

Transm	ittal	ril 11, 2025
From:	Shane M. Cochran, R.G.	
	Wallace Group	
Project:	Groundwater Permit Amendment Application Permit No. G-18687	on for OSU-Cascades
То:	Oregon Water Resources Department	
	725 Summer Street NE, STE A	
	Salem, OR 97301	Received
		APR 1 4 2025
To Whom It May	Concern:	OWRD
	oplication for Permit Amendment to Groundwing with a check for the permit fees of \$2,930	
Shane Cochran, R	.G.	

Urgent X	For Review Please Comment X	
		14642 -

Application for Permit Amendment

WATER RESOURCES DEPARTMENT 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 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. Received Check all items included with this application. (N/A = Not Applicable)APR 1 4 2025 X Part 1 – Completed Minimum Requirements Checklist. X Part 2 – Completed Application Map Checklist. X 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. X Part 4 – Completed Applicant Information and Signature. X Part 5 – Information about Permits to be Amended: Number of permits to be amended: 1 List the Permits here: G-18687 Please include a separate Part 5 for each permit. (See instructions on page 6) X Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). x 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. X 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. x 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. X N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. x 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)

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Map not included or incomplete

Part _____ is incomplete

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

503-

Application fee not enclosed/insufficient

Land Use Form not enclosed or incomplete

Additional signature(s) required

Other/Explanation

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 <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

	x N/A	If more than three permits are involved, separate maps for each permit. APR 1 4 2025
x		Permanent quality printed with dark ink on good quality paper.
x		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
x		A north arrow, a legend, and scale.
X		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 preapproved by the Department.
X		Township, Range, Section, $\frac{1}{4}$, DLC, Government Lot, and other recognized public land survey lines.
X		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
x		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
X		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
X		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.
X	□ 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.
x		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.
	X 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 $-42^{\circ}32'15.5''$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

Part 3 of 5 - Fee Worksheet

	FEE WORKSHEET for PERMIT AMENDMENT		
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,360
	Types of change proposed:		
	X Place of Use X Point of Diversion/Appropriation APR 1 4 2025		
	Number of above boxes checked = 2 (2a)		
	Subtract 1 from the number in line $2a = 1$ (2b) If only one change, this will be 0		
2	Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » »	2	\$1,090
	Number of permits included in Permit Amendment1 (3a)		
	Subtract 1 from the number in 3a: 0 (3b) If only one permit this will be 0		
3	Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » » » » »	3	\$0
	Do you propose to add or change a well, or change from a surface water POD to a well?		
	No: enter 0 X Yes: enter \$480 for the 1 st well to be added or changed 480 (4a)		
	Do you propose to add or change additional wells?		
	X No: enter 0 Yes: multiply the number of additional wells by \$410 0 (4b)		
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » » »	4	\$480
	Do you propose to change the place of use?		
	No: enter 0 on line 5		
	x Yes: enter the cfs for the portions of the permits to be amended (see below*): x		
	Subtract 1.0 from the number in 5a above: 0 (5b)		
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » »		\$0
5	If 5b is greater than 0, round up to the nearest whole number: (5c) and multiply 5c	_	
6	by \$350, then enter on line 5 » » » » » » » » » » » » » » » » » »	<i>5</i>	\$2,930
0	Is this permit amendment:	0	\$2,930
	necessary to complete a project funded by the Oregon Watershed Enhancement Board		
	(OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net benefit to fish and		
	wildlife habitat?		
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » Permit Amendment Fee:	8	\$2,930

- *Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:
- 1. For irrigation calculate cfs for each permit involved as follows:
 - a. Divide total authorized cfs by total acres in the permit (for S-12345, 1.25 cfs \div 100 ac); then multiply by the number of acres to be changed to get the application cfs (x 45 ac= 0.56 cfs).
 - b. If the water right permit does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of permits on all the land included in the application; however **do not count** cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land. The fee should be assessed only once for each "on the ground" acre included in the application. (In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Jarrod Penttila / Oregon St	ate Univ	ersity-Cascades	541-706-2163	
ADDRESS				FAX NO.
1500 SW Chandler Avenue				
CITY	STATE	ZIP	E-MAIL	
Bend	OR	97702	Jarrod.Penttila@OS	SUCascades.com
BY PROVIDING AN E-MAIL ADDRES	s, consen	T IS GIVEN TO RECEIVE	ALL CORRESPONDENCE FR	OM THE DEPARTMENT
ELECTRONICALLY. COPIES OF THE F	INAL ORDE	R DOCUMENTS WILL A	ALSO BE MAILED.	

Agent information – The ager	it is author	rized to represent t	he applicant in all matt	ers relating t	to this application.
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL (CONTACT NO.
Shane Cochran / The Walla	ice Group)	541-382-4707		
ADDRESS				FAX NO.	
62915 NE 18th Street, Suite	1				
CITY Bend	STATE OR	ZIP 97701	E-MAIL scochran@wallace	group-inc.	com
BY PROVIDING AN E-MAIL ADDRES	s, consent	IS GIVEN TO RECEIVE	ALL CORRESPONDENCE FR	OM THE DEP	ARTMENT
ELECTRONICALLY. COPIES OF THE F					
Explain in your own words who Add an additional point of a scenario where the current If you need additional space, contains	ppropriat productio	tion as a back up on well fails.	well. This well will o	nly be used	d in a future
Check this box if this project stimulus dollars)	t is fully or	partially funded by	the American Recover	y and Reinve	estment Act. (Federal
Is the applicant the permit hold	ler of reco	rd? X Yes No			
If NO, include either:					
A completed assignment to the applicant(s), OR	form (wit	h required statutor	y assignment fee), assig	gning all or a	portion of the permit
An affidavit of consent for permit.	om the pe	rmit holder(s) of re	cord that gives permiss	sion for the a	applicant to amend the
Has the Completion ("C") Date	of the peri	mit(s) in this applic	ation expired? Yes	X No	VICOCIVEG
If YES, this application will not			•	<u> </u>	APR 1 4 2025
If NO, what are the completio	n dates of	the permit(s)?	August 10, 2026		OWRD
 If the permit completion d not approve the Permit An 	Control Description of the Posters				SANCTONIA SECURITAR NECESARIO PROCESSO CARRO CONTRA

· 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: __



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

	Jarrod Penttila	Jarrod Pe	nttila	Associate Direc	tor Capita4/14/44945gla9	8: 6 8
Applicant Sig	natus BE7555B80C416		Print Name ((and Title if applicable)	Date	
(Laurie M. Hill	Laurie M.	Hill	cbo	2/10/2025 08	8:26
	nat pre446180422432		Print Name ((and Title if applicable)	Date	

Check one of the following:		
The applicant is responsible for comp continue to be sent to the applicant.	letion of change(s). Notices ar	nd correspondence should
x The permit holder(s) of record will be the final order is issued. Copies of not holder(s) of record.		
Check the appropriate box, if applicable:		
Check here if any of the permits proposed by an irrigation or other water district.	sed for amendment are or will	be located within or served
IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP
Check here if water for any of the perm contract for stored water with a federa		vice agreement or other
ENTITY NAME	ADDRESS	
CITY	STATE	ZIP
To meet State Land Use Consistency Require city, municipal corporation, or tribal government conveyed or used. ENTITY NAME City of Bend		
Bend	STATE Oregon	^{ZIP} 97701
ENTITY NAME	ADDRESS	
СІТУ	STATE	ZIP
ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

Received

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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.

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.

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.

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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.

Part 5 of 5 - Water Use Permit Information

Received

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.

PERMIT # G-18687 Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA) APR 1 4 2025 (Note: If the POD/POA name is not specified in the permit, assign it a name or number here.) OWRD Tax If POA, Lot, POD/POA **OWRD Well** Is this POD/POA Authorized Measured Distances DLC Name or by the permit or is it Log ID# (or (from a recognized Rng Twp Sec 1/4 1/4 or Number Well ID Proposed? survey corner) Gov't Tag # L-___) Lot X Authorized 80 FEET SOUTH AND 1120 FEET Production DESC 61926 18 S 181206 NE SW 12 E EAST FROM NW CORNER, NE Well Proposed 00 01000 1/4 SW 1/4, SECTION 6 X Authorized 475 FEET NORTH AND 600 FEET Injection 181206 **DESC 62359** EAST FROM NW CORNER, NE 1/4 Proposed Well 18 S SE NW 12 E 6 00 00111 SW 1/4, SECTION 6 Authorized Production 320 FEET SOUTH AND 510 181206 S FEET EAST FROM NW CORNER. 18 12 E Well 2 6 NW SE X Proposed CO 00100 NW 1/4 SE 1/4, SECTION 6 Authorized Proposed Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses): Place of Use (POU) Point of Appropriation/Well (POA) Point of Diversion (POD) X Additional Point of Appropriation (APOA) Additional Point of Diversion (APOD) Surface water POD to Ground Water POA Will all of the proposed changes affect the entire water use permit? x Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the

For a change in place of use:

No

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

"CODES" listed above to describe the proposed changes.

X 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.

Complete all of Table 2 to describe the portion of the permit to be changed.

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

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

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

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

Table 2. Description of Changes to Water Use Permit # G-18687

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

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Tw	р	Rn	ng	Sec	74	1 %	Tax Lot		Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Changes (see "CODES" from previous page)	TV	vp	Rr	ng	Sec	74	1/4	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date
												EXAMP	LE									10 72 00 7 50		
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	
18	s	12	Ε	6	NE	SW		1		Production Well	05/12/20		18	S	12	Ε	6	NE	SW	1000			Production Well	05/12/20
18	S	12	Ε	6	SE	NW				Injection Well	05/12/20		18	S	12	Ε	6	SE	NW	111			Injection Well	05/12/20
												APOA	18	S	12	E	6	NW	SE	100			Production Well 2 Production Well	
	-																Re	ceiv	red					
																		-	2025					
																	0	WR						
						ТОТ	AL ACR	ES											ТС	DTAL AC	RES			

Additional remarks: Acreage not applicable, non-consumptive geothermal heat exchanger. APOA of 'Production Well 2' in addition to current authorized POA 'Production Well'.

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-18687

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

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Tw	р	Rng	3	Sec	y	4 1/4	Tax Lot		Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Changes (see "CODES" from previous page)	Tv	vp	Rr	ng	Sec	1/4	1/4	Taylot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date
												EXAMP	LE											
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	u		u	2	S	9	E	15	sw	NW	200		5.0	POD #6	
18	s	12	Е	6	SE	NW					05/12/20	POU	18	S	12	E	6			111	Lot 5			
												POU (continued)	18	S	12	Ε	6			2100	Lot 6			
												POU (continued)	18	S	12	2 E	6	SE	NW	111/1000/ 110	,			
												POU (continued)	18	S	11	LΕ	6	NE	SW	1000/ 100				
												POU (continued)	18	S	11	. E	6	SW	NE	719			Received	
												POU (continued)		S		LΕ	6	NW	SE	719/ 100		A	PR 1 4 202	5
												POU (continued)	18	S	11	Ε	1	SE	NE	4300			OWRD	
												POU (continued)	18	S	11	Ε	1	NE	SE	12300				
							TAL ACR												-	OTAL AC	DEC			

Additional remarks: POU change from T18S R12E Section 6 SENW to expand to eight tax lots, map & TL 181101D012300, 181101A004300, 1812060000111, 181206C002100, 1812060000100, 1812060000110, 181206A000719, 181206C000100.

Permit #	G-18687	
Permit #	0-10001	

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

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



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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
Production Well 2	No		503'	12"		0-70'	403'-503'		Basalt	1200 gpm

Notes: This is a best estimate of the well and is subject to changes. The 1200 gpm is the current allotted water volume for the existing permit.

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APR 1 4 2025

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

Received APR 1 4 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 <u>all</u> 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.

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Received
APR 1 4 2025
OWRD

Land Use Information Form



Oregon Water Resources Department

725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900

Received

www.oregon.gov/OWRD ADD 1 4

APR 1 4 2025

NAME								PHOI	NE	OWRD
Jarrod F	enttila /	/ Oregon	State Ur	iversity-0	Cascades			541	706.216	3
MAILING	ADDRESS	0								
1500 SV	V Chand	ler Aveni	ue							
CITY				STATE	ZIP	EMAIL .				
Bend				OR	97702	Jarrod.	Penttila@	OSUCasca	des.com	
A. <u>Land</u> a	nd Locat	ion								
			C . !	£II		- + : : ! ! ! !		halian forms :		
							e diverted (i irrigation us			
							nformation r		_	icricis, may
Township	Range	Section	1/4 1/4	Tax Lot #	Plan Designat Rural Resident	7770		Water to be:		Proposed Land Use:
18 S	12 E	6	NW SE	100	Mixed U	Jrban	Diverted	☐ Conveyed	☑ Used	non- consumptive geotherm heat
							Diverted	☐ Conveyed	Used	
							Diverted	Conveyed	Used	
							Diverted	Conveyed	Used	
Noncons	suptive u	se in Desc	hutes Co	unty, Bend	d, Oregon.		ved, and/or u			s applicable.
				regon Wate	or Posources	Donartm	ont:			
		Store Wate		regon wat ater Right Tr	er Resources ansfer			or Ground Wa	ter Registra	tion Modification
	ed Water U			change of W			on of Conserv		cer megiatio	
Source of v	water:	Reservoi	ir/Pond	☐ Ground	Water	Surfac	e Water (nam	e)		
stimated	quantity (of water ne	eded: 0		cubic fee	et per seco	nd 🗌 gal	lons per minu	te 🛚	acre-feet
ntended u	ise of wat	_	rrigation Municipal		mercial si-Municipal		ustrial ream			_ household(s) mptive geother
Briefly des	cribe:									
	8			-temperat		dh. ee	No.			

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 APR 1 4 2025

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 a	appropriate box b	elow and provide the requested info	rmation	
X Land uses to be seregulated by your land.	rved by the proposed comprehensive plan.	water use(s), including proposed construction ordinal contraction (s):	on, are allowed ance 2309	outright or are not
approvals as listed already been obtain	in the table below. (Pined. Record of Action	water use(s), including proposed construction lease attach documentation of applicable la /land-use decision and accompanying findir ave not ended, check "Being Pursued."	nd-use approva	als which have
(e.g., plan amen	Approval Needed dments, rezones, e permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
			☐ Obtained ☐ Denied	☐ Being Pursued☐ Not Being Pursued
		Received	☐ Obtained ☐ Denied	☐ Being Pursued☐ Not Being Pursued
		APR 1 4 2025	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		OWRD	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		pecial land use concerns or make recommen used use of water in the box below or on a so		Oregon Water
Karen Swenson Name:Signed by:		Title:	Senior Planner	
Name:Signature:	karen Swenson	Date: 1/9	Senior Planner 0/2025 12:14:32 PST 41-388-5567	
Governmental Entity:	BF82F8CEATEN44of B	end 5-	541-388-5567	
	Receint Ackno	owledging Request for Land Use Info	rmation	
Please complete this this form while the aphave 30 days from the Oregon Water Resourt for a new permit to u	ment Representative: form and return it to the oplicant waits, you may e date of OWRD's Publ rees Department. Pleas se or store water, a con	ne applicant. For new water right applications complete this receipt and return it to the application to Notice of the application to submit the complete while OWRD can accept a signed receipn appleted Land Use Information Form is require	only, if you are licant. If you sig pleted Land Use of as part of inta	n the receipt, you will Information Form to ke for an application
Staff Name:		Title:		
Staff Signature:		Date:		
Covernmental Fatit		Db e		

STATE OF OREGON	DESC 61926	WELL I.D. LABEL#		
WATER SUPPLY WELL REPORT		START CARD #	10.000	
(as required by ORS 537.765 & OAR 690-205-0210)	3/23/2020	ORIGINAL LOG #	#	
LAND OWNER Owner Well I.D.				
irst Name JARROD Last Name PENTTIL.	A (9) LOC	ATION OF WELL (legal	description)	
ompany OREGON STATE UNIVERSITY	137 1395	ESCHUTES Twp 18.00 S	- CO	E E/W WN
ddress 1500 SW CHANDLER AVE.	Sag. 6	NE 1/4 of the SW		
ITYPE OF WORK State OR Zip Deepening	97702 Sec 6	umber 181206C000100		
		° ' or 44.044032	200	DMS or DD
Alteration (complete 2a & 10) Aba	andonment(complete 5a) Long	° " or -121.3342	8200	DMS or DD
PRE-ALTERATION Dia + From To Gauge Stl Plstc		Street address of well (N	Nearest address	_
Casing:		CHANDLER AVE., BEND OR 97	7702	
Material From To Amt sacks/	lbs			
Seal:				
DRILL METHOD		ATIC WATER LEVEL	ete CIVII () I	CNII (C)
Rotary Air Rotary Mud Cable Auger	Cable Mud	Da ng Well / Pre-Alteration	ate SWL(psi) +	SWL(ft)
Reverse Rotary Other		eted Well 11/22/20	119	248.5
PROPOSED USE Domestic Irrigation		Flowing Artesian?		240.5
Industrial/ Commercial Livestock Dewatering				270.00
Thermal Injection Cother TEST WELL	The second secon	EARING ZONES Depth v		Man continuos 2 May
	SWL Da	te From To E	Est Flow SWL(psi)	+ SWL(ft)
	tandard (Attach copy) 11/12/20	019 250 512	1200	×
Depth of Completed Well 512.00 ft.				248.45
BORE HOLE SEAL Dia From To Material From	N THE RESERVE THE PARTY OF THE			
Dia From To Material From 16 0 70 Bentonite Chips 0	To Amt lbs 70 92 S			
	Calculated 80.63			
	(1) WE	LIOC		
	Calculated (11) WEI	LL LOG Ground Elevat	ion 3676.00	
How was seal placed: Method S	D	Material	From	То
X Other Poured in place	Brown San	.d	0	10
Backfill placed from ft. to ft. Material			10	20
Filter pack from ft. to ft. Material	Size Tuff Scoria with	Pacalt	20 50	50 90
Explosives used: Yes Type Amount	Black Sand		90	100
ABANDONMENT USING UNHYDRATED B			100	110
Proposed Amount Actual Amoun		ı Basalt	110	220
CASING/LINER	Basalt	Descinad	220	230
	Stl Plstc Wld Thrd Basalt & S			250
● ☐ IO 🔀 3 412 .250	Sandy Bass		250	260
	Basalt & S Basalt	coria APR 1 4 202	260	270 340
	Basalt & S	coria	340	380
	Basalt	OWRD	380	400
	Scoria		400	415
Shoe Inside Outside Other Location			415	495
Temp casing Yes Dia From +	To Basalt & S	coria	495	512
PERFORATIONS/SCREENS				+
Perforations Method				
		ted10/28/2019 Cor	mpleted 3/14/2020	
	Slot # of Tele/ ngth slots pipe size (unbonded)	d) Water Well Constructor Certi	ification	
Screen Liner Dia From To width let Screen Casing 12 412 512 .1	igui bioto pipe bize	nat the work I performed on the		ing, alteration, o
Sereen cusing 12 112 112		ent of this well is in compliar		
		on standards. Materials used and	information reported	above are true to
	the best of	my knowledge and belief.		
	License Nu	ımber	Date	
WELL TESTS: Minimum testing time is 1 hour	Signed			
Pump	Flowing Artesian Signed -			
Yield gal/min Drawdown Drill stem/Pump depth	Duration (hr) (bonded) \	Water Well Constructor Certific	ation	
1200 13.3 410	2 I accept re	sponsibility for the construction,	deepening, alteration	n, or abandonme
	work perfo	rmed on this well during the const	truction dates reported	d above. All wo
		during this time is in complian		
Temperature 50 °F Lab analysis X Yes By Water	Systems Engineering constructio	n standards. This report is true to	the best of my knowle	edge and belief.
Water quality concerns? Yes (describe below) TDS and To Description	nount 76 mg/L License Nu	ımber <u>1796</u> I	Date 3/23/2020	
From To Description	Amount Units Signed		14642	- 三三三
		CHRIS HUMPHRIES (E-filed)	non Deilling C	
	Contact Inf	o (optional) Chirs Humphries Jen	isen Drilling Company	у

ORIGINAL - WATER RESOURCES DEPARTMENT

WATER SUPPLY WELL REPORT -	DESC 61926	WELL I.D. LABEL# I	
continuation page	3/23/2020	START CARD # ORIGINAL LOG #	
(2a) PRE-ALTERATION		ality Concerns	
Dia + From To Gauge Stl Plstc Wld Thrd Material From To Amt sacks/lbs	From	To Description	Amount Units
	(10) CT A 7	FIG WATER LEVEL	
(5) BORE HOLE CONSTRUCTION BORE HOLE SEAL Dia From To Material From To	SWL Date Sacks/ Amt lbs	From To Est	Flow SWL(psi) + SWL(ft
Calculated Calculated Calculated Calculated Calculated Calculated Calculated	1		
FILTER PACK	(11) WEL	1106	
From To Material Size		Material	From To
6) CASING/LINER			
Casing Liner Dia + From To Gauge Stl Plsto	Wld Thrd		
		Received	
		APR 1 4 202	(5)
7) PERFORATIONS/SCREENS			
Perf/ Casing/Screen Scrn/slot Slot Screen Liner Dia From To width length	# of Tele/slots pipe size		
	Comme	nts/Remarks	
(8) WELL TESTS: Minimum testing time is 1 hour	upgrade it a required rat there was q	rilled as a test Well and following and keep the well. It was determine ther than the carbon steel 12 inch the uite a lag in work following the pu	ed that stainless steel rise was hat the well was drilled with so imp test to completion of the
Yield gal/min Drawdown Drill stem/Pump depth Dur	and 12 in had to be inch stain landed or	the well was close to being c ch telescoping screen they into comprised of all stainless ste cless steel with a internal k-pa the 12 inch telescoping screen casing, revised 6/15/2021	formed us that the well rel – so we installed 10 acker and a shoulder that

DUCUSIGIT ETIVETOPE ID. DT 13/433-0EA0-4030-0003-0303A3FD2/ ID

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

DESC 61926

3/23/2020

Received

Map of Hole

APR 1 4 2025

OWRD

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301 (503)988-0900



LOCATION OF WELL

Latitude: 44.044032 Datum: WGS84

Longitude: -121.334282

Township/Range/Section/Quarter-Quarter Section:

WM18.00S12.00E6NESW

Address of Well:

1500 SW CHANDLER AVE., BEND OR 97702

Well Label: 48750

Printed: March 23, 2020

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

Provided by well constructor



WELL I.D. LABEL# L 139051 STATE OF OREGON **DESC 62359** START CARD# 1047899 WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) 11/27/2020 ORIGINAL LOG# (1) LAND OWNER Owner Well I.D. First Name JARROD Last Name PENTTILA (9) LOCATION OF WELL (legal description) Company OREGON STATE UNIVERSITY County DESCHUTES Twp 18.00 S N/S Range 12.00 E E/W WM Address 1500 SW CHANDLER AVE Sec 6 SE 1/4 of the NW 1/4 Tax Lot 111 City BEND State OR Tax Map Number New Well Deepening Conversion (2) TYPE OF WORK " or 44.04560800 " or -121.33672500 DMS or DD Alteration (complete 2a & 10) Abandonment(complete 5a) DMS or DD (2a) PRE-ALTERATION Street address of well • Nearest address Gauge Stl Plstc Wld Thrd Casing: 1500 SW CHANDLER AVE., BEND OR 97702 \bigcirc \bigcirc \bigcirc \bigcirc Material From Amt sacks/lbs Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD SWL(ft) X Rotary Air Rotary Mud Cable SWL(psi) Auger Existing Well / Pre-Alteration Reverse Rotary Other Completed Well 11/17/2020 255.6 Flowing Artesian? (4) PROPOSED USE Domestic Irrigation Community Industrial/ Commericial Livestock Dewatering WATER BEARING ZONES Depth water was first found Thermal X Injection Other SWL Date From To Est Flow SWL(psi) + SWL(ft) (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 11/17/2020 255.6 488 1000 255.6 Depth of Completed Well 488.00 ft. **BORE HOLE** SEAL sacks Dia From Material From To Amt lbs 247 16 0 488 403 Bentonite Chips Calculated 194.72 Cement with 5% Bento 375 210 S (11) WELL LOG Calculated 42.37 Ground Elevation 3687.00 X C D Method A B How was seal placed: Material From To X Other POURED IN PLACE Tan Pumice 29 Backfill placed from _____ ft. to ___ ft. Material Red Cinders 305 Gray Basalt 305 328 Filter pack from ____ ft. to ft. Material Red Cinders 328 343 Explosives used: Yes Type___ Amount Grav Basalt 434 343 (5a) ABANDONMENT USING UNHYDRATED BENTONITE gray Basalt with Red Cinders 434 449 Proposed Amoun Actual Amount Red Cinders with Gray Basalt 488 (6) CASING/LINER Plstc Wld Thrd Casing Liner From Stl To Gauge X Received Other Inside Outside Location of shoe(s) Temp casing Yes Dia From + OWRD (7) PERFORATIONS/SCREENS Perforations Method Screens Type Welded Wire Material Stainless Steel Date Started6/29/2020 Completed 11/17/2020 Perf/ Casing/ Screen Tele/ Scrn/slot Slot # of (unbonded) Water Well Constructor Certification Screen Liner width length slots pipe size From I certify that the work I performed on the construction, deepening, alteration, or Screen Casing 12 488 388 abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief. License Number (8) WELL TESTS: Minimum testing time is 1 hour O Pump (Air Flowing Artesian Bailer Yield gal/min Drill stem/Pump depth Duration (hr) (bonded) Water Well Constructor Certification Drawdown I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief. °F Lab analysis Yes By_ Temperature 52 License Number 1796 Yes (describe below) TDS amount 0.79 Date 11/27/2020 Water quality concerns? mg/L Description Signed CHRIS HUMPHRIES (E-filed) Contact Info (optional) ORIGINAL - WATER RESOURCES DEPARTMENT

LION AND TH

DUCUSIGN ENVELOPE ID. D1131433-OEA0-4636-00D3-6303A3FD211D

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

DESC 62359

11/27/2020

Received

APR 14 2025

OWRD

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301 (503)988-0900



LOCATION OF WELL

Latitude: 44.04560800 Datum: WGS84

Longitude: -121.33672500

Township/Range/Section/Quarter-Quarter Section:

WM18.00S12.00E6SENW

Address of Well:

1500 SW CHANDLER AVE., BEND OR 97702

Well Label: 139051

Printed: November 27, 2020

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

Provided by well constructor



