

CLAIM OF BENEFICIAL USE for Groundwater Permits claiming more than 0.1 cfs



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

**A fee of \$230 must accompany this form for permits
with priority dates of July 9, 1987, or later.**

A separate form shall be completed for each permit.

In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.

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 8" 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>

SECTION 1

GENERAL INFORMATION

1. File Information:

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APPLICATION # G-18398	PERMIT # (IF APPLICABLE) G-18029	PERMIT AMENDMENT # (IF APPLICABLE) T-
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Java Properties OR 4 LLC		PHONE NO. (541) 261-5862	ADDITIONAL CONTACT NO.
ADDRESS PO Box 385			
CITY Creswell	STATE OR	ZIP 97426	E-MAIL javapropertiesor@gmail.com

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

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

PERMIT HOLDER OF RECORD Java Properties OR 4 LLC			
ADDRESS PO Box 385			
CITY Creswell	STATE OR	ZIP 97426	

ADDITIONAL PERMIT HOLDER OF RECORD			
ADDRESS			
CITY	STATE	ZIP	

4. Date of Site Inspection:

10-10-2022

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Jacob Farrens	10-10-2022	Owner

6. County:

Lane

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

OWNER OF RECORD			
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 William E. McGill		PHONE NO. (503) 510-3026	ADDITIONAL CONTACT NO. (503) 931-0210
ADDRESS 15333 Pletzer Rd. SE			
CITY Turner	STATE OR	ZIP 97392	E-MAIL willmcgill.surveying@gmail.com

Permit Holder of Record Signature or Acknowledgement

Each permit 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
	Joe Javadzadeh	manager	10/20/22
	Java properties OR #4, LLC		

SECTION 3

CLAIM DESCRIPTION

1. 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)
Well 1	LANE 20037/75469	L-121728

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

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2. Point of appropriation source, if indicated on permit:

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
Well 1	Coast Fork Willamette River	Willamette River

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3. Developed use(s), period of use, and rate for each use:

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
Well 1	Nursery (Irrigation & Ag.)	Cannabis & Pasture	Jan. 1 – Dec. 31	22 gpm
Total Quantity of Water Used				22 gpm

4. Provide a general narrative description of the distribution works. This description must trace the water system from each point of appropriation to the place of use:

Water is pumped from Well 1 by a 1 HP submersible pump through 1.5" buried PVC mainline to a 10,000-gallon main storage tank. The tank can be bypassed. From the main tank, water is delivered by 1.5" buried PVC pipe to the place of use. Within the place of use, 1" PVC pipe is used to deliver the water. F1/F2 place of use comes from a 750-gallon storage tank bulge, F3 comes from a 500-gallon storage tank bulge, and F4/O.G. Close/O.G. Far come from two 1,200-gallon storage tank bulges. From each of these three storage tank locations, water is pumped by a 1.5 HP centrifugal pump through 1" PVC pipe to drip systems. On occasion a straw pump in a barrel may be used to water by hand. Water is delivered to the pasture areas by 1" rubber hose and applied by impact sprinklers.

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

5. Variations:

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below.

YES NO

(e.g. "The permit allowed three points of appropriation. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

The permit allowed 8.77 acres, but only 7.5 acres were developed.
The well is located 465' E from the NE corner of DLC 54 instead of 665' E as permitted.

6. Claim Summary:

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well 1	0.22 cfs	0.067 cfs	*	Nursery (Irrigation & Ag.)	8.77	7.5

*System was being used intermittently during onsite inspection. Reliable measurement was not able to be collected.

SECTION 4

SYSTEM DESCRIPTION

Are there multiple POAs?

YES NO

If "YES" you will need to copy and complete a separate Section 4 for each POA.

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

Well 1

A. Place of Use

1. Is the right for municipal use?

YES NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
19S	2W	WM	8	SWSW		59	Nursery (Irrigation & Ag.)	7.5*	
19S	2W	WM	8	SWSW					
Total Acres Irrigated								7.5	

*Acreage not split by DLC to be consistent with permit.

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (GLOT), Quarter Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, GLOT, and QQ.

B. Groundwater Source Information (Well)

1. Is the appropriation from a well?

YES NO

If "NO", items 2 through 4 relating to this section may be deleted.

2. Describe the access port (type and location) or other means to measure the water level in the well:

3/4" threaded port on South side of well cap.

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3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
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Well logs attached.

4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

LANE 20037 was the original construction well log. LANE 75469 is the well log for repairs to the existing well.

C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)? YES NO

D. Diversion and Delivery System Information

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport and apply the water from the point of appropriation to the place of use.

1. Is a pump used? YES NO

If "NO" items 2 through item 6 may be deleted.

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Flint & Wallings	4F19S10		Submersible		1.5"

3. Motor Information:

MANUFACTURER	HORSEPOWER
Flint & Wallings	1

4. 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)
1	40	3'	0'	0.067

5. Provide pump calculations:

$Q = (1 * 7.04) / (101.6 + 3 + 0) = 7.04 / 104.6 = 0.067 \text{ cfs}$

6. 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)
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System was being used intermittently during onsite inspection. Reliable measurement was not able to be collected.

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

7. Is the distribution system piped?

YES NO

If "NO" items 8 through item 13 may be deleted.

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
1.5"	~650'	PVC	Buried outside, surfaces in buildings.
1"		PVC	Above ground in buildings.

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
1"	1,000'	Rubber Hose	Above ground

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
6' Raintower	40	3	2	2	0.013
Gilmore Ground	40	3	7	7	0.047

Reminder: For sprinkler output determination use the reference information at the end of this document.

11. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
6.6 gph	40	0.11	3,420	172	0.042

12. Drip Tape Information:

DRIPPER SPACING IN INCHES	GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	ADDITIONAL INFORMATION
N/A					

13. Pivot Information:

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
N/A				

E. Storage

1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)?

YES NO

If "NO", item 2 and 3 relating to this section may be deleted.

If "YES" is it a:
 Storage Tank
 Bulge in System / Reservoir

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YES NO
 YES NO

Complete appropriate table(s), unused table may be deleted.

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Plastic	10,000	Above ground
Plastic	1,200 (x2)	Above ground
Plastic	750	Above ground
Plastic	500	Above ground

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
N/A		

F. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

YES NO

G. Gravity Flow Canal or Ditch

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

YES NO

H. Additional notes or comments related to the system:

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SECTION 5 CONDITIONS

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

1. Time Limits:

Permits and extension final orders contain any or all of the following dates: the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use was to be completed. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or permit extension order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	5-17-2018		
BEGIN CONSTRUCTION (A)	N/A	Existing well	8-24-2017 brought to current well compliance standards
COMPLETE CONSTRUCTION (B)	N/A	April 2022	Completed installing drip irrigation equipment.
COMPLETE APPLICATION OF WATER (C)	5-17-2023	October 2022	Irrigated remaining pasture grass.

* MUST BE WITHIN PERIOD BETWEEN PERMIT, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

2. Is there an extension final order(s)? YES NO

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? YES NO

4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements? YES NO

5. Pump Test:

a. Did the permit require the submittal of a pump test? YES NO

Ground water permits with priority dates on or after **December 20, 1988**, require the submittal of a pump test prior to issuance of a certificate. In some cases, the permit holder may qualify for a multiple well exemption or an unreasonable burden exemption.

For additional information regarding pump tests see:

<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

If "NO", items b through e relating to this section may be deleted.

b. Has the pump test been previously submitted to the Department? YES NO

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- c. Is the pump test attached to this claim? YES NO
- d. Has the pump test been approved by the Department? YES NO
- e. Has a pump test exemption been approved by the Department? YES NO

**** Claims will not be reviewed until a pump test or exemption has been approved by the Department**

6. Measurement Conditions:

- a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? YES NO

If "NO", items b through f relating to this section may be deleted.

Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion or appropriation.

- b. Has a meter been installed? YES NO

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1	Master Meter	9032408	Working	3320470.7	8-24-2017

7. Recording and reporting conditions:

- a. Is the water user required to report the water use to the Department? YES NO

If "NO", item b relating to this section may be deleted.

- b. Have the reports been submitted? YES NO

If the reports have not been submitted, attach a copy of the reports if available.

8. Other conditions required by permit, permit amendment final order, or extension final order:

- a. Were there special well construction standards? YES NO
- b. Was submittal of a ground water monitoring plan required? YES NO
- c. Was submittal of a water management and conservation plan required? YES NO
- d. Was a Well Identification Number (Well ID tag) assigned and attached to the well? YES NO

WELL ID #	DATE ATTACHED TO WELL
L-121728	March 2016

- e. Other conditions? YES 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 6
ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Map Scale Waiver	Email from Gerry Clark approving 1 in. = 200 ft. map scale.
Business Registry	Authorization to sign document.
Well Logs	LANE 20037 (1 pg.) and LANE 75469 (2 pgs.)
Well ID Number	OWRD Well ID application form
Pump Test	Tested by Whitewater Drilling (2 pgs.)
Pictures (x27)	Taken during 10-10-2022 onsite inspection.

SECTION 7
CLAIM OF BENEFICIAL USE MAP

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.

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.

Survey method used was aerial photo provided by Maxar Technologies.
Source Date: 2/23/2022

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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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Grant McGill <grantmcgill.wr@gmail.com>

Claim Map Scale: Permit G-18029

CLARK Gerald E * WRD <Gerald.E.CLARK@water.oregon.gov>
To: Grant McGill <grantmcgill.wr@gmail.com>
Cc: Will McGill <willmcgill.surveying@gmail.com>

Tue, Oct 25, 2022 at 11:53 AM

Grant and Will,

Sorry for the delay. Your request for a waiver regarding the map scale is approved as requested. All other mapping requirements remain the same.

Please attach a copy of this waiver request to your claim.

Have a great day!

Gerry

-

[Gerry Clark](#)

He/Him/His

Oregon Water Resources Department

Program Analyst, Certificate Section, Water Right Services Division

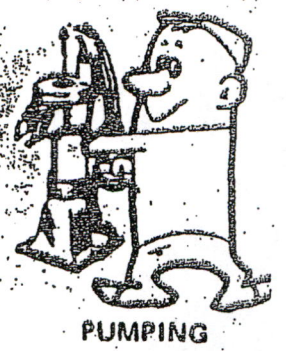
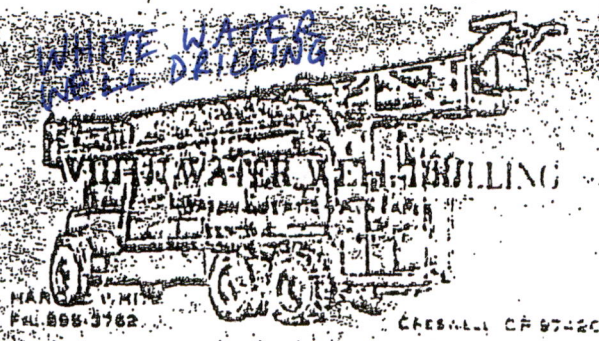
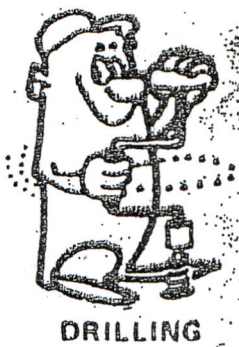
725 Summer Street NE, Suite A Salem, OR 97301 | Phone 503-979-9103

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OWNER: Java Properties OR #4

DATE: 3/23/18

Well Location: 83293 Rodgers Rd
Creswell, OR 97426

Well I.D. # L 121728

Page 2

NOTE:
 The below flow rates are for specified times and quantity shown. We express no opinion of flow rates and water level beyond the test period.

WELL DATA	TIME	G.P.M.	FEET TO WATER	REMARKS
DEPTH:	1:05	22	2.5	
CASING:	1:20		2.5	Well produce dumped
W.L.:	1:35		3	22 gallons per
	1:50		3	minute constant
	2:05	22	3	for entire 4 hour
	2:20		3	test period with
	2:35		3	only 2.5' drawdown
PUMP DATA	2:50		3	
MAKE:	3:05	22	3	Excellent Well!
H.P.:	3:07	NA	3	Sean Oldham
SETTING:	3:09	NA	2.5	WWC # 1562
	3:11	NA	2.5	
	3:13	NA	2	White Water
	3:15	NA	1.5	Well Drilling
	3:17	NA	1.5	541 895 3762
	3:22	NA	1.0	
	3:27	NA	0.5'	

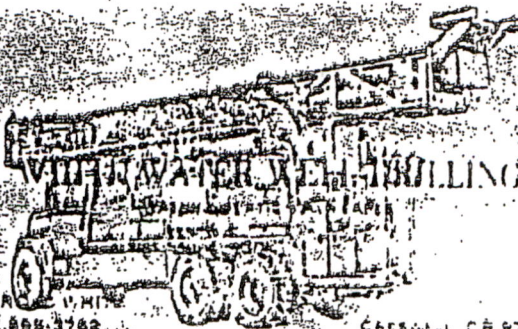
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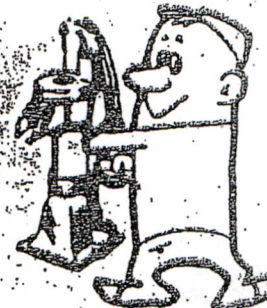


DRILLING



MAR 11 1982
FAL 888-3782

CRESWELL OR 97420



PUMPING

OWNER: Java Properties OR #4

DATE: 3/23/18

Well Location: 83293 Rodgers Rd

Creswell, OR 97426

Well I.D.# L121728

NOTE:

The below flow rates are for specified times and quantity shown. We express no opinion of flow rates and water level beyond the test period.

Page 1

WELL DATA	TIME	G.P.M.	FEET TO WATER	REMARKS
DEPTH: <u>104'</u>	<u>10:00</u>	<u>NA</u>	<u>0.5'</u>	
CASING:	<u>10:20</u>	<u>NA</u>	<u>0.5'</u>	
W.L.:	<u>10:40</u>	<u>NA</u>	<u>0.5'</u>	
	<u>11:00</u>	<u>NA</u>	<u>0.5'</u>	
	<u>11:05</u>	<u>22</u>	<u>0.5'</u>	
	<u>11:07</u>		<u>8"</u>	
	<u>11:09</u>		<u>1'</u>	
PUMP DATA	<u>11:11</u>		<u>1.5'</u>	
MAKE: <u>FEW</u>	<u>11:13</u>		<u>1.5'</u>	
H.P.: <u>1</u>	<u>11:15</u>		<u>1.5'</u>	
SETTING: <u>80'</u>	<u>11:20</u>		<u>2'</u>	
	<u>11:25</u>		<u>2'</u>	
	<u>11:30</u>		<u>2'</u>	
	<u>11:35</u>		<u>2'</u>	
	<u>11:50</u>		<u>2'</u>	
	<u>12:05</u>	<u>22</u>	<u>2'</u>	
	<u>12:20</u>		<u>2.5'</u>	
	<u>12:35</u>		<u>2.5'</u>	
	<u>12:50</u>		<u>2.5'</u>	

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Business Registry Business Name Search

[New Search](#)

Business Entity Data

10-20-2022
14:18

Registry Nbr	Entity Type	Entity Status	Jurisdiction	Registry Date	Next Renewal Date	Renewal Due?
1171982-91	DLLC	ACT	OREGON	12-24-2015	12-24-2022	
Entity Name	JAVA PROPERTIES OR #4, LLC					
Foreign Name						

[New Search](#)

Associated Names

Type	PRINCIPAL PLACE OF BUSINESS					
Addr 1	83293 RODGERS RD					
Addr 2						
CSZ	CRESWELL	OR	97426		Country	UNITED STATES OF AMERICA

Please click [here](#) for general information about registered agents and service of process.

Type	REGISTERED AGENT			Start Date	10-12-2020	Resign Date
Name	JACOB		FARRENS			
Addr 1	83293 RODGERS RD					
Addr 2						
CSZ	CRESWELL	OR	97426		Country	UNITED STATES OF AMERICA

Type	MAILING ADDRESS					
Addr 1	PO BOX 385					
Addr 2						
CSZ	CRESWELL	OR	97426		Country	UNITED STATES OF AMERICA

Type	MEMBER				Resign Date	
Name	YOUSEF		JAVADZADEH			
Addr 1	2718 NE E DEVILS LAKE RD					
Addr 2						
CSZ	OTIS	OR	97368		Country	UNITED STATES OF AMERICA

Type	MANAGER				Resign Date	
Name	YOUSEF		JAVADZADEH			
Addr 1	2718 NE E DEVILS LAKE RD					
Addr 2						
CSZ	OTIS	OR	97368		Country	UNITED STATES OF AMERICA

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[New Search](#)

Name History

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.

LANE 20037 WATER WELL REPORT

STATE OF OREGON
(Please type or print)

(Do not write above this line)

LANE
020037

State Well No. 19S/2W-8

State Permit No. _____

(1) OWNER:

Name Donald Cameron
Address 83213 N. Rogers Road
Creswell, OR 97426

(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
6" Diam. from +1 ft. to 27 ft. Gage .250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Perforated? Yes No.

e of perforator used

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

(7) SCREENS:

Well screen installed? Yes No

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

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?

Yield: gal./min. with ft. drawdown after hrs.

air tested; could fluctuate; " "

X ~~50~~ gal./min. with 52 ft. drawdown after 1 hrs.

Artesian flow g.p.m.

perature of water Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

seal—Material used Portland Cement
Well sealed from land surface to 25 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in.
Number of sacks of cement used in well seal 5 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 Lane Driller's well number _____
1/4 1/4 Section 8 T. 19S R. 2W W.M.

Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 58 ft.

Static level 18 ft. below land surface. Date 7/10/78

Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 6"

Depth drilled 70 ft. Depth of completed well 70 ft.

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

MATERIAL	From	To	SWL
Top Soil	0	1	
Light yellow clay	1	12	
Light brown green claystone	12	22	
Blue green claystone cong.	22	70	

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JUL 27 1978

WATER RESOURCES DEPT.
SALEM, OREGON

Work started 7/10 1978 Completed 7/10 1978

Date well drilling machine moved off of well 7/10 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] K. L. Kinman Date 7/10, 1978
(Drilling Machine Operator)

Drilling Machine Operator's License No. OWRD 1160

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 Casey Jones Well Drilling Co., Inc.
(Person, firm or corporation) (Type or print)

Address 37115 Immigrant Road, Pleasant Hill, OR

[Signed] Casey Jones
(Water Well Contractor)

Contractor's License No. 559 Date 7/10, 1978

Amended

LANE 75469

L-121728

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

WELL I.D. LABEL# 125903
 START CARD # 214334
 ORIGINAL LOG # LANE 020037

(1) LAND OWNER
 Owner Well I.D. _____
 First Name Jacob Last Name Farrers
 Company _____

Address PO Box 385
 City Creswell State OR Zip 97426

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
 Dia + From To Gauge Stl Plstc Wld Thrld
 Casing: 8" HD 27 250
 Material From To Amt sacks/lbs
 Seal: NONE

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 104 ft.
 BORE HOLE SEAL
 Dia From To Material From To Amt sacks/lbs
12" 0 22 Bentondite 22 0 14 sacks
 Calculated 2647

How was seal placed: Method A B C D E
 Other Poured
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
 Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld
 8" 27 250
 Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type _____ Material _____
 Perf/S Casing/ Screen Scrn/slot Slot # of Tele/
 creen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
 Temperature 58 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 64
 From To Description Amount Units

(9) LOCATION OF WELL (legal description)
 County Lane Twp 19 s Range 2 w WM
 Sec 8 SW 1/4 of the SW 1/4 Tax Lot 00302
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

83293 Rodgers Rd Creswell, OR 97426

(10) STATIC WATER LEVEL
 Date SWL (psi) + SWL (ft)
 Existing Well / Pre-Alteration 8/23/17 _____ 15
 Completed Well 8/24/17 _____ 15
 Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found

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

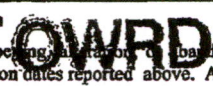
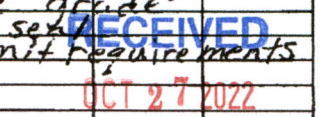
(11) WELL LOG Ground Elevation _____

Material	From	To
OVERSHOOT		
Gravel lot	0	2
Gravel/Boulders	2	4
Orange clay	4	6
Gray clay	6	12
Gray claystone	12	22
Extended 8" casing to 12" above grade and replaced seal to meet permit requirements		

Date Started 8/23/17 Completed 8/24/17

(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 quantities reported above are true to the best of my knowledge and belief.
 License Number _____ Date _____
 Signed _____ **SEP 06 2017**

(bonded) Water Well Constructor Certification
 I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
 License Number 1562 Date 9/6/17
 Signed Sean Oldham
 Contact Info (optional) _____



(1) LAND OWNER Owner Well I.D.
 First Name Jacob Last Name Farrens
 Company _____
 Address PO Box 385
 City Creswell State OR Zip 97426

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
 Dia + From To Gauge Stl Plstc Wld Thrd
 Casing: 8" #40 27 250
 Material From To Amt sacks/lbs
 Seal: NONE

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 104 ft.
 BORE HOLE SEAL
 Dia From To Material From To Amt sacks/lbs
12" 0 22 Bentonite 22 0 14 scks
 Calculated 26 47

How was seal placed: Method A B C D E
 Other Poured
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
 Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
 1 27 250
 Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type _____ Material _____
 Perf/S Casing/Screen Scrn/slot Slot # of Tele/
 green Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
 Temperature 58 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 64
 From To Description Amount Units

(9) LOCATION OF WELL (legal description)
 County Lane Twp 19 s N 6 Range 2 w E W/M
 Sec 8 SW 1/4 of the SW 1/4 Tax Lot 00302
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

83293 Rodgers Rd. Creswell, OR 97426

(10) STATIC WATER LEVEL
 Date SWL (psi) + SWL (ft)
 Existing Well / Pre-Alteration 8/23/17 15
 Completed Well 8/24/17 15
 Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
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SEP 08 2017					

(11) WELL LOG Ground Elevation SALEM, OR

Material	From	To
OVERSHOOT		
Gravel lot	0	2
Gravel/Boulders	2	4
Orange Clay	4	6
Gray clay	6	12
Gray claystone	12	22
Extended 8" casing to 12" above grade and replaced seal to meet permit requirements		

Date Started 8/23/17 Completed 8/24/17

(unbonded) Water Well Constructor Certification
 I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
 License Number _____ Date _____
 Signed OWRD

(bonded) Water Well Constructor Certification
 I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
 License Number 1562 Date 9/6/17
 Signed Sean Oldham
 Contact Info (optional) _____



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

Application for
Well ID Number

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MAR 09 2016

SALEM, OR

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

I. OWNER INFORMATION

Current Owner Name (please print): JAVA PROPERTIES OR #4 LLC
Mailing Address: P.O. Box 2422
City, State, Zip: EDMOND, OK 73083
Mail Well ID Tag to: [] SAME AS ABOVE [X] In Care Of (C/O)
Name & Address: FOX HOLLOW FLORA LLC PO Box 385
City, State, Zip: CREWELL, OR 97426

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

Township: 19 (North / South) Range: 2 (East / West) Section: 8 1/4 of the 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 302 County: LANE
GPS Coordinates: 43° 55' 31.75" N -122° 57' 53.37" W
Street Address of Well, City: 83293 Rodgers Rd Creswell, OR 97426
If the property had a different street address in the past: subdivided from 83213 Rodgers Rd

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

Use of Well (domestic, irrigation, commercial, industrial, monitoring): currently domestic, requesting commercial permit
Date Well Constructed (or property built): 1978 JULY Total Well Depth: 70ft+ Casing Diameter: 8"
Owner at time the well was constructed (if known): Donald Cameron Well Log # (if known): LANE 20037
Other Information: 8" casing added (was 6")

SUBMITTED BY (please print): Ben Nadolny
PHONE: (541) 913-9719 EMAIL &/or FAX: benjamin.nadolny@gmail.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.

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For Official Use Only by the Oregon Water Resources Department:

Received Date:

3-9-16

Well Log Number:

LANE 20037

Well Identification #:

L-121728



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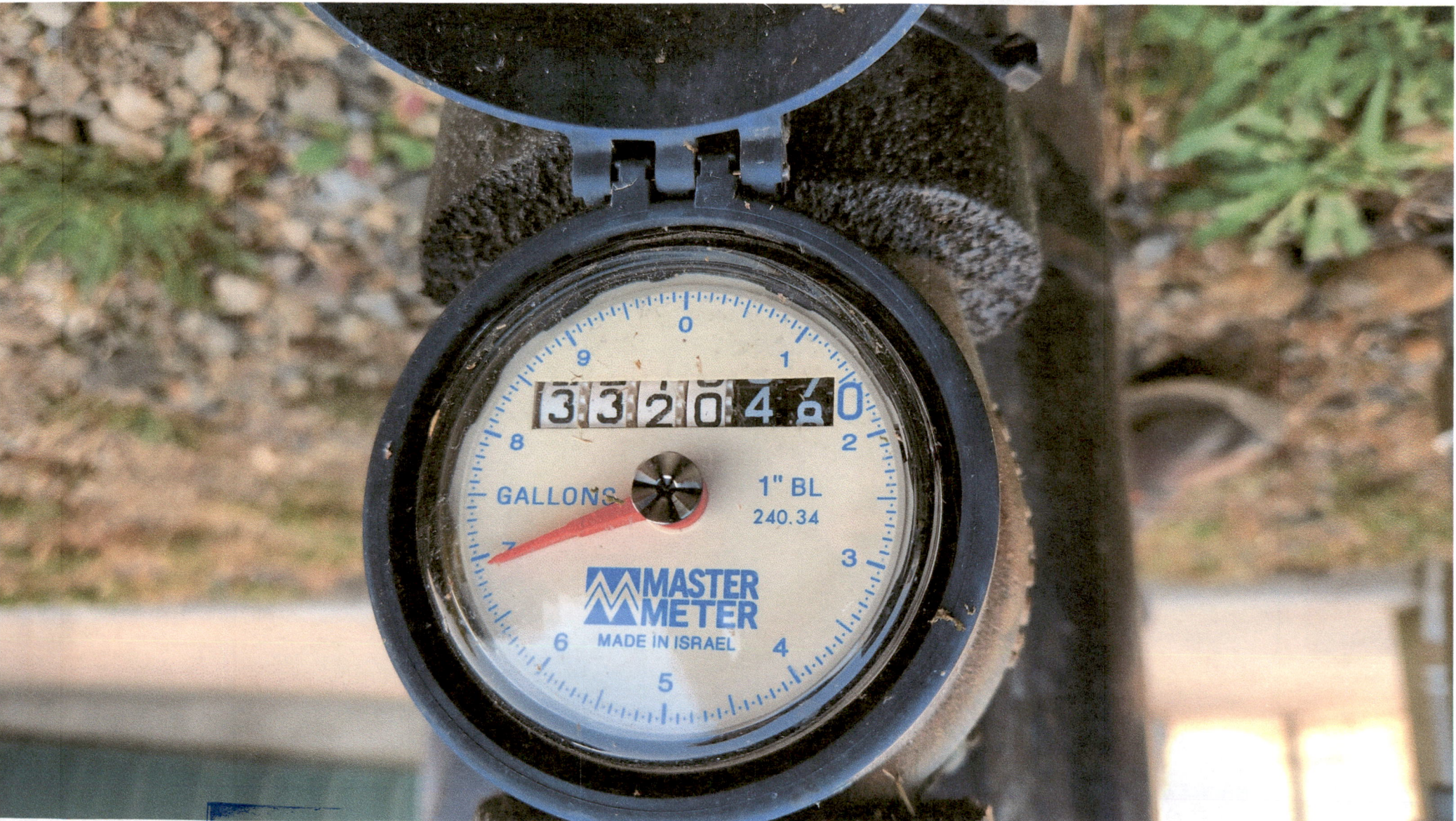
10-10-22 onsite
Farrens COBU
Well



OREGON
WATER RESOURCES DEPT
WELL #
L121728
DO NOT REMOVE LABEL

10-10-22 onsite
Farrens COBU
Well tag

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10-10-22 onsite
Farrens COBU
Flow Meter



10-10-22 onsite
farrens COBU

Flow Meter cap w/ s/n

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OWRD



REPLACEMENT
PARTS
IRRIGATION

M Eagle
Building essentials
for a better tomorrow™

**Electrical
Fittings**

10-10-22
onsite
Farrens Cobu
Ground
sprinklers
Gilmore
842003-1001

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10-10-22
onsite

Farrans COBU

Tri-pod
sprinklers
Raintower

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10-10-22 onsite
Farrens COBU
F4/Next gen. house



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10-10-22 onsite
Farrens COBU

Spray devices in plants



10-10-22 onsite
Farrens COBBL
1 inch. supply lines to rows w/ emitters



Start off with no feed
When re-potting plants, use a pot one size larger than the current one

Forest

10-10-22
onsite

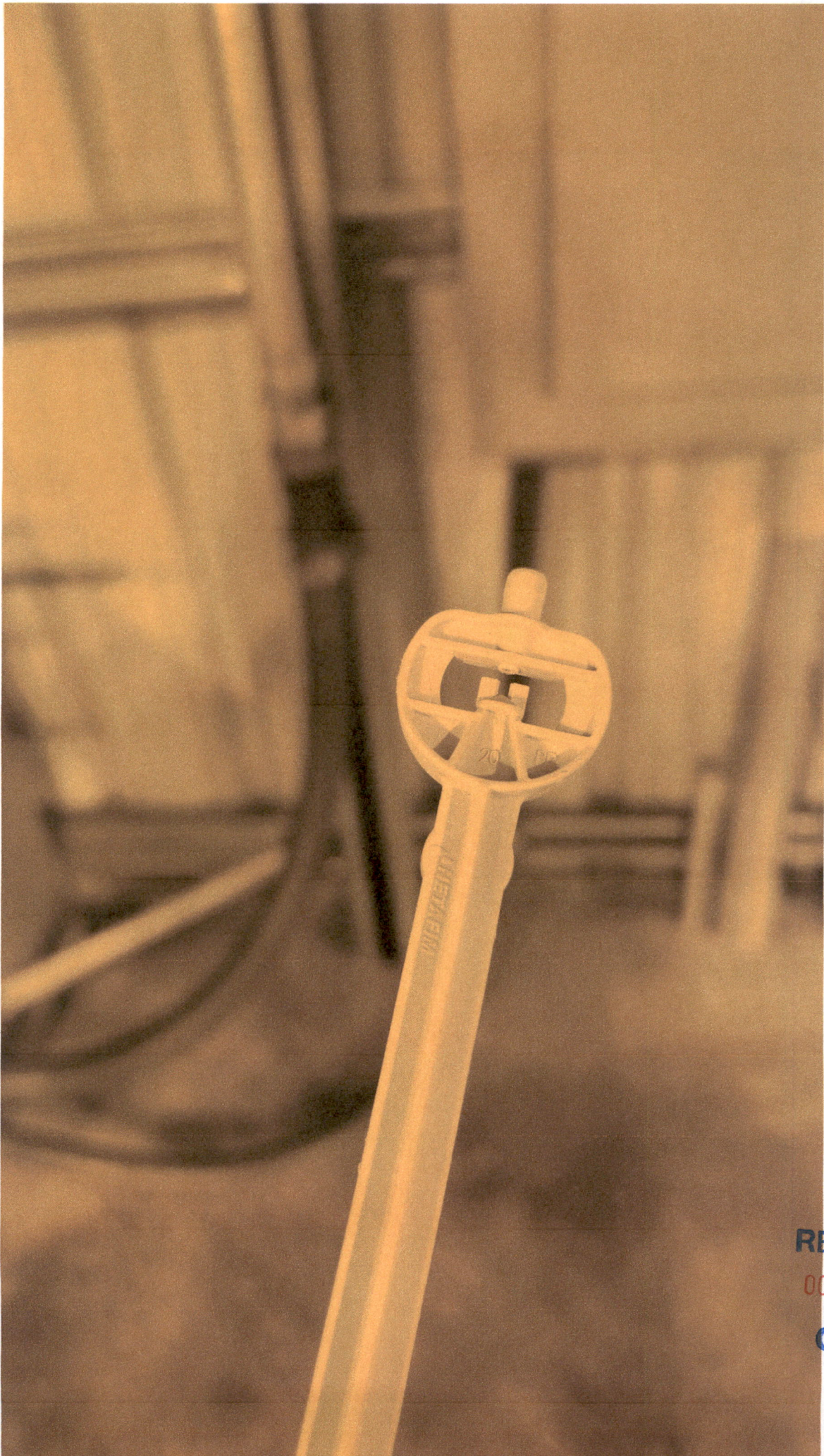
Farreras COBU

emitters

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10-10-22
onsite

Farrrens COBd

Netatun
spray device

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NETAFIM 40201-002320
WPCJL 06.6GPH 36 BKPE P.FIT ELBW 25EA
QTY: 25
COUNTRY OF ORIGIN: ISRAEL
MADE IN MEXICO

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10-10-22 onsite
Farmers COBU
emitter tag



Pump: CJ101B151AB Rev: A
 Motor: 98J115

HP: 1.5	Ph: 1	Hz: 60
Volts: 115/230	S.F.: 1.3	Amps: 18/9
SF Amps: 21/10.5	RPM: 3450	Type: C
Duty: Cont.	Temp.: 65 C	KVA Code: J
Frame: 56J	Ins Class: B	

Factory prewired for: 230 V
 Check voltage of power source

Thermally protected automatic
 Use copper conductors only
 Non-submersible Pump

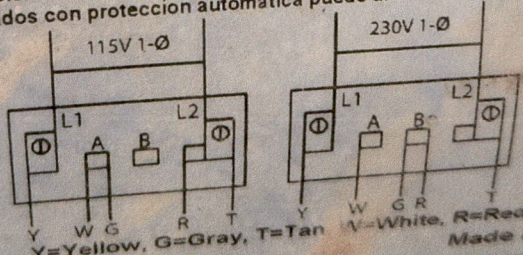


ELECTRICAL HAZARD



Improper installation may result in damage or injury. Replace all covers before operating. Ground motor in accordance with local and national electrical codes. Disconnect power source before servicing. Motors equipped with automatic protection may restart without warning.
 WARNING: Risk of Electric Shock - This Pump Has Not Been Investigated for Use in Swimming Pool or Marine Areas

Instalacion inadecuada puede causar danos o lesiones. Poner de nuevo todas las cubiertas antes de operar. Conecte el motor a tierra de acuerdo con los codigos electricos y nacionales. Desconectar la fuente de alimentacion antes de dar servicio. Motores equipados con proteccion automatica puede arrancar sin previo aviso.



Date Code: 1020*

Made in USA

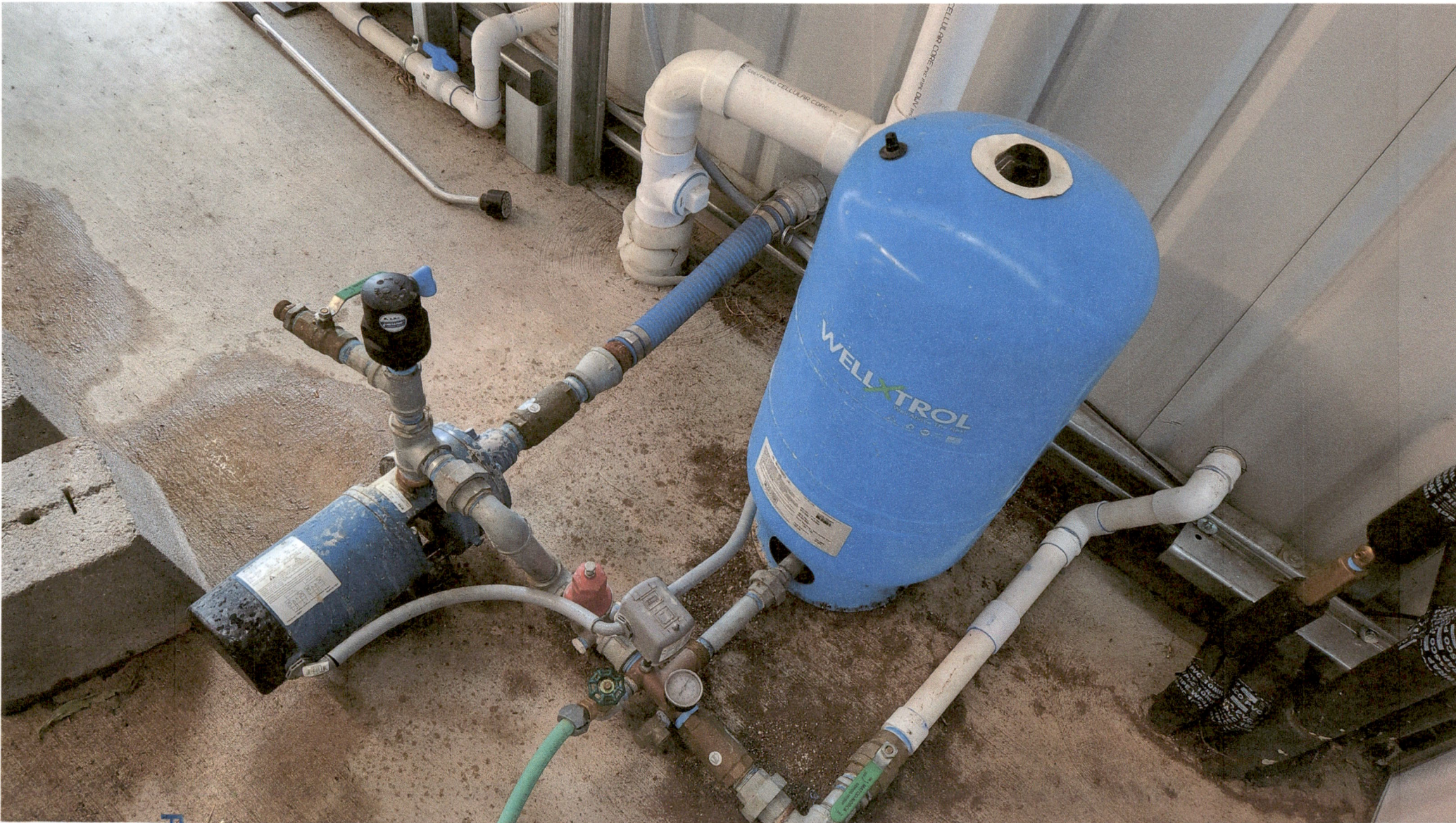
10-10-22
 onsite

Furness COBU

Pump tag
 for F4,
 far greenhouse,
 close greenhouse

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10-10-22 onsite
Farrens WBU
pump for F4, far, close

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10-10-22 onsite
Farrens COBU
1,200 gal. tanks (x2) for FH, far, close

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Tank 2

1000
2735

900
5007

800
3028

10-10-22
onsite

Farens
Cobu

Tank
markings

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Pump: CJ101B151AB Rev: A
 Motor: 98J115
 HP: 1.5
 Volts: 115/230
 SF Amps: 21/10.5
 Duty: Cont.
 Frame: 56J
 Ph: 1
 S.F.: 1.3
 RPM: 3450
 Temp.: 65 C
 Ins Class: B



Hz: 60
 Amps: 18/9
 Type: C
 KVA Code: J

Factory prewired for: 230 V
 Check voltage of power source

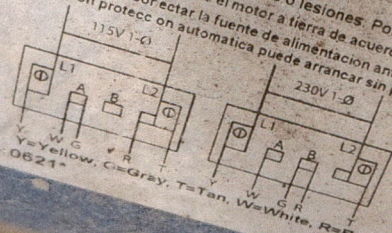
Thermally protected automatic
 Use copper conductors only
 Non-submersible Pump



ELECTRICAL HAZARD



Improper installation may result in damage or injury. Replace all covers before operating. Ground motor in accordance with local and national electrical codes. Disconnect power source before servicing. Motors equipped with automatic protection may restart without warning.
 WARNING: Risk of Electric Shock in Swimming Pool or Marine Areas. This Pump has Not Been Investigated for Use in las cubiertas inadecuadas pueden causar danos o lesiones. Poner de nuevo todas las cubiertas antes de operar. Conecte el motor a tierra de acuerdo con los codigos electricos y nacionales. Descorreactar la fuente de alimentacion antes de dar servicio. Motores equipados con proteccion automatica puede arrancar sin previo aviso.



Date Code: 0621*

10-10-22
 onsite

Farrens
 COBU

F3 pump
 tag

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10-10-22 onsite
Farrens COBU
F3 pump

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OWRPD



10-10-22
onsite

Farmers
CoBu

F3 storage
tank

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OWRPD

10-10-22 onsite
Farrens COBU
F3 building -indoor grow area

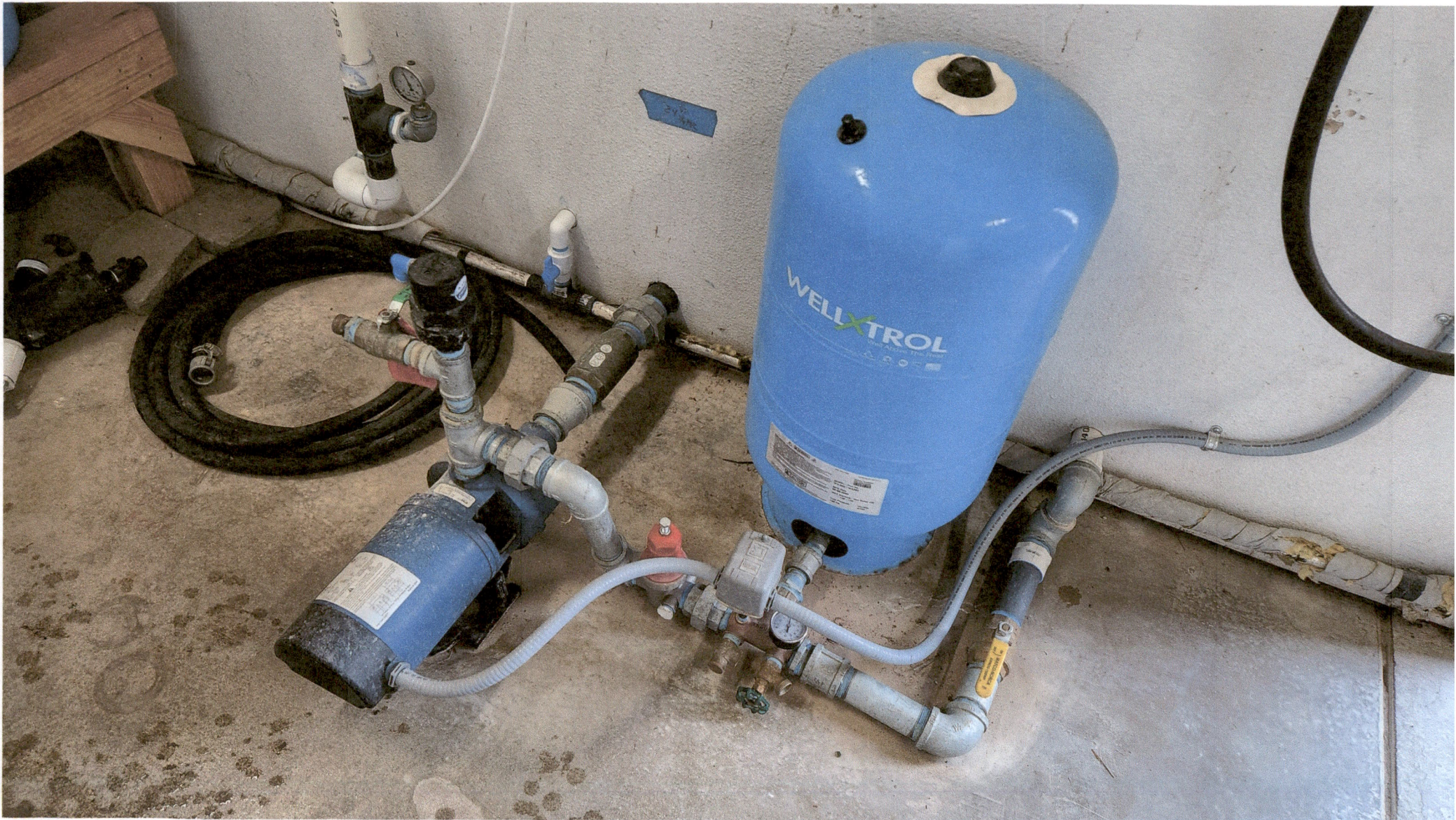


10-10-22 onsite
Farrens cobu
F2 building - indoor grow area



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10-10-22 onsite
Farmer COBU
Fl-ring spray devices



10-10-22 onsite
Farrens Cebu
F1 and F2 pump

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OCT 27 2022
OWRPD



Trust runs deep.

Pump: CJ101B151AB Rev: A
Motor: 98J115



UL Std. No. 778
ENCLOSURE 3

HP: 1.5	Ph: 1	Hz: 60
Volts: 115/230	S.F.: 1.3	Amps: 18/9
SF Amps: 21/10.5	RPM: 3450	Type: C
Duty: Cont.	Temp.: 65 C	KVA Code: J
Frame: 56J	Ins Class: B	

Factory prewired for: 230 V
Check voltage of power source

Thermally protected automatic
Use copper conductors only
Non-submersible Pump



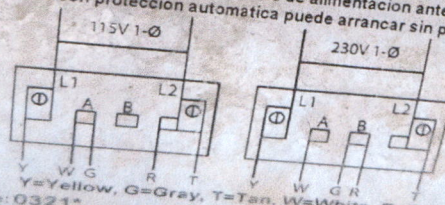
ELECTRICAL HAZARD



Improper installation may result in damage or injury. Replace all covers before operating. Ground motor in accordance with local and national electrical codes. Disconnect power source before servicing. Motors equipped with automatic protection may restart without warning.

WARNING: Risk of Electric Shock - This Pump Has Not Been Investigated for Use in Swimming Pool or Marine Areas.

Instalacion inadecuada puede causar danos o lesiones. Poner de nuevo todas las cubiertas antes de operar. Conecte el motor a tierra de acuerdo con los codigos electricos y nacionales. Desconectar la fuente de alimentacion antes de dar servicio. Motores equipados con proteccion automatica puede arrancar sin previo aviso.



Date Code: 0321*

Made in USA

10-10-22
on site

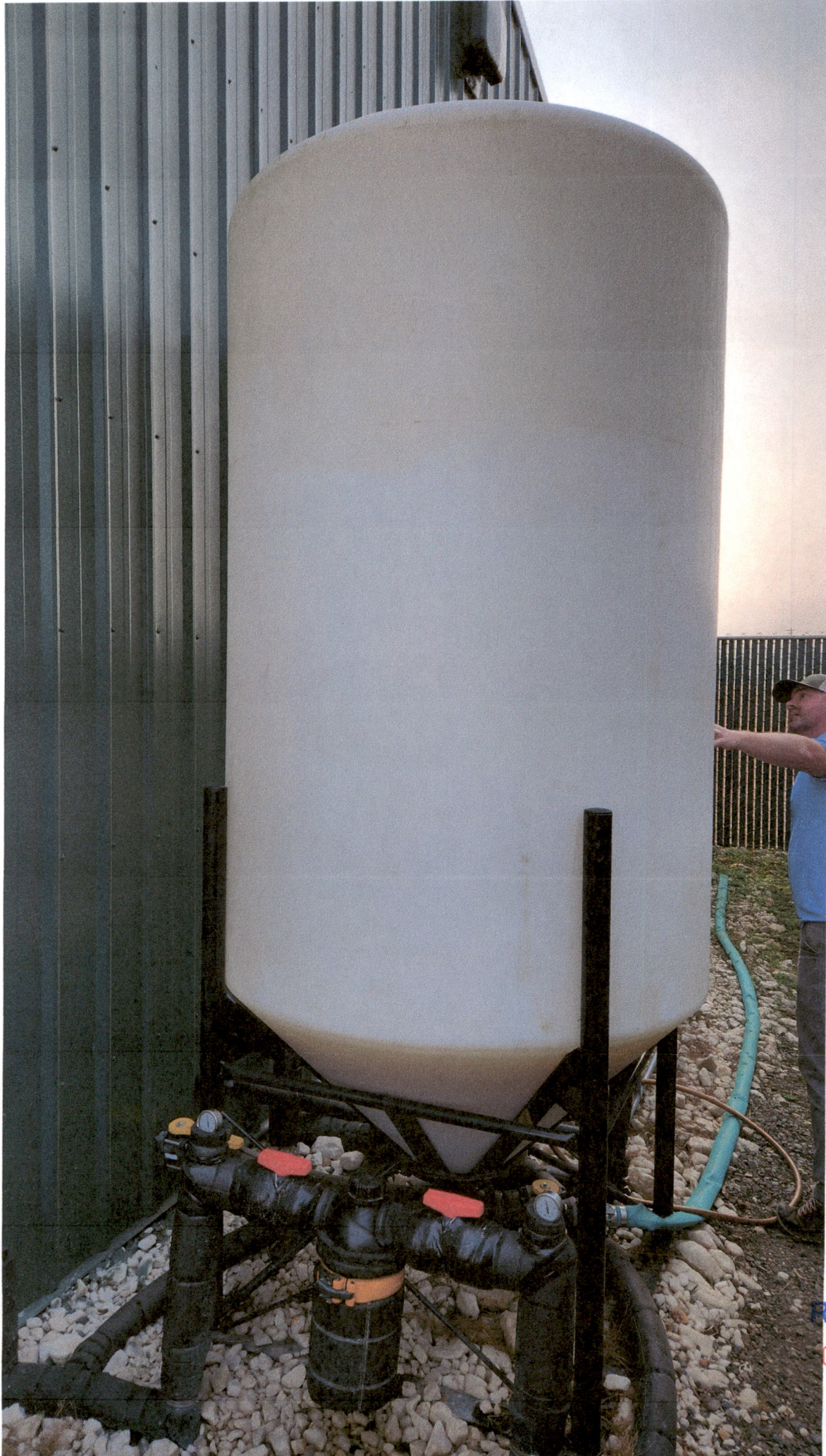
Farrers
COBU

F1 and F2
pump
tag

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10-10-22
on site

Fairrens
LOBU

750 gal.
storage tank
for F1, F2,
F3 groups

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10-10-22
onsite

Farreras COBU

straw pump
for hand
watering

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OWRD 26



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OCT 27 2022

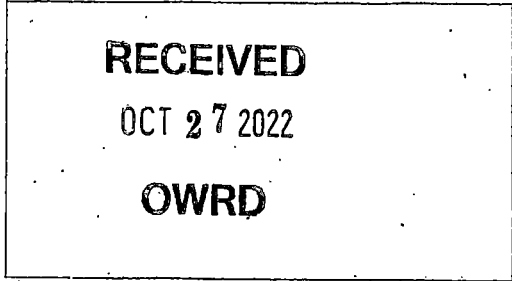
OWRD

10-10-22

on site

Furness
Coble

straw pump
for hand
watering



Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Java Properties OR 4 LLC
PO Box 385, Creswell, OR 97426

Transaction Type: COBU

Fees Received: \$ ~~COBU~~ 230.00

Cash Check: Check No. 2067

Name(s) on Check: Will McGill Surveying

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,
OWRD Customer Service Staff

Submission received by: Nante Luongo
(Name of OWRD staff)

Instructions for OWRD staff:

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Fold and put one copy of the Submission Receipt with check/cash into the Safe slot. Place the other copy of the Submission Receipt with submission (application/other document) in the top drawer of filing cabinet.