

Application for a Permit to Use Ground Water



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME <i>Edna Read</i>		PHONE (HM) <i>775-427-8439</i>	
PHONE (WK) <i>775-941-0264 ex9</i>	CELL		FAX
ADDRESS <i>12660 Fields-Denio Rd (Mailing address: P.O. Box 15, Denio, NV 89404)</i>			
CITY <i>Fields</i>	STATE <i>OR</i>	ZIP <i>97710</i>	E-MAIL <i>ednaread@yahoo.com</i>

Organization Information

NAME		PHONE		FAX
ADDRESS		CELL		
CITY	STATE	ZIP	E-MAIL	

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT / BUSINESS NAME		PHONE		FAX
ADDRESS		CELL		
CITY	STATE	ZIP	E-MAIL	

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**WATER RESOURCES DEPT
SALEM, OREGON**

Note: Attach multiple copies as needed

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.
- I cannot use water legally until the Water Resources Department issues a permit.
- Oregon law requires that a permit be issued before beginning construction of any proposed well, unless the use is exempt. Acceptance of this application does not guarantee a permit will be issued.
- 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 cancelled.
- 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 (we) affirm that the information contained in this application is true and accurate.

Edna Read
Applicant Signature

Edna Read
Print Name and title if applicable

7-16-10
Date

Applicant Signature

Print Name and title if applicable

Date

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

SECTION 2: PROPERTY OWNERSHIP

Please indicate if you own all the lands associated with the project from which the water is to be diverted, conveyed, and used.

☒ Yes

☒ There are no encumbrances.

☐ This land is encumbered by easements, rights of way, roads or other encumbrances.

☐ No

☐ 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 irrigation and/or domestic use only (ORS 274.040).

☐ Water is to be diverted, conveyed, and/or used only on federal lands.

List the names and mailing addresses of all affected landowners (*attach additional sheets if necessary*).

none

SECTION 3: WELL DEVELOPMENT

WELL NO.	NAME OF NEAREST SURFACE WATER	IF LESS THAN 1 MILE:	
		DISTANCE TO NEAREST SURFACE WATER	ELEVATION CHANGE BETWEEN NEAREST SURFACE WATER AND WELL HEAD
#1	Rincon Creek (seasonal)	less than 1/2 mi.	35'

Please provide any information for your existing or proposed well(s) that you believe may be helpful in evaluating your application. For existing wells, describe any previous alteration(s) or repair(s) not documented in the attached well log or other materials (*attach additional sheets if necessary*).

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SECTION 3: WELL DEVELOPMENT, CONTINUED

Source (aquifer), if known: UK

Total maximum rate requested: 898 gpm (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

Complete the table below. If this is an existing well, the following information may be found on the applicable well log. (If a well log is available, please submit it in addition to completing the table.) If this is a proposed well, or well-modification, consider consulting with a licensed well driller, geologist, or certified water right examiner.

OWNER'S WELL NAME OR NO.	PROPOSED	EXISTING	WELL ID (WELL TAG) NO.* OR WELL LOG ID**	FLOWING ARTESIAN	CASING DIAMETER	CASING INTERVALS (IN FEET)	PERFORATED OR SCREENED INTERVALS (IN FEET)	SEAL INTERVALS (IN FEET)	MOST RECENT STATIC WATER LEVEL & DATE (IN FEET)	PROPOSED USE			
										SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL- SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FOOT)
#1	☐	☒	MARI 1234	☐	16"	20'	20'	0-18'	51'	UK	380'	898	386.4
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									

* Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.

** A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.

*** Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Agricultural	May 1 to Oct 31	386.4

Exempt Uses: Please note that 15,000 gallons per day for single or group **domestic** purposes and 5,000 gallons per day for a single **industrial or commercial** purpose are exempt from permitting requirements.

For irrigation use only:

Please indicate the number of primary and supplemental acres to be irrigated (*must match map*).

Primary: 119.3 Acres

Supplemental: 19.6.3 Acres

List the Permit or Certificate number of the underlying primary water right(s): 44595

Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 1

- If the use is **municipal or quasi-municipal**, attach **Form M**
- If the use is **domestic**, indicate the number of households: _____
- If the use is **mining**, describe what is being mined and the method(s) of extraction: _____

SECTION 5: WATER MANAGEMENT

A. Diversion and Conveyance

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

☒ Pump (give horsepower and type): 40 hp

☐ Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. Center pivot irrigation

B. Application Method

What equipment and method of application will be used? (e.g., drip, wheel line, high-pressure sprinkler)

Center pivot sprinklers

C. Conservation

Please describe why the amount of water requested is needed and measures you propose to: prevent waste; measure the amount of water diverted; prevent damage to aquatic life and riparian habitat; prevent the discharge of contaminated water to a surface stream; prevent adverse impact to public uses of affected surface waters.

This amount of water is needed to irrigate the crop

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SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR

If you would like to store ground water in a reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Reservoir name: _____ Acreage inundated by reservoir: _____

Use(s): _____

Volume of Reservoir (acre-feet): _____ Dam height (feet, if excavated, write "zero"): _____

Note: If the dam height is greater than or equal to 10.0' above land surface AND the reservoir will store 9.2 acre feet or more, engineered plans and specifications must be approved prior to storage of water.

SECTION 7: USE OF STORED GROUND WATER FROM THE RESERVOIR

If you would like to use stored ground water from the reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Annual volume (acre-feet): _____

USE OF STORED GROUND WATER	PERIOD OF USE

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SECTION 8: PROJECT SCHEDULE

Date construction will begin: May 14, 1991

Date construction will be completed: _____

Date beneficial water use will begin: May 15, 2009

SECTION 9: REMARKS

Use this space to clarify any information you have provided in the application (*attach additional sheets if necessary*).

Well was drilled in 1991

EST

NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.

Donald W. Read
 P.O. Box 15
 Denio, NV 89404
 Grantor's Name and Address
 Edna L. Read
 P.O. Box 15
 Denio, NV 89404
 Grantor's Name and Address

After recording, return to (Name, Address, Zip):

Edna L. Read
 P.O. Box 15
 Denio, NV 89404
 Until requested otherwise, send all tax statements to (Name, Address, Zip):

SAME

STATE OF OREGON,
 County of Harney } ss.

I certify that the within instrument was
 received for recording on January 30, 2007
 at 10:50 o'clock P.M., and recorded in
 book/reel/volume No. on page
 and/or as fee/file/instrument/microfilm/reception
 No. 20070252 Records of this County.

Witness my hand and seal of County affixed.

NAME TITLE
 Maria Sturaga Clerk
 By Maria Sturaga Deputy

QUITCLAIM DEED

KNOW ALL BY THESE PRESENTS that Donald W. Read AKA Donald W. Read JR

hereinafter called grantor, for the consideration hereinafter stated, does hereby remise, release and forever quitclaim unto
 Edna L. Read
 hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of the grantor's right, title and interest in that certain
 real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in
 Harney County, State of Oregon, described as follows, to-wit:

see attached

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 0. However, the
 actual consideration consists of or includes other property or value given or promised which is ☐ part of the ☐ the whole (indicate
 which) consideration. (The sentence between the symbols ®, if not applicable, should be deleted. See ORS 93.030.)

In construing this deed, where the context so requires, the singular includes the plural, and all grammatical changes shall be
 made so that this deed shall apply equally to corporations and to individuals.

IN WITNESS WHEREOF, the grantor has executed this instrument on Jan. 30, 2007; if
 grantor is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized
 to do so by order of its board of directors.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFER-
 RING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS. IF ANY,
 UNDER ORS 197.352. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROP-
 erty DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND
 USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRU-
 MENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK
 WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERI-
 FY APPROVED USES, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST
 FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930 AND TO INQUIRE
 ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER
 ORS 197.352.

Donald W. Read by: Edna
 Read, his attorney in fact
 Donald W. Read Jr. by: Edna
 Read, his attorney in fact.

STATE OF OREGON, County of Harney } ss.

This instrument was acknowledged before me on January 30, 2007
 by Edna Read for Donald W. Read, and Donald
 Read Jr. as Attorney in fact

by _____
 as _____
 of _____



Corissa Lea Wright
 Notary Public for Oregon
 My commission expires Feb. 24, 2008

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 SALEM, OREGON

2007 0252

ASACETRA TAMMI EDIT ACCOUNT LEGAL DESCRIPTION CHANGE 1
11

ACCOUNT # 48015 OWNFR MC LEAN, RONALD C & MELVA E
% READ, DONALD W & EDNA L

OPTIONS: D=Delete I=Insert Before

?	LEGAL/REMARKS	DATE	DEED	REC-REM	ACRE
---	---------------	------	------	---------	------

T 39 S., R 34 E., W.M. TL 300

LAND IN HARNEY COUNTY, OREGON, AS FOLLOWS:

IN TOWNSHIP 39 S., RANGE 34 E., W.M.

SECTION 9: SE1/4

SECTION 10: S1/2NW1/4; W1/2SW1/4

SECTION 16: E1/2NW1/4; NW1/4NE1/4

F1=LN 2=IM 3=EN 4=OW 5=SA 6=EX 7=OH 8=ET 10=LG 11=FL 12
13=MS 14=SI 15=XC 16=DT 17=TX 18=SL 19=QP 20=PR 21=NX 22=AP 24

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SALEM, OREGON

2007 0252

ASACETRA	TAMMI	EDIT ACCOUNT LEGAL DESCRIPTION	CHANGE	1
				11
ACCOUNT #	147	OWNER READ, DONALD W & EDNA L		

OPTIONS: D=Delete I=Insert Before

?	LEGAL/REMARKS	DATE	DEED REC-REM	ACRE
	T23 S., R31 E.W.M. SEC 7CA TL300			
	LAND IN THE CITY OF BURNS, HARNEY COUNTY, OREGON AS FOLLOWS:			
	THAT PORTION OF THE ORIGINAL D STREET BETWEEN BLOCKS A AND B OF			
	THE SECOND ADDITION VACATED BY THE CITY OF BURNS ON FEBRUARY 6, 1922,			
	UNDER CITY ORDINANCE NO. 178, MORE PARTICULARLY DESCRIBED AS FOLLOWS:			
	BEGINNING AT A POINT WHICH IS 150 FEET SOUTH OF ESTABLISHED MARKER			
	AT THE NORTHEAST CORNER OF BLOCK A OF SAID SECOND ADDITION, SAID			
	POINT BEING THE SOUTHEAST CORNER OF LOT 3 OF SAID BLOCK A;			
	THENCE SOUTH 75 FEET TO A POINT;			
	THENCE WEST 106.30 FEET TO A POINT;			
	THENCE NORTH 75 FEET TO A POINT;			
	THENCE EAST 106.30 FEET TO THE POINT OF BEGINNING.			

F1=LN	2=IM	3=EN	4=OW	5=SA	6=EX	7=OH	8=ET	10=LG	11=FL	12
13=MS	14=SI	15=XC	16=DT	17=TX	18=SL	19=QP	20=PR	21=NX	22=AP	24

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OPTIONS: D=Delete I=Insert Before

T 41 S., R 33 E., W.M. TL 200

IN TOWNSHIP 41 S., RANGE 33 E., W.M.

SECTION 2: E1/2

SECTION 11: NE1/4; E1/2NW1/4

F1=LN 2=IM 3=EN 4=OW 5=SA 6=EX 7=OH 8=ET 10=LG 11=FL 12=MS 13=SI 14=XC 15=DT 16=TX 17=SL 18=OP 19=PR 20=NX 21=AP 22=

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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.

Applicant Name: Edna Read

First

Last

Mailing Address: P.O. Box 15

Denio

City

NV

State

89404

Zip

Daytime Phone: 775-427-8439

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:
<u>41S</u>	<u>33E</u>			<u>200</u>		☒ Diverted	☒ Conveyed	☒ Used	<u>irr</u>
						☐ Diverted	☐ Conveyed	☐ Used	
						☐ Diverted	☐ Conveyed	☐ Used	
						☐ Diverted	☐ Conveyed	☐ Used	

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

Harney 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: 898 gpm ☐ 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:

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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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): 3.010 EHAM-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:	
		☐ Obtained ☐ Denied	☐ Being pursued ☐ Not being pursued
		☐ Obtained ☐ Denied	☐ Being pursued ☐ Not being pursued
		☐ Obtained ☐ Denied	☐ Being pursued ☐ Not being pursued
		☐ Obtained ☐ Denied	☐ Being pursued ☐ Not being pursued
		☐ Obtained ☐ Denied	☐ Being pursued ☐ 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: Dan Johnson Jr. Title: Assistant Planner

Signature: [Signature] Phone: (541) 573-8174 Date: 16 July 2010

Government Entity: Harney County Planning Department

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: _____