

Completed with the help of Ron Jacobs

G-17237



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

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Applicant: _____
First Last JUN 20 2009

Mailing Address: _____
WATER RESOURCES DEPT
SALEM, OREGON

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: Treasure Valley Management LLC

Name and Title of Person Applying: Kevin Berg

Mailing Address or Organization: 1000 Hope Street #43

Vale Oregon 97918
City State Zip

Phone : 541-473-2233 541-473-2233 775-762-4098
Day Evening

*Fax: 541-473-2233 *Email Address: tvmhp1@qwestoffice.net

*Optional

For Department Use		
App. No. <u>G-17237</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.

[Empty box for listing names and mailing addresses of all affected landowners.]

3. GROUND WATER DEVELOPMENT

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A. Well Information

WATER RESOURCES DEPT SALEM, OREGON

Number of well(s): 1

Name of nearest surface water body: (1) Malheur River

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

- 1) 3/4 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) 120 feet 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:

Strata Drilling

Mailing Address: 3097 Clark

Nyssa Oregon 97913

City

State

Zip

Completion Date: 9-15-2009Please 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	12"	Steel 8"	40		20	20	20	Sanitary	100

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:

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		Water Lawns	35	1,900,000	35

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 35gpm

(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: April 1- 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: 6

(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

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 2" Length 3600

other, describe: _____

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SALEM, OREGON

C. Application/Distribution Method

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

Lawn hose and Sprinklers

Irrigation or land application method (check all that apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> Flood | <input checked="" type="checkbox"/> High pressure sprinkler | <input checked="" type="checkbox"/> Low pressure sprinkler |
| <input type="checkbox"/> Drip | <input type="checkbox"/> Water Cannons | <input type="checkbox"/> Center pivot system |
| <input type="checkbox"/> Hand Lines | <input type="checkbox"/> Wheel Lines | |
| <input type="checkbox"/> Siphon tubes or gated pipe with furrows | | |
| <input type="checkbox"/> other, describe: _____ | | |

Distribution method

- | | | |
|---|---|-------------------------------------|
| <input checked="" type="checkbox"/> Direct pipe from source | <input type="checkbox"/> In-line storage (tank or pond) | <input type="checkbox"/> 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.

Day timer for 8 hours at night

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: July 1, 2009

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Proposed date construction will be completed: September 15, 2009

JUN 20 2009

Proposed date beneficial water use will begin: August 15, 2009

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SALEM, OREGON

Is this project fully or partially funded by the American Recovery and Reinvestment Act? (Federal stimulus dollars) Yes No

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.

I own the Treasure Valley Mobile Home Park and am just finishing a 23 unit expansion for a total of 67 lots. I need irrigation water for lawns and trees only, 6 acres total.

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:

H. Berg

6-12-09

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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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: Kevin Berg
Mailing Address: 1000 Hope Street #43
City: Vale State: OR Zip: 97918 Day Phone: 541-473-2233

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:
18	45	19	NW SE	800		<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Lawn
						<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 Co Vale

B. Description of Proposed Use

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

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

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

Estimated quantity of water needed: 35 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: Water for irrigation of lawns only
Mobile Home Park

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

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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:	
<i>NONE</i>		<input checked="" 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: BRENT BARTON Title: CITY MANAGER
 Signature: Brent Barton Phone: 541-473-3133 Date: 6-17-09
 Government Entity: CITY OF VALE, OREGON

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.

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Receipt for Request for Land Use Information

JUN 20 2009

Applicant name: KEVIN BERG
 City or County: VALE, OR Staff contact: BRENT BARTON
 Signature: Brent Barton Phone: 541-473-3133 Date: 6-17-09

WATER RESOURCES DEPT
SALEM, OREGON

MALH 52984

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

(WELL I.D.)# L 84662 (START CARD)# 186296

Instructions for completing this report are on the last page of this form.

(1) OWNER: Greg AINSWORTH, Well Number, Name, Address 883 SOUTH ST., City VALE, State OR, Zip 97918

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

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

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [] No Depth of Completed Well 100 ft. Explosives used [] Yes [] No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sack/pounds. Includes handwritten entries for 12 inch hole with Bentonite seal.

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other Poured. Backfill placed from 0 ft. to 18 ft. Material. Gravel placed from 18 ft. to 100 ft. Size of gravel.

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes handwritten entries for 6 inch casing.

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Casing, Liner.

(8) WELL TESTS: Minimum testing time is 1 hour. [X] Pump [] Bailer [] Air [] Flowing Artesian. Yield 81 gal/min, Drawdown 39', Drill stem at 65', Time 2:40.

Temperature of water 58°, 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 [] Color [] Other.

(9) LOCATION OF WELL by legal description: County MAZHWEL, Township 18S, Range 45E, Section 19 SW 1/4 SW 1/4, Tax Lot 101, Block, Subdivision.

(10) STATIC WATER LEVEL: 26 ft. below land surface. Date 9-8-06. Artesian pressure lb. per square inch. Date.

(11) WATER BEARING ZONES: Depth at which water was first found 62.

Table with columns: From, To, Estimated Flow Rate, SWL. Includes handwritten entries for 62 to 65 ft depth with 21 gpm flow rate and 26' SWL.

(12) WELL LOG: Ground Elevation.

Table with columns: Material, From, To, SWL. Includes handwritten entries for TOP SOIL, CLAY BROWN FIRM, CLAY BROWN LOOSE WITH GRAVEL MIX, CLAY BLUE, CLAY BLUE FRACTURED, CLAY BLUE.

Date started 9-5-06 Completed 9-8-06

(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 water supply well construction standards.

Signed [Signature] WWC Number Date 9-13-06

(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.

Signed [Signature] WWC Number Date 9-13-06

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Malh 53113

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

MALH 53113

WELL I.D. # L 85130

START CARD # 188854

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number 85130
Name David & Jessica Bates
Address 1361 Thousand Springs Rd
City Vale State OR Zip 97918

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

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 140 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds	
12	0	18	Bentonite	0	18	21	
8	18	140					

How was seal placed: Method A B C D E
 Other from surface
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: 8	+2	19	1.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 19 ft

(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"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min 16 gpm Drawdown 48 ft Drill stem at _____ Time 2 hrs

Temperature of water 64° 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 (legal description)
County Malheur
Tax Lot 7600 Lot _____
Township 18S N or S Range 45E E or W WM
Section 19 SW 1/4 NE 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 1361 Thousand Springs Rd, Vale, OR

(10) STATIC WATER LEVEL
72-3 ft. below land surface. Date 3-15-07
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found 120 ft.

From	To	Estimated Flow Rate	SWL
120	130	16 gpm	72-3

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
gravel + soil	0	2	
Hard pan	2	6	
clay	6	120	
sandy clay	120	130	72-3
clay	130	140	

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WATER RESOURCES DEPT. SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON

Date Started 3-10-07 Completed 3-17-07

(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.

WWC Number _____ Date _____
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.

WWC Number 1485 Date 4-15-07
Signed Jan M Fho

MALH 53192

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

WELL LABEL # L 84834
START CARD # 165870

(1) LAND OWNER Owner Well I.D.
First Name Jim Last Name Blackburn
Company _____
Address 1200 Yakima St. NE
City Vale State OR Zip 97918

(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 245 ft.

BORE HOLE			Material	SEAL		Amt	sacks/100
Dia	From	To		From	To		
10	0	20	Bentonite	0	20	750	X
10	20	70	Cement	20	70	1504	105
10	70	245					

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"/>	6	1	120	120	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) 120
Temp casing Yes Dia 10 From +1 To -2

(7) PERFORATIONS/SCREENS

Perf/Screen	Casing/Liner Dia	From	To	Scrn/slot width	Slot length	# of slots	Teel/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 17 Drawdown 245 Drill stem/Pump depth 245 Duration (hr) 2hr

Temperature 65 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) _____
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)
County Malh Twp 18 N 0 Range 45 W W M
Sec 19 1/4 of the _____ 1/4 Tax Lot 2100
Tax Map Number _____ Lot _____
Lat 43° 59' 41.2" or _____ DMS or DD
Long 117° 24' 51.0" or _____ DMS or DD
(. Street address of well Nearest address _____)

Smith Drive Vale Heights Subd

(10) STATIC WATER LEVEL
Date 8/23/07 SWL(psi) _____ + SWL(ft) 118
Existing Well / Predeepening _____
Completed Well _____
Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 212

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
8/23/07	212	213	10		118
	221	222	7		118

(11) WELL LOG Ground Elevation _____

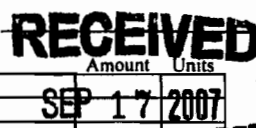
Material	From	To
Brown Clay	0	47
Brown sticky clay	47	52
Blue Clay	52	212
Grey Sand	212	213
Blue Clay	213	221
Grey sand	221	222
Brown Clay	222	245

Recommend liner
Customer Refused

Date Started 8/20/07 Completed 8/23/07

(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 1082 Date 9-14-07
Password: (if filing electronically) _____
Signed [Signature]
Contact info (optional) _____



MALH 53233

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

WELL I.D. # L 91021
START CARD # 1002579

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number
Name UNIVERSITY HOMES
Address 711 NW 21ST ST
City FRUITLAND State ID Zip 83619

(2) TYPE OF WORK
[] Deepening [] Alteration (repair/recondition) [] Abandonment [] Conversion
[] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Other

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: [] Yes [] No
Depth of Completed Well 180 ft.
Explosives used: [] Yes [] No Type Amount

Table with columns: BORE HOLE (Diameter, From, To, Material) and SEAL (From, To, Spuds or Pounds). Includes handwritten data for 10" and 6" diameters.

How was seal placed: Method [] A [] B [] C [] D [] E
[] Other Dry Pack
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. Includes handwritten data for 6" casing.

Drive Shoe used [] Inside [] Outside [] None
Final location of shoe(s) 51

(7) PERFORATIONS/SCREENS table with columns: From, To, Slot Size, Number, Diameter, Tele/plpe size, Casing, Liner. Includes checkboxes for Perforations and Screens.

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [] Bailer [] Air [] Flowing Artesian
Yield gal/min 45 Drawdown Drill stem at 180 Time 1 hr

Temperature of water 62' Depth Artesian Flow Found
Was a water analysis done? [] Yes By whom
Did any strata contain water not suitable for intake use? [] Salty [] Muddy [] Odor [] Colored [] Other
Depth of strata: NOV 05 2007

(9) LOCATION OF WELL (legal description)
County MALHEUR
Tax Lot 5500 Lot
Township 18S N or S Range 45E E or W WM
Section 19 SE 1/4 SE 1/4

Lat " or (degrees or decimal)
Long " or (degrees or decimal)

Street Address of Well (or nearest address) 1101 ANDERSON DR.
Vale OR 97918

(10) STATIC WATER LEVEL
76 ft. below land surface. Date 10-29-07
Artesian pressure lb. per square inch Date

(11) WATER BEARING ZONES table with columns: From, To, Estimated Flow Rate, SWL. Includes handwritten data for 155' depth.

(12) WELL LOG table with columns: Material, From, To, SWL. Includes handwritten log entries like TOP SOIL, HARD PAN, Clay Brown silty, etc.

Date Started 10-29-07 Completed 10-29-07

(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.

WWC Number Date

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.

WWC Number 1867 Date 11-1-07

Signed [Signature]

MALH 53427
MALH 53427

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

WELL LABEL # L 97661

START CARD # 1005513

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Owner Well I.D. _____
First Name _____ Last Name _____
Company MARCA CAVE CONST.
Address 5200 SE 1ST AVE
City NEW PLYMOUTH State OR Zip 97135

(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 Injection
 Thermal Other _____

(5) BORE HOLE CONSTRUCTION Special Standard: Yes (attach copy)
Depth of Completed Well 240 ft.

BORE HOLE			SEAL			
Dia	From	To	Material	From	To	Amount (Sp/Lbs)
10	0	36	BENTONITE	0	36	18
6	36	240				

How was seal placed: Method A B C D E
 Other Dry 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	Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
✓		6	1	39	14	✓				

Shoe Inside Outside Other Location of shoe(s) 39
Temporary casing Yes Diameter _____ From _____ To _____

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

Perf	Scrn	Casing	Linr	Screen Dia	From	To	Screen slot width	Slot length	# of slots	Tele/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 25 Drawdown 108 Drill stem/Pump depth 150 Duration (hr) 2 HR

Temperature 67 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County MALHEW Twp 18S N or S Range 75E E or W W.M.
Sec 19 NW 1/4 of the NE 1/4 Tax Lot 6000
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD

Street Address of Well (or nearest address) 1106 THOUSAND SPRINGS RD WALK OR 97718

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Predeepening				
Completed Well	<u>10-30-08</u>			<u>42</u>

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found 239

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>10-30-08</u>	<u>239</u>	<u>240</u>	<u>100</u>			<u>42</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
<u>Clay + gravel</u>	<u>0</u>	<u>12</u>
<u>Clay Brown</u>	<u>12</u>	<u>90</u>
<u>Clay Blue</u>	<u>90</u>	<u>239</u>
<u>Black sand</u>	<u>239</u>	<u>240</u>

Date Started 10-30-08 Completed 10-30-08

(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 _____
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 1867 Date 11-11-08
Signed Alan W. Stenhouse
Contact Info. (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT ONE COPY FOR CONSTRUCTOR ONE COPY FOR CUSTOMER
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK 10/16/2006

RECEIVED
DEC 03 2008
WATER RESOURCES DEPT
SALEM, OREGON

417237

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

MALH 53427

WELL LABEL # L 97661
START CARD # 1005513

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Owner Well I.D. _____
First Name _____ Last Name _____
Company MARCAVE CONST.
Address 5807 SE 1ST AVE
City NEW PLYMOUTH State ID Zip 83655

(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 Injection
 Thermal Other _____

(5) BORE HOLE CONSTRUCTION Special Standard: Yes (attach copy)
Depth of Completed Well 240 ft.

BORE HOLE			SEAL			Amount (Sps/lbs)
Dia	From	To	Material	From	To	
10	0	36	BENTONITE	0	36	18
6	36	240				

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

(6) CASING/LINER

Csng	Lnr	Dia	From	To	Gauge	Steel	Plastic	Welded	Thrd
✓		6	1	39	14	✓		✓	

Shoe Inside Outside Other Location of shoe(s) 39
Temporary casing Yes Diameter _____ From _____ To _____

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

Perf	Scm	Csng	Lnr	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 25 Drawdown 108 Drill stem/Pump depth 150 Duration (hr) 2 hr

Temperature 67 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County MACHUEN Twp 18S N or S Range 55E E or W W.M.
Sec 19 NW 1/4 of the NE 1/4 Tax Lot 6100
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
Street Address of Well (or nearest address) 1106 THOUSAND SPRINGS RD WALK OR 97718

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Predeepening				
Completed Well	<u>10-30-08</u>			<u>42</u>

Flowing Artesian? Yes Dry Hole? Yes
WATER BEARING ZONES Depth water was first found 239

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>10-30-08</u>	<u>239</u>	<u>240</u>	<u>100</u>			<u>42</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
<u>Clay & gravel</u>	<u>0</u>	<u>12</u>
<u>Clay brown</u>	<u>12</u>	<u>90</u>
<u>Clay blue</u>	<u>90</u>	<u>239</u>
<u>Black sand</u>	<u>239</u>	<u>240</u>

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NOV 17 2008
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 10-30-08 Completed 10-30-08

(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 _____
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 1867 Date 11-11-08
Signed Alan W. Stenhouse
Contact Info. (optional) _____

MALH 53553

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 46337

START CARD # 1006727

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER: First Name JOHNN, Last Name MURVARY, Company, Address 1315 THOUSAND SPRINGS RD, City VALE, State OR, Zip 97918

(2) TYPE OF WORK: [] New Well, [x] Deepening, [] Conversion, [] Alteration, [] Abandonment

(3) DRILL METHOD: [x] Rotary Air, [] Rotary Mud, [] Cable, [] Auger, [] Cable Mud, [] Reverse Rotary, [] Other

(4) PROPOSED USE: [x] Domestic, [] Irrigation, [] Community, [] Industrial/Commercial, [] Livestock, [] Dewatering, [] Injection, [] Thermal, [] Other

(5) BORE HOLE CONSTRUCTION: Special Standard: [] Yes, Depth of Completed Well 180 ft.

Table with columns for BORE HOLE (Dia, From, To, Material) and SEAL (From, To, Amount, Scks/lhs)

How was seal placed: Method [] A [] B [] C [] D [] E, Backfill placed from 130 ft. to 180 ft. Material, Filter pack from 165 ft. to 170 ft. Material, Size, Explosives used: [] Yes

(6) CASING/LINER: Table with columns for Casing/Liner, Dia, Gauge, Steel, Plastic, Welded, Thrd

Shoe [] Inside [] Outside [] Other Location of shoe(s), Temporary casing [] Yes Diameter, From, To

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

Table with columns for Perf, Scm, Casing, Liner, Screen Dia, From, To, Screen/slot width, Slot length, # of slots, Tele/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour, [x] Pump, [] Bailer, [] Air, [] Flowing Artesian, Yield gal/min 65, Drawdown 22, Drill stem/Pump depth 80, Duration (hr) 2 hr

Temperature 63 °F Lab analysis [] Yes By, Water quality concerns? [] Yes (describe below), From, To, Description, Amount, JUN 08 2009

(9) LOCATION OF WELL (legal description): County MITCHELL, Twp 18, N or S Range 45 E or W W.M., Sec 17 SW 1/4 of the NE 1/4 Tax Lot 703, Tax Map Number, Lot, Lat, Long, DMS or DD, Street Address of Well (or nearest address) SAME

(10) STATIC WATER LEVEL: Table with columns for Existing Well/Predeepening, Date, SWL(psi), +, SWL(ft), Completed Well

WATER BEARING ZONES: Table with columns for SWL Date, From, To, Est Flow, SWL(psi), +, SWL(ft)

(11) WELL LOG: Table with columns for Material, From, To, Ground Elevation

Date Started 5-11-09 Completed 5-11-09

(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. License Number, Date 6-1-09, 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. License Number 1867, Date 6-1-09, Signed, Contact Info. (optional)

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JUN 08 2009

WATER RESOURCES DEPT



FORM I
FOR IRRIGATION WATER USE

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

[X] Primary [] Supplemental

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

Primary: 6 Acres

Supplemental: Acres

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

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JUN 20 2009

WATER RESOURCES DEPT SALEM, OREGON

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

1. Lawns [] Full Season [X] Partial Season (from: 4-1 to 10-31)

2. [] Full Season [] Partial Season (from: to)

3. [] Full Season [] Partial Season (from: to)

4. [] Full Season [] Partial Season (from: to)

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

18 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?

[] Daily during daytime hours [X] Daily during nighttime hours

[] Two or three times weekly during daytime [] Two or three times weekly during nighttime

[] Weekly, during daytime hours [] Weekly, during nighttime hours

[X] Other, explain: Lawns Only

JUN 2 0 2009

WATER RESOURCES DEPT
SALEM, OREGON

AFTER RECORDING RETURN TO:

fatco

INSTRUMENT NO. 2006-
Page 1 of 2 Pages

6879

RECORDING INFORMATION:

Prepared by:
BUTLER & LOONEY, P.C.
PO BOX 430 VALE OR 97918

After recording return to:
fatco # 24005

Until a change is requested, all tax statements shall be sent to:
Kevin Berg
8917 Vincent Avenue
Fair Oaks, CA 95628

Inst. No. 2006-6879

I certify that the within Instrument of writing was received for record on the 15 day of Sept, 20 06 at 3:11 O'clock P.M. FEE \$26

STATE OF OREGON, County of Malheur
DEBORAH R. DeLONG
County Clerk
By: *Deborah R DeLong* Deputy

184519DB-800

MEMORANDUM OF SALE

On September 13, 2006, DALE A. ROSSI, Seller, entered into a Contract and agreed to sell to KEVIN BERG, Buyer, real property located in Malheur County, Oregon, described on the attached Exhibit "A".

The true and actual consideration for this transfer is: \$675,000.00, and other value given, which is the whole consideration.

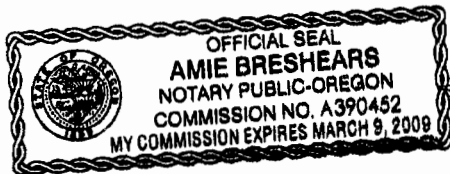
"THE PROPERTY DESCRIBED IN THIS INSTRUMENT MAY NOT BE WITHIN A FIRE PROTECTION DISTRICT PROTECTING STRUCTURES. THE PROPERTY IS SUBJECT TO LAND USE LAWS AND REGULATIONS THAT, IN FARM OR FOREST ZONES, MAY NOT AUTHORIZE CONSTRUCTION OR SITING OF A RESIDENCE AND THAT LIMIT LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930 IN ALL ZONES. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER CHAPTER 1, OREGON LAWS 2005 (BALLOT MEASURE 37 (2004)). BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES, THE EXISTENCE OF FIRE PROTECTION FOR STRUCTURES AND THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER CHAPTER 1, OREGON LAWS 2005 (BALLOT MEASURE 37 (2004))."

Dale A Rossi
DALE A. ROSSI

SELLER

STATE OF OREGON)
 :SS
County of Malheur)

The foregoing instrument was acknowledged before me this 13 day of September, 2006, by DALE A. ROSSI.



Amie Breshears
Notary Public for Oregon
My commission expires: 3-9-09

26⁰⁰

Legal

Land in NORTHWEST TOWNSITE SECOND ADDITION, City of Vale, Malheur County, Oregon, according to the Official Plat thereof, as follows:

That portion of Blocks 26, 27, 28 and 29, and of vacated Nachez St., Oregon St., Petrie St. and vacated alleys, more particularly described as follows:

Beginning at the Southwest corner of said Block 26;
thence North, coincident with the East boundary of Elm St., 840 feet to the intersection with the centerline of vacated Petrie St.;
thence East, coincident with the centerline of vacated Petrie St., 590 feet to the Northerly extended East boundary of Block 28;
thence South, coincident with the East boundary of vacated Petrie St., Block 28, vacated Oregon St. and Block 27, 840 feet to the Southeast corner of Lot 8 in Block 27;
thence West, coincident with the North boundary of Hope St., 590 feet to the Point of Beginning.

SUBJECT to the Gellerman-Froman canal right of way.

EXCEPTING THEREFROM the following:

Commencing at the Southeast corner of the NW1/4 SE1/4 of Sec.19, Twp. 18 S., R. 45 E., W.M.;
thence N. 0° 04' 50" E., coincident with the East boundary thereof, 885.77 feet to a point on the centerline of vacated Petrie St.;
thence N. 89° 43' 08" W., coincident with said centerline, 268.24 feet to a point on the centerline of the Gellerman-Froman canal and Point of Beginning;
thence following the said canal centerline the following courses and distances:
S. 14° W., 76.46 feet;
S. 26° W., 40.70 feet;
S. 40° W., 31.50 feet;
S. 61° 57' W., 32.40 feet;
S. 86° 45' W., 156 feet;
S. 68° 18' W., 73.20 feet;
S. 56° 35' W., 20 feet to a point on the East right of way line of Elm St.;
thence N. 0° 51' 06" E., coincident with said right of way, 198.70 feet to a point on the centerline of vacated Petrie St.;
thence S. 89° 43' 08" E., coincident with said centerline, 322.78 feet to the Point of Beginning.

ALSO EXCEPTING the following parcel:

Commencing at the Southeast corner of the NW1/4 SE1/4 of said Sec. 19, Twp. 18 S., R. 45 E., W.M.;
thence West 30 feet;
thence North 50 feet to the Point of Beginning;
thence North 547.5 feet;
thence West 34 feet;
thence North 100 feet;
thence East 34 feet;
thence North 227 feet, more or less, to the Gellerman-Froman canal;
thence Northeasterly, coincident with said canal, 51 feet, more or less, to the East boundary of said NW1/4 SE1/4;
thence South, coincident with said East boundary, 916.5 feet, more or less, to a point 30 feet East of the Point of Beginning;
thence West 30 feet to the Point of Beginning.

Map 18 45 19 DB Tax Lot 800 Code 3 Reference 04499

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JUN 20 2009

WATER RESOURCES DEPT
SALEM, OREGON