

October 31, 2007

Oregon Water Resources Department 725 Summer Street NE, Suite A Salem Oregon 97301-1271

RE: Application for a Permit to Use Ground Water in the name of Medelez Trucking, LLC

#### Dear Sir/Madame:

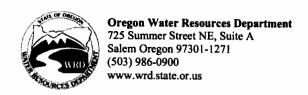
Enclosed is an Application for a Permit to Use Ground Water in the name of Medelez Trucking, LLC along with a completed Form I and Land Use Information Form, a map, the well log for a domestic well on the property, a legal description of the property, and a check. If there are any questions regarding this application please direct them to me, Paul Wattenburger, at IRZ Consulting, LLC. Thank you.

Sincerely,

Paul Wattenburger, PE, CWRE

RECEIVED

MAY 2 7 2008
WATER RESOURCES DEPT.
SALEM, OREGON



### 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.

|               | <u> </u>                            | APPLICANT INFORMATION                         |                                       |
|---------------|-------------------------------------|---|---------------------------------------|
| A. Individ    |                                     |   | _                                     |
| Applicant:    | Plat                                |   | the second                            |
| rippiiounii   | Plat                                |   |                                       |
|               | lress:                              |   |                                       |
|               |                                     |   |                                       |
|               | City                                | State   | - Zip                                 |
| Phone:        | Home                                |   | were a                                |
|               | Home                                | Work  | Other                                 |
| *Fax:         |                                     | *E-Mail address:                              |                                       |
|               |                                     |   |                                       |
| B. Organiz    | ations                              |   |                                       |
| (Carmanutiana |                                     |   | Urana Jana arta Jana arta A           |
| (Corporations | i, associations, jirms, partnershij | ips, joint stock companies, cooperatives, pul | ouc and municipal corporations)       |
| Name of org   | ganization: Medelez Truc            | cking, LLC                                    |                                       |
| NT 14         | 41 - 6 1 - 1                        | Kalla Madalas Osman                           |                                       |
| Name and ti   | tile of person applying:            | Kelly Medelez, Owner                          | <del></del>                           |
| Mailing add   | ress of organization:1              | 190 East Punkin Center Road                   |                                       |
|               | Hermiston                           | OR  | 97838                                 |
|               | City                                | Sinke   | 7/036<br>Zp                           |
| Phone:        | (541) 567-4098                      | (541) 571-0938                                |                                       |
|               | Day                                 | Everning                                      |                                       |
| *Fax:         | (541) 564-9726                      | *E-Mail address:                              |                                       |
| * Optional i  | information                         |   | RECEIVED                              |
|               |                                     |   | MAY 27 2008                           |
|               |                                     |   | WATER RESOURCES DEPT<br>SALEM, OREGON |
|               |                                     | For Department Use                            |                                       |
| Арр           | . No                                | Permit No                                     | Date                                  |
|               |                                     |   |                                       |

| 2. I ROI ERI I OWNE  | <u>RSHIF</u>   |
|--|--|
| Do you own all the land where you propose to divert, transpor  | t, and use water?  |
| ✓ Yes (Skip to section 3 "Ground water Developmen  | ut.")  |
| No (Please check the appropriate box below.)   |  |
| I have a recorded easement or written authorized.  | zation permitting access.  |
| ☐ I do not currently have written authorization of   | or easement permitting access.   |
| ☐ Written authorization or an easement is not no lands I do not own are state-owned submersib irrigated and/or domestic use only (ORS 274.6)   | le lands, and this application is for  |
| You must provide the legal description of: (1) the property from property crossed by the proposed ditch, canal or other work, as be used as depicted on the map.   |  |
| List the names and mailing addresses of all affected landowner   | rs.  |
| 2 CROUND WATER DEV   | VELORMENT DEOCH VED  |
| 3. GROUND WATER DEV  | RECEIVED   |
| A. Well Information  Number of well(s): One New Well   | MAY 27 2008  |
| Name of nearest surface water body:  | WATER RESOURCES DEPT. SALEM, OREGON  |
| Distance from well(s) to nearest stream or lake: 1) 2 miles from   | ,  |
| 2) 3)  | 4)   |
| If distance from surface water is less than one mile, indicate el water and well head. 1)  |  |
| 2)3)   | 4)   |
| B. Well Characteristics Wells must be constructed according to standards set by the Department fo If the well is already constructed, please enclose a copy of the well construct each well with this application. Identify each well with a number correspor proceed to section 4 of the form. If the well has not been constructed, or if y following: | ctor's log and the well ID number, if available, for<br>nding to the wells designated on the map and |
| Well(s) will be constructed by: Larry Burd (541) 567-3088  |  |
| Address:   |  |
| Hermiston, OR 97838  |  |
| Completion date: Existing (Domestic) Well (1) - May 27th, 200  | 3; New Well to be constructed.   |

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

| Well<br>No. | Diameter    | Type and size of casing | No. of feet<br>of casing | Intervals<br>casing is<br>perforated<br>(in feet) | Seal depth | Est. depth<br>to water | Est. depth<br>to water<br>bearing<br>stratum | Type of access<br>port or<br>measuring<br>device | Total well<br>depth |
|-------------|-------------|-------------------------|--------------------------|---|------------|------------------------|--|--|---------------------|
| 1           | 10" to 198' | 8 inch welded steel     | 200                      | N/A   | 198'       | 109'                   | 335'   | Top Cover  |                     |
| 1           | 8" to 345'  |                         |                          |   |            |                        |  |  | 345'                |
| New         | 10" to 400' | 10 in welded steel      | ~200                     | N/A   | ~200'      | 110'                   | 335'   | 2" Plug  | 400'                |
|             |             |                         |                          |   |            |                        |  |  |                     |

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.

| ntrol and conservation works:         |
|---------------------------------------|
|                                       |
| RECEIVED                              |
| HLOLIVLD                              |
| MAY 2 7 2008                          |
| WATER RESOURCES DEPT<br>SALEM, OREGON |
|                                       |
|                                       |

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.

4. WATER USE

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

C. Artesian Flows

See list of beneficial uses provided in the instructions.

- 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

### 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<br>No. | Source or aquifer   | Type of use | Total rate of<br>water requested<br>(in gpm) | Total annual quantity (in gallons) | Production rate of well (in gpm) |
|-------------|---------------------|-------------|--|------------------------------------|----------------------------------|
| Existing    | See Well Log        | Domestic    |  |                                    |                                  |
| New         | Not Yet Constructed | Irrigation  | 405  | 43,980,170                         | -                                |
|             |                     |             |  | (135 ac-ft)                        |                                  |
|             |                     |             |  |                                    |                                  |

| What is the                              | m Rate of Use Requeste<br>maximum, instantaneous<br>our application will be based       | rate of water that will b                         | oe used?                 | 450 gpm                                  |  |   |
|--|---|---|--------------------------|--|--|---|
| D. Period of Indicate the (For seasonal) | f Use<br>time of year you propose<br>uses like irrigation give dates                    | e to use the water:<br>when water use would begin | Maro<br>and end, e.g. Ma | ch 1 - October 31<br>arch 1-October 31.) |  |   |
| number of a                              | ne applying water to land<br>cres where water will be<br>should be consistent with your | applied or used:                                  |                          | 14.99 acres                              | RECEIVE  | D |
|  |   | 5. WATER MANAGE                                   | EMENT                    | _  | MAY 27 2008<br>ER RESCONCES D<br>SALEM, OREGON |   |
| A. Diversion What equipments             | n<br>ment will you use to pum   | p water from your well(                           | (s)?                     |  | SALEM, UREGUN                                  |   |
| <b>☑</b> Pur                             | mp (give horsepower and   | l pump type):                                     | Estimated to n           | eed a 50 hp - Turb                       | oine   |   |
| Oth                                      | ner means (describe):   | <del></del>                                       |                          |  |  |   |
| <b>B. Transpo</b> r<br>How will yo       | rt<br>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                     |  |  |   |
| ☑ Pip                                    | e (give diameter and tota   | al length):                                       |                          |  |  |   |
| D  | iameter 6 inch  | Length _ ~1,2                                     | 200 feet                 |  |  |   |
| Oth                                      | ner (describe)  |   |                          |  |  |   |

| C. Application/Distribution Me   | et <b>hod</b><br>apply water to your place of use? <u> </u>                            | prinklers located along buried PVC   |
|--|--|--|
| laterals.  | apply water to your place of use:  | and to tour of the same of the |
| Imination on local continuity  | 4. 17.11. 11.1   |  |
| Irrigation or land application me  |  |  |
| ☐ 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  | <del>_</del>   |  |
| Distribution method  |  |  |
| Direct pipe from source  | ☐ In-line storage (tank or pond)   | Open canal   |
|  | nserve water? Why did you choose using sprinkler irrigation rather that eparate sheet. |  |
| The solid-set irrigation system will   | be designed to achieve a highly uniform  | application of water. Irrigation sets will   |
| be scheduled based on crop water re  | equirements available from the Northwes  | st Irrigation Network. A solid-set system  |
| is the most effective method to irrig  | ate the size and shape of area for pasture   | e/alfalfa.   |
| _  | 6. PROJECT SCHEDULE  |  |
| Indicate the anticipated dates that the fo<br>completed, please indicate that date.  | ollowing construction tasks should begin. If a   | construction has already begun, or is  |
| Proposed date construction will b  | pegin: September 2008  | RECEIVED   |
| Proposed date construction will b  | pe completed: October 2008   | MAY 2 7 2008   |
| Proposed date beneficial water us  | se will begin: March 2009  | WATER RESOURCES DEPT.<br>SALEM, OREGON   |
|  | 7. REMARKS   |  |
|  |  | •  |
| If you would like to clarify any informat<br>application question you are addressing | tion you have provided in the application, pl<br>3.                                    | ease do so here and reference the specific   |
| The proposed dates are dependent of  | n the issuing of a permit.   |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

#### 8. MAP REQUIREMENTS

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:

Signature of Applicant (If more than one applicant, all must sign.)

5/9/0 F Date

Before you submit your application be sure you have:

- Answered each question completely.
- Attached a legible map which includes township, range, section, quarter/quarter and tax lot number.
- Included a Land Use Information Form or receipt stub signed by a local official.
- Included the legal description of all the property involved with this
  application. You may supply a copy of the deed, land sales contract,
  or title insurance policy, to meet this requirement.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount. The Department's fee schedule can be found at www.wrd.state.or.us or call (503) 986-0900.

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MAY 27 2008

WATER HEADDINGS DEPT. SALEM, OREGON



### Oregon Water Resources Department

# FORM I FOR IRRIGATION WATER USE

| 1. Please indicate whether                       | you are requesting a pri                                   | mary or suppl           | emental irri    | gation w    | ater right.                                  |
|--|--|-------------------------|-----------------|-------------|--|
| 면 Primary 🗅 Su                                   | pplemental If supplemental, pleas will be irrigated for ea |                         |                 | acres th    | at   |
|  | Primary:   | 44.99                   | Acres           |             |  |
|  | Secondary:   |                         | Acres           |             |  |
|  | List the permit or cert<br>of the primary water r          |                         | r<br>No         |             | _  |
| Please list the anticipated partial season:      | d crops you will grow an                                   | nd whether you          | u will be irriç | gating the  | em for a full or                             |
| 1Pasture/Alfalfa                                 | 🗹 Full seasor  | n 🚨 Partial             | season (fr      | om:         | to)  |
| 2  | □ Full seasor  | n 🚨 Partial             | season (fr      | om:         | to)  |
| 3  | 🗀 Full seasor  | n 🔾 Partial             | season (fr      | om:         | to)  |
| 4  | □ Full seasor  | n 🔾 Partial             | season (fr      | om:         | to)  |
| 3. Indicate the maximum to                       | tal number of acre-feet y                                  | 135 acre                | e-feet          |             |  |
| 4. How will you schedule yo twice a week, daily? | our applications of water                                  | ? Will you be           | applying w      | ater in th  | _  |
| <ul><li>Daily during dayt</li></ul>              | me hours   | ☐ Daily duri            | ng nighttime    | e hours     | RECEIV                                       |
| Two or three time<br>during daytime              | s weekly   | ☐ Two or the during nig |                 | eekly \     | MAY 27 20<br>NATER RESOURCES<br>SALEM, OREGO |
| Weekly, during da                                | aytime hours   | ☐ Weekly, d             | uring nightt    |             |  |
| M Other explain: Two                             | 12-hr sets daily during peak                               | use periods cov         | ering the area  | in 5 to 7 d | avs.   |

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

Umat. 54837

| (WELL I.D.)# L 62828  |  |
|-----------------------|--|
| (START CARD) # 155611 |  |

| Instructions fo    | or comp        | leting this re  | eport are on    | the las  | t page of this form.  |   | _               |               |                     |   |                        |
|--------------------|----------------|-----------------|-----------------|----------|-----------------------|---|-----------------|---------------|---------------------|---|------------------------|
| (1) OWNER:         |                |                 | v               | Vell Nu  | mber                  | (9) LOCATION OF                                       | WELL by         | legal desc    | ription:            |   |                        |
| Name MEDELEZ       | Z, KEL         | LY              |                 |          |                       | County UMATILL  | <u>A</u> Latitu | ıde           | Lon                 | gitude                                  |                        |
| Address 1264 EA    | ST PU          | NKIN CENT       | TER ROAD        |          |                       | Township 4  | N               | Range_2       | 28                  | _E                                      | WM.                    |
| City HERMISTO      | N              |                 | State OR        |          | Zip 97838             | Section 02  | NE              | 1/4 <u> P</u> | W W                 | 1/4                                     |                        |
| (2) TYPE OF V      | work           | (               |                 |          |                       | Tax Lot _100  | .ot1o           | Block         | Su                  | bdivision                               |                        |
|                    |                |                 | ation (repair/  | recondi  | tion) Abandonment     | Street Address of We                                  | I (or neares    | address)      | 800 E3              | ST PL                                   | UMU                    |
| (3) DRILL ME       |                |                 |                 |          |                       | CENTER  |                 |               |                     |   |                        |
| Rotary Air         |                |                 | Cable           | ☐ Au     | uer                   | (10) STATIC WATE                                      |                 |               |                     |   |                        |
| Other              |                | ,               | _               |          | -                     | 109 ft. bel   | ow land sur     | facc.         |                     | Date 5-28                               | -03                    |
| 4) PROPOSE         | D USF          | <u> </u>        |                 |          |                       | Artesian pressure 88                                  |                 | lb. per squa  |                     | Date 5-28                               |                        |
|                    |                |                 | Industrial      | П        | Irrigation            | (11) WATER BEAR                                       |                 |               |                     | *************************************** |                        |
|                    | Inje           |                 | Livestock       |          | Other                 | \   |                 |               |                     |   |                        |
| (5) BORE HO        |                |                 |                 |          |                       | Depth at which water wa                               | s first found   | 175' SUR      | FACE H20-           | -315 BAS                                | SALT H20               |
|                    |                |                 |                 | h of Co  | ompleted Well 345 ft. |   |                 |               |                     |   |                        |
|                    |                |                 |                 |          | Amount                | From  |                 | To            | Estimated           | I Flow Rat                              | e SW                   |
| HOLE               |                |                 | SEAL            | <u> </u> |                       | 175 SURFACE H20                                       | 188             |               | 20GPM 5-1           |   |                        |
| Diameter From      | To             | Materi          |                 | To       | Sacks or pounds       | 315 BASALT H20  | 335             |               | 75 GPM 0 F          | PM NO3                                  | 109                    |
|                    |                |                 |                 |          |                       |   |                 |               |                     |   |                        |
| 12 INCH 0          | 18             | BENTON          | TE 0            | 18       | 15 SACKS              |   |                 |               |                     |   |                        |
| 10 INCH 18         | 198            | PORT CE         |                 | 198      | 6 SACKS               |   |                 |               |                     |   |                        |
| 7 1/2 INC 198      | 345            | - U.I. UE       |                 | +.50     |                       | 44. 1107 : : : : : :                                  |                 |               |                     |   |                        |
| How was seal pla   |                | Method          |                 | 112      | C D E                 | (12) WELL LOG:  | d Elevation     | 520           |                     |   |                        |
| _ ·                | ccu.           | victiou         | <b>□^</b> □     | JB       |                       | Groun   | d Elevation     |               |                     |   |                        |
|                    |                | Α 10            |                 | Mata     | rial                  | Materi  | al .            |               | From                | То                                      | SWL                    |
|                    |                |                 |                 |          |                       | SAND  | <u></u>         |               | 0                   | 175                                     | 3#1                    |
| Gravel placed fro  |                |                 | ft.             | Sizc     | of gravel             |   |                 |               | 175                 |   | 70                     |
| (6) CASING/L       | INER           | :               |                 |          |                       | GRAVEL  |                 |               |                     | 188                                     | <del></del>            |
| Diameter           | 1              | 1 1             | Gauge Steel     | Plast    | _                     | BLACK BASALT  |                 |               | 188                 | 315                                     | NONE                   |
| Casing: 8 INCH     | +2             | 198 .           | 25              |          |                       | BLACK SCORIA  |                 |               | 315                 | 335                                     | 109                    |
|                    |                |                 |                 |          |                       | BLACK BASALT  | - IV /F-        | _             | 335                 | 345                                     |                        |
|                    |                |                 |                 |          |                       |   |                 | <u> </u>      |                     |   |                        |
|                    |                |                 |                 |          |                       |   |                 |               |                     |   |                        |
| Liner:             |                |                 |                 |          |                       | MAY 2   | 7 2008          |               |                     |   |                        |
|                    |                |                 |                 |          |                       |   | •               |               |                     |   |                        |
| Final location of  | shoc(s)        | TUBEX S         | SHOE @          | 198      |                       | WATER RESO  | URGES D         | EPT.          |                     |   |                        |
| (7) PERFORA        |                |                 |                 |          | <u></u>               | SALEM,  | DHEGUN          |               |                     |   |                        |
| Perforation        |                | Method          |                 |          |                       |   |                 |               | REC                 | TIV                                     | /En                    |
| Screens            |                | Туре            |                 |          | laterial              | RECE  | VER             |               | 115                 | <del>∤ / ∨</del>                        |                        |
|                    | Sk             | ot              |                 | Tele/p   | oipe                  | U UECE  | V Gill          |               |                     |   | 1 -                    |
| From To            | siz            | e "Number       | Diameter        | ske      | e Casing Liner        | JUN -   | 4 2003          | - !           | JUL                 | 172                                     | 003                    |
| N/A                | $\top$         |                 |                 |          |                       | ] 3011  | 1 2000          |               |                     | <del></del>                             |                        |
| -                  | +              |                 |                 |          |                       | NATER RESOL   | JRCES (         | )FP)          | WATER RE            | SOURCE                                  | ES DEPT                |
|                    |                |                 |                 | +        |                       | SALEM, C  | REGON           |               | SALEN               | , OREC                                  | ON                     |
|                    |                |                 |                 |          | _                     |   |                 |               |                     |   |                        |
|                    |                |                 |                 |          |                       | <u> </u>  |                 |               |                     |   |                        |
| er well tec        | TC. I          | 41_1            |                 | :- 1 b   |                       | D   |                 |               | 5.27. <i>(</i>      | 12                                      |                        |
| 8) WELL TES        | 913: r         | vinimum (       | esting time     | 15 I N   | pur                   | Date started 5-23-03                                  | •               |               | leted <b>5-27-0</b> | <u> </u>                                |                        |
|                    | _              |                 |                 |          | Flowing               | (unbonded) Water Well                                 |                 |               |                     |   |                        |
| Pump               | -              | Bailer          | Air             |          | Artesian              | I certify that the work<br>of this well is in complia | I performed     | i on the cons | struction, after    | ation, or al                            | pandonmer<br>standards |
| Yield gal/min      | D              | rawdown         | Drill ste       | m at     | Time                  | Materials used and inform                             |                 |               |                     |   |                        |
| 75 GPM             |                |                 | 345             |          | l hr.                 | and belief.   | 91              | //            |                     |   |                        |
| 75 GPM             |                |                 | 225             |          |                       | 116   | -               |               | WWC Nur             |   |                        |
| 20 GPM             |                |                 | 160             |          |                       | Signed  | I ful           | 1             |                     | Date 5-2                                | 7-03                   |
| Temperature of w   | ater <b>60</b> |                 | Depth Artesia   | an Flov  | Found <b>335</b>      | (honded) Water Well Co                                | onstructor (    | Certification | n:                  |   |                        |
| Was a water analy  |                |                 | es By whon      | 1        |                       | Laccept responsibility                                |                 |               |                     |   |                        |
| Did any strata cor | ntain wa       | iter not suitab | ole for intende | ed use?  | Too little            | performed on this well de                             | aring the cor   | istruction da | ites reported al    | bovc. All                               | work                   |
| Salty Mu           | _              |                 | _               | Other    |                       | performed during this tin<br>construction standards.  |                 |               |                     |   |                        |
| Depth of strata:   |                | <b>.,</b>       |                 |          |                       | l ,   | •               |               | WWC Nur             |   |                        |
|                    |                |                 |                 |          |                       | Signed Jan  | 1 BA            | الم           |                     | Date 5-2                                | 7-03                   |



### Water Resources Department

North Mall Office Building 725 Summer Street NE, Suite A Salem, OR 97301-1266 503-986-0900 FAX 503-986-0904

### NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdictions where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you.

### NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan.

Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan.

Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

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WATER RESOURCES DEPT.
SALEM, OREGON



## Oregon Water Resources Department <u>Land Use Information Form</u>

THIS FORM IS NOT REQUIRED IF: 1) water is to be diverted, conveyed, and/or used only on federal lands; or 2) the application is for a water-right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and all of the following apply: a) only the place of use is proposed for change, b) there are no structural changes, c) the use of water is for irrigation, and d) the use is located in an irrigation district or exclusive farm-use zone.

| N. ( : 1 !                                 | Applicant Name: Medelez Trucking, LLC (Kelly Medelez Owner) |   |                              |  |  |   |   |  |  |  |  |
|--|---|---|------------------------------|--|--|---|---|--|--|--|--|
| Mailing A                                  | Address:  |   | 1190 East Punkin Center Road |  |  |   |   |  |  |  |  |
| City:                                      |   | Hermis  | ton                          | State: _                                   | OR Zip: 97   | 838 Day Phone:  | (541) 567-4098                                |  |  |  |  |
| and and                                    | Locatio   | <u>1</u>  |                              |  | laim. FYes FNo                                       | diverted (taken from its  | source) conveyed                              |  |  |  |  |
| sported), o                                | r used. A   | pplicant  | s for mu                     | nicipal use,                               | or irrigation uses within<br>rmation requested below | irrigation districts may  |   |  |  |  |  |
| Township                                   | Range   | Section   | 1/4 1/4                      | Tax Lot #                                  | Plan Designation (e.g.<br>Rural Residential/RR-5)    | Water to be:  | Proposed<br>Land Use                          |  |  |  |  |
| 4N   | 28E   | 2   | NW NE                        | 200  | FU-10  | ☐ Diverted ☐ Conveyed   | Used Irrigation                               |  |  |  |  |
| 4N   | 28E   | 2   | NW NE                        | 201  | FU-10  | ☐ Diverted ☑ Conveyed   | irrigation                                    |  |  |  |  |
| 4N   | 28E   | 2   | NW NE                        | 300  | FU-10  | ⊌ Diverted ⊌ Conveyed   | migation                                      |  |  |  |  |
|  |   |   |                              |  |  | ☐ Diverted ☐ Conveyed   | □ Used  |  |  |  |  |
| Description e of applica                   |   |   |                              | ater Resour                                | rces Department:                                     |   | AY 27 2008<br>RESOURCES DEPT.<br>ALEM, OREGON |  |  |  |  |
|  | it to Use ation of (  |   |                              |  | ater-Right Transfer<br>imited Water Use Licens       | ☐ Exchange of Wa  | iter  |  |  |  |  |
|  | it Amend  |   | Ground                       |  | stration Modification                                | se  |   |  |  |  |  |
| □ Perm                                     |   | ment or   |                              |  | stration Modification                                | vater (name)  |   |  |  |  |  |
| ☐ Perm                                     | r: 🗆 Res  | lment or  | ond [                        | Water Regi<br>☑ Ground W                   | stration Modification                                | Vater (name)  |   |  |  |  |  |
| ☐ Perm                                     | r: □ Restity of water:                                      | lment or  | ond Ged:                     | Water Regi<br>☑ Ground W                   | stration Modification  /ater                         | Vater (name)<br>ond □ gallons per mi                              | nute  |  |  |  |  |
| ☐ Perm rce of water mated quan nded use of | r:  | lment or<br>ervoir/Po<br>ater needo<br>☑ Irrigati<br>☐ Munici | ond Ged:on Con Copal Co      | Water Regi Ground W  135 Commerce Quasi-mu | stration Modification  /ater                         | Vater (name)<br>ond □ gallons per mi<br>□ Domestic for<br>□ Other | nute ☑ acre-feet<br>household(s)              |  |  |  |  |

Receipt for Request for Land Use Information

State of Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, OR 97301-1266

## For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form.

This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

| Please check th | e appropriate b | ox below and | provide the | requested information |
|-----------------|-----------------|--------------|-------------|-----------------------|
|                 |                 |              |             |                       |

|   | approvals as listed in the table b  | osed water uses (including proposed of elow. (Please attach documentation of Action/land-use decision and according to the electric of the ele | of applicable                                      | land-use approvals which                                |
|---|---|--|--|---|
|   |   | Cite Most Significant, Applicable Plan Policies & Ordinance Section References   |  |   |
|   | 1 / A   | IVIA .   | ☐ Obtained   | ☐ Being pursued   |
|   | 10/4  | <i>N</i> /1  | ☐ Denied   | □ Not being pursued                                     |
|   |   |  | ☐ Obtained   | ☐ Being pursued   |
|   |   |  | ☐ Denied ☐ Obtained                                | ☐ Not being pursued ☐ Being pursued                     |
|   |   |  | ☐ Denied   | ☐ Not being pursued                                     |
|   |   |  | □ Obtained   | ☐ Being pursued   |
|   |   |  | □ Denied   | ☐ Not being pursued                                     |
|   |   |  | ☐ Obtained   | ☐ Being pursued   |
|   |   |  | ☐ Denied   | ☐ Not being pursued                                     |
|   |   |  |  |   |
| ame:                                      | JR look   | Title: 435   | 1. Planning<br>8.6251                              | フ <u>ロ</u> :<br>_ Date: _ 5・よ1・0 3                      |
| gnature:<br>overnme                       | Ent Entity:UM-\limits !!  | )  |  |   |
| o <b>te to lo</b><br>you sign<br>and Use  | ocal government representative<br>in the receipt, you will have 30 da<br>Information Form or WRD may<br>prehensive plans.         | : Please complete this form or sign t<br>ys from the Water Resources Departs<br>presume the land use associated with<br>t for Request for Land Use Ir  | he receipt bel<br>ment's notice o<br>the proposed  | ow and return it to the ap<br>date to return the comple |
| te to lo<br>you sign<br>nd Use<br>al comp | ocal government representative<br>in the receipt, you will have 30 da<br>Information Form or WRD may<br>prehensive plans.  Receip | : Please complete this form or sign t<br>ys from the Water Resources Departi<br>presume the land use associated with   | he receipt bel<br>ment's notice of<br>the proposed | ow and return it to the ap<br>date to return the comple |

\_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_