

Application for Permanent Water Right Transfer



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

Part 1 of 5 – Minimum Requirements Checklist

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

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

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

- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Transfer Application Map Checklist.
- ☒ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at:
http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- ☒ Part 4 – Completed Applicant Information and Signature.
- ☒ Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 2 List them here: 60956 & 60957**

Please include a separate Part 5 for each water right. (See instructions on page 6)

NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

Attachments:

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

(For Staff Use Only)

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

- | | |
|--|--|
| ☐ Application fee not enclosed/insufficient | ☐ Map not included or incomplete |
| ☐ Land Use Form not enclosed or incomplete | ☐ Evidence of Use Form not enclosed or incomplete |
| ☐ Additional signature(s) required | ☐ Part _____ is incomplete |

Other/Explanation _____

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

Part 2 of 5 – Transfer Application Map

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

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

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

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FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)

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1. For irrigation calculate cfs for each water right involved as follows:
 - a. Divide total authorized cfs by total acres in the water right (*for C12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be transferred to get the transfer cfs (*x 45 ac = 0.56 cfs*).
 - b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (*For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
2. Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land**. The fee should be assessed only once for each "on the ground" acre included in the transfer. (*In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0*).

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Toelle Ranch, LLC		PHONE NO. 541-510-9891	ADDITIONAL CONTACT NO.
ADDRESS 72702 Cow Creek Rd		FAX NO.	
CITY Burns	STATE OR	ZIP 97720	E-MAIL
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME Denise A Montgomery, Vice President, All Points Engr & Surveying, Inc		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-3340
ADDRESS PO Box 767		FAX NO.	
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this transfer application, and why:
Propose adding new wells to older water rights to improve flexibility in providing irrigation to the authorized place of use.

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

Check One Box

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

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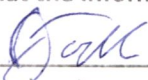
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By my signature below, I confirm that I understand:

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

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


Applicant signature

John Toelle, Member & Owner
Print Name (and Title if applicable)

5-21-24
Date

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

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

Check the following boxes that apply:

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

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

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

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see:

https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
NA				
ADDRESS			FAX NO.	
CITY	STATE	ZIP	E-MAIL	
Describe any special ownership circumstances:				
The confirming Certificate shall be issued in the name of: ☐ Applicant ☐ Receiving Landowner				

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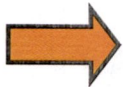
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☐ Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP



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

ENTITY NAME Harney County	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 5 of 5 – Water Right Information

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

CERTIFICATE # 60956

Description of Water Delivery System

System capacity: 0.52 cubic feet per second (cfs) **OR**
 _____ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from the authorized well & conveyed into the existing ditch system that flood irrigates the auth. Place of use.**

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp	Rng	Sec	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#1	☒ Authorized ☐ Proposed	HARN 199	22 S	32.5 E	26	SE	NE	400	100' N & 1680' E from C1/4 cor, sec 26
#1	☐ Authorized ☒ Proposed	HARN 52771	22 S	32.5 E	25	SE	SW	400	430' N & 3440' W from SE cor, Sec 25
#3	☐ Authorized ☒ Proposed	HARN 52770	22 S	32.5 E	25	NW	SE	401	4990' N & 3520' W from SE cor, Sec 25
#4	☐ Authorized ☒ Proposed	HARN 52421	22 S	32.5 E	25	SE	SE	400	750' N & 1200' W from SE cor, Sec 25

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

- | | |
|--|--|
| ☐ Place of Use (POU) | ☐ Supplemental Use to Primary Use (S to P) |
| ☐ Character of Use (USE) | ☐ Point of Appropriation/Well (POA) |
| ☐ Point of Diversion (POD) | ☒ Additional Point of Appropriation (APOA) |
| ☐ Additional Point of Diversion (APOD) | ☐ Substitution (SUB) |
| ☐ Surface Water POD to Ground Water POA (SW/GW) | ☐ Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 60956

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
										APOA	22	S	32.5	E	25	NW	SW	400		0.2	IS	Auth#1, 1, 3,&4	1977
										APOA	22	S	32.5	E	25	SW	SW	400		0.9	IS	Same as above	1977
										APOA	22	S	32.5	E	26	SE	NE	400		0.2	IS	Same as above	1977
										APOA	22	S	32.5	E	26	NE	SE	400		8.7	IS	Same as above	1977
										APOA	22	S	32.5	E	26	SW	SE	400		0.4	IS	Same as above	1977
										APOA	22	S	32.5	E	26	SE	SE	400		31.6	IS	Same as above	1977
TOTAL ACRES:											TOTAL ACRES:						42.0						

Additional remarks: _____.

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by OWRD

10/7/2025

SUPERSEDING

For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: **60957**.

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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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

http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: CWRD Well ID Tag No. L- _____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - rate (gpm) than 1 of wa
See well logs										

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CERTIFICATE # 60957

Description of Water Delivery System

System capacity: **0.785** cubic feet per second (cfs) **OR**

_____ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from the authorized well & conveyed into the existing ditch system that flood irrigates the auth. Place of use.**

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp	Rng	Sec	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#2	☒ Authorized ☐ Proposed	HARN 198	22 S	32.5 E	26	NW	NE	400	1130' S & 910' E from N1/4 cor, Sec 26
#1	☐ Authorized ☒ Proposed	HARN 52771	22 S	32.5 E	25	SE	SW	400	430' N & 3440' W from SE cor, Sec 25
#3	☐ Authorized ☒ Proposed	HARN 52770	22 S	32.5 E	25	NW	SE	401	4990' N & 3520' W from SE cor, Sec 25
#4	☐ Authorized ☒ Proposed	HARN 52421	22 S	32.5 E	25	SE	SE	400	750' N & 1200' W from SE cor, Sec 25

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

- | | |
|--|--|
| ☐ Place of Use (POU) | ☐ Supplemental Use to Primary Use (S to P) |
| ☐ Character of Use (USE) | ☐ Point of Appropriation/Well (POA) |
| ☐ Point of Diversion (POD) | ☒ Additional Point of Appropriation (APOA) |
| ☐ Additional Point of Diversion (APOD) | ☐ Substitution (SUB) |
| ☐ Surface Water POD to Ground Water POA (SW/GW) | ☐ Government Action POD (GOV) |

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 60957

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
										APOA	22	S	32.5	E	25	NW	SW	401		0.2	IS	Auth#2, 1,3,&4	1981
										APOA	22	S	32.5	E	25	SW	SW	401		0.9	IS	Same as above	1981
										APOA	22	S	32.5	E	26	NE	NE	400		2.7	IS	Same as above	1981
										APOA	22	S	32.5	E	26	NW	NE	400		5.5	IS	Same as above	1981
										APOA	22	S	32.5	E	26	SW	NE	400		2.7	IS	Same as above	1981
										APOA	22	S	32.5	E	26	SE	NE	400		10.1	IS	Same as above	1981
										APOA	22	S	32.5	E	26	NE	SE	400		8.7	IS	Same as above	1981
										APOA	22	S	32.5	E	26	SW	SE	400		0.4	IS	Same as above	1981
										APOA	22	S	32.5	E	26	SE	SE	400		31.6	IS	Save as above	1981
TOTAL ACRES:											TOTAL ACRES:						62.8						

Additional remarks: _____.

Received

by OWRD

SUPERSEDING

For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: **60956**.



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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
See well logs										

Received

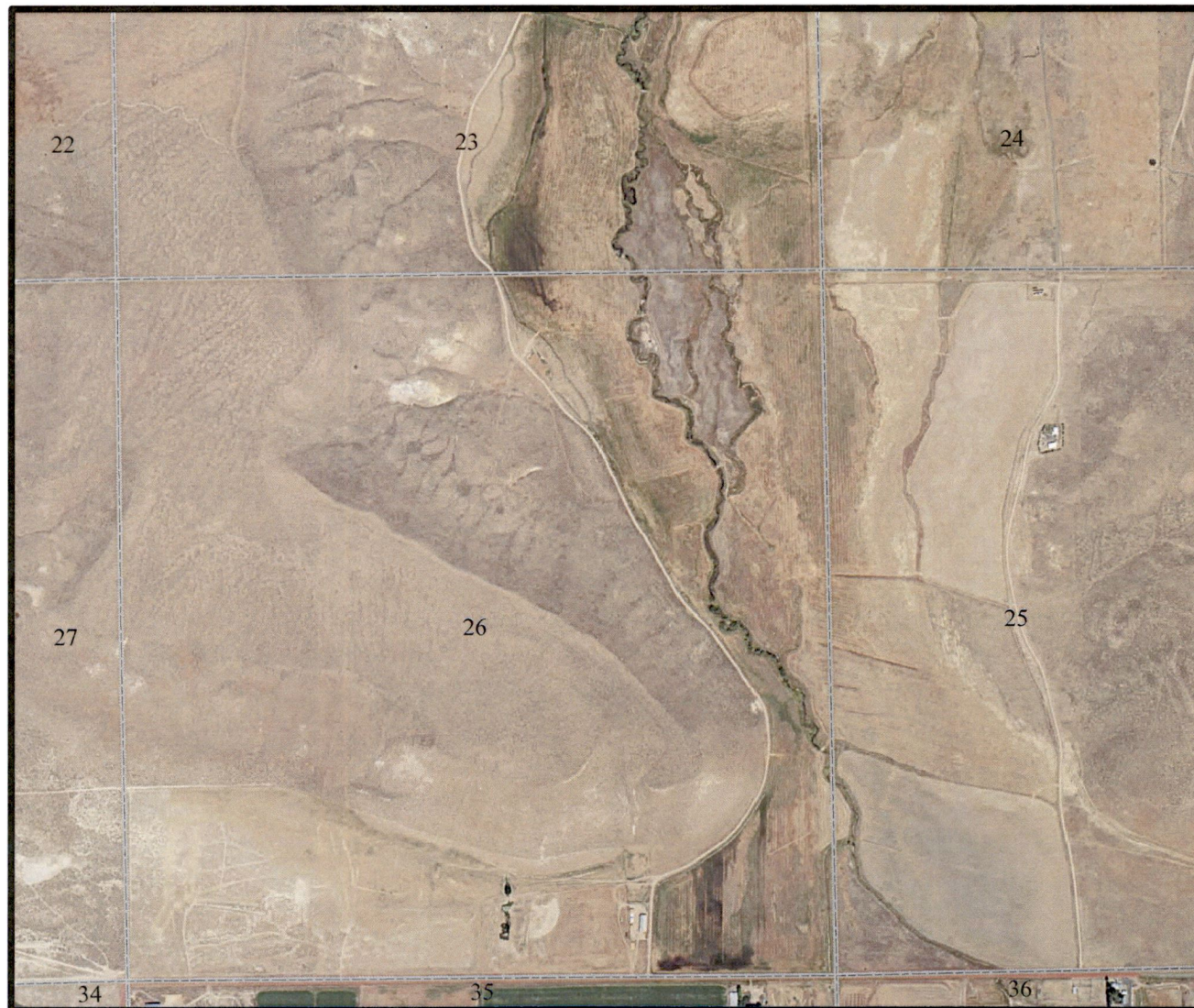
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T22S R 32-1/2E, W.M.

2020 aerial imagery from NRCS Gateway website imported into ArcMap GIS software in statewide Lambert projection.



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Application for Water Right Transfer

Evidence of Use Affidavit



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

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

State of Oregon)
) ss
County of HARNEY

I, JOHN R TOELLE,, TOELLE RANCH, LLC, in my capacity as MEMBER,
mailing address 72702 COW CREEK RD, BURNS, OR 97720
telephone number (541)510-9891, being first duly sworn depose and say:



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

- ☐ Personal observation ☒ Professional expertise

2. I attest that:

☒ Water was used during the previous five years on the **entire** place of use for
Certificate # 60956 & 60957; **OR**

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

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

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

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JUN 07 2024
OWRD

(continues on reverse side)

14469 -

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

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

[Signature]
Signature of Affiant

5-22-24
Date

Signed and sworn to (or affirmed) before me this 22 day of May, 2024.



Kalli Reid Christensen
Notary Public for Oregon

My Commission Expires: March 24, 2026

Supporting Documents	Examples
☐ Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
☒ Copies of receipts from sales of irrigated crops or for expenditures related to use of water	● Power usage records for pumps associated with irrigation use ● Fertilizer or seed bills related to irrigated crops ● Farmers Co-op sales receipt
☐ Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	● District assessment records for water delivered ● Crop reports submitted under a federal loan agreement ● Beneficial use reports from district ● IRS Farm Usage Deduction Report ● Agricultural Stabilization Plan ● CREP Report
☒ Aerial photos containing sufficient detail to establish location and date of photograph	Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added. Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com Received JUN 07 2024 OWRD
☐ Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number



HARNEY ELECTRIC COOPERATIVE INC.
277 Lottery Lane • PO Box 587
Hines, Oregon 97738-0587

OWNED BY THOSE WE SERVE

BURNS OFFICE TELEPHONE (541) 573-2061
OROVADA SERVICE CENTER (775) 272-3336

Paid 8-9-23

DON TOELLE
72702 COW CREEK RD
BURNS OR 97720-9463

7850

- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.

BILLING SUMMARY	Billing Date	08/25/2023
	Billing Forward	0.00
	Current Billing	239.40
	Discount if Paid by	09/15/2023 -47.90
	Amount Due if Paid by	09/15/2023 191.50
	Amount Due After	09/15/2023 239.40

Account #: 123000

Page 1 of 1

Account #	Meter #	R A T E	M U L T	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross* Amount
123000	80044189	SM1	1.0	14958	15258	300	47.88		
	SW	EST		07/26/23	08/25/23				47.88 *
123700	80044210	SM1	1.0	32567	32867	300	47.88		
	SW	EST		07/26/23	08/25/23				47.88 *
190600	80044077	SM1	1.0	18751	19051	300	47.88		
	SW	EST		07/26/23	08/25/23				47.88 *
197800	80043675	SM1	1.0	29705	30005	300	47.88		
	SW	EST		07/26/23	08/25/23				47.88 *
198500	80043600	SM1	1.0	39170	39470	300	47.88		
	SW	EST		07/26/23	08/25/23				47.88 *

Payments Received Since Last Billing \$191.50

Received

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HARNEY ELECTRIC COOPERATIVE INC.
277 Lottery Lane • PO Box 587
Hines, Oregon 97738-0587

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BURNS OFFICE TELEPHONE (541) 573-2061
OROVADA SERVICE CENTER (775) 272-3336

DON TOELLE
72702 COW CREEK RD
BURNS OR 97720-9463

- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.

BILLING SUMMARY	Billing Date	10/25/2023	
	Billing Forward		0.00
	Current Billing		1,858.56
	Discount if Paid by	11/15/2023	-371.71
	Amount Due if Paid by	11/15/2023	1,486.85
	Amount Due After	11/15/2023	1,858.56

Account #: ~~XXXXXX~~

Page 1 of 1

Account #	Meter #	RATE	MULT	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross* Amount
XXXXXX	80044189	SM1	1.0	15558	18718	3160	312.36		
SW	<i>sample</i>	REG		09/25/23	10/15/23				312.36 *
XXXXXX	80044210	SM1	1.0	33167	36630	3463	340.44		
SW	<i>gravel pit</i>	REG		09/25/23	10/15/23				340.44 *
XXXXXX	80044077	SM1	1.0	19351	19258	-93	11.52		
SW		REG		09/25/23	10/15/23	1			11.52 *
XXXXXX	80043675	SM1	1.0	30305	34142	3837	375.00		
SW		REG		09/25/23	10/15/23				375.00 *
XXXXXX	80043600	SM1	1.0	39770	48409	8639	819.24		
SW	<i>indian well</i>	REG		09/25/23	10/15/23	1			819.24 *

Payments Received Since Last Billing \$191.50

Received
JUN 07 2024
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HARNEY ELECTRIC COOPERATIVE INC.
277 Lottery Lane • PO Box 587
Hines, Oregon 97738-0587

OWNED BY THOSE WE SERVE

BURNS OFFICE TELEPHONE (541) 573-2061
OROVADA SERVICE CENTER (775) 272-3336

DON TOELLE
72702 COW CREEK RD
BURNS OR 97720-9463

- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.

BILLING SUMMARY	Billing Date	10/25/2023	
	Billing Forward		0.00
	Current Billing		226.70
	Discount if Paid by	11/15/2023	-45.34
	Amount Due if Paid by	11/15/2023	181.36
	Amount Due After	11/15/2023	226.70

Account #: ~~XXXXXX~~

Page 1 of 1

Account #	Meter #	R A T E	M U L T	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross* Amount
XXXXXX	78546025	SM1	1.0	2892	1275	-1617	41.50		
.5hp Stockwell <i>3 phase</i>		REG		09/25/23	10/15/23				41.50 *
XXXXXX	80043609	SM1	1.0	16763	18547	1784	185.20		
STOCKWELL <i>state</i>		REG		09/25/23	10/15/23	1			185.20 *

Payments Received Since Last Billing \$60.40

Received

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277 Lottery Lane • PO Box 587
Hines, Oregon 97738-0587

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BURNS OFFICE TELEPHONE (541) 573-2061
OROVADA SERVICE CENTER (775) 272-3336

392 1 AV 0.498
DON TOELLE
72702 COW CREEK RD
BURNS OR 97720-9463

5 392
C-2



- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.

BILLING SUMMARY	Billing Date	10/25/2023	
	Billing Forward		0.00
	Current Billing		295.80
	Discount if Paid by	11/15/2023	-59.16
	Amount Due if Paid by	11/15/2023	236.64
	Amount Due After	11/15/2023	295.80

Account #: ~~XXXXXX~~

Page 1 of 1

Account #	Meter #	R A T E	M U L T	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross* Amount
XXXXXX	80044212	R1	1.0	1879	4762	2883	286.80		9.00
DO house		REG		09/15/23	10/15/23	14			295.80 *

Received
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Payments Received Since Last Billing \$148.43

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HARNEY ELECTRIC COOPERATIVE INC.
277 Lottery Lane • PO Box 587
Hines, Oregon 97738-0587

OWNED BY THOSE WE SERVE

BURNS OFFICE TELEPHONE (541) 573-2061
OROVADA SERVICE CENTER (775) 272-3336

*Paid #7854
9/12/23*

116 1 SP 0.660
DON TOELLE
72702 COW CREEK RD
BURNS OR 97720-9463

5 116
C-1



- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.

BILLING SUMMARY

Billing Date	09/05/2023
Billing Forward	0.00
Current Billing	457.77
Discount if Paid by	09/25/2023 -91.55
Amount Due if Paid by	09/25/2023 366.22
Amount Due After	09/25/2023 457.77

Account #: XXXXXXXXXX

Page 1 of 1

Account #	Meter #	R A T E	M U L T	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross* Amount
XXXXXX	84281966	IR1	1.0	214510	220824	6314	457.77		
30 HP		REG		08/01/23	09/01/23	26			457.77 *

Payments Received Since Last Billing \$0.00

Received
JUN 07 2024

OWRD

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HARNEY ELECTRIC COOPERATIVE INC.
277 Lottery Lane • PO Box 587
Hines, Oregon 97738-0587

OWNED BY THOSE WE SERVE

BURNS OFFICE TELEPHONE (541) 573-2061
OROVADA SERVICE CENTER (775) 272-3336

DON TOELLE
72702 COW CREEK RD
BURNS OR 97720-9463

C-1 P-2



- PAYMENTS MUST BE RECEIVED OR POSTMARKED BY THE DUE DATE TO RECEIVE THE 20% DISCOUNT.
- FAILURE TO RECEIVE BILL DOES NOT EXEMPT YOU FROM MONTHLY PAYMENT. IF YOU DON'T GET A BILL, CALL HEC.

BILLING SUMMARY	Billing Date	11/07/2022
	Billing Forward	0.00
	Current Billing	238.43
	Discount if Paid by	11/25/2022 -47.69
	Amount Due if Paid by	11/25/2022 190.74
	Amount Due After	11/25/2022 238.43

Account #: ~~123600~~

Page 1 of 1

Account #	Meter #	R A T E	M U L T	Previous Reading	Present Reading	KWH Used	Energy Charge	Other Charge	Security Light
Service Description				Service From:	Service To:	Demand Used	Demand/HP Charge	Tax Charge	Gross* Amount
123600	84281966	IR1	1.0	199356	202246	2890	238.43		
	30 HP	REG		10/01/22	11/01/22	26			238.43 *

Received
JUN 07 2024
OWRD

Payments Received Since Last Billing \$206.25

Return This Portion With Your Payment

Account #	Meter	Service Description
123600	84281966	30 HP

Amount Due	190.74
Amount Paid	
PAST DUE AFTER	11/25/2022 02

Page 1 of 1

INV # 401

ACCOUNT NAME: DON TOELLE

Harney Electric Cooperative, Inc.
PO Box 587
Hines, Oregon 97738-0587



CHECK HERE FOR ADDRESS CHANGE ☐
WRITE CHANGE ON BACK



14469 -

Simplot Grower Solutions Burns70241 Old Experiment Rd
Burns OR 97720**Invoice****541201008****Bill To:** JOHN TOELLE
PO BOX 1481
HINES, OR 97738**Ship To:** JR TOELLE - COWCREEK RD
COWCREEK RD
BURNS, OR 97720
UNITED STATES**Invoice Date** 11/13/2023
Due Date 11/18/2023 C_Net5Days
Customer ID 63690
Salesperson smithw
Shipping Loc. 1361
Field ID home
Acres 70
Ticket(s) 354120442**Comments:** john deere fixed 4.9% due dec. 2024

Quantity	Description	Unit Price	Total \$
Analysis: 0 - 0 - 0 - 90			
6.600 Tons	SULFUR DISINTEGRATING [T]	525.00 /Tons	3,465.00
5.250 Tons	BLENDING-NUTRITION [T]	4.99 /Tons	26.20
70.000 Acre	IN-HOUSE APPLICATION CARTS DRY-NUTRITION [1A]	8.00 /Acre	560.00

This Invoice is subject to the Terms & Conditions of Sale on the back of this Invoice, which form an integral part of this Invoice and the agreement between Customer and Simplot Grower Solutions.

Customer will pay all amounts under this invoice when due. If Customer fails to pay amounts due under this Invoice on the Net Due Date, Customer will be charged interest at a rate of 2.0% per month (24% per annum) or the maximum rate allowed by law, whichever is less, on any unpaid amounts accruing from the date after the Net Due Date unless otherwise approved by Simplot Grower Solutions in writing.

It is not necessary for this Invoice to be signed to be enforceable against Customer, including without limitation invoices for custom spraying or application. By accepting these goods and/or services, Customer acknowledges and agrees that Customer understands and accepts the terms and conditions of this Invoice, including the Terms & Conditions of Sale.

Sub Total 4,051.20**Amount Due** 4,051.20**Received**
JUN 07 2024
OWRD**Remit To:** Simplot Grower Solutions
1700 SW 4th Street
Ontario OR 97914
Phone #: (541)889-2353Recommendation Was Made By or Provided to the Seller. Yes No
JOHN TOELLE**Invoice** **541201008**
14469 -

HELI-STEENS

FIELD APPLICATION RECORD

GROWER: <i>JR Teeple</i>					DATE: <i>4-24-23</i>	
ADDRESS:					EMAIL:	
CONTACT:						
PHONE:						

FIELD	PRODUCT/ SUPPLIER	DELIVERY TICKET #	APPLICATION lbs. PER ACRE	APPLICATION \$ PER ACRE	ACRES
<i>Flood</i>	<i>SSM 46</i> <i>21-0-0-24 Simp</i>	<i>2775</i>	<i>209</i>	<i>8²⁵/₂</i>	<i>40</i>
WEIGHT TICKET #S	WEIGHT NET	COMMENTS:			
<i>#1</i>	<i>8680</i>				
FIELD TOTAL WEIGHT	<i>8680</i>	DATE APPLIED: <i>4-20-23</i>	FIELD COST: \$		<i>330</i>
FIELD	PRODUCT/ SUPPLIER	DELIVERY TICKET #	APPLICATION lbs. PER ACRE	APPLICATION \$ PER ACRE	ACRES
WEIGHT TICKET #S	WEIGHT NET	Received JUN 07 2024 OWRD			
FIELD TOTAL WEIGHT		DATE APPLIED:	FIELD COST: \$		
		PAGE TOTAL ACRES	<i>40</i>	PAGE TOTAL COST	<i>330</i>
JOHN WITZEL HELI-STEENS 39269 HWY 205 FRENCHGLEN OR 97736 PHONE: OFFICE: (541) 495-2315 JOHN'S CELL: (541) 589-0777 EMAIL: john@heli-steens.com		TOTAL ACRES PREVIOUS PAGE	<i>136</i>	TOTAL COST PREVIOUS PAGE	<i>1190</i>
		TOTAL ACRES	<i>176</i>	TOTAL COST	<i>1520</i>
		DRIVER SIGNATURE	<i>[Signature]</i>		
		14469 -			

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report
are to be filed with the

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

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

State Well No. 225/324c-26ab

State Permit No. _____

(1) OWNER:

Name Donald Toelle

Address st. rt. 2- 192 Cowcreek Road

Burns, Oregon 97720

(2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary ☐ Driven ☐
Cable ☒ Jetted ☐
S ☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

(5) CASING INSTALLED:

Threaded ☐ Welded ☒
12" Diam. from 0 ft. to 60 ft. Gage 0.250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

(6) PERFORATIONS:

Perforated? ☒ Yes ☐ No.

Type of perforator used factory cut

Size of perforations 1/8 in. by 3 in.
912 perforations from 20 ft. to 60 ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? ☐ Yes ☒ No

Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is
lowered below static level

a pump test made? ☒ Yes ☐ No If yes, by whom? Aqua Sales
:650 gal./min. with 106 ft. drawdown after 7 hrs.
" " " "
" " " "

Bailer test gal./min. with ft. drawdown after hrs.
ian flow g.p.m.

Temperature of water 51 Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used cement Grout
Well sealed from land surface to 20 ft.
Diameter of well bore to bottom of seal 16 in.
Diameter of well bore below seal 12 in.
Number of sacks of cement used in well seal 25 sacks
How was cement grout placed? from the bottom upwardly
with pressure grout pump & trieme pipe.

Was a drive shoe used? ☒ Yes ☐ No Plugs _____ Size: location _____ ft.

Did any strata contain unusable water? ☐ Yes ☒ No

Type of water? _____ depth of strata _____

Method of sealing strata off _____

Was well gravel packed? ☒ Yes ☐ No Size of gravel: _____

Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Harney Driller's well number 2
NW ¼ NE ¼ Section 26 T. 225 R. 32½ E W.M.

Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 8 ft.

Static level 10 ft. below land surface. Date 11/18/80

Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG: Diameter of well below casing 12"

Depth drilled 260 ft. Depth of completed well 260 ft.

Formation: Describe color, texture, grain size and structure of materials;
and show thickness and nature of each stratum and aquifer penetrated,
with at least one entry for each change of formation. Report each change in
position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
SOIL	)	18	
GRAVEL (MED)	8	11	
CLAY (BROWN)	11	25	
PUMICE (GRAY)	25	32	24
CLAY (GREEN)	32	84	24
ROCK (SHALE)	84	86	24
CLAY (GREEN)	86	97	17
CLAY (BROWN)	97	118	17
CLAY (GREEN)	118	170	14
CLAYSTONE (GREEN)	170	200	11
CLAYSTONE BLACK	200	220	
CLAYSTONE BLACK & GREEN	220	260	

Inc. **RECEIVED**
NOV 21 1980
WATER RESOURCES DEPT
SALEM, OREGON
Received
JUN 07 2024
OWRD

Work started 10/15 19 80 Completed 11/18 80

Date well drilling machine moved off of well 11/19 80 19

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision.
Materials used and information reported above are true to my
best knowledge and belief.

[Signed] Larry Root Date 11/18, 1980
(Drilling Machine Operator)

Drilling Machine Operator's License No. 1173

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is
true to the best of my knowledge and belief.

Name Larry Root & Son
(Person, firm or corporation) (Type or print)

Address st. rt. 2-14692

[Signed] Larry Root
(Water Well Contractor)

Contractor's License No. 781 Date 11-18, 1980

(USE ADDITIONAL SHEETS IF NECESSARY)

SP-45658-110

14469 -

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the

RECEIVED

WATER WELL REPORT

STATE ENGINEER, SALEM, OREGON 97310

AUG 31 1977

STATE OF OREGON

within 30 days from the date
of well completion.

WATER RESOURCES DEPT.

(Please type or print)

SALEM, OREGON

(Do not write above this line)

State Well No.

22-5/32 E-26

State Permit No.

6-7988

(1) OWNER:

Name Donald Toelle Well # W111
Address Star Rt. 2
192 Cow Crk. Rd. Burns, OR

(2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary ☐ Driven ☐
Cable ☒ Jetted ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

(5) CASING INSTALLED:

Threaded ☐ Welded ☒
12" Diam. from Plus 1 ft. to 25 ft. Gage 250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

(6) PERFORATIONS:

Perforated? ☐ Yes ☒ No.

Type of perforator used _____

Size of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? ☐ Yes ☒ No

Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is
lowered below static level

Was a pump test made? ☒ Yes ☐ No If yes, by whom? Rossberg & son

1: 320 gal./min. with 100 ft. drawdown after 4 hrs.

Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.

Artesian flow _____ g.p.m.

Temperature of water 42 Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used Bentonite
Well sealed from land surface to 18 ft.
Diameter of well bore to bottom of seal 15 in.
Diameter of well bore below seal 12 in.
Number of sacks of cement used in well seal _____ sacks
Number of sacks of bentonite used in well seal _____ sacks
Brand name of bentonite Bulk
Number of pounds of bentonite per 100 gallons
of water _____ lbs./100 gals.
Was a drive shoe used? ☐ Yes ☒ No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? ☐ Yes ☒ No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? ☐ Yes ☒ No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Harney Driller's well number _____
1/4 1/4 Section 26 T. 22 S. R. 32 E. W.M.

Bearing and distance from section or subdivision corner

2570' South
903' West from NE Corner Sec. 26

(11) WATER LEVEL: Completed well.

Depth at which water was first found 16 ft.

Static level 15 ft. below land surface. Date 7/9/77

Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 12"

Depth drilled 350 ft. Depth of completed well 350 ft.

Formation: Describe color, texture, grain size and structure of materials;
and show thickness and nature of each stratum and aquifer penetrated,
with at least one entry for each change of formation. Report each change in
position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Dark Brown Topsoil	0	4	
Light Brown Soil	4	8	
Streaked Brown Clay	8	16	
(Streaks of Pure Gravel)			
Packed Coarse Sand & River Gravel	16	19	
Multi-Colored Clay	19	60	
Solid White Pumice	60	75	
Multi-Colored Claystone	75	95	
Sand Stone	95	100	
Multi-Colored Clay Stone	100	144	
(Streaks of water bearing sandstone)			
Layers of blue & green hard clay	144	157	
Dark green clay	157	193	
(w/ fine black sand)			
Green Clay	193	255	
(w/ small streaks of pumice)			
Green Clay (hard & cracked)	255	310	
Brown Clay w/ fine sand	310	340	
Brown Clay w/ fine sand	340	350	

Work started 6/28 1977 Completed 7/6 1977

Date well drilling machine moved off of well 7/6 1977

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision.
Materials used and information reported above are true to my
best knowledge and belief.

[Signed] Don Toelle Date 8/26, 1977
(Drilling Machine Operator)

Drilling Machine Operator's License No. _____

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is
true to the best of my knowledge and belief.

Name Don Toelle
(Person, firm or corporation) (Type or print)

Address Star Rt. 2 - 192 Cow Crk Rd - Burns, OR

[Signed] Don Toelle
(Water Well Contractor)

Contractor's License No. _____ Date Received, 19____

(USE ADDITIONAL SHEETS IF NECESSARY)

SP#45656-119

14469

JUN 07 2024

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

HARN 52770

WELL I.D. LABEL# L 131958
START CARD # 1041713
ORIGINAL LOG #

Page 1 of 1

1/23/2019

(1) LAND OWNER

Owner Well I.D. _____
First Name JOHN Last Name TOELLE
Company _____
Address 72989 COW CREEK RD BURNS OR 97720
City BURNS State OR Zip 97720

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion
☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal: _____

(3) DRILL METHOD

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

(4) PROPOSED USE

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

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 278.00 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
20	0	58	Cement	0	58	35	S
14	58	278				Calculated	35
						Calculated	

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

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
16 2 58 .250
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	Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
1000		170	1

Temperature 60 °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS amount 197 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 22.00 S N/S Range 32.50 E E/W WM
Sec 25 NE 1/4 of the NW 1/4 Tax Lot 401

Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD

Long _____ " or _____ DMS or DD

☐ Street address of well ☒ Nearest address

72989 COW CREEK RD BURNS OR 97720

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	1/22/2019			53

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES

Depth water was first found 89.00

SWL Date From To Est Flow SWL(psi) + SWL(ft)

1/22/2019	89	278	1000		53

(11) WELL LOG

Ground Elevation _____

Material	From	To
clay	0	10
very hard broken clay/sandstone	10	24
large gravel	24	31
hard cemented gravel conglomerate	31	32
grey claystone	32	40
broken claystone	40	43
grey claystone	43	89
fractured dirty grey clay	89	155
broken brown clay	155	225
multi colored cinder	225	278

Received

JUN 07 2024

OWRD

Date Started 1/9/2019

Completed 1/22/2019

(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 1940

Date 1/23/2019

Signed BENJAMIN FRY (E-filed)

(bonded) Water Well Constructor Certification

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

License Number 1355

Date 1/23/2019

Signed ARTHUR FRY (E-filed)

Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT

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

14469 -

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

HARN 52771

1/30/2019

WELL I.D. LABEL# 131956
START CARD # 1041463
ORIGINAL LOG #

Page 1 of 1

(1) LAND OWNER

Owner Well I.D. _____
First Name JOHN Last Name TOELLE
Company _____
Address P.O. BOX 2
City BURNS State OR Zip 97720

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion
☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Dia + From To Gauge Stl Plstc Wld Thrd
Casing: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Material From To Amt sacks/lbs
Seal: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

(3) DRILL METHOD

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

(4) PROPOSED USE

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

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 407.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
20	0	58	Cement w/5% Bentonite	0	58	42
12	58	407			Calculated	38
					Calculated	

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

☐ Other _____

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
☒ ☐ 16 ☒ 2 58 .250 ☒ ☐ ☒ ☐
Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____

Temp casing ☐ Yes Dia _____ From + _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens		Type	Material				
Perf/ Screen	Casing/ Liner	Dia	From	To	Scr/slot width	Slot length	# of slots

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
500		160	1

Temperature 65 °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS amount 315 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 22.00 S N/S Range 32.50 E E/W WM
Sec 25 SE 1/4 of the SW 1/4 Tax Lot 400
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
☐ Street address of well ☒ Nearest address

72989 COW CREEK RD BURNS OR 97720

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+ SWL(ft)
Existing Well / Pre-Alteration			
Completed Well	1/7/2019		35
Flowing Artesian?	☐	Dry Hole?	☐

WATER BEARING ZONES

Depth water was first found 65.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
1/7/2019	65	407	500		35

(11) WELL LOG

Ground Elevation _____

Material	From	To
topsoil	0	4
gravel	4	43
hard claystone	43	65
pumice	65	87
hard fractured claystone	87	133
broken lava	133	147
hard fractured claystone	147	317
soft broken claystone	317	331
hard broken claystone	331	336
fractured claystone	336	407

Date Started 12/10/2018 Completed 1/7/2019

(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 1940 Date 1/30/2019

Signed BENJAMIN FRY (E-filed)

(bonded) Water Well Constructor Certification

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

License Number 1355 Date 1/30/2019

Signed ARTHUR FRY (E-filed)

Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT

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

14469 -

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

HARN 52421

9/8/2015

WELL I.D. LABEL# L

START CARD #

ORIGINAL LOG #

Page 1 of 1

118659

1027061

(1) LAND OWNER

Owner Well I.D. 14" IRR
First Name JOHN Last Name TOELLE
Company
Address PO BOX 2
City BURNS State OR Zip 97720

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion
☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal: Material From To Amt sacks/lbs

(3) DRILL METHOD

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

(4) PROPOSED USE

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

(5) BORE HOLE CONSTRUCTION

Special Standard (Attach copy)

Depth of Completed Well 485.00 ft.

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	
18	0	20	Bentonite Chips	0	50	50
14	20	485		Calculated	46.5	
				Calculated		

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

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: ☐ Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
☒	☒	14	☒	2	160	.250	☒	☒	☒	☒
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐

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

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
250		465	1

Temperature 60 °F Lab analysis ☐ Yes By

Water quality concerns? ☐ Yes (describe below) TDS amount
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 22.00 S N/S Range 32.50 E E/W WM
Sec 25 SE 1/4 of the SE 1/4 Tax Lot 400
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
☒ Street address of well ☐ Nearest address

72989 COW CREEK ROAD

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	8/10/2015			78

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES

Depth water was first found 78.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
	78	465	250			78

(11) WELL LOG

Ground Elevation

Material	From	To
TOPSOIL - CLAY LOAM	0	1
CLAY - BROWN	1	10
CLAYSTONE - BROWN W/ SMALL GRAVEL	10	35
PUMICE - GRAY	35	40
CLAYSTONE - GREEN	40	185
CLAYSTONE - BROWN & GREEN W/PUMICE	185	195
CLAYSTONE - GRAY HARD	195	215
PUMICE & ASH	215	240
CLAYSTONE - GREEN	240	285
SANDSTONE - GRAY BLUE	285	330
SANDSTONE/CLAYSTONE MIX BLUE	330	400
CLAYSTONE - GRAY	400	485

Received

JUN 07 2024

OWRD

Date Started 8/4/2015

Completed 8/10/2015

(unbonded) Water Well Constructor Certification

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

License Number Date

Signed

(bonded) Water Well Constructor Certification

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

License Number 1424 Date 9/8/2015

Signed TIMOTHY K RILEY (E-filed)

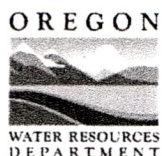
Contact Info (optional) Tim Riley 541-573-5695

ORIGINAL - WATER RESOURCES DEPARTMENT

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

14469 -

Land Use Information Form



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

Received
JUN 07 2024

OWRD

NAME Toelle Ranch, LLC			PHONE 541-510-9891		
MAILING ADDRESS 72702 Cow Creek Rd					
CITY Burns		STATE OR	ZIP 97720	EMAIL	

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts, may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
22S	32.5E	25	NE NW	401	EFRU-1	☒ Diverted	☒ Conveyed	☐ Used	Farming
22S	32.5E	25	SE SW	400	EFRU-1	☒ Diverted	☒ Conveyed	☐ Used	Farming
22S	32.5E	25	SE SE	400	EFRU-1	☒ Diverted	☒ Conveyed	☐ Used	Farming
22S	32.5E	25	NW SW	400	EFRU-1	☐ Diverted	☐ Conveyed	☒ Used	Farming
22S	32.5E	25	SW SW	400	EFRU-1	☐ Diverted	☒ Conveyed	☒ Used	Farming
22S	32.5E	25	W1/2 SW	400	EFRU-1	☐ Diverted	☐ Conveyed	☒ Used	Farming
22S	32.5E	26	SW SW	401	EFRU-1	☐ Diverted	☐ Conveyed	☒ Used	Farming
22S	32.5E	26	SE NE	400	EFRU-1	☒ Diverted	☒ Conveyed	☒ Used	Farming
22S	32.5E	26	NE SE	400	EFRU-1	☐ Diverted	☒ Conveyed	☒ Used	Farming
22S	32.5E	26	SW SE	400	EFRU-1	☐ Diverted	☐ Conveyed	☒ Used	Farming
22S	32.5E	26	SE SE	400	EFRU-1	☐ Diverted	☒ Conveyed	☒ Used	Farming
22S	32.5E	26	SW NE	400	EFRU-1	☐ Diverted	☒ Conveyed	☒ Used	Farming
22S	32.5E	26	NE1/4	400	EFRU-1	☒ Diverted	☒ Conveyed	☒ Used	Farming
22S	32.5E	26	SE1/4	400	EFRU-1	☐ Diverted	☒ Conveyed	☒ Used	Farming

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

HARNEY

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

B. Description of Proposed Use

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

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

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

Estimated quantity of water needed: 188.4

☐ cubic feet per second

☐ gallons per minute

☒ acre-feet

Intended use of water:

☒ Irrigation

☐ Commercial

☐ Industrial

☐ Domestic for _____ household(s)

☐ Municipal

☐ Quasi-Municipal

☐ Instream

☐ Other _____

Briefly describe:

Propose adding new well to older rights to improve flexibility in providing irrigation to the authorized place of use.

Note to applicant: For new water right applications only, if the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt on the bottom of page 4 and include it with the application filed with the Oregon Water Resources Department.

See Page 4 ➔

Received
JUN 07 2024

OWRD

For Local Government Use Only

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

Please check the appropriate box below and provide the requested information

- ☒ Land uses to be served by the proposed water use(s), including proposed construction, are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): FEFV-1 / HCZO 3.010
- ☐ Land uses to be served by the proposed water use(s), including proposed construction, involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being Pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	Received JUN 07 2024	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
	OWRD	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued

Local governments are invited to express special land use concerns or make recommendations to the Oregon Water Resources Department regarding this proposed use of water in the box below or on a separate sheet.

Name: Brandon McMullen Title: Planning Director

Signature: [Signature] Date: 6/3/2024

Governmental Entity: Harney County Phone: (541) 573-6655

Receipt Acknowledging Request for Land Use Information

Note to Local Government Representative:

Please complete this form and return it to the applicant. **For new water right applications only**, if you are unable to complete this form while the applicant waits, you may complete this receipt and return it to the applicant. If you sign the receipt, you will have 30 days from the date of OWRD's Public Notice of the application to submit the completed Land Use Information Form to Oregon Water Resources Department. Please note while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for all other applications.

Applicant Name: _____

Staff Name: _____ Title: _____

Staff Signature: _____ Date: _____

Governmental Entity: _____ Phone: _____

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

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

Table 2. Description of Changes to Water Right Certificate # 60956

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
										APOA	22	S	32.5	E	25	NW	SW	400		0.2	IS	#1 & #3	1977
										APOA	22	S	32.5	E	25	SW	SW	400		0.9	IS	#1 & #3	1977
										APOA	22	S	32.5	E	26	SE	NE	400		0.2	IS	#1 & #3	1977
										APOA	22	S	32.5	E	26	NE	SE	400		8.7	IS	#1 & #3	1977
										APOA	22	S	32.5	E	26	SW	SE	400		0.4	IS	#1 & #3	1977
										APOA	22	S	32.5	E	26	SE	SE	400		31.6	IS	#1 & #3	1977
TOTAL ACRES:											TOTAL ACRES:						42.0						

Additional remarks:_____.

SUPERSEDED

Received
JUN 07 2024
OWRD

14469 -

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

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

Table 2. Description of Changes to Water Right Certificate # 60957

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.											
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
										APOA	22	S	32.5	E	25	NW	SW	401		0.2	IS	#2 & #3	1981
										APOA	22	S	32.5	E	25	SW	SW	401		0.9	IS	#2 & #3	1981
										APOA	22	S	32.5	E	26	NE	NE	400		2.7	IS	#2 & #3	1981
										APOA	22	S	32.5	E	26	NW	NE	400		5.5	IS	#2 & #3	1981
										APOA	22	S	32.5	E	26	SW	NE	400		2.7	IS	#2 & #3	1981
										APOA	22	S	32.5	E	26	SE	NE	400		10.1	IS	#2 & #3	1981
										APOA	22	S	32.5	E	26	NE	SE	400		8.7	IS	#2 & #3	1981
										APOA	22	S	32.5	E	26	SW	SE	400		0.4	IS	#2 & #3	1981
										APOA	22	S	32.5	E	26	SE	SE	400		31.6	IS	#2 & #3	1981
TOTAL ACRES:												TOTAL ACRES:						62.8					

Additional remarks:_____.

SUPERSEDED

Received
JUN 07 2024

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