

Application for Ground Water Registration Modification

Part 1 of 4 - Minimum Requirements Checklist

This Ground Water Registration Modification 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.

	ck all in	cluded with this application (N/A = Not Applicable)							
\boxtimes		Part 1 – Completed Minimum Requirements Checklist.							
\boxtimes		Part 2 – Completed Ground Water Registration Modification Application Map Checklist.							
\boxtimes		Part 3 – Completed Ground Water Registration Modification Application – Applicant Information and Signature.							
\boxtimes		Part 4 – Completed Ground Water Registration Modification Application – Ground Water Registration Information. (Only one ground water registration per application, unless the ground water registrations to be modified are layered).							
\boxtimes		Completed Ground Water Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).							
\boxtimes		Ground water registration modification fees – Amount enclosed: \$ 1,125.00. See http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml#fees or call (503) 986-0883.							
		Attachments:							
	N/A N/A	Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is not the registration certificate holder of record. The Request for Assignment Form is available at http://www.wrd.state.or.us/OWRD/PUBS/docs/forms/req_assign_8_21_09.pdf , or http://www.wrd.state.or.us/OWRD/PUBS/docs/forms/req_assign_8_09.pdf . Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) or the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.							
	□ N/A	Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form 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 structure changes, c) the use of water is for irrigation only, and d) the user the changes 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, Water Well Report/Well Log.							
		Water Well Report/ Well Log. (For Staff Use Only) WATER RESOURCES DEPT SALEM, OREGON							
		WE 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 Assignment Form and fee not enclosed/insufficient							
		Additional signature(s) required Part is incomplete							
		Other/Explanation							

Part 2 of 4 - Ground Water Registration Modification Map Checklist

Your Ground Water Registration Modification 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.

\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 in inches. For 30×30 inch maps, one extra copy is required.	aches, or up to 30 x 30					
\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, t assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a sapproved by the Department.						
\boxtimes		Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recursivey lines.	cognized public land					
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are	recommended.					
\boxtimes		Major physical features including rivers and creeks showing direction reservoirs, roads and railroads.	of flow, lakes and					
\boxtimes		Major water delivery system features from the point(s) of appropriation pipelines, canals, and ditches.	on such as main					
\boxtimes		Existing place of use that includes hachuring, priority date, and use in acres in each quarter-quarter section, government lot, or in each quarter projected within government lots, donation land claims, or other recognized survey subdivisions. If less than the entirety of the registration is being separate hachuring is needed for the portion of the registration left under	er-quarter section as gnized public land g changed, a					
\boxtimes	□ N/A	If you are proposing a modification in place of use, show the proposed hachuring including priority date and use including number of acres in section, government lot, or in each quarter-quarter section as projected lots, donation land claims, or other recognized public land survey sub-	n each quarter-quarter l within government					
\boxtimes		Existing point(s) of appropriation with distance and bearing or coordinate recognized survey corner.	nates from a					
\boxtimes	□ N/A	If you are proposing a modification in point(s) of appropriation, 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 learner minute so 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

pplicant Information				
APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
J. Frank Schmidt III			503-663-4128	FAVNO
ADDRESS 13529 SE LeAnn Ct.				FAX NO.
CITY	STATE	ZIP	E-MAIL	
Boring	OR	97009		
gent Information – The a	gent is autl	norized to repr	esent the applicant in all	matters relating to this application
PPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Pacific Hydro-Geology Inc. / G	Greg Kupil	las	503-632-5016	503-939-3167 (cell)
DDRESS				FAX NO.
8487 S. Valley Vista Road	1		- 1 	
TTY Tuling	STATE OR	2IP 97042	E-MAIL	. aom
Tulino RV PROVIDING AN F-MAII			phggek@bctonline	CORRESPONDENCE FROM THE
or portion thereof, is loc If NO, include signal landowners or indivi	ated? [X] `tures of alduals/enti	Yes No Il landowners ities to which (inderstand that, i	on this form or attach the ground water regis	affidavits of consent from all stration has been conveyed. liminary determination and prior to to provide landownership
information and evidence OR	that I am a	authorized to pu	rsue the modification as ide	entified in OAR 690-382-0400(16)(a
I (we) affirm the applicate the name of the municipal			ed in ORS 540.510(3)(b) a	nd that the right is in RECEI Thy and is acquiring
	ground wa	ter registration	nuthority to condemn proper proposed for modification in the contact on the contact of the conta	ity and is acquiring
submit payment to the Der where the groundwater reg qualifying newspaper is av I (we) affirm that the info	eartment for istration is ailable, I s	or publication of located, once suggest publish contained in t	of a notice in a newspape per week for two consecuing the notice in the foll	nd accurate.
Applicant Signature	_	Print	Name (and Title if applicable)	Date

In your own words tell us what modifications you want made to this ground water registration: <u>Move the place of use and change the point of appropriation as shown on the accompanying map.</u>

Check the appropriate box, if applicable: Check here if the ground water registration proposed for modification is or will be located within or served by an irrigation or other water district. IRRIGATION DISTRICT NAME **ADDRESS** NA ZIP CITY **STATE** Check here if water for the ground water registration is supplied under a water service agreement or other contract with a federal agency or other entity. **ADDRESS ENTITY NAME** NA ZIP **STATE** CITY



CITY

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						
Clackamas County	150 Beavercreek Rd.						
CITY	STATE	ZIP					
Oregon City	OR	97045					

STATE



ZIP

OCT **23** 2013

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Part 4 of 4 - Ground Water Registration Information

Please use a separate Part 4 for each registration being modified. See instructions at http://www.wrd.state.or.us/OWRD/PUBS/docs/Hints_Forms_MS_Word.doc.

Table 1. Location of Authorized and Proposed Point(s) of Appropriation (POA)

(Note: If the POA name is not specified in the registration, assign it a name or number here.)

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	OWRD Well Log ID# (or Well ID Tag # L)	3	Гwр		Rng	Sec	1/4	14 14		1/4 1/4		1/4 1/4		¥4 ¥4		Measured Distances (from a recognized survey corner)
Compton Well	✓ Authorized✓ Proposed	CLAC 5476	2	s	4	E	4	NW	NW	3711	300' south and 400' east from the NW corner of Section 4						
Shosnig Well	☐ Authorized ☐ Proposed	CLAC 5504	2	s	4	E	5	SE	NE	200	1975' South and 250' West of NE Corner of Section 5						
	☐ Authorized																
	☐ Proposed																
	Authorized																
	☐ Proposed																
	theses): Place of Use	(POU)	ıs(s)	pro	pos	ed be		Point (of App	ropriat	ES" are provided in ion (well) (POA) Appropriation (APOA)						
Will a	Character of Use (USE) Additional Point of Appropriation (APOA) Will all of the proposed changes affect the entire ground water registration?																
\boxtimes	-	ete only the p ES" listed ab	-		•		•				the next page. Use the						
	No Compl	ete all of Tab	ole 2	to d	esc	ribe th	ne port	ion of	the re	gistrati	on to be changed.						



Please use additional pages of Table 2 as needed

Table 2. Description of Modifications to Registration Certificate # 1490

List only the part of the registration that will be modified. For the acreage in each 1/4 1/4, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

	Authori	zed (("from" la	nds) as	they	appear	BEFORE TI	HE CHANG	ES	Proposed]	Prop	osed	("to"	lands)	AFT	ER TH	E CHANC	GES	
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)	Date		Twp	Rnį	g	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
										POU/POD	2 S	4	E	5	SE	NE	200, 201		20.00		Shosnig Well	4/23/58
						- -										_						
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			TOTA	AL AC	RES			+	<u> </u>						1	TOTA	L AC	RES	20.00			

Additional remarks: It is the intent of this application that this Groundwater Registration be registered in the name of J. Frank Schmidt III, upon approval of this modification.

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Certificate of Registration # GR-1490

For a modification in place of use or character of use:

Are there other water right certificates, wa	iter use	permits, o	or ground	water	registrations
associated with the "from" or "to" lands?	⊠ Yes	□ No			



If YES, list the other certificate, water use permit, or other ground water registration numbers: **CERTIFICATE 86892 (NURSERY OPERATIONS – NOT A LAYERED RIGHT)**

Pursuant to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a ground water registration on the "to" lands must be filed separately with a ground water registration modification.

For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:

\boxtimes	Well log(s) are attached for each well 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/)
OR	
	Describe the construction of the 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	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
NA										
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