

Oregon Department of Environmental Quality  
COMMENT REGISTRATION FORM



NAME: Chris M. Gannon

REPRESENTING: Cooked River Watershed Council

ADDRESS: 498 SE Lynn Blvd.

CITY: Prineville STATE: OR ZIP CODE: 97754

I request approximately 5 minutes to address the subject of Fish Consumption Rate -  
WQ Stds.

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.

Oregon Department of Environmental Quality  
COMMENT REGISTRATION FORM



NAME: Jenny Brummer

REPRESENTING: CITY OF PRINEVILLE

ADDRESS: 387 NE 3RD ST.

CITY: PRINEVILLE STATE: ORE ZIP CODE: 97754

I request approximately 10 minutes to address the subject of new rule  
changes

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.

Oregon Department of Environmental Quality  
COMMENT REGISTRATION FORM



NAME: Bruce Jim

REPRESENTING: Warm Springs Tribe / Columbia River Intertribal

ADDRESS: P.O. Box 571

CITY: Warm Spring STATE: Ore ZIP CODE: 97761

I request approximately 5 minutes to address the subject of Reading  
Statement

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.

Oregon Department of Environmental Quality  
COMMENT REGISTRATION FORM



NAME:

Chuck Lang

REPRESENTING:

ADDRESS:

15263 SE WAUSAU RD

CITY:

Prineville

STATE:

OR

ZIP CODE:

97254

I request approximately \_\_\_ minutes to address the subject of \_\_\_\_\_

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.

\* DID NOT TESTIFY \*

Oregon Department of Environmental Quality  
COMMENT REGISTRATION FORM



NAME: Wake Flegel

REPRESENTING: Land owner  
*wjflegel@webformixart.com*

ADDRESS: 9271 NW McCabe Rd

CITY: Prineville STATE: OR ZIP CODE: 97754

I request approximately \_\_\_ minutes to address the subject of \_\_\_\_\_

*Please provide copy of Hearing Report*

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.

\* DID NOT TESTIFY \*

Oregon Department of Environmental Quality  
COMMENT REGISTRATION FORM



NAME: MIKE KASBORN

REPRESENTING: OCHOCO IRRIGATION DIST

ADDRESS: 1001 NW 4TH ST

CITY: PRINCETON STATE: OR ZIP CODE: 97751

I request approximately      minutes to address the subject of     

PLEASE SEND A COPY OF WRITTEN HEARING REPORT

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.