

City of Sisters

May 21, 2008

Mr. Herb Mosgar
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301

Subject: Application for the Use of Ground Water – City of Sisters

Dear Mr. Mosgar:

Enclosed please find an Application for a Permit to Use Ground Water and the required attachments filed on behalf of the City of Sisters. I have also enclosed a check for the amount of \$1,700 for the application fees. The application fees were computed as follows:

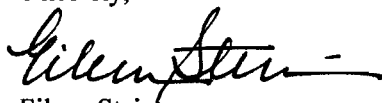
- Base Application Fee: - \$500
- Fee for First cfs: - \$200
- Fee for each additional cfs - \$100
- Fee for each additional POA (three) - \$600
- Permit Recording Fee - \$ 300

The application requests the use of 2.0 cfs of ground water for municipal use within the City of Sisters Water Supply Service Area to meet the City's projected future peak season water demands over the next 20 years. The application proposes to appropriate ground water at a rate not to exceed a total of 2.0 cfs from any combination of the three existing City of Sisters' wells and a proposed fourth City well, to be constructed in the future. This combination of points of appropriation will allow the City to provide uninterrupted supply to the community while also conducting repairs on one or more wells at the same time. To maximize flexibility, the application requests that the use be authorized year-round.

The application also requests that the total volume of water be limited to no more than 604 acre-feet annually. The City of Sisters is aware of the Deschutes Basin Mitigation Program requirements and upon receiving the Department's Initial Review will be prepared to submit an incremental development plan.

Adam Sussman of GSI Water Solutions, Inc., is an authorized agent for the City of Sisters and should be copied on all correspondence associated with this application. Please do not hesitate to call if you have any questions or need additional information.

Sincerely,



Eileen Stein
City Manager

Enclosures

Cc: Adam Sussman, GSI

520 E. Cascade Ave. ☐ P. O. Box 39, Sisters, OR 97759 ☐ (541) 549-6022 ☐ Fax (541) 549-0561

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SALEM, OREGON



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301-1271
 (503) 986-0900
 www.wrd.state.or.us

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. APPLICANT INFORMATION

A. Individuals

Applicant: _____
First Last

Mailing address: _____

City State Zip

Phone: _____
Home Work Other

*Fax: _____ *E-Mail address: _____

B. Organizations

(Corporations, associations, firms, partnerships, joint stock companies, cooperatives, public and municipal corporations)

Name of organization: City of Sisters

Name and title of person applying: Eileen Stein - City Manager

Mailing address of organization: P.O. Box 39

Sisters OR 97759
City State Zip

Phone: (541) 549-6022
Day Evening

*Fax: (541) 549-0561 *E-Mail address: estein@ci.sisters.or.us

* Optional information

For Department Use		
App. No. _____	Permit No. _____	Date _____

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2. PROPERTY OWNERSHIP

Do you own all the land where you propose to divert, transport, and use water?

Yes (Please check appropriate box below then skip to section 3 ("Ground water Development"))

There are no encumbrances

This land is encumbered by easements, rights of way, roads or other encumbrances (please provide a copy of the recorded deed(s))

No (Please check the appropriate box below.)

I have a recorded easement or written authorization permitting access.

I 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.

- Deschutes County, 117 NW Lafayette Ave., Bend, OR 97701
- Well #1 - Dorro C. Sokol, PO Box 969, Sisters, OR 97759
- Well#2 - Sisters School District #6, 115 N. Locust St., Sisters, OR 97759
- Well#3 - Dutch Pacific Properties LP, P.O Box 3500, PMB 303, Sisters OR 97759
- Well #4 - on City owned land

3. GROUND WATER DEVELOPMENT

A. Well Information

Number of well(s): 4

Name of nearest surface water body: Whychus Creek

Distance from well(s) to nearest stream or lake: 1) less than 1/4 mile

2) ~ 2.5 miles 3) ~ 1 mile 4) ~ 1/2 mile

If distance from surface water is less than one mile, indicate elevation difference between nearest surface water and well head. 1) ~50 feet

2) n/a 3) n/a 4) ~50 feet

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: TBD; a licensed and bonded well constructor

Address: _____

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Completion date: Wells 1, 2 and 3 are complete, Well 4 will be developed in the future.

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	**See attached well logs**								
2	**See attached well logs**								
3	**See attached well logs**								
4	20"-16"	welded steel, 16"	~200'	188'-268'	~200'	~75'	120'-300'	access port or air line	~300'

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:

n/a

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	Deschutes Basin aquifer	MU	898*	197 MG*	~1,600
2	Deschutes Basin aquifer	MU	898*	197 MG*	~1,500
3	Deschutes Basin aquifer	MU	898*	197 MG*	~1,550
4	Deschutes Basin aquifer	MU	898*	197 MG*	~1,500

*NOTE: Refer to comments under Section 7. Remarks.

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 2.0 cfs or 898 gpm
(The fees for your application will be based on this amount.)

D. Period of Use

Indicate the time of year you propose to use the water: January 1 - December 31
(For seasonal uses like irrigation give dates when water use would begin and end, e.g. March 1–October 31.)

E. Acreage

If you will be applying water to land, please give the total number of acres where water will be applied or used: n/a
(This number should be consistent with your application map.)

5. WATER MANAGEMENT

A. Diversion

What equipment will you use to pump water from your well(s)?

- Pump (give horsepower and pump type): Wells #1-#2; 75hp line shaft turbine,
- Other means (describe): (cont. from above) Wells #3-#4; 150hp line shaft turbine

B. Transport

How will you transport water to your place of use?

- Ditch or canal (give average width and depth):
Width _____ Depth _____
Is the ditch or canal to be lined? Yes No
- Pipe (give diameter and total length):
Diameter 4" to 12" Length ~31 miles of pipe in municipal system
- Other (describe) _____

Ground Water/4

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C. Application/Distribution Method

What equipment will you use to apply water to your place of use? This is a municipal use right, water will be delivered to customers at metered connections; water will be used for both indoor and outdoor purposes.

Irrigation or land application method (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 with furrows
- Other, describe Outdoor municipal use could be applied by in-ground sprinklers, garden hoses, etc.

Distribution method

- Direct pipe from source
- In-line storage (tank or pond)
- Open canal

D. Conservation

What methods will you use to conserve water? Why did you choose this distribution or application method? For example, if you are using sprinkler irrigation rather than drip irrigation, explain. If you need additional space, attach a separate sheet.

The City is working on reducing their unaccounted for water, conducting annual water audits, and is participating in a regional water conservation group, and educating customers about water conservation tips for their homes. The City will be required to submit a WMCP upon approval of the permit.

6. PROJECT SCHEDULE

Indicate the anticipated dates that the following construction tasks should begin. If construction has already begun, or is completed, please indicate that date.

Proposed date construction will begin: within 20 years of permit issuance

Proposed date construction will be completed: within 20 years of permit issuance

Proposed date beneficial water use will begin: incrementally, w/full beneficial use within 20 years of permit issuance

7. REMARKS

If you would like to clarify any information you have provided in the application, please do so here and reference the specific application question you are addressing.

*Use of water under this permit, at the four wells combined, will not exceed an instantaneous rate of 898 gpm (2.0 cfs) and a total annual quantity of 197 MG (604.6 acre-feet). The annual volume for this permit is estimated to meet the City's future MDD during the peak demand season until 2028. To maximize flexibility, the requested use is year-round. The requested rate is 1.29 mgd, the difference between the quantity of water authorized by existing groundwater rights, (3.31 mgd) and the amount of water needed to meet future MDD (4.6 mgd).

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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:

Gilman F. Steen

5-21-08

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

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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Oregon Water Resources Department

FORM M

FOR MUNICIPAL AND QUASI MUNICIPAL WATER SUPPLIES

Unless otherwise noted, water use information should be in acre-feet per year (AFY).
1 acre-foot is equal to 325,851 gallons.

Background Information

Name of water supplier: The City of Sisters

Name and size of area to be served: City of Sisters Water Supply Service Area, ~1.5 square miles
(in square miles)

Present population of service area: 2007 population -- 1,825
(Contact county planning staff, if needed.)

Projected population in 20 years: 4,110 Based upon the City of Sisters Comprehensive Plan
(Cite source and year. For example: "20,595 Based upon 1995 Portland State University projections.")

List present water rights and permits held:

Date of Issuance:	Natural Source of Water:	Amount Permitted:	Utilization:
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See Attachment A

Water Use

Average yearly demand: 674.2 AFY Year: 2003 (pop. - 1,430)

Per-capita daily consumption (in gallons): 421 gpcd (combined number for all customer classes)
(Divide average annual water sales by population to arrive at consumption, then divide by 365 to get daily values.)

Peak season (by month/day): 6/1 to 9/30 Total peak season demand: 455.8 Acre-feet

Peak season per-capita daily consumption: 849.4 gpcd
(Divide total peak season demand by population and the number of days during the peak.)

Annual amount of water:

produced: 674.2 AFY (2003)
(diverted or pumped)

delivered: 485.4 AFY (2003)

Is your system fully metered? Yes No

Describe your rate structure: A base rate is charged according to meter size and a unit rate is charged for use.
(e.g. flat rate, increasing or decreasing block rate or combination of different systems)

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Request for Water

A. Discuss the reason(s) for your request for additional water

(e.g. loss of current supply, peak demand, growth, or other): The requested amount of water will be necessary to meet future peak season demand as the City's population grows.

* See Attachment F for additional information.

B. How long is the amount of water requested in this application expected to meet future needs?

(e.g. until the year 2040) Until the year 2028

C. Briefly discuss operation of water system and the most constraining component of the system:

The City operates two wells and pumps the water to a 1.6 million gallon reservoir. There are approximately 31.4 miles of distribution lines within the City that range from 4" to 12". The most constaining components of the system is water supply/water right capacity to meet future peak day demand and the need for more storage capacity.

D. Percentage of water use by type:

Residential: <u>47%*</u>	Commercial: <u>30%*</u>
Public Authority: <u>3%*</u>	Agricultural: <u>5%*</u>
Unaccounted for use: <u>11%*</u>	Industrial: <u>4%*</u>
Other (specify use): <u>*These numbers are based on 2006 water use; "Water Use" numbers based on 2003.</u>	

E. List cost to implement proposed request.

Compare cost and benefits with other water supply, or combination of supply options. This should include water efficiency measures such as replacing current showerheads with low-flow types. (Attach documentation, as available.)

Currently, the City has three wells built. Adding a fourth would cost ~\$600,000. Additional storage capacity is required and a new 2.6 MG reservoir will cost ~ \$5,000,000. Using the City's surface water rights is currently not feasible as the building and maintainence (O&M) costs for a new surface water treatment plant is prohibitively expensive. Additionally, the City's municipal surface water rights have a junior priority.

F. How and by how much will your proposed water use efficiency programs increase efficiency?

(Express as a percentage of per-capita consumption.)

The 2003 unaccounted for water equalled 26.6%. Within the past few years the City has reduced unaccounted for water to ~15%. Per-capita consumption is high, due to significant tourist influx during peak demand months. The City intends to implement programs to reduce per capita use and associated MDD.

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Last revision: April 9, 1996

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Attachment A

City of Sisters Water Rights Table

City of Sisters' Application for a Permit to Use Ground Water

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Attachment A
City of Sisters Water Rights Summary
Certificate

Application	Permit	Transfer	Priority Date	Type of Use	Rate (cfs)	Volume (AF)	Source	Facility Number
GW								
G-10545	G-9979	66520	2/24/1983	MU	1.78		Well #1 (City Well)	12196
G-12591	G-11418	N/A	6/25/1991	MU	3.34		Well #2 (Highschool Well)	30258

Groundwater Total: 5.12

SW								
S-44263	S-32854	65091	11/17/1967	MU	1.45		Pole Creek & Sister Reservoir	12198
S-17149	S-12869	13509	11/1/1937	MU	1.25		9 Springs	12150 & 13151
S-16404	S-12597	13501	4/7/1937	MU	1.25		Pole Creek Swamp Springs	13152
S-12560	S-8906	10028	2/11/1929	MU	0.2		Springs	29954
<i>Squaw Creek Decree</i>		67706 (T-3733) (IL-616)	12/31/1885	MU	0.2		Pole Creek	30259
<i>Squaw Creek Decree</i>		81663 (IL-846)	1883	IR	0.08		Whychus Creek	
S-5551	S-3384	3227	5/18/1917	MU	1.5		Whychus Creek	

Surface Water Total: 5.93

ST								
R-43919	R-5054	65090	8/10/1967	MU		6.3	Pole Creek	12197

Storage Total: 6.3

Lazy Z								
<i>Squaw Creek Decree</i>		83355 (K-3)	1880	IR (30.0 acres)	0.62		Whychus Creek	
<i>Squaw Creek Decree</i>		291 (T-8900)	1880	IR (59.5 acres)	1.23		Whychus Creek	
<i>Squaw Creek Decree</i>		24028 (T-8900)	1880	IR (2.5 acres)	0.08		Whychus Creek	
<i>Squaw Creek Decree</i>		24167 (T-8900)	1880	IR (18.0 acres)	0.57		Whychus Creek	
<i>Squaw Creek Decree</i>		24597 (T-8900)	1880	IR (3.0 acres)	0.1		Whychus Creek	

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<i>Squaw Creek Decree</i>		303 (T-8900)	1881	IR (35.5 acres)	0.71		Whychus Creek	
<i>Squaw Creek Decree</i>		81453 (T-8900)	1886	IR (7.0 acres)	0.14		Whychus Creek	
G-5295	G-4841	57115 (T-8902)	8/25/1970	IR (16.1 acres) (supplemental 29.7 acres)	0.201 supp. - 0.108		Well #2	
G-3489	G-3095	45033 (T-8902)	5/13/1966	IR (supplemental 7.5 acres)	0.094		Well #1	

Lazy Z SW Total: 3.45
Lazy Z GW Total: 0.201*
Supplemental Total: 0.202
Total Primary Acres: 171.6*

*as a condition of the land sales agreement, 3.1 acres of the 1970 priority groundwater must be sold back to David Herman within 30 days issuance of the new certificate

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Attachment B
City of Sisters Well Logs

City of Sisters' Application for a Permit to Use Ground Water

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NOTICE TO WATER WELL CONTRACTOR

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

STATE ENGINEER, SALEM, OREGON within 30 days from the date of well completion.

DESC 3023

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

Well #1

State Well No. 153/10E-9

State Permit No. G-9979

(1) OWNER:

Name City of Sisters
 Address Sisters City Hall
Sisters, Oregon 97759

(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
14 " Diam. from +2 ft. to 100 ft. Gage 250
12 " Diam. from 25 ft. to 111 ft. Gage 250
10 " Diam. from 0 ft. to 195.6 ft. Gage 250

PERFORATIONS:

Perforated? Yes No.

Type of perforator used ACY. and Machine
 Size of perforations 1/2 in. by 6" X and 1" by 2"
1200 perforations from 50 ft. to 100 ft.
1560 perforations from 95.6 ft. to 195.6 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 Davidson

Was a pump test made? Yes No If yes, by whom? Drilling
 Yield: 549 gal./min. with 4 ft. drawdown after 1 1/2 hrs.
902 " " 7'4" " 4 " "
1315 " " 5'3" " 1 " "
XXXXXX PUMP TEST 24 hrs.
 gal./min. with _____ ft. drawdown after _____ hrs.
 Artesian flow _____ g.p.m.

Temperature of water 46 Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used Cement and Bentonite
 Well sealed from land surface to 40 ft.
 Diameter of well bore to bottom of seal 18 in.
 Diameter of well bore below seal 16 in.
 Number of sacks of cement used in well seal 58 sacks
 Number of sacks of bentonite used in well seal 150 lbs. sacks
 Brand name of bentonite Western
 Number of pounds of bentonite per 100 gallons of water 5 1/2 gals. water per 100 lbs. Cement/100 gals.
 Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
 Did any strata contain unusable water? Yes No
 Type of water? SURFACE depth of strata 3 feet
 Method of sealing strata off casing and grout
 Was well gravel packed? Yes No Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Deschutes Driller's well number _____
NW 1/4 SW 1/4 Section 9 T. 15 S. R. 10 E. W.M.
 Bearing and distance from section of subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 105 ft.
 Static level 85 ft. below land surface. Date 10/2/75
 Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 10"

Depth drilled 211 ft. Depth of completed well 211 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
Overburden	0	2	
Cong. Gray	2	21	
Clay and Cong. Brown	21	29	
Lava - Mild	29	111	
Sandstone & Cong. Brown	111	175	
Cong. Gray - Waterbearing	175	195	
Basalt	195	211	

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Work started 4/3/ 1975 Completed 10/2 1975

Date well drilling machine moved off of well 10/3/ 1975

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] William D. Davidson Date 10/15 1975
 (Drilling Machine Operator)

Drilling Machine Operator's License No. 803

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 DAVIDSON DRILLING INC.
 (Person, firm or corporation) (Type or print)

Address 626 N.W. Parshall Way Redmond, Ore. 97751

[Signed] William Davidson
 (Water Well Contractor)

Contractor's License No. 548 Date 10/15/ 1975

Well # 2

Desc 1034 RECEIVED

15S/10E/85

STATE OF OREGON WATER WELL REPORT (as required by ORS 837.765)

SEP 16 1991

(START CARD) # 27957

(1) OWNER: Name Hap Taylor Construction, Address 2641 NW Ravenwood Dr., SALEM OREGON, City Bend, State OR, Zip 97701

(2) TYPE OF WORK: [X] New Well, [] Deepen, [] Recondition, [] Abandon

(3) DRILL METHOD: [X] Rotary Air, [] Rotary Mud, [] Cable, [] Other

(4) PROPOSED USE: [] Domestic, [] Community, [] Industrial, [X] Irrigation, [] Thermal, [] Injection, [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No, Depth of Completed Well 302 ft., Explosives used [] [X] Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Amount sacks or pounds. Rows include 22" 0-39 Cement 0-39 93 sacks, 17" 39-190, 14" 190-244.

Hole was sealed by Method [] A [] B [X] C [] D [] E, Backfill placed from ft. to ft. Material, Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Rows for Casing (18" +1-39 .375) and Liner (14" +1 1/4-244 .250, 10" 238-302 .250).

(7) PERFORATIONS/SCREENS: [X] Perforations Method, [] Screens Type Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row: 242 302 1/8x3 2400 10" [] [X]

(8) WELL TESTS: Minimum testing time is 1 hour. [X] Pump, [] Bailer, [] Air, [] Flowing Artesian. Yield gal/min 1200, Drawdown .3ft, Drill stem at 220, Time 8 hr:45.

Temperature of water 51, Depth Artesian Flow Found, Was a water analysis done? [] Yes By whom, Did any strata contain water not suitable for intended use? [] Too little, [] Salty [] Muddy [] Odor [] Colored [] Other, Depth of strata:

(9) LOCATION OF WELL by legal description: County Deschutes, Township 15 S, Nor S. Range 10 E, E or W. WM. Section 8, Tax Lot, Lot, Block, Subdivision, Street Address of Well (or nearest address) 15200 McKenzie Hwy, Sisters, OR

(10) STATIC WATER LEVEL: 101 ft. below land surface, Date 7/31/91, Artesian pressure lb. per square inch, Date

(11) WATER BEARING ZONES: Depth at which water was first found 105'

Table with columns: From, To, Estimated Flow Rate, SWL. Rows: 251-273, 283-288, 288-295 (1200+), 295-301.

(12) WELL LOG: Table with columns: Material, From, To, SWL. Rows include Top soil, Cobble with sand & dirt, Volcanic gravels, Basalt black porous, Basalt grey hard, Cinders red, Volcanic gravels grey & red, Basalt grey medium fractured, Pumice white, Basalt grey fractured with round gravels, Conglomerate brown, Rock grey hard, Rock soft grey & brown, Gravel broken, Rock broken grey & brown, Conglomerate tight brown, Rock broken with gravel, Basalt grey hard & porous, Basalt brown porous, Basalt grey hard, Basalt porous grey & lavender, Cinders red.

(unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief. Signed Ryan B. [Signature] WWC Number 1358, Date 8-21-91

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief. Signed [Signature] WWC Number 723, Date 8-21-91

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DESS
034

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SEP 16 1991

(START CARD) # 27957 (cont'd)

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 837.765)

(1) OWNER:
Name Hap Taylor Construction (cont'd)
Address _____
City _____ State _____ Zip _____
Well Number WATER REG. SALEM, OREGON

(9) LOCATION OF WELL by legal description:
County _____ Latitude _____ Longitude _____
Township _____ N or S, Range _____ E or W, WM.
Section _____ 4 _____ 4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

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

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

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

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

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

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Boiler Air Artesian
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____

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

(10) STATIC WATER LEVEL:
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch. Data _____

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

From	To	Estimated Flow Rate	SWL

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Basalt porous brown	295	301	101
Basalt porous brown hard	301	302	

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WATER RESOURCES DEPT
SALEM, OREGON

Date started _____ Completed _____

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

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. all work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.
Signed _____ WWC Number _____
Date _____

DESC 1034

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15S/10E/5

STATE OF OREGON WATER WELL REPORT (as required by ORS 837.785)

JUN - 9 1992

(START CARD) # 27957

(1) OWNER: Name Hap Taylor Construction Address 2641 NE Ravenwood Dr. City Bend State Oregon Zip 97701

LOCATION OF WELL by legal description:

County Deschutes Township 15 S Range 10 E E or W. W.M. Section 5 Subdivision Street Address of Well (or nearest address) Sisters School New construction

(2) TYPE OF WORK: [X] New Well [] Deepen [] Recondition [] Abandon

(3) DRILL METHOD [X] Rotary Air [] Rotary Mud [] Cable [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well 302 ft. Explosives used [] Yes [X] No

Table with columns: HOLE Diameter From To SEAL Material From To Amount sacks or pounds

How was seal placed: Method [] A [] B [X] C [] D [] E Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

Table for (6) CASING/LINER: Diameter From To Gauge Steel Plastic Welded Threaded

(7) PERFORATIONS/SCREENS: [X] Perforations Method FAST [] Screens Type Material

Table for (7) PERFORATIONS/SCREENS: From To Slot size Number Diameter Tele/pipe size Casing Liner

(8) WELL TESTS: Minimum testing time is 1 hour [X] Pump [] Bailor [] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem at Time

Temperature of water 51 degrees Depth Artesian Flow Found Was a water analysis done? [] Yes By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other

(10) STATIC WATER LEVEL: 101 ft. below land surface. Date 7-31 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns: From To Estimated Flow Rate SWL

(12) WELL LOG: Table with columns: Material From To SWL

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

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

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STATE OF OREGON
WATER WELL REPORT
(as required by ORS 837.765)

ORSC
1034

158/10e/5
Continued Page 2

JUN 9 1992

(START CARD) # 27957

(1) OWNER: Well Number **WATER RESOURCES DEPT. 158/10e/5**
Name **Hap Taylor Construction**
Address **2641 NE Ravenwood Dr**
City **Bend** State **Oregon** Zip **97701**

(2) TYPE OF WORK:
 New Well Deepen Recundition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

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

HOLE		SEAL		Amount
Diameter	From To	Material	From To	sacks or pounds

How was seal placed. Method A B C D E
 Other
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

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

Final location of struts:

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor AF Flowing Artesian
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____ 1 hr.

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

(9) LOCATION OF WELL by legal description:
County _____ Latitude _____ Longitude _____
Township _____ N or S Range _____ E or W. W.M.
Section _____ W _____ W
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

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

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

From	To	Estimated Flow Rate	SWL

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Basalt porous brown	295	301	101
" " " hard	301	302	

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WATER RESOURCES DEPT.
SALEM, OREGON
Date started 7-19-91 Completed 8-12-91

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed [Signature] WWC Number 1358
Date 8-16-91

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.
Signed [Signature] WWC Number 723
Date 8-16-91

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

DESC 57902 *well #3*
 03-06-2007

WELL LABEL # L 84019

START CARD # 1000329

(1) LAND OWNER Owner Well I.D. Sisters Well #3

First Name _____ Last Name _____
 Company CITY OF SISTERS
 Address 520 EAST CASCADE AVE
 City SISTERS State OR Zip 97759

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

(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 288.00 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
20	0	193	Cement	0	130	300	S
16	193	293	Bentonite Chips	130	170	48	S
			Cement	170	195	40	S

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

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16		2	195	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	14		268	283	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type Cont. Wire Wrap Material 304 SS

Perf/ Screen	Casing/ Liner Dia	Screen Dia	From	To	Scrm/slot width	Slot length	# of slots	Tele/ pipe size
Screen	14	188	268		.25			

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
1,500	1.3	175	1.5
2,000	4	175	2
2,500	6	175	2

Temperature 54 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Deschutes Twp 10.00 S N/S Range 10.00 E E/W WM
 Sec 4 SE 1/4 of the NW 1/4 Tax Lot 103
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

NE LOT ABOUT 350 FT WEST OF CAMP POLK RD AT INTERSECTION WITH BARCLAY

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening				
Completed Well	02-02-2007			73.3

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
Top Soil	0	4
Gravels (some cemented)	4	139
Black Basalt	139	160
Gravels w/ Brown Visicular (wb 500+)	160	170
Gray Basalt	170	196
Broken Brown Basalt Visicular (wb)	196	201
Brown Basalt w/ some Visicular Basalt (wb)	201	210
Brown & Red Visicular Basalt (wb)	210	245
Black Basalt w/ Some Red Clay Stone (wb)	245	250
Brown Basalt w/ Red Clay Stone (wb)	250	258
Soft Brown Visicular Basalt	258	270
Black Basalt	270	293

Date Started 11-27-2006 Completed 02-02-2007

(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 1702 Date 03-06-2007
 Electronically Filed
 Signed RUSTY R OTTO (E-filed)

(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 1523 Date 03-06-2007
 Electronically Filed
 Signed ROBERT STADELI (E-filed)
 Contact Info (optional)

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Map of well



Oregon

Theodore R. Kulongoski, Governor

January 17, 2007

GEO TECH EXPLORATIONS
ROBERT STADELI #1523
19700 SW TETON
TUALATIN OR 97062

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

RF
JAN 19 2007

FINAL ORDER

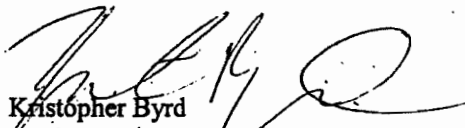
Dear Robert:

The Special Standard request you submitted for owner: City of Sisters, Start Card number 1000329 is hereby approved for the following: You may use 3/4-inch unhydrated bentonite chips in this well from a depth of 155 ft bgs to 170 ft bgs due to a lost circulation zone. The sealing material from 155 ft bgs to land surface shall be cement grout. The placement of the bentonite shall conform to the Departments rules and the manufacturers specifications and result in a seal that is free of voids or bridges. Care shall be taken to minimize the introduction of bentonite dust (See OAR 690-210-0330). All other standards must be adhered to. Your Special Standard request form is enclosed.

The Well Construction Standards serve to protect ground water resources. By approving and issuing this special construction standard the Oregon Water Resources Department is not representing that a well constructed in accordance with this condition will maintain structural integrity or that it meets engineering standards. The well constructor/or landowner is responsible for ensuring that a well is constructed in a manner that protects ground water resources as required under Oregon Administrative Rules 690-200 through 690-240.

If you have any questions concerning this letter, I may be contacted at (503) 986-0851, or by e-mail at Kristopher.R.Byrd@wrds.state.or.us.

Sincerely,


Kristopher Byrd
Well Construction Program Coordinator
Enforcement Section

cc: Larry Carey, SC Region Well Inspector
File.

This is a final order in other than contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review must be filed within the 60 day time period specified by ORS 183.484(2). Pursuant to ORS 536.075 and OAR 137-004-0080 you may either petition for judicial review or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

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WATER RESOURCES DEPT
OREGON

Map of well

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WATER RESOURCES DEPT
SALEM, OREGON

Attachment D
Recorded Easements for Wells 1-3
Deed for Well 4

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WATER RESOURCES DEPT
SALEM, OREGON

123315 60-

Well # 1

96-03379

398 - 0385

EASEMENT AGREEMENT

1. **PARTIES:**

DORRO C. SOKOL, hereinafter Grantor.

THE CITY OF SISTERS, a Municipal corporation of the State of Oregon, hereinafter Grantee.

2. **REAL PROPERTY:**

Grantor is the owner of the real property described on Exhibit "A" pages 1 and 2.

3. **GRANT OF EASEMENT:**

Grantor does hereby grant unto the Grantee, its successors and assigns as follows:

A. A waterline easement along Three Creeks Road and identified as "Easement #1" and more particularly described on page 1 of the attached Exhibit A.

B. A wellhead protection easement identified as "Easement #2" and more particularly described on page 2 of the attached Exhibit A.

C. A waterline and electric line easement identified as "Easement #3" and more particularly described on page 2 of the attached Exhibit A.

D. A waterline easement identified as "Easement #4" and more particularly described on page 2 of the attached Exhibit A.

E. An electrical line easement and a perpetual non-exclusive easement for ingress and egress identified as "Easement #5" and more particularly described on page 2 of the attached Exhibit A.

4. **STATEMENT OF PURPOSE:**

A. The easements described above are for the purpose of constructing, utilizing and maintaining the wells, waterlines, supporting utilities and an access road of the City of Sisters' water system.

B. The easements granted to Grantee herein shall include sufficient subsurface depth as necessary for underground waterlines and utility lines needed to operate the well. The wellhead protection easement granted herein shall include sufficient subsurface depth as necessary to protect both

RECEIVED BRYANT, EMERSON, FITCH & McCORD

MAY 27 2008

ATTORNEYS AT LAW
888 WEST EVERGREEN AVENUE
P.O. BOX 457
REDMOND, OREGON 97756-0103
TELEPHONE (503) 548-2151
FAX 503-548-1885

After recording, return to:
BEND TITLE COMPANY
13 ORLEANS AVENUE, BEND

WATER RESOURCES DEPT
SALEM, OREGON

398 - 0386

wellheads described under the wellhead protection easement and more particularly identified on page 2 of Exhibit "A".

C. Grantee, its agents, independent contractors, heirs, successors, and assigns shall have all rights of ingress and egress to and from said easement strips necessary for the purposes set forth herein.

5. TYPE OF EASEMENT:

The easements described above shall be exclusively for the benefit of the Grantee or its assigns and shall perpetually encumber the affected property.

6. INDEMNIFICATION:

The Grantee does hereby agree to defend and hold harmless Grantor, its successors and assigns from any claim of liability or otherwise arising out of the Grantee's use of the easements described above.

7. REMEDIES:

In addition to all other remedies allowed by law, the parties, their successors and assigns, shall have the right to seek injunctive relief for the enforcement of the terms and conditions of this agreement.

8. BINDING EFFECT ON SUCCESSOR INTERESTS:

The terms, conditions and provisions of this agreement shall extend to, be binding upon and inure to the benefit of the heirs, personal representatives and assigns of the parties.

9. ATTORNEY FEE:

In case suit or action be instituted upon or in connection with this agreement, the prevailing party shall be entitled to recover from the losing party such sums as the court may adjudge reasonable as attorney fees and costs in such suit or action, or upon appeal.


DATED this 23 day of January, 1996.

GRANTOR:


DORRO C. SOKOL

GRANTEE:

CITY OF SISTERS

By 
MAYOR

RECEIVED

BRYANT, EMERSON, FITCH & McCORD

MAY 27 2008

WATER RESOURCES DEPT
SALEM, OREGON

ATTORNEYS AT LAW
888 WEST EVERGREEN AVENUE
P.O. BOX 457
REDMOND, OREGON 97756-0103
TELEPHONE (503) 548-2151
FAX 503-548-1895

STATE OF OREGON
County of Deschutes

)
) ss.
)

398 - 0387

On the 2nd day of January, 1996, personally appeared the above named DORRO C. SOKOL and acknowledged the foregoing instrument to be her voluntary act and deed.

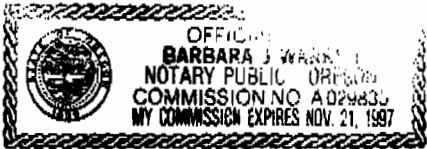


Laurie A. Witty
Notary Public for Oregon
My Commission Expires: 7-26-98

STATE OF OREGON
County of Deschutes

)
) ss.
)

On the 23rd day of January, 1996, personally appeared the above named William A. Meyer and acknowledged the foregoing instrument to be his voluntary act and deed as Mayor of the City of Sisters, a municipal corporation of the State of Oregon.



Barbara J. Wynn
Notary Public for Oregon
My Commission Expires: 11/21/97

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WATER RESOURCES DEPT
SALEM, OREGON

BRYANT, EMERSON, FITCH & McCORD

ATTORNEYS AT LAW
888 WEST EVERGREEN AVENUE
P O BOX 457
REDMOND, OREGON 97756-0103
TELEPHONE (503) 548-2151
FAX 503-548-1895

**DEFINING WELL SITE, UNDERGROUND WATER, UNDERGROUND ELECTRICITY AND ACCESS EASEMENTS
SITUATED IN THE SW 1/4 OF SECTION 9, T15S, R10E, W.M., DESCHUTES COUNTY, OREGON**

CITY OF SISTERS

CITY OF SISTERS

PINE MEADOW RANCH

**WATER RESOURCES DEPT
SALEM, OREGON**

U. S. F. S.

U. S. F. S.

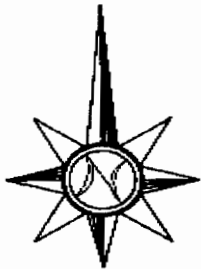
U. S. F. S.

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MAY 27 2008**

**W 1/4 CORNER
SECTION 9
T15S, R10E, W.M.**

REGISTERED
PROFESSIONAL
LAND SURVEYOR
[Signature]
OREGON
MAY 21, 1981
FREDERICA A. AUST, JR.
1955

**NO MONUMENTS WERE SET
DURING THE COURSE
OF THIS SURVEY.**



LEGEND

--- UNDERGROUND WATER LINE
--- UNDERGROUND ELECTRICITY

EASEMENT CURVE TABLE (WELL SITES)

STAKE	ARC/LINE	LENGTH	BEARING	CHORD	CH. BEARING
1	100.00'	8.21'	S 74° 27' 27" E	9.20'	N 16° 31' 25" E
2	100.00'	12.88'	S 72° 37' 27" E	12.87'	N 17° 02' 12" E
3	100.00'	35.61'	S 72° 37' 27" E	32.41'	S 53° 55' 15" E
4	100.00'	77.53'	S 72° 37' 27" E	78.01'	S 08° 16' 17" E
5	100.00'	314.18'	S 72° 37' 27" E	200.00'	N 78° 48' 43" E



WELL SITE LOCATIONS
BACK-UP WELL BEARS S 82° 04' 35" E, 823.26' FROM THE W 1/4 CORNER OF SECTION 9.
ACTIVE WELL BEARS S 58° 59' 10" E, 851.89' FROM THE W 1/4 CORNER OF SECTION 9.

FRED A. AUST, Jr. & ASSOCIATES
Land Surveying & Evaluator
501 W. Cascade St. - P.O. Box
Sisters, Oregon 97138
Phone: (503) 548-7241

05/21/2008 16:20 FAX 5415490561

Well # 2

DESCHUTES COUNTY OFFICIAL RECORDS
NANCY BLANKENSHIP, COUNTY CLERK

2005-79897



\$48.00

00410003250000700070000000

11/21/2005 10:05:28 AM

D-EAS Cnt=1 Str=28 SHIRLEY
\$20.00 \$11.00 \$10.00 \$5.00

DESCHUTES COUNTY CLERK

CERTIFICATE PAGE



**This page must be included
if document is re-recorded.
Do Not remove from original document.**

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WATER RESOURCES DEPT
SALEM, OREGON

WHEN RECORDED RETURN TO:
City of Sisters
P.O. BOX 39
SISTERS, OR 97759

Easement Agreement

4

1. Parties:

Sisters School District #8, Grantor.

The City of Sisters, a Municipal corporation of the State of Oregon "City".

2. Affected Properties:

Grantor is currently the owner of the real property described as the SW/4 of the SW/4, Section 5, Township 15 S., Range 10 E.W.M., Deschutes County, Oregon.

3. Grant of Easement:

Grantor does hereby grant unto the City, its successors and assigns, an access and maintenance easement across the property described in exhibit map dated 9-13-05 and as described below:

At a point to start 28.86' West of the SW 1/16 corner of Tax Lot 900, Map 15-10-5 and continuing South on a curve with chord bearing S 56°12'37" W for 87.50' to a point N 84°00'00" W for 10.20' turning S 00°30'00" E for 23.00' turning N 90°00'00" W for 56.40' turning N 00°30'00" W for 28.93' turning N 84°00';00" W for 8.20' continuing North on chord bearing N 45°56'48 W for 57.12' turning N 89°57'31"E for 179.88'.

4. Statement of Purpose:

The easement described on the attached Exhibit Map shall be used to construct and install an emergency generator, access and maintain the water well and all appurtenances thereof.

5. Type of Easement:

The easement described on the attached Exhibit Map shall be exclusively for the benefit of the City or its assigns and shall perpetually encumber the affected property.

6. Indemnification:

The City does hereby agree to defend and hold harmless Grantor, its successors and assigns from any claim of liability or otherwise arising out of the City's use of the easement described above.

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WATER RESOURCES DEPT
SALEM, OREGON

7. Remedies:

In addition to all other remedies allowed by law, the parties, their successors and assigns, shall have the right to seek injunctive relief for the enforcement of the terms and conditions of this agreement.

8. Binding Effect on Successor Interests:

The terms, conditions and provisions of this agreement shall extend to, be binding upon and inure to the benefit of the heirs, personal representatives and assigns of the parties.

9. Attorney Fee:

In case suit or action be instituted upon or in connection with this agreement, the prevailing party shall be entitled to recover from the losing party such sums as the court may adjudge reasonable as attorney fees and costs in such suit or action, or upon appeal.

Dated this 1st day of November, 2005.

Grantor:

Sisters School District #6

By Alfred T. Thonstad
Its Superintendent

STATE OF OREGON

)
) ss.
)

County of Deschutes

On the 1st day of November, 2005, personally appeared the above named Alfred T. Thonstad and acknowledged the foregoing instrument to be his voluntary act and deed as Superintendent of and for Sisters School District #6.



Shirleen Cundiff
Notary Public for Oregon
My Commission Expires: 9/29/06

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SALEM, OREGON

EXHIBIT MAP

**EASEMENT FOR ACCESS AND MAINTENANCE PURPOSES
OVER, UNDER AND ACROSS A PARCEL OF LAND SITUATED
IN THE SW 1/4 OF SECTION 5, T15S, R10E, W.M., CITY OF SISTERS
DESCHUTES COUNTY, OREGON**

RECEIVED

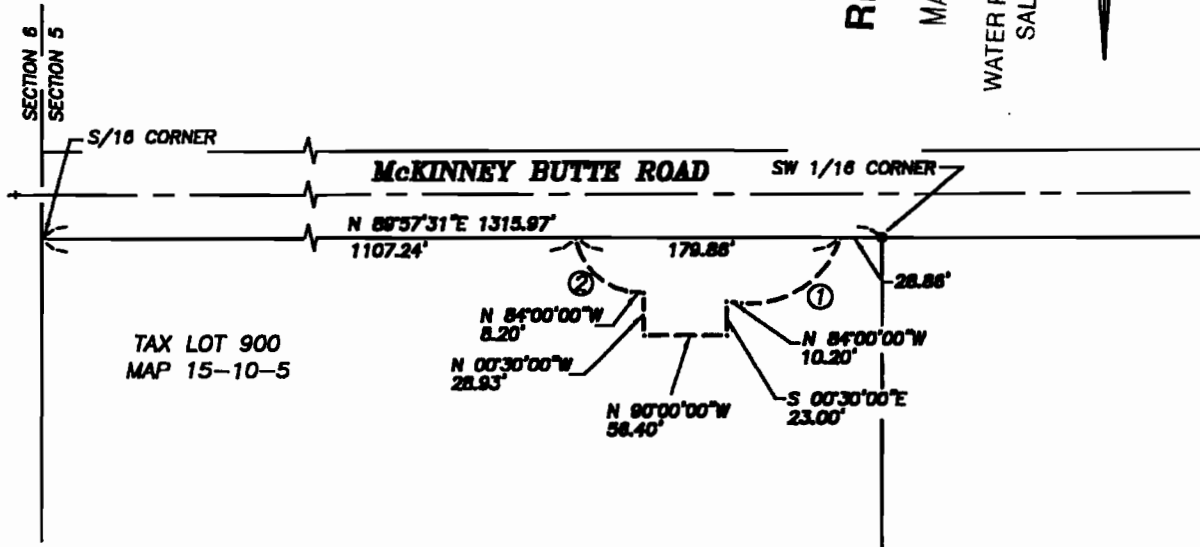
MAY 27 2008

WATER RESOURCES DEPT
SALEM, OREGON

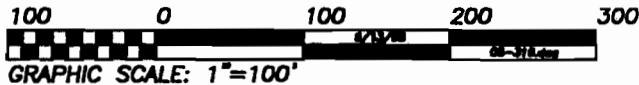


9-13-05
REGISTERED
PROFESSIONAL
LAND SURVEYOR

OREGON
JULY 17, 1981
FREDERICK A. AST, Jr.
1822
RENEWAL DATE 12/31/05



TAX LOT 900
MAP 15-10-5



CURVE TABLE

CURVE	RADIUS	LENGTH	DELTA	CHORD	CH. BEARING
1	63.00'	87.50'	78°34'46"	80.04'	S 56°12'37" W
2	43.00'	57.12'	76°08'24"	53.01'	N 43°58'48" W

CITY OF SISTERS ACCEPTANCE OF THIS DOCUMENT

The City of Sisters hereby accepts this document.

STATE OF OREGON)
County of Deschutes)

BE IT REMEMBERED. That on this 18th day of November 20 05,
Before me, the undersigned, a Notary Public in and for the State of Oregon, personally
appeared the within named Eileen Stein

Signature Eileen Stein

known to me to be the identical individual (s) described in and who executed the within
instrument and acknowledged to me that (he) (she) (they) executed the same freely and
voluntarily.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal
the day and year last above written.

Linda G Feist Notary Public for Oregon

My commission expires 2/18/06

Seal



RECEIVED
MAY 27 2008
WATER RESOURCES DEPT
SALEM, OREGON

DESCHUTES COUNTY OFFICIAL RECORDS
NANCY BLANKENSHIP, COUNTY CLERK

2007-28544



\$46.00

00548433200700285448040042

05/21/2007 11:36:10 AM

D-EAS Cnt=1 Str=4 TR
\$20.00 \$11.00 \$10.00 \$5.00

well # 3

AFTER RECORDING RETURN TO:
THE CITY OF SISTERS
PO BOX 39
SISTERS, OREGON 97759

EW

4
4

EASEMENT AGREEMENT

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MAY 23 2007

CITY OF SISTERS

1. PARTIES:

Dutch Pacific Properties, LP, an Oregon Limited Partnership,

Grantor

The City of Sisters, a Municipal Corporation of the State of Oregon,

Grantee

2. AFFECTED PROPERTIES:

Grantor is the owner of the real property located in Deschutes County, Oregon, as described in the attached Exhibit "A."

3. GRANT OF EASEMENT:

Grantor does hereby grant unto the Grantee, its successors and assigns, a well site easement, approximately 100 feet by 100 feet adjacent to Sun Ranch Drive as shown in the attached Exhibit "B."

4. STATEMENT OF PURPOSE:

The purpose of this easement is to provide an exclusive easement for a municipal well and related facilities, including water lines, fencing and a pump house building.

5. TYPE OF EASEMENT:

The easement described above shall be exclusively for the benefit of the Grantee or its assigns and shall perpetually encumber the subject property.

6. MAINTENANCE:

Grantee shall be responsible for all maintenance of its facilities installed within the easement area. Grantee shall submit its plans for fencing and the pump house building to Grantor for approval. Grantor may suggest changes to the fence or building so that Grantee's facilities do not detract from Grantor's future development. Grantee agrees to modify its plans and to develop the property in compliance with the approved plans provided that the changes do not unreasonably increase the cost to Grantee.

7. INDEMNIFICATION:

Grantee does hereby agree to defend and hold harmless Grantor, its successors and assigns from any claim of liability or otherwise arising out of the Grantee's use of the easement described above.

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WATER RESOURCES DEPT
SALEM, OREGON

8. REMEDIES:

In addition to all other remedies allowed by law, the parties, their successors and assigns, shall have the right to seek injunctive relief for the enforcement of the terms and conditions of this agreement.

9. BINDING EFFECT ON SUCCESSOR INTERESTS:

The terms, conditions and provisions of this agreement shall extend to, be binding upon and inure to the benefit of the heirs, personal representatives and assigns of the parties.

10. ATTORNEY FEE:

In case suit or action be instituted upon or in connection with this agreement, the prevailing party shall be entitled to recover from the losing party such sums as the court may adjudge reasonable as attorney fees and costs in such suit or action, or upon appeal.

DATED this 26th day of April, 2007.

GRANTOR:

Dutch Pacific Properties, LP

[Signature]

Jefferson Peak, LLC, General Partner

GRANTEE:

City of Sisters

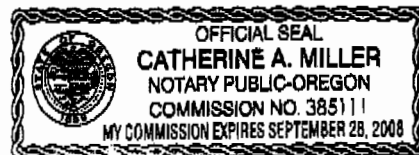
[Signature]

Brad Boyd, Mayor

STATE OF OREGON)

) ss.

County of Deschutes)



Personally appeared before me this 26th day of April, 2007, Shane Lundgren, on behalf of Jefferson Peak, LLC, a General Partner of Dutch Pacific Properties, LP, and acknowledged that he has the authority to sign this document on behalf of Jefferson Peak LLC and Dutch Pacific Properties, LP and that the foregoing instrument to be his and the LP's voluntary act and deed.

Catherine A. Miller

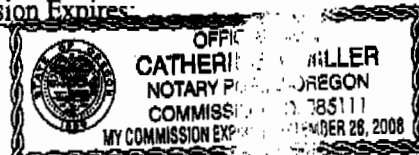
Notary Public for Oregon

My Commission Expires:

STATE OF OREGON)

) ss.

County of Deschutes)

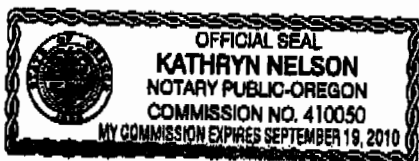


Personally appeared before me this 26 day of April, 2007, Brad Boyd, Mayor of the City of Sisters and acknowledged the acceptance of the foregoing Easement by the City of Sisters.

Kathryn Nelson

Notary Public for Oregon

My Commission Expires:



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SALEM, OREGON

Exhibit A

Tract A, Sun Ranch, situated in the Southeast Quarter of the Northwest Quarter of Section 4, Township 15 South, Range 10 East, Willamette Meridian, City of Sisters, Deschutes County, Oregon.

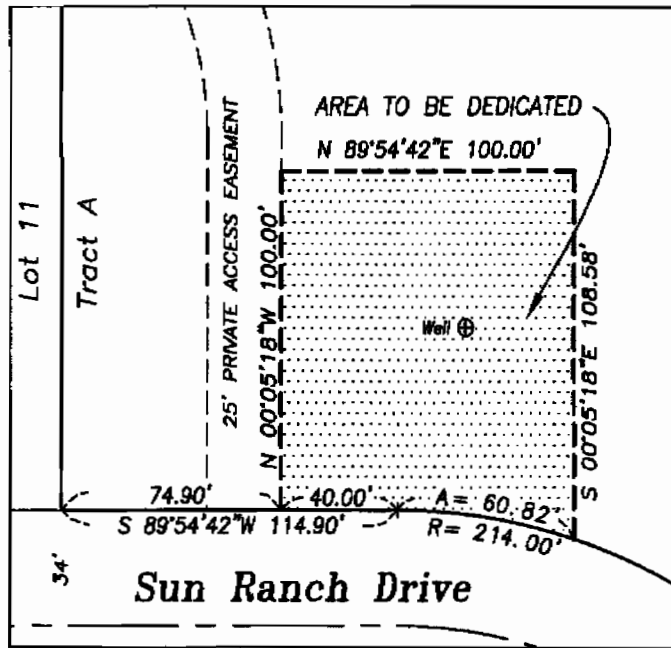
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MAY 27 2008

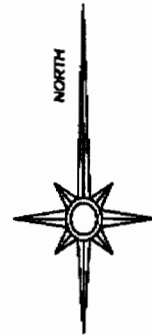
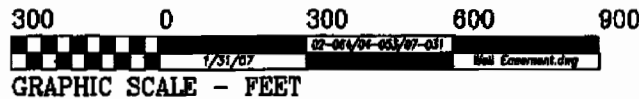
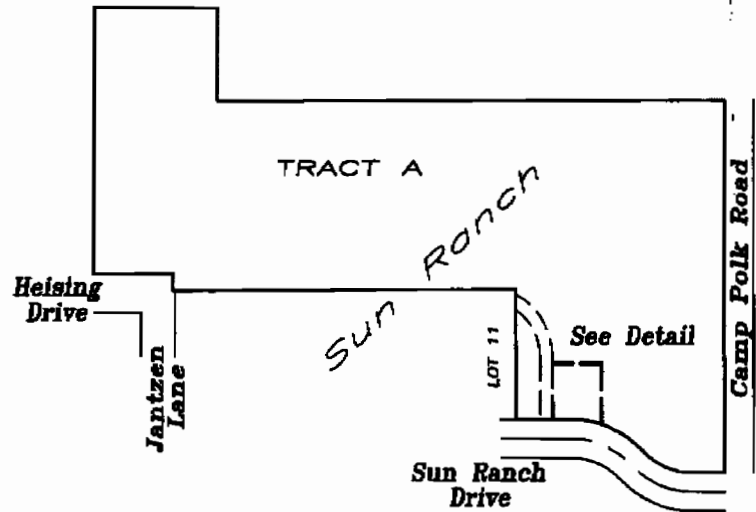
**WATER RESOURCES DEPT
SALEM, OREGON**

Exhibit B Dedication

A portion of Tract A, Sun Ranch, situated in the SE 1/4 NW 1/4 of Section 4,
T15S, R10E, W.M., City of Sisters, Deschutes County, Oregon



DETAIL
SCALE: 1" = 50'



5/10/2007
 REGISTERED
 PROFESSIONAL
 LAND SURVEYOR
 OREGON
 JULY 15, 2003
 MICHELE W. SIMS
 60088
 RENEWAL DATE 6/30/08

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MAY 27 2008

WATER RESOURCES DEPT
SALEM, OREGON

KNOW ALL MEN BY THESE PRESENTS, That Sisters Domestic Water District,
 a municipal corporation
~~EXORCISE~~ duly organized and incorporated under the laws of the State of Oregon
 in consideration of Ten and no/100 Dollars,
 and other good and valuable consideration
 to them paid by City of Sisters, a municipal corporation,
 do hereby remise, release and forever QUITCLAIM unto the said City of Sisters, a
 municipal corporation,
 and unto its successors ~~and~~ and assigns
 all its right, title and interest in and to the following described parcel of real estate,
 situate in County of Deschutes, State of Oregon, to-wit:

S $\frac{1}{4}$ of the S $\frac{1}{4}$ of the SW $\frac{1}{4}$ of the SW $\frac{1}{4}$
 Section 8, Township 15S., Range 10 E.W.M.

also all other property of every kind and nature, both real and personal,
 including but not restricted to easements, rights of way, water rights
 and permits, all situated in Deschutes County, Oregon.

(This conveyance is intended to convey all of the interest of the
 grantor and its predecessors in all of its property in Deschutes
 county, Oregon, including real and personal property, and any
 interest therein)

TL 500

TO HAVE AND TO HOLD, the same, together with all and singular the hereditaments and
 appurtenances thereunto belonging or in anywise appertaining to the said City of Sisters,
 and to its successors ~~and~~ and assigns forever.

IN WITNESS WHEREOF, Sisters Domestic Water District, pursuant
 to a resolution of its Board of Directors, duly and legally adopted, has caused these
 presents to be signed by its President and Secretary, and
 its corporate seal to be hereunto affixed this 13th day of
 October, A. D. 1947.

EXECUTED IN THE PRESENCE OF:

SISTERS DOMESTIC WATER DISTRICT
 By Frank J. Munnick President.
 SISTERS DOMESTIC WATER DISTRICT
 By James Dithman Secretary.

W11 #4

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WATER RESOURCES DEPT
 SALEM, OREGON

STATE OF OREGON,
County of Deschutes } ss.

On this 13th day of October 1947 before me appeared
Frank M. Zimmwale and Grace Aitken
both to me personally known, who being duly sworn, did say that he, the said Frank M.
Zimmwale is the President, and he, the said Grace
Aitken is the Secretary of Sisters Domestic Water District,
Municipal
the within named Corporation, and that
the seal affixed to said instrument is the corporate seal of said Corporation, and that the said instru-
ment was signed and sealed in behalf of said Corporation by authority of its Board of Directors, and
Frank M. Zimmwale and Grace Aitken
acknowledged said instrument to be the free act and deed of said Corporation.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal,
this the day and year first in this, my certificate, written.

Grace F. Zimmwale
Notary Public for Oregon.

My commission expires



Quitclaim Deed

Corporation

Sisters Domestic Water

District

TO

City of Sisters

STATE OF OREGON,

County of Deschutes } ss.
I certify that the within instru-
ment was received for record on the
22nd day of October
A. D. 1947, at 2:50 o'clock P. M.,
and recorded in book 53 on page
505. Record of Deeds of

said County.
Witness my hand and seal of
County affixed.

By [Signature]
Recorder of Conveyances,
County Clerk.
Deputy.

NOTARY PUBLIC LAW 1943 CH. 107-110

WATER RESOURCES DEPT
SALEM, OREGON

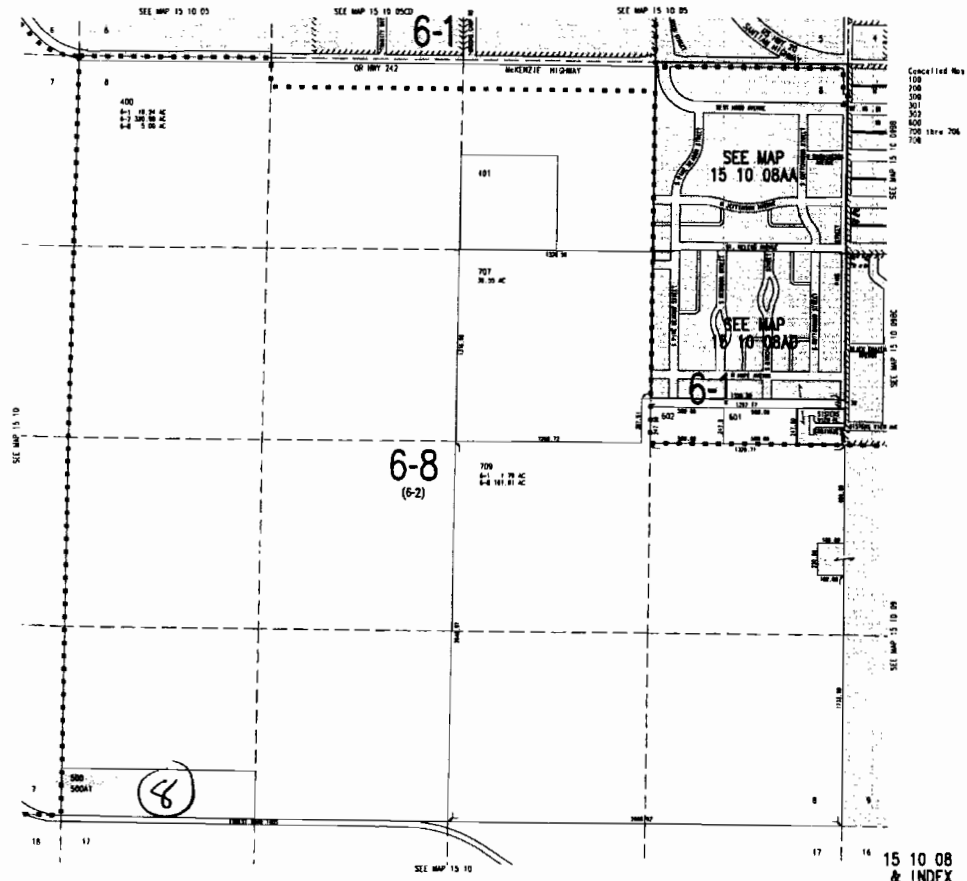
MAY 27 2008

RECEIVED

THIS MAP WAS PREPARED FOR
ASSESSMENT PURPOSES ONLY.
REVISED: 10/17/2007

SECTION 08 T.15S. R.10E. W.M.
DESCHUTES COUNTY

15 10 08
& INDEX



City of Sisters

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WATER RESOURCES DEPT
SALEM, OREGON

Attachment E

Deschutes County and City of Sisters Land Use Forms

City of Sisters' Application for a Permit to Use Ground Water

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WATER RESOURCES DEPT
SALEM, OREGON



Oregon Water Resources Department Land Use Information Form

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.

Applicant Name: _____ City of Sisters _____
 Mailing Address: _____ P.O. Box 39 _____
 City: _____ Sisters _____ State: _____ OR _____ Zip: _____ 97759 _____ Day Phone: _____ (541) 549-0561 _____

This application is related to a Measure 37 claim. Yes No

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), or used. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g. Rural Residential/RR-5)	Water to be:	Proposed Land Use:
15 S	10 E	5	SW SW	0900		<input checked="" type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	
15 S	10 E	4	SE NW	0103		<input checked="" type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	
					See attached map	<input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	
						<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	

List all counties and cities where water is proposed to be diverted, conveyed, or used. _____ The City of Sisters and _____
 _____ Deschutes County _____

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water Water-Right Transfer Exchange of Water
 Allocation of Conserved Water Limited Water Use License
 Permit Amendment or Ground Water Registration Modification

Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: _____ 2.0 _____ cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-municipal Instream Other _____

Briefly describe: The City of Sisters is applying for a municipal use groundwater right, which will allow the City to meet _____
future peak day demand. _____

Note to applicant: *If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt below and include it with the application filed with the Water Resources Department.*

Receipt for Request for Land Use Information

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

RECEIVED

MAY 27 2008

WATER RESOURCES DEPT
 SALEM, OREGON

For Local Government Use Only

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

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

Please check the appropriate box below and provide the requested information

- Land uses to be served by proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): **COMPREHENSIVE PLAN ADOPTED - 2001 / 2005 - UPDATED**
- Land uses to be served by proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.)
If approvals have been obtained but all appeal periods have not ended, check "Being pursued".

Type of Land-Use Approval Needed (e.g. plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Name: ERIC J. PORTER Title: COO DIRECTOR
 Signature: *Eric J. Porter* Phone: 541-323-5219 Date: 5-15-08
 Government Entity: CITY OF SISTERS

Note to local government representative: *Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.*

Receipt for Request for Land Use Information

RECEIVED

Applicant name: _____

MAY 27 2008

City or County: _____ Staff contact: _____

**WATER RESOURCES DEPT
SALEM, OREGON**

Signature: _____ Phone: _____ Date: _____



Oregon Water Resources Department
Land Use Information Form

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.

Applicant Name: City of Sisters
Mailing Address: P.O. Box 39
City: Sisters State: OR Zip: 97759 Day Phone: (541) 549-0561

This application is related to a Measure 37 claim. [] Yes [x] No

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), or used. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Table with 8 columns: Township, Range, Section, 1/4 1/4, Tax Lot #, Plan Designation (e.g. Rural Residential/RR-5), Water to be: (Diverted, Conveyed, Used), Proposed Land Use:.

List all counties and cities where water is proposed to be diverted, conveyed, or used. The City of Sisters and Deschutes County

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water, Water-Right Transfer, Exchange of Water, Allocation of Conserved Water, Limited Water Use License, Permit Amendment or Ground Water Registration Modification

Source of water: Reservoir/Pond, Ground Water, Surface Water (name)

Estimated quantity of water needed: 2.0 cubic feet per second, gallons per minute, acre-feet

Intended use of water: Irrigation, Commercial, Industrial, Domestic for household(s), Municipal, Quasi-municipal, Instream, Other

Briefly describe: The City of Sisters is applying for a municipal use groundwater right. This will allow the City to meet future peak day demand.

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt below and include it with the application filed with the Water Resources Department.

Receipt for Request for Land Use Information

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

RECEIVED

MAY 27 2008

WATER RESOURCES DEPT
SALEM, OREGON

For Local Government Use Only

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

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

Please check the appropriate box below and provide the requested information

- Land uses to be served by proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): _____.

- Land uses to be served by proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.)
If approvals have been obtained but all appeal periods have not ended, check "Being pursued".

Type of Land-Use Approval Needed (e.g. plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being pursued <input type="checkbox"/> Not being pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Name: _____ Title: _____
 Signature: _____ Phone: _____ Date: _____
 Government Entity: _____

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

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MAY 27 2008

**WATER RESOURCES DEPT
SALEM, OREGON**

Receipt for Request for Land Use Information

Applicant name: City of Sisters
City or County: Deschutes Co Staff contact: Martin Bello
Signature: _____ Phone: _____ Date: 4-29-08

Last updated 12/22/06 WR

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MAY 27 2008
WATER RESOURCES DEPT
SALEM, OREGON

Attachment F
Supporting Information

City of Sisters' Application for a Permit to Use Ground Water

RECEIVED

MAY 27 2008

WATER RESOURCES DEPT
SALEM, OREGON

Attachment F

Future Demand Projections - Supporting Information
Application for a Permit to Use Ground Water
City of Sisters

Information Sources:

City of Sisters, [Water Master Plan] *Water System Capital Facilities and Water Management and Conservation Plan*. Prepared by HGE, Inc., September 2005.

City of Sisters, *Comprehensive Plan - Adopted in 2005 - Appendix A Coordinated Population Forecast*.
<http://www.ci.sisters.or.us/downloads/apa.pdf>

Population Projection:

Goal - Project population to the year 2028, 20 years from submittal date of Groundwater Application

Using the 2025 population estimate in the Sisters Comprehensive Plan as the starting point and using the same annual increase the population at 2028 is as follows:

Year	% Increase	Projected Population
2025	3.13%	3,747
2026	3.13%	3,864
2027	3.13%	3,985
2028	3.13%	4,110

City's Projected Future Water Demands (Year 2028):

Goal - Project the future water demands for the City based upon the current data from the HGE 2005 - Water Master Plan and the projected population for 2028.

The HGE 2005 report documented an Average Daily Demand (ADD) and a Maximum Daily Demand (MDD) for the Year 2003 (latest accurately recorded data, Table 5.2). The report acknowledges and elevated unaccounted percentage of water during this year, and therefore predicted the future water demand using a 15% unaccounted for water value (HE 2005; Table 5.5). Predicting the 2028 water demands followed this same approach.

Year	Population	ADD per capita (15% loss - gpcd)	*MDD per capita (15% loss - gpcd)	MDD (mgd)
2003	1,430	346	1,118	1.6
2028	4,110	346	1,118	4.6

*MDD is driven by significant tourist influx during peak season days which skews per capita values. Data for residential and multifamily use from 2006 and 2007 indicate a annual average per capita use of approximately 160-180 gallons per capita per day.

Additional Water Right Needs:

City currently has groundwater rights for 3.31 million gallons per day (mgd); therefore

$$4.6 \text{ mgd} - 3.31 \text{ mgd} = 1.29 \text{ mgd}$$

$$1.29 \text{ mgd} \times 1.547 \text{ cfs/mgd (conversion factor)} = 2.0 \text{ cfs}$$

RECEIVED

MAY 27 2008

WATER RESOURCES DEPT
SALEM, OREGON