



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.

I. APPLICANT INFORMATION

A. Individuals

Applicant: N/A _____
First Last

Mailing Address: N/A

City State Zip

Phone: _____ _____ _____
Home Work Other

*Fax: _____ *Email Address: _____

B. Organizations

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

Name of Organization: Corporation of the Presiding Bishop of The Church of Jesus Christ of Latter-day Saints, a Utah corporation sole.

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Name and Title of Person Applying: Terry F. Rudd JAN 26 2009

Mailing Address or Organization: 50 E North Temple Street WATER RESOURCES DEPT
SALEM, OREGON

Salt Lake City Utah 84150
City State Zip

Phone : (801) 240-4310 _____
Day Evening

*Fax: 801-240-4005 *Email Address: RuddTF@ldschurch.org

*Optional

For Department Use		
App. No. <u>G-17170</u>	Permit No. _____	Date _____

2. PROPERTY OWNERSHIP

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.

3. GROUND WATER DEVELOPMENT

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A. Well Information

Number of well(s): 1

Name of nearest surface water body: Snake River

Distance from well(s) to nearest stream or lake:

1) 0.9 Mile 2) _____ 3) _____ 4) _____

If distance from surface water is less than one mile, indicate elevation difference between nearest surface water and well head:

1) + 18 ft 2) _____ 3) _____ 4) _____

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:

Attached Well Log

Mailing Address: _____

City State Zip

Completion Date: 9/20/2008

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

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:

NA

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)
8888 5	Gravel & Sand 22' to 33'	Irrigation	50	4,300,000	75

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 50 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: March 1st through October 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, indicate the total number of acres where water will be applied or used: 2.75
 (This number should be consistent with your application map.)

5. WATER MANAGEMENT

A. Diversion

What method will you use to divert water from the source?

- Pump (give horsepower and pump type): 5 HP submersible 60 S 50 - 7
- other means (describe): _____

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 3 inch down to 3/4 inch Length Approx. 4800 ft buried pipeline

- other, describe: _____

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C. Application/Distribution Method

What equipment will you use to apply water to your place of use?

Pump, Pipeline and Sprinkler System

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: _____

Distribution method

- Direct pipe from source

 In-line storage (tank or pond)

 Open Canal

E. Conservation

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

Sprinkler irrigation using appropriate nozzle size and spacing to obtain maximum efficiency. All irrigation will be during night time hours.

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: _____

Proposed date construction will be completed: 9/20/08 See Remarks

Proposed date beneficial water use will begin: Irrigation season 2009

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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.

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The irrigation system is installed and functioning. The old well on Church property is listed in the Oregon State Water Well reports and is shown as well log MALH 1991, drilled in 1961. This well has functioned for 47 years and provided water to the 2.75 acres of lawn, trees and shrubs. This year the well became ineffective and was unable to provide water to the sprinkler system. A new well has been drilled next to the old well. The new well has been tied into the existing sprinkler irrigation system and is functioning properly.

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, I may have to stop using water to allow senior water right holders to get water to which they are entitled.

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

GSC/

Ty F. Rudd

AUTHORIZED AGENT

1/20/09

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.

WRD on the web:
www.wrd.state.or.us

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Oregon Water Resources Department

FORM I FOR IRRIGATION WATER USE

G4730

1. Please indicate whether you are requesting a primary or supplemental irrigation water right.

Primary **Supplemental**

If supplemental, please indicate the number of acres that will be irrigated for each type of use.

Primary: 2.75 Acres

Secondary: _____ Acres

List the permit or certificate number of the primary water right: No. _____

2. Please list the anticipated crops you will grow and whether you will be irrigating them for a full or partial season:

- | | | |
|----------------------------------|--------------------------------------|--|
| 1. <u>Lawn, shrubs and Trees</u> | <input type="checkbox"/> Full season | <input checked="" type="checkbox"/> Partial season (from: <u>3/1</u> to <u>10/31</u>) |
| 2. _____ | <input type="checkbox"/> Full season | <input type="checkbox"/> Partial season (from: _____ to _____) |
| 3. _____ | <input type="checkbox"/> Full season | <input type="checkbox"/> Partial season (from: _____ to _____) |
| 4. _____ | <input type="checkbox"/> Full season | <input type="checkbox"/> Partial season (from: _____ to _____) |

3. Indicate the maximum total number of acre-feet you expect to use in an irrigation season:

_____ 13.3 _____ acre-feet

(1 acre-foot equals 12 inches of water spread over 1 acre, or 43,560 cubic feet, or 325,851 gallons.)

4. How will you schedule your applications of water? Will you be applying water in the evenings, twice a week, daily?

- | | |
|--|---|
| <input type="checkbox"/> Daily during daytime hours | <input type="checkbox"/> Daily during nighttime hours |
| <input type="checkbox"/> Two or three times weekly during daytime | <input type="checkbox"/> Two or three times weekly during nighttime |
| <input type="checkbox"/> Weekly, during daytime hours | <input type="checkbox"/> Weekly, during nighttime hours |
| <input checked="" type="checkbox"/> Other, explain: <u>5 days / week</u> _____ nighttime hours | |

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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.

Corporation of the Presiding Bishop of The Church of Jesus Christ of Latter-day Saints, a Utah corporation sole.

Applicant Name: _____

Mailing Address: _____ 50 E North Temple Street _____

City: _____ Salt Lake City _____ State: _____ Utah _____ Zip: _____ 84105 _____ Day Phone: _____ (801) 240-4310 _____

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:
19 N	47 E	31	NE,NE	500	N-R1	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Irrigation
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input 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. _____ Malheur _____

B. Description of Proposed Use

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

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Permit to Use or Store Water | <input type="checkbox"/> Water-Right Transfer | <input type="checkbox"/> Exchange of Water |
| <input type="checkbox"/> Allocation of Conserved Water | <input type="checkbox"/> Limited Water Use License | |
| <input type="checkbox"/> Permit Amendment or Ground Water Registration Modification | | |

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

Estimated quantity of water needed: _____ 50 _____ 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: This well is replacing water supplied by a old well that was drilled in 1961. The 1961 well became ineffective this summer. This replacement well was drilled within 20 ft of the old well and will irrigate the 2.75 acres of existing lawns, trees and shrubs through the sprinkler irrigation system on the Church property.

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

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): N/A

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.

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Name: Roberta Donovan Title: City Manager
 Signature: Roberta Donovan Phone: 541-322-2281 Date: 12-8-08
 Government Entity: City of Nyssa

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.

STATE OF OREGON
 WATER SUPPLY WELL REPORT
 (as required by ORS 537.765 & OAR 690-205.9710)

WELL LABEL # G-17170
88885
 START CARD # 1004717

(1) LAND OWNER Owner Well ID

First Name LDS CHURCH Last Name _____
 Company _____
 Address 3958 HWY 201
 City ONTARIO State ORE Zip 97914

(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 47 ft.

BORE HOLE			SEAL			Amt	sacks/ (lb)
Dia	From	To	Material	From	To		
12	1	22	PORTLAND CEMENT	1	22		100
8	22	47	CHIPS				

How was seal placed: Method A B C D E
 Other SLOW POUR
 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	Std	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	2	23	150	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6	13	23	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) 23'
 Temp casing Yes Dia 12 From 1' To 20'

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type WIRE WRAP Material SS

Perf Green	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Telo/ Pipe size
<input checked="" type="checkbox"/>	<u>200</u>	<u>6"</u>	<u>23</u>	<u>33</u>	<u>.030</u>	<u>N/A</u>	<u>N/A</u>	<u>P.S</u>

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

Pump Bailor Air Flowing Artesian
 Yield gal/min 75 GPM Drawdown N/A Drill stem/Pump depth 30 FT Duration (hr) 1 HOUR

Temperature 58 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below)
 From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)

County MALHEUR Twp 19 NS Range 47 EW WM
 Sec 31 1/4 of the NE of SW 1/4 Tax Lot _____
 Tax Map Number _____ Lot _____
 Lat 43° 52' 76" or _____ DMS or DD
 Long 117° 0' 598" or _____ DMS or DD
 Street address of well Nearest address

13 PARK AVE NYSSA ORE

(10) STATIC WATER LEVEL

Existing Well / Predeepening _____ Date _____ SWL (psi) _____ + SWL (ft) _____
 Completed Well _____ Date 9-20-08 SWL (psi) _____ + SWL (ft) 6 FT
 Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 22 FT

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
<u>9-20-08</u>	<u>22</u>	<u>33</u>	<u>75</u>		<u>6</u>

(11) WELL LOG

Material	From	To	Ground Elevation
<u>SILTY CLAY</u>	<u>1</u>	<u>15</u>	
<u>GRAVEL & CLAY</u>	<u>15</u>	<u>16</u>	
<u>DARK SILTY CLAY W/ROCKS</u>	<u>16</u>	<u>22</u>	
<u>GRAVEL & SAND</u>	<u>22</u>	<u>33</u>	
<u>BLUE CLAY</u>	<u>33</u>	<u>47</u>	

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Date Started 9-5-08 Completed 9-20-08

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

License Number _____ Date _____
 Password: (if filing electronically) _____
 Signed _____

(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 1714 Date 10-13-08
 Password: (if filing electronically) _____
 Signed Steve A. [Signature]
 Contact Info (optional) _____

Nyssa Second Ward
Church Building Site

Nyssa Ore.
Weiser Stake

Policy #0-47950

503-3691



OREGON TITLE INSURANCE COMPANY

PENDLETON, OREGON

\$3,600.00

No. O-47950
Malheur No. 01979

Owner's Title Insurance Policy

FOR VALUE, OREGON TITLE INSURANCE COMPANY, a corporation (incorporated under the laws of the State of Oregon and duly authorized by the State Insurance Commissioner to insure titles in said state), hereinafter called the Company,

DOES HEREBY INSURE

subject to the annexed conditions, hereby made a part of this policy,

CORPORATION OF THE PRESIDING BISHOP OF THE
CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS,
A UTAH CORPORATION. *wa c.*

heirs and devisees (or if a corporation, its successors) hereinafter called the Insured, against loss or damage not exceeding

THREE THOUSAND SIX HUNDRED AND NO/100

DOLLARS,

which the Insured may sustain by reason of any defects in or unmarketability of the Insured's title to all the estate or interest in the premises specified and hereinafter described or by reason of liens or incumbrances charging the same at the date of this policy, saving and excepting, and this policy does not insure against loss or damage by reason of any estate or interest, defect, lien, incumbrance or objection hereinafter set forth in annexed Schedule B.

Any loss under this policy is to be established in the manner provided in said conditions and shall be paid upon compliance by the Insured with and as prescribed in said conditions, and not otherwise

Not valid unless countersigned by MALHEUR TITLE & ABSTRACT CO., INC., by *John F. ...*
President

IN WITNESS WHEREOF OREGON TITLE INSURANCE COMPANY has caused these presents to be duly signed by its President or Vice-President, attested by its Secretary or Assistant Secretary and its corporate seal

affixed this 15th day of June 19 48, at 5:00 o'clock P.M.

OREGON TITLE INSURANCE COMPANY

By

President

Attest:

Assistant Secretary.

Countersigned: MALHEUR TITLE & ABSTRACT CO., INC.

By

President.



G-1770

SCHEDULE A

The estate or interest covered by this policy: **FEE SIMPLE TITLE.**

Description of the tract of land the title to which is insured by this policy: Beginning at a point 594 feet West of the Northeast Corner of Section Thirty-one (31), Township Nineteen (19) South, Range Forty-seven (47) E.W.M., thence running South 660 feet; thence running West 396 feet; thence running North 660 feet; thence running East along the North line of said Section, 396 feet to the point or place of beginning, containing six (6) acres, more or less.

All being in Malheur County, Oregon.