

Application for Groundwater Registration Modification



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 Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

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

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

- ☒ Part 1 – Completed Minimum Requirements Checklist.
 - ☒ Part 2 – Completed Application Map Checklist.
 - ☒ Part 3 – Completed Applicant Information and Signature.
 - ☒ Part 4 – Completed Groundwater Registration Modification Application – Groundwater Registration Information. (Only one Groundwater registration per application, unless the Groundwater registrations to be modified are layered).
 - ☒ Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).
 - ☒ Groundwater registration modification fees – Amount enclosed: \$ **1,250.00**. (\$875.00 for a place of use change only; \$1,250.00 for any other change or combination).
- Attachments:**
- ☐ ☒ N/A Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is **not** the registration certificate holder of record. The Request for Assignment Form is available at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>.
Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) **or** the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.
 - ☒ ☐ N/A Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
 - ☒ ☐ N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

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(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"/> Assignment Form and fee not enclosed/insufficient |
| <input type="checkbox"/> Additional signature(s) required | <input type="checkbox"/> Part _____ is incomplete |

Other/Explanation _____

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

Part 2 of 4 – Groundwater Registration Modification Map Checklist

Your Groundwater Registration Modification 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.

- ☒ 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.
- ☐ NA Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches. → No permanent water delivery structure present.
- ☒ Existing place of use that includes hachuring, 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 registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.
- ☒ ☐ N/A If you are proposing a modification in place of use, show the proposed place of use with hachuring including 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 appropriation with distance and bearing or coordinates from a recognized survey corner.
- ☒ ☐ N/A If you are proposing a modification in point(s) of appropriation, show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Daniel A Hauge/ Sterling Acres LLC		PHONE NO. 360-909-0326	ADDITIONAL CONTACT NO. 360-909-0326
ADDRESS PO Box 12125		FAX NO. 480-608-2748	
CITY Scottsdale	STATE AZ	ZIP 85267	E-MAIL daniel.hauge@outlook.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

APPLICANT/BUSINESS NAME Michael Higgins / HGX Solutions LLC		PHONE NO. 858-775-0811	ADDITIONAL CONTACT NO.
ADDRESS 1672 SW Country Club Pl		FAX NO.	
CITY Corvallis	STATE OR	ZIP 97333	E-MAIL mhigginsrocks@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this modification; and why:
The modification is proposing four additional points of appropriation (wells) to meet capacity at the authorized rate and transfer 16.5 acres authorized place of use (POU) [tax map 11 4 04, parcel 500 & 501; tax map 11 4 05, parcel 800], to 'on lands' for irrigation use of the neighboring property [tax map 11 4 04, parcel 700].

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)

(Check one box)

- ☒ By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a); **OR**
- ☐ I (we) 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 (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

I understand that prior to Department approval of the groundwater registration modification, 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 groundwater registration 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 paper: <https://democratherald.com/>.

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


Applicant Signature

Daniel Hauge, Manager Sterling Acres LLC
Print Name (and Title if applicable) Date

2/6/2025

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Applicant Signature

Print Name (and Title if applicable)

Date

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Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, 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 Groundwater registration has been conveyed.

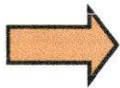
Check the appropriate box, if applicable:

- ☒ Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME District 22	ADDRESS 725 Summer Street NE, Suite A	
CITY Salem	STATE OR	ZIP 97301

- ☐ Check here if water for the Groundwater registration is supplied under a water service agreement or other contract 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 Benton County	ADDRESS 4500 SW Research Way	
CITY Corvallis	STATE OR	ZIP 97333

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 4 of 4 – Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

Groundwater Registration # GR-2599 (Certificate # GR-)

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

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

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	OWRD Well Log ID# (or Well ID Tag # L-_____)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	BENT 2505 (L-157022)	11	S	4	W	4	NW	SW	500	N 1610-ft, E 845-ft from SW Corner SEC 4
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	BENT 2499 (L-157023)	11	S	4	W	4	NW	SW	500	N 1420-ft, E 310-ft from SW Corner SEC 4
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	BENT 058 (L-157024)	11	S	4	W	4	SE	SW	700	N 1225-ft, E 2060-ft from SW Corner SEC 4
Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	BENT 2500 (L-157025)	11	S	4	W	4	SE	SW	500	N 0-FT, E 1400-ft from SW Corner SEC 4
Well 5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	BENT 2510 (L-157026)	11	S	4	W	5	SW	SE	700	N 810-ft, W 1810-ft from SE Corner SEC 5
Well 5b Alternate	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	TBD	11	S	4	W	5	SW	SE	700	N 500-ft, W 1810-ft from SE Corner SEC 5

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation (well) (POA) |
| <input type="checkbox"/> Character of Use (USE) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |

Will all of the proposed changes affect the entire Groundwater registration?

- ☒ 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 registration to be changed.

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Please use and attach additional pages of Table 2 as needed.
See page 5 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 Modifications to Registration GR-2599 (Certificate # GR-_____)

List only the part of the registration that will be modified. For the acreage in each $\frac{1}{4}$ $\frac{1}{4}$, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration 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	$\frac{1}{4}$	$\frac{1}{4}$	Tax Lot	Gvt Lot or DLC	Acre	Type of USE listed on Certificate	POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	$\frac{1}{4}$	$\frac{1}{4}$	Tax Lot	Gvt Lot or DLC	Acre	New Type of USE	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
"	"	"	"	"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
													POU/APOD	11	S	4	W	4	NE	SW	700		7.0	IR	WELL 3	12/31/ 1952
													POU/APOA	11	S	4	W	4	NW	SE	700		9.5	IR	WELL 3	12/31/ 1952
													POU/APOA	11	S	4	W	4	SE	NW	500		5.2	IR	WELLS 1,2,4,5	12/31/ 1952
													POU/APOA	11	S	4	W	4	SW	NW	500		6.6	IR	WELLS 1,2,4,5	12/31/ 1952
													POU/APOA	11	S	4	W	4	NE	SW	500 & 501		16.6	IR	WELLS 1,2,4,5	12/31/ 1952
													POU/APOA	11	S	4	W	4	NW	SW	500		40.7	IR	WELLS 1,2,4,5	12/31/ 1952
													POU/APOA	11	S	4	W	4	SE	SW	500		20.0	IR	WELLS 1,2,4,5	12/31/ 1952
													POU/APOA	11	S	4	W	4	SW	SW	500		31.1	IR	WELLS 1,2,4,5	12/31/ 1952
													POU/APOA	11	S	4	W	5	NE	SE	800		35.6	IR	WELLS 1,2,4,5	12/31/ 1952
Revised 7/1/2021													TOTAL ACRES													
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FEB 10 2025													Next Pg													
Salem, OR													TACS													

AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration 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	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					
EXAMPLE														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
"	"	"	"	"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	E	2	SW	NW	500		5.0			POD #6	1901
													POU/APOD	11	S	4	W	5	NW	SE	800		7.6	IR	WELLS 1,2,4,5	12/31/ 1952	
													POU/APOA	11	S	4	W	9	NW	NW	700		11.5	IR	WELLS 1,2,4,5	12/31/ 1952	
													POU/APOA	11	S	4	W	9	NE	NW	700		0.6	IR	WELLS 1,2,4,5	12/31/ 1952	
TOTAL ACRES														TOTAL ACRES							192.0						

Additional remarks: This modification is proposing to add four additional wells to the system to meet authorized capacity and also transfer a total of 16.5 acres from a portion of the authorized place of use (POU) to an adjacent lot. The current water delivery system uses above ground portable systems. The GR 2599 claim for Donal G. Hector statement showed (POU) covering 195 acres for irrigation as the total for quarter-quarters for the original survey and mapped location for irrigation. The POU is now associated with parcels (tax lot) 500 and 501 of tax map 11 4 04 and parcel 800 of tax map 11 4 05 of Benton County Oregon. The proposed POU total is 192.0 acres. The map area is calculated using projected GIS cartesian planimetric measurements. Note - Benton County public survey and tax maps were used as a basemap.

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Groundwater Registration # GR-2599 (Certificate # GR-_____)

For a modification in place of use or character of use:

Are there other water right certificates, water use permits, or Groundwater registrations associated with the "from" or "to" lands? ☐ Yes ☒ No

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:



Pursuant to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the "to" lands must be filed separately with a Groundwater registration modification.

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

- ☒ Well log(s) are attached for each well 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/)

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.

**Authorized (POA)
Well 1: BENT 2505**

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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 adequate information is likely to delay the processing of your modification 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.

Table 3: Proposed Wells

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 2	YES	BENT 2499	66	10	54	18	42-53	17	ALLUVIUM	100
WELL 3	YES	BENT 058	75	10	59	18	42-57	28	ALLUVIUM	80
WELL 4	YES	BENT 2500	70	10	54	18	39-52	25	ALLUVIUM	85
WELL 5	YES	BENT 2510	72	10	59	18	40-57	25	ALLUVIUM	85
WELL 5b	NO	NA	<80	TBD	TBD	TBD	TBD	NA	ALLUVIUM	TBD

Map and well logs (Table 1) to accompany this GR-Modification application are well logs attached.

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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 Daniel Hauge			PHONE 360-909-0326		
MAILING ADDRESS PO Box 12125					
CITY Scottsdale		STATE AZ	ZIP 85267	EMAIL daniel.hauge@outlook.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:
11S	4W	4	NESW	700	EFU	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	4	NWSE	700	EFU	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	4	SESW	500	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	4	SWSW	500	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	4	NESW	500 & 501	EFU	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	4	NWSW	500	EFU	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	4	SESW	500	EFU	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	4	SWSW	500	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	5	NESE	800	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	5	NWSE	800	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	5	SWSE	700	EFU	<input checked="" type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	Ag, IR, Crops
11S	4W	9	NWNW	500	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops
11S	4W	9	NENW	500	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag, IR, Crops

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

Benton County

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

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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: 300 ☐ 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:

GR Modification: To add additional wells (point of appropriation) and transfer 16.5 acres 'from lands' with a portion of the authorized place of use (POU) lands to the 'on lands' for the adjacent farm property located to the east.

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 ➡

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For Local Government Use Only

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

Please check the appropriate box 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): SS.105.01
- ☐ 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.

Name: James Wright Title: Associate Planner
 Signature: [Signature] Date: 02/05/2025
 Governmental Entity: Benton County OR Phone: 541-766-6819

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

FEB 10 2025

Salem, OR

STATE ENGINEER
Salem, Oregon

Well Record

STATE WELL NO. 11/4W-4
COUNTY BENTON
APPLICATION NO. GR-2599

OWNER: Donald G. Hector

MAILING
ADDRESS:

Rt. 1, Box 390,

Well 1

LOCATION OF WELL: Owner's No. _____

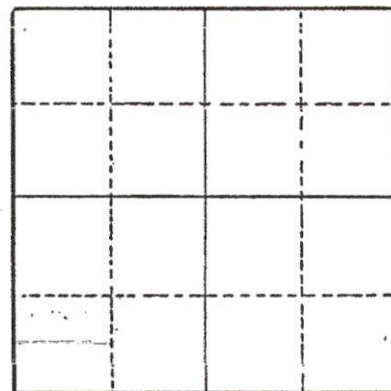
CITY AND
STATE:

Corvallis, Oregon

$N\frac{1}{2}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$ Sec. 4 T. 11 N. S. R. 4 E. W.M.

Bearing and distance from section or subdivision

corner 544' S. 63° 30' W.



Section _____

Altitude at well _____

TYPE OF WELL: Drilled Date Constructed 1952

Depth drilled 57 Depth cased 57

CASING RECORD:

12-inch

FINISH:

Perforated, size and number unknown from 42 to 45
Perforated, size and number unknown from 50 to 57

AQUIFERS:

WATER LEVEL:

15-feet

PUMPING EQUIPMENT: Type F.M. Turbine H.P. 15
Capacity 230-300 G.P.M.

WELL TESTS:

Drawdown 20 ft. after _____ hours Pumping 300 G.P.M.
Drawdown _____ ft. after _____ hours _____ G.P.M.

USE OF WATER Irrigation Temp. _____ °F. _____, 19____

SOURCE OF INFORMATION GR-2466

DRILLER or DIGGER Raymond Gellatly, Philomath, Oregon

ADDITIONAL DATA:

Log _____ Water Level Measurements _____ Chemical Analysis _____ Aquifer Test _____

REMARKS:

Received by OWRD

FEB 10 2025

Salem, OR

14605 -



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

Application for Well ID Number

RECEIVED

JAN 14 2025

OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): Sterling Acres LLC

Mailing Address: PO Box 12125

City, State, Zip: Scottsdale, AZ, 85267

Received by OWRD

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

FEB 10 2025

Name & Address: Daniel Hauge will pick up at OWRD office

Salem, OR

City, State, Zip: _____

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

Township: 11 S (North / South) Range: 4 W (East / West) Section: 4 NW 1/4 of the SW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 500 County Benton

GPS Coordinates: 44.6402201, -123.1873790 (+/- 10-ft)

Street Address of Well, City: 204 NW Independence Hwy (W of), Albany, OR 97321

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

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

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

Date Well Constructed (or property built): 1952 Total Well Depth: 57' Casing Diameter: 12"

Owner at time the well was constructed (if known): Donald Hector Well Report # (if known): BENT 2505

Other Information: Irrigation well, authorized under GR 2599

SUBMITTED BY (please print): Agent: Michael Higgins (HGX Solutions, LLC)

PHONE: 858.775.0811

EMAIL &/or FAX: mhigginsrocks@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

1-14-2025

Well Report Number:

BENT 2505

Well Identification #:

L-157022

WATER WELL REPORT

STATE OF OREGON

RECEIVED

MAR 26 1987

State Well No. 11/4W-4ca

State Permit No.

Well 2

(1) OWNER:

WATER RESOURCES DEPT.

SALEM, OREGON

Name Don Hector + Kenneth Holmes
 Address 202 Independence Ave
 City Albany State ore

(2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Electric Air ☐ Driven ☐ Domestic ☐ Industrial ☐ Municipal ☐
 Mud ☐ Dug ☐ Irrigation ☒ Test Well ☐ Other ☐
 Cable ☒ Bored ☐ Thermal: Withdrawal ☐ Reinjection ☐

(4) PROPOSED USE (check):

(5) CASING INSTALLED:

Steel ☒ Plastic ☐
 Threaded ☐ Welded ☒
 10" Diam. from 1+ ft. to 54 ft. Gauge 3/8
 " Diam. from ft. to ft. Gauge

LINER INSTALLED:

" Diam. from ft. to ft. Gauge

(6) PERFORATIONS:

Perforated? ☒ Yes ☐ No

Type of perforator used torch
 Size of perforations 1/4 in. by 5 in.
 80 perforations from 42 ft. to 53 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

Is a pump test made? ☐ Yes ☒ No If yes, by whom?
 Yield: gal./min. with ft. drawdown after hrs.
 " " " "
 Air test gal./min. with drill stem at ft. hrs.
 Boiler test 100 gal./min. with 8 ft. drawdown after 1 hrs.
 Artesian flow g.p.m.
 Temperature of water 52° Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Special standards: Yes ☐ No ☒

Well seal—Material used sement
 Well sealed from land surface to 18 ft.
 Diameter of well bore to bottom of seal 14 in.
 Diameter of well bore below seal 10 in.
 Number of sacks of cement used in well seal 12 sacks
 How was cement grout placed?
6 gal. of water per bag cement injected down grout hole.
 Was pump installed? ☒ Yes ☐ No Type TURBHP 15 Depth 55 ft.
 Was a drive shoe used? ☒ Yes ☐ No Plugs Size: location ft.
 Did any strata contain unusable water? ☐ Yes ☒ No
 Type of Water? depth of strata
 Method of sealing strata off
 Was well gravel packed? ☒ Yes ☐ No Size of gravel: 3/4-1 1/2
 Gravel placed from 38 ft. to 45 ft.

(10) LOCATION OF WELL:

County Benton Driller's well number
 NE 1/4 SW 1/4 Section 4 T. 11S R. 4W W.M.
 Tax Lot # Lot Blk Subdivision

Address at well location:

202 Independence Ave Albany.

(11) WATER LEVEL: Completed well.

Depth at which water was first found 40 ft.
 Static level 17 ft. below land surface. Date 3-12-87
 Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 10 in.

Depth drilled 66 ft. Depth of completed well 66 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
top soil	0	3	
Clay Brown	3	38	
hard Brown med gravel	38	45	
med size gravel Brown sand	45	53	
Hard Claystone Gray	53	66	

Received by OWRD

FEB 10 2025

Salem, OR

Work started 3-9-1987 Completed 3-12-1987
 Date well drilling machine moved off of well 3-12-1987

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] Bob Scheler Date 3-14-87
 (Drilling Machine Operator)

Drilling Machine Operator's License No. 918

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 SCHELER WELL DRILLING
 (Person, firm or corporation) (Type or print)
 Address 3685 Knox Butterd. Albany.

[Signed] Bob Scheler
 (Water Well Contractor)
 Contractor's License No. 610 Date 3-14-1987

NOTICE TO WATER WELL CONTRACTOR

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

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

SP*12658-690

14605-



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

Application for Well ID Number

RECEIVED

JAN 14 2025

OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): Sterling Acres LLC
Mailing Address: PO Box 12125
City, State, Zip: Scottsdale, AZ, 85267
Mail Well ID to: ☐ SAME AS ABOVE ☒ In Care Of (C/O)
Name & Address: Daniel Hauge will pick up at OWRD office
City, State, Zip: _____

Received by OWRD

FEB 10 2025

Salem, OR

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

Township: 11 (North / South) Range: 4 (East / West) Section: 4 NW 1/4 of the SW 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 500 County Benton
GPS Coordinates: 44.6396974, -123.1894349 (+/- 10-ft)
Street Address of Well, City: 204 NW Independence Hwy, Albany, OR 97321 (west of tax lot 501)
If the property had a different street address in the past: _____

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

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation
Date Well Constructed (or property built): 3-12-1987 Total Well Depth: 66' Casing Diameter: 10"
Owner at time the well was constructed (if known): Don Hector & Kenneth Holmes Well Report # (if known): BENT 2499
Other Information: Existing well and associated well log has been verified in the field based recent well work (camera log and rehabilitation).

SUBMITTED BY (please print): Agent: Michael Higgins (HGX Solutions, LLC)

PHONE: 858.775.0811 EMAIL &/or FAX: mhigginsrocks@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:
1-14-2025

Well Report Number:
BENT 2499

Well Identification #:
L-157023



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

Application for Well ID Number

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Do not complete if the well already has a Well Identification Number. Received by OWRD JAN 14 2025

FEB 10 2025

OWRD

I. OWNER INFORMATION

Current Owner Name (please print): Sterling Acres LLC

Salem, OR

Mailing Address: PO Box 12125

City, State, Zip: Scottsdale, AZ, 85267

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

Name & Address: Daniel Hauge will pick up at OWRD office

City, State, Zip: _____

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

Township: 11 S (North / South) Range: 4 W (East / West) Section: 4 SE 1/4 of the SW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 700

County Benton

GPS Coordinates: 44.6391865,-123.1827252 (+/- 10-ft)

Street Address of Well, City: 299 NW Independence Hwy, Albany, OR 97321 (east of 202 NW Independence Hwy)

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

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

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

Date Well Constructed (or property built): 7-16-1990 Total Well Depth: 75' Casing Diameter: 10"

Owner at time the well was constructed (if known): Don Hector Farms Well Report # (if known): BENT 58

Other Information: The completed well construction and associated well log is not field verified.

SUBMITTED BY (please print): Agent: Michael Higgins (HGX Solutions, LLC)

PHONE: 858.775.0811 EMAIL &/or FAX: mhigginsrocks@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

1-14-2025

Well Report Number:

BENT 58

Well Identification #:

L-157024

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

RECEIVED

AUG 20 1987

WATER RESOURCES DEPT.
SALEM, OREGON

Well 4

(1) OWNER:

Name Don Hector Well Number: 2500
Address 222 Independence Hwy
City Albany State Ore Zip 97321

(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

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes ☐ No ☒ Depth of Completed Well 70 ft.
Explosives used ☐ Type _____ Amount _____

HOLE		SEAL		Amount	
Feet	From To	Material	From To	sacks or pounds	
4	0 18	cement	0 18	15 sacks	
10	18 54	steel			
10	54 70	open hole			

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

Backfill placed from 0 ft. to 18 ft. Material cement
Gravel placed from 30 ft. to 40 ft. Size of gravel 3/4

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	10	18	54	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Location of shoe(s)

(7) PERFORATIONS/SCREENS:

☒ Perforations Method torch
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
39	52	1/4x5	100			<input checked="" 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
85	5		1 hr.

Temperature of water 52° Depth Artesian Flow Found _____

Was a water analysis done? no Yes ☐ By whom _____

Did any strata contain water not suitable for intended use? no Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Benton Latitude 44 38 Longitude 123 03
Township 11 S Range 4 W E or W, WM.
Section 4 SW 1/4 SE 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 202 Independence Hwy Albany

(10) STATIC WATER LEVEL:

25 ft. below land surface. Date 7-1-87

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 30 ft.

From	To	Estimated Flow Rate	SWL
30	53		

(12) WELL LOG:

Ground elevation 220

Material	From	To	SWL
Top Soil	0	4	
Clay Brown	4	30	
Sand Brown	30	40	
Sand Brown med Gravel	40	53	
Hard Claystone Gray	53	70	

Received by OWRD

FEB 10 2025

Salem, OR

Date started 5-6-87 Completed 5-18-87

(unbonded) Water Well Constructor Certification:

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

Signed _____ WWC Number _____
Date _____

(bonded) Water Well Constructor Certification:

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

Signed Bob Scheller WWC Number _____
Date 7-1-87



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

Application for Well ID Number

RECEIVED

JAN 14 2025

Received by OWRD

OWRD

FEB 10 2025

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

I. OWNER INFORMATION

Current Owner Name (please print): Sterling Acres LLC

Mailing Address: PO Box 12125

Salem, OR

City, State, Zip: Scottsdale, AZ, 85267

Mail Well ID to:

☐

SAME AS ABOVE

☒

In Care Of (C/O)

Name & Address: Daniel Hauge will pick up at OWRD office

City, State, Zip: _____

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

Township: 11 (North / South) Range: 4 (East / West) Section: 4 SE 1/4 of the SW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 500

County Benton

GPS Coordinates: 44.6356806, -123.1853921 (+/- 10-ft)

Street Address of Well, City: 202 NW Independence Hwy, Albany, OR 97321 (south of tax lot 501)

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

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

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

Date Well Constructed (or property built): 5-18-1987

Total Well Depth: 70'

Casing Diameter: 10"

Owner at time the well was constructed (if known): Don Hector

Well Report # (if known): BENT 2500

Other Information: Existing well and associated well log has been verified in the field based recent well work (camera log and rehabilitation).

SUBMITTED BY (please print): Agent: Michael Higgins (HGX Solutions, LLC)

PHONE: 858.775.0811

EMAIL &/or FAX: mhigginsrocks@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

1-14-2025

Well Report Number:

BENT 2500

Well Identification #:

L-157025

RECEIVED

NO 5038

JUN 20 1988

WATER RESOURCES DEPT.
SALEM, OREGON

"START CARD"
NOTICE OF BEGINNING OF WELL CONSTRUCTION
(as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and
Mailing Address

President Run Nursery
204 Independence Highway
Corvallis Ore

Proposed Commencement Date

6-25-88

Proposed Well Depth
and Use:

app 50 ft

Diameter

10 in

☐ Domestic
☐ Thermal

☐ Community
☐ Injection

☐ Industrial
☐ Other

☒ Irrigation

Proposed Well Location:

County

Benton

Township

11S

(N or S)

Range

4W

(E or W)

Section

5

At least 2
of these
must be
provided

1. NW 1/4 of NE 1/4 of above section

2. street address of
well location

204 Independence Highway
Corvallis Ore

3. tax lot number of well location

4. attach approved map with location identified.
(see reverse of this form for approved maps)

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

x Ken M. Myles
Owner's Signature

x Bob Scheler
Bonded Water Well Constructor

Owner / Partner
Title
6/15/88
Date

License No. 610
Company Scheler Well Drilling

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.



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

Application for Well ID Number

RECEIVED

JAN 14 2025

OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): Sterling Acres LLC

Mailing Address: PO Box 12125

Received by OWRD

City, State, Zip: Scottsdale, AZ, 85267

FEB 10 2025

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

Salem, OR

Name & Address: Daniel Hauge will pick up at OWRD office

City, State, Zip: _____

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

Township: 11 (North / South) Range: 4 (East / West) Section: 5 SW 1/4 of the SE 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 700 County Benton

GPS Coordinates: 44.63807405, -123.19761440 (+/- 10-ft)

Street Address of Well, City: (No Situs) 202/204 NW Independence Hwy, Albany, OR 97321 (~3500-ft W-SW of)

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

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

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

Date Well Constructed (or property built): 6-25-1988 Total Well Depth: 72' Casing Diameter: 10"

Owner at time the well was constructed (if known): Pheasant Run Nursery (Kevin Miles) Well Report # (if known): BENT 2510

Other Information: Existing well and associated well log has been verified in the field based recent well work (camera log and rehabilitation).

SUBMITTED BY (please print): Agent: Michael Higgins (HGX Solutions, LLC)

PHONE: 858.775.0811

EMAIL &/or FAX: mhigginsrocks@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

1-14-2025

Well Report Number:

BENT 2510

Well Identification #:

L-157026