

Application for Permanent Water Right Transfer

Part 1 of 5 - Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

Cha	alr all ita	ms included with this application (N/A - Not Applicable)	RECEIVED BY OWRD
Cne ⊠	ck all ite	ms included with this application. (N/A = Not Applicable) Part 1 – Completed Minimum Requirements Checklist.	EED A A sour
		•	FEB 09 2015
		Part 2 – Completed Transfer Application Map Checklist. Part 3 – Application Fee, payable by check to the Oregon Water completed Fee Worksheet, page 3. Try the new online fee calculator. If you consider the control of the control o	ulator at:
		Customer Service at (503) 986-0801.	
·⊠		Part 4 – Completed Applicant Information and Signature.	
\boxtimes		Part 5 – Information about Water Rights to be Transferred: Ho be transferred? 1 List them here: Certificate 66815 Please include a separate Part 5 for each water right. (See instr	_
		Attachments:	
\boxtimes		Completed Transfer Application Map.	
\boxtimes		Completed Evidence of Use Affidavit and supporting documer	ntation.
	⊠ N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant do right is on.)	es not own the land the water
	⊠ N/A	Supplemental Form D – For water rights served by or issued in district. Complete when the transfer applicant is not the irrigat	_
	□ N/A	Land Use Information Form with approval and signature (or si stub). Not required if water is to be diverted, conveyed, and/or if all of the following apply: a) a change in place of use only, to use of water is for irrigation only, and d) the use is located with exclusive farm use zone.	r used only on federal lands or o) no structural changes, c) the
\boxtimes	N/A	Water Well Report/Well Log for changes in point(s) of appropriation.	riation (well(s)) or additional
	N/A	Geologist Report for a change from a surface water point of di of appropriation (well), if the proposed well is more than 500' and more than 1000' upstream or downstream from the point of 380-2130 for requirements and applicability.	from the surface water source
		(For Staff Use Only)	
		WE ARE RETURNING YOUR APPLICATION FOR THE FOLLO Application fee not enclosed/insufficient Map not inclu Land Use Form not enclosed or incomplete Additional signature(s) required Part is Other/Explanation	ided or incomplete
		Staff: 503-986-0 Date:	

Your transfer application will be returned if any of the map requirements listed below are not met.

	n	natches t	he existing water right map. Check all boxes that apply.
٥	☒	□ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/ . CWRE stamp and signature are not required for substitutions.
		N/A	If more than three water rights are involved, separate maps are needed for each water right.
	\leq		Permanent quality printed with dark ink on good quality paper.
٥	\leq		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
	\leq		A north arrow, a legend, and scale.
٥	\boxtimes		The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
	\leq		Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines.
	\leq		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
٥	\leq		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
	\boxtimes		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
RECEIVE	₽ D	BY OWF	Existing place of use that includes separate hachuring for each water right, priority date, and
		9 2015	use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is
SAL	LEN	1, OR	being changed, a separate hachuring is needed for lands left unchanged.
		⊠ N/A	Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
	\boxtimes		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
		N/A N/A	If you are proposing a change in point(s) of diversion or well(s), 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 degrees-minutes-seconds with at least one digit after the decimal (example $-42^{\circ}32'15.5"$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

	Part 3 of 5	- Fee	Worksheet
1	Base Fee (includes one type of change to one water right for up to 1 cts)	1	\$1,000
	Types of change proposed:		
	Place of Use		
	Character of Use		
	Point of Diversion/Appropriation		
	Number of above boxes checked = 1 (2a)		
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0		
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » »	2	0
	Number of water rights included in transfer 1 (3a)		
	Subtract 1 from the number in 3a above: 0 (3b) If only one water right this		
	will be 0	·	
3	Multiply line 3b by \$450 and enter » » » » » » » » » » » » » » » » » » »	3	0
	to a well?		
	No: enter 0 » » » » » » » » » » » » » » » » » »		
4		4	\$350
	Do you propose to change the place of use or character of use?	RECEIV	VED BY ON
	\boxtimes No: enter 0 on line 5 \times		
	Yes: enter the cfs for the portions of the rights to be transferred (see		B 0 9 2015
	example below*):(5a)	I FE	0 0 2 2013
	Subtract 1.0 from the number in 5a above:(5b)		
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » »	S	ALEM, OR
	If 5b is greater than 0, round up to the nearest whole number:(5c)		
5	and multiply 5c by \$300, then enter on line 5 » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$1,350
	Is this transfer:		
	necessary to complete a project funded by the Oregon Watershed		
	Enhancement Board (OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net		
	benefit to fish and wildlife habitat?		
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » Transfer Fee:	8	\$1,350
ampl	e for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 10	0 acres)	and 45.0 acres

of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

1. For irrigation calculate cfs for each water right involved as follows:

a. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs ÷100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac = 0.56 cfs).

b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs

2. Add cfs for the portions of water rights on all the land included in the transfer; however do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land. The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

	FEB WORKSHEET for SUBSTITUTION		
1	Base Fee (includes change to one well)	1	\$725.00
	Number of wells included in substitution (2a)	-	
	Subtract 1 from the number in 3a above: (2b) If only one well this will be 0		
2	Multiply line 2b by \$350 and enter » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » Fee for Substitution:	3	\$

Part 4 of 5 - Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.						
Mary Marciel			(541) 932-4732							
ADDRESS				FAX NO.						
54874 Highway 26										
CITY	STATE	ZIP	E-MAIL							
Mt. Vernon	OR	97865								
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE										
DEPARTMENT ELECTRONICA	ALLY. CO	PIES OF THE FIN	AL ORDER DOCUMENT	IS WILL ALSO BE MAILED.						

DEPARTMENT ELECTRONICA	LLY. CO	PIES OF THE FINAL	L ORDER DOCUMEN	TS WILL ALSO BE	MAILED.
Agent Information – The ag	ent is auth	orized to represent	the applicant in all	matters relating to	this application.
AGENT/BUSINESS NAME Sara Haynes / Browne Consulti	ng, LLC		PHONE NO. (541) 523-5170	ADDITIONAL CO	NTACT NO.
ADDRESS 50809 Ellis Road				FAX NO. (541) 523-5170	
CITY North Powder	E-MAIL sara@brownecons	ılting.biz			
BY PROVIDING AN E-MAIL AI DEPARTMENT ELECTRONICA					
Explain in your own words	what you	propose to accor	nplish with this tra	nsfer application	, and why:
The applicant plans to abandor existing water right certificate				, new wells under	their
If you need additional space, cont	inue on a s	eparate piece of pape	er and attach to the app	olication as "Attachr	ment 1".
Check this box if this pre Reinvestment Act. (Fede	-	_	anded by the Amer	ican Recovery a	nd
 By signing this application, I Department approval of the transuthorized to pursue the transum I affirm the applicant is a murname of the municipality or a I affirm the applicant is an encondemnation the property to supporting documentation. 	ransfer, I wasfer as iden nicipality a predecess tity with the	rill be required to pro tified in OAR 690-3 s defined in ORS 54 or; OR e authority to conder	f the draft preliminary ovide landownership in 80-4010(5); OR 0.510(3)(b) and that the mn property and is accommodized	nformation and evidence right is in the REC quiring by	ence that I am CEIVED BY OWRE FEB 0 9 2015
I understand that prior to Depa the Department for publication right is located, once per week suggest publishing the notice i	of a notice for two c	ce in a newspaper vonsecutive weeks.	with general circulat If more than one qu	ion in the area who alifying newspape	ere the water
I (we) affirm that the inform	ation con	tained in this app	lication is true and	accurate.	
Applicant signature	Mar	Print Name (and T	y / MARC	Tel 1/26/1	Ţ
Applicant signature		Print Name (and T	itle if applicable)	Date	_
Is the applicant the sole own			ne water right, or p		

Check the following boxes to	hat apply	:									
The applicant is resp continue to be sent to			change(s). Not	ices and corre	espondence should	I					
The receiving landov final order is issued.											
⊠ Both the receiving la Copies of notices and			•	•	O ()						
At this time, are the lands in	this trans	sfer application i	in the process of	being sold?	☐ Yes ⊠ No						
If YES, and you know winformation table below assignment will have to	. If you d	lo not know who	the new landow	•	•						
If a property sells, the ce unless a sale agreement http://www.oregon.gov/	or other d	locument states of	otherwise. For n	nore informat							
RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIO	NAL CONTACT NO.]					
ADDRESS		14.2		FAX NO.		-					
CITY	STATE	ZIP	E-MAIL								
Describe any special owners Check here if any of the an irrigation or other was	water rig	hts proposed for	transfer are or vete and attach Su			by]					
CITY	***	STATE		ZIP		-					
Check here if water for a for stored water with a f		rights supplied	tity.	rvice agreeme	ent or other contra] act					
ENTITY NAME		ADDRE	SS								
CITY		STATE		ZIP							
To meet State Land Use Co corporation, or tribal govern	nsistency nments wi	Requirements, yithin whose juris	you must list all diction water wi	county, city, r	municipal , conveyed or use	d.					
ENTITY NAME Grant County		ADDRE 201 S	ss Humbolt, Ste 170								
CITY		STATE		ZIP 97820	RECEIVED BY	OWR					
Canyon City		Orego		7/820	FEB 0 9 2						
ENTITY NAME		ADDRE	SS		1 L.D V J Z	17					
CITY		STATE	STATE ZIP SALEM, OR								

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.

				CEI	RTIE	FICA	ATE#	66815	5		
Descri	ption of Water	Delivery Sy	sten	a							
System	capacity: 1.	2 cubic fee	t per	seco	ond (cfs)	OR				
		gallons p	er mi	inute	e (gp	m)					
five year and approximate to the part of t	ars. Include infoly the water at place of use us	formation on the authorized ing mainline orized and l	the ped pleto he	ace and	ps, constants of us and	anal: e. <u>T</u> l wh	s, pipe The wa eel lin) of D	lines a iter is es. iversio	and spi pumr	rinklers oed from OD) or	ome time within the last used to divert, convey m the well and conveyed Appropriation (POA)
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)		P		ng	Sec			Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well	✓ Authorized✓ Proposed	L-91902	13	s	30	E	30	NE	sw	4900	2010 ft north & 1820 ft east from SW corner Section 30
	☐ Authorized ☐ Proposed										
	☐ Authorized ☐ Proposed										
Check			opos	ed b	elov	v (ch					vided in parentheses):
	Place of Use	,					_	••			o Primary Use (S to P) ion/Well (POA)
	Character of Point of Dive	` ,					_			-	Appropriation (APOA)
	Additional P	` ′		(AP	OD		_			(SUB)	Appropriation (Air OZI)
	Surface Water POA (SW/G	er POD to G								,	POD (GOV)
Will a	l of the propos	sed changes	affe	et th	e en	tire	water	right	?		
☐ Yes	Complete on "CODES" lis									able 2 o	on the next page. Use the
⊠ No	Complete all	of Table 2 t	o des	scrib	e the	por	tion of	f the w	ater ri		oe changed. CEIVED BY OWRD

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TACS

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 # 66815

List the change proposed for the acreage in each ¼ ¼. 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.

7	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.								NGES	Lioposca	Proposed Changes (see The listing as it would appear AFTER Planges (see The listing as it would appear AFTER Planges).								. 1							
Tw	P	Rn	g	Sec	1	V	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	"CODES" from previous page)	Tw	P	Rn	g	Sec	1/4	½	Tax Lot	Gyt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
13	s	30	Е	30	NW	NE	4900		2.9	Irrigation	L-91902	1980	POA	13	s	30	Е	30	NW	NE	4900		2.9	Irrigation	Proposed Wells #1, #2, and/ or #3	1980
13	s	30	Е	30	sw	NE	4900		22.0	Irrigation	L-91902	1980	POA	13	s	30	Е	30	sw	NE	4900		22.0	Irrigation	same	1980
13	s	30	Е	30	NE	NW	4900		4.4	Irrigation	L-91902	1980	- POA	13	s	30	Е	30	NE	NW	4900		4.4	Irrigation	same	1980
13	S	30	Е	30	SE	NW	4900		16.2	Irrigation	L-91902	1980	POA	13	s	30	Е	30	SE	NW	4900		16.2	Irrigation	same	1980
13	s	30	Е	30	NE	sw	4900		25.0	Irrigation	L-91902	1980	POA	13	s	30	Е	30	NE	sw	4900		25.0	Irrigation	same	1980
13	S	30	E	30	SE	sw	4900		19.2	Irrigation	L-91902	1980	PÖA	13	s	30	Е	30	SE	sw	4900		19.2	Irrigation	same	1980
13	s	30	Е	30	NE	SE	4900		6.0	Irrigation	L-91902	1980	POA	13	s	30	Е	30	NE	SE	4900		6.0	Irrigation	same	1980
13	s	30	E	31	NE	NW	4900		1.2	Irrigation	L-91902	1980	POA	13	s	30	Е	31	NE	NW	4900		1.2	Irrigation	same	1980
						ГОТА	L ACI	RES:	96.9										7	ГОТА	L ACR	ES:	96.9			

Additional remarks: As shown in Table 2, the only requested change is a new POA for the same POU.

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SALEM, OR

For Place of Use or Character of Use Changes

1011	act of ost of Character of ost Changes	
	there other water right certificates, water use permits or ground water registrent the "from" or the "to" lands? Yes No	rations associated
If Y	YES, list the certificate, water use permit, or ground water registration number	ers:
a p to a	rsuant to ORS 540.510, any "layered" water use such as an irrigation right the rimary right proposed for transfer must be included in the transfer or be cance ground water registration must be filed separately in a ground water registralication.	elled. Any change
For S	substitution (ground water supplemental irrigation will be substituted for sur irrigation)	• •
	und water supplemental Permit or Certificate #;	RECEIVED BY OWRD
Sur	face water primary Certificate #	FEB 09 2015
	change from Supplemental Irrigation Use to Primary Irrigation Use ntify the primary certificate to be cancelled. Certificate #	SALEM, OR
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 of with the corresponding well(s) in Table 1 above and on the accompanying 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	•
AN	D/OR	
	Describe the construction of the authorized and proposed well(s) in Table 3 have a well log. For <i>proposed wells not yet constructed or built</i> , provide "requested information element in the table. The Department recommends y driller, geologist, or certified water right examiner to assist with assembling to complete Table 3.	a best estimate" for each ou consult a licensed well
Any we accomp until it i	Construction of Point(s) of Appropriation Il(s) in this listing must be clearly tied to corresponding well(s) described in Table I anying application map. Failure to provide the information will delay the processing received. The information is necessary for the department to assess whether the purce aquifer as the authorized point(s) of appropriation (POA). The Department is	g of your transfer application roposed well(s) will access the

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 o water right
Proposed Well #1	No	N/A	400 ft	12" 8"	0-100', 12" 101-400', 8"	0-18'	100-400'	N/A	Alluvial	
Proposed Well #2	No	N/A	400 ft	12" 8"	0-100', 12" 101-400', 8"	0-18'	100-400'	N/A	Alluvial	
Proposed Well #3	No	N/A	400 ft	12" 8"	0-100', 12" 101-400', 8"	0-18'	100-400'	N/A	Alluvial	