

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 Erik Leib		PHONE (HM)	
PHONE (WK)	CELL 541 761 8190		FAX
ADDRESS PO Box 518			
CITY Williams	STATE OR	ZIP 97544	E-MAIL* erikleib@earthlink.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		PHONE		FAX RECEIVED BY OWRD
ADDRESS			CELL JAN 04 2016	
CITY	STATE	ZIP	E-MAIL* SALEM, OR	

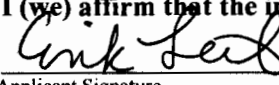
Note: Attach multiple copies as needed

* 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

Erik Leib
Print Name and title if applicable

12/18/15
Date

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. G-18107	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*).

 ~~Erik Leib~~ ~~PO Box 518~~ ~~541 761 8190~~
 ~~Williams, OR 97544~~

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
JOSE 2235	trib to Williams WFK Wms CR (Williams)	~ 561'	~ 20'

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

Total maximum rate requested: 18gpm (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.

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-FEET)
JOSE 2235	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	<input type="checkbox"/>	6"	0-94'	0-5	0-20	16' 10-16-64		93	18	4.6
	<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"/>									
	<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)
Nursery	year round	4.6

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: 2.3 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: _____

- 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: _____

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SECTION 5: WATER MANAGEMENT

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A. Diversion and Conveyance

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

Pump (give horsepower and type): _____ *don't know*

Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. Use well pump to fill storage tanks pump from tank onto plants

B. Application Method

What equipment and method of application will be used? (e.g., drip, wheel line, high-pressure sprinkler)
combination of drip line, mini sprayers, and hand watering w/wand

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. *There will be a meter installed.* *Will only use enough water to saturate root zone to avoid runoff & waste nutrients*

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.

NA **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: _____ *once permit is issued ideally march 2016*

Date construction will be completed: _____ *December 2016*

Date beneficial water use will begin: _____ *March 2016*

SECTION 9: WITHIN A DISTRICT *NA*

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

SECTION 10: REMARKS

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

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NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

WATER WELL REPORT

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

NOV 6 1964

STATE OF OREGON (Please type or print)

State Well No. 39/5W-9C

State Permit No.

(1) OWNER:

Name Mrs Dale H Butler & Barbara S Butler
Address 555 Devon Rd - Williams, Oregon

(2) LOCATION OF WELL:

County Josephine Driller's well number
7 1/2 E. 1/4 Section 9 T. 39 R. 5 W.M.
Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check):

New Well [X] Deepening [] Reconditioning [] Abandon []
abandonment, describe material and procedure in Item 12.

(4) PROPOSED USE (check):

Domestic [X] Industrial [] Municipal []
Irrigation [] Test Well [] Other []

(5) TYPE OF WELL:

Rotary [] Driven []
Cable [X] Jetted []
Dug [] Bored []

(6) CASING INSTALLED:

6" Diam. from 0 ft. to 94 ft. Gage 0.250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

(7) PERFORATIONS:

Perforated? [X] Yes [] No
Type of perforator used
Size of perforations 1 1/2 in. by 3 in.
20 perforations from 0 ft. to 5 ft.

(8) SCREENS:

Well screen installed? [] Yes [X] No
Manufacturer's Name
Type Model No.
Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(9) CONSTRUCTION:

Well seal—Material used in seal 2 Seals Bentonite
Depth of seal 20 ft. Was a packer used?
Diameter of well bore to bottom of seal 12 in.
Were any loose strata cemented off? [X] Yes [] No Depth
Was a drive shoe used? [X] Yes [] No
Was well gravel packed? [] Yes [X] No Size of gravel:
Gravel placed from ft. to ft.
Did any strata contain unusable water? [] Yes [X] No
Type of water? depth of strata
Method of sealing strata off

(10) WATER LEVELS:

Static level 16 ft. below land surface Date Oct 16/64
Artesian pressure lbs. per square inch Date

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? [] Yes [X] No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
Baller test 18 gal./min. with 69 ft. drawdown after 14 hrs.
Artesian flow g.p.m. Date
Temperature of water 57 Was a chemical analysis made? [] Yes [X] No

(12) WELL LOG:

Diameter of well below casing
Depth drilled 93 ft. Depth of completed well 93 ft.
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

Table with columns MATERIAL, FROM, TO. Entries include Gray silt, Yellow granite, Brown granite, Yellow clay & quick sand, Yellow granite.

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Work started Oct 13 19 64 Completed Oct 16 19 64
Date well drilling machine moved off of well Oct 16 19 64

(13) PUMP:

Manufacturer's Name
Type: H.P.

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

BROWNER'S WELL DRILLING
NAME 123 S.E. 1st Street
Address Grants Pass, Oregon

Drilling Machine Operator's License No. 346

[Signed] James S. Browner (Water Well Contractor)

Contractor's License No. 414 Date Oct 19 19 64

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

Applicant: _____
 First Erik Last Leib
 Mailing Address: _____
PO Box 518 Williams OR 97544 Daytime Phone: 541 761 8190
 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:
<u>39S</u>	<u>5W</u>	<u>9</u>	<u>NENW</u>	<u>301</u>	<u>WR</u>	<input checked="" type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>nursery</u>
						<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:

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B. Description of Proposed Use

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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: 4.6 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 nursery

Briefly describe:

Applying for a tier 1, 20,000 sqft Recreational Marijuana license. This will be a combination of indoor, greenhouse, outdoor cultivation.

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. →

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 the 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 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:	
Development Permit	Article 65 – Josephine County Rural Land Development Code	<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.

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--PRODUCTION ONLY – No processing, wholesaling, retailing, laboratory or research activities.

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Name: Nora Schwartz Title: Planner
 Signature: *Nora Schwartz* Phone: 541-474-5417 Date: 12/21/15
 Government Entity: Josephine County

**Josephine County Planning
 700 NW Dimmick Street
 Suite C
 Grants Pass, OR 97526**

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: _____

Reference: Leib / WR / 39-05-09.00 / 301

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After recording return to Grantee and until a change is requested all tax statements shall be sent to the Grantee at the following address:
Erik Leib
P.O. Box 518
Williams, OR 97544

Grantor Address:
Sherrie Deveen Labat
c/o First American Title
118 NE C Street
Grants Pass, OR 97526

File No.: 7151-1812409 (KAF)
Date: December 28, 2011

JOSEPHINE COUNTY OFFICIAL RECORDS
ART HARVEY, COUNTY CLERK **2012-000215**
DED-WRD
Cnt=1 Pgs=3 Stn=2 RHENKELS 01/10/2012 02:53 PM
\$15.00 \$11.00 \$15.00 \$8.00 \$5.00 Total:\$54.00



I, Art Harvey, County Clerk, certify that the within document was received and duly recorded in the official records of Josephine County.

Certified Copy
Do Not Alter

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STATUTORY WARRANTY DEED

Sherrie Deveen Labat, Grantor, conveys and warrants to **Erik Leib**, Grantee, the following described real property free of liens and encumbrances, except as specifically set forth herein:

See Legal Description attached hereto as Exhibit A and by this reference incorporated herein.

Subject to:

1. Covenants, conditions, restrictions and/or easements, if any, affecting title, which may appear in the public record, including those shown on any recorded plat or survey.

The true consideration for this conveyance is **\$120,000.00**. (Here comply with requirements of ORS 93.030)

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APN: R328575

Statutory Warranty Deed
- continued

File No.: 7151-1812409 (KAF)

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009. THIS INSTRUMENT DOES 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, 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 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009.

Dated this 9th day of JANUARY, 2012.

Sherrie Devese Labat
Sherrie Devese Labat

STATE OF Oregon)
County of Curry)ss.

This instrument was acknowledged before me on this 9th day of January, 2012
by **Sherrie Devese Labat**.

Judith Gallagher
Notary Public for Oregon
My commission expires: 10-24-13



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APN: R328575

Statutory Warranty Deed
- continued

File No.: 7151-1812409 (KAF)

EXHIBIT A

LEGAL DESCRIPTION: Real property in the County of Josephine, State of Oregon, described as follows:

A tract of land lying East of an existing road, located in the North Half of the Northeast Quarter of the Northwest Quarter of Section 9, Township 39 South, Range 5 West, of the Willamette Meridian, Josephine County, Oregon, being more particularly described as follows: Beginning at the North Quarter corner of said Section 9; thence South 89°43'00" West along the Section line and along the North side of an existing road, 248.9 feet; thence along the centerline of an existing road, as follows: South 51°20'00" West 190 feet; thence South 36°29'00" West 116.1 feet; thence South 21°16'00" West 154.1 feet; South 5°40'00" West 298.5 feet; thence leaving the road and running North 89°52'00" East 543.65 feet to the centerline of said Section 9; thence North along said centerline, 668.73 feet to the point of beginning. EXCEPTING THEREFROM that portion included within the boundary of the existing road. ALSO: A tract of land lying East of an existing road, located in the South Half of the Northeast Quarter of the Northwest Quarter of Section 9, Township 39 South, Range 5 West, of the Willamette Meridian, Josephine County, Oregon, being more particularly described as follows: Commencing at the North Quarter corner of said Section 9; thence South along the centerline of said Section 9, a distance of 668.73 feet to the true point of beginning of this description; thence South 89°52'00" West 543.65 feet to the centerline of an existing road; thence along said centerline South 17°35'00" East 308.0 feet and South 10° East 250 feet, and South 127.6 feet to the South line of said Northeast Quarter of the Northwest Quarter of Section 9; thence leaving the road and running South 89°59'00" East 407.4 feet to the Southeast corner of said Northeast Quarter of the Northwest Quarter of Section 9; thence North 668.73 feet to the true point of beginning. ALSO EXCEPTING THEREFROM that portion included with the boundary of the existing road.

NOTE: This legal description was created prior to January 1, 2008.

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State of Oregon)
County of Josephine) ss.

I, Art Harvey,

County Clerk and Recorder of Josephine County, Oregon, do hereby certify that the foregoing has been compared with the original thereof and that it is a correct copy therefrom and the whole thereof as the same appears on file and of record in my office.

Witness my hand and seal this 24th day of Dec, 2015

Art Harvey, Clerk & Recorder
by Insha Myers
Deputy