

# Regular Temporary\* Water Right Transfer Application Checklist

Checked by PKS Date 3/26/12

**\* Temporary transfer will have one or more of the last checkboxes checked on Page 1 of the application**

(If OK, check box to left; if not, fill in the blank)

1. Page 1 of application: Are all attachments that have been checked actually included?  
If not, what is missing? \_\_\_\_\_

2. Are fees included and correct?  
If not, the correct fee would be: \_\_\_\_\_, so the amount missing is: \_\_\_\_\_

If a DROUGHT SUBSTITUTION is checked on p. 5, Fee = \$100.00

If a regular Temporary transfer (see last few check boxes on page 1):

Base fee for one water right =		\$600.00
# of additional water rights =	_____	x \$200.00 =
If Irrigation, # acres of primary =	_____	x \$2.00 =
If non-irrigation, # cfs or fraction above the first cfs =	_____	x \$150.00 =
Total =		

If a Temporary DROUGHT transfer (see last few check boxes on page 1):

Base fee =		\$100.00
Recording fee for first cfs		\$100.00
# cfs or fraction above the first cfs =	_____	x \$50.00 =
Total =		

3. Page 3 of application: Have all the applicants listed at the top of the page signed at the bottom?  
If not, whose signature is missing? \_\_\_\_\_.

4. Are all listed certificates or permits shown by WRIS as non-cancelled?  
If not, which are cancelled? \_\_\_\_\_  
For each cancelled certificate, if there has been a remaining right certificate issued that covers the lands in the left side of Table 2, list its number \_\_\_\_\_ and check the #4 box at left on this checklist.

5. If all #1-#4 boxes on this checklist are checked (with no remaining deficiencies identified), accept the application and assign it a numbered transfer folder. Put this check sheet in the transfer folder. If #1, #2, #3 or #4 on this checklist is deficient, the application cannot be accepted. It should be returned and the **deficiencies listed in the "staff" section at the bottom of Application Page 1**, unless the applicant or agent can resolve the deficiencies within 2-3 days.



State of Oregon  
Water Resources Department  
725 Summer Street NE, Suite A  
Salem, Oregon 97301-1266  
(503) 986-0900

# Application for Water Right Temporary or Drought Temporary Transfer Part 1 of 4 – Minimum Requirements Checklist

**This temporary 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.

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### FOR ALL TEMPORARY TRANSFER APPLICATIONS

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Temporary Transfer Application Map Checklist.
- Part 3 – Completed Temporary Transfer Application – Applicant Information and Signature.
- Part 4 – Completed Temporary Transfer Application – Water Right Information. Please include a separate Part 4 for each water right. List all water right certificates to be transferred here: 81530
- N/A For Temporary Transfer (one to five years) **Begin Year** 2012 **End Year** Part 2: 2015
- N/A Temporary Drought Transfer (For use in counties where the Governor has declared drought)

Part 1: 2013

#### Attachments:

- Completed Temporary Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- Current recorded deed for the land **from** which the authorized place of use is temporarily being moved.
- N/A Affidavit(s) of Consent.
- Fees – Amount enclosed: \$ \_\_\_\_\_.  
See <http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml#fees> or call (503) 986-0883.
- N/A Supplemental Form D – For water rights served by or issued in the name of a district. Complete when the temporary transfer applicant is not the 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, if necessary to convey the water to the new temporary place of use, Water Well Report(s)/Well Log(s).

<b>(For Staff Use Only)</b>	
<b>WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):</b>	
<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: _____	Date: ____/____/____

## Part 2 of 4 – Temporary Transfer Application Map Checklist

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

**Please be sure that the temporary transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.**

- 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 good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is 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 temporary 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) to convey water to the new temporary place of use, 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°).

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## Part 3 of 4 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>MIKE RAVA</b>			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS <b>16784 HERRIGSTAD Rd NE</b>				FAX NO.
CITY <b>Silverton</b>	STATE <b>OR</b>	ZIP <b>97381</b>	E-MAIL**	

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

AGENT/BUSINESS NAME <b>JIM SCHUETTE - JMS ENGINEERING</b>			PHONE NO. <b>503.559.1146</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>3000 Market St NE, #426</b>				FAX NO.
CITY <b>Salem</b>	STATE <b>OR</b>	ZIP <b>97301</b>	E-MAIL** <b>Jmsengineering@questoffice.net</b>	

**\*\* BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.**

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

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

*Mike Rava*  
Applicant signature

MIKE RAVA  
Print Name (and Title if applicable)

3-15-12  
Date

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Print Name (and Title if applicable)

\_\_\_\_\_  
Date

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

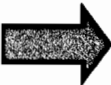
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Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME	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 MARION COUNTY PLANNING	ADDRESS 5155 Silverton Rd NE	
CITY SALEM	STATE OR	ZIP 97305

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/docs/Hints\\_Forms\\_MS\\_Word.doc](http://www.wrd.state.or.us/OWRD/PUBS/docs/Hints_Forms_MS_Word.doc).

CERTIFICATE # 81530

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**Description of Water Delivery System**

System capacity: \_\_\_\_\_ cubic feet per second (cfs) OR  
350 gallons per minute (gpm)

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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. 50 hp submersible & 25 hp booster

**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)
WELL	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		6S	1E	19	NENE	900	1050' N & 100' E from SW corner DL48
	<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 temporary change(s) proposed below (change "CODES" are provided in parentheses):**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Place of Use (POU)        | <input type="checkbox"/> 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) |   |

**Check all type(s) of temporary change(s) due to drought proposed below (change "CODES" are provided in parentheses):**

- |   |   |
|---|---|
| <input type="checkbox"/> Place of Use (POU)       | <input type="checkbox"/> Point of Appropriation/Well (POA)        |
| <input type="checkbox"/> Character of Use (USE)   | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Diversion (APOD)     |

**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 Temporary Changes to Water Right Certificate # 81530**

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

Authorized ("from" lands) as they appear BEFORE THE CHANGES						Proposed ("to" lands) AFTER THE CHANGES														
Twp	Rng	Sec	1/4 1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Proposed Changes (see "CODES" from previous page)	Twp	Rng	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)	Priority Date
6S	1E	17	SE SW	900	48	4.3	IRRIGATION	WELL	1983		6S	1E	20	SW NW	1100	48	4.3		WELL	1983
6S	1E	20	NE NW	900	48	4.2	IRRIGATION	WELL	1983		6S	1E	20	SW NW	1100	48	4.2		WELL	1983
						0.9											0.9			
6S	1E	17	SE SW	900	48	3.0	IRRIGATION	WELL	1983		6S	1E	20	SW NW	1100	48	3.0		WELL	1983
6S	1E	17	SW SW	900	48	2.8	IRRIGATION	WELL	1983		6S	1E	20	NW SW	1100	48	2.8		WELL	1983
6S	1E	20	NW NW	900	48	1.6	IRRIGATION	WELL	1983		6S	1E	20	NW SW	1100	48	1.6		WELL	1983
6S	1E	20	NE NW	900	48	3.7	IRRIGATION	WELL	1983		6S	1E	20	NW SW	1100	48	3.7		WELL	1983
						11.1											11.1			
TOTAL ACRES						19.6							TOTAL ACRES						19.6	

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

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**For Place 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 540.525, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for temporary transfer can be included in the transfer or remain unused on the authorized place of use. If the primary water right does not revert soon enough to allow use of the supplemental right within five years, the supplemental right shall become subject to cancellation for nonuse under ORS 540-610.

**For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation if necessary to convey the water to the new temporary place of use:**

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://apps.wrd.state.or.us/apps/gw/well\\_log/Default.aspx](http://apps.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

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**WATER WELL REPORT**  
STATE OF OREGON

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State Well No. 05/1E-19aa

APR 21 1983

State Permit No. **RECEIVED**

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(10) LOCATION OF WELL:

County Marion Driller's well number WATER RESOURCES DEPT. SALEM, OREGON  
NE 1/4 NE 1/4 Section 19 T. 65 R. 7E  
Tax Lot # \_\_\_\_\_ Lot \_\_\_\_\_ Blk \_\_\_\_\_ Subdivision \_\_\_\_\_  
Address at well location: Same

(11) WATER LEVEL: Completed well.

Depth at which water was first found 175 ft.  
Static level 160 ft. below land surface, Date 3/29/83  
Artesian pressure \_\_\_\_\_ lbs. per square inch. Date \_\_\_\_\_

(12) WELL LOG:

Diameter of well below casing 8  
Depth drilled 320 ft. Depth of completed well 320 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
Topsoil	0	3	
Red Clay	3	16	1
Brown Clay	16	32	
Black Basalt	32	40	6
Brown Claystone	40	51	0
Blue Claystone	51	85	
Black Basalt	85	165	
Very Broken Basalt	165	195	100 gpm
Brown Sandstone	195	220	
Visicular Basalt	220	245	50 gpm
Brown Basalt	245	260	
Soft Black Basalt	260	310	50 gpm
Very Soft Black Visicular Basalt	310	320	100 gpm

Work started 3/18 19 83 Completed 3/28 19 83  
Date well drilling machine moved off of well 3/29 19 83

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] Ruth Date 4/1, 19 83  
(Drilling Machine Operator)

Drilling Machine Operator's License No. 760

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 Friesen Drilling Co. Inc.  
(Person, firm or corporation) (Type or print)  
Address 18075 S. Alameda Rd NE Silverton  
[Signed] Ruth  
(Water Well Contractor)  
Contractor's License No. 566 Date 4/1, 19 83

(1) OWNER:

Name David Bielenberg  
Address 16425 Herigstad Rd NE  
City Silverton State OR.

(2) TYPE OF WORK (check):

New Well  Deepening  Reconditioning  Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

(4) PROPOSED USE (check):

Rotary Air  Driven  Domestic  Industrial  Municipal   
Rotary Mud  Dog  Irrigation  Test Well  Other   
 Bored  Thermal:  Withdrawal  Reinjection

(5) CASING INSTALLED:

Steel  Plastic   
Threaded  Welded

8 "Diam. from +1 ft. to 8.5 ft. Gauge 250  
"Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gauge \_\_\_\_\_

LINER INSTALLED:

"Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gauge \_\_\_\_\_

(6) PERFORATIONS:

Perforated?  Yes  No

Type of perforator used \_\_\_\_\_

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 \_\_\_\_\_

Type \_\_\_\_\_ Model No. \_\_\_\_\_  
Diam. \_\_\_\_\_ Slot Size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ 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? \_\_\_\_\_  
\_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

Air test 300 gal./min. with drill stem at 320 ft. 2 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 6 Bentonite

Well sealed from land surface to 45 ft.

Diameter of well bore to bottom of seal 8 1/2 in.

Diameter of well bore below seal \_\_\_\_\_ in.

Number of sacks of cement used in well seal \_\_\_\_\_ sacks

How was cement grout placed? 400 lbs Bentonite to

200 gal. water

Was pump installed? NO Type \_\_\_\_\_ HP \_\_\_\_\_ Depth \_\_\_\_\_ ft.

Was a drive shoe used?  Yes  No Plug \_\_\_\_\_ 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.

NOTICE TO WATER WELL CONTRACTOR

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

WATER RESOURCES DEPARTMENT,  
SALEM, OREGON 97110  
within 30 days from the date of well completion.

SP-12858-090

*Per WWC # How bentonite was placed. poured into 4/21/83*

**MAR 26 2012**  
**5654**

