## Part 4 of 5 - Applicant Information and Signature

#### **Applicant Information**

APPLICANT/BUSINESS	NAME		PHONE NO.	ADDITIONAL CONTACT NO.						
Richard and Shirley	V. Gingerich	503-651-3742	503-708-7896							
ADDRESS			FAX NO.							
P.O. Box 910			503-651-3166							
CITY	STATE	ZIP	E-MAIL							
Canby	OR	97013	verneg@gingerich	verneg@gingerich.com						
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE										
DEPARTMENT ELE	DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.									

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

•				
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
John Borden Consulting			503-723-4257	
ADDRESS				FAX NO.
5597 River St.				
CITY	STATE	ZIP	E-MAIL	
West Linn	OR	97068	jeborden@comcas	t.net
BY PROVIDING AN E-MAI	L ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALL C	CORRESPONDENCE FROM THE
DEPARTMENT ELECTRON	NICALLY. CO	PIES OF THE I	FINAL ORDER DOCUME	NTS WILL ALSO BE MAILED.
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Explain in your own words what you propose to accomplish with this transfer application, and why:

Beginning about two years ago, the well (CLAC-012796) serving this right (C-88893) began to fail.

After performing some experimentation, Westerberg Drilling advised us that it is "un-fixable."

As such, and based upon conversations with CWRE John Borden and WRD staff, we conclude that we need at least three additional wells. To that end, we are proposing seven (7) potential replacement locations because we assume that the Water Resources Department will not approve all locations.

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery ar	nd
Reinvestment Act. (Federal stimulus dollars)	

#### **Check One Box**

$\boxtimes$	By signing this application, I understand that, upon receipt of the draft preliminary determination are	d prior to		
	By signing this application, I understand that, upon receipt of the draft preliminary determination are Department approval of the transfer, I will be required to provide landownership information and	dende that I	WF	
	authorized to pursue the transfer as identified in OAR 690-380-4010(5); <b>OR</b>		4 500	ı
	I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the	IAN 9 1	2044	

name of the municipality or a predecessor; OR

I affirm the applicant is an entity with the authority to condemn property and is acquiring by

condemnation the property to which the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and hav WATER RESOURCES DEPT supporting documentation.

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I understand that prior to Department approval of the transfer application, 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 water right 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 newspaper: Canby Herald (failing that, the Molalla Pioneer)

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



Applicant signature	Print Name (and Title if applicable)	1/14/14 Date	
Applicant signature	Print Name (and Title if applicable)	Menager) Date	
Is the applicant the sole owner of the			propose

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 deeded 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) were conveyed.

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nould										
The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.										
Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.										
At this time, are the lands in this transfer application in the process of being sold?   Yes   No										
If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.										
r,										
Ю.										
Describe any special ownership circumstances here: N/A  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.)  IRRIGATION DISTRICT NAME  ADDRESS										
rved by										
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## **INSTRUCTIONS** for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please save the application form to your computer. Unlock the document by using one of the following

instructions for your Microsoft Word software version:

#### Microsoft Word 2003

Unlock the document by one of the following:

- Using the Tools menu => click Unprotect Document;
   OR
- Using the Forms toolbar => click on the Protect/Unprotect icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the Tools menu => click Protect Document;
   OR
- Using the Forms toolbar => click on the Protect/Unprotect icon.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

#### Microsoft Word 2007

- Unlock the document by clicking the Review tab, then click Protect Document, then click
   Stop Protect
- To relock the document, click Editing Restrictions, then click Allow Only This Type of Editing, select Filling In Forms from the drop-down menu, then check Yes, Start Enforcing Protection.

#### Microsoft Word 2010

- Unlock the document by clicking the **Review** tab, toggle the **Restrict Editing icon** at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the "**Allow only this type of editing** in the document: **Filling in forms**" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the Editing Restrictions/Allow Only This Type of Editing/Filling In Forms box from the drop-down menu, then check Yes, Start Enforcing Protection. You do not need to assign a password for the editing restrictions.

#### Other Alternatives:

- Photocopy pages or tables in Part 5, mark-through any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

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Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

### **CERTIFICATE # 88893**

### **Description of Water Delivery System**

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System capacity: 1.0 cubic feet per second (cfs) OR

449 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. A 40 HP turbine pump located in CLAC-012796 pumps water via 232 feet of a 10-inch diameter buried header to various locations within the Place of Use shown on the map associated with this right. Six (6) inch buried main lines carry water through a berry field, with three (3) inch sub-main lines and two (2) inch laterals delivering water to 14 irrigation blocks of 60-150 overhead sprinklers with 1/8" to 5/32" diameter nozzles. The system also feeds 10 acre blueberry blocks watered by double drip lines with eighteen (18) inch emitter spacing (0.42 gph per emitter, 41.5 gpm per acre). When the drip system was installed in 2006, a pressure regulating valve was placed on the incoming end of the filter system to keep pressure from building up too high. By 2012, a pressure sustaining valve had to be placed on the outgoing end of the filter system to maintain high enough pressure to allow a good back flush through the sand filters. In 2013, the pump was removed and the well was flushed to remove sand and hopefully improve pressure. This was ultimately unsuccessful. During the 2013 harvest season, in order to maintain a pressure of 40 psi, suitable to allow injection into the drip system, only 6.6 acres could be irrigated at a time.

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)	Т	`wp	R	Rng Sec		1/4	1/4 1/4		Measured Distances (from a recognized survey corner)	
Well	□ Authorized     □ Proposed	CLAC- 012796	4	4 S 1		E	35	SE	SE	N/A	650 feet North & 1290 feet West from SE Cor, Sec. 35	
1	☐ Authorized ☐ Proposed	N/A	4	S	1	E	35	NE	SE	N/A	1917 feet North & 19 feet West from SE Cor, Sec. 35	
2	☐ Authorized ☐ Proposed	N/A	4	s	1	E	35	NW SE		N/A	1871 feet North & 1330 feet West from SE Cor, Sec. 35	
3	☐ Authorized ☐ Proposed	N/A	4	s	1	E	35	SE	SE	N/A	1267 feet North & 1295 feet West from SE Cor, Sec. 35	
4	☐ Authorized ☐ Proposed	N/A	4	s	1	E 35		SE	SE	N/A	663 feet North & 1210 feet West from SE Cor, Sec. 35	
5	☐ Authorized ☐ Proposed	N/A	4	s	1	E	35	SE	SE SE	N/A	659 feet North & 538 feet West from SE Cor, Sec. 35	
6	☐ Authorized ☐ Proposed	N/A	4	s	1	E	35	SE	SE	N/A	615 feet North & 534 feet West from SE Cor, Sec. 35	

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

	Place of Use (POU)	Ш	Supplemental Use to Primary Use (S to P)
	Character of Use (USE)	$\boxtimes$	Point of Appropriation/Well (POA)
	Point of Diversion (POD)		Additional Point of Appropriation (APOA)
	Additional Point of Diversion (APOD)		Substitution (SUB)
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV)
Will all	of the proposed changes affect the entire	e wate	r right?
X Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the pro-		s) section of Table 2 on the next page. Use the changes.
□No	Complete all of Table 2 to describe the po	ortion	of the water right to be changed.

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Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

Contact the Department at 503-986-0900 and ask for Transfer Staff. Do you have questions about how to fill-out the tables?

Table 2. Description of Changes to Water Right Certificate # 88893 - No change in POU; Only POA's proposed to be added.

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

		nagening Bassasa semakkan	5-2000000000000000000000000000000000000	 	_							
ES	Priority Date											
CHANG	POD(s)/ POA(s) to be used (from Table 1)											
PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.	New Type of USE											
or "or ER PR le.	cres		G									
(the "to" cear AFTE	Gvt Lot or DLC											ES:
ED (tl appea ar	Tax	1										LACR
PROPOSED (the "to" or "on" lands) it would appear AFTER PROPOSEI are made.	7, 7,											TOTAL ACRES:
ting as	Sec									1		
The lis	Rng				-							
	Тwp											
Proposed Change (see												
NGES		Ξ										
ds) OSED CHA	POD(s) or POA(s) (name Priority or number Date from Table 1)						<b>~</b> \	=11	E	a		
AUTHORIZED (the "from" or "off" lands)  The listing that appears on the certificate BEFORE PROPOSED CHANGES  List only that part or nortion of the water right that will be changed.	Type of USE listed on Certificate				,	RE	JA <sup>1</sup>	21	SC/	ES DI GON	EPT	
from" te BEF	Acres					1	ATER	ALEN	OPI			
(the '	Gwt Lot on DLC											ES:
SIZED the ce	Tax											ACRI
AUTHOF appears on that part or	7. 7.											TOTAL ACRES:
g that a	Sec		in in fi									
listing	Rng		X El a									
The	Twp											
		The second second second	100 July 7-50	 								

Additional remarks: No change in POU - Several POA's proposed to be added.

Revised 7/1/2013

1	For Place of Use or Character of Use Changes							
	Are there other water right certificates, water use permits or ground water registr with the "from" or the "to" lands? $\square$ Yes $\boxtimes$ No	rations associated						
	If YES, list the certificate, water use permit, or ground water registration number	ers:						
Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.								
j	For Substitution (ground water supplemental irrigation will be substituted for surirrigation)	• •						
	Ground water supplemental Permit or Certificate # N/A;	RECEIVED						
	Surface water primary Certificate # N/A.	JAN 2 1 2014						
I	For a change from Supplemental Irrigation Use to Primary Irrigation Use	WATER RESOURCE						
	Identify the primary certificate to be cancelled. Certificate # $N/A$	WATER RESOURCES DEPT SALEM, OREGON						
I	For a change in point(s) of appropriation (well(s)) or additional point(s) of ap	propriation:						
	Well log(s) are attached for each authorized and proposed well(s) that are c with the corresponding well(s) in Table 1 above and on the accompanying a <b>Tip</b> : You may search for well logs on the Department's web page at: <a href="http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx">http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx</a>	•						
	AND/OR							
	Describe the construction of the authorized and proposed well(s) in Table 3	for any wells that do not						

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

#### 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 the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

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 han full rate of water right
1	Yes	CLAC- 12796	265	10-inch	217 feet	19 feet	??	33 feet	Sand	350 gpm
2	No	TBD	265 est.	10-inch est.	217 feet est.	19 feet est.	??	??	Sand est.	350 gpm est.
3	No	TBD	265 est	10-inch est.	217 feet est.	19 feet est.	??	??	Sand est.	350 gpm est.
4	No	TBD	265 est	10-inch est.	217 feet est.	19 feet est.	??	??	Sand est.	350 gpm est.

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 han full rate of water right
5	No	TBD	265 est	10-inch est.	217 feet est.	19 feet est.	??	??	Sand est.	350 gpm est.
6	No	TBD	265 est	10-inch est.	217 feet est.	19 feet est.	??	??	Sand est.	350 gpm est.

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