Application for Permanent Water Right Transfer

Received

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.

		100001000
Check all it	ems included with this application. (N/A = Not Applicable)	JUN 18 2024
\boxtimes	Part 1 – Completed Minimum Requirements Checklist.	3014 10 2021
\boxtimes	Part 2 – Completed Transfer Application Map Checklist.	OWRD
	Part 3 – Application Fee, payable by check to the Oregon Water Resour completed Fee Worksheet, page 3. Try the new online fee calculator at http://apps.wrd.state.or.us/apps/misc/wrd fee calculator.	
\boxtimes	Part 4 – Completed Applicant Information and Signature.	
	Part 5 – Information about Water Rights to be Transferred: How many be transferred? <u>1</u> List them here: <u>C-48022</u> Please include a separate Part 5 for each water right. (See instruction NOTE: A separate transfer application is required for each water right criteria in OAR 690-380-3220 are met.	ons on page 6)
	Attachments:	
\boxtimes	Completed Transfer Application Map.	
\boxtimes	Completed Evidence of Use Affidavit and supporting documentation.	
⊠	 Affidavit(s) of Consent from Landowner(s) (if the applicant does not ow right is on.) 	n the land the water
⊠ □ N/	Supplemental Form D – For water rights served by or issued in the nam district. Complete when the transfer applicant is not the irrigation distr	_
⊠ □ N/	Oregon Water Resources Department's Land Use Information Form wit signature from each local land use authority in which water is to be div and/or used. Not required if water is to be diverted, conveyed, and/or lands or if <u>all</u> of the following apply: a) a change in place of use only, b) changes, c) the use of water is for irrigation only, and d) the use is local irrigation district or an exclusive farm use zone.	erted, conveyed, used only on federal no structural
□ N/	A Water Well Report/Well Log for changes in point(s) of appropriation (w point(s) of appropriation.	vell(s)) or additional
□ N/		m the surface water
	(For Staff Use Only)	
	WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete Land Use Form not enclosed or incomplete Evidence of Use Form not enclose Additional signature(s) required Part is incomplete Other/Explanation	
	Staff: 503 Date:	

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Part 2 of 5 – Transfer Application Map

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

	sure that the transfer application map you submit includes all the required items and he 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.
	If more than three 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, 11×17 inches, or up to 30×30 inches. For 30×30 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.
	Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes	Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes	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 $-42^{\circ}32'15.5''$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).
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	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:	2	\$1,090				
3	Number of water rights included in transfer 1 (3a) Subtract 1 from the number in 3a above: 0 (3b) If only one water right this will be 0 Multiply line 3b by \$610 and enter >> >> >> >> >> >> >> >> >> >> >> >> >>	3	\$0				
	Do you propose to add or change a well, or change from a surface water POD to a well? No: enter 0 Yes: enter \$480 for the 1 st well to be added or changed \$480 (4a) Do you propose to add or change additional wells?						
4	☐ No: enter 0	4	\$1,300				
	Do you propose to change the place of use or character of use? No: enter 0 on line 5 Yes: enter the cfs for the portions of the rights to be transferred (see below*):1.98 (5a) Subtract 1.0 from the number in 5a above: 0.98 (5b) If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » » » »						
5	5c by \$410, then enter on line 5	5	\$410				
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$ 4,160				
	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 fish and wildlife habitat?						
7	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »	7	0				
8	If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » » » »	8					

*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:

- 1. For irrigation calculate cfs for each water right involved as follows:
 - a. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs ÷100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac= 0.56 cfs).
 - b. 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)
- 2. 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
	Number of wells included in substitution(2a)		
	Subtract 1 from the number in 2a above:(2b) If only one well this will be 0		
2	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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OWRD

Part 4 of 5 - Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.					
Robert Unruh / R&C AG	LLC	541-891-8360							
ADDRESS			FAX NO.						
30083 Pickett Rd	,								
CITY	STATE	ZIP	E-MAIL						
Malin	OR	97632	ru281@aol.cor	ru281@aol.com					
BY PROVIDING AN E-MAI	DENCE FROM THE DEPARTMENT								
ELECTRONICALLY. COPIES									

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.						
John A. Short / Water	Right Services, LLC	541-389-2837							
ADDRESS				FAX NO.					
P.O. Box 1830									
CITY	STATE	ZIP	E-MAIL						
Bend	OR	97709	johnshort@usa.	.com					
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT									
ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.									

Explain in your own words what you propose to accomplish with this transfer application, and why:

Move a portion of C-48022 to a new place of use and 3 different points of appropriation.

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

Check One Box

	Circuit Olic Dox
\boxtimes	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 are
	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: Herald and News.
- 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 refund of all or part of a fee is of the Department. 	upon requ appropria	est and, as set fort te in the interests	h in ORS 5 of fairness	36.050(4)(a), to the public	if the Dire or necess	ector determines that a ary to correct an error
I (we) affirm that the information of the composition of the compositi	on contain	Nos	esthe	and accurate Unnuh Id Title if appli		6/6/2024 Date 6-6-2024
Cheu A Lunu Applicant signature	1	The state of the s	angerelle.	Nruk id Title if appli	icable)	6-6 - 2024 Date
Is the applicant the sole owner located? Tyes No*	of the land	on which the wate	er right, or	portion there	eof, propo	sed for transfer is
*If NO, include signatures of all d attach affidavits of consent (and water right(s) were conveyed.						
Check the following boxes that o	apply:					
The applicant is respon sent to the applicant.	sible for co	empletion of chang	e(s). Notic	es and corres	pondence	should continue to be
The receiving landowner issued. Copies of notice			_	-		ter the final order is
Both the receiving land and correspondence sh				-	on of char	nge(s). Copies of notices
At this time, are the lands in thi	s transfer a	application in the p	rocess of l	being sold?	Yes 🛛	No
If YES, and you know who to below. If you do not know wat a later date.	he new lan	downer will be, ple	ase comp	lete the recei	ving lando	wner information table
If a property sells, the certiful unless a sale agreement or https://www.oregon.gov/o	other docu	iment states other	wise. For r	more informat	tion see:	ner,
RECEIVING LANDOWNER NAME n/a			PHONE NO	0.	ADDITION	AL CONTACT NO.
ADDRESS			1		FAX NO.	
CITY	STATE	ZIP	E-MAIL			
Describe any special ownership						
The confirming Certificate shall	be issued i	n the name of:] Applican	t 🗌 Receivii	ng Landov	vner
L						

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Check here if any of the water rights p	proposed for transfer ar	e or will be located within or served							
an irrigation or other water district. (Tip :									
IRRIGATION DISTRICT NAME	ADDRESS								
Shasta View Irrigation District	PO Box 46								
CITY	STATE	ZIP							
MALIN	OR	97632							
IRRIGATION DISTRICT NAME	ADDRESS								
Klamath Basin Improvement District	6640 KID Ln								
CITY	STATE	ZIP							
Klamath Falls	OR	97603							
ENTITY NAME	ADDRESS								
CITY	STATE	ZIP							
To meet State Land Use Consistency Requ corporation, or tribal governments within									
ENTITY NAME	ADDRESS								
Klamath County Planning Department	305 Main Street Klar	nath Falls							
CITY	STATE	ZIP							
Klamath Falls	OR	97601							
	-								
ENTITY NAME	ADDRESS	,							
CITY	STATE	ZIP							

by

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.

				CEI	RTIFI	CAT	E # 4	8022			
Description of Water Delivery System											
System capacity: 4.34 cubic feet per second (cfs) OR											
		gallons per	mir	ute	(gpn	n)					
five ye and ap	ars. Include inforply the water a	ormation on the the authorized and Properties	ne pu ed pl	amp lace	of us	nals se. <u>I</u> s) of	, pipe Pump f Dive	lines, ed fro	and sp m wel (POD)	orinklers I through or Appro	some time within the used to divert, convert pipelines to hand limpristion (POA)
POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	e is not specification of the second of the		on th	re ce		Sec		it a na	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
/ELL "OFF"	Authorized Proposed	KLAM 14789	40	s	11	E	36	sw	sw	100	1000' N, 240' E of SW Cor Sec 36
WELL #1 "ON"	☐ Authorized ☐ Proposed	KLAM 14820/ 53641/61545	40	s	12	E	28	sw	sw	6800	200' N, 1040' E of SW Cor Sec 28
WELL #3 "ON"	☐ Authorized ☐ Proposed	KLAM 14838/57397 /61549	40	s	12	E	33	NE	NW	400	10' S, 580' E of NW Cor Sec 33
WELL #4 "ON"	Authorized Proposed	KLAM 53792	41	s	12	Ε	6	NE	NW	300	1240' S, 3400' W of NE Cor Sec 6
Check	all type(s) of ch	nange(s) propo	sed	bel	ow (chai	nge "(CODES	" are ¡	provided	I in parentheses):
\boxtimes	Place of Use	(POU)				[Supple	menta	al Use to	Primary Use (S to P)
	Character of	Use (USE)					\boxtimes 1	Point c	of Appi	ropriatio	n/Well (POA)
	Point of Dive	ersion (POD)				[Additio	onal Po	oint of A	opropriation (APOA)
	Additional Po	oint of Diversio	on (A	APOI	D)	[Substit	ution	(SUB)	
	Surface Wate POA (SW/GV	er POD to Grou V)	und '	Wat	er	[Goverr	nment	Action F	POD (GOV)
Will all	of the propose	ed changes aff	ect	the	entir	e w	ater r	ight?			
Yes		nly the Propose ed above to de					,			able 2 or	n the next page. Use t

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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 # 48022

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.

R	Rng					portic	n of th			POSED CHAI		Proposed Changes (see	PROPOSED (the "to" or The listing as it would appear AFTE are made.														
		S	ec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES" from previous page)			Twp Rng		Twp Rng		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	1														
9	9 6	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901		
1	1 8	E	35	sw	NE	6001		5.6	IR	WELL "OFF"	1971	POU, POA	40	s	12	E	29	SE	SE	1200		36.7	IS	WELL 1, 3, 4 "ON"	1971		
"	, ,	4	"	SE	NE	"		23.4	IR	и	"	и	"	"	"	"	32	NE	SE	900		22.0	IS	u	u		
"		"	"	NE	NW	"		17.4	IR	и	"	"	"	"	"	"	32	SE	SE	900		0.3	IS	u	u		
"		"	"	SE	NW	"		34.1	IR	и	"	u	"	"	"	"	33	NW	NE	300		27.7	IS	u	u		
"	, ,	4	"	NE	sw	"		34.6	IR	и	"	-u	"	"	"	"	33	NE	sw	900		33.7	IS	"	u		
"	, ,		"	NE	SE	"		29.5	IR	u	u	u	"	"	"	"	33	NW	sw	901		23.3 IS 3.5 IR	IS & IR	и	u		
"		4	"	NW	SE	"		13.9	IR	и	"	"	"	u	"	"	33	sw	sw	901		0.2	IS	u	u		
												"	"	"	"	"	33	SE	sw	900/ 901		11.1	IS	u	u		
_																											
								450.5																			
	1	11	11 E " " " " " " " "	11 E 35 " " " " " " " " " " " "	11 E 35 SW " " SE " " " NE " " NE " " NE	11 E 35 SW NE " " SE NE " " " NE NW " " SE NW " " NE SW " " NE SE " " NE SE	11 E 35 SW NE 6001 " " " SE NE " " " NE NW " " " SE NW " " " NE SW " " " NE SE "	11 E 35 SW NE 6001 " " " SE NE " " " NE NW " " " SE NW " " " NE SW "	11 E 35 SW NE 6001 5.6 " " " SE NE " 23.4 " " NE NW " 17.4 " " SE NW " 34.1 " " NE SW " 34.6 " " NE SE " 29.5 " " NW SE " 13.9	11 E 35 SW NE 6001 5.6 IR " " " SE NE " 23.4 IR " " NE NW " 17.4 IR " " SE NW " 34.1 IR " " NE SW " 34.6 IR " " NE SE " 29.5 IR " " " NW SE " 13.9 IR	11 E 35 SW NE 6001	11 E 35 SW NE 6001	9 E 15 NE NW 100	9 E 15 NE NW 100	9 E 15 NE NW 100 15.0 Irrigation POD#1 POD 1901 POU/POD 2 S 11 E 35 SW NE 6001 5.6 IR WELL "OFF" 1971 POU, POA 40 S " " " SE NE " 23.4 IR " " " " " " " " " " " " " " " " " "	9 E 15 NE NW 100	9 E 15 NE NW 100	9 E 15 NE NW 100	Second S								

Additional remarks:_____.

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Certificate # 48022

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? \boxtimes Yes \square No									
	If YES, list the certificate, water use permit, or ground water registration numbers: KA 1000 is layered with the proposed "ON" lands designated for supplemental irrigation.									
a pri to a	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 Su	bstitution (ground water supplemental irrigation will be substituted for irrigation)	_								
Grou	nd water supplemental Permit or Certificate #;	Received								
	ce water primary Certificate #	JUN 18 2024								
For a c	hange from Supplemental Irrigation Use to Primary Irrigation Use	OWRD								
lden	tify the primary certificate to be cancelled. Certificate #	. 311112								
For a c	hange in point(s) of appropriation (well(s)) or additional point(s) of a	opropriation:								
	Well log(s) are attached for each authorized and proposed well(s) that associated with the corresponding well(s) in Table 1 above and on the 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 <i>proposed wells not yet constructed or built</i> , 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

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Application for Water Right Transfer



 $O\ R\ E\ G\ O\ N \quad \mbox{Oregon Water Resources Department}$ 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

Consent by Deeded Landowner

State of Oregon)			
County of KLAMATH)ss)			
I <u>D. Gavin Rajnus (member Gavin Rajnus,</u> mailing address <u>20570 Paygr Rd. Malin, O</u>				
telephone number $\frac{541-281-1091}{}$, duly sw	vorn depose and say that we			
consent to the proposed change(s) to Wa	iter Right Certificate Number <u>48022</u>			
described in a Water Right Transfer Application (T- <u>tbd</u>), submitted by <u>Robert Unruh / R&C AG, LLC</u> (transfer number, if known)				
on the property in tax lot number(s) 6001	<u>L</u> ,			
Section <u>35</u> Township <u>40</u> South	Range <u>11</u> East, W.M.,	Received		
located at 20570 Paygr Rd. Malin, OR 976 (site address) Signature of Affiant	532 6/14/24 Date	JUN 18 2024 OWRD		
Subscribed and Sworn to b	perfore me this $\underline{j}\mathcal{H}^{th}$ day of $\underline{\mathcal{J}_{UNE}}$, 20_24		

OFFICIAL STAMP ISAAC DEWAYNE NUNN NOTARY PUBLIC - OREGON

COMMISSION NO. 1009901

MY COMMISSION EXPIRES MARCH 14, 2025

My commission expires March 14, 2025.

Supplemental Form D

Water Right Transfers Within the Boundaries of or Served by an Irrigation District or other Water Supplier (Association, Ditch Co., etc.)

O R E G O N

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

[For transfers submitted under OAR Chapter 690 Division 380]

The Department requires non-district applicants to communicate with districts/water suppliers during the planning and preparation of transfer applications involving water rights having a point of diversion or appropriation (POD/POA) or place of use (POU) served by or located within the boundaries of an irrigation district, or other type of water supplier to which assessments are paid. In some cases consent will be required from the district or water supplier.

This form must be included with any transfer application that involves rights served by or located within the boundaries of a district or other type of water supplier.

1. APPLICANT INFORMATION

NAME				PHONE (HM)		
ROBERT UNRUH / R&C AG, LLC						
PHONE (WK)	CELL			FAX		
	541	-891-8360				
ADDRESS						
30083 Pickett Rd						
CITY	STATE	ZIP	E-MAIL**			
Malin	OR	97632	ru281@aol.com			

2. DISTRICT or WATER SUPPLIER INFORMATION

DISTRICT/WATER SUPPLIER NAME	PHONE (HM)				
SHASTA VIEW IRRIGATION DISTRICT					
PHONE (WK)	CELL			FAX	
ADDRESS					
PO Box 46					
CITY	STATE	ZIP	E-MAIL**		
MALIN	OR	97632			

3. WATER RIGHTS ISSUED IN THE NAME OF, or LOCATED WITHIN, or SERVED BY AN IRRIGATION DISTRICT, OTHER DISTRICT, OR WATER SUPPLIER

a. List the water right(s) involved in this transfer:

	Application / Decree	Permit / Previous Transfer	Certificate	Is the water right in the name of a district, water supplier, or BOR*?
1.		-	48022	YES 🗌
2.		-		YES
3.		-		YES

Attach additional pages for additional water rights if necessary.

*Bureau of Reclamation

Supplemental Form D for Division 380 Transfers Within a District/Water Supplier

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Jun 18 2024



^{**} By providing an e-mail address, the applicant and/or the district/water supplier consents to receive all correspondence from the Department electronically. Copies of final order documents will also be mailed.

4. APPLICANT'S SIGNATURE (1) I certify that I have notified the district/water supplier about the proposed water right transfer application by [check one]: email, phone, postal mail, in person, or other (please specify) (2) I certify that to the best of my knowledge the information contained in this Supplemental Form D is true and accurate. Robert Unruh Date	b.	b. Determine a district's/water supplier's connection to your points of diversion (POD) or appropriation (POA) and places of use (POU). [You may need to consult with your district/water supplier.]							
district/water supplier or rely on 8OR water. YES NO All or a portion of the current POU involved in this proposed transfer receives water for either primary or supplemental irrigation from the district/water supplier, i.e., the POU is currently layered with a district of 80R water supplied water right(s). PROPOSED ASSOCIATIONS Please answer the following "yes" or "no" questions: YES NO One or more of the proposed POU(s) / POA(s) involved in the transfer are currently served or will be served by a district/water supplier if the transfer is approved, or rely on BOR water. YES NO All or a portion of the proposed POU involved in this proposed transfer currently receives or will receive either primary or supplemental irrigation from the district/water supplier, i.e., the POU will be layered with a district/water supplier or BOR water supplied water right(s). COMMENTS OR ADDITIONAL INFORMATION: THIS TRANSFER PROPOSES TO LAYER A PORTION GROUNDWATER CERTIFICATE 48022 WITH THE "ON" LANDS, AN AMJORITY OF WHICH IS CURRENTLY SUPPLIED SURFACE WATER THROUGH KA 1000, THE PROPOSED C-48022 "ON" IRRIGATION WILL BE SUPPLEMENTAL TO KA-1000 WHERE APPLICABLE. THE "ON" LANDS ANE PROPOSED TO AS SEXTED BY TWO PRINTELY COMPENDED WATER THROUGH THE SVID DELIVERY SYSTEM TO THE "ON" LANDS. 4. APPLICANT'S SIGNATURE (1) I Certify that I have notified the district/water supplier about the proposed water right transfer application by [check one]: email, phone, postal mail, in person, or other (please specify) (2) I Certify that to the best of my knowledge the information contained in this Supplemental Form D is true and accurate. Robert Unruh Name (print)	Cl	JRRENT	ASSOCIA	TIONS Please a	nswer the follow	ving "yes" or "no'	" quest	ions:	
for either primary or supplemental irrigation from the district/water supplier; i.e., the POU is currently layered with a district or BOR water supplied water right(s). PROPOSED ASSOCIATIONS Please answer the following "yes" or "no" questions: YES \(\triangle \tr	YE								
YES NO One or more of the proposed POD(s) / POA(s) involved in the transfer are currently served or will be served by a district/water supplier if the transfer is approved, or rely on BOR water. YES NO All or a portion of the proposed POU involved in this proposed transfer currently receives or will receive either primary or supplemental irrigation from the district/water supplier, i.e., the POU will be layered with a district/water supplier or BOR water supplied water right(s). COMMENTS OR ADDITIONAL INFORMATION : THIS TRANSFER PROPOSES TO LAYER A PORTION GROUNDWATER CERTIFICATE 48022 WITH THE "ON" LANDS, A MAJORITY OF WHICH IS CURRENTLY SUPPLIED SUBFACE WATER THROUGH KA 1000, THE PROPOSED C-48022 "ON" IRRIGATION WILL BE SUPPLEMENTAL TO KA-1000 WHERE APPLICABLE. THE "ON" LANDS ARE PROPOSED TO BE SERVED BY TWO PRIVATELY OWNED WELLS AND A SVID WELL (WELL #4 KLAM 53792), WHICH WOULD DELIVER WATER THROUGH THE SVID DELIVERY SYSTEM TO THE "ON" LANDS. 4. APPLICANT'S SIGNATURE (1) I Certify that I have notified the district/water supplier about the proposed water right transfer application by (check one): □ email, □ phone, □ postal mail, ☑ in person, or □ other (please specify) (2) I certify that to the best of my knowledge the information contained in this Supplemental Form D is true and accurate. Applicant Signature	YE	S	NO 🖂	for either prima	ry or supplemen	ntal irrigation fror	m the c	listrict/wat	er supplier; i.e.,
Served or will be served by a district/water supplier if the transfer is approved, or rely on BOR water. YES NO	PF	ROPOSE	D ASSOCI	ATIONS Please	answer the follo	wing "yes" or "no	o" ques	tions:	
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application by [check one]: email, phone, postal mail, in person, or other (please specify) certify that to the best of my knowledge the information contained in this Supplemental Form D is true and accurate. Check Unruh Date	(1)	certify	that I have	e notified the dist	rict/water supp	lier about the pro	oposed	water righ	it transfer
(2) I certify that to the best of my knowledge the information contained in this Supplemental Form D is true and accurate. Cohert Unruh Cohert Coh	a	applicat	ion by [che	eck one]:					
Applicant Signature S. (WHEN REQUIRED) DISTRICT or WATER SUPPLIER CONSENT TO THE PROPOSED WATER RIGHT TRANSFER District Manager or Water Supplier consent is required if any box on this form is marked "YES." The district/water supplier certifies the following: (1) The district/water supplier has reviewed the applicant's proposed water right transfer application and maps; and (2) The district/water supplier consents to the proposed water right transfer application. Supplemental Form D for Division 380 Transfers Within a District/Water Supplier Page 2 of 3 Last Revised 11-2019									
Applicant Signature Name (print) S. (WHEN REQUIRED) DISTRICT or WATER SUPPLIER CONSENT TO THE PROPOSED WATER RIGHT TRANSFER District Manager or Water Supplier consent is required if any box on this form is marked "YES." The district/water supplier certifies the following: (1) The district/water supplier has reviewed the applicant's proposed water right transfer application and maps; and (2) The district/water supplier consents to the proposed water right transfer application. Supplemental Form D for Division 380 Transfers Within a District/Water Supplier Page 2 of 3 Last Revised 11-2019					vledge the infor	mation contained	d in thi	s Suppleme	ental Form D is
Applicant Signature Name (print) Date 5. (WHEN REQUIRED) DISTRICT or WATER SUPPLIER CONSENT TO THE PROPOSED WATER RIGHT TRANSFER District Manager or Water Supplier consent is required if any box on this form is marked "YES." The district/water supplier certifies the following: (1) The district/water supplier has reviewed the applicant's proposed water right transfer application and maps; and (2) The district/water supplier consents to the proposed water right transfer application. Supplemental Form D for Division 380 Transfers Within a District/Water Supplier Page 2 of 3 Last Revised 11-2019					0 1 1 11	1		111	/-
 5. (WHEN REQUIRED) DISTRICT or WATER SUPPLIER CONSENT TO THE PROPOSED WATER RIGHT TRANSFER District Manager or Water Supplier consent is required if any box on this form is marked "YES." The district/water supplier certifies the following: The district/water supplier has reviewed the applicant's proposed water right transfer application and maps; and The district/water supplier consents to the proposed water right transfer application. Supplemental Form D for Division 380 Transfers Within a District/Water Supplier Page 2 of 3 Last Revised 11-2019 		70	un			nruh	_	0/6/	2024
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maps; and (2) The district/water supplier consents to the proposed water right transfer application. Supplemental Form D for Division 380 Transfers Within a District/Water Supplier Page 2 of 3 Last Revised 11-2019									
Supplemental Form D for Division 380 Transfers Within a District/Water Supplier Page 2 of 3 Last Revised 11-2019									
	(2) T	he dist	rict/water	supplier consent	s to the propose	ed water right tra	nsfer a	pplication.	
Docaired	Suppler	mental Fo	orm D for Div	vision 380 Transfers	Within a District/W	ater Supplier	Page 2	of 3	Last Revised 11-2019
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YES NO 🔀	After proof of completion, the confirming water right certificate is to remain in the name of the U.S. Bureau of Reclamation or the district/water supplier.
YES NO	The district/water supplier will be responsible for submitting the claim of beneficial use prepared by a Certified Water Rights Examiner (CWRE).
At A	

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Supplemental Form D

Water Right Transfers Within the Boundaries of or Served by an Irrigation District or other Water Supplier (Association, Ditch Co., etc.)



Oregon Water Resources Department

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

www.oregon.gov/OWRD

[For transfers submitted under OAR Chapter 690 Division 380]

The Department requires non-district applicants to communicate with districts/water suppliers during the planning and preparation of transfer applications involving water rights having a point of diversion or appropriation (POD/POA) or place of use (POU) served by or located within the boundaries of an irrigation district, or other type of water supplier to which assessments are paid. In some cases consent will be required from the district or water supplier.

This form must be included with any transfer application that involves rights served by or located within the boundaries of a district or other type of water supplier.

1. APPLICANT INFORMATION

NAME				PHONE (HM)	
ROBERT UNRUH / R&C AG, LLC					
PHONE (WK)	CELL			FAX	
	541	-891-8360			
ADDRESS					
30083 Pickett Rd					
CITY	STATE	ZIP	E-MAIL**		
Malin	OR	97632	ru281@aol.com		

2. DISTRICT or WATER SUPPLIER INFORMATION

DISTRICT/WATER SUPPLIER NAME	PHONE (HM)				
KLAMATH BASIN IMPROVEMENT DISTRICT					
PHONE (WK)				FAX	
ADDRESS					
6640 KID LN					
CITY STAT		ZIP	E-MAIL**		
KLAMATH FALLS	OR	97603			

3. WATER RIGHTS ISSUED IN THE NAME OF, or LOCATED WITHIN, or SERVED BY AN IRRIGATION DISTRICT, OTHER DISTRICT, OR WATER SUPPLIER

a. List the water right(s) involved in this transfer:

	Application / Decree	Permit / Previous Transfer	Certificate	Is the water right in the name of a district, water supplier, or BOR*?
1.		-	48022	YES 🗌
2.		-		YES
3.		-		YES

Attach additional pages for additional water rights if necessary.

*Bureau of Reclamation

Supplemental Form D for Division 380 Transfers Within a District/Water Supplier

Page 1 of 3

Last Revised 11-2019

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^{**} By providing an e-mail address, the applicant and/or the district/water supplier consents to receive all correspondence from the Department electronically. Copies of final order documents will also be mailed.

			•	tion to your points to consult with you	•	
CURRE	NT ASSOCIA	TIONS Please a	nswer the foll	owing "yes" or "no	" questions:	
YES	NO 🖂	One or more of district/water so		DD(s) / POA(s) invol on BOR water.	ved in the transfe	er are served by a
YES 🗌	NO 🖂	for either prima	ry or supplem	POU involved in the ental irrigation from with a district or BO	m the district/wat	er supplier; i.e.,
PROPOS	SED ASSOCI	ATIONS Please	answer the fol	lowing "yes" or "no	o" questions:	
YES	NO 🖂		e served by a d	POD(s) / POA(s) inv district/water suppl		
YES 🔀	NO 🗌	receives or will	receive either upplier; <i>i.e., th</i>	ed POU involved in a primary or supplen the POU will be layer tht(s).	nental irrigation f	rom the
COMMENTS OR ADDITIONAL INFORMATION: THIS TRANSFER PROPOSES TO LAYER A PORTION GROUNDWATER CERTIFICATE 48022 WITH THE "ON" LANDS, A MAJORITY OF WHICH IS CURRENTLY SUPPLIED SURFACE WATER THROUGH KA 1000, THE PROPOSED C-48022 "ON" IRRIGATION WILL BE SUPPLEMENTAL TO KA-1000 WHERE APPLICABLE. THE "ON" LANDS ARE PROPOSED TO BE SERVED BY TWO PRIVATELY OWNED WELLS AND A SVID WELL (WELL #4 KLAM 53792), WHICH WOULD DELIVER WATER THROUGH THE SVID DELIVERY SYSTEM TO THE "ON" LANDS.						
4. APPLICA	NT'S SIGNA	TURE				
applica	ation by [ch	eck one]:		oplier about the pro \mathfrak{n} , or \square other (ple		t transfer
(2) I certif	y that to the	e best of my known.		ormation contained		ental Form D is
Applicant Si	#LU gnature	and _	Robert Name (print)	Unruh	<u>6/6/</u>	2024
5. (WHEN R	EQUIRED) [DISTRICT or WAT	ER SUPPLIER (ONSENT TO THE P	ROPOSED WATER	R RIGHT TRANSFER
District Mar	nager or Wa	iter Supplier cons	ent is require	d if any box on this	form is marked "	YES."
The district,	/water supp	lier certifies the	following:			
(1) The dis maps;		supplier has rev	ewed the app	licant's proposed w	ater right transfe	r application and
(2) The dis	strict/water	supplier consen	ts to the propo	osed water right tra	nsfer application.	Received
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Supplemental	Form D for Di	vision 380 Transfers	Within a District	/Water Supplier	Page 2 of 3	Last Revised 11-2019

	roof of completion, the confirming water of the U.S. Bureau of Reclamation or the	_					
YES NO The district/water supplier will be responsible for submitting the claim of beneficial use prepared by a Certified Water Rights Examiner (CWRE).							
Cherresellele	on Cherrese Wilson	6/12/2024					
Signature of District Manager /Water	Supplier Name (print), Title	Date					
	Secretary KBID						

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Land Use Information Form



NOTE TO APPLICANTS

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

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; OR
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and <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.

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WR / FS

Land Use Information Form



Applicant(s): **R&C AG LLC**

Mailing Address: 30083 Pickett Rd

City: <u>Malin</u>	State: OR	Zip Code: 97632	Daytime Phone:
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A. Land and Location

					here water will be diver				
					r irrigation uses within	irrigation dis	stricts may su	bstitute ex	isting and
					on 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 Attached List				
						☐ Diverted	Conveyed	Used	
						Diverted	Conveyed	Used	
List all cou	inties and ci	ities where	water is pro	posed to be o	liverted, conveyed, and	or used or d	eveloped:		
					amath County.				
B. Desci	iption of	Propos	ed Use						
				r Resources I	Denartment:				
	t to Use or St			Right Transfer		Amendment	or Ground Wat	er Registrat	ion Modification
Limite	ed Water Use	License	Alloca	ation of Conser	ved Water	nge of Water			
Source of v	water: R	eservoir/Po	ond 🛛 C	Fround Water	☐ Surface Water (n	name)			Received
Estimated	quantity of	water need	led: 1.98 cfs	3					JUN 18 202
Intended us	se of water:		ation [Commercial	☐ Industrial	□ Dom	estic for	_ househol	
michaea a.	se or water.	= -	icipal	Quasi-Munic	Toronto Control Contro	Other		nouschoi	OWRD
Briefly des	cribe:								CAALIE
		Perma	nent Tran		cation to move a po			48022 to	a new
				plac	ce of use and 3 diff	ferent well	<u>s.</u>		

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. \rightarrow

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WR/FS

Revised 2/8/2010

Land Use Information Form - Page 2 of 3

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For Local Government Use Only

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

Please check the appropriate box bel	ow and provide the requested infor	mation	
□ Land uses to be served by the proposed water your comprehensive plan. Cite applicable or		lowed outright o	r are not regulated by
Land uses to be served by the proposed water listed in the table below. (Please attach docum Record of Action/land-use decision and accomperiods have not ended, check "Being pure the control of the con	mentation of applicable land-use approvals wh mpanying findings are sufficient.) If approva	nich have 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-U	Jse Approval:
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
Local governments are invited to express special regarding this proposed use of water below, or o		s to the Water Re	sources Department
Name: Libby Gallagher	Title: Planner II		Received
Signature: Libby Gallagher	Phone: 541-851-3674	Date: April 5,	2024 JUN 18 202
Government Entity: Klamath County Planning	g Department		OWRD
Note to local government representative: Pleathe receipt, you will have 30 days from the Water Form or WRD may presume the land use associated the control of the control o	er Resources Department's notice date to return	n the completed l	Land Use Information
			- Fare Po
Receipt for	or Reguest for Land Use Informa	ition	

Applicant name:

City or County:_____ Staff contact:_____

Signature: ______ Phone: _____ Date: _____

	T	T		T	T	
Township	Range	Section	<u>Taxlot ID</u>	Notes & Land Use	<u>Owner</u>	<u>Zone</u>
418	12E	6	4112-00600-00300	#4 SVID Well, diverted and conveyed - piped through	T&S DOTINGA 2005 REVOCABLE TRUST ET AL	FR
41S	12E	6	4112-00600-00100	Conveyed - piped through	HALOUSEK TY J & GAIL	EFU-C
418	12E	5	4112-00500-00400	Conveyed - piped through	HAGERTY LAND CO LLC	EFU-C
418	12E	5	4112-00500-00500	Conveyed - piped through	HAGERTY LAND CO LLC	EFU-C
41S	12E	5	4112-00500-00800	Conveyed - piped through	HAGERTY CLAUDE T & MARILYN S	EFU-C
41S	12E	5	4112-00500-00700	Conveyed - piped through	HAGERTY LAND CO LLC	EFU-C
418	12E	5	4112-00500-00900	Conveyed - piped through	HAGERTY LAND CO LLC	EFU-C
418	12E	5	4112-00500-00200	Conveyed - piped through	HAGERTY LAND CO LLC	EFU-C
40\$	12E	32	4012-03200-01700	Conveyed - piped through	WALKER WILLIAM W CO-TRUSTEE &	EFU-C
408	12E	32	4012-03200-01800	Conveyed - piped through	DUNCAN CRISS	EFU-C

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40S	12E	32	4012-03200-01000	Conveyed - piped through	BLOOMFIELD TERRI L	EFU-C
40\$	12E	32	4012-03200-00700	Conveyed - piped through	STASTNY EDWIN J JR AND DIANA F REV ET AL	FR
40\$	12E	33	4012-03300-00500	Conveyed - piped through	R&C AG LLC	FR
40\$	12E	33	4012-03300-00801	Conveyed - piped through, Used - Irrigation	UNRUH CHERI A & ROBERT L	EFU-C
40\$	12E	32	4012-03200-00900	Conveyed - piped through, Used - Irrigation	UNRUH CHERI A & ROBERT L	EFU-C
40\$	12E	33	4012-03300-00900	Conveyed - piped through, Used - Irrigation	KESSLER EDWARD P TRUSTEE &	EFU-C
40\$	12E	33	4012-03300-00901	Conveyed - piped through, Used - Irrigation	KESSLER EDWARD P TRUSTEE &	EFU-C
40\$	12E	33	4012-03300-00400	#3 Well - Unruh Trust, diverted and conveyed - piped through	UNRUH ANITA J TRUSTEE &	FR
40\$	12E	28	4012-00000-06800	#1 Well- R&C Ag LLC, diverted and conveyed - piped through	R&C AG LLC	FR

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40\$	12E	28	4012-00000-07000	Conveyed - piped through	VOEGELI DALE L & HUNTER ROXAN D	FR
40\$	12E	33	4012-03300-00300	Conveyed - piped through, Used - Irrigation	VOEGELI DALE L & HUNTER ROXAN D	FR
40S	12E	29	4012-02900-01200	Conveyed - piped through, Used - Irrigation	R&C AG LLC	FR
40\$	12E	28	4012-00000-06900	Conveyed - piped through	UNRUH ANITA J TRUSTEE &	FR
40S	12E	32	4012-03200-00600	Conveyed - piped through	ADKISSON FAMILY TRUST ET AL	FR
40\$	12E	32	4012-03200-00200	Conveyed - piped through	STASTNY EDWIN J JR AND DIANA F REV ET AL	FR
40\$	12E	29	4012-02900-00700	Conveyed - piped through	UNITED STATES	FR

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WELL I.D. #L 57464

RECEIVED

STATE OF OREGON

WATER SUPPLY WELL REPORT START CARD # 149160 (as required by ORS 537.765) WATER RESOURCES DEPT Instructions for completing this readtless, other page of this form. (1) LAND OWNER Well Number (9) LOCATION OF WELL by legal description: RR Name SHASTA County KLAWATH Latitude_ _Longitude 46 _N or S Range ___ 12 Address RO, Box (E)or W. WM. City MALIA State 1 Section (2) TYPE OF WORK Block Subdivision ■ New Well □ Deepening □ Alteration (repair/recondition) □ Abandonment Street Address of Well (or nearest address) N. OFF PAYER WAY (3) DRILL METHOD: ☐ Kotary Air ☐ Rotary Mud ☐ Cable ☐ Auger (10) STATIC WATER LEVEL: ft. below land surface. Date 1-30-03 Other_ Artesian pressure _lb. per square inch Date (4) PROPOSED USE: ☐ Domestic ☐ Community ☐ Industrial ☐ Trigation (11) WATER BEARING ZONES: ☐ Livestock ☐ Other_ □ Injection 240' 139 Depth at which water was first found _ (5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well 620 ft. Estimated Flow Rate SWL From To Explosives used Yes Yo Type_ _Amount _ 145 112 139 HOLE SEAL 500 112 240 Sacks or pounds Diameter From Material From 1000 t 112 559 24" CEMENT -75 20 BENTONITE 33 SACKS 425 370 DPE (12) WELL LOG: 4100 Method \Box A \square B Ground Elevation DOTHER BENTONITE POURED DRY Material From To SWL Backfill placed from -18 ft. to 25 ft. Material BENTON. TE TOPSOIL Gravel placed from _ _ft. to_____ Size of gravel _ SANDY 21 (6) CASING/LINER: SAND BROWN 21 Diameter Gauge Steel Welded RAY To Plastic Threaded LLAY 60 250 4 -70 GRAY CLAY / BOULDERS 60 139 70 BASALT 139 145 GRAY CLAY/SAND/BUN LAN 112 178 BASALT 145 178 GREEN CLAY 185 187 BASALT / BAN L Drive Shoe used Inside Outside Mone 187 BASALT 212 Final location of shoe(s) BROKEN BASALT/GRN. LI 212 222 (7) PERFORATIONS/SCREENS: 222 230 ☐ Perforations Method 230 240 LAY / SAND STOLL LAYE ☐ Screens Material Type _ BROWN 240 267 Slot Tele/pipe Number Diameter From To Casing Liner 267 273 SAND/ CLAY SAND / SAND STONE LAYER 300 273 300 330 BLACK + RED (300 BASALT 350 ON NEXT PAGE ONTINUED Date started 9-04-02 Completed 45 30-03 (8) WELL TESTS: Minimum testing time is 1 hour Flowing (unbonded) Water Well Constructor Certification: ☐ Pump Air Artesian □ Bailer I certify that the work I performed on the construction, alteration, or abandon-Yield gal/min Drill stem at ment of this well is in compliance with Oregon water supply well construction I hr. standards. Materials used and information reported above are true to the best of my 1200 600 knowledge and belief. WWC Number Signed _ Temperature of water 62 Depth Artesian Flow Found (bonded) Water Well Constructor Certification: Received I accept responsibility for the construction, alteration, or abandonment work Was a water analysis done? ☐ Yes By whom ____ performed on this well during the construction dates reported above. All work Did any strata contain water not suitable for intended use? ☐ Too little performed during this time is in compliance with Oregon water supply well performed during this time is in compliance with oregon and belief construction standard. This report is true to the best of my knowledge and belief ww. Number /355 Salty Muddy Odor Colored Other Depth of strata: _ Date 5-05-03 ORIGINAL - WATER RESOURCES DEPARTMENT FIRST COPY - CONSTRUCTOR SECOND COPY - CUSTOMER

STATE OF OREGON WATER SUPPLY WELL REPORT PAGE 2	WELL I.D. # L S7469 START CARD # (49160
(as required by OKS 337.703)	START CARD #
Instructions for completing this report are on the last page of this form.	(9) LOCATION OF WELL by legal description:
(1) LAND OWNER Name SHASTA VIEW RR DIST	County K AND Latitude Longitude
LIMITY III	Township
03/23	Section 6 NE 1/4 NW 1/4
	Tax Lot NA Lot Block Subdivision
(2) TYPE OF WORK	Street Address of Well (or nearest address) N. OFF PAYER WAY
□ New Well □ Deepening □ Alteration (repair/recondition) □ Abandonment	Street Address of Well (or nearest address)
(3) DRILL METHOD: □ Rotary Air □ Rotary Mud □ Cable □ Auger	(10) STATIC WATER LEVEL:
Other	ft. below land surface. Date
(4) PROPOSED USE:	Artesian pressurelb. per square inchlb
□ Domestic □ Community □ Industrial □ Irrigation	(11) WATER BEARING ZONES:
☐ Thermal ☐ Injection ☐ Livestock ☐ Other	Depth at which water was first found
(5) BORE HOLE CONSTRUCTION:	The State of Flow Pote CWI
Special Construction approval Yes No Depth of Completed Well ft.	From / To Estimated Flow Rate SWL
Explosives used Yes No Type Amount	RECEIVED
HOLE STAL	
Diameter From To Material From To Sacks or pounds	MAY 0 6 2003
	WATER RESOURCES DEPT
	(12) WELL LOG:
How was seal placed: Method A B C D E	Ground Elevation
Other	Motorial From To SWL
Backfill placed fromft. toft. Material	Material
Gravel placed fromft. toft. Size of gravel	CONTINUED FROM PAGE
(6) CASING/LINER:	BROKEN BASALT / GRAVE 350)
Diameter From To Gauge Steel Plastic Welded Threaded	+ SAND 4362 112
Casing:	BASALT 362 375 112
Received	BROKEN BASALT SERMS 375 D
	OF CLAY + CINDERS = 440 112
	RED + BLACK CINDERS 440 467 112
Liner:	BROWN SAND 467 480 112
OWRD	BRN. SANDY CLAY 480 SS9
Drive Shoe used _ Inside _ Outside _ Indie	BASALT/BLK+ BRN LAVA SS9 625 112
Final location of shoe(s)	
(7) PERFORATIONS/SCREENS:	
Perforations Method	LOST 2 - 53/4" CARBIBE ROLLER
Slot Tele/pipe	CONES FROM HOLE OPENER
From To size Number Diameter size Casing Liner	LAYING @ 620'
	GRADUAL INCREASE OF FLOW
	THROUGH W/B ZONES
	Date started 9604-02 Completed 4-30-03
(8) WELL TESTS: Minimum testing time is 1 hour Flowing	(unbonded) Water Well Constructor Certification:
□ Pump □ Bailer □ Air □ Artesian	Legrify that the work I performed on the construction, alteration, or abandon-
Yield gal/min Drawdown Drill stem at Time	ment of this well is in compliance with Oregon water supply well construction
1200 600 1 hr.	standards. Materials used and information reported above are true to the best of my knowledge and belief.
	WWC Number
	Signed Date
(2° D. 14.	(bonded) Water Well Constructor Certification:
Temperature of water 62 Depth Artesian Flow Found	Laccept responsibility for the construction, alteration, or abandonment work
Was a water analysis done? ☐ Yes By whom ☐ Too little	performed on this well during the construction dates reported above. All work
Did any strata contain water not surable to intended	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.
□ Salty □ Muddy □ Odor □ Colored □ Other	WWC Number / 333
Depth of strata:	Signed Wither I my Date 5-05-03
	ALICANIA CONV. CHOMOLICA
ORIGINAL – WATER RESOURCES DEPARTMENT FIRS	T COPY – CONSTRUCTOR SECOND COPY – CUSTOMER

Amended 6/20/2023			WELL ID LADEL #1	rage I of I
STATE OF OREGON	KLAM	61549	WELL I.D. LABEL# L	103028
WATER SUPPLY WELL REPORT			START CARD #	1060820
	E/10/	2022	ORIGINAL LOG#	1000020
(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)	5/18/	2025	ORIGINAL LOG#	
(1) LAND OWNER Owner Well I.D.				
First Name ROB Last Name UNRUH		(0) LOCATI	ION OF WELL (legal d	lescription)
Company		' '		
		County KLAMA	TH Twp 40.00 S N/	/S Range 12.00 E E/W WM
Address 3083 PICKET RD		Sec 33	NE 1/4 of the NW	1/4 Tax Lot 400
City MALIN State OR Zip 97632		Tay Man Numbe	or	Lot
City MALIN State OR Zip 97632 (2) TYPE OF WORK New Well Deepening Convolution	ersion	Tax Map Numbe	er" or <u>42.06411000</u>	DMS or DD
X Alteration (complete 2a & 10) Abandonment(complete 2a & 10)	mnlete 5a)	Lat°_	or 42.06411000	DMS of DD
(2a) PRE-ALTERATION	inpicte 5u)	Long°_	" or -121.42084	000 DMS or DD
Dia + From To Gauge Stl Plstc Wld Thrd		€ Str	reet address of well Nea	arest address
Casing:			RD, MALIN, OR 97632	
		JOHOS I ICKLI	RD, MALIN, OR 77032	
Material From To Amt sacks/lbs				
Seal:		(4.0) CON LONG	O THE AMERICAN	
(3) DRILL METHOD		(10) STATIC	C WATER LEVEL	
X Rotary Air Rotary Mud Cable Auger Cable Mud			Date	SWL(psi) + SWL(ft)
Reverse Rotary Other			ell / Pre-Alteration	
		Completed '		
(4) PROPOSED USE Domestic X Irrigation Community			Flowing Artesian?	Dry Hole?
Industrial/ Commercial Livestock Dewatering		WATER BEARI	NG ZONES Depth wa	ater was first found
Thermal Injection Other	_	SWL Date	From To Est	Flow SWL(psi) + SWL(ft)
(5) PODE HOLE CONCEDUCTION				
(5) BORE HOLE CONSTRUCTION Special Standard (A	Attach copy)			
Depth of Completed Well 420.00 ft.				
BORE HOLE SEAL	sacks/			
	mt lbs		1	
16 0 420			+	
Calculated				
Calculated		(11) WELL I	OG Constitution	
		()	Ground Lievation	
How was seal placed: Method A B C D	E		Material	From To
X Other SEAL WAS UNDISTURBED	- 1	see klam 14838	and klam 57397	0 420
Backfill placed from ft. to ft. Material				
Filter pack from ft. to ft. Material Size				
Their pack from it. to it. waterial Size		Clean out o	an lu	
Explosives used: Yes Type Amount		Clean out o	шу	
(5a) ABANDONMENT USING UNHYDRATED BENTONIT	CE .			
	IE			
Proposed Amount Actual Amount				
(6) CASING/LINER				
Casing Liner Dia + From To Gauge Stl Plstc V	Wld Thrd			
Company of the contract of the				
			Received	
	\vdash			
			IIINI 1 2 2024	
		•	JUN 10 LULT	
Shoe Inside Outside Other Location of shoe(s)		-	214/55	
			-OWRD	
Temp casing Yes Dia From + To	- 1			
(7) PERFORATIONS/SCREENS				
Perforations Method				
Screens Type Material		D-4- C: 1-		1 . 1
		Date Started 5	/14/2023 Comp	pleted <u>5/18/2023</u>
ornibate biet	Tele/	(unbonded) We	ater Well Constructor Certific	antion
Screen Liner Dia From To width length slots	pipe size			
				instruction, deepening, alteration, or
				e with Oregon water supply well
				formation reported above are true to
			mowledge and belief.	
		License Number	r 1739 Da	ate 5/18/2023
(8) WELL TESTS: Minimum testing time is 1 hour				J1 101 2023
	- 1	Signed CHAI	DI ES EDV (E filed)	
Pump Bailer • Air Flowing Ar	rtesian	CHA	RLES FRY (E-filed)	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hi	r)	(bonded) Water	well Constructor Certificati	ion
1200 420 1.5	-/-			
1200 420 1.3	-			eepening, alteration, or abandonment
				ction dates reported above. All work
				e with Oregon water supply well
Temperature 58 °F Lab analysis Yes By		construction stan	idards. This report is true to the	e best of my knowledge and belief.
	ppm	License Number	1355 Do	te 5/19/2022
Water quality concerns? Yes (describe below) TDS amount 221 From To Description Amount	Units	Diceise ivalidel	1555	te 5/18/2023
		Signed ARTH	HIR ERV (E-6lad)	
		Contact Info (op	tional)	

KLAM 57397

STATE OF OREGON WATER SUPPLY WELL REPORT

(ORS 537.765 & OAR 690-205-0210)

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

WELL LABEL # L 103028 START CARD # 202967 ORIGINAL LOG # KL . 14838

One Demonstration Description Demonstration Demonstr	(1) LANDOWNER Owner Well I.D.	(9) LOÇATION OF WELL (legal description)
Complete Section 2 at 10 Despensing Despensing Despensing Complete Section 2 at 10 Despensing Despension D	ompany CLARK C. UNRUH TRUST	County KLAMATH Twp 40 No Range 12 Er W W.M.
Completed Section 2a & 10 Conversion Despensing Ones or Domes of Domes		Sec 33 NE 1/4 of the NW 1/4 Tax Lot 700
Alternition (compilete Sections 2 at 2 to Abstraction Abstraction Alternition (compilete Section 5)		Lat ° ' "or DMS or DD
Second Material Casing Type: PfSteel Plastic Other Casing Guage Secol Plastic Casing Wall/Pre-Alteration Secondary	(2) TYPE OF WORK New Conversion Deepening	Long DMS or DD
Seal Material Chest Plastic Other Casing Diameter Le'	(2a) PRE-ATTERATION: Well Depth 238 / h ft	Street Address of Well (or nearest address) 30403 PILECTT Re
Casing Gauge Size Plastic Older Casing Diameter Le		
Spring Cable Cable Mud Reverse Rotary Other Community Cable Cable Mud Reverse Rotary Other Community Cable Mud Reverse Rotary Other Community Cable Cable Mud Reverse Rotary Other Sex Reverse Rotary Reverse Ro	Casing Type: Steel Plastic Other	(10) CTATIC WATED LEVEL
Spring Cable Cable Mud Reverse Rotary Other Community Cable Cable Mud Reverse Rotary Other Community Cable Mud Reverse Rotary Other Community Cable Cable Mud Reverse Rotary Other Sex Reverse Rotary Reverse Ro	Casing Gauge 3/16" Casing Diameter 16"	
(a) DRILL METHOD		Existing Wall/Pro Alteration 44. 62.40
Cable Cabl	(3) DRILL METHOD Rotary Air Rotary Mud Auger	Completed Well 4-29-10 - 174
Community Thermal Other	Cable Cable Mud Reverse Rotary Other	Flowing Artesian? Yes Dry Hole? Yes
IndustrialCommercial Livestock Dewatering Injection Thermal Other	(4) PROPOSED USE Domestic Pringation Community	WATER BEARING ZONES Depth water was first found
Source Depth of Completed Well AD R. Special Standard: Yes (attach copy)		
Depth of Completed Well \$\frac{120}{20}\$ ft. Special Standard: \ \text{Yes} (altach copy) \\ \text{BORE HOLE} \\ \text{Dia} \ \text{From} \ \text{To} \ \text{Material} \ \text{From} \ \text{To} \ \text{Amount} \ \text{ScA/lbs} \\ \text{I/O} \ \text{2.35} \\ \text{2.25} \\ 2.2		4-29-10 238 420 400+ - 174
BORE HOLE Co Co Co Co Co Co Co C		
Dia From To Material From To Amount Sket/lbs	Depth of Completed Well 120 ft. Special Standard: Yes (attach copy)	
C		
Material Size Plastic Welded Thrd		
How was seal placed: Method A B C D E	12" 238 2.85	
How was seal placed: Method A B C D E	12" 285 420	
State Stat	How was seel about Mathed DA DB DC DB DE	TRUM D" 138 DEE ORIGINAL
Backfill placed from ft. to ft. Material Size		SEDIMENT FILL 238 242
(5a) ABANDONMENT USING UNHYDRATED BENTONITE: Calculated Amount Proposed to be Used: sacks/lbs sacks/lbs		BROKEN - FRACTURED 242)
Calculated Amount Proposed to be Used:	"ilter pack from ft. to ft. Material Size	
Calculated Amount Proposed to be Used:	(5a) ARANDONMENT USING UNHVORATED RENTONITE:	Received RECEIVED
Actual Amount Used:	, ,	110001400
Cong Linr Dia + From To Gauge Steel Plastic Welded Thrd	Actual Amount Used:sacks/lbs	MAY 1 4 2010
Cang Linr Dia From To Gauge Steel Plastic Welded Thrd		
Date Started Date		
Date Started 4-22-10 Completed 4-29-10	SEE ORIG. Lag # KL / 1888	SALEM, OREGUN
Shoc Inside Outside Other Location of shoc(s) Temporary casing Yes Diameter From To To To To To To To		
Temporary casing Yes Diameter From To 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. Contact Info. (optional) Contact Info. (optional)		Date Started 4-20-10 Completed 4-29-10
Temporary casing	Shor Ingide Outside Other Leastion of shorts)	
Construction standards. Materials used and information reported above are true to the best of my knowledge and belief. License Number 1739 Date 5-07-10 Signed Line 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. Signed Line Optional Opti		
Perforations Screens Type Material License Number 739 Date 5-07-10 Signed Chonded) 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. Well gal/min Drawdown Drill stem under the physical point of the properties of t		
Screen Screen Screen Screen Sold Hoff Price Signed Contact Info. (optional) Screen Screen Screen Sold Hoff Price Signed Contact Info. (optional)		the best of my knowledge and belief.
Screen Screen Slot Slot # of pipe size		License Number 1739 Date 5-07-10
Perf Scm Csng Linr Dia From To width length slots size		
Perf Scm Csng Linr Dia From To width length slots size		Signed Character Conf.
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. WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian Flowing Artesian Pield gal/min Drawdown Drill steme time teeth Duration (hr) Drawdown Drill steme time teeth Duration (hr) Signed Contact Info. (optional) RECEIVED	Perf Scrn Csng Linr Dia From To width length slots size	, , , , , , , , , , , , , , , , , , , ,
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. WELL TESTS: Minimum testing time is 1 hour Plump Bailer Air Flowing Artesian Flowing Artesian Pield gal/min Drawdown Drill steme tume depth Duration (hr) Signed Contact Info. (optional) RECEIVED		
(8) WELL TESTS: Minimum testing time is 1 hour Market Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill steme Pump Lepth Duration (hr) Yemperature		above. All work performed during this time is in compliance with Oregon water
(8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem Flowing Artesian Yield gal/min Drawdown Drill		
Yield gal/min Drawdown Drill stem Pump Lepth Duration (hr) 1 1		
Contact Info. (optional) Signed		
Water quality concerns? Yes (describe below) TDS	1400 20' 200' 46	
From To Description Amount Units JUL 2 8 2010	water quality concerns? Ves (describe below) TDS	חבעבועבט
		JUL 2 8 201 0

*****	LL REPORT COM 14838 Well No. 40/12	-33C(1)
ORIGINAL WATER WED	OREGON OBSERVATION WELL G-	
STATE ENGINEER, SALEM, OREGON		
(1) OWNER: CLARK UNEUR APR 4 1958	(11) WELL TESTS: Drawdown is amount water lowered below static level.	Interstate Pumpl
Name JOHN MASTAGE ENGINEER	Was a pump test made? Yes No If yes, by whom?	/ / /
Address P.O. Box 663 SALEM OREGON	Yield: 780 gal./min. with 27 ft. drawdown a	fter /// hrs.
Malin, Oregou	" 900 " 33/2 "	2- "
(2) LOCATION OF WELL:	Bailer test / gal./min. with 75/12 ft. drawdown a	fter 2 hrs.
County Klausatu Owner's number, if any—	Artesian flow g.p.m. Date	
NE 14 NW 14 Section 33 T. 405, R. 12 E., W.M.	Temperature of water 56 Was a chemical analysis made	? Yes No
Bearing and distance from section or subdivision corner	(12) WELL LOG: Diameter of well	inches.
0.00 100 110 1 23	Depth drilled 248 ft. Depth of completed well	248 ft.
quarter-corner of section 35,	Formation: Describe by color, character, size of material a	and structure, and
7 C 70 S., A.12 E., W. C	show thickness of aquifers and the kind and nature of the stratum penetrated, with at least one entry for each char	nge of formation.
The state of the s		FROM TO
THE OF WORK (shock):	Sandy Clay & Chalk	0 57
TYPE OF WORK (check): New Well & Deepening Reconditioning Abandon	FIRM Lava	57 75
New Well Deepening Reconditioning Abandon I If abandonment, describe material and procedure in Item 11.	Hard Lava	13 101
	Soft Lava	119 222
(4) I NOT OBED COL (CELEVI)	Black Water Saya	22 230
nestic Industrial Municipal Cable Jetted	March College	130 235
Test Well Other Dug Bored	Water cinder	۲,
(6) CASING INSTALLED: Threaded Welded		235 248
(6) CASING INSTALLED: Threaded Welded S. J. Gage tt. to Charlet Gage	Jeva nara sner	
" Diam. from	- CARROLL - CARR	
" Diam. from		
14-		
(7) PERFORATIONS: Perforated? \[\text{Yes} \text{Yno} \]		
Type of perforator used		
SIZE of perforations in. by in.		
perforations from ft. to ft.	Received -	
perforations fromft. toft.		
perforations fromft_ toft	JUN 1.8 2024	-
perforations from ft. to ft		
	OWRD	
SCREENS: Well screen installed Tyes No		
nufacturer's Name		
Type Model No ft to ft		
Diam. Slot size Set from ft. to ft	Work started 3/27 1947. Completed 4	12 19 5
) CONSTRUCTION:	(13) PUMP:	
s well gravel packed? Yes No Size of gravel:	Manufacturer's Name Type: Veep coell forbine	AP. 75
Gravel placed from	Type: Ve Chi	
Was a surface seal provided? Yes \(\sum \) No To what depth?	_ Well Driller's Statement:	
Material used in scal— Did any strata contain unusable water? ☐ Yes ☐ No	This wall was drilled under my jurisdiction a	nd this report is
Type of water? Depth of strata	true to the best of my knowledge and belief.	
Method of sealing strata off	NAME PAT M-GILLEG (Person, firm, or corporation) (T)	
		pe or print)
(10) WATER LEVELS: Static level (10) ft. below land surface Date 4/57	Address Tulelake, Calif	
The secretary track Date	Driller's well number	
Artesian pressure lbs. per square men Date		
Log Accepted by:	[Signed](Well Driller)	
[Signed] John Madden Date 3/20 , 1957	License No Date	19
2 Grocowner & Show Con A	License No.	,
Oy accepted a . To GUSE ADDITIONAL	SHEETS IF NECESSARY)	
Fuch		

WELL I.D. LABEL# L 51773 STATE OF OREGON **KLAM 61545** START CARD # 1060819 WATER SUPPLY WELL REPORT 5/1 (as required by ORS 537.545 & 537.765 and OAR 690-205-0210) (1) LAND OWNER Owner Well I.D. First Name ROB Last Name UNRUH Company Address 3083 PICKET RD City MALIN Zip 97632 State OR

Plstc Wld Thrd

Special Standard

SEAL

From

ft. Material

Amount

Actual Amount

Gauge

Location of shoe(s)

Material

Drill stem/Pump depth Duration (hr)

Scrn/slot

width

Yes (describe below) TDS amount 107

ft. Material

Deepening

Amt sacks/lbs

Auger

New Well

To

Cable

Domestic X Irrigation

Livestock Dewatering

X Alteration (complete 2a & 10)

From

Other

Material

Method A

ft. to _

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

From

Other

() Air

Description

°F Lab analysis Yes By.

From

ft. to

Outside

(2) TYPE OF WORK

Casing:

Seal: (3) DRILL METHOD

14

12

8

(4) PROPOSED USE

(2a) PRE-ALTERATION

X Rotary Air Rotary Mud

Reverse Rotary Other

Industrial/ Commericial

Thermal Injection

From

0

350

370

How was seal placed:

Backfill placed from .

Filter pack from _

Proposed Amount

(6) CASING/LINER Casing Liner

Temp casing

Screen Liner

Perf/ Casing/ Screen

Yield gal/min

Temperature 56 Water quality concerns?

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 396.00 BORE HOLE

350

370

396

X Other SEAL WAS UNDISTURBED

Explosives used: Yes Type_

Inside

(7) PERFORATIONS/SCREENS

Yes Dia

Perforations Method Screens Type

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

Drawdown

0-205-0210) 5	/15/2023	ORIC	GINAL LOG	#	
JH		C. TION OF I	TIPLY A		
UN	1	CATION OF V			
					2.00 E E/W WM
Zip <u>97632</u>	Sec 28	SW 1/4	of the Sw	_ 1/4 1 ax Lo	0800
ening Conversion	Tax Map I	Number	" or 42 064584	500	DMS or DD
Abandonment(complete	(2 5a) Lang	- ·	" or -121 4240	1700	DMS or DD
Iste Wld Thrd	Long	Street address of	of well	Nearest address	
		KET RD, MALIN			
icks/lbs		,	,		
	- (10) 05				
	(10) 81	ATIC WATER		ate SWL(psi)	+ SWL(ft)
Cable Mud	Existi	ing Well / Pre-Alte	ration 5/1/2023	3 VL(psi)	201
	Comp	pleted Well	5/12/202	23	201
Community		Flowi	ing Artesian?	Dry Hole?	
ng	WATER B	EARING ZONES	Depth	water was first fo	ound
	SWL D	ate From	To I	Est Flow SWL(p	osi) + SWL(ft)
ial Standard (Attach			TT		
(, z.men	F37				
EAL sa	acks/				
rom To Amt	lbs				
Calculated					
Calculated					
Calculated	(11) WE	LL LOG	Ground Eleva	tion	
C D E		Material		From	То
	see klam	14820 and klam 53	641	0	396
erial	_				
Size					
int					
D BENTONITE					
nount					
	-				
uge Stl Plstc Wld T	hrd	Roc	eived		
	H	1100	CIVEC		
-188	H I	JUN 1	8 2024		
	$H \Vdash$	2014 1	0 2024		
		211			
tion of shoe(s)		ON	VRD		
То					
	-				
	L				
Slot # of Tel		rted <u>5/1/2023</u>	Co	mpleted <u>5/12/2</u>	.023
Slot # of Tel length slots pipe		ed) Water Well Co	onstructor Cert	ification	
icingth state steps	I certify t	that the work I per	rformed on the	construction, dec	epening, alteration, or
					n water supply well
		on standards. Mat f my knowledge an		information repo	orted above are true to
				Data sussana	
	_ Liceise N	lumber 1739		Date <u>5/15/2023</u>	5
C Flowing Artesian	Signed	CHARLES FRY	(E-filed)		
Flowing Artesian		Water Well Const		ation	
epth Duration (hr)	1				ation, or abandonment
	1				orted above. All work
					n water supply well
	construction	on standards. This	report is true to	the best of my kr	nowledge and belief.
S amount 107 ppn		umber 1355		Date 5/15/2023	
Amount Units	7	APTHUR ERV (E			
	i orgineu	ARTHUR ERVIE	-1116(1)		

Page 1 of 1

ORIGINAL - WATER RESOURCES DEPARTMENT

Contact Info (optional)

RECEIVED KLAM 53641

STATE OF OREGON JAN 0 3 2003					_
WATER SUPPLY WELL REPORT RESOURCES DEPT. (as required by ORS 537.765) WATER RESOURCES DEPT. (as required by ORS 537.765) SALEM, OREGON Instructions for completing this report are on the last page of this form.	Clane WELL I.D. #	L 51773			_
(as required by ORS 537.765) WATER TEST OREGON	START CAR	D#_145950			-
					_
(1) LAND OWNER Name U.S. Timberland/Klamath Falls. ILC	(9) LOCATION OF WELL by lega	l description:			
Address 7680 Happy Hollow Lane	County Klamath Latitude	L	-		-
City Bananza, State OR Zip 97623	Township 40S N or S Rang	ge IZE	E or W.	WM.	
	Section 28 SW 1/4	I	/4		
(2) TYPE OF WORK	Tax Lot 6800 LotBlo	ckSı	ubdivision _		_
□ New Well 💆 Deepening □ Alteration (repair/recondition) □ Abandonment	30083 Pickett Rd., Mali	ss)			_
(3) DRILL METHOD:		in, on			
☑ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Other	(10) STATIC WATER LEVEL: 169 ft. below land surface.		Date 12/	30/02	
					-
(4) PROPOSED USE: □ Domestic □ Community □ Industrial ☑ Irrigation	Artesian pressurelb. per	square inch	Date		
☐ Thermal ☐ Injection ☐ Livestock ☐ Other	(11) WATER BEARING ZONES:				
(5) RODE HOLE CONSTRUCTION.	Depth at which water was first found				
Special Construction approval ☐ Yes No Depth of Completed Well 394.	From To	Estimated F		SWL	1
Explosives used Yes No Type Amount	230 396	1500	low Rate	169	
HOLE SEAL	1 200	1,000		109	
Diameter From To Material From To Sacks or pounds				+	1
14 0 230		†		1	
8 230 396				1	
	(12) WELL LOG:			1	
How was seal placed: Method \(\begin{array}{c cccc} A & \B & B & C & \B D & E \end{array}	Ground Elevation				
Other	Ground Elevation				
Backfill placed fromft. toft. Material	Material	From	То	SWL	
Gravel placed fromft. toft. Size of gravel	Cray basalt	230	244		
(6) CASING/LINER:	Gray&green basalt	244	252		
Diameter From To Gauge Steel Plastic Welded Threaded Casing: +1 35 250 X X	Broken brn&gray basalt	252	257	-	
	Gray basalt	257	272		
	Red rock	272	287	-	
	Brn lava Gray basalt	287 289	28 9 292	-	
Liner:	Decomposed lava	292	298	-	
	Red & brn lava	298	336	-	
Drive Shoe used ☐ Inside ☐ Outside ☐ None	Brn lava	336	350	-	
Final location of shoe(s)	Red & brn lava	350	375		
(7) PERFORATIONS/SCREENS:	Gray basalt	375	385		
Perforations Method	Red & brn lava	385	396		
Slot Tele/pipe					
From To size Number Diameter size Casing Liner	RECEIVED			Rec	ceived
					01100
	NOV 3 0 2004			IIIN	18 202
				3011	. 0
	WATER RESOURCES DEPT				AIDD
(8) WELL TESTS: Minimum testing time is 1 hour	Date started SALFMSOREGON Con	npleted 12/3	0/02	U	WRD
	(unbonded) Water Well Constructor Certification	ication:			
Yield gal/min Drawdown Drill stem at Time	I certify that the work I performed on the				
	ment of this well is in compliance with Oregonstandards. Materials used and information rep				
/500 30 V (1hr.)		orted accordate tra		or my	
1500 30 (1hr.)	knowledge and belief.		ber		
7.500 30 (thr.)		WWC Numl			
	Signed	Da	ıte		
Temperature of yearer 56 Depth Artesian Flow Found	Signed(bonded) Water Well Constructor Certificat	tion:	ıle		
Temperature of water	Signed	tion: n, alteration, or abo	andonment v		
Temperature of water	Signed	tion: n, alteration, or about dates reported about the Dream water	andonment v	rk	
Temperature of water Depth Artesian Flow Found Was a water analysis done? Yes By whom Did any otrata contain water not suitable for intended use? Too little Ally Muddy Odor Colored Other	Signed	tion: n, alteration, or about dates reported about the Dream water	andonment v	rk	
Temperature of water	Signed	tion: n, alteration, or about dates reported about the Dream water	andonment vove. All worksupply well veledge and beer	rk	E

KLAM 14820

ORIGINAL File Original, and Duplicate with the STATE ENGINEER, SALEM, OREGON MAY 21 1958 STATE OF OR	VIAM I
Diso-in.	
(1) OWNER:	(10) WELL TESTS:
Name Alle	Was a pump test made? Yes \(\subseteq \text{No If yes, by whom?} \)
Address 1507 mary land about	Yield: 100 gal./min. with 3/ ft. draw down after 4/ hrs.
West Sarramento	" 870 " 19 " 4 "
(2) LOCATION OF WELL:	
County KIAMATA Owner's number, if any-	Artesian flow g.p.m.
R. F. D. or Street No.	Shut-in pressure
Bearing and distance from section or subdivision corner	Bailer test g.p.m. with ft. drawdown Temperature of water Was a chemical analysis made? ☐ Yes N No
SWELDSWE SEC28 T405	
RIQ F.WM.	Was electric log made of well? ☐ Yes No
	(11) WELL LOG:
	Diameter of well,
4. 3) TYPE OF WORK (check):	Total depth 230 ft. Depth of completed well 230 ft.
w well Deepening Reconditioning Abandon	
if abandonment, describe material and procedure in Item 11.	Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in such stratum penetrated, with at least one entry for each change of formation.
(4) PROPOSED USE (check): (5) EQUIPMENT:	Oft. to 6 tt. 501/
omestic Industrial Municipal Rotary	f. " ou " d/AV
Cable	211" 21 " 5 101
Trrigation Test Well Other Dug Well	31 " 59 - " a LAIN
(6) CASING INSTALLED: If gravel packed	5% 92 "Blue BASAIT Boulders
Threaded Welded	92" 94 " CONSIONERATE
Gage or Diameter from to	94"102 "BROWN LAVA
FROM Oft. to 40 ft. 14Diam. 110Wall of Bore ft. ft.	107 121 " SANG STONE
n n n n n	101"108 " C/AV & SAN
" " " " " " " " " " " " " " " " " " "	120"168 " SAND STONE
	118"122 " Rad / AVA
	170" 180 " PACKED SAND
	180" 182 " VOLCANIC SAND
Type and size of shoe or well ring NoNe Size of gravel: Describe joint	182" 192 " CIND + 188 + SAND
Describe Joint W S / G	192 223 " WARD RED &BLACK LAVA
(7) PERFORATIONS:	123"230 "BLACKLAVA Boulders
Type of perforator used	" "
TZE of perforations in., length, by in.	" "
ROM ft. to ft. perf per foot No. of rows	" "
" " NON " " " " " " " " " " " " " " " "	11 11
	" Received
1) 19 19 19 11 19 11 19	" "
n n n n n n n	" " ILIN 1.8 2024
SCREENS:	, , , , , , , , , , , , , , , , , , , ,
Give Manufacturer's Name, Model No. and Size	"
<u> </u>	" " OWKD
(8) CONSTRUCTION:	11 11
Was a surface sanitary seal provided? 🕱 Yes 🗆 No To what depth 🕠 ft.	11 17
Were any strata sealed against pollution? 🔊 Yes	Ground elevation at well site 4 10 0 feet above mean sea level.
If yes, note depth of strata FROM 4 ft. to 4/1 ft.	Work started APPI/ 7 1956 Completed MAY / 1956
FROM S II. to 40 II.	Well Driller's Statement:
	This well was drilled under my jurisdiction and this report is
METHOD OF SEALING CEMEN PACKER	true to the best of my knowledge and belief.
(9) WATER LEVELS:	NAME JOHN A. VAN METER
Depth at which water was first found 16 3 ft.	(Person, firm, or corporation) (Typed or printed)
Standing level before perforating ft.	Address MAIIN OREGON
Standing level after perforating ft.	Driller's well number
Log Accepted by:	1 aul MA
	[Signed] (Well Driller)
[Signed] Xaliet Jerisa Dated 9 11 cuy 1956	License No. 170 Dated agence 19.56

The original and first contractor of this report are to filed with the	F OREGON JIV & D 1000 State Well No.	40/11-	89	car			
within 30 days from the date. I E Process End of will completion.	POPPORTE ENGINEER	*					
(1) OWNER:	(11) LOCATION OF WELL:						
Name Rajnus Bros.	County Klamath Driller's well n	umber					
Address Malin, Oregon	N. E 14 S. W 14 Section 36 T. 40		Tr	W.M.			
	N.E. 14 N.W. 14 Section 56 T. 40S R.]] E. W.M. Bearing and distance from section or subdivision corner						
(2) TYPE OF WORK (check):	Dearing and discance from section of squaresic	MI COINEI					
New Well		777					
If abandonment, describe material and procedure in Item 12.							
(3) TYPE OF WELL: (4) PROPOSED USE (check):	(12) WELL LOG: Diameter of well below casing 16"						
Cable Jetted Domestic Industrial Municipal	765						
Dug Bored Irrigation Test Well Other	Formation: Describe color, texture, grain size		-				
CASING INSTALLED: Threaded Welded	and show thickness and nature of each stratu	m and aqu	ifer per	netrated,			
	with at least one entry for each change of form in position of Static Water Level as drilling pro-	nation. Repo occeds. Not	ort each e drillir	change			
"Diam. fromft. toft. Gage	MATERIAL	From	To	SWL			
" Diam. from ft. to ft. Gage	sandy loam top soil	0	3				
PERFORATIONS: Perforated? Yes No.	soft sandstone	-	45	AN			
Type of perforator used	gray lava boulders	45	49	Nb:			
Size of perforations in. by in.	brown sandstone		128				
perforations from	boulder, gravel & clay		149				
perforations from ft. to ft.	brown sandstone		164	Mark			
perforations from ft. to ft.	yellow clay		184	V			
perforations fromft. toft.	blue clay		217	168			
perforations from ft. to ft.	blue basalt	4	424	16801			
(E) COPERIO	gray clay & sand brown shale		580	168			
The Market Market Market	gray clay		587 605	1 62 8 10m			
Manufacturer's Name Model No.	brown clay		666	168			
Diam. Slot size Set from tt. to tt.	gray lava	222	687	168			
Diam. Slot size Set from ft. to ft.	red & gray bubbly lava	687	760	1680			
	soft gray sandstone		762	168			
(8) WATER LEVEL: Completed well. Static level 168 th below land surface Dat 5 / 31 / 60	hard gray basalt		764	168			
Art ready many autrace pare) / 11/09	red cinders & clay	764	765	168			
esian pressure lbs. per square inch Date				· .			
(9) WELL TESTS: Drawdown is amount water level is lowered below static level.							
(9) WELL TESTS: Drawdown is amount water level is lowered below static level bump Center Was a pump test made. Yes No. If yes, by whom?			-				
Yield: 1850 gal./min. with 17 ft. drawdown after 4 hrs.	Work started 3/6 1969 Complete	a 5/31		1969			
" " "	Date well drilling machine moved off of well 5	/31		1969			
" " "	Drilling Machine Operator's Certification:						
Bailer test gal./min. with ft. drawdown after hrs.	This well was constructed under my dir	ect superv	rision.	Mate-			
Artesian flow g.p.m. Date	rials used and information reported above knowledge and benef.	e are true	to my	y best			
Temperature of water 69 Was a chemical analysis made? ☐ Yes 🖔 No	I soll of	-	/				
	[Signed] (Drilling Machine Operator)	Date	1.13,	19.62.7			
(10) CONSTRUCTION:	Drilling Machine Operator's License No.	118					
Well seal—Material used Portland cement Depth of seal \$6** 19			***********	an hali dha dag			
Diameter of well bore to bottom of seal 20 in.	Water Well Contractor's Certification:						
Were any loose strata cemented off? See No Depth	This well was drilled under my jurisdic true to the best of my knowledge and belief	tion and t	his rep	ort is			
Was a drive shoe used? Yes No	used? Tyes Tyno NAME John A. Van Meter						
Did any strata contain unusable water? Yes You	(Person, firm or corporation)	(Type or					
Type of water? depth of strata Received	Address P.O. Box 204 Mali	n, Ore	gon	*******			
Method of sealing strata off	11/09 1	n /					
Was well gravel packed? Tyes W No Size of gravel 1 8 2021	[Signed] (Water Well Contract	Jeles)					
Gravel placed fromft, toft,	170 67	15		60			
(ITER ASSIALD)	Contractor's License No. 110 Date	-/	, 19	69			

Application for Water Right

Transfer

Evidence of Use Affidavit



 $O\ R\ E\ G\ O\ N \quad \hbox{Oregon Water Resources Department}$ 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 o	of Oregon)						
County	of <u>DESCHUTES</u>)			,	SS					
I, <u>BRYC</u>	E WITHERS, in	my ca	pacity as	s <u>WAT</u>	ER RIG	SHT SPE	CIALIST,			
mailin	g address <u>PO B</u>	OX 183	O BEND	, OR 9	7709					
teleph	one number 54	11-389	-2837, b	eing f	irst du	ıly swor	n depose	and say:		Received
1.	My knowledg	ge of th	e exerc	ise or	status	of the v	water rig	nt is based on	(check one):	JUN 18 2024
	Perso	onal ob	servatio	on		\boxtimes	Profess	ional expertis	se	
2.	I attest that:									OWRD
				_	ne pre	vious fiv	e years o	on the entire (place of use fo	r
			‡48022;							
	My k	nowled	dge is sp	ecific	to the	use of	water at	the following		in the last five years:
	Certificate #	Tow	nship	Rai	nge	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 <u>not</u> 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)									
					(co	ntinues	on reve	rse side)		

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

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.

Broth	4-23-24		
Signature of Affiant	Date		

Signed and sworn to (or affirmed) before me this 23 day of April, 2021.

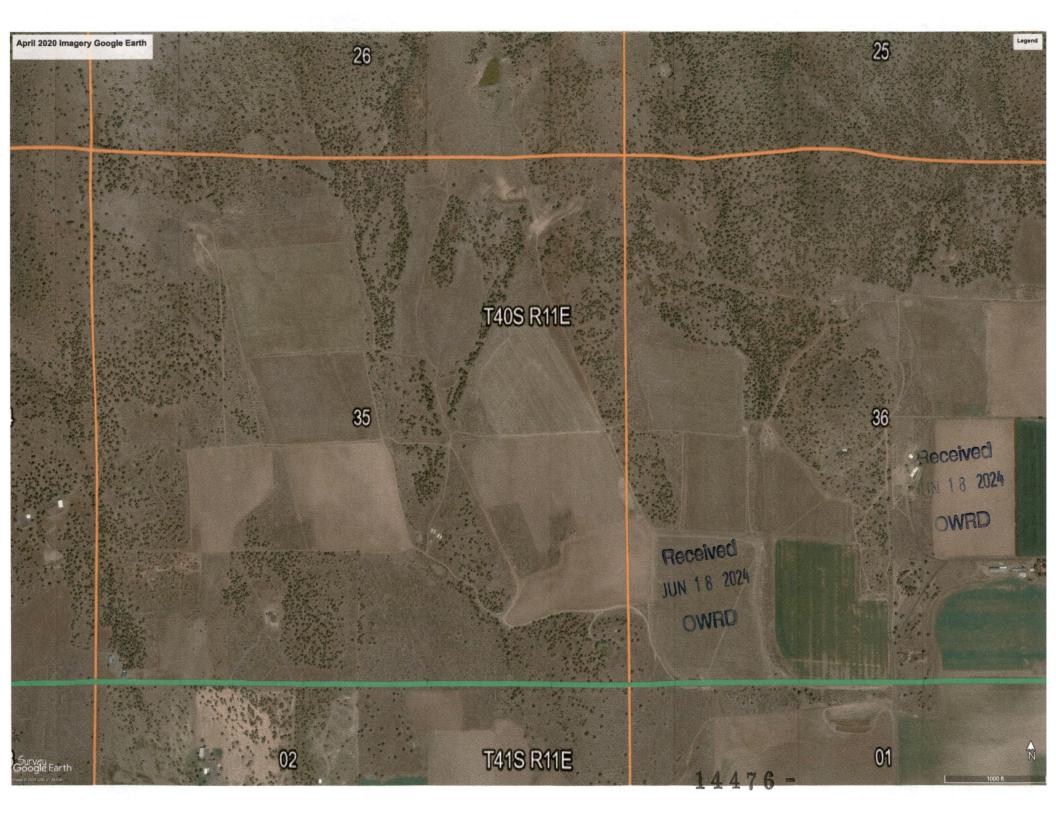


My Commission Expires: July 12, 2025

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 confirming 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 assessment records for water delivered
district records, NRCS farm management plan, or records of other water suppliers	Crop reports submitted under a federal loan agreement
records of other water suppliers	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.
Si s	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	Copy of instream lease or lease number
within the last 5 years	

Received

OWRD





Sincerely,

Kelly

Request for Map Scale Waiver 2 messages	
Bryce Withers For STARNES Patrick K * WRD <patrick.k.starnes@water.oregon.gov></patrick.k.starnes@water.oregon.gov>	Thu, Apr 4, 2024 at 8:48 AM
Hi Kelly,	
We would like to request approval of an alternative map scale for a Permanent Transfer Ap "TRANSFER "ON" MAP (2 of 2 Conveyance Map)" is drawn at 1"=2000'. The main map sh 1"=1320'. Thank you for your consideration.	
-	
Bryce Withers	
Water Right Specialist (541)408-1400 cell	
Water Right Services, LLC	
PO Box 1830 Bend, OR 97709	
https://oregonwater.us	
2 attachments	
UNRUH_TFR_MAP_ON.pdf 404K	
UNRUH_TFR_MAP_ON_2.pdf 417K	
STARNES Patrick K * WRD < Patrick.K.STARNES@water.oregon.gov> To: Bryce Withers < brycewrs@gmail.com>	Thu, Apr 4, 2024 at 9:15 AM
Good Morning Bryce,	
The Department grants a map scale waiver for the attached proposed place of use map .	
Please include a printed copy of this e-mail when you submit the transfer application.	

Received
JUN 18 2024

OWRD

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.

[Quoted text hidden]

Received
JUN 1 8 2024
OWRD