

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

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

- 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: **68504 & 76062.**

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- Fees – Amount enclosed: \$ **1300.**
See the Department’s Fee Schedule at www.wrd.state.or.us or call (503) 986-0883.
- N/A Affidavit(s) of Consent. (two)
- 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)

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(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: ____/____/____ |

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.

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://www1.wrd.state.or.us/pdfs/cwre_listing.pdf. CWRE stamp and signature are not required for temporary 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.
- N/A 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

Applicant Information

| | | | |
|--|--------------------|----------------------------------|------------------------------------|
| APPLICANT/BUSINESS NAME Richard L. and Sandra M. Twigg | | PHONE NO. 503-628-1596 | ADDITIONAL CONTACT NO. |
| ADDRESS 31500 SW Firdale Road | | | FAX NO. |
| CITY Cornelius | STATE OR | ZIP 97113 | E-MAIL twiggfarm@aol.com |

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

| | | | |
|---|--------------------|----------------------------------|--|
| AGENT/BUSINESS NAME Eric Urstadt/Stuntzner Engineering & Forestry | | PHONE NO. 503-357-5717 | ADDITIONAL CONTACT NO. |
| ADDRESS 2137 19th Ave. | | | FAX NO. 503-357-5698 |
| CITY Forest Grove | STATE OR | ZIP 97116 | E-MAIL ericurstadt@stuntzner.com |

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.

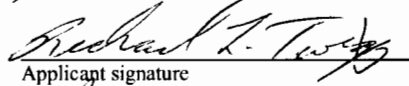

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I (we) affirm that the information contained in this application is true and accurate.

| | | |
|--|---|---------------------------|
|  Applicant signature | Richard L. Twigg Name (and title if applicable) (print) | <u>11-23-10</u> Date |
|  Applicant signature | Sandra M. Twigg Name (and title if applicable) (print) | <u>11-23-2010</u> Date |

In your own words tell us what change(s) you want made and the reason for the change(s): **We want to transfer the place of use from lands we lease to lands we are currently purchasing (TL1800).**

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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 Richard L. and Sandra M. Twigg | | | PHONE NO. 503-628-1596 | ADDITIONAL CONTACT NO. |
| ADDRESS 31500 SW Firdale Road | | | | FAX NO. |
| CITY Cornelius | STATE OR | ZIP 97116 | E-MAIL twiggfarm@aol.com | |

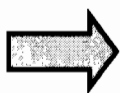
Describe any special ownership circumstances here: **Richard and Sandra Twigg are currently purchasing TL1800 from Leland R. Twigg Trust and Shirley A. Twigg Trust.**

- 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 Tualatin Valley Irrigation District | ADDRESS 2330 Elm St. | |
| CITY Forest Grove | STATE OR | ZIP 97116 |

- 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 Washington County | ADDRESS 155 N. First Ave. | |
| CITY Hillsboro | STATE OR | ZIP 97124 |

| | | |
|-------------|---------|-----|
| ENTITY NAME | ADDRESS | |
| CITY | STATE | ZIP |

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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 # 68504

Description of Water Delivery System

System capacity: _____ cubic feet per second (cfs) **OR**
310 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. **The system capacity is 310 GPM (per T-7207 COBU). The system is a Cornell centrifugal pump with marathon 3-phase 50 HP electric motor going to various irrigation devices.**

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 #1 | <input checked="" type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed | N/A | 1 S | 3 W | 36 | SE | SW | 1701 | 1000' north, 240' west of south 1/4 corner |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | | |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | | |
| | <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 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" 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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Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Right Certificate # 68504

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 | Tax Lot | Gvt Lot or DLC | 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 | 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 | 36 | SE | 900 | -- | 15.0 | Irrigation | POD #1 | POU/POD | 2 | S | 36 | SE | 900 | 1 | 10.0 | | POD #5 | |
| | | | | | | EXAMPLE | | POD #2 | | 2 | S | 36 | SW | 900 | | 5.0 | | POD #6 | |
| 1 | S | 36 | SE | 900 | -- | 12.9 | Irrigation * | POD #1 | POU | 1 | S | 36 | NW | 1800 | -- | 26.1 | Irrigation | POD #1 | |
| 1 | S | 36 | SW | 902 | -- | 13.2 | Irrigation * | POD #1 | POU | | | | | | | | | | |
| TOTAL ACRES | | | | | | 26.1 | | | | TOTAL ACRES | | | | | | 26.1 | | | |

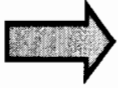
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Additional remarks: * A small area of land that has not been irrigated in the last 5 years, but was certified, has reduced the irrigated acres in the SE-NW. A barn and area around it were taken out of the certified irrigation area.

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: **76062.**



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 |
|---|------------------------------------|---|------------------|-----------------|-------------------------|---------------------------|--|--|---|--|
| N/A | | | | | | | | | | |
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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 # 76062

Description of Water Delivery System

System capacity: 1.76 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. **The water delivery system is (as per COBU for T-7207) is a 10 HP electric submersible pump which usually pumps water into the reservoir for redistribution.**

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) |
|------------------------|--|--|-----|-----|-----|-------|---------------------------|--|
| POA #2 | <input checked="" type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed | NONE FOUND | 1 S | 3 W | 36 | SE SW | 1701 | 1100' north, 190' west of south 1/4 corner |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | |

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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 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" 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.

Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Right Certificate # 76062

List only the part of the right that will be changed. For the acreage in each 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 | Tax Lot | Gvt Lot or DLC | Acres (if applicable) | Type of USE listed on Certificate | POD(s) or POA(s) (name or number from Table 1) | POD(s) or POA(s) to be used (from Table 1) | Twp | Rng | Sec | 1/4 | Tax Lot | Gvt Lot or DLC | Acres (if applicable) | New Type of USE | POD(s) or POA(s) to be used (from Table 1) | |
| 2 | S | 36 | SE | 100 | | 15.0 | irrigation | POD #1 | POD #5 | 2 | S | 36 | SE | 100 | | 15.0 | | POD #5 | |
| | | | | | | EXAMPLE | | | | 2 | S | 36 | SW | 500 | | 5.0 | | POD #6 | |
| 1 | S | 36 | SE | 900 | | 12.9 | irrigation * | POA #2 | POA #2 | 1 | S | 36 | NW | 1800 | | 26.1 | irrigation | POA #2 | |
| 1 | S | 36 | SW | 902 | | 13.2 | irrigation | POA #2 | | | | | | | | | | | |
| | | | | | | TOTAL ACRES | | | | | | | | | | TOTAL ACRES | 26.1 | | |

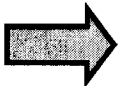
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Additional remarks: * A small area of land that has not been irrigated in the last 5 years, but was certified, has reduced the irrigated acres in the SE-NW. A barn and area around it were taken out of the certified irrigation area.

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: 68504.



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:

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Table 3. Construction of Point(s) of Appropriation

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| 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 |
|---|------------------------------------|---|------------------|-----------------|-------------------------|---------------------------|--|--|---|--|
| NA | | | | | | | | | | |
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Application for Water Right Transfer Consent by Deeded Landowner



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

State of Arizona Oregon) County of Yuma)ss)

I Leland Twigg and Shirley Twigg in my/our capacity as Trustees of Leland R. Twigg Trust and Shirley A. Twigg Trust,

mailing address 32000 SW Firdale Rd., Cornelius, OR 97113,

telephone number _____, duly sworn depose and say that I

consent to the proposed change(s) to Water Right Certificate Number 68504 and 76062

described in a Transfer Application (T-_____) submitted by Twigg Farm, (transfer number, if known)

on the property in tax lot number(s) 902, Section 36, Township 1

South, Range 3 West, W.M., located at Firdale Road, Cornelius, OR. (site address)

Leland R. Twigg Signature of Affiant

12-6-10 Date

Shirley A. Twigg Signature of Affiant

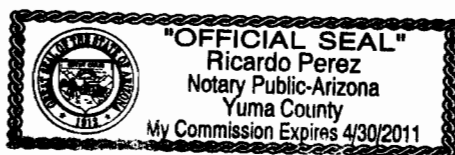
_____ Date

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Subscribed and Sworn to before me this 6 day of December, 2010.



Ricardo Perez Notary Public for Oregon-Arizona

My commission expires 4/30/2011.

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TL 900

Application for Water Right
Transfer
Consent by Deeded Landowner



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

State of ~~Oregon~~ Florida)
County of Sarasota)ss
)

I Kenneth W. and Beth Twigg in my/our capacity as owner,
mailing address 632 Khyber Lane, Venice, FL 34293,
telephone number 941-493-2471, duly sworn depose and say that We
consent to the proposed change(s) to Water Right Certificate Number 68504 and 76062
described in a Transfer Application (T-) submitted by Twigg Farm,
(transfer number, if known)
on the property in tax lot number(s) 900, Section 36, Township 1
South, Range 3 West, W.M., located at Firdale Road, Cornelius, OR.
(site address)

Kenneth W. Twigg
Signature of Affiant

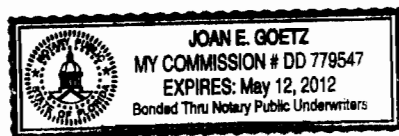
12-17-2010
Date

Bethanne C. Twigg
Signature of Affiant

12-17-2010
Date

RECORDED
DEC 27 2010
WATER RESOURCES DEPT
SALEM, OREGON

Subscribed and Sworn to before me this 17th day of December, 2010.



Joan E. Goetz
Notary Public for ~~Oregon~~ Florida

My commission expires May 12, 2012.

T 11176

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 637.766)

1985
 WATER RESOURCES DEPT
 SALEM, OREGON
 PLEASE TYPE or PRINT IN INK

15/3W-36ca

(for official use only)

(1) OWNER:

Name Richard Twigg
 Address Rt. 2, Box 358
 City Cornelius, OR State 97113

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air Driven
 Rotary Mud Dug
 Cable Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
 Thermal:
 Irrigation Withdrawal Reinjection
 Other:
 Piezometric Grounding Test

(5) CASING INSTALLED:

Steel Plastic
 Threaded Welded
 10" Diam. from +1 ft. to 89 ft. Gauge .250
 " Diam. from " ft. to " ft. Gauge "

LINER INSTALLED:

Steel Plastic
 Threaded Welded
 8" Diam. from 10 ft. to 125 ft. Gauge PVC200

(6) PERFORATIONS:

Perforated? Yes No
 Size of perforations in. by in.
 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 Hydrophlic Industries
 Type PVC Model No. _____
 Diam. 8" Slot Size .100 Set from 125 ft. to 160 ft.
 Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes No If yes, by whom?
 300 gal./min. with 142 ft. drawdown after 2 hrs.
 180 gal./min. with 108 " " "
 150 gal./min. with 98 " " "
 Air test _____ gal./min. with _____ ft. drawdown after _____ hrs.
 Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
 Artesian flow _____ g.p.m.
 Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Special standards: Yes No
 Well seal—Material used Cement grout + gel
 Well sealed from land surface to 110 ft.
 Diameter of well bore to bottom of seal 14 in.
 Diameter of well bore below seal 10 in.
 Amount of sealing material 35 sacks pounds
 How was cement grout placed? Rumped in place @ 110' - 85'
pressurized around casing—21 sacks. Tremmed into
annular bore 35' to ground level - XX 14 sacks
 Was pump installed? no Type _____ HP _____ Depth _____ ft.
 Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
 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.

(10) LOCATION OF WELL by legal description:

County Washington NE 1/4 SW 1/4 of Section 36 of
 Township 1 S Range 3 W W.M.
 (Township is North or South) (Range is East or West)

Tax lot _____ Lot _____ Block _____ Subdivision _____
 MAILING ADDRESS OF WELL (or nearest address) _____

(11) WATER LEVEL of COMPLETED WELL:

Depth at which water was first found 110 ft.
 Static level 12 ft. below land surface. Date 8-2-85
 Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 10"
 Depth drilled 160 ft. Depth of completed well 160 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 and indicate principal water-bearing strata.

| MATERIAL | From | To | SWL |
|--------------------------------------|------|-----|------|
| Brown clay | 0 | 8 | |
| Brown silty clay, occ. quicksand | 8 | 30 | |
| Blue-gray silty clay, sticky | 30 | 65 | |
| Brown clay, occ. weathered rock | 65 | 75 | |
| Brown basalt, weathered | 75 | 85 | |
| Brown basalt, occ. weathered, broken | 85 | 155 | w.b. |
| Gray-brown basalt, fractured | 155 | 160 | w.b. |

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Date work started 7/22/85 /completed 8/2/85
 Date well drilling machine moved off of well 8/2/85 19

(unbonded) Water Well Constructor Certification (If applicable):

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

[Signed] _____ Date _____, 19 _____

(bonded) Water Well Constructor Certification:

Bond 335-2916 Issued by: Great American Insurance
 (number) (Surety Company Name)
 On behalf of A. M. JANNSEN WELL DRILLING CO. INC.
Preston A. Jannsen (type or print name of Water Well Constructor)

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

(Signed) _____ (Water Well Constructor)

(Dated) August 6, 1985

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

WATER RESOURCES DEPARTMENT,
 SALEM, OREGON 97310

SP*46866-690

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Pump Capacity Calculation Sheet

using Department designed formula:

$$(\text{hp})(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

Data Entry (fill in underlined blanks)

| | | |
|--------------|-------------|--|
| HP = | <u>10</u> | |
| Efficiency = | <u>7.04</u> | |
| Lift = | <u>40</u> | ← 12 foot static water level, well near dam. |
| PSI = | <u>0</u> | ← pumps to reservoir |

Results Calculated

| | |
|----------------------|------|
| (hp)(efficiency) = | 70.4 |
| Head based on psi = | 0.0 |
| Total dynamic head = | 40.0 |
| (head + lift) | |

Pump Capacity = 1.76 feet per second

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