

# 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 <b>ROBERT W BROADBENT</b>		PHONE (HM) <b>307 690 6680</b>
PHONE (WK) <b>307 690 6680</b>	CELL <b>307 690 6680</b>	FAX <b>N/A</b>
ADDRESS <b>281 HILLVIEW DR</b>		
CITY <b>GRANTS PASS</b>	STATE <b>OR</b>	ZIP <b>97526</b>
E-MAIL* <b>Mr. rob.broadbent@gmail.com</b>		

### 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*

RECEIVED BY OWRD  
AUG 17 2016  
SALEM, OR

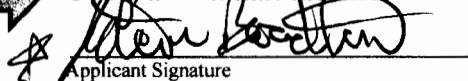
Note: Attach multiple copies as needed

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

### By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application.
- I cannot use water legally until the Water Resources Department issues a permit.
- Oregon law requires that a permit be issued before beginning construction of any proposed well, unless the use is exempt. Acceptance of this application does not guarantee a permit will be issued.
- If I get a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be cancelled.
- The water use must be compatible with local comprehensive land-use plans.
- Even if the Department issues a permit, I may have to stop using water to allow senior water-right holders to get water to which they are entitled.

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

  
Applicant Signature

**Robert W Broadbent**  
Print Name and title if applicable

**8/15/16**  
Date

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. <b>G-78370</b>	Permit No. _____	Date _____

**SECTION 2: PROPERTY OWNERSHIP**

Please indicate if you own all the lands associated with the project from which the water is to be diverted, conveyed, and used.

Yes

- There are no encumbrances.
- This land is encumbered by easements, rights of way, roads or other encumbrances.

No

- I have a recorded easement or written authorization permitting access.
- I do not currently have written authorization or easement permitting access.
- Written authorization or an easement is not necessary, because the only affected lands I do not own are state-owned submersible lands, and this application is for irrigation and/or domestic use only (ORS 274.040).
- Water is to be diverted, conveyed, and/or used only on federal lands.

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

**You must provide the legal description of: 1. The property from which the water is to be diverted, 2. Any property crossed by the proposed ditch, canal or other work, and 3. Any property on which the water is to be used as depicted on the map.**

**SECTION 3: WELL DEVELOPMENT**

WELL NO.	NAME OF NEAREST SURFACE WATER	IF LESS THAN 1 MILE:	
		DISTANCE TO NEAREST SURFACE WATER	ELEVATION CHANGE BETWEEN NEAREST SURFACE WATER AND WELL HEAD
JOSE 59318	Applegate Slough (name not on quad map)	1514'	~ 130'

RECEIVED BY OWRD  
AUG 17 2016  
SALEM, OR

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).

Attn: Mike Thoma - if you look at Quad you'll see mapped creek to west - this is one I

**SECTION 3: WELL DEVELOPMENT, CONTINUED**

6-1032

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)
Jox 5938	<input type="checkbox"/>	<input checked="" type="checkbox"/>	113316	<input type="checkbox"/>	6"	2-38'	4' from	0-38	70 5/30/14	granite blk + white w/f	220	4	3
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>			200-220						
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									

\* Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.  
 \*\* A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.  
 \*\*\* Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

RECEIVED BY OWRD

**SECTION 4: WATER USE**

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
nursery	year round	3

**Exempt Uses:** Please note that 15,000 gallons per day for single or group **domestic** purposes and 5,000 gallons per day for a single **industrial or commercial** purpose are exempt from permitting requirements.

**For irrigation use only:**

Please indicate the number of primary and supplemental acres to be irrigated (*must match map*).

Primary: 2 Acres

Supplemental:      Acres

*includes buildings*

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: 3

- If the use is **municipal or quasi-municipal**, attach **Form M**
- If the use is **domestic**, indicate the number of households: 1
- If the use is **mining**, describe what is being mined and the method(s) of extraction:

RECEIVED BY OWRD

AUG 17 2016

**SECTION 5: WATER MANAGEMENT**

SALEM, OR

**A. Diversion and Conveyance**

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

Pump (give horsepower and type): submerged - not known size

Other means (describe):     

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

**B. Application Method**

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

see attached

**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.

NA *a meter will placed on well*

**SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR**

N/A

If you would like to store ground water in a reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Reservoir name:      Acreage inundated by reservoir:

Use(s): \_\_\_\_\_

Volume of Reservoir (acre-feet): \_\_\_\_\_ Dam height (feet, if excavated, write "zero"): \_\_\_\_\_

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

**NA SECTION 7: USE OF STORED GROUND WATER FROM THE RESERVOIR**

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

Annual volume (acre-feet): \_\_\_\_\_

USE OF STORED GROUND WATER	PERIOD OF USE

**SECTION 8: PROJECT SCHEDULE**

Date construction will begin: \_\_\_\_\_ ALREADY COMPLETE

Date construction will be completed: \_\_\_\_\_ ALREADY COMPLETE

Date beneficial water use will begin: \_\_\_\_\_ when permit issued

**NA 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*).

\_\_\_\_\_ SEE ATTACHED

RECEIVED BY OWRD

AUG 17 2016

SALEM, OR

# 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: ROBERT W BROADBENT  
First Last

Mailing Address: 281 MILLVIEW DR  
GRANTS PASS OR 97526 Daytime Phone: 307 690 6680  
City State Zip

### A. Land and Location

mr.rob.broadbent@gmail.com

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
<u>37S</u>	<u>5W</u>	<u>28</u>	<u>DO NWSE</u>	<u>700</u>	<u>RR5</u>	<input checked="" type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>nursery</u>
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	

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

**RECEIVED BY OWRD**

Josephine

AUG 17 2016

SALEM, OR

### 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: 2     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:

MARIJUANA GROW SITE USING HOOP GREEN HOUSES AND DRIP IRRIGATION.

**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

RR5

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): 61.020 JOSEPHINE COUNTY RURAL LAND DEVELOPMENT CODE
- 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
	<b>RECEIVED BY OWRD</b>	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	<b>AUG 17 2016</b>	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	<b>SALEM, OR</b>	<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.

*Production is an outright use. All structures require development permits (including loop covers & fences over 7 FT in height).*

Name: NORA SCHWARTZ Title: PLANNER  
 Signature: Nora Schw Phone: 541-474-5417 Date: 8-10-16  
 Government Entity: JOSEPHINE 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: Robert Broadbent  
 City or County: JOSEPHINE Staff contact: NORA SCHWARTZ  
 Signature: Nora Schw Phone: 541 474-5417 Date: 8-10-16

STA WA (as re... 690-205-0210)

**DRAFT**

**JOSEPHINE 530818**

WELL I.D. LABEL# L 113316  
START CARD # 210291  
ORIGINAL LOG #

6/9/2014

(1) LAND OWNER Owner Well I.D.  
First Name ROBERT Last Name BOARDBENT  
Company

Address 51 DEESLEY LANE  
City GRANTS PASS State OR Zip 97527

(2) TYPE OF WORK  New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

(2a) PRE-ALTERATION  
Casing: Dia + From To Gauge Stl Plstc Wld Thrd  
Material From To Amt sacks/lbs  
Seal:

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other

(4) PROPOSED USE  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other

(5) BORE HOLE CONSTRUCTION Special Standard  (Attach copy)  
Depth of Completed Well 220.00 ft.

BORE HOLE SEAL

Dia	From	To	Material	From	To	Amt	sacks/lbs
10	0	38	Bentonite Chips	0	38	17	S
6	38	220					

How was seal placed: Method  A  B  C  D  E  
 Other POURED BENTONITE  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

(5a) ABANDONMENT USING UNHYDRATED BENTONITE  
Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

(6) CASING/LINER  
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd  
Shoe  Inside  Outside  Other Location of shoe(s) 38  
Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS  
Perforations Method SAW  
Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf	Casing/Screen	Perf	Screen	Dia	From	To	Scrns/slot width	Slot length	# of slots	Tele/pipe size
		4		200	220	.125	6	12	4	

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)  
4 219 1

Temperature 51 °F Lab analysis  Yes By \_\_\_\_\_  
Water quality concerns?  Yes (describe below) TDS amount  
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County JOSEPHINE Twp 37.00 S N/S Range 5.00 W E/W WM  
Sec 28 NW 1/4 of the SE 1/4 Tax Lot 700  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address  
281 HILLVIEW DR.  
GRANTS PASS, OR 97527

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	5/30/2014		70

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 210.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
5/30/2014	210	215	4		70

(11) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To
BRN CLAY AN LARGE BOULDERS	0	30
GRANITE BLK & WHITE HARD	30	200
GRANITE BLK & WHITE W/F	200	220

Date Started 5/28/2014 Complete 5/30/2014

(unbonded) Water Well Constructor Certification  
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
License Number \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_

(bonded) Water Well Constructor Certification  
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
License Number 1648 Date 6/9/2014

Signed BARRY PELKEY (E-filed)  
Contact Info (optional) BARRY PELKEY

RECEIVED BY OWRD  
AUG 17 2016  
SALEM, OR

G-18J70



## **WATER MANAGEMENT DESCRIPTION**

281 Hillview Drive Lot 7

Grants Pass OR

Water usage is managed through the use of Cisterns and drip or directed spray irrigation.

Water is pumped from the well by a standard residential submersible pump to a group of 3 - 2500 gal Holding cisterns through 1" tubing.

Water from the cisterns is then pumped by a 1 1/2 HP motor out to the field through 3/4" tubing to a series of 5 watering zones. Zones are controlled by a standard residential zone system, irrigation controller using 12 volt electric controls to the valves at the head of each zone.

### **Application Method**

Irrigation is performed by mini sprayers on 3 zones and drip irrigation on 2 more zones and directed to each individual plant with either system.

### **Conservation**

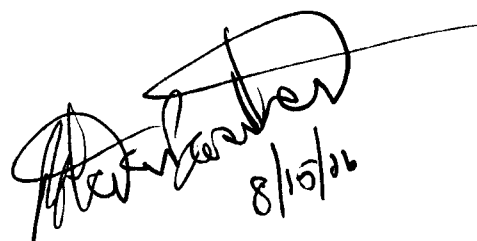
By using directed mini sprayers and or drip lines, each individual plant is irrigated directly to the exact amount needed per day. Additionally the planting beds are covered in straw to further reduce evaporation. A meter will be placed on the well to measure the amount of water being removed from the aquifer. By individually and specifically watering each plant, no excess water goes anywhere. All irrigation water is absorbed in the soil of the planting bed with a small amount lost to evaporation. Automatic timers prevent excess watering. No water EVER escapes the field let alone the property.

RECEIVED BY OWRD

AUG 17 2013

SALEM, OR

G-18370

  
8/17/13



After recording return to:  
Robert W. Broadbent  
51 Deesley Lane  
Victor, ID 83455

Until a change is requested all tax  
statements shall be sent to the  
following address:  
Robert W. Broadbent  
51 Deesley Lane  
Victor, ID 83455

File No.: 7151-2193920 (vb)  
Date: January 29, 2014

THIS SPACE RESERVED FOR RECORDER'S USE

JOSEPHINE COUNTY OFFICIAL RECORDS  
ART HARVEY, COUNTY CLERK      **2014-001027**  
DED-WRD  
Cnt=1 Pgs=3 Stn=2 SDICKINS      02/03/2014 01:33 PM  
\$15.00 \$11.00 \$8.00 \$20.00 \$5.00      \$59.00  
I, Art Harvey, County Clerk, certify that the within document  
was received and duly recorded in the official records of  
Josephine County.

### STATUTORY WARRANTY DEED

59-

**Martha J. Longacre, Trustee of the Martha J. Longacre Trust**, Grantor, conveys and warrants to **Robert W. Broadbent**, Grantee, the following described real property free of liens and encumbrances, except as specifically set forth herein:

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

**LOT 7, LAUREL HEIGHTS SUBDIVISION, JOSEPHINE COUNTY, OREGON, ACCORDING TO THE OFFICIAL PLAT THEREOF, RECORDED IN VOLUME 8, PAGE 23 OF PLAT RECORDS.**

**Subject to:**

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

The true consideration for this conveyance is **\$65,000.00**. (Here comply with requirements of ORS 93.030)

RECEIVED BY OWRD

AUG 17 2016

SALEM, OR

6-18370

APN: R323611

Statutory Warranty Deed  
- continued

File No.: 7151-2193920 (vb)

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

Dated this 31 day of January, 2014.

Martha J. Longacre, Trustee of the Martha J. Longacre Trust

Martha J. Longacre  
Martha J. Longacre, Trustee

STATE OF California )  
 )ss.  
County of )

This instrument was acknowledged before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by Martha J. Longacre as Trustee of The Martha J. Longacre Trust, on behalf of the trust.

\_\_\_\_\_  
Notary Public for California  
My commission expires:

RECEIVED BY OWRD

AUG 17 2015

SALEM, OR

6-18376

1 2 . . . . . 01

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**  
**CIVIL CODE § 1189**

State of California

County of Los Angeles

On Jan 31 2014 before me, P. Johnson Notary Public  
Date Here Insert Name and Title of the Officer

personally appeared Martha Sean Longacre  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Place Notary Seal Above

Signature: [Signature]  
Signature of Notary Public

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_ AUG 17 2016

**Capacity(ies) Claimed by Signer(s)**

- Signer's Name: \_\_\_\_\_
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Individual  Attorney in Fact
- Trustee  Guardian or Conservator
- Other: \_\_\_\_\_

- Signer's Name: \_\_\_\_\_ SALEM, OR
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Individual  Attorney in Fact
- Trustee  Guardian or Conservator
- Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

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 \_\_\_\_\_

**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 \_\_\_\_\_

RECEIVED BY OWRD

AUG 17 2016

G-18870

# 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
- N/A  SECTION 6: storage of groundwater in a reservoir
- N/A  SECTION 7: use of stored groundwater from the reservoir
- SECTION 8: project schedule
- N/A  SECTION 9: within a district
- SECTION 10: remarks

RECEIVED BY OWRD

AUG 17 2016

SALEM, OR

### Attachments:

- Land Use Information Form with approval and signature (*must be an original*) or signed receipt <sup>125</sup>
- 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: \$ 1,900  
See the Department's Fee Schedule at [www.oregon.gov/owrd](http://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 \_\_\_\_\_