



ALL POINTS
ENGINEERING & SURVEYING, INC.
P.O. Box 767
Terrebonne, Oregon 97760
541-548-5833

TRANSMITTAL

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

Date: 12/8/2025
Attention: Transfers

RE: App for Transfer

☒ Prints ☐ Plans ☐ Plat ☐ Specifications.

Copies	No.	Description
1	1	App for Transfer (11 pages letter bond)
1	2	App Map (2 pages bond)
1	3	Well logs (5 pages letter bond)
1	4	Evid of Use w/supporting docs (6 pages letter bond)
1	5	Land Use Form (3 pages letter bond)
1	6	Site photos & aerial imagery (4 pages letter bond)
1	7	Check for \$8385

Signed: _____

Dennis Montgoy

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Salem, OR

14773 -

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 4 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

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

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

- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Transfer Application Map Checklist.
- ☒ Part 3 – Completed Applicant Information and Signature.
- ☒ Part 4 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 2 List them here: C-67721 and 67343**
Please include a separate Part 4 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.

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- ☒ **Application Fee** - payable by check to the Oregon Water Resources Department, the online fee calculator is located:
https://apps.wrd.state.or.us/apps/wr/wr_transfer_calculator/permanent_transfer.aspx

Attachments:

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

(For Staff Use Only)

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

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

Other/Explanation _____

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

Part 2 of 4 – 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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Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Badger Ventures, LLC		PHONE NO. 541-589-2379	ADDITIONAL CONTACT NO.
ADDRESS 77 W Adams St		FAX NO.	
CITY Burns	STATE OR	ZIP 97720	E-MAIL hayfarmer70@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME Scott D Montgomery/All Points Engr & Surveying, Inc		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401
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 to change place of use to fill an abandoned railroad right of way & share additional wells with 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.

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

Applicant signature

Ken Bentz, Member

Print Name (and Title if applicable)

Mark Owens, Member

Print Name (and Title if applicable)

Date

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

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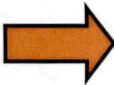
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☐ Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

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 360 N Alvord	
CITY Burns	STATE OR	ZIP 97720

Part 4 of 4 – Water Right Information

Please use a separate Part 4 for each water right being changed. See instructions on page 6, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

CERTIFICATE # 67343

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Description of Water Delivery System

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System capacity: **1.61** cubic feet per second (cfs) **OR**

_____ gallons per minute (gpm)

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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 POA and conveyed to center pivots & handlines that irrigate the place of use.**

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
B1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1233	25 S	33 E	11	NE SW	4300	30' S & 40' W from C1/4 cor, Sec 11
B2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 1229	25 S	33 E	11	SE SW	4400	2580' S & 40' W from Center ¼ cor, Sec 11
H1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		25 S	33 E	12	NE NE	200	1150' S & 85' W from NE cor, Sec 12
H2	<input type="checkbox"/> Authorized	HARN 50931	25 S	33 E	12	NW NE	200	990' S & 2150' W from NE

	<input checked="" type="checkbox"/> Proposed										cor, Sec 12
H3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 1228	25	S	33	E	11	SW	NE	4200	1350' S & 1875' W from NE cor, Sec 11
H4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 1230	25	S	33	E	11	NW	NW	4101	1300' S & 1300' E from NW cor, Sec 11

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

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

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

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

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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 # 67343

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

AUTHORIZED (the “from” or “off” lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.													Proposed Changes (see “CODES” from previous page)	PROPOSED (the “to” or “on” lands) The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	Rng		Sec		¼ ¼		Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng		Sec		¼ ¼		Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
25	S	33	E	11	NE	SW	4300		35.6	IR	B1	1977	POU/APOA	25	S	33	E	11	NE	SW	4300		<u>2.5</u> 35.6	IR	B1,B2,H1 -H4	1977		
25	S	33	E	11	NW	SW	4300		38.4	IR	B1	1977	POU/APOA	25	S	33	E	11	NW	SW	4300		38.4	IR	B1,B2,H1 -H4	1977		
25	S	33	E	11	SW	SW	4300		0.1	IR	B1	1977	POU/APOA	25	S	33	E	11	SW	SW	4300		0.1	IC	B1,B2,H1 -H4	1977		
25	S	33	E	11	NE	SE	4400		24.0	IR	B1	1977	POU/APOA	25	S	33	E	11	NE	SE	4400		24.0	IR	B1,B2,H1 -H4	1977		
25	S	33	E	11	NW	SE	4300		<u>5.0</u> 25.8	IR	B1	1977	POU/APOA	25	S	33	E	11	NW	SE	4300		<u>2.5</u> 25.8	IR	B1,B2,H1 -H4	1977		
TOTAL ACRES:									128.9						TOTAL ACRES:									128.9				

Additional remarks:_____.

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For Place of Use or Character of Use Changes

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

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

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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

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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: OWRD Well ID Tag No. L-_____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - rate (gpm) than 1 of wa
See well logs										

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CERTIFICATE # 67721

Description of Water Delivery System

System capacity: 2.1 cubic feet per second (cfs) OR

_____ gallons per minute (gpm)

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

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
B1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1233	25 S	33 E	11	NE SW	4300	30' S & 40' W from C1/4 cor, Sec 11
B2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 1229	25 S	33 E	11	SE SW	4400	2580' S & 40' W from Center ¼ cor, Sec 11
H1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		25 S	33 E	12	NE NE	200	1150' S & 85' W from NE cor, Sec 12
H2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50931	25 S	33 E	12	NW NE	200	990' S & 2150' W from NE cor, Sec 12
H3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 1228	25 S	33 E	11	SW NE	4200	1350' S & 1875' W from NE cor, Sec 11
H4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 1230	25 S	33 E	11	NW NW	4101	1300' S & 1300' E from NW cor, Sec 11

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

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

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

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

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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 # 67221

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

AUTHORIZED (the “from” or “off” lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see “CODES” from previous page)	PROPOSED (the “to” or “on” lands) The listing as it would appear AFTER PROPOSED CHANGES are made.										
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
25	S	33	E 11	NE SW	4300		2.0	IR	B2	1982	APOA	25	S	33	E 11	NE SW	4300		2.0	IR	B1,B2,H1 – H4	1982
											POU/APOA					NW SW	4300		0.5	IR	B1,B2,H1 – H4	1982
25	S	33	E 11	SW SW	4300		35.7	IR	B2	1982	POU/APOA APOA	25	S	33	E 11	SW SW	4300		<u>1.4</u> 35.7	IR	B1,B2,H1 – H4	1982
25	S	33	E 11	SE SW	4300		<u>1.0</u> 37.6	IR	B2	1982	POU/APOA	25	S	33	E 11	SE SW	4300		37.6	IR	B1,B2,H1 – H4	1982
25	S	33	E 11	NE SE	4300		9.8	IR	B2	1982	POU/APOA APOA	25	S	33	E 11	NE SE	4300		<u>2.8</u> 9.8	IR	B1,B2,H1 – H4	1982
25	S	33	E 11	NW SE	4300		5.9	IR	B2	1982	APOA	25	S	33	E 11	NW SE	4300		5.9	IR	B1,B2,H1 – H4	1982
25	S	33	E 11	SW SE	4300		<u>3.7</u> 35.2	IR	B2	1982	POU/APOA	25	S	33	E 11	SW SE	4300		35.2	IR	B1,B2,H1 – H4	1982
25	S	33	E 11	SE SE	4300		39.2	IR	B2	1982	APOA	25	S	33	E 11	SE SE	4300		39.2	IR	B1,B2,H1 – H4	1982
TOTAL ACRES:						170.1						TOTAL ACRES:						170.1				


Additional remarks:_____.

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For Place of Use or Character of Use Changes

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

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

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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

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

Received by OWRD

DEC 10 2025

Salem, OR

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

STATE ENGINEER, 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)

RECEIVED

OCT 14 1977

State Well No.

State Permit No.

WATER RESOURCES DEPT.

SALEM, OREGON

(1) OWNER:

Name John S. Williams
Address 6144 Field Park, Arizona

(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 0 ft. to 105 ft. Gage 1250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

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? Self

Yield: 1381 gal./min. with 42 ft. drawdown after 5 hrs.

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

Artesian flow g.p.m.

Temperature of water 52 Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Cement

Well sealed from land surface to 22 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 20 sacks

Number of sacks of bentonite used in well seal sacks

Brand name of bentonite

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
SW $\frac{1}{4}$ $\frac{1}{4}$ Section 11 T. 26 S. R. 33 E. W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found ft.
Static level 18 ft. below land surface. Date 5/15/77
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 12

Depth drilled 255 ft. Depth of completed well 251 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
Topsoil	0	1	0
Yellow clay	1	22	0
Blue clay	22	35	30
Blue clay & Fine sand	35	40	30
Blue clay stone	45	60	30
Blue clay	60	80	30
Black clay	80	90	30
Green clay	95	145	30
Black clay	140	170	30
Green clay	170	210	30
Cement gravel, coarse sand blue	210	213	30
Rock Black Basalt	213	227	18
Sandstone	227	251	18
Rock	251	255	18

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DEC-10 2025

Salem, OR

Work started 4/20 19 77 Completed 5/15 19 77

Date well drilling machine moved off of well 5/15 19 77

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] [Signature] Date 6/24, 19 77
(Drilling Machine Operator)

Drilling Machine Operator's License No. 269

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 Rossberg & Son
(Person, firm or corporation) (Type or print)

Address Grane, Oregon

[Signed] [Signature]
(Water Well Contractor)

Contractor's License No. 222 Date 6/24, 19 77

(USE ADDITIONAL SHEETS IF NECESSARY)

SP*45656-11

14773 -

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

DEC 1 1978

WATER WELL REPORT

WATER RESOURCES DEPARTMENT

SALEM, OREGON

within 30 days from the date

of well completion.

WATER RESOURCES DEPT.

SALEM, OREGON

STATE OF OREGON

(Please type or print)

(Do not write above this line)

State Well No.

255/33E-1/dc

State Permit No.

(1) OWNER:

Name JOHN S. WILLIAMSAddress ST RT 2 - HWY 78 Box 28022
BURNS ORE 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 ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):

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

(5) CASING INSTALLED:

Threaded ☐ Welded ☒
12" Diam. from 0 ft. to 153 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 levelWas a pump test made? ☒ Yes ☐ No If yes, by whom? SELFYield: 1300 gal./min. with 9 1/2 ft. drawdown after 18 1/2 hrs.

" " " "

" " " "

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

Artesian flow g.p.m.

Temperature of water 52° Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used BENTONITEWell sealed from land surface to 20 ft.Diameter of well bore to bottom of seal 18 in.Diameter of well bore below seal 12 in.Number of sacks of cement used in well seal 22 sacksHow was cement grout placed? SLURRYWas a drive shoe used? ☒ Yes ☐ No Plugs Size: locationDid 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 numberSW 1/4 SE 1/4 Section 11 T. 25S R. 33E W.M.

Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 25 ft.Static level 23'6" ft. below land surface. Date AUG 10

Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 12Depth drilled 402 ft. Depth of completed well 195 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
TOPSOIL	0	3	
SAND - COARSE BROWN	3	5	
CLAY - BROWN	5	25	
CLAY - GRAY/GREEN & CINDER BLACK	25	30	23'6"
CLAY - BLUE & BLACK CINDER	30	104	"
CLAY - BLACK	104	120	"
CLAY - BLUE	120	160	"
CLAY - BLACK	160	190	"
CLAY - BLACK & MED BAN SAND	190	205	23'6"
CLAY - GREEN	205	220	"
CLAY - BLACK	220	255	"
CLAY - GREEN	255	260	"
BASALT	260	268	"
CLAY - GREEN & MED BAN SAND	268	290	"
BASALT	290	298	"
CLAY - BLACK & CINDER - BLACK	298	335	"
CINDERSTONE - BLACK	335	370	"
BASALT	370	390	"
REDUCED HOLE TO 8" - BASALT	390	402	"

Work started AUG 3 19 78 Completed SEPT 1 19 78Date well drilling machine moved off of well SEPT 1 19 78

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] John W. Rossberg Date 10/20, 19 78
(Drilling Machine Operator)Drilling Machine Operator's License No. 269

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 Rossberg & Son
(Person, firm or corporation) (Type or print)Address 5225 E. Oregon[Signed] John W. Rossberg
(Water Well Contractor)Contractor's License No. 272 Date 10/20, 19 78

Received by OWRD

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

DEC 10 2025

WELL I.D. # L 259168

START CARD # 155545

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

(1) LAND OWNER

Name 4 J Ranch Well Number _____
Address 58477 Hwy 78
City Burns State OR Zip 97720

(2) TYPE OF WORK

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

(3) DRILL METHOD:

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

(4) PROPOSED USE:

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

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 172 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds	
28	0	18	Cement	0	18	1 1/2 yards	
24	18	43					
22	43	172					

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

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 172 ft. to 0 ft. Size of gravel 3/8 pea

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	24	+1	43	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	14	+1.5	172	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☒ Screens Type Wire wrap Material Stainless steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
80	160	125	50%			<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing
Yield gal/min	Drawdown	Drill stem at	Time	
70	2		1 hr.	

Temperature of water 54° Depth Artesian Flow Found _____

Was a water analysis done? ☒ NO ☐ Yes By whom _____

Did any strata contain water not suitable for intended use? ☐ Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Harney Latitude _____ Longitude _____
Township 25 S N or S Range 33 E E or W. WM.
Section 12 NW 1/4 NE 1/4
Tax Lot 500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Cemetery Lane

(10) STATIC WATER LEVEL:

46 ft. below land surface. Date 3-14-03
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
46	165	800	46

(12) WELL LOG:

Material	From	To	SWL
Sandy loam	0	1	
clay brn	1	30	
clay sand brn	30	39	
clay green	39	43	
rock grey	43	75	46
clay sand	75	90	46
sand fine blk	90	130	46
clay sand	130	150	46
sand fine grey	150	165	46
clay grey	165	172	46

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MAR 27 2003

WATER RESOURCES DEPT
SALEM, OREGON

Date started 2-25-03 Completed 3-14-03

(unbonded) Water Well Constructor Certification:

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

WWC Number _____
Signed _____ Date _____

(bonded) Water Well Constructor Certification:

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

WWC Number 1424
Signed Timothy K. Ritz Date 3-18-03

14773 -

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

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

WATER WELL REPORT

RECEIVED

STATE OF OREGON

(Please type or print)

NOV - 4 1975

(Do not write above this line)

RECEIVED

JUN 16 1975

State Well No. 255/33E-11

State Permit No.

STATE ENGINEER
SALEM, OREGON

1230

WATER RESOURCES DEPT.

SALEM, OREGON

(1) OWNER:

Name John Rankin

Address Box 255

Jamestown, Colo. 80455

(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 ☐

CASING INSTALLED:

Threaded ☐ Welded ☒

12" Diam. from 0 ft. to 115 1/2 ft. Gage 250

" Diam. from ft. to ft. Gage

" Diam. from ft. to ft. Gage

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? self

Yield: 1200 gal./min. with 37 ft. drawdown after 3 hrs.

" " "

" " "

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

Artesian flow g.p.m.

Temperature of water 56 Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used cement

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 12 sacks

Number of sacks of bentonite used in well seal sacks

Brand name of bentonite

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

N.E. 1/4 N.W. 1/4 Section 11 T. 25S R. 33E W.M.

Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 30 ft.

Static level 15 ft. below land surface. Date 5/9/75

Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 12

Depth drilled 225 ft. Depth of completed well 225 ft.

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

MATERIAL	From	To	SWL
Top Soil	0	12	0
Clay (yellow)	12	30	0
Clay (blue)	30	75	30
Clay (black)	75	85	30
Clay (grey)	85	90	30
Clay (green)	90	114	30
Sandstone (corse)	114	170	20
Cinderstone (black)	170	220	15
Clay & cinders (green)	220	225	15

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DEC 10 2025

Salem, OR

Work started 4/28 1975 Completed 5/9 1975

Date well drilling machine moved off of well 5/10 1975

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] J. B. R. Date 5/10, 1975.

(Drilling Machine Operator)

Drilling Machine Operator's License No. 269

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 John Rossberg

(Person, firm or corporation)

(Type or print)

Address P.O. Box 787

[Signed] John W. Rossberg

(Water Well Contractor)

Contractor's License No. 272 Date 5/10, 1975

(USE ADDITIONAL SHEETS IF NECESSARY)

SP*45656-119

14773

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, SAM REDDING, in my capacity as FARM MANAGER,
mailing address 77 W ADAMS ST, BURNS, OR 97720
telephone number (541)589-2379, being first duly sworn depose and say:

Received by OWRD
DEC 10 2025
Salem, OR

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 # 67721 & 67343; **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)

(continues on reverse side)

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

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

Sam Ruddy
Signature of Affiant

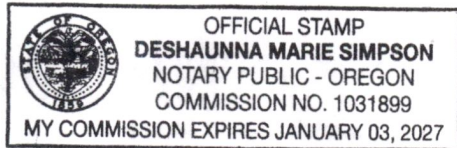
Received by OWRD

DEC 10 2025

OCT. 27, 2025
Date

Salem, OR

Signed and sworn to (or affirmed) before me this 27 day of October, 2025.



Deshaunna Marie Simpson
Notary Public for Oregon

My Commission Expires: 1-3-2027

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input checked="" type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none">• Power usage records for pumps associated with irrigation use• Fertilizer or seed bills related to irrigated crops• Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none">• 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
<input checked="" type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right.</p> <p>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.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terra-server.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number



Ford Motor Company
División de Servicio al Cliente
PO Box 1904
Dearborn, Michigan 48121



771380075412

O/77371/370029/19343



Octubre de 2025

OWENS HAY LLC
77 W ADAMS ST
BURNS, OR 97720-1705

Acción de campo especial 24L03 - Vence el 31 de agosto de 2026

1FT7W2BT8NED91618

En caso de algún inconveniente, nuestro compromiso es ofrecerle servicio y apoyo de alto nivel. Nuestros registros indican que usted es propietario o fue propietario anteriormente de un vehículo potencialmente afectado.

¿Cuál es el problema? Debido a un error administrativo en nuestro sistema de reclamos de garantía, es posible que haya pagado por una reparación de un sensor de partículas (PM) que calificaba para la cobertura de la garantía de emisiones. Consulte la guía de garantía para conocer los límites de cobertura de la garantía de emisiones que se aplican a su vehículo.

¿Qué debe hacer? Si pagó por una reparación de un sensor de partículas (número de pieza de servicio -5L216) que calificaba para la cobertura de la garantía de emisiones:

Sitio web de
reembolsos
Código QR



Visite el sitio web de reembolsos de Ford y solicite el suyo antes de la fecha de vencimiento 31 de agosto de 2026:

FordOwnershipCare.com - PIN n.º: PEJTEQTY

Ingrese la siguiente información en el sitio web que se muestra arriba:

- Su número **PIN**
- Fotos de sus **recibos** de la reparación del sensor de partículas (piezas/mano de obra)
 - Incluya la orden de reparación (RO) detallada del centro de reparación
 - Comuníquese con el centro de reparación según sea necesario para obtener documentación.
- **Fecha** de reparación/compra
- **Número de pieza** instalado
- **Millaje** al momento de la reparación
- **Nombre del taller de reparación o del minorista**
- **\$ Monto** pagado

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**Opción de reembolso
por correo**

Antes de la fecha de vencimiento, 31 de Agosto de 2026, puede enviar solicitudes de reembolso, que incluyan la documentación mencionada anteriormente, a:

*Ford Motor Company
PO Box 6251
Dearborn, Michigan 48121-6251*

Incluya los recibos originales (no fotocopias) y espere 60 días para el procesamiento. Sus recibos originales le serán devueltos después del procesamiento.

**¿Podemos hacer algo
más por usted?**

PROPIETARIOS MINORISTAS: Si tiene dudas o preguntas, comuníquese con nuestro **Centro de Relación con Clientes (CRC) Ford al 1-866-436-7332** y uno de nuestros representantes con gusto lo atenderá. El CRC está abierto de lunes a viernes de 8:30 a.m. a 7:00 p.m. (hora del este). Si es usuario de TTY/TDD, comuníquese con el CRC al número que se menciona, mediante el servicio de retransmisión de telecomunicaciones, para esto, marque el 711.

Si desea comunicarse con nosotros a través de Internet, nuestra dirección es ford.com/support.

PROPIETARIOS DE FLOTAS: Si tiene dudas o preguntas, comuníquese con nuestro **Centro de contacto de Ford Pro al 1-800-34-FLEET**, elija la opción n.º 1 y uno de nuestros representantes con gusto lo atenderá. Si desea comunicarse con nosotros a través de Internet, nuestra dirección es fleet.ford.com.

Los representantes atienden de lunes a viernes, de 7:00 a.m. a 11:00 p.m. y sábado de 7:00 a.m. a 5:00 p.m. (hora del este).

PROPIETARIOS DE CASAS RODANTES: Si tiene dudas o preguntas, comuníquese con nuestro **Centro de asistencia para clientes de motorhome mediante una llamada gratuita al 1-866-906-9811**. Los representantes se encuentran disponibles las 24 horas del día.

Gracias por su atención en este asunto sumamente importante.

División de Servicio al Cliente

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2015 MF 8727
 2014 MF 5611
 2016 milStak SP3150 3755 Hr
 2014 MF 8650 8662 hr
 2006 MF 5455 7512 Hr
 2009 MF 5455 6087 Hr
 2021 Sunflower 9413-15 drill
 2023 MF 2270 X D
 2021 Stakei West 6210
 2012 MF 8650
 Terragator TG 6203 Sayer 3650 Hr
 Terragator 1603T Spreader 9487 Hr
 2023 MFWR 9980 Cutter 1141 Hr
 2022 Golden Eagle HayRake
 2023 Golden Eagle HayRake
 2015 H&S H011 rake
 Kuhn 4504 Power Harrow
~~Sunflower 9413 drill~~
 Sun Flower 1710 Disc
 Brush Hog 3414
 Parma 22' Cultipacker
 New House 16' Flail Mower
 OTC CO A100
 Ripper 3 Shank
 Land Pride 12' land Plane
 2024 Seamless ag Gopher Baiter/Basser

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 Terragator 1603T Spreader 9487 HR
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MF 8727 ✓

MF 8650 ✓

MF 8650 ✓

MF 5611 ✓

MF 5455 ✓

MF 5455 ✓

mini sack SP3150 ✓

Tera gator spreader ✓

Tera gator sprayer ✓

MF 9980 cutter ✓

Stallion west Steamer ✓

MF 2270 HD Baler ✓

Golden Eagle Hay rake ✓

H&S Hay rake ✓

Golden Eagle Hay rake ✓

16' Power Harrow ✓

Ruh 16' drill ✓

Sun Flower 9413 ✓

Sun Flower disc ✓

Gopher general Gopher machine ✓

Brush Hog 3414 ✓

Parma 20' culti packer ✓

New house 16' Flail mower ✓

OTECO

hand plane

Ingersol sand 180 cfm compressor

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Detailed Summary

Agency

Bentz Insurance
122 A Street E
Vale, OR 97918

Phone (541)473-4210
Fax (541)473-4041

Insured

Owens Hay, LLC
Contact: Owens, Mark

APKGE Policy

Agriculture Scheduled & Unscheduled Personal Property

Scheduled

Location #1: 42136 Crane Cemetery Ln, Crane, OR

Non-Equipment Hay

Ded: 1,000 / Limit: 2,100,000
CoL: Basic

Premium
\$7,468.00

#	Year Make Model/Description	Limit (\$)	Premium (\$)
1	Hay in Structures	350,000	2,466.00
3	Peak Season (6/1-12/15)	700,000	1,332.00
4	Hay in Open	350,000	2,383.00
5	Peak Season (6/1 - 12/15)	700,000	1,287.00

Equipment Machinery, Vehicles, Implements (FO)

Ded: 1,000 / Limit: 1,209,795
CoL: Special Including Theft

Premium
\$4,008.00

#	Year Make Model/Description	Limit (\$)	Premium (\$)
2	Massey Ferguson 8727	180,000	576.00
3	Massey Ferguson 5611	30,000	96.00
5	Milstak SP3150	180,000	576.00
6	2014 Massey Ferguson 8650	150,000	480.00
7	2006 Massey Ferguson 5455	25,000	80.00
9	2009 Massey Ferguson 5455	45,000	144.00
22	2021 Sunflower 9413-15	41,700	133.00
23	Terragator TG6203	67,000	214.00
24	Misc Tools & Equipment	70,000	316.00
21	2023 Massey Ferguson 2270XD (FO)	140,300	494.00
45	2021 Staheli West Steamer	190,800	611.00
46	2012 Massey Ferguson 8650 Tractor	89,995	288.00

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The insurance policy information contained herein is produced from data contained in the Client Management System and cannot be used to determine coverage provided by an insurance policy. Please refer to the insurance policy issued by your insurance carrier for coverage information.

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Land Use Information Form

Salem, OR



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

NAME Badger Ventures, LLC			PHONE 541-589-2379		
MAILING ADDRESS 77 W Adams St					
CITY Burns	STATE OR	ZIP 97720	EMAIL Hayfarmer70@gmail.com		

A. Land and Location

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

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
25S	33E	11	NE SW	4300	EFRU-2	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
25S	33E	11	NW SW	4300	EFRU-2	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
25S	33E	11	SW SW	4300	EFRU-2	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
25S	33E	11	SE SW	4300	EFRU-2	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
25S	33E	11	NE SE	4400	EFRU-2	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
25S	33E	11	NW SE	4300	EFRU-2	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
25S	33E	11	SW SE	4300	EFRU-2	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
25S	33E	11	SE SE	4400	EFRU-2	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR

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

Harney

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

B. Description of Proposed Use

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

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

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

Estimated quantity of water needed: 3.71 ☐ cubic feet per second ☐ gallons per minute ☐ acre-feet

Intended use of water: ☒ Irrigation ☐ Commercial ☐ Industrial ☐ Domestic for _____ household(s)
☐ Municipal ☐ Quasi-Municipal ☐ Instream ☐ Other _____

Briefly describe:

Propose to change place of use to fill an abandoned railroad right of way & share additional wells with 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 ➔

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Salem, OR

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): EFUV-2/HCTO 3.020
- ☐ Land uses to be served by the proposed water use(s), including proposed construction, involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being Pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

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

Name: Brandon M. Mullen Title: Planning Director

Signature: [Signature] Date: 9/15/2025

Governmental Entity: Henry County Phone: (531) 573-6655

Receipt Acknowledging Request for Land Use Information

Note to Local Government Representative:

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

Applicant Name: _____

Staff Name: _____ Title: _____

Staff Signature: _____ Date: _____

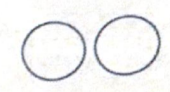
Governmental Entity: _____ Phone: _____

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Division 512 Rulemaking

Harney Basin Critical Groundwater Area Process Interactive Map
Salem, OR



Crane Cemetery Ln

Crane Cemetery Ln

Saddle Butte Rd

Saddle Butte Rd

1,000 ft

Maxar | Sources: Esri; U.S. Department of Commerce, Census Bureau; U.S. Department... Powered by Esri

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