

**Application for Extension of Time for a Water Right Permit
(NON-Municipal/NON Quasi-Municipal water Use)**



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

Criteria for a Permit Extension of Time

The Department can accept requests for an extension of time on permits to (1) complete construction, and/or to (2) apply water to beneficial use.

In order to approve a permit extension request the Department must be able to find:

1) Construction has begun:

A. For Groundwater Permits

Construction of the well began within 5 years of the date the permit was issued or by the actual construction date specified in the permit.

B. For Surface Water or Reservoir Permits

Construction of the water system began within 5 years of the date the permit was issued or by the actual construction date specified in the permit.

The Department will also confirm that:

- 2) A required fish screen, fish passage or fish by-pass device was installed before or prior to diversion of any water. An exception to the need to confirm installation prior to diversion of any water would be a waiver submitted to the Department from ODFW stating that a fish screen, fish passage or fish by-pass device was not required, provided your permit allows for a waiver.**

If you have questions, please call the Department at (503)-986-0900 and ask to speak with a permit extension specialist.

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Instructions are in Attachment A.

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**TO THE DIRECTOR OF THE OREGON WATER RESOURCES DEPARTMENT
A separate extension application must be submitted for each permit as per
OAR 690-315-0020(2).**

I, Rattlesnake Creek Land & Cattle, LLC, Andy Root
NAME OF PERMIT HOLDER [OAR 690-315-0020(1) and (3)(a)]

524 Hwy 20 N ADDRESS Hines CITY OR STATE 97738 ZIP

541-573-3419 PHONE _____ E-MAIL ADDRESS

the permit holder of: Application Number G-17146

Permit Number G-16829
[OAR 690-315-0020(3)(b)]

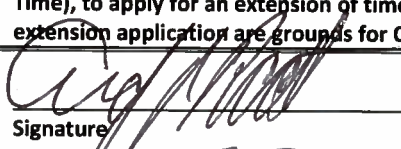
do hereby request that the time in which to:

complete construction (of diversion/appropriation works and/or purchase and installation of the equipment necessary to the use of water), which time now expires on **Month: 1 Day: 13 Year: 2016**, be extended to October 1, 2021, [OAR 690-315-0020(3)(i)]

N/A (Check this box if the permit does not specify a date by when construction must be completed.)

and/or the time in which to:

apply water to full beneficial use under the terms and conditions of the permit, which time now expires on **Month: 1 Day: 13 Year: 2016**, be extended to October 1, 2021.
[OAR 690-315-0020(3)(i)]

<p>I am the permit holder, or have written authorization from the permit holder (attached to this Application for Extension of Time), to apply for an extension of time under this permit. I understand that false or misleading statements in this extension application are grounds for OWRD to suspend processing of the request and/or reason to deny the extension.</p>	
 Signature _____	<u>1-13-16</u> Date _____
<u>ANDY J. ROOT</u> Printed Name _____	<u>MEMBER</u> Title _____

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Before submitting your Application for Extension of Time, make sure the following items are included:

- This completed Application for Extension of Time.
- Statutory fee of \$575.
- Signature page (Second page of this Application for Extension of Time).
- All supporting documentation and/or evidence referenced in the Application for Extension of Time.

**MAIL COMPLETED APPLICATION
along with the Supporting documents and/ or evidence**

\$575 STATUTORY FEE TO:

**Water Resources Department
Attn: Water Right Permit Extensions
725 Summer Street NE, Suite A
Salem, Oregon 97301**



GENERAL TIPS:

- Permit holders of **municipal or quasi-municipal water use permits DO NOT use this form**. The correct form is APPLICATION FOR EXTENSION OF TIME FOR MUNICIPAL AND QUASI-MUNICIPAL WATER USE PERMITS, available at the following link:
http://www.oregon.gov/owrd/PUBS/docs/forms/fillable_muni_quasi_ext_app_form_2014.doc
- Request the reasonable amount of time necessary to fully complete construction of the water project and/or to fully use the permitted quantity of water under the terms and conditions of your permit. Should this request be approved, it will be OWRD's expectation that you will complete your project within the new time period allowed. Future extensions may not be granted.
- A separate APPLICATION FOR EXTENSION OF TIME must be submitted for each permit. OAR 690-315-0020(2).
- An instruction sheet, INSTRUCTIONS FOR COMPLETING AN APPLICATION FOR EXTENSION OF TIME FOR A WATER RIGHT PERMIT (Attachment A), provides details that will help you answer each question on the application. Permit extensions are evaluated under OAR Chapter 690, Division 315. These rules may be viewed at:
http://arcweb.sos.state.or.us/pages/rules/oars_600/oar_690/690_315.html
- You may provide OWRD with any additional information or evidence that will aid us in making our decision. Please note that OWRD may require other information that is necessary to evaluate the application. OAR 315-0020(3)(n).

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- After careful review of the Application for Extension of Time, you may contact OWRD at (503) 986-0900, to ask questions and request assistance from a Permit Extensions Specialist in the Water Rights Services Division.
- An Application for an Extension of Time will be reviewed for completeness. OWRD will return any incomplete or deficient applications to the applicant. OAR 690-315-0040(1)(a).

Reference Materials Needed to Complete this Application:

- **The water right permit.** If needed, a copy of the water right permit can be downloaded from the Department’s Website at <http://apps.wrd.state.or.us/apps/wr/wrinfo/> (using the link to the Water Rights Information System (WRIS). Or, a copy of the permit (or other documents) may be requested by water right application number from the Water Rights Division at 503-986-0900 (copy fees will apply).
- **Documentation which demonstrates compliance with permit conditions** (for example, well construction logs; static water level measurement reports; annual water use reports; ODFW fish screen certification; a plan to monitor the effect of water use on ground water aquifers utilized under the permit; etc.).

Questions to complete this application for an Extension of Time

Please see the instruction sheet to help you answer these questions.

1. Beginning Construction within required deadlines. OAR 690-315-0020(3)(d)

For Groundwater Permits

Has construction of the well begun? Yes No

Date construction began Month: 5 Day: 2 Year: 2008

Details of construction and attach documentation: _____

For Surface/Reservoir Permit

Has construction of the water system begun? Yes No

Date construction began Month: _____ Day: _____ Year: _____

Details of construction and attach documentation: _____

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2. Permits typically contain standard or special conditions that must be fully satisfied to lawfully develop and use permitted water. Review the permit subject to this extension to identify which of the conditions listed in the 2nd column are contained within it. Using the extra row labeled "other" to specify any other additional conditions specified in a final order approving a permit amendment or prior extension of time. In the 1st column check the box for each condition (row) identified as relevant. In the 3rd column check "Yes" if you have completed or met the permit condition. Check "No" if the condition is not yet satisfied. In the 4th column, give the date when the condition was satisfied or will be satisfied. Attach any pertinent documentation. Note: a pump test condition does not need to be addressed here however; you must submit the results of the test to the Department for approval prior to certification.

CHART-A

Permit Conditions in this Permit		Have Completed or Met?	Date satisfied/ or will be satisfied
Checkbox	Ground water Check those included on this permit		
<input checked="" type="checkbox"/>	Installation of a meter/totalizing flow meter	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	10/31/2021
<input checked="" type="checkbox"/>	Submittal of annual water usage report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	12/31/2015
<input checked="" type="checkbox"/>	Submittal of initial static water level measurement	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	03/01/2015
<input checked="" type="checkbox"/>	Submittal of annual static water level measurements in the month required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	3/1/2015
<input type="checkbox"/>	Submittal of Seven consecutive static water level measurements in the month required	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Special well construction standards	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Submittal of a monitoring plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/>	Other (Specify): Well ID Tag	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	3/1/2015
<input checked="" type="checkbox"/>	Other (Specify): Pump test	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Other (Specify):	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Surface Water or Reservoir			
<input type="checkbox"/>	Installation of a meter/ totalizing flow meter/ in-line meter	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Installation a staff gauge	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Installation of a fish screen	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Installation of a fish by-pass device	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Installation of a fish passage	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Installation of an outlet gate/pipe/ conduit	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Submittal of a letter from ODFW that fish screen, fish by-pass device, and or fish passage is not required	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Submit as-built plans and specification	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Submittal of a letter from an engineer prior to storage	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Other (Specify):	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Other (Specify):	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Other (Specify):	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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If you have NOT complied with Permit conditions, explain the reasons why and indicate a date certain, when you will be in compliance.

[OAR 690-315-0020(3)(e)]

3. Provide evidence of physical work made toward completion of the water system, and of progress made toward making beneficial use of water within the permitted time period (CHART-B); and if applicable, within the time period of the most recent extension granted (CHART-C). CHART-B (below) must be completed for all Application for Extension of Time requests. Use *chronological order*. (this does NOT include planning, formulating a business plan, securing financing, letting contracts, purchasing but not installing equipment, surveying, clearing land, or planting crops)

CHART-B

DATE	WORK ACCOMPLISHED BEFORE PERMIT WAS ISSUED <i>List any work done before the permit was issued – eg. well drilled.</i>	COST*
5/2/2008	Well drilled	40,000
DATE	WORK ACCOMPLISHED AFTER PERMIT WAS ISSUED <i>and PRIOR TO DATE SPECIFIED IN PERMIT FOR COMPLETE APPLICATION OF WATER</i> <i>List work/actions done during the permitted time period.</i>	COST*
1/13/2011	Date the permit was signed - find date above signature on last page of permit.	
6/2011	Irrigation system	500,000
12/2011	Water Use Reports	500
3/2011	Static Measurements	300
	Date the permit specified complete application of water to the use shall be made- all permits contain this date.	
DATE	WORK ACCOMPLISHED AFTER the date the permit specified complete application of water <i>COMPLETE ONLY IF THIS IS YOUR 1st APPLICATION FOR AN EXTENSION OF TIME: List work done after the date specified in the permit for complete application of water up to the date of this Application for Extension of Time.</i>	COST*
Total Cost for Chart-B		\$540,800

* If exact cost is not known, you must provide your best estimate.

4. If this is not your 1st Application for Extension of Time request, fill out CHART-C below in addition to CHART-B above. Use *chronological order*.

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CHART-C

DATE	WORK ACCOMPLISHED DURING THE LAST EXTENSION PERIOD <i>List all work done during the last authorized extension period.</i>	COST*
	"Extended From" date for complete application of water used in the 1 st (or the most recent) Application for Extension of Time.	
	"Extended To" date for complete application of water resulting from the 1 st (or the most recent) Application for Extension of Time.	
DATE	WORK ACCOMPLISHED AFTER THE LAST EXTENSION PERIOD EXPIRED <i>List all work done after the last authorized date for complete application of water up to the date of this Application for Extension of Time.</i>	COST*
Total Cost of Chart-C		

* If exact cost is not known, you must provide your best estimate. [OAR 690-315-0020(3)(f)]

5. Cost of project to date: \$540,800 *540,000*
 (The total combined cost from CHART-B and CHART-C) [OAR 690-315-0020(f)]

[OAR 690-315-0020(3)(e)(B)]

Provide evidence of the maximum rate (or duty, if applicable) of water diverted for beneficial use under this permit and/or prior extensions of time (if any) made to date.

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TIP: Report the rate used to date. Unless full beneficial use has been made, this rate will be less than the rate authorized on the permit.

6. For Surface Water Permit Extensions (e.g. S-XXXX or R-XXXX):

TIP: Report the rate in the same units of measurement as specified in the permit.

Maximum rate used to date = _____ cfs (cubic feet per second) or,

Maximum rate used to date = _____ gpm (gallons per minute) or,

Acre-feet stored to date = _____ AF

7. For Ground Water Permit Extensions (e.g. G-XXXX):

TIP: Include information from ALL wells that pertain to this permit, including drilled wells not currently used.

CHART-D

Well # as identified on Permit	Water User's Well #	Has this well been drilled?	IF DRILLED					
			Well Log Number e.g. MORR 50473	Well Tag Number e.g. # 27566 or N/A	Is the actual drilled location authorized on this permit or on a permit amendment? (See 8 below)	Maximum instantaneous rate used to date from this well - - under <u>this permit</u> only (CFS or GPM)	Is this well authorized or utilized under any OTHER water rights?	If yes, provide the Permit, Certificate, or Transfer No.
Well 9	#9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	HARN 51448	93552	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	1500 gpm 0.47 cfs	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	G-16461
		Yes <input type="checkbox"/> No <input type="checkbox"/>			Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	-
		Yes <input type="checkbox"/> No <input type="checkbox"/>			Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	-
		Yes <input type="checkbox"/> No <input type="checkbox"/>			Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	-
Total instantaneous rate from all wells utilized under this permit						1500 gpm	0.47 cfs - see email 2/8/16 from CWB/E CE	

8. If the drilled location of a well is not authorized on this permit, please specify its location below, or provide a map showing its location.

Has or will a Permit Amendment Application been/be filed? Yes No

If a Permit Amendment Application has been filed: Transfer No. T-_____

Well # _____ Actual location: _____

Well # _____ Actual location: _____

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[OAR 690-315-0020(3)(e)(C)]

9. Provide the total number of acres irrigated to date under this permit (if applicable).

Total acres irrigated to date: 37.6

Ground Water Permits: Please specify which wells are being utilized for this irrigation.

Well # 9 Acres 37.6 Well # Acres

Well # Acres Well # Acres

[OAR 690-315-0020(3)(i)(j)]

10. Provide a summary of your future plans and schedule to complete the construction of the water system, and/or apply water to full beneficial use under the terms and conditions of the permit.

CHART-E

APPROXIMATE DATE RANGE (projected)	WORK OR ACTION TO BE ACCOMPLISHED (projected)	ESTIMATED COST (projected)
10/31/2021	Meter installed	1500
10/31/2016	Permit amendment to add POA's	250,000
Year:	Date intend to apply water to full beneficial use under the terms and conditions of this permit.	
Total Cost		251,500

[OAR 690-315-0020(3)(g)]

11. Estimated remaining cost to complete the project: 251,500

(The total cost from CHART-E)

[OAR 690-315-0020(3)(h)]

12. Describe the reasons why the construction was not completed, and/or water was not beneficially used within permit time limits. Provide supporting information for the reason(s) that best fits your circumstances. Include any additional unforeseen events and/or other governmental regulation or requirements.

Auth well failed two years ago and has been worked on to restore flow. A permit amendment to add backup wells is planned once the extension is approved.

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[OAR 690-315-0020(3)(k)]

13. Justify the time requested to complete the project and/or apply the water to full beneficial use. Include any other information or evidence to establish that the requested amount of time is sufficient and that you will be able to complete the project within the amount of time requested.

Five years is requested to allow time to amend the permit to slightly change POU to a single pivot location and add POA's to allow flexibility in providing water to the system.

[OAR 690-315-0020(3)(m)(n)]

14. Provide any other information you wish OWRD to consider while evaluating your Application for Extension of Time.

The irrigating system is mostly constructed however, due to the fluctuations in water levels, a piped network of combined wells is needed and constantly being updated.

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HARN 51448

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

WELL I.D. # L 93552

START CARD # 197372

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

(1) LANDOWNER Well Number _____
 Name RATTLESNAKE CR LAND & CATTLE CO
 Address 524 Hwy 20 N.
 City HINES State OR Zip 97738

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
 Depth of Completed Well 200 ft.
 Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
20"	0'	20'	BENTONITE	0	20	56
16"	20'	92'				
14"	92'	200'				

How was seal placed: Method A B C D E
 Other POURED DRY

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

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 14"	0'	92'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type _____ Material _____

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
4000+	10'		2 hr.

Temperature of water 63° 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 (legal description)
 County HARNEY
 Tax Lot 3600 Lot _____
 Township 25 N of S Range 30 E or W WM
 Section 33 SW 1/4 SE 1/4

Lat _____ ' _____ " or _____ (degrees or decimal)
 Long _____ ' _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) WEAVER SPRINGS RD
END OF PAVEMENT

(10) STATIC WATER LEVEL
86 ft. below land surface. Date 5-02-08
 _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
 Depth at which water was first found 107

From	To	Estimated Flow Rate	SWL
107	182	4600+	86'

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
TOP SOIL	0	3	
BROWN CLAY	3	12	
SOFT BLACK LAYR	12	46	
SOFT RED LAVA	46	107	
FRAGT. BROWN BASALT	107	148	86'
FRAGT. YELLOW SANDSTONE	148	164	86'
" BROWN SANDSTONE	164	182	86'
BROWN SANDSTONE	182	200	

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 Date Started 4-24-08 Completed 5-01-08

(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.

WWC Number 1734 Date 5-02-08
 Signed Cherry Figg

(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.

WWC Number 1355 Date 5-02-08
 Signed Arthur L. Jay

MAY 07 2008