

Application for Water Right Transfer

Part 1 of 4 – Minimum Requirements Checklist



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

This transfer application will be returned if Parts 1 through 4 and all required attachments are not completed and included.
 For questions, please call (503) 986-0900, and ask for Transfer Section.

FOR ALL TRANSFER APPLICATIONS

RECEIVED

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

AUG 27 2010

WATER RESOURCES DEPT
 SALEM, OREGON

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Completed Transfer Application – Applicant Information and Signature.
- Part 4 – Completed Transfer Application – Water Right Information. Please include a separate Part 4 for each water right. List all water right certificates to be transferred here: **24625**.

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- Fees – Amount enclosed: \$ **900.00**.
 See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0883.
- N/A Affidavit(s) of Consent.
- 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 For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, Water Well Report/Well Log.
- N/A For Temporary Transfer (one to five years) Begin Year _____ End Year _____.
- N/A For Temporary Transfer only – Current recorded deed for the land **from** which the authorized place of use is being moved.
- N/A Temporary Drought Transfer (For use in counties where the Governor has declared drought)

(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	___ Part _____ is incomplete
___ Additional signature(s) required	

Other/Explanation _____

Staff: _____ 503-986-0 _____ Date: ____/____/____

AUG 27 2010

Part 2 of 4 – Transfer Application Map Checklist

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

WATER RESOURCES DEPT
SALEM, OREGON

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 list of CWREs see http://www1.wrd.state.or.us/pdfs/cwre_listing.pdf. CWRE stamp and signature are not required for temporary changes, historic point of diversion changes, and 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 white or clear paper or film.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, three (3) paper copies and an electronic copy in a .pdf, .tiff or .jpg format are 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°).

Part 3 of 4 – Applicant Information and Signature

RECEIVED

AUG 27 2010

Applicant Information

WATER RESOURCES DEPT
SALEM, OREGON

APPLICANT/BUSINESS NAME Oregon Department of Fish and Wildlife		PHONE NO. 503.947.6217	ADDITIONAL CONTACT NO.
ADDRESS 3406 Cherry Avenue, NE		FAX NO. 503.947.6202	
CITY Salem	STATE OR	ZIP 97303	E-MAIL

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

AGENT/BUSINESS NAME William K. Otto, Oregon Department of Fish and Wildlife		PHONE NO. 971.673.6006	ADDITIONAL CONTACT NO.
ADDRESS 17330 SE Evelyn Street		FAX NO.	
CITY Clackamas	STATE OR	ZIP 97015	E-MAIL bill.k.otto@state.or.us

If an agent is listed above, please check **one** of the following:

- Please send all correspondence to Agent. Send copies of correspondence to Applicant; **OR**
- Please send all correspondence to Applicant. Send copies of correspondence to Agent.

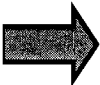
Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

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 landowners (and mailing address if different than the applicant's) or attach affidavits of consent (and mailing addresses) from all landowners or individuals/entities to which the water right(s) has been conveyed.

Permanent Transfers Only (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 that 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 (we) affirm that the information contained in this application is true and accurate.

William K. Otto
Applicant signature

William K. Otto, Hatchery Coordinator
Name (and title if applicable) (print)

8/26/10
Date

Applicant signature

Name (and title if applicable) (print)

Date

In your own words tell us what change(s) you want made and the reason for the change(s): **In addition to the authorized Point of Diversion (POD), Oregon Department of Fish and Wildlife (ODFW) has also consistently used the middle and east springs as the POD for Certificate #24625. Such POD has been used for more than ten (10) years, and only recently was it discovered that the**

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.
- 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. (To learn about sale agreements please visit our web site at: <http://www1.wrd.state.or.us/pdfs/Transfer-PropertyTransactions.pdf>)

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

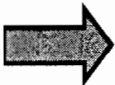
Describe any special ownership circumstances here: _____

- 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 local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME City of Cascade Locks	ADDRESS P.O. Box 574	
CITY Cascade Locks	STATE OR	ZIP 97014

ENTITY NAME Hood River County	ADDRESS 601 State Street	
CITY Hood River	STATE OR	ZIP 97031

RECEIVED

AUG 27 2010

T 11108

Part 4 of 4 – Water Right Information

Please use a separate Part 4 for each water right being changed. See instructions at <http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml>.

CERTIFICATE # 24625

RECEIVED

Description of Water Delivery System

AUG 27 2010

System capacity: **10.0** cubic feet per second (cfs) **OR**
 _____ gallons per minute (gpm)

WATER RESOURCES DEPT
 SALEM, OREGON

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. **Water capture and piping structures are located at the middle and east springs. The west spring is undeveloped and its water flows to the reservoir in the old Little Herman Creek channel. The piping from the two developed springs flows to the hatchery building for egg incubation and early rearing water. When there is not enough water demand in the hatchery building, those pipes are valved closed and the spring water overflows the collection basins and flows to the reservoir. Water from the reservoir is piped to the outside rearing ponds.**

The piping from the springs is 6-inch diameter from the middle to the east spring. The pipes combine, then it is 8-inch piping to the hatchery building. The piping from the reservoir to the outside rearing ponds is 24-inch diameter.

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)
POD: Little Herman Creek	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	N/A	2 N	8 E	7	NE NE	500	Not listed on certificate, however located at 450 ft. S and 5 ft. W of the NE corner of Section 7
POA: Middle Spring	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	2 N	8 E	7	NE NE	500	740 ft. S and 125 ft. W of the NW corner of Section 8
POA: East Spring	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	2 N	8 E	8	NW NW	500	590 ft. S and 50 ft. E of the NW corner of Section 8

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

- | | |
|--|---|
| <input 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 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 checked="" type="checkbox"/> Historic POD (HPOD) ** | <input type="checkbox"/> Government Action POD (GOV) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | |

****Want to maintain original authorized POD and add the two springs that have been historically used.**

T 11108

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

- Yes Complete only the Proposed (“to” 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.

RECEIVED

AUG 27 2010

WATER RESOURCES DEPT
SALEM, OREGON

T 11108

Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Right Certificate # 24625

List only the part of the right that will be changed. For the acreage in each 1/4 1/4, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, specify the acreage associated with each POD/POA.

Authorized ("from" lands) as they appear BEFORE THE CHANGES						Proposed ("to" lands) AFTER THE CHANGES												
Twp	Rng	Sec	1/4	1/4	Acres (if applicable)	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Proposed Changes (see "CODES" from previous page)	Twp	Rng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)
2 S 9 E 15	NE	NW	100	15.0	Irrigation	POD #1 POD #2	POU/POD	2 S 9 E 1 NW NW 500	1	10.0	POD #5							
				EXAMPLE				2 S 9 E 2 SW NW 500		5.0	POD #6							
Entire right involved; see Table 1																		
HPOD																		
(Adding 2 springs)																		
TOTAL ACRES															TOTAL ACRES			

Additional remarks: **ODFW wishes to conform its permit and actual historic use by adding the two listed spring PODs in addition to the authorized POD.**

RECEIVED

AUG 27 2010

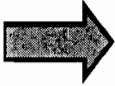
WATER RESOURCES DEPT
SALEM, OREGON

(PO-332596v1) FS

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: _____.



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)

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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://apps2.wrd.state.or.us/apps/gw/well_log/Default.aspx)

OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log.

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 adequate information is likely to delay the processing of your transfer application. For proposed wells, we recommend that you consult a licensed well driller, geologist, or certified water right examiner for the proper information needed to complete the table.

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

RECEIVED

AUG 27 2010

WATER RESOURCES DEPT
SALEM, OREGON

T 11108

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the

RECEIVED
MAR 13 1969

WATER WELL REPORT

MULT 002057

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

STATE OF OREGON
(Please type or print)
(Do not write above this line)

State Well No. 2N/8-6 da
State Permit No. _____

(1) OWNER:
Name CITY OF CASCADE LOCKS
Address CASCADE LOCKS, ORE.

(2) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):
Rotary Driven Domestic Industrial Municipal
Cable Jetted Irrigation Test Well Other
Dug Bored

CASING INSTALLED: Threaded Welded
1 1/4" Diam. from 7 1/2 ft. to 110 ft. Gage 375
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS: Perforated? Yes No.
Type of perforator used STAR
Size of perforations 3/8 in. by 1 1/4 in.
1200 perforations from 80 ft. to 103 ft.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.

(7) SCREENS: 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.

(8) WATER LEVEL: Completed well.
Static level 61 ft. below land surface Date 2/27/69
Man pressure _____ lbs. per square inch Date _____

(9) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? STRASSER
Yield: 1000 gal./min. with 2 ft. drawdown after 24 hrs.
" " " " " "

Bailer test gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water 43 Was a chemical analysis made? Yes No

(10) CONSTRUCTION: SAND AND CEMENT GROUT
Well seal—Material used _____
Depth of seal 20 ft.
Diameter of well bore to bottom of seal 20 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.

(11) LOCATION OF WELL:
County MULT. Driller's well number 4300
NE 1/4 SE 1/4 Section 6 T. 2N R. 8E W.M.
Bearing and distance from section or subdivision corner _____

(12) WELL LOG: Diameter of well below casing _____
Depth drilled 110 ft. Depth of completed well 110 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.

MATERIAL	From	To	SWL
TAP SOIL	0	2	
SAND, GRAVEL Boulders AND SOME CLAY	2	28	
SAND AND GRAVEL	28	61	
WATER BEARING GRAVEL	61	106	
CEMENTED GRAVEL	106	110	

RECEIVED

AUG 27 2010

WATER RESOURCES DEPT
SALEM, OREGON

Work started FEB 8 1969 Completed MAR 4 1969
Date well drilling machines moved off of well MAR 4 1969

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Don J. Johnson Date MAR 12 1969
(Drilling Machine Operator)

Drilling Machine Operator's License No. 57

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
NAME R. J. STRASSER DRILLING Co
(Person, firm or corporation) (Type or print)
Address 8110 SE SUNSET LANE PORTLAND OR
[Signed] Robert J. Strasser
(Water Well Contractor)
Contractor's License No. 70 Date MAR 12, 1969

T 11108

Oxbow Yearly Spring Water Requirements

Species	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Sockeye Eggs	20 gpm (5 stacks)	20 gpm (5 stacks)									20 gpm (5 stacks)	20 gpm (5 stacks)
Sockeye Fingerlings		80gpm (8 tanks)	160 gpm (8 tanks)	240 gpm (12 tanks)	480 gpm (16 tanks)	480 gpm (16 tanks)	480 gpm (16 tanks)					
Sockeye Yearlings	1050gpm (3ponds)	1140gpm (3ponds)	1275gpm (3ponds)	1440gpm (3ponds)	1575gpm (3ponds)		600gpm (3ponds)	675gpm (3ponds)	750gpm (3ponds)	825gpm (3ponds)	900gpm (3ponds)	975gpm (3ponds)
Co 14 Eggs	36 gpm (9 stacks)	36 gpm (9 stacks)									36 gpm (9 stacks)	36 gpm (9 stacks)
Co 14 Fingerlings		525gpm (3ponds)	750gpm (3ponds)	1050gpm (3ponds)	1110gpm (3ponds)	1350gpm (3ponds)	1500gpm (3ponds)					
Captive Brood Eggs									40 gpm (4troughs)	80 gpm (4troughs)	80 gpm (4troughs)	40 gpm (4troughs)

Hatchery Building	56	136	160	240	480	480	480	0	40	80	136	96
Outside ponds	1050	1665	2025	2490	2685	1350	2100	675	750	825	900	975
Total Water Useage	1106	1801	2185	2730	3165	1830	2580	675	790	905	1036	1071
Ave. Monthly Flows	2308	2642	2765	2494	2196	1904	1537	1128	798	589	621	1401
Difference	1202	841	580	-236	-969	74	-1043	453	8	-316	-415	330

Version A

Notes:

Optimal water useage no restrictions

150K sockeye smolts to 8 f/lb

Sockeye pond loadings: 3 upper ponds 30K/pond 3750 lbs @ 8f/lb .74 lbs/ cuft - 3 lower ponds 20K/pond 2500 lbs @ 8f/lb .49 lbs/cuft 450K coho fingerlings 45 f/lb

Coho pond loadings: 3 upper ponds 100K/pond 2222 lbs @ 45f/lb .44 lbs/cuft - 3 lower ponds 50K/pond 1111 lbs @ 45f/lb .22 lbs/cuft

Monthly averages flows do not account for El Nino low water years.

Water amounts for ponds were calculated using flow index (Piper, 1982) and adding 100 gpm/pond to this calculation.

T 11108

RECEIVED

AUG 27 2010

WATER RESOURCES DEPT
SALEM, OREGON