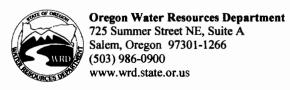
## Application for Water Right **Transfer**

Part 1 of 4 - Minimum Requirements Checklist



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
Che	ck all ite	ms included with this application. (N/A = Not Applicable)  Part 1 – Completed Minimum Requirements Checklist.  JUN 2 7 2011
V		Part 2 – Completed Transfer Application Map Checklist.  WATER RESOURCES DEPT SALEM, OREGON
9		Part 3 – Completed Transfer Application – Applicant Information and Signature.
7		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:
K		Completed Transfer Application Map.
X		Completed Evidence of Use Affidavit and supporting documentation.
X		Fees – Amount enclosed: \$ 646.  See the Department's Fee Schedule at <a href="https://www.wrd.state.or.us">www.wrd.state.or.us</a> or call (503) 986-0883.
	X N/A	Affidavit(s) of Consent.
	X 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.
X	□ 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.
	X N/A	For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, Water Well Report/Well Log.
X	N/A	For Temporary Transfer (one to five years) Begin Year 2011 End Year 2015.
X	□ N/A	For Temporary Transfer only – Current recorded deed for the land <b>from</b> which the authorized place of use is being moved.
	X N/A	Temporary Drought Transfer (For use in counties where the Governor has declared drought)
		(For Staff Use Only)  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  Additional signature(s) required Part is incomplete  */Explanation 503-986-0 Date: / /

REVISED 3/21/2011

ter application will be returned it any of the map requirements listed below are not met.
sure that the transfer application map you submit includes all the required items and the existing water right map. Check all boxes that apply.
Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see <a href="http://www1.wrd.state.or.us/pdfs/cwre_listing.pdf">http://www1.wrd.state.or.us/pdfs/cwre_listing.pdf</a> . CWRE stamp and signature are not required for temporary changes and substitutions.
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: $1 \text{ inch} = 400 \text{ feet}$ , $1 \text{ inch} = 1,320 \text{ feet}$ , 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 $1 \text{ inch} = 1,320 \text{ feet}$ , or a scale that has been pre-approved by the Department.
Township, Range, Section, 1/4 1/4, 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.
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.
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°).

2 OF 7

## Part 3 of 4 - Applicant Information and Signature

1	Applicant Information		
	APPLICANT/BUSINESS NAME	PHONE NO.	ADDITIONAL CONTACT NO.
	BRITHEL HEIGHTS VINGYARD, INC	503.868.7626	
	GOGO BETHEL HEIGHTS RI N. W.		FAX NO. 503.868.7626

APPLICANT/BUSINESS NAME	. 1	4	PHONE NO.	ADDITIONAL CONTACT NO.							
BETHEL HEIGHTS	AINE	PARD, INC	503.868.7626								
6060 BETHEL H	Blatts	PAN.W.		FAX NO. 503·868·7626							
TALEM	STATE	<sup>ZIP</sup> 97304	E-MAIL TEDOBETHEL	Itelatts . Com							
<b>gent Information</b> – The age	nt is autho	orized to represent	the applicant in all mat	ters relating to this application							
AGENT/BUSINESS NAME  JIM SCHLIGHTE - JM	5 ENG	INSCRING	PHONE NO. 63 . 559 . 1146	ADDITIONAL CONTACT NO.							
ADDRESS FAX NO. FAX NO.											
SALEM	STATE	2IP 97301	E-MAIL  MSENGINCEVIN	g @ Questoffice.net							
	oject is for all stimulation of the land is of all lacent (and in the land in	ully or partially fi ilus dollars) land on which th indowners (and n nailing addresses	anded by the Americane water right, or port	an Recovery and							
	D	T G Ol	(sheels are here)								
By signing this application, I Department approval of the translation authorized to pursue the translation.	understand ransfer, I w	vill be required to pro	f the draft preliminary de ovide landownership info	termination and prior to rmation and evidence that I am							
I affirm the applicant is a mun name of the municipality or a	predecess	or; OR		ight is in the JUN 2 7 2011							
☐ I affirm that the applicant is a condemnation the property to supporting documentation.	n entity wi which the	th the authority to co water right propose	ondemn property and is and is and is and is and is and is appurtent and for transfer is appurtent and is an and is an and is an and is an an and is an	equiring MY ER RESOURCES DEPT int and have ALEM, OREGON							
I (we) affirm that the inform	$\sim$			curate. 6/22/1,							

I (we) affirm that the information contains the land is . Carle Applicant signature	THEUDORE W. CASTEEL Name (and title if applicable) (print)	accurate. 6/22/11 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):

	hat apply	<b>/:</b>				
The applicant is responded to be sent to	•	-	etion of o	change(s). No	tices and	l correspondence should
						sed change(s) after the sent to this landowner.
The receiving lando of notices and corre				-	-	etion of change(s). Cop ne applicant.
At this time, are the lands in	n this t <del>ra</del> n	sfer appli	ication in	the process o	f being s	old? 🗌 Yes 💢 No
If YES, and you know winformation table below assignment will have to	. If you o	lo not kne	ow who	•	_	_
If a property sells, the c unless a sale agreement please visit our web site	or other o	locument	states o	therwise. (To	learn abo	out sale agreements
RECEIVING LANDOWNER NAME				PHONE NO.	A	DDITIONAL CONTACT NO.
ADDRESS		_			F	AX NO.
СПҮ	STATE	ZIP		E-MAIL		
Check here if any of the			osed for			
Check here if any of the an irrigation or other wa			osed for	ransfer are or e and attach S	uppleme	
an irrigation or other wa			osed for t	ransfer are or e and attach S	uppleme REC	ntal Form D.) EIVED 27 2011
an irrigation or other wa	ater distric	et. (Tip:	ADDRES	ransfer are or e and attach S	REC JUN 2	ntal Form D.) EIVED 27 2011 SQURCES DEPT
an irrigation or other wa	ater distric	et. (Tip:	ADDRES STATE	ransfer are or e and attach S s nder a water s	REC JUN 2	ntal Form D.) EIVED 27 2011 SQURCES DEPT
an irrigation or other water IRRIGATION DISTRICT NAME  CITY  Check here if water for	ater distric	et. (Tip:	ADDRES STATE	ransfer are or e and attach S s nder a water s	REC JUN 2	ntal Form D.) EIVED 27 2011 SQURCES DEPT
an irrigation or other water IRRIGATION DISTRICT NAME  CITY  Check here if water for for stored water with a second control of the control of	ater distric	et. (Tip:	ADDRES  STATE  upplied upther enti	ransfer are or e and attach S s nder a water s	JUN 2 WATER RE	ntal Form D.) EIVED 27 2011 SQURCES DEPT
an irrigation or other water if water for for stored water with a sentity name	any of the federal ag	e rights su ency or o	ADDRES  STATE  ADDRES  STATE  ADDRES  STATE	ransfer are or e and attach S  s  nder a water s ty. s	JUN 2 WATER BE ervice ag	ntal Form D.) EIVED 27 2011 SOURCES DEPT MOREGON Treement or other contr
an irrigation or other water IRRIGATION DISTRICT NAME  CITY  Check here if water for for stored water with a start of the stored water water of the stored water with a start of the stored water	any of the federal agonsistency, or tribal	e rights su ency or o	ADDRES  STATE  ADDRES  STATE  ADDRES  STATE  ADDRES  Ments, yeent) with	ransfer are or e and attach S  s  nder a water s ty.  s  ou must list all nin whose juris	JUN 2 WATER RECEIVING A SECOND	ental Form D.) EIVED  7 2011  SOURCES DEPT  MOREGON  Treement or other control  EIP  EVERON  E
an irrigation or other water IRRIGATION DISTRICT NAME  CITY  Check here if water for for stored water with a sentity name  ENTITY NAME  CITY  To meet State Land Use Cocity, municipal corporation conveyed or used.	any of the federal agonsistency, or tribal	e rights su ency or o	ADDRES  STATE  ADDRES  STATE  ADDRES  STATE  ADDRES  Ments, year  ADDRES  STATE  ADDRES  STATE	ransfer are or e and attach S  nder a water s ty.  s  ou must list all nin whose juris	JUN 2 WATER RECEIVING A SECOND	ntal Form D.) EIVED 27 2011 SOURCES DEPT MOREGON Treement or other contr
an irrigation or other water for the stored water with a sentity name  CITY  Check here if water for for stored water with a sentity name  CITY  To meet State Land Use Cocity, municipal corporation conveyed or used.  ENTITY NAME  Polk County Plans	any of the federal agonsistency, or tribal	e rights su ency or o	ADDRES  STATE  ADDRES  STATE  ADDRES  STATE  ADDRES  Ments, year  ADDRES  STATE  ADDRES  STATE	ransfer are or e and attach S  nder a water s ty.  ou must list all nin whose juris	JUN 2 WATER RECEIVING A SECOND	ental Form D.) EIVED  27 2011 ESOURCES DEPT  A OREGON  Treement or other contre  EIP  EVEROMENT OF A CONTRE  EVERO

## Part 4 of 4 - Water Right Information

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

CERTIFICATE # 01/0	CERTIFICATE # 858	12
--------------------	-------------------	----

RECEIVED

			CE		1112 11	<u> </u>									
Descri	Description of Water Delivery System  System capacity: cubic feet per second (cfs) OR  WATER RESOURCES DEPT														
System	capacity:	W	ATER RESOURCES DEPT SALEM, OREGON												
	gallons per minute (gpm)														
five ve	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. I. Find the last 21/2" MAIN LINE Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation														
(POA)	1. Lucation of	Author izeu	anu i i u	poscu i	omt(s)	of Diversio	m (1 O1	)) of Appropriation							
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)							
Por	930'N & 1240'E FROM W'4 Gener Lec 2 1180'N & 1260'E From W'4 COENER LEC 23														
4PEING	Authorized Proposed		64	44	23	4WNW		1180'N \$ 1260'5 From W44 COENER Sec 23							
	Authorized														
	Proposed														
	☐ Authorized ☐ Proposed														
Check	all type(s) of c	hange(s) pro	posed b	elow (ch	ange	"CODES" a	ire pro	vided in parentheses):							
X	Place of Use	(POU)				Supplementa	ıl Use to	Primary Use (S to P)							
	Character of	Use (USE)				Point of App	ropriati	on/Well (POA)							
$\overline{\Box}$	Point of Div	ersion (POD)				Additional P	oint of	Appropriation (APOA)							
$\overline{\Box}$	Additional P	` ,		OD)	_	Substitution									
		er POD to Gr	,	-			,	POD (GOV)							
Will a	ll of the propos	sed changes	affect th	e entire	water	right?									
X Yes	•	aly the Propos sted above to	•	,			n the ne	ext page. Use the							
☐ No		of Table 2 to				•	ght to b	e changed.							

Table 2. Description of Changes to Water Right Certificate # 85812

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	Proposed ("to" lands) AFTER THE CHANC						NGES										
Twj	,	Rn	ng	Sec	1//	. 1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	Changes (see "CODES" from previous page)	T	wp	F	lng	Sec	1/	4 1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Pric Da
7	۸.		3.	: :	- 1	12.55	. "	-	; + +;	111/2/31/3	999 939 mg	\$ sace \$	हुरुद् कहा । हुँ दे हुई क	-	٠.	•:		ŧ	5,33	المرافي و	4141	1	: 43 es		17年7月第二十二	· · :
						•				1255	•		e P	ť	~		-0 m	**	11	524	Sec.		5.6		; * .( <b>)</b> - <i>t</i> ,	
6 '	5	4	W	22	NE	SE	701		4.5	TEEKATON	Por	1980		6	9	4	W	23	5W	ผพ	402		3.6		POD	1980
6	ء م	+	M	23	NM	SW	201		18.4	FERICATION	POT	1980		6	5	4	M	23	SE	NW	402		19.3		POP	1980
						_									_											
																					В	EC	EIV	ED		
																						JUN	272	011		
																					WA <sup>-</sup>	ER RE	SOURC	S DEPT		
																						DALEI	V, ORE	BON		
	T																									
						TOTA	L AC	RES	229		-					J			1	TOTA	AL AC	RES	229		1	

Additional remarks: \_\_\_\_\_

## For Place of Use or Character of Use Changes

		other water "from" or the	•	-		-	ground wa	ter registra	ations assoc	iated
	If YES, 1	ist the certific	cate, wat	er use per	mit, or gr	ound water	r registratio	on number	s:	
	a primar	to ORS 540.  y right proposed right water region.	sed for tr	ansfer mu	st be incl	uded in the	e transfer of	r be cancel	led. Any cl	hange
F	or Subst	i <b>tution</b> (grou		suppleme	ental irrig	ation will b	e substitut	ed for surf	ace water p	rimary
		water supplen water primary				#;				
F	or a chai	nge from Suj	pplemen	tal Irriga	tion Use	to Primar	y Irrigatio	n Use		
	Identify 1	the primary c	ertificate	to be can	celled. C	Certificate #	<b>#</b>			
F	or a chai	nge in point(	s) of app	ropriatio	n (well(s	)) or addit	ional poin	t(s) of app	ropriation	:
	asse	Il log(s) are a ociated with to lication map.://apps2.wrd	the corre	sponding You may s	well(s) in earch for	Table 1 al well logs o	ove and or on the Depa	n the accor	npanying	
	OR									
		scribe the cornot have a we		n of the au	thorized	and propos	sed well(s)	in Table 3	for any wel	lls that
Any well(s accompany transfer ap	s) in this l ying appli plication.	ion of Point( isting must be cation map. For propose examiner for	e clearly Failure to d wells,	tied to cor o provide we recom	rrespondi adequate mend tha	information t you consi	on is likely ult a license	to delay th ed well dri	e processin	g of your
Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag	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
						_				
							F	RECEIV	ED	
								JUN 27		
								ER RESOUR SALEM, OR		