

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.

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, Don & John Toelle

NAME OF PERMIT HOLDER [OAR 690-315-0020(1) and (3)(a)]

72702 Cow Creek Rd
ADDRESS

Burns
CITY

OR
STATE

97720
ZIP

541-493-2511
PHONE

JRToelle@gmail.com
E-MAIL ADDRESS

the permit holder of: Application Number G 17644-
Permit Number G-17244

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

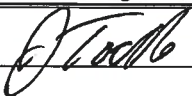
do hereby request that the time in which to:

- 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: 05 Day: 29 Year: 2019**, be extended to October 1, 2024, [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: 05 Day: 29 Year: 2019**, be extended to October 1, 2024.
[OAR 690-315-0020(3)(i)]

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.

| | |
|--|---------------------|
| Signature <u></u> | Date <u>6-19-19</u> |
| Printed Name _____ | 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 \$670
- 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 and correct 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 item 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 690-315-0020(3)(n).
- 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.

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- 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 items.

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

For Groundwater Permits

Has construction of the point of appropriation (well) authorized under this permit begun?

Yes No

Date construction began Month: 8 Day: 4 Year: 2015

Details of construction and attach documentation: HARN 52421 completed 8/10/2015

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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OAR 690-315-0020(3)(A)(e)(A)

2a. 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 | 10/1/2024 |
| <input checked="" type="checkbox"/> | Submittal of annual water usage report | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 10/1/2024 |
| <input checked="" type="checkbox"/> | Submittal of initial static water level measurement | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 3/14/2019 |
| <input checked="" type="checkbox"/> | Submittal of annual static water level measurements in the month required | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 10/1/2024 |
| <input type="checkbox"/> | Submittal of Seven consecutive static water level measurements in the month required | <input type="checkbox"/> Yes <input type="checkbox"/> No | NA |
| <input checked="" type="checkbox"/> | Special well construction standards | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 8/10/2015* |
| <input type="checkbox"/> | Submittal of a monitoring plan | <input type="checkbox"/> Yes <input type="checkbox"/> No | NA |
| <input checked="" type="checkbox"/> | Other (Specify): OWRD Well ID tag | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 8/10/2015* |
| <input checked="" type="checkbox"/> | Other (Specify): Riparian area | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 5/29/2019 |
| <input checked="" type="checkbox"/> | Other (Specify): Pump Test | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 10/1/2024 |
| | *Well 2 to be constructed per permit condition prior to 10/1/2024 | | |
| 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 |

2b. If you have NOT complied with Permit conditions, explain the reasons why and indicate a date certain, when you will be in compliance.

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[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* |
|-------------------------------|--|---------------------------------|
| | | |
| | | |
| 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* |
| 05/29/2014 | Date the permit was signed - find date above signature on last page of permit. | |
| 8/10/2015 | Well #4 constructed (HARN 52421) | \$43,200.00 |
| 1/23/2019 | Well #3 constructed (HARN 52770) | \$37,719.00 |
| 1/30/2019 | Well #1 constructed (HARN 52771) | \$31,259.00 |
| 3/14/2019 | Initial/Annual Static Water Level Reports | \$442.50 |
| | | |
| 5/29/2019 | 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>COMPETE 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 | | \$102,620.50 112,178 |

* 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*.

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. | |
| | | |
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| | | |
| | "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: \$102,620.50
 (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.

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 | | | | | If yes, provide the Permit, Certificate, or Transfer No. |
|--|---------------------|--|------------------------------------|--|--|---|--|--|
| | | | 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? | Maximum instantaneous rate used to date from this well - - under <u>this permit only</u> (CFS or GPM) | Is this well authorized or utilized under any OTHER water rights? | |
| #1 | #1 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | HARN 52771 | L131956 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | 500 gpm | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | - |
| #2 | #2 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | NA | NA | Yes <input type="checkbox"/> No <input type="checkbox"/> | NA | Yes <input type="checkbox"/> No <input type="checkbox"/> | - |
| #3 | #3 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | HARN 52770 | L131958 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | 1200 gpm | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | - |
| #4 | #4 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | HARN 52421 | L118659 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | 280 gpm | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | - |
| Total instantaneous rate from all wells utilized under this permit | | | | | | 4.52 cfs | | |

8. Has a Permit Amendment Application been filed? Yes No
If yes, identify Transfer No. T- _____

Has the Permit Amendment been approved? Yes No
If yes, on what date was the Permit Amendment approved? _____

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

9. For Irrigation and Nursery Use Permits Extensions

Provide the total number of acres irrigated to date under this permit.

a) Total acres irrigated to date: _____

b) List by year, the number of acres irrigated each year since permit issuance.

| Year | Acres | Year | Acres | Year | Acres |
|------|-------|------|-------|------|-------|
| 2015 | 0 | | | | |
| 2016 | 0 | | | | |
| 2017 | 0 | | | | |
| 2018 | 0 | | | | |
| 2019 | | | | | |

c) Provide a copy of the application map identifying the acres irrigated.

d) Please specify the number of acres irrigated by each Point of Diversion/Point of Appropriation (POD/POA).

(POD/POA)#1 Acres 0

(POD/POA) #3 Acres 0

(POD/POA) #2 Acres 0

(POD/POA) #4 Acres 0

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

10. In the chart below 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) |
|------------------------------------|--|----------------------------|
| 5/30/19 to 10/31/19 | Prepare POU for flood IRR sys | \$100,000 |
| 5/30/19 to 10/31/19 | Plumb wells 1,3, & 4 to gated pipe | \$20,000 |
| 5/30/19 to 10/31/19 | Install pump/motor & flowmeter on wells 1,3, & 4 | \$50,000 |
| 10/31/19 to 12/31/19 | Report water usage | \$500 |
| 3/1/20 to 3/31/20 | Report static well levels | \$500 |
| 4/11/20 to 10/1/24 | Construct center pivot sprinkler system | \$750,000 |
| 4/11/20 to 10/1/24 | Construct well 2 & plub to system | \$79,000 |
| Year: | Date intend to apply water to full beneficial use under the terms and conditions of this permit. | |
| Total Cost | | \$1,000,000 |

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

11. Estimated remaining cost to complete the project: \$1,000,000

(The total cost from CHART-E)

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

12. Provide a summary of your plan to complete construction, meeting all permit conditions and apply the water to beneficial use: *(List all tasks or steps needed to complete the project, the date when each task will be completed, and the cost associated with each task; attach additional pages if necessary.)* The water user plans to develop a flood irrigation system to irrigate POU this season and report the usage by end of year. Next year, after reporting static well levels, the water user will begin to save money to purchase 3 center pivot sprinklers & develop well 2.

[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.)*

The considerable cost to fully develop the farm will require the permittee to save and obtain a loan or apply for a grant (ie., NRCS)

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

14a. Will a denial of the extension result in undue hardship? *(Describe the hardship and the effects.)* Yes. Substantial investment of time and money has been made and denial would make this investment a possible total loss.

14b. Are there any other reasonable alternatives that exist for meeting your water use needs? *(Explain in detail)* No. There isn't enough surface water from Cow Creek to include the place of use. A transfer for groundwater rights from elsewhere would cost approximately \$400,000 and may or may not be approved.

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

15. Was the delay in the timely completion of this water development project and/or timely application of water to full beneficial use caused by any additional government requirements, other than the conditions contained within the permit, which significantly delayed the completion and perfection of this right? *(Explain in detail, including how much time did this delay the project; list dates.)* _____

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

16. Describe any unforeseen events which contributed to the delay of completion of this project that you had no control over. *(Explain in detail what the unforeseen events were and how much time was spent addressing the unforeseen events.)* The water user's son, Joe Toelle, was the spearhead in the permit development. In 2015, Joe passed due to unexplained circumstances. Consequently, the development of the permit was delayed a couple of years.

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

17. Describe an additional 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.)

Had difficulty getting a driller. First two wells didn't produce sufficient water.. Due to this years very wet spring, stripping and working the fields was not possible.

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

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

The loss of money invested would be a terrible financial blow to this small operation. Now that wells have been constructed, applying water to beneficial use should begin soon.

[OAR 690-315-0040(2)(f)]

19. Will the income or use of the water project provide a fair and reasonable return on your investment? (Explain in detail) Yes. Having the ability to irrigate the proposed place of use from the proposed wells will over time return the financial investment by providing hay to sell and feed livestock.

[OAR 690-315-0040(4)(d)]

20. Describe in detail if there are other economic interest, beyond those of the permit holder, which are dependent upon the completion of this project. (Who will be effected and how?) The water user would buy goods, such as fertilizer & seed from local suppliers. The water user hires a hay contractor, irrigation supply contractor, and his son JR if the water rights gets perfected.

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

HARN 52771

WELL I.D. LABEL# L

131956

START CARD #

1041463

ORIGINAL LOG #

1/30/2019

(1) LAND OWNER
Owner Well I.D. _____
First Name JOHN Last Name TOELLE
Company _____
Address P.O. BOX 2
City BURNS State OR Zip 97720

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

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: _____
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 407.00 ft.

BORE HOLE SEAL sacks/lbs

| Dia | From | To | Material | From | To | Amt | lbs |
|-----|------|-----|-----------------------|------|------------|-----|-----|
| 20 | 0 | 58 | Cement w/5% Bentonite | 0 | 58 | 42 | S |
| 12 | 58 | 407 | | | Calculated | 38 | |
| | | | | | Calculated | | |

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

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
 16 2 58 .250
Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia _____ From + _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____
Perf/ Casing/ Screen Screen Liner Dia From To Scrm/slot width Slot # of length # of slots Tele/ pipe size

| Perf/ Casing/ Screen | Screen Liner | Dia | From | To | Scrm/slot width | Slot length | # of slots | Tele/ pipe size |
|----------------------|--------------|-----|------|----|-----------------|-------------|------------|-----------------|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
500 _____ 160 _____ 1 _____
Temperature 65 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 315 ppm
From To Description Amount Units

| From | To | Description | Amount | Units |
|------|----|-------------|--------|-------|
| | | | | |
| | | | | |

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 22.00 S N/S Range 32.50 E E/W WM
Sec 25 SE 1/4 of the SW 1/4 Tax Lot 400
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
72989 COW CREEK RD BURNS OR 97720

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration _____
Completed Well 1/7/2019 _____ 35
Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 65.00

| SWL Date | From | To | Est Flow | SWL(psi) | + SWL(ft) |
|----------|------|-----|----------|----------|-----------|
| 1/7/2019 | 65 | 407 | 500 | | 35 |
| | | | | | |
| | | | | | |
| | | | | | |

(11) WELL LOG Ground Elevation _____

| Material | From | To |
|--------------------------|------|-----|
| topsoil | 0 | 4 |
| gravel | 4 | 43 |
| hard claystone | 43 | 65 |
| pumice | 65 | 87 |
| hard fractured claystone | 87 | 133 |
| broken lava | 133 | 147 |
| hard fractured claystone | 147 | 317 |
| soft broken claystone | 317 | 331 |
| hard broken claystone | 331 | 336 |
| fractured claystone | 336 | 407 |

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Date Started 12/10/2018 Completed 1/7/2019

(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 1940 Date 1/30/2019

Signed BENJAMIN FRY (E-filed)

(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 1355 Date 1/30/2019

Signed ARTHUR FRY (E-filed)
Contact Info (optional) _____

**Oregon Water Resources Department
PERMIT CONDITION WATER-LEVEL REPORTING FORM**

Well owner:

| | | | |
|----------------|--------------------|----|-------|
| Name | Don & John Toelle | | |
| Address | 72702 Cow Creek Rd | | |
| City/State/Zip | Burns | OR | 97720 |
| Phone/Fax/Cell | 541-493-2511 | | |
| Email | | | |

| | |
|--------------|----------|
| Application: | G- 17644 |
| Permit: | G-17244 |
| Certificate: | |
| Userid: | 10023 |
| Transfer | |

Your water right requires periodic static water-level measurements in your wells. Consult your permit or certificate to determine when measurements should be made, when reports are due, and who is allowed to make the measurements. Keep a copy of all measurement reports for your records. All wells that have been constructed must be measured regardless of whether they are being used. Please contact the Department if you are no longer the holder of this right or no longer have an interest in it.

Complete one form for each well.

Other water rights that list this well:

| | | | | |
|------------------------|--|--|--|--|
| Application number(s): | | | | |
| Permit number(s): | | | | |
| Certificate number(s): | | | | |

Identification of measured well (Provide as much information as possible.)

| | | | | |
|------------------------------------|------------|--------------------|-------------|------------------------------|
| Water Resources Well Log ID: | HARN 52771 | Owner's well name: | Well 1 | |
| Well ID (Well Tag) on Well: L- | 131956 | Well drilled by: | Art Fry | |
| Well ID (Well Tag) on Well Log: L- | 131956 | Total depth | 407 | Casing diameter (inches): 16 |
| Start Card # on Well Log: | 1041463 | Owner on well log: | John Toelle | |
| Date drilled: | 1/7/2019 | | | |

Water-Level Measurement

Date of measurement: Measurements should be made to at least the nearest tenth of a foot (10.2'), the nearest inch (10' 3") or the nearest pound, if using a gage.

| | | | | |
|--|-------|-------------------------------------|--|------------------|
| Depth to water below measuring point: | 33.73 | Airline length or transducer depth: | | feet |
| Measuring point height above/below land surface: | 2.40 | Airline pressure: | | psi x 2.31= feet |
| Depth to water below land surface: | 31.33 | Shut-in pressure: | | psi x 2.31= feet |

Measurement Status: Static Pumping Rising Flowing Other

Measurement Method: E-tape Airline Other Steel tape

Length of time well was idle prior to measurement:


Measuring point description:

The measuring point is the reference point from which the measurement is made. Examples are: 1/2" access port in well cap, 1-1/2" port pipe on N side, pressure gage.

Comments:

When did water use begin for this well under this permit? Month Year

I hereby certify that the information on this report is accurate and represents the static water level in the well at the time of measurement.

Person making measurement (print): Scott D. Montomery
 Signature of measurer: 
 Company: All Points Engr & Surveying, Inc
 Licensed number (circle license type): CWRE RG, PE, WWC, Pump Installer: 51324
 Daytime phone number: 541-548-5833
 Email address: scott@apeands.com

If you have any questions about this notice, please call the Measurement & Reporting Section of the Department at 503-986-0822. Return this Form to: OWRD, Meas & Rept Section, 725 Summer St. NE, Suite. A, Salem, OR 97301-1266 or email as an attachment to reportingmmts@wr.state.or.us. Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

Fry Industries Inc.

Fry Industries
 P.O. Box 135
 22610 Skeen Ranch Rd
 Sprague River, OR 97639

Office 541 533 2609
 Fax 541 533 2609
 Email fryindustries@comcast.com

INVOICE

Invoice # 11127
 Account # C1044
 Date 01 04 2019
 Due By 01 04 2019
 Terms On 1/term

RECEIVED
JUN 26 2019
OWRD

Bill To

John Foster
 P.O. Box 2
 Burns, OR 97720

| Code | Description | QTY | Rate | T | Amount |
|------|-------------------------|-----|------------|---|-------------|
| | start card L131956 | 225 | \$0.00 | N | \$0.00 |
| | 20" drilling | 58 | \$65.00 | N | \$3,770.00 |
| | 12" drilling | 342 | \$45.00 | N | \$15,390.00 |
| | mud equipment | 2 | \$750.00 | N | \$1,500.00 |
| | quick gel | 40 | \$14.50 | N | \$580.00 |
| | 16" casing | 60 | \$54.00 | N | \$3,240.00 |
| | casing setting/buttress | 60 | \$7.00 | N | \$420.00 |
| | annular seal | 1 | \$1,050.00 | N | \$1,050.00 |
| | drill foam | 55 | \$22.00 | N | \$1,210.00 |
| | set up and moving | 1 | \$1,500.00 | N | \$1,500.00 |
| | cap plate | 1 | \$50.00 | N | \$50.00 |

| | |
|-------------|-------------|
| Subtotal | \$27,510.00 |
| Tax | \$0.00 |
| Total | \$27,510.00 |
| Balance Due | \$27,510.00 |

Cashier

Clearwater Pump & Irrigation

P O. Box 393
Burns OR 97720

#1

Bill To:

Don Toelle
P O. Box 2
Burns, OR 97720

| Item Name | Item Description | Qty | Price | Ext Price |
|-------------------------------|--|-----|----------|------------|
| Labor-Irrigation Pump Turbine | Set test pump in south well L131956 | 164 | \$8.00 | \$1,312.00 |
| Labor-Well Testing | Pumped 335 GPM @ 162' for 4.5 Hours Clean | 4.5 | \$250.00 | \$1,125.00 |
| Labor-Irrigation Pump Turbine | Remove test pump from well | 164 | \$8.00 | \$1,312.00 |

South Well L131956. 400' Deep, 40' Static Water Level

Subtotal: \$3,749.00
RECEIPT TOTAL: \$3,749.00

Account: \$3,749.00

Signature _____

I agree to pay above amount according to card issuer
agreement (merchant agreement if credit voucher).

Account Balance: \$9,123.00

Thanks for shopping with us!



8000

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JUN 26 2019

OWRD

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

HARN 52770

WELL I.D. LABEL# 131958
START CARD # 1041713
ORIGINAL LOG #

1/23/2019

(1) LAND OWNER
Owner Well I.D. #3
First Name JOHN Last Name TOELLE
Company
Address 72989 COW CREEK RD BURNS OR 97720
City BURNS State OR Zip 97720

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

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

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

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

(5) BORE HOLE CONSTRUCTION
Special Standard (Attach copy)
Depth of Completed Well 278.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Row 1: 20, 0, 58, Cement, 0, 58, 35, S. Row 2: 14, 58, 278, Calculated, 35.

How was seal placed: Method [] A [] B [X] C [] D [] E
[] Other

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 Stil Plstc Wld Thrd
Shoe [] Inside [] Outside [] Other Location of shoe(s)
Temp casing [] Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/ Screen Dia From To Scrn/slot width Slot length # of slots # of Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [] Bailer [X] Air [] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
1000 170 1

Temperature 60 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount 197 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 22.00 S N/S Range 32.50 E E/W WM
Sec 25 NE 1/4 of the NW 1/4 Tax Lot 401
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [X] Nearest address
72989 COW CREEK RD BURNS OR 97720

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 1/22/2019 53
Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES
Depth water was first found 89.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
1/22/2019 89 278 1000 53

(11) WELL LOG
Ground Elevation
Material From To
clay 0 10
very hard broken clay/sandstone 10 24
large gravel 24 31
hard cemented gravel conglomerate 31 32
grey claystone 32 40
broken claystone 40 43
grey claystone 43 89
fractured dirty grey clay 89 155
broken brown clay 155 225
multi colored cinder 225 278

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Date Started 1/9/2019 Completed 1/22/2019

(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 1940 Date 1/23/2019
Signed BENJAMIN FRY (E-filed)

(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 1355 Date 1/23/2019
Signed ARTHUR FRY (E-filed)
Contact Info (optional)

Fry Industries Inc.

Fry Industries
 P.O. Box 135
 22610 Skeen Ranch Rd.
 Sprague River, OR 97639

Office-541-533-2509
 Fax-541-533-2509
 Email- fryindustries@gmail.com

INVOICE

Invoice # 11130
 Account # C1044
 Date 01-21-2019
 Due By 01-21-2019
 Terms On Receipt

#3

Bill To

John Toelle
 P.O. Box 2
 Burns, OR 97720

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OWRD

| Code | Description | QTY | Rate | T | Amount |
|------|----------------------------|-----|------------|---|-------------|
| | start card | 1 | \$225.00 | N | \$225.00 |
| | 20" drilling | 58 | \$65.00 | N | \$3,770.00 |
| | 14" drilling | 212 | \$55.00 | N | \$11,660.00 |
| | 16" steel well casing | 60 | \$34.00 | N | \$2,040.00 |
| | annular seal | 1 | \$1,050.00 | N | \$1,050.00 |
| | mud equipment | 2 | \$750.00 | N | \$1,500.00 |
| | casing setting and welding | 60 | \$7.00 | N | \$420.00 |
| | quik gel | 40 | \$14.50 | N | \$580.00 |
| | drill foam | 50 | \$22.00 | N | \$1,100.00 |

Subtotal \$22,345.00
 Tax \$0.00
 Total \$22,345.00
 Balance Due \$22,345.00

PAST DUE

Printed: 8/18/2015 6:05:00 PM
Store: 1

#4

Work Order #5008

Ordered: 8/18/2015
Associate: TOE
Page 1

Harney Pump & Irrigation, LLC

13103 Hwy 20
Burns, OR 97720
541-573-2400
541-573-5400 fax
harneypump-irr@centurytel.net

RECEIVED

JUN 26 2019

OWRD

Bill To: FARM PLAN
DON G TOELLE
72702 COW CREEK RD
BURNS, OR 97720
541-493-2451

Ship To: FARM PLAN
DON G TOELLE
72702 COW CREEK RD
BURNS, OR 97720
541-493-2451

INSTRUCTIONS: 8-7-15 - NEW WELL TEST
SERVICE PUMP TRUCK AND TRAILOR AND TEST PUMP WITH ENGINE TRUCK AND CREW TO INSTALL TEST PUMP AT 245' PLUS BOWLS
RUN TEST FOR 1 HR. WITH MAX GPM AROUND 280 GPM AT 254'
STATIC - 65' 14" WELL CASING
MAX GPM 280 @ 254'
270 @ 228'
255 @ 214'
PULL TEST PUMP.

Order Status: CLOSED

Due Date:

| Item # | Description 1 | Order | Price | Ext Price |
|------------------------------|-------------------|-------|----------|------------|
| 2 | INSTALL TEST PUMP | 245 | \$8.00 | \$1,960.00 |
| 2 | RUN TEST | 1 | \$155.00 | \$155.00 |
| 2 | PULL TEST PUMP | 245 | \$8.00 | \$1,960.00 |
| Total Qty Ordered: 491 491 0 | | | | |

Percent Unfilled: 0

| | | |
|-------|------------------|-------------------|
| | Subtotal: | \$4,075.00 |
| TAXES | 0 % Tax: | + \$0.00 |
| | TOTAL: | \$4,075.00 |
| | Deposit Balance: | \$0.00 |
| | Balance Due: | \$0.00 |

Thank you for your patronage!

DUE UPON RECEIPT
A 1-1/2% MONTHLY FINANCE CHARGE WILL BE ADDED 30 DAYS FROM THE DATE OF THIS INVOICE.

Cashier

Sales Receipt #7999

Clearwater Pump & Irrigation

P O Box 393
Burns OR 97720

#3

REPRINTED

RECEIVED

JUN 26 2019

OWRD

Bill To:

Don Toelle
P O Box 2
Burns, OR 97720

| Item Name | Item Description | Qty | Price | Ext Price |
|-------------------------------|---|-----|----------|------------|
| Labor-Irrigation Pump Turbine | Set test pump in N well L131958 | 164 | \$8.00 | \$1,312.00 |
| Labor-Well Testing | Pumped App 1200 GPM Clean @ 168' for 11 Hours | 11 | \$250.00 | \$2,750.00 |
| Labor-Irrigation Pump Turbine | Remove test pump from well | 164 | \$8.00 | \$1,312.00 |

North Well L131958 281' Deep, 50' Static Water Level

Account: \$5,374.00

Subtotal: \$5,374.00
RECEIPT TOTAL: \$5,374.00

Signature _____

I agree to pay above amount according to card issuer agreement (merchant agreement if credit voucher).

Account Balance: \$5,374.00

Thanks for shopping with us!



7999

WATER RESOURCES DEPARTMENT

RECEIPT # _____

725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE # _____

RECEIVED FROM: John L. Telle
BY: _____

| | |
|-------------|---------|
| APPLICATION | G 17644 |
| PERMIT | |
| TRANSFER | |

CASH: CHECK: # 549 OTHER: (IDENTIFY)

TOTAL REC'D \$ 450.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES \$ _____
OTHER: (IDENTIFY) \$ _____

0243 I/S Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

4270 WRD OPERATING ACCT

MISCELLANEOUS

0407 COPY & TAPE FEES 46111 \$ _____
0410 RESEARCH FEES \$ _____
0408 MISC REVENUE: (IDENTIFY) _____ \$ _____
TC162 DEPOSIT LIAB. (IDENTIFY) _____ \$ _____
0240 EXTENSION OF TIME _____ \$ _____

WATER RIGHTS:

| | | | |
|--------------------|----------|------|------------------|
| 0201 SURFACE WATER | EXAM FEE | 0202 | RECORD FEE |
| 0203 GROUND WATER | \$ _____ | 0204 | \$ <u>450.00</u> |
| 0205 TRANSFER | \$ _____ | | |

WELL CONSTRUCTION

| | | | |
|-----------------------------|----------|------|-------------|
| 0218 WELL DRILL CONSTRUCTOR | EXAM FEE | 0219 | LICENSE FEE |
| LANDOWNER'S PERMIT | \$ _____ | 0220 | \$ _____ |
| OTHER (IDENTIFY) _____ | | | |

0536 TREASURY 0437 WELL CONST. START FEE

| | | | |
|---------------------------|----------|--------|--|
| 0211 WELL CONST START FEE | \$ _____ | CARD # | |
| 0210 MONITORING WELLS | \$ _____ | CARD # | |
| OTHER (IDENTIFY) _____ | | | |

0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER

| | | | |
|---------------------------------|--|----|--|
| 0233 POWER LICENSE FEE (FW/WRD) | | \$ | |
| 0231 HYDRO LICENSE FEE (FW/WRD) | | \$ | |
| HYDRO APPLICATION | | \$ | |

_____ TREASURY OTHER / RDX

FUND _____ TITLE _____
OBJ. CODE _____ VENDOR # _____
DESCRIPTION _____

RECEIVED
JUN 26 2019

OWRD \$ _____

RECEIPT: 112032 DATED: 5.14.14 BY: [Signature]

... J. Ordination (FAQ) sheet. A water well that ...

**Oregon Water Resources Department
PERMIT CONDITION WATER-LEVEL REPORTING FORM**

RECEIVED

JUN 26 2019

OWRD

Well owner:

| | | | |
|----------------|--------------------|----|-------|
| Name | Don & John Toelle | | |
| Address | 72702 Cow Creek Rd | | |
| City/State/Zip | Burns | OR | 97720 |
| Phone/Fax/Cell | 541-493-2511 | | |
| Email | | | |

| | |
|--------------|----------|
| Application: | G- 17644 |
| Permit: | G-17244 |
| Certificate: | |
| Userid: | 10023 |
| Transfer | |

Your water right requires periodic static water-level measurements in your wells. **Consult your permit or certificate to determine when measurements should be made, when reports are due, and who is allowed to make the measurements.** Keep a copy of all measurement reports for your records. **All wells that have been constructed must be measured regardless of whether they are being used.** Please contact the Department if you are no longer the holder of this right or no longer have an interest in it.

Complete one form for each well.

Other water rights that list this well:

| | | | | |
|------------------------|--|--|--|--|
| Application number(s): | | | | |
| Permit number(s): | | | | |
| Certificate number(s): | | | | |

Identification of measured well (Provide as much information as possible.)

| | | | | |
|-----------------------------------|------------|--------------------|-------------|------------------------------|
| Water Resources Well Log ID: | HARN 52770 | Owner's well name: | Well 3 | |
| Well ID (Well Tag) on Well: L- | 131958 | Well drilled by: | Art Fry | |
| Well ID (Well Tag) on Well Log:L- | 131958 | Total depth | 278 | Casing diameter (inches): 16 |
| Start Card # on Well Log: | 1041713 | Owner on well log: | John Toelle | |
| Date drilled: | 1/22/2019 | | | |

Water-Level Measurement

Date of measurement: **March 14, 2019** Measurements should be made to at least the nearest tenth of a foot (10.2'), the nearest inch (10' 3") or the nearest pound, if using a gage.

| | | | | |
|--|-------|-------------------------------------|--|------------------|
| Depth to water below measuring point: | 47.80 | Airline length or transducer depth: | | feet |
| Measuring point height above/below land surface: | 1.50 | Airline pressure: | | psi x 2.31= feet |
| Depth to water below land surface: | 46.30 | Shut-in pressure: | | psi x 2.31= feet |

Measurement Status: Static Pumping Rising Flowing Other

Measurement Method: E-tape Airline Other **Steel tape**

Length of time well was idle prior to measurement: **Unknown**

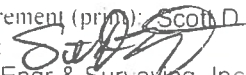
Measuring point description: **Hole in top of casing**

The measuring point is the reference point from which the measurement is made. Examples are: 1/2" access port in well cap, 1-1/2" port pipe on N side, pressure gage

Comments:

When did water use begin for this well under this permit? Month Year

I hereby certify that the information on this report is accurate and represents the static water level in the well at the time of measurement.

Person making measurement (print): **Scott D. Montomery**
 Signature of measurer: 
 Company: All Points Engr & Surveying, Inc.
 Licensed number (circle license type: CWRE, RG, PE, WWC, Pump Installer): 51324
 Daytime phone number: 541-548-5833
 Email address: scott@apeands.com

If you have any questions about this notice, please call the Measurement & Reporting Section of the Department at 503-986-0822.
Return this Form to: OWRD, Meas & Rept Section, 725 Summer St. NE, Suite. A, Salem, OR 97301-1266 or email as an attachment to reportingmmts@wrdd.state.or.us. Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

HARN 52421

WELL I.D. LABEL# L 118659 START CARD # 1027061 ORIGINAL LOG #

9/8/2015

(1) LAND OWNER Owner Well I.D. 14" IRR First Name JOHN Last Name TOELLE Company Address PO BOX 2 City BURNS State OR Zip 97720

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

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy) Depth of Completed Well 485.00 ft. BORE HOLE SEAL sacks/lbs

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Row 1: 18, 0, 20, Bentonite Chips, 0, 50, 50, S. Row 2: 14, 20, 485, Calculated, 46.5.

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other POURED AND TAMPED 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 Stil Plstc Wld Thrd Shoe [] Inside [] Outside [] Other Location of shoe(s) Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Perf/ Casing/ Screen Screen Liner Dia From To Scrn/slot width Slot length # of slots Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) Temperature 60 °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 HARNEY Twp 22.00 S N/S Range 32.50 E E/W WM Sec 25 SE 1/4 of the SE 1/4 Tax Lot 400 Tax Map Number Lot Lat Long Street address of well Nearest address 72989 COW CREEK ROAD

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Pre-Alteration Completed Well 8/10/2015 78 Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 78.00 SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG Ground Elevation Material From To TOPSOIL - CLAY LOAM 0 1 CLAY - BROWN 1 10 CLAYSTONE - BROWN W/ SMALL GRAVEL 10 35 PUMICE - GRAY 35 40 CLAYSTONE - GREEN 40 185 CLAYSTONE - BROWN & GREEN W/PUMICE 185 195 CLAYSTONE - GRAY HARD 195 215 PUMICE & ASH 215 240 CLAYSTONE - GREEN 240 285 SANDSTONE - GRAY BLUE 285 330 SANDSTONE/CLAYSTONE MIX BLUE 330 400 CLAYSTONE - GRAY 400 485

Date Started 8/4/2015 Completed 8/10/2015

(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 1424 Date 9/8/2015 Signed TIMOTHY K RILEY (E-filed) Contact Info (optional) Tim Riley 541-573-5695

Western Drilling, Inc

PO Box 751
Burns, OR 97720

Invoice

| | |
|----------|-----------|
| DATE | INVOICE # |
| 9/8/2015 | FC424 |

| |
|--|
| BILL TO |
| JOHN DOWELL PO BOX 2 BURNS, OR 97720 |

RECEIVED

JUN 26 2019

OWRD

| | | |
|----------|-------|---------|
| P.O. NO. | TERMS | PROJECT |
| 14" IRR | | |

| QTY | Unit of Measure | DESCRIPTION | RATE | AMOUNT |
|--------------|-----------------|---------------------------------------|----------|--------------------|
| 1 | | Start card fee (Water Resources Dept) | 225.00 | 225.00 |
| 1 | | Mobilization & set up | 1,200.00 | 1,200.00 |
| 20 | FEET | 18" Drilling | 90.00 | 1,800.00 |
| 330 | FEET | 14" Drilling | 70.00 | 23,100.00 |
| 135 | FEET | 14" Drilling | 50.00 | 6,750.00 |
| 160 | FEET | 14" Casing | 35.00 | 5,600.00 |
| 1 | | Bentonite Surface Seal | 450.00 | 450.00 |
| Total | | | | \$39,125.00 |

X

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JUN 26 2019

OWRD

app. 3250.⁰⁰ 2014

well log 450.⁰⁰ 2015

water measure 442.50 2019

All pints 300.⁰⁰ 2013

**Oregon Water Resources Department
PERMIT CONDITION WATER-LEVEL REPORTING FORM**

RECEIVED

JUN 26 2019

OWRD

Well owner:

| | | | |
|----------------|--------------------|----|-------|
| Name | Don & John Toelle | | |
| Address | 72702 Cow Creek Rd | | |
| City/State/Zip | Burns | OR | 97720 |
| Phone/Fax/Cell | 541-493-2511 | | |
| Email | | | |

| | |
|--------------|----------|
| Application: | G- 17644 |
| Permit: | G-17244 |
| Certificate: | |
| Userid: | 10023 |
| Transfer | |

Your water right requires periodic static water-level measurements in your wells. Consult your permit or certificate to determine when measurements should be made, when reports are due, and who is allowed to make the measurements. Keep a copy of all measurement reports for your records. All wells that have been constructed must be measured regardless of whether they are being used. Please contact the Department if you are no longer the holder of this right or no longer have an interest in it.

Complete one form for each well.

Other water rights that list this well:

| | | | | |
|------------------------|--|--|--|--|
| Application number(s): | | | | |
| Permit number(s): | | | | |
| Certificate number(s): | | | | |

Identification of measured well (Provide as much information as possible.)

| | | | | |
|------------------------------------|------------|--------------------|---------------|------------------------------|
| Water Resources Well Log ID: | HARN 52421 | Owner's well name: | Well 4 | |
| Well ID (Well Tag) on Well: L- | 118659 | Well drilled by: | Timothy Riley | |
| Well ID (Well Tag) on Well Log: L- | 118659 | Total depth | 485 | Casing diameter (inches): 14 |
| Start Card # on Well Log: | 1027061 | Owner on well log: | John Toelle | |
| Date drilled: | 8/10/2015 | | | |

Water-Level Measurement

Date of measurement: **March 14, 2019** Measurements should be made to at least the nearest tenth of a foot (10.2'), the nearest inch (10' 3") or the nearest pound, if using a gage.

| | | | | |
|--|-------|-------------------------------------|--|------------------|
| Depth to water below measuring point: | 31.90 | Airline length or transducer depth: | | feet |
| Measuring point height above/below land surface: | 1.35 | Airline pressure: | | psi x 2.31= feet |
| Depth to water below land surface: | 30.55 | Shut-in pressure: | | psi x 2.31= feet |

Measurement Status: Static Pumping Rising Flowing Other

Measurement Method: E-tape Airline Other Steel tape

Length of time well was idle prior to measurement: **Unknown**


Measuring point description: **Top of casing (removed lid)**

The measuring point is the reference point from which the measurement is made. Examples are: 1/2" access port in well cap; 1-1/2" port pipe on N side, pressure gage.

Comments:

When did water use begin for this well under this permit? Month Year

I hereby certify that the information on this report is accurate and represents the static water level in the well at the time of measurement

Person making measurement (print): Scott D. Montomery
 Signature of measurer: 
 Company: All Points Ehdr & Surveying, Inc
 Licensed number (circle license type): (CWRE) RG, PE, WWC, Pump Installer: 51324
 Daytime phone number: 541-548-5833
 Email address: scott@apeands.com

If you have any questions about this notice, please call the Measurement & Reporting Section of the Department at 503-986-0822.
Return this Form to: OWRD, Meas & Rept Section, 725 Summer St. NE, Suite. A, Salem, OR 97301-1266 or email as an attachment to reportingmmts@wrdd.state.or.us. Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>