

# 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 <i>Paul Eichwald</i>		PHONE (HM)	
PHONE (WK) <i>(541) 415-1488</i>	CELL <i>(541) 415 1488</i>	FAX	
ADDRESS <i>330 Hillview Dr</i>			
CITY <i>Williams</i>	STATE <i>OR</i>	ZIP <i>97527</i>	E-MAIL* <i>Fullcirclemedicinals@gmail.com</i>

### Organization Information

NAME		PHONE	FAX
ADDRESS			CELL
CITY	STATE	ZIP	E-MAIL*

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

AGENT / BUSINESS NAME		PHONE	FAX
ADDRESS			CELL
CITY	STATE	ZIP	E-MAIL*

Note: Attach multiple copies as needed

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

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

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

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

Applicant Signature

Print Name and title if applicable

Date

Applicant Signature

Print Name and title if applicable

Date

For Department Use		
App. No. <i>G-18400</i>	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 13480	Apple trib to R	985'	~ 10'
			RECEIVED BY OWBD
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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*).

*Joe*  
13480

37S/5W/28db

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

(START CARD) # 8516

(1) OWNER: Well Number: 3  
Name John Justema  
Address 3244 Williams Hwy.  
City Grants Pass State OR Zip 97527

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

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  
 Other

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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval Yes No Depth of Completed Well 250 ft.  
Yes No    
Explosives used   Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10	0	25	Cement	0	25	8 sacks
6	25	250				

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 \_\_\_\_\_

Casing/ Liner	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Casing:	6	+2	27	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4	+2	250	160	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 27

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
210	250	1/2x5	80			<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailor  Air  Flowing Artesian  
Yield gal/min Drawdown Drill stem at Time  
6          250 (1 hr.)  
6          200

Temperature of water 52 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 Joseph Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 37 N or S, Range 5W E or W, WM.  
Section 28 NW 1/4 SE 1/4  
Tax Lot 900 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Hillyview

(10) STATIC WATER LEVEL:  
30 ft. below land surface. Date 8-29-89  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 31

From	To	Estimated Flow Rate	SWL
31	32	2	30
42	43	1	30
86	87	1	30
131	132	2	30

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
Large boulder	0	5	
Decomposed granite	5	33	30
Tombstone granite, Frac.	33	38	
Tombstone granite	38	250	30

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WATER DIVISION  
GRANTS PASS, ORE.

Date started 8-29-89 Completed 8-29-89

(unbonded) Water Well Constructor Certification:  
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.  
Signed Mike Duce WWC Number 1462 Date 8-29-89

(bonded) Water Well Constructor Certification:  
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. all work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.  
Signed Bob Quinn WWC Number 675 Date 8-29-89

G-18400

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**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)
Jose 13480	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	6"	+2 27'	210 - 250	0-25'	30'		250	6	360
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>					8-29-89				
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									

\* Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.

\*\* A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.

\*\*\* Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

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**SECTION 4: WATER USE**

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
nursery	year round	6 AF

**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: 1.5 Acres      Supplemental: \_\_\_\_\_ Acres      includes green houses

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: 6 AF

- 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**

**Please see attachments.**

**A. Diversion and Conveyance**

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

Pump (give horsepower and type): \_\_\_\_\_

Other means (describe): \_\_\_\_\_

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

**B. Application Method**

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

NA      meter will be placed on well      NA

**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: \_\_\_\_\_

# Application for a Permit to Use Ground Water

## Section 5: Water management

### A

- 1) Diversion and conveyance: A one horse power submerged pump in the well. (This currently is adequate if a more powerful unit or something different is required it will be upgraded as needed).
  - i) H<sub>2</sub>O is pumped from the well into a series of holding tanks. A meter will be installed on the valve feeding the system to monitor H<sub>2</sub>O usage. Holding tanks are connected to a pressurized irrigation system with automation (timer, hygrometer, moisture meter etc.) directing H<sub>2</sub>O where it's needed. The majority of this construction is already complete.
- 2) H<sub>2</sub>O will be used for watering plants in a variety of ways depending on their needs. All irrigation H<sub>2</sub>O will originate from the holding tanks fed by the well. Majority of irrigation will be done with an automated system primarily using 1/2" drip line; we also have sprayers integrated that are used occasionally. A small amount of hand watering from the same holding tanks will take place; primarily for seedlings or sensitive plants.

### B

Irrigation will be applied from a holding tank to a manifold controlled by a computerized system, then via a hybrid of 1/2" drip line and small sprinklers; with a small amount of hand watering during sensitive plant stages (seedlings, transplants, IPM etc). In the future hydroponic systems (aquaponics, DWC, ebb and flow, etc) are methods considered for propagation.

### C

Amount of H<sub>2</sub>O requested based on historical usage patterns, with future development factored in to meet estimated H<sub>2</sub>O needs. A meter will be placed on the well to measure the amount of H<sub>2</sub>O diverted. Drip lines and automated (timed) systems will minimize waste by watering only plants in need and precise moisture monitoring will maximize efficiency while minimizing waste. Any sensitive areas to erosion will be properly retained and any run off is being directed away via French drains. There is no riparian habitat or aquatic life in the area, it is a knoll top. There are no surface streams or waters to discharge into. Run off is directed into a drain field from French drains around existing or future developed areas.

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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.*

**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: \_\_\_\_\_ *when permit is issued ideally R/16*
- Date construction will be completed: \_\_\_\_\_ *01/2018*
- Date beneficial water use will begin: \_\_\_\_\_ *when permit issued 12/16*

**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	RECEIVED BY OWRD OCT 17 2016	
City	State		

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**SECTION 10: REMARKS**

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

*— please see attached Section 5, and photos taken by Kathi Smith Grant Pass Water Master — these were emailed to*

# 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: Paul <sup>First</sup> Eichwald <sup>Last</sup>  
 Mailing Address: 199 Powell Creek Rd  
Williams <sup>City</sup> OR <sup>State</sup> 97549 <sup>Zip</sup> Daytime Phone: (541) 415-1488

## 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:
375	50	28	NWSE	900	RR5	<input checked="" type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	nursery
						<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:

Josephine COUNTY

## 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

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Source of water:  Reservoir/Pond     Ground Water     Surface Water (name) \_\_\_\_\_

Estimated quantity of water needed: 6.5ix     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:

Seasonal crop production and greenhouse & nursery irrigation throughout the year.

**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): RLDC 61.020.B
- 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
		<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 ONLY – No processing, wholesaling, retailing, laboratory or research activities.
- All structures (including temporary structures, fences over 7 feet, greenhouses, shipping containers and hoop covers) require DEVELOPMENT PERMITS.
- Proposed structures located within flood hazard areas require permits and must meet current flood regulations.

NORA SCHWARTZ PLANNER II  
Nora Schwartz 5414745417  
 Phone: \_\_\_\_\_ Date: 7-8-16 RECEIVED BY OWRD  
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Government Entity: JOSEPHINE COUNTY

**Note to local government representative:** Please complete this form or sign the receipt below and return to WRD. 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: PAUL EICHWALD  
 City or County: JOSEPHINE Staff contact: NORA SCHWARTZ  
 Signature: Nora Schwartz Phone: 5414745417 Date: 7-8-16

Property Information



North Latitude  
42 19 20.9

West Longitude  
123 17 50.3

MAP NUMBER	370528D0000900
OWNER NAME	EICHWALD PROPERTIES LLC
SITUS	330 HILLVIEW DR
OWNER ADDRESS	4505 COLD MOUNTAIN RD
CITY	MISSOULA
STATE	MT
ZIP	59803
ZONE	RR5
ACRES	5.07
PROPERTY FLAGS	Slopes > 15%
IMPROVEMENTS	DECK REDWOOD MAIN.AREA ( 3 BEDS) GARAGE ATTACHED ASPHALT ROOF COVER COMP SHINGLES

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

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**

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- 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 \_\_\_\_\_

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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: \$ 1900  
See the Department's Fee Schedule at [www.oregon.gov/owrd](http://www.oregon.gov/owrd) or call (503) 986-0900.

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### 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 \_\_\_\_\_

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After recording return to:  
Paul Eichwald, Sr. and Linda Eichwald  
4505 Cold Mountain Road  
Missoula, MT 59803

Until a change is requested all tax  
statements shall be sent to the  
following address:  
Paul Eichwald, Sr. and Linda Eichwald  
4505 Cold Mountain Road  
Missoula, MT 59803

File No.: 7151-1857423 (KAP)  
Date: April 25, 2012

JOSEPHINE COUNTY OFFICIAL RECORDS  
ART HARVEY, COUNTY CLERK 2012-005115  
DED-WRD 04/30/2012 10:03 AM  
Cnt=1 Pgs=2 Stn=2 RHENKELS  
\$10.00 \$11.00 \$15.00 \$8.00 \$5.00 Total:\$49.00



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

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### STATUTORY WARRANTY DEED

**Anthony R. McGarva**, Grantor, conveys and warrants to **Paul Eichwald, Sr. and Linda Eichwald, husband and wife**, 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 9, LAUREL HEIGHTS, Josephine County, Oregon, according to the official plat thereof, recorded in Volume 8, Page 23, 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 **\$253,000.00**. (Here comply with requirements of ORS 93.030)

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