

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:

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation. *Certificates were issued confirming on April 3, 2009*
- Fees - Amount enclosed: \$ 2950.00
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):

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Part _____ is incomplete
<input type="checkbox"/> 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. *Request variance for this simple map at 1"=400'*
- 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

Applicant Information

APPLICANT/BUSINESS NAME <i>Rick Morrow dba R&B Ranch, LLC</i>		PHONE NO. <i>503-585-5721 #570</i>	ADDITIONAL CONTACT NO.
ADDRESS REB Box 3306 <i>3705 Ballyntyne Rd.</i>		FAX NO.	
CITY <i>Salem</i>	STATE <i>OR</i>	ZIP <i>97302</i>	E-MAIL <i>R.Morrow@Morrow.com</i>

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

AGENT/BUSINESS NAME <i>Randall Gardner</i>		PHONE NO. <i>541-325-3020</i>	ADDITIONAL CONTACT NO.
ADDRESS <i>16500 Jordan Rd. P.O. Box 1671</i>		FAX NO. <i>541-549-8429</i>	
CITY <i>Sisters</i>	STATE <i>OR</i>	ZIP <i>97759</i>	E-MAIL <i>r.gardner@morrow.com</i>

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)

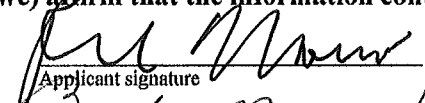
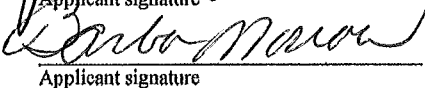
Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No

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.

x	 Applicant signature	<i>Richard Morrow</i> Name (and title if applicable) (print)	<i>2-12-11</i> Date
	 Applicant signature	<i>Barbara Morrow</i> Name (and title if applicable) (print)	<i>2-12-11</i> Date

In your own words tell us what change(s) you want made and the reason for the change(s): _____

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		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 <i>Three Sisters Irr. Dist.</i>	ADDRESS <i>PO Box 2230 68000 Hwy 20</i>	
CITY <i>Sisters</i>	STATE <i>Oregon</i>	ZIP <i>97759</i>

- 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. *NA*

ENTITY NAME	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 <i>Deschutes County</i>	ADDRESS <i>117 NW Lafayette Ave</i>	
CITY <i>Bend</i>	STATE <i>Oregon</i>	ZIP <i>97701</i>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

REC
 FEB 13 2011
 WRAJ
 SALEM, OREGON

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 # 85431

Description of Water Delivery System

System capacity: 0.151 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. Well #2 (Big Bertha) 100 HP verticle shaft motor on turbine pump in well. 10" and 8" mainline to irrigation area for wheel lines and hand lines

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	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
<i>well</i> Big Bertha # 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	DESC 3035	15 S	10 E	14	NW	NW	TL 1900	290' S & 140' E from NW Cor sec 14
R & B well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	DESC 57926 L88765	15 S	10 E	11	NW	SW	TL 1300	410' S & 470' E from W 1/4 cor sec 11
	<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 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 checked="" 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.

FEB 15 2011

Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Right Certificate # 05431

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.

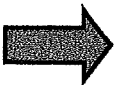
Authorized ("from" lands) as they appear BEFORE THE CHANGES										Proposed ("to" lands) AFTER THE CHANGES									
Twp	Range	Section	1/4 1/4	Tax Lot	Gvt. Lot or DLC	Acreage (if applicable)	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Proposed Changes (See "CODES" from previous page)	Twp	Range	Section	1/4 1/4	Tax Lot	Gvt. Lot or DLC	Acreage (if applicable)	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	
2	S	9	E	15	NE NW	100	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			POD #6
15	S	10	E	11	NW SW	1300	irrigation	POA #2	POA	15	S	10	E	11	NW SW	1300	10.0	irr.	R # B W # 11
15	S	10	E	11	SW SW	1300	irr.	POA #2	POA	15	S	10	E	11	SW SW	1300	2.1	irr.	R # B W # 11
TOTAL ACRES						121	TOTAL ACRES						121						

Additional remarks:

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
Well #2	Yes	DESC 3039	168'	12"	+2' to 165'	30'	145' to 165'	144'	cinders & basalt	2.39 cfs
R&B	Yes	DESC 57926 L 88765	333'	10"	114'	50'	273 to 333	109	basalt	700 GPM

RECEIVED
FEB 15 2011

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

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

RECEIVED (DESC 3035) JUN - 4 1970 STATE ENGINEER SALEM, OREGON

Well #2

State Well No. 1510-10 State Permit No.

(1) OWNER:

Name LAZY Z RANCH Address SISTERS Oregon

(2) TYPE OF WORK (check):

New Well [X] Deepening [] Reconditioning [] Abandon []

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary [] Driven [] Cable [X] Jetted [] Dug [] Bored []

(4) PROPOSED USE (check):

Domestic [] Industrial [] Municipal [] Irrigation [X] Test Well [] Other []

CASING INSTALLED:

12" Diam. from 7.2 ft. to 16.5 ft. Gage 2.250

PERFORATIONS:

Perforated? [X] Yes [] No. Type of perforator used TORCH Size of perforations 1/2 in. by 8 in. 1.85 perforations from 14.5 ft. to 16.5 ft.

(7) SCREENS:

Well screen installed? [] Yes [X] No Manufacturer's Name Type Model No. Diam. Slot size Set from ft. to

(8) WATER LEVEL: Completed well.

Static level 144 ft. below land surface Date 5/13/70 Artesian pressure lbs. per square inch Date

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level. Was a pump test made? [X] Yes [] No If yes, by whom? PACIFIC PIPE PUMP POWER PORTLAND ORE Yield: 300 gal./min. with 2 ft. drawdown after 1 hrs.

Bailer test gal./min. with ft. drawdown after hrs. Artesian flow g.p.m. Date Temperature of water 51 Was a chemical analysis made? [] Yes [X] No

(10) CONSTRUCTION:

Well seal—Material used BENTONITE DRILL CUTTINGS Depth of seal 3.0 ft. Diameter of well bore to bottom of seal 18 in. Were any loose strata cemented off? [] Yes [X] No Depth Was a drive shoe used? [] Yes [X] No Did any strata contain unusable water? [] Yes [X] No Type of water? depth of strata Method of sealing strata off Was well gravel packed? [] Yes [X] No Size of gravel: Gravel placed from ft. to ft.

(11) LOCATION OF WELL:

County Deschutes Driller's well number 1/4 Section 10 T. 15 R. 10E W Bearing and distance from section or subdivision corner

(12) WELL LOG:

Diameter of well below casing 12 Depth drilled 168 ft. Depth of completed well 168 Formation: Describe color, texture, grain size and structure of material 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 rate

Table with columns: MATERIAL, From, To, SW. Rows include SANDY TOP SOIL, LARGE BOULDERS, GREY LAVA (MED), RED CINDERS & GRAVEL, GREY BASALT (HARD), BROWN CLAY & GRAVEL, GREY BASALT (HARD), RED CINDERS, GREY BASALT (HARD), LARGE BOULDERS.

Work started 3/26 1970 Completed 5/13 1970 Date well drilling machine moved off of well 5/13 1970

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] Donald E. Stambler Date 5/13, 1970 (Drilling Machine Operator)

Drilling Machine Operator's License No. 348

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 DICK AKINS WELL DRILLER (Person, firm or corporation) (Type or print)

Address P.O. Box 264 PRINEVILLE, OR 97135

[Signed] Dick Akins (Water Well Contractor)

Contractor's License No. 220 Date 5/16 1970

WELL LABEL # L 88765

START CARD # 1000705

(1) LAND OWNER Owner Well I.D. _____

First Name RANDY Last Name GARDNER
 Company R & B Ranch
 Address 3705 BALLYNTYNE RD
 City SALEM State OR Zip 977302

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 333.00 ft.

BORE HOLE			SEAL				sacks/	
Dia	From	To	Material	From	To	Amt	lbs	
14	0	74	Bentonite Chips	0	50	61	S	
12	74	114.5	Cement	50	74	46	S	
10	114.5	333	Cement	74	114	20	S	

How was seal placed: Method A B C D E

Other Poured Dry

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10		2.5	114	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	8		13	333	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method Machine

Screens Type _____ Material _____

Perf/	Casing/	Screen	Scrn/slot	Slot	# of	Tele/	
Screen	Liner	Dia	width	length	slots	pipe size	
Perf	Liner	8	273	333	.125	3	912

(8) WELL TESTS: Minimum testing time is 1 hour

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
700		330	2

Temperature 57 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Deschutes Twp 15.00 S N/S Range 10.00 E E/W WM
 Sec 11 1/4 of the _____ 1/4 Tax Lot 1300
 Tax Map Number _____ Lot _____
 Lat _____ " or 44.28299000 DMS or DD
 Long _____ " or 121.51163000 DMS or DD
 Street address of well Nearest address

16400 JORDAN RD

(10) STATIC WATER LEVEL

Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening			
Completed Well	<u>03-23-2007</u>		<u>109</u>

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found 53

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
03-20-2007	53	70	50			52
03-23-2007	243	333	700			109

(11) WELL LOG

Ground Elevation _____

Material	From	To
Cobbles Clay Brown	0	8
Lava Gray	8	31
Cinders	31	40
Gravels Clay	40	53
Gravels Sand	53	70
Sand Brown	70	82
Gravels Small Medium Sand Gray	82	101
Basalt	101	133
Basalt Broken Clay Seams Brown	133	144
Basalt Fractured	144	160
Basalt Cinders	160	168
Sandstone	168	183
Lava Gray Red Clay Seams Brown	183	196
Lava Gray	196	212
Basalt Clay Seams Brown	212	243
Sandstone	243	262
Basalt	262	320
Basalt Clay Seams Brown	320	333

Date Started 03-20-2007 Completed 03-26-2007

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 758 Date 03-26-2007

Electronically Filed

Signed THOMAS R PECK (E-filed)

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1720 Date 03-26-2007

Electronically Filed

Signed JACK ABBAS (E-filed)

Contact Info (optional)

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 # 85432

Description of Water Delivery System

System capacity: 0.04 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. Well #2 (Big Bertha) 100 HP vertical shaft motor on turbine pump in well. 10" & 8" mainline to wheel lines and hand lines

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-...)	Typ	Rng	Sec	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	DESC 3035	15 S	10 E	14	NW NW	TL 1900	290'S & 140'E from NW cor sec 14
R & B Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	DESC 57926 L 88765	15 S	10 E	11	NW SW	TL 1900	410'S & 470'E from W/4 cor sec 11
	<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 type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input checked="" 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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 WASHINGTON COUNTY
 CLERK

Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Right Certificate # 85432

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) to be used (from Table 1)	
2	S	9	E	15	NE	NW	100	"	"	15.0	irrigation	POD #1	POD #2	"	"	EXAMPLE	"	"	POD #5
2	S	9	E	1	NW	NW	500	"	"	500	"	"	"	"	"	10.0	"	POD #6	
15S	10E	11	SW	SW	TL	1300	30	POA well #2	5 to P & POA	30	supp irr.	POA well #2				30	irr	REB well	
TOTAL ACRES										TOTAL ACRES									
30										30									

Additional remarks:

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: C-85387



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 # 85387

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
Well #2	Yes	DESC 3035	168'	12"	+2 to 165'	30'	145 to 165'	144'	cinders & basalt	2.39 cfs
REB	Yes	DESC 57926 L88765	333'	10"	114'	50'	273 to 333'	109'	basalt	700 GPM

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WATER RIGHTS DIVISION
DEPARTMENT OF AGRICULTURE
STATE OF OREGON

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 # 85430

Description of Water Delivery System

System capacity: 0.166 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. Well #2 (Big Bertha) 100 HP verticle shaft motor on turbine pump in well. 10" and 8" main line to wheel lines and head lines

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-)	Typ	Rng	Sec	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
<i>Well #2</i>	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	<i>DESC 3035</i>	<i>15 S</i>	<i>10 E</i>	<i>14</i>	<i>NW NW</i>	<i>TL 1900</i>	<i>290' S & 140' E from NW cor sec 14</i>
<i>R & B Well</i>	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	<i>DESC 57926 L 88765</i>	<i>15 S</i>	<i>10 E</i>	<i>11</i>	<i>NW SW</i>	<i>TL 1300</i>	<i>410' S & 470' E from W 1/4 cor sec 11</i>
	<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 type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input checked="" 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 # 85430

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	Govt Lot or DLC	Tax Lot	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	Govt Lot or DLC	Acres (if applicable)	New Type of USE	POD(s) to be used (from Table 1)		
2	S	9	E	15	NW	100	Irrigation	POD #1	POU/POD	2	S	9	E	1	NW	NW	500	1	POD #5	
"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	E	1	SW	NW	500	"	POD #6	
15	S	10	E	11	NW	SW	supp irr	Well #2	S to P & POA	15	S	10	E	11	NW	SW	TL 1300	100	irr	REB Well
15	S	10	E	11	SW	SW	supp irr	Well #2	S to P & POA	15	S	10	E	11	SW	SW	1300	33	irr	REB Well
TOTAL ACRES										TOTAL ACRES										
133										133										

Additional remarks:

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: C- 85387



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Surface water primary Certificate # _____

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Identify the primary certificate to be cancelled. Certificate # 85387

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OR

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

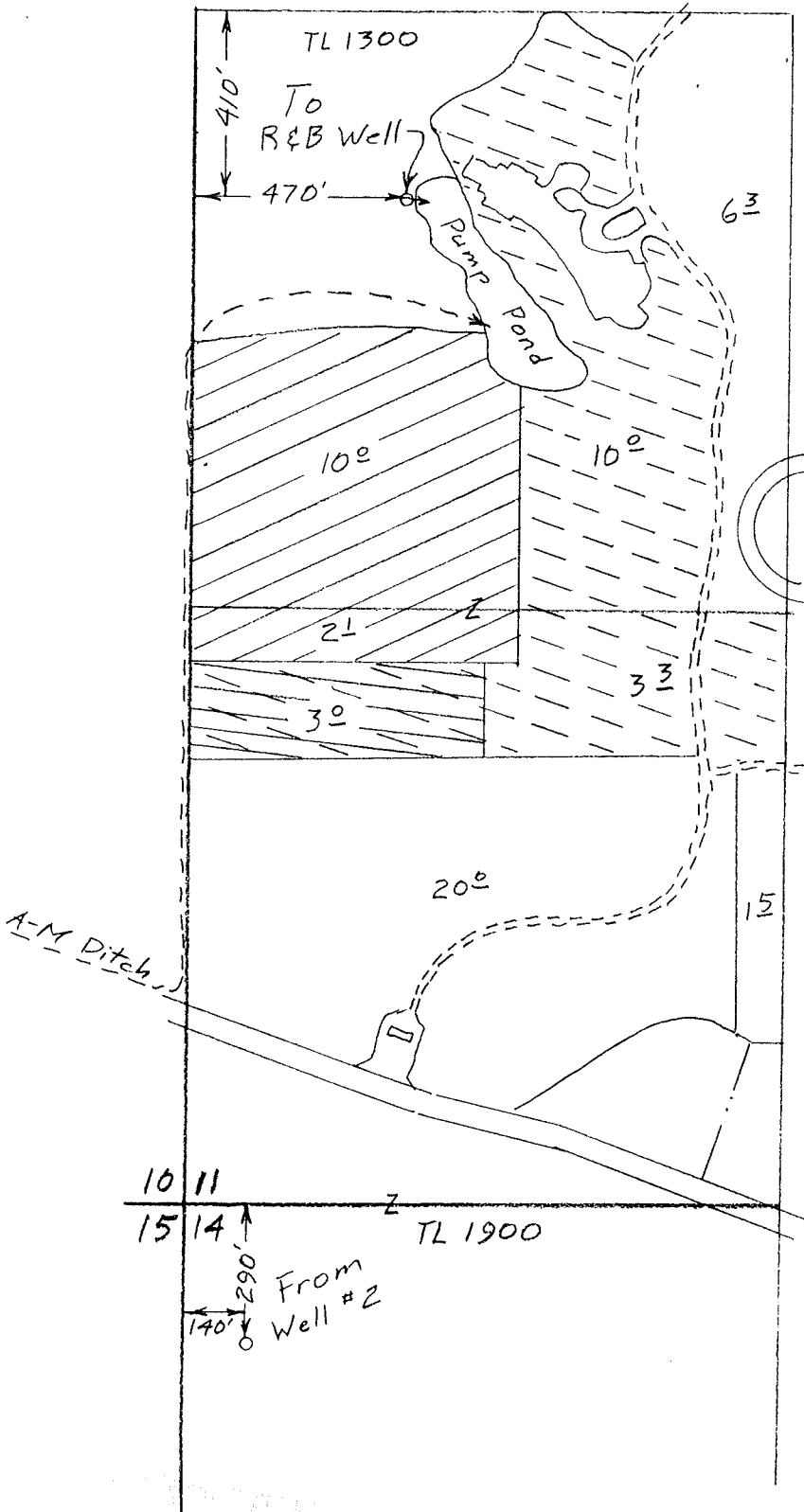
Table 3. Construction of Point(s) of Appropriation

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R&B	Yes	DESC 57926 L88765	333'	10"	114'	50'	273 to 333	109'	basalt	700 GPM

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T. 15 S., R. 10 E., W. 1 M.



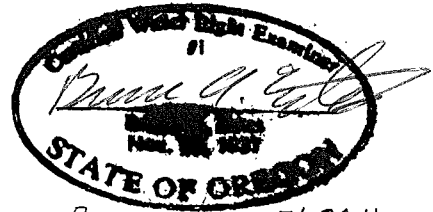
Scale 1" = 400'

Transfer App. Map
for
R & B Ranch, LLC

- ⊗ 12¹ acres well primary
Change POA only
C-85431
- ⊗ 13³ acres well supplemental
Change to primary and
change POA C-85430
Cancel 13³ acres 1908
- ⊗ 3² acres well supplemental
Change to primary and
change POA C-85432
Cancel 3² acres 1908

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STATE OF OREGON

This map is for the purpose of locating a water right only and has no intent to provide legal dimensions or the location of property lines.



Renewal Dec 31, 2011

ESTES SURVEYS, LLC
 PO Box 17619 Salem, OR 97305-7619 (503) 585-7589
 60382 Arnold Rd Bend, OR 97702 (541) 382-7391