

Application for Permanent Water Right Transfer



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

Part 1 of 5 – Minimum Requirements Checklist

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

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

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: C-91908**
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 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: ____/____/____

Part 2 of 5 – Transfer Application Map

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

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right 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°).

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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: <input type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>1 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$1090 and enter »	2	\$0
3	Number of water rights included in transfer <u>1 (3a)</u> Subtract 1 from the number in 3a above: <u>0 (3b)</u> <i>If only one water right this will be 0</i> 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? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: enter \$480 for the 1 st well to be added or changed <u>2 (4a)</u> Do you propose to add or change additional wells? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: multiply the number of additional wells by \$410 <u>410 (4b)</u> Add line 4a to line 4b and enter »	4	\$890
5	Do you propose to change the place of use or character of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 <input type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$410, then enter on line 5 »	5	\$0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$2250
7	Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 »	7	\$0
8	Subtract line 7 from line 6 » Transfer Fee:	8	\$2250

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*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) Subtract 1 from the number in 2a above: _____ (2b) <i>If only one well this will be 0</i> Multiply line 2b by \$480 and enter »	2	
3	Add entries on lines 1 through 2 above » » » » » » » » » » Fee for Substitution:	3	

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Rattlesnake Creek Land & Cattle Co, LLC		PHONE NO. 541-573-3615	ADDITIONAL CONTACT NO. 541-589-0107
ADDRESS 524 Hwy 20 N		FAX NO.	
CITY Hines	STATE OR	ZIP 97738	E-MAIL AndyJRoot@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

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

Explain in your own words what you propose to accomplish with this transfer application, and why:
Replacing Well #1 & #2 with HARN 52111 & replacing Well #9 with Well #5

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

Check One Box

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

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By my signature below, I confirm that I understand:

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

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



 Applicant signature

Andy Root, Member

 Print Name (and Title if applicable)

8-29-23

 Date

 Applicant signature

 Print Name (and Title if applicable)

 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

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RECEIVING LANDOWNER NAME NA		PHONE NO.	ADDITIONAL CONTACT NO. OWRD
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			

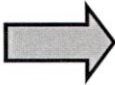
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Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (**Tip: Complete and attach Supplemental Form D.**)

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP

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

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

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Part 5 of 5 – Water Right Information

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

CERTIFICATE # 91908

Description of Water Delivery System

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System capacity: **1.58** cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

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

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52111	24	S	33	E	9	NE	NE	2500	1070' S & 1030' W from NE cor, Sec 9
#1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 991	24	S	33	E	9	NE	NE	2500	1180' S & 1360' W from NE cor, Sec 9
#2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 992	24	S	33	E	9	NE	NE	2500	1140' S & 1290' W from NE cor, Sec 9
#3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 988	24	S	33	E	9	SE	SE	2500	3960' S & 1310' W from NE cor, Sec 9
#4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1006	24	S	33	E	15	NE	NE	3400	1275' S & 1230' W from NE cor, Sec 15
#5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	24	S	33	E	14	SE	SW	700	1315' N & 1445' E from SW cor, Sec 14
#9	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1004	24	S	33	E	14	SE	SW	700	1315' N & 1445' E from SW cor, Sec 14
#6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 2065	24	S	33	E	14	SE	NW	300	1360' S & 1410' E from NW cor, Sec 14
#7	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 50201	24	S	33	E	14	NE	NW	300	30' S & 2590' E from NW cor, Sec 14

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

- | | |
|---|---|
| <input 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) |

- Surface Water POD to Ground Water POA (SW/GW) Government Action POD (GOV)

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

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

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Please use and attach additional pages of Table 2 as needed.
See page 6 for instructions.

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

Table 2. Description of Changes to Water Right Certificate # 91908

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)										PROPOSED (the "to" or "on" lands)										
The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										The listing as it would appear AFTER PROPOSED CHANGES are made.										
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date	
										POA	24	S	E	14	NE	SW	700	IR	#1, 3-7	1975
										POA	24	S	E	14	NW	SW	800	IR	#1, 3-7	1975
										POA	24	S	E	14	SW	SW	700	IR	#1, 3-7	1975
										POA	24	S	E	14	SE	SW	700	IR	#1, 3-7	1975
TOTAL ACRES:										TOTAL ACRES:										
										126.5										

Additional remarks: Replacing Wells #1 & 2 with HARN 52111 & replacing Well #9 with Well #5.

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For Place of Use or Character of Use Changes

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

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



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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

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

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#4	See well log									
#5	NO	NA	500'	14"	+1' to -500'	0' to -20'	NA	40'	Clay, Sandstone	
#9	See well log									
#6	See well log									
#7	See well log									

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Application for Water Right Transfer

Evidence of Use Affidavit



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

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

State of Oregon)
) ss
 County of HARNEY)

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I, ANDY ROOT, in my capacity as MEMBER, RATTLESNAKE CREEK LAND & CATTLE,
 mailing address 524 HWY 20, HINES, OR 97738
 telephone number (541)573-3615, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the **entire** place of use for Certificate # 91908; **OR**

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

Certificate #	Township	Range	Mer	Sec	1/4 1/4	Gov't Lot or DLC	Acres (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)

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

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

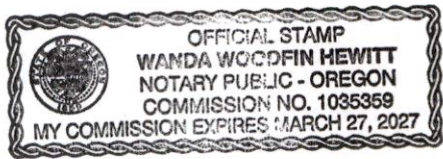


 Signature of Affiant

8-29-23

 Date

Signed and sworn to (or affirmed) before me this 29th day of August, 2023.





 Notary Public for Oregon

My Commission Expires: March 27, 2027

N/A
 SWM

Supporting Documents	Examples
<input checked="" type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input checked="" type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph <u>SITE PHOTOS</u>	Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added. Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terra-server.com
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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STATE OF OREGON
COUNTY OF HARNEY
CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

421 DUFFIELD LLC
c/o PARK LAND CO
126 E 56TH STREET, 32ND FLOOR
NEW YORK, NY 10022

confirms the right to use the waters of WELL 2, WELL 1, WELL 3, WELL 14, WELL 10, WELL 9 AND WELL 4 in the MALHEUR LAKE BASIN for IRRIGATION of 126.5 ACRES.

This right was perfected under Permit G-7352. The date of priority is August 18, 1975. The amount of water to which this right is entitled is limited to an amount actually used beneficially, and shall not exceed 1.58 CUBIC FEET PER SECOND, or its equivalent in case of rotation, measured at the well.

The wells are located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
24 S	33 E	WM	9	NE NE	WELL 2 (ADDITIONAL) - 1140 FEET SOUTH AND 1290 FEET WEST FROM NE CORNER, SECTION 9
24 S	33 E	WM	9	NW NE	WELL 1 (ADDITIONAL) - 1180 FEET SOUTH AND 1360 FEET WEST FROM NE CORNER, SECTION 9
24 S	33 E	WM	9	SE SE	WELL 3 (ADDITIONAL) - 3960 FEET SOUTH AND 1310 FEET WEST FROM NE CORNER, SECTION 9
24 S	33 E	WM	14	NE NW	WELL 14 (ADDITIONAL) - 30 FEET SOUTH AND 2590 FEET EAST FROM NW CORNER, SECTION 14
24 S	33 E	WM	14	SE NW	WELL 10 (ADDITIONAL) - 1360 FEET SOUTH AND 1410 FEET EAST FROM NW CORNER, SECTION 14
24 S	33 E	WM	14	SE SW	WELL 9 (ORIGINAL) - 1320 FEET NORTH AND 1370 FEET EAST FROM SW CORNER, SECTION 14
24 S	33 E	WM	15	NE NE	WELL 4 (ADDITIONAL) - 1275 FEET SOUTH AND 1230 FEET WEST FROM NE CORNER, SECTION 15

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

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

A description of the place of use is as follows:

Twp	Rng	Mer	Sec	Q-Q	Acres
24 S	33 E	WM	14	NE SW	31.3
24 S	33 E	WM	14	NW SW	31.6
24 S	33 E	WM	14	SW SW	31.2
24 S	33 E	WM	14	SE SW	32.4

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NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482. Pursuant to ORS 183.482, ORS 536.075 and OAR 137-003-0675, you may petition for judicial review and petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

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

The quantity of water diverted at the new points of appropriation (wells), together with the quantity diverted at the old points of appropriation, shall not exceed the quantity of water lawfully available from the original points of appropriation.

The water user shall maintain in-line flow meters or other suitable devices for measuring and recording the quantity of water used.

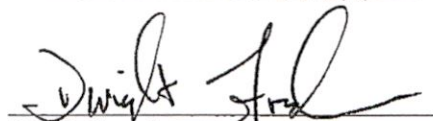
Water shall be acquired from the same aquifer as the original points of appropriation.

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

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

This certificate is issued to confirm ADDITIONAL POINTS OF APPROPRIATION in approved by an order of the Water Resources Director entered September 27, 2000, at Special Order Volume 54, Page 744, approving Transfer Application 8109, supercedes Certificate 76397, State record of Water Right Certificates.

Issued JUL 07 2017



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

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14320

13:48 15-06-2021

Lat: 43° 29' 5.64" N Lon: 118° 37' 39.63" W



Lat: 43° 28' 56.58" N Lon: 118° 37' 26.45" W

13:54 15-06-2021

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14320

13:55 15-06-2021

Lat: 43° 28' 56.57" N Lon: 118° 37' 26.38" W

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320

13:56 15-06-2021

Lat: 43° 28' 56.57" N Lon: 118° 3' 26.47" W

Land Use Information Form



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

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SEP 05 2023
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Applicant(s): Andy Root, Rattlesnake Land & Cattle

Mailing Address: 524 Hwy 20 N

City Hines State: OR Zip Code: 97738 Daytime Phone: 541-573-3615

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:
24S	33E	14	NE SW	700	<u>EFU</u>	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
24S	33E	14	NW SW	800	<u>EFU</u>	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
24S	33E	14	SW SW	700	<u>EFU</u>	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
24S	33E	14	SE SW	700	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR

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

Harney

B. Description of Proposed Use

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

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

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

Estimated quantity of water needed: 1.58 cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-Municipal Instream Other _____

Briefly describe:

Replacing Wells #1 & #2 with HARN 52111 & replacing Well #9 with Well #5

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

See bottom of Page 3. →

For Local Government Use Only

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

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): **EFFU-2/HCC 3.020**
- 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."**

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

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

Name: Brandon McMillan Title: Planning Director
 Signature: [Signature] Phone: (911) 573-6655 Date: 8/30/2023
 Government Entity: Harney County

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

Receipt for Request for Land Use Information

Applicant name: _____
 City or County: _____ Staff contact: _____
 Signature: _____ Phone: _____ Date: _____

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

HARN 52111
10/15/2014

WELL I.D. LABEL# L 115032
START CARD # 1024302
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D. _____
First Name _____ Last Name _____
Company SECOND OREGON RANCH
Address PO BOX 883
City CRANE State OR Zip 97732

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing:
Material From To Amt sacks/lbs
Seal: _____

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

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

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 463.00 ft.
BORE HOLE SEAL sacks/lbs
Dia From To Material From To Amt lbs
18 0 20 Bentonite Chips 0 20 35 S
14 20 463

How was seal placed: Method A B C D E
 Other POURED & TAMPED
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount _____ Actual Amount _____

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
 14 2 213 .250
Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____
Perf/ Casing/ Screen Screen Liner Dia From To Scrn/slot width Slot length # of slots Tel/ pipe size
Screen Liner Dia From To width length slots 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)
600 _____ 250 1
Temperature 60 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 24.00 S N/S Range 33.00 E E/W WM
Sec 9 NE 1/4 of the NE 1/4 Tax Lot 2500
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
67114 QUINCY ROAD
BURNS, OR

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration _____
Completed Well 9/19/2014 _____ 94
Flowing Artesian? Dry Hole?
WATER BEARING ZONES Depth water was first found 94.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
9/19/2014 94 463 600 _____ 94

(11) WELL LOG
Ground Elevation _____
Material From To
TOPSOIL - SILTY LOAM 0 3
CLAY - SANDY BROWN 3 14
CLAY - BROWN 14 23
CLAY - GRAY 23 57
GRAVEL - MEDIUM/CLAY BALLS - GRAY 57 71
CLAY W/CLAYSTONE - GRAY 71 77
GRAVEL - MEDIUM/CLAY BALLS - GRAY 77 86
CLAY - GRAY W STREAKS OF BROWN 86 275
PUMICE W/CLAYSTONE - BLUE 275 294
SANDSTONE - GRAY/GREEN W/PUMICE 294 457
CLAY - GRAY 457 463
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Date Started 9/11/2014 Complete 9/19/2014
(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 1424 Date 10/15/2014
Signed TIMOTHY K RILEY (E-filed)
Contact Info (optional) TIMOTHY RILEY 541-573-5695

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

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

WATER WELL REPORT

STATE OF OREGON
(Please type or print)

(Do not write above this line)

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AUG 16 1974

State Well No. 24S/33E-9ab

STATE ENGINEER
SALEM, OREGON

State Permit No. NENE

991
Hahn!

(1) OWNER:

Name MEADOWLAND RANCHES
Address 2485 WEST MAIN
Littleton, Colorado 80120

(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
16" Diam. from 0 ft. to 140 ft. Gage .250
12" Diam. from 140 ft. to 302 ft. Gage .250
" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? Yes No.

Type of perforator used Factory
Size of perforations 3/16 in. by 3 in.
1500 perforations from 20 ft. to 302 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.
" " " " "
" " " " "
Baller test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Concrete
Well sealed from land surface to 20' ft.
Diameter of well bore to bottom of seal 32 in.
Diameter of well bore below seal 24 in.
Number of sacks of cement used in well seal 10 sacks
Number of sacks of bentonite used in well seal sacks
Brand name of bentonite
Number of pounds of bentonite per 100 gallons
of water lbs./100 gals.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: 3/8
Gravel placed from 0 ft. to 302 ft.

(10) LOCATION OF WELL:

County HARNEY Driller's well number
NW 1/4 NE 1/4 Section 9 T. 24S R. 33E W.M.
Bearing and distance from section or subdivision corner
189' N & 7' W of SE corner of NW1/4 of NE1/4

(11) WATER LEVEL: Completed well.

Depth at which water was first found 10 ft.
Static level 10 ft. below land surface. Date 7-22-74
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 0

Depth drilled 302 ft. Depth of completed well 302 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
Topsoil	0	2	
Grey clay	2	20	10
Green clay	20	60	10
Medium gravel	60	65	10
Blue clay	65	70	10
Medium gravel	70	80	10
Multi-colored clay	80	270	10
Pumice	270	282	10
Limestone and sandstone	285	302	10

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Work started 7-22 1974 Completed 7-24 1974
Date well drilling machine moved off of well 7-24 1974

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] S. J. Smith Date 8-12 1974
(Drilling Machine Operator)

Drilling Machine Operator's License No. 552

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 Western Drilling Co.
(Person, firm or corporation) (Type or print)

Address P.O. Box 751 Burns, Oregon 97720

[Signed] John W. McAllister
(Water Well Contractor)

Contractor's License No. 426 Date 8-12 1974



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

Application for Well ID Number

RECEIVED
 JUN 1 2023
 OWRD
 RECEIVED
 SEP 05 2023
 OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): Rattlesnake Creek Land and Cattle CO LLC
 Mailing Address: 524 HWY 20 N
 City, State, Zip: Hines, OR 97738
 Mail Well ID to: SAME AS ABOVE In Care Of (C/O)
 Name & Address: No packet necessary - Well ID # L 121138 attached
 City, State, Zip: _____

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

Township: 24 S (North / South) Range: 33 E (East / West) Section: 9 NE 1/4 of the NE 1/4
 Tax Lot (usually last 3-5 numbers of Tax Map #): 2500 County Harney
 GPS Coordinates: 43.50457459, -118.65405980
 Street Address of Well, City: Quincy Rd & Lane 15 jct (1 mi SW of)
 If the property had a different street address in the past: _____

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

Use of Well (domestic, irrigation, commercial, industrial, monitoring): livestock/monitoring
 Date Well Constructed (or property built): 7-24-1974 Total Well Depth: 302' Casing Diameter: 16"
 Owner at time the well was constructed (if known): Meadowland Ranches Well Report # (if known): HARN 991
 Other Information: Tagged 5-24-23.

SUBMITTED BY (please print): Darrick Boschmann - OWRD
 PHONE: 503-437-5346 EMAIL &/or FAX: darrick.e.boschmann@water.oregon.gov

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
 Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:
6-1-2023

Well Report Number:
HARN 991

Well Identification #:
L-121138

NC

NOTICE TO WATER WELL CONTRACTOR

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

STATE ENGINEER, SALEM 10, OREGON within 30 days from the date of well completion.

RECEIVED

MAY 23 1965 WATER WELL REPORT

STATE ENGINEER SALEM OREGON

STATE OF OREGON (Please type or print)

State Well No. 24/33-9A

992 HANON

State Permit No.

(1) OWNER:

Name: *[Redacted]* Address: *[Redacted]*

(2) LOCATION OF WELL:

County: *[Redacted]* Driller's well number: *[Redacted]* NE 1/4 T. 24 R. 33 W.M.

(3) TYPE OF WORK (check):

Well Deepening Reconditioning Abandon

(4) PROPOSED USE (check):

Domestic Industrial Municipal Irrigation Test Well Other

(5) TYPE OF WELL:

Rotary Cable Dug Driven Jetted Bored

(6) CASING INSTALLED:

12" Diam. from 0 ft. to 237 ft. Gage 250
" Diam. from ft. to ft. Gage
" Diam. from 297 1/2 ft. to ft. Gage

(7) PERFORATIONS:

Perforated? Yes No
Type of perforator used: *Torch*
Size of perforations 3/8" in. by 6" in.
perforations from 18 ft. to 98 ft.

(8) SCREENS:

Well screen installed? Yes No
Manufacturer's Name: *[Redacted]* Model No. *[Redacted]*
Diam. Slot size Set from ft. to ft.

(9) CONSTRUCTION:

Well seal—Material used in seal: *Concrete*
Depth of seal 18 ft. Was a packer used? *yes*
Diameter of well bore to bottom of seal 20 in.
Were any loose strata cemented off? Yes No
Was a drive shoe used? Yes No
Was well gravel packed? Yes No Size of gravel: *3" to 3 1/4"*
Gravel placed from 18 ft. to ft.

(10) WATER LEVELS:

Static level 3 ft. below land surface Date 4/24/65
Artesian pressure lbs. per square inch Date

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? *driller*
Yield: 600 gal./min. with 55 ft. drawdown after 6 hrs.
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m. Date
Temperature of water *cool* Was a chemical analysis made? Yes No

(12) WELL LOG:

Diameter of well below casing 12
Depth drilled 342 ft. Depth of completed well 262 ft.
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
<i>Top soil</i>	<i>0</i>	<i>4</i>
<i>clay</i>	<i>4</i>	<i>18</i>
<i>clay + sand mix</i>	<i>18</i>	<i>30</i>
<i>Blue clay</i>	<i>30</i>	<i>60</i>
<i>black clay + sand streaks</i>	<i>60</i>	<i>80</i>
<i>clay (black)</i>	<i>80</i>	<i>140</i>
<i>Brown clay</i>	<i>140</i>	<i>275</i>
<i>yellow clay</i>	<i>275</i>	<i>340</i>
<i>medium black sand</i>	<i>340</i>	<i>342</i>

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Work started 12/20 1964 Completed 4/24 1965
Date well drilling machine moved off of well 19

(13) PUMP:

Manufacturer's Name *[Redacted]*
Type: *[Redacted]* H.P. *[Redacted]*

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 *John W. Rossberg*
(Person, firm or corporation) (Name or print)
Address *Box 443 Burns, Oreg*
Drilling Machine Operator's License No. *269*
[Signed] *John W. Rossberg*
(Water Well Contractor)
Contractor's License No. *272* Date *4/28*, 1965

14320

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

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

RECEIVED
WATER WELL REPORT
STATE OF OREGON
JUL 24 1978
(Please type or print)
(Do not write above this line)
WATER RESOURCES DEPT
SALEM, OREGON
988
HARIN

State Well No. 24-33E-9dc
State Permit No. **RECEIVED**
SEP 05 2023

(1) OWNER:

Name Mr. Walter Kleiner
Address 1725- 89th, N.E.
Bellvue, Wash. 98004

(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
10" Diam. from 0 ft. to 432 ft. Gage .250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? Yes No.
Type of perforator used factory louvered
Size of perforations 1/8 in. by 2 1/2 in.
8,640 perforations from 240' ft. to 432' 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.
well to be tested at later date.
Was a pump test made? Yes No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
" " " " " "
" " " " " "
" " " " " "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
perature of water 63 Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used cement grout
Well sealed from land surface to 18' ft.
Diameter of well bore to bottom of seal 29" in.
Diameter of well bore below seal 29" in.
Number of sacks of cement used in well seal 7 sacks
Number of sacks of bentonite used in well seal
Brand name of bentonite
Number of pounds of bentonite per 100 gallons
of water lbs./100 gals.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: 3/8
Gravel placed from 18' ft. to 435' ft.

(10) LOCATION OF WELL:

County Harney Driller's well number OWRD
S.W. 1/4 s.e. 1/4 Section 9 T. 24/S R. 33-e W.M.
Bearing and distance from section or subdivision corner
300' due south of center of the s.e. 1/4 of
sec. #9 t-24-s/r-33-e.

(11) WATER LEVEL: Completed well.

Depth at which water was first found 67' ft.
Static level 25' ft. below land surface. Date 6/30/78
Artesian pressure lbs. per square inch. Date

(12) WELL LOG: Diameter of well below casing 29"

Depth drilled 436 ft. Depth of completed well 432' 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	0	4	
sand (hard)	4	12	
tan&blue clay	12	67	
black sandstone	67	74	
black/gray/green clays	74	282	
gray sandstone	282	289	
med. sand& gravel	289	294	
green sandstone&pumis	294	303	
gray sandstone	303	311	
sandstone & pumis	311	327	
green claystone&pumis	327	346	
gray sandstone & pumis	346	370	
black sandstone&claystone	370	413	
green claystone	413	420	
green sandstone&pumis	420	436	
blue&green clay	436	436	

Work started 6/29/1978 Completed 6/30/78 19
Date well drilling machine moved off of well 6/30/1978

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision.
Materials used and information reported above are true to my
best knowledge and belief.
[Signed] James Bruner Date 6/30/78
(Drilling Machine Operator)
Drilling Machine Operator's License No. 1026

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 WESTERN WATER WELL
(Person, firm or corporation) (Type or print)
Address Box 50, Beatty, NV
[Signed] James Bruner
Water Well Contractor
Contractor's License No. 659 Date 6/30/78

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

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

WATER WELL REPORT
STATE OF OREGON
RECEIVED

(Please type on this line)

(Do not write above this line)

WATER RESOURCES DEPT.
SALEM, OREGON

State Well No. 24S33E-15ac
RECEIVED

State Permit No. SEP 05 2023

(1) OWNER:

Name Mr. Walter Kleiner
Address 1725- 89th. N.E.
Bellvue, Wash. 98004

(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

1.0" Diam. from 0 ft. to 456 ft. Gage .250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? Yes No.

Type of perforator used factory lowered
Size of perforations 1/8 in. by 2 1/2 in.
10,800 perforations from 216 ft. to 456 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

to be tested at a later date.
Was a pump test made? Yes No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
" " " " " "
" " " " " "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
perature of water 61 Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used cement grout
Well sealed from land surface to 18' ft.
Diameter of well bore to bottom of seal 29" in.
Diameter of well bore below seal 29" in.
Number of sacks of cement used in well seal 7 sack sacks
Number of sacks of bentonite used in well seal _____ sacks
Brand name of bentonite _____
Number of pounds of bentonite per 100 gallons
of water _____ lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: 3/8 _____
Gravel placed from 18' ft. to 460' ft.

(10) LOCATION OF WELL:

County Harney Driller's well number OWRD
S.W. 1/4 n.e. 1/4 Section 15 T.24-s R.33-e W.M.
Bearing and distance from section or subdivision corner
90' due, n.e. from center of sec.15
n.e. 1/4 t-24-s/r-33-e.

(11) WATER LEVEL: Completed well.

Depth at which water was first found 43' ft.
Static level 22' ft. below land surface. Date 6/20/78
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 29"

Depth drilled 460' ft. Depth of completed well 456' 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	0	2	
sand&clay	2	43	22'
gray cinders	43	45	
green/black/gray clays	45	145	
gray sandstone claystone	145	194	
black silty clay	194	219	
green clay&pumis	219	240	
gray porous rock	240	250	
green&gray claystone	250	340	
gray sandstone &pumis	340	350	
green claystone	350	368	
cinders/pumis/sandstone	368	372	
green claystone/sandstone	372	411	
green claystone/b-rocks	411	422	
cinders/brown clay stone	422	440	
gray pumis&sandstone	440	452	
gray clay	452	460	

Work started 6 / 20 / 1978 Completed 6 / 22 / 1978
Date well drilling machine moved off of well 6 / 22 / 1978

Drilling Machine Operator's Certification:

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

[Signed] Donald P. Hauer Date 6/25/78
(Drilling Machine Operator)

Drilling Machine Operator's License No. 1026

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 Walter Kleiner Well
(Person, firm or corporation) (Type or print)

Address Euclid 1859

[Signed] James Blair
(Water Well Contractor)

Contractor's License No. 659 Date 6/25/78

(USE ADDITIONAL SHEETS IF NECESSARY)

14320

SP#45656-119

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

WATER WELL REPORT

STATE OF OREGON
(Please type or print)

Rec'd
11/27/75
gbb

State Well No. 24S/33E-14C

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

1004
Hamm

(Do not write above this line)

State Permit No. 5-7352
G-7077

(1) OWNER:

Name M BROCK c/o Meadowland Ranches
Address 2485 W. Main, Littleton, Colorado

(10) LOCATION OF WELL:

County HARNEY Driller's well number
1/4 SW 1/4 Section 14 T.24S R. 33E W.M.
Bearing and distance from section or subdivision corner

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):

Rotary Driven Domestic Industrial Municipal
Cable Jetted Irrigation Test Well Other
Dug Bored

(11) WATER LEVEL: Completed well.

Depth at which water was first found 45 ft.
Static level 8 ft. below land surface. Date 12-26-74
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG: Diameter of well below casing 0

Depth drilled 250 ft. Depth of completed well 250 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	0	3	
Brown Sandstone	3	6	
Brown Clay	6	22	
Blue Clay	22	45	
Gray Sandstone	45	57	45
Gray Clay	57	137	
Gray Sandstone	137	150	
Green Clay	150	220	
Gray Sandstone	220	238	
Green Clay	238	242	
Green Clay and Limestone Layers	242	250	

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SEP 05 2023

OWRD

Work started 12-16 1974 Completed 12-26 1974
Date well drilling machine moved off of well 12-26 1974

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] W.A. Sandella Date 12-26, 1974
(Drilling Machine Operator)

Drilling Machine Operator's License No. 491

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 WESTERN DRILLING CO.
(Person, firm or corporation) (Type or print)

Address P.O. BOX 751 BURNS, OREGON 97720

[Signed] John W. McArthur
(Water Well Contractor)

Contractor's License No. 426 Date 1-23-, 1975

(USE ADDITIONAL SHEETS IF NECESSARY)

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SP*45656-119

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FEB - 2 1995

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

WATER RESOURCES DEPT. (START CARD) # SALEM, OREGON

W-63737

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

(1) OWNER: Name Walter McEwen, Address Box 905, City Burns, State OR, Zip 97720

(9) LOCATION OF WELL by legal description: County HARNEY, Township 24S N or S Range 33E E or W. WM. Section 14 SE 1/4 NW 1/4

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

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

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

(10) STATIC WATER LEVEL: 28 ft. below land surface. Date 1-6-95

(5) BORE HOLE CONSTRUCTION: Depth of Completed Well 492 ft.

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

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 300, 481, 1000+, 28

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Table with columns: Diameter, From, To, Material, Sacks or pounds. Row 1: 20, 0, 230, PTD COM, 3 YARDS

(12) WELL LOG: Ground Elevation MAR 23 1995

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

Table with columns: Material, From, To, SWL. Rows include: Sandy soil, Tan clay, Black clay + silt, Black sand, sandstone, soft gray clay, gray sand, gray sandstone, broken claystone, gray sandstone, broken claystone, sandstone gray, broken claystone + gravel, gray sandstone, broken claystone, broken brown rock, green claystone, gray sandstone, broken claystone

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(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s) 230

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour. Yield gal/min 1300, Drawdown 130', Time 12 min

Date started 12-13-94 Completed 1-6-95 (unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards.

Temperature of water 57 Depth Artesian Flow Found Was a water analysis done? [] Yes By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. Signed Larry Buid Date 1-6-95

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Page 1 of 2

RECEIVED WELL ID L013800

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

SEP 25 1997 (START CARD) # 98353

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

(1) OWNER: Well Number _____
Name Walter Mc covey estate
Address PO Box 95
City Bunns State 97720 OR 97720

WATER RESOURCES DEPT.
LOCATION OF WELL by legal description:
County Marion Latitude _____ Longitude _____
Township 24.5 N or S Range 33 E or W. WM.
Section 14 SE 1/4 NW 1/4
Tax lot 300 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

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

(10) STATIC WATER LEVEL:
HO ft. below land surface. Date 9/19/97
Artesian pressure _____ lb. per square inch. Date _____

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

(11) WATER BEARING ZONES:
Depth at which water was first found 24 Feet

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 577 ft.
Explosives used Yes No Type _____ Amount _____

From	To	Estimated Flow Rate	SWL
24	28	20 Gpm	23
164	173	75 Gpm	23
184	189	150 Gpm	23
189	192	300+ Gpm	23

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
20	0	24	POR CPM	0	90	71 Sacks
1 7/8	24	218				
1 5/8	218	577				

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

(12) WELL LOG:
Ground Elevation _____

Casing:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded	Final location of shoe(s)	
									Slot size	Number
	16'	+2	218	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

Material	From	To	SWL
SOIL	0	2	
Brown clay	2	24	
Gray clay	24	142	
Green sand stone	142	164	
Gray clay soft	164	173	
Green sand stone	173	184	
Clay stone green	184	189	
Green sand stone	189	230	
Cement gravel	230	240	
Sand stone green	240	259	
Green clay stone hard	259	264	
Sand stone	264	340	
Black sinder	340	344	
Sand stone	344	350	
Clay stone	350	361	
Sand stone	361	376	
Brown clay + gravel	376	379	
Clay stone	379	430	
Clay + Gravel	430	434	
Clay stone	434	439	

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____
From _____ To _____ Slot size _____ Number _____ Diameter _____ Tele/pipe size _____ Casing _____ Liner _____

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Flowing Artesian
Yield gal/min 1500 Drawdown 65' Drill stem at _____ Time 7 min

Date started 8-1-97 Completed 8-19-97
(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
Signed Clayton Bowman WWC Number 1663 Date 9-19-97

Temperature of water 59° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
Signed Larry Bunde WWC Number 544 Date 9-19-97

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Page 2 of 2 RECEIVED IO 4013800

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

SEP 2 1997 (START CARD) # 98353

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

WATER RESOURCES DEPT.

(1) OWNER: _____ Well Number _____

Name Walter McEwen
Address PO BOX 95
City Burns State OR Zip 97720

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

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

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

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	

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

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

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

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

Pump Bailer Air Flowing Artesian
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____
Temperature of water _____ Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

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

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

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

From	To	Estimated Flow Rate	SWL
230	240	200 GPM	39
259	264	400 GPM	40
340	341	600 GPM	40
350	361	900 GPM	40
412	430	1100+ GPM	40

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Hard Sand Stone	439	455	
Black Sinder	455	472	
Hard Sand Stone	472	506	
Black Sinder	506	515	
Green Clay Stone	515	520	
Green + white sand stone	520	555	
Clay stone (soft)	555	568	
Sand Stone (Hard)	568	577	

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Date started _____ Completed _____

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

Signed Anthony Bowman WWC Number 1663 Date 9-19-97

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

Signed Jamy Burns WWC Number 544 Date 9-19-97



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

RECEIVED
 SEP 05 2023
 OWRD

TRANSMITTAL

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

Date: 8/30/2023
 Attention: Transfers
 RE: Transfer C91908

Prints Plans Plat Specifications.

Attached is a Transfer on C-91908 for Andy Root.

If you have any questions please don't hesitate to call or email me.

Copies	No.	Description
1	1	App for Transfer (11 pages letter bond)
1	2	Transfer Map (1 pages bond))
1	3	Evidence of Use w/Supporting Docs (5 pages letter bond)
1	4	Land Use Form (2 pages letter bond)
1	5	Well logs (10 pages letter bond)
1	6	Check for \$2250

Signed: Deuse Montgomey

Business Name Search

[New Search](#)

[Printer Friendly](#)

Business Entity Data

09-06-2023
11:39

Registry Nbr	Entity Type	Entity Status	Jurisdiction	Registry Date	Next Renewal Date	Renewal Due?
535155-82	DLLC	ACT	OREGON	09-10-1996	09-10-2024	
Entity Name RATTLESNAKE CREEK LAND & CATTLE COMPANY, LLC						
Foreign Name						

[New Search](#)

[Printer Friendly](#)

Associated Names

Type	PPB	PRINCIPAL PLACE OF BUSINESS			
Addr 1	524 HIGHWAY 20 N				
Addr 2					
CSZ	HINES	OR	97738	Country	UNITED STATES OF AMERICA

Please click [here](#) for general information about registered agents and service of process.

Type	AGT	REGISTERED AGENT	Start Date	08-03-2020	Resign Date
Name	JEFF	A	TROUTMAN		
Addr 1	530 CENTER STREET NE SUITE 150				
Addr 2					
CSZ	SALEM	OR	97301	Country	UNITED STATES OF AMERICA

Type	MAL	MAILING ADDRESS			
Addr 1	524 HWY 20 NORTH				
Addr 2					
CSZ	HINES	OR	97738	Country	UNITED STATES OF AMERICA

Type	MEM	MEMBER	Resign Date
Name	JANA	L	ROOT
Addr 1	524 HWY 20 N		
Addr 2			
CSZ	HINES	OR	97738
Country	UNITED STATES OF AMERICA		

Type	MGR	MANAGER	Resign Date
Name	ANDY	J	ROOT
Addr 1	524 HWY 20 NORTH		
Addr 2			

14320












CSZ	HINES	OR	97738	Country	UNITED STATES OF AMERICA
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[New Search](#) [Printer Friendly](#) Name History


Business Entity Name	Name Type	Name Status	Start Date	End Date
RATTLESNAKE CREEK LAND & CATTLE COMPANY, LLC	EN	CUR	12-11-1998	
L-1 ENTERPRISES, L.L.C.	EN	PRE	09-10-1996	12-11-1998

Please [read](#) before ordering [Copies](#).

[New Search](#) [Printer Friendly](#) Summary History

Image Available	Action	Transaction Date	Effective Date	Status	Name/Agent Change	Dissolved By
	AMENDED ANNUAL REPORT	07-25-2023		FI		
	AMENDED ANNUAL REPORT	07-21-2022		FI		
	AMENDED ANNUAL REPORT	07-29-2021		FI		
	AMENDED ANNUAL REPORT	08-03-2020		FI	Agent	
	AMENDED ANNUAL REPORT	09-11-2019		FI	Agent	
	AMNDMT TO ANNUAL RPT/INFO STATEMENT	09-24-2018		FI	Agent	
	AMENDED ANNUAL REPORT	07-26-2018		FI		
	AMENDED ANNUAL REPORT	07-24-2017		FI	Agent	
	AMENDED ANNUAL REPORT	07-27-2016		FI		
	AMENDED ANNUAL REPORT	07-31-2015		FI		
	AMENDED ANNUAL REPORT	10-29-2014		FI		
	ANNUAL REPORT PAYMENT	09-09-2013		SYS		
	ANNUAL REPORT PAYMENT	08-23-2012		SYS		
	ANNUAL REPORT PAYMENT	08-23-2011		SYS		
	ANNUAL REPORT PAYMENT	08-13-2010		SYS		
	ANNUAL REPORT PAYMENT	08-25-2009		SYS		
	ANNUAL REPORT PAYMENT	09-30-2008		SYS		

14320

	ANNUAL REPORT PAYMENT	09-07-2007		SYS		
	ANNUAL REPORT PAYMENT	08-18-2006		SYS		
	ANNUAL REPORT PAYMENT	08-30-2005		SYS		
	ANNUAL REPORT PAYMENT	10-13-2004		SYS		
	CHANGE OF REGISTERED AGENT/ADDRESS	03-23-2004		FI	Agent	
	ANNUAL REPORT PAYMENT	08-19-2003		SYS		
	ANNUAL REPORT PAYMENT	10-11-2002		SYS		
	CHANGE OF REGISTERED AGENT/ADDRESS	10-10-2002		FI	Agent	
	ANNUAL REPORT PAYMENT	08-16-2001		SYS		
	CHANGE OF REGISTERED AGENT/ADDRESS	07-20-2001		FI	Agent	
	STRAIGHT RENEWAL	10-04-2000		FI		
	CHANGED RENEWAL	09-22-1999		FI		
	STRAIGHT RENEWAL	09-07-1999		FI		
	ENTITY NAME CHANGE	12-11-1998		FI		
	NB AMENDMENT	12-11-1998		FI		
	STRAIGHT RENEWAL	11-23-1998		FI		
	AMENDED RENEWAL	11-13-1997		FI		
	NEW FILING	09-10-1996		FI		

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14320

Oregon Water Resources Department
Transfer Fee Calculation for Permanent (Non-District) Transfer

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Today's Date: Wednesday, September 6, 2023	Fee Calculation
Base Fee (includes one type of change to one water right for up to 1 cfs)	\$1,360.00
Fill in information below– Check each box that applies. Types of Change Proposed:	
<input type="checkbox"/> Place of Use	
<input type="checkbox"/> Point of Diversion (POD)/Appropriation (POA); and/or Additional POD/POA; and/or SW POD to GW POD	
<input type="checkbox"/> Character of Use	\$0.00
Enter total number of water rights included in transfer. <input type="text" value="1"/>	\$0.00
<input checked="" type="checkbox"/> Check this box if you propose to add or change a well, or change from a surface water POD to a well.	\$480.00
Enter total number of groundwater wells (POAs) included in transfer. <input type="text" value="2"/>	\$410.00
<input type="checkbox"/> Check this box if you propose to change the place of use or character of use for a NON-irrigation right.	
<input type="checkbox"/> Check this box if you propose to change the place of use or character of use for an irrigation right.	
Total Transfer CFS(rounded up to the next whole cfs):	<input type="text"/>
Subtotal:	\$2,250.00
Check each box that applies.	
<input type="checkbox"/> The transfer is necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932.	
<input type="checkbox"/> The transfer is endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat.	
Discount:	<input type="text"/>
Transfer Fee:	\$2,250.00
<input type="button" value="Return to Edit"/> <input type="button" value="Clear"/>	

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Permanent Transfer Application Intake Checklist

Transfer # T- 14320

Reviewer Corie Date 9/6/23	Type of Change(s) Proposed: <input type="checkbox"/> POU <input type="checkbox"/> POD <input type="checkbox"/> APOD <input checked="" type="checkbox"/> POA <input type="checkbox"/> APOA <input type="checkbox"/> USE <input type="checkbox"/> Substitution <input type="checkbox"/> Gov't Action <input type="checkbox"/> Sup to Primary <input type="checkbox"/> SW to GW	
Calculated Fee \$2250 Use fee calculator on back of this form		Fee Received \$2250
Certificate(s): 91908		Check <u>all</u> Certs in WRIS to confirm they are not cancelled
For multiple certificates, does application meet requirement of OAR 690-380-3220? If no, why? Use the flow chart for multiple Certs		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Notes: <u>N/A</u>		

Application: OAR 690-380-3000; OAR 690-380-3220				
1.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Have ALL of the applicant's signed and dated the application? If no, whose signature is missing?	
2.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Part 5 of application: Does the information match the description of the explanation on Part 4 of the application?	
3.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	For multiple certificates: Each certificate proposed for transfer has their own separate completed Part 5, Tables 1 & 2? If no, which certificate(s) are missing separate Part 5, Tables 1 & 2?

Map Requirements: OAR 690-380-3100				
4.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Has the map been completed and signed by a CWRE?	
5.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	Map Waiver? The map waiver must be issued by the Department
Notes: <u>N/A</u>				

Attachments: OAR 690-380-3000				
6.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Evidence of Use included, signed, & notarized w/supporting documentation?	
7.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	Land Use Form included and signed by the County?
8.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	Consent Form included, signed, and notarized?
9.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	District: Place of use is in <u>or</u> near an irrigation district?
	<input type="checkbox"/> YES	<input type="checkbox"/> NO		If Yes, is Form D included? Name of the District
10.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	For changes in POA/APOA – are the well logs included?
11.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	For change in POU within Umatilla County, Supplemental Form U included?

<input checked="" type="checkbox"/>	Application complete: no deficiencies identified, assign a T-number and put this checklist in T-folder.
<input type="checkbox"/>	Application DEFICIENT: DO NOT accept - return to applicant with letter explaining deficiencies identified.

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