

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.

FOR ALL TEMPORARY TRANSFER APPLICATIONS

			TORALL TEMIORARI TRANSFER ATTLICATIONS
	Che	ck all iter	ms included with this application. $(N/A = Not Applicable)$
	\boxtimes		Part 1 - Completed Minimum Requirements Checklist.
	\boxtimes		Part 2 - Completed Temporary Transfer Application Map Checklist.
	\boxtimes		Part 3 – Completed Temporary Transfer Application – Applicant Information and Signature.
	\boxtimes		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: 40090.
	\boxtimes	N/A	For Temporary Transfer (one to five years) Begin Year 2013 End Year 2017.
		□ N/A	Temporary Drought Transfer (For use in counties where the Governor has declared drought)
			Attachments:
	\boxtimes		Completed Temporary Transfer Application Map.
	\boxtimes		Completed Evidence of Use Affidavit and supporting documentation.
	\boxtimes		Current recorded deed for the land from which the authorized place of use is temporarily being moved.
	\boxtimes	N/A	Affidavit(s) of Consent.
	\boxtimes		Fees – Amount enclosed: \$ 912. 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.
	\boxtimes	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.
	\boxtimes	□ N/A	For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, <u>if</u> necessary to convey the water to the new temporary place of use, Water Well Report(s)/Well Log(s).
REC	CE	IVE	(For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):
NO	۷ 1 9	9 2012	Application fee not enclosed/insufficient Map not included or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete
WATER P	RESOL	JRCES DE	

503-986-0

Date:

Staff:

SALEM, OREGON

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. M Permanent quality printed with dark ink on good quality paper. \boxtimes 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. \boxtimes A north arrow, a legend, and scale. \boxtimes 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. \boxtimes 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. \boxtimes Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads. \boxtimes Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches. \boxtimes 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. \boxtimes 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. X 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 **RECEIVE D**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/BUSINESS NAME	CI	21. (F)	PHONE NO.	ADDITIONAL CONTACT NO.
Nunhems USA, Inc. e /o Kevin Manager <i>Tracy</i> Z	andry 56	503-463-7672 <i>20</i> 8-674-4323	5 03-932-6945	
ADDRESS	3,0,0,0	ty, Nunhemalls)	200-014-1923	FAX NO.
8 850 59th Avon ue 1200 A.	nderson (Corner Rd		503-390-098 2
CITY	STATE	ZIP	E-MAIL**	
Salem Parma	OR ID	9730 5 83660	kevin-eleud@bayer.e	<u>em</u>
gent Information – The ag	ent is autho	orized to represent	the applicant in all ma	tters relating to this applicat
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Kevin Cloud, Facil.	ity/Far	m Munager	503-463-7672	503-432-6945
ADDRESS				FAX NO.
8850 59th Ave				503-390-0982
CITY	STATE	ZIP	E-MAIL**	.,
Sole m ** Ry PROVIDING AN F-MA	or	91305	Kevin. cloud@ b.	
DEPARTMENT ELECTRO Check this box if this p	NICALLY.	COPIES OF THE FI	NAL ORDER DOCUME	CORRESPONDENCE FROM T ENTS WILL ALSO BE MAILED an Recovery and
DEPARTMENT ELECTRO Check this box if this p Reinvestment Act. (Fec	onically. oroject is further of the	COPIES OF THE FI ally or partially fullus dollars)	NAL ORDER DOCUME	ENTS WILL ALSO BE MAILER an Recovery and
DEPARTMENT ELECTRO Check this box if this p Reinvestment Act. (Fec Is the applicant the sole ow transfer is located? Yes If NO, include signatures of	oroject is further of the Solution No. and all landown (and mailing)	COPIES OF THE FI ally or partially fullus dollars) land on which the ers (and mailing and	anded by the American e water right, or port	ENTS WILL ALSO BE MAILER an Recovery and
DEPARTMENT ELECTRO Check this box if this p Reinvestment Act. (Fec Is the applicant the sole ow transfer is located? Yes If NO, include signatures of attach affidavits of consent (water right(s) has been conv	oroject is further of the Solution No. and all landown (and mailing reyed.	COPIES OF THE FI ally or partially fu llus dollars) land on which the ers (and mailing and and/or e-mail address	anded by the America e water right, or port for e-mail addresses if disses) from all landowners	an Recovery and ion thereof, proposed for ifferent than the applicant's) or s or individuals/entities to whice
DEPARTMENT ELECTRO Check this box if this p Reinvestment Act. (Fec Is the applicant the sole ow transfer is located? Yes If NO, include signatures of attach affidavits of consent (oroject is further of the Solution No. and all landown (and mailing reyed.	COPIES OF THE FI ally or partially fu llus dollars) land on which the ers (and mailing and and/or e-mail address	e water right, or port /or e-mail addresses if disses) from all landowners ication is true and ac	an Recovery and ion thereof, proposed for afferent than the applicant's) or s or individuals/entities to which curate.
DEPARTMENT ELECTRO Check this box if this p Reinvestment Act. (Fec Is the applicant the sole ow transfer is located? Yes If NO, include signatures of attach affidavits of consent (water right(s) has been conv	oroject is further of the Solution No. and all landown (and mailing reyed.	COPIES OF THE FI ally or partially fullus dollars) land on which the ers (and mailing and and/or e-mail address	ication is true and ac	an Recovery and ion thereof, proposed for ifferent than the applicant's) or sor individuals/entities to which curate.

We want to add a second well for back-up purposes and also to meet Oregon Health Authority requirements for potable water for our employees. The construction of the new well will meet both WRD and OHA requirements.

Additionally, we want to move and rearrange our irrigation rights to the location where they are currently being used, which is all within the original two tax lots on which they were authorized.

The current landowners of the north tax lot, prefer that only a temporary transfer be done at this time.

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DISTRICT NAME	ADDRESS ADDRESS					
СІТҮ	STATE	ZIP				
	y of the rights supplied under a water	r service agreement or other co				
ENTITY NAME	ADDRESS					
СПҮ	STATE	ZIP				
	istency Requirements, you must list r tribal government) within whose ju	•				
ENTITY NAME	ADDRESS					
Marion County	5155 Sleverton Road	5155 Sleverton Road NE				
CITY	STATE	ZIP				
	Oregon	97305				
Salem						
ENTITY NAME	ADDRESS					

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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.

				CEI	RTI	FICA	TE#	40090)	***	
Descr	iption of Water	· Delivery Sy	ster	n							
Systen	n capacity: 0.4	6 cubic feet p	er s	econ	d (c	fs) O	R				
		gallons p	er m	inute	e (gr	m)					
Descri	be the current v	ater delivery	Sys	tem	or th	ie sys	tem th	nat wa	s in pla	ace at s	ome time within the last
five ye	ears. Include in	formation on	the	pum	ps, c	anals	, pipe	lines a	nd spr	inklers	used to divert, convey
											the existing well. A 6" ve inch line extends ea
											reen houses. All field
				_							The greenhouses use
<u>indivi</u>	<u>dual pot emitte</u>	rs.									
Table 1 I d	ocation of Auth	orized and l	Dror		d Da	int(c	of D	ivorci	n (DC	M) or	Appropriation (POA)
	POD/POA nan										
										Tax	
POD/POA	Is this POD/POA	If POA, OWRD Well		:						LOL	Measured Distances
Name or	Authorized on the Certificate or is it Proposed?	Log ID# (or Well ID Tag # L)	Twp		Rng		Sec	V4 V4		DLC	(from a recognized
Number						. •				Gov't	survey corner)
Well 1		MARI 4072	6	s	2	w	16	sw	NE	67	2540' N & 1000' E SW
Wen 1	Proposed	WIARI 40/2	0			**	10	SW	NE	0,	Cor A. Lapratte DLC 67
Well 2	☐ Authorized		6	S	2	W	16	SE	NW	67	2990' N & 475' E SW Cor A. Lapratte DLC 67
	□ Proposed									<u> </u>	Coi A. Lapiatte DEC 07
	all type(s) of t theses):	emporary cl	nang	ge(s)	pro	pose	d belo	w (ch	ange "	'CODE	CS" are provided in
\boxtimes	Place of Use	(POU)						Appro	priatio	n/Well	(POA)
	Point of Div	ersion (POD))				\boxtimes	Additi	onal P	oint of	Appropriation (APOA)
	Additional P	oint of Diver	sion	(AF	OD)					
Check	all type(s) of t	emporary cl	hang	ge(s)	due	to d	rough	it proj	osed	below ((change "CODES" are
	ded in parenth										
	Place of Use	(POU)						Point o	of App	ropriati	ion/Well (POA)
	Character of	Use (USE)						Additi	onal P	oint of	Appropriation (APOA)
	Point of Div	ersion (POD))					Additi	onal P	oint of	Diversion (APOD)
	Wi	ll all of the p	rop	osed	l cha	anges	affec	t the c	ntire	water	right?
OEW/	EN 🗆										of Table 2 on the next
CEIV		page	. Us	se the	e "C	ODE	S" lis	ted abo	ove to	describ	e the proposed changes.

WATER RESOURCES DEPT SALEM, OREGON

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Complete all of Table 2 to describe the portion of the water right to be

⊠ No

changed.

Please use additional pages of Table 2 as needed

Table 2. Description of Temporary Changes to Water Right Certificate # 40090 List only the part of the right that will be changed. For the acreage in each ½ ½, 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.

					 -			· · · ·						,
	Priority Date	1961	1061	1961	1961	1961	1961		1967	1967	1967	1967	1961	
GES	POD(s)/ POA(s) to be used (from Table 1)	POD #5	9# GOd	WELL 1	WELL 1 WELL 2	WELL 1 WELL 2	WELL 1 WELL 2		WELL 1 WELL 2	WELL 1 WELL 2	WELL 1 WELL 2	WELL 1 WELL 2	WELL 1	
Proposed ("to" lands) AFTER THE CHANGES	New Type of USE			R	R	æ	IR		Ħ	R	Ħ	Ħ	Ħ	
FER TH	Acres	0.01	5.0	3.9	0.1	0.2	1.2		13.3	1.0	5.6	1.4	5.3	32.0
AF.	Gvt Lot or DLC	_		67	29	29	67		67	67	29	29	29	ES
lands	Tax Lot	200	200	200	200	200	700		800 800	008 800	700 800	800	800	TOTAL ACRES
(,to	*	X	š	NE	NE	WN	W		NE	NE	NW	SE	SE	OTA
osed	% %	N.	8K	SW	SE	NE	SE		SW	SE	SE	NE	WN	
Prop	Sec	_	77	16	16	16	16		16	16	16	16	16	
	Rng	ъ.	ы	*	*	*	*		*	*	*	*	*	
		6	6	7	7	7	7		7	7	7	7	7	
	Twp	2 S	2	S 9	S 9	S 9	S 9		S 9	S 9	S 9	S 9	S 9	
Proposed	Changes (see "CODES" from previous page)	POU/POD	77.	POU/APOA	POU/APOA	POU/APOA	POU/APOA		APOA	APOA	APOA	APOA	APOA	
\vdash											_			
ES	Priority Date	1901	3	1967	1967	1967	1967		1967	1967	1967	1967	1967	
E CHANG	POD(s) or POA(s) (name or number from Table 1)	POD #1 POD #2	1	WELL 1	WELL 1	WELL 1	WELL 1		WELL 1	WELL 1	WELL 1	WELL 1	WELL 1	
BEFORE TE	Type of USE listed on Certificate	Irrigation	EXAMPLE	IR	IR	IR	IR		IR	IR	IR	IR	IR	
appear	Acres	15.0	;	3.8	0.1	1.3	0.2		13.3	1.0	5.6	1.4	5.3	32.0
they a	Gvt Lot or DLC	consid SARA (com growth, No. 11 to 12 to 1	;	67	29	67	29		67	67	67	67	67	ES
ds) as	Tax Lot	100	:	700 800	700	800	800		700 800	700 800	700 800	800	800	TOTAL ACRES
" lan	%	š	;	NE	SE	WN	SE		NE	NE	WN	SE	SE	OTA
1 21	%	N	:	SW	SE	SE	N N		SW	SE	SE	NE	WN	
LF.		-					16		16	16	16			
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orized ("fro	Sec		;	W 16	W 16	W 1	W		W 1	W 1	W 1	W 16	W 16	
Authorized ("fro		15			2 W					2 W	2 W		2 W	
Authorized ("from" lands) as they appear BEFORE THE CHANG	Sec	3	3	*	*	¥	*		W	¥	×	×	W	

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? \square Yes \boxtimes 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:

\boxtimes	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)

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 aiready built? (Yes or No)	If an existing well, OWRD Well ID Tag No.	Total well depth	Casing Diameter	Casing Intervals (feet)	Scal depth(s) (intervals)	Perforated or surcened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, ctc.)	Weil - specific rate (cfs or gpm). If less than full rate of water right
Well 1	Yes	MARI 4072	160	10"	0-160	18'	perf 95-120 perf 140-158	19'	gravel	
Well 2	No		160' +/-	10"	0-160+/-	per OHA	perf 95-120 & perf 140-158 +/-		gravel	

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