



Oregon

John A. Kitzhaber, MD, Governor

Water Resources Department

North Mall Office Building
725 Summer Street NE, Suite A
Salem, OR 97301-1271
503-986-0900
FAX 503-986-0904

August 20, 2014

David Baker
40105 Hwy 20
Brothers, Oregon 97712

Dear David Baker:

The Water Resources Department has received your application to use water. At this time, however, we are unable to accept your application because the minimum filing requirements have not been met according to the Oregon Administrative Rules (OAR 690-310-0040 and 0050).

We are therefore returning the incomplete application and fees. You may resubmit the application with the additional required information and fees noted on the enclosed checklist.

Should you have any questions, please contact Water Right Customer Service at 503-986-0801.

Sincerely,

Jerry Sauter
Water Rights Program Analyst

Cc: OWRD Fiscal

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SEP 04 2014

SALEM, OR

G-179108

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 RECEIVED BY OWRD
 www.wrd.state.or.us

SEP 04 2014

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

SALEM, OR

NAME Stephen ROTH		PHONE (HM) 541 410 1012	
PHONE (WK) same	CELL	FAX	
ADDRESS 41600 Hwy 20			
CITY Brothers	STATE OR	ZIP 97712	E-MAIL* rothstephen@netscape.net

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 David Baker		PHONE 541 306 0319	FAX
ADDRESS 40105 Hwy 20			CELL
CITY Brothers	STATE OR	ZIP 97712	E-MAIL* bakerd11@hotmail.com


Note: Attach multiple copies as needed

* By providing an e-mail address, consent is given to receive all correspondence from the department electronically. (paper copies of the final order documents will also be mailed.)

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.


 Applicant Signature

Stephen F Roth Owner **8/15/14**
 Print Name and title if applicable Date

Applicant Signature

Print Name and title if applicable Date

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For Department Use			AUG 18 2014
App. No. G-17918	Permit No. _____	Date _____	

SALEM, OR

SEP 04 2014

SECTION 2: PROPERTY OWNERSHIP

SALEM, OR

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).

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.

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
Lizard Creek	S. Fork Crooked River		
Dusty Flats	S. Fork Crooked River		
Crane Pit Pivot Well	S. Fork Crooked River		

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).

G17519 is approved. This proposal adds no wells but asks for additional acres. G17519 was amended in a transfer T-11688

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SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: ^{3.09} ~~2.95~~ cfs (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

The table below must be completed for each source to be evaluated or the application will be returned. If this is an existing well, the 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 to obtain the necessary information.

G-1721-5

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)
Lizard Creek	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	20"	40' 42'		40'		Basalt	650		3
Dusty Flats	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	20"	40'		40'		Basalt	650		3
Gravel Pivot 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	20"	40'		40'		Basalt	650		3
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									

* 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.

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SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Irrigation	4/1 - 10/30	531

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: 186.43 Acres Supplemental: _____ Acres
 List the Permit or Certificate number of the underlying primary water right(s): _____

 Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 531

- 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): 100 - 300 hp Turbine
- Other means (describe): _____

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

100 HP ± turbine pumps

B. Application Method

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

Low-Pressure, High-efficiency center pivots

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 surface waters.

- water flow meters on all systems
- high-efficiency irrigation sprinklers

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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

SECTION 8: PROJECT SCHEDULE

Date construction will begin: October 2014

Date construction will be completed: September October 2015

Date beneficial water use will begin: Oct September or March 2015

SECTION 9: WITHIN A DISTRICT

Check here if the point of diversion or place of use are located within or served by an irrigation or other water district.

Irrigation District Name	Address	
City	State	Zip

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SECTION 10: REMARKS

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

G 17519 permit was approved. This application seeks to increase the water used on two wells, if necessary, to irrigate an additional 177 acres.

Two wells on G-17519 have been constructed and were put to beneficial use in May 2014. See attached well logs.

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SALEM, OR

East Lizard Creek	Township	Range	Section	1/4 1/4	Acres	Taxlot
	22s	20e	3	NW SE	29.87	805
	22s	20e	3	NE SE	5.55	805
	22 s	20e	3	SW SE	40.5	805
	22s	20e	3	SE SE	26.15	805
	22s	20e	10	NW NE	40.75	805
	22s	20e	10	NE NE	23.61	805
	22s	20e	10	SW NE	17.53	805
	22s	20e	10	SE NE	1.67	805
				Total	185.63	

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SALEM, OR

G-17908

Well Sheet

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Sheet4

SEP 04 2014

SALEM, OR

	Distance from SE Corner Section 9
2 Dusty Flats Well	4400 Ft North and 427 ft East
3 Lizard Creek Well	4005 ft North and 701 ft East
4 Gravel Pit Pivot Well 1	3857 ft North and 615 ft East

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STATE OF OREGON

SEP 04 2014

COUNTY OF DESCHUTES

PERMIT TO APPROPRIATE THE PUBLIC WATERS

SALEM, OR

THIS PERMIT IS HEREBY ISSUED TO

DAVID ROTH
PO BOX 358
CHRISTMAS VALLEY, OR 97641

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-17519

SOURCE OF WATER: ROCKCHUCK WELL, DUSTY FLATS WELL, LIZARD CREEK WELL,
GRAVEL PIT PIVOT WELL 1, GRAVEL PIT PIVOT WELL 2, AND DIRT TANK WELL IN
SOUTH FORK CROOKED RIVER BASIN

PURPOSE OR USE: IRRIGATION OF 641.85 ACRES

MAXIMUM RATE: 10.7 CUBIC FEET PER SECOND

PERIOD OF USE: APRIL 1 THROUGH OCTOBER 31

DATE OF PRIORITY: DECEMBER 19, 2011

WELL LOCATIONS:

ROCKCHUCK WELL: SW $\frac{1}{4}$ SE $\frac{1}{4}$, SECTION 4, T22S, R20E, W.M.; 6174 FEET
NORTH AND 1632 FEET WEST FROM SE CORNER, SECTION 9, T22S, R20E,
W.M.

* DUSTY FLATS WELL: NW $\frac{1}{4}$ NW $\frac{1}{4}$, SECTION 10, T22S, R20E, W.M.; 3962
FEET NORTH AND 427 FEET EAST FROM SW CORNER, SECTION 10

* LIZARD CREEK WELL: NW $\frac{1}{4}$ NW $\frac{1}{4}$, SECTION 10, T22S, R20E, W.M.; 4005
FEET NORTH AND 701 FEET EAST FROM SW CORNER, SECTION 10

* GRAVEL PIT PIVOT WELL 1: SW $\frac{1}{4}$ NW $\frac{1}{4}$, SECTION 10, T22S, R20E, W.M.;
3857 FEET NORTH AND 615 FEET EAST FROM SW CORNER, SECTION 10

GRAVEL PIT PIVOT WELL 2: NW $\frac{1}{4}$ SW $\frac{1}{4}$, SECTION 10, T22S, R20E, W.M.;
1896 FEET NORTH AND 123 FEET EAST FROM SW CORNER, SECTION 10

DIRT TANK WELL: SW $\frac{1}{4}$ NW $\frac{1}{4}$, SECTION 10, T22S, R20E, W.M.; 2865 FEET
NORTH AND 546 FEET EAST FROM SW CORNER, SECTION 10

Application G-17519

Water Resources Department

PERMIT G-16987

G-17519

DESC 60048

STATE OF OREGON WATER SUPPLY WELL REPORT

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

WELL LABEL # L 111743

START CARD # 196696

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

(1) LAND OWNER Owner Well I.D. _____
 First Name Daino Last Name ROTH
 Company _____
 Address PO Box 393
 City Christmas Valley State OR Zip 97611

(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 600' ft.

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amount	Scks/lbs
16"	0	50	BenT	0	50	96	500
18"	50	99					
18"	99	200					
16"	200	600'					

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	Steel	Plastic	Welded	Thrd
X		16"	+	1	99	1.250	Y		X	

Shoc Inside Outside Other Location of shoc(s) _____

Temporary casing Yes Diameter _____ From _____ To _____

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

Perf	Scrn	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
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
<u>2000</u>		<u>600'</u>	<u>hr</u>

Temperature 60' °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
 County DESCH Twp 22 N or S Range 20 E or W W.M.
 Sec 4 SW 1/4 of the SE 1/4 Tax Lot _____
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street Address of Well (or nearest address) 40105 Hwy 20
Brook OR

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Prodeepening				
Completed Well	<u>4-10-14</u>			<u>147</u>

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found _____

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>4-10-14</u>	<u>200</u>	<u>205</u>	<u>500'</u>			<u>147</u>
<u>4-16-14</u>	<u>200</u>	<u>600</u>	<u>1500'</u>			<u>147</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
TOP SOIL	0	2
Brown clay	2	55
Gray Basalt	55	65
Brown clay	65	80
Gray Basalt	80	195
Red Lake Rock	195	250
clay	250	300
pink pumice	300	450
Red Lake Rock	450	565
Brown Lake Rock	565	580
Black clay	580	600

Date Started 4-1-14 Completed 4-18-14

(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 SEP 04 2014 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 1654 Date 7-29-14

Signed _____

Contact Info. (optional) _____

6-17-14 SALEM, OR

STATE OF OREGON
WATER SUPPLY WELL REPORT

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

DESC 60049

WELL LABEL # L 111742

START CARD # 196694

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

(1) LAND OWNER
Owner Well I.D. _____
First Name Dale D Last Name Roth
Company _____
Address P.O. Box 358
City Christmas Valley State OR Zip 97641

(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 200 ft.

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amount	Scks/lbs
20"	0	50"	Bent	0	50	96	Sck
18"	50	115					
16"	115	200					
14"	200	600					

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	Steel	Plastic	Welded	Thrd
X	16"	+	1	115	.250	X		X	

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

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

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

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
1000		600	2.7

Temperature 60 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County Desch Twp 22 N or S Range 20 E or W W.M.
Sec 4 1/4 of the _____ 1/4 Tax Lot _____
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
Street Address of Well (or nearest address) 40105 Hwy 20
Beira OR 97112

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Predeepening				147
Completed Well	4-5-11			147

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found 200

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
	200	204	200			147

(11) WELL LOG Ground Elevation _____

Material	From	To
TOP SOIL	0	2
Brown Clay	2	15
Gray Basalt	15	100
Sand Brown DM	100	109
Basalt Brn	109	115
Gray Basalt	115	203
Sand gravel clay	203	280
Red Lava Rock	280	320
Pumice with gravel sand conglomerate	320	600

Date Started 1-22-14 Completed 4-5-14

(unbonded) Water Well Constructor Certification
I certify that the well is in compliance with Oregon water supply well construction standards. Materials used and information reported are true to the best of my knowledge and belief.
SEP 04 2014
License Number _____ Date AUG 18 2014
Signed _____ SALEM, OR

(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 1654 Date 7-14-14
Signed _____
Contact Info. (optional) _____

6-17909

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Land Use Information Form



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

NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

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) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; **and**
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

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SALEM, OR

G-1790

Land Use

SEP 04 2014



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97304
(503) 986-0900
www.wrd.state.or.us

Information Form

SALEM, OR

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AUG 18 2014

Applicant: Stephen ROTH
First Last

SALEM, OR

Mailing Address: 41600 Hwy 20

Brothers OR 97112 Daytime Phone: 541 410 1012
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), and/or used or developed. 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:
22S	20E	3	SE ALL	805	Farmer	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Ag
27S	20E	10	NE ALL	805		<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, and/or used or developed:

Deschutes

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
- Permit Amendment or Ground Water Registration Modification
- Limited Water Use License
- Allocation of Conserved Water
- Exchange of Water

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

Estimated quantity of water needed: 2453.09 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:

185.63 acres for alfalfa production

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

See bottom of Page 3. →

G-17918

SEP 04 2014

For Local Government Use Only

AUG 18 2014

SALEM, OR

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 does not apply to SALEM, OR 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 the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): DCC 18.16.020 (A)
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

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

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

Name: KEVIN HARRISON Title: PRINCIPAL PLANNER
 Signature: [Signature] Phone: 541-385-1401 Date: 8/15/14
 Government Entity: DESCHUTES COUNTY

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: _____



Building Application

Permit Sign-Off - Other Agency
New

DESCHUTES COUNTY
117 NW Lafayette Avenue
PO Box 6005
Bend, OR 97708
541-388-6575
FAX: 541-385-1764

247-14-000267-PS

www.deschutes.org/cdd

cdd-webmaster@deschutes.org

***** PERMIT HAS NOT BEEN ISSUED *****

TYPE OF WORK

Type of Work:

Category of Construction:

Description of Work: Land use compatibility statement for Oregon Water Resources Dept.

JOB SITE INFORMATION

Property Address:
40225 Ford Rd, Bend, OR 97702

Parcel:
2220000000805 - Primary

Owner: ROTH STEPHEN F & CLANCY
Address: R
41600 HWY 20
BROTHERS OR 97712

LICENSED PROFESSIONAL INFORMATION

Business Name

License

Address

Phone

REQUIRED INSPECTIONS

The list of inspections below represents the inspections required for this project at the time of permit printing. Additional inspections may be required through the life of the project. You will receive notification of any additional inspection requirements for project completion. All required inspections must be completed and approved.

Schedule Inspections online at www.buildingpermits.oregon.gov or by calling: 1-888-299-2821

When calling for an inspection, use **IVR Number:**

PERMIT FEES

Fee Description	Quantity	Amount
Permit sign off for other agency - New	1.00	\$55.00
Total Fees:		\$55.00

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This application will expire if application acceptance cannot be achieved within 180 days.

SEP 04 2014

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. Granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

SALEM, OR

All persons or entities performing work under this application are required to be licensed unless exempted by ORS 701.010.

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AUG 18 2014

SALEM, OR

DESCHUTES COUNTY OFFICIAL RECORDS
NANCY BLANKENSHIP, COUNTY CLERK

2014-08645



\$58.00

00030400201400000400020020

03/24/2014 03:15:04 PM

D-D Cnt=1 Str=25 CLERK

\$10.00 \$11.00 \$21.00 \$10.00 \$6.00

Do not remove this page from original document.

Deschutes County Clerk

Certificate Page



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SEP 04 2014

SALEM, OR

G-17910

Warranty Deed

KNOW ALL MEN BY THESE PRESENTS, That Stephen F. Roth and Clancy R. Roth hereinafter called the grantor, for the consideration hereinafter stated, to grantor paid by David Roth and Janette Roth, as tenants by the entirety, hereinafter called the grantee, does hereby grant, bargain, sell and convey unto the grantee and grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in Deschutes County, State of Oregon, described as follows, to-wit:

Grantor's Name and Address:
Stephen and Clancy Roth
41600 HWY 20
Brothers, OR 97712
Return & send all tax statements to
Grantee:
David and Janette Roth
PO Box 358
Christmas Valley OR, 97641

Township 22 South, Range 20 East, Willamette Meridian, Deschutes County, Oregon.

Section 9: S 1/2 SE 1/4,

Section 10: SE 1/4 NW 1/4, S 1/2 SW 1/4

Subject to road and utility rights of way or easements.

To Have and to Hold the same unto the grantee and grantee's heirs, successors and assigns forever. And grantor hereby covenants to and with grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized in fee simple of the above granted premises, free from all encumbrances and that grantor will warrant forever and defend the premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever.

The true and actual consideration paid for this transfer consists of other property given which is the whole consideration.

In Witness Whereof, the grantor has executed this instrument this... 24 day of March.

"Grantor"

This instrument will not allow use of the property described in this instrument in violation of applicable land use laws and regulations. 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 and to determine any limits on lawsuits against farming or forest practices as defined in ORS 30.930.

Stephen F. Roth

By: [Signature]

Clancy R. Roth

By: [Signature]

STATE OF OREGON

County of Deschutes) ss.

RECEIVED BY OWRD

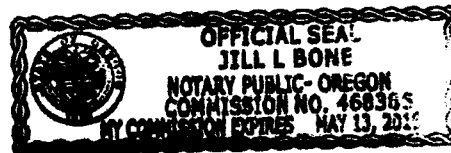
This instrument was acknowledged before me this 24 day of March 2014 by Stephen F. Roth

SEP 04 2014

This instrument was acknowledged before me this 24 day of March 2014 by Clancy R. Roth

SALEM, OR

Notary Public For [Signature]
My Commission expires: 5/13/15
Commission No.:



G-19910



00037776201200210400010010

08/08/2012 03:58:18 PM

D-D Cvt=1 Stmt=2 TN

\$8.00 \$11.00 \$18.00 \$10.00 \$8.00

Warranty Deed

KNOW ALL MEN BY THESE PRESENTS, That Stephen F. Roth and Clancy R. Roth hereinafter called the grantor, for the consideration hereinafter stated, to grantor paid by David Roth and Janette Roth husband and wife hereinafter called the grantee, does hereby grant, bargain, sell and convey unto the grantee and grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in Deschutes County, State of Oregon, described as follows, to-wit:

Township 22 South Range 28, East Willamette Meridian, Deschutes County Oregon

Section 3: Beginning at a point on the west line of section 3 which point is S 00°02'00" E -18.32± from the NW corner of Section 3; thence S 73°36'08" E -2453.63±; thence S 14°14'06" E -1003.40±; thence S 04°32'15" W - 659.38±; thence S 59°44'00" -114.26± to the north/south center line of the section; thence South along the centerline to the south 1/4 corner; thence West along the south line of the section to the SW corner of said section; thence North along the west line of the section to the point of beginning.

Section 10: N 1/4 NW 1/4 and SW 1/4 NW 1/4

Subject to road and utility easements

To Have and to Hold the same unto the grantee and grantee's heirs, successors and assigns forever. And grantor hereby covenants to and with grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized in fee simple of the above granted premises, free from all encumbrances and that grantor will warrant forever and defend the premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever.

The true and actual consideration paid for this transfer consists of other property given which is the whole consideration.

In Witness Whereof, the grantor has executed this instrument this 6 day of June 2012

"Grantor"

This instrument will not allow use of the property described in this instrument in violation of applicable land use laws and regulations. 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 and to determine any limits on lawsuits against farming or forest practices as defined in ORS 30.930.

Stephen F. Roth

By: Stephen F. Roth

Clancy R. Roth

By: Clancy R. Roth

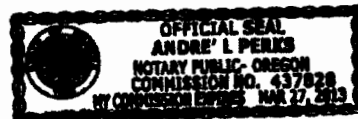
STATE OF OREGON

County of Deschutes)
) ss.

This instrument was acknowledged before me this 6 day of June 2012 by Stephen F. Roth

This instrument was acknowledged before me this 6 day of June 2012 by Clancy R. Roth

Andre L. Perks
Notary Public For State of Oregon
My Commission expires March 27, 2013
Commission No.: 431928



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SEP 04 2014

SALEM, OR