

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

Application for **Permit Amendment**

Part 1 of 4 - Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

Che	ck all iten	ns included with this application. (N/A = Not Applicable)
\boxtimes	P	art 1 - Completed Minimum Requirements Checklist.
\boxtimes	P	eart 2 - Completed Permit Amendment Application Map Checklist.
\boxtimes	P	eart 3 - Completed Permit Amendment Application - Applicant Information and Signature.
		Part 4 – Completed Permit Amendment Application – Water Use Permit Information. Please include a separate Part 4 for each permit. List all permit(s) to be amended here:
	A	Attachments:
\boxtimes		Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Vater Right Examiner).
		Permit amendment fees – Amount enclosed: \$ 1200. See http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml#fees or call (503) 986-0883.
	po no ht	Request for Assignment Form and statutory fee. The request for assignment form has to be ompleted if the applicant is not the permit holder of record and needs to be assigned to the permit; or the landowner of the proposed place of use is not the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml). Assignment is not needed if pplicant is the permit holder of record.
		Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant, or other permit holders of record that are not listed as applicants.
		and Use Information Form with approval and signature (or signed land use form receipt tub). Land use form is not required if any of the following apply:
		☐ Water is to be diverted, conveyed, and/or used only on federal lands.
		All of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
		The proposed changes are all located on the property reviewed in Land Use form enclosed in Water Right Application Folder #
\boxtimes		For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, Water Well Report(s)/Well Log(s)
REC	EIVE	(-)
	2 4 2012	Application fee not enclosed/insufficient Map not included or incomplete Assignment Form and fee not enclosed/insufficient
WATER RE	ESOURCES D M, OREGON	Additional signature(s) required Part is incomplete Other/Explanation
SALE	M, OREGON	Staff: 503-086-0 Date: / /

Your permit amendment application will be returned if any of the map requirements listed below are not met.

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

		N/A	If more than three permits are involved, separate maps for each permit.
	\boxtimes		Permanent quality printed with dark ink on good quality paper.
	\boxtimes		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
	\boxtimes		A north arrow, a legend, and scale.
	\boxtimes		The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$, $1 \text{ inch} = 1,320 \text{ feet}$, the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$, or a scale that has been preapproved by the Department.
			Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
	\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
			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 use permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
		⊠ N/A	If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
			Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
R		□ N/A EIVE 2 4 2012	If you are proposing a change in point(s) of diversion or well(s), show the proposed action and label it clearly with distance and bearing or coordinates. If GPS coordinates 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°).

WATER RESOURCES DEPT SALEM, OREGON

Part 3 of 4 - Applicant Information and Signature

	JSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
	ily Farm, LLC Ga	avin Joll, d	perations manager	503-864-2328	541-513-2935 cell
DDRESS 16 Poppy Av					FAX NO.
ю Рорру А ТҮ	ve	STATE	ZIP	E-MAIL	•
orona Del N	Mar	CA	97114	gavin@whiterose	awines com
biona Dei N		CA	7/114	gavinagwinterose	ewines.com
	JSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Northwest Farm Credit Services FLCA				503-373-3000	
DDRESS		_			FAX NO.
D Box 1330	9 650 Haw		e SE Suite 210		
TY		STATE	ZIP	E-MAIL	
lem		OR	97309-9831		
ENT/BUSINI DRESS	ESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
DRESS					TAXNO.
ΤΥ		STATE	ZIP	E-MAIL	
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In your own words tell us what change(s) you want made and the reason for the amendment(s): We want to add a second well to the system. The well was already drilled, a pump installed, and piping in place by the previous owner and we thought it was already part of the water right.

Print Name (and Title if applicable)

Applicant Signature

Date

Part 3 of 4 - Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Sanders Family Farm, LLC Ga	vin Joll, o	perations manager	503-864-2328	541-513-2935 cell
ADDRESS				FAX NO.
346 Poppy Ave				
CITY	STATE	ZIP	E-MAIL	
Corona Del Mar	CA	97114	gavin@whiterosewi	nes.com

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Northwest Farm Credit Service	s FLCA			
ADDRESS				FAX NO.
PO Box 13309 650 Haw	thorne Av	e SE 210		
CITY	STATE	ZIP	E-MAIL	
Salem	OR	97309-9831		

Agent Informa	ation — The age	ent is auth	orized to represent	the applicant in	all matters relating to this application
AGENT/BUSINESS	NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS	_				FAX NO.
CITY	CITY STATE			E-MAIL	
DEPARTME Check	NT ELECTRONIC this box if thi	CALLY. C	COPIES OF THE FIN	AL ORDER DOC	LL CORRESPONDENCE FROM THE CUMENTS WILL ALSO BE MAILED. The American Recovery and
Is the appl	icant the pern	nit holde	r of record? 🛚	Yes 🗌 No	
If NO, i	nclude either:				
			nt form (with requirement the applicant(s),		assignment fee), assigning all or a
	An affidavit of applicant to an		•	nolder(s) of reco	ord that gives permission for the

I understand that prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following paper: _____.



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

Applicant Signature	Print Name (and Title if applicable)	$\frac{8/17}{\text{Date}}$	2017
Applicant Signature	Print Name (and Title if annicable)	Doto	

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

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Permit Amendment Application - Page 3 of 7

TACS

Check one of the following:		
☐ The applicant is responsible for corcontinue to be sent to the applicant.	•	Notices and correspondence should
		pleting the proposed change(s) after the should be sent to the permit holder(s)
Check the appropriate box, if applicable	:	
Check here if any of the permits prop by an irrigation or other water district		e or will be located within or served
IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP
Check here if water for any of the perm contract for stored water with a federal ENTITY NAME		ter service agreement or other
CITY	STATE	ZIP
To meet State Land Use Consistency Requirity, municipal corporation, or tribal gover conveyed or used.		
ENTITY NAME Yamhill County Community Development	ADDRESS 525 NE 4th	
CITY McMinnville	STATE Oregon	ZIP 97128
ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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WATER RESOURCES DEPT SALEM, OREGON

Please use a separate Part 4 for each permit being amended.

Instructions: http://www.wrd.state.or.us/OWRD/PUBS/docs/Hints Forms MS Word.doc

PERMIT # G-12793.

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA) (Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Tv	Twp		Twp		Тwp		Тwp		ng	Sec	1/4 1/4		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1		13502	4	S	3	w	3	SE	NE	62	1282' N & 1092' W of E 1/4 cor Sec 3						
Well 2	☐ Authorized ☐ Proposed	25974	4	s	3	w	3	NE	NE	62	Approx 1170' N & 1070' W of E 1/4 cor Sec 3						

Check a	all typ	e(s) of change(s) proposed below (cl	nange	"CODES" are provided in parentheses):
	Place	e of Use (POU)		Point of Appropriation/Well (POA)
	Point	t of Diversion (POD)		Additional Point of Appropriation (APOA)
\boxtimes	Addi	tional Point of Diversion (APOD)		Surface water POD to Ground Water POA (SW/GW)
Will all	of the	proposed changes affect the entire	wate	r use permit?
⊠ `	Yes	Complete only the proposed ("to" lar "CODES" listed above to describe the		ection of Table 2 on the next page. Use the posed changes.
<u> </u>	No	Complete all of Table 2 to describe the	ne poi	rtion of the permit to be changed.

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Table 2. Description of Changes to Water Use Permit # 12793

List only the part of the permit 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.

	3											T
	Priority Date			1994	1994	1994	1994	1994				
Ses	POD(s) or POA(s) to be used (from Table 1)	16,	P(B) sn	#1 & #2	#1 & #2	#1 & #2	#1 & #2	#1 & #2		_		
Proposed ("to" lands) after the changes	Acres (if applicable)	untine seen neur heuri pit john		9'0	0.1	7.2	19.1	RES				27.0
nds) af		same?		99	65	65	65	99				ES
posed ("to" la	Gvt Tax Lot Lot or DLC	collings contact publics larger monitor	200	400	400	400	400	401				TOTAL ACRES
posed	*	mile mile port	111	WN	W	NE	NE	NE				TOT,
Pro	7,2	**** ***	1111	WN	SW	NE NE	SE	SE				
	Sec	t√.,	10	2	7	က	3	က				
	Rng	terion		W	*	*	*	*				
		\$* \$*	2	S 3	S	S	S 3	S				-
	Twp	in 8	. * }	4	4	4	4	4				
	ed (see S." ious	2										
	Proposed Changes (see "CODES" from previous page)	POU/POD	;	APOD	APGD	APOD	APOD	APOD				
ld S	Priority Date	POUP		APOI	APOI	APOL	APOD	APOD				
	Priority Date	100 s t t t t t t t t t t t t t t t t t t		APOI	APOI	APOL	APOD	APOD				
	Priority Date			APOI	APOI	APOL	APOD	APOD				
	Priority Date	Service (C.) S. S. S	-	APOI	APOI	APOL	APOD	APOD				S
	Priority Date	Service (C.) S. S. S	·	APOI	APOI	APOL	APOD	APOD				LACRES
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	Priority Date		TO THE REST OF THE PARTY OF THE	APOI	APOI	APOL	APOD	APOD				TOTAL ACRES

Additional remarks: The upper reservoir was constructed and then, subsequently, removed. The lower reservoir is still in place.

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For a	change i	n place of us	e:							
	the perm s □ No	it holder of r	ecord ow	n or cont	rol the la	nd TO whi	ich the plac	e of use is	being move	ed?
per	mit as a p	downer of the ermit holder tory fee for a	of recor	d by subm	-		_		•	
Is the	propose	d place of use	e contigue	ous to the	authoriz	ed place of	f use? 🔲 Y	es 🗌 No		
unle for t 496 listi	ess the character the purpose of the purpose of the character than the	I place of use ange to non-coses of benefitie e federal Endo of Contiguous porized by roa	ontiguous ng a spec angered S s land beir	s lands is in ies listed a species Ac ng either a	n furthera as sensitiv t of 1973 djacent la	nce of mitigger, threatened (16 U.S.C. and or land)	gation or co ed, or endar 1531 to 154 separated fr	nservation gered under 44), as deter om the lan	efforts under ORS 496. ermined by the distribution of the transfer of the efforts	ertaken 171 to he
		r water right " or "to" lan				mits or gr	ound water	registrati	ons associa	ted
		ne other certifi	_	_		r registratio	n numbers:	CEDTIE	CATE 8647	73
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land to a appl	l for irrigation water right lication or	s) are for irrigation that are so that certificate of ground water	subject to or ground r registrat	transfer m water region modif	nust either istration rication ap	change con nust be file oplication, re	ncurrently of d separately espectively.	or be cance in a water	lled. Any ch right transfe	nange
	_	n point(s) of		•	` ' '	-	` '			
	associat map. (T	g(s) are attach ed with the co lip: You may ops2.wrd.state	orrespond search fo	ing well(s) in Table s on the D	1 above an Department'	nd on the ac	companyin	g application	D
OR				-				AU	IG 2 4 2012	
	Describe have a v	e the construction to the	etion of th	e authoriz	ed and pro	oposed wel	l(s) in Table	e 3 for any WATER F SAL	Wells that da RESOURCES I EM, OREGON	3EPT
Any well(accompary your trans	(s) in this nying appl sfer applic	tion of Pointe listing must b lication map. cation. For pr ght examiner	e clearly Failure to oposed w	tied to cor provide a ells, we re	respondir adequate i commend	information I that you co	is likely to onsult a lice	delay the pensed well	processing o	f
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