

State of Oregon
Department of Forestry / Department of Revenue
Notification number: 2007-771-55445 [77123049] Ground Spray

Attached is the processed information from the Notification of Operation and/or Application for Permits.
Please review this information and retain for future reference.

☒ Notice is given to the State Forester that an operation will be conducted on the lands described herein (ORS 527.670).

☒ - A permit to operate power driven machinery is issued for the lands described herein (ORS 477.625).

I. WHERE TIMBER HARVESTING IS PART OF THE PROPOSED OPERATION:

District: South Cascade
Office: Eastern Lane

County: Lane
WOSTOT:

Received by ODF on April 23, 2007 by mail

A. NOTICE TO TIMBER OWNER: Party owning the harvested timber at the point it is first measured is shown in the section marked TIMBER OWNER and is responsible for payment of Oregon timber taxes.

15 DAY WAITING PERIOD WAIVED

Waived by Marvin Vetter on 4/23/2007

B. NOTICE TO LAND OWNER: Party shown in the section marked LAND OWNER is responsible for reforestation of the site if so required.

II. WRITTEN PLANS:

☐ - A WRITTEN PLAN may be required before certain activities can commence on the Operation.

A WRITTEN PLAN may be required for the situations indicated by an ☒ below. A WRITTEN PLAN must be submitted or a WRITTEN WAIVER must be obtained from the State Forester before any portion of the operation may commence.

☐ - Within 100 feet of a large lake or Type F or Type D stream.
[OAR 629-605-170(1)(a)]

☐ - Within 300 feet of a wildlife resource site listed in the 1984 ODF/ODFW Cooperative Agreement. [OAR 629-605-170(1)(b)]

☐ - Within 300 feet of any resource identified in the Divisions 645 or 665 of the administrative rules. [OAR 629-605-170(1)(c)]

☐ - Within 300 feet of a state or federally listed threatened or endangered wildlife resource site. [OAR 629-605-170(1)(d)]

Please contact the Oregon Department of Forestry forester named on the Unit Information sheet for further information on requirements that may be necessary to meet before any activity/operation begins.

Signed by Debbi Dalrymple - representing the Land owner.

******* NOTICE *******

The State Forester has determined that the following items requiring your attention are located within or adjacent to your operation area:

☐ - Concerns ☐ - Resources ☐ - Water

See Unit Information on subsequent pages for details.

Operator:

Oregon Forest Management Services
41580 Deerhorn Rd
Springfield, OR 97478
Phone: (541) 896-3757

Land owner:

Weyerhaeuser Company
PO Box 275
Springfield, OR 97477
Phone: (541) 741-5211

Timber owner:

Phone:

Marvin D. Brown
State Forester

Lena Tucker
District Forester

(Subscriber)

Unit: 1

Status: Active

Stewardship Forester: Marvin Vetter

Phone number: (541) 726-3588

Start date: 4/23/2007

End date: 5/20/2007

Site conditions: No Protected Waters within 100 ft

FP = L

Slope of 0% to 35%

No mass soil movement

FPA = L

Acres: 4

Feet:

Estimated harvest: MBF

Activity: Herbicide Application

Methods: Ground

Brand name: Attrex 4L, Atrazine WSP, Transline

Carrier: Water

Additives: None

App rate: 20 Gal/Acre

Other information: 2,4-D Amine 4/LV6 Ester, Oust XP

Sc	Twp	Rge	Government lot	N E				N W				S W				S E				Harv tax	Reg use
				n	n	s	s	n	n	s	s	n	n	s	s	n	n	s	s		
18	18S	01E		e	w	w	e	e	w	w	e	e	w	w	e	e	w	w	e		
18	18S	01E																	X		EL1
																		X			EL1



Herbicide Application Report Springfield Operations

785 N 42nd St. Springfield, OR

UNIT 2403Year 2007

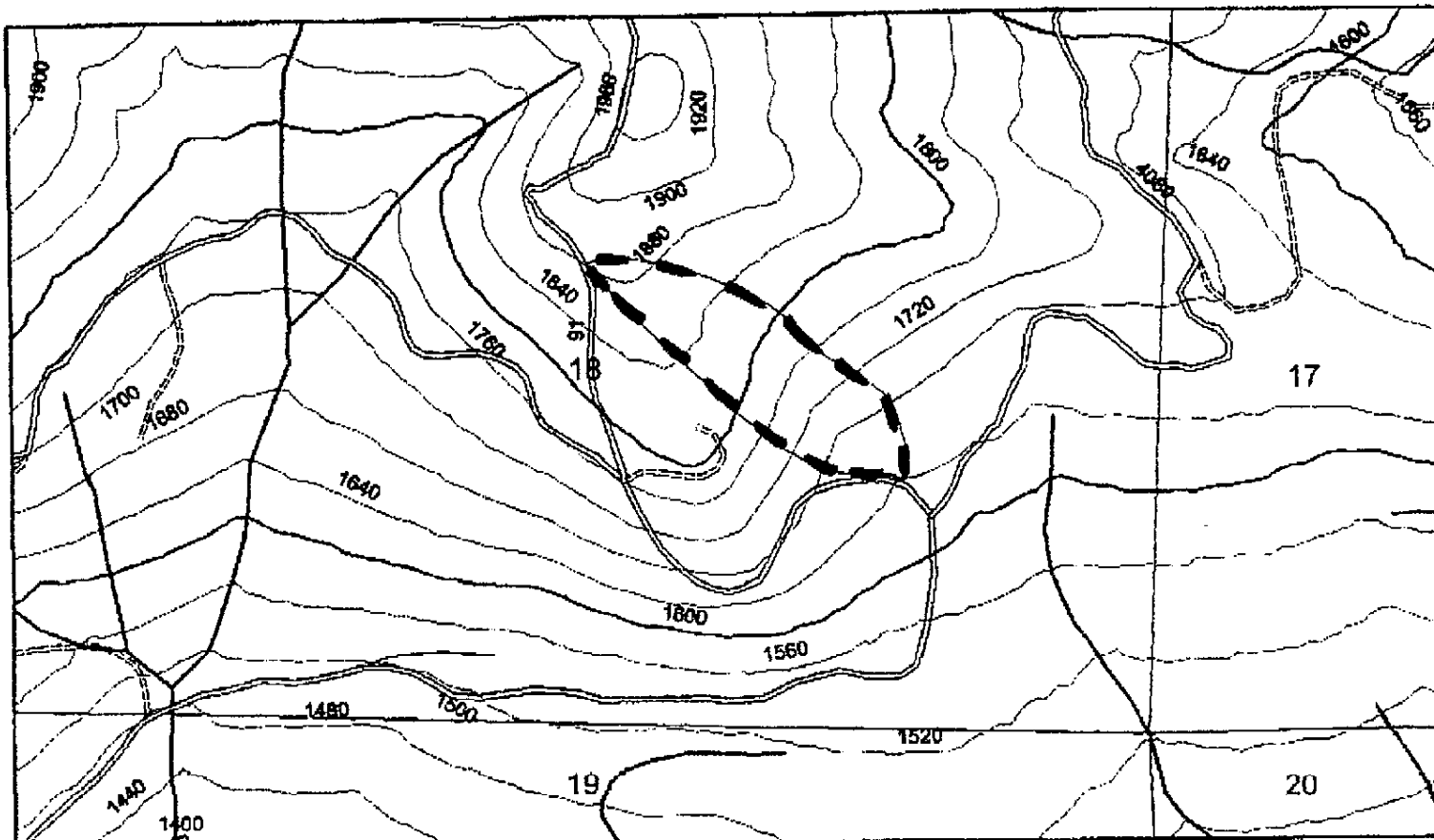
N



1 inch equals 500 feet

Area S McKenzieRoad LEC 91Elevation 1700EST Tree/Acre 435SEC 18 TWP 18 S RNG 1 E

Lat/Long _____

Forester D Dalrymple

Chemical Chemical Chemical Chemical Chemical Total

Unit	Acres	% or /AC	% or /AC	% or AC	% or /AC	% or /AC	% or /AC	Total	Target SP
<u>2403</u>	<u>4</u>								

Total _____

EPA#s Velpar L#352-392 Velpar DF#352-581 AccordC#524-343 Garlon 4#62719-40 Atrazine 4L#5905-581 OustXP #352-601 Other _____

Written plan Y ☒ N Resource protected _____ Notification Date _____ Review Date _____

Unit specific Safety concerns _____

Additional Requirements _____ Neighbor Notification NA T/E Protection NA Other _____

Application Method _____ Back pack type: _____ Flat Fan _____ Meter Jet/ _____ 1 squirt/tree _____ 2 squirts/tree

Weather: Date _____ Time _____ Temp _____ RH% _____ Wind DIR/SP _____

Completed Date/Time _____ Contractor Signature _____ Applicator #/Name _____

Man /HR _____

7/23/2007 07:21 1041741000

**Chemical Formulations
2006 Spring Aerial Spray**

**Weyerhaeuser Company
South McKenzie Area
Ground Spray
Date: 4/20/2007 13:34**

***Combinations of the following chemical formulations may be
applied at labeled rates on any given unit in this notification:***

Attrex 4L
Atrazine WSP
Transline
2,4-D Amine 4
2,4-D LV6 Ester
Oust XP
Velpar DF
Accord Concentrate
Westar

Total mix with water will be applied at 20 Gal per Acre