

Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Andy Root/Rattlesnake Creek Land & Cattle, LLC		PHONE NO. 541-573-3615	ADDITIONAL CONTACT NO.
ADDRESS 524 HIGHWAY 20 NORTH			FAX NO.
CITY HINES	STATE OR	ZIP 97738	E-MAIL

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

AGENT/BUSINESS NAME Scott D. Montgomery/All Points Engr & Surveying		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401
ADDRESS PO Box 767			FAX NO. 541-585-4602
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com

If an agent is listed above, please check **one** of the following:

- Please send all correspondence to Agent. Send copies of correspondence to Applicant; **OR**
- Please send all correspondence to Applicant. Send copies of correspondence to Agent.
- Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

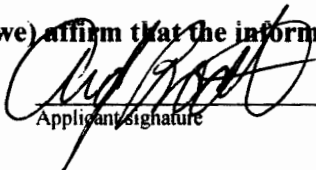
Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No

If NO, include signatures of all landowners (and mailing address if different than the applicant's) or attach affidavits of consent (and mailing addresses) from all landowners or individuals/entities to which the water right(s) has been conveyed.

Permanent Transfers Only (check one box)

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I affirm that the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

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


 Applicant signature

Andy Root, Owner
 Name (and title if applicable) (print) 1-23-14
 Date

Applicant signature

Name (and title if applicable) (print) Date

In your own words tell us what change(s) you want made and the reason for the change(s): **Add new Wells to supplement the water and allow flexibility for sources of water.**

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Check the following boxes that apply:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- 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.
- 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.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. (To learn about sale agreements please visit our web site at: <http://www.l.wrd.state.or.us/pdfs/Transfer-Property-Transactions.pdf>)

RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	


Describe any special ownership circumstances here: _____

- 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	
CITY	STATE	ZIP

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

ENTITY NAME HARNEY COUNTY	ADDRESS 450 N BUENA VISTA	
CITY BURNS	STATE OR	ZIP 97720

 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	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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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/forms.shtml>.

CERTIFICATE # 88990

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Description of Water Delivery System

System capacity: 4.92 cubic feet per second (cfs) OR

_____ gallons per minute (gpm)

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. _____

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-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
WELL 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	L102506	25 S	30 E	33	NE NW	2600	1317' SOUTH & 1355' EAST FROM NW CORNER, SECTION 33
WELL 5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L26615	25 S	30 E	33	SW NE	3600	4195' SOUTH & 1877' EAST FROM NW CORNER, SECTION 33
WELL 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L72702	25 S	34 E	34	SE SW	2002	4725' SOUTH & 1877' EAST FROM NW CORNER, SECTION 34
WELL 9	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L107672	25 S	30 E	33	SW SW	2500	4423' SOUTH & 2750' WEST FROM NEW CORNER, SECTION 33
WELL 10	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L102536	26 S	30 E	3	NW NW	800	6310' SOUTH & 415' EAST FROM NW CORNER, SECTION 33
WELL 11	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L102534	26 S	30 E	33	NW NW	800	6340' SOUTH & 330' EAST FROM NW CORNER, SECTION 34
WELL 12	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L107659	25 S	30 E	33	SE NW	2500	2690' SOUTH & 2890' WEST FROM NE CORNER, SECTION 33
WELL 13	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L104470	25 S	30 E	33	NE NE	900	6415' SOUTH & 27455' WEST FROM NE CORNER, SECTION 33
WELL 14	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L109033	25 S	30 E	33	NE SE	3600	1000' NORTH & 10' WEST FROM SE CORNER, SECTION 33
WELL 15	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L111173	25 S	30 E	33	NE SE	3600	1000' NORTH & 30' WEST FROM SE CORNER, SECTION 33

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

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water
POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

Will all of the proposed changes affect the entire water right?

- Yes Complete only the Proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the water right to be changed.

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Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Right Certificate # 88990

List only the part of the right 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.

Authorized ("from" lands) as they appear BEFORE THE CHANGES										Proposed ("to" lands) AFTER THE CHANGES													
Twp	Ring	Sec	1/4	1/4	Tax Lot	Gvt Lot	Acres	Type of USE listed on	POD(s) or POA(s)	Priority Date	Proposed Changes (see "CODES" from	Twp	Ring	Sec	1/4	1/4	Tax Lot	Gvt Lot	Acres	New Type of USE	POD(s) or POA(s) to	Priority Date	
											APOA	25 S	30 E	28	NW	SW				30.8	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	28	SW	SW				33.6	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	29	NE	SE				33.6	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	29	NW	SE				2.6	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	29	SW	SE				3.5	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	29	SE	SE				38.0	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	32	NE	NE				34.9	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	32	NW	NE				31.1	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	32	SW	NE				31.0	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	32	SE	NE				31.2	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	33	NE	NW				30.0	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	33	NW	NW				32.9	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	33	SW	NW				30.2	Irr	1,5,7,9,10, 11,12,13,1	1995
											APOA	25 S	30 E	33	SE	NW				30.1	Irr	1,5,7,9,10, 11,12,13,1	1995
TOTAL ACRES										TOTAL ACRES													
										393.5													

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Additional remarks: _____ JAN 29 2014


Additional remarks: _____

ertificate # **88990**

For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: _____

 Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to 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.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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 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	L102506	170'	14"	*1 to -107	0 to 18		70'	Cinder, Sandstone	
Well 5	Yes	L26615	125'	16"	*2 to -38 -25 to -105	0 to 38 -25 to -115		74'	Sand,clay, basalt	
Well 7	Yes	L72702	375'	14"	*3 to -77	0 to -44		98'	Cinder, basalt,clay	
Well 9	Yes	L107672	188'	14"	*2 to -110	0 to -18		103'	Sand,clay,cinder,basalt	

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
Well 10	Yes	L102536	167'	14"	*1.5 to -60	0 to -18		104'	Cinder, clay, basalt	
Well 11	Yes	L102534	195'	14"	*2 to -102	0 to -24		104'	Sand, cinder	
Well 12	Yes	L107659	170'	14"	-12 to -108	0 to -18		88'	Sand, clay, cinder, rock	
Well 13	Yes	L104470	280'	14"	0 to -35	0 to -35		92'	Sand, clay, gravel	
Well 14	Yes	L109033	232'	14"	2 to -94	0 to -18		94'	Sand, clay, cinder	
Well 15	Yes	L111173	310'	14"	2 to -183	0 to -18		107'	Sand, clay, cinder	

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