

State of Oregon

Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900

# Application for **Permit Amendment**

Part 1 of 5 - Minimum Requirements Checklist

This permit amendment 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.

| Che         | ck all it       | ems included with this application. $(N/A = Not Applicable)$   |
|-------------|-----------------|--|
| $\boxtimes$ |                 | Part 1 – Completed Minimum Requirements Checklist.   |
| $\boxtimes$ |                 | Part 2 – Completed Application Map Checklist.  |
|             |                 | Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: <a href="http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator">http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator</a> . If you have questions, call Customer Service at (503) 986-0801.  |
| $\boxtimes$ |                 | Part 4 – Completed Applicant Information and Signature.  |
| $\boxtimes$ |                 | Part 5 – Information about Permits to be Amended: Number of permits to be amended: <u>1</u> List them here: <u>G-16582</u> Please include a separate Part 5 for each permit. (See instructions on page 6)  |
| $\boxtimes$ |                 | Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).   |
|             | _               | Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is <b>not</b> the permit holder of record and needs to be assigned to the permit; <b>or</b> the landowner of the proposed place of use is <b>not</b> the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <a href="http://www.oregon.gov/owrd/pubs/docs/forms/req_assign_8_21_09.pdf">http://www.oregon.gov/owrd/pubs/docs/forms/req_assign_8_21_09.pdf</a> ). Assignment is not needed if the applicant is the permit holder of record. |
|             | ⊠ N/A           | Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant, or other permit holders of record that are not listed as applicants.  |
| $\boxtimes$ | □ N/A           | Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form is not required if any of the following apply:   |
| RECEIV      | ED BY           | All of the following apply: a) a change in place of use only, b) no structural   |
| FEE         | B <b>2 3</b> 20 | changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.  The proposed changes are all located on the property reviewed in Land Use form  |
| SA          | ALEM, O         | R enclosed in Water Right Application Folder #   |
| $\boxtimes$ | □ N/A           | Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.   |
|             |                 | (For Staff Use Only)   |
|             |                 | WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):   |
|             |                 | Application fee not enclosed/insufficient Map not included or incomplete  Land Use Form not enclosed or incomplete Assignment Form and fee not enclosed/insufficient   |
|             |                 | Land Use Form not enclosed or incomplete Assignment Form and fee not enclosed/insufficient  Additional signature(s) required Part is incomplete  |
|             |                 | Other/Explanation  |
|             |                 | Staff: 503-986-0 Date: //  |

Revised 7/1/2013

Your permit amendment application <u>will be returned</u> if any of the map requirements listed below are not met.

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

| Ш           | ⊠ N/A | If more than three permits are involved, separate maps for each permit.   |
|-------------|-------|---|
| $\boxtimes$ |       | Permanent quality printed with dark ink on good quality paper.  |
| $\boxtimes$ |       | The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, $11 \times 17$ inches, or up to $30 \times 30$ inches. For $30 \times 30$ inch maps, one extra copy is required.   |
| $\boxtimes$ |       | A north arrow, a legend, and scale.   |
| $\boxtimes$ |       | The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$ , $1 \text{ inch} = 1,320 \text{ feet}$ , the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$ , or a scale that has been preapproved by the Department.   |
| $\boxtimes$ |       | Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.  |
| $\boxtimes$ |       | Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.  |
| $\boxtimes$ |       | Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.  |
|             |       | Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.  |
| $\boxtimes$ |       | Existing place of use that includes separate hachuring for each water use permit, 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. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged. |
|             | ⊠ N/A | If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, 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 use permit.   |
| $\boxtimes$ | □ 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°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).  |

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| 1        | Base Fee (includes one type of change to one permit for up to 1 cfs)  | 1   | \$1,000      |    |
|----------|---|-----|--------------|----|
|          | Types of change proposed:   | 1   | Ψ1,000       |    |
|          | Place of Use  |     |              |    |
|          | Point of Diversion/Appropriation  |     |              |    |
|          | Number of above boxes checked = 1 (2a)  |     |              |    |
|          | Subtract 1 from the number in line $2a = \frac{0}{0} \frac{2b}{1}$ If only one change, this will be 0         |     |              |    |
|          | Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » »   |     |              |    |
| 2        |   | 2   | 0            |    |
|          | Number of permits included in Permit Amendment 1 (3a)   |     |              |    |
|          | Subtract 1 from the number in 3a: 0 (3b) If only one permit this will be 0                                    |     |              |    |
| 3        | Multiply line 3b by \$450 and enter » » » » » » » » » » » » » »   | 3   | 0            |    |
|          | Do you propose to add or change a well, or change from a surface water POD                                    |     |              |    |
|          | to a well?  |     |              |    |
|          | No: enter 0 »» » » » » » » » » » » » » » » »  |     |              |    |
| 4        |   | 4   | 350          |    |
|          | Do you propose to change the place of use?  |     |              |    |
|          | No: enter 0 on line 5 » » » » » » » » » » » » » » » »   |     |              |    |
|          | Yes: enter the cfs for the portions of the permits to be amended (see   |     |              |    |
|          | example below*):(5a)  |     |              |    |
|          | Subtract 1.0 from the number in 5a above: (5b)  |     |              |    |
|          | If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » » » »   |     |              |    |
| _        | If 5b is greater than 0, round up to the nearest whole number: (5c)   | _   |              |    |
| <u>5</u> | and multiply 5c by \$300, then enter on line 5 » » » » » » » »  | 5   | 1250         |    |
| 0        | Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:  Is this permit amendment:                 | REC | INED BY O    | WF |
|          | l <u> </u>  |     |              |    |
|          | In necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? | F   | EB 2 3 2015  |    |
|          | endorsed in writing by ODFW as a change that will result in a net   |     |              |    |
|          | benefit to fish and wildlife habitat?   |     | SALEM, OR    |    |
|          | If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »                                 |     | L. LLIVI, ON |    |
| 7        | If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »                                    | 7   |              |    |
| 8        | Subtract line 7 from line 6 » » » » » » » » Permit Amendment Fee:   | 8   | 1350         |    |
|          | buttuet me , nom me o ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,   | U   | 1330         |    |

- \*Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:
- 1. For irrigation calculate cfs for each permit involved as follows:
  - a. Divide total authorized cfs by total acres in the permit (for S-12345, 1.25 cfs  $\div$ 100 ac); then multiply by the number of acres to be changed to get the application cfs (x 45 ac = 0.56 cfs).
  - b. If the water right permit 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 S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of permits on all the land included in the application; however do not count cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land. The fee should be assessed only once for each "on the ground" acre included in the application. (In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

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| Applicant Information |
|-----------------------|
|-----------------------|

| APPLICANT/BUSINESS NA   | ME    |       | PHONE NO.      | ADDITIONAL CONTACT NO.           |  |  |  |  |  |  |
|---|-------|-------|----------------|----------------------------------|--|--|--|--|--|--|
| Portland Meadows  |       |       | 503-793-6981   |                                  |  |  |  |  |  |  |
| ADDRESS   |       |       |                | FAX NO.                          |  |  |  |  |  |  |
| 1001 North Schmeer R  | oad   |       |                |                                  |  |  |  |  |  |  |
| СІТҮ  | STATE | ZIP   | E-MAIL         |                                  |  |  |  |  |  |  |
| Portland  | OR    | 97217 | Mark.Folkman@p | Mark.Folkman@portlandmeadows.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.     |       |       |                |                                  |  |  |  |  |  |  |

|  | INESS NAME  | _                                       |  | PHONE NO.                                  | ADDITIONAL CONTACT NO.  |  |  |  |  |  |
|--|---|---|--|--|---|--|--|--|--|--|
|  | sik, Maul Foster & Al   | ongi                                    |  | 503-501-5222                               | FAX NO.   |  |  |  |  |  |
| ADDRESS<br>2001 NW 1   | 9 <sup>th</sup> Avenue, Suite 200                             | 971-544-2140                            |  |  |   |  |  |  |  |  |
| CITY STATE ZIP E-MAIL  |   |   |  |  |   |  |  |  |  |  |
| Portland OR 97209 abanasik@maulfoster.com  By PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE |   |   |  |  |   |  |  |  |  |  |
|  |   |   |  |  | NTS WILL ALSO BE MAILED.  |  |  |  |  |  |
|  |   |   |  |  |   |  |  |  |  |  |
| This perm<br>maintena<br>grounds r   | nit amendment wou<br>nce area. This wou<br>nore convenient ac | ald chang<br>ld allow to<br>cess to the | e the location of whe water trucks the well. | well #2 to a locat<br>nat distribute wat   | ermit amendment; and why: ion adjacent to the facility er to the facility track and                           |  |  |  |  |  |
| If you need  | additional space, cont  | inue on a s                             | eparate piece of pape                        | r and attach to the ap                     | oplication as "Attachment 1".   |  |  |  |  |  |
| Act. (   | Federal stimulus d  | ollars)                                 |  | _  | erican Recovery and Reinvestme  |  |  |  |  |  |
| If NO  | , include either:   |   |  |  |   |  |  |  |  |  |
|  |   |   | form (with require applicant(s), Ol          |  | nment fee), assigning all or a  |  |  |  |  |  |
|  | An affidavit of c applicant to ame                            |   | _  | der(s) of record t                         | hat gives permission for the  |  |  |  |  |  |
| the Depar-<br>located, or  | tment for publication   | of a notice                             | e in a newspaper vive weeks. If more         | vith general circula<br>than one qualifyin | by be required to submit payment to ation in the area where the permit is g newspaper is available, I suggest |  |  |  |  |  |
| I (we) affi  | irm that the inform   | ation con                               | tained in this appl                          | ication is true and                        | d accurate.<br>2/4/15   |  |  |  |  |  |

| e) affirm that the information conta | Print Name (and Title if applicable) | accurate.<br>2/4/15<br>Date |
|--------------------------------------|--------------------------------------|-----------------------------|
| Applicant Signature                  | Print Name (and Title if applicable) | Date (*)                    |

| Check one of the following:   |  |                      |  |  |  |  |  |  |  |  |  |
|---|--|----------------------|--|--|--|--|--|--|--|--|--|
| ☐ The applicant is responsible for comple continue to be sent to the applicant.   | The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.  |                      |  |  |  |  |  |  |  |  |  |
|   | The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record. |                      |  |  |  |  |  |  |  |  |  |
| Check the appropriate box, if applicable:   |  |                      |  |  |  |  |  |  |  |  |  |
| Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district. |  |                      |  |  |  |  |  |  |  |  |  |
| IRRIGATION DISTRICT NAME  | ADDRESS  |                      |  |  |  |  |  |  |  |  |  |
| СІТҮ  | STATE  | ZIP                  |  |  |  |  |  |  |  |  |  |
| Check here if water for any of the permits s<br>contract for stored water with a federal ager   | • -  | e agreement or other |  |  |  |  |  |  |  |  |  |
| ENTITY NAME   | ADDRESS  |                      |  |  |  |  |  |  |  |  |  |
| СІТҮ  | STATE  | ZIP                  |  |  |  |  |  |  |  |  |  |
| To meet State Land Use Consistency Requirem city, municipal corporation, or tribal government conveyed or used.                           |  | •                    |  |  |  |  |  |  |  |  |  |

OR

ADDRESS

STATE

1900 SW 4th Avenue

RECEIVED BY OWRD

FEB 2 3 2015

SALEM, OR

1 11987

ZIP

97214

**ENTITY NAME** 

CITY

**Portland** 

City of Portland

## **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.

#### **Microsoft Word 2007**

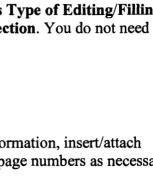
- Unlock the document by clicking the **Review** tab, then click **Protect Stop Protect**
- To relock the document, click Editing Restrictions, then click Allow Only This Type of Editing, select Filling In Forms from the drop-down menu, then check Yes, Start Enforcing Protection.

#### 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.



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

### PERMIT # G-16582

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA) (Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

|             |                |  | -             |       | -              |             |        |                  |  |              |          |  |
|-------------|----------------|--|---------------|-------|----------------|-------------|--------|------------------|--|--------------|----------|--|
|             |                |  |               |       |                |             |        |                  | 10   |              | Tex      |  |
|             | 图 医尼克克氏试验 医二氏病 |  |               |       |                |             |        |                  | l de la companya de l |              | l dic    |  |
|             |                |  |               |       |                |             | 4      |                  |  | 4            | Clov's   |  |
|             |                |  |               |       |                |             |        | be is            |  |              |          | 100 6 6 1 2500 6   |
| Well #1     | Auth           |  | 100325        | 1     | N              | 1           | E      | 10               | NW   | NE           | 200      | 100 ft S. and 2580 ft.<br>W from NE corner,<br>Section 10.     |
| Well # 2    | ☐ Auth         |  |               | 1     | N              | 1           | E      | 3                | SE   | sw           | 200      | 1145 ft N and 1700 ft<br>E from SW corner,<br>客在也巴伦ED BY OW    |
|             | Auth           | orized                                   |               |       |                |             |        |                  |  |              |          | OEIVED BY OW   |
|             | Proposed       |  |               |       |                |             |        |                  |  |              |          | FEB <b>2 3</b> 2015  |
|             | ☐ Auth         | orized                                   |               |       |                |             |        |                  |  |              |          |  |
|             | ГТГГ           | oseu                                     |               | L     | Ĺ              | L           |        |                  |  |              |          | SALEM, OR  |
| Chec        | k all typ      | e(s) of change                           | (s) proposed  | d bel | ow (           | char        | ıge "  | COD              | ES" a  | re pro       | vided i  | in parentheses):   |
| Γ           | Plac           | e of Use (POU)                           | )             |       |                | $\boxtimes$ | P      | oint o           | f Appi   | ropriat      | ion/We   | ell (POA)  |
| Г           | _              | at of Diversion                          |               |       |                |             | A      | dditio           | onal Po  | oint of      | Appro    | priation (APOA)  |
|             |                | itional Point of                         |               | Δ P() | ום             | _           |        |                  |  |              |          | und Water POA  |
| L           |                | monar i onn or                           | Divoision (   | 11 0  | υ,             | L           |        | SW/G             |  | 100          | 10 010   | and water 1 of 1   |
| Will        | all of the     | e proposed cha                           | inges affect  | the c | entir          | e wa        | ter i  | ıse pe           | ermit?   |              |          |  |
|             | Yes            |  | y the propos  | ed (" | to" l          | ands        | ) sec  | tion o           | f Tabl   | e 2 on       | the nex  | kt page. Use the   |
| Σ           | ☑ No           | Complete all                             | of Table 2 to | des   | cribe          | the         | porti  | on of            | the per  | rmit to      | be cha   | anged.   |
| E           | 1              | <b>- C</b>                               |               |       |                |             |        |                  |  |              |          |  |
|             | •              | ace of use:                              |               | .41   | 4ha i          | land        | то     | which            | h tha s  | مامور        | of uso i | s haing mayad?   |
| Yes         |                | older of record                          | own or cor    | 11101 | tne            | iano        | 10     | wnic             | n the p  | piace (      | or use r | s being moved?   |
|             |                |  |               |       |                |             |        |                  |  |              |          | signed to the permit   |
| -           |                | <b>er of record</b> by<br>in assignment. | submitting    | a co  | mple           | ted I       | Requ   | est for          | r Assig  | gnmen        | t form   | and the required   |
| Is the proj | posed pl       | ace of use cont                          | iguous to th  | ie au | thor           | ized        | plac   | e of u           | ıse? 🛚   | ] Yes        | ☐ No     |  |
| unless th   | ne change      | e to non-contigu                         | ious lands is | in fi | urthe<br>ensit | ranc        | e of a | mitiga<br>itened | ation o  | r considange | ervation | zed place of use<br>n efforts undertaken<br>der ORS 496.171 to |

496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the

listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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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 Use Permit # G-16582

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.

| 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. |                  |                                   |      |     |      |                 |         | IGES                    |                             |   |               |
|--|-----|-------|---------|------------|---------------|-----------------------|--|------------------|-----------------------------------|------|-----|------|-----------------|---------|-------------------------|-----------------------------|---|---------------|
| Тwp  | Rng | Sec   | ¼ ¼     | Tax<br>Lot | Gvt<br>Lot or | Acres                 | POD(s) or<br>POA(s)<br>(name or  | Priority<br>Date | "CODES"<br>from previous<br>page) | Tøp. | Rng | Sec  | <b>X.X</b>      | Tax Lot | Gwi<br>Leir oir<br>DLLC | Acres<br>(if<br>applicable) | POD(s) or<br>POA(s) to be<br>used (from<br>Täble 1) | Priority Date |
|  |     |       |         |            |               |                       |  |                  |                                   |      |     |      |                 |         |                         |                             |   |               |
|  |     |       |         |            |               |                       |  |                  |                                   |      |     |      |                 |         |                         |                             |   |               |
| 1 N  | 1 E | 3     | SE SW   | 200        |               |                       | Well # 2   |                  | POA                               | 1 N  | 1 E | 10   | NE NW           | 200     |                         |                             | Well #2   |               |
|  |     |       |         |            |               |                       |  |                  | 1.2                               |      |     |      |                 |         |                         |                             |   |               |
|  |     |       |         |            |               |                       |  |                  |                                   |      |     |      | :               |         |                         |                             |   |               |
|  |     |       |         |            |               |                       |  |                  |                                   |      | RE  | CEIV | ED BY C         | WRD     |                         |                             |   |               |
|  | ~   | , cCl | EIVED B | Y ON       | /RD           |                       |  |                  |                                   |      |     | FEE  | <b>2 3</b> 2015 |         |                         |                             |   |               |
|  |     | -     | 7.5 %   |            |               |                       |  |                  | ***                               |      |     | SA   | LEM, OR         |         |                         |                             |   |               |
|  |     |       | O       |            |               |                       |  |                  |                                   |      | -   |      |                 |         |                         |                             |   |               |
|  |     |       |         | -          |               |                       |  |                  | 100                               |      |     |      |                 |         |                         |                             |   |               |
|  |     |       | TOTA    | L ACR      | RES           |                       |  |                  |                                   |      |     |      | TOT             | AL ACI  | RES                     |                             |   |               |

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Additional remarks:

| land<br>to a                  | for irrigates fo | s) are for irrigation that are so that certificate or ground water   | subject to<br>or ground  | transfer i                           | must either<br>gistration m                       | change cou                              | oncurrently of separately                     | or be cance<br>in a water                | lled. Any ch                                   | nange           |  |  |  |  |
|-------------------------------|--|--|--|--------------------------------------|---|---|---|--|--|-----------------|--|--|--|--|
| For a                         | change i   | n point(s) of  | appropri   | ation (w                             | ell(s)) or ad                                     | lditional j                             | point(s) of a                                 | ppropria                                 | tion:  |                 |  |  |  |  |
|                               | associa<br>map. (  | log(s) are attached for each authorized and proposed well(s) that are clearly labeled and ciated with the corresponding well(s) in Table 1 above and on the accompanying application ( <b>Tip</b> : You may search for well logs on the Department's web page at: //apps2.wrd.state.or.us/apps/gw/well_log/Default.aspx) |  |                                      |   |   |   |  |  |                 |  |  |  |  |
| ANI                           | O/OR   |  |  |                                      |   |   |   |  |  |                 |  |  |  |  |
|                               | no<br>fo<br>lie  | escribe the contract have a well or each request censed well draction nec  | log. For placed information in the contract of | proposed<br>nation ele<br>logist, or | wells not y<br>ment in the<br>certified wa        | et constru<br>table. Th                 | <i>icted or buil</i><br>e Departmer           | t, provide on recomme                    | "a best estimends you cor                      | ate"<br>nsult a |  |  |  |  |
| Ar<br>the<br>tra<br>the<br>(P | ny well(se accomp<br>nsfer appersone   | etion of Point(<br>) in this listing<br>panying applica-<br>plication until<br>ed well(s) will<br>be Department<br>afer.   | must be<br>ation map<br>it is receivances the  | clearly ti                           | ed to correse to provide information ource aquife | the inform<br>n is neces<br>or as the a | nation will o<br>sary for the<br>uthorized po | delay the p<br>departmen<br>pint(s) of a | rocessing of<br>at to assess w<br>ppropriation | your<br>hether  |  |  |  |  |
|                               |  |  |  |                                      |   |   |   |  |  |                 |  |  |  |  |
| Well #2                       | No   |  | 200  | 12                                   | 0-110,<br>160-200                                 | 0-40                                    | 110-160                                       | 30                                       | Sand/<br>Gravel                                |                 |  |  |  |  |
|                               |  |  |  |                                      |   |   |   |  |  |                 |  |  |  |  |

Are there other water rights certificates, water use permits or ground water registrations associated

If YES, list the other certificate, permit, or ground water registration numbers: \_\_\_\_

with the "from" or "to" lands? ☐ Yes ☒ No