

## Application for a Permit to Use Ground Water

Please type or print in dark ink. If your application is found to be incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "n/a." Please read and refer to the instructions when completing your application. A summary of review criteria and procedures that are generally applicable to these applications is available at www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

	1. A	PPLICANT INFORMATION	<u> </u>	L <b>20</b> 2007
A. Individu	als		WATER R	ESOURCES D
Applicant:			SALE	M, OREGON
<b>4-11:11</b> -	First		Last	
dailing addr	ess:			
	City	State	Zip	
Phone:	Home	Work	Other	
Г				
Fax:		*E-Mail address:		<del></del>
B. Organiza	ations			
J				
Corporations,	associations, firms, partnership	s, joint stock companies, cooperatives,	public and municipal corporations)	
Name of orga	anization: Cascade Timbe	erlands (Oregon), LLC		
_	-		ary	
Name and tit	le of person applying:	Thomas M. Ringo, Assistant Secreta	ary	_
Name and tit	-	Thomas M. Ringo, Assistant Secreta	ary	
lame and tit	le of person applying:	Thomas M. Ringo, Assistant Secreta  SW Colorado, Suite 3  OR	97702	
lame and tit	le of person applying:	Thomas M. Ringo, Assistant Secreta SW Colorado, Suite 3		
Name and tit	le of person applying:	SW Colorado, Suite 3  OR  State	97702	
Name and tit Mailing addr	le of person applying:	SW Colorado, Suite 3  OR Sonte	97702 Zip	
Name and tit Mailing addr	le of person applying:	SW Colorado, Suite 3  OR  State	97702 Zip	

Last updated: 6/7/2005

Ground Water/1

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## RECEIVED 2. PROPERTY OWNERSHIP JUL 20 2007 Do you own all the land where you propose to divert, transport, and use water? WATER RESOURCES DEPT Yes (Skip to section 3 "Ground water Development.") SALEM, OREGON No (Please check the appropriate box below.) I have a recorded easement or written authorization permitting access. l do not currently have written authorization or easement permitting access. Written authorization or an easement is not necessary, because the only affected lands I do not own are state-owned submersible lands, and this application is for irrigated and/or domestic use only (ORS 274.040). You must provide the legal description of: (1) the property from which the water is to be diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used as depicted on the map. List the names and mailing addresses of all affected landowners. 3. GROUND WATER DEVELOPMENT A. Well Information Number of well(s): \_\_\_\_Up to ten wells Name of nearest surface water body: Little Deschutes River or Crescent Creek Distance from well(s) to nearest stream or lake: 1) Well #1 is approximately 3,700' from the Little Deschutes. 2) Well #2 - 4900' 3) Wells #3-#10: Greater than 1 Mile 4) If distance from surface water is less than one mile, indicate elevation difference between nearest surface water and well head. 1) Wells #1 & #2 are approximately 60 feet above the nearest reach of the Little Deschutes B. Well Characteristics Wells must be constructed according to standards set by the Department for the construction and maintenance of water wells. If the well is already constructed, please enclose a copy of the well constructor's log and the well ID number, if available, for each well with this application. Identify each well with a number corresponding to the wells designated on the map and

proceed to section 4 of the form. If the well has not been constructed, or if you do not have a well log, please complete the following:

Well(s) will be constructed by: A Certified Oregon Well Constructor - Not Yet Determined Address:

Completion date: Estimated within 5 years of the permit issuance.

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RECEIVED OVER THE COUNTER Please provide a description of your well development. (Attach additional sheets if needed.)

Well No.	Diameter	Type and size of casing	No. of feet of casing	Intervals casing is perforated (in feet)	Seal depth	Est. depth to water	Est. depth to water bearing stratum	Type of access port or measuring device	Total well depth
1-10	8"-18"	6"-16" Steel	400'-1000'	300'-1000'	50'-500'	300'-350'	300'-350'	Casing Vent	400'-1000'
								_	
								_	

Note: Well numbers in this listing must correspond to well locations(s) shown on accompanying map.

If well log is not available, or well is not yet constructed, you must provide: proposed total depth, depth of casing and seal, and the anticipated perforation and open intervals.

C. Artesian Flows					
If your water well is flowing artesian, describe your water control and conservation works:					
Based upon multiple well logs in the vicinity, artesian flow is not anticipated.					
4 WATER USE					

Please read the instruction booklet for more details on "type of use" definitions, how to express how much water you need and how to identify the water source you propose to use. You must fill out a supplemental form for some uses as they require specific information for that type of use.

## A. Type(s) of Use(s)

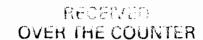
See list of beneficial uses provided in the instructions.

- If your proposed use is **domestic**, indicate the number of households to be supplied with water:
- If your proposed use is irrigation, please attach Form I
- If your proposed use is mining, attach Form R
- If your proposed use is municipal or quasi-municipal, attach Form M
- If your proposed use is commercial/industrial, attach Form Q

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## B. Amount of Water

Provide the production rate in gallons per minute (gpm) and the total annual amount of water you need from each well, from each source or aquifer, for each use. You do not need to provide source information if you are submitting a well log with your application.

Well No.	Source or aquifer	Type of use	Total rate of water requested (in gpm)	Total annual quantity (in gallons)	Production rate of well (in gpm)	
1-10	Unknown	Quasi-Municipal	250-2500	47mill-474mill	250-2500	
What is the	m Rate of Use Requestor maximum, instantaneous our application will be based	rate of water that will b	e used?	2500 gallons per	minute	
	time of year you propose	e to use the water: when water use would begin		Year Round arch 1-October 31.)		
number of a	be applying water to land cres where water will be should be consistent with your	applied or used:			REC	EIVED
(	,	77			JUL 2	
		5. WATER MANAGE	<u>CMENT</u>			
A. Diversion What equipm		np water from your well(	s)?		WATER RESOU SALEM, OI	REGON
☑ Pur	mp (give horsepower and	1 pump type):50 to 50	00 Horsepower S	Submersible or Tu	bine Pumps	
☐ Otl	ner means (describe):					
<b>B. Transpo</b> How will yo	rt ou transport water to you	place of use?				
Dit	ch or canal (give average	e width and depth):				
W	idth	Depth				
Is	the ditch or canal to be l	ined? Yes	☐ No			
<b>☑</b> Pip	e (give diameter and tota	al length):				
Di	iameter 6" to 18" Piping	Length App	roximately 160,	000 lineal feet.		
Oth	ner (describe)		_			

What equipment will you use to	apply water to your place of use? An	extensive underground community			
water distribution piping system wi	ll deliver domestic water throughout the p	roposed development.			
Irrigation or land application met	thod (check all that apply):				
Flood	High-pressure sprinkler	Low pressure sprinkler			
■ Drip	Water cannons	Center pivot system			
Hand lines	Wheel lines				
Siphon tubes or gated pipe	e with furrows				
Other, describe					
Distribution method					
Direct pipe from source	☐ In-line storage (tank or pond)	Open canal			
	nserve water? Why did you choose the using sprinkler irrigation rather than operate sheet.				
All water services will be metered.	A rate structure will be imposed to encour	rage conservation. Educational			
programs will further encourage cor	nservation. A water management and cons	servation plan is also expected to			
be a condition of approval.					
_	6. PROJECT SCHEDULE	<del>_</del>			
Indicate the anticipated dates that the fo completed, please indicate that date.	ollowing construction tasks should begin. If con	nstruction has already begun, or is			
Proposed date construction will b	pegin: Within 5 Years of Permit Issuance	e			
Proposed date construction will be completed: Phased through 2028					
Proposed date beneficial water use will begin: Within 5 Years of Permit Issuance					
	7. REMARKS				
If you would like to clarify any informat application question you are addressing	ion you have provided in the application, plea ç.	se do so here and reference the specific			
	<del>-</del>				
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The Department cannot process your application without accurate information showing the source of water and location of water use. You must include a map with this application form that clearly indicates the township, range, section, and quarter/quarter section of the proposed well location and place of use. The map must provide tax lot numbers. See the map guidelines sheet for detailed map specifications.

9.	SIGNATURE	

By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- · Evaluation of this application will be based on information provided in the application packet.
- · I cannot legally use water until the Water Resources Department issues a permit to me.
- · If I get a permit, I must not waste water.
- · If development of the water use is not according to the terms of the permit, the permit can be canceled.
- The water use must be compatible with local comprehensive land use plans.
- · Even if the Department issues a permit to me, I may have to stop using water to allow senior water right holders to get water they are entitled to, and

I swear that all information provided in this application is true and correct to the best of my knowledge:

Before you submit your application be sure you have.

Answered each question completely: Attached a legible map which includes township range quarter/quarter and aax (b) numbers 4 5 2 4 included a limit (se information) on governor in shire spired by a local official!

Included the legal description of all the impacts any olved with his application (Yourmay supply a copy of the deep land sales contract), or (the insurance policy, to meet inspecting mental). included a caeck payable to the Oregon. Water/Resource for the appropriate amount. The Department's fee achedule can be found at www.wird-state.or.us or call (503) 986-0900 at 44

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