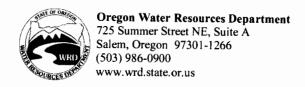
Application for

Permit Amendment

Part 1 of 4 – Minimum Requirements Checklist



This permit amendment 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.

Che	k all items included with this application. (N/A = Not Applicable) Part 1 – Completed Minimum Requirements Checklist.	
\boxtimes	Part 2 - Completed Permit Amendment Application Map Checklist.	
\boxtimes	Part 3 – Completed Permit Amendment Application – Applicant Information and Signature.	
\boxtimes	Part 4 – Completed Permit Amendment Application – Water Use Permit Information. Please include a separate Part 4 for each permit. List all permit(s) to be amended here: G-1665	<u>7</u> .
\boxtimes	Attachments: Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).	
\boxtimes	Permit amendment fees – Amount enclosed: \$ 1200.00. See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0883.	
	N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is not the permit holder of record and needs to be assigned to the permit; or the landowner of the proposed place of use is not the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml). Assignment is not needed if applicant is the permit holder of record.	
	N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant, or other permit holders of record that are not listed as applicants.	
	N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form is not required if any of the following apply:	
	☐ Water is to be diverted, conveyed, and/or used only on federal lands.	
	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.	
	The proposed changes are all located on the property reviewed in Land Use form enclosed in Water Right Application Folder # <u>G-17027</u> .	
\boxtimes	N/A For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, Water Well Report(s)/Well Log(s)	
	(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 Assignment Form and fee not enclosed/insufficient Additional signature(s) required	
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Your permit amendment application <u>will be returned</u> if any of the map requirements listed below are not met.

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

	⊠ N/A	If more than three permits are involved, separate maps for each permit.
\boxtimes		Permanent quality printed with dark ink on white or clear paper or film.
\boxtimes		The size of the map can be 8½ x 11 inches, 8½ x 14 inches, or up to 30 x 30 inch maps, three (3) paper copies and an electronic copy in a .pdf, tiff or .ipg format are required.
\boxtimes		A north arrow, a legend, and scale. WATER RESOURCES DEPT SALEM, OREGON
\boxtimes		The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$, $1 \text{ inch} = 1,320 \text{ feet}$, the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$, or a scale that has been preapproved by the Department.
\boxtimes		Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
\boxtimes		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
\boxtimes		Existing place of use that includes separate hachuring for each water use permit, 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 permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
	N/A N/A	If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, 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.
\boxtimes		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 use permit.
\boxtimes	□ 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 $-42^{\circ}32^{\circ}15.5^{\circ}$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

Part 3 of 4 - Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Kevin and Carrie Duyck			503-324-0538	503-320-0779
ADDRESS				FAX NO.
37995 NW Harrington Road				503-324-6619
CITY	STATE	ZIP	E-MAIL	
Cornelius	OR	97113		

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

AGENT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.	
Kaid E. McKay / Stuntzner I	ingineering a	503-357-5717	503-828-8831	
ADDRESS			FAX NO.	
2137 19 th Avenue				503-357-5698
CITY	STATE	ZIP	E-MAIL	
Forest Grove	OR	kaidmckay@stuntz	ner.com	

If an agent is listed above, please check <u>one</u> of the following:

	_	ease send all correspondence to Agent. Send copies of correspondence to Applicant; OR ease send all correspondence to Applicant. Send copies of correspondence to Agent.
		ek this box if this project is fully or partially funded by the American Recovery and vestment Act. (Federal stimulus dollars)
Is t	he app	licant the permit holder of record? 🛛 Yes 🗌 No
	If NO,	include either:
		A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), OR
		An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.



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

Kevry M. Buylk
Applicant signature

Applicant signature

Applicant signature

Kevin Duyck
Name (and title if applicable) (print)

8-29-10 Date

Applicant signature

Carrie Duyck
Name (and title if applicable) (print)

Date

In your own words tell us what change(s) you want made and the reason for the amendment(s): We would like to add the additional Point of Appropriation to help ensure viable was source can be developed.

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Check one of the following:							
☐ The applicant is responsible for completion of change(s). Notices and correspondence sh continue to be sent to the applicant.							
∑ The permit holder(s) of record will be the final order is issued. Copies of not holder(s) of record.							
Check the appropriate box, if applicable:							
Check here if any of the permits propose by an irrigation or other water district.	ed for amendment are or	will be located within or served					
IRRIGATION DISTRICT NAME	ADDRESS						
Tualatin Valley Irrigation District	2330 Elm Street						
CITY	STATE	ZIP					
Forest Grove	Oregon	97116					
Check here if water for any of the permits contract for stored water with a federal ag	supplied under a water s	service agreement or other					



ENTITY NAME

CITY

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.

ADDRESS

STATE

ENTITY NAME	ADDRESS				
Washington County Oregon	155 North First Avenue, Suite 350				
CITY	STATE	ZIP			
Hillsboro	Oregon	97124-3072			

ENTITY NAME	ADDRESS				
СІТҮ	STATE	ZIP			

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WATER RESOURCES DEPT SALEM. OREGON Please use a separate Part 4 for each permit being amended.

PERMIT # G-16657

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

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

POD/POA Name of Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	TV	V p	R	ng	Sec	14 14		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	✓ Authorized✓ Proposed	N/A	1	N	3	w	4	NW :	NW	n/a	660' East, 920' South of NW Corner Sec. 4
Well 2	☐ Authorized ☐ Proposed	N/A	1	N	3	w	5	NE	NE	n/a	710' West, 850' South of NE Corner Sec. 5
Well 3	☐ Authorized ☐ Proposed	N/A	1	N	3	w	5	NE :	NE	n/a	910' West, 1250' South of NE Corner Sec. 5
	☐ Authorized ☐ Proposed										
Check	all type(s) of c	change(s) pr	opos	ed b	elov	v (ch	ange	"CODE	ES" a	re pro	vided in parentheses):
	Place of Use	(POU)						Point of	App	ropriati	on/Well (POA)
	Point of Div	ersion (POD))				\boxtimes	Addition	nal Po	oint of	Appropriation (APOA)
	sion		_	Surface (SW/GV		r POD	to Ground Water POA				

Will all of the proposed changes affect the entire water use permit?

⊠ 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.	

□ N.	O 1 4 11 . CT-1.1 . O 4		mammit to be abouted
	Complete all of Table 2 to describe the	portion of the	permit to be changed.

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Table 2. Description of Changes to Water Use Permit # G-16657

List only the part of the permit that will be changed. For the acreage in each ½ ½, list the change proposed. If more than one change, specify the acreage associated with each POD/POA.

		POD(s)/POA(s) to be used (from Table 1)	A de la companya de l	97 (1)	WELL 1, 2, 3		Ī								
-	changes	Gvt Acres PC Lot or (if to 1 DLC applicable)	10000° 10000° 10000° 10000° 10000° 10000°		W W	10.6 W	2.6 W	35.3 W	9.7 W	7.8 W	0.4 W	12.2 W	24.2 W		118.6
	ifter the	Gvt Lot or DLC	2000	;											<u>ن</u>
	ands)	Tax Lot	seeding record positive record repositive	280	100	100 & 390	390	100	NW 100 & 390	390	100	100	100		474
	Proposed ("to" lands) after the changes	, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,		811 111	ww ww	NE NW	NW NE	SW NW	SE NW	SW NE	NW SW	NE NE	SE NE		TOTAL ACDES
N N	Propor	Sec	H.	W.	4	4	4	4	4	4	4	5	8		1
SOCIAL		Rng	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	(C)	3 W	3 W	3 W	3 W	3 W	3 W	3 W	3 W	3 W		
cage as		Twp	30 64	:/h	1 N	1 N	1 N	1 N	1 N	1 N	1 N	1 · N	1 N		
cond me aci	Proposed	Changes (see "CODES" from previous page)		. %	APOA										
OD/FOA, sp	before the changes	Gvt Acres POA(s) or Lot or (if or number from DLC applicable) Table 1)	price for \$ 12 to		WELL 1		-								
T C. A.		Acres (if applicable)	1/1		15.8	10.6	2.6	35.3	9.7	7.8	0.4	12.2	24.2		118.6
3	შ [belle										1	
	арр	Gvt Lot or DLC		3											S.
TI IIIOIC	as they app	Tax Lot or Lot DLC	Andron Special		100	100 & 390	390	100	100 & 390	390	100	100	100		ACRES
1-45 4	lands) as they app	'4 Tax Lot	die der	;	/ NW 100	WN	NE	001 WW /	WN	NE	SW	NE	NE		TOTAL ACRES
CII Cildinge. 11 IIIOI	from" lands) as they app	1/4 1/4 Tax	Salar V.	- 5	N N	NE	NW NE	SW NW 100	SE	SW NE	NW SW	NE NE	SE NE		TOTAL ACRES
1 cacil citalige. Il lilore	ed ("from" lands) as they app	Sec 1/4 1/4 Tax	Sainte St.	4	4 NW	4 NE	4 NW NE	4 SW	4 SE	4 SW NE	4 NW SW	S NE NE	S SE NE		TOTAL ACRES
i a «e " i ao	horized ("from" lands) as they app	1/4 1/4 Tax	Solice Solice Management		W 4 NW	W 4 NE	W 4 NW NE	W 4 SW	W 4 SE	W 4 SW NE	NW SW	W S NE NE	W 5 SE NE		TOTAL ACRES
se associated with each change. It inote that one for the specify the acteage associated with each follow.	Authorized ("from" lands) as they appear	Sec 1/4 1/4 Tax	Sainte St.	4	4 NW	4 NE	4 NW NE	4 SW	4 SE	4 SW NE	W 4 NW SW	S NE NE	S SE NE		TOTALACRES

Additional remarks:

Permit Amendment Application - Page 6 of 8

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and shown on the e processing of all driller, geologist

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 1	No	N/A	850	10" steel	N/A	450'	N/A	40'	Basalt	full rate
WELL 2	No	N/A	850	10" steel	N/A	450'	N/A	40'	Basalt	full rate
WELL 3	No	N/A	850	10" steel	N/A	450'	N/A	40'	Basalt	full rate