



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: 12/18/2025
Attention: Transfer
RE: App for Transfer

[X] Prints ☐ Plans ☐ Plat ☐ Specifications.

Attached is a Application for Transfer on Certificates C-65932 & 97767 for Andy Root.

Copies	No.	Description
1	1	App for Transfer (11 pages letter bond)
1	2	App map (1 page letter bond)
1	3	Evid of Use w/supporting docs (6 pages letter bond).
1	4	Land Use Fm (3 pages letter bond)
1	5	Well logs (6 pages letter bond)
1	6	Check for \$4290

Signed: *Danise Montoya*

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Application for Permanent Water Right Transfer

Part 1 of 4 – Minimum Requirements Checklist



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

This 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-65932 & 97767**

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.

- ☒ **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: ____/____/____

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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 **OWRD**

APPLICANT/BUSINESS NAME Andy Root/Rattlesnake Creek Land Holdings II, LLC		PHONE NO. 541-573-3615	ADDITIONAL CONTACT NO. 541-589-0107
ADDRESS 524 Hwy 20 N			FAX NO.
CITY Hines	STATE OR	ZIP 97738	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 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 two new wells to add flexibility delivering water to the 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 Times Herald.
- Amendments to the application may only be made in response to the Department's Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).
- Refunds may only be granted upon request and, as set forth in ORS 536.050(4)(a), if the Director determines that a refund of all or part of a fee is appropriate in the interests of fairness to the public or necessary to correct an error of the Department.

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

Applicant signature

Andy Root, Member

Print Name (and Title if applicable)

11/3/25
Date

Applicant signature

Sabrina Maki, Member

Print Name (and Title if applicable)

11/3/25
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 checked="" type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner				

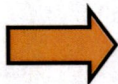
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☐ Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (**Tip: Complete and attach Supplemental Form D.**)

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

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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 # 65932

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Description of Water Delivery System

System capacity: **0.70** 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 and conveyed to sprinklers that irrigate the place of use.**

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-_____)	Twp	Rng	Sec	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 672/50465	23 S	33 E	4	NE	NW	500	92' S & 2030' E from NW cor, Sec 4
#2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 50519/50670	23 S	33 E	4	NW	NW	500	545' S & 1068' E from NW cor, Sec 4
#3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52829	23 S	33 E	4	NW	NE	501	2580' N & 830' E from C1/4 cor, Sec 4
#4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	HARN 52069	23 S	33 E	4	SW	NE	500	210' N & 25' E from C1/4 cor, Sec 4
#5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	UNBUILT	22 S	33 E	33	SE	SE	2005	70' N & 4690' E from SW cor, Sec 33
#6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	UNBUILT	22 S	33 E	33	SE	SE	2005	410' N & 4915' E from SW cor, Sec 33

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

- | | |
|--|--|
| <input 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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Table 2. Description of Changes to Water Right Certificate # 65932

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

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.											
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acre	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priorit y Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acre	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priorit y Date	
											APOA	22	S	33	E	33	NE	SW		8.5	IS	#1- #6	1978
											APOA						SE	SW		36.0	IS	#1- #6	1978
											APOA						NW	SE		2.4	IS	#1- #6	1978
											APOA						SW	SE		8.9	IS	#1- #6	1978
TOTAL ACRES:												TOTAL ACRES:							55.8				

CERTIFICATE # 97767**Description of Water Delivery System**

System capacity: **4.29** 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 wells & conveyed to sprinklers that irrigate the place of use.**

Received**DEC 26 2025****OWRD****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	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 672/50465	23	S	33	E	4	NE	NW	500	92' S & 2030' E from NW cor, Sec 4
#2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 50519/50670	23	S	33	E	4	NW	NW	500	545' S & 1068' E from NW cor, Sec 4
#3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 52829	23	S	33	E	4	NW	NE	501	2580' N & 830' E from C1/4 cor, Sec 4
#4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 52069	23	S	33	E	4	SW	NE	500	210' N & 25' E from C1/4 cor, Sec 4
#5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	UNBUILT	22	S	33	E	33	SE	SE	2005	70' N & 4690' E from SW cor, Sec 33
#6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	UNBUILT	22	S	33	E	33	SE	SE	2005	410' N & 4915' E from SW cor, Sec 33

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

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES is 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.												
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	33	E	33	NE	SW		1.7	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	SW	SW		7.6	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	SE	SW		5.5	IR	#1 to #6	2002	
									APOA	23	S	33	E	4	NE	NW		3	27.3	IR	#1 to #6	2002
									APOA	23	S	33	E	4	NW	NW		4	18.0	IR	#1 to #6	2002
									APOA	23	S	33	E	4	SW	NW		20.0	IR	#1 to #6	2002	
									APOA	23	S	33	E	4	SE	NW		29.2	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	SW	NE		2.3	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	SE	NE		1.9	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	NE	SW		0.5	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	NE	SE		35.2	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	NW	SE		34.0	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	SW	SE		26.8	IR	#1 to #6	2002	
									APOA	22	S	33	E	33	SE	SE		31.1	IR	#1 to #6	2002	
									APOA	23	S	33	E	4	NE	NE		1	31.6	IR	#1 to #6	2002
									APOA					4	NW	NE		2	31.6	IR	#1 to #6	2002
									APOA					4	SW	NE		31.6	IR	#1 to #6	2002	
									APOA					4	SE	NE		31.6	IR	#1 to #6	2002	
Revised 7/28/2025 TOTAL ACRES:									Permanent	ation Form - Page 10 of 11 TOTAL ACRES: 367											TACS 14796-	

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

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										
#5	No	NA	500'	16"	+1 to -500'	0 to -50	-125 to -145	20'	Sand/gravel	
#6	No	NA	500'	16"	+1 to -500'	0 to -50	-125 to -145	20'	Sand/gravel	

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, ANDY ROOT, in my capacity as MEMBER/OWNER,

mailing address 524 HWY 20 N, HINES, OR 97738

telephone number (541)573-3615, being first duly sworn depose and say:

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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 # 65932; **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 # 97767 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)

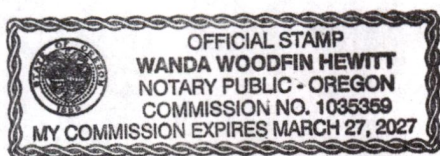
3. The water right was used for: (e.g., crops, pasture, etc.): CROPS

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.

Signature of Affiant

November 3, 2025
Date

Signed and sworn to (or affirmed) before me this 3rd day of November 20 25.



Wanda Woodfin Hewitt
Notary Public for Oregon

My Commission Expires: March 27, 2027

Supporting Documents	Examples
<input checked="" 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 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	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
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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STATE OF OREGON
COUNTY OF HARNEY
CERTIFICATE OF WATER RIGHT

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THIS CERTIFICATE ISSUED TO

RATTLESNAKE CREEK LAND AND CATTLE COMPANY
524 HWY 20 N
HINES OR 97738

confirms the right to the use of water perfected under the terms of Permit G-15481. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the point of diversion from the source. The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-15817

SOURCE OF WATER: FOUR WELLS IN MALHEUR LAKE BASIN

PURPOSE or USE: IRRIGATION OF 367.5 ACRES

MAXIMUM RATE: 4.29 CUBIC FEET PER SECOND (CFS), FURTHER LIMITED AS FOLLOWS:
1.37 CFS FOR IRRIGATION OF 109.3 ACRES - BEING 0.95 CFS FROM WELL 1 AND 1.37 CFS FROM WELL 2, IN ANY COMBINATION NOT TO EXCEED 1.37 CFS; AND 2.92 CFS FOR IRRIGATION OF 258.2 - BEING 1.73 CFS FROM WELL 3 AND 1.19 CFS FROM WELL 4, IN ANY COMBINATION NOT TO EXCEED 2.92 CFS

PERIOD OF USE: MARCH 1 THROUGH OCTOBER 31

DATE OF PRIORITY: AUGUST 12, 2002

The wells are located as follows:

Twp	Rng	Mer	Sec	Q-Q	GLot	Measured Distances
23 S	33 E	WM	4	NE NW	3	WELL 1 - 92 FEET SOUTH AND 2030 FEET EAST FROM NW CORNER, SECTION 4
23 S	33 E	WM	4	NW NW	4	WELL 2 - 545 FEET SOUTH AND 1068 FEET EAST FROM NW CORNER, SECTION 4
23 S	33 E	WM	4	NW NE	2	WELL 3 - 2580 FEET NORTH AND 830 FEET EAST FROM C1/4 CORNER, SECTION 4
23 S	33 E	WM	4	SW NE		WELL 4 - 210 FEET NORTH AND 25 FEET EAST FROM C1/4 CORNER, SECTION 4

The amount of water used for irrigation under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 3.0 acre-feet for each acre irrigated during the irrigation season of each year.

NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484 and ORS 536.075. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 183.484, ORS 536.075 and OAR 137-004-0080, you may petition for judicial review and petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied. In addition, under ORS 537.260 any person with an application, permit or water right certificate subsequent in priority may jointly or severally contest the issuance of the certificate within three months after issuance of the certificate.

A description of the place of use is as follows:

Wells 1 & 2						
Twp	Rng	Mer	Sec	Q-Q	GLot	Acres
22 S	33 E	WM	33	NE SW		1.7
22 S	33 E	WM	33	SW SW		7.6
22 S	33 E	WM	33	SE SW		5.5
23 S	33 E	WM	4	NE NW	3	27.3
23 S	33 E	WM	4	NW NW	4	18.0
23 S	33 E	WM	4	SW NW		20.0
23 S	33 E	WM	4	SE NW		29.2
Total Acres						109.3

Wells 3 & 4						
Twp	Rng	Mer	Sec	Q-Q	GLot	Acres
22 S	33 E	WM	33	SW NE		2.3
22 S	33 E	WM	33	SE NE		1.9
22 S	33 E	WM	33	NE SW		0.5
22 S	33 E	WM	33	NE SE		35.2
22 S	33 E	WM	33	NW SE		34.0
22 S	33 E	WM	33	SW SE		26.8
22 S	33 E	WM	33	SE SE		31.1
23 S	33 E	WM	4	NE NE	1	31.6
23 S	33 E	WM	4	NW NE	2	31.6
23 S	33 E	WM	4	SW NE		31.6
23 S	33 E	WM	4	SE NE		31.6
Total Acres						258.2

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Measurement, recording, and reporting conditions:

- A. The water user shall maintain the meter or other suitable measuring device, as approved by the Director, in good working order, shall keep a complete record of the amount of water used each month, and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the water user to report general water use information, including the place and nature of use of water under the right.
- B. The water user shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this right, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well(s) shall be maintained in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine the water level elevation in the well at all times.

The Director may require water level or pump test results every ten years.

Failure to comply with any of the provisions of this right may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the right.

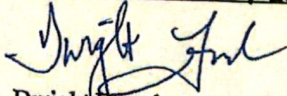
This right is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

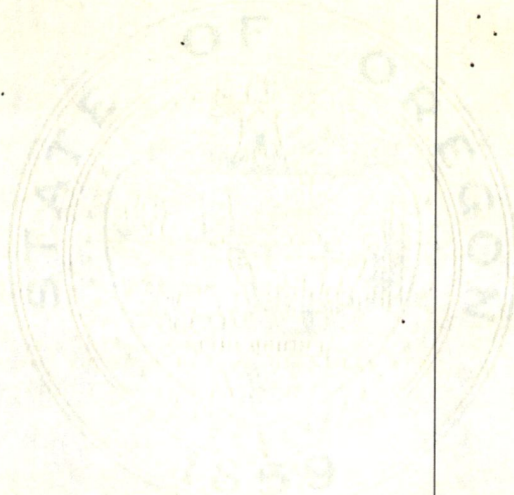
The use of water shall be limited when it interferes with any prior surface or ground water rights.

The right to the use of the water for the above purpose is restricted to beneficial use on the place of use described.

Issued JUN 14 2024



Dwight French
Water Right Services Division Administrator, for
Thomas M. Byler, Director
Oregon Water Resources Department



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Google 2023 imagery

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Image © 2025 Airbus

AN

3000 ft

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Land Use Information Form

OWRD



Sent 27 Oct
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.oregon.gov/OWRD

NAME Andy Root	PHONE 541-573-3615
MAILING ADDRESS 524 Hwy 20 N Hines, OR 97738	

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	33E	33	NE SW	2002 & 2005	EFRU-1	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS/IR
22S	33E	33	SW SW	2002		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
22S	33E	33	SE SW	2002		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS/IR
22S	33E	33	SW NE	2005		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
22S	33E	33	SE NE	2005		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
22S	33E	33	NE SE	2005		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IS
22S	33E	33	SW NE	2005		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
22S	33E	33	NW SE	2005		<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR/IS
22S	33E	33	SW SE	2005		<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR/IS
22S	33E	33	SE SE	2005		<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
23S	33E	4	NE NW	500		<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
23S	33E	4	NW NW	500		<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
23S	33E	4	SW NW	500		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
23S	33E	4	SE NW	500		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
23S	33E	4	NE NE	501		<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
23S	33E	4	NW NE	501		<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
23S	33E	4	SW NE	501		<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	IR
23S	33E	4	SE NE	501		<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

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- ☐ 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: 4.99 ☒ 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 two new wells to add flexibility delivering water to the 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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For Local Government Use Only

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

Please check the appropriate box below and provide the requested information

- ☒ Land uses to be served by the proposed water use(s), including proposed construction, are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): HCZO 3.010 (EPLU-1)
- ☐ 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: Brendon McMillan Title: Donnie Director

Signature: [Signature] Date: 12/17/2025

Governmental Entity: Haney 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: _____

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

JUN 12 1978 (Please type or print)

WATER RESOURCES DEPT.

State Well No. 2333E-4ba

State Permit No. G-8429

(1) OWNER:

Name Donald B. Trunnell
Address Box 278 Aguanga Ca. 92302

(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 1/4" Diam. from 0 ft. to 189 ft. Gage 250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? ☒ Yes ☐ No.
Type of perforator used MILL SLOT
Size of perforations 1/60 in. by 2 1/2 in.
12 Rows } perforations from 29 ft. to 49 ft.
24 cuts } perforations from 69 ft. to 89 ft.
on all } perforations from 109 ft. to 129 ft.
149 ft. to 189 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? ROSE BERG

Yield: 454 gal./min. with 100 ft. drawdown after 6 hrs.

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

Artesian flow g.p.m.

Temperature of water 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 20" in.
Diameter of well bore below seal 20" in.
Number of sacks of cement used in well seal 10 sacks
How was cement grout placed? POURED

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: 3/8"

Gravel placed from 20 ft. to 189 ft. (12 TON)

(10) LOCATION OF WELL:

County HARNEY Driller's well number #1
NE 1/4 NW 1/4 Section 4 T. 23-S. R. 33-E W.M.

Bearing and distance from section or subdivision corner

1940 FT. EAST OF NW CORNER OF SEC. 4
50 FT. SOUTH OF NORTH LINE OF SEC. 4

(11) WATER LEVEL: Completed well.

Depth at which water was first found 12' ft.

Static level 9' ft. below land surface. Date

Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 0

Depth drilled 189 ft. Depth of completed well 189 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
SANDY SOIL	0	4	
BROWN CLAY	4	10	
FINE GRAVEL	10	23	
COARSE GRAVEL	23	30	
GRAY CLAY WITH SAND STREAKS	30	70	
TAN PUMICE	70	77	
PUMICE WITH SAND	77	82	
TAN PUMICE	82	120	
PUMICE WITH SAND	120	126	
TAN PUMICE	126	189	
MAIN WATER STRATAS			
AT <u>22' & 120'</u>			

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Work started 11-13 1969 Completed 11-23 1969

Date well drilling machine moved off of well 11-25 1969

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] Donald B. Trunnell Date 5/22, 1978

(Drilling Machine Operator) DRILLED BY LAND OWNERS

Drilling Machine Operator's License No. DONALD B. TRUNNELL

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 DALE HEARRELL (Type or print)

Address

[Signed] (Water Well Contractor)

Contractor's License No. Date 19

HARN
50465

RECEIVED

OCT 11 1999

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT.
SALEM, OREGONWELL I.D. # L 428482
START CARD # 122216

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

(1) OWNER: Well Number _____
Name Don Wells
Address 10201 SW Lyons Dr
City Culver State OR Zip 97734

(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 500 ft.Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE

SEAL

Diameter From To Material From To Sacks or pounds

10 169 500 existingHow was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☐ Other _____

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

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Bailer	<input type="checkbox"/> Air	Flowing
Yield gal/min	Drawdown	Drill stem at	Artesian
<u>60</u>	<u>3</u>		<u>1 hr.</u>

Temperature of water 60 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 23S N or S Range 33E E or W. WM.
Section 4 NE 1/4 NW 1/4
Tax Lot 2002 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Hwy 20 East

(10) STATIC WATER LEVEL:

8'7" ft. below land surface. Date 9-30-99

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
sand fine (clean out)	165	185	8'7"
clay grey	185	202	
clay brn	202	208	
clay grey	208	250	
clay blue	250	280	
clay grey	280	340	8'7"
clay green	340	442	8'7"
clay brn	442	455	
clay blue	455	462	
clay grey	462	465	8'7"
clay brn	465	472	
clay grey	472	491	
clay brn	491	500	8'7"

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Date started 9-20-99 Completed 9-30-99

(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 14624Signed Timothy K. Rely Date 9-30-99

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

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HARN
SOS19

MAY 11 2000

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)WATER RESOURCES DEPT.
SALEM, OREGONWELL I.D. # L38704
START CARD # W116932

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

(1) OWNER:

Well Number #2Name Don Wells
Address 10201 SW Lyons Dr
City Clatsop State Ore Zip 97134

(2) TYPE OF WORK

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

(3) DRILL METHOD:

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

(4) PROPOSED USE:

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

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 200 ft.Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
16	0	34	Benite	34	0	22 Sacks
12	34	200	-	-	-	-
10	200	205	-	-	-	-

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

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

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12	42	98	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method NO☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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WATER RESOURCES DEPT.
SALEM, OREGON☐ Pump ☐ Bailer ☒ Air ☐ Flowing

Yield gal/min	Drawdown	Drill stem at	Time
100+	200	205	2 1/2 hr.

Temperature of water 61 Depth Artesian Flow Found _____Was a water analysis done? ☒ NO ☐ Yes By whom _____Did any strata contain water not suitable for intended use? ☒ No ☐ Too little☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Haney Latitude _____ Longitude _____
Township 23 S N or S Range 33 E E or W. WM.
Section 4 NW 1/4 SW 1/4
Tax Lot 500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1 Mile South
on Private L. Buchanan Prop.

(10) STATIC WATER LEVEL:

_____ ft. below land surface. Date 5-6-00
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
95	110	100 +	5
180	195	100 +	5

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Top Soil	0	6	-
Brown Clay	6	24	-
Brown Sand	24	34	-
Gravel	34	42	-
Blue & Green			
Clay Stone	42	95	-
Washed Gravel			
& Vesicular			
Brown Basalt	95	110	5
Brown & white			
Clay Stone	110	180	5
Vesicular Brown			
& Black Basalt	180	195	5
Medium Brown			
Basalt	195	205	5

Date started 5-2-00 Completed 5-6-00

(unbonded) Water Well Constructor Certification:

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

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 1521Signed Donald D. Lead Date 5-6-00

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

Received

DEC 26 2025

OWRD

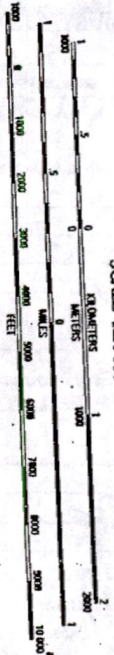
14796 -

WELL LOCATION - 30' N, 30' W FROM THE
E 1/4 COR. SEC. 2, T 27 S, R 30 E, WM

PROVISIONAL MAP
Produced from original
manuscript drawings. Infor-
mation shown as of date of
field check.

THIS MAP COMPLETES WITH NATIONAL MAP ACCURACY STANDARDS
FOR SALE BY U.S. GEOLOGICAL SURVEY
DENVER, COLORADO 80225, OR RESTON, VIRGINIA 22092

NORTH



CONTOUR INTERVAL 5 FEET

Contours are in feet unless by 2000
To convert meters to feet multiply by 3.2808
To convert feet to meters multiply by .3048



QUADRANGLE LOCATION

1	2	3
4	5	6
7	8	9

ADJOINING 15 QUADRANGLE NAMES

- ROAD LEGEND**
- Improved Road
 - Unimproved Road
 - Trail
 - Interstate Route
 - U. S. Route
 - State Route

THE NARROWS, OREGON
PROVISIONAL EDITION 1990
43118-C8-TF-024

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WATER RESOURCES DEPT.
SALEM, OREGON

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WATER RESOURCES DEPT.
SALEM, OREGON

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MAR 1 2000

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

HARN 52069

WELL I.D. # L

START CARD # 195478

DRAFT

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

(1) LAND OWNER
Name R2 RANCH Well Number #13
Address 72023 CRANE - BUCHANAN
City BURNS State OR Zip 97720

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

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☐ No
Depth of Completed Well 285 ft.
Explosives used: ☐ Yes ☐ No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
16	0	20	Bentonite	0	20	45
12	20	285				

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

☒ Other Poured Dry

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

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	12	0	95	230	<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:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used ☐ Inside ☐ Outside ☐ None

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS
☒ Perforations Method Mills knife
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
60	80		50			<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
1150	26		4 HRS

Temperature of water 56.0 Depth Artesian Flow Found _____

Was a water analysis done? ☐ Yes By whom _____

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

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

(9) LOCATION OF WELL (legal description)
County HARNEY
Tax Lot UNKNOWN Lot _____
Township 23S N or S Range 33E E or W WM
Section 4 SW 1/4 NE 1/4
Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 72023 CRANE BUCHANAN

(10) STATIC WATER LEVEL
15 ft. below land surface. Date 5-25-14

_____ ft. below land surface. Date _____

Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
20	195	3000	15

(12) WELL LOG

Ground Elevation _____

Material	From	To	SWL
Soil	0	10	
CLAY - Brown	10	20	
BLACK SAND	20	35	
LARGE GRAVEL	350	90	
BLACK SHALE			
W. 75 Green streaks	90	200	
Grey CLAY	200	285	

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Received

JUL 22 2014

REC 26 2025

SALEM, OR

OWRD

Date Started 5-20-14 Completed 6-30-14

(unbonded) Water Well Constructor Certification

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

WWC Number _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

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

WWC Number 1535 Date 6-30-14

Signed Paul W. [Signature]



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

Application for Well ID Number

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OWRD

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name (please print): Donald E Wells & Patricia L Wells

Mailing Address: 72023 Crane Buchanan Rd

City, State, Zip: Burns, Oregon 97720-9869

Mail Well ID to: ☒ SAME AS ABOVE ☐ In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 22 S (North / South) Range: 33E (East / West) Section: 33 SW 1/4 of the SE 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 2005

County Hamey

GPS Coordinates: N43 36 536 W118 39 434 Elevation 4126Ft

(Original WR map only shows pivot point)

Street Address of Well, City: Hwy 20 E (1/2 mile SE of)

If the property had a different street address in the past: NA

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation

Date Well Constructed (or property built): 9/15/2010 Total Well Depth: 543 FT Casing Diameter: see other info

Owner at time the well was constructed (if known): Self

Well Report # (if known): _____

Other Information: 14" casing 250FT 293 FT 8" no casing; well ID# L 104951

Start Card 205090

Water Right permit # G-15481 "Well 3"

Invoice for well construction attached *

SUBMITTED BY (please print): Donald E Wells

PHONE: 541 490 4545

EMAIL &/or FAX: runningdeerpat@yahoo.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.
Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

* Well was constructed by Ken Smith # 1752^{lic}, but no well construction report submitted.
and well ID# L 104951 attached

For Official Use Only by the Oregon Water Resources Department:

Received Date:

10-3-19

Well Report Number:

HARN 52829

Well Identification #:

L-104951