



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

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A. Individuals

AUG 13 2009

Applicant: Randy Marshall
First Last

WATER RESOURCES DEPT
SALEM, OREGON

Mailing Address: 79263 Ayers Road

Wamic OR 97063
City State Zip

Phone: 541-544-3671
Home Work Other

*Fax: _____ *Email Address: _____

B. Organizations

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

Name of Organization: See Remarks for agent information

Name and Title of Person Applying: _____

Mailing Address or Organization: _____

City State Zip

Phone : _____
Day Evening

*Fax: _____ *Email Address: _____

**Optional*

For Department Use			
App. No. <u>G-17252</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 affected landowners]

3. GROUND WATER DEVELOPMENT

A. Well Information

Number of well(s): 1

Name of nearest surface water body: Rock Creek

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

1) 700 ft 2) 3) 4)

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

1) 95 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:

WASC 51459

Mailing Address:

City State Zip

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Completion Date: _____

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 WASC	51459						

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:

No Flowing Artesian

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		Irrigation	448	131,969,250	300

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 448 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 1 to 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: 135.3
 (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): about 100 to 120 total horsepower, made up of
- other means (describe): submersible and centrifugal pumps

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 10 and 8 in Length 3500 ft

- other, describe: _____

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C. Application/Distribution Method

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

Wheel lines running south of mainline or across mainline. Hand line to fill in on the ends of the wheel lines for irregular edges of fields. Lines are proposed to run in a north and south orientation.

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

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

Will use flow meter

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: Well constructed 2/20/2006

Proposed date construction will be completed: 10/1/2011

Proposed date beneficial water use will begin: 10/1/2011

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.

Agent Information:

Tenneson Engineering Corp. (Attention: Larry Toll)
3313 W 2nd St., Suite 100
The Dalles, OR 97058
Phone: 541-296-9177
Fax: 541-296-6657

E-mail: ltoll@tennesoneng.com

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8. MAP REQUIREMENTS

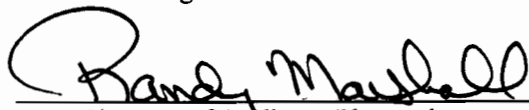
The Department cannot process your application without accurate information showing the source of water and location of water use. You must include a map with this application form that clearly indicates the township, range, section, and quarter/quarter section of the proposed well location and place 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, 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:


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

7-19-09
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.

FEE \$1000
 lctfs 250
 REZ 400

 Total \$ 1650

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

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Oregon Water Resources Department

FORM I FOR IRRIGATION WATER USE

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: 135.3 acres Acres

Supplemental: _____ 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. Grass **Full Season** **Partial Season** (from: _____ to _____)

2. Alfalfa **Full Season** **Partial Season** (from: _____ to _____)

3. Wheat **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:

405.9 _____ 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

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

Other, explain: _____

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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: Randy Marshall
First Last

Mailing Address: 79263 Ayers Road

Wamic OR 97063 Daytime Phone: 541-544-3671
City State Zip

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:
4S	12E	28	E1/2SW1/4	5003		<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
			SE 1/4	5003		<input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
		33	N1/2NE1/4	5003		<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR
			NE1/4NW1/4	5003		<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	IR

List all counties and cities where water is proposed to be diverted, conveyed, or used:

Wasco 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 of Ground Water Registration Modification

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

Estimated quantity of water needed: 1 _____ 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:

Plan on irrigating some land near a well that was constructed in 2006. About 135.3 acres is the requested acreage.

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): 3.210.B.1
 - 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.

Request for Water Right for irrigation of farm land is permitted.

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Name: A. Gary Nychyk Title: Senior Planner WATER RESOURCES DEPT SALEM, OREGON
 Signature: [Signature] Phone: 541-506-2560 Date: 8/11/09
 Government Entity: Wasco Co Planning Dept.

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: _____

WASC 51459

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

WASC
51459

WELL ID. # L 72217
START CARD # 145850

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

(1) LAND OWNER Well Number _____
 Name RAUDY MARSHALL
 Address ARCTS RD
 City WAMUK State OR Zip 97063

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

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

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

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 865 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
<u>14</u>	<u>0</u>	<u>18</u>	<u>BENTONITE</u>	<u>0</u>	<u>18</u>	<u>15</u>	
<u>10</u>	<u>18</u>	<u>865</u>					

How was seal placed: Method A B C D E
 Other ROOLED

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
<u>10</u>	<u>+2</u>	<u>18</u>	<u>.250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Liner: _____

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

(7) PERFORATIONS/SCREENS:

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

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>300</u>	<u>100%</u>	<u>564</u>	<u>1 hr.</u>

Pump Bailer Air Flowing Artesian

Temperature of water 63 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 WASCO Latitude _____ Longitude _____
 Township 4S N or S Range 12 E E or W. WM.
 Section 28 SW 1/4 SE 1/4
 Tax Lot 5200 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) SOUTH ON SMOCK RD 1/4 MILE EAST GATE CREEK

(10) STATIC WATER LEVEL:
500 ft. below land surface. Date 2-20-05
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 699

From	To	Estimated Flow Rate	SWL
<u>699</u>	<u>865</u>	<u>300 gpm</u>	<u>500</u>

(12) WELL LOG:
 Ground Elevation 1900

Material	From	To	SWL
SOIL	0	7	
GREY BASALT	7	28	
LAVA ROCK BLACK	28	47	
CINDERS RED	47	58	
LAVA ROCK GREY+BLACK	58	200	
GREY+BROWN ROCK (CINDERS)	200	241	
LAVA ROCK GREY	241	257	
CINDERS RED	257	317	
LAVA ROCK GREY	317	469	
GREY+BROWN ROCK	469	699	
GREY, BROWN, RED, BLUE + YELLOW ROCK (WB)	699	865	500

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DEC 12 2006

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MAR 10 2006

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SALEM, OREGON

Date started 1-7-06 Completed 2-20-06

(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. Materials used and information reported above are true to the best of my knowledge and belief.
 Signed _____ Date _____ WWC 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
 Signed Jo [Signature] Date 2-14-06 WWC Number 1782

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