

Application for Permanent Water Right Transfer



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

Part 1 of 5 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.
For questions, please call (503) 986-0900, and ask for Transfer Section.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 7 List them here: Certificates 22857, 50821, 56752, 62737, 90394, 91447, and 91733**

Please include a separate Part 5 for each water right. (See instructions on page 6)

NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

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Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

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

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Evidence of Use Form not enclosed or incomplete
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> Part _____ is incomplete

Other/Explanation _____

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

Part 2 of 5 – Transfer Application Map

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

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

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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ATTACHMENT E

Transfer Application Maps

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Town of Lakeview		PHONE NO. 541-947-2020	ADDITIONAL CONTACT NO.
ADDRESS 525 North 1st Street			FAX NO.
CITY Lakeview	STATE OR	ZIP 97630	E-MAIL sstrubel@townoflakeview.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 Adkins Engineering & Surveying, Inc.		PHONE NO. 541-884-4666	ADDITIONAL CONTACT NO.
ADDRESS 1435 Esplanade Ave.			FAX NO.
CITY Klamath Falls	STATE OR	ZIP 97601	E-MAIL dscalas@adkinsengineering.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this transfer application, and why:
 The applicant is proposing to add additional wells to the municipal, quasi-municipal, and domestic water rights owned by the Town of Lakeview. This will allow the Town to use any of their authorized wells for each of their water rights.

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

Check One Box

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

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By my signature below, I confirm that I understand:

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

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



Shiela Strubel
 Applicant signature

Shiela Strubel, Town Manager 11/26/24
 Print Name (and Title if applicable) Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No*

**If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.*

Check the following boxes that apply:

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

At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see:

https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf


RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	
Describe any special ownership circumstances:				
The confirming Certificate shall be issued in the name of: <input type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner				

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

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME Lake County Planning Department	ADDRESS 513 Center Street	
CITY Lakeview	STATE OR	CITY Lakeview

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Part 5 of 5 – Water Right Information

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CERTIFICATE # 22857

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Description of Water Delivery System

System capacity: 1.54 cubic feet per second (cfs)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use.

See the attached maps for the current water delivery system.

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 2502	39	S	20	E	16	NE	SE	1200	2550' North & 890' West of the Southeast Corner of Section 16
Well 10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 53433	39	S	20	E	16	SE	NE	300	399' North & 747' West of the East 1/4 Corner of Section 16
Well 6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 3017	39	S	20	E	16	SW	NW	100	1680' South & 290' East of the Northwest Corner of Section 16
Well 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2496	39	S	20	E	16	NW	NW	201	510' South & 230' East of the Northwest Corner of Section 16
North Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 50703	38	S	20	E	32	SE	SE	903	190' North & 1260' West of the Southeast Corner of Section 32
Well 9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 52105	39	S	20	E	16	NW	NE	2600	760' South & 1390' West of the Northeast Corner of Section 16
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2472	39	S	20	E	15	NW	SW	100	2590' North & 30' East of the Southwest Corner of Section 15
Well 11	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	39	S	20	E	16	SE	NE	300	561' North & 1188' West of the East 1/4 Corner of Section 16

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

- | | |
|--|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input 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"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 22857

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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
										APOA	39	S	20	E	10	NW	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	10	NE	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	10	SW	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	10	SE	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	10	SW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	NW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	SW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	NE	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	NW	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	SE	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
TOTAL ACRES:											TOTAL ACRES:										0		

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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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POA(s) to be used (from Table 1)	Priority Date		
										APOA	39	S	20	E	15	SW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	NW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	SW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	NE	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	NW	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	SE	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	15	SW	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	16	NE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	16	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	16	SE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	16	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	16	NE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	16	SE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	21	NE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	22	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
										APOA	39	S	20	E	22	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
TOTAL ACRES:							TOTAL ACRES:										0					

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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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
																									POD #6	1901
													APOA	39	S	20	E	22	SW	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
													APOA	39	S	20	E	22	SE	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
													APOA	39	S	20	E	22	NW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
													APOA	39	S	20	E	22	SW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1949
TOTAL ACRES:												TOTAL ACRES:														

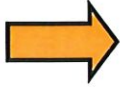
Additional remarks:_____.

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: Certificates 20229, 27660, 50821, 56752, 62737, 91447, 91733. Permits G-17029, and G-17102.



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

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

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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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
Well 11	No	N/A	475'	16"	0' – 305'	270'	170' – 475'	40'	Sandy Gravel	800 GPM

CERTIFICATE # 50821

Description of Water Delivery System

System capacity: **1.34** cubic feet per second (cfs)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use.

See the attached maps for the current water delivery system.

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 3017	39	S	20	E	16	SW	NW	100	1680' South & 290' East of the Northwest Corner of Section 16
Well 10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 53433	39	S	20	E	16	SE	NE	300	399' North & 747' West of the East 1/4 Corner of Section 16
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2502	39	S	20	E	16	NE	SE	1200	2550' North & 890' West of the Southeast Corner of Section 16
Well 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2496	39	S	20	E	16	NW	NW	201	510' South & 230' East of the Northwest Corner of Section 16
North Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 50703	38	S	20	E	32	SE	SE	903	190' North & 1260' West of the Southeast Corner of Section 32
Well 9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 52105	39	S	20	E	16	NW	NE	2600	760' South & 1390' West of the Northeast Corner of Section 16
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2472	39	S	20	E	15	NW	SW	100	2590' North & 30' East of the Southwest Corner of Section 15
Well 11	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	39	S	20	E	16	SE	NE	300	561' North & 1188' West of the East 1/4 Corner of Section 16

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

- | | |
|--|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input 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"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 50821

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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
										APOA	39	S	20	E	9	SE	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	9	SW	SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	10	SW	NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	10	NE	SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	10	NW	SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	10	SW	SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	10	SE	SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	10	SW	SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	15	NW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	15	SW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
TOTAL ACRES:							TOTAL ACRES:						0										

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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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)		Priority Date	Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POA(s) to be used (from Table 1)	Priority Date
											APOA	39	S	20	E	15	NE	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	NW	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	SW	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	SE	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	NE	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	NW	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	SW	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	SE	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	NW	SE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	15	SW	SE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	16	NE	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	16	NW	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	16	SW	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	16	SE	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	16	NE	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
											APOA	39	S	20	E	16	SE	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
TOTAL ACRES:								TOTAL ACRES:										0				

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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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
										APOA	39	S	20	E	16	NE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	16	NW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	16	SE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	22	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	22	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	22	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	22	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	22	SW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	22	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	22	NE	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
										APOA	39	S	20	E	22	NW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1971
TOTAL ACRES:							TOTAL ACRES:															

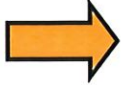
Additional remarks: _____.

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: **Certificates 5247, 5554, 12008, 12009, 14086, 23381, 22857, 50700, 56752, 62737, 91447, and 91733. Permit G-17102.**



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

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

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

Tip: You may search for well logs on the Department’s web page at:
http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
Well 11	No	N/A	475'	16"	0' – 305'	270'	170' – 475'	40'	Sandy Gravel	800 GPM

CERTIFICATE # 56752

Description of Water Delivery System

System capacity: **1.40** cubic feet per second (cfs)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use.

See the attached maps for the current water delivery system.

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 7	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 2496	39	S	20	E	16	NW	NW	201	510' South & 230' East of the Northwest Corner of Section 16
Well 10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 53433	39	S	20	E	16	SE	NE	300	399' North & 747' West of the East 1/4 Corner of Section 16
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2502	39	S	20	E	16	NE	SE	1200	2550' North & 890' West of the Southeast Corner of Section 16
North Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 50703	38	S	20	E	32	SE	SE	903	190' North & 1260' West of the Southeast Corner of Section 32
Well 9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 52105	39	S	20	E	16	NW	NE	2600	760' South & 1390' West of the Northeast Corner of Section 16
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2472	39	S	20	E	15	NW	SW	100	2590' North & 30' East of the Southwest Corner of Section 15
Well 6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 3017	39	S	20	E	16	SW	NW	100	1680' South & 290' East of the Northwest Corner of Section 16
Well 11	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	39	S	20	E	16	SE	NE	300	561' North & 1188' West of the East 1/4 Corner of Section 16

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

- | | |
|--|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input 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"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 56752

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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
										APOA	39	S	20	E	9	SE	SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	9	SW	SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	10	NE	SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	10	NW	SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	10	SW	SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	10	SE	SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	10	SW	SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	NE	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	NW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	SW	NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
TOTAL ACRES:													TOTAL ACRES:			0							

Additional remarks: _____.

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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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date	
										APOA	39	S	20	E	15	SE	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	NE	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	NW	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	SW	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	SE	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	NE	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	NW	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	SW	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	SE	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	NE	SE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	NW	SE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	SW	SE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	15	SE	SE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	16	NE	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	16	NW	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
										APOA	39	S	20	E	16	SW	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
TOTAL ACRES:							TOTAL ACRES:										0				

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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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)		Priority Date	Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date	
											APOA	39	S	20	E	16	SE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
											APOA	39	S	20	E	16	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
											APOA	39	S	20	E	22	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
											APOA	39	S	20	E	22	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
											APOA	39	S	20	E	22	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
											APOA	39	S	20	E	22	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
											APOA	39	S	20	E	22	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1977
TOTAL ACRES:								TOTAL ACRES:							0								

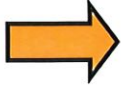
Additional remarks:_____.

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: **Certificates 5247, 5554, 12008, 12009, 14086, 20228, 20229, 22857, 23381, 27660, 38107, 50700, 50821, 62737, 82995, 91447, and 91733. Permits G-17029, G-17102, and G-18112.**



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

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

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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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
Well 11	No	N/A	475'	16"	0' – 305'	270'	170' – 475'	40'	Sandy Gravel	800 GPM

CERTIFICATE # 62737

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Description of Water Delivery System

Salem, OR

System capacity: **0.67** cubic feet per second (cfs)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use.

See the attached maps for the current water delivery system.

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 8	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 4163	39	S	20	E	16	NE	NW	400	570' South & 2300' East of the Northwest Corner of Section 16
Well 10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 53433	39	S	20	E	16	SE	NE	300	399' North & 747' West of the East 1/4 Corner of Section 16
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2502	39	S	20	E	16	NE	SE	1200	2550' North & 890' West of the Southeast Corner of Section 16
North Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 50703	38	S	20	E	32	SE	SE	903	190' North & 1260' West of the Southeast Corner of Section 32
Well 9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 52105	39	S	20	E	16	NW	NE	2600	760' South & 1390' West of the Northeast Corner of Section 16
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2472	39	S	20	E	15	NW	SW	100	2590' North & 30' East of the Southwest Corner of Section 15
Well 6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 3017	39	S	20	E	16	SW	NW	100	1680' South & 290' East of the Northwest Corner of Section 16
Well 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2496	39	S	20	E	16	NW	NW	201	510' South & 230' East of the Northwest Corner of Section 16
Well 11	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	39	S	20	E	16	SE	NE	300	561' North & 1188' West of the East 1/4 Corner of Section 16

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

- | | |
|--|---|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 62737

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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
										POA	39	S	20	E	10	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	10	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	10	SW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	10	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	10	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
TOTAL ACRES:												TOTAL ACRES:						0				

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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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
										POA	39	S	20	E	15	SW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	NW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	SW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	NE	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	NW	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	SE	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	15	SW	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	16	NE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	16	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	16	SE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	16	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	16	NE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	16	SE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	21	NE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	22	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
										POA	39	S	20	E	22	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
TOTAL ACRES:							TOTAL ACRES:										0					

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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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)		Priority Date	Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date	
											POA	39	S	20	E	22	SW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
											POA	39	S	20	E	22	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
											POA	39	S	20	E	22	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
											POA	39	S	20	E	22	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1953
TOTAL ACRES:								TOTAL ACRES:										0					

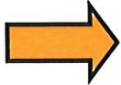
Additional remarks:_____.

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: Certificates 5247, 5554, 12008, 12009, 14086, 20228, 20229, 22857, 23381, 27660, 38107, 50700, 50821, 56752, 82995, 91447, and 91733. Permits G-17029, G-17102, and G-18112.



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

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

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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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
Well 11	No	N/A	475'	16"	0' – 305'	270'	170' – 475'	40'	Sandy Gravel	800 GPM

Description of Water Delivery System

System capacity: 1.59 cubic feet per second (cfs)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use.

See the attached maps for the current water delivery system.

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
North Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 50703	38	S	20	E	32	SE	SE	903	190' North & 1260' West of the Southeast Corner of Section 32
Well 10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 53433	39	S	20	E	16	SE	NE	300	399' North & 747' West of the East 1/4 Corner of Section 16
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2502	39	S	20	E	16	NE	SE	1200	2550' North & 890' West of the Southeast Corner of Section 16
Well 9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 52105	39	S	20	E	16	NW	NE	2600	760' South & 1390' West of the Northeast Corner of Section 16
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2472	39	S	20	E	15	NW	SW	100	2590' North & 30' East of the Southwest Corner of Section 15
Well 6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 3017	39	S	20	E	16	SW	NW	100	1680' South & 290' East of the Northwest Corner of Section 16
Well 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2496	39	S	20	E	16	NW	NW	201	510' South & 230' East of the Northwest Corner of Section 16
Well 11	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	39	S	20	E	16	SE	NE	300	561' North & 1188' West of the East 1/4 Corner of Section 16

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

- | | |
|--|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input 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"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 90394

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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
										APOA	38	S	20	E	33	SW	SW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	38	S	20	E	33	SE	SW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	38	S	20	E	33	SW	SE			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	38	S	20	E	33	SE	SE			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	39	S	20	E	4	NE	NE			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	39	S	20	E	4	NW	NE			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	39	S	20	E	4	SW	NE			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	39	S	20	E	4	SE	NE			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	39	S	20	E	4	NE	NW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
										APOA	39	S	20	E	4	NW	NW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
TOTAL ACRES:							TOTAL ACRES:											0					

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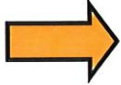
AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.															
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date					
EXAMPLE																											
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901	
															2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
													APOA		39	S	20	E	4	SW	NW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
													APOA		39	S	20	E	4	SE	NW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
													APOA		39	S	20	E	4	NE	SW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
													APOA		39	S	20	E	4	NW	SW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
													APOA		39	S	20	E	4	SW	SW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
													APOA		39	S	20	E	4	SE	SW			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
													APOA		39	S	20	E	4	NW	SE			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
													APOA		39	S	20	E	4	SW	SE			0	Quasi-Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1996
TOTAL ACRES:												TOTAL ACRES:											0				

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: **Certificates 15546, 27034, 27660, 36476, 38566, 44739, 58379, 65564, 66811, 68086, 72154, 80621, 81059, 82995, and 91447. Permits G-17102, and G-17133.**



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

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

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

Tip: You may search for well logs on the Department’s web page at:
http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
Well 11	No	N/A	475'	16"	0' – 305'	270'	170' – 475'	40'	Sandy Gravel	800 GPM

CERTIFICATE # 91447

Description of Water Delivery System

System capacity: **2.30** cubic feet per second (cfs)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use.

See the attached maps for the current water delivery system.

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)
(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 9	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 52105	39	S	20	E	16	NW	NE	2600	760' South & 1390' West of the Northeast Corner of Section 16
Well 10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 53433	39	S	20	E	16	SE	NE	300	399' North & 747' West of the East 1/4 Corner of Section 16
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2502	39	S	20	E	16	NE	SE	1200	2550' North & 890' West of the Southeast Corner of Section 16
North Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 50703	38	S	20	E	32	SE	SE	903	190' North & 1260' West of the Southeast Corner of Section 32
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2472	39	S	20	E	15	NW	SW	100	2590' North & 30' East of the Southwest Corner of Section 15
Well 6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 3017	39	S	20	E	16	SW	NW	100	1680' South & 290' East of the Northwest Corner of Section 16
Well 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2496	39	S	20	E	16	NW	NW	201	510' South & 230' East of the Northwest Corner of Section 16
Well 11	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	39	S	20	E	16	SE	NE	300	561' North & 1188' West of the East 1/4 Corner of Section 16

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

- | | |
|--|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input 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"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 91447

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.

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Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
										APOA	39	S	20	E	3	NW	NW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
										APOA	39	S	20	E	3	NW	SW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
										APOA	39	S	20	E	3	SW	SW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
										APOA	39	S	20	E	4	NE	NE		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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										APOA	39	S	20	E	4	NE	NW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
										APOA	39	S	20	E	4	NW	NW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
										APOA	39	S	20	E	4	SW	NW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
TOTAL ACRES:												TOTAL ACRES:					0					

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										APOA	39	S	20	E	4	SE	NW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
										APOA	39	S	20	E	4	NE	SW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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										APOA	39	S	20	E	4	SE	SW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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										APOA	39	S	20	E	4	SE	SE		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
										APOA	39	S	20	E	9	NE	NE		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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										APOA	39	S	20	E	9	SW	NE		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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										APOA	39	S	20	E	9	SW	NW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
TOTAL ACRES:							TOTAL ACRES:										0					

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										APOA	39	S	20	E	10	SW	SW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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										APOA	39	S	20	E	16	NE	NE		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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TOTAL ACRES:											TOTAL ACRES:										0	

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										APOA	39	S	20	E	15	SW	SW		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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										APOA	39	S	20	E	22	NW	NE		0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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TOTAL ACRES:							TOTAL ACRES:										0					

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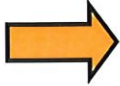
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EXAMPLE																											
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1	POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
															2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
														APOA	39	S	20	E	22	SE	NW			0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
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														APOA	39	S	20	E	22	NW	SW			0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
														APOA	39	S	20	E	22	SW	SW			0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
														APOA	39	S	20	E	22	SE	SW			0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
														APOA	39	S	20	E	22	NW	SE			0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
														APOA	39	S	20	E	22	SW	SE			0	Domestic	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1940
TOTAL ACRES:											TOTAL ACRES:										0						

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: Certificates 5247, 5358, 5554, 7456, 7470, 12008, 12009, 14086, 15546, 20228, 20229, 22857, 23381, 27023, 27034, 27065, 27660, 36476, 37210, 38107, 38565, 38566, 44739, 50604, 50700, 50821, 56752, 58332, 58379, 62737, 63264, 63265, 68086, 80621, 81059, 82995, 85892, 90394, and 91733. Permits G-14034, G-15310, G-17029, G-17102, G-17133, and G-18112.



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

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

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
Well 11	No	N/A	475'	16"	0' – 305'	270'	170' – 475'	40'	Sandy Gravel	800 GPM

CERTIFICATE # 91733

Description of Water Delivery System

System capacity: **2.30** cubic feet per second (cfs)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use.

See the attached maps for the current water delivery system.

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 9	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 52105	39	S	20	E	16	NW	NE	2600	760' South & 1380' West of the Northeast Corner of Section 16
Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 2472	39	S	20	E	15	NW	SW	100	2590' North & 30' East of the Southwest Corner of Section 15
Well 10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 53433	39	S	20	E	16	SE	NE	300	399' North & 747' West of the East 1/4 Corner of Section 16
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2502	39	S	20	E	16	NE	SE	1200	2550' North & 890' West of the Southeast Corner of Section 16
North Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 50703	38	S	20	E	32	SE	SE	903	190' North & 1260' West of the Southeast Corner of Section 32
Well 6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 3017	39	S	20	E	16	SW	NW	100	1680' South & 290' East of the Northwest Corner of Section 16
Well 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 2496	39	S	20	E	16	NW	NW	201	510' South & 230' East of the Northwest Corner of Section 16
Well 11	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	39	S	20	E	16	SE	NE	300	561' North & 1188' West of the East 1/4 Corner of Section 16

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

- | | |
|--|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input 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"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 91733

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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date	
EXAMPLE																					
2	S	9	E 15 NE NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E 1 NW NW	500	1	10.0		POD #5	1901	
											2	S	9	E 2 SW NW	500		5.0		POD #6	1901	
										APOA	39	S	20	E 9 NE NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 NW NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 SW NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 SE NE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 NE NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 NW NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 SW NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 SE NW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 NE SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E 9 NW SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
TOTAL ACRES:												TOTAL ACRES:						0			

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Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
EXAMPLE																						
2	S	9	E 15 NE NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E 1 NW NW	500	1	10.0		POD #5	1901		
											2	S	9	E 2 SW NW	500		5.0		POD #6	1901		
										APOA	39	S	20	E 9 SW SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967		
										APOA	39	S	20	E 9 SE SW			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967		
										APOA	39	S	20	E 9 NE SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967		
										APOA	39	S	20	E 9 NW SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967		
										APOA	39	S	20	E 9 SW SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967		
										APOA	39	S	20	E 9 SE SE			0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967		
TOTAL ACRES:											TOTAL ACRES:						0					

Additional remarks: _____.

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Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
										APOA	39	S	20	E	10	NE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	SE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	SW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	NE	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	NW	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	SW	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	SE	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	NE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	NW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	SW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	10	SE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
TOTAL ACRES:											TOTAL ACRES:						0					

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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 (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	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Proposed Changes (see "CODES" from previous page)	Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s) to be used (from Table 1)	Priority Date		
										APOA	39	S	20	E	15	NE	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	NW	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	SW	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	SE	NE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	NE	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	NW	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	SW	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	SE	NW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	NE	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	NW	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	SW	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
										APOA	39	S	20	E	15	SE	SW	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
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										APOA	39	S	20	E	15	NW	SE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
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										APOA	39	S	20	E	15	SE	SE	0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967	
TOTAL ACRES:																	TOTAL ACRES:	0				

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Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
										APOA	39	S	20	E	16	NE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	SE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	SW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	NE	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	NW	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	SW	SW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
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										APOA	39	S	20	E	16	NW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	SW	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	16	SE	SE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
TOTAL ACRES:											TOTAL ACRES:						0					

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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 (the "to" or "on" lands)

The listing as it would appear AFTER PROPOSED CHANGES are made.

AUTHORIZED (the "from" or "off" lands)											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands)										
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
										APOA	39	S	20	E	21	NE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	21	NW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	21	SW	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	21	SE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	21	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	21	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	21	SW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	21	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	22	NE	NE		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
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										APOA	39	S	20	E	22	NE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
										APOA	39	S	20	E	22	NW	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
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										APOA	39	S	20	E	22	SE	NW		0	Municipal	Wells 1, 2, 6, 7, 9, North Well, Wells 10, & 11	1967
TOTAL ACRES:							TOTAL ACRES:											0				

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: Certificates 15546, 27034, 27660, 36476, 38566, 44739, 58379, 65564, 66811, 68086, 72154, 80621, 81059, 82995, and 91447. Permits G-17102, and G-17133.



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

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

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
Well 11	No	N/A	475'	16"	0' – 305'	270'	170' – 475'	40'	Sandy Gravel	800 GPM

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Salem, OR

ATTACHMENT A
Well Logs LAKE 2472, LAKE 2496, LAKE 2502,
LAKE 3017, LAKE 4163, LAKE 50703, LAKE
52105, and LAKE 53433

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DEC 18 2024
Salem, OR

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the
STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

RECEIVED
Lakeview 2472
WATER WELL REPORT
JUL 2 1965 STATE OF OREGON
(Please type or print) **G-3779**

Radio Obs. Well *cbb2*
State Well No. 39/20-15A
State Permit No. _____

(1) OWNER: SALEM, OREGON
Name Town of Lakeview
Address Lakeview, Oregon

(2) LOCATION OF WELL:
County Lake Driller's well number _____
NW $\frac{1}{4}$ SW $\frac{1}{4}$ Section 15 T. 39 S R. 20 E W.M.
Bearing and distance from section or subdivision corner
 $\frac{1}{2}$ mi. West of Lakeview from Hwy, 395

(3) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
Abandonment, describe material and procedure in Item 18.

(4) PROPOSED USE (check): Domestic Industrial Municipal
Irrigation Test Well Other
(5) TYPE OF WELL: Rotary Driven
Cable Jetted
Dug Bored

(6) CASING INSTALLED: Threaded Welded
14" Diam. from 0 ft. to 390 ft. Gage 250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

(7) PERFORATIONS: Perforated? Yes No
Type of perforator used factory perforated pipe
Size of perforations 3/16 in. by 2 in.
3400 perforations from _____ ft. to _____ ft.
4200 perforations from 100 ft. to 240 ft.
1200 perforations from 300 ft. to 340 ft.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.

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

(9) CONSTRUCTION:
Well seal—Material used in seal cement
Depth of seal 40 ft. Was a packer used? yes
Diameter of well bore to bottom of seal 24 in.
Were any loose strata cemented off? Yes No Depth _____
Was a drive shoe used? Yes No
Was well gravel packed? Yes No Size of gravel: 3/8 to 1"
Gravel placed from 40 ft. to 390 ft.
Did any strata contain unusable water? Yes No
Type of water? surface depth of strata 5'
Method of sealing strata off cement

(10) WATER LEVELS:
Static level 32 ft. below land surface Date 7/1/65
Artesian pressure _____ lbs. per square inch Date _____

(11) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? Contractor
Yield: 850 gal./min. with 133 ft. drawdown after 24 hrs.
" efficiency of well 500 g.p.m. "
" with 100' pumping level "
Baller test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water 62 Was a chemical analysis made? Yes No

(12) WELL LOG: Diameter of well below casing 24"
Depth drilled 405 ft. Depth of completed well 390 ft.
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
soil zone, sandy	0	12
gravel & clay, med. brn.	12	45
clay, brn.	45	90
gravel & sand, med.	90	125
clay & gravel, brn.	125	135
sandy clay, blue	135	155
clay & gravel, med. blue	155	162
gravel & clay, loose stringers	162	190
gravel, lge.	190	195
clay & gravel	195	310
gravel & sand, loose	310	325
clay & gravel, blue	325	385
boulders	385	395
clay, blue	395	405
water bearing formations	90	120
" " " "	310	325

diameter of well 24" with 14" casing installed to provide space for gravel packing

Work started 5/17 1965 Completed 6/30 1965
Date well drilling machine moved off of well 6/30 1965

(13) PUMP: Manufacturer's Name Western Pump Co.
Type: Water lubricated turbine P. 60

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
NAME Jack Stooksberry Jr.
(Person, firm or corporation) (Type or print)
Address Rte. 2, Box 47, Lakeview, Ore.
Drilling Machine Operator's License No. 45

[Signed] _____
(Water Well Contractor)
Contractor's License No. 211 Date July 1, 1965

NOTICE TO WATER WELL CONTRACTOR/

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

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

WATER WELL REPORT

STATE OF OREGON
(Please type or print)

(Do not write above this line)

RECEIVED

State Well No. _____

JUL 9 - 1976

State Permit No. 395/2046-16

WATER RESOURCES DEPT.

SALEM, OREGON

F bb

(1) OWNER:

Name Town of Lakeview
Address Lakeview, Oregon 97630

(2) TYPE OF WORK (check):

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

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
12" Diam. from 0 ft. to 371 ft. Gage 250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? Yes No.

Type of perforator used factory mill cut
Size of perforations 1/8 in. by 3 in.
7200 perforations from 71 ft. to 371 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 driller
d: 1200 gal./min. with 55 ft. drawdown after 119 hrs.
" " " "
" " " "
Ballor test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water 58 Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used cement grout ductor pipe
Well sealed from land surface to 40' w/24" con- ft.
Diameter of well bore to bottom of seal 32 in.
Diameter of well bore below seal 24 in.
Number of sacks of cement used in well seal 70 sacks
Number of sacks of bentonite used in well seal _____ sacks
Brand name of bentonite _____
Number of pounds of bentonite per 100 gallons _____
of water _____ lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel 3/8
Gravel placed from 40 ft. to 371 ft.

(10) LOCATION OF WELL:

County Lake Driller's well number _____
NW 1/4 NW 1/4 Section 16 T. 39S R. 20 W.M.
Bearing and distance from section or subdivision corner
1 mile west of Lakeview on Hwy. 140

(11) WATER LEVEL: Completed well.

Depth at which water was first found 70 ft.
Static level 55 ft. below land surface. Date 7/6/76
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 9
Depth drilled 400 ft. Depth of completed well 371 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
soil zone, heavy	0	4	
sandy clay, brown	4	12	
gravel, med., brn.	12	30	
clay, blk. to green	30	42	
clay, blue	42	60	
clay & gravel, blue	60	70	
gravel, fine, blue	70	77	55
sandy clay, blue	77	158	
gravel, fine, blue	158	170	
clay, blue	170	280	
cemented gravel w/loose			
stratas in void areas	280	305	
clay, blue to black	305	400	

Received by OWRD
DEC 18 2024
Salem, OR

Work started 5/18 19 76 Completed 7/6 1976
Date well drilling machine moved off of well 7/6 1976

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Jack Stooksberry Jr. Date 7/6, 1976
(Drilling Machine Operator)
Drilling Machine Operator's License No. 45

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name Jack Stooksberry, Jr.
(Person, firm or corporation) (Type or print)
Address Rte. 2, Box 47, Lakeview, OR 97630
[Signed] Jack Stooksberry Jr.
(Water Well Contractor)
Contractor's License No. 211 Date 7/6, 1976

STATE ENGINEER
Salem, Oregon

Lake 2502

Well Record

STATE WELL NO. 39/20-16J(1)
COUNTY Lake
APPLICATION NO. _____

OWNER: City of Lakeview

MAILING ADDRESS: _____

LOCATION OF WELL: Owner's No. _____

CITY AND STATE: _____

NE 1/4 SE 1/4 Sec. 16 T. 39 S., R. 20 W., W.M.

Bearing and distance from section or subdivision corner _____

Altitude at well 4745

TYPE OF WELL: Drilled Date Constructed _____

Depth drilled 230 Depth cased _____

Section _____

CASING RECORD:

18 inch

FINISH:

AQUIFERS:

WATER LEVEL:

20.5

PUMPING EQUIPMENT: Type Turbine H.P. _____
Capacity 500 G.P.M.

WELL TESTS:

Drawdown _____ ft. after _____ hours _____ G.P.M.

Drawdown _____ ft. after _____ hours _____ G.P.M.

USE OF WATER Public supply Temp. 59 °F., 19_____

SOURCE OF INFORMATION _____

DRILLER or DIGGER _____

ADDITIONAL DATA:

Log Water Level Measurements _____ Chemical Analysis _____ Aquifer Test _____

REMARKS:

Hardness 48 ppm, chloride 5 ppm. Drilled to 360 feet plugged at 230 feet to out off warm water.

Received by OWRD

DEC 18 2024

Salem, OR

STATE ENGINEER
Salem, Oregon

State Well No. 39/20-16J(1)
County Lake
Application No.

Well Log

Owner: City of Lakeview Owner's No.
Driller: Frank Williams Date Drilled 1949

CHARACTER OF MATERIAL	(Feet below land surface)		Thickness (feet)
	From	To	
<u>Younger valley fill:</u>			
Soil	0	2	2
Clay, brown	2	10	8
Gravel	10	18	8
<u>Older valley fill:</u>			
Clay, yellow	18	39	21
Gravel, fine, dirty	39	48	9
Clay, yellow	48	68	20
Gravel, medium, sandy, some clay	68	73	5
<u>Goose Lake deposits:</u>			
Clay, blue	73	92	19
Gravel, medium, sandy, some clay	92	95	3
Clay, blue	95	170	75
Gravel, coarse, up to cobble size	170	181	11
Clay, blue	181	189	8
Gravel, medium to coarse	189	196	7
Clay, blue	196	360	164

Received by OWRD
DEC 8 2024
Salem, OR

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the
STATE ENGINEER, SALEM, OREGON within 30 days from the date of well completion.

RECEIVED
JUL 10 - 1971
STATE ENGINEER
SALEM, OREGON

RECEIVED
Lake 3017
39/20-16bc
State Well No. 3017
State Permit No. G 5643

(1) OWNER:

Name Town of Lakeview
Address 525 N. 1st St., Lakeview, OR 97630

(2) TYPE OF WORK (check):

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

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
12" Diam. from 0 ft. to 360 ft. Gage 250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Perforated? Yes No.
Type of perforator used factory louver perforation
Size of perforations 3/32 in. by 1 1/8 in.
6480 perforations from 160 ft. to 340 ft.
perforations from _____ ft. to _____ ft.
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) WATER LEVEL: Completed well.

Static level 15 ft. below land surface Date 7/1/71
Pneumatic pressure _____ lbs. per square inch Date _____

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? driller
Flow: 800 gal./min. with 75 ft. drawdown after 97 hrs.

Ballor test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water 58 Was a chemical analysis made? Yes No

(10) CONSTRUCTION:

Well seal—Material used cement pipe _____
Depth of seal cemented 80' using 24" conductor.
Diameter of well bore to bottom of seal 32 in.
Were any loose strata cemented off? Yes No Depth _____
Was a drive shoe used? Yes No bottom of casing _____
Did any strata contain unusable water? Yes No welded shut _____
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: 5/8
Gravel placed from 80 ft. to 360 ft.

(11) LOCATION OF WELL:

County Lake Driller's well number _____
SW 1/4 NW 1/4 Section 16 T. 39S R. 20E W.M.

Bearing and distance from section or subdivision corner Lot 7,
Block 270, O.V.L. addition to town of
Lakeview,
One mile west of Lakeview, Oregon

(12) WELL LOG:

Diameter of well below casing 0
Depth drilled 360 ft. Depth of completed well 360 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 as drilling proceeds. Note drilling rates.

MATERIAL	From	To	SWL
soil zone, adobe, black	0	4	
gravel & clay, brown	4	18	
sandy clay & gravel, blue	18	65	
clay & gravel, blue	65	100	
gravel, med.	100	108	
sand, fine, blue	108	162	
clay & gravel, blue	162	302	
cemented gravel w/void areas	302	318	
volcanic gravel, fine, gray to green	318	345	
clay & gravel, black	345	360	15

Received by CWRD
JUL 18 2021
Salem, OR

Work started: 5/15 10 71 Completed 7/1 1971
Date well drilling machine moved off of well 7/3 10 71

Drilling Machine Operator's Certification:

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

[Signed] Jack Stooksherry Jr. Date 7/3, 1971
(Drilling Machine Operator)

Drilling Machine Operator's License No. 45

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Jack Stooksherry, Jr.
(Person, firm or corporation) (Type or print)

Address Rt. 2, Bx. 47, Lakeview, OR 97630

[Signed] Jack Stooksherry Jr.
(Water Well Contractor)

Contractor's License No. 211 Date 7/3, 1971

(USE ADDITIONAL SHEETS IF NECESSARY)

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

LAKE
4163

39S/20E/16ba

(START CARD) # 21144

(1) OWNER: Well Number: _____
Name CITY OF LAKEVIEW
Address _____
City lakeview State OR Zip 97630

(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 MUNICIPAL

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

HOLE	Diameter	From		To		Material	SEAL		Amount
		From	To	From	To		sacks or pounds		
									NO CHANGE

How was seal placed: Method A B C D E
 Other NO CHANGE
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min APPROX 250 Drawdown _____ Drill stem at 390' Time 1 hr.

Temperature of water 65 _____ Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County LAKE Latitude _____ Longitude _____
Township 39 No. 20 Range 20 or W, WM.
Section 16 NE 1/4 NW 1/4
Tax Lot 600 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) REBERTA AVE.

(10) STATIC WATER LEVEL:
12 ft. below land surface. Date 5-5-92
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 12'

From	To	Estimated Flow Rate	SWL

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
NO CHANGE			

Date started 4-29-92 Completed 5-5-92

(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 _____ Date _____ WWC Number _____

(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 Larry M. Polay WWC Number 1536 Date 5-6-92

LAKE 50703

RECEIVED

NOV 27 1998

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

WATER RESOURCES DEPT. SALEM, OREGON

WELL I.D. # L 19876 START CARD # 107322

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

(1) OWNER: Well Number #1 Name LAKEVIEW SUBURBAN DOMESTIC WATER SUPPLY DIST. Address PO BOX 1262 City LAKEVIEW State OREGON Zip 97030

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

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

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 400 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds. Includes handwritten entries for 18" and 12.4" diameters.

How was seal placed: Method [] A [] B [X] C [] D [] E [] Other Backfill placed from 200 ft. to 400 ft. Material Gravel placed from 200 ft. to 400 ft. Size of gravel #6/48

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes handwritten entry for 1 1/4" casing.

Final location of shoe(s) 381 FT.

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tela/pipe size, Casing, Liner. Includes handwritten entry for 1/16" slot size.

(8) WELL TESTS: Minimum testing time is 1 hour. [X] Pump [] Bailer [] Air [] Flowing [] Artesian. Yield gal/min 400, Drawdown 58 FT, Time 2 1/2 hr.

Temperature of water 66°F Depth Artesian Flow Found Was a water analysis done? [] Yes By whom [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

(9) LOCATION OF WELL by legal description: County LAKE Latitude Longitude Township 38S N or S Range 20 E or W. WM. Section 32 SE 1/4 SE 1/4 Tax Lot 38 Lot 20 Block 32 Subdivision 900 Street Address of Well (or nearest address) 1250 FT WEST FROM

(10) STATIC WATER LEVEL: 13 1/2 ft. below land surface. Date 11/10/98 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 8 FEET

Table with columns: From, To, Estimated Flow Rate, SWL. Includes handwritten entry: From 200 To 400 Estimated Flow Rate 400 SWL 13 1/2

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Includes handwritten entry: SEE ATTACHED LOG

Date started OCT 13, 98 Completed OCT 20, 98 (unbonded) Water Well Constructor Certification:

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

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 water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 606 Signed Date 11/21/98

STOREY DRILLING SERVICES

P.O. Box 88 • MIDLAND, OREGON 97834
(541) 884-3990 • (800) 245-8122
Fax #: (530) 528-2562
22560 ADOBE ROAD • RED BLUFF, CALIFORNIA 96080
CONTRACTOR'S LICENSES:
OR #801 • CA #583153 • NV #38199



Lakeview Suburban Domestic Water Supply District
P. O. Box 1262
Lakeview, Oregon 97630

START: October 13, 1998
FINISH: November 20, 1998

WELL LOCATION ½ mile west of Highway 395 on Lake County Road 218-A Lakeview, Oregon
SW¼ SW¼ S32 T38 R20 in Lake County, Oregon

LOG

0 - 2	Brown clay topsoil
2 - 3	Sandy clay with fine gravel
3 - 10	Fine gravel & brown clay
10 - 24	Brown clay
24 - 26	Coarse black sand
26 - 36	Grey clay with black sand
36 - 77	Sandy grey clay
77 - 85	Grey clay with coarse sand
85 - 96	Grey clay
96 - 116	Grey clay with fine gravel
116 - 168	Grey clay
168 - 170	Medium gravel with grey clay
170 - 190	Fine gravel
190 - 207	Fine gravel with sandy grey clay
207 - 223	Sandy grey clay
223 - 225	Medium gravel with grey clay
225 - 247	Coarse sand with grey clay
247 - 277	Grey clay with coarse sand and streaks of hard white ash
277 - 292	Grey clay with streaks coarse sand
292 - 357	Medium gravel with grey clay and coarse sand
357 - 365	Grey clay
365 - 367	Grey clay with medium gravel
367 - 428	Grey clay

RECEIVED

NOV 27 1998

WATER RESOURCES DEPT.
SALEM, OREGON

10 3/4 O. D. x .250 wall steel casing with Roscoe Moss spiral weld 1/16 inch (0.0625 inch) Ful-Flo Louvered Pipe set at 381 feet as follows:

+2 - 222 feet	solid steel casing
222 - 232 feet	Louvered pipe
232 - 240 feet	solid steel casing
240 - 300 feet	Louvered pipe
300 - 310 feet	solid steel casing
310 - 370 feet	Louvered pipe
370 - 381 feet	solid steel casing

18 inch diameter hole from 0 to 400 feet; 12¼ inch diameter hole from 400 - 428 feet.

3 inch diameter thread & coupled gravel shute from +1 to 209 feet.

Well packed by tremie pipe from 200 feet to 400 feet with Silica Resources blend of #6 & #8 gravel.

Cement sanitary seal from 0 to 200 feet.

Temperature 66 ° Fahrenheit; 0.6 PPM Iron 2 Grains Hardness Static water level at 13½ feet.

Well Test Pumped 400 GPM at 58 feet; Total dissolved solids 530 PPM; Sand content < 5 PPM.

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Salem, OR

WELL LABEL # 94386
 START CARD # 1002955

(1) LAND OWNER Owner Well I.D. Replacement Well #4

First Name _____ Last Name _____
 Company TOWN OF LAKEVIEW
 Address 525 NORTH FIRST STREET
 City LAKEVIEW, State OR Zip 97630

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

(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 370.00 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
24	0	375	Cement	0	199	308	S

How was seal placed: Method A B C D E

Other _____
 Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from 199 ft. to 375 ft. Material Pea Gravel Size 3/8-

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	12	<input checked="" type="checkbox"/>	2	370	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type Louver Material Mild Steel

Perf/S reen	Casing/ Liner	Screen Dia	From	To	Scm/slot width	Slot length	# of slots	Tele/ pipe size
Screen		12	210	230	.09			
Screen		12	285	360	.09			

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
750	114	168	24

Temperature 68 °F Lab analysis Yes By Umpqua Labs

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Lake Twp 39.00 S N/S Range 20.00 E E/W WM
 Sec 16 NW 1/4 of the NE 1/4 Tax Lot 2600
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

END OF NORTH SECOND STREET
 LAKEVIEW, OREGON 97630

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL (psi)	+	SWL (ft)
Completed Well	05-29-2008			21

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
02-19-2008	12	28	25			12
02-21-2008	170	200	50			12
02-26-2008	200	250	400			21
02-28-2008	300	375	1,000			21

(11) WELL LOG

Material	From	To
Top Soil Clay & Silty	0	12
Soft Sandy Silt WB	12	28
Gray Clayee Gravel	28	50
Gray Silty Clay	50	80
Gray Sandy Gravel	80	170
Gray Sandy Clay	170	200
Gray Clayee Gravel	200	250
Gray Silty Clay	250	280
Gray Sand with Larger Cobbles	280	300
Gray Clayee Gravels WB	300	375

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 Salem, OR

Date Started 02-14-2008 Completed 05-29-2008

(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 _____

Electronically Filed

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 1385 Date 09-16-2008

Electronically Filed

Signed ROBERT BUCKNER (E-filed)

Contact Info (optional) _____

STATE OF OREGON WATER SUPPLY WELL REPORT

LAKE 53433

WELL I.D. LABEL# 154502

START CARD # 1074289

10/23/2024

ORIGINAL LOG #

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

(1) LAND OWNER

Owner Well I.D. First Name Last Name Company TOWN OF LAKEVIEW Address 525 N. 1ST STREET City LAKEVIEW State OR Zip 97630

(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 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 399.00 ft. Special Standard (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Rows include Bentonite Chips and Cement.

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

Backfill placed from ft. to ft. Material

Filter pack from 200 ft. to 324 ft. Material SAND Size 12/20

Explosives used: Type Amount

Seal Placement Begin Date 7/23/2024 Begin Time 08 00

(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, 18, 2, 200, 0.375, ST, X, , ,

Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Screens Type Wire Wrap Material Stainless Steel

Table with columns: Perf/ Screen, Casing/ Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tel/ Pipe size.

(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: Pump, 475, 128, 320, 25.5

Temperature 65 F Lab analysis Yes By

Water quality concerns? Yes (describe below) TDS amount 415 ppm From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County LAKE Twp 39.00 S N/S Range 20.00 E E/W WM Sec 16 SE 1/4 of the NE 1/4 Tax Lot 300 Tax Map Number Lot Lat Long Street address of well Nearest address 1690 S.3RD ST. LAKEVIEW, OREGON 97630

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Row 1: 9/26/2024, 80.5

WATER BEARING ZONES

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Rows for dates 7/2/2024 to 7/8/2024.

(11) WELL LOG

Table with columns: Material, From, To. Rows include Top soil, Med-coarse sand w/gravel, Gravel w/med-coarse sand, clay seam @ 26', Sticky brown clay, etc.

Construction Begin Date 7/2/2024 Begin Time 08 00 End Date 9/26/2024

(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.

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.

License Number 1505 Date 10/23/2024

Signed TERRY DAUGHERTY (E-filed)

Drilling Company: Riverside Inc.

WATER SUPPLY WELL REPORT - continuation page

LAKE 53433

WELL I.D. LABEL# I

154502

10/23/2024

START CARD #

1074289

ORIGINAL LOG #

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
					○	○	□	□
					○	○	□	□
					○	○	□	□
Material		From	To	Amt sacks/lbs				

(5) BORE HOLE CONSTRUCTION

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

FILTER PACK

From	To	Material	Size
324	377	SAND	8/12
377	400	SAND	12/20

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Shoe Location

(7) PERFORATIONS/SCREENS

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrm/slot width	Slot length	# of slots	Tele/ Pipe size
Screen	Casing	10	299	319	.02			Pipe Size
Screen	Casing	10	319	339	.005			Pipe Size
Screen	Casing	10	339	379	.04			Pipe Size
Screen	Casing	10	379	399	.02			Pipe Size

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

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

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
7/9/2024	142	145	475		80.5
7/9/2024	147	148	475		80.5
7/9/2024	150	155	475		80.5
7/9/2024	156	157	475		80.5
7/9/2024	158	159	475		80.5
7/9/2024	167	169	475		80.5
7/9/2024	170	171	475		80.5
7/10/2024	186	197	475		80.5
7/10/2024	200	218	475		80.5
7/16/2024	232	399	475		80.5

(11) WELL LOG

Material	From	To
Gravel w/med-coarse sand	95	96
Burnt blue clay	96	99
Brown clay	99	100
Blue clay w/some sand	100	106
Med-coarse sand w/gravel	106	107
Blue clay	107	115
Fine-coarse sand	115	120
Fine sand	120	125
Blue clay w/ sand, gravel streak @130'	125	137
Gravel w/ med-coarse sand	137	139
Blue clay	139	142
Fine sand	142	145
Blue clay, med-coarse sand streak @ 147'	145	150
Med-coarse sand, gravel, blue clay streak @ 157'	150	159
Blue clay	159	167
Med-coarse sand	167	169
Blue clay, fine sand streak @ 170'	169	186
Gravel w/ med-coarse sand	186	187
Blue clay w/ gravel, med-coarse sand streak @ 190'	187	193
Fine sand	193	197
Blue clay	197	200
Gravel, fine-coarse sand w/ blue clay streaks	200	218
Blue clay	218	232
Gravel, med-coarse sand w/ blue clay streaks	232	249
Blue clay	249	270
Fine-coarse sand, gravel w/ blue clay streaks	270	399
Blue clay	399	400

Name of person(s) who assisted with construction and Trainee License # / Helper #

Assistant Name	Type	#

Comments/Remarks

NOTE: K-PACKER @ 185'

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WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

LAKE 53433

10/23/2024

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Salem, OR

Map of Hole

STATE OF OREGON
WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 42.18713035 Datum: WGS84

Longitude: -120.35850814

Township/Range/Section/Quarter-Quarter Section:

WM39.00S20.00E16SENE

Address of Well:

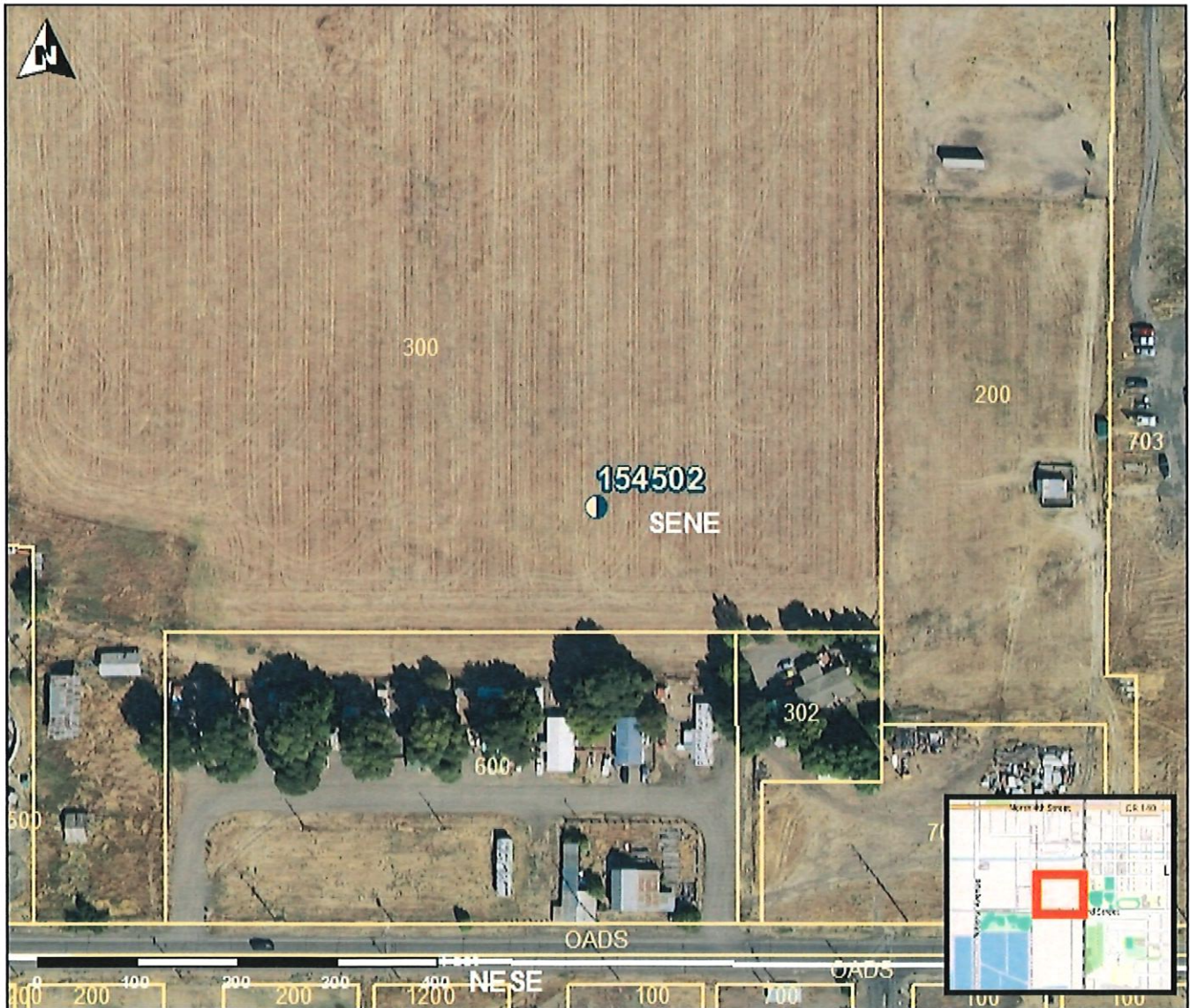
1690 S.3RD ST. LAKEVIEW, OREGON 97630

Well Label: 154502

Printed: October 23, 2024

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



ATTACHMENT B
Evidence of Use Affidavit and Water Use
Reports for Certificates 22857, 50821, 56752,
62737, 90394, 91447, and 91733

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Salem, OR

Application for Water Right Transfer Evidence of Use Affidavit



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

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

State of Oregon)
) ss
 County of LAKE

I, SEAN PETITMERMET, in my capacity as PUBLIC WORKS DIRECTOR,
 mailing address 525 NORTH 1ST STREET, LAKEVIEW, OR 97630
 telephone number (541)947-2020, being first duly sworn depose and say:

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

2. I attest that:

- Water was used during the previous five years on the **entire** place of use for Certificates # 22857, 50821, 56752, 62737, 90394, 91447, AND 91733; **OR**
 My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # _____ has been issued within the past five years; **OR**
 Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
 The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
 Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____ (For Historic POD/POA Transfers)

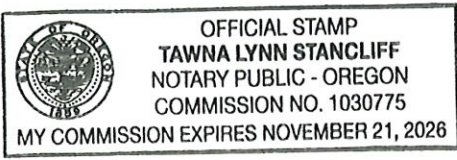
(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): MUNICIPAL, QUASI-MUNICIPAL, AND DOMESTIC
4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

[Signature]
Signature of Affiant

4-29-24
Date

Signed and sworn to (or affirmed) before me this 29th day of April, 2024.



[Signature]
Notary Public for Oregon
My Commission Expires: November 21st 2026

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

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Water Use Report Based on Water Right



Cert:22857 OR *

TOWN OF LAKEVIEW 525 N 1ST ST LAKEVIEW, OR 97630

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Acre-feet (AF) of Water Used

Water Year*	Report ID	Facility	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total Water Used	Irrigated Acres
2023	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2022	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2021	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.78	3.68	0.00	0.00	4.47
2020	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.60	0.00	0.00	0.00	4.60
2019	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2018	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33.76	45.74	0.00	79.50
2017	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2016	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2015	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.82	0.00	0.00	9.82	0.00
2014	11670	WELL 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

1 2 3 4

*The water year is named for the calendar year in which it ends. Example: the 2018 water year begins Oct. 1, 2017 and ends Sep. 30, 2018.

- The Water Resources Department makes reasonable efforts to screen the data for quality control; however, the Department cannot accept responsibility for errors, omissions, or accuracy of the information. Notification of any errors is appreciated. Send notifications to owrd.waterreporting@water.ors.gov or call 971-345-7489.
- Water use is reported by point of diversion (POD), rather than by water right.
- If a POD is shared with multiple water rights, it is not feasible to separate out the amount used under the water right being queried from water used by other rights using this same POD.
- Monthly amounts indicate:
 - For diverted rights, the total amount diverted during the month;
 - For storage rights, the amount generally stored in the reservoir/pond during the month, as represented by the volume of water impounded on approximately the same day each month.
- Water use amounts have all been converted to "acre-feet" (AF), regardless of the original measurement unit reported. One AF is the volume of water that will cover an acre of ground one foot deep = 325,850 gallons.
- Zeros indicate that a report was received stating that no water was used during those months; if a year is not listed, no report of water use was received for that year.

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Salem, OR

Water Use Report Based on Water Right



Cert:50821 OR *

LAKEVIEW WATER COMMISSION; CITY HALL LAKEVIEW, OR 97630

Records per page: 10 [View All](#)

Water Year*	Report ID	Facility	Acre-feet (AF) of Water Used												Total Water Used	Irrigated Acres
			Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
2022	12797	WELL 6	7.98	0.00	0.00	3.15	0.00	0.00	0.00	1.50	35.45	43.54	40.48	29.39	161.50	
2021	12797	WELL 6	6.39	0.00	0.00	0.00	0.00	1.63	0.00	0.00	0.00	43.58	39.13	27.85	118.59	
2020	12797	WELL 6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.78	35.82	33.17	25.18	99.95	
2019	12797	WELL 6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2018	12797	WELL 6	0.00	0.00	0.00	0.00	0.00	2.55	0.00	0.00	3.41	39.56	24.56	0.00	70.08	
2017	12797	WELL 6	0.00	0.00	0.00	0.00	0.00	1.64	0.00	0.00	27.51	2.87	16.66		48.68	
2016	12797	WELL 6	10.82	0.00	0.00	0.00	0.00	3.39	0.00	0.00	0.00	49.55	21.25	0.00	85.01	
2015	12797	WELL 6	2.39	0.00	0.00	0.00	0.00	2.70	2.37	30.75	31.78	48.54	25.50		144.04	
2014	12797	WELL 6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15.39	54.17	48.22	31.30		149.08	
2013	12797	WELL 6	1.76	0.00	0.00	0.00	0.00	0.00	0.00	20.08	55.97	53.30	18.47		149.58	

1 2 3 4

*The water year is named for the calendar year in which it ends. Example: the 2018 water year begins Oct. 1, 2017 and ends Sep. 30, 2018.

- The Water Resources Department makes reasonable efforts to screen the data for quality control; however, the Department cannot accept responsibility for errors, omissions, or accuracy of the information. Notification of any errors is appreciated. Send notifications to OWRD@ci.salem.or.us or call 971-345-7489.
- Water use is reported by point of diversion (POD), rather than by water right.
- If a POD is shared with multiple water rights, it is not feasible to separate out the amount used under the water right being queried from water used by other rights using this same POD.
- Monthly amounts indicate:
 - For diverted rights, the total amount diverted during the month;
 - For storage rights, the amount generally stored in the reservoir/pond during the month, as represented by the volume of water impounded on approximately the same day each month.
- Water use amounts have all been converted to "acre-feet" (AF), regardless of the original measurement unit reported. One AF is the volume of water that will cover an acre of ground one foot deep = 325,850 gallons.
- Zeros indicate that a report was received stating that no water was used during those months; if a year is not listed, no report of water use was received for that year.

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 Salem, OR

Water Use Report Based on Water Right



Cert:56752 OR *

CITY OF LAKEVIEW, CITY HALL LAKEVIEW, OR 97630

Records per page: 10 [View All](#)

Acres-feet (AF) of Water Used

Water Year*	Report ID	Facility	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total Water Used	Irrigated Acres
2022	12796	WELL 7				43.77	39.63	51.27	38.40	43.26	60.56	56.12	52.55	50.52	436.08	
2021	12796	WELL 7	54.41	40.33	42.06	39.91	42.05	49.76	47.61	58.88	62.19	58.07	54.96	55.57	605.81	
2020	12796	WELL 7	52.17	35.58	346.71	27.12	24.43	23.54	25.93	11.71	40.86	58.96	53.37	53.87	754.24	
2019	12796	WELL 7	41.28	307.31	19.85	31.28	24.56	32.37	15.37	0.00	19.86	59.34	58.74	49.31	659.27	
2018	12796	WELL 7	40.44	42.30	41.53	37.62	2.34	26.28	3.10	0.00	41.84	63.63	59.08	56.41	414.58	
2017	12796	WELL 7	50.18	48.22	51.28	66.00	51.83	46.51	32.40	17.08	41.21	63.67	72.88	52.59	593.84	
2016	12796	WELL 7	62.32	53.79	53.16	57.44	60.26	38.41	23.21	6.06	54.60	73.46	58.51	52.35	593.57	
2014	12796	WELL 7	52.63	38.50	48.45	46.58	39.98	31.25	25.59	36.46	67.78	64.98	62.53	62.22	576.96	
2013	12796	WELL 7	53.08	31.82	31.22	51.40	40.30	38.96	24.72	17.10	54.67	67.27	66.25	61.76	538.54	
2012	12796	WELL 7	40.62	28.79	3.10	34.24	33.85	34.04	20.28	6.13	52.77	70.08	68.42	72.17	464.49	

1 2 3 4

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- Zeroes indicate that a report was received stating that no water was used during those months; if a year is not listed, no report of water use was received for that year.

Received by OWRD

DEC 18 2024

Salem, OR

Water Use Report Based on Water Right



Cert.62737 CF *

TOWN OF LAKEVIEW 525 N 1ST ST LAKEVIEW, OR 97630

Records per page: 10 [View All](#)

Water Year*	Report ID	Facility	Acre-feet (AF) of Water Used												Total Water Used	Irrigated Acres	
			Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
2023	11671	WELL 8	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2022	11671	WELL 8	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2021	11671	WELL 8	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2020	11671	WELL 8	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2019	11671	WELL 8	29.86	28.71	39.93	34.02	30.66	35.85	5.25	7.29	21.93	37.76	35.43	23.38		330.08	
2018	11671	WELL 8	0.00	0.00	0.00	0.18	2.48	2.70	2.37	2.49	2.57	2.51	2.38	3.46		21.14	
2017	11671	WELL 8	0.00	0.00	0.00	0.00	0.00	0.00	52.40	0.00	0.00	0.61	1.36	0.00		34.36	
2016	11671	WELL 8	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17.64	13.93		31.57	
2015	11671	WELL 8	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.90	10.38	5.55	0.00		29.83	
2014	11671	WELL 8	0.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17.01	18.58	14.24	1.41		52.12	

1 2 3 4

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Received by OWRD
DEC 18 2024
Salem, OR

Water Use Report Based on Water Right



Cert:90394 OR *

TOWN OF LAKEVIEW 525 N 1ST ST LAKEVIEW, OR 97630

Records per page: 10 [View All](#)

Water Year*	Report ID	Facility	Acre-feet (AF) of Water Used												Total Water Used	Irrigated Acres	
			Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
2023	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2022	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.69
2021	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.21	0.21	0.00	0.00	0.00	0.41
2020	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.38	0.78	0.00	0.00	0.00	1.17
2019	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.17	0.13	0.00	0.00	0.00	0.00	0.00	0.29
2018	62332	WELL/N WELL (LAKE 50703 / L-19876)	4.63	5.46	6.22	6.18	5.87	6.18	5.07	3.96	3.54	2.77	2.81	3.36		56.07	
2017	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2016	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2015	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2014	62332	WELL/N WELL (LAKE 50703 / L-19876)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

12

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Received by OWRD

DEC 18 2024

Salem, OR

Water Use Report Based on Water Right



Cert.91447 CF *

TOWN OF LAKEVIEW 525 N 1ST ST LAKEVIEW, OR 97630

Records per page: 10 [View All](#)

Water Year*	Report ID	Facility	Acre-feet (AF) of Water Used												Total Water Used	Irrigated Acres		
			Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep				
2022	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36.33	36.55	18.70	91.58	
2021	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.71	42.72	40.49	30.74	5.88	128.54	
2020	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2019	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2018	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2017	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2016	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2015	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2014	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2013	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

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Received by OWRD

DEC 18 2024

Salem, OR

Water Use Report Based on Water Right



Cert:91733 CF *

TOWN OF LAKEVIEW 525 N 1ST ST LAKEVIEW, OR 97630

Records per page: 10 [View All](#)

Water Year*	Report ID	Facility	Acre-feet (AF) of Water Used												Total Water Used	Irrigated Acres	
			Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep			
2022	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36.33	36.55	18.70	91.58	
2021	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.71	42.72	40.49	30.74	5.88	128.54	
2020	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2019	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2018	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2017	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2016	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2015	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2014	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2013	65237	WELL 9 (LAKE 52105)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

12

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DEC 18 2024

Salem, OR

ATTACHMENT C
Land Use Information Form

Received by OWRD

DEC 18 2024

Salem, OR

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

NAME Michele Parry – Town of Lakeview Manager			PHONE 541-947-2020	
MAILING ADDRESS 525 North 1 st Street				
CITY Lakeview	STATE OR	ZIP 97630	EMAIL townmanager@townoflakeview.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:
T38S	R20E	33	SWSW, SESW, SWSE, SESE		Exclusive Farm Use, Rural Residential	<input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	Quasi-Municipal
T39S	R20E	3, 4, 9, 10, 15, 16, 17, 21, 22			Exclusive Farm Use, Rural Commercial, Rural Residential, Industrial, Medium Low-Density Residential, Commercial, Medium High-Density Residential, Rural Industrial, Mineral and Aggregate	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	Municipal, Quasi-Municipal, Domestic

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

Lakeview, Lake County, Oregon

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: 11.14 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:

The applicant is proposing to add additional wells to the municipal, quasi-municipal, and domestic water rights owned by the Town of Lakeview. This will allow the Town to use any of their authorized wells for each of their water rights.

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 →

Received by OWRD

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): Yamhill County Zoning Ordinance Arts. 2, 3, 6, 9, 10
- 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.

See Description on Page 1.

Name: Darwin Johnson Title: Planning Director
 Signature: [Signature] Date: 4 April 2024
 Governmental Entity: Yamhill County Planning Dept. Phone: 541-947-6036

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: _____

Received by OWRD
 DEC 18 2024