

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

OWRD



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

This permit amendment 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.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-18433
Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(For Staff Use Only)

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

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Part _____ is incomplete
<input type="checkbox"/> Additional signature(s) required	
Other/Explanation _____	
Staff: _____ 503- _____ Date: ____/____/____	

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Part 2 of 5 – Permit Amendment Map Checklist

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

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

- N/A If **more than three** permits are involved, separate maps for each permit.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water use permit, 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 permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
- N/A If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, 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 use permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Thomas A. MacDonald		PHONE NO. 541-815-4070	ADDITIONAL CONTACT NO. 541-943-3104
ADDRESS PO Box 87			FAX NO.
CITY Summer Lake	STATE OR	ZIP 97640	E-MAIL megan@desertspringstroutfarm.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCES FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Please see additional applicants listed at the end of this form.

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

AGENT/BUSINESS NAME Scott D Montgomery/All Points Engr & Surveying, Inc		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 5541-420-0401
ADDRESS PO Box 767			FAX NO.
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCES 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 permit amendment; and why:
Water user proposes additional wells to make watering system more flexible & potentially replace some auth wells.

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

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

Is the applicant the permit holder of record? Yes No

If NO, include either:

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), OR
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

Has the Completion ("C") Date of the permit(s) in this application expired? Yes No

If YES, this application will not be accepted by the Department.

If NO, what are the completion dates of the permit(s)? 10/1/2025

- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing of this Permit Amendment Application if the completion date of the permit expires within 6 months of the date of filing this application.

By my signature below, I confirm that I understand:

- Prior to Department approval of the permit amendment, 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 permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Lake County Examiner

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



Thomas MacDonald
Applicant Signature

Thomas MacDonald, Owner
Print Name (and Title if applicable)

_____ Date

[Signature]
Applicant Signature

Western State Steelhead, LLC 5-21-2024
Print Name (and Title if applicable) Date
Chris Seaward
Owner

[Signature]
Applicant Signature

Ag West Farm Credit FLCA 5/21/2024
Print Name (and Title if applicable) Date
Scott Callahan Authorized Signer

[Signature]
Applicant Signature

AgWest Farm Credit PCA 5/21/2024
Print Name (and Title if applicable) Date
Scott Callahan Authorized Signer

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Check one of the following:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.

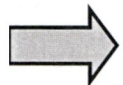
Check the appropriate box, if applicable:

- Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP



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

ENTITY NAME Lake County	ADDRESS 513 Center St	
CITY Lakeview	STATE OR	ZIP 97630

Part 5 of 5 – Water Use Permit Information

PERMIT # G-18433

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

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 3030	30 S	17 E	8	NE NW	600	390' S & 150' W from N ¼ cor, Sec 8

#2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 1507	30	S	17	E	8	NE	NW	600	480' S & 190' W from N ¼ cor, Sec 8
#3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 4444	30	S	17	E	8	NE	NW	600	525' S & 140' W from N ¼ cor, Sec 8
#4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 3029	30	S	17	E	8	NE	NW	600	340' S & 145' W from N ¼ cor, Sec 8
#5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 52367	30	S	17	E	5	SE	NW	600	3155' N & 220' W from S ¼ cor, Sec 5
#6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 52368	30	S	17	E	5	SW	SE	600	105' N & 250' E from S ¼ cor, Sec 5
#7	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 52369	30	S	17	E	8	NE	NW	600	180' S & 250' W from N ¼ cor, Sec 8
#8	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 52487	30	S	17	E	5	NW	SE	600	2010' N & 135' E from S ¼ cor, Sec 5
#9	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 53401	30	S	17	E	5	SE	SW	600	1040' N & 130' W from N ¼ cor, Sec 8
#10	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	8	NE	NW	600	330' S & 180' W from N ¼ cor, Sec 8
#11	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	8	NE	NW	600	550' S & 155' W from N ¼ cor, Sec 8
#12	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	SW	600	665' N & 10' W from S ¼ cor, Sec 5
#13	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	SW	600	550' N & 60' W from SW ¼ cor, Sec 5
#14	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	SW	600	425' N & 150' W from S ¼ cor, Sec 5325' N & 135' W from S ¼ cor, Sec 5
#15	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	SW	600	325' N & 135' W from S ¼ cor, Sec 5
#16	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	SW	600	270' N & 125' W from S ¼ cor, Sec 5
#17	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	SW	600	195' N & 170' W from S ¼ cor, Sec 5
#18	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	SW	600	100' N & 200' W from S ¼ cor, Sec 5
#19	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	SW	600	170' N & 320' W from S ¼ cor, Sec 5
#20	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT BUILT	30	S	17	E	5	SE	NW	600	2820' N & 620' W from S ¼ cor, Sec 5

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

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Surface water POD to Ground Water POA (SW/GW) |

Will all of the proposed changes affect the entire water use permit?

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

For a change in place of use:

Does the permit holder of record own or control the land TO which the place of use is being moved?

Yes No

If NO, the landowner of the land TO which the place of use is being **moved must be assigned to the permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? Yes No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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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

Table 2. Description of Changes to Water Use Permit # G-18433

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

AUTHORIZED (the "from" or "off" lands) 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 (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.											
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date			
									APOA	30	S	17	E	4	SW	SW			30.0 IS	#1 - #20	1987
									APOA	30	S	17	E	5	SW	SE				#1 - #20	1987
									APOA	30	S	17	E	5	SE	NW				#1 - #20	1987
									APOA	30	S	17	E	5	SE	NW			20.3 IR	#1 - #20	1987
									APOA	30	S	17	E	5	NE	SW			28.4 IR	#1 - #20	1987
									APOA	30	S	17	E	5	SE	SW			1.4 IR	#1 - #20	1987
									APOA	30	S	17	E	5	SW	NE			40.0 IS	#1 - #20	1987
									APOA	30	S	17	E	5	SE	NE			40.0 IS	#1 - #20	1987
									APOA	30	S	17	E	5	NE	SE			40.0 IS	#1 - #20	1987
									APOA	30	S	17	E	5	NW	SE			39.1 IS	#1 - #20	1987
									APOA	30	S	17	E	5	SW	SE			30.0 IS	#1 - #20	1987
									APOA	30	S	17	E	5	SE	SE			40.0 IS	#1 - #20	1987
									APOA	30	S	17	E	8	SW	NE				#1 - #20	1987

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										APOA	30	S	17	E	8	NE	NW					#1 - #20	1987
										APOA	30	S	17	E	8	SE	NW					#1 - #20	1987
										APOA	30	S	17	E	8	NW	NE					#1 - #20	1987
										APOA	30	S	17	E	8	NE	NE			40.0 IS		#1 - #20	1987
										APOA	30	S	17	E	8	NW	NE			33.0 IS		#1 - #20	1987
										APOA	30	S	17	E	8	SW	NE			11.0 IS		#1 - #20	1987
										APOA	30	S	17	E	8	SE	NE			31.0 IS		#1 - #20	1987
										APOA	30	S	17	E	9	SW	NE			2.0 IS		#1 - #20	1987
										APOA	30	S	17	E	9	NW	NW			36.0 IS		#1 - #20	1987
										APOA	30	S	17	E	9	SW	NW			32.0 IS		#1 - #20	1987
										APOA	30	S	17	E	9	SE	NW			30.0 IS		#1 - #20	1987
										APOA	30	S	17	E	9	NE	SW			31.0 IS		#1 - #20	1987
										APOA	30	S	17	E	9	NE	SE			0.5 IS		#1 - #20	1987
										APOA	30	S	17	E	9	NW	SE			28.0 IS		#1 - #20	1987
										APOA	30	S	17	E	9	SW	SE			20.0 IS		#1 - #20	1987
										APOA	30	S	17	E	9	SE	SE			16.0 IS		#1 - #20	1987
TOTAL ACRES										TOTAL ACRES										50.1 IR	569.6 IS		

Additional remarks: _____.

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

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



If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

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

- Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (**Tip:** You may search for well logs on the Department's web page at: http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx)

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
#1 - #9	See Well Logs									
#10	No	NA	400'	20"	#1' to -200'	0 to -100'	No		Clay	
#11	Same as #10									
#12	Same as #10									
#13	Same as #10									
#14	Same as #10									
#15	Same as #10									

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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
#16	Same as #10									
#17	Same as #10									
#18	Same as #10									
#19	Same as #10									
#20	No	NA	400'	12"	#1' to -200'	0 to -100'	No		Clay	

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2019-11-26 19:57:45 (GMT)

18883899037 From: Ethan Negus

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LAKE 1507



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

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Application for Well ID Number

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

I. OWNER INFORMATION

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Current Owner Name (please print): Summer Lake Trout Farm Attn: Ethan Negus

Mailing Address: PO Box 40

City, State, Zip: Summer Lake, OR 97640

Mail Well ID to: SAME AS ABOVE In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

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

Township: 30 (North/South) Range: 17 (East/West) Section: 8 NE 1/4 of the NW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 601 County Lake County

GPS Coordinates: 42 59' 21.51" N 120 43' 55.81" W

Street Address of Well, City: 48320 Desert Springs Rd Summer Lake

If the property had a different street address in the past: _____

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

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Fish culture & Irrigation

Date Well Constructed (or property built): 7-15-85 Total Well Depth: 296' Casing Diameter: 12"

Owner at time the well was constructed (if known): Robert Olson Well Report # (if known): LAKE 1507

Other Information: _____

SUBMITTED BY (please print): Ethan Negus

PHONE: (541) 943-3192 EMAIL &/or FAX: ethan.negus@desertspringstroutfarm.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

11-26-19

Well Report Number:

LAKE 1507

Well Identification #:

L-137012

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

LAKE 1507

RECEIVED

Lake 1507

30S 17E-866

FEB 2 1986 TYPE or PRINT IN INK Per Wm. T. R.S. (for official use only)

(1) OWNER: WATER RESOURCES DEPT
Name ROBERT OLSON SALEM, OREGON
Address SUMMER LAKE
City State OR.

(2) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):
Rotary Air Driven Domestic Industrial Municipal
Rotary Mud Dug Irrigation Thermal: Withdrawal ReInjection
Cable Bored Other: Piezometric Grounding Test

(5) CASING INSTALLED: Steel Plastic
Threaded Welded
12" Diam. from +1 ft. to 60 ft. Gauge 250

LINER INSTALLED: Steel Plastic
Threaded Welded
" Diam. from ft. to ft. Gauge

(6) PERFORATIONS: Perforated? Yes No
Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS: Well screen installed? Yes No
Manufacturer's Name
Type Model No.
Diam. Slot Size Set from ft. to ft.
Diam. Slot Size Set from ft. to ft.

(8) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
gal./min. with ft. drawdown after hrs.
Air test gal./min. with drill stem at ft. hrs.
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow 1960 g.p.m.
perature of water 60° Depth artesian flow encountered 241 ft.

(9) CONSTRUCTION: Special standards: Yes No
Well seal—Material used CEMENT GROUT
Well sealed from land surface to 55 ft.
Diameter of well bore to bottom of seal 16 in.
Diameter of well bore below seal 12 in.
Amount of sealing material 118 sacks pounds
How was cement grout placed? PUMPED
Was pump installed? NO Type HP Depth ft.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of Water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: ft.
Gravel placed from ft. to ft.

(10) LOCATION OF WELL by legal description:
County LAKE NE 1/4 NW 1/4 of Section 8 of
Township 30 Range 17 WM.
(Township is North or South) (Range is East or West)
Tax Lot Lot Block Subdivision
MAILING ADDRESS OF WELL (or nearest address) SUMMER LAKE

(11) WATER LEVEL of COMPLETED WELL:
Depth at which water was first found 55 ft.
Static level ft. below land surface. Date
Artesian pressure 5 lbs. per square inch. Date 6-30-85

(12) WELL LOG: Diameter of well below casing 12"
Depth drilled 296 ft. Depth of completed well 296 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
SANDY SOIL	0	3	
TAN CLAY	3	55	2'
SAND, FINE	55	56	
CLAY, GREEN	56	241	+1
BOULDERS, RED, POUROUS	241	296	

Date work started 4-15-85/completed 6-30-85
Date well drilling machine moved off of well 7-15-1985

(unbonded) Water Well Constructor Certification (if applicable):
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Date, 19

(bonded) Water Well Constructor Certification:
Bond SB 41670 Issued by: O.A.I.C.
(number) (Surety Company Name)
On behalf of FLOYD BAKER
(type or print name of Water Well Constructor)

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief:
(Signed) Floyd Baker (Water Well Constructor)
(Dated) 2-20-86

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

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion. SP*4686-690 14482 -

LAKE 1507

Well #2

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

RECEIVED

Lake 1507

302/17E-8bb

FEB 2 1988 TYPE or PRINT IN INK Per Wm. T. R.S. (for official use only)

(1) OWNER: WATER RESOURCES DEPT
Name ROBERT OLSON SALEM, OREGON
Address SUMMER LAKE
City _____ State OR

(10) LOCATION OF WELL by legal description:
County LAKE NE NW 1/4 of Section 8 of
Township 30 Range 17 WM
Tax Lot _____ Lot _____ Block _____ Subdivision _____
MAILING ADDRESS OF WELL (or nearest address) SUMMER LAKE

(2) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: Rotary Air Driven
Rotary Mud Aug
Cable Bored
(4) PROPOSED USE (check): Domestic Industrial Municipal
Irrigation Withdrawal Rejection
Other: Piezometric Grounding Test

(11) WATER LEVEL of COMPLETED WELL:
Depth at which water was first found 55 ft.
Static level _____ ft. below land surface. Date _____
Artesian pressure 5 lbs. per square inch. Date 6-30-85

(5) CASING INSTALLED: Steel Plastic
Threaded Welded
12" Diam from +1 ft to 60 ft Gauge 250
" Diam from _____ ft to _____ ft Gauge _____

(12) WELL LOG: Diameter of well below casing 12"
Depth drilled 296 ft. Depth of completed well 296 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata

LINER INSTALLED: Steel Plastic
Threaded Welded
" Diam. from _____ ft. to _____ ft. Gauge _____

MATERIAL	From	To	SWL
SANDY SOIL	0	3	
TAN CLAY	3	55	2'
SAND, FINE	55	56	
CLAY, GREEN	56	241	+1
BOULDERS, RED, POROUS	241	296	

(6) PERFORATIONS: Perforated? Yes No
Size of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS: Well screen installed? Yes No
Manufacturer's Name _____ Model No. _____
Type _____ Slot Size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
_____ gal./min. with _____ ft. drawdown after _____ hrs.
Air test _____ gal./min. with drill stem at _____ ft. _____ hrs.
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow 1960 g.p.m.
Temperature of water 60° Depth artesian flow encountered 241 ft.

(9) CONSTRUCTION: Special standards: Yes No
Well seal—Material used CEMENT GROUT
Well sealed from land surface to 55 ft.
Diameter of well bore to bottom of seal 16 in.
Diameter of well bore below seal 12 in.
Amount of sealing material 118 sacks pounds
How was cement grout placed? PUMPED

Date work started 4-15-85/completed 6-30-85
Date well drilling machine moved off of well 7-15-85
(unbonded) Water Well Constructor Certification (if applicable):
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] _____ Date _____, 19 _____

Was pump installed? NO Type _____ HP _____ Depth _____ ft.
Was a drive shoe used? Yes No Plug _____ Size location _____ ft.
Did any strata contain unusable water? Yes No
Type of Water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(bonded) Water Well Constructor Certification:
Bond 5841670 Issued by O.A.T.C. (number) (Surety Company Name)
On behalf of FLOYD BAKER (type or print name of Water Well Constructor)
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
[Signed] Floyd Baker (type or print name of Well Constructor)
[Dated] 2-20-86

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

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

SP 46866-690

RECEIVED BY OWRD

APR 24 2014

SALEM, OR 14482 -

LAKE 3029



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

Received
JUN 20 2024
OWRD

Application for Well ID Number

RECEIVED

NOV 26 2019

OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): Summer Lake Trout Farm Attn: Ethan Negus
Mailing Address: PO Box 40
City, State, Zip: Summer Lake, OR 97640
Mail Well ID to: SAME AS ABOVE In Care Of (C/O)
Name & Address: _____
City, State, Zip: _____

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

Township: 30 (North/South) Range: 17 (East/West) Section: 8 NE 1/4 of the NW 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 601 County Lake County
GPS Coordinates: 42 59' 23.24" N 120 43' 55.76" W
Street Address of Well, City: 48320 Desert Springs Rd Summer Lake
If the property had a different street address in the past: _____

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

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Fish culture & Irrigation
Date Well Constructed (or property built): 4-15-88 Total Well Depth: 310' Casing Diameter: 12"
Owner at time the well was constructed (if known): Robert Olson Well Report # (if known): LAKE 3029
Other Information: _____

SUBMITTED BY (please print): Ethan Negus
PHONE: (541) 943-3192 EMAIL &/or FAX: ethan.negus@desertspringstroutfarm.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

11-26-19

Well Report Number:

LAKE 3029

Well Identification #:

L-137014

LAKE 3029

Well #4

RECEIVED

Lake 3029

302/16E-8aa

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

JUL - 1 1988

(1) OWNER: **WATER RESOURCES DEPT #4**
Name **ROBERT OLSON** SALEM, OREGON
Address **P/O BOX 40**
City **SUMMER LAKE** State **OR** Zip **97640**

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other **FISH HATCHERY**

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well **310** ft.
Explosives used Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Amount
16"	0	120	CEMENT	0	120	210 SACK
12"	120	245	GROUT			
8"	245	310				

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

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	0	160	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min **2100** Drawdown _____ Drill stem at _____ Time 1 hr.

Temperature of water **60** Depth Artesian Flow Found **245**
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Murky Odor Colored Other _____
Depth of strata **7'**

(9) LOCATION OF WELL by legal description:
County **LAKE** Latitude _____ Longitude _____
Township **30** N of Range **16** W of W. WM
Section **8** NE 1/4 **NEKY**
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) **SUMMER LAKE**

(10) STATIC WATER LEVEL:
_____ ft. below land surface. Date _____
Artesian pressure **17** lb. per square inch. Date **4-15-88**

(11) WATER BEARING ZONES:
Depth at which water was first found **7** FT

From	To	Estimated Flow Rate	SWL
7'	8'		3'
245	310	2100	+2

(12) WELLOG: Ground elevation _____

Material	From	To	SWL
SOIL, BROWN SANDY	0	7	7'
CLAY - GREEN	7	53	7'
CLAY - TAN	53	245	+2
CINDERS - SAND, RED	245	246	+2
LAVA BOULDERS, LARGE	246	308	+2
CINDERS, RED	308	310	+2

Date started **11-10-87** Completed **4-15-88**

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

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.
Signed **Elmer Bates** WWC Number **1262** Date **6-24-88**

WHITE COPIES - WATER RESOURCES DEPARTMENT YELLOW COPY - CONSTRUCTOR PINK COPY - CUSTOMER 9809C 10/86

Received
JUN 20 2024
OWRD

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APR 24 2014
SALEM, OR

14482 -

LAKE 4444

Well #3

30s/16E-8aa

Lake 4444

**STATE OF OREGON
WATER WELL REPORT**
(as required by ORS 537.785)

JUL - 1 1988

WATER RESOURCES DEPARTMENT
Well Number OLSON 245

(1) OWNER:
Name ROBERT OLSON
Address P/O Box 40
City SUMMER LAKE State OR Zip 97640

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Normal Injection Other FISH HATCHERY

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 262 ft
Explosives used Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks	pounds
16"	0 120	GROUT	0 120	165	
12"	120 262				

How was seal placed: Method A B C D E.
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	0	160	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____

2100			1 hr.
------	--	--	-------

Temperature of water 60 Depth Artesian Flow Found 245

Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little

Sultry Muddy Odor Colored Other _____
Depth of strata: ONE FOOT

(9) LOCATION OF WELL by legal description:
County LAKE Latitude _____ Longitude _____
Township 30 N or S Range 16 E or W, WM.
Section 8 NE ¼ MEAY ¼
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) SUMMER LAKE

(10) STATIC WATER LEVEL:
_____ ft. below land surface. Date _____
Artesian pressure 17 lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWL
1'	7'		1'
245	262	2100	+2'

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
SOIL, SANDY BROWN	0	7	1'
CLAY, GREEN	7	63	1'
CLAY - TAN	63	245 + 2'	
CINDERS - SAND, RED	245	246 + 2'	
BOULDERS, LAVA, LARGE	246	261 + 2'	
CINDERS - SAND, RED	261	262 + 2'	

Received
JUN 20 2024
OWRD

Date started 5-15-87 Completed 10-20-87

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

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 1352
Signed Flayel a Baker Date 6-24-88

RECEIVED BY OWRD

APR 24 2014
SALEM, OR

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.

LAKE 52367 #1
Well #1

WELL LABEL # L 103926

START CARD # 206438

ORIGINAL LOG #

(1) LANDOWNER

Owner Well I.D. _____
First Name Thomas Last Name Arnold
Company _____
Address PO Box 97
City Summers Lake State OR Zip 97640

(2) TYPE OF WORK

New Conversion Deepening
 Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a)

(2a) PRE-ALTERATION:

Well Depth _____ ft.
Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

(3) DRILL METHOD

Rotary Air Rotary Mud Auger
 Cable Cable Mud Reverse Rotary Other _____

(4) PROPOSED USE

Domestic Irrigation Community
 Industrial/Commercial Livestock Dewatering Injection
 Thermal Other _____

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 420 ft. Special Standard: Yes (attach copy)

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amount	Scks/lbs
20"	0	219	Cement	0	219	200	50K
12"	219	420					

How was seal placed. Method A B C D E
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:

Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Casing/Liner	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
<input checked="" type="checkbox"/>	12"	+1	219	420	.750	X		X	

Shoe Inside Outside Other Location of shoe(s) _____
Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
Screens Type _____ Material _____

Perf	Screen	Casing/Liner	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size

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

Pump Bailor Air Flowing Artesian

Yield gal/min 1000 gal Drawdown _____ Drill stem/Pump depth 470 Duration (hr) _____

Temperature 51 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below) TDS _____ ppm

From	To	Description	Amount	Unit

(9) LOCATION OF WELL (legal description)

County Lake Twp 30 N or S Range 17 E or W W.M.
Sec 5 SE 1/4 of the NW 1/4 Tax Lot 600
Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD

Street Address of Well (or nearest address) 48413 Dessert Springs Rd Summers Lake OR 97640

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Pre-Alteration	<u>9-25-10</u>			<u>Land</u>
Completed Well				<u>Surf</u>

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

SWL Date	From	To	Est Flow	SWL (psi)	SWL (ft)
	<u>225</u>	<u>250</u>	<u>1000 gpd</u>		

(11) WELL LOG

Material	From	To
TOP Soil	0	2
Black clay	2	100
Blue clay	100	120
Gray clay	120	165
Black clay	165	195
Blue clay	195	225
Sand gravel UD	225	250
Gray clay	250	290
Blue clay	290	300
Gray clay	300	380
Black clay	380	395
Blue clay	395	420

Date Started 8-31-10 Completed 9-25-10

(unbonded) Water Well Constructor Certification

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

License Number _____ Date JUN 20 2024

Signed _____ OWRD

(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 1654 Date 10-10-11

Signed Thomas
Contact Info. (optional)

Search drilling INC
TOM Search
541-576-2189
WATER RESOURCES DEPT
SALEM, OREGON
MAY 1 2012
RECEIVED

ORIGINAL - WATER RESOURCES DEPARTMENT ONE COPY FOR CONSTRUCTOR ONE COPY FOR CLERK
SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK



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

Received
JUN 20 2024
OWRD

Application for Well ID Number

DEC 10 2019

OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): Western Development Group, LP - Attention: Bernie Burkholder
Mailing Address: PO Box 40
City, State, Zip: Summer Lake, OR 97640
Mail Well ID to: SAME AS ABOVE In Care Of (C/O)
Name & Address: _____
City, State, Zip: _____

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

Township: 30 S (North / ~~South~~) Range: 17 E (~~East~~ / West) Section: 5 SW 1/4 of the SE 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 600 County Lake
GPS Coordinates: 42 59' 28.27" N 120 43' 50.53" W
Street Address of Well, City: 48413 Desert Springs Rd Summer Lake
If the property had a different street address in the past: _____

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

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Fish culture and Irrigation
Date Well Constructed (or property built): 10-28-10 Total Well Depth: 260' Casing Diameter: 12"
Owner at time the well was constructed (if known): _____ Well Report # (if known): Lake 52368
Other Information: Previously assigned Well I.D. Label # L103897 has been lost

SUBMITTED BY (please print): Ethan Negus
PHONE: (541) 943-3192 EMAIL &/or FAX: ethan.negus@desertspringstroutfarm.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.
Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

** Replacement tag!*

For Official Use Only by the Oregon Water Resources Department:		
Received Date: <u>12-10-19</u>	Well Report Number: <u>LAKE 52368</u>	Well Identification #: <u>L-137024</u>

LAKE 52368

Well #6

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

LAKE 52368
Well #2
LAKE 52368
AM TALKED

L 137024

WELL LABEL # ~~103897~~ TAG LOST!
START CARD # ~~206439~~
ORIGINAL LOG #

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

(1) LANDOWNER
Owner Well I.D.
First Name Thomas Last Name McDaniel
Company _____
Address PO Box 87
City Summer Lake State OR Zip 97140

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

(2a) PRE-ALTERATION: Well Depth _____ ft.
Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

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

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

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 260 ft. Special Standard: Yes (attach copy)

BORE HOLE			SEAL			Amount	Scks/lbs
Dia	From	To	Material	From	To		
24"	0	39	Cement	0	39	80	5CK
18"	39	210	Cement	210	210	150	5CK
12"	210	260					

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft to _____ ft Material _____
Filter pack from _____ ft to _____ ft Material _____ Size _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Csg/Linr	Dia	From	To	Gauge	Steel	Plastic	Welded	Thrd
X	16"	0	39	.250	X		X	
X	12"	3	270	.250	X		X	

Shoe Inside Outside Other Location of shoe(s) _____
Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
Screens Type _____ Material _____

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min 1000. Drawdown 260 Drill stem/Pump depth _____ Duration (hr) _____
Temperature 60 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS _____ ppm
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)
County LAKE Twp 30 N or S Range 17 E or W W.M.
Sec 5 NW NW 1/4 of the _____ 1/4 Tax Lot 600
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
Street Address of Well (or nearest address) 48413 Dessenit
SPRING RD Summer Lake OR 97140

(10) STATIC WATER LEVEL

Existing Well/Pre-Alteration	Date	SWL (psi)	+	SWL (ft)
Completed Well	<u>10-28-10</u>	<u>2 PSI</u>		

Flowing Artesian? Yes Dry Hole? Yes
WATER BEARING ZONES Depth water was first found 23'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
	<u>10</u>	<u>25</u>	<u>25 gal</u>			

(11) WELL LOG Ground Elevation _____

Material	From	To
TOP SOIL	0	6
BLACK CLAY	6	120
Gray Clay	120	180
Blue Clay	180	225
Gray Basalt	225	260
Red CLAY		

RECEIVED RECEIVED BY OWRD
MAR 13 2012 JUL 12 2012
WATER RESOURCES DEPT
SALEM, OREGON SALEM, OR
Date Started 9-28-10 Completed 10-28-10

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number _____ Date _____
Signed _____ JUN 20 2012

(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 1654 Date 10-12-11
Signed [Signature]
Contact Info (optional)
Search Drilling INC
70M Search 501-576-2189

ORIGINAL - WATER RESOURCES DEPARTMENT ONE COPY FOR CONSTRUCTOR ONE COPY FOR OWRD
SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

APR 24 2014

14482 -

SALEM, OR

Received
JUN 20 2024
OWRD

LAKE 52369

Well #7

Amended
LAKE 52369
Well #7

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

WELL LABEL # LC 103998
START CARD # 206440
ORIGINAL LOC #

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

(1) LANDOWNER
First Name Thomas Last Name Mac Donnell
Company
Address PO Box 87
City Summer Lake State OR Zip 97640

(9) LOCATION OF WELL (Legal description)
County Lake Twp 30 N or S Range 17 E or W W.M.
Sec 5 1/4 of the 1/4 Tax Lot 600
Tax Map Number _____ Lat _____ Long _____ DMS or DD

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

Street Address of Well (or nearest address) 48413 Dessert Spring Rd Summer Lake OR 97640

(2a) PRE-ALTERATION: Well Depth _____ ft.
Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

(10) STATIC WATER LEVEL
Existing Well/Pre-Alteration Date 2-5-11 SWL (psi) 4 PSI + SWL (ft) _____
Completed Well _____
Flowing Artesian? Yes No Dry Hole? Yes No
WATER BEARING ZONES Depth water was first found 60

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

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
	150	100	500 gal		1'

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

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 300 ft. Special Standards: Yes (attach copy)

BORE HOLE			SEAL		
Dia	From	To	Material	From	To
12"	0	100	Cement	0	100
12"	100	310			

(11) WELL LOG Ground Elevation _____

Material	From	To
TOP SOIL	0	2
CLAY	2	10
BLACK CLAY WITH	10	35
SHALE	35	65
GREEN CLAY	65	105
CLAY	105	170
Lake Rock	170	240
Red Basalt	240	260
Black Lava Rock	260	300
Red Clifton	300	310

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

Date Started 10-30-10 Completed 3-5-11

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: _____ sacks/ft.
Actual Amount Used: _____ sacks/ft.

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

(6) CASING/LINER

Casing/Liner	Dia	From	To	Gauge	Steel	Plastic	Weighted	Thrd
X	12"	0	100	1.250	X			X

License Number _____ Date _____
Signed _____

Shoe Inside Outside Other Location of shoe(s) _____
Temporary casing Yes Diameter _____ From _____ To _____

(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.

(7) PERFORATIONS/SCREENS

Perf	Screen	Casing/Liner	Screen Dia	From	To	Screen slot width	Slot length	# of slots	Total pipe size
------	--------	--------------	------------	------	----	-------------------	-------------	------------	-----------------

License Number 1654 Date 10-12-11
Signed Tom Search

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield (gpm) _____ Drawdown _____ Drift (ft)/Pump depth _____ Duration (hr) _____
Temperature 60 °F Lab analysis Yes No
Water quality concerns? Yes (describe below) TDS _____ ppm
From _____ To _____ Description _____ Amount _____ Units _____

Contact Info (optional)
Search drilling INC
Tom Search
541 576-2189

ORIGINAL - WATER RESOURCES DEPARTMENT ONE COPY FOR CONSTRUCTOR ONE COPY FOR CUSTOMER
SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

P. 1-3 94515762189 69415762189 12:34 FROM: TOM

RECEIVED
MAY 1 2012
WATER RESOURCES DEPARTMENT
SALEM, OREGON
APR 24 2012

14482 -

SALEM, OR

DRAFT

LAKE 52487

LAKE 52487

REPORT
(0210)

WELL LABEL # L 104458

START CARD # 20641

ORIGINAL LOG #

This report are on the last page of this form.

(1) LANDOWNER

Owner Well I.D. _____
First Name Thomas Last Name MacDaid
Company _____
Address Po Box 8-1
City Sumner Lake State CA Zip 97640

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

(2a) PRE-ALTERATION: Well Depth _____ ft.

Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

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

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

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 260 ft. Special Standard: Yes (attach copy)

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amount	Scks/lbs
2 1/2"	0	90	Cement	0	90	100	5K
1 1/2"	90	155	Cement	90	155	100	5K
1 1/4"	155	200					
1 1/8"	200	260					

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

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:

Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Casing/Liner	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X	18"	+	1	90	.250	X		X	
X	14"	+	1	155	.250	X		X	

Shoe Inside Outside Other Location of shoe(s) _____
Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
Screens Type _____ Material _____

Perf	Screen	Casing/Liner	Screen Dia	From	To	Screen/ slot width	Slot length	# of slots	Tele/ pipe size

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

Pump Bailer Air Flowing Artesian
Yield gal/min 1500 Drawdown _____ Drill stem/Pump depth _____ Duration (hr) hr 1
Temperature 60' °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS _____ ppm
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)

County Lake Twp 30 N or S Range 17 E or W W.M.
Sec 5 SE 1/4 of the 12 1/4 Tax Lot 600
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD

Street Address of Well (or nearest address) 48413 Dessler
Spring rd Sumner Lake

(10) STATIC WATER LEVEL.

Existing Well/Pre-Alteration	Date	SWL(psi)	+	SWL (ft)
Completed Well	<u>9-1-13</u>	<u>4 psi</u>		

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found 260'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>9-1-13</u>	<u>220</u>	<u>260</u>	<u>1500</u>	<u>4 psi</u>		

(11) WELL LOG

Material	From	To
<u>TOP SOIL</u>	<u>0</u>	<u>2</u>
<u>Brown clay</u>	<u>2</u>	<u>150</u>
<u>Black lava rock</u>	<u>150</u>	<u>165</u>
<u>Red lava rock</u>	<u>165</u>	<u>220</u>
<u>Blue lava rock</u>	<u>220</u>	<u>260</u>

Date Started 8-15-13 Completed 9-1-13

(unbonded) Water Well Constructor Certification

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

License Number _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

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

License Number 16511 Date 10-6-13

Signed [Signature] Received

Contact Info. (optional)

JUN 20 2024

14482 -
OWRD

LAKE 52487

Amended

Well #8

LAKE 52487

LAKE 52487

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

WELL LABEL # L 10458
START CARD # 206041
ORIGINAL LOG #

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

(1) LANDOWNER Owner Well ID
First Name Thomas Last Name MacDonald
Company _____
Address Po Box 51
City Summer Lake State OR Zip 97140

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

(2a) PRE-ALTERATION: Well Depth _____ ft.
Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

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

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

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 260 ft. Special Standard: Yes (attach copy)

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amount	Scks/lbs
2 1/2"	0	90	Leban	0	90	100	50
1 1/2"	90	155	Leban	90	155	100	50
1 1/4"	155	200					
1 1/4"	200	260					

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

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Casing/Liner	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X	1 1/2"	+	1	90	.250	X		X	
X	1 1/4"	+	1	155	.250	X		X	

Shoe Inside Outside Other Location of shoe(s) _____
Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____

Perf	Screen	Casing/Liner	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min _____ Drawdown _____ Drill stem/Pump depth _____ Duration (hrs) _____
Temperature 60 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS _____ ppm
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)
County Lake Twp 30 N or S, Range 17 E or W, W.M.
Sec 5 ~~EA~~ of the 56 Tax Lot 600
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD

Street Address of Well (or nearest address) 48413 D+SS rd
Spring rd Summer Lake

(10) STATIC WATER LEVEL:

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Pre-Alteration	<u>7-1-13</u>	<u>4 psi</u>		
Completed Well				

Flowing Artesian? Yes Dry Hole? Yes
WATER BEARING ZONES Depth water was first found 260'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>7-1-13</u>	<u>270</u>	<u>260</u>	<u>1500</u>	<u>4 psi</u>		

(11) WELL LOG Ground Elevation _____

Material	From	To
<u>767 Soil</u>	<u>0</u>	<u>2</u>
<u>Black Lava Rock</u>	<u>2</u>	<u>150</u>
<u>Red Lava Rock</u>	<u>150</u>	<u>165</u>
<u>Black Lava Rock</u>	<u>165</u>	<u>220</u>
<u>Black Lava Rock</u>	<u>220</u>	<u>260</u>

RECEIVED BY OWRD
RECEIVED BY OWRD
OCT 10 2013
NOV 18 2013
SALEM, OR
Date Started 8-15-13 Completed 9-1-13

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

License Number _____ Date _____
Signed _____

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

License Number 16541 Date 10-6-13
Signed [Signature]
Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT ONE COPY FOR CONSTRUCTOR ONE COPY FOR CUSTOMER
SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

RECEIVED BY OWRD

Received
JUN 20 2024
OWRD

APR 24 2014

SALEM, OR

STATE OF OREGON
WATER SUPPLY WELL REPORT

LAKE 53401

WELL I.D. LABEL# L 152529

START CARD # 1048876

12/20/2023

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

(1) LAND OWNER
 Owner Well I.D. #9
 First Name _____ Last Name _____
 Company WESTERN DEVELOPMENT GROUP LP
 Address 2012 BAYOU LAPORTE DR
 City BILOXI State MS Zip 39531

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

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

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

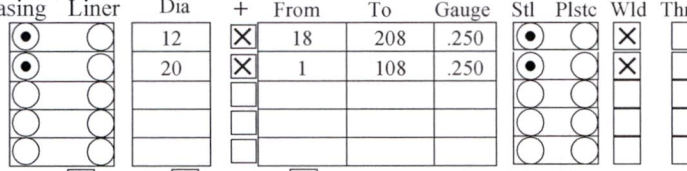
(4) PROPOSED USE
 Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 320.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
26	0	108	Cement	0	108	1210 S
20	108	208			Calculated	10
12	208	285				
8	285	320			Calculated	

Seal placement method: A B C D E Other: _____
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Type _____ Amount _____
 Seal Placement Begin Date 11/14/2023 Begin Time 11:00

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

(6) CASING/LINER
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld

 Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia _____ From + _____ To _____

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

5000		320	1

 Temperature 60 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 296 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
 County LAKE Twp 30.00 S N/S Range 17.00 E E/W WM
 Sec 5 NW 1/4 of the SE 1/4 Tax Lot 600
 Tax Map Number _____ Lot _____
 Lat _____ " or 42.99462254 DMS or DD
 Long _____ " or -120.73103480 DMS or DD
 Street address of well Nearest address
 48413 DESERT SPRING RD SUMMER LAKE

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	12/7/2023	4	9.2

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 165.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
12/7/2023	210	320	2700	4	

(11) WELL LOG Ground Elevation 4241.21 FT

Material	From	To
Top soil	0	2
Brown clay	2	15
Blue clay	15	32
Black clay	32	72
Gray clay with pumice	72	110
Green clay	110	126
Light brown clay	126	137
Reddish brown clay	137	185
Lava rock	185	191
Red lava rock	191	193
Lava rock some fractures	193	208
fractured lava rock	208	215
Broken lava rock red	215	221
Broken lava rock	221	320

Received JUN 20 2024 OWRD

Construction Begin Date 9/4/2020 Begin Time 08:00 End Date 12/7/2023

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

(bonded) Water Well Constructor Certification
 I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
 License Number 1654 Date 12/20/2023
 Signed TOM SEARCH (E-filed) 14482 -
 Contact Info (optional) Tom search 541 576 2189

Land Use Information Form



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

Applicant(s): Tom MacDonald

Mailing Address: PO Box 87

City: Summer Lake

State: OR

Zip Code: 97640

Daytime Phone: 541-815-4070

A. Land and Location

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

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
30S	17E	4	SW SW	600	Farm Use	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	5	SW NE	1001	Farm Use	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	5	SE NE	2001	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	5	SE NW	1001	Farm Use	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
30S	17E	5	NE SW	601	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>IR</u>
30S	17E	5	SE SW	601	Farm Use	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
30S	17E	5	NE SE	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	5	NW SE	600 & 700	Farm Use	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	5	SW SE	600	Farm Use	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS & FC
30S	17E	5	SE SE	600	Farm Use	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	8	NE NE	600	Farm Use	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	8	NW NE	600	Farm Use	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS & FC
30S	17E	8	SW NE	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	8	SE NE	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	8	NE NW	601	Farm Use	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	9	SW NE	600	Farm Use	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	9	NW NW	600	Farm Use	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	9	SW NW	600	Farm Use	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	9	SE NW	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	9	NE SW	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	8	NE SE	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	8	NW SE	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	9	SW SE	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
30S	17E	9	SE SE	600	Farm Use	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS

Received

WR / FS

JUN 20 2024

OWRD 14482 -

For Local Government Use Only

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

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water use(s), including proposed construction, are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): Yackie County Zoning Ordinance Article 3.
- Land uses to be served by the proposed water use(s), including proposed construction, involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being Pursued."**

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

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

Existing use expansion.

Name: DARWIN JOHNSON Title: Planning Director
 Signature: [Signature] Date: 23 Feb 2024
 Governmental Entity: LAKE COUNTY Planning Department Phone: 541-942-6086

Receipt Acknowledging Request for Land Use Information	
Note to Local Government Representative: Please complete this form and return it to the applicant. For new water right applications only, if you are unable to complete this form while the applicant waits, you may complete this receipt and return it to the applicant. If you sign the receipt, you will have 30 days from the date of OWRD's Public Notice of the application to submit the completed Land Use Information Form to Oregon Water Resources Department. Please note while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for all other applications.	
Applicant Name: _____	
Staff Name: _____	Title: _____
Staff Signature: _____	Date: _____
Governmental Entity: _____	Phone: _____

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

Lake

B. Description of Proposed Use

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

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

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

Estimated quantity of water needed: 17.8 cubic feet per second gallons per minute acre-feet

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

Municipal Quasi-Municipal Instream Other Fish Culture

Briefly describe:

Propose additional wells to make watering system more flexible & potentially replace some auth wells.

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. →

Received
JUN 20 2024

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