

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 PAMELA J. MCCLURE AND DARRELL H. PRICE			PHONE (HM) (541) 951-5962
PHONE (WK)	CELL		FAX
ADDRESS P.O. BOX 3086			
CITY ASHLAND	STATE OR	ZIP 97520	E-MAIL*

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*

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.



Pam McClure
Applicant Signature

Pamela J. McClure
Print Name and title if applicable

2/10/16
Date

Darrell H. Price
Applicant Signature

Darrell H. Price
Print Name and title if applicable

2/10/16
Date

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For Department Use			
App. No. <u>G-19191</u>	Permit No. _____	Date _____	FEB 18 2016

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*).

NA

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
Well-1	E. Fk. Cottonwood Creek	2 miles (nearest perennial Stream)	±900 feet
Well-2	E. Fk. Cottonwood Creek	2 miles (nearest perennial Stream)	±900 feet

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*).

The nearest perennial stream appears to be about 2 miles away. There are closer drainages, but they only have water during rainy periods

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131-1319

SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: 20 GPM (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.

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SALEM, OR										PROPOSED USE			
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)	SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL-SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FEET)
Well-1	☐	☒	Jack-21246	☐	6 inch	59 ft.		59 ft	70 ft	Grey rock	262 ft	2	
	☐	☐		☐	4 inch	215 ft	39-137 195-215						
Well-2	☒	☐		☐	6 inch	60 ft.±	Unknown	60 ft ±	Unknown	Grey rock?	300±	Unknown	
	☐	☐		☐	4 inch	300 ft±	Unknown						
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐	Revised 2/1/2012	☐			Ground Water/5				WR		

4/18/19

- * 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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SALEM, OR

SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Irrigation	Irrigation Season	unknown
Nursery	Year Round	unknown

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: 3.3 Acres Supplemental: Acres

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

Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 10.5

- 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): Submersible, 1.5 + HP

☐ Other means (describe):

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. Water will be pumped from the well into a closed pipe system.

B. Application Method

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

Drip and impulse, pop up or rotary 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.

Water will only be used as crops demand. The irrigation system will be a pressurized pipe system and planned be on timed zones for more efficiency. Use of water may be limited due to capacity of wells

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*).

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Reservoir name: NA Acreage inundated by reservoir:

FEB 18 2016

Use(s): NA

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): NA

USE OF STORED GROUND WATER	PERIOD OF USE
NA	

SECTION 8: PROJECT SCHEDULE

Date construction will begin: Well 1 is constructed, Well 2 – within 1-3 years

Date construction will be completed: 4-5 years

Date beneficial water use will begin: within a year or two

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

SECTION 10: REMARKS

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

This is a very small use from a deep well. The nearest perennial stream is about 2 miles away so there should be no measurable effect on surface water

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FEB 18 2015

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

OCT 09 1989

PAGE 1 of 2

(START CARD) #

6839

(1) OWNER:

Name RAY & GINNY FISHER Well Number _____
Address 541 W. 15TH SPACE 17
City ESCONDIDO State CA Zip 92025

(2) TYPE OF WORK:

☒ New Well ☐ Deepen ☐ Recondition ☐ Abandon

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable

☐ Other _____

(4) PROPOSED USE:

☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation

☐ Thermal ☐ Injection ☐ Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes ☐ No ☒ Depth of Completed Well 262 ft.

Explosives used ☐ Yes ☒ No ☐ Type _____ Amount _____

HOLE

SEAL

Amount

Diameter	From	To	Material	From	To	sacks or pounds
10	0	59	CONCRETE	0	59	
6	59	262				

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E

☐ Other _____

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	+1	59	250	☒	☐	☒	☐
Liner: 4"	+1	215	CL 160	☐	☒	☒	☐

Final location of shoe(s) N/A

(7) PERFORATIONS/SCREENS:

☒ Perforations Method SAW

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
195	215	6"	36	1/8		☐	☒
39	137	6B"	148	1/8		☐	☒

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

☐ Pump ☐ Bailor ☒ Air ☐ Flowing ☐ Artesian

Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____

2 262 RECEIVED BY

Temperature of water _____ 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 JACKSON Latitude _____ Longitude _____
Township 41S Nor S, Range 2E E or W, WM.
Section 8 Tax Lot 1500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 13095 OLD HWY 99S
(APPROX 3 1/2 MI BEYOND MT. ASHLAND SKI RD)

(10) STATIC WATER LEVEL:

70 ft. below land surface. Date 9-28-89

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
136	138	2	

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
CLAY DARK BROWN STICKY	0	3	
CLAY BROWN SANDY (Gummy)	3	31	
CLAY GREY / BROWN	31	38	
CLAY BROWN	38	42	
VOLCANIC TUFF TAN	42	45	
CLAY GREY / BROWN	45	49	
VOLCANIC TUFF GREY	49	63	
" " TAN	63	71	
" " PURPLE	71	78	
" CLAYSTONE AND	78		
CLAY GREY		84	
VOLCANIC TUFF BLUE	84	108	
" CLAYSTONE WITH	108		
WHITE CLAY		110	
VOLCANIC BLUE / GREY	110	126	
" CLAYSTONE & GREY	126		
WITH WHITE CLAY		130	
VOLCANIC CLAYSTONE	130		
DARK BROWN		132	
VOLCANIC GREY	132	136	
VOLCANIC GREY / TAN HARD	136	138	
" BLUE / GREY	138	148	
" GREY HARD	148	150	

Date started 9-26-89 Completed 9-28-89

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

OWRD WWC Number _____
Signed _____ Date _____

(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 well construction standards. This report is true to the best of my knowledge and belief.

PIONEER DRILLING WWC Number 716
Signed _____ Date 9-29-89

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

OCT 09 1991

Jack
21246

415/2E/8

PAGE 2 OF 2

(START CARD) # 6839

(1) OWNER: Well Number: _____
Name RAY & GINNY FISHER
Address 541 W. 15TH SPACE 17
City ESCONDIDO State CA Zip 92025

(2) TYPE OF WORK:
☒ New Well ☐ Deepen ☐ Recondition ☐ Abandon

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable
☐ Other _____

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes ☐ No ☐ Depth of Completed Well _____ ft.
Explosives used Yes ☐ No ☐ Type _____ Amount _____
HOLE SEAL
Diameter From To Material From To Amount
sacks or pounds
How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☐ Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:
Diameter From To Gauge Steel Plastic Welded Threaded
Casing: _____
Liner: _____
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
☐ Perforations Method _____
☐ Screens Type _____ Material _____
From To Slot size Number Diameter Tele/pipe size Casing Liner
SEE PAGE 1

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☐ Air ☐ Flowing
Yield gal/min Drawdown Drill stem at Time
Temperature of water _____ 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 JACKSON Latitude _____ Longitude _____
Township 41 S Nor S, Range 2E E or W, WM.
Section 8 1/4 1/4
Tax Lot 1500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 13095 OLD HWY 99 S
(Approx 3 1/2 mi BEYOND MT. ASHLAND SKI RD)

(10) STATIC WATER LEVEL:
70 ft. below land surface. Date 9-28-89
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found _____
From To Estimated Flow Rate SWL
SEE PAGE 1

(12) WELL LOG: Ground elevation _____
Material From To SWL
VOLCANIC BLUE/GREY 150 158
VOLCANIC CLAYSTONE BROWN 158 163
VOLCANIC BROWN WITH HARD BLACK CLAYSTONE RIS 163 171
VOLCANIC BRECCIA BROWN 171 183
ANG GREY WITH WHITE CLAY 183 262
VOLCANIC TUFF BRECCIA BROWN/GREY 262
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FEB 18 2016
SALEM, OR

Date started 9-26-89 Completed 9-28-89

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed _____ WWC Number _____
Date _____

(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 well construction standards. This report is true to the best of my knowledge and belief.
Signed PIONEER DRILLING WWC Number 796
Date 9-29-89

6-18191

02 28078

(a)

10
10
11
First American Title Insurance Company of Oregon

CRATER TITLE DIVISION

Ashland Branch
366 Lithia Way
Ashland, Oregon 97520
(541) 488-6840 • FAX (541) 488-6842

41-2E
A1500

Order # 20012316DH

WARRANTY DEED

KNOW ALL MEN BY THESE PRESENTS, That **AMUEL RAY FISHER**, Grantor, conveys and warrants to **PAMELA J. MCCLURE AND DARRELL H. PRICE**, Grantee, the following described real property, together with appurtenances, free of encumbrances except as specifically set forth herein, situated in Jackson County, Oregon, described as follows, to-wit:

**as husband and wife

See Exhibit A attached hereto and made a part hereof.

SUBJECT TO:

Rights of the public, rights of way, covenants, restrictions and easements now of record

The true consideration paid for this conveyance is **One Hundred Twenty-Six Thousand And 00/100 DOLLARS \$126,000.00.**

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.

Dated this 17th day of May, 2002.

Amuel Ray Fisher
AMUEL RAY FISHER

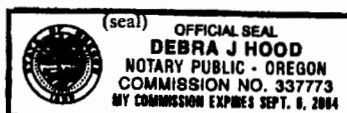
STATE OF OREGON)

) ss.

County of Jackson)

This instrument was acknowledged before me on the _____ day of _____ by AMUEL RAY FISHER.

17th day of May 2002



Debora J. Hood
Notary Public for Oregon
My commission expires: _____

Until a change is requested,
send all tax statements to:
Grantee at:

PO Box 1026
Jacksonville OR 97530

Return document to:
First American Title Insurance Co.
300 W. Main Street, P.O. Box 250
Medford, OR 97501

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SALEM, OR

67891

02 28078

Exhibit A

The North half of the Southeast Quarter of Section 8, Township 41 South, Range 2 East, Willamette Meridian in Jackson County, Oregon. EXCEPTING THEREFROM those tracts conveyed to the State of Oregon, by and through its State Highway Commission, by deed recorded in Volume 219, Page 526, Jackson County, Oregon, Deed Records and by deed recorded as Document No. 67-05519, Official Records of Jackson County, Oregon.

Jackson County, Oregon
- Recorded
OFFICIAL RECORDS

MAY 21 2002

2:00 PM

Frederick J. Beck
COUNTY CLERK

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SALEM, OR

2 -

G-42191

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

1

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 30day 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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Revised 3/4/2010

Ground Water/9

WR

SALEM, OR

G-1891

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: Pamela J. McClure and Darrell H. Price
First

____ Last

Mailing Address: P.O. Box 3086

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Ashland

City

OR

State

97520

Zip

Daytime Phone:

FEB 18 2016

A. Land and Location

SALEM, OR

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:
41S	2E	8	NW/SE	1500	0SR	☒ Diverted	☒ Conveyed	☒ Used	Irrigation & nursery
41S	2E	8	NE/SE	1500	0SR	☐ Diverted	☒ Conveyed	☒ Used	Irrigation & nursery
						☐ Diverted	☐ Conveyed	☐ Used	
						☐ Diverted	☐ Conveyed	☐ Used	

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

JACKSON

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: 20 ☐ 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:

We are proposing to irrigate a portion of tax lot 1500 from an existing well and new proposed well. 

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. →

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SALEM, OR

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 landuse 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): 4.3-1
- ☐ 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:	
		☐ 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.

Pasture irrigation is allowed in DSR zoning per ch. 4.3-1

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FEB 18 2016

Name: Youngsack Kim Title: Planner **SALEM, OR**

Signature: *Kim Youngsack* Phone: 541-774-6946 Date: 2/11/2016

Government Entity: Jackson 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: _____