

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

Water-Use Permit Application Processing

1. Completeness Determination

The Department evaluates whether the application and accompanying map contain all of the information required under OAR 690-310-0040 and OAR 690-310-0050 (www.oregon.gov/owrd/law). The Department also determines whether the proposed use is prohibited by statute. If the Department determines that the application is incomplete, all fees have not been paid, or the use is prohibited by statute, the application and all fees submitted are returned to the applicant.

2. Initial Review

The Department reviews the application to determine whether water is available during the period requested, whether the proposed use is restricted or limited by rule or statute, and whether other issues may preclude approval of or restrict the proposed use. An Initial Review (IR) containing preliminary determinations is mailed to the applicant. The applicant has 14 days from the mailing date to withdraw the application from further processing and receive a refund of all fees paid minus \$200. The applicant may put the application on hold for up to 180 days and may request additional time if necessary.

3. Public Notice

Within 7 days of the mailing of the initial review, the Department gives public notice of the application in the weekly notice published by the Department at www.oregon.gov/owrd. The public comment period is 30 days from publication in the weekly notice.

4. Proposed Final Order Issued

The Department reviews any comments received, including comments from other state agencies related to the protection of sensitive, threatened or endangered fish species. Within 60 days of completion of the IR, the Department issues a Proposed Final Order (PFO) explaining the proposed decision to deny or approve the application. A PFO proposing approval of an application will include a draft permit, and may request additional information or outstanding fees required prior to permit issuance.

5. Public Notice

Within 7 days of issuing the PFO, the Department gives public notice in the weekly notice. Notice includes information about the application and the PFO. Protest must be received by the Department within 45 days after publication of the PFO in the weekly notice. Anyone may file a protest. The protest filing fee is \$350.00 for the applicant and \$700.00 for non-applicants. Protests are filed on approximately 10% of Proposed Final Orders. If a protest is filed, the Department will attempt to settle the protest but will schedule a contested case hearing if necessary.

6. Final Order Issued

If no protests are filed, the Department issues a Final Order consistent with the PFO. If the application is approved, a permit is issued that specifies the details of the authorized use and any terms, limitations or conditions that the Department deems appropriate.

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Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.615)

Include this checklist with the application

Check that each of the following items is included. The application will be returned if all required items are not included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900.

- ☐ SECTION 1: applicant information and signature
- ☐ SECTION 2: property ownership
- ☐ SECTION 3: well development
- ☐ SECTION 4: water use
- ☐ SECTION 5: water management
- ☐ SECTION 6: storage of groundwater in a reservoir
- ☐ SECTION 7: use of stored groundwater from the reservoir
- ☐ SECTION 8: project schedule
- ☐ SECTION 9: within a district
- ☐ SECTION 10: remarks

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Attachments:

- ☐ Land Use Information Form with approval and signature (*must be an original*) or signed receipt
- ☐ 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. Example: A copy of the deed, land sales contract or title insurance policy.
- ☐ Fees - Amount enclosed: \$ _____
See the Department's Fee Schedule at www.oregon.gov/owrd or call (503) 986-0900.

Provide a map and check that each of the following items is included:

- ☐ Permanent quality and drawn in ink
- ☐ Even map scale not less than 4" = 1 mile (example: 1" = 400 ft, 1" = 1320 ft, etc.)
- ☐ North Directional Symbol
- ☐ Township, Range, Section, Quarter/Quarter, Tax Lots
- ☐ Reference corner on map
- ☐ Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west). Each well must be identified by a unique name and/or number.
- ☐ Indicate the area of use by Quarter/Quarter and tax lot clearly identified
- ☐ Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery
- ☐ Location of main canals, ditches, pipelines or flumes (if well is outside of the area of use)
- ☐ Other _____

Application for a Permit to Use Ground Water



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SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME DUANE & TERISE PAULSEN		PHONE (HM) 541-535-2500	
PHONE (WK) 541-535-2500	CELL 541-261-8077	FAX	
ADDRESS 6434 DARK HOLLOW RD			
CITY MEDFORD	STATE OR	ZIP 97501	E-MAIL* TPG1CO@AOL.COM

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 MAY 31 2016
ADDRESS		CELL		
CITY	STATE	ZIP	E-MAIL*	

Note: Attach multiple copies as needed

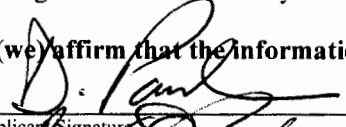
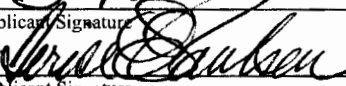
* By providing an e-mail address, consent is given to receive all correspondence from the department electronically. (paper copies of the final order documents will also be mailed.)

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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

Applicant Signature

DUANE PAULSEN
Print Name and title if applicable
TERISE PAULSEN
Print Name and title if applicable

5/12/16
Date
5/12/16
Date

For Department Use		
App. No. G148307	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.

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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
1	N/A	N/A	N/A
NOTE: COULD NOT IDENTIFY ANY CREEK WITH IN A MILE			

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*).

— THERE IS A SCRIBNER ERROR ON WELL LOG WITH THE WRONG TAT LOT LISTED. ADDRESS IS CORRECT & I.D. TAG IS ATTACHED TO WELL HEAD
WELL ID# IS L40767

Revised 2/1/2012

Ground Water/4

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G-18307

See additional
page for well
email from
customer

SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: _____ (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)
1	☐	☒	JACK	☒	6"	1-47	120-180	0-47	35'	B30 Rock	200'	13 gpm	13.75
	☐	☐	53846	☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									

* 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.

Revised 2/1/2012

Ground Water/5

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G-18367

SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
NURSERY	YEAR ROUND	13.75

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: _____ 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): 1 1/2 HP SUPER SECTION PUMP
MODEL # A-255-100
- ☐ Other means (describe): _____

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

B. Application Method

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

HAND WATERING

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 REQUESTED ONLY WHEN WATERING PLANTS. ALL WATER USE WILL BE METERED.

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: N/A Acreage inundated by reservoir: N/A.

Use(s): N/A

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): N/A

USE OF STORED GROUND WATER	PERIOD OF USE
<u>N/A</u>	<u>N/A</u>

SECTION 8: PROJECT SCHEDULE

Date construction will begin: ASAP

Date construction will be completed: ASAP Bought Land w/ well on it.

Date beneficial water use will begin: ASAP

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 <u>N/A.</u>	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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SALEM, OR

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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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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: DUANE & TERISE PAULSEN
First Last
Mailing Address: 6426 DARK HOLLOW RD
M20FORD OR 97504 Daytime Phone: 541-535-2500
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	1/4 1/4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
<u>38</u>	<u>2N</u>	<u>24</u>	<u>SENE</u>	<u>1502</u>	<u>RR-00</u>	☒ Diverted	☒ Conveyed	☒ Used	<u>COM WATERING</u>
						☐ Diverted	☐ Conveyed	☐ Used	
						☐ Diverted	☐ Conveyed	☐ Used	
						☐ Diverted	☐ Conveyed	☐ 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: 13.75 ☐ 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:

AT NO TIME DO I PLAN ON OPENING A COMMERCIAL NURSERY, I WILL ONLY BE WATERING CANNABIS PLANTS.

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:	
		☐ 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: _____ Title: _____

Signature: _____ Phone: _____ Date: _____

Government Entity: _____

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: _____

Date _____

(For staff use only)



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

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ SECTION 1: _____
- ☐ SECTION 2: _____
- ☐ SECTION 3: _____
- ☐ SECTION 4: _____
- ☐ SECTION 5: _____
- ☐ SECTION 6: _____
- ☐ SECTION 7: _____
- ☐ SECTION 8: _____
- ☐ SECTION 9: _____
- ☐ Land Use Information Form _____
- ☐ 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.
- ☐ Fees _____

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MAP

- ☐ Permanent quality and drawn in ink
- ☐ Even map scale not less than 4" = 1 mile (example: 1" = 400 ft, 1" = 1320 ft, etc.)
- ☐ North Directional Symbol
- ☐ Township, Range, Section, Quarter/Quarter, Tax Lots
- ☐ Reference corner on map
- ☐ Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west). Each well must be identified by a unique name and/or number.
- ☐ Indicate the area of use by Quarter/Quarter and tax lot clearly identified
- ☐ Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery
- ☐ Location of main canals, ditches, pipelines or flumes (if well is outside of the area of use)
- ☐ Other _____

SALEM, OR

Jackson County Title
Division of Lawyers Title Insurance Corporation
1555 East McAndrews Road, Suite 100
Medford, Oregon 97504
Tel: (541) 779-2811 Fax: (541) 772-6079

December 14, 2001

Duane C. Paulsen
Terise E. Paulsen
P.O. Box 641608
Los Angeles, CA 90064-6608

Re: Escrow No. 102970

We are pleased to advise that the above numbered escrow has been completed, and the following items are enclosed as indicated:

1. **Deed** recorded 12/13/01.

If you have not already received information concerning where payments are to be made on your loan, you should be receiving correspondence shortly from your lender. In the event that you have not received instructions prior to the date of your first payment, please contact your lender.

FOR YOUR INFORMATION: If you have not received the tax bill for the property you have purchased by **NOVEMBER 1ST**, please contact the Tax Collector's Office for the bill. (If taxes are included in your monthly payment, YOUR LENDER MAY RECEIVE THE TAX BILL, instead of you.)

We wish to thank you for this opportunity to be of service to you, and to assure you that if you have any questions regarding the enclosures, we will be happy to assist you.

Sincerely,

Cheryl A. Springer 27

Cheryl A. Springer, C.E.T
Escrow Officer

Enclosures
lfltr9a

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G-18307

01 60046

102970cas

After recording return to:

Jackson County Title
Division of Lawyers Title Insurance Corporation
1555 E. McAndrews Road, Suite 100
Medford OR 97504

10.6
10.6
11.6

Until a change is requested, all tax statements
shall be sent to Grantee at the following address:

P.O. Box 641608
Los Angeles, CA 90064-6608

STATUTORY WARRANTY DEED

Charles William Rombach, Jr. and Carol Jeanne Rombach

, Grantor, conveys and warrants to
Duane C. Paulsen and Terise E. Paulsen, husband and wife, as tenants by the entirety

, Grantee, the following described real property free of encumbrances except as specifically set forth herein:
See Exhibit "A" attached hereto and made a part hereof

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This property is free of encumbrances, EXCEPT:
See Exhibit "A" attached hereto and made a part hereof

MAY 31 2006

SALEM, OR

The true consideration for this conveyance is \$ 195,000.00.

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 6th day of December, 2001.

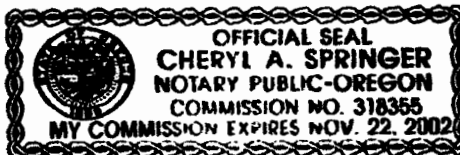
Charles William Rombach, Jr.
Charles William Rombach, Jr.

Carol Jeanne Rombach
Carol Jeanne Rombach

STATE OF OREGON, COUNTY OF Jackson

The foregoing instrument was acknowledged before me this 6th day of December 2001, by
Charles William Rombach, Jr. and Carol Jeanne Rombach

Ceryl A. Springer
Notary Public for Oregon
My commission expires 11-22-02



6-18307

01 60046

EXHIBIT A

Beginning at the southwest corner of Lot Nine (9) of ROYAL ORCHARD TRACT NO. 2, Jackson County, Oregon, according to the official plat thereof, now of record; thence along the west line of said tract, North 00°04'32" West, 636.61 feet to the northwest corner of Lot 7; thence along the north line of said Lot 7, North 89°59'43" East, 377.95 feet to a 5/8" iron pin; thence South 00°01'37" West, 636.66 feet to a 5/8" iron pin on the south line of said Lot 9; thence along said south line, North 89°59'51" West, 376.81 feet to the point of beginning.

(Code 4-10, Account #1-080318-5, Map #382W24, Tax Lot #1502)

SUBJECT TO:

1. Covenants, conditions, restrictions, easements, and/or setbacks imposed by instrument, subject to the terms and provisions thereof, recorded January 31, 2001 as No. 01-04039, of the Official Records of Jackson County, Oregon.

NOTE: This exception omits any covenant, condition or restriction based on race, color, religion, sex, handicap, familial status or national origin as provided in 42 U.S.C. Sec.3604, unless and only to the extent that the covenant (a) is not in violation of state or federal law, (b) is exempt under 42 U.S.C. Sec.3607, or (c) relates to a handicap, but does not discriminate against handicapped people.

2. Covenant to bear a share in the cost of construction, maintenance, or repair of private road easement which was granted over adjacent property by instrument, subject to the terms and provisions thereof, recorded January 31, 2001 as No. 01-04039, Official Records, Jackson County, Oregon.

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SALEM, OR

Jackson County, Oregon
Recorded
OFFICIAL RECORDS

DEC 13 2001

2:10 PM

John S. Beckwith
COUNTY CLERK

G-10307

2'

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)
Instructions for completing this report are on the last page of this form

JACK 53846

WELL ID # L L40767

(START CARD) # 131293

(1) OWNER:

Well Number:

Name Bill Rombach
Address 101 South Riverside
City Medford State OR Zip 97501

(2) TYPE OF WORK:

☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other

(4) PROPOSED USE:

☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 200 ft.
Explosives used ☐ Yes ☒ No Type Amount

HOLE			SEAL			Amount	
Diameter	From	To	Material	From	To	sacks or pounds	
10	0	47	bentonite	0	47	23 sacks	
6	47	200					

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

☒ Other poured dry

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	47	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4	4	200	160	☐	☒	☒	☐
					☐	☐	☐	☐

Final location of shoe(s) 47'

(7) PERFORATIONS/SCREENS:

☒ Perforations

Method skisaw

☐ Screens

Type

Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
120	180	1/4x6	100			☐	☒
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min 11 Drawdown 200 Drill stem at 200 Time 1 hr.

Temperature of Water 59 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 38S N or S. Range 2W E or W. of WM.
Section 24 NE 1/4 NE 1/4
Tax lot 1503 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 6434 Dark Hollow road

(10) STATIC WATER LEVEL:

39 ft. below land surface. Date 5/19/2000
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 72

From	To	Estimated Flow Rate	SWL
72	88	11	39

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
brown clay	0	3	
tan clay	3	9	
grey clay with gravel	9	28	
tan sandstone	28	41	
grey sandstone	41	64	
green sandstone	64	72	
grey sandstone with quartz	72	88	39
shale	88	97	
grey granite	97	104	
shale	104	143	
grey granite	143	194	
shale	194	200	

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ASHLAND DRILLING

600 S. Pacific Hwy.

Talent, OR 97540

(503) 488-2827 772-1009

JUN 19 2000

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 5/19/2000

Completed 5/19/2000

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed William W. Ashland WWC Number 1657
Ashland Drilling Inc. Date 6/13/00

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed William W. Ashland WWC Number 1478
Ashland Drilling Inc. Date 6/13/00

ORIGINAL - WATER RESOURCES DEPARTMENT

FIRST COPY - CONSTRUCTOR

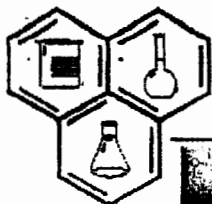
SECOND COPY - CUSTOMER

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MAY 31 2016

SALEM, OR

G-18307



NEILSON RESEARCH CORPORATION

Analysis Report

Green Valley Pump, Inc.
609 South Pacific Hwy
Talent, OR 97540

Lab Order: 0110391
NRC Sample ID: 0110391-01B
Collection Date: 10/19/01 1:20:00 PM
Received Date: 10/19/01 4:35:35 PM
Reported Date: 11/6/01 2:20:45 PM

Sample Information:

Rombach Residence
6434 Dark Hollow
Medford, OR 97501

Client Sample ID: Dark Hollow
Collectors Name: SJ
Sample Location: Well Head
Source: Well

TOP 20 ANALYSIS TM

Analyses	Method	Units	PQL	EPA Limit	Result	Date Analyzed
Aluminum	EPA 200.7	mg/L	0.01	0.05 - 0.2	0.215	10/23/01
Arsenic	EPA 200.9	mg/L	0.002	0.05	ND	10/23/01
Barium	EPA 200.7	mg/L	0.005	2.0	0.447	10/23/01
Boron	EPA 200.7	mg/L	0.05	1.0 - 4.0	0.150	10/23/01
Cadmium	EPA 200.7	mg/L	0.001	0.005	0.00380	10/23/01
Calcium	EPA 200.7	mg/L	0.05	N.L.	56.7	10/23/01
Chloride	EPA 300.0	mg/L	1	250	2.06	10/19/01
Copper	EPA 200.7	mg/L	0.05	1.3 AL	ND	10/23/01
Fluoride	EPA 300.0	mg/L	0.2	2 - 4	ND	10/19/01
Hardness	EPA 200.7	mg/L	0.3	250	216	10/23/01
Iron	EPA 200.7	mg/L	0.05	0.3	0.713	10/23/01
Lead	EPA 200.9	mg/L	0.001	0.015-AL	ND	11/5/01
Lithium	EPA 200.7	mg/L	0.1	N.L.	ND	10/23/01
Magnesium	EPA 200.7	mg/L	0.05	N.L.	18.0	10/23/01
Manganese	EPA 200.7	mg/L	0.05	0.05	0.221	10/23/01
Nitrate Nitrogen	EPA 300.0	mg/L	0.2	10	ND	10/19/01
pH	SM 4500 H-B	pH Units	0.1	6.5 - 8.5	7.20	10/19/01
Sodium	EPA 200.7	mg/L	0.1	N.L.	13.2	10/23/01
Specific Conductance	SM 2510B	µmhos/cm	1	N.L.	428	10/19/01
Sulfate	EPA 300.0	mg/L	0.5	250	15.5	10/19/01
Zinc	EPA 200.7	mg/L	0.05	5.0	2.55	10/23/01

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SALEM, OR

Tim Fowler
Data Release Authorization - Project Manager

Notes: ND - Not Detected at the PQL N.L. - No Limit PQL - Practical Quantitation Limit

TM - Top 20 is a registered trade mark of Neilson Research Corporation, Oregon Certified Laboratory OR-028

Please Note: If the test results indicate a need for water treatment or conditioning, additional testing may be required.

Please check with your equipment provider

Environmental Testing Laboratory

245 S. GRAPE ST. & MEDFORD, OR 97501-3123 & (541) 770-5678 & FAX (541) 770-2901

G-18307

20881-29

PAGE 01/02

NEILSON RESEARCH

541-770-2901

11/02/2001 13:43

SALEM, OR

MAY 31

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Bottle # 039710
 Sample Location (address of water source)
 Name Ron Bach
 Address Dark Hollow
 City _____ State _____ Zip _____
 Phone _____
 Collection Date and Time:
10 / 19 / 01 2:00 AM PM
 Month Day Year Hour Min
 Collected by: SI
 Sample Point: Well Head
 Water Source: ☐ Spring ☒ Well ☐ Stream
 Treatment: ☐ None ☐ Chlorinator
☐ Iodinator ☐ UV Light

TEST RESULTS
☒ Sample **PASSED**
 Coliform bacteria absent
☐ Sample **FAILED**
 Coliform bacteria present
☐ Fecal coliforms / E. coli absent
☐ Fecal coliforms / E. coli present
 Comments _____

Return address for report:
 Name Green Valley Pump
 Address 609 S. Pacific Hwy
 City, State, Zip Talent OR 97540



**NEILSON
RESEARCH
CORPORATION**

Environmental Testing Laboratory
 245 South Omega Street & Medford, Oregon 97501
 Telephone (541) 770-5678 & Fax (541) 770-2901
 EPA Approved, Oregon Certified
 Laboratory #28

NRC Sample # 040611-01A
 Date & Time Received 10/31/01 1603
 Date & Time Analyzed 10-31-01 1700
 Date Reported 1/1
 P B ☐ P.O. ☐ Cash ☐ Check
 Test Methods:
☒ IMMO_MUG (Results Next day)
☐ MTF (Results 1 Week)
☐ EC + MUG ☐ MF
 Sample Invalid: Resample Immediately:
☐ Leaked ☐ Over 30 hours old
☐ Heavy non-coliform growth
 Analyst D. Grump Date 11/1/01

JACKSON COUNTY WELL TEST FORM

DATE 10/19/01

PROPERTY DESCRIPTION

LEGAL OWNER RombachADDRESS 6434 Dark Hollow

LOCATION (township/range/section/tax lot) _____

Other location reference (if possible) _____

AGENT or REPRESENTATIVES _____

Are there other wells on this property?

YES NO

IF YES, distance from TEST WELL? _____

Is (are) well(s) in use?

YES NO

Purpose _____

IF NO, is well properly abandoned?

YES NO

Test Well Data: * Had to stop using meter due to debris plugging screen.
 TEST PUMP: Used 5 gallon bucket for remainder of test

Depth of pump: 190'Size of Column 6"Horse Power 1 hpSTARTED PUMP (TIME): 9:15 AM

TIME	STATIC LEVEL	METER READING GAL. PER MIN.	TIME	PUMPING LEVEL	METER READING GAL PER MIN.
1:00	35	---	1:30	64	204 13.6
1:15		---	1:45	64	204 13.6
1:30		---	2:00	65	204 13.6
1:45		---	1:15	65	204 13.6
1:00		---	1:30	66	145 13.0
	PUMPING	4035 ---	1:45	6	145 13.0
1:01		4049 --- 14	3:00	69	145 13.0
1:03	46	4077 --- 14	1:15	73	145 13.0
1:05	48	4104 --- 13.5	1:30	77	145 13.0
			1:45	81	145 13.0
			4:00	84	145 13.0
* 1:10	48	4147 --- 8.6	End pumping phase static recovery measure		
1:15	53	68 13.6	1:35	56	
1:20	57	72 14.3	1:30		
1:25	59	72 14.3	1:45		
1:30	60	72 14.3	1:00		
1:45	63	204 13.6			
1:00	64	204 13.6	80% recovery time		
1:15	64	204 --- 13.6			

3189 Gallons Pumped in 4 hours13.3 G.P.M. Pumped for 4 hours (Average)1st Hour 13.4 G.P.M.2nd Hour 13.6 G.P.M.3rd Hour 13.3 G.P.M.4th Hour 13.0 G.P.M.

I certify that I have complied with existing state and local requirements in completing the well test and recording the data on this form.

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DATE

10-19-01

Certified Well Tester

GREEN VALLEY PUMP, INC.
 609 S. Pacific Hwy.
 Talent, OR 97540

MAY 31 2016

SALEM, OR

G-18307

G-18207


GREEN VALLEY PUMP

 609 S. Pacific Hwy.
 Talent, Oregon 97540
 535-5522 or 535-4275

JOB NOTES:

Well 200 11GPM

DATE 10-11-01

 New Well
 ① Leave Pump In ② Pull Pump Out

QTY.	DESCRIPTION OF MATERIAL	UNIT COST	EXTENSION
①	Pump Stays IN		
1	At 12-100 Aeromotor (12 GPM) 1hp 230V Subm Pump.	949.00	
190	1" Sch 80 PVC Well Drop Pipe w/ Steel Coupling.	193.90	
190	#12-3 WG Subm wire w/ Subm Splice Kit	78.50	
1	6x1 Well Seal w/ Vent + Tee	30.00	
②	Set Pump - Test - Pull Pump		
\$892.40 Pump + Pipe - wire - Vent 1251.40 Less to Install 262.00 1513.40 less today pay discount 250.40 Net. Due from D. Carlson to Rombeck 1263.00			
TOTAL MATERIALS			1251.40
LABOR COSTS:			
Shop			
Mechanic			
Helper 20 Set			
Crane			
TOTAL DUE - 30 DAYS			1893.40
NOTE! Discount if paid within 10 days			250.40
TOTAL DISCOUNT AMOUNT			1643.00

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10-11-01

SALEM OR

TOTAL P. 01

ITEMS NOT INCLUDED:

TOTAL MATERIALS

 4HR. well flow + turnity
 + N. truck w/ air

LABOR

TOTAL DUE - 30 DAYS

NOTE! Discount if paid

within 10 days

0-4-25

TOTAL DISCOUNT AMOUNT

 Spread this amount
 10-26-01 - check #4882

 Mett Carlson 1263.00
 10/26/01

10-11-2001

02:40PM

FROM GREEN VALLEY PUMP

TO

7796345

P. 01

GREW Scott A

From: tpgco@aol.com
Sent: Wednesday, June 01, 2016 10:36 AM
To: customerservice
Subject: Paulsen info requested
Attachments: PaulsenWRDSect3.pdf

Scott - Thank you for your call today. Please confirm your receipt of the attached form.

Let me know if we can provide additional information.

Thank you,
Terise Paulsen

The Paulsen Group, LLC
o) 877-857-1800, 541-535-2500 - e-fax) 541-610-1577

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WATER RESOURCES DEPT
SALEM, OREGON

SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: 15 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.

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)
1	☐	☒	JACK 53846	☒	6"	1-47	120-180	0-47	35'	BEDROCK	200'	13 gpm	13.75
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									

* 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. MAR1 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.

Revised 2/1/2012

Ground Water/5

WR

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WATER RESOURCES DEPT
SALEM, OREGON

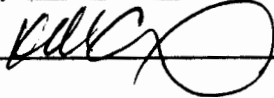
*emailed from
customer*

G-18307

Receipt for Request for Land Use Information

Applicant name: Duane Paulsen

City or County: Jackson County Staff contact: Kate McGuire

Signature:  Phone: 541-794-6907 Date: 05.27.2016

Revised 3/4/2010

Ground Water/10

WR



<http://www.co.jackson.or.us/>

Address: 6434 DARK HOLLOW RD, MEDFORD, OR
Parcel Number: 38-2W-24-1502

Transaction Receipt

Record Number: 439-16-01234-ZON

Receipt Number: 236535

JACKSON COUNTY DEVELOPMENT SERVICES

10 S Oakdale Ave, Room 100

Medford, OR 97501

Phone: 541-774-6927

JCBuilding@jacksoncounty.org

Receipt Date: 5/27/16

Fee Items Paid

DESCRIPTION	ACCOUNT CODE	AMOUNT PAID
Type I Counter Permit	3701040000.45105.1300	\$118.00
		\$118.00

Payment Summary

PAYMENT METHOD	PAYER	COMMENTS	AMOUNT PAID
Check- Check Nbr: 5205	The Paulsen Group LLC	LUC_kjm	\$118.00
			\$118.00

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MAY 31 2016

SALEM, OR

G-18307

THE PAULSEN GROUP, LLC

5205

Jackson County

118. ~~no~~ _{line}

water Rights

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SALEM, OR

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