Permit amendment

Address 2544 Nw overton St Participal or 97210 Change in PCA Date Filed 127 2022 Initial notice date 2 812022	Trib. of North Ford Indian Creek Use Irrigation Quantity of water (CFS)	K Sixshooter Cree Basins	County Wheele	Y	;	
DPD issued date PD notice date Date of FO 7/10/2025 W.H. Wol 135 Page 78 C-Date 10 (1/2027) COBU due date COBU Received date Certificate issued Assignments:	App#App#App#App#	Per #	Cert # Cert # Cert #	PR Date PR Date PR Date	Date	FEES REFUNDED Amount Receipt #
Irrigation District Agent David rewton Ha Mica CWRE CC's list wheeler Canty - Oversized map - Location	1 engineering	- dnewton (newton consult	ants.com		



Water Resources Department

North Mall Office Building 725 Summer St NE, Suite A Salem, OR 97301 Phone 503 986-0900 Fax 503 986-0904

July 10, 2025

Jasper County LLC 2544 NW Overton St Portland, OR 97210

ORDER ON WITHDRAWN APPLICATION

Reference: Transfer Application T-13905

The above referenced transfer application was withdrawn from the record of the Water Resources Department on July 10, 2025, by Special Order Volume 135, Page 78 (copy enclosed).

The transfer application is no further force or effect.

If you have any questions related to the withdrawal of this transfer, you may contact your caseworker, Arla Davis, by telephone at (503) 979-3129 or by e-mail at Arla.L.Davis@water.oregon.gov.

Sincerely,

David V. Jones Jr

Water Right Services Support

Transfers and Conservation Section

cc:

Eric W. Julsrud, Watermaster Dist. #4 (via email)

David Newton, Agent

County of Wheeler, Local Government

Enclosure

BEFORE THE WATER RESOURCES DEPARTMENT OF THE STATE OF OREGON

In the Matter of Transfer Application)	FINAL ORDER WITHDRAWING
T-13905, Wheeler County, Oregon)	AN APPLICATION FOR A PERMIT
)	AMENDMENT

Authority

Oregon Revised Statute (ORS) 537.211 establishes the process in which a water right permit holder may submit a request to change the point of appropriation and/or place of use authorized under an existing water right permit.

Applicant

JASPER COUNTY, LLC 2544 NW OVERTON ST PORTLAND, OR 97210

Findings of Fact

- 1. On January 27, 2022, the applicant, Jasper County, LLC, submitted Permit Amendment Application T-13905.
- 2. On June 23, 2025, the applicant's agent, on behalf of the applicant, submitted a request via email that Permit Amendment Application T-13905 be withdrawn.

Now, therefore, it is ORDERED:

Permit Amendment Application T-13905, in the name of Jasper County, LLC, is withdrawn and of no further force or effect.

Dated in Salem, Oregon on <u>JUL 10 2025</u>

Lisa J. Jaramillo, Transfer and Conservation Section Manager, for

IVAN GALL DIRECTOR

Oregon Water Resources Department

Mailing date: JUL 11 2025

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

Permit Amendment Checklist

Transfe	r: T- 13905				Tra	nsfer Specialist:
Transfer	Type: Permit /	Amendment				
Applicant Name/Address/email: JASPER COUNTY LLC 2544 NW OVERTON ST PORTLAND, OR 97210			Agent Name/Address/email: DAVID NEWTON 2083 MOUNTAIN VIEW COURT WEST LINN, OR 97068		Rec La	ndowner Name/Address:
	Name/Number:		Irr. District Name/Addre		Affect	ed Gov'ts Name/Address:
	•				Coun	ty Of Wheeler
Comm	entor(s): Name/	Address:	Current Landowner Nat (if different than applica	•		
Permit(s) Affected					
	Records Marked	Records Copied	App File No. or Decree Name	Permit No	•	Superseding Permit No.
			G-16936	G-16352	2	
Key Dat	tes & Initial Acti	ons	·			
Rec'd	l: January 27,	2022	Proposed Action(s): PC	DINT OF APPRO	PRIATION	ON
Fees	Pd: 2660.00		WM District:4		ODFW D	istrict:
Initial	l Notice: Februa	ry 8, 2022	WM Review sent: Done:	ODFW Review sent: Done:		eview sent:
Ackno	owledgement Lei	tter Sent: 🔀 D	ate: February 7, 2022	e: February 7, 2022 GW Review sent: Done:		
Process	ing Dates & Act	ions				
Deficie	ency Contact(s): _		f	Newspaper: not required note re-	uired	
	Лаiled: date rec'd okay f	rom agent/app	licant:	Request for ne News \$ receive	ews \$ sen	t:
OD	FW contact shee	t sent; need? Y	es 🔲 or No 🔲	,		t to newspaper:
	∕I measurement : or No ☐	sheet sent; nee	ed?	Affidavit of pu Dates of public		received:
Final Or	<u>—</u>					···········
		erseding Perm	it Review (Optional)	Final Order &	Supersed	ding Permit Review (Salem)
	•	wer:	·	Reviewer:		
	Date:		. <u></u>	Date:		
		linator:				
		nture Bin Date:				Date:
Co	omments/Specia	Issues:				
-	•					
		to .	- 4			49/14/n x 5
Special (Order Volume: Vo	ol: <u>135</u> , Page	es <u>78</u> Fi	nal Order Signatu	re Date:	7/10/2025 Withdraw
Notice o	f FO e-mailed to	processors:				

<u>Application</u>					
<u>PR</u> <u>CW</u>					
☐ The type of change is clearly indicated.					
☐ The application is appropriately signed.					
Appropriate fees were paid. N/A If overpayment, Refund Request submitted					
☐ Land use form matches affected tax lots and is signed by proper official. (from ALL affected Govt's)					
N/A Ditch company, district, and/or BOR, sent a copy of the application and map, if appropriate.					
All required attachments received.					
Check application file and WRIS for assignment(s) and/or extension(s).					
Application Map					
<u>PR</u> <u>CW</u>					
The map size and scale are accurate and appropriate per OAR 690-380-3100(1)(b)(c)&(d).					
All authorized and proposed POD's/POA's and POU are properly described on the map.					
☐ The POD/POA location description(s) on the map match the PA application and permit descriptions.					
Map acres (to, from and rr, if applicable) match Table 2 on the PA application and as applicable, on the permit					
Have permit map(s).					
Determining the "From" and "To" Lands (make working copy of application and permit(s))					
PR CW					
Only the authorized POD's/POA's and/or POU's to be transferred are listed (Tables 1 & 2).					
PA application and permit tabulations (acreage) match. (Mark on appl. and permit copies and note corrections needed)					
ALL Mark on permit the acreage and amount of water being transferred.					
Permit Ownership					
The applicant(s) is/are the holder(s) of the permit.					
All holders of the permit have signed the application or					
N/A If necessary, there is a notarized, signed statement of consent from permit holders other than applicant.					
N/A If necessary, the permit has been assigned to permit amendment applicant.					
Evaluation Materials					
Application complete Permit Land Use form N/A Plat card					
☐ Amendment Map ☐ Permit Map ☐ Fees paid ☐ N/A Well logs					
Reviews/comments/conditions received?					
N/A Headgate					
N/A Measuring Devices When in the judgment Prior to diverting Existing and maintain					
Type of device, if applicable: totalizing flow meter: at new at existing and new					
Injury: Yes No					
Enlargement: Yes No					
Conditions to avoid enlargement/injury – ODFW conditions: GW Conditions:					

Watermaster Review Form: Water Right Transfer



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

Transfer Application: T-13905

Review Due Date:

Applic	ant Name: Jasper County, LLC.
Propo	sed Changes: POU POD POA USE OTHER
Reviev	wer(s): E. Julsrud Date of Review: 02/08/2022
1.	Do you have <u>evidence</u> that the right has not been used in the last 5 years and that the presumption of forfeiture would not likely be rebuttable? Yes No If "Yes", attach evidence (e.g. dated aerial photo showing pavement or building on the land for >5 yrs.)
2.	Is there a history of regulation on the source that serves this (or these) right(s) that has involved the transferred right(s) and downstream water rights? Yes No Generally characterize the frequency of any regulation or explain why regulation has not occurred: This transfer involves groundwater. There is currently no need for regulating this source in the basin.
3.	Have headgate notices been issued for the source that serves the transferred right(s)? Yes No Records not available.
4.	In your estimation, after the proposed change, would distribution of water for the right(s) result in regulation of other water rights that would not have occurred if use under the original right(s) was/were maximized? Yes No If "Yes", explain:
5.	In your estimation, if the proposed change is approved, are there upstream water rights that would be affected? Yes No If "Yes", describe how the rights would be affected and list the rights most affected:

6.	Check here if it appears that downstream water rights benefit from return flows resulting from the current use of the transferred right(s)? If you check the box, generally characterize the locations where the return flows likely occur and list the water rights that benefit most:
7.	N/A For POD changes and instream transfers, check here if there are channel losses between the old and new PODs or within the proposed instream reach? If you check the box, describe and, if possible, estimate the losses:
8.	N/A For instream transfers that propose protection of a reach beyond the mouth of the source stream: N/A Would the quantity be measureable into the receiving stream consistent with OAR 690-077-0015(8)? Yes No
9.	For POU changes: N/A Is it likely the original place of use would continue to receive water from the same source? N/A Is it likely the original place of use would continue to receive water from the same source? N/A Is it likely the original place of use would continue to receive water from the same source?
10	For POU or USE changes: N/A In your best judgment, would use of the existing right at "full face value," result in the diversion of more water than can be used beneficially and without waste? Yes No If "Yes", explain:
11	 For POU changes that involve micro-irrigation: N/A a. Has the applicant made changes (absent a transfer) to convert to micro-irrigation within the current place of use boundary of the water right proposed for transfer, and previously demonstrated to the Department through monitoring and site inspections by the Watermaster that the proposed transfer will not result in injury or enlargement? Yes No If "Yes", explain:

Watermaster Review Form

Transfer Application

b.		nporary transfer of this nature been previously filed and approved on the same lands ns thereof) as those lands involved in this transfer?
	Yes	No If "Yes", answer the following:
		i. Were there any problems with more acres being irrigated (or wetted) than were authorized under the temporary transfer? Yes No If "Yes", explain:
		ii. Did the designated areas that were to remain dry (or not wetted) under the temporary transfer actually remain dry? Yes No If "No", explain:
		iii. Did the applicant comply with and meet all of the conditions of the temporary transfer? Yes No If "No", explain:
		iv. Do you have any other observations regarding the temporary transfer? Yes No If "Yes", describe:
		v. Did the applicant demonstrate to the Department through monitoring and site inspections by the Watermaster that neither injury nor enlargement occurred as a result of the temporary transfer? Yes No If "No", explain:
	c. To the	e best of your knowledge, if this transfer is approved, does it appear that: i. "Injury" will occur to other water rights that share the same source? Yes No If "Yes", explain:
		ii. "Enlargement" of the water right being transferred will occur?Yes ✓ No If "Yes", explain:

Watermaster Review Form	Transfer Application
12. Are there other issues not identified through the above questions that should be considered determining whether the change "can be effected without injury to other rights"?	red in
Yes No If "Yes", explain:	
I defer to the ground water section and their expertise to determine if the new PO tapping the same aquifer as the original POAs.	As are
13. What alternatives may be available for addressing any issues identified above:	
N/A	
14. Do conditions need to be included in the transfer order to avoid enlargement of the right other rights? No Yes, as checked and provided below:	t or injury to
For POU changes that involve micro-irrigation, provide the monitoring and reporting necessary to prevent injury/enlargement:	g conditions
A Headgate should be required prior to diverting water.	
Measurement Devices for POD or POA: (if this condition is selected, also fill in the t sections of Page 4)	ор
a. Before water use may begin under this order, the water user shall install a totali or, with prior approval of the Director, another suitable measuring device, at each diversion/appropriation (new and existing) OR at each new point of diversion/approach with the exception that water rights issued to the Bureau of Reclamation or an district (or similar entity) are not subject to this condition.	ach point of opriation
 b. The water user shall maintain the meters or measuring devices in good working c. The water user shall allow the Watermaster access to the meters or measuring of however, where the meters or measuring devices are located within a private structure. Watermaster shall request access upon reasonable notice. 	devices; provided
Reservoir water use measurement: (if this condition is selected, also fill in the top s of Page 4)	ections
a. Before water use may begin under this order, the water user shall install staff acordinary or, with prior approval of the Director, other suitable measuring devices, that measure range and stage between empty and full in each reservoir. Staff gages shall be United Geological Survey style.	re the entire
b. Before water use may begin under this order, if the reservoir is located in channel suitable measuring devices must be installed upstream and downstream of the reservadjustable outlet valve must be installed. The water user shall maintain such devices order. A written waiver may be obtained, if in the judgment of the Director, the installed other suitable measuring devices, or the adjustable outlet valve, will provide no public	voir, and, an in good working allation of weirs or
* The following alternative device(s) should be substituted for the bold, underlined device selected condition:	ice in the above
Weir Submerged Orifice	
Parshall Flume Flow Restrictor	
Other:	

Oregon Water Resources Department

Measurement Condition Information for the Applicant

(To be sent with the Draft Preliminary Determination or Final Order)

Transfer #: T- 13905

/	In order to avoid enlargement of th	ne right or injury to oth	ner rights, a totalizir	ng flow meter will
	be required to be installed prior to	diversion of water, as	a condition of this to	ransfer:
	at each point of diversion/o	appropriation (new an	d existing) OR	
	at each new point of divers	ion/appropriation.		
should c	itional information, or to obtain appr contact the area Watermaster: aster name: Eric W. Julsrud	roval of a different typ	e of measurement d	evice, the applicant
vvaterin	ester Harrie, Ello VV. Odlorda			
District:	4			
Address	: 201 South Humbolt St., Ste 180			
City/Sta	te/Zip: Canyon City, OR 97820			
Phone:	541-575-0119			
Email:	Eric.W.Julsrud@water.oregon.g	ov		
_	a device other than the one specifie the Watermaster, fill out and mail the			al Order is approvea
*****	*********	******	******	*****
	Approval of an Alter (to be filled out after cons			T- 13905 visit)
On beha	alf of the Director, I authorize use of	the following suitable	alternate measuren	nent device:
				<u> </u>
Wa	termaster signature	District	Date	
If this form	m is used for approval of an alternative mea	isurement device, it must b	e mailed to:	
Oregon W	Vater Resources Department			
725 Sumn	ner Street NE, Suite A			

Last revised May 2019

Salem, OR 97301-1266



Water Resources Department

725 Summer St NE, Suite A Salem, OR 97301 (503) 986-0900 Fax (503) 986-0904

February 7, 2022

JASPER COUNTY LLC 2544 NW OVERTON ST PORTLAND, OR 97210

Reference: Application T-13905

On January 27, 2022, OWRD received your water right Permit Amendment Application. The application was accompanied by \$2660.00. Our receipt number 137361 is enclosed.

By copy of this letter, we are asking the Watermaster for a report regarding the potential for injury to existing water rights which may be caused by the requested change. A review form will also be sent to our groundwater staff to determine whether the proposed well accesses the same source of water as the original well.

This application <u>may</u> require publication of a notice for two consecutive weeks in a newspaper with general circulation in the area where the water right is located. If it is determined that newspaper notice will be required, the Department will prepare the notice and notify you of the cost. You will be responsible for submitting payment to the Department prior to publication of the notice.

Except as provided under ORS 540.510(3) for municipalities, you may not use water from the new point of appropriation until a final order approving the application has been issued by the Department.

Refer to the following page for a chart showing the steps and expected timelines for the processing of your application.

If you have any questions, please contact the Transfer Section at (503) 979-9931.

Cc: Watermaster Dist. #4, Eric W. Julsrud (via email)

David Newton, Agent Wheeler County

Enclosure

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 137361

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE #

EIVED FRO	M. HA IM	ou En	ineering 4	APPLICATION	1
LIVED FAC	Survey	. / 116		PERMIT	
	0.	7		TRANSFER	T. 1391
H: C	HECK:#	THER: (IDENTI	FY)	THATOLEN	11/10/16
	1 2965			TOTAL REC'D	152,660
1083	TREASURY	4170 WF	RD MISC CASH AC	CT	
0407	COPIES				\$
		IDENTIFY)			S
0243 I/S L	- Academican		mt. Plan 0245	Cons. Water	
		4270 WF	RD OPERATING AC	CCT	
	MISCELLANEOUS	3	46110		
0407	COPY & TAPE FE	ES			\$
0410	RESEARCH FEES				\$
0408	MISC REVENUE:	(IDENTIFY)			\$
TC162	DEPOSIT LIAB.	IDENTIFY)			\$
0240	EXTENSION OF T				S
	WATER RIGHTS:		EXAM FEE		RECORD FE
0201	SURFACE WATER	3	S	0202	\$
0203	GROUND WATER		\$	0204	\$
0205	TRANSFER		\$2,660.00	0	
	WELL CONSTRU	CTION	EXAM FEE		LICENSE FE
0218	WELL DRILL CON		\$. 0219	S
	LANDOWNER'S F			0220	\$
	OTHER	(IDENTIFY)			
formation of the same of the s	OTHER				
0536	TREASURY	0437 WI	ELL CONST. STAR	TFEE	
0211	WELL CONST STA	ART FEE	\$	CARE	D#
0210	MONITORING WE	LLS	S	CARE)#
	OTHER	(IDENTIFY)			
0607	TREASURY	0467 HY	DRO ACTIVITY	LIC NUMBER	
0233	POWER LICENSE	FEE (FW/WRD			\$
0231	HYDRO LICENSE	FEE (FW/WRD)	L		\$
	HYDRO APPLICA	TION			\$
	TREASURY	ОТ	HER / RDX		
	DE	_ VENDOH # _			\$
	TION	And the second			

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

Application for Permit Amendment

Other/Explanation _____

Part 1 of 5 - Minimum Requirements Checklist



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

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

		For questions, please call (503) 986-0900, and ask for Transfer Section.		
	Check	all items included with this application. (N/A = Not Applicable)	JAN 2	7 2022
\times		Part 1 – Completed Minimum Requirements Checklist.		NRD
		Part 2 – Completed Application Map Checklist.	O	1110
\boxtimes		Part 3 – Application Fee, payable by check to the Oregon Water Resources Departs completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd fee calculator.	nent, a	and
\boxtimes		Part 4 – Completed Applicant Information and Signature.		
\boxtimes		Part 5 – Information about Permits to be Amended: Number of permits to be ame List the Permits here: G-16352 Please include a separate Part 5 for each permit. (See instructions on page 6)	nded:	1
\boxtimes		Completed Permit Amendment Application Map (Does not have to be prepared by Water Right Examiner).	a Cert	ified
\boxtimes	□ N/A	Request for Assignment Form and statutory fee. The request for assignment form completed if the applicant is not the permit holder of record and needs to be assignermit; or the landowner of the proposed place of use is not the permit holder of needs to be assigned to the permit (the Request for Assignment Form is available of https://www.oregon.gov/OWRD/Forms/Pages/default.aspx). Assignment is not neapplicant is the permit holder of record. ASSIGNMENTS HAVE BEEN MADE AND A FOR PERMIT G-16352 (SUBJECT OF THIS APPLICATION) AND FOR PERMIT R-15047. THIS APPLICATION). OWRD LETTER OF RECORDING ACCOMPANIES THIS APPLICATION.	ned to record online eded i RE REC	the and at f the CORDED
	⊠ N/A	Affidavit(s) of Consent are required from all permit holder(s) of record if the permit to the applicant or other permit holders of record that are not listed as applicants.		t assigned
	□ N/A	Oregon Water Resources Department's Land Use Information Form with approval (or signed land use form receipt stub) from each local land use authority in which with diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed only on federal lands or if all of the following apply: a) a change in place of use only structural changes, c) the use of water is for irrigation only, and d) the use is located irrigation district or an exclusive farm use zone.	water i , and/o y, b) no	s to be or used o
\leq	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or adpoint(s) of appropriation.	ditiona	al
	⊠ N/A	Geologist Report for a change from a surface water point of diversion to a ground appropriation (well), if the proposed well is more than 500 feet from the surface water more than 1000 feet upstream or downstream from the point of diversion. (ORS 54)	ater so	ource and
	Revised 7	(For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete	39(5

503-

Date:

Your permit amendment application <u>will be returned</u> 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 **DYECTIVED**Certified Water Right Examiner. Check all boxes that apply.

П	⊠ N/A	If more than three permits are involved, separate maps for each permit.	JAN 27 2022
\boxtimes		Permanent quality printed with dark ink on good quality paper.	OWRD
\boxtimes		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, or up inches. For 30×30 inch maps, one extra copy is required.	to 30 x 30
\boxtimes		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 assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that I approved by the Department.	
		Township, Range, Section, $\frac{1}{4}$, DLC, Government Lot, and other recognized pulsurvey lines.	olic land
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recomme	nded.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, la reservoirs, roads, and railroads.	kes and
\boxtimes		Major water delivery system features from the point(s) of diversion/appropriate main pipelines, canals, and ditches.	ion such as
		Existing place of use that includes separate hachuring for each water use permit date, and use including number of acres in each quarter-quarter section, governin each quarter-quarter section as projected within government lots, donation other recognized public land survey subdivisions. If less than the entirety of the being changed, a separate hachuring is needed for the portion of the permit left	nment lot, or and claims, or permit is
	⊠ N/A	If you are proposing a change in place of use, show the proposed place of use we hachuring that includes separate hachuring for each permit, priority date, and unumber 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 receptublic land survey subdivisions.	ise including arter-quarter
\boxtimes		Existing point(s) of diversion or well(s) with distance and bearing or coordinates recognized survey corner. This information can be found in your water use permanents.	
	⊠ N/A	If you are proposing a change in point(s) of diversion or well(s), show the propolocation and label it clearly with distance and bearing or coordinates. If GPS coorare used, latitude-longitude coordinates may be expressed as either degrees-m seconds with at least one digit after the decimal (example – 42°32′15.5″) or degree with five or more digits after the decimal (example – 42.53764°).	rdinates inutes-

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: JAN 2.7 2022									
	Place of Use Point of Diversion/Appropriation									
	Number of above boxes checked = 1 <u>(2a)</u>									
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0									
2	Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » »	2	<u>0</u>							
	Number of permits included in Permit Amendment 1 (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 Yes: enter \$480 for the 1 st well to be added or changed 480 <u>(4a)</u>									
	Do you propose to add or change additional wells?									
	No: enter 0 Yes: multiply the number of additional wells by \$410 820 (4b)									
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » » »	4	1300							
	Do you propose to change the place of use?									
	No: enter 0 on line 5									
	Yes: enter the cfs for the portions of the permits to be amended (see below*): (5a)									
	Subtract 1.0 from the number in 5a above:(5b)									
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » »									
_	If 5b is greater than 0, round up to the nearest whole number:(5c) and multiply 5c	_								
5	by \$350, then enter on line 5 » » » » » » » » » » » » » » » » » »	5 6	0 2660							
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	0	2000							
	Is this permit amendment: 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	2660							

*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).

ure

	REC	EIVED	Part 4 of 5 - Appl	licant Information and Signa
Applicant Information	IAN	2 7 2022		
APPLICANT/BUSINESS NAME JASPER COUNTY LLC	VAIT	2022	PHONE NO. (541) 480-2662	ADDITIONAL CONTACT NO.
ADDRESS	O	NRD	(0.12) 100 2002	FAX NO.
2544 NW OVERTON STREET				
CITY	STATE	ZIP	E-MAIL	
PORTLAND	OR	97210	DANETOMSETH@GMAIL.CO	
BY PROVIDING AN E-MAIL ADDRES ELECTRONICALLY. COPIES OF THE I	72			ROM THE DEPARTMENT
Agent Information – The age	nt is autho	rized to represent t	he applicant in all matt	ers relating to this application.
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
DAVID NEWTON/H.A. MCCOY ENGINEER	ING & SURVE	YING, LLC	(541) 325-3905	
ADDRESS				FAX NO.
1180 SW LAKE ROAD	Lancero		Francis Maria	
CITY	STATE	ZIP	E-MAIL	
REDMOND	OREGON	97756	DNEWTON@NEWTONCON	
BY PROVIDING AN E-MAIL ADDRES ELECTRONICALLY. COPIES OF THE I				ROM THE DEPARTMENT
Explain in your own words wh	at vou pro	pose to accomplis	h with this permit ame	endment: and why: Replace
three existing wells #1, #3	The second second	· Constitution - Attention and the Constitution of the Constitutio	ACCOMPANIES OF THE PROPERTY OF	
16352 with new constructe				
were constructed with seal		The state of the s	Children and state of the control of	The second secon
geologic and groundwater				
groundwater section staff.				
M				
same aquifer as the origina				
permit G-16352 and the pe		t be amended to	show the new well	s #7, #8 and #9 as
authorized POA's under the	e permit.			
If you need additional space, con	tinue on a s	eparate piece of pa	per and attach to the ap	plication as "Attachment 1".
Check this box if this project stimulus dollars)	t is fully or	partially funded by	the American Recover	y and Reinvestment Act. (Feder
Is the applicant the permit hold	ler of reco	rd? 🗌 Yes 🔀 No		
If NO, include either:				
✓ A same plate d ass!	form luit	h roquirod statutes	v assignment feet seeis	rning all or a portion of the perm

A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), OR

An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

ASSIGNMENTS ARE RECORDED FOR PERMIT G-16352 (SUBJECT OF THIS APPLICATION) AND FOR PERMIT R-15047 (UNRELATED TO THIS APPLICATION) AS EVIDENCED BY ENCLOSED OWRD **LETTER DATED NOVEMBER 9, 2021**

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

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

If NO, what are the completion dates of the permit(s)? OCTOBER 1, 2027 (APPROVED TIME EXTENSION BY FINAL ORDER DATED FEBRUARY 7, 2019, ATTACHED HERETO).

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

By my signature below, I confirm that I understand:

Prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Blue Mountain Eagle, 195 N. Canyon Blvd., John Day, Oregon 97845



Dane Tomseth	DANE TOMSETH	11/2/2021
Applicant Signature	Print Name (and Title if applicable)	Date
Applicant Signature	Print Name (and Title if applicable)	Date
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		JAN 27 2022
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I (we) affirm that the information contained in this application is true and accurate.

Check one of the following:											
∑ The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.											
The permit holder(s) of record will be r the final order is issued. Copies of notic holder(s) of record.											
Check the appropriate box, if applicable: NA											
Check here if any of the permits propose by an irrigation or other water district.	d for amendment are or will	be located within or served									
IRRIGATION DISTRICT NAME	ADDRESS	RECEIVED									
СІТУ	STATE	ZIP JAN 27 2022									
Check here if water for any of the permit contract for stored water with a federal a		vice agreement Brother									
ENTITY NAME	ADDRESS										
CITY	STATE	ZIP									
To meet State Land Use Consistency Requirem city, municipal corporation, or tribal governme conveyed or used.											
ENTITY NAME WHEELER COUNTY	ADDRESS 701 ADAMS STREET, SUITE 203										
CITY	STATE	ZIP									
FOSSIL	OREGON	97830									
ENTITY NAME	ADDRESS										
CITY	STATE	ZIP									
ENTITY NAME	ADDRESS										
CITY	STATE	ZIP									

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 RECEIVED

PERMIT # G-16352

JAN 27 2022

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	Log ID# (or		Sec	74	У 4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)			
1	Authorized Proposed	WHEE 50331	11	s	24	E	16	NE	sw	501	2491 FEET NORTH, 2367 FEET EAST OF SW CORNER SECTION 16
2	□ Authorized □ Proposed	WHEE 50335	11	S	24	E	17	NE	SE	501	2214 FEET NORTH, 1116 FEET WEST OF SE CORNER SECTION 17
3	□ Authorized □ Proposed	WHEE 50328	11	s	24	E	23	SE	NW	501	2167 FEET SOUTH, 2427 FEET EAST OF NW CORNER SECTON 23
4	□ Authorized □ Proposed	WHEE 50337	11	s	24	E	13	NE	sw	501	1342 FEET NORTH, 2638 FEET EAST OF SW CORNER SECTION 17
5	AUTHORIZED	WHEE 50530	11	s	24	E	13	SE	sw	501	964 FEET NORTH, 2498 FEET EAST OF SW CORNER SECTION 13
6	AUTHORIZED	WHEE 50334	11	s	24	E	15	NE	NW	501	1092 FEET SOUTH, 1849 FEET EAST OF NW CORNER SECTION 15
7	PROPOSED REPLACEMENT, POA #1 (CORRECTED SEAL)	WHEE 50495	11	s	24	Е	16	SE	NW	501	44.61575 DEGREES N -119.84825 DEGREES W
8	PROPOSED REPLACEMENT, POA # 3 (CORRECTED SEAL)	WHEE 50519	11	s	24	E	23	sw	NE	501	44.60256 DEGREES N -119.80578 DEGREES W
9	PROPOSED REPLACEMENT, POA #4 & #5	WHEE 50500	11	s	24	E	13	NW	SE	501	44.61200 DEGREES N -119.78564 DEGREES W

For a change in place of use:	
Does the permit holder of record own or control the land TO which the place of use is being moved? ☐ Yes ☐ No NA - NO CHANGE IN PLACE OF USE	
If NO, the landowner of the land TO which the place of use is being moved must be assigned to the personal assignment as a permit holder of record by submitting a completed Request for Assignment form and the require statutory fee for an assignment.	
Is the proposed place of use contiguous to the authorized place of use? Yes No NA – NO CHANG PLACE OF USE	GE IN

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.

JAN 2 7 2022 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

Table 2. Description of Changes to Water Use Permit # G-16352

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.

(**		list	ting	AU7	THOF t app	RIZED ears	(the "f on the CHAN	rom" certif IGES	or "off" la ficate BEF		SED	Proposed						PR	OPOS	SED (the	"to" (or "on" lan TER PROPO	ids) DSED CHANG	ES
Tw	p	Rr	ng	Sec	3/4	1 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)	Τν	vp	Rr	ng	Sec	%	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											
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	s	9	Е	15	NW	NW	100	1	10.0	POD #5	Sala is
"	"	"	"	u	"	"	"	"	EXAMPLE	"		"	2	S	9	E	15	sw	NW	200		5.0	POD #6	WAR BUT
										POA #1 (WHEE 50331)	10/1/2007	POA	11	S	24	Е	16	NE	sw	501			POA #7 (WHEE 50495)	10/1/2007
										POA #3 (WHEE 50328)	10/1/2007	POA	11	S	24	Ε	23	SE	NW	501			POA #8 (WHEE 50519)	10/1/2007
										DOA #4	10/1/2007		11	S	24	E	13	NE	sw	501			POA #9 (WHEE 50500)	10/1/2007
										POA #5 (WHEE 50330)	10/1/2007	РОА	11	S	24	E	13	SE	sw	501			POA #9 (WHEE 50500)	10/1/2007
						-															REC	EIVED		
1																					JAN	2.7 2022		
																					OI	VRD		
						TO	TAL ACE	RES											Т	OTAL AC	RES			

Additional remarks: AMENDMENT IS TO REPLACE EXISTING POINTS OF APPROPRIATION (POA'S) 1, 3, 4 & 5 WITH NEW CONSTRUCTED WELLS (POA'S 7, 8 & 9) WITH SEAL DEPTHS APPROVED BY OWRD GROUNDWATER SECTION STAFF AND FOUND BY STAFF TO WITHDRAW WATER FROM THE SAME AQUIFER, AND APPROVED BY THE OWRD WELL CONSTRUCTION STAFF. NO CHANGE IN PLACE OF USE IS BEING MADE. POA'S ARE AUTHORIZED TO SUPPLY WATER TO ANY LOCATION WITHIN TOTAL PLACE OF USE ACREAGE OF 800 ACRES.

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Are there other water rights certificates, water use permits or ground water registrations associated with the "from" or "to" lands? \square Yes \boxtimes 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.	Y
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)	
WELL LOGS FOR CURRENTLY AUTHORIZED POA WELLS #1 (WHEE 50331), #3 (50328), #4 (WHEE 50337) & #5 (50330), AND FOR NEW CONSTRUCTED POA WELLS #7 (WHEE 50495), #8 (WHEE 50519) AND #9 (WHEE 5050 ARE INCLUDED WITH THIS APPLICATION	
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 Static Source Specific Spec	

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
POA #7 WHEE 50495 (REPLACES POA #1)	YES	L-135223	456 FT	10 INCHES	+2' TO 456'	0' TO 456'	396' TO 456'	131'	CLAYSTONE, FRACTURED CLAYSTONE	400 GPM
POA #8 WHEE 50519 (REPLACES POA #3)	YES	L-135221	435 FT	10 INCHES	+3' TO 435'	0' TO 140	180' TO 200' 220' to 240' 240' to 260' 280' to 320' 360' to 420'	12'	CLAYSTONE, BROKEN CLAYSTONE	120 GPM

JAN 27 2022

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
POA #9 WHEE 50500 (REPLACES POA #4 & #5)	YES	L-135286	456 FT	8 INCHES	+1.5' TO 38.5'	0′ TO 38.5′	NONE	74'	FRACTURED CLAYSTONE	45 GPM

NOTE: THESE ARE NEW CONSTRUCTED WELLS THAT WERE SEALED ACCORDING TO A WELL SEAL PLAN PREPARED BY AGENT, AND THROUGH CONSULTATIONS WITH OWRD HYDROGEOLOGIST BASED ON WELL SEAL PLAN THAT IS RESPONSIBLE FOR WHEELER COUNTY GROUNDWATER ISSUES. THE NEW CONSTRUCTED WELLS WERE ALSO CONCLUDED TO WITHDRAW WATER FROM THE SAME AQUIFER AS THE ORIGINAL WELLS

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Land Use Information Form



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

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JAN 27 2022

Applicant(s): JASPER COUNTY, LLC

Mailing Address: 2544 OVERTON STREET

City: PORTLAND

State: OREGON Zip Code: 97210

Daytime Phone: (541) 480-2662

A. Land and Location SEE ATTACHED TABLE "LAND AND LOCATION" PAGES 1 AND 2

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	Y4 Y4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:	
						Diverted	Conveyed	Used	AGRICULTURAL	
						Diverted	Conveyed	Used	AGRICULTURAL	
						Diverted	Conveyed	Used	AGRICULTURAL	
						Diverted	Conveyed	Used		
ist all count		ties where	water is pro	pposed to be	diverted, conveyed, an	d/or used or	developed:			E
3. Descript	ion of Pro	posed Us	<u>e</u>							
Permit	to Use or	Store Wate	er 🔲 Wate	r Resources (r Right Transi ation of Cons	SCHOOL BOX NO. TO DEGLESS WITH MAD IT!			Water Reg	gistration Modific	cation
ource of wa	ter: 🔲 R	eservoir/Po	ond 🛛 G	iround Water	Surface Water	(name)	_			
stimated qu	antity of	water need	ed: 10	🔀 cub	oic feet per second			gallons pe	r minute	acre-
itended use		☐ Munic		Commercial Quasi-Munic		The second second	estic for r	_ househo	old(s)	
riefly descri Three new		ted wells	replace th	ree impron	erly sealed wells to	continue su	innlying irrie	ation wa	ater for	
					it issued by the Oreg					
									120	
ote to appli	cant: If th	e Land Use	Informatio	n Form cann	ot be completed while	you wait, ple	ase have a lo	cal govern	nment	

representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →



JAN 27 2022

For Local Government Use Only

OWRD

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 a	nd provide the requested information		
X Land uses to be served by the proposed wat regulated by your comprehensive plan. Cite a			
Land uses to be served by the proposed wat approvals as listed in the table below. (Please obtained. Record of Action/land-use decision all appeal periods have not ended, check "Both and the content of	attach documentation of applicable land-us and accompanying findings are sufficient.)	e approvals wh	ich have already been
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	d-Use Approval:
		Obtained Denled	☐ Being Pursued☐ Not Being Pursued
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
Name: Matt Davis	Title:	Planning Direct	tor
Signature: MKC:	Phone:541-763-2126	6 Date:	01-12-2022
Government Entity: Wheeler County Planning	Department	4	
Note to local government representative: Pleasign the receipt, you will have 30 days from the Ninformation Form or WRD may presume the land comprehensive plans.	Water Resources Department's notice date t	o return the co ater is compatib	mpleted Land Use ble with local
	for Request for Land Use Informatio		
Applicant name:			
City or County:	Staff contact:		
Signature:	Phone: Date:	W	



Water Resources Department

North Mall Office Building 725 Summer St NE, Ste A Salem, OR 97301

Phone: 503-986-0900 Fax: 503-986-0904

www.Oregon.gov/OWRD

November 9, 2021

Dane Matthew Tomseth Jasper County, LLC 2544 NW Overton St Portland, OR 97210 JAN 2.7 2022

OWRD

Reference: Application G-16936, Permit G-16352 Reference: Application R-87490, Permit R-15407

The assignments from 4 DSD, LLC to Jasper County, LLC have been recorded in the records of the Water Resources Department.

The Departments records will now show Jasper County, LLC as the permit of record.

Our records have been changed accordingly and the original requests are enclosed. Receipt numbers 136560 and 136664 covering the recording fees is also enclosed.

A permit is not a perfected water right, and has conditions and timelines that must be satisfied prior to a Certificate of Water Right being issued. Please review the permits to be familiar with the conditions and timelines contained in the permits.

Please note that these permits require complete application of water to the proposed use by October 1, 2027, for Application G-16936, Permit G-16352, and August 28, 2024, for Application R-87490, Permit R-15407, and within one year after complete application of water to the proposed use, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner (CWRE).

Sincerely,

Mary F. Bjork

May 8B1

Water Rights Program Analyst Water Right Services Division

Enclosure: Original Request and Receipt #136560

cc: 4 DSD, LLC - 1380 East Ave 124-181, Chico, CA 95926

Data Center, OWRD (cover letter & request)

File

STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 136664

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # _____

(503) 986-0900 / (503) 986-0904 (fax) Dine Motthew R. 87410 RECEIVED FROM: APPLICATION BY: PERMIT TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) 1089 TOTAL REC'D 1083 **TREASURY** WRD MISC CASH ACCT 4170 0407 COPIES \$ OTHER: (IDENTIFY) 0243 I/S Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water __ 4270 WRD OPERATING ACCT 46111 MISCELLANEOUS RECEIVED 0407 **COPY & TAPE FEES** JAN 2.7 2022\$ 0410 RESEARCH FEES MISC REVENUE: (IDENTIFY) 0408 **OWRD** DEPOSIT LIAB. (IDENTIFY) TC162 **EXTENSION OF TIME** 0240 RECORD FEE WATER RIGHTS: **EXAMFEE** SURFACE WATER 0202 0201 **GROUND WATER** 0204 0203 TRANSFER 0205 **EXAM FEE** WELL CONSTRUCTION LICENSE FEE 0219 WELL DRILL CONSTRUCTOR 0218 0220 LANDOWNER'S PERMIT 070 Tian.00 Assignmen (IDENTIFY) OTHER WELL CONST. START FEE TREASURY 0437 0536 \$ WELL CONST START FEE 0211 CARD# CARD# 0210 MONITORING WELLS OTHER (IDENTIFY) .





Request for Assignment



O R E G O N
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.orenon.gov/lowed

If the Department determines that the application is incomplete, fees have not been paid, or the required documents are not acceptable, the application and all fees submitted will be returned to the applicant.

		multiple rights, a separate f	form and fee for each r	ight will be requ	ilred.			
	(Nam	DSP LLC e of Current Holder of Recoil SW ENOT AND	^{rd)} 124-181	CHICO	CA	95926	530-273	-1m
	(Maill	ng Address)		(City)	(State)	(ZIp) (P	hone#)	
	X	hereby assign <u>all my intere</u> statement; (exam	est in and to the entire and and a	application/pen authorized unde	mit/trans er the rigi	ifer order/limited	ilicense/groundwa	ter
ECEIVE	<u></u>	hereby assign all my inter- license/groundwater state application/permit/transf portion of the land author	ement; (<u>You must inclu</u> er order/limited license	de a map show	ing the p	ortion of the		
AN 2 7 2022		hereby assign a portion of license/groundwater state	ement; (example, addi	ng an additiona	l person)		der/limited	
		Application # (7 ·)	6936 ; Permit #_	6-16352	:Tran ز <u>ک</u>	sfer Order #		
OWRD		Limited Licen	se #	ے: Groundwate	r Stateme	ent #		
	as filed	In the office of the Water	Resources Director, to:	:				
	-	Jasper Count	ty, LLC	48.5	,			
	(Name of New Owner) 2544 NW Overton St Portland, OR 97210 541-480-3 (Mailing Address) (City) (State) (Zip) (Phone #)							
	Note: If there are other owners of the property described in the application, permit, transfer order, limited license, or groundwater statement, you must provide a list of all other owners' names and mailing addresses and attach it to this form. Write the initials (first letters) of your first and last names at the spot indicated below. I hereby certify that I have notified all other owners of the property described in this application, permit, transfer order, limited license, or groundwater statement of this Request of Assignment. Witness my hand this day of (Day) (Month) (Year) Signature of Current Holder of Record (Day) (Month) (Year) (Year)						155.72- Appr	
	Orego 8 00 a Fee ro	ertifies assignment and report water Resources Department on date of receipt at seceipt # /36 56 ceceipt # /36 66 ceceipt # /	artment effective Salem, Oregon. Drogram Analyst in	form must b	e submi	uest for Assignm tted to the Depa ding fee of \$120	rtment	OCT 212
	;-	2 · 8		1044			\$	1
	**	l .	r	lew Message	9			
								Δ.

Man Managa

STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 136560

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE #	·
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(503) 986-0900 / (503) 986-0904 (fax) G 110736 APPLICATION Dane Matkheu RECEIVED FROM: PERMIT BY: TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) \$ 120.00 TOTAL REC'D WRD MISC CASH ACCT 1083 TREASURY 4170 \$ 0407 COPIES \$ OTHER: (IDENTIFY) 0243 I/S Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _ WRD OPERATING ACCT 4270 46111 **MISCELLANEOUS** RECEIVED 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES JAN 27 2022 0408 MISC REVENUE: (IDENTIFY) DEPOSIT LIAB. (IDENTIFY) TC162 OWRD \$ **EXTENSION OF TIME** 0240 RECORD FEE EXAM FEE WATER RIGHTS: 0202 SURFACE WATER 0201 0204 **GROUND WATER** 0203 TRANSFER 0205 LICENSE FEE **EXAM FEE** WELL CONSTRUCTION 0219 \$ WELL DRILL CONSTRUCTOR 0218 0220 LANDOWNER'S PERMIT \$120,00 Assignment (IDENTIFY) _ D. O OTHER **WELL CONST. START FEE** 0437 TREASURY 0536 CARD# WELL CONST START FEE 0211 CARD# \$ 0210 MONITORING WELLS (IDENTIFY) -OTHER

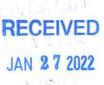
Request for Assignment



O R E G O N
Oragin Water Resource: Deparament
725 furniture: Street NJ, Surlas A
Salern, Oragin 97107-1246
[S01] 966-9900 THENT

if the Department determines that the application is incomplete, fees have not been paid, or the required documents are not acceptable, the application and all fees submitted will be returned to the applicant.

If for multiple rights, a separate form and fee for each right will be required.	
, 4psp ple	
1500 ENOT JUL 124-181 CHILD CA 95926 530-223-100	
(Malling Address) (City) (State) (Zip) (Phone 8)	
hereby assign all my interest in and to the entire application/permit/transfer order/limited license/groundwater statement; (example, sold all the land authorized under the right)	RECD
hereby assign all my interest in and to a portion of application/permit/transfer order/limited license/groundwater statement; (You must include a man showing the portion of the application/permit/transfer order/limited license/groundwater statement to be assigned. Example, sold a portion of the land authorized under the right)	NOV 0 8 2021 OWRD
hereby assign a portion of my interest in and to the entire application/permit/transfer order/limited license/groundwater statement; (example, adding an additional person)	RECEIVED
Application # R-87440; Permit # 9-15407; Transfer Order #;	JAN 2 7 2022
Limited License II; Groundwater Statement A;	. LOLL
Jasper County LLC	OWRD
(Mariling Address) (Mariling Address) (Mariling Address) (Mariling Address) (Mariling Address) (Mariling Address)	2662
Note: If there are other owners of the property described in the application, permit, transfer order, limited license, or groundwater statement, you must provide a list of all other owners' names and mailing addresses and attach it to this form. Write the initials (first letters) of your first and last names at the spot indicated below. I hereby certify that I have notified all other owners of the property described in this application, permit, transfer order, limited license, or groundwater statement of this flequest of Assignment. Witness my hand this	^
New Message	
\$	



Oregon Water Resources Department Water Right Services Division

OWRD

Application for Extension of Time

In the Matter of the Application for an Extension of Time

	Water Right Application G-16936, in LLC FINAL ORDER	
	Permit Information	
Application:	G-16936	
Permit:	G-16352	
Basin:	6 – John Day / Watermaster District 4	
Date of Priority:	October 1, 2007	
Source of Water:	Well 1 (WHEE 50331), Well 2 (WHEE 50335) and Well 6 (WHE	E
	50334) in Willow Creek Basin; Well 3 (WHEE 50328) in Tubb Co	reek
	Basin; and Well 4 (WHEE 50337) and Well 5 (WHEE 50330) in	
	Indian Creek Basin	
Purpose or Use:	Irrigation use on 800.0 acres	
Maximum Rate:	10.0 cubic feet per second (cfs)	

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

Appeal Rights

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

Application History

Permit G-16352 was issued by the Department on July 10, 2008. The permit specified completion of construction by October 1, 2012, and complete application of water to beneficial use by October 1, 2012. The most recent extension authorized completion of construction and complete application of water to beneficial use by October 1, 2019. On October 23, 2019, 4-DSD, LLC submitted an Application for Extension of Time for Permit G-16352. In accordance with OAR 690-315-0050(2), on December 3, 2019, the Department issued a Proposed Final Order proposing to extend the time to complete construction to October 1, 2027, and the time to fully apply water to beneficial use to October 1, 2027. The protest period closed January 19, 2020, in accordance with OAR 690-315-0060(1). No protest was filed.

Final Order: Permit G-16352 Page 1 of 3



FINDINGS OF FACT

The Department adopts and incorporates by reference the findings of fact in the Proposed Final Order dated December 3, 2019.

At time of issuance of the Proposed Final Order the Department concluded that, based on the factors demonstrated by the applicant, any comments received, and information within the file, the permit may be extended subject to the following condition:

LIMITATIONS AND CONDITIONS

1. Permit Amendment Condition

The use of water from under Permit G-16352 is subject to this Condition.

The permit holder shall submit a Permit Amendment Application, requesting authorization of wells constructed as replacement for the well specified in Permit G-16352. No water may be appropriated from the replacement wells unless approved.

2. Checkpoint Condition

The permit holder must submit a completed Progress Report Form to the Department by October 1, 2025. A form will be enclosed with your Final Order.

- (a) At each checkpoint, the permit holder shall submit and the Department shall review evidence of the permit holder's diligence towards completion of the project and compliance with terms and conditions of the permit and extension. If, after this review, the Department determines the permit holder has not been diligent in developing and perfecting the water use permit, or complied with all terms and conditions, the Department shall modify or further condition the permit or extension to ensure future compliance, or begin cancellation proceedings on the undeveloped portion of the permit pursuant to ORS 537.260 or 537.410, or require submission of a final proof survey pursuant to ORS 537.250;
- (b) The Department shall provide notice of receipt of progress reports in its weekly notice and shall allow a 30 day comment period for each report. The Department shall provide notice of its determination to anyone who submitted comments.

CONCLUSION OF LAW

The applicant has demonstrated good cause for the permit extension pursuant to ORS 537.630, 539.010(5) and OAR 690-315-0040(2).

Final Order: Permit G-16352 Page 2 of 3 1 3 9 0 5

ORDER

OWRD

The extension of time for Application G-16936, Permit G-16352, therefore, is approved subject to conditions contained herein. The deadline for completing construction is extended from October 1, 2019, to October 1, 2027. The deadline for applying water to full beneficial use within the terms and conditions of the permit is extended from October 1, 2019, to October 1, 2027.

DATED: February 7, 2019

Dwight French

Water Right Services Division Administrator, for

Thomas M. Byler, Director

Oregon Water Resources Department

- If you have any questions about statements contained in this document, please contact the Permit Extension Specialist at 986-0802.
- If you have other questions about the Department or any of its programs, please contact our Water Resources Customer Service Group at (503) 986-0900

Reviewed by:



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

Extension of Time Progress Report Form For Checkpoints

TO THE DIRECTOR OF THE OREGON WATER RESOURCES DEPARTMENT

Permit Holder: 4-DSD_LLC	Application C 16026

Permit G-16352

	· rioidei		Appl	ication o	-10930	ren	IIII U-103	32	
As au	thorized	DO NOT SUBM in ORS 690-315-0050(6), exercised in the develo	ort Due no IIT PRIOI this prog opment ar	ress repor	n October DAYS BE t is requir ions of Pe	1, 2025 EFORE DI red in orde ermit G-16	er to ensur 352.	e diligen	ce is
DA	TES	LIST ALL WORK ACC						rs Fi	NANCIAL
Di	1125	For the period of time	between	October 2	23, 2019 a	nd Octobe	er 1, 2025		VESTMENT
Use ba	Identif	orm if needed Ty the date compliance wi rized by the permit or an	th the fol	llowing colling dipermit	onditions amendm Well 3	ent.			
	Autho	rized by namit as namit	WEILI	Well 2	well 3	Well 4	Well 5	Well 6	
	amend	Control of the Contro							
		casing and seal							
	Meter	installed							
	March measu	n static water level ared							
3.	compli Total r	litions have not been com ance will be achieved. number of acres irrigated			provide	an explan	ation and	a date v	vhen
		cres irrigated per well, Well 2 Wel	11 3	Well 4 _	V	Vell 5	Well 6		
			continue	d on follo	owing pag	ge	1	3 9 0	5
Diligeno	e Shown	☐ Yes ☐ No	Date P	ublic Notic	ed:				

For OWRD use only

Date:

4.	Provide the maximum rate, or duty if applicable permit, if any, to date. Maximum rate used to date =cfs Maximum Rate per well:	Report the rate in the same units of measurement as specified in the permit, being cfs (cubic feet per second), gpm (gallons per minute) or AF (acre-feet). Do not provide daily, monthly, or annual water volume totals.	
	Well I Well 2 Well 3 Well 4	4 Well 5 Well 6	
FAILU EXTE	MPLETE REPORTS WILL BE RETURNED. AN AN URE TO SUBMIT THIS REPORT WILL MOST INSION BEING DENIED.	T LIKELY RESULT IN ANY FUTURE	
Signati	ure	Date	
Printed	l Name/Title		
		DECEN/ED	
		RECEIVED	
		JAN 27 2022	
		OWRD	

Diligence Shown	☐ Yes ☐ No	Date Public Noticed: For OWRD use only	
Reviewed by:		Date:	

Mailing List for Extension FO Copies

FO Date: February 7, 2019

Copies Mailed

Application: G-16936

By: _____

Permit: G-16352

On: _____

Original mailed to permit holder

4-DSD, LLC 175 Phillips Rd. Woodside, CA 94062

RECEIVED
JAN 27 2022

Copies sent to:

1. WRD - App. File G-16936/ Permit G-16352

OWRD

David Newton
 H.A. McCoy Engineering and Surveying 1180 SW Lake Rd.
 Redmond, OR 97756

Fee paid as specified under ORS 536.050 to receive copy:

3. None

Receiving notification via e-mail - FO available in WRIS for review (DONE BY EXTENSION SPECIALIST)

4. WRD - Watermaster District 4, Eric Julsrud

CASEWORKER: JDP

WHEE 50331 07-24-2007

POA 毕1	Page 1 of

WELL LABEL # L	91166
START CARD#	1001414

(1) LAND OWNER Owner Well I.D. 1	(9) LOCATION OF WELL (legal description)			
First Name CASEY Last Name SAFRENO	County Wheeler Twp 11.00 S N/S Range 24.00 E E/W WM			
Company 4DSD,LLC	Sec 16 SW 1/4 of the SW 1/4 Tax Lot 501			
Address 175 PHILLIP RD	Tax Map Number Lot			
City WOODSIDE State CA Zip 94062	Lat 4 °36 '948 " or 4.86333333 DMS or DD			
(2) TYPE OF WORK New Well Deepening Conversion	Long -119 °50 '89.000" or -119.85805556 DMS or DD			
	Street address of well Nearest address			
Alteration (repair/recondition) Abandonment				
(3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud	NON ASSIGNED WELL#I			
Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)			
	Existing Well / Predeepening			
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 07-11-2007 6 X 13.9			
Industrial/Commericial Livestock Dewatering	Flowing Artesian? Dry Hole?			
Thermal Injection Other	WATER BEARING ZONES Depth water was first found 375			
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)				
Depth of Completed Well 395.00 ft.	07-11-2007 375 395 400 6 🗵 13.9			
BORE HOLE SEAL sacks/				
Dia From To Material From To Amt lbs				
12 0 19 Bentonite Chips 0 19 10 S				
8 19 395				
	(11) WELL LOG Ground Elevation			
	Olouna Elevation			
How was seal placed: Method A B C D E	Material From To Claystone Brown 0 25			
Other POURED DRY	Claystone Green 25 40			
Backfill placed from ft. to ft. Material Size	Claystone Brown 40 48			
Filter pack from ft. to ft. Material Size	Claystone Gray 48 85			
Explosives used: Yes Type Amount	Claystone Green RFCF 85 98			
(6) CASING/LINER	Claystone Brown 98 105			
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plste Wld Thrd	Claystone Gray 105 112			
(a)(b)(c)(d)(d)(e)(e)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)(f)<	Claystone Brown JAN 2. 7 2022 112 175			
	Claystone Red 175 273 Claystone Brown 273 304			
	Claystone Red 304 322			
	Claystone Gray 322 375			
	Claystone Gray Fractured 375 395			
Shoe Inside Outside Other Location of shoe(s)				
Temp casing Yes Dia From To				
(7) PERFORATIONS/SCREENS				
Perforations Method				
Screens Type Material				
Perf/ Casing/ Screen Scm/slot Slot # of Tele/ Screen Liner Dia From To width length slots pipe size	Date Started <u>07-10-2007</u> Completed <u>07-11-2007</u>			
	(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.			
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1831 Date 07-24-2007 Electronically Filed			
Pump Bailer	Signed ALLEN R PECK (E-filed)			
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)				
400 395 1	(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			
Temperature 65 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.			
Water quality concerns? Yes (describe below) From To Description Amount Units	License Number 1720 Date 07-24-2007			
From To Description Amount Units	Electronically Filed			
	Signed JACK ABBAS (E-filed)			
	Contact Info (optional)			
	VF.			

WHEE 50328 07-24-2007

Page 1 of 1

WELL LABEL # L 91175 START CARD # 1001418

(1) LAND OWNER Owner Well I.D. 5	(9) LOCATION OF WELL (legal description)
First Name CASEY Last Name SAFRENO	County Wheeler Twp 11.00 S N/S Range 24.00 E E/W WM
Company 4DSD,LLC	Sec 23 SE 1/4 of the SE 1/4 Tax Lot 501
Address 175 PHILLIP RD	Tax Map Number Lot
City WOODSIDE State CA Zip 94062	Lat 44 °36 '144 " or 44.64000000 DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Long -119 °48 '358 " or -119.89944444 DMS or DD
Alteration (repair/recondition) Abandonment	Street address of well Nearest address
	NON ASSIGNED WELL#5
(3) DRILL METHOD	
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Reverse Rotary Other	
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening Completed Well 07-18-2007 15 34.6
Industrial/ Commercial Livestock Dewatering	Flowing Artesian? Dry Hole?
Thermal Injection Other	WATER BEARING ZONES Depth water was first found 420
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	The state of the s
Depth of Completed Well 450.00 ft.	SWL Date From To Est Flow SWL(psi) + SWL(ft)
BORE HOLE SEAL sacks/	
Dia From To Material From To Amt lbs	
12 0 49 Bentonite Chips 0 49 28 S	
8 49 450	
	(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D E	Material From To
Other POURED DRY	Clay Brown 0 6
	Clay Green 6 40
Backfill placed from ft. to ft. Material	Claystone Gray 40 56
Explosives used: Yes Type Amount	Claystone Brown 56 78 Claystone Green 78 107
	Claystone Brown 107 136
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plste Wld Thrd	Claystone Green 136 205
● ○ 8 × 2 49 .250 ● ○ ×	Claystone Gray 205 238
8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Claystone Green 238 293
	Claystone Gray Fractured 293 338 Claystone Green 338 346
	Claystone Green 338 346 Claystone Green Fractured 346 450
	RECEIVED
Shoe Inside Outside Other Location of shoe(s)	
Temp casing Yes Dia From To	JAN 2 7 2022
(7) PERFORATIONS/SCREENS	JAIN W LOLL
Perforations Method	
Screens Type Material	OWRD
500 AND THE PROPERTY OF THE PR	Date Started 07-17-2007 Completed 07-18-2007
Perf/ Casing/ Screen Scm/slot Slot # of Tele/ Screen Liner Dia From To width length slots pipe size	
	(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.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1852 Date 07-24-2007
Pump Bailer Air Flowing Artesian	Electronically Filed
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed JEB W ABBAS (E-filed)
300 450 1	(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
Temperature 65 °F Lab analysis Yes By	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.
Water quality concerns? Yes (describe below) From To Description Amount Units	License Number 1720 Date07-24-2007
The state of the s	Electronically Filed
	Signed JACK ABBAS (E-filed)
	Contact Info (optional)

WHEE 50337

08-20-2007



Page 1 of 1

WELL LABEL # L	91174
START CARD#	1001788

(1) LAND OWNER Owner Well I.D. #7	(9) LOCATION OF WELL (legal description)
First Name CASEY Last Name SAFRENO	County Wheeler Twp 11.00 S N/S Range 24.00 E E/W WM
Company 4DSD,LLC	Sec 13 NE 1/4 of the SW 1/4 Tax Lot 1700
Address 175 PHILLIP RD	Tax Map Number Lot
City WOODSIDE State CA Zip 94062	Lat 44 °36 '713 " or 44.79805556 DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Long -119 °47 '136 " or -119.82111111 DMS or DD
Alteration (repair/recondition) Abandonment	
	NON ASSIGNED WELL #7
(3) DRILL METHOD	
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Reverse Rotary Other	Existing Well / Predeepening Date SWL(psi) + SWL(ft)
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 08-14-2007 58
Industrial/ Commercial Livestock Dewatering	Flowing Artesian? Dry Hole?
Thermal Injection Other TEST HOLE	WATER BEARING ZONES Depth water was first found 100
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	
Depth of Completed Well 450.00 ft.	08-13-2007 100 128 15 58
BORE HOLE SEAL sacks/	08-14-2007 297 350 100 58
Dia From To Material From To Amt lbs	
12 0 18.5 Bentonite 0 18.5 11 S	
8 18.5 450	
	(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D E	Material From To
Other POURED DRY	BROWN CLAY AND LAVA 0 2
Backfill placed from ft. to ft. Material	BROWN CLAY 2 7 BROWN CLAYSTONE 7 24
Filter pack from ft. to ft. Material Size	BROWN CLAYSTONE 7 24 GREEN CLAY STONE 24 55
Explosives used: Yes Type Amount	BROWN CLAY STONE 55 80
(6) CASING/LINED	GRAY CLAY STONE 80 100
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	BROWN CLAY STONE 100 128
	GREEN CLAY STONE FRACTURED LAYERS 128 297 GRAY CLAY STONE FRACTURED LAYERS 297 310
	GRAY CLAY STONE FRACTURED LAYERS 297 310 GREEN CLAY STONE FRACTURED LAYERS 310 450
	RECEIVED
Shoe Inside Outside Other Location of shoe(s)	JAN 2.7 2022
Temp casing Yes Dia From To	or in the second
(7) PERFORATIONS/SCREENS	
Perforations Method	OWRD
Screens Type Material	
Perf/ Casing/Screen Scrn/slot Slot # of Tele/	Date Started 08-13-2007 Completed 08-14-2007
Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification
	I certify that the work I performed on the construction, deepening, alteration, o
	abandonment of this well is in compliance with Oregon water supply wel
	construction standards. Materials used and information reported above are true to
	the best of my knowledge and belief.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1852 Date 08-20-2007
Pump Bailer Air Flowing Artesian	Electronically Filed Signed JEB W ABBAS (E-filed)
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	
100 450 1	(bonded) Water Well Constructor Certification
	I accept responsibility for the construction, deepening, alteration, or abandonme work performed on this well during the construction dates reported above. All works
Temperature 62 °F Lab analysis Yes By	performed during this time is in compliance with Oregon water supply we
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.
From To Description Amount Units	License Number 1720 Date 08-20-2007
	Electronically Filed
	Signed JACK ABBAS (E-filed)
	Contact Info (optional)
ORIGINAL - WATER RESOURCES I	TO THE RESIDENCE OF A SAME OF COLUMN FILES OF WORK
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT OF THE WATER RESOURCES DEPARTMENT.	
	13905

WHEE 50330 07-24-2007



Page 1 of 1

WELL LABEL # L START CARD # 1001417

(1) LAND OWNER Owner Well I.D. 4 (9) LOCATION OF WELL (legal description) First Name CASEY Last Name SAFRENO County Wheeler Twp 11.00 S N/S Range 24.00 E Company 4DSD,LLC Sec 24 1/4 of the SE 1/4 Tax Lot 501 Address 175 PHILLIP RD Tax Map Number City WOODSIDE State CA Zip 94062 °36 " or 44.77972222 Lat 44 '647 Long -119 °47 '135 " or -119.82083333 DMS or DD (2) TYPE OF WORK New Well Deepening Conversion C Street address of well Nearest address Alteration (repair/recondition) Abandonment NON ASSIGNED WELL #4 (3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud (10) STATIC WATER LEVEL Date Reverse Rotary Other SWL(psi) SWL(ft) Existing Well / Predeepening (4) PROPOSED USE Domestic Irrigation Community Completed Well 07-19-2007 Industrial/Commercial Livestock Dewatering Flowing Artesian? Dry Hole? Thermal Injection Other Depth water was first found 97 WATER BEARING ZONES (5) BORE HOLE CONSTRUCTION Special Standard Attach copy SWL Date From 97 Est Flow SWL(psi) SWL(ft) Depth of Completed Well 450.00 ft. **BORE HOLE** SEAL sacks/ From Material From To Amt 12 19 Bentonite Chips 19 11 S 0 0 19 450 (11) WELL LOG **Ground Elevation** From How was seal placed: Method Material To Clay Brown 6 Other POURED DRY Clay Green 6 12 Backfill placed from ft. to ft. Material Claystone Green 12 25 Filter pack from ft. to ft. Material Size 25 40 Claystone Gray Explosives used: Type Amount Claystone Brown 40 43 97 43 Claystone Gray (6) CASING/LINER Casing Liner Dia Claystone Gray Fractured 97 104 From To Gauge Stl Plste Wld Thrd Claystone Gray 104 232 19 250 232 285 Claystone Green Claystone Gray 285 300 376 300 Claystone Green Fractured 450 laystone Gray Fractured 376 Shoe Inside Outside Other Location of shoe(s) Temp casing Yes Dia (7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Perf/ Casing/ Screen # of Tele/ Scrn/slot Slot Completed 07-19-2007 Date Started 07-18-2007 Screen Liner From length slots pipe size (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. Date 07-24-2007 License Number 1852 (8) WELL TESTS: Minimum testing time is 1 hour Electronically Filed Flowing Artesian O Bailer (Air Signed JEB W ABBAS (E-filed) Drill stem/Pump depth Duration (hr) Yield gal/min Drawdown (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 °F Lab analysis Yes By Temperature 65 construction standards. This report is true to the best of my knowledge and belief. Yes (describe below) Water quality concerns? Date07-24-2007 From Description Amount Units License Number 1720 Electronically Filed Signed JACK ABBAS (E-filed) Contact Info (optional)

0/10/2010

WELL I.D. LABEL# L 135223 START CARD# 1044452

(as required by ONG 2577703 & ONK 050-202-0210)	ZUIS ORIGINAL LOG#
(1) LAND OWNER Owner Well I.D. 1	
First Name CASEY Last Name SAFRENO	(9) LOCATION OF WELL (legal description)
Company 4DSD LLC	County WHEELER Twp 11.00 S N/S Range 24.00 E E/W WM
Address 1380 E AVE SUITE 124 PMB 181	Sec 16 SE 1/4 of the NW 1/4 Tax Lot 1700
City CHICO State CA Zip 95926	Tax Map Number Lot
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot Lat
Alteration (complete 2a & 10) Abandonment(complete 5a)	Long "or -119.84825000 DMS or DD
(2a) PRE-ALTERATION	C Street address of well Nearest address
Casing:	
	NON ASSIGNED. WATERMAN #2 REPLACEMENT WELL
Material From To Amt sacks/lbs	
(3) DRILL METHOD	(10) STATIC WATER LEVEL
X Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(ft)
	Existing Well / Pre-Alteration
Reverse Rotary Other	Completed Well 9/16/2019 131
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 190.00
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)
	The second secon
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	9/4/2019 190 195 15 140
Depth of Completed Well 456.00 ft.	9/5/2019 410 450 400 131
BORE HOLE SEAL sacks/	
Dia From To Material From To Amt lbs 14 0 456 Bentonite Chips 0 2 2 S	
14 0 456	
Cement 2 350 132 S	
Calculated 130	(11) WELL LOG Ground Elevation 3975.00
How was seal placed: Method A B XC D E	Material From To
XOther POURED DRY	CLAY BROWN 0 25
Backfill placed from ft. to ft. Material	CLAYSTONE GRAY 25 38
Filter pack from 350 ft. to 456 ft. Material PEA GRAVBize pea gravel	CLAYSTONE BROWN 38 45
	CLAYSTONE GRAY 45 50
Explosives used: Yes Type Amount	CLAYSTONE BROWN 50 59
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	CLAYSTONE GRAY 59 99
Proposed Amount Actual Amount	CLAYSTONE BROWN 99 110 CLAYSTONE GRAY 110 121
(6) CASING/LINER	CLAYSTONE GRAY 110 121 CLAYSTONE BROWN RED 121 155
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	CLAYSTONE BROWN LSS 255
● 10 X 2 456 .250 ● X	CLAYSTONE RED 255 315
	CLAYSTONE GRAY HARD FRACTURED LAYE 315 456
	RECEIV
Shoe Inside Outside Other Location of shoe(s)	V.202
Temp casing Yes Dia 16 From + 1 To 9	100 000
(7) PERFORATIONS/SCREENS	JAN 2.7 20
Perforations Method MACHINE	
Screens Type Material	Date Started 9/4/2019 Completed 9/16/2019
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	(unbonded) Water Well Constructor Certification
Screen Liner Dia From To width length slots pipe size Perf Casing 10 396 456 .125 3 1050	I certify that the work I performed on the construction, deepening, alteration, or
Perf Casing 10 396 456 .125 3 1050	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 758 Date 9/19/2019
8) WELL TESTS: Minimum testing time is 1 hour	
	Signed THOMAS PECK (E-filed)
Pump Bailer • Air Flowing Artesian	(bonded) Water Well Constructor Certification
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 400 450 1	I accept responsibility for the construction, deepening, alteration, or abandonment
400 450 1	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
Temperature 65 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.
	License Number 1720 Date 9/19/2019
Water quality concerns? Yes (describe below) TDS amount 350 ppm From To Description Amount Units	1/20
	Signed JACK ABBAS (E-filed)
	Contact Info (optional)
	Professional Security (Control of the Control of th

		RED	KEMEN'S WE	LL CADA)	Page 1 of 2
STATE OF OREGON	WHEE	50519	WELL I.D. LABEL#	L ₁₃₅₂₂₁	Tuge I or E
WATER SUPPLY WELL REPORT			START CARD #		
(as required by ORS 537.765 & OAR 690-205-0210)	8/12/	2020	ORIGINAL LOG	WHEELER	50499
(1) LAND OWNER First Name CASEY Owner Well I.D. Last Name SAFRENO		(0) I OCA'	FION OF WELL (legal	description)	
Company 4DSD LLC		March 18	LER Twp 11.00 S		0 E E/W WM
Address 138 E AVE SUITE 124 PMB 181 City CHICO State CA Zip 95926	_		SW 1/4 of the NE		
(2) TYPE OF WORK New Well Deepening Convers	sion	Tax Map Num	ber " or	Lot	DMS or DD
★ Alteration (complete 2a & 10) Abandonment(comp	plete 5a)	Lat°	or or		DMS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wid Thrd Casing:		CS	treet address of well L NON ASSIGNED #3	learest address	
Material From To Amt sacks/lbs					
Senl:		(10) STAT	IC WATER LEVEL		
X Rotary Air Rotary Mud Cable Auger Cable Mud			Da		+ SWL(ft)
Reverse Rotary Other		Complete	Vell / Pre-Alteration 7/14/202 d Well 7/27/202		12
(4) PROPOSED USE Domestic Irrigation Community			Flowing Artesian?		
Industrial/ Commercial Livestock Dewatering		WATER BEAF		water was first four	A STATE OF THE PARTY OF THE PAR
Thermal Injection Other	: 	SWL Date	From To E	st Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Att. Depth of Completed Well 435.00 ft.	ach copy)				
BORE HOLE SEAL	sacks/				
Dia From To Material From To Anti 14 0 435 Cement 0 140 66					
Calculated 40		L			
Calculated	-	(11) WELL	LOG Ground Elevat	ion	
How was seal placed: Method A B XC D	E		Material	From	То
Other		NONE		0	435
Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material PEA GRAVBize pea	groval	5	EE WELL LA	6	
Explosives used: Yes Type Amount	graver	TALL	LEE GIAG		
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	E	VVF	RE 3911		
Proposed Amount Actual Amount		100	DETAILS		RECEIVED
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc WI	ld Thed				0 7 0022
Casing Liner Dia + From To Gauge Stl Plstc WI		WHE	E 50499 W45		JAN & I LULL
	1 A I	Test	WELL, FWISHED		
881-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	H	AS 8	RODUCTION WITH		OWRD
		Acces	DOWN TO WE	u_	
Shoe Inside Outside Other Location of shoe(s)		1000	SAFIA		
Temp casing Yes Dia From + To		Lou	- DOSIN		
(7) PERFORATIONS/SCREENS Perforations Method AIR PERF					
Screens Type Material Perf/ Casing/Screen Scm/slot Slot # of	Tele/	Date Starte	17/14/2020 Cor	mpleted <u>7/27/20</u>	20
	pipe size	(unbonded) 1	Water Well Constructor Cert	ification	
Perf Casing 10 180 200 .125 2 720 Perf Casing 10 220 240 .125 2 720		abandonment	the work I performed on the of this well is in complian	nce with Oregon	water supply well
Perf Casing 10 240 260 .125 2 720		construction s	tandards. Materials used and	information report	ed above are true to
Perf Casing 10 280 320 .125 2 720 Perf Casing 10 360 420 .125 3 600		License Num	knowledge and belief.	Date 8/12/2020	
Perf Casing 10 360 420 .125 3 600				0/12/2020	
Pump Bailer Air Flowing Arte	esian	Signed JEI	3 ABBAS (E-filed)		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	_	The second of the second of the second of	ter Well Constructor Certific		Popul angles of Proposition
120 400 2		I accept respo	nsibility for the construction, ed on this well during the const	deepening, alterat	tion, or abandonment
		performed du	ring this time is in complia	nce with Oregon	water supply well
Temperature 59 °F Lab analysis Yes By	2016-201		andards. This report is true to		wiedge and belief.
Water quality concerns? Yes (describe below) TDS amount 289 From To Description Amount C	Jnits	License Numl		Date 8/12/2020	•
			CK ABBAS (E-filed)		
		Contact Info (optional)		

WHEE 5049 WELL I. CARDED WILDING AND A 100	STATE OF OREGON	WHEE	50499 WELL	I.D. LABEL# LT	35221	Page 1 of 2
(1) LAND OWSTR Converted to Company 4105 Company 4105 Let Let Company 4105 Let Le		WHEE		The state of the s		
(1) LAND OWNER Company dBSD, LLC Company		10/16		THE RESERVE AND ADDRESS OF THE PARTY OF THE	044933	
First Name CASETY		10/10	1 OKI	JINAL LOG#		
Company MSDS, LLC	(1) LAND UWINER Owner Well I.D.					
Address 1300 E AVE SUIT 124 PMB 181 (C) CHICO Suite CA 2p 95926 (2) TYPE OF WORK New Yell Deepeeing Conversion State New Yell State St	Company ADSD LLC				- N/2	
Carter Community Communi			County WHEELER Twp	11.00 S N/S	Range 24.00 1	E E/W WM
Casting Despending Despending Conversation Alternation Complete 2 & For Alternati	Cin. CHICO State CA 7in 95926		Sec 23 SW 1/4	of the NE 1/4	Tax Lot _501	
Cashing Date	(2) TVDE OF WORK Well Decrening Con	version	Tax Map Number		Lot	
Cashage	Alteration (complete 2a & 10) Abandanment(c		Lat°'	" or 44.60255556		DMS or DD
Cashage	(2a) PRE-ALTERATION	complete 3a)	Long '	" or <u>-119.80577778</u>		DMS or DD
Casting:	Dia + From To Gauge Stl Plstc Wld Thrd		Street address	of well (Neare	st address	
So and Cable Cab	Casing:		NON ASSIGNED TUBBS	WELL #3		
(3) DRILL METHOD						
Revere Rotary Other Auger Cable Mod Revere Rotary Other Other String Well / Pre-Alteration Date SWL(psi) + SWL(th) SWL(psi) SWL(ps			(10) STATIC WATE	DIEVEL		
Reverse Retainy Other Community Co			(10) STATIC WATE.		SWI (nei) +	SWI (A)
Discrete flotary Other Demestic Margination Community Industrial Commercial Livestock Dewatering Demestic Margination Depth of Completed Well 600.00 n.			Existing Well / Pre-Alte		SWE(psi)	STILLIO
(4) PROPOSED USE	Reverse Rotary Other					12
Industrial Commercial Livestock Dewstering Depth water was first found 1/2.00	(4) PROPOSED USE Domestic X Irrigation Communit	ty	Flow	ing Artesian?	Dry Hole?	
Sport Hole Construction Other Special Standard (Attach topy) (Attach					was first found	112.00
Special Standard (Attach copy) Depth of Completed Well 600.00 ft. SEAL SEAL Seaks Diagonal To Secondary Seaks Diagonal To Secondary Seaks Diagonal To Depth of Completed Well 600.00 ft. SEAL SEAL Seaks Diagonal To			1988aMACCAAN - 10	The state of the s	E - SALES OF THE S	
Depth of Completed Well 600.00 n.			University Alexand	10 EST FI	ow SWL(psi)	· SWL(II)
BORE HOLE Dia From To Material From To Ant Ibs 12 0 49 Bentonite Chiev 0 49 46 (S) 28 49 6,000 Calculated How was seal placed: Method A B C D E	·	(Attach copy)	9/24/2019 112	122 50		12
Dis From To Material From To Amb Is		(25)** (4)				The same of the sa
2			9/26/2019 300	322 200		12
Record R						
How was seal placed: Method A B C D E						
How was seal placed: Method A B C D E Dic Dic Material Size	0 7 000	20				
Soher_POURED DRY Backfill placed from	Calculated		(11) WELL LOG	Ground Elevation	4271.00	
Scher POURED DRY Sackfill placed from ft. to ft. Material Size	How was seal placed: Method A B C D	E	Material		From	То
Filter pack from			CLAY BROWN		0	10
Filter pack from fi. to fi. Material Size Explosives used:	Backfill placed from ft. to ft. Material					
Explosives used:	Filter pack from ft. to ft. Material Size			1		
San ABANDONMENT USING UNHYDRATED BENTONITE Proposed Amount				MTTM		
CLAYSTONE BROWN 108 112 122 133 125 133 125 122 133 125				RITY		
CASING/LINER Casing Liner Dia	the state of the s	HE				
6) CASING/LINER Casing Liner Dia				OKEN		
CLAYSTONE GRAY GREEN 133 285 300 322 349 250 300 322 342 349 250 340	(6) CASING/LINER	1171 1 771 1		TOTAL		
Shoe Inside Outside Other Location of shoe(s) Temp easing Yes Dia From + To 7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Screen Liner Dia From To width length slots pipe size Sereen Liner Dia From To width length slots pipe size Seren Liner Dia From To width length slots pipe size				EN	133	285
Shoe Inside Outside Other Location of shoe(s) Temp easing Yes Dia From + To Perforations Method Screens Type		IM H				
Shoe Inside Outside Other Location of shoe(s) Temp easing Yes Dia From + To PERFORATIONS/SCREENS Perforations Method Screen Syper Screen Syere S		HH			-	
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Temp casing Yes Dia From + To PERFORATIONS/SCREENS Perforations Method Screens Type Material Screens Type Screens	Shoe Inside Outside Other Location of shoe(s)					
Perforations Method Screen Type						
Perforations Method Screen Stype						
Screen Strye	7) PERFORATIONS/SCREENS					
Perf/ Casing/Screen Scrm/slot Slot # of Tele/ Screen Liner Dia From To width length slots pipe size	A CONTRACTOR OF THE CONTRACTOR		Data Startado/24/2010	Cample	tad 0/27/2010	
Screen Liner Dia From To width length slots pipe size		f Tele/	Date Started 9/24/2019	Comple	<u>9/2//2019</u>	
Certify that the work I performed on the construction, deepening, alteration, abandonment of this well is in compliance with Oregon water supply we construction standards. Materials used and information reported above are true the best of my knowledge and belief. License Number 758			The second secon			
construction standards. Materials used and information reported above are true the best of my knowledge and belief. License Number 758 Date 10/16/2019 Date 10/16/2019 Date 10/16/2019 Date 10/16/2019						
the best of my knowledge and belief. License Number 758 Date 10/16/2019 Signed THOMAS PECK (E-filed) Signed THOMAS PECK (E-filed) Temperature 59 °F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS amount 289 ppm From To Description Amount Units Signed THOMAS PECK (E-filed) (bonded) Water Well Constructor Certification JAN 2.7 I accept responsibility for the construction, deepening, alteration, or abandonm work performed on this well during the construction standards. This report is true to the best of my knowledge and belief. License Number 758 Date 10/16/2019 Signed THOMAS PECK (E-filed) (bonded) Water Well Constructor Certification JAN 2.7 I accept responsibility for the construction dates reported above construction standards. This report is true to the best of my knowledge and belief. License Number 758 Date 10/16/2019 Signed THOMAS PECK (E-filed) (bonded) Water Well Constructor Certification JAN 2.7 I accept responsibility for the construction dates reported above construction standards. This report is true to the best of my knowledge and belief. License Number 758 Date 10/16/2019 Signed THOMAS PECK (E-filed) (bonded) Water Well Constructor Certification JAN 2.7 I accept responsibility for the construction dates reported above construction standards. This report is true to the best of my knowledge and belief. License Number 758 Date 10/16/2019 Signed THOMAS PECK (E-filed) (bonded) Water Well Constructor Certification JAN 2.7 I accept responsibility for the construction, deepening, alteration, or abandonm work performed on this well during the construction standards. This report is true to the best of my knowledge and belief. License Number 758 Construction standards. This report is true to the best of my knowledge and belief. License Number 150 Construction standards. This report is true to the best of my knowledge and belief.						
Contact Info (optional) Contact Info (op					mation reported a	bove are true to
Signed THOMAS PECK (E-filed)		_	AND MARKET AND ADDRESS OF THE PARTY OF THE P		10/1/2/2010	
Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 150 300 1 accept responsibility for the construction, deepening, alteration, or abandonm work performed on this well during the construction dates reported above. All w performed during this time is in compliance with Oregon water supply construction standards. This report is true to the best of my knowledge and better the performed during this time is in compliance with Oregon water supply construction standards. This report is true to the best of my knowledge and better the performed during this time is in compliance with Oregon water supply construction standards. This report is true to the best of my knowledge and better the performed during this time is in compliance with Oregon water supply construction standards. This report is true to the best of my knowledge and better the performed during this time is in compliance with Oregon water supply construction standards. This report is true to the best of my knowledge and better the performed during this time is in compliance with Oregon water supply construction standards. This report is true to the best of my knowledge and better the performed during the construction dates reported above. All when the performed during the construction standards. This report is true to the best of my knowledge and better the performed during the construction dates reported above. All when the performed on this well during the construction dates reported above. All when the performed on this well during the construction dates reported above. All when the performed on this well during the construction dates reported above. All when the performed on this well during the construction dates reported above. All when the performed during this time is in compliance with Oregon water and the performed during the construction dates reported above. All when the performed during this time is in compliance with Oregon water and the performed during the construction dates reported above. All whe			License Number 758	Date	10/16/2019	DECENT
Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 150 300 1 Temperature 59 °F Lab analysis Yes By Water quality concerns? From To Description Amount Units Signed JACK ABBAS (E-filed) Contact Info (optional)			Signed THOMAS PECK	(F-filed)	E	ALCEIVE
Temperature 59 °F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS amount 289 ppm From To Description Amount Units Contact Info (optional) Contact Info (optional)						
Temperature 59 °F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS amount 289 ppm From To Description Amount Units Contact Info (optional) Contact Info (optional)		(hr)				JAN 27 20
Temperature 59 °F Lab analysis Yes By	150 300 1		I accept responsibility for t	he construction, deep	ening, alteration,	or availdonnient
Temperature 59 °F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS amount 289 ppm From To Description Amount Units Signed JACK ABBAS (E-filed) Contact Info (optional)			work performed on this well	during the construction	on dates reported	above. All work
Water quality concerns? Yes (describe below) TDS amount 289 ppm From To Description Amount Units Signed JACK ABBAS (E-filed) Contact Info (optional)			construction standards. This	report is true to the h	est of my knowled	da Can best at
From To Description Amount Units Signed JACK ABBAS (E-filed) Contact Info (optional)			Management and American Control of the Control of t			
Signed JACK ABBAS (E-filed) Contact Info (optional)	Water quality concerns? Yes (describe below) TDS amount 289		License Number 1720	Date	10/16/2019	
Contact Info (optional)		CHILD	Signed LACK ABBAS (F	filed)		
	Tron 10 Description Tanous			ALL WALL		
ORIGINAL - WATER RESOURCES DEPARTMENT	Tion 10 Description Timesia.					
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:			Contact Info (optional)			

Amondod 4/2/2020	- CE	MARSHELL HIM) TOLLONGOL
Amended 4/2/2020 STATE OF OREGON	WHEE	Page 1 of 2 WELL I.D. LABEL# L 135286
WATER SUPPLY WELL REPORT	WHEE	START CARD # 1045286
(as required by ORS 537.765 & OAR 690-205-0210)	10/20	/2019 ORIGINAL LOG #
101 PAGE 101	10/20/	ORIGINAL LOG II
(1) LAND OWNER First Name CASEY Owner Well I.D. Last Name SAFRENO		(0) I OCATION OF WELL (logal description)
Company 4SDS LLC	_	(9) LOCATION OF WELL (legal description)
Address 1380 E AVE PMB 181 SUITE 124		County WHEELER Twp 11.00 S N/S Range 24.00 E E/W WM
City CHICO State CA Zip 95926		Sec 13 NW 1/4 of the SE 1/4 Tax Lot 1700 Tax Nov November Lot
(2) TYPE OF WORK New Well Deepening Conve	S EVEL THOUSEN	Tax Map Number Lot Lat " or 44.61200000 DMS or DD Long " or -119.78563889 DMS or DD
Alteration (complete 2a & 10) Abandonment(con	mplete 5a)	Long ° ' "or -119 78563889 DMS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plste Wld Thrd		Street address of well Nearest address
Casing:		NON ASSIGNED INDIAN CREEK #2
Material From To Amt sacks/lbs		
Seal:		(10) STATIC WATER LEVEL
(3) DRILL METHOD		(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
X Rotary Air Rotary Mud Cable Auger Cable Mud		Existing Well / Pre-Alteration
Reverse Rotary Other		Completed Well 10/2/2019 74
(4) PROPOSED USE Domestic X Irrigation Community		Flowing Artesian? Dry Hole?
Industrial/ Commercial Livestock Dewatering		WATER BEARING ZONES Depth water was first found 125.00
Thermal Injection Other		SWL Date From To Est Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (A	ttach copy)	10/1/2019 125 130 45 74
Depth of Completed Well 456.00 ft.		
BORE HOLE SEAL	sacks/	
Día From To Material From To Ai 12 0 38.5 Bentonite Chips 0 38.5 2	mt lbs	
	20	
		(11) WELL LOG Ground Flevation 4451 00
Calculated	7	Ground Elevation - 1151766
How was seal placed: Method A B C D C	E	Material From To CLAY COBBLES 0 10
Backfill placed from ft. to ft. Material		CLAY BROWN 10 32
Filter pack from ft. to ft. Material Size		CLAYSTONE GRAY 32 61
Explosives used: Yes Type Amount		CLAYSTONE BROWN 61 72 CLAYSTONE GRAY 72 94
(5a) ABANDONMENT USING UNHYDRATED BENTONIT		CLAYSTONE GRAY 72 94 CLAYSTONE BROWN 94 117
Proposed Amount Actual Amount		CLAYSTONE GRAY GREEN FRACTURED 117 130
(6) CASING/LINER		CLAYSTONE GRAY GREEN 130 317
Casing Liner Dia + From To Gauge Stl Plstc V		CLAYSTONE GRAY HARD SOFT LAYERS 317 456
● ○ 8 × 1.5 38.5 .250 ● ○ ○	×	
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		IAM 2.7.2022
Shoe Inside Outside Other Location of shoe(s)		JAN # 0 EUE
Temp casing Yes Dia From + To		
(7) PERFORATIONS/SCREENS		- OWRD
Perforations Method		200 G. 11 ST- 200 WARRINGS
Screens Type Material Perf/ Casing/ Screen Scm/slot Slot # of	Tele/	Date Started_10/1/2019
Screen Liner Dia From To width length slots	pipe size	(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 758 Date 10/20/2019
(8) WELL TESTS: Minimum testing time is 1 hour		Signal management of the
Pump Bailer	tesian	Signed THOMAS PECK (E-filed)
Yield gal/min Drawdown Drill stem/Pump depth Duration (hi	r)	(bonded) Water Well Constructor Certification
45 450 1	-	I accept responsibility for the construction, deepening, alteration, or abandonmen 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
Temperature 59 °F Lab analysis Yes By		construction standards. This report is true to the best of my knowledge and belief.
	ppm	License Number 1720 Date 10/20/2019
Water quality concerns? Yes (describe below) TDS amount 345 Description Amount	Units	
		Signed JACK ABBAS (E-filed)
		Contact Info (optional)
ORIGINAL - WATER RES	OURCES D	EPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES	DEPARTM	The state of the s
		13905



1180 SW Lake Road, Redmond, OR

541-923-7554

www.ham-engr.com

January 21, 2022

Mr. Jeffrey Pierceall Water Rights Services Section Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 RECEIVED

OWRD

PERMIT AMENDMENT APPLICATION; PERMIT G-16352; 4DSD, LLC RANCH (NOW OWNERSHIP OF JASPER COUNTY, LLC), WHEELER COUNTY, OREGON

Dear Jeffrey,

You will recall the 4 DSD, LLC Ranch, the time extension that was granted and need to construct new wells (new points of appropriation) to replace existing wells (existing points of appropriation) that were not sealed properly. Three new wells were constructed with seals approved by the OWRD Ground Water Section to replace four of the original wells. Two of the original wells were in close proximity to each other and one new well was constructed to replace both. Accordingly, the permit must be amended to reflect the well (and point of appropriation changes). Enclosed herewith is an Application for Permanent Amendment applicable to the Permit G-16352. This permit authorizes use of groundwater for irrigation on the ranch. The enclosed permit amendment maps show the original wells and the new constructed wells.

Ownership of the ranch has changed. The new owner and applicant is Jasper County, LLC. The water rights on the ranch, including Permit G-16352, have been assigned to Jasper County, LLC. The letter of recording for the assignments is included with the accompany permit amendment application.

Enclosed are the following items:

- 1. Application for Permanent Amendment, signed by applicant;
- 2. Permit amendment maps (3); Drawing No.'s WR1.0, WR2.0 and WR3.0;
- 3. Land Use Information form signed by Wheeler County Planning Director;
- 4. OWRD letter noting recording of assigned water rights;
- 5. Final Order approving time extension for G-163152; and
- 6. Check in the amount of \$2,660.00 for the application fee, payable to the Oregon Water Resources Department.

Please contact me if you have any questions regarding this application at (541) 325-3905, or by email at dnewton@newtonconsultants.com for H. A. McCoy Engineering & Surveying, LLC.

Thank you, Jeffrey for all your assistance with this project and in processing this application.

Sincerely,

H. A. MCCOY ENGINEERING & SURVEYING, LLC

David J. Newton, P.E., C.E.G., C.W.R.E. Principal Engineer and Engineering Geologist

Enclosures

RECEIVED

JAN 27 2022

OWRD

ARTICLES OF ORGANIZATION



E-FILED
Aug 18, 2021
OREGON SECRETARY OF STATE

REGISTRY NUMBER

185997393

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

1. ENTITY NAME

JASPER COUNTY LLC

2. MAILING ADDRESS

2544 NW OVERTON STREET PORTLAND OR 97210 USA

3. PRINCIPAL PLACE OF BUSINESS

2544 NW OVERTON STREET PORTLAND OR 97210 USA

4. NAME & ADDRESS OF REGISTERED AGENT

85680198 - RWPA SERVICE COMPANY, LLC

111 SW COLUMBIA STREET SUITE 700 PORTLAND OR 97201 USA

5. ORGANIZERS

SUSAN ZIMMERMAN

RADLER WHITE PARKS ALEXANDER LLP 111 SW COLUMBIA STREET SUITE 700 PORTLAND OR 97201 USA

6. INDIVIDUALS WITH DIRECT KNOWLEDGE

DANE TOMSETH

2544 NW OVERTON STREET PORTLAND OR 97210 USA

7. DURATION

PERPETUAL

8. MANAGEMENT

This Limited Liability Company will be member-managed by one or more members



9. OPTIONAL PROVISIONS

The company elects to indemnify its members, managers, employees, agents for liability and related expenses under ORS 63.160 to 63.170.

I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, managers, members or agents of the limited liability company on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

ELECTRONIC SIGNATURE

NAME

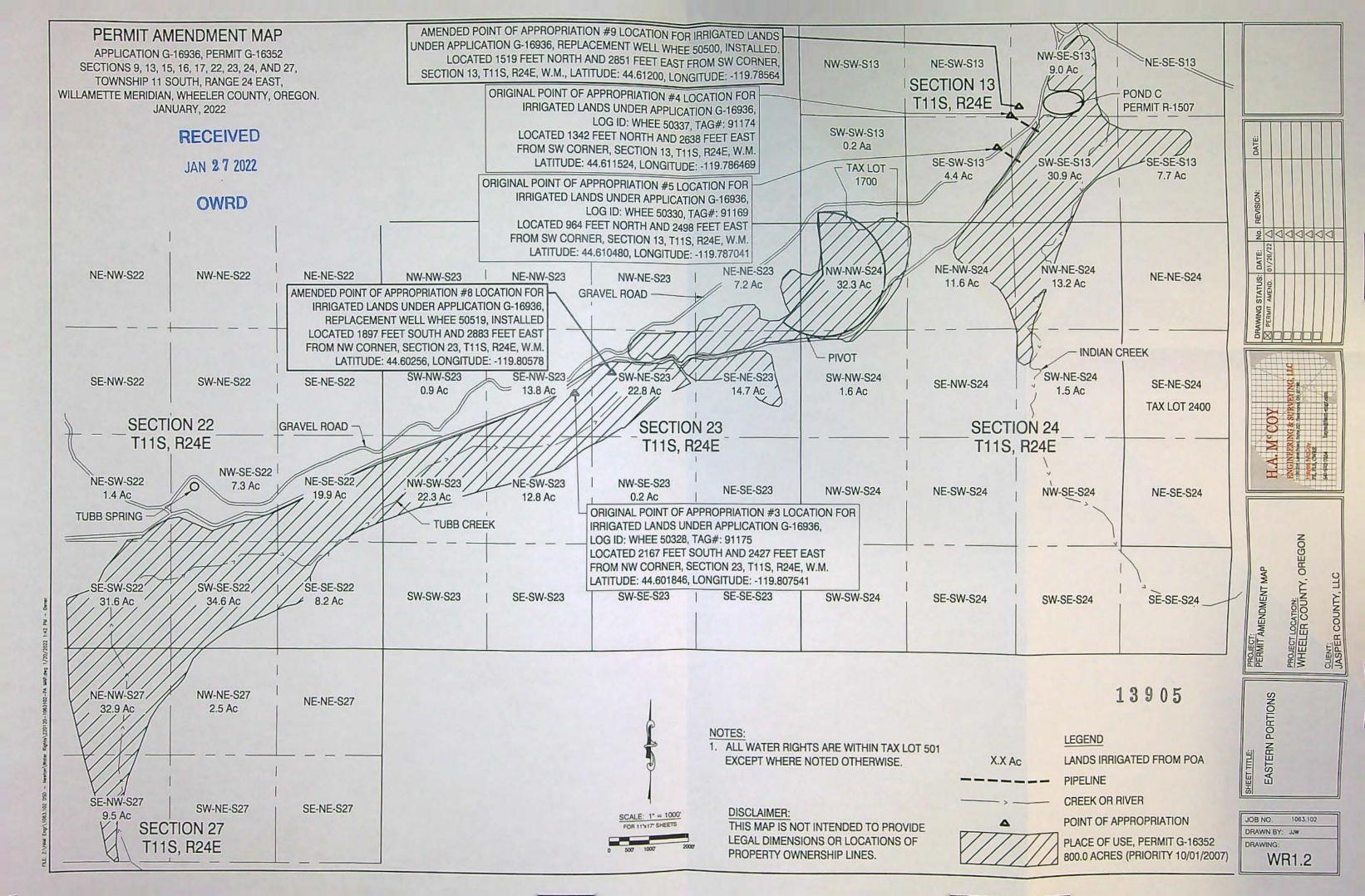
SUSAN ZIMMERMAN

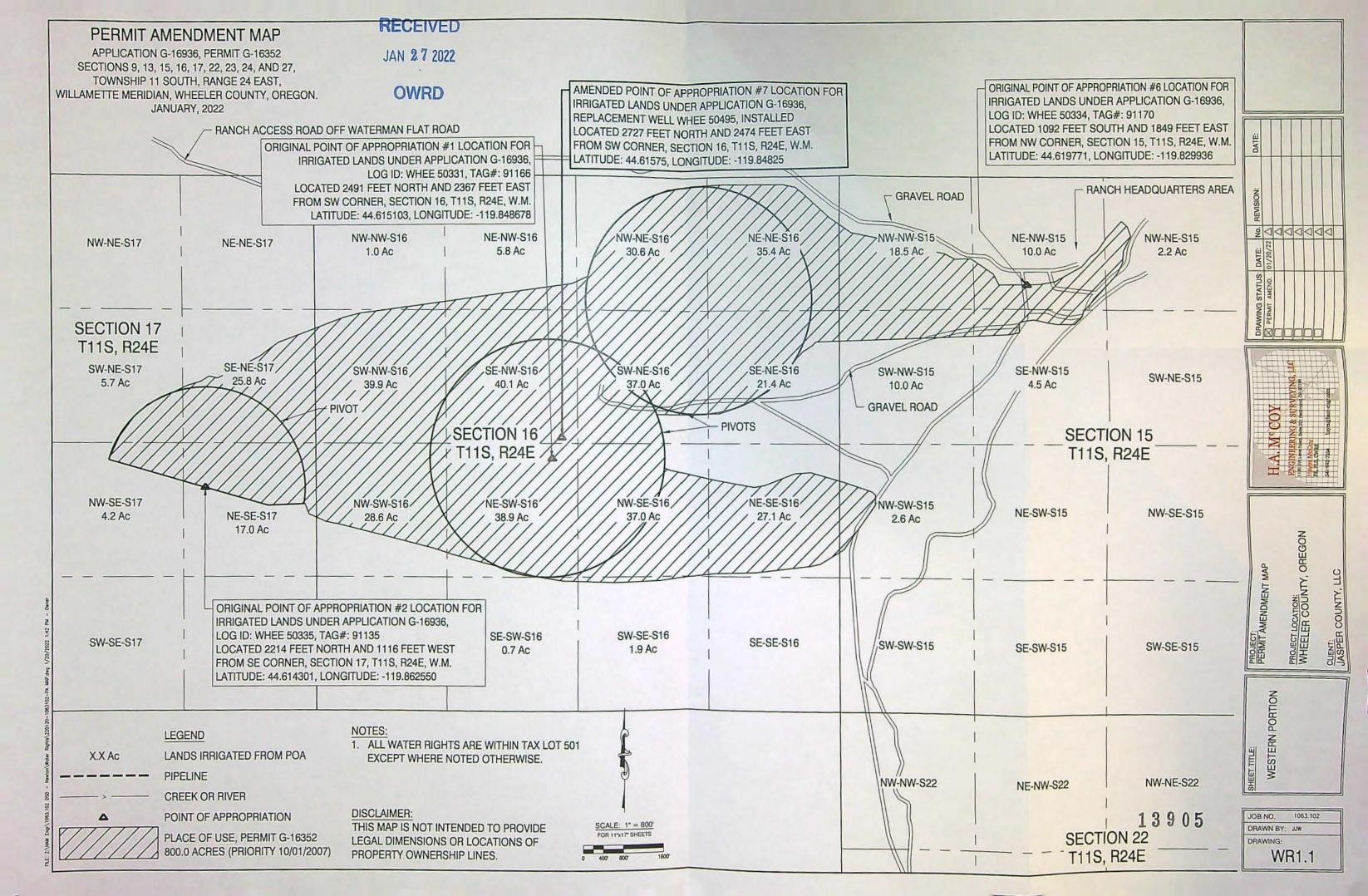
TITLE

ORGANIZER

DATE SIGNED

08-18-2021



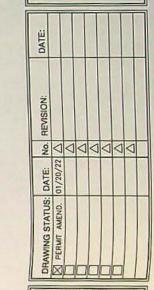


APPLICATION G-16936, PERMIT G-16352 SECTIONS 9, 13, 15, 16, 17, 22, 23, 24, AND 27, RECEIVED TOWNSHIP 11 SOUTH, RANGE 24 EAST, JAN 2 7 2022 JANUARY, 2022 OWRD SEE SHEET WR1.1 SECTION 17 SECTION 16 SECTION 15 **SECTION 13** T11S, R24E T11S, R24E T11S, R24E Z T11S, R24E SEE SHEET WR1.2 SECTION 22 SECTION 23 **SECTION 24** T11S, R24E T11S, R24E T11S, R24E SCALE: 1" = 2000' FOR 11'x17' SHEETS LEGEND LANDS IRRIGATED FROM POA X.X Ac **SECTION 27** PIPELINE T11S, R24E CREEK OR RIVER DISCLAIMER: POINT OF APPROPRIATION THIS MAP IS NOT INTENDED TO PROVIDE PLACE OF USE, PERMIT G-16352 LEGAL DIMENSIONS OR LOCATIONS OF 13905

800.0 ACRES (PRIORITY 10/01/2007) PROPERTY OWNERSHIP LINES.

PERMIT AMENDMENT MAP

WILLAMETTE MERIDIAN, WHEELER COUNTY, OREGON.



PROJECT LOCATION:
WHEELER COUNTY, OREGON PROJECT: PERMIT AMENDMENT MAP

COVER SHEET

JOB NO. 1063,102 DRAWN BY: JJW

DRAWING: WR1.0

Permit Ame	ndment Ap	plication Checklist		1
Checked by	Scott	Date 2/	2	22

App # <u>G-16936</u> Permit # <u>G-16352</u>

Permit Amendments are authorized for changes in POD/POA, APOD/APOA, or POU.

(If OK	, c	heck box to left; if not, fill in the blank)
	1.	Is the name of the Permit Amendment applicant the same as the Water Right Permit holder(s) of record?
		If not, one of the following must be included with the application:
		 a) An affidavit of consent from all Permit holder(s) or the other Permit holders that have not signed the Permit Amendment application form, consenting to the proposed Permit Amendment application; OR,
		b) A completed Request for Assignment form (and statutory fee) to move all (or portion) of the permit into the Permit Amendment applicant's name.
		If not, what is missing?
	2.	Page 1 of application: Are all attachments that have been checked actually included?
		If not, what is missing?
	3.	Are fees included and correct? Fee Paid: 266
		If not, the correct fee would be:, so the amount missing is:
U .	1.	Part 4 of application: Have all the applicants listed at the top of the page signed at the bottom?
/	1	If not, whose signature is missing?
	5.	Are the Permit completion date(s) current? If the Permit completion date has expired, we CANNOT accept the application.
	ó.	If all #1-#5 boxes on this checklist are checked (with no remaining deficiencies identified), accept the application. Put this check sheet in the transfer folder.
		If #1, #2, #3, #4 or #5 on this checklist is deficient, the application CANNOT be accepted.
		It should be returned and the deficiencies listed in the "staff" section at the bottom of Application Page 1, unless the applicant or agent can resolve the deficiencies within 2-3 days.