300 G.P.M.

### WELL TESTS:

Drawdown	61	ft. after	hours	445	G.P.M.
Drawdown	47	ft. after	hours	325	G.P.M.
Drawdown	24	ft. after	hours	223	G.P.M.

USE OF WATER Irrigation Temp. °F. 19

SOURCE OF INFORMATION GR Record

DRILLER or DIGGER Wymore

### ADDITIONAL DATA:

Log N.A. Water Level Measurements Chemical Analysis Aquifer Test

### REMARKS:

Irrigation of 30 acres.

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STATE OF OREGON WATER SUPPLY WELL REPORT

WELL I.D. # L 75843

START CARD # 177376

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

WATER RESOURCES DEPT SALEM, OREGON

(1) LAND OWNER Well Number Name Thomas Johnson Address 7185 Lakeside Drive N.E. City Salem State Oregon Zip 97305

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

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: [ ] Yes [X] No Depth of Completed Well 179 ft. Explosives used: [ ] Yes [X] No Type Amount

Table with columns: BORE HOLE (Diameter, From, To, Material, Sacks or Pounds) and SEAL (From, To, Sacks or Pounds). Includes data for 10" and 6" diameters.

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

(6) CASING/LINER Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes data for 6" casing and liner.

Drive Shoe used [X] Inside [ ] Outside [ ] None Final location of shoe(s) 179'

(7) PERFORATIONS/SCREENS Table with columns: From, To, Slot Size, Number, Diameter, Tele/pipe size, Casing, Liner. Includes checkboxes for Perforations and Screens.

(8) WELL TESTS: Minimum testing time is 1 hour [ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian Yield gal/min 150+ Drawdown Drill stem at 178' Time 2 Hr.

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

(9) LOCATION OF WELL (legal description)

County Marion Tax Lot 600 Lot Township 6 S N or S Range 2 W E or W WM Section 29 SE 1/4 SE 1/4 Lat Long (degrees or decimal)

Street Address of Well (or nearest address) 7215 Lakeside Dr. N.E. Salem, Oregon 97305

(10) STATIC WATER LEVEL

34 ft. below land surface. Date 8/13/05 ft. below land surface. Date Artesian pressure lb. per square inch Date

(11) WATER BEARING ZONES

Table with columns: From, To, Estimated Flow Rate, SWL. Includes data for 42' to 178' depth with flow rate 150+ and SWL 34'.

(12) WELL LOG

Table with columns: Material, From, To, SWL. Lists soil types from 0 to 179 feet depth.

Date Started 08/12/05 Completed 08/13/05

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

WWC Number 1629 Date 8/17/05

Signed [Signature]

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

WWC Number 1273 Date 8/17/05

Signed Floyd Sippe

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# Land Use Information Form



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

## NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

**This form is NOT required if:**

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; **OR**
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and **all** of the following apply:
  - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
  - b) The application involves a change in place of use only;
  - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; **and**
  - d) The application involves irrigation water uses only.

## NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

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# Land Use Information Form

Applicant(s): Thomas G. Johnson and Kirk A. Hansen

Mailing Address: PO Box 9058

City: Brooks

State: OR

Zip Code: 97305

Daytime Phone: (503) 569-4522

## A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:	Proposed Land Use:
<u>6S</u>	<u>2W</u>	<u>29</u>	<u>SENW</u>	<u>600</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>nursery/ farming</u>
<u>6S</u>	<u>2W</u>	<u>29</u>	<u>NENW</u>	<u>600</u>	<u>EFU</u>	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>nursery/ farming</u>
<u>6S</u>	<u>2W</u>	<u>29</u>	<u>SWNW SENW</u>	<u>700</u>	<u>EFU</u>	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>nursery/ farming</u>
<u>6S</u>	<u>2W</u>	<u>29</u>	<u>SWNW</u>	<u>1200</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>nursery/ farming</u>
<u>6S</u>	<u>2W</u>	<u>29</u>	<u>SWNW</u>	<u>1300</u>	<u>EFU</u>	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>nursery/ farming</u>
<u>6S</u>	<u>2W</u>	<u>30</u>	<u>SWNE</u>	<u>1300</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>nursery/ farming</u>
<u>6S</u>	<u>2W</u>	<u>30</u>	<u>SENE</u>	<u>1300</u>	<u>EFU</u>	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>nursery/ farming</u>

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

Marion County

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**B. Description of Proposed Use**

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water     Water Right Transfer     Permit Amendment or Ground Water Registration Modification
- Limited Water Use License     Allocation of Conserved Water     Exchange of Water

Source of water:  Reservoir/Pond     Ground Water     Surface Water (name) \_\_\_\_\_

Estimated quantity of water needed: 75     cubic feet per second     gallons per minute     acre-feet

Intended use of water:  Irrigation     Commercial     Industrial     Domestic for \_\_\_\_\_ household(s)

Municipal     Quasi-Municipal     Instream     Other \_\_\_\_\_

Briefly describe:

It is proposed to modify the place of use and authorized wells for GR 1550 to irrigate nursery crops and prepare for a pending lot line adjustment.



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

See bottom of Page 4. →

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## For Local Government Use Only

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

**Please check the appropriate box below and provide the requested information**

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): Farm use as defined in MCC 17.136.020
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."** (A)

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

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

Name: Daniel Jansen Title: Assistant Planner  
 Signature: [Signature] Phone: (503) 588-5036 Date: 5/31/23  
 Government Entity: Marion County Planning Division

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



**Receipt for Request for Land Use Information**

Applicant name: \_\_\_\_\_  
 City or County: \_\_\_\_\_ Staff contact: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

RECEIVED

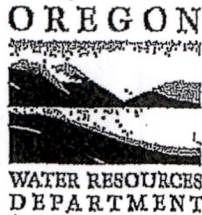
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OWRD

Date Received (Date Stamp Here)

## OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Thomas Johnson & Kirk Hansen

PO Box 9058, Brooks OR 97305

Transaction Type: GR Mod

Fees Received: \$ 1250.00

Cash  Check; Check No. 2155

Name(s) on Check: Will McGill Surveying

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

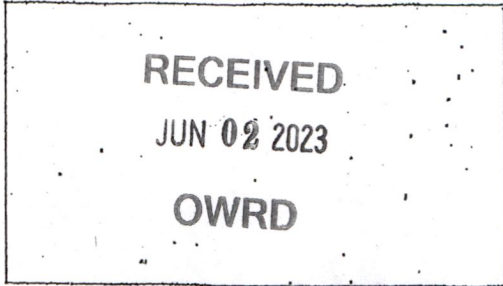
Sincerely,  
OWRD Customer Service Staff

Submission received by: Conie Lornien  
(Name of OWRD staff)

### Instructions for OWRD staff:

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Fold and put one copy of the Submission Receipt with check/cash into the Safe slot. Place the other copy of the Submission Receipt with submission (application/other document) in the top drawer of filing cabinet.

14266-



Date Received (Date Stamp Here)

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Sincerely,

OWRD Customer Service Staff

Submission received by: Conie Lovrien

(Name of OWRD staff)

### Instructions for OWRD staff:

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