

**CLAIM OF
BENEFICIAL USE
for Transfer with Multiple
Changes - Groundwater**



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

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A fee of \$230 must accompany this form for any Transfer final orders including a water right with a priority date of July 9, 1987, or later.

Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

A separate form shall be completed for each transfer.

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at:
<https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. **Every item must have a response.** If any requested information does not apply to the claim, insert "NA." **Do not delete or alter any section of this form unless directed by the form.** The Department may require the submittal of additional information from any water user or authorized agent.

"Section 7" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-979-9103.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see:

<https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx>

GENERAL INFORMATION

Type of Authorized Change

This Claim is being submitted for a transfer involving multiple changes.

YES

Mark all that apply:

1. Change in POA(s) or Additional POA(s) 2. Change in Place of Use
3. Change in Character of Use

A separate section will be completed for each type of change authorized in the transfer final order.

1. File Information

APPLICATION #

T-13122

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Buckley Church, Church Family Farms, Inc		PHONE NO. 541-408-6747	ADDITIONAL CONTACT NO.
ADDRESS PO Box 751			
CITY Christmas Valley	STATE OR	ZIP 97641	E-MAIL Buckley.Church@gmail.com

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. **Each transfer holder of record must sign this form.**

3. Transfer holder of record (this may, or may not, be the current property owner)

TRANSFER HOLDER OF RECORD Same as above			
ADDRESS			RECEIVED
CITY	STATE	ZIP	SEP 13 2022

4. Date of Site Inspection:

July 7, 2022

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5. Person(s) interviewed and description of their association with the project:

NAME	DATE	ASSOCIATION WITH THE PROJECT
Buck Church	July 7, 2022	Owner/Permit Holder

6. County:

LAKE

7. If any property described in the place of use of the transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

OWNER OF RECORD NA			
ADDRESS			
CITY	STATE	ZIP	

Add additional tables for owners of record as needed

**SECTION 2
SIGNATURES**

CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.



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CWRE NAME Scott D Montgomery		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401
ADDRESS PO Box 767			
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com

Transfer Holder of Record Signature or Acknowledgement

Each transfer holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	Buckley Church	President, Church Family Farms, Inc	8/20/22

SECTION 3
Changes Made

Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

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Change #1

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Change in POA(s) or Additional POA(s)

Did the transfer order authorize a change in the points of appropriation or additional points of appropriation?

YES **OWRD**

1. New or additional point of appropriation name or number:

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
#4	LAKE 1411		Fort Rock Basin
#5	LAKE 51631	L-73684	Fort Rock Basin
#6	LAKE 50469	L-18101	Fort Rock Basin
Well A	LAKE 687		Fort Rock Basin
#8	LAKE 1369		Fort Rock Basin

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final?

NO

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
#4	0.31 cfs	5.00 cfs	Not available
#5	0.68 cfs	2.16 cfs	Not available
#6	0.39 cfs	1.27 cfs	Not available
Well A	1.54 cfs	2.33 cfs	Not available
#8	0.20 cfs	2.15 cfs	2.23 cfs

System Description

Are there multiple new or additional Points of Appropriation (POA)? YES

POA Name or Number this section describes (only needed if there is more than one):

#4 (LAKE 1411)

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A. POA System Information

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Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Valley	UNK	UNK	Turbine	12"	8"

2. Motor Information

MANUFACTURER	HORSEPOWER
Fairbanks Morse	175

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
175	30	150'	20'	5.00

4. Provide pump calculations:

$$Q = \frac{7.04 \text{ ft}^4/5/\text{hp} \times \text{hp}}{\text{Total head, ft}} = \frac{(7.04)(175)}{246.2} = 5.00 \text{ cfs}$$

$$\text{Total head} = 76.2' + 150' + 20' = 246.2'$$

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not available			

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

The flowmeter found was a Lindsay Zimatic Fieldnetystem that reports to the user's mobile phone app.

B. Groundwater Source Information (Well and Sump)

1. Is the appropriation from a dug well (sump)?

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NO

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POA Name or Number this section describes (only needed if there is more than one):

#5 (LAKE 51631)

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Fairbanks Morse	UNK	418317	Turbine	14"	8"

2. Motor Information

MANUFACTURER	HORSEPOWER
Nidec	125

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
125	40	300'	5'	2.16

4. Provide pump calculations:

$Q = \frac{7.04 \text{ ft}^4/5/\text{hp} \times \text{hp}}{\text{Total head, ft}} = \frac{(7.04)(125)}{246.2} = 2.16 \text{ cfs}$
 Total head = 101.6' + 300' + 5' = 406.6'

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not available			

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

Flowmeter found was a Lindsay Zimmatic Fieldnet system that reports usage to the user's mobile phone app.

B. Groundwater Source Information (Well and Sump)

1. Is the appropriation from a dug well (sump)?

NO

POA Name or Number this section describes (only needed if there is more than one):

#6 (LAKE 50469)

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Fairbanks Morse	UNK	UNK	Turbine	16"	8"

2. Motor Information

MANUFACTURER	HORSEPOWER
US Electric	50

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
50	30	200'	0'	1.27

4. Provide pump calculations:

$Q = 7.04 \text{ ft}^4/5/\text{hp} \times \text{hp} = (7.04)(50) = 1.27 \text{ cfs}$ Total head, ft 276.2 Total head = 76.2' + 200' + 0' = 276.2	RECEIVED SEP 13 2022 OWRD
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5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not available			

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

Flow meter found was a Lindsay Zimmatic Fieldnet system on the center pivot sprinkler that reports usage to the user's mobile phone app.
--

B. Groundwater Source Information (Well and Sump)

1. Is the appropriation from a dug well (sump)?

NO

POA Name or Number this section describes (only needed if there is more than one):

Well A (LAKE 687)

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Wellline	UNK	UNK	Turbine	16"	8"

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2. Motor Information

MANUFACTURER	HORSEPOWER
BMR	100

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3. Theoretical Pump Capacity

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HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
100	40	200'	0'	2.33

4. Provide pump calculations:

$$Q = \frac{7.04 \text{ ft}^4/5/\text{hp} \times \text{hp}}{\text{Total head, ft}} = \frac{(7.04)(100)}{301.6} = 2.33 \text{ cfs}$$

$$\text{Total head} = 101.6 + 200' + 0' = 301.6'$$

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not available			

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

Flow meter found was a Lindsay Zimmatic Fieldnet system on the center pivot sprinkler that reports usage to the user's mobile phone app.

B. Groundwater Source Information (Well and Sump)

1. Is the appropriation from a dug well (sump)?

NO

POA Name or Number this section describes (only needed if there is more than one):

Well 8 (LAKE 1369)

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Wellline	UNK	UNK	Turbine	10"	8"

2. Motor Information

MANUFACTURER	HORSEPOWER
US Motors	60

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
60	30	120'	0'	2.15

4. Provide pump calculations:

$Q = \frac{7.04 \text{ ft}^4/5/\text{hp} \times \text{hp}}{\text{Total head, ft}} = \frac{(7.04)(60)}{196.2} = 2.15 \text{ cfs}$ $\text{Total head} = 76.2 + 120' + 0' = 196.2'$
--

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
290744.8 gal X 1000	290749.8 gal x 1000	5 min	2.23

Reminder: For pump calculations use the reference information at the end of this document.

6. Additional notes or comments related to the system:

B. Groundwater Source Information (Well and Sump)

1. Is the appropriation from a dug well (sump)?

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NO

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Change #2

Change in Place of Use

Did the transfer order authorize a change in the place of use?

YES

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
233.3	233.3

If the new use(s) was not irrigation or nursery:

NEW USE(S)	WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER? (INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)
	NA

2. Variations:

Was the use developed differently from what was authorized by the transfer final order?

NO

If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

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Change #3
Change in Character of Use

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NO

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Did the transfer order authorize a change in character of use?

**SECTION 4
CONDITIONS**

All conditions contained in the transfer final order, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

1. Time Limits:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE AUTHORIZED CHANGES WERE COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	5/4/2021	
COMPLETENESS DATE FROM ORDER (C)	10/1/2022	7/7/2022

* MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

2. Is there an extension final order(s)?

NO

3. Measurement Conditions:

a. Does the transfer final order, or any extension final order require the installation of a meter or other approved measuring device? YES

b. Has a meter been installed? YES

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
#4	Lindsay Field Net	0002ED40	Not Running	UNK	Unk
#5	Lindsay Field Net		Not Running	UNK	Unk
#6	Lindsay Field Net		Not Running	UNK	Unk
Well A	Lindsay Field Net	0002A84	Not Running	UNK	Unk
#8	Lindsay Growsmart	GT18082694	Running	290749.8 galx1000	Unk

4. Recording and reporting conditions

5. Other conditions required by the transfer final order or extension final order:

a. Were there special well construction standards? NO

b. Was submittal of a ground water monitoring plan required? NO

c. Other conditions? NO

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

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**SECTION 5
ATTACHMENTS**

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Provide a list of any additional documents you are attaching to this report:

ATTACHMENT NAME	DESCRIPTION
Well logs	LAKE 1411, 51631, 50469, 687 & 1369
Aerial imagery	USDA/FSA photo from June 2020

SECTION 6
CLAIM OF BENEFICIAL USE MAP

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The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on poly film at a scale of 1" = 1320 feet, 1" = 400 feet, or the original full-size scale of the county assessor map for the location.

The changes that were authorized under the transfer final order must be mapped based on the developed locations; new or additional points of appropriation and place of use.

In cases where the order involved additional points of appropriation, the additional points should be mapped based on their developed locations. The original points of appropriation should be mapped based on the original right of record at the time the transfer final order was issued.

In cases where the order involved changing the place of use for a portion of a water right, the portion of the place of use being changed should be mapped based on the developed location. If the transfer also included portions of the place of use that were not being modified, but were receiving a new or additional point of appropriation, the place of use for those lands should be mapped based on the original right of record at the time the transfer final order was issued.

Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

The irrigations system and place of use were tied to approx.. boundaries using a Trimble GeoXT 6000 GIS data collector . Point data was imported to Trimble Pathfinder software and converted to Statewide Lambert Projection. Point data was compared with recent aerial imagery for accuracy.

Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

(Reminder: Incomplete maps and/or claims may be returned.)

- Map on polyester film
- Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- Township, Range, Section, Donation Land Claims, and Government Lots
- If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the
WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date
of well completion.

Lake 1411

WATER WELL REPORT
STATE OF OREGON
(Please type or print)
(Do not write above this line)

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State Well No. 165685-278
APR 13 1978 State Permit No. _____
OFFICE DEPT.

(1) OWNER:

Name Zane Church
Address Box 56
Silver Lake Ore

(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 20 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 _____ Model No. _____
Type _____
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? _____
Yield: gal./min. with ft. drawdown after hrs.

" " " " " "

"Tested w/air 6000 gpm" " " " " " "

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

Artesian flow g.p.m. to be determined later by pump test.

Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used Cement

Well sealed from land surface to 19 ft.

Diameter of well bore to bottom of seal 15 in.

Diameter of well bore below seal 12 1/4 in.

Number of sacks of cement used in well seal 7 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: _____

Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Lake Driller's well number _____
SE 1/4 NW 1/4 Section 21 T. 16 R. 28 W.M. _____
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 120 ft.
Static level 16' 8" ft. below land surface. Date 3/15/78
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 8 1/2 in.

Depth drilled 150 ft. Depth of completed well 145 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
<u>sandy clay + soil</u>	<u>0</u>	<u>2</u>	
<u>Yellow claystone</u>	<u>2</u>	<u>13</u>	
<u>Blue-gray claystone</u>	<u>13</u>	<u>120</u>	
<u>Blue basalt</u>	<u>120</u>	<u>140</u>	
<u>Basalt Chunks - Red Cement</u>	<u>140</u>	<u>150</u>	

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WATER RESOURCES DEPT.
SALEM, OREGON

Work started 3/13/78 Completed 3/15 1978

Date well drilling machine moved off of well 3/15 1978

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] Bert Jones Date 3/18, 1978
(Drilling Machine Operator)

Drilling Machine Operator's License No. 158

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 Bert Jones (Type or print)
(Person, firm or corporation)

Address 29404 Santiam Hwy Lebanon Ore

[Signed] Bert Jones
(Water Well Contractor)

Contractor's License No. 514 Date 3/15/78, 1978

**STATE OF OREGON
WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

WELL I.D. # L 73684
START CARD # 172255

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

(1) **LAND OWNER** Well Number 1
Name Cargis Mt Cattle Co.
Address PO Box 598
City Christmas Valley State OR Zip 97641

(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 325 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
22	0	75	Cement	45	75	30 sacks
14	75	140	High Alkay	23	45	37 sacks
14	140	325	Gravel	0	23	40 sacks

How was seal placed: Method A B C D E
 Other Pump Using Tremie / Bent 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: 14	115	75	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>NONE</u>			<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 NONE
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>NONE</u>							

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

Yield gal/min	Drawdown	Drill stem at	Time
1500 +	Unknown	320	3 hrs

Pump Bailer Air Artesian
Temperature of water 61° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) **LOCATION OF WELL by legal description:**
County Lake Latitude _____ Longitude _____
Township 27 S N or S Range 16 E E or W. WM.
Section 25 SE 1/4 SE 1/4
Tax Lot 1800 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Oil Dry Lane
Christmas Valley

(10) **STATIC WATER LEVEL:**
10 ft. below land surface. Date 4-28-05
Artesian pressure _____ lb. per square inch Date _____

(11) **WATER BEARING ZONES:**
Depth at which water was first found 290

From	To	Estimated Flow Rate	SWL
290	325	1500 +	10

(12) **WELL LOG:**
Ground Elevation _____

Material	From	To	SWL
Top Soil	0	5	
Top Claystone	5	40	10
Hard Grey Claystone	40	193	"
Hard Green Claystone	193	290	"
Fract. Black lava w/b	290	325	"

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SEP 13 2022
RECEIVED
MAY 05 2005
OWRD
WATER RESOURCES DEPT
SALEM, OREGON

Date started 4-26-05 Completed 4-28-05

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
Signed Jeff DeVilde/Helper WWC Number _____ Date 4-28-05

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
Signed Daniel N. Dauder WWC Number 1577 Date 4-28-05

REVISED

SEP 30 1997

WELL I.D.# 218101

STATE OF OREGON
WATER SUPPLY WELL CONSTRUCTION DEPT.
(as required by ORS 537.765) SALEM, OREGON

lake
50469

(START CARD) # 88470

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

(1) OWNER: Well Number _____
Name COUGAR MT. CATTLE CO.
Address P.O. Box 598
City Christmas Valley State Oregon Zip 97641

(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 420 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
18	6	19	Portland cement	0	19	16 sacks
14	19	100				
8.25	100	420				

How 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:

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing	14	+1	19	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner	NONE				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material		
					Tele/pipe size	Casing	Liner
NONE					<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 _____
1000+ _____ 200 _____ 1 hr.

Temperature of water 50° Depth Artesian Flow Found _____
Was a water analysis done? 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 LAKE Latitude _____ Longitude _____
Township 27 North S Range 16 E or W. WM.
Section 25 NW 1/4 SW 1/4
Tax Lot 2400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) OFF OLD LAKE RD

(10) STATIC WATER LEVEL:
36 ft. below land surface. Date 9-17-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 390

From	To	Estimated Flow Rate	SWL
390	395	1000+	36
397	420	"	36

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Top Soil Sandy Ben	0	2	
Clay Brown	2	26	
Clay gray	26	190	
Sand Black Fine	390	395	36
Cinders Black	395	397	
Rock Black Broken Hard	397	420	36

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SEP 13 2022

OWRD

Date started 9-4-97 Completed 9-17-97

(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 657
Signed Claude Blackman Date 9-17-97

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

Lake 1369

JUL 20 1987

285/16E-1 bedac

JUN 22 1987

WATER RESOURCES DEPT.
 SALEM, OREGON

(1) **OWNER:**
 Name ZONE CHURCH
 Address START
 City SILVER LAKE State OR Zip _____
 Owner's Well Number _____ SALEM, OREGON

(9) **LOCATION OF WELL by legal description:**

County LAKE Latitude _____ Longitude _____
 Township 285 N or S, Range 16E E or W, WM.
 Section 1 SW 1/4 NE 1/4 SW 1/4 NW 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____

(2) **TYPE OF WORK:**

New Well Deepen Recondition Abandon

(3) **DRILL METHOD:**

Rotary Air Rotary Mud Cable Other

(4) **PROPOSED USE:**

Domestic Community Industrial Irrigation
 Thermal Injection Other

BORE HOLE CONSTRUCTION:

Depth of Completed Well _____ ft.

Special Standards date of approval _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
	0 59	Cement	0 59	2.5 sacks
<i>14" hole to 160 ft</i>				
<i>8" hole from 160 ft to 260 ft</i>				

How 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:**

Casing:	Diameter	From To	Gauge	Steel		Plastic		Welded		Threaded	
				From	To	From	To	From	To	From	To
	14	160 to 260	59	50							
Liner:											

Final location of shoe(s) _____

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"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing Artesian
 Yield gal/min 1000 Pumping level _____ Drill stem at 260 Time 1 hr

Temperature of water _____ Depth Artesian Flow Found _____

Was a water analysis done? Yes By whom _____

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

Salty Muddy Odor Colored Other _____

Depth of strata: _____

(10) **STATIC WATER LEVEL:**

25 ft. below land surface. Date May 27 1987
 Artesian pressure _____ lb. per square inch. Date _____

(11) **WELL LOG:**

Ground elevation _____

Material	From	To	WB?	SWL
Brown CLAY	0	2		
BROWN STONE	2	20		
BLUE STONE	20	16.5		
<i>14" hole to 160 ft</i>				
BLACK BASALT	16.5	331	WB	
<i>8" hole to 260</i>				
BROWN LAVA ROCK	331	260		

RECEIVED

SEP 13 2022

OWRD

Date started MAY 23 87 Completed May 27 87

(unbonded) **Water Well Constructor Certification:**

I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed Mel Search Date June 1 87

(bonded) **Water Well Constructor Certification:**

I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed Mel Search Date June 1 87

Company _____ Co. Job No. _____

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

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

WATER WELL REPORT

STATE OF OREGON (Please type or print)

(Do not write above this line)

Lake 689

State Well No. 2105/18E:31.99

State Permit No.

(1) OWNER:

Name: Mervin Morse, Address: PO Box 290, Depart Inn motel, Christmas Valley, Oregon 97638

(2) TYPE OF WORK (check):

New Well [x] Deepening [] Reconditioning [] Abandon []

(3) TYPE OF WELL:

Drilled [x] Jetted [] Bored []

(4) PROPOSED USE (check):

Domestic [] Industrial [] Municipal [] Irrigation [x] Test Well [] Other []

(5) CASING INSTALLED:

14" Diam. from 0 ft. to 100 ft. Gage 200

(6) PERFORATIONS:

Perforated? [] Yes [x] No. Type of perforator used. Size of perforations in. by in.

(7) SCREENS:

Well screen installed? [] Yes [x] No. Manufacturer's Name, Type, Diam., Slot size, Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level. a pump test made? [] Yes [x] No. Yield: gal./min. with ft. drawdown after hrs.

(9) CONSTRUCTION:

Well seal—Material used cement. Well sealed from land surface to 100 ft. Diameter of well bore to bottom of seal 16 1/4 in. Diameter of well bore below seal 10 in. Number of sacks of cement used in well seal 34 sacks. How was cement grout placed? pressure grouted. Was a drive shoe used? [] Yes [x] No. Plugs. Size: location. ft. Did any strata contain unusable water? [] Yes [x] No. Type of water? depth of strata. Method of sealing strata off. Was well gravel packed? [] Yes [x] No. Size of gravel. Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Lake, Driller's well number 95, 7E 1/4 7E 1/4 Section 31 T. 265 R. 18E W.M., Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 420 ft., Static level 18 1/2 ft. below land surface. Date May 1-80, Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 10", Depth drilled 461 ft. Depth of completed well 461 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.

Table with columns: MATERIAL, From, To, SWL. Rows include: Brown sand, Diatomaceous earth, Brown clay, dark green clay, black sand, Green clay, White pumice gravel w/b, Green clay, White pumice gravel w/b, Green clay.

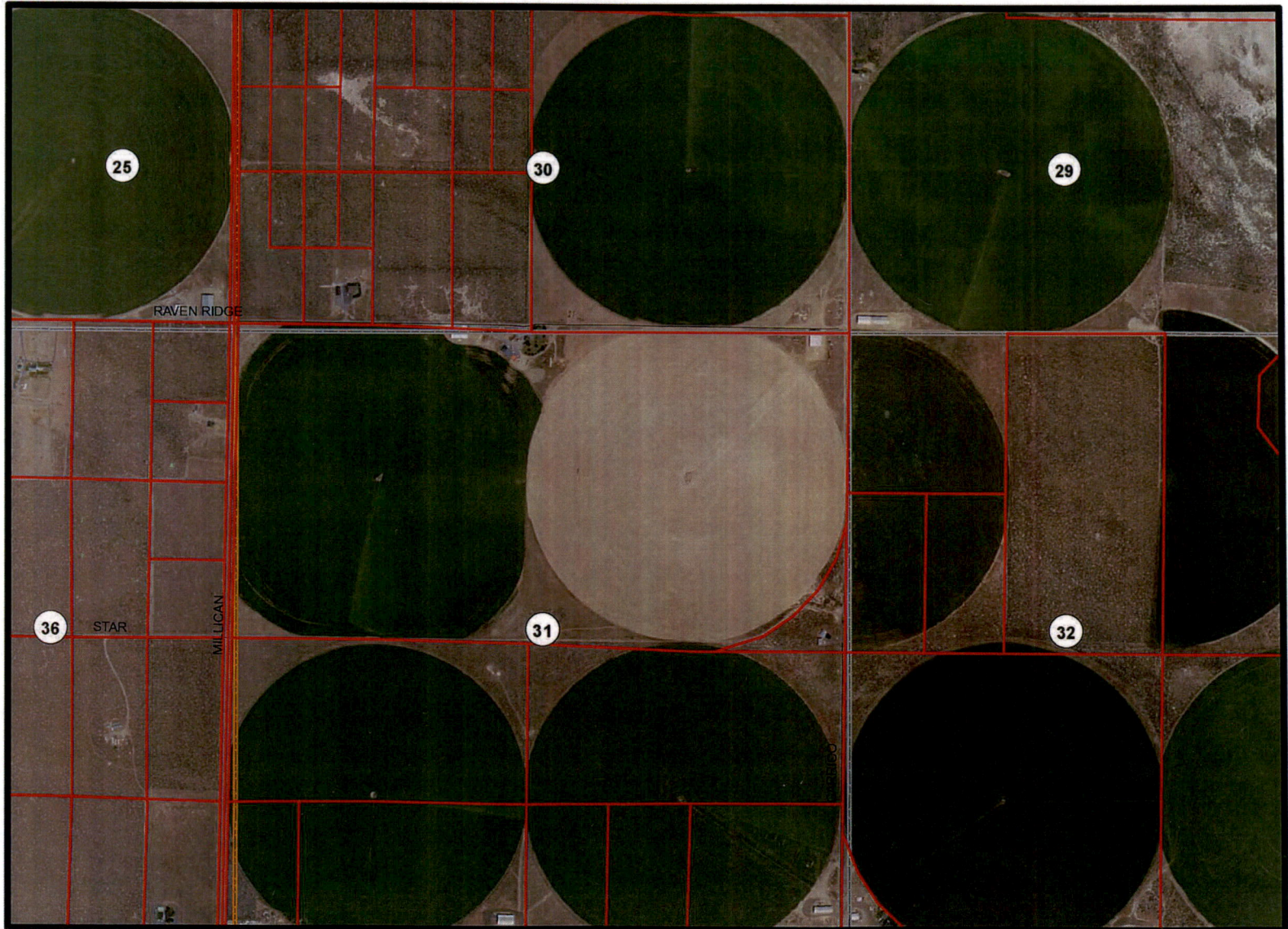
RECEIVED stamps: SEP 13 2022, OCT 24 1980, WATER RESOURCES DEPT SALEM, OREGON

Work started apr 30 1980 Completed May 1 1980, Date well drilling machine moved off of well May 15 1980

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] Stan Adams, Date May 5, 1980, Drilling Machine Operator's License No. 1302

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: Lyle Adams, Address: 413 Box 122X Hillsboro, Ore. 97122, [Signed] Lyle Adams, Contractor's License No. 690, Date May 2, 1980

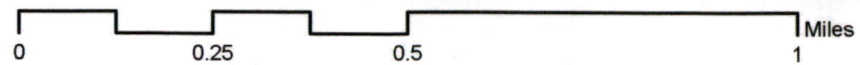
T 26 S, R 18 E, W.M.



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SEP 13 2022

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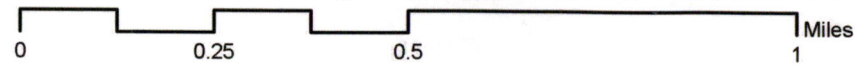


2020 aerial imagery downloaded from NRCS Gateway website and imported into ESRI ArcMap GIS software with Oregon Statewide Lambert Projection

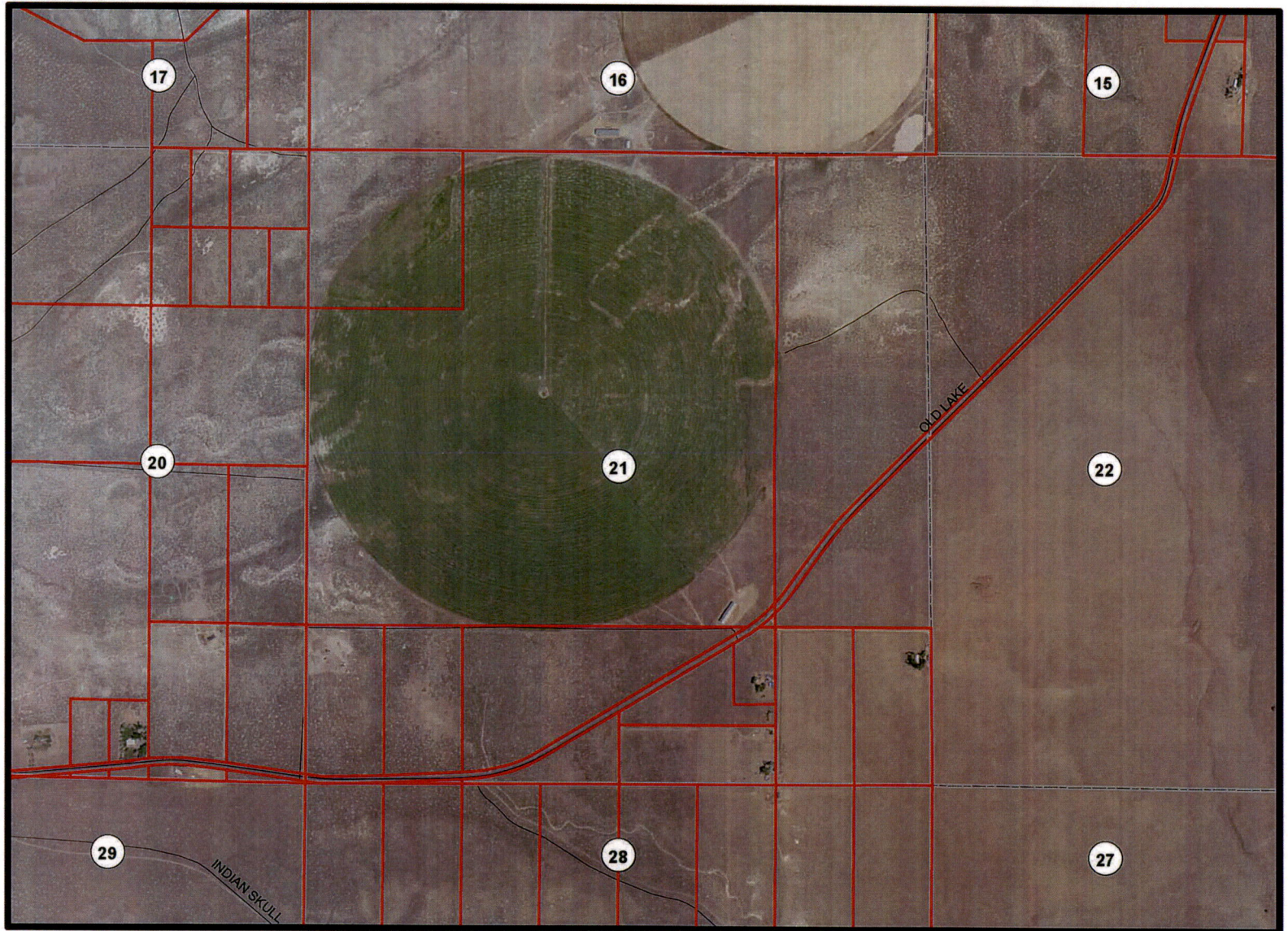
T 27 S, R 16 E, W.M.



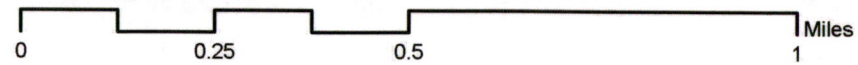
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SEP 13 2022
OWRD



T 28 S, R 16 E, W.M.



RECEIVED
SEP 13 2022
OWRD



RECEIVED

SEP 13 2022

OWRD

18:10 07-07-2022

Lat: 43° 16' 40.17" N Lon: 120° 37' 34.58" W

45 1/2 A

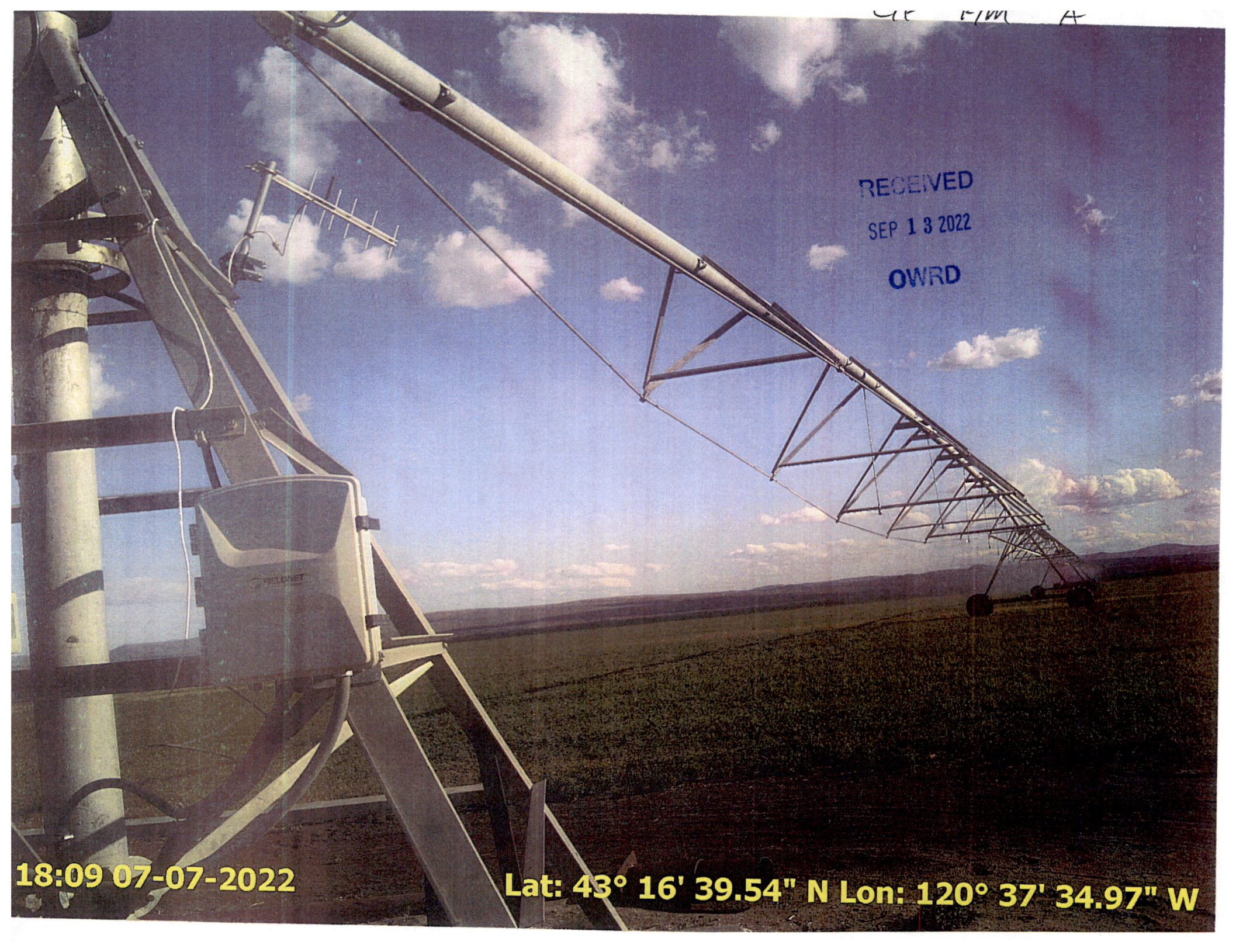
RECEIVED

SEP 13 2022

OWRD

18:09 07-07-2022

Lat: 43° 16' 39.54" N Lon: 120° 37' 34.97" W



YOA #

RECEIVED
SEP 13 2022
OWRD

18:10 07-07-2022

Lat: 43° 16' 40.17" N Lon: 120° 37' 34.58" W

43°16'40.12"N

120°37'34.61"W

4316.7'

+/- 1.7'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

RECEIVED

UP F/M A

RECEIVED

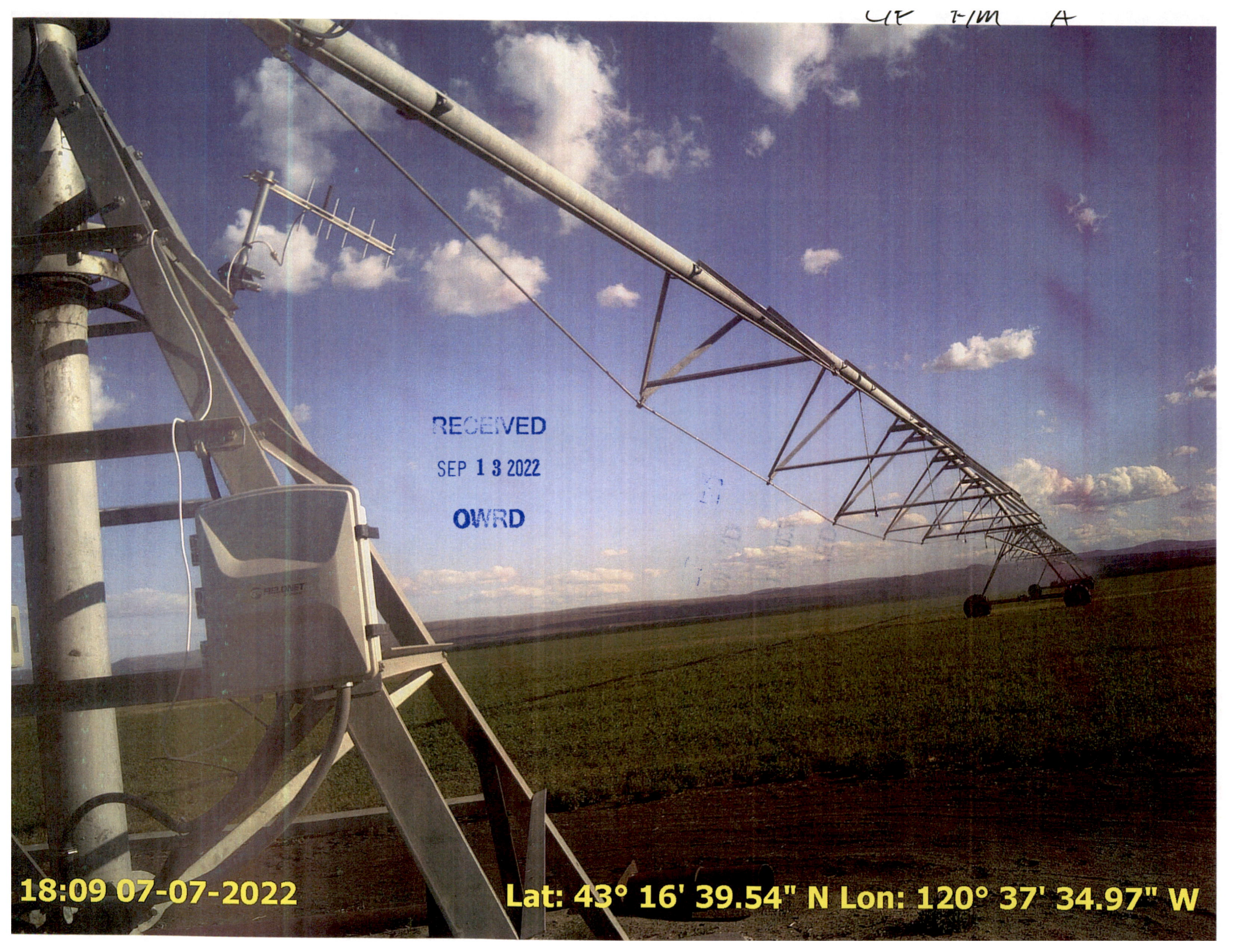
SEP 13 2022

OWRD

RECEIVED

18:09 07-07-2022

Lat: 43° 16' 39.54" N Lon: 120° 37' 34.97" W



43°16'39.46"N

120°37'34.83"W

4315.8'

+/- 1.3'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

RECEIVED

CIP 5 7M

RECEIVED
SEP 13 2022
ONRD

17:01 07-07-2022

Lat: 43° 11' 44.69" N Lon: 120° 46' 29.92" W



43° 11' 44.72" N

120° 46' 29.83" W

4319.1'

+/- 1.3'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

RECEIVED

YOH 4

RECEIVED
SEP 13 2022
OWRD

13:49 07-07-2022

Lat: 43° 7' 51.8" N Lon: 120° 49' 55.68" W



43°07'50.9"N
120°49'55.69"W

€316.1'

+/- 1.5'

RECEIVED

SEP 13 2022

OWRD

OWRD
SEP 13 2022
RECEIVED

LY 4

RECEIVED
SEP 13 2022
OWRD

16:52 07-07-2022

Lat: 43° 11' 44.52" N Lon: 120° 45' 54.16" W



43° 11' 44.53" N

126° 45' 54.11" W

4322.0'

+1-1.3'

RECEIVED
SEP 13 2022
OWRD

OWRD

SEP 13 2022

RECEIVED

EGT P100T 4

RECEIVED

SEP 13 2022

OWRD

16:33 07-07-2022

Lat: 43° 11' 48.60" N Lon: 120° 45' 35.58" W

43° 11' 48.62" ~~02~~ N

120° 45' 35.49" W

4321.1'

+/- 1.1'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

JE AED

CF

RECEIVED
SEP 13 2022
OWRD

13:50 07-07-2022

Lat: 43° 7' 50.86" N Lon: 120° 49' 55.88" W

CHARGED
HIGH VOLTAGE

43°07' 50.76" N

120°49' 55.84" W

43174'

H-1.4'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

RECEIVED

70A 5



16:32 07-07-2022

Lat: 43° 11' 48.51" N Lon: 120° 45' 36.39" W

43° 11' 48.53" N

120° 45' 36.24" W

4316.8'

+/- 1.6'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

RECEIVED

UP 5

RECEIVED
SEP 13 2022
ONRD

16:42 07-07-2022

Lat: 43° 11' 52.31" N Lon: 120° 45' 19.31" W

43°11' 52.37"N

120°45' 19.25"W

432.0'

+/- 1.2'

RECEIVED

SEP 13 2022

OWRD

01/10

SEP 13 2022

RECEIVED

EAR PIVOT 5

RECEIVED

SEP 13 2022

OWRD

16:23 07-07-2022

Lat: 43° 11' 4.7" N Lon: 120° 45' 36.0" W

43° 11.04.09" N

120° 45' 35.94" W

4324.6'

+/- 1.1'

RECEIVED
SEP 13 2022
OWRD

OWRD

SEP 13 2022

RECEIVED

164 8

RECEIVED
SEP 13 2022
OMWRD

16:59 07-07-2022

Lat: 43° 11' 44.51" N Lon: 120° 46' 30.9" W

43°11'44.54"N

120°46'~~30.00~~"W
29.96

4319.8'

+/- 1.4'

RECEIVED

SEP 13 2022

OWRD

010

SEP 13 2022

JF MED

4319.8'

43°11'44.54"N

120°46'29.96"W

VDA-1

RECEIVED
SEP 13 2022
OWRD

16:12 07-07-2022

Lat: 43° 10' 59.32" N Lon: 120° 45' 19.21" W



43°10'59.36"N
120°45'19.11"W

430.6'

+/-1.8'

RECEIVED
SEP 13 2022
OWRD

OWRD

SEP 13 2022

RECEIVED

RECEIVED

SEP 13 2022

OWRD

CTR

16:15 07-07-2022

Lat: 43° 10' 59.49" N Lon: 120° 45' 19.8" W

OWRD
SEP 13 2022
RECEIVED

RECEIVED
SEP 13 2022
OWRD

+1-1.4'

4325.5'

120°45'19.08" W

43910.5948" N

REMOTE MONITOR ALARM
AND CONTROL SYSTEM

LINDSAY

RECEIVED

SEP 13 2022

OWRD

16:14 07-07-2022

Lat: 43° 10' 59.37" N Lon: 120° 45' 19.25" W

17m

CAF

43°10'59.44" N
120°48'19.11" W

4327.8'

+/- 1.5'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

RECEIVED

PORT 8

RECEIVED
SEP 13 2022
OWBD

17:14 07-07-2022

Lat: 43° 10' 21.9" N Lon: 120° 46' 30.52" W



43°10'2.11" N
120°46'30.44" W

318.4'

+/-1.2'

RECEIVED

SEP 13 2022

OWRD

01/0

SEP 18 2022

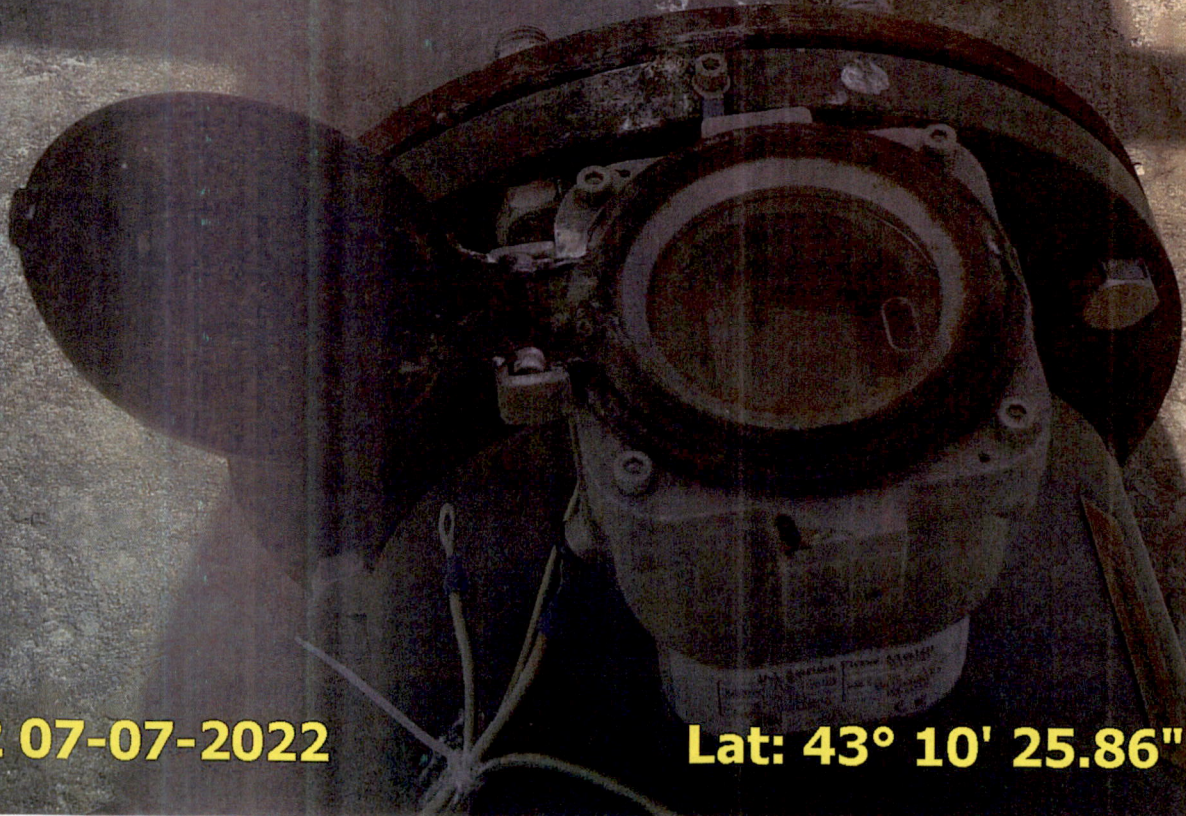
WJL AED

412 0 F/W

RECEIVED

SEP 13 2022

OWRD



17:22 07-07-2022

Lat: 43° 10' 25.86" N Lon: 120° 46' 12.74" W

43° 10' 25.87" N
120° 46' 12.70" W
4321.8'

+/- 1.4'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

RECEIVED

PIVOT 8 210F 6:00

RECEIVED

SEP 13 2022

OWRD

17:28 07-07-2022

Lat: 43° 10' 13.45" N Lon: 120° 46' 14.88" W

43°10'13.53"N

126°46'14.81"W

4324.3'

+/-1.3'

RECEIVED

SEP 13 2022

OWRD

OWRD

SEP 13 2022

RECEIVED

OWRD

SEP 13 2022

RECEIVED

PLANT 8 201 9:00

RECEIVED

SEP 13 2022

OWRD

17:18 07-07-2022

Lat: 43° 10' 21.11" N Lon: 120° 46' 28.55" W

OFFICE

SEP 18 2022

01/16

RECEIVED
SEP 18 2022
OWRD

+/-1.6'

±32.11'

120° 46' 28.36" W

43° 10' 21.10" N



ALL POINTS
ENGINEERING & SURVEYING, INC.
P.O. Box 767
Terrebonne, Oregon 97760

RECEIVED

SEP 13 2022

OWRD

TRANSMITTAL

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

Date: 8/8/2022
Attention: Certificates

Re: COBU T-13122 & 13371

Prints Plans Map/Plat Specifications Change order Other

Copies	No.	Description
1	1	COBU T-13122 (15 sheets letter bond)
1	2	Final Proof Maps (5 sheets mylar)
1	3	COBU T-13371 (15 sheets letter bond)
1	4	Final Proof Maps (3 sheets mylar)
1	5	Supporting docs (32 sheets ltr bond)

These are transmitted as checked below:

For OWRD approval Approved as submitted Approved as noted
 Copies for distribution Returned for corrections Returned corrected prints
 Review and comment For bids due Other

Remarks:

Thanks, and if you have questions please don't hesitate to call (541) 548-5833.

Signed: Deven Maitzen