

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 ROY NELSON		PHONE (HM)	
PHONE (WK)	CELL 541-729-7384	FAX	
ADDRESS 40152 EAST FIRST ST			
CITY LOWELL	STATE OR	ZIP 97452	E-MAIL* ROY@SUNRIDGE

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.)

RECEIVED BY OWRD

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.

JUN 02 2016

SALEM, OR

I (we) affirm that the information contained in this application is true and accurate.


Applicant Signature

Roy Nelson
Print Name and title if applicable

5/13/16
Date

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. <u>G-18310</u>	Permit No. _____	Date _____

RECEIVED BY OWRD

JUN 02 2016

SALEM, OR



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

RECEIVED BY OWRD

MAY 20 2016

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME ROY NELSON			PHONE (HM) SALEM, OR		
PHONE (WK)		CELL 541-729-7384		FAX	
ADDRESS 40152 EAST 1 ST STREET					
CITY LOWELL		STATE OR	ZIP 97452	E-MAIL* ROY@SUNRIDGE.NET	

Organization Information

NAME			PHONE		
ADDRESS					CELL
CITY		STATE	ZIP	E-MAIL*	

*Meeting on Ballgame
New Sheet*

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

AGENT / BUSINESS NAME <i>Void Part</i>			PHONE			FAX
ADDRESS					CELL	
CITY		STATE	ZIP	E-MAIL*		

Void Part

See

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.

Roy Nelson
Applicant Signature

Roy Nelson
Print Name and title if applicable

5/13/16
Date

Applicant Signature

Print Name and title if applicable

Date

RECEIVED BY OWRD

JUN 02 2016

Date

SALEM, OR

WR

JUN 02 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. **SALEM, OR**

RECEIVED BY OWRD

Yes

There are no encumbrances.

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

MAY 20 2016

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.

SALEM, OR

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

Roy Nelson Rev. Living Trust & Martha W. Austin Rev. Living Trust, 40152 E 1st St., Lowell OR 97452

Nelson-Johnson Living Trust, 40160 E 1st St, Lowell, OR 97452

Lookout Point LLC, 40160 E 1st St, Lowell, OR 97452

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
2	Dexter Lake	5000'	565'
3	Dexter Lake	3600'	560'
4	Dexter Lake	1400'	300'
5	Dexter Lake	1700'	175'

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*).

G-1850

SECTION 3: WELL DEVELOPMENT, CONTINUED

6-10-10

Total maximum rate requested: 62 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.

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)
2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	26646	<input type="checkbox"/>	6"	0-18'	None	0-18'	75' on 5/22/03	Sandstone	160'	7	11.3
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NA	<input type="checkbox"/>	6"	0-18	None	0-18'	NA	Sandstone	160	30	48.4
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NA	<input type="checkbox"/>	6"	0-18	None	0-18'	NA	Sandstone	160	30	48.4
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NA	<input type="checkbox"/>	6"	0-18	None	0-18'	NA	Sandstone	160	30	48.4
	<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.

RECEIVED BY OWRD

JUN 02 2016

SALEM, OR

SECTION 4: WATER USE

SALEM, OR

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Nursery	Year round	100

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: 20 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: 100

- 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): 1/2 HP submersible for well #2, wells 3, 4 & 5 unknown

Other means (describe): _____

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

B. Application Method

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

Drip, sprinkler

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.

Meters on each nursery use, convey all water in pressurized pipe, use drip systems wherever feasible.

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: _____

JUN 02 2016

MAY 20 2016

Use(s): _____

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

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

SECTION 7: USE OF STORED GROUND WATER FROM THE RESERVOIR

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

Annual volume (acre-feet): _____

USE OF STORED GROUND WATER	PERIOD OF USE

SECTION 8: PROJECT SCHEDULE

Date construction will begin: June 1, 2016

Date construction will be completed: October 15, 2018

Date beneficial water use will begin: March 1, 2017

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).

G-10310

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 _____

RECEIVED BY OWRD

MAY 20 2016

SALEM, OR

RECEIVED BY OWRD

JUN 02 2016

SALEM, OR

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 _____

G-18310

LEGAL DESCRIPTIONS FOR WATER RIGHTS APPLICATION

PROPERTY OF NELSON-JOHNSON LIVING TRUST:

Parcel 1 of Land Partition 95-P0685, as platted and recorded in the Lane County Plat Records.

PROPERTY OF ROY NELSON & MARTHA W AUSTIN REVOCABLE LIVING TRUSTS:

Parcel 2 of Land Partition 95-P0685, as platted and recorded in the Lane County Plat Records.

PROPERTY OF LOOKOUT POINT LLC:

Parcels 1 and 2 of Land Partition 97-P1008, as platted and recorded in the Lane County Plat Records.

and:

Beginning at the Southwest corner of Section 12, Township 19 South, Range 1 West of the Willamette Meridian; thence, North 1° 30' 09" East 1317.85 feet to the Northwest corner of the Southwest one-quarter of the Southwest one-quarter of said Section 12; thence, South 88° 25' 05" East 832.72 feet along the North line of said Southwest one-quarter of the Southwest one-quarter to the Northwest corner of that easement area described in Exhibit D of that instrument recorded as Instrument No. 9854981; thence, South 1° 34' 55" West 180.00 feet along the West line of said easement area to the Southwest corner thereof; thence, South 44° 34' 57" East 462.17 feet to a point; thence, South 56° 42' 45" East 1261.18 feet to a point; thence, South 88° 32' 40" East 417.04 feet to a point on the East line of the Southwest one-quarter of said Section 12; thence, South 1° 25' 44" West 150.00 feet along said East line to the South one-quarter corner of said Section 12; thence, South 0° 56' 00" West 2629.36 feet along the East line of the Northwest one-quarter of Section 13 said Township and Range to the center one-quarter section corner thereof; thence, North 88° 38' 59" West 2641.49 feet along the East-West one-quarter line through said Section 13 to the West one-quarter corner of said Section 13; thence, North 0° 38' 50" East 2634.36 feet to the point of beginning in Lane County, Oregon.

RECEIVED BY OWRD

RECEIVED BY OWRD MAY 20 2016

JUN 02 2016

SALEM, OR

SALEM, OR

G-19310

FOR WATER RESOURCES DEPARTMENT USE ONLY

Date Postmarked _____
Date Hand-Delivered _____
Watermaster Initials _____

W 119804
WRD Receipt _____
Date Fee Received _____

RECEIVED BY OWRD

Check No. _____ RECEIVED BY OWRD

START CARD

JUN 02 2016

NOTICE OF BEGINNING OF WELL CONSTRUCTION
(as required by ORS 537.762)

MAY 20 2016

SALEM, OR

This form must be completed and the original copy mailed or delivered to the Water Resources Department, 158 12th Street, Salem, OR 97310, for all new well construction, or conversion of an existing hole not previously used to seek water. This original copy must be mailed or delivered no later than the day construction or conversion work begins. A \$75 fee shall accompany the original copy for all new well construction and conversion (make checks payable to the Water Resources Department). Notices meeting the submittal requirements but received without the required fee will not be accepted as properly and timely filed. In addition, the constructor shall provide the "Watermaster Copy" of this notice to the office of the district watermaster within which the well is being constructed, altered, converted or abandoned using one of the following options: (a) by regular mail no later than three (3) calendar days (72 hours) prior to commencement of work; or, (b) by hand delivery, during regular office hours, no later than the day work is commenced; or, (c) by FAX no later than the day work is commenced. If method (c) is used, the original "Watermaster Copy" of this notice shall also be mailed or delivered to the office of the district watermaster no later than the day work is commenced. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$75 fee with the start card and for failure to submit cards prior to beginning any construction, alteration, conversion or abandonment work.

Owner's name and mailing address: MIA Nelson
Home Phone: 937-1723
Phone: 937-4107
Work Phone: _____
40160 E First St
Seaside OR 97132

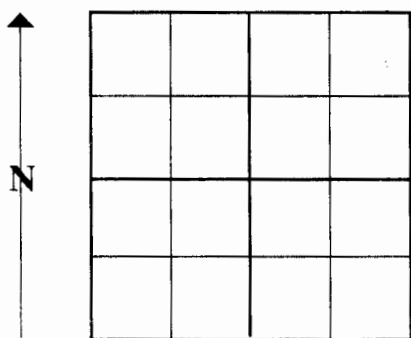
Check type of work: Fee Required: New Construction No Fee Required: Alteration (Repair/Recondition)
 Conversion Deepening
 Abandonment Original Start Card Number _____

Proposed Commencement Date: 9-23-98

Existing or Proposed Well Depth: 200 Diameter: 6 Original Well I.D. Label Number: _____

Check Use: Domestic Public System (Community) Industrial Irrigation Monitoring
 Thermal Injection Other _____

Proposed Well Location: County Towne Township: 19 Range: 01 Section: 11
North or South East or West



4355.77N 1/4 of 122 4/16 75W 1/4 of above section.

2. Street Address of well location (or directions if not assigned).
40160 E First St
Seaside OR 97132

3. Tax-lot number of well location: 1601

4. Attach map with location identified. (See reverse for approved maps)

5. Show well location within 1/4, 1/4 of section grid at left.

We hereby certify that we have read the back of this form and that the information provided is accurate to the best of our knowledge.

Owner/Agent _____
Date Signed _____
Bonded Water/Monitor Well Constructor _____ License No. 1553
Company _____ Date Signed 9-23-98

OWNER PLEASE NOTE: This is not a water right application. The owner is responsible for obtaining a water right through the Water Resources Department, if required. The Oregon Health Division requires plans to be submitted and approved prior to construction if the well is to be used as a public system.

ADDITIONAL IMPORTANT INFORMATION ON BACK.

THIS COPY TO CUSTOMER.

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

WELL I.D. # L 26696
 START CARD # 119309

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

(1) OWNER: Well Number _____
 Name W.D. Nelson
 Address 40160 E First St
 City Lewell State OR Zip 97135

(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 140 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10	0	15	SEALED	0	15	0

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"	12	19	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Type	Number	Diameter	Material	Tele/pipe size	Casing	Liner
								<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
5		160	1 hr.

Temperature of water 58 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 Lane Latitude 42° 35.72' Longitude 122° 46.75'
 Township 19 N or S Range 01 E or W. WM.
 Section 11 1/4 1/4
 Tax Lot 160 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
70 ft. below land surface. Date 9-25-98
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 110

From	To	Estimated Flow Rate	SWL
110	150	5 gpm	

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Brown clay w/ Boulder	0	10	
Reddish sand sandstone	10	25	
Med gray sandstone	25	30	
Red Blue Green sandstone	30	60	
Blue sandstone interbedded	60	160	

Date started 9-23-98 Completed 9-28-98
 (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 the best of my knowledge and belief.
 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
 WWC Number 422
 Signed John H. [Signature] Date 9-28-98



LAND USE APPLICATION - ADMINISTRATIVE Land Use Compatibility Statement

PUBLIC WORKS DEPARTMENT 3050 N. DELTA HWY, EUGENE OR 97401 Planning: 682-3577

For Office Use Only: FILE # 509-PA16-05409 FEE: \$130.00
RXS

Applicant (print name): Roy Nelson
Mailing address: 40152 East First St Lowell, OR 97452
Phone: 541-729-7384 Email: roy@sunridge.net

Applicant Signature: *Roy Nelson*

PROPERTY LOCATION				<u>160</u>			
		<u>11</u>	<u>162</u>				
<u>19S</u>	<u>01W</u>	<u>14</u>	<u>102 + 103</u>				
Township	Range	Section	Taxlot	Subdivision/partition	lot/parcel	block	
		<u>13</u>	<u>100</u>				
<u>40152 + 40160 East First St</u>				<u>Lowell, OR</u>	<u>97452</u>		
Site address							

The Land Use Compatibility Statement (LUCS) is the form used when a customer needs a written response from the Planning Program, including State permit sign-offs. It is intended to assist customers who have a question that can not be answered in 10 minutes by the Planner at the front desk.

In the space below, write the question/request you have for the Planner. Attach additional pages if necessary.

See attached Land use Information Form

RECEIVED BY OWRD
MAY 20 2016
SALEM, OR

Version 1/2013
RECEIVED BY OWRD

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.

RECEIVED BY OWRD RECEIVED BY OWRD

JUN 02 2016

MAY 20 2016

SALEM, OR
Ground Water/8

SALEM, OR

WR

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: Roy First Nelson Last

Mailing Address: 40152 E. First Street

Lowell City OR State 97452 Zip Daytime Phone: 541-729-7384

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:
19S	01W	11	00	1601	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	farming
19S	01W	11	00	1602	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	farming
19S	01W	14	00	102 & 103	EFU	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	farming
19S	01W	13	00	100	F-1	<input type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	farming

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

Lane County

RECEIVED BY OWRD
RECEIVED BY OWRD
MAY 20 2016
JUN 02 2016

SALEM, OR

B. Description of Proposed Use

SALEM, OR

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: 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 _____

Briefly describe:

Small scale irrigation of specialty crops, including nursery/greenhouse use



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): LC 16.210(2)(d)
LC 16.212(3)(a)
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

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

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

**FARM USE ALLOWED IN FI PER 16.210(2)(d) AND IN
FFU PER 16.212(3)(a)**

RECEIVED BY OWRD

RECEIVED BY OWRI:

JUN 02 2016

MAY 20 2016

SALEM, OR

Name: RAFAEL SEBBA, Title: SENIOR PLANNER SALEM, OR

Signature: [Signature] Phone: 541-682-4620 Date: 5.16.2016

Government Entity: LANE COUNTY

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

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.

- | | | |
|-------------------------------------|--|------------------|
| <input checked="" type="checkbox"/> | SECTION 1: applicant information and signature | |
| <input checked="" type="checkbox"/> | SECTION 2: property ownership | RECEIVED BY OWRD |
| <input checked="" type="checkbox"/> | SECTION 3: well development | MAY 20 2016 |
| <input checked="" type="checkbox"/> | SECTION 4: water use | SALEM, OR |
| <input checked="" type="checkbox"/> | SECTION 5: water management | |
| <input type="checkbox"/> | SECTION 6: storage of groundwater in a reservoir <i>n/a</i> | RECEIVED BY OWRD |
| <input type="checkbox"/> | SECTION 7: use of stored groundwater from the reservoir <i>n/a</i> | |
| <input checked="" type="checkbox"/> | SECTION 8: project schedule | JUN 02 2016 |
| <input type="checkbox"/> | SECTION 9: within a district <i>n/a</i> | SALEM, OR |
| <input type="checkbox"/> | SECTION 10: remarks <i>n/a</i> | |

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: \$ 2800
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 _____

G-19310

WR



Oregon Water Resources Department
 Apply for a Permit to Appropriate Ground Water and/or Store Ground Water

- [Main](#)
- [Help](#)
- [Return](#)
- [Contact Us](#)

Today's Date: Monday, May 16, 2016

Base Application Fee for use of Ground, Surface and optionally Stored Water.		\$1,150.00	✓
Number of proposed cubic feet per second (cfs) to be appropriated. (1 cfs = 448.83 gallons per minute)	.5	\$300.00	✓
Number of proposed Use's for the appropriated water. (i.e. Irrigation, Supplemental Irrigation, Pond Maintenance, Industrial, Commercial, etc) *	1		
Number of proposed Ground Water points of appropriation. (i.e. number of wells) (Include all injection wells, if applicable) **	4	\$900.00	✓
Number of Acre Feet to be stored in a reservoir/pond from Ground Water.	0		
Number of Acre Feet to be appropriated from reservoir/pond (Only Applies to reservoir/pond constructed under Ground Water Application)	0		
Number of reservoirs.	0		
Permit Recording Fee. ***		\$450.00	✓
* the 1st Water Use is included in the base cost. ** the 1st Ground Water point of appropriation is included in the base cost. *** the Permit Recording Fee is not required when the application is submitted but, must be paid before a permit will be issued. It is fully refundable if a permit is not issued. If the recording fee is not paid prior to issuance of the Final Order, permit issuance will be delayed.	Recalculate		
Estimated cost of Permit Application		\$2,800.00	✓

OWRD Fee Schedule

Fee Calculator Version B20130709

RECEIVED BY OWRD

MAY 20 2016

SALEM, OR

RECEIVED BY OWRD

JUN 02 2016

SALEM, OR

G-10310



Oregon

Kate Brown, Governor

Water Resources Department

North Mall Office Building
725 Summer St NE, Suite A
Salem, OR 97301
Phone (503) 986-0900
Fax (503) 986-0904
www.wrd.state.or.us

May 23, 2016

Roy Nelson
40182 East 1st Street
Lowell, OR 97452

RECEIVED BY OWRD

JUN 02 2016

SALEM, OR

Dear Mr. Nelson:

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

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

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

Sincerely,

Scott Crew
Customer Service Group

Cc: OWRD Fiscal

(over)

678310



This review is based only on the completeness of your application(s). Any determination of water availability, compliance with basin plan rules, or any other water related issues has not been made. Fees may change.

Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

- For a GW Application:* Well Development Tables completed and/or a well log report included (if existing).

For proposed Wells we need information on Well Development table. There needs to be estimates for our groundwater department to be able to make determinations.