

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist



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

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-13023 Attachment 4
Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). **Attachment 1**
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone. **Attachment 3**
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. **Attachment 2**
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(For Staff Use Only)

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

Application fee not enclosed/insufficient Map not included or incomplete

Land Use Form not enclosed or incomplete

Additional signature(s) required Part _____ is incomplete

Other/Explanation _____

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

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

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

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JAN 10 2025

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

14593 -

Applicant Information

Part 4 of 5 – Applicant Information and Signature

APPLICANT/BUSINESS NAME Arriola Bogs LLC; Attn Frank Arriola and Tony Arriola			PHONE NO. 541-290-7634	ADDITIONAL CONTACT NO.
ADDRESS PO Box 458				FAX NO.
CITY Coquille	STATE OR	ZIP 97423	E-MAIL tony@orcranberry.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.				

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

AGENT/BUSINESS NAME Summit Water Resources LLC; Attn: Theodore Ressler			PHONE NO. 503-701-4535	ADDITIONAL CONTACT NO.
ADDRESS 4784 SE 17th Ave Suite 111				FAX NO.
CITY Portland	STATE OR	ZIP 97202	E-MAIL tressler@summitwr.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this permit amendment; and why:
[This permit amendment proposes additional points of appropriation corresponding with the wells identified in the Claim of Beneficial Use for Permit G-13023 filed with the Department on February 2, 2002. This permit amendment is being filed in compliance with the Permit Amendment Condition listed in the Final Order approving the time extension for Permit G-13023 \(issued 8/23/2024\)](#)

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

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

Is the applicant the permit holder of record? Yes No

If NO, include either:

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

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

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

If NO, what are the completion dates of the permit(s)? 10/1/2028

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

By my signature below, I confirm that I understand:

- Prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Coquille Valley Sentinel

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JAN 10 2025 14593 -

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


Applicant Signature

Frank Arriola
Member and Agent, Arriola Bogs, LLC
Print Name (and Title if applicable)

12-08-2024
Date

Applicant Signature

Print Name (and Title if applicable)

Date

Received
JAN 10 2025
OWRD 14593 -

Check one of the following:

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

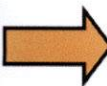
Check the appropriate box, if applicable:

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

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME Curry County Planning Department	ADDRESS 94235 Moore St, Suite 113	
CITY Gold Beach	STATE OR	ZIP 97444

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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JAN 10 2025

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14593 -

INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please **save the application form to your computer**. Unlock the document by using one of the following instructions for your Microsoft Word software version:

Microsoft Word 2003

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;
- OR**
- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the **Tools** menu => click **Protect Document**;
- OR**
- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

Microsoft Word 2007

- Unlock the document by clicking the **Review** tab, then click **Protect Document**, then click **Stop Protect**
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

Microsoft Word 2010

- Unlock the document by clicking the **Review** tab, toggle the **Restrict Editing icon** at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the "**Allow only this type of editing in the document: Filling in forms**" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the **Editing Restrictions/Allow Only This Type of Editing/Filling In Forms** box from the drop-down menu, then check **Yes, Start Enforcing Protection**. You do not need to assign a password for the editing restrictions.

Other Alternatives:

- Photocopy pages or tables in Part 5, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

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JAN 10 2025

OWRD

14593 -

Please use a separate Part 5 for each permit being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

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JAN 10 2025

PERMIT # **G-13023**

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

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	CURR-50154 L-08207	31 S	15 W	28	SE	SW	3700	2194 feet East and 188 feet North of the SW corner of Section 28 (SESW)*
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CURR-50156 L-08209	31 S	15 W	28	SE	SW	3700	2314 feet East and 1267 feet North of the SW corner of Section 28 (SESW)
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CURR-50155 L-08208	31 S	15 W	28	SE	SW	3700	2471 feet East and 940 feet North of the SW corner of Section 28 (SESW)
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CURR-50158 L-08211	31 S	15 W	28	SE	SW	3700	2471 feet East and 802 feet North of the SW corner of Section 28 (SESW)
Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CURR-50153 L-08206	31 S	15 W	28	SE	SW	3700	2469 feet East and 620 feet North of the SW corner of Section 28 (SESW)
Well 5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CURR-50152 L-08205	31 S	15 W	28	SE	SW	3700	2194 feet East and 188 feet North of the SW corner of Section 28 (SESW)

* The location of the authorized POA has been updated to describe more accurately the location of the well.

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

- Place of Use (POU)
- Point of Diversion (POD)
- Additional Point of Diversion (APOD)
- Point of Appropriation/Well (POA)
- Additional Point of Appropriation (APOA)
- Surface water POD to Ground Water POA (SW/GW)

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

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

For a change in place of use:

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

- Yes No

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

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

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use unless the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to

496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

Received
JAN 10 2025
OWRD

14593 -

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

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

Table 2. Description of Changes to Water Use Permit # G-13023

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.													
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																								
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	S	9	E	15	NW	NW	100	1	10.0	POD #5	
"	"	"	"	"	"	"	"	"	EXAMPLE	"		"	2	S	9	E	15	SW	NW	200		5.0	POD #6	
												APOA	31	S	15	W	28	SE	SW	3700		10.0	Well 1 Well 2 Well 3 Well 4 Well 5 Well 6	
												"	31	S	15	W	33	NE	NW	400		20.0	"	
												"	31	S	15	W	33	SE	NW	400		20.0	"	
												"	31	S	15	W	33	NW	NE	400		20.0	"	
												"	31	S	15	W	33	SW	NE	400		20.0	"	
TOTAL ACRES											TOTAL ACRES										90.0			

Additional remarks: [This permit amendment proposes additional points of appropriation corresponding with the wells identified in the Claim of Beneficial Use for Permit G-13023 filed with the Department on February 2, 2002. No other changes are requested. This permit amendment is being filed in compliance with the Permit Amendment Condition listed in the Final Order approving the time extension for Permit G-13023 \(issued 8/23/2024\).](#)

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JAN 10 2025
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Are there other water rights certificates, water use permits or ground water registrations associated with the "from" or "to" lands? Yes No

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



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

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

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

AND/OR

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

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JAN 10 2025

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L- _____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
Well 1	Yes	CURR 50156 L-08209	90	4.5 inch	+2-70	0-20	70-90	49	Sand	0.11 cfs
Well 2	Yes	CURR 50155 L-08208	98	4.5 inch	+2-68	0-20	68-98	50	Sand/Gravel	0.27 cfs
Well 3	Yes	CURR 50158 L-08211	82	4.5 inch	+2-62	0-20	62-82	34	Sand/Gravel	0.27 cfs
Well 4	Yes	CURR 50153 L-08206	97	4.5 inch	+2-59	0-20	57-97	47	Sand	0.27 cfs
Well 5	Yes	CURR 50152 L-08205	111	6 inch	+2-39	0-20	71-111	66	Sand	0.27 cfs

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 6	Yes	CURR 501554 L-08207	97	4.5 inch	+2-77	0-20	77-97	47	Sand	0.27 cfs

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Attachment 1
Map

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Attachment 2
Well Logs

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

CURR
50152 WELL I.D.#

609205
(START CARD) # 85888

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

(1) OWNER: Well Number _____
Name Frank Arriola
Address 210 Alder Hill Rd
City Coos Bay State OR Zip 97420

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

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 111 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10	0	20	Bent	20	0	12 3/4
6	20	111				

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

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6	0	22	39	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4 1/2	0	71	30	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type Hydrophilic Material PVIC

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
71	111	010		4 1/2	4 1/2	<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing
 Artesian

Yield gal/min	Drawdown	Drill stem at	Time
20		111	1 hr.

Temperature of water 52° 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 Coos Latitude _____ Longitude _____
Township 31 N or S Range 15 E or W WM.
Section 28 NW 1/4 NW 1/4
Tax Lot 9200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 93213
Air port Rd

(10) STATIC WATER LEVEL:
66 ft. below land surface. Date 1-26-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 66

From	To	Estimated Flow Rate	SWL
66	111	20 gpm	66

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Blown sandy clay	0	40	
Brown sand	40	111	66

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WATER RESOURCES DEPT.
SALEM, OREGON

OWRD

Date started 1-6-97 Completed 1-26-97

(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 1381
Signed Alan Bunn Date 2-25-97

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

Curr
50153
WELL I.D.#

608206
(START CARD) # 85889

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

(1) OWNER: Well Number _____
Name Frank Alliola/Green Mtn. Chipping
Address 210 Alder Hill Rd Per Driller 3-27-97
City Coos Bay State OR Zip 97420

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

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 97 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL		
Diameter	From	To	Material	From	To
9	0	20	Bent	20	0
7	20	97			

Sacks or pounds 12 1/2

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 97 ft. to 20 ft. Size of gravel per

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>4 1/2</u>	<u>±2</u>	<u>59</u>	<u>5/16</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type Hydrophilic Material plastic

From	To	Slot size	Number	Diameter	Tote/pipe size	Casing	Liner
<u>57</u>	<u>97</u>	<u>.010</u>		<u>4 1/2</u>	<u>4 1/2</u>	<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____

Temperature of water 52° 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 Curry Latitude _____ Longitude _____
Township 31 N or S Range 15 E or W W.M.
Section 28 NW 1/4 NW 1/4
Tax Lot 5000 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 93213 Airport Rd.

(10) STATIC WATER LEVEL:
47 ft. below land surface. Date 1-26-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 47

From	To	Estimated Flow Rate	SWL
<u>47</u>	<u>97</u>	<u>259 gpm</u>	<u>47</u>

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>Brown sandy c.lg</u>	<u>0</u>	<u>38</u>	
<u>Brown sand</u>	<u>38</u>	<u>97</u>	<u>47</u>

Date started 1-10-97 Completed 1-26-97

(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.
Signed [Signature] WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
Signed [Signature] WWC Number 1381 Date 2-25-97

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

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

CURR
50154 WELL I.D.#

608307

(START CARD) # 85890

(1) OWNER: Well Number _____
Name Frank Arriola / Green Mtn. Chipping
Address 210 Alder Hill Rd Par Driller 3-29
City Coos Bay State OR Zip 97420

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

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 97 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
9	0	20	Bent	20	0	12 1/2
7	20	97				

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

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 97 ft. to 20 ft. Size of gravel per

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>1 1/2</u>	<u>42</u>	<u>77</u>	<u>SMR26</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>77</u>	<u>97</u>	<u>010</u>		<u>1 1/2</u>	<u>1 1/2</u>	<input type="checkbox"/>	<input type="checkbox"/>

Method Hydrophobic Material puv

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

Yield gal/min	Drawdown	Drift stem at	Time
<u>25</u>		<u>97</u>	<u>1 hr.</u>

Pump Bailer Air Flowing
 Artesian

Temperature of water 52° 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 Curry Latitude _____ Longitude _____
Township 31 N or S 15 E or W WM
Section 29 NW 1/4 NW 1/4
Tax Lot 3700 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 93213
Airport Rd

(10) STATIC WATER LEVEL:
47 ft. below land surface. Date 1-26-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 47

From	To	Estimated Flow Rate	SWL
<u>47</u>	<u>97</u>	<u>259 gpm</u>	<u>47</u>

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>Brown sandy clay</u>	<u>0</u>	<u>38</u>	
<u>Brown sand</u>	<u>38</u>	<u>72</u>	
<u>Brown</u>	<u>72</u>	<u>97</u>	<u>47</u>

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JAN 10 2025

Date started 1-15-97 Completed 1-26-97
(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.
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 water supply well construction standards. This report is true to the best of my knowledge and belief.
Signed [Signature] Date 1-25-97 WWC Number 1351

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

CURR
50155 WELL I.D.#

LO8208
(START CARD) # 8581

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

(1) OWNER:

Name Frankl Arriola / Green Mtn. Chipping Well Number
Address 210 Alder Hill Rd per Driller 3-27-97
City Coos Bay State OR Zip 97420

(2) TYPE OF WORK

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 98 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
9	0 20	BENT	20 0		12
7	20 98				

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

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 98 ft. to 20 ft. Size of gravel per

(6) CASING/LINER:

Casing/Liner	Diameter	From To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing:	4 1/2	0 98	10	<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"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

From To	Slot size	Number	Diameter	Material		Casing	Liner
				Type	Tote/pipe size		
0 98	10/10		4 1/2	Hydroptic	PVC	<input type="checkbox"/>	<input type="checkbox"/>

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

Pump	Bailer	Latr	Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
25		98	1 hr.

Temperature of water 52° 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 Curry Latitude _____ Longitude _____
Township 31 N or S Range 15 E or W
Section 28 NW 1/4 NW 1/4
Tax Lot 3206 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 93213 Airport Rd

(10) STATIC WATER LEVEL:

50 ft. below land surface. Date 1-26-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 50

From	To	Estimated Flow Rate	SWL
50	98	25 gpm	50

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Brown Sandy Clay	0	45	
Brown Sand w/ Fine gravel mixed	45	98	50

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SALEM, OREGON
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JAN 10 2025
OWRD

Date started 1-16-97 Completed 1-26-97
(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 1381
Date 2-29-97
14593 -

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

WELL I.D.#

CURR
50156

609209

(START CARD) # 85893

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

(1) OWNER: Well Number _____
Name Frank Ariola / Green Mtn Chip
Address 810 Alder Hill Rd per Driller 3-27
City Cool Bay State OR Zip 97120

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

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 90 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sector pounds
Diameter	From	To	Material	From	To	
9	0	20	Bent	20	0	12 1/2
7	20	90				

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 90 ft. to 20 ft. Size of gravel see

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>1 1/2</u>	<u>42</u>	<u>90</u>	<u>SMC</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type Hydrophobic Material PVC

From	To	Slot size	Number	Diameter	Telepipe size	Casing	Liner
<u>70</u>	<u>90</u>	<u>100</u>		<u>1 1/2</u>	<u>1 1/2</u>	<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>25</u>		<u>90</u>	<u>1 hr.</u>

Temperature of water 52° 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 Clatsop Latitude _____ Longitude _____
Township 31 N of S Range 15 E or W WM.
Section 28 NW 1/4 NW 1/4

Tax Lot 900 Lot _____ Block _____ Subdivision _____
Street address of Well (or nearest address) 93213 Mt Park Rd

(10) STATIC WATER LEVEL:
49 ft. below land surface. Date 1-26-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 49

From	To	Estimated Flow Rate	SWL
<u>49</u>	<u>90</u>	<u>25 gpm</u>	<u>49</u>

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>Brown sand/clay</u>	<u>0</u>	<u>43</u>	
<u>Brown sand</u>	<u>43</u>	<u>90</u>	<u>49</u>

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SALEM, OREGON

JAN 10 2025

CWRD

Date started 1-22-97 Completed 1-26-97

(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 1381
Signed Ron Broust Date _____

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

CURR
50158 WELL I.D.#

L08211
(START CARD) # 85895

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

(1) OWNER:

Name FRANK ARRIOLA / Green Mtn. Drill Well Number _____
Address 210 Alder Hill Rd per Driller _____
City Coos Bay State OR Zip 97420

(2) TYPE OF WORK:

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 82 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
9	0	20	Bent	20	0	12 1/4
7	20	82				

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

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 82 ft. to 20 ft. Size of gravel see

(6) CASING/LINER:

Casing:	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
	4 1/2	12	62	5/16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations		Method		Material		Casing	Liner
From	To	Type	Slot size	Number	Diameter		
62	82	Hydro	1/16		4 1/2	<input type="checkbox"/>	<input type="checkbox"/>

(9) LOCATION OF WELL by legal description:

County CURRY Latitude _____ Longitude _____
Township 31 N or S Range 15 E or W WM
Section 28 NW 1/4 NW 1/4
Tax Lot 3200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 93213 Airport

(10) STATIC WATER LEVEL:

34 ft. below land surface. Date 1-27-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 34

From	To	Estimated Flow Rate	SWL
34	82	25 gpm	34

(12) WELL LOG:

Material	From	To	SWL
Brown sand w/ clay mixed	0	28	
Brown sand w/ fine gravel mixed	28	82	34

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SALEM, OREGON

JAN 10 2025

OWRD

Date started 1-24-97 Completed 1-27-97

(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 1381

Signed Frank Arriola

Date 2-25-97

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JAN 10 2025
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Attachment 3
Land Use Information Form

Land Use Information Form

OREGON



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

Received
JAN 10 2025

OWRD

NOTE TO APPLICANTS

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

This form is NOT required if:

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

NOTE TO LOCAL GOVERNMENTS

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

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

Land Use Information Form

OREGON



Oregon Water Resources Department

725 Summer Street NE, Suite A

Salem, Oregon 97301-1266

(503) 986-0900

www.oregon.gov/OWRD

NAME Arriola Bogs LLC: Attn Tony Arriola				PHONE 541-290-7634	
MAILING ADDRESS PO Box 458					
CITY Coquille	STATE OR	ZIP 97423	EMAIL tony@orcranberry.com		

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:
31S	15W	28	SWSE	3700	AFD	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Cranberry
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	

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

Curry County

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: 0 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 Cranberry Operations

Briefly describe:

The applicant is submitting a permit amendment to Oregon Water Resources Department to add additional wells to an existing water use permit (Permit G-13023). No additional use of water is associated with this permit amendment beyond the current authorized rate of the permit (4.50 cfs). Water will continue to be used for cranberry use as currently authorized by the permit.
--

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
JAN 10 2025

14593 -

Received

JAN 10 2025

OWRD

Attachment 4
Water Right Information

**Oregon Water Resources Department
Water Right Services Division**

Application for Extension of Time

In the Matter of the Application for an Extension of Time)
for Permit G-13023, Water Right Application G-12889, in)
the name of Arriola Bogs, LLC)
FINAL
ORDER

Permit Information

Application: G-12889
Permit: G-13023
Basin: 17 – South Coast / Watermaster District 14
Date of Priority: April 24, 1992
Source of Water: a well in Floras Lake Basin
Purpose of Use: cranberry operations on 90.0 acres
Maximum Rate: 4.5 cubic feet per second(cfs)

Received
JAN 10 2025
OWRD

This Extension of Time request is being processed in accordance with Oregon Revised Statute 537.630 and 539.010(5), and Oregon Administrative Rule Chapter 690, Division 315.

Appeal Rights

This final order is subject to judicial review by the Court of Appeals under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482(1). Pursuant to ORS 536.075 and OAR 137-003-0675, you may petition for judicial review or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

Application History

Permit G-13023 was issued by the Department on May 14, 1997. The permit specified actual construction of the well to begin by May 14, 1997, and complete application of water to beneficial use by October 1, 2001. On May 13, 2024, Arriola Bogs, LLC submitted an Application for Extension of Time for Permit G-13023. In accordance with OAR 690-315-0050(2), on June 25, 2024, the Department issued a Proposed Final Order proposing to extend the time to fully apply water to beneficial use to October 1, 2028. The protest period closed August 9, 2024, in accordance with OAR 690-315-0060(1). No protest was filed.

FINDINGS OF FACT

The Department adopts and incorporates by reference the findings of fact in the Proposed Final Order dated June 25, 2024.

-
- If you have any questions about statements contained in this document, please contact the Permit Extension Specialist at (503) 979-3213.
 - If you have other questions about the Department or any of its programs, please contact our Water Resources Customer Service Group at (503) 986-0900
-

Received
JAN 10 2025
OWRD

STATE OF OREGON

COUNTY OF CURRY

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

GREEN MOUNTAIN CHIPPING, INC.
P.O. BOX 458
COQUILLE, OREGON 97423

(541)267-5016

The specific limits for the use are listed below along with conditions of use.

APPLICATION FILE NUMBER: G-12889

SOURCE OF WATER: A WELL IN FLORAS LAKE BASIN

PURPOSE OR USE: CRANBERRY OPERATIONS ON 90.0 ACRES

MAXIMUM RATE: 4.5 CUBIC FEET PER SECOND

PERIOD OF USE: YEAR ROUND

DATE OF PRIORITY: APRIL 24, 1992

POINT OF DIVERSION LOCATION: SW 1/4 SE 1/4, SECTION 28, TOWNSHIP 31 SOUTH,
RANGE 15 WEST, W.M.; 450 FEET NORTH & 2480 FEET EAST FROM SOUTHWEST
CORNER, SECTION 28

The amount of water diverted for CRANBERRY OPERATIONS, together with amounts secured under any other rights existing for the same lands, is limited as follows: For temperature control, 0.15 cubic foot per second per acre; For flood harvesting or pest control, 0.05 cubic foot per second per acre; For irrigation of cranberries, ONE-FORTIETH of one cubic foot per second and 3.0 acre-feet per acre for each acre irrigated during the irrigation season of each year. For the irrigation of any other crop, ONE-EIGHTIETH of one cubic foot per second and 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

SE 1/4 SW 1/4 10.0 ACRES
SECTION 28
NW 1/4 NE 1/4 20.0 ACRES
SW 1/4 NE 1/4 20.0 ACRES

Received
JAN 10 2025
OWRD

Application G-12889

Water Resources Department

PERMIT G-13023

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

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

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

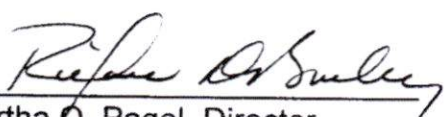
By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

Actual construction of the well shall begin within one year from permit issuance. Complete application of the water to the use shall be made on or before October 1, 2001.

Issued May 14, 1997



for Martha O. Pagel, Director
Water Resources Department

Received
JAN 10 2025
OWRD

Basin 17

Volume 3 Floras Lake & Misc.
MGMT.CODE 7BG,7BR

District 19

Application G-12889

Water Resources Department

PERMIT G-13023