

Part 4 of 5 – Applicant Information and Signature

Applicant Information

| | | | | |
|--|--------------------|---------------------|---|------------------------|
| APPLICANT/BUSINESS NAME Echo Irrigation District | | | PHONE NO. (541)376-5055 | ADDITIONAL CONTACT NO. |
| ADDRESS 73120 Highway 207 | | | | FAX NO. |
| CITY Echo | STATE OR | ZIP 97826 | E-MAIL Craig Reeder [creeder@hale-co.com] | |
| 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. | | | | |

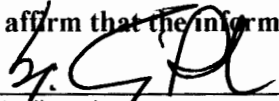
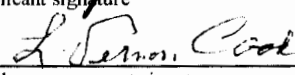
Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

| | | | | |
|--|--------------------|---------------------|-------------------------------------|--|
| AGENT/BUSINESS NAME William Porfily | | | PHONE NO. (541) 449-1327 | ADDITIONAL CONTACT NO. (541)561-7259 |
| ADDRESS P.O. Box 643 | | | | FAX NO. |
| CITY Stanfield | STATE OR | ZIP 97875 | E-MAIL wporfily@gmail.com | |
| 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. | | | | |

Explain in your own words what you propose to accomplish with this transfer application; and why:
To help irrigate a crop with a higher cash value.
 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 and Reinvestment Act. (Federal stimulus dollars)N/A

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


 Applicant signature

 Land owner consent signature

Craig Reeder Manager _____
 Print Name (and Title if applicable) Date
Vernon Cook- Owner _____
 Print Name (and Title if applicable) 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 **Signer Vernon Cook Is the Sole Owner**

If NO, include signatures of all 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) has been conveyed.

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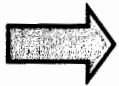
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Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

| | | |
|---|---------------------------------|---------------------|
| DISTRICT NAME Echo Irrigation District c/o Mgr Craig Reeder | ADDRESS 73120 Hwy 207 | |
| CITY Echo | STATE OR | ZIP 97826 |

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 N/A | ADDRESS | |
| 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 Umatilla County | ADDRESS 216 Se 4th | |
| CITY Pendleton | STATE OR | ZIP 97801 |

| | | |
|-------------|---------|-----|
| ENTITY NAME | ADDRESS | |
| CITY | STATE | ZIP |

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Part 5 of 5 – Water Right Information

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.

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Description of Water Delivery System

System capacity: 40 cubic feet per second (cfs) OR
 _____ 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 well, a 20hp submersible pump and a 30 acre center pivot.

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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 #4 | <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed | UMAT 2575 | 4 N | 28 E | 24 | SE NE | TL 107 | 660 ft N & 670 ft W from E ¼ Cor. Sec. 24 |
| Seibel Well | <input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed | UMAT 54154 | 3 N | 29 E | 9 | SE SW | TL 3300 | 380 ft N & 3120 ft W from SE Cor. Sec. 9 |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | |

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

- | | |
|---|---|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | |

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

- | | |
|---|---|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Diversion (APOD) |

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.

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 Temporary Changes to Water Right Certificate # 79889

List only the part of the right that will be changed associated with each change. If more than one

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Drawing Tools tab to change the formatting of the pull quote text box.]

Proposed Changes (see "CODES" from previous page)

are made.

Proposed (the "to" or "on" lands) should appear AFTER PROPOSED CHANGES

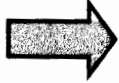
| Twp | Rng | Sec | 1/4 | 1/4 | Tax Lot | Gvt Lot or DLC | Acres | Type of USE listed on Certificate | POD(s) or POA(s) (name or number from Table 1) | Priority Date | Proposed Changes (see "CODES" from previous page) | Twp | Rng | Sec | 1/4 | 1/4 | Tax Lot | Gvt Lot or DLC | Acres | New Type of USE | POD(s) to be used (from Table 1) | Priority Date |
|-------------|------|-----|-----|-----|---------|----------------|-------|-----------------------------------|--|---------------|---|-----|------|-----|-----|-----|---------|----------------|-------|-----------------|----------------------------------|---------------|
| | | | | | | | | | | | | | | | | | | | | | | |
| 4 N | 28 E | 24 | SE | NE | TL 107 | | 29.5 | Irr | Well #4 | 02-25-1977 | POU & POA | 3 N | 29 E | 13 | SE | NW | TL 3900 | | 29.5 | Irr | Schubel Well | 02-25-1977 |
| TOTAL ACRES | | | | | | | | | | | TOTAL ACRES | | | | | | | | | | | |

Additional remarks: _____.

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For Place 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: The “TO” area has a primary water right described in Certificate 80850 and Supplemental Permit S-54773. Under Echo Irr. Dist. 2014 Temporary Transfer these two water rights will become Supplemental to Certificate 79889



If YES, list the certificate, water use permit, or ground water registration numbers: Cert 80850 & Per S-54773 Pursuant to ORS 540.525, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for temporary transfer can be included in the transfer or remain unused on the authorized place of use. If the primary water right does not revert soon enough to allow use of the supplemental right within five years, the supplemental right shall become subject to cancellation for nonuse under ORS 540-610.

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation if necessary to convey the water to the new temporary place of use:

- 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://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 than full rate of water right |
|---|------------------------------------|---|------------------|-----------------|-------------------------|---------------------------|--|--|---|--|
| | | Please refer to the attached Well Logs | | | | | | | | |
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