Part 4 of 5 - Applicant Information and Signature

Applicant Information

| APPLICANT/BUSINESS NAME | 3 | | PHONE NO. | ADDITIONAL CONTACT NO. | | | | | | | |
|---|----------------|--------------|--------------------|--------------------------|--|--|--|--|--|--|--|
| BANE INVESTMENTS I | LLC | 541-426-3344 | | | | | | | | | |
| ADDRESS | | | | FAX NO. | | | | | | | |
| P.O. BOX 337 | | | | | | | | | | | |
| CITY | STATE | ZIP | E-MAIL | | | | | | | | |
| ENTERPRISE | OREGON | 97828 | | | | | | | | | |
| BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE | | | | | | | | | | | |
| DEPARTMENT ELECTR | ONICALLY, COPI | ES OF THE F | INAL ORDER DOCUMEN | ITS WILL ALSO BE MAILED. | | | | | | | |

| AGENT/BUSINESS NAME GREGORY T. BLACKMAN | | PHONE NO. 541-963-6771 | ADDITIONAL CONTACT NO. 541-786-2859 CELL | |
|--|---|------------------------------------|---|---|
| ADDRESS 126 RIDGE DRIVE | | | | FAX NO. |
| CITY LA GRANDE | STATE OREGON | ZIP 97850 | E-MAIL gtblack@eoni.com | 1 |
| | | | | ORRESPONDENCE FROM THE NTS WILL ALSO BE MAILED. |
| | | | | others to access the existing |
| also a supplemental ground access to the well, as it is i | d water right nside a place | t that will reme e of business, | ain on the property, and eventually the ri | ight will die for non use. |
| also a supplemental ground access to the well, as it is in the second of | d water right nside a place ntinue on a sep project is ful | t that will reme of business, | ain on the property, and eventually the ri | however there will be no ight will die for non use. |

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: The Wallowa County Chieftan

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



1-21-14 Date

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JAN 24 2044CS

Applicant signature J. Bane

Jane
Elizabeth June Bane
Print Name (and Title if applicable)

<u>01/21/2014</u> Date

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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JAN 24 2014

SALEM, OR

| • | Check the following boxes t | hat apply | <i>):</i> | | | | | | | | |
|-------------|--|---------------------|--------------------------|----------------------|-----------------------------|--|--|--|--|--|--|
| | The applicant is resp continue to be sent t | | | etion of o | change(s). No | otices and co | orrespondence should | | | | |
| | The receiving lando final order is issued. | wner will Copies | be respond of notices | nsible fo and cor | r completing trespondence s | he propose hould be se | d change(s) after the ent to this landowner. | | | | |
| | Both the receiving la Copies of notices an | | | | | | | | | | |
| | At this time, are the lands in | n this tran | sfer appli | cation ir | the process o | f being sol | d? ☐ Yes ⊠ No | | | | |
| | If YES, and you know vinformation table below assignment will have to | . If you | do not kno | ow who | | | | | | | |
| | If a property sells, the counless a sale agreement http://www.oregon.gov/ | or other o | document | states of | herwise. For | more infori | | | | | |
| | RECEIVING LANDOWNER NAME NA | | | | PHONE NO. | ADD | ITIONAL CONTACT NO. | | | | |
| | ADDRESS | | | | | FAX | NO. | | | | |
| | CITY | STATE | ZIP | | E-MAIL | | | | | | |
| | Check here if any of the an irrigation or other wa | | | Complet | e and attach S | | | | | | |
| | IRRIGATION DISTRICT NAME NA | | | ADDRESS | 3 | | | | | | |
| | CITY | | | STATE | | ZIP | | | | | |
| | Check here if water for a for stored water with a f | | | | | ervice agree | ement or other contract | | | | |
| | ENTITY NAME NA | | | ADDRESS | } | | | | | | |
| | CITY | | | STATE | | ZIP | | | | | |
| > | To meet State Land Use Cocorporation, or tribal govern | | | | | | | | | | |
| | ENTITY NAME City of Enterprise | | | ADDRESS | 1st Street | And the land of the control of the c | | | | | |
| | CITY | | | STATE | 1 311661 | ZIP | | | | | |
| | Enterprise | | | Oregon | | 978 | 28 | | | | |
| | ENTITY NAME | | | ADDRESS | 3 | R | ECEIVED BY OWNE | | | | |
| | CITY STATE ZIP | | | | | | | | | | |

SALEM, OR

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 # 39329

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Description of Water Delivery System

JAN 24 2014

System capacity: **0.07** cubic feet per second (cfs) **OR**

31.43 gallons per minute (gpm)

SALEM, OF

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. The current dilivery system consists of Stayrite 1 HP motor and centrifugal pump. The water is pumped into a 2" PVC distribution line and uses a total of 30 Rainbird twist on sprinklers. Owner said only 6 sprinklers can be used at a time due to volume. The sprinklers are all 5/32 run at a 45 psi. This computes at

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) | | \wp | R | ng | Sec | 1 | Z | Tax Lot, DLC or Gov't Lot | Measured Distances (from a recognized survey corner) | |
|------------------------------|--|--|---|-----|----|----|-----|----------|--|--|--|--|
| POD # 1 | □ Authorized □ Proposed | | 2 | S | 44 | E | 2 | NW | NE | 8701 | S 58 12' W, 1859 FT. FROM NE COR. SEC 2 | |
| POD # 2 | ✓ Authorized✓ Proposed | WALL 275 | 2 | S | 44 | E | 2 | NW | NE | 8702 | S 55 15' W, 1645 ft. from NE Cor. of Sec. 2 | |
| POD # 3 | ☐ Authorized ☐ Proposed | | 2 | S | 44 | E | 2 | NW | NE | 8600 | S 1180.9', W 1533.4 FT From NE Cor. Sec. 2 | |
| | ☐ Authorized ☐ Proposed | | | | | | | | Property and constant control of the | | | |

| | — . | | L | | | | | | | | | |
|-------------|--|---------------------|----------|-----------------------------|-----------|-----------------|---------|--|--|--|--|--|
| Check | all type(s) of change(s) | proposed below (| (change | "CODES" a | re prov | vided in parent | heses): | | | | | |
| | Place of Use (POU) | | | Supplementa | l Use to | Primary Use (S | S to P) | | | | | |
| | Character of Use (USI | Ε) | | Point of App | ropriati | on/Well (POA) | | | | | | |
| \boxtimes | Point of Diversion (Po | DD) | | Additional Po | oint of A | Appropriation (| APOA) | | | | | |
| | Additional Point of Di | version (APOD) | | Substitution (SUB) | | | | | | | | |
| | Surface Water POD to POA (SW/GW) | Ground Water | | Government Action POD (GOV) | | | | | | | | |
| Will al | l of the proposed chang | es affect the entir | re wate | right? | | | | | | | | |
| Yes | es Complete only the Proposed ("to" or "on" 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 p | ortion o | f the water rig | ght to b | e changed. | | | | | | |

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

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

Table 2. Description of Changes to Water Right Certificate # 39329

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.

| AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed. | | | | | | | | | | Proposed Changes (see | PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made. | | | | | | | | ES | | | | | | | |
|--|--|----|---|-----|-----|------|------------|----------------------|-------|---|---|------------------|-----------------------------------|---------|-----|----|----|-----|-----|------|------------|----------------------|-------|--------------------|--|------------------|
| Ти | /p | Rn | g | 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) | Priority Date | "CODES" from previous page) | Tv | VIÞ | Rr | ıg | Sec | 1/4 | 1/4 | Tax Lot | Gvt Lot or DLC | Acres | New Type of USE | POD(s)/ POA(s) to be used (from Table 1) | Priority Date |
| | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | s | 44 | E | 2 | NW | NE | 8702 | | 0.39 | Irrig. | Pod # 1 & 2 | 1967 1971 | NONE | 2 | s | 44 | E | 2 | NW | NE | 8702 | | 0.39 | irrig | Pod 1 &2 | 1967 1971 |
| 2 | s | 44 | E | 2 | NW | NE | 8701 | | 0.77 | Irrig. | Pod # 1 & 2 | 1967 1971 | NONE | 2 | s | 44 | E | 2 | NW | NE | 8701 | | 0.77 | Irrig | Pod 1 &2 | 1967 1971 |
| 2 | s | 44 | E | 2 | NW | NE | 8600 | | 0.41 | Irrig. | Pod # 1 & 2 | 1967 1971 | POD | 2 | s | 44 | E | 2 | NW | NE | 8600 | | 0.41 | Irrig. | Pod # 3 | 1967 1971 |
| 2 | s | 44 | E | 2 | NW | NE | 8601 | | 0.67 | Irrig | Pod # 1 & 2 | 1967 1971 | NONE | 2 | s | 44 | E | 2 | NW | NE | 8601 | | 0.67 | Irrig. | Pod 1 &2 | 1967 1971 |
| 2 | s | 44 | E | 2 | NW | NE | 8602 | | 0.62 | Irrig. | Pod # 1 & 2 | 1967 1971 | NONE | 2 | s | 44 | E | 2 | NW | NE | 8602 | | 0.62 | Irrig. | Pod 1 &2 | 1967 1971 |
| 2 | s | 44 | E | 2 | NW | NE | 9000 | | 0.04 | Irrig | Pod # 1 &2 | 1967 1971 | NONE | 2 | s | 44 | E | 2 | NW | NE | 9000 | | 0.04 | Irrig. | Pod 1 &2 | 1967 1971 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | D Ti |
| | | | | | | | | | | | | | | | | | | | | | | | | 03 | JAN | CEIVED |
| | | | | | , | ГОТА | L ACE | RES: | 2.9 | | | | | | | | | | | ГОТА | L ACR | RES: | 2.9 | ALE | Z | |
| | Revised 7/1/2013 Permanent Transfer Application Form – Page 9 of 11 TACS | | | | | | | | | | | SALEM. OR | 4 2014 | NO AB (| | | | | | | | | | | | |

Additional remarks: The right within Tax Lot 9000 is the result of a Lot Line Adjustment, in which the lands were transferred to Tax lot 9000 including the right. The total acres now lying in said Tax Lot 9000 is 0.04 acres and is owned by others. No action is being taken with this acreage..



| | | Certificate # 39329 | | | | | | | | | |
|---|--|---------------------|--|--|--|--|--|--|--|--|--|
| 1 | 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: <u>C-46940.</u> | | | | | | | | | | |
| > | 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. | | | | | | | | | | |
| I | For Substitution (ground water supplemental irrigation will be substituted for surfairrigation) | ace water primary | | | | | | | | | |
| | Ground water supplemental Permit or Certificate # <u>NA;</u> Surface water primary Certificate # <u>NA.</u> | RECEIVED BY OWRD | | | | | | | | | |
| I | For a change from Supplemental Irrigation Use to Primary Irrigation Use | JAN 24 2014 | | | | | | | | | |
| | Identify the primary certificate to be cancelled. Certificate # NA | SALEM, OF | | | | | | | | | |
| I | For a change in point(s) of appropriation (well(s)) or additional point(s) of app | ropriation: | | | | | | | | | |
| | Well log(s) are attached for each authorized and proposed well(s) that are clewith the corresponding well(s) in Table 1 above and on the accompanying at 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 | • | | | | | | | | | |

AND/OR

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 |
|---|--|---|------------------------|--------------------|-------------------------------|---------------------------------|---|--|--|--|
| NA | | | | | | | | | | : |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |