



U.S. Department of the Interior
BUREAU OF LAND MANAGEMENT



State: OR
Office: LLORB05000
Preference Code: 03
AUTHORIZATION: 3602338

GRAZING PERMIT

EFFECTIVE: 03/01/2019 TO 02/28/2029

ISSUED BY:

BUREAU OF LAND MANAGEMENT
THREE RIVERS RA
28910 HWY 20 W
HINES OR 97738

ISSUED TO:

ZACH SWORD
PO BOX 3002
PRINCETON OR 97721-3002

UNDER 43 CFR PART 4100, THE BUREAU OF LAND MANAGEMENT (BLM) OFFERS YOU THIS GRAZING PERMIT BASED ON YOUR RECOGNIZED QUALIFICATIONS. UPON YOUR ACCEPTANCE OF THE TERMS AND CONDITIONS OF THIS GRAZING PERMIT AND PAYMENT OF GRAZING FEES WHEN DUE, YOU ARE AUTHORIZED TO MAKE GRAZING USE OF LANDS UNDER THE JURISDICTION OF THE BLM THAT ARE COVERED BY THIS GRAZING PERMIT. IF YOU HAVE QUESTIONS CONCERNING THIS GRAZING PERMIT, CONTACT YOUR LOCAL BLM OFFICE AT 541-573-4400.

TERMS AND CONDITIONS

ALLOTMENT	PASTURE	LIVESTOCK NUMBER KIND	PERIOD		%PL USE TYPE USE	AUMS
			BEGIN	END		
OR05301	PRINCETON	296 CATTLE	04/01	07/31	100 ACTIVE	1,187
OR05598	BECKLEY HOME	25 CATTLE	06/01	10/15	100 ACTIVE	113

THIS PERMIT OR LEASE IS ISSUED UNDER THE AUTHORITY OF SECTION 402(C) (2) OF FLPMA, 1976 AS AMENDED, AND CONTAINS THE SAME TERMS AND CONDITIONS AS THE PREVIOUS PERMIT OR LEASE. THIS PERMIT OR LEASE MAY BE CANCELED, SUSPENDED, OR MODIFIED, IN WHOLE OR IN PART TO MEET THE REQUIREMENTS OF APPLICABLE LAWS AND REGULATIONS.

THE GRAZING MANAGEMENT PLAN IN YOUR AMP IS A TERM AND CONDITION OF YOUR PERMIT AS PROVIDED IN 43 CFR 4120.2(D).

OFFICE TERMS AND CONDITIONS

1. TITLE CFR 4130.3-2(D) STATES THAT AN ACTUAL USE RECORD SHALL BE
SUBMITTED WITHIN 15 DAYS AFTER COMPLETION OF ANNUAL GRAZING USE.
2. PERMITTEES/LESSEES ARE REQUIRED TO MAINTAIN ALL IMPROVEMENTS
AS AGREED UPON IN ASSIGNMENT OF RANGE IMPROVEMENTS AND
COOPERATIVE AGREEMENTS.
3. NO SALT WILL BE PERMITTED WITHIN ONE-QUARTER OF A MILE FROM
LIVESTOCK WATER SOURCES AND RIPARIAN MEADOWS.
4. ANY FORAGE AUTHORIZED IN EXCESS OF YOUR PERMITTED USE IS NON-
RENEWABLE AND DOES NOT ESTABLISH A PRIORITY FOR FUTURE FORAGE

ALLOCATION 43 CFR 4110.3-1(A).

5. A TRAIL PERMIT IS REQUIRED TO CROSS PUBLIC LANDS.
6. THIS PERMIT / LEASE IS SUBJECT TO MODIFICATION IF NECESSARY TO
ACHIEVE COMPLIANCE WITH THE STANDARDS FOR RANGELAND HEALTH &
GUIDELINES FOR LIVESTOCK GRAZING MANAGEMENT (43 CFR 4180).

PERMITTED USE SUMMARY

ALLOTMENT		ACTIVE AUMS	SUSPENDED AUMS	TEMP SUSPENDED AUMS	PERMITTED USE
OR05301	PRINCETON	1,187	0	0	1,187
OR05598	BECKLEY HOME	113	0	0	113

TERMS AND CONDITIONS APPLICABLE TO ALL PERMITS AND LEASES

1. Grazing permit or lease terms and conditions and the fees charged for grazing use are established in accordance with the provisions of the grazing regulations now or hereafter approved by the Secretary of the Interior.
 2. They are subject to cancellation, in whole or in part, at any time because of:
 - a. Noncompliance by the permittee/lessee with rules and regulations.
 - b. Loss of control by the permittee/lessee of all or a part of the property upon which it is based.
 - c. A transfer of grazing preference by the permittee/lessee to another party.
 - d. A decrease in the lands administered by the Bureau of Land Management within the allotment(s) described.
 - e. Repeated willful unauthorized grazing use.
 - f. Loss of qualifications to hold a permit or lease.
 3. They are subject to the terms and conditions of allotment management plans if such plans have been prepared. Allotment management plans **MUST** be incorporated in permits or leases when completed.
 4. Those holding permits or leases **MUST** own or control and be responsible for the management of livestock authorized to graze.
 5. The authorized officer may require counting and/or additional or special marking or tagging of the livestock authorized to graze.
 6. The permittee's/lessee's grazing case file is available for public inspection as required by the Freedom of Information Act.
 7. Grazing permits or leases are subject to the nondiscrimination clauses set forth in Executive Order 11246 of September 24, 1964, as amended. A copy of this order may be obtained from the authorized officer.
 8. Livestock grazing use that is different from that authorized by a permit or lease **MUST** be applied for prior to the grazing period and **MUST** be filed with and approved by the authorized officer before grazing use can be made.
 9. Billing notices are issued which specify fees due. Billing notices, when paid, become a part of the grazing permit or lease. Grazing use cannot be authorized during any period of delinquency in the payment of amounts due, including settlement for unauthorized use.
 10. The holder of this authorization must notify the authorized officer immediately upon the discovery of human remains, funerary objects, sacred objects, or objects of cultural patrimony (cultural items), stop the activity in the area of the discovery and make a reasonable effort to protect the remains and/or cultural items.
 11. Grazing fee payments are due on the date specified on the billing notice and **MUST** be paid in full within 15 days of the due date, except as otherwise provided in the grazing permit or lease. If payment is not made within that time frame, a late fee (the greater of \$25 or 10 percent of the amount owed but not more than \$250) will be assessed.
 12. Members of Congress may not enter into a grazing permit or lease. 41 USC 6306 (2014). Further, no officer, agent, or employee of the Department of the Interior, other than members of Advisory committees appointed in accordance with the Federal Advisory Committee Act (5 U.S.C. App. 1) and Sections 309 of the Federal Land Policy and Management Act of 1976 (42 U.S.C. 1701 et. seq.) shall be admitted to any share or part in a permit or lease for grazing or derive any benefit to arise from a permit or lease for grazing.
-

THIS GRAZING PERMIT:

1. CONVEYS NO RIGHT, TITLE OR INTEREST HELD BY THE UNITED STATES IN ANY LANDS OR RESOURCES
2. IS SUBJECT TO (A) MODIFICATION, SUSPENSION OR CANCELLATION AS REQUIRED BY LAND PLANS AND APPLICABLE LAW; (B) ANNUAL REVIEW AND MODIFICATION OF TERMS AND CONDITIONS AS APPROPRIATE; AND (C) THE TAYLOR GRAZING ACT, AS AMENDED, THE FEDERAL LAND POLICY AND MANAGEMENT ACT, AS AMENDED, THE PUBLIC RANGELANDS IMPROVEMENT ACT, AND THE RULES AND REGULATIONS NOW OR HEREAFTER PROMULGATED THEREUNDER BY THE SECRETARY OF THE INTERIOR.

ACCEPTED BY:
OPERATOR SIGNATURE11-15-18
DATE

PRINTED NAME AND TITLE

APPROVED BY:
BLM AUTHORIZED OFFICER SIGNATURE11/15/2018
DATE

PRINTED NAME AND TITLE

AUMS: Animal Unit Months. Animal unit month means the amount of forage necessary for the sustenance of one cow or its equivalent for a period of 1 month. For fee calculation purposes, an AUM is one month's use and occupancy of the range by one cow, bull, steer, heifer, horse, burro, mule, 5 sheep or 5 goats that: (1) are over the age of 6 months at the time of entering lands administered by the BLM; (2) are weaned regardless of age; (3) will become 12 months of age during the authorized period of use.

%PL Use: Percent forage from public land use.

Type Use: Categories with specific rules that govern AUM and grazing fee calculation and input on grazing authorizations and bills.

STATE OF OREGON

COUNTY OF HARNEY

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

ZACHARY SWORD
PO BOX 3002
PRINCETON, OR 97721

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-16973

SOURCE OF WATER: WELL 1 (HARN 51378) AND WELL 2 IN MALHEUR LAKE BASIN

PURPOSE OR USE: IRRIGATION USE ON 263.9 ACRES

MAXIMUM RATE: 3.3 CUBIC FEET PER SECOND (CFS), BEING 1.3 CFS FROM WELL 1 (HARN 51378) AND 2.0 CFS FROM WELL 2 IN MALHEUR LAKE BASIN

PERIOD OF USE: MARCH 1 THROUGH OCTOBER 31

DATE OF PRIORITY: NOVEMBER 30, 2007

WELL LOCATIONS:

WELL 1 (HARN 51378)- NE $\frac{1}{4}$ SW $\frac{1}{4}$, SECTION 29, T26S, R34E, W.M.; 2135 FEET NORTH AND 1433 FEET EAST FROM SW CORNER, SECTION 29

WELL 2 - NW $\frac{1}{4}$ SE $\frac{1}{4}$, SECTION 30, T26S, R34E, W.M.; 2300 FEET NORTH AND 150 FEET EAST FROM S1/4 CORNER, SECTION 30

The amount of water used for irrigation under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second and 3.0 acre-feet for each acre irrigated during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

NE $\frac{1}{4}$ SW $\frac{1}{4}$ 16.3 ACRES
NW $\frac{1}{4}$ SW $\frac{1}{4}$ 27.8 ACRES
SW $\frac{1}{4}$ SW $\frac{1}{4}$ 33.2 ACRES ✓
SE $\frac{1}{4}$ SW $\frac{1}{4}$ 25.6 ACRES ✓
SECTION 29

NE $\frac{1}{4}$ SE $\frac{1}{4}$ 40.0 ACRES
NW $\frac{1}{4}$ SE $\frac{1}{4}$ 40.0 ACRES
SW $\frac{1}{4}$ SE $\frac{1}{4}$ 40.0 ACRES
SE $\frac{1}{4}$ SE $\frac{1}{4}$ 40.0 ACRES
SECTION 30

NE $\frac{1}{4}$ NW $\frac{1}{4}$ 1.0 ACRE
SECTION 32
TOWNSHIP 26 SOUTH, RANGE 34 EAST, W.M.

Measurement, recording and reporting conditions:

- A. Before water use may begin under this permit, the permittee shall install a totalizing flow meter or other suitable measuring device as approved by the Director at each point of appropriation. The permittee shall maintain the meter or measuring device in good working order, shall keep a complete record of the amount of water used each month, and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water-use information, including the place and nature of use of water under the permit.
- B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

The Department requires the water user to obtain, from a qualified individual (see below), and report annual static water levels for each well on the permit. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.

The permittee shall report an initial March static water-level measurement once well construction is complete and annual measurements thereafter. Annual measurements are required whether or not the well is used. The first annual measurement will establish a reference level against which future measurements will be compared. However, the Director may establish the reference level based on an analysis of other water-level data. The Director may require the user to obtain and report additional water levels each year if more data are needed to evaluate the aquifer system.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board. Measurements shall be submitted on forms provided by, or specified by, the Department. Measurements shall be made with

equipment that is accurate to at least the standards specified in OAR 690-217-0045. The Department requires the individual performing the measurement to:

- A. Associate each measurement with an owner's well name or number and a Department well log ID; and
- B. Report water levels to at least the nearest tenth of a foot as depth-to-water below ground surface; and
- C. Specify the method of measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

The water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s) if any of the following events occur:

- A. Annual water-level measurements reveal an average water-level decline of three or more feet per year for five consecutive years; or
- B. Annual water-level measurements reveal a water-level decline of 15 or more feet in fewer than five consecutive years; or
- C. Annual water-level measurements reveal a water-level decline of 25 or more feet; or
- D. Hydraulic interference leads to a decline of 25 or more feet in any neighboring well with senior priority.

The period of restricted use shall continue until the water level rises above the decline level which triggered the action or the Department determines, based on the permittee's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or causing substantial interference with senior water rights. The water user shall not allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

STANDARD CONDITIONS

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

If the number, location, source, or construction of any well deviates from that proposed in the permit application or required by permit conditions, this permit may not be valid, unless the Department authorizes the change in writing.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the

schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well(s) shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

If the riparian area is disturbed in the process of developing a point of diversion, the permittee shall be responsible for restoration and enhancement of such riparian area in accordance with ODFW's Fish and Wildlife Habitat Mitigation Policy OAR 635-415. For purposes of mitigation, the ODFW Fish and Wildlife Habitat Mitigation Goals and Standards, OAR Chapter 635, Division 415, Section 030 adopted November 13, 1991 shall be followed.

The use may be restricted if the quality of downstream waters decreases to the point that those waters no longer meet existing state or federal water quality standards due to reduced flows.

Where two or more water users agree among themselves as to the manner of rotation in the use of water and such agreement is placed in writing and filed by such water users with the watermaster, and such rotation system does not infringe upon such prior rights of any water user not a party to such rotation plan, the watermaster shall distribute the water according to such agreement.

Prior to receiving a certificate of water right, the permit holder shall submit to the Water Resources Department the results of a pump test meeting the Department's standards for each point of appropriation (well), unless an exemption has been obtained in writing under OAR 690-217. The Director may require water-level or pump-test data every ten years thereafter.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

Completion of construction and complete application of the water to the use shall be made on or before October 1, 2013. If the water is not completely applied before this date, and the permittee wishes to continue

development under the permit, the permittee must submit an application for extension of time, which may be approved based upon the merit of the application.

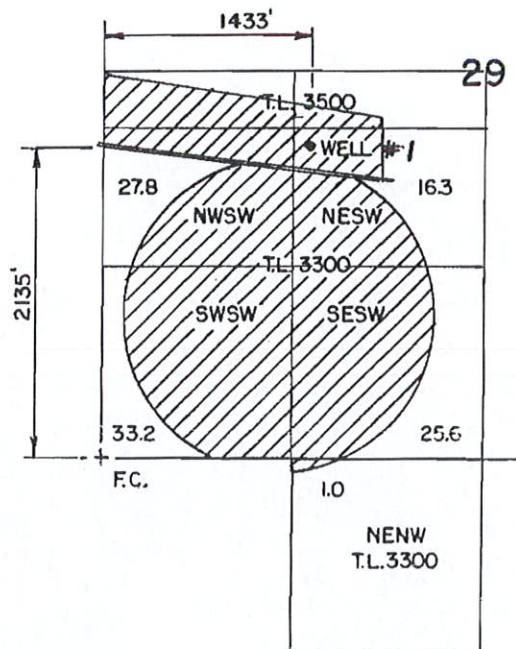
Within one year after complete application of water to the proposed use, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner (CWRE).

Issued NOVEMBER 28, 2008

E. Timothy Ward

for Phillip C. Ward, Director
Water Resources Department

T 26 S, R 34 E, WM



THE PURPOSE OF THIS MAP IS TO IDENTIFY THE LOCATION OF THE WATER RIGHT. IT IS NOT INTENDED TO PROVIDE INFORMATION RELATIVE TO THE LOCATION OF PROPERTY OWNERSHIP.

32

RECEIVED

NOV 30 2007

WATER RESOURCES DEPT
SALEM, OREGON

ZACH SWORD

WATER RIGHT APPLICATION MAP

Scale: 4" = 1 MILE

Date: JUNE 2007

Job: 2435

Dsn:

Drn: CHRIS

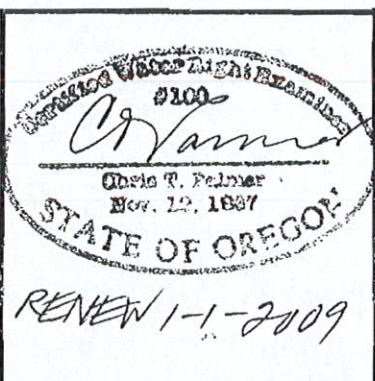
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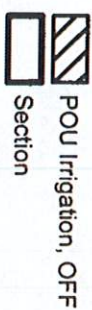
M.A. PALMER & SONS, INC.
ENGINEERING & SURVEYING
711 Ponderosa Village • Box 61
Burns, Oregon 97720

Sht. No.

of 1



HARNEY COUNTY, OREGON



----- Quarter Quarter
☐ Tax Lot
☒ Well

WELL LOCATIONS:
#1: 2,135' N, 1,433' E OF SW COR SEC 29
#2: 2,300' N, 150' E OF S 1/4 COR SEC 30

RECEIVED BY OWRD

JUL 21 2017

SALEM, OR

RENEWAL DATE 12/31/2017



PERMIT AMENDMENT "OFF" MAP

Sword Ranch

AP G-16973

PERMIT G-16407

NOTE: THIS MAP IS NOT INTENDED TO PROVIDE LEGAL DIMENSIONS OR LOCATIONS OF PROPERTY OWNERSHIP LINES.

APRIL 19, 2017

WATER RIGHT SERVICES, LLC

PO BOX 1830, BEND, OR 97709

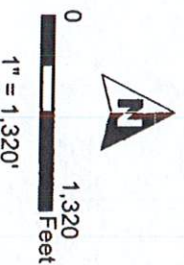
CCCB# 197121 www.oregonwater.us

541-389-2837 JOHNSHORT@USA.COM

T26S, R34E, SECTIONS 29, 30, & 32, WM

HARNEY COUNTY, OREGON

BECKLEY
WELL



- POU Irrigation, ON
- Section
- Quarter Quarter
- Tax Lot
- Well
- Buried Pipeline

WELL LOCATIONS:
 #1: 2.135' N, 1.433' E OF SW COR SEC 29
 #2: 280' N, 5' E OF CTR 1/4 COR SEC 30
 BECKLEY WELL: 360' S, 360' W OF
 N 1/4 COR SEC 29

RECEIVED BY OWRD

RECEIVED BY OWRD

32

AUG 14 2017

JUL 21 2017

SALEM, OR

SALEM, OR

RENEWAL DATE 12/31/2017



PERMIT AMENDMENT "ON" MAP

Sword Rarich

NOTE: THIS MAP IS NOT INTENDED TO
PROVIDE LEGAL DIMENSIONS OR LOCATIONS
OF PROPERTY OWNERSHIP LINES.

WATER RIGHT SERVICES, LLC

PO BOX 1830, BEND, OR 97709

CCB# 197121 www.oregonwater.us

AP G-16973

PERMIT G-16407

APRIL 19, 2017

541-389-2837 JOHNSHORT@USA.COM

STATE OF OREGON
COUNTY OF HARNEY
CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

ZACHARY O. SWORD
PO BOX 3002
PRINCETON OR 97721

confirms the right to the use of water perfected under the terms of Permit G-1604. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the well(s). The specific limits and conditions of the use are listed below.

SOURCE OF WATER: BECKLEY WELL, A TRIBUTARY OF MALHEUR LAKE

PURPOSE OR USE: IRRIGATION OF 97.9 ACRES

MAXIMUM RATE: 1.22 CUBIC FEET PER SECOND

DATE OF PRIORITY: JUNE 1, 1960

The well is located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
26 S	34 E	WM	29	NE NW	380 FEET SOUTH AND 360 FEET WEST FROM N1/4 CORNER, SECTION 29

The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to a diversion of ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated, and shall be further limited to a diversion of not to exceed 3.0 acre feet per acre for each acre irrigated during the irrigation season of each year; and shall conform to such reasonable rotation system as may be ordered by the proper state officer.

A description of the place of use is as follows:

Twp	Rng	Mer	Sec	Q-Q	Acres
26 S	34 E	WM	29	NE NW	31.4
26 S	34 E	WM	29	NW NW	31.4
26 S	34 E	WM	29	SW NW	3.7
26 S	34 E	WM	29	SE NW	31.4

Water use measurement conditions:

- A. The water user shall maintain the totalizing flow meter or other suitable measuring device approved by the Director in good working order at each point of appropriation.

NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

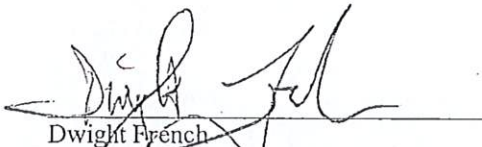
This is an order in other than a contested case. This order is subject to judicial review under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482. Pursuant to ORS 183.482, ORS 536.075 and OAR 137-003-0675, you may petition for judicial review and petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

- B. The water user shall maintain a record of the amount of all water used each month, including the total number of hours of pumping, the total quantity pumped, and the categories of beneficial use to which the water is applied. The record of use shall be submitted to the Department annually, or more frequently as may be required by the Director, and shall be submitted to the Watermaster upon request.
- C. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

The right to the use of the water for the above purpose is restricted to beneficial use on the place of use described.

This certificate is issued to confirm a change in PLACE OF USE approved by an order of the Water Resources Director entered MARCH 9, 2017, at Special Order Volume 104, Page 86, approving Transfer Application 12357, and supersedes Certificate 35951, State record of Water Right Certificates.

Issued JAN 14 2019



Dwight French
Water Right Services Division Administrator, for
Thomas M. Byler, Director
Oregon Water Resources Department

T26S, R34E, SECTION 29, WM

HARNEY COUNTY, OREGON

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BECKLEY WELL & METER:
380' S, 360' W OF
N 1/4 COR SEC 29

TL 3700

TL 3300

TL 2300

TL 3400

WELL 2 & METER:
280' N, 5' E OF
CTR 1/4 COR SEC 30

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SWNE

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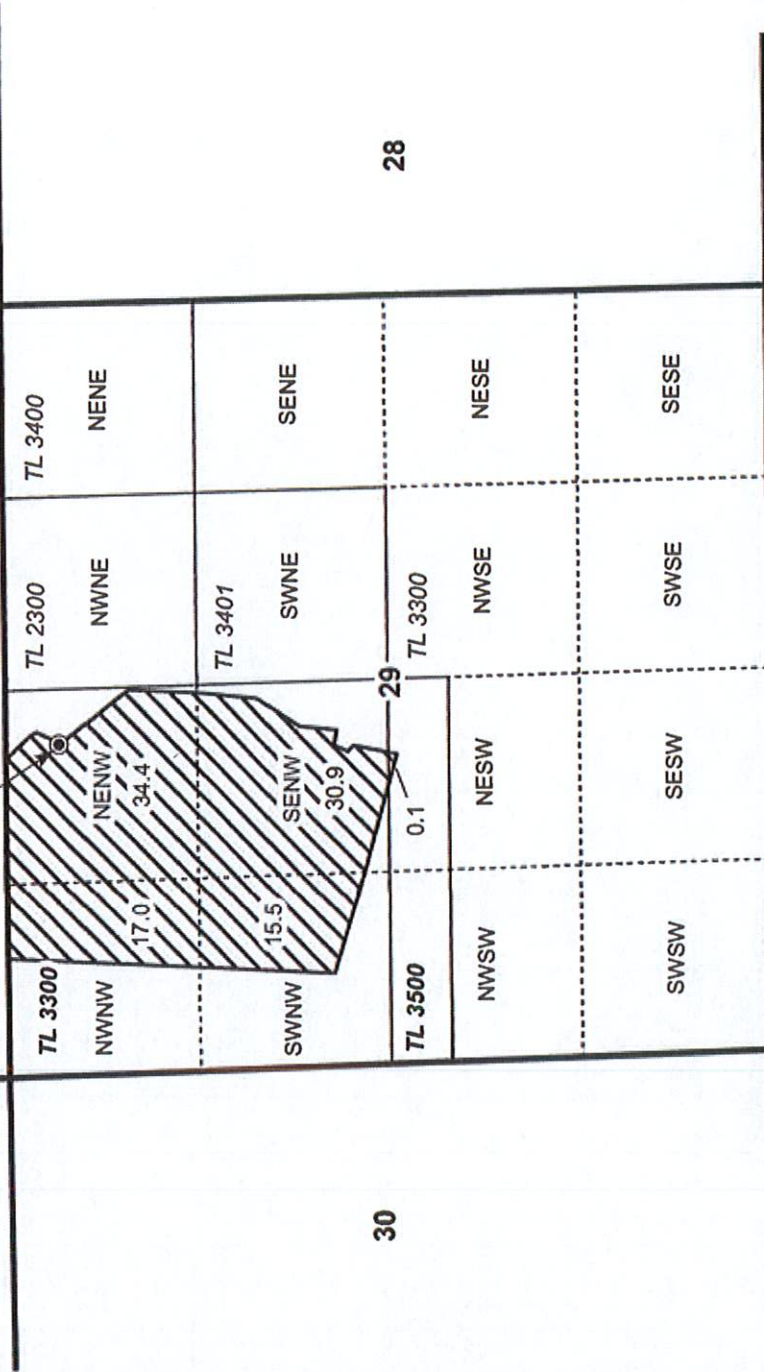
3.7

**T26S, R34E,
SECTION 29, WM**

HARNEY COUNTY, OREGON

20

BECKLEY WELL:
380' S, 360' W OF
N COR SEC 29



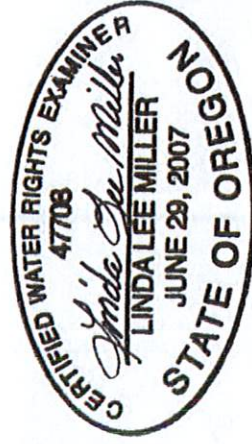
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30

32



- POU, transfer OFF
- Section
- Quarter Quarter
- Tax Lot
- Well



RENEWAL DATE 12/31/2016

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SALEM, OR

TRANSFER "OFF" MAP

Sword Ranch

T 12357

NOTE: THIS MAP IS NOT INTENDED TO
PROVIDE LEGAL DIMENSIONS OR LOCATIONS
OF PROPERTY OWNERSHIP LINES.

MARCH 9, 2016

WATER RIGHT SERVICES, LLC

PO BOX 1830, BEND, OR 97709

CCB# 197121 www.oregonwater.us

541-389-2837 JOHNSHORT@USA.COM

T26S, R34E, SECTION 29, WM

HARNEY COUNTY, OREGON



0 1,320 Feet
1" = 1,320'

- POU, transfer ON
- Section
- Quarter Quarter
- Tax Lot
- Well



RENEWAL DATE 12/31/2016

WATER RIGHT SERVICES, LLC
PO BOX 1830, BEND, OR 97709
CCB# 197121 www.oregonwater.us
541-389-2837 JOHNSHORT@USA.COM

20

28

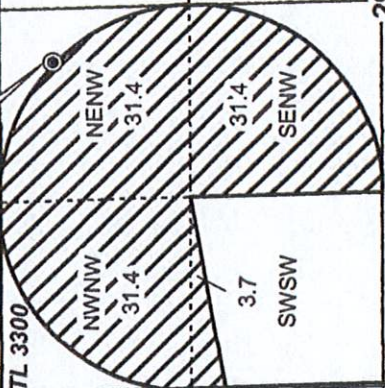
29

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SALEM, OR

BECKLEY WELL:
380' S, 360' W OF
N COR SEC 29



WELL 2:
280' N, 5' E OF
CTR COR SEC 30

WELL 1:
2,135' N, 1,433' E OF
SE COR SEC 29

NOTE: THIS MAP IS NOT INTENDED TO
PROVIDE LEGAL DIMENSIONS OR LOCATIONS
OF PROPERTY OWNERSHIP LINES.

TRANSFER "ON" MAP
Sword Ranch

T 12357

MARCH 9, 2016



State of Oregon
Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900

Application for Permanent Water Right Transfer

Part 1 of 5 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

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Check all items included with this application. (N/A = Not Applicable)

APR 28 2016

- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Transfer Application Map Checklist. **SALEM, OR**
- ☒ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at:
http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- ☒ Part 4 – Completed Applicant Information and Signature.
- ☒ Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: 35951**
Please include a separate Part 5 for each water right. (See instructions on page 6)

Attachments:

- ☒ Completed Transfer Application Map.
- ☒ Completed Evidence of Use Affidavit and supporting documentation.
- ☐ ☒ N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- ☐ ☒ N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- ☒ ☐ N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- ☒ ☐ N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- ☐ ☒ N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ Application fee not enclosed/insufficient ☐ Map not included or incomplete
- ☐ Land Use Form not enclosed or incomplete
- ☐ Additional signature(s) required ☐ Part _____ is incomplete

Other/Explanation _____

Staff: _____ 503-986-0 _____

Date: ____/____/____

Part 2 of 5 – Transfer Application Map Checklist

Your transfer application will be returned if any of the map requirements listed below are not met.

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- ☒ ☐ N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- ☐ ☒ N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- ☒ Permanent quality printed with dark ink on good quality paper.
- ☒ The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- ☒ A north arrow, a legend, and scale.
- ☒ The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- ☒ Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- ☒ Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- ☒ Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- ☒ Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- ☒ Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- ☒ ☐ N/A Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- ☒ Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- ☒ ☐ N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Revised 7/1/2013
SALEM, OR

Permanent Transfer Application Form – Page 2 of 8

TACS

1 12357

Part 3 of 5 – Fee Worksheet

1. For irrigation calculate cfs for each water right involved as follows:
 - a. Divide total authorized cfs by total acres in the water right (*for C12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be transferred to get the transfer cfs (*x 45 ac = 0.56 cfs*).
 - b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (*For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
2. Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land**. The fee should be assessed only once for each "on the ground" acre included in the transfer. (*In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0*).

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME ZACHARY O. SWORD			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS P.O. BOX 3002			FAX NO.	
CITY PRINCETON	STATE OR	ZIP 97721	E-MAIL	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

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

AGENT/BUSINESS NAME JOHN A. SHORT / WATER RIGHT SERVICES, LLC			PHONE NO. (541) 389-2837	ADDITIONAL CONTACT NO.
ADDRESS P.O. BOX 1830			FAX NO.	
CITY BEND	STATE OR	ZIP 97709	E-MAIL JOHNSHORT@USA.COM	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this transfer application, and why:
PERMANENT TRANSFER FOR RECONFIGURATION OF IRRIGATED AREA

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

- ☐ Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

Check One Box

- ☒ By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- ☐ I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- ☐ I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

I understand that prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: _____.

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


Applicant signature

Zach Sword / Owner
Print Name (and Title if applicable)

4/23/16
Date

APR 28 2016

Applicant signature

Print Name (and Title if applicable)

Date

SALEM, OR

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? ☒ Yes ☐ No *If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.*

Check the following boxes that apply:

- ☐ The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- ☒ The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.
- ☐ Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

At this time, are the lands in this transfer application in the process of being sold? ☐ Yes ☒ No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see:

<http://www.oregon.gov/owrd/docs/transfer-propertytransactions.pdf>

RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	


Describe any special ownership circumstances here: _____

- ☐ Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (**Tip:** Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME N/A	ADDRESS	
CITY	STATE	ZIP

- ☐ Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME N/A	ADDRESS	
CITY	STATE	ZIP

 To meet State Land Use Consistency Requirements, you must list all county, city, municipal corporation, or tribal governments within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME HARNEY CO. PLANNING DEPT.	ADDRESS 450 N. BUENA VISTA #1	
CITY BURNS	STATE OR	ZIP 97720

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 35951**Description of Water Delivery System**

System capacity: 1.22 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines and sprinklers used to divert, convey and apply the water at the authorized place of use. Well pump drives pivot & wheel lines

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)
 (Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or Is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Beckley Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1431	26 S	34 E	29	NE NW	3300	380 FT SOUTH & 360 FT WEST FROM NW 1/4 COR OF SEC. 29
WELL 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L-84781 HARN 51378	26 S	34 E	29	NE SW	3300	2135 FT NORTH & 1433 FT EAST FROM SW COR OF SEC. 29
WELL 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		26 S	34 E	30	SW NE	3700	280 FT NORTH & 5 FT EAST FROM CTR ¼ COR OF SEC. 30
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- ☒ Place of Use (POU) ☐ Supplemental Use to Primary Use (S to P)
☐ Character of Use (USE) ☒ Point of Appropriation/Well (POA)
☐ Point of Diversion (POD) ☒ Additional Point of Appropriation (APOA)
☐ Additional Point of Diversion (APOD) ☐ Substitution (SUB)
☐ Surface Water POD to Ground Water POA (SW/GW) ☐ Government Action POD (GOV)

Will all of the proposed changes affect the entire water right?

- ☒ Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
☐ No Complete all of Table 2 to describe the portion of the water right to be changed.

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Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 35951

Description of Water Delivery System

System capacity: 1.22 cubic feet per second (cfs) **OR**

_____ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines and sprinklers used to divert, convey and apply the water at the authorized place of use. Well pump drives pivot & wheel lines

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Beckley Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	HARN 1431	26 S	34 E	29	NE NW	3300	380 FT SOUTH & 360 FT WEST FROM NW 1/4 COR OF SEC. 29
WELL 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L-84781 HARN 51378	26 S	34 E	29	NE SW	3300	2135 FT NORTH & 1433 FT EAST FROM SW COR OF SEC. 29
WELL 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		26 S	34 E	30	SW NE	3700	280 FT NORTH & 5 FT EAST FROM CTR ¼ COR OF SEC. 30
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- | | |
|--|---|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

Will all of the proposed changes affect the entire water right?

- ☒ Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- ☐ No Complete all of Table 2 to describe the portion of the water right to be changed.

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Amended 9/23/16

Please use and attach additional pages of Table 2 as needed.
See page 6 for instructions.

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer Staff.

Table 2. Description of Changes to Water Right Certificate # 35951

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands)										PROPOSED (the "to" or "on" lands)									
The listing that appears on the certificate BEFORE PROPOSED CHANGES										The listing as it would appear AFTER PROPOSED CHANGES									
List only that part or portion of the water right that will be changed.										are made.									
Twp	Rng	Sec	1/4	Tax Lot	Gvt Lot or DLC	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Proposed Changes (see "CODES" from previous page)	Twp	Rng	Sec	1/4	Tax Lot	Gvt Lot or DLC	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date	
TOTAL ACRES:										TOTAL ACRES:									

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer Staff.

List the change proposed for the acreage in each $\frac{1}{4}$. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

Additional remarks:

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Permanent Transfer Application Form -- Page 7 of 8

TACS

For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands? ☐ Yes ☒ No

If YES, list the certificate, water use permit, or ground water registration numbers: **35951.**

Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

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Ground water supplemental Permit or Certificate # N/A;

Surface water primary Certificate # N/A.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

SALEM, OR

Identify the primary certificate to be cancelled. Certificate # N/A

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

- ☒ Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department's web page at:

http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

- ☒ Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
WELL 2	NO		200 ft	24"	+1-19'		91	32	rock w/cracks	

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

5/18/2016

WELL ID, LABEL# 119892
 START CARD# 0030241
 ORIGINAL LOG #

Page 1 of 1

(1) LAND OWNER

Owner Well ID _____
 First Name ZACH Last Name SWORD
 Company _____
 Address 52595 HWY 78
 City PRINCETON State OR Zip 97131

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion
☐ Alteration (complete 2a & 3a) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Sil. Plst. Wid Thrd
 Material From To Amt sacks/lbs
 Seal: _____

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other _____

(4) PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 355.00 ft Special Standard ☐ (Attach copy)

BORE HOLE			SEAL			Amt	lbs
Dia	From	To	Material	From	To		
20	0	35	Cement	0	35	11	8
16	35	271				Calculated	
18	271	278	Cement	271	278	9	5
10	278	355				Calculated	

How was seal placed Method ☐ A ☒ B ☒ C ☐ D ☐ E

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	Sil	Plst	Wid	Thrd
<input checked="" type="checkbox"/>	16		2	278	278				
<input checked="" type="checkbox"/>		+	2	158	232				
<input checked="" type="checkbox"/>			158	278	375				

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 278

Temp casing ☐ Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Screens/Type		Material		Screens/Screen		Screens/Screen		Screens/Screen	
Port	Casing/Screen	Dia	From	To	width	length	# of slots	Tele	pipe size

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailor	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem Pump depth	Duration (hr)
1000		350	2

Temperature 59 °F Lab analysis ☐ Yes ☐ No

Water quality concerns? ☐ Yes (describe below) TDS amount _____

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 26.00 S N/S Range 34.00 E E/W WM
 Sec 30 SW 1/4 of the NE 1/4 Tax Lot 3700
 Tax Map Number _____ Lot _____
 Lat _____ or 41 284 34000 DMS or DD
 Long _____ or -118 57356000 DMS or DD
☐ Street address of well ☒ Nearest address

SAME AS ABOVE

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL (psf)	+ SWL (ft)
Completed Well	4/19/2016		16
Flowing Artesian?			
Dry Hole?			

WATER BEARING ZONES

Depth water was first found 25.00

SWL Date	From	To	Test Flow	SWL (psf)	+ SWL (ft)
4/12/2016	25	271	1500		16
4/19/2016	288	355	1500		16

(11) WELL LOG

Ground Elevation _____

Material	From	To
top soil brown	0	2
clay brown	2	6
sandy clay brown	6	15
sand brown	15	19
clay soft dark brown	19	25
clay soft dark grey with cracks	25	35
fine sand & clay strips grey	35	240
med. sand some gravel & clay strips	240	271
fractured rock black	271	273
rock black black	273	288
fractured rock black	288	344
broken rock black	344	355

Date Started 5/11/2016

Completed 4/19/2016

(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 JUN 16 2016

Signed _____

SALEM, OR

(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 1899 Date 5/18/2016

Signed SAMP KINGREY II (Dad)

Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK. Form Version _____

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

WELL I.D. # L 84781START CARD # 189047

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

(1) LAND OWNER Zach Sword Well Number _____
Name Zach Sword
Address 52695 Hwy 78
City Princeton State Or Zip 97720

(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 176 ft.
Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
30"	0	20	Portland C	0	20	40
24"	20	176				

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

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 0 ft. to 176 ft. Size of gravel 3/8 pea

(6) CASING/LINER

Casing:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	24"	0	19	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	14"	19	176	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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
41'	166	1/8	2400	14"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
1325	60'	140	6 min

Temperature of water 54° Depth Artesian Flow Found _____
Was a water analysis done? ☐ Yes ☒ No By whom _____
Did any strata contain water not suitable for intended use? ☒ No ☐ Too little
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____
Depth of strata: 30'

(9) LOCATION OF WELL (legal description)

County Clatsop
Tax Lot 3300 Lot _____
Township 26 N or S Range 34 E or W WM
Section 29 SW 1/4 SW 1/4
Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL

32 ft. below land surface. Date 6-27-07
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

From	To	Estimated Flow Rate	SWL
90	166	1325	32

(12) WELL LOG

Material	From	To	SWL
Top Soil	0	3	
Brown Clay	3	32	
Blue Clay	32	53	
Brown Clay	53	100	32
Rock with Cuckles	100	176	

RECEIVED

JUL 27 2007

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 5-2-07 Completed 6-27-07

(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 _____ 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.

WWC Number 1752 Date 7-26-07Signed Kenneth E. Smith

File Original and
First Copy with the
STATE ENGINEER,
SALEM, OREGON

STATE ENGINEER
SALEM, OREGON

WATER WELL REPORT
STATE OF OREGON

State Well No. 1431

State Permit No. 26134-29 C(1)

(1) OWNER:

Name Charles A. Beckley
Address Princeton Oregon

(2) LOCATION OF WELL:

County HARNEY Owner's number, if any—
1/4 1/4 Section T. R. W.M.

Bearing and distance from section or subdivision corner

Northwest quarter (NW 1/4)
of Section 129 Township
34 N. E. 1/4 M. Harney
County Oregon

(3) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐
If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

(5) TYPE OF WELL:

Rotary ☐ Driven ☐
Cable ☒ Jetted ☐
Dug ☐ Bored ☐

(6) CASING INSTALLED:

12" Diam. from 0 ft. to 65 1/2 ft. Gage 5'
" Diam. from 65 1/2 ft. to 70 ft. Gage 4'
" Diam. from 70 ft. to 113 ft. Gage 4'

(7) PERFORATIONS:

Type of perforator used Torch Perforated? ☒ Yes ☐ No
SIZE of perforations 4 in. by 4 in.
perforations from 5-3 ft. to 65 ft.
perforations from 65 ft. to 70 ft.
perforations from 70 ft. to 113 ft.
perforations from 113 ft. to 160 ft.

(8) SCREENS:

Well screen installed ☐ Yes ☒ No
Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:

Was well gravel packed? ☒ Yes ☐ No Size of gravel: 3"
Gravel placed from 0 ft. to 64 ft.
Was a surface seal provided? ☒ Yes ☐ No To what depth? 5' ft.
Material used in seal— Cement
Did any strata contain unusable water? ☐ Yes ☒ No
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(10) WATER LEVELS:

Static level 32 ft. below land surface Date 3/25/60
Artesian pressure _____ lbs. per square inch Date _____

Accepted by:

Signed Charles A. Beckley Date Apr. 4, 1960
(Owner)

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☒ Yes ☐ No If yes, by whom? Driller

Yield: 1000 gal./min. with 8" drawdown after 12 hrs.

" " " "

" " " "

Bailer test gal./min. with ft. drawdown after hrs.

Artesian flow g.p.m. Date

Temperature of water Was a chemical analysis made? ☐ Yes ☒ No

(12) WELL LOG:

Diameter of well 12 inches.

Depth drilled 165 ft. Depth of completed well 165 ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Top soil & hard pan	0	15
Grey clay	15	45
Sand stone	45	60
Gravel	60	64
Hard Black lava rock	64	70
Sand stone & clay mixed	70	115
Decomposed rock	115	135
Basaltic rock	135	165
First water at 40 ft. big flow comes in at 113 ft thru clay.		

Work started 3/14/ 1960 Completed 3/25 1960

(13) PUMP:

Manufacturer's Name _____
Type: _____ H.P. _____

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME John W. Rossberg
(Person, firm, or corporation) (Type or print)

Address Box 1443 Burns, Oregon

Driller's well number _____

[Signed] John W. Rossberg
(Well Driller)

License No. 272 Date 4/4, 1960

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date of well completion.

RECEIVED
 WATER WELL REPORT
 SEP 26 1968
 STATE OF OREGON
 (Please write or print)
 (Do not write above this line)
 STATE ENGINEER
 SALEM OREGON

State Well No. 26/34-29
State Permit No. _____

Name Charles A Beckley
Address Princeton, Oregon

If abandonment, describe material and procedure in Item 12.

Rotary	<input type="checkbox"/>	Driven	<input type="checkbox"/>
Cable	<input checked="" type="checkbox"/>	Jetted	<input type="checkbox"/>
Dug	<input type="checkbox"/>	Bored	<input type="checkbox"/>

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☐ Test Well ☐ Other ☒

(5) CASING INSTALLED: Threaded ☐ Welded ☒ *2 1/2*

6 " Diam. from *0* ft. to *140* ft. Gage *250*

" Diam. from _____ ft. to _____ ft. Gage _____

" Diam. from _____ ft. to _____ ft. Gage _____

Perforated? ☐ Yes ☒ No.

Type of perforator used

Size of perforations	in. by	in.
perforations from	ft. to	ft.
perforations from	ft. to	ft.
perforations from	ft. to	ft.
perforations from	ft. to	ft.
perforations from	ft. to	ft.

Well screen installed? ☐ Yes ☒ No

Manufacturer's Name

Type Model No.

Diam. Slot size Set from ft. to ft.

Diam. Slot size Set from ft. to ft.

Static level ~~770~~ 60 ft. below land surface Date 8/24
Artesian pressure 20 lbs. per square inch Date

Drawdown is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☒ No If yes, by whom?

gal./min. with ft. drawdown after hrs.

Bailer test 7/11/30 gal./min. with 30 ft. drawdown after 3 hrs.
Artesian flow _____ g.p.m. Date _____

Temperature of water 24.5 Was a chemical analysis made? ☐ Yes ☒ No

Well seal—Material used Bentonite
Depth of seal 20 ft.
Diameter of well bore to bottom of seal 8 in.
Were any loose strata cemented off? ☐ Yes ☒ No Depth
Was a drive shoe used? ☒ Yes ☐ No
Did any strata contain unusable water? ☐ Yes ☒ No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? ☐ Yes ☒ No Size of gravel:
Gravel placed from ft. to ft.

County Harnett Driller's well number _____
 1/4 SW 1/4 Section 29 T. 26S R. 34E W.M.

Bearing and distance from section or subdivision corner
1000' South of main ranch house

Diameter of well below casing 6"

Depth drilled 170 ft. Depth of completed well 170 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level as drilling proceeds. Note drilling rates.

[illegible]

Work started 8-21 1968 Completed 8-24- 1968
Date well drilling machine moved off of well 8-25- 1968

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] E. J. Kelly Date 9/23, 1968
(Drilling Machine Operator)

Drilling Machine Operator's License No. 259

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME John W. Leshock
(Person, firm or corporation) (Type or print)

Address 10, Bay 638 Kane, Reg.

[Signed] John W. Rosenberg
(Water Well Contractor)

Contractor's License No. 272 Date 9-23, 1968