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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

			nd all required att	achments are not	e returned if Parts 1 t completed and inclue and ask for Transfer Section	
Check a	all ite	ms includ	led with this applic	ation. (N/A = Not	Applicable)	
$\boxtimes$		Part 1 – Co	ompleted Minimum	Requirements Che	ecklist.	MAY 09 2013
$\boxtimes$			ompleted Permit An			WATER RESOURCES DEPT
$\boxtimes$		Part 3 – Co	ompleted Permit An	nendment Applica	tion – Applicant Inform	SALEM. OREGON nation and Signature.
$\boxtimes$			-	••	tion – Water Use Perm List all permit(s) to be	it Information. e amended here:
		Attachme	ents:			
$\boxtimes$		+	d Permit Amendmen ht Examiner).	t Application Mar	O (Does not have to be	prepared by a Certified
$\boxtimes$			endment fees – Amo www.wrd.state.or.us		<b>,200</b> . o <u>rms.shtml#fees</u> or call	(503) 986-0883.
	-	completed permit; <b>or</b> needs to b http://www	if the applicant is <b>n</b> the landowner of th e assigned to the per	ot the permit hold e proposed place of mit (the Request f <u>VRD/PUBS/forms</u>	The request for assigner of record and needs of use is <b>not</b> the permit for Assignment Form is <u>.shtml</u> ). Assignment is	to be assigned to the holder of record and s available online at
		,	-		mit holder(s) of record d that are not listed as	if the permit is not assigned applicants.
			Information Form wind use form is not re	••	ignature (or signed lan e following apply:	d use form receipt
			Water is to be diver	rted, conveyed, an	d/or used only on fede	ral lands.
				of water is for irri	ge in place of use only, gation only, and d) the arm use zone.	
		$\boxtimes$		-	on the property review Folder # <b>PERMIT G-</b>	
	-	-	es in point(s) of appr ort(s)/Well Log(s)	ropriation (well(s)	) or additional point(s)	of appropriation, Water
				,	aff Use Only)	
					FOR THE FOLLOWING	
		1	pplication fee not enclos and Use Form not enclos		Map not included or Assignment Form ar	incomplete ad fee not enclosed/insufficient
		Ad	dditional signature(s) rec	quired	Part is incomplete	
		Other/E	Explanation			
		Staff: _	Explanation	503-986-0	Date:/	

Your permit amendment application <u>will be returned</u> 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 not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply. RECEIVED If more than three permits are involved, separate maps for each permit.  $\square$  $\square N/A$ MAY 0 9 2013  $\square$ Permanent quality printed with dark ink on good quality paper.  $\square$ The size of the map can be  $8\frac{1}{2} \times 11$  inches,  $8\frac{1}{2} \times 14$  inches,  $11 \times 17$  inches,  $11 \times 17$  inches,  $8\frac{1}{2} \times 14$  inches,  $11 \times 17$  inches,  $8\frac{1}{2} \times 14$  inches,  $11 \times 17$  inch SALEM, OREGON inches. For 30 x 30 inch maps, one extra copy is required.  $\boxtimes$ A north arrow, a legend, and scale.  $\square$ The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, 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 preapproved by the Department.  $\square$ Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines.  $\square$ 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 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. If you are proposing a change in place of use, show the proposed place of use with  $\square N/A$ 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.  $\boxtimes$ 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 use permit.  $\square$  $\square N/A$ 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  $-42^{\circ}32'15.5''$ ) or degrees-decimal with five or more digits after the decimal (example  $-42.53764^{\circ}$ ).

## **Applicant Information**

APPLICANT/BUSINESS NAME <b>Tim Roth, Roth Family LI</b>			PHONE NO. <b>503-873-8274</b>	ADDITIONAL CONTACT NO.		
ADDRESS				FAX NO.		
12513 Hobart Road						
CITY	STATE	ZIP	E-MAIL	••••••••••••••••••••••••••••••••••••••		
Silverton	OR	97381				

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

AGENT/BUSINESS NAME John Borden Consulting			PHONE NO. <b>503-723-4257</b>	ADDITIONAL CONTACT NO.				
ADDRESS 5597 River St.				FAX NO. <b>503-723-4257</b>				
CITY West Linn	STATE OR	ZIP 97068	E-MAIL jeborden@comcas	st.net				

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Y 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 Recove Rein CEIVED Reinvestment Act. (Federal stimulus dollars)

## Is the applicant the permit holder of record? Yes No

If NO, include either:

- SALEM, OREGON A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

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.

<u>joyce a Roth</u> eant Signature

**Jovce A. Roth** Print Name (and Title if applicable)

5/9/0013

Applicant Signature

\_\_\_\_\_

Print Name (and Title if applicable)

Date

TN11594

In your own words tell us what change(s) you want made and the reason for the amendment(s): **This Permit Amendment Request is to replace one of two permitted wells. Specifically. Tim Roth proposes to replace "Old well #1" (MARI-3467. then MARI-3466. then MARI-63096) with "New well #1" (MARI-63097).** 

No other changes are proposed. The character or type of use remains unchanged. The place of use (POU) remains unchanged.

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## **Applicant Information**

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.					
Tim Roth, Roth Family LLC			503-873-8274						
ADDRESS				FAX NO.					
12513 Hobart Road									
CITY	STATE	ZIP	E-MAIL						
Silverton	OR	97381							

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AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.				
John Borden Consulting			503-723-4257					
ADDRESS				FAX NO.				
5597 River St.	_			503-723-4257				
CITY	STATE	ZIP	E-MAIL					
West Linn	OR	97068	jeborden@comcast.net					

\*\* 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 permit holder of record? Xes No

If NO, include either:

A completed assignment form (with required statutory assignment fee), assignter abread REGON portion of the permit to the applicant(s), **OR** 

An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

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
 Joyce A. Roth

 Print Name (and Title if applicable)
 Date

Applicant Signature

Print Name (and Title if applicable)

In your own words tell us what change(s) you want made and the reason for the amendment(s): <u>This Permit</u> <u>Amendment Request is to replace one of two permitted wells</u>. <u>Specifically, Tim Roth proposes to</u> <u>replace "Old well #1" (MARI-3467, then MARI-3466, then MARI-63096) with "New well #1" (MARI-63097).</u>

No other changes are proposed. The character or type of use remains unchanged. The place of use (POU) remains unchanged.

Date

## Check one of the following:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.

### Check the appropriate box, if applicable:

Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS							
N/A								
CITY	STATE	ZIP						

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

ENTITY NAME	ADDRESS	
N/A		
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	ADDRESS						
Marion County Planning Department	5155 Silverton Road	5155 Silverton Road NE					
CITY	STATE	ZIP					
Salem	OR	OR 97305					

ENTITY NAME N/A	ADDRESS						
CITY	STATE	ZIP					



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## Part 4 of 4 – Water Use Permit Information

## 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-13335

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)	Τv	vp	R	ng	Sec	3/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
1	☐ Authorized ⊠ Proposed	MARI- 63097	6	S	1	w	28	SE	NE		Old Well #1 (Authorized) is no longer used for irrigation New Well #1 is 2013 feet South and 26 feet East from the NE COR of Sec 28
2	Authorized	MARI 51875	6	S	1	W	28	sw	SE		No change - 1500 feet South and 70 feet West from the NW COR DLC 44
	Authorized										
	Authorized Proposed		-								

### Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

 $\square$ Place of Use (POU) Point of Appropriation/Well (POA)

Point of Diversion (POD) 

 $\boxtimes$ 

- Additional Point of Diversion (APOD)  $\square$
- Additional Point of Appropriation (APOA)  $\square$
- $\Box$ Surface water POD to Ground Water POA (SW/GW)

## Will all of the proposed changes affect the entire water use permit?

- Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the  $\boxtimes$  Yes "CODES" listed above to describe the proposed changes.
- □ No Complete all of Table 2 to describe the portion of the permit to be changed.



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Please use additional pages of Table 2 as needed

 

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 Table 2. Description of Changes to Water Use Permit # G-13335

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 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.

								e the change			Proposed ("to" lands) after the changes											
Twp	Rng	Sec	1/4	1⁄4	Tax Lot	Gvt Lot or DLC		POD(s) or POA(s) (name or number from Table 1)	Priority Date	Proposed Changes (see "CODES" from previous page)	Tv	wp	R	ng	Sec	1/4	1/4	Tax Lot		Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date
2 5	9 Ľ	and ,		NW	Annual and an and an an and an an and an an an and an an an and an		15.0	POD #1 POD #2		POU/POD	~	\$	4	£		NW	NW	1(11)	ž	10.0	POD #5	
40 - Ý4		65	- 4	ж.,	**		EXAMPLE.	-9-		64	2	Ś	9	100	w	538	N 44	200		5.0	POD #6	
										POA #1 - POU and type of use remain the same-no changes	6	S	1	w	27	sw	NW			12.5	1&2	12/20/1996
	-									Ditto	6	S	1	w	27	NW	SW			27.8	1&2	12/20/1996
									_	Ditto	6	S	1	W	27	sw	SW	_		26.3	1&2	12/20/1996
		1							<u> </u>	Ditto	6	S	1	w	28	sw	NE			0.2	1 & 2	12/20/1996
										Ditto	6	S	1	W	28	SE	NE			1.2	1 & 2	12/20/1996
						1 -				Ditto	6	S	1	w	28	NE	SE			31.0	1&2	12/20/1996
		1								Ditto	6	S	1	W	28	NW	SE			10.1	1 & 2	12/20/1996
							-			Ditto	6	S	1	w	28	sw	SE			19.2	1 & 2	12/20/1996
										Ditto	6	s	1	w	28	SE	SE			29.7	1 & 2	12/20/1996
<b>`</b>	:																					
			ſ	ΓΟΤΑ	L ACF	RES				. <u> </u>							TO	TAL AC	RES	158.0		

Additional remarks: No change in the POU or character of use is proposed. The attached map only shows the well area, not the entire POU.

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## Permit # G-13335

## For a change in place of use:

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Does the permit holder of record own or control the land TO which the place of use is being moved?  $\Box$  Yes  $\Box$  No SALEM, OREGON

If NO, the landowner of the land TO which the place of use is being moved must be assigned to the **permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

## Is the proposed place of use contiguous to the authorized place of use? [7] Yes [7] No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use unless the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

## Are there other water rights certificates, water use permits or ground water registrations associated with the "from" or "to" lands? Xes I No

If YES, list the other certificate, permit, or ground water registration numbers: G-11434 (SEE COVER LETTER)

If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

## For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

 $\boxtimes$ 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://apps2.wrd.state.or.us/apps/gw/well log/Default.aspx)

## OR

 $\square$ 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	ls 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 #1	Yes	99823	615 feet	10-inch	315 ft	315 ft	None	91.7 ft bgs	Basalt	890 gpm
Well #2	Yes	10563	498	12-inch	292 ft	292 ft	None	52 ft bgs	Basalt	890 gpm
			}	}		)				



Proposed or Authorized POA Name or	already built? (Yes or	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
Number	No)									

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