### **Application for Water Right**

## Temporary or Drought Temporary Transfer

Part 1 of 5 - Minimum Requirements Checklist



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

This temporary transfer application <u>will be returned</u> 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.

		FOR ALL TEMPORARY TRANSFER APPLICATIONS	RECEIVED
Che	ck all iten	ns included with this application. (N/A = Not Applicable)	FEB <b>02</b> 2024
$\boxtimes$		Part 1 – Completed Minimum Requirements Checklist.	1 20 02 202,
$\boxtimes$		Part 2 – Completed Temporary Transfer Application Map Checklist.	OWRD
		Part 3 – Application Fee, payable by check to the Oregon Water Resources Completed Fee Worksheet, page 3. Try the online fee calculator at: <a href="http://apps.wrd.state.or.us/apps/misc/wrd">http://apps.wrd.state.or.us/apps/misc/wrd</a> fee calculator.	Department, and
$\boxtimes$		Part 4 – Completed Applicant Information and Signature.	
$\boxtimes$		Part 5 – Information about Transferred Water Rights: <b>How many water righ</b> transferred? <b>1</b> List them here: <u>Certificate 93055 (See Attachment A)</u>	ts are to be
		Please include a separate Part 5 for each water right. (See instructions on page	ige 6)
$\boxtimes$	☐ N/A	For standard Temporary Transfer (one to five years) Begin Year: 2024 End	Year: <u>2028</u> .
	⊠ N/A	Temporary Drought Transfer (Only in counties where the Governor has decl	ared drought)
Atta	achments	:	
$\boxtimes$		Completed Temporary Transfer Application Map. See Attachment B	
$\boxtimes$		Completed Evidence of Use Affidavit and supporting documentation. See At	tachment C
		Current recorded deed for the land <b>from</b> which the authorized place of use being moved. <b>N/A The authorized use for Certificate 93055 is quasi-munici</b>	
	⊠ N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the which the water right is located.) <b>N/A The authorized use for Certificate 93</b> municipal use.	
$\boxtimes$	□ N/A	Supplemental Form D – For water rights served by or issued in the name of a Complete when the temporary transfer applicant is not the district.	a district.
	□ N/A	Oregon Water Resources Department's Land Use Information Form with appring signature from each local land use authority in which water is to be diverted and/or used. Not required if water is to be diverted, conveyed, and/or used lands or if <u>all</u> of the following apply: a) a change in place of use only, b) no stochanges, c) the use of water is for irrigation only, and d) the use is located we irrigation district or an exclusive farm use zone. See Attachment D	l, conveyed, only on federal tructural
	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s) point(s) of appropriation (if necessary to convey water to the proposed place  Attachment E	•
	WE AF A	taff Use Only)  RE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):  pplication fee not enclosed/insufficient and Use Form not enclosed or incomplete dditional signature(s) required  Phone:  Date: /	402-

### Part 2 of 5 – Temporary Transfer Application Map Checklist

# Your temporary transfer application <u>will be returned</u> if any of the map requirements listed below are not met.

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

Ц	N/A	If <b>more than three</b> water rights are involved, separate maps are needed for each water right.
$\boxtimes$		Permanent quality printed with dark ink on good quality paper.
		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, $11 \times 17$ inches, or up to $30 \times 30$ inches. For $30 \times 30$ inch maps, one extra copy is required.
$\boxtimes$		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.
$\boxtimes$		Township, Range, Section, $\frac{1}{4}$ , DLC, Government Lot, and other recognized public land survey lines.
	⊠ N/A	Tax lot boundaries (property lines) are required. Tax lot numbers are recommended. (Not required per 690-380-3100 (2)(J).
$\boxtimes$		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
$\boxtimes$		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.
$\boxtimes$	□ N/A	Proposed temporary 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) to convey water to the new temporary place of use, 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  $-42^{\circ}32'15.5''$ ) or degrees-decimal with five or more digits after the decimal (example  $-42.53764^{\circ}$ ).

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### Part 3 of 5 - Fee Worksheet

**OWRD** 

	FEE WORKSHEET for TEMPORARY (not drought) TRANSFERS		
1	Base Fee (includes temporary change to one water right for up to 1 cfs)	1	\$950.00
	Number of water rights included in transfer: 1 (2a)		
	Subtract 1 from the number in 3a above: <u>0 (2b)</u> If only one water right this will be 0		
2	Multiply line 2b by \$310.00 and enter » » » » » » » » » » » » »	2	0
	Do you propose to change the place of use for a non-irrigation use?		
	□ No: enter 0 on line 3 » » » » » » » » » » » » » » » » » »		
	$\boxtimes$ Yes: enter the cfs for the portions of the rights to be transferred: 2.7 (3a)		
	Subtract 1.0 from the number in 3a above: 1.7 (3b)		
	If 3b is 0, enter 0 on line 3 » » » » » » » » » » » » » » »		
	If 3b is greater than 0, round up to the nearest whole number: 2 (3c) and		
3	multiply 4c by \$210.00, then enter on line 3	3	420
	Do you propose to change the place of use for an irrigation use?		
	⊠ No: enter 0 on line 4 » » » » » » » » » » » » » » » » »		
	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $		
	portions of the rights to be transferred:(4a)		
4	Multiply the number of acres in 4a above by \$2.70 and enter on line 4 $^{\mathrm{o}}$	4	
5	Add entries on lines 1 through 4 above » » » » » » » » » » Subtotal:	5	1,370
	Is this transfer:		
	necessary to complete a project funded by the Oregon Watershed		
	Enhancement Board (OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net benefit to	24.	
	fish and wildlife habitat?		
	If one or more boxes is checked, multiply line 5 by 0.5 and enter on line 6 »		
6	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » »	6	0
7	Subtract line 6 from line 5 » » » » » » » » » » » » » <b>Transfer Fee:</b>	7	\$1,370

	FEE WORKSHEET for TEMPORARY DROUGHT TRANSFERS						
1	Base Fee (includes drought application and recording fee for up to 1 cfs)						
	Enter the cfs for the portions of the rights to be transferred (see example below*):						
	(2a)						
	Subtract 1.0 from the number in 2a above:(2b)						
	If 2b is 0, enter 0 on line 2 » » » » » » » » » » » » » » »						
	If 2b is greater than 0, round up to the nearest whole number:(2c) and						
2	multiply 2c by \$50, then enter on line 2 » » » » » » » » »	2					
3	Add entries on lines 1 through 2 above » » » » » » » » » Transfer Fee:	3	N/A				

<sup>\*</sup>Example for Line 2a 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:

<sup>1.</sup> Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs  $\div$ 100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac= 0.56 cfs).

<sup>2.</sup> 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 ac x 0.0125 cfs/ac = 0.56 cfs)

<sup>3.</sup> 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 2a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 2b would be 0 and Line 2 would then also become 0).

### FEB 02 2024

### Part 4 of 5 - Applicant Information and Signature

**OWRD** 

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Broken Top Community	Club		541-383-8200	
ADDRESS				FAX NO.
52000 Broken Top Dr.				
CITY	STATE	ZIP	E-MAIL	
Bend	OR	97702		
			CEIVE ALL CORRESPONDENC	E FROM THE DEPARTMENT
<b>ELECTRONICALLY. COPIES</b>	OF THE FINAL ORD	DER 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		PHONE NO.	ADDITIONAL CONTACT NO.			
GSI Water Solutions, Inc. Attn:	Trevor Gra	971-200-8545				
ADDRESS				FAX NO.		
147 Shevlin Hixon Dr., Suite 20	1					
CITY	STATE	ZIP	E-MAIL			
Bend	Bend OR 97702 tgrandy@gsiws.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: The Applicant is proposing to change the place of use to include the greater Avion Service Area. In order to convey water to the new temporary place of use, the Applicant is also proposing to temporarily add three additional points of appropriation. The Applicant understands that no more than 2.7 cfs can be used under the transfer between the authorized point of appropriation and three proposed points of appropriation in any combination. The wells will be metered to monitor and document water use.

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

I (we) affirm that the information contai	ned in this application is true a	nd accurate.	
Applicant signature	Steve Terry, Broken Top Comm Print Name (and Title if applicable)	unity Club	12/29/2023 Date
Applicant signature	Print Name (and Title if applicable)	Date	
Is the applicant the sole owner of the transfer is located?  Yes No N/			
use.			
If NO, include signatures of all landowne attach affidavits of consent from all land			

the water right(s) has been conveyed.

☑ 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. (NOTE: If this box is checked, you must complete and attach Supplemental Form D.)

coals at the second			HELEIVEL
DISTRICT NAME	ADDRESS		
Arnold Irrigation District	19604 Buck Canyon Rd		FEB <b>02</b> 2024
CITY	STATE	ZIP	
Bend	OR	97702	OWRD

DISTRICT NAME	ADDRESS	
Central Oregon Irrigation District	1055 SW Lake Ct.	
CITY	STATE	ZIP
Redmond	OR	97756

DISTRICT NAME	ADDRESS	
Swalley Irrigation District	64672 Cook Ave. #1	
CITY	STATE	ZIP
Bend	OR	97703

DISTRICT NAME	ADDRESS	
Tumalo Irrigation District	64697 Cook Ave.	
CITY	STATE	ZIP
Bend	OR	97703

☐ 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	ADDRESS	
N/A		
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 and/or used.

ENTITY NAME	ADDRESS					
<b>Deschutes County Community Development</b>	117 NW Lafayette Ave.					
CITY	STATE	ZIP				
Bend	OR	97703				

ENTITY NAME	ADDRESS					
City of Bend Planning Department	710 NW Wall St.					
CITY	STATE	ZIP				
Bend	OR 97701					

### 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 rows to tables within the form.

Water Right Certificate # 93055

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**Description of Water Delivery System** 

FEB 02 2024

System capacity: 2.7 cubic feet per second (cfs)

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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. Groundwater is pumped from the supply well (DESC 8410) into the Broken Top Club House Lake located adjacent to the well. The water is then pumped from the lake into the pressurized distribution system by one of 3 pumps at the lakeside booster pump station. The distribution system provides water across the Broken Top development and consists of piping that ranges from 4- to 12-inches in diameter with smaller diameter lateral supplying water to the service connections or use points. Most of the system's piping is PVC with the distribution system piping sizes generally decreasing the farther it is from the main booster station.

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)	Tı	Twp		ng	Sec	14 14		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	<ul><li>☑ Authorized</li><li>☐ Proposed</li></ul>	DESC 8410	18	s	11	E	1	NW	SE	109	2650 feet South and 1400 feet West from the NE corner of Section 1.
China Hat Well 3	☐ Authorized ☑ Proposed	DESC 61639	18	S	12	E	29	NE	NE	900	663 feet South and 771 feet West from the Northeast corner of Section 29.
China Hat Well 4	☐ Authorized ☑ Proposed	N/A		s	12	E	29	NE	NE	900	760 feet South and 840 feet West from NE corner, Section 29
Dyer 2	☐ Authorized ☑ Proposed	DESC 62703	17	S	12	E	14	NE	SE	806	1930 feet North and 1150 feet West from SE corner, Section 14

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

$\boxtimes$	Place of Use (POU)		Appropriation/Well (POA)
	Point of Diversion (POD)	$\boxtimes$	Additional Point of Appropriation (APOA)
	Additional Point of Diversion (APOD)		

	all type(s) of temporary change(s) due to the contract of the	to drough	t proposed below (change "CODES" are
	Place of Use (POU)		Point of Appropriation/Well (POA)
	Character of Use (USE)		Additional Point of Appropriation (APOA)
	Point of Diversion (POD)		Additional Point of Diversion (APOD)
Will all	of the proposed changes affect the en	tire water	right?
⊠ Yes	Complete only the Proposed ("t "CODES" listed above to describ		section of Table 2 on the next page. Use the posed changes.
□ No	Complete all of Table 2 to descr	ibe the po	ortion 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 Temporary Changes to Water Right Certificate # 93055

List only the part of the right that will be changed. For the acreage in each ¼ ¼, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, specify the acreage associated with each POD/POA.

т Т	AUTHORIZED (the "from" or "off" lands)  The listing that appears on the Certificate BEFORE PROPOSED CHANGES  List only that part or portion of the water right that will be changed.							Proposed Changes	Changes are made.								S							
Twp		ng	Sec		4 1/4	Tax Lot	Gvt Lot or DLC		Type of USE listed on Certificate	POD(s) or POA(s)	Priority Date	(see "CODES" from previous page)	Twp	R	Ing	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
												EXAMPLE												
2 S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2 5	9	E	1	NW	NW	500	1	10.0		POD #5	1901
" "	"	"	"	"	"	"	"	"	EXAMPLE	"	"	"	2 9	0	E	2	sw	NW	500		5.0		POD #6	1901
													Baselli Ba	9 3				Shaketon (C)	STATE OF THE PARTY	S DESCRIPTION OF THE PARTY OF T		E CONTRACTOR DE LA CONT		DOMESTICAL PROPERTY OF THE PARTY OF THE PART
			Se	e Att	ached	Maps			Quasi- Municipal	Well 1	2/22/1990	APOA/POU		3 3	-		Attac					N/A	Well 1, China Hat Well 3,	Control Control Control Control

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

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FEB 02 2024

### Water Right Certificate # 93055

### For Place of Use Changes

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Are there other water right certificates, water use permits or ground water registrations associated with the
"from" or the "to" lands?  Yes No N/A – The authorized use is quasi-municipal.
If YES, list the certificate, water use permit, or ground water registration numbers:



Pursuant to ORS 540.525, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for temporary transfer can be included in the transfer or remain unused on the authorized place of use. If the primary water right does not revert soon enough to allow use of the supplemental right within five years, the supplemental right shall become subject to cancellation for nonuse under ORS 540.610.

If a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation is necessary to convey the water to the new temporary place of use you must provide:

Well log(s) 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: <a href="http://apps.wrd.state.or.us/apps/gw/well-log/Default.aspx">http://apps.wrd.state.or.us/apps/gw/well-log/Default.aspx</a>) **See Attachment E – Well Logs.** 

### AND/OR

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

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

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
Well 1	Yes	DESC 8410	530 ft	12"	+1 to 530 ft	0 to 530 ft	430 to 530 ft	330 ft	Deschutes Formation	N/A
China Hat Well 3	Yes	DESC 61639	640 ft	14"	+2 to 640 ft	0 to 510 ft	535 to 640 ft	511.75 ft	Deschutes Formation	N/A
China Hat Well 4*	No		640 ft	14"	+2 to 640 ft	0 to 518 ft	535 to 640 ft	515 ft (estimate)	Deschutes Formation	N/A
Dyer 2	Yes	DESC 62703	838 ft	14"	+2 to 838 ft	0 to 655 ft	728 to 836 ft	692 ft	Deschutes formation	N/A

<sup>\*</sup>China Hat Well 4 construction information based on China Hat Well 3 construction

Temporary Transfer Application – Page 9 of 9

FEB 0 2 2024 OWRD

# **Attachment A**

Certificate 93055

Application for a Temporary Water Right Transfer – Certificate 93055 Broken Top Community Club

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# **Attachment B**

**Application Maps** 

Application for a Temporary Water Right Transfer – Certificate 93055 Broken Top Community Club From:

STARNES Patrick K \* WRD

To:

Trevor Grandy

Subject:

RE: Request for map scale waiver for Broken Top Community Association

Date:

Tuesday, December 19, 2023 9:44:17 AM

Good Morning Trevor,

The Department grants a map scale waiver for the proposed place of use map .

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

FEB 02 2024

OWRD

Sincerely,

Kelly

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Kelly Starnes, Transfer Program Analyst (He/Him/His) 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

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

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

From: Trevor Grandy < tgrandy@gsiws.com> Sent: Monday, December 18, 2023 5:18 PM

To: STARNES Patrick K \* WRD <patrick.k.starnes@water.oregon.gov>

Subject: Request for map scale waiver for Broken Top Community Association

You don't often get email from tgrandy@gsiws.com. Learn why this is important

Greetings Kelly,

The Broken Top Community Association is preparing a temporary transfer application to add three additional points of appropriation and change the location of the place of use authorized by certificate 93055. The applicant is proposing to change to place of use for this quasi-municipal water right to include the greater Avion service area as depicted in the attached map.

Because of the size of the greater Avion service area, I am requesting a map scale waiver for the place of use map (see attached). The proposed points of appropriation maps are

attached and are at a standard scale (1 inch = 400 feet).

Please let me know if you have any question regarding this map scale waiver request.

Cheers,

### Trevor Grandy, RG, CWRE

Project Hydrogeologist
direct: 971.200.8545 | mobile: 614.493.7292
147 SW Shevlin Hixon Dr. # 201, Bend, OR 97702
GSI Water Solutions, Inc. | www.gsiws.com

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# Application for Water Right **Transfer**



### Oregon Water Resources Department

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

### **Evidence of Use Affidavit**

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing.

Supporting documentation must be attached.

County I, <u>Joshu</u> mailing telepho 1.	Certi	O BROKEN  441)383-8  ge of the conal obse	TOP DR. BEI 3202, being exercise or ervation ed during the 13055; OR	first di status	97702 uly swor of the w	n depose vater rigl Profess e years c	e and say:  Int is based on ional expertise on the <b>entire</b> p	(check one): se place of use f	or	FEB 02	2024 RD
	Certificate #	Townsl		nge	Mer	Sec	the following	Gov't Lot or DLC	hin the last Acre (if applic	S	s:
	-35/10										
OR	6100										
	Confirming C Part or all of instream leastransfer was	the wate	r right was er is:	leased (Note:	instrear	m at som ntire righ	e time within	the last five		am.); <b>OR</b>	
	The water rig						ntation that a	presumption	of forfeitur	e for non	-use
	Water has be 10 years for 0							priation for r	more than		

(continues on reverse side)

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# **Attachment C**

Evidence of Use Affidavit

Application for a Temporary Water Right Transfer – Certificate 93055 Broken Top Community Club 3. The water right was used for: (e.g., crops, pasture, etc.): QUASI-MUNICIPAL

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.

RECEIVE

Date

FEB 02 2024

**OWRD** 

Signed and sworn to (or affirmed) before me this 315t

of Accember, 20

Signature of Affiant

OFFICIAL STAMP
COURTNEY LYNN THERIEN
NOTARY PUBLIC - OREGON
COMMISSION NO. 1022826
MY COMMISSION EXPIRES APRIL 18, 2026

lotary Public for Oregon

My Commission Expires: \_

April 18, 2026

Supporting Documents	Examples
Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of <b>confirming</b> water right certificate that shows issue date
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	Power usage records for pumps associated with irrigation use
	Fertilizer or seed bills related to irrigated crops
	Farmers Co-op sales receipt
Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or	District assessment records for water delivered
records of other water suppliers	Crop reports submitted under a federal loan agreement
	Beneficial use reports from district
	IRS Farm Usage Deduction Report
	Agricultural Stabilization Plan
	CREP Report
Aerial photos containing sufficient detail to establish location and date of photograph	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.terraserver.com
Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number
Water Use Report from Well 1	Copy of SCADA data from Well 1 June/July, 2022

SITE	DATE	ON	OFF	Runtime	GPM	Total	<b>Grand Total</b>
Broken Top	June 29, 2022	0:00	3:42	3.70	1,200.00	266,400.00	
		16:06	0:00	7.90	1,200.00	568,800.00	
							835,200.00
Broken Top	June 30, 2022	0:00	3:55	3.92	1,200.00	282,000.00	
		19:39	0:00	4.35	1,200.00	313,200.00	
							595,200.00
	JULY						
Broken Top	July 1, 2022	0:00	3:34	3.57	1,200.00	256,800.00	
		18:03	0:00	5.95	1,200.00	428,400.00	
							685,200.00
Broken Top	July 2, 2022	0:00	4:01	4.02	1,200.00	289,200.00	
		11:01	17:46	6.75	1,200.00	486,000.00	
	j						775,200.00
Broken Top	July 3, 2022	12:16	0:00	11.73	1,200.00	844,800.00	
							844,800.00
Broken Top	July 4, 2022	0:00	3:44	3.73	1,200.00	268,800.00	
							268,800.00
Broken Top	July 5, 2022			0.00	1,200.00	-	
							-
Broken Top	July 6, 2022	17:53	0:00	6.12	1,200.00	440,400.00	
							440,400.00

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# **Attachment D**

Application for a Temporary Water Right Transfer – Certificate 93055

Broken Top Community Club

# 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

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### NOTE TO APPLICANTS

OWRD

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 <u>all</u> 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.

# **Land Use Information Form**



### OREGON Oregon Water Resources Department

725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900

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Applicant(s): Broken Top Community Club, Attn: Steve Terry

FEB 02 2024

Mailing Address: 62000 Broken Top Dr.

OWRD

City: **Bend** 

State: OR

Zip Code: **97702** 

Daytime Phone: (541) 383-8200

#### 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	1/4 1/4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:
See Attac	hed Maps					☑ Diverted	☐ Conveyed	⊠ Used	Quasi- municipal
	7 /			2019 (200		Diverted	Conveyed	Used	^
		<u>-</u>				Diverted	☐ Conveyed	Used	
						Diverted	☐ Conveyed	Used	
List all cour	nties and ci	ities where	water is pro	oposed to be	diverted, conveyed, ar	nd/or used o	r developed:		
Deschut	es Count	y; City o	f Bend						
Type of app	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 Source of water: Reservoir/Pond Ground Water Surface Water (name)								
Estimated of	quantity of	water nee	ded: <u><b>2.7</b></u>	⊠ cut	pic feet per second	gallons per r	ninute	acre-feet	
Intended u	Intended use of water: Irrigation Commercial Industrial Domestic for household(s)  Municipal Quasi-Municipal Instream Other								
Briefly desc									
Avion Se	ervice Ar	ea. In ord	der to con		fer to change the p to the temporary p on (wells).				
									20

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. →

Revised 2/8/2010

# 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 an	d provide the requested information		
☐ Land uses to be served by the proposed water by your comprehensive plan. Cite applicable		e allowed outrig	ht or are not regulated
Land uses to be served by the proposed water as listed in the table below. (Please attach do Record of Action/land-use decision and accordance periods have not ended, check "Being pursuant to be a served by the proposed water as listed in the table below.	ocumentation of applicable land-use approvampanying findings are sufficient.) <b>If approva</b>	als which have a	Iready been obtained.
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	d-Use Approval:
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	BECEIVED	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	FEB 0 2 2024	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	OWRD	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	OWNE	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
Name:			
Signature:			
Government Entity:		2	
Note to local government representative: Plea sign the receipt, you will have 30 days from the Information Form or WRD may presume the lan comprehensive plans.	Water Resources Department's notice date	to return the co rater is compati	mpleted Land Use ble with local
Receipt	for Request for Land Use Information	<u>on</u>	
Applicant name:			
City or County:	Staff contact:		
Signature:	Phone: Date	:	

# Land Use Information Form

PLMISC20230745



#### **Oregon Water Resources Department**

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

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### NOTE TO APPLICANTS

**OWRD** 

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:

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- 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;
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  - d) The application involves irrigation water uses only.

### NOTE TO LOCAL GOVERNMENTS

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# Land Use Information Form



### OREGON Oregon Water Resources Department

725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900

www.oregon.gov/OWRD

Water to be:

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Applicant(s): Broken Top Community Club, Attn: Steve Terry

1/4 1/4

Tax Lot #

FEB **02** 2024

Mailing Address: 62000 Broken Top Dr.

OWRD

**Proposed Land** 

Hse.

City: **Bend** State: **OR** Zip Code: **97702** Daytime Phone: **(541) 383-8200** 

#### A. Land and Location

Range

Section

Township

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.

Plan Designation (e.g.,

Rural Residential/RR-5)

See Attached Maps		☑ Diverted	□ Conveyed	☑ Used	Quasi- municipal	
		Diverted	☐ Conveyed	Used		
		Diverted	☐ Conveyed	Used		
		Diverted	☐ Conveyed	Used		
List all counties and cities where water is proposed	to be diverted, conveyed, a	nd/or used o	r developed:			
Deschutes County; City of Bend						
B. Description of Proposed Use  Type of application to be filed with the Water Resorm  Permit to Use or Store Water  Limited Water Use License  Allocation of Communication	ansfer Perm	it Amendment nge of Water	or Ground Wa	ter Registra	ition Modification	
Source of water: Reservoir/Pond Ground V	Vater Surface Water	name)	-			
Estimated quantity of water needed: 2.7	☑ cubic feet per second ☐	gallons per n	ninute 🗌	acre-feet		
Intended use of water:						
Briefly describe:						
The Applicant is proposing a temporary t	ransfer to change the p	lace of use	to also inc	clude the	greater	
Avion Service Area. In order to convey wa						
to add three additional points of appropr						
		s - 2				

**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

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

Land uses to be served by the proposed wat	er uses (including property construction) are	allowed Outrie	Districts for regulated
62000 BROKEN TOP DR, BEND, C			
Land uses to be served by the proposed wat			
·	ocumentation of applicable land-use approval ompanying findings are sufficient.) <b>If approva</b> l		
periods have not ended, check "Being purs		is nave been or	otained but an appear
		Т	
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	l-Use Approval:
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	RECEIVED	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	FEB <b>0 2</b> 2024	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	OWRD	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
outside the city limits of Bend and	Standard (RS) Density. The Dyer a are not part of this City of Bend re	view.	
Name: Sheila Pyott	Title:	Assistant Pl	anner
Signature: Sheila Pyott Distally signature: Sheila Pyott Out-Berg, Of Out-Berg, Of Date: 2023.12			
Government Entity: City of Bend			<del></del>
Note to local government representative: Pleasign the receipt, you will have 30 days from the Information Form or WRD may presume the lar comprehensive plans.	Water Resources Department's notice date t	o return the co ater is compati	mpleted Land Use ble with local
Receip	t for Request for Land Use Information	<u>on</u>	
Applicant name:			
City or County:	Staff contact:		
Signature:	Phone: Date	:	

# **Land Use Information Form**



OREGON Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900

Applicant(s): Broken Top Community Club, Attn: Steve Terry

Mailing Address: 62000 Broken Top Dr.

City: Bend

State: OR

Zip Code: **97702** 

Daytime Phone: (541) 383-8200

#### 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	1/4 1/4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:
See Attach	ned Maps					Diverted	□ Conveyed	⊠ Used	Quasi- municipal
						Diverted	☐ Conveyed	Used	
						Diverted	Conveyed	Used	
			manufactural		(	Diverted	Conveyed	Used	
		ties where		oposed to be	diverted, conveyed, an	nd/or used or	developed:		
B. Descript	tion of Pr	oposed U	se						
Permit	to Use or S d Water Use	itore Water License		er Resources r Right Transfe ation of Conser Ground Water		nge of Water		ter Registra	RECEIVE
Estimated q	quantity of	water nee	ded: <b>2.7</b>	⊠ cut	oic feet per second	gallons per n	ninute 🔲	acre-feet	FEB <b>02</b> 202
Intended us	se of water		ition	Commercial Quasi-Munic	parameter 1	-	estic for	househo	old(s) OWRD
Briefly desc	**************								
Avion Se	rvice Ar	ea. In ord	der to con		fer to change the p to the temporary p on (wells).				
									40

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. →

Land Use Information Form - Page 2 of 3

WR / FS

## 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
--------------------------------------------	-----------------------------------

Please check the appropriate box below a	nd provide the requested information		
Land uses to be served by the proposed wat by your comprehensive plan. Cite applicable			ght or are not regulated
□ Land uses to be served by the proposed wat as listed in the table below. (Please attach d Record of Action/land-use decision and accomperiods have not ended, check "Being purs")	ocumentation of applicable land-use approvempanying findings are sufficient.) If approve	als which have a	already been obtained.
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	d-Use Approval:
Site Plan Review	DCC 18.16.025(E)	Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
	19	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
,	RECEIVED	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	FEB <b>0 2</b> 2024	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	OWRD	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
see attached comm			
Name: Audrey Stuart	Title:	Associate	e Planner
Signature: Glady Stua	Phone: 541-388-0	6679 Date: _	1/25/24
Government Entity: Deschutes Co	unty		
Note to local government representative: Ple sign the receipt, you will have 30 days from the Information Form or WRD may presume the la comprehensive plans.	Water Resources Department's notice date	to return the co	ompleted Land Use ible with local
			The Pool
Receip	t for Request for Land Use Informati	on	
Applicant name:		d	
	Chaff annhach		

Signature: \_\_\_\_\_ Phone: \_\_\_\_ Date: \_\_\_\_\_



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**OWRD** 

### 247-23-000827-PS

**Location:** See attached maps; within the Avion Water Company service boundary and the Broken Top Community Club service boundary.

**Request:** The applicant has requested a Land Use Compatibility Statement (LUCS) to amend Certificate 93055, which is a permit for quasi-municipal water use. The applicant proposes a five-year temporary transfer permit to incorporate the Broken Top Community Club water system into the Greater Avion Service Area. All physical components of this transfer are existing infrastructure and there is no new proposed construction. The applicant proposes to add the three wells listed below to the point of appropriation.

Well	Approximate Location	Zoning Designation
Dyer 2	Assessor's Map 17-12-14	Exclusive Farm Use
China Hat 3	Assessor's Map 18-12-29	Rural Residential
China Hat 4	Assessor's Map 18-12-29	Rural Residential

The subject request is a renewal of a previous five-year temporary transfer permit (T-13140).

**Land Use Compatibility Statement:** This LUCS only reviews the amendment of Certificate 93055 for quasi-municipal water use, as detailed above. Three wells are proposed to be added to the point of appropriation. Two of these wells are located in the Rural Residential Zone, and are a use permitted outright pursuant to DCC 18.60.020(B). The well that is located in the Exclusive Farm Use Zone is on Tax Lot 806 on Assessor's Map 17-12-14 (Tax Account 108825). This property previously received approval through Deschutes County file SP-06-57 to establish a water reservoir tank, overflow reservoir, two drilled wells, and a pump station. All conditions of approval of Deschutes County file SP-06-57 remain in effect.

The applicant does not propose to establish any new structures or land uses within Deschutes County as part of this LUCS. To the extent other uses or structures are included on the OWRD LUCS application sheet, this LUCS does not review or approve those uses. This LUCS does not review or approve:

- Construction of buildings or fencing,
- Earthmoving or construction in floodplains,
- Earthmoving, construction, or vegetation changes in wetlands,
- Surface mining, and/or
- Other primary or accessory uses regulated by the Deschutes County Code

Each of the listed uses would require separate land use permits and/or building permits, which are not covered by this LUCS.

For more information, please contact the Planning Division office at 541-388-6560.

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247-23-000828-PS Page 2 of 2

DESC 8410 - Well 1
DESC 61639 - China Hat 3
DESC 62703 - Dyer 2

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# **Attachment E**

Well Logs

Application for a Temporary Water Right Transfer – Certificate 93055 Broken Top Community Club

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

8410 JUL 1 3 1993

_	185/11	/E/	1/26
(STAR	r card) # 34244		

(1) OWNER: WATER RESOURCES I	I. (9) I OCATION O	F WELL by legal of	description:		
Name Cascade Highlands			Longitude		
Address 121 SW Morrison Suite 950	Township 18 S	N or S, Range 1	1 E	E or W	v. WM.
City Portland State OR Zip 97204	Section 12	NW 1/4	NW	4	
(2) TYPE OF WORK:	Tax Lot	Lot Block	Subdi	vision	
New Well Deepen Recondition Abandon	Street Address of W	LotBlock_ell (or nearest address) 1	Miles N	North	of
(3) DRILL METHOD:	Century Dri	ve			
Rotary Air Rotary Mud Cable	(10) STATIC WAT				
Other		elow land surface.	Date	6/2/	/92
(4) PROPOSED USE:	Artesian pressure _	lb. per squa	are inch. Date		
☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation	(11) WATER BEA				
☐ Thermal ☐ Injection ☐ Other		242			
(5) BORE HOLE CONSTRUCTION:	Depth at which water w	as first found360			
Special Construction approval Yes No Depth of Completed Well 530 ft.  Explosives used Yes No Type Amount —					
Explosives used Yes No Type Amount	From	То	Estimated Flov	v Rate	SWL
HOLE SEAL Amount	360	530	1000	-	330
Diameter From To   Material From To   sacks or pounds					
20   0   30   Cement					
17 30 530 Cement 0 350 225 sacks		RECEI	VED		
The second secon	(12) WELL LOG:				
		Grand Bie At 2	n2024		
How was seal placed: Method A B B C D E					,
Other		Material OWR	From	То	SWL
Backfill placed from ft. to ft. Material	Dirt & soil		0	4	
Gravel placed from ft. to ft. Size of gravel	Basalt grey f	ractured	4	12	
(6) CASING/LINER:	Pumice white		12	28	
Diameter From To Gauge Steel Plastic Welded Threaded	Lava gray med		28	85	
Casing: 12 +1 530 .375 X	Lava gray pou		85	126	
	Lava conglome		126	148	ļ
	Lava brown wi		148	202	
	Lava gray bro		202	230	
Liner:	Lava gray har		230	243	-
	Lava fracture		243	256	
Final location of shoe(s)		a weathered brate with clay		278	
(7) PERFORATIONS/SCREENS:  \[ \times \text{ Perforations } \text{Method } \text{Machine Slot} \]	interbeds	race with cray	210	338	
Screens Type Material	Lava gray har	d	338	375	-
	Andacite gray	hard	375	418	<del> </del>
Slot Tele/pipe From To size Number Diameter size Casing Liner	Lava cinders	rad	418	436	<del> </del>
430   530   4x <sup>1</sup> / <sub>4</sub>   6000   12   K	Lava brown po		436	530	<del>                                     </del>
	Lava brown po	ar oab	430	750	
(O) MICH I PECTC. Many Advisor					
(8) WELL TESTS: Minimum testing time is 1 hour	Date started 5/5/	92 Comp	leted 6/	2/92	
N/A Flowing  □ Pump □ Bailer □ Air □ Artesian		Constructor Certificati			
•	,	ork I performed on the co		ation, or	abando
Yield gal/min Drawdown Drill stem at Time		mpliance with Oregon we			
1 hr.	used and information re	ported above are true to	my best knowled	ige and b	elief.
	1	21	WWC N	lumber	358
	Signed Digital	B 110	Bate (		
		Constructor Certification		1	
Temperature of Water52 Depth Artesian Flow Found	I accept responsibili	ty for the construction, alt	teration, or aband	donment	work pe
Was a water analysis done?	formed on this well during	ng the construction dates r	reported above. A	Il work r	erforme
Did any strata contain water not suitable for intended use? X Too little	is true to the hear of an	plance with Oregon well knowledge and belief.	construction sta	ndards. T	his repo
Salty Muddy Odor Colored Other	14	did belief.	WWC I	Number_	123
Depth of strata:	arigned 1		Date _ <b>_</b>	2-9-	92

WELL I.D. LABEL# L START CARD #	
START CARD#	

1	112742		
ľ	1042396	1042369	
I		T	

Ascento DESC 61	639 De	F > C
And DEO STATE OF OREGON	WELL I.D. LABEL# L 112	2742
WATER SUPPLY WELL REPORT	START CARD# 104	12396
(as required by ORS 537.765 & OAR 690-205-0210)	ORIGINAL LOG#	
(1) LAND OWNER Owner Well [1]. China Hat #3		
First Name Last Name	(9) LOCATION OF WELL (legal descri	intion)
Company Avion Water Company		Range 1
Address 60813 Parrell Road	20 )	Tax Lo
City Bend State OR Zip 97702		
(2) TYPE OF WORK   X   New Well   Deepening   Conversion	1 ax Map Number	Lot
	Lat o o o o o o o o o o o o o o o o o o o	
Alteration (complete 2a & 10) Abundanment (complete 5a)  (2a) PRE-ALTERATION		
Dia + From To Gauge Stl Plstc Wld Thrd	X Street address of well Nearest ad	ddress
Casing:	60395 China Hat Road Bend, OR 97702	
Seal:	(10) STATIC WATER LEVEL	
(3) DRILL METHOD  X Rotary Air Rotary Mud Cable Auger Auger	Date SV	WL(psi)
Rotary Air Rotary Midd Cable Auger Called Midd	Existing Well / Pre-Alteration	
Reverse Rotary Other	Completed Well 5/24/2019	
(4) PROPOSED USE Domestic Irrigation X Community	Flowing Artesian? Dr	v Hole?
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water wa	is first fo
Thermal Injection Other	SWL Date From To Est Flow	
		T
	1.500	┼
Depth of Completed Well 640 ft.  BORE HOLE SEAL sacks/	5/4/2019 600 640 1,500+	+
BORE HOLE SEAL sacks/ Dia From To Material From To Amt lbs	RECEIVED	+
24-inch 0 20 Bentonite 0 20 36 Sacks	NEOLIVE -	+
Calculated 28 Sacks	FFR <b>0 2</b> 2024	
19-inch 20 640 Cement 0 510 50 Yards	(11) WELL LOC	
	and the state of t	
How was seal placed: Method A B X C D E	Material OWRD	From
Other	Topsoil and broken rock	13
Backfill placed from 510 ft. to 518 ft. Material Gravel/Sand/Bentonite	Weathered broken basalt Reddish vesicular basalt	65
Filter pack from ft. to ft. Material Size	Dark Gray vesicular basalt	96
Explosives used: Yes Type Amount	Basalt soft fractured	110
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	Basalt Black med-hard	130
Proposed Amount Pounds Actual Amount Pounds	Reddish broken basalt vesicular	148
	Gray/Black basalt medium	195
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plste Wld Thrd	Reddish soft basalt loss some circulation	265
(X) 14-inch + +2 640 .375 (X) (X)	Red-Gray broken basalt vesicular	275
	Gray basalt broken ves	310
B B B B B B B B B B B B B B B B B B B	Basalt soft with silt Basalt medium	396
	Reddish -Gray basalt layered	425
	Gray basalt	460
Shoe Inside X Outside Other Location of shoe(s) 640	Reddish basalt soft	476
Temp casing X Yes Dia 20-inch From 0 To 20	Gray/Black basalt med hard	490
	Reddish broken vesicular	520
(7) PERFORATIONS/SCREENS Perforations Method Factory Mill Slot	Black/Red broken vesicular	545
Screens Type Material	Date Started 4/12/2019 Completed	d_5/24
Perf/S Casing/Screen Scrn/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification	1
X   14-inch   535   640   1/8"   3"   5,880	I certify that the work I performed on the construct	
	abandonment of this well is in compliance with	
	construction standards. Materials used and informat	tion repo
	the best of my knowledge and belief.	
	License Number 1811 Date 6	5/18/201
(8) WELL TESTS: Minimum testing time is 1 hour	SO was total	P.

O Air

°F Lab analysis Yes By.

Drill stem/Pump depth 540

Yes (describe below) TDS amount
Description An

O Bailer

Drawdown 0.4 feet

N Pump

Temperature

Yield gal/min 800 GPM

Water quality concerns?

From

52

() Local		122	8	10 F	
County Deschi	ites Twp	18 S	N/S	Range 12 E	E/W WN
Sec 29	NE 1/4	of the NE	1/4	Tax Lot 1	81229A000900
Tax Map Number	er			Lot	
Tax Map Number Lat Long X Str	,	" or 43.	99179		DMS or DD
Long	,	" or -12	21.30719		DMS or DD
X Str	cet address o	fwell	Nearcs	t address	
				t address	
60395 China I	iat Road Ben	ia, OR 9770.	2		
(10) STATIO	WATER	LEVEL			
(10) 517(11)				SWL(psi) +	SWL(ft)
Existing W	ell / Pre-Alter	ration			
Completed	Well		/2019		511.75
		ng Artesian?		Dry Hole?	
				_	520
WATER BEARI		De		was first found	
SWL Date	From	То	Est Flo	w SWL(psi)	+ SWL(ft)
4/24/2019	520	570	1,000	+	512
5/4/2019	600	640	1,500		512
37 172015	+				
	+	RECE	IVFD		<del>  </del>
	-	nLUL	-1 a rem eas		
		A	G 202/		
		FEB 0	2 2029	•	
(11) WELL	LOG	Ground El	evation	3974	
	Material			From	То
Topsoil and br	oken rock			0	13
Weathered br	oken basalt			13	65
Reddish vesion	ular basalt			65	96
Dark Gray ve	sicular basalt	t		96	110
Basalt soft fra	ctured			110	130
Basalt Black				130	148
Reddish brok				148	195
Gray/Black b	asalt medium	1		195	265
Reddish soft	basalt loss so	me circulati	on	265	275
Red-Gray bro	ken basalt ve	sicular		275	310
Gray basalt br	oken ves			310	370
Basalt soft wit				370	396
Basalt mediun				396	425
Reddish -Gray	basalt layer	ed		425	460
Gray basalt				460	476
Reddish basal		476	490		
Gray/Black ba		490	520		
Reddish broke	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUM			520	545
Black/Red bro	oken vesicula	г		545	570
Date Started	4/12/2019		Comple	ted 5/24/20	19
(unbonded) W	oter Well Co				
,					sing alteration -
					ning, alteration, o
					vater supply well above are true to
the best of my			and mileti	ion reported	. asone are true to
Jest or my	ui				

License Number 1811 Date 6/18/2019

#### (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 1523	Date 6/18/2019
Signed 27.4	14402 -
Contact Info (optional)	

Units

Amount

O Flowing Artesian

Duration (hr) 3 HR

From

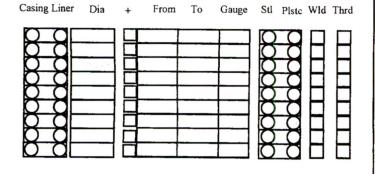
SWL Date

contin	uation	page									
(2a) PF	RE-AL	TERA	ΓΙΟΝ						-		
Dia	+	From	To	G	auge	Stl	Plstc	Wld	Thrd		
				I		O					
-	┩┠╋╴			+	_	Q	Q	Н			
L						Q		Ш	Ш		
M	aterial		Fron	1	To	0 A	Amt s	acks/l	bs		
			<b> </b>		-				-		
			-	_				_	ᅥ		
(5) BO	RE HO	LE CO	ONST	RĮ	JCTI	ION					
В	ORE HO	OLE					S	EAL			. ,
Dia	From	То		M	aterial			rom	То	Amt	sacks/ lbs
							N I	C	alculated		

Calculated Calculated Calculated

	ER PAC		0:	
From	To	Material	Size	
			1	
			- 1 A 1	

### (6) CASING/LINER



### (7) PERFORATIONS/SCREENS

Casing/ Liner	From	То	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
						$\vdash$

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
	-	<del></del>	

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

**DESC 62703** 

		1 450 1 01 2
WELL I.D. LABEL# I	142104	
START CARD #	1050306	1
ORIGINAL LOG #		

-	In	17	03	1
O	17	ΙZ	02	

(1) LAND OWNER Owner Well I.D.		
First Name Last Name	(9) LOCATION OF WELL (legal description)	
Company AVION WATER	County DESCHUTES Twp 17.00 S N/S Range 12.00 E	E/W WM
Address 60813 PARRELL RD	Sec 14 NE 1/4 of the SE 1/4 Tax Lot 806	
City BEND State OR Zip 97702	Tax Map Number Lot	
2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number         Lot           Lat         " " or "         D           Long         " or "         D	MS or DD
Alteration (complete 2a & 10)   Abandonment(complete 5a)	Long "or E	MS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address	
Casing:	63223 HAMEHOOK RD	
Material From To Amt sacks/lbs		
Seal:		
(3) DRILL METHOD	(10) STATIC WATER LEVEL	
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SV	WL(ft)
Reverse Rotary Other	Existing Well / Pre-Alteration Completed Well 5/20/2021	(02
(A PROPOSED VOE	Completed Well 5/20/2021 Dry Hole?	692
(4) PROPOSED USE Domestic Irrigation Community		
Industrial/ Commericial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 741.0	00
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + S	SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	5/20/2021 741 838 400	692
Depth of Completed Well 838.00 ft.	711 030 100	
BORE HOLE SEAL sacks/		
Dia From To Material From To Amt lbs		
22         0         38         Bentonite Chips         0         195         263         S		
19 38 838 Calculated 259.72		
Cement	(11) WELL LOG Ground Elevation	
	Glouid Lievation	т_
How was seal placed: Method A B XC D E		To
X   Other   CEMENT		5 20
	GRAY LAVA   FEB 0 2 2024   5   20	23
Filter pack from 660 ft. to 746 ft. Material PEA GRAVSize pea gravel	GRAY BASALT 23	31
Explosives used: X Yes Type SHOT PERF Amount	BROWN CONGLOMERATE OWRD 31	35
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	MILD BASALT 35	75
Proposed Amount Actual Amount	BASALT W/SOFT SPOTS 75	118
(6) CASING/LINER	SANDSTONE CONGLOMERATE 118	132
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	LOST CIRCULATION 132	156
● 14 X 2 838 .375 ● X	GRAY BASALT W/SOFT SPOTS 156	170
	CONGLOMERATE   170   HARD GRAY BASALT   176	176
	BROWN SANDSTONE 188	205
	CONGLOMERATE POUR CIRCULATION 205	240
	CINDERS POUR CIRCULATION 240	253
Shoe Inside Outside Other Location of shoe(s)	MILD 253	257
Temp casing Yes Dia 20 From + 0 To 38	SOFT O RETURNS 257	280
7) PERFORATIONS/SCREENS	BROWN LAVA CONGLOMERATE 280	301
Perforations Method shot	GRAY BASALT 301	320
Screens Type Material	Date Started 12/23/2020 Completed 5/20/2021	
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/		
Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification	ltanation on
Perf         Casing         14         728         836         .3         0.3         400	I certify that the work I performed on the construction, deepening, a abandonment of this well is in compliance with Oregon water s	
	construction standards. Materials used and information reported above	
	the best of my knowledge and belief.	o uno trato to
1843/200	License Number 1852 Date 6/9/2021	
(9) WELL TESTS. Minimum testing time is 1 hours	1832 0/3/2021	
(8) WELL TESTS: Minimum testing time is 1 hour	Signed JEB ABBAS (E-filed)	
Pump Bailer • Air Flowing Artesian		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification	
400 837 1	I accept responsibility for the construction, deepening, alteration, or a	
	work performed on this well during the construction dates reported abore performed during this time is in compliance with Oregon water	
	construction standards. This report is true to the best of my knowledge	
Temperature 53 °F Lab analysis Yes By		and bellet.
Water quality concerns? Yes (describe below) TDS amount 137 ppm Prom To Description Amount Units	License Number 1720 Date 6/9/2021	
Tron 10 Description Amount Onts	Signed JACK ABBAS (E-filed)	
	Contact Info (optional) JACK ABBAS  14402	(100)
	Contact into (optional) 37CK ADDAS	

WELL I.D. LABEL# L	142104	
START CARD #	1050306	
ORIGINAL LOG#	i de a	

							0/3	72021	ORIGINAL LOG#		
2a) PRE-ALT								Water Quality C	Concerns		
Dia +	From	To C	Gauge Stl	Plstc W	ld Thrd			From To	Description	Amount	Units
		*							T		
										1.0	
Material		From	То	Amt sack	s/lbs						
	\									A	
								(10) STATIC W	ATEDIEVEL		
BORE HO	LE CO	NSTRI	UCTION	1				(10) STATIC W			
BORE HO				SEA	A I			SWL Date Fr	rom To Est Flow	SWL(psi) +	SWL(ft)
Dia From	То	M	laterial	Fror		Amt	sacks/				
		IV	iateriai	1101	11 10	Aint	lbs				
					Calculate	d					
	+				Calculate	d	$\perp$			<del></del>	
	+	$\dashv$			Tarculate	u	+			++	1
	+				Calculate	ed	+			<del></del>	
			- 1	T							
					Calculate	ed					
FILTE	R PACK										
From		Material	Size	:				(11) WELL LO	G		
								M	aterial	From	То
								POUR CIRCULAT	ION	320	355
									AVA SOFT CAVING	355	362
		Contract of the Contract of th		7 3 - 7				BROWN BROKEN		362	374
CASING/L	INER			17				BROWN SANDST	ONE	374	398
Casing Liner	Die		rom To	Causa	Stl Pls	. W/Id	Thud	MILD BROWN BA		398	415
Casing Line	Dia	+ F	rom To	Gauge	Su Pis	te wid	Thru	BROKEN BROWN		415	421
						$\Box$		MILD BROWN BA		421	472
88		H	UH WITT		$\mid \times \rightarrow$	$\triangleleft$ $\vdash$	H	HARD GRAY BAS SOFT	ALI	472	496 528
88					$\mid \rangle \rangle$	$\triangleleft$ $\square$	H	HARD GRAY BAS	SALT	528	536
					$\sim$		Н	CONGLOMERATI		536	547
00					$\delta$		П	MILD BASALT W		547	551
00					0		П	CONGLOMERATI	3	551	610
					0			HARD BASALT		610	614
					$\bigcirc$			BROKEN	AIT	614	645
$\circ$	9				$\bigcirc$			HARD GRAY BAS MILD W/SOFT SP		645	663 719
								W/B GRAY FRAC	TURED BASALT	719	741
DED TOT	mre:	210.65	ENG						SCULAR BROWN BASALT	741	792
) PERFORA	TION	S/SCRE	ENS					W/B HARD BASA	LT	792	794
Perf/ Casing/ S	Screen			Scrn/slot	Slot	# of	Tele/		AY BROKEN BASALT	794	831
Screen Liner	Dia	From	То	width	length	slots	pipe size	W/B HARD GRAY		831	838
								W/B HARD GRAY	BASALT	831	838
									***************************************	-	
									RECEIVED	+	
									1 thus Short V has a	+	1
							-		FEB <b>02</b> 2024		
_									1 LD V 2 2021		
								1	OMOD	,	
									OWRD		
								Comments/Ren	narks		
											4.
8) WELL TI	ESTS:	Minimu	m testin	g time is	1 hour						
Yield gal/min	Drau	down	Drill star	n/Pump de	nth Di	ıration (l	hr)				
ricia gai/iiiii	Diam	GOWII	Dilli stel	in a dirip de	pai Di	a acion (I					
	-										
								4			



January 25, 2024

Kelly Starnes Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, OR 97301

RE: Temporary Transfer Application for Certificate 93055, in the name of Broken Top Community Club

### Dear Kelly:

The Broken Top Club (Applicant) is the holder of water right Certificate 93055, which authorizes the use of up to 2.7 cfs for quasi-municipal use. The Applicant is proposing to temporarily change the place of use to also include the greater Avion Water Company (Avion) service area. In order to convey water to the new temporary place of use the Applicant is also proposing to temporarily add three additional points of appropriation.

Enclosed is an Application for Temporary Water Right Transfer and the accompanying processing fee of \$1,370.

Please contact me if you have any questions or concerns. My phone number is 971-200-8545.

Sincerely,

Trevor Grandy, RG, CWRE Project Hydrogeologist

cc: Steve Terry, Broken Top Community Association Adam Jackson, Avion Water Company

Enclosures: Application for a Temporary Water Right Transfer Check for application fee in the amount of \$1,370

RECEIVED

FEB 02 2024

OWRE

14402

#### STATE OF OREGON

#### COUNTY OF DESCHUTES

#### CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

GOLD RING HOLDINGS LLC 5837 JEAN RD LAKE OSWEGO OR 97035

confirms the right to the use of water perfected under the terms of Permit G-11091. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the point of diversion from the source. The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-12033

SOURCE OF WATER: ONE WELL IN THE DESCHUTES RIVER BASIN

PURPOSE OR USE: QUASI-MUNICIPAL USE

MAXIMUM RATE: 2.7 CUBIC FEET PER SECOND FEB 0 2 2024

DATE OF PRIORITY: FEBRUARY 22, 1990

**OWRD** 

RECEIVED

The well is located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
18 S	11 E	WM	1	NW SE	2650 FEET SOUTH AND 1400 FEET WEST FROM NE CORNER, SECTION 1

A description of the place of use is as follows:

The description of the place of use is as folio							
	Twp	Rng	Mer	Sec	Q-Q		
	18 S	11 E	WM	1	NE NE		
	18 S	11 E	WM	1	NW NE		
	18 S	11 E	WM	1	SW NE		
	18 S	11 E	WM	1	SE NE		
	18 S	11 E	WM	1	NE NW		
	18 S	11 E	WM	1	NW NW		
	18 S	11 E	WM	1	SW NW		
	18 S	11 E	WM	1	SE NW		
	18 S	11 E	WM	1	NE SW		
	18 S	11 E	WM	1	NW SW		

Twp	Rng	Mer	Sec	Q-Q
18 S	11 E	WM	1	SW SW
18 S	11 E	WM	1	SE SW
18 S	11 E	WM	1	NE SE
18 S	11 E	WM	1	NW SE
18 S	11 E	WM	1	SW SE
18 S	11 E	WM	1	SE SE
18 S	11 E	WM	2	SE NE
18 S	11 E	WM	12	NW NE
18 S	11 E	WM	12	NE NW
18 S	12 E	WM	6	NW SW

### 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 183.484 and ORS 536.075. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 183.484, ORS 536.075 and OAR 137-004-0080, 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. In addition, under ORS 537.260 any person with an application, permit or water right certificate subsequent in priority may jointly or severally contest the issuance of the certificate within three months after issuance of the certificate.

Application G-12033.ra.klk

Page 1 of 2

Certificate 93055

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 the water level elevation in the well at all times. When required by the department, the water user shall install and maintain a weir, meter, or other suitable measuring device, and shall keep a complete record of the amount of ground water withdrawn.

The quantity of water diverted at the new point of appropriation (well), shall not exceed the quantity of water lawfully

available from the original point of appropriation described as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances		
18 S	11 E	WM	1	SE NE	1450 FEET SOUTH AND 1150 FEET WEST FROM NE CORNER, SECTION 1		

The water user shall maintain a headgate, an in-line flow meter, weir, or other suitable measuring device for measuring and recording the quantity of water diverted.

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

The Director may require water level or pump test results every ten years.

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

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

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

The use granted herein may be made only at times when sufficient water is available to satisfy all prior 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; however, water may be applied to lands which are not specifically described above, provided the holder of this right complies with ORS 540.510(3).

Issued MAY **0 9** 2017

Water Right Services Division Administrator, for

Thomas M. Byler, Director

Oregon Water Resources Department

RECEIVED

FEB 02 2024

OWRD.