

# Application for Permanent Water Right Transfer



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

## Part 1 of 5 – Minimum Requirements Checklist

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

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

**Received**

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

**JUL 17 2025**

**OWRD**

- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Transfer Application Map Checklist.
- ☒ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at:  
[http://apps.wrd.state.or.us/apps/misc/wrd\\_fee\\_calculator](http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator).
- ☒ Part 4 – Completed Applicant Information and Signature.
- ☒ Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 2 List them here: 90408 & 90409**  
Please include a separate Part 5 for each water right. (See instructions on page 6)  
**NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.**

### Attachments:

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

### (For Staff Use Only)

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

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

Other/Explanation \_\_\_\_\_

Staff: \_\_\_\_\_ 503- \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



## Part 2 of 5 – Transfer Application Map

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

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

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

Received

14704 -

JUL 17 2025

OWRD

TACS



# Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)			
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,360
2	Types of change proposed: <input checked="" type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$1090 and enter »	2	\$1090
3	Number of water rights included in transfer <u>2 (3a)</u> Subtract 1 from the number in 3a above: <u>1 (3b)</u> <i>If only one water right this will be 0</i> Multiply line 3b by \$610 and enter »	3	\$610
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: enter \$480 for the 1 <sup>st</sup> well to be added or changed <u>\$480 (4a)</u>  Do you propose to add or change additional wells? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: multiply the number of additional wells by \$410 <u>\$1230 (4b)</u> Add line 4a to line 4b and enter »	4	\$1710
5	Do you propose to change the place of use or character of use? <input type="checkbox"/> No: enter 0 on line 5 <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see below*): <u>1.83 (5a)</u> Subtract 1.0 from the number in 5a above: <u>.83 (5b)</u> If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: <u>1 (5c)</u> and multiply 5c by \$410, then enter on line 5 »	5	\$410
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$5180
7	Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> 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 » If no box is applicable, enter 0 on line 7 »	7	
8	Subtract line 7 from line 6 » <b>Transfer Fee:</b>	8	<b>\$5180</b>

\*Example for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

- For irrigation calculate cfs for each water right involved as follows:
  - Divide total authorized cfs by total acres in the water right (for C12345,  $1.25 \text{ cfs} \div 100 \text{ ac}$ ); then multiply by the number of acres to be transferred to get the transfer cfs ( $\times 45 \text{ ac} = 0.56 \text{ cfs}$ ).
  - If the water right certificate 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 C87654,  $45.0 \text{ ac} \times 0.0125 \text{ cfs/ac} = 0.56 \text{ cfs}$ )
- Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land**. The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

Received

JUL 17 2025

OWEB

FEE WORKSHEET for SUBSTITUTION			
1	Base Fee (includes change to one well)	1	\$990.00
2	Number of wells included in substitution _____ (2a) Subtract 1 from the number in 2a above: _____ (2b) <i>If only one well this will be 0</i> Multiply line 2b by \$480 and enter »	2	
	» Fee for Substitution:	3	

## Part 4 of 5 – Applicant Information and Signature

## Part 4 of 5 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>Golden Rule Farms</b>			PHONE NO. <b>541-576-2273</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>PO Box 255</b>				FAX NO.
CITY <b>Christmas Valley</b>	STATE <b>OR</b>	ZIP <b>97641</b>	E-MAIL <b>goldenrulefarms@gmail.com</b>	
<b>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.</b>				

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

AGENT/BUSINESS NAME <b>Scott Montgomery/All Points Engineering &amp; Surveying, Inc</b>			PHONE NO. <b>541-548-5833</b>	ADDITIONAL CONTACT NO. <b>541-420-0401</b>
ADDRESS <b>PO Box 767</b>				FAX NO.
CITY <b>Terrebonne</b>	STATE <b>OR</b>	ZIP <b>97760</b>	E-MAIL <b>scott@apeands.com</b>	
<b>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.</b>				

Explain in your own words what you propose to accomplish with this transfer application, and why: Propose to move part of the water rights to existing pivot fields within one mile to the south. This transfer application proposes to make permanent the changes the Department authorized to Certificates 90408 and 90409 in 2022 under Temporary Transfer T-13743. This transfer application proposes the exact changes – just permanent-as were proposed and approved in T-13743. The 2025 irrigation season is the last year under which irrigation is authorized by T-13743; therefore, Golden Rule Farms applies for this transfer to make permanent those changes by the 2026 irrigation season. This transfer application proposes to move a portion of the place of use under Certificates 90408 and 90409 one mile south to better fields. It also proposes that the irrigation of the transferred acres occur from four wells south of the authorized wells, which are better wells and are already constructed and plumbed.

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

### Check One Box

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

**Received**  
**JUL 17 2025**  
**OWRD**



OWRD

By my signature below, I confirm that I understand:

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

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

Applicant signature

Timothy Puckett, President

Print Name (and Title if applicable)

Date

Applicant signature

Print Name (and Title if applicable)

Date

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

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

Check the following boxes that apply:

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

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

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

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see:  
[https://www.oregon.gov/owrd/WRDFormsPDF/Transfer\\_Property\\_Transactions.pdf](https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf)

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

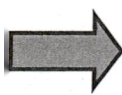


☐ Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME <b>NA</b>	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME <b>NA</b>	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME <b>Harney County</b>	ADDRESS <b>360 N Alvord Ave</b>	
CITY <b>Burns</b>	STATE <b>OR</b>	ZIP <b>97720</b>

Received  
JUL 17 2025  
OWRD



## Part 5 of 5 – Water Right Information

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

CERTIFICATE # 90408

Received

JUL 17 2025

OWRD

### Description of Water Delivery System

System capacity: 3.1 cubic feet per second (cfs) OR  
 \_\_\_\_\_ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from the authorized points of appropriation & conveyed by buried conduit to center pivot sprinklers that irrigate the place of use.**

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51265	25 S	31 E	28	NW NE	5900	1295' S & 2504' W from NE cor, Sec 28
5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51253	25 S	31 E	28	NE NE	5800	64' S & 985' W from NE cor, Sec 28
6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51256	25 S	31 E	28	NE NE	5800	1271' S & 2' W from NE cor, Sec 28
7	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51317	25 S	31 E	27	NW NW	5800	51' S & 1030' E from NW cor, Sec 27
8	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51260	25 S	31 E	27	SW NW	5800	1341' S & 1292' E from NW corner, Sec 27
A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50358	25 S	31 E	28	NE SE	5700	1365' N & 100' W from SE cor, Sec 28
B	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 51784	25 S	31 E	33	NE NW	5600	365' S & 2405' W from NE Cor, Sec 33
18	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50777	25 S	31 E	33	NW NW	6100	770' S & 1320' E from NW cor, Sec 33
18A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50501	25 S	31 E	33	NE NW	6100	1120' S & 3695' W from NW cor, Sec 33

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

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



☐ Surface Water POD to Ground Water  
POA (SW/GW)

☐ Government Action POD (GOV)

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

☐ Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.

☒ No Complete all of Table 2 to describe the portion of the water right to be changed.

Received  
JUL 17 2025  
OWRD

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

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

**Table 2. Description of Changes to Water Right Certificate # 90408**

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

AUTHORIZED (the “from” or “off” lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.													Proposed Changes (see “CODES” from previous page)	PROPOSED (the “to” or “on” lands) The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	Rng		Sec	¼ ¼		Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng		Sec	¼ ¼		Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date				
25	S	31	E	27	NE	NW	300		21.5	IR	4-8	1974	POU/POA/ APOA	25	S	31	E	33	NE	NE	5600		20.0	IR	A,B,18,& 18A	1974		
25	S	31	E	27	NW	NW	5800		32.1	IR	4-8	1974	POU/POA/ APOA	25	S	31	E	33	NW	NE	5600		24.0	IR	A,B,18,& 18A	1974		
25	S	31	E	27	SW	NW	5800		32.1	IR	4-8	1974	POU/POA/ APOA	25	S	31	E	33	SW	NE	5600		34.5	IR	A,B,18,& 18A	1974		
25	S	31	E	27	SE	NW	300		21.5	IR	4-8	1974	POU/POA/ APOA	25	S	31	E	33	SE	NE	5600		31.1	IR	A,B,18,& 18A	1974		
25	S	31	E	28	NE	NE	5800		2.0	IR	4-8	1974	POU/POA/ APOA	25	S	31	E	33	NE	NW	6100		0.1	IR	A,B,18,& 18A	1974		
25	S	31	E	28	SE	NE	5800		1.5	IR	4-8	1974	POU/POA/ APOA	25	S	31	E	33	SE	NW	7000		1.0	IR	A,B,18,& 18A	1974		
TOTAL ACRES:									110.9						TOTAL ACRES:									110.7				

Additional remarks: POA 18 replaces authorized POA 8. POA A replaces authorized POA 4. POAs B and 18A are APOAs.

Received  
JUL 17 2025  
OWRD



**For Place of Use or Character of Use Changes**

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

If YES, list the certificate, water use permit, or ground water registration numbers: \_\_\_\_\_.

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

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

Ground water supplemental Permit or Certificate # \_\_\_\_\_;

Surface water primary Certificate # \_\_\_\_\_.

**For a change from Supplemental Irrigation Use to Primary Irrigation Use**

Identify the primary certificate to be cancelled. Certificate # \_\_\_\_\_

Received  
JUL 17 2025  
OWRD

**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](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 - rate (gpm) than 1 of wat
See well logs										

14704 -

Received  
JUL 17 2025  
OWRD

**Description of Water Delivery System**

System capacity: 0.745 cubic feet per second (cfs) OR  
\_\_\_\_\_ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from the authorized points of appropriation & conveyed by buried pipe to a mainline & wheel line sprinklers that irrigate the place of use.**

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51265	25	S	31	E	28	NW	NE	5900	1295' S & 2504' W from NE cor, Sec 28
5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51253	25	S	31	E	28	NE	NE	5800	64' S & 985' W from NE cor, Sec 28
6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51256	25	S	31	E	28	NE	NE	5800	1271' S & 2' W from NE cor, Sec 28
7	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51317	25	S	31	E	27	NW	NW	5800	51' S & 1030' E from NW cor, Sec 27
8	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 51260	25	S	31	E	27	SW	NW	5800	1341' S & 1292' E from NW corner, Sec 27
A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50358	25	S	31	E	28	NE	SE	5700	1365' N & 100' W from SE cor, Sec 28
B	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 51784	25	S	31	E	33	NE	NW	5600	365' S & 2405' W from NE Cor, Sec 33
18	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50777	25	S	31	E	33	NW	NW	6100	770' S & 1320' E from NW cor, Sec 33
18A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50501	25	S	31	E	33	NE	NW	6100	1120' S & 3695' W from NW cor, Sec 33

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

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



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

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

Received  
JUL 17 2025  
OWRD

14704 -

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

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

**Table 2. Description of Changes to Water Right Certificate # 90409**

List the change proposed for the acreage in each  $\frac{1}{4}$   $\frac{1}{4}$ . If more than one change is proposed, specify the acreage associated with each change.  
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the “from” or “off” lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.													Proposed Changes (see “CODES” from previous page)	PROPOSED (the “to” or “on” lands) The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	Rng		Sec		¼ ¼		Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng		Sec		¼ ¼		Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
25	S	31	E	28	NW	NE	5800		15.5	IR	4-8	1979	POU/POA/ APOA	25	S	31	E	28	NE	SE	5700		31.2	IR	A,B,18, 18A	1979		
25	S	31	E	28	NE	NW	5900		20.0	IR	4-8	1979	POU/POA/ APOA	25	S	31	E	28	NW	SE	6000		4.3	IR	A,B,18, 18A	1979		
TOTAL ACRES:									35.5						TOTAL ACRES:									35.5				

Additional remarks: POA 18 replaces authorized POA 8. POA A replaces authorized POA 4. POAs B and 18A are APOAs.


Received  
JUL 17 2025  
OWRD



**For Place of Use or Character of Use Changes**

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

If YES, list the certificate, water use permit, or ground water registration numbers: \_\_\_\_\_.

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

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

Ground water supplemental Permit or Certificate # \_\_\_\_\_;

Surface water primary Certificate # \_\_\_\_\_.

**For a change from Supplemental Irrigation Use to Primary Irrigation Use**

Identify the primary certificate to be cancelled. Certificate # \_\_\_\_\_

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

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

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

[http://apps.wrd.state.or.us/apps/gw/well\\_log/Default.aspx](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
See well logs										

**Received**

**JUL 17 2025**

**OWRD**

**14704 -**



## STATE OF OREGON

# WATER SUPPLY WELL REPORT

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

WELL LABEL # L 83208

START CARD # 176018

**(1) LAND OWNER** Owner Well I.D. #4  
 First Name Jett Last Name Blackburn  
 Company \_\_\_\_\_  
 Address 707 Ponderosa Village  
 City Burns State OR Zip 97720

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































(3) **DRILL METHOD**  
☐ Rotary Air   ☐ Rotary Mud   ☒ Cable   ☐ Auger   ☐ Cable Mud  
☐ Reverse Rotary   ☐ Other

**(4) PROPOSED USE** ☐ Domestic ☒ Irrigation ☐ Community  
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering  
☐ Thermal ☐ Injection ☐ Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard ☐ (Attach copy)  
Depth of Completed Well 112 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	Amt lbs
26	0	20	Bentonite	0	20	35 S
22	20	112				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E  
☒ Other poured dry and tam  
 Backfill placed from 112 ft. to 0 ft. Material 3/8 pea gravel  
 Filter pack from          ft. to          ft. Material          Size pea gravel  
 Explosives used: ☐ Yes Type          Amount         

(6) CASING/LINER										
Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
		22	<input checked="" type="checkbox"/>	1	21	.250			<input checked="" type="checkbox"/>	
		14	<input checked="" type="checkbox"/>	2	112	.250			<input checked="" type="checkbox"/>	
			<input type="checkbox"/>						<input type="checkbox"/>	
			<input type="checkbox"/>						<input type="checkbox"/>	
			<input type="checkbox"/>						<input type="checkbox"/>	
			<input type="checkbox"/>						<input type="checkbox"/>	

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) \_\_\_\_\_  
Temp casing ☐ Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

[illegible]

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

☐ Pump
 ☒ Bailer
 ☐ Air
 ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
100	3		

Temperature 59 °F Lab analysis ☐ Yes By \_\_\_\_\_  
 Water quality concerns? ☐ Yes (describe below) \_\_\_\_\_

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**  
County HARNEY Twp 25 S N/S Range 31 E E/W WM  
Sec 28 NW 1/4 of the NE 1/4 Tax Lot 100  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ ° 0 ' \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ ° 0 ' \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
☐ Street address of well ☒ Nearest address  
Hwy 205 LS Lane

(10) STATIC WATER LEVEL		Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening					
Completed Well	04-28-2006				55

WATER BEARING ZONES					Depth water was first found	60
SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
04-28-2006	60	105	500			55

[illegible]

Date Started 04-17-2006 Completed 04-28-2006

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

License Number \_\_\_\_\_ Date \_\_\_\_\_  
 Password : (if filing electronically) \_\_\_\_\_  
 Signed \_\_\_\_\_

**(bonded) Water Well Constructor Certification**  
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1424 Date 05-01-2006  
 Password : (if filing electronically) \_\_\_\_\_  
 Signed *Samuel H. Rife*  
 Contact Info (optional) \_\_\_\_\_

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

Form Version: 0.86

14704 -



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

WELL I.D. # L 76600

START CARD # 176008

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

(1) LAND OWNER Well Number #5  
Name Jett Blackburn  
Address 707 Ponderosa Village  
City Burns State OR Zip 97720

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

(3) DRILL METHOD  
☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger ☐ Cable Mud  
☐ Other

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

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☒ No  
Depth of Completed Well 145 ft.  
Explosives used: ☐ Yes ☒ No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds	
26	0	18	bentonite	0	18	40 sacks	
22	18	145					

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E  
☒ Other poured dry and tamped

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from 145 ft. to 0 ft. Size of gravel 3/8 pea

(6) CASING/LINER							
Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 22	+1	20	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 14	+2	145	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used ☐ Inside ☐ Outside ☐ None  
Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS  
☐ Perforations Method rosco moss  
☒ Screens Type contin. slot Material stainless

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
60	140	.100	c.s.	14		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
50	0		

Temperature of water 59 Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done? ☐ Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use? ☐ Too little  
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

## (9) LOCATION OF WELL (legal description)

County Harney  
Tax Lot 5800 Lot \_\_\_\_\_  
Township 25S N or S Range 31E E or W WM  
Section 28 NE 1/4 NE 1/4

Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) L5 Ln Hwy 205

## (10) STATIC WATER LEVEL

50 ft. below land surface. Date 2-10-06  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

## (11) WATER BEARING ZONES

From	To	Estimated Flow Rate	SWL
50	140	800	50

## (12) WELL LOG

Material	From	To	SWL
cinder fill	0	1	
clay loam	1	4	
sand fine brn	4	12	
clay brn	12	35	
clay grey	35	48	
clay blue	48	62	50
clay balls	62	70	50
silt blk	70	86	50
sand fine blk	86	140	50
clay gravel	140	142	50
clay grey blue	142	145	50

Date Started 2-1-06 Completed 2-10-06

## (unbonded) Water Well Constructor Certification

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

WWC Number \_\_\_\_\_ Date JUL 17 2025

Signed \_\_\_\_\_

## (bonded) Water Well Constructor Certification

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

WWC Number 1424 Date 2-13-06Signed Timothy K. Pelt



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

WELL I.D. # L 83201

START CARD # 176012

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

(1) LAND OWNER Well Number #6  
Name Jett Blackburn  
Address 707 Ponderosa Village  
City Burns State OR Zip 97720

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

(3) DRILL METHOD  
☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger ☐ Cable Mud  
☐ Other

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

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☒ No  
Depth of Completed Well 136 ft.  
Explosives used: ☐ Yes ☒ No Type Amount

BORE HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds	
26	0	25	bentonite	0	25	90 sacks	
22	25	136					

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

☒ Other poured dry and tamped

Backfill placed from        ft. to        ft. Material         
Gravel placed from 136 ft. to 0 ft. Size of gravel 3/8 pea gravel

(6) CASING/LINER							
Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 22	+1	29	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: 14	+2	136	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used ☐ Inside ☐ Outside ☐ None

Final location of shoe(s)       

(7) PERFORATIONS/SCREENS  
☐ Perforations Method         
☒ Screens Type Roscoe Mo Material stainless

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
51	131	.100	CS	14		<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
50	0		

Temperature of water 59 Depth Artesian/Low Found         
Was a water analysis done? ☐ Yes By whom         
Did any strata contain water not suitable for        ☐ Top limits  
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ WATER RESOURCES DEPT  
Depth of strata:        SALEM, OREGON

(9) LOCATION OF WELL (legal description)

County Harney  
Tax Lot 5800 Lot         
Township 25S N or S Range 31E E or W WM  
Section 28 NE 1/4 NE 1/4

Lat        °        '        " or        (degrees or decimal)  
Long        °        '        " or        (degrees or decimal)

Street Address of Well (or nearest address) L5 Lane Hwy 205

(10) STATIC WATER LEVEL

50 ft. below land surface. Date 2-27-06  
       ft. below land surface. Date         
Artesian pressure        lb. per square inch Date       

(11) WATER BEARING ZONES

From	To	Estimated Flow Rate	SWL
50	128	950	50

(12) WELL LOG

Material	From	To	SWL
cinder fill	0	1	
topsoil sand loam	1	3	
sand fine brn	3	20	
clay grey	20	41	
clay grey/sand fine	41	50	
clay balls/sand fine	50	65	50
clay grey sand fine	65	80	50
sand blk	80	95	50
silt sand blk	95	108	50
sand fine blk	108	128	50
clay brn	128	136	50

Date Started 2-16-06 Completed 2-27-06

(unbonded) Water Well Constructor Certification

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

WWC Number        Date JUL 17 2025

Signed OWRD

(bonded) Water Well Constructor Certification

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

WWC Number 1424 Date 2-27-06

Signed Jessie K. Bailey



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

HARN 51317  
11-28-2006

Page 1 of 1

WELL LABEL # L 86792

START CARD # 1000181

(1) LAND OWNER

Owner Well I.D. #7

First Name JETT Last Name BLACKBURN  
Company  
Address PO BOX 707  
City BURNS State OR Zip 97720

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

(3) DRILL METHOD

☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger ☐ Cable Mud  
☐ Reverse Rotary ☐ Other

(4) PROPOSED USE ☐ Domestic ☒ Irrigation ☐ Community

☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering  
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION Special Standard ☐ (Attach copy)

Depth of Completed Well 162.00 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
26	0	18	Bentonite	0	18	47	S
22	18	162					

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

☒ Other poured dry and tam

Backfill placed from 0 ft. to 162 ft. Material pea gravel

Filter pack from 0 ft. to 162 ft. Material pea gravel Size 3/8

Explosives used: ☐ Yes Type Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	<input checked="" type="checkbox"/>	1	20	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	14	<input checked="" type="checkbox"/>	2	162	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)

Temp casing ☐ Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method factory saw cut

Screens Type contin. slot Material stainless steel

Perf/	Casing/	Screen	Dia	From	To	Scrn/slot	Slot	# of	Tele/
Screen	Liner					width	length	slots	pipe size
Perf	Casing	14	72	112	0	3	1,920		
Screen	Liner	14	112	152	.1	1			

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

☐ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

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

100	3		

Temperature 60 °F Lab analysis ☐ Yes By

Water quality concerns? ☐ Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Harney Twp 25.00 S N/S Range 31.00 E E/W WM

Sec 27 NW 1/4 of the NW 1/4 Tax Lot 300

Tax Map Number Lot

Lat ° ' " or DMS or DD

Long ° ' " or DMS or DD

☐ Street address of well ☐ Nearest address

L5 LANE HWY 205

(10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)

Existing Well / Predeepening			
Completed Well	11-22-2006		45

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 45

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
11-22-2006	45	152	500		45

(11) WELL LOG

Ground Elevation

Material	From	To
topsoil sandy loam	0	1
sand brn	1	13
clay brn	13	47
clay grey sand	47	55
clay grey	55	60
sand clay blk	60	80
clay sand blk	80	85
sand blk	85	110
clay green	110	115
sand gray	115	130
clay green	130	140
sand gray	140	152
clay grey	152	162

Received

JUL 17 2025

OWRD

Date Started 10-26-2006

Completed 11-22-2006

(unbonded) Water Well Constructor Certification

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

License Number Date

Electronically Filed

Signed

(bonded) Water Well Constructor Certification

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

License Number 1424

Date 11-28-2006

Electronically Filed

Signed TIMOTHY K RILEY (E-filed)

Contact Info (optional)



## STATE OF OREGON

## WATER SUPPLY WELL REPORT

(as required by ORS 537.765 &amp; OAR 690-205-0210)

WELL LABEL # L 83202

START CARD # 176013

## (1) LAND OWNER

Owner Well I.D. #8

First Name Jett

Last Name Blackburn

Company

Address 707 Ponderosa Village

City Burns

State OR

Zip 97720

## (2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion  
☐ Alteration (repair/recondition) ☐ Abandonment

## (3) DRILL METHOD

☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger ☐ Cable Mud  
☐ Reverse Rotary ☐ Other

## (4) PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Community  
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering  
☐ Thermal ☐ Injection ☐ Other

## (5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 133. ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
26.	0	25.	Granular Bentonite	0	25.	65.	S
22.	25.	133.					

How was seal placed:

Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other poured dry and tam

Backfill placed from ft. to ft. Material

Filter pack from 133. ft. to 0 ft. Material 3/8 Size pea gravel

Explosives used: ☐ Yes Type Amount

## (6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22.	<input checked="" type="checkbox"/>	1.	31.	.250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14.	<input checked="" type="checkbox"/>	2.	133.	.250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)Temp casing ☐ Yes Dia From To

## (7) PERFORATIONS/SCREENS

Perforations Method

Screens Type roscoe moss Material stainless steel

Perf/	Casing/	Screen	Screen	From	To	Slot	# of	Tele/
Screen	Liner	Dia	Liner	From	To	width	slots	pipe size
Screen	Liner	14.		62.	122.	100	CONTINUOUS	

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

☐ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

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

50.	0		
-----	---	--	--

Temperature 59 °F Lab analysis ☐ Yes ByWater quality concerns? ☐ Yes (describe below)

From	To	Description	Amount	Units
------	----	-------------	--------	-------

## (9) LOCATION OF WELL (legal description)

County HARNEY Twp 25.00 S N/S Range 31.00 E E/W WM

Sec 27 NE 1/4 of the NW 1/4 Tax Lot 100

Tax Map Number Lot

Lat ° 0 ' " or DMS or DD

Long ° 0 ' " or DMS or DD

☐ Street address of well ☒ Nearest address

L5 Ln Hwy 205

## (10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)

Existing Well / Predeepening		
Completed Well	03-15-2006	42.

Flowing Artesian? ☐

## WATER BEARING ZONES

Depth water was first found 42.

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
03-15-2006	42.	125.	600.		42.

## (11) WELL LOG

Ground Elevation

Material	From	To
topsoil sandy loam	0	1.
clay brn	1.	4.
sand fine brn	4.	20.
clay yellow	20.	40.
clay blue	40.	51.
sand blk	51.	60.
silt blk sand fine	60.	80.
clay grey	80.	100.
silt sand	100.	115.
claystone grey w/sand	115.	125.
clay green	125.	133.

RECEIVED

MAR 23 2006

WATER RESOURCES DEPT  
SALEM, OREGON

Date Started 03-08-2006

Completed 03-15-2006

## (unbonded) Water Well Constructor Certification

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

License Number Date

Password : (if filing electronically)

Signed

## (bonded) Water Well Constructor Certification

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

License Number 1424 Date 03-15-2006

Password : (if filing electronically)

Signed Timothy B. Rye

Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

Form Version: 0.85

14704 -

Received

JUL 17 2025

OWRD







WELL ID.#  
RECEIVED  
503558

STATE OF OREGON  
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

NOV 12 1998

Instructions for completing this report are on the back of this form.

(START CARD) # L-26594

(1) OWNER:

Name Carpenter Ranch  
Address P.O. Box 607  
City Burns State OR Zip 97720

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger  
☐ Other

(4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation  
☐ Thermal ☐ Injection ☐ Livestock ☒ Other Test

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 145 ft.  
Explosives used ☐ Yes ☒ No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
16"	0	98	Bentonite	46	0	58
12"	98	145				

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

☐ Other Air Inject

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	0	98	240	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

☒ Perforations Method Torch Cut  
☐ Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
58	98	1/25	200	12		<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Flowing
Yield gal/min	Drawdown	Drill stem at	Time
1500+	96	80	1 hr.

Temperature of water 54 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 Harney Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 25 N or S Range 31 E or W. WM.  
Section 34 SW 1/4 SW 1/4  
Tax Lot 5700 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Weaver Springs Rd.

(10) STATIC WATER LEVEL:

26 ft. below land surface. Date 10-26-98  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 52

From	To	Estimated Flow Rate	SWL
52	96	1000	26
131	145	500	26

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Top Soil	0	8	-
Brown Sand	8	27	-
Brown Clay	27	52	-
Gray Sandstone (w/8)	52	96	26
Blue Clay	96	131	-
Gray Sandstone (w/13)	131	145	26

Received

JUL 17 2025

OWRD

Date started 10-25-98 Completed 10-26-98

(unbonded) Water Well Constructor Certification:

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

WWC Number \_\_\_\_\_

Date \_\_\_\_\_

Signed \_\_\_\_\_

(bonded) Water Well Constructor Certification:

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

WWC Number 1521

Date 10-29-98

Signed Donald H. Read

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

14704 -



## STATE OF OREGON

## WATER SUPPLY WELL REPORT

(as required by ORS 537.765 &amp; OAR 690-205-0210)

05-24-2011

WELL LABEL # L 101835

START CARD # 205801



## (1) LAND OWNER

Owner Well I.D. 101835

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Company CARPENTER RANCH LLC  
 Address 1930 LEWIS ST  
 City SALEM State OR Zip 97302

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

## (3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger ☐ Cable Mud  
☐ Reverse Rotary ☒ Other AIR LIFT PUMP

(4) PROPOSED USE ☐ Domestic ☒ Irrigation ☐ Community

☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering  
☐ Thermal ☐ Injection ☐ Other \_\_\_\_\_

## (5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 189.00 ft.

BORE HOLE			SEAL			Amt	lbs
Dia	From	To	Material	From	To		
30	0	25	Bentonite Chips	0	25	52	S
24	25	80					
18	80	170					
14	170	189					

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

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from 0 ft. to 168 ft. Material WELL ROC Size 3/4"

Explosives used: ☐ Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

## (6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	24	<input checked="" type="checkbox"/>	1	80	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	14	<input checked="" type="checkbox"/>	1.5	189	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 189Temp casing ☐ Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

## (7) PERFORATIONS/SCREENS

Perforations Method MILLS KNIFE

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/S	Casing/	Screen	From	To	Scrn/slot	Slot	# of	Tele/
creen	Liner	Dia			width	length	slots	pipe size
Perf	Casing		95	160	.375	3	1,140	

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

☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
800	23	150	4
1,000	26	180	2

Temperature 62 °F Lab analysis ☐ Yes By \_\_\_\_\_Water quality concerns? ☐ Yes (describe below)

From	To	Description	Amount	Units

## (9) LOCATION OF WELL (legal description)

County Harney Twp 25.00 S N/S Range 31.00 E E/W WM

Sec 34 SE 1/4 of the NW 1/4 Tax Lot 7400

Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

☐ Street address of well ☒ Nearest address

198 WEAVER SPRINGS RD, BURNS, OR 1.5 MI W OF HWY 205

## (10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+	SWL(ft)
Completed Well	05-18-2011			60

Flowing Artesian? ☐ Dry Hole? ☐

## WATER BEARING ZONES

Depth water was first found 78

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
05-18-2011	95	160	1,000			60

## (11) WELL LOG

Ground Elevation \_\_\_\_\_

Material	From	To
CLAY BR. SILTY	0	3
SAND BR SILTY FIRM	3	9
SAND GRAY SILTY FIRM	9	20
CLAY BLUE STICKY	20	33
CLAY BR SILTY SOFT	33	45
CLAY GREEN STICKY SOME SILTY	45	48
CLAY GRAY W/SAND FINE	48	50
CLAY BROWN & GRAY FIRM	50	51
GRAVEL W/CLAY GRAY	51	53
CLAY GRAY SILTY & STICKY	53	56
CLAY GRAY FIRM FLAKEY	56	61
CLAY BLUE STICKY W/SAND FINE BLK	61	64
CLAY BLUE FIRM	64	68
CLAY SANDY BLUE FINE	68	73
CLAY GRAY MED-HARD	73	78
CLAY DARK GRAY SANDY	78	80
CLAY GRAY SANDY BLK	80	89
SAND M-COARSE W/CLAY BLUE	89	93
SANDSTONE BLK COARSE	93	95

Date Started 09-27-2010 Completed 05-18-2011

## (unbonded) Water Well Constructor Certification

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

License Number 1394 Date 05-24-2011

Electronically Filed

Signed EUGENE MACK (E-filed)

## (bonded) Water Well Constructor Certification

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

License Number 1394 Date 05-24-2011

Electronically Filed

Signed EUGENE MACK (E-filed)

Contact Info (optional) \_\_\_\_\_

Received  
 JUL 7 2025  
 WARD

05-24-2011

START CARD # 205801

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL		sacks/	
Dia	From	To	Material	From	To	lbs
6.12	189	370	Cement	189	370	18 S

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS

Perf/S	Casing/	Screen	From		Scrn/slot	Slot	# of	Tele/
creen	Liner	Dia	From	To	width	length	slots	pipe size

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

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

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

Water Bearing Zones

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

(11) WELL LOG

Material	From	To
CLAY GREEN SANDY W/SAND STREAKS	95	100
SANDSTONE GREY COARSE SOFT	100	102
SAND GREY COARSE W/CINDERS	102	103
CLAYSTONE & SANDSTONE LAYERED	103	106
CLAYSTONE GREEN W/GRAVEL	106	112
CLAYSTONE GRAY SOFT W/FRXS	112	116
CLAY SOFT STICKY	116	119
SAND BLK W/SILT FINE	119	123
CLAYSTONE SOFT & SILTY	123	128
SANDSTONE M-COARSE W/SHELLS	128	137
SAND FINE TO MED W/CLAY M-HARD	137	143
CLAY GRAY W/SAND FINE LAYERS SOFT	143	154
CLAY GREEN SILTY SANDY FINE	154	158
CLAY GREY STICKY SOME SILT	158	164
CLAY STICKY BLUE GRAY	164	167
SANDROCK HARD	167	168
CLAY DARK GREEN STICKY SWELLING	168	174
CLAYSTONE FIRM	174	176
CLAY GREEN & GRAY	176	184
CLAYSTONE GRAY M-HARD	184	189
CLAYSTONE GRAY HARD	189	210
CLAYSTONE WHITE & LIGHT GRAY	210	226
CLAYSTONE GRAY W/HARD SEAMS	226	245
CLAYSTONE GRAY W/BR LAYERS HARD	245	360
CLAY BROWN W/CLAYSTONE BR SOFT	360	370

Comments/Remarks

24" SHOE AT 80 FEET. NO WATER FOUND BELOW 160 FEET.

**Received**  
JUL 17 2025  
OWRD



STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765)  
Instructions for completing this report are on the last page of this form

MARK 50777

WELL ID # L 52341

(START CARD) # 144375

(1) OWNER:

Name **Carpenter Ranch, LLC**  
Address **1930 Lewis Street, SE**  
City **Salem** State **OR** Zip **97302**

(2) TYPE OF WORK:

New Well Deepening ☒ Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

X Rotary Air Rotary Mud Cable Auger  
Other

(4) PROPOSED USE:

Domestic Community Industrial X Irrigation  
Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes X No Depth of Completed Well **126** ft.  
Explosives used Yes X No Type Amount

HOLE			SEAL			Amount	
Diameter	From	To	Material	From	To	sacks or pounds	
10	0	50	Bentonite	0	50	28	sks
6	50	82					

Didn't disturb existing seal around 14" casing.

How was seal placed: Method A B C D E  
X Other **Poured & probed.**  
Backfill placed from **133** ft. to **126** ft. Material **Sand & clay**  
Gravel placed from **80** ft. to **126** ft. Size of gravel **pea**

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6	+2	82	.250	X		X	
Existing	14	+2	80	.250	X		X	

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Liner:	12	1	126	.250	X		X	

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations		Method		Material			
X Screens	Type	Factory	Cook	SS			
From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
85	125	.125	con't	12			X

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

Pump	Bailer	X Air	Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
1500		70	1 hr.

Temperature of Water **54** Depth Artesian Flow found  
Was a water analysis done? Yes By whom  
Did any strata contain water not suitable for intended use? Too little  
Salty Muddy Odor Colored Other  
Depth of strata:

(9) LOCATION OF WELL by legal description:

County **Harney** Latitude Longitude  
Township **25S** N or S. Range **31E** E or W. of WM  
Section **33** NW 1/4 NW 1/4  
Tax lot **6100** Lot Block Subdivision  
Street Address of Well (or nearest address) **Weaver Springs Rd, Burns, OR 97720**

(10) STATIC WATER LEVEL:

**38** ft. below land surface. Date **3/8/2002**  
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found **83**

From	To	Estimated Flow Rate	SWL
83	124	2500	38

(12) WELL LOG:

Material	Ground elevation	From	To	SWL
Clay brown firm		0	7	
Sand brown		7	24	
Clay green		24	42	
Sandstone brown soft		42	61	
Claystone blue soft		61	83	
Gravelloosely cemented		83	86	
Sand eroded out		86	95	
Gravel & sand loosely cemented		95	96	
Sand eroded out		96	108	
Gravel loosely cemented		108	124	
Claystone blue & gray		124	133	

Video camera down well. There was 80' of 14" casing. bottom of well was 110'. Air lifted bottom of well from 110 down to 133'. Re-videoed the well, there was a 20' piece of 12" perforated pipe set in the bottom 133'. Used 12" spear to fish out. Drilled in a 6" gravel feed pipe next to 14" casing. Cleaned out 14" hole down to 126'. Re-videoed the well. Installed well screen & 15 tons of pea gravel.

Received  
JUL 17 2025  
OWRD

Date started **2/26/2002**

Completed **3/8/2002**

(unbonded) Water Well Constructor Certification:

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

Signed *[Signature]* WWC Number **1394**  
Date **3/20/2002**  
**Mack Drilling Company, Inc.**

(bonded) Water Well Constructor Certification:

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

Signed *[Signature]* WWC Number **1394**  
Date **3/20/2002**  
**Mack Drilling Company, Inc.**



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

HARN  
50501

18A

WELL I.D. # L 26601  
START CARD # 116923

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

(1) OWNER: Well Number 11  
Name Carpenter Ranch  
Address P.O. Box 667  
City Burns State OR Zip 97720

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

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

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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 120 ft.  
Explosives used ☐ Yes ☒ No Type None Amount None

HOLE		SEAL			
Diameter	From To	Material	From To	Sacks or pounds	
18	0 107	Bentonite	42 0	63	Sacks
14	107 125	-	-	-	-
10	125 145	-	-	-	-

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E  
☒ Other Air Injection  
Backfill placed from 107 ft. to 42 ft. Material Native  
Gravel placed from - ft. to - ft. Size of gravel -

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 14	+3	107	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"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
107	87	250	50	14		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing
Yield gal/min	Drawdown	Drill stem at	Time
1500	2.3	100	2 1/2 hr.

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

(9) LOCATION OF WELL by legal description:  
County Harney Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 25S N or S Range 31E W. M. 1  
Section 33 NE 1/4 NW 1/4  
Tax Lot 5600 Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 198 Avenue  
Spring Rd.

(10) STATIC WATER LEVEL:  
27 ft. below land surface. Date 2-10-00  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 42'

From	To	Estimated Flow Rate	SWL
42	61	400	27
82	105		27
115	123		27

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Top Soil	0	6	-
Brown Sand	6	28	-
Green Clay	28	42	-
Brown Sand Stone	42	61	27
Blue Clay Stone	61	82	27
w/ Gravel	82	105	27
Grey Sand w/	105	115	27
Blue Clay Stone	115	123	27
Brown Sand Stone	123	145	27
w/ Gravel			
Grey Clay			

Date started 2-8-00 Completed 2-10-00

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

Signed \_\_\_\_\_ WWC Number \_\_\_\_\_ Date \_\_\_\_\_

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

Signed Donald H. Reed WWC Number 1521 Date 2-14-00



# Application for Water Right Transfer Evidence of Use Affidavit



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

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

State of Oregon )  
County of HARNEY) ss

I, TIM PUCKETT, GOLDEN RULE FARMS, INC., in my capacity as PRESIDENT,

mailing address PO BOX 255, CHRISTMAS VALLEY, OR 97641

telephone number (541)576-2273, being first duly sworn depose and say:

Received  
JUL 17 2025  
OWRD

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

☒ Personal observation ☐ Professional expertise

2. I attest that:

☐ Water was used during the previous five years on the **entire** place of use for  
Certificate # \_\_\_\_; **OR**

☒ My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township		Range		Mer	Sec	¼ ¼		Gov't Lot or DLC	Acres (if applicable)
90408 (T-13743)	25	S	31	E	WM	33	NE	1/4		109.6
90408 (T-13743)	25	S	31	E	WM	33	E 1/2	NW 1/4		1.1
90409 (T-13743)	25	S	31	E	WM	28	N 1/2	SE 1/4		35.5

Temporary transfer, T-13743, approved 6/29/2022 and authorizes the change in use proposed in this transfer application through the end of the 2025 irrigation season. Therefore, this evidence of use attests to the authorized use of the above mentioned water rights at the location authorized for use the past four years under T-13743.

**OR**

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

(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): CROPS

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

Samuel P. Vink  
Signature of Affiant

7-9-25  
Date

Signed and sworn to (or affirmed) before me this 9 day of July, 2025.



Rachel Cooper  
Notary Public for Oregon

My Commission Expires: 08/27/28

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

Received  
JUL 17 2025

OWRD

14704 -



# Saucy Xfer



7/8/2025, 12:54:05 PM

☐ Township and Range

☐ Tax Lot

☐ Sections (Search OWRD)

Received

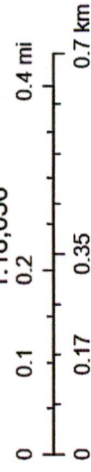
JUL 17 2025

OWRD

Maxar

14704 -

1:18,056





# 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 Tim Puckett, Golden Rule Farms				PHONE 541-576-2273	
MAILING ADDRESS PO Box 255					
CITY Christmas Valley		STATE OR	ZIP 97641	EMAIL goldenrulefarms@gmail.com	

Received  
JUL 17 2025

## A. Land and Location

OWRD

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:
25S	31E	33	NE NE	5600	EFU	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
25S	31E	33	NW NE	5600	EFU	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
25S	31E	33	SW NE	5600	EFU	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
25S	31E	33	SE NE	5600	EFU	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
25S	31E	33	NE NW	6100	EFU	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
25S	31E	33	SE NW	7000	EFU	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
25S	31E	28	NE SE	5700	EFU	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
25S	31E	28	NW SE	6000	EFU	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR

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

Harney

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

## B. Description of Proposed Use

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

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

Source of water: ☐ Reservoir/Pond ☒ Ground Water ☐ Surface Water (name) \_\_\_\_\_

Estimated quantity of water needed: 1.83 ☒ 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:

Propose to move place of use and point of appropriation approximately one half mile and one mile south to existing fields and wells. Propose to add two new points of appropriation as temporary "to" wells in order to provide sufficient rate to replace fewer "from" wells.



**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  
JUL 17 2025  
OWRD

**For Local Government Use Only**

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

**Please check the appropriate box below and provide the requested information**

- ☒ Land uses to be served by the proposed water use(s), including proposed construction, are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): HCZO 3.010
- ☐ 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: Brian McMillan Title: Planning Director  
Signature: [Signature] Date: 6/30/2025  
Governmental Entity: Hamilton County Phone: (531) 573-6655

**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: \_\_\_\_\_





**ALL POINTS  
ENGINEERING & SURVEYING, INC.**

P.O. Box 767  
Terrebonne, Oregon 97760  
541-548-5833

**TRANSMITTAL**

To: Oregon Water Resources Dept  
725 Summer St NE, Suite A  
Salem, OR 97301-1266

Date: 7/14/2025  
Attention: Transfers  
RE: App for Transfer

[X] Prints ☐ Plans ☐ Plat ☐ Specifications.

Attached is a transfer on Certificates 90408 & 90409 for Golden Rule Farms.

If you have any questions, please don't hesitate to contact me.

Copies	No.	Description
1	1	App for Transfer (14 pages letter bond)
1	2	App map (1 page legal bondr)
1	3	Well logs (11 pages letter bond)
1	4	Evidence of use w/aerial photo (3 pages letter bond)
1	5	Site photos (16 pages letter bond)
1	6	Land Use Form (3 pages letter bond)
1	7	Check for \$5,180

Signed: \_\_\_\_\_

*Devinse Montgoy*

**Received**  
**JUL 17 2025**  
**OWRD**

14704 -