

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist



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

This 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)

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- 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-17493
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"/> Additional signature(s) required
<input type="checkbox"/> Other/Explanation _____	<input type="checkbox"/> Part _____ is incomplete

Staff: _____ 503- _____ Date: ____/____/____

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.

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- 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°).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME RB Webber Development LLC		PHONE NO. 541-740-8195	ADDITIONAL CONTACT NO. 541-924-9756
ADDRESS 3430 NW Springill Dr.			FAX NO. 541-924-9866
CITY Albany	STATE OR	ZIP 97321	E-MAIL kweb@peak.org
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME Will McGill Surveying, LLC		PHONE NO. 503-931-0210	ADDITIONAL CONTACT NO. 503-510-3026
ADDRESS 15333 Pletzer Rd. SE			FAX NO.
CITY Turner	STATE OR	ZIP 97392	E-MAIL willmcgill.surveying@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this permit amendment; and why:
Permit G-17493 authorized four wells. An extension of time for completion was issued April 5, 2024. The extension required a permit amendment be filed prior to January 2, 2025 to authorize drilled wells. Well 4 was drilled in the correct location. It is proposed to authorize Wells 5, 6, and 7 as APOAs.

Add Well 5: L-123904, LINN 61766 completed 8/12/2016, LINN 64287 deepening of original well and completed 8/7/2023

Add Well 6: L-123907, LINN 61767 completed 9/8/2016, LINN 64290 deepening of original well and completed 8/7/2023

Add Well 7: L-152757, LINN 64531 completed 8/5/2024

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)? _____

- 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.

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TACS

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: Lebanon Express



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

Kim A. Webber
Applicant Signature

Kim A. Webber
Print Name (and Title if applicable)

11-22-24
Date

Applicant Signature

Print Name (and Title if applicable)

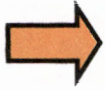
Date

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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: Lebanon Express



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

R.B. Development LLC
Applicant Signature

KAW / Sec.
Print Name (and Title if applicable)

11-22-24
Date

Applicant Signature

Print Name (and Title if applicable)

Date

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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.

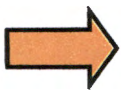
Check the appropriate box, if applicable:

- 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 Grand Prairie Water Control District	ADDRESS 719 9th Ave. SW	
CITY Albany	STATE OR	ZIP 97321

- 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	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 Linn County	ADDRESS 300 SW 4th Ave.	
CITY Albany	STATE OR	ZIP 97321

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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PERMIT # G-17493

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)
Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		11	S	3	W	2	SE	SE	41	3920' S & 2595' W of NE corner, Miller DLC 41
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		11	S	3	W	2	NE	SE	41	1980' S & 2595' W of NE corner, Miller DLC 41
Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		11	S	3	W	1	NE	SW	41	2630' S & 10' W of NE corner, Miller DLC 41
Well 4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LINN 64532	11	S	3	W	1	SE	SW	41	3920' S & 10' W of NE corner, Miller DLC 41
Well 5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 61766/ 64287	11	S	3	W	1	SW	SW	41	3920' S & 1290' W of NE corner, Miller DLC 41
Well 6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 61767/ 64290	11	S	3	W	2	SE	SE	41	3170' S & 2595' W of NE corner, Miller DLC 41
Well 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 64531	11	S	3	W	1	NE	NW	60	100' N & 10' W of NE corner, Miller DLC 41

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?

- 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.

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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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Table 2. Description of Changes to Water Use Permit # G-17493


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	11	S	3	W	1	NE	NW	200	60	2.5	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	1	NW	NW	200, 300	60	3.4	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	1	NW	NW	300	11	0.1	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	1	SW	NW	200, 300	41	38.9	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	1	SE	NW	200	41	28.7	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	1	NE	SW	200	41	29.5	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	1	NW	SW	200, 300	41	39.8	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	1	SW	SW	200, 300	41	39.8	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	1	SE	SW	200	41	29.5	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	2	NE	NE	300	1	0.8	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	2	SE	NE	300	41	9.1	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	2	NE	SE	300	41	9.3	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
									APOA	11	S	3	W	2	SE	SE	300	41	9.3	Wells 1, 2, 3, 4, 5, 6, 7	12/5/2014
TOTAL ACRES							TOTAL ACRES						240.7								

Additional remarks: Acreage split by QQ & DLC, but not TL to be consistent with application/permit map.

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

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STATE OF OREGON WATER SUPPLY WELL REPORT

Well 4

LINN 64532

WELL I.D. LABEL# L 152758

START CARD # 1074799

8/9/2024

ORIGINAL LOG #

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

(1) LAND OWNER

Owner Well I.D. 6611
First Name Last Name
Company BRYAN WEBBER FARMS INC.
Address 3430 N.W. SPRINGHILL DR.
City ALBANY State OR Zip 97321

(2) TYPE OF WORK

New Well Deepening Conversion

Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION

Dia + From To Gauge Stl Plstc Wld Thrd
Casing:
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD

Rotary Air Rotary Mud Cable Auger Cable Mud
Reverse Rotary Other

(4) PROPOSED USE

Domestic Irrigation Community
Industrial/ Commercial Livestock Dewatering
Thermal Injection Other

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 160.00 ft. Special Standard (Attach copy)

BORE HOLE

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Rows show hole segments with diameters 12, 8, 6 and materials like Bentonite.

Seal placement method A B C D E Other: POURED DRY

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: Type Amount

Seal Placement Begin Date 8/6/2024 Begin Time 16 30

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: C/L, Dia, From, To, Gauge, Mat. Type, Wld, Thrd, Shoe, Location. Row 1: C, 8, 1, 139, 0.250, ST, 18, 18, 155.

Temp casing Yes Dia 12 From 2 To 18

(7) PERFORATIONS/SCREENS

Perforations Method Holte air perforator

Screens Type Material

Table with columns: Perf, Casing/Screen, Dia, From, To, Scm/slot width, Slot length, # of slots, Tc/c/ Pipe size. Rows show perforations at 8" dia casing.

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

Table with columns: Type of Test, Yield (gal/min), Drawdown, Drill Stem/ Pump Depth, Duration (hr). Row 1: Air, 300, 155, 1.

Temperature 58 F Lab analysis Yes By

Water quality concerns? Yes (describe below) TDS amount 64 ppm

Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)

County LINN Twp 11.00 S N/S Range 3.00 W E/W WM
Sec 1 SE 1/4 of the SW 1/4 Tax Lot 200
Tax Map Number Lot
Lat " or 44.63545700 DMS or DD
Long " or -122.99922700 DMS or DD
Street address of well Nearest address

KNOX BUTTE FARM - KNOX BUTTE, ALBANY, OR

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), + SWL(ft). Row 1: 8/8/2024, 12.

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found 20.00

SWL Date From To Est Flow SWL(psi) + SWL(ft)

Table with columns: Date, From, To, Est Flow, SWL(psi), + SWL(ft). Rows show water bearing zones at 20, 70, 115, 160, 210, 270.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Rows list soil types like Topsoil, Brown clay, Brown sand & gravel, Grey clay, Grey sandstone, Blue grey sand & gravel, Green clay, Brown clay, Blue grey sand & gravel, Grey sandstone.

Construction Begin Date 8/5/2024 Begin Time 11 00 End Date 8/8/2024

(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 1684 Date 8/9/2024

Signed BRET JONES (E-filed)

Drilling Company: JONES DRILLING CO., INC.

Amended 7/17/2023
STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

Well 5

LINN 61766
9/10/2016

WELL I.D. LABEL# 123904
START CARD # 1031635
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D.
First Name BRYAN Last Name WEBBER
Company
Address 3430 N.W. SPRINGHILL DRIVE
City ALBANY State OR Zip 97321

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

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

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

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

(5) BORE HOLE CONSTRUCTION
Special Standard [] (Attach copy)
Depth of Completed Well 78.00 ft.
BORE HOLE SEAL sacks/lbs
Dia From To Material From To Amt lbs
12 0 18 Bentonite 0 8 11 S
8 18 78 Calculated 4.54
Cement with 5% Bento 8 18 26 S
Calculated 1.67

How was seal placed: Method [] A [] B [X] C [] D [] E
[X] Other BENTONITE DRY
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [] Yes Type Amount

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

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
8 2 78 .250
Shoe [X] Inside [] Outside [] Other Location of shoe(s) 78
Temp casing [X] Yes Dia 12 From 0 To 18

(7) PERFORATIONS/SCREENS
Perforations Method Mills Knife
Screens Type Material
Perf/ Casing/Screen Scrm/slot Slot # of Tel/
Screen Liner Dia From To width length slots pipe size
Perf Casing 8 39 45 .5 2 104

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [] Bailer [] Air [] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
30 22 50 2
Temperature 54 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County LINN Twp 11.00 S N/S Range 3.00 W E/W WM
Sec 1 SW 1/4 of the SW 1/4 Tax Lot 300
Tax Map Number Lot
Lat " or 44.63561000 DMS or DD
Long " or -123.00426000 DMS or DD
[] Street address of well [X] Nearest address
BARE LAND SOUTH OF 34881 KNOX BUTTE RD. ALBANY, OREGON

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 8/12/2016 9
Flowing Artesian? [] Dry Hole? []
WATER BEARING ZONES Depth water was first found 10.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
8/12/2016 10 54 30 9

(11) WELL LOG
Ground Elevation
Material From To
Top soil 0 4
Brown clay 4 6
Brown clay and gravel 6 10
Gravel and large cobbles 10 26
Tan clay and gravel 26 30
Soft brown clay and gravel 30 34
Brown sand and gravel 34 39
Brown clay and gravel 39 52
Gray sand dirty 52 54
Brown clay 54 58
Blue and gray clay 58 77
Gray claystone 77 78
Received by NOV 25 2014
Salem, OR

Date Started 8/8/2016 Completed 8/12/2016

(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 1903 Date 9/10/2016
Signed RYAN PILLSBURY (E-filed)

(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 1273 Date 9/10/2016
Signed FLOYD G SIPPPEL (E-filed)
Contact Info (optional)

Amended

well 5

STATE OF OREGON WATER SUPPLY WELL REPORT

WELL I.D. LABEL# L 123904 START CARD # 1070521 ORIGINAL LOG # LINN 61766

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

(1) LAND OWNER Owner Well I.D. 6509 First Name Last Name Company Bryan Webber Farms Inc/R.B. Webber Development Address 3430 NW Springhill Dr. City Albany State OR Zip 97321

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

(2a) PRE-ALTERATION Casing: Dia From To Gauge Stl Plstc Wld Thrd Seal: Bentonite Material From To Amt sacks/lbs Cement 8 2 78 .250 8-18 2bs

(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 170 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 6, 78, 170, Calculated, Calculated.

How was seal placed: Method A B C D E Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material Size Seal Placement Begin Date Begin Time

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

(6) CASING/LINER Casing Liner Dia From To Gauge Stl Plstc Wld Thrd Shoe Inside Outside Other Location of shoe(s) Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Perf/S Casing/ Screen Liner Dia From To Sorn/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) Temperature 59 F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS amount 61 ppm From To Description Amount Units

(9) LOCATION OF WELL (legal description) County LINN Twp 11 S N/S Range 3 W E/W WM Sec 1 SW 1/4 of the SW 1/4 Tax Lot 300 Tax Map Number Lot Lat 44.63561 DMS or DD Long -123.00426 DMS or DD Street address of well Nearest address (South of) 34881 Knox Butte Rd. - Albany, OR

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Pre-Alteration 08-07-2023 9 Completed Well 08-07-2023 9 Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 10 SWL Date From To Est Flow SWL(psi) + SWL(ft) 08-07-2023 80 98 100+ 9 Existing 30 9

(11) WELL LOG Ground Elevation Material From To Black sand w/ grey clay & some sand & gravel 78 80 Black sand & gravel 80 85 Large gravel w/some sand 85 98 Blue clay 98 105 Grey clay 105 138 Light brown clay 138 165 Grey sandstone 165 170 RECEIVED AUG 14 2023 JONES DRILLING CO., INC. 29400 SANTIAM HWY. LEBANON, OR 97355 541-367-2560 541-451-2686 1-800-915-8388

Construction Begin Date 08-07-2023 Begin Time 11 00 End Date 08-07-2023

(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 2050 Date 08-10-2023 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 624 Date 08-10-2023 Signed Contact Info (optional) jonesdrilling@hotmail.com

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

Well 6

LINN 61767
9/10/2016

WELL I.D. LABEL# L123907
START CARD # 1031939
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D. _____
First Name BRYAN Last Name WEBBER
Company _____
Address 3430 N.W. SPRINGHILL DRIVE
City ALBANY State OR Zip 97321

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

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 74.00 ft.
BORE HOLE
Dia From To Material SEAL From To Amt sacks/lbs
12 0 19 Bentonite 0 4 3 S
8 19 74 Calculated 2.27
Cement with 5% Bentol 4 19 11 S
Calculated 3.57

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

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

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
 8 2 70 .250
Shoe Inside Outside Other Location of shoe(s) 70
Temp casing Yes Dia 12 From 0 To 19

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Typc _____ Material _____
Perf/ Casing/ Screen Scrn/slot Slot # of Tcl/ Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
75 16 50 1
Temperature 54 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County LINN Twp 11.00 S N/S Range 3.00 W E/W WM
Sec 2 SE 1/4 of the SE 1/4 Tax Lot 300
Tax Map Number _____ Lot _____
Lat _____ " or 44.63743100 DMS or DD
Long _____ " or -123.00924900 DMS or DD
 Street address of well Nearest address

BARE LAND SOUTH OF 34881 KNOX BUTTE RD. ALBANY, OREGON
WELL # 3

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration _____
Completed Well 9/8/2016 _____ 10
Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 11.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
9/8/2016	11	69	75		10

(11) WELL LOG Ground Elevation _____

Material	From	To
Top soil	0	3
Brown clay	3	7
Sandy brown clay	7	11
Brown sand and large gravels	11	39
Sandy brown clay	39	47
Fine gray sand	47	54
Coarse blue sand	54	66
Large loose gravel	66	69
Firm blue clay and gravel	69	73
Gray claystone	73	74

Received by OWRD
NOV 25 2014
Salem, OR

Date Started 8/24/2016 Completed 9/8/2016

(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 1903 Date 9/10/2016
Signed RYAN PILLSBURY (E-filed)

(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 1273 Date 9/10/2016
Signed FLOYD G SIPPET (E-filed)
Contact Info (optional) _____

STATE OF OREGON
WATER SUPPLY WELL REPORT

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

WELL I.D. LABEL# L 123907
START CARD # 1070522
ORIGINAL LOG # LINN 61767

(1) LAND OWNER
Owner Well I.D. 6510
First Name _____ Last Name _____
Company Bryan Webber Farms Inc./R.B. Webber Development
Address 3430 NW Springhill Dr.
City Albany State OR Zip 97321

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

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: 8 2 70 .250
Material From To Amt sacks/lbs cement
Seal: Bentonite 0 4 3 Sacks 4-19 115

(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 104 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
6	74	104					
						Calculated	
						Calculated	

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 _____
Seal Placement Begin Date _____ Begin Time _____

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

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

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____
Perf/S Casing/Screen Scrn/slot Slot # of Tel/
reen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
75		102	1

Temperature 58 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 63 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County LINN Twp 11 S N/S Range 3 W E/W WM
Sec 2 SE 1/4 of the SE 1/4 Tax Lot 300
Tax Map Number _____ Lot _____
Lat _____ or 44.637431 DMS or DD
Long _____ or -123.009249 DMS or DD
 Street address of well Nearest address
South of 34881 Knox Butte Rd. - Albany, OR

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration 08-07-2023 _____ 10
Completed Well 08-07-2023 _____ 10
Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found _____

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
	No additional water bearing encountered				

(11) WELL LOG Ground Elevation _____

Material	From	To
Brittle grey clay	74	82
Blue grey clay	82	102
Grey claystone	102	104
Grey sandstone	104	104

RECEIVED Received by OWRD
AUG 14 2023 NOV 25 2024
OWRD Salem, OR
JONES DRILLING CO., INC.
29400 SANTIAM HWY.
LEBANON, OR 97355
541-367-2560 541-451-2686
1-800-915-8388

Construction Begin Date 08-07-2023 Begin Time 13 45 End Date 08-07-2023

(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 2050 Date 08-10-2023
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 1684 Date 08-10-2023
Signed _____
Contact Info (optional) jonesdrilling@hotmail.com

1930

IN WITNESS WHEREOF

the undersigned authority has hereunto set his hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

Witness my hand and seal of office at the City of [] this [] day of [] 1930.

Notary Public in and for the State of Texas

My commission expires on the [] day of [] 1930.

STATE OF OREGON
WATER SUPPLY WELL REPORT

well 7

LINN 64531

WELL I.D. LABEL#	L152757
START CARD #	1074726
ORIGINAL LOG #	

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

8/9/2024

(1) LAND OWNER Owner Well I.D. 6608
 First Name _____ Last Name _____
 Company BRYAN WEBBER FARMS INC.
 Address 3430 N.W. SPRINGHILL DR.
 City ALBANY State OR Zip 97321

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

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

(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 65.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
12	0	18	Bentonite	0	18	11
8	18	60			Calculated	10
6	60	70			Calculated	

Seal placement method A B C D E Other: POURED DRY
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Type _____ Amount _____
 Seal Placement Begin Date 8/5/2024 Begin Time 15 30

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

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Shoe Location
C	8	X	1	59	0.250	ST	X			

Temp casing Yes Dia 12 From + 2 To 18

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

Perf	Casing/ Screen	Screen Dia	From	To	Scr/slot width	Slot length	# of slots	Tcl/ Pipe size
		8	20	50	.125	1	1200	

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	10		59	1

Temperature 59 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 157 ppm
 From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)
 County LINN Twp 11.00 S N/S Range 3.00 W E/W WM
 Sec 1 NE 1/4 of the NW 1/4 Tax Lot 200
 Tax Map Number _____ Lot _____
 Lat _____ " or 44.64654600 DMS or DD
 Long _____ " or -122.99942100 DMS or DD
 Street address of well Nearest address

KNOX BUTTE FARM - KNOX BUTTE, ALBANY, OR

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+ SWL(ft)
Existing Well / Pre-Alteration			
Completed Well	<u>8/5/2024</u>		<u>18</u>

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 20.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
<u>8/2/2024</u>	<u>20</u>	<u>50</u>	<u>10</u>		<u>18</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
Topsoil	0	1
Brown clay	1	20
Brown sand & gravel	20	35
Grey sand & gravel	35	50
Grey sandstone	50	70

Received by OWRD
NOV 25 2024
Salem, OR

Construction Begin Date 8/2/2024 Begin Time 13 30 End Date 8/5/2024

(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 1684 Date 8/9/2024

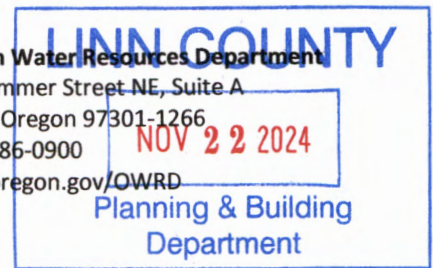
Signed BRET JONES (E-filed)
 Drilling Company: JONES DRILLING CO., INC.

ORIGINAL - WATER RESOURCES DEPARTMENT

Land Use Information Form



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



NOTE TO APPLICANTS

In order for your application to be processed by the Oregon Water Resources Department (OWRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be diverted, conveyed, used, and developed. The planning official may choose to complete the form while you wait or return the "Receipt Acknowledging Request for Land Use Information" to you. Applications received by OWRD without the Land Use Information Form, or the signed receipt, will be returned to you. **IMPORTANT:** Please note that 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 OWRD's acceptance of all other applications. Please be aware that your application cannot be approved without land use approval.

This form is **NOT** required if:

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

Received by OWRD

NOV 25 2024

NOTE TO LOCAL GOVERNMENTS

Salem, OR

The person presenting the attached Land Use Information Form is applying for a new water right or modifying an existing water right. The Oregon Water Resources Department (OWRD) requires applicants to obtain land use information to ensure the water right does not result in land uses that are incompatible with your comprehensive plan. Please complete the form and return it to the applicant for inclusion in their application. **NOTE:** For new water right applications only, if you are unable to complete this form while the applicant waits, you may complete the "Receipt Acknowledging Request for Land Use Information" and return it to the applicant.

You will receive notice via OWRD's weekly Public Notice once the applicant formally submits their request to OWRD. The notice will give more information about OWRD's water right process and provide additional comment opportunities. If you previously only completed the receipt for an application for a new permit to use or store water, you will have 30 days from the Public Notice date to complete the Land Use Information Form and return it to OWRD. Your attention to this request for information is greatly appreciated. If you have questions concerning this form, please contact OWRD's Customer Service Group at 503-986-0900 or WRD_DL_customerservice@water.oregon.gov.

NOTE TO APPLICANTS

In order to our application, you must provide the following information. This information is required for the Department of Planning & Building to process your application. The information you provide will be used to determine if your application meets the requirements of the Land Use Ordinance. If your application is approved, you will be required to pay the applicable fees. The information you provide will also be used to determine if your application meets the requirements of the Land Use Ordinance. If your application is approved, you will be required to pay the applicable fees. The information you provide will also be used to determine if your application meets the requirements of the Land Use Ordinance. If your application is approved, you will be required to pay the applicable fees.

This form is NOT required

- 1. The applicant's name and address.
- 2. The applicant's phone number.
- 3. The applicant's email address.
- 4. The applicant's signature.
- 5. The applicant's date of birth.
- 6. The applicant's date of application.
- 7. The applicant's date of completion.
- 8. The applicant's date of payment.
- 9. The applicant's date of approval.
- 10. The applicant's date of denial.

NOTE TO LOCAL GOVERNMENTS

The person or organization that is applying for a permit must provide the following information. This information is required for the Department of Planning & Building to process your application. The information you provide will be used to determine if your application meets the requirements of the Land Use Ordinance. If your application is approved, you will be required to pay the applicable fees. The information you provide will also be used to determine if your application meets the requirements of the Land Use Ordinance. If your application is approved, you will be required to pay the applicable fees.

You will receive notice via email or by mail. The notice will contain information about the status of your application. If your application is approved, you will be required to pay the applicable fees. If your application is denied, you will be required to pay the applicable fees. The information you provide will also be used to determine if your application meets the requirements of the Land Use Ordinance. If your application is approved, you will be required to pay the applicable fees.

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Received by OWRD

NOV 25 2024

Salem, OR

PD24-0397

Land Use Information Form



Received by OWRD
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.oregon.gov/OWRD
 NOV 25 2024
 Salem, OR

NAME RB Webber Development LLC			PHONE 541-740-8195		
MAILING ADDRESS 3430 NW Springhill Dr.					
CITY Albany		STATE OR	ZIP 97321	EMAIL kweb@peak.org	

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:
11S	3W	1	NENW	200	EFU	<input checked="" type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	farming
11S	3W	1	SWSW	300	EFU	<input checked="" type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	farming
11S	3W	2	SESE	300	EFU	<input checked="" type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	farming

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

Linn

NOTE: A separate Land Use Information Form must be completed and submitted for each county and city, as applicable.

B. Description of Proposed Use

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

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

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

Estimated quantity of water needed: 601.75
 cubic feet per second
 gallons per minute
 acre-feet

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

Briefly describe:

It is proposed to amend permit G-17493 to authorize 3 additional points of appropriation (existing wells L-123904, L-123907, L-152757).

Note to applicant: For new water right applications only, if the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt on the bottom of page 4 and include it with the application filed with the Oregon Water Resources Department.

See Page 4 →

For Local Government Use Only

LINN COUNTY

NOV 22 2024

Planning & Building

Received by OWRD

NOV 25 2024

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 must complete this form. This deals only with the local land use plan. Do not include activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

Salem, OR

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): LCC 928.310(B)(1)

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.

Farm use allowed outright in EFU zone.

Name: Kate Bentz Title: Associate Planner

Signature: [Signature] Date: 11/22/24

Governmental Entity: Linn County Phone: 541-967-3816

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: _____

Business Registry Business Name Search

11-26-2024
09:38

[New Search](#)

Business Entity Data

Registry Nbr	Entity Type	Entity Status	Jurisdiction	Registry Date	Next Renewal Date	Renewal Due?
330494-95	DLLC	ACT	OREGON	12-27-2005	12-27-2024	YES
Entity Name	R.B. WEBBER DEVELOPMENT, LLC					
Foreign Name						

Online Renewal:

[Renew Online](#)

[Click here to generate and print an annual report.](#)

[New Search](#)

Associated Names

Type	PPB	PRINCIPAL PLACE OF BUSINESS			
Addr 1	3430 NW SPRINGHILL RD				
Addr 2					
CSZ	ALBANY	OR	97321	Country	UNITED STATES OF AMERICA

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

Type	AGT	REGISTERED AGENT		Start Date	02-27-2013	Resign Date	
Name	KAREN	L	MISFELDT				
Addr 1	622 NW 32ND ST						
Addr 2							
CSZ	CORVALLIS	OR	97330	Country	UNITED STATES OF AMERICA		

Type	MAL	MAILING ADDRESS			
Addr 1	622 NW 32ND ST				
Addr 2					
CSZ	CORVALLIS	OR	97330	Country	UNITED STATES OF AMERICA

Type	MEM	MEMBER			Resign Date	
Name	KIM	A	WEBBER			
Addr 1	3430 NW SPRINGHILL RD					
Addr 2						
CSZ	ALBANY	OR	97321	Country	UNITED STATES OF AMERICA	

Type	MEM	MEMBER			Resign Date	
Name	ROBERT	BRYAN	WEBBER			
Addr 1	3430 NW SPRINGHILL RD					