



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.

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**Check all items included with this application. (N/A = Not Applicable)**

- Part 1 – Completed Minimum Requirements Checklist.DEC 14 2015
- Part 2 – Completed Application Map Checklist.SALEM, OR
- 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: [http://apps.wrd.state.or.us/apps/misc/wrd\\_fee\\_calculator](http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator). If you have questions, call Customer Service at (503) 986-0801.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1**  
**List them here: 16783**  
 Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at [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)). 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.
- 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:
  - Water is to be diverted, conveyed, and/or used only on federal lands.
  - All of the following apply: a) a change in place of use only, b) no structural 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 enclosed in Water Right Application Folder # **G-17213**.
- 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
___ Additional signature(s) required	Part ___ is incomplete

Other/Explanation \_\_\_\_\_

Staff: \_\_\_\_\_ 503-986-0 \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

## Part 2 of 5 – Permit Amendment Map Checklist

**Your permit amendment application will be returned 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 not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.**

- N/A If **more than three** permits are involved, separate maps for each permit.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, 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.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- 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.
- 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.
- 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.
- 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°)

DEC 14 2015

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**Part 3 of 5 – Fee Worksheet**

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,000
2	Types of change proposed: <input type="checkbox"/> Place of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>1 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » » »	2	0
3	Number of permits included in Permit Amendment <u>1 (3a)</u> Subtract 1 from the number in 3a: <u>0 (3b)</u> <i>If only one permit this will be 0</i> Multiply line 3b by \$450 and enter » » » » » » » » » » » » » » » »	3	0
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input checked="" type="checkbox"/> Yes: enter \$350 »	4	350
5	Do you propose to change the place of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 » <input type="checkbox"/> 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: <u>0 (5b)</u> If 5b is 0, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) 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
7	Is this permit amendment: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> 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 » If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » <b>Permit Amendment Fee:</b>	8	<b>\$ 1,350</b>

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\*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 ÷ 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.*)

## Part 4 of 5 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>Bert Siddoway</b>		PHONE NO. <b>541.403.0490</b>	ADDITIONAL CONTACT NO. <b>541.877.2444</b>
ADDRESS <b>PO Box 115</b>			FAX NO.
CITY <b>Durkee</b>	STATE <b>OR</b>	ZIP <b>97905</b>	E-MAIL <b>bertsiddoway@gmail.com</b>
<b>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.</b>			

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

AGENT/BUSINESS NAME <b>Sara Haynes / Farallon Consulting, LLC</b>		PHONE NO. <b>541.523.5170</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>50809 Ellis Road</b>			FAX NO. <b>541.523.5170</b>
CITY <b>North Powder</b>	STATE <b>OR</b>	ZIP <b>97867</b>	E-MAIL <b>shaynes@farallonconsulting.com</b>
<b>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.</b>			

Explain in your own words what you propose to accomplish with this permit amendment; and why:

The applicant would like to add an additional point of appropriation (APOA) in order to meet the allowed maximum rate on his permit G-16783.

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)

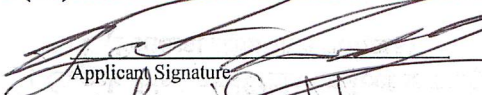

**Is the applicant the permit holder of record?**  Yes  No

If NO, include either:

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

I understand that prior to Department approval of the permit amendment, 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 permit 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: Baker City Herald.

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

 Applicant Signature	<u>Bert Siddoway</u> Print Name (and Title if applicable)	<u>12-16-15</u> Date
 Applicant Signature	<u>Terri Siddoway</u> Print Name (and Title if applicable)	<u>12-16-15</u> Date

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## Part 4 of 5 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>Bert Siddoway</b>			PHONE NO. <b>541.403.0490</b>	ADDITIONAL CONTACT NO. <b>541.877.2444</b>
ADDRESS <b>PO Box 115</b>			FAX NO.	
CITY <b>Durkee</b>	STATE <b>OR</b>	ZIP <b>97905</b>	E-MAIL <b>bertsiddoway@gmail.com</b>	
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**Agent Information** – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME <b>Sara Haynes / Farallon Consulting, LLC</b>			PHONE NO. <b>541.523.5170</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>50809 Ellis Road</b>			FAX NO. <b>541.523.5170</b>	
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Explain in your own words what you propose to accomplish with this permit amendment; and why:

The applicant would like to add an additional point of appropriation (APOA) in order to meet the allowed maximum rate on his permit G-16783.

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)

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Is the applicant the permit holder of record?  Yes  No

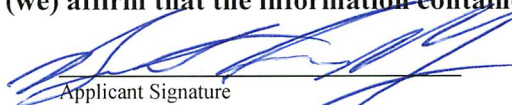
SALEM, OR

If NO, include either:

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

I understand that prior to Department approval of the permit amendment, 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 permit 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: Baker City Herald.

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

 Applicant Signature	<u>Bert Siddoway</u> Print Name (and Title if applicable)	<u>12/10/2015</u> Date
Applicant Signature	Print Name (and Title if applicable)	Date

**Check one of the following:**

- 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.

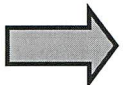
**Check the appropriate box, if applicable:**

- 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	
CITY	STATE	ZIP

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

ENTITY NAME	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 <b>Baker County</b>	ADDRESS <b>1995 3<sup>rd</sup> Street</b>	
CITY <b>Baker City</b>	STATE <b>OR</b>	ZIP <b>97814</b>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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## Part 5 of 5 – Water Use Permit Information

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 # 16783

**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.)

POD/POA Name or Number	Is this POD/POA Authorized by the permit 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)		
<b>BAKE 52212</b>	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	<b>L-101882</b>	<b>11</b>	<b>S</b>	<b>43</b>	<b>E</b>	<b>19</b>	<b>NE</b>	<b>NE</b>	<b>2600</b>	<b>Permitted Location:</b> Approximately 580 feet south and 310 feet west from NE corner, Section 19  <b>Actual Location:</b> Approximately 37 feet south and 325 feet west from NE corner, Section 19
<b>BAKE 52264</b>	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	<b>L-109663</b>	<b>11</b>	<b>S</b>	<b>43</b>	<b>E</b>	<b>19</b>	<b>NE</b>	<b>NE</b>	<b>2600</b>	Approximately 466 feet south and 295 feet west from NE corner, Section 19

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

- |   |  |
|---|--|
| <input type="checkbox"/> Place of Use (POU)                   | <input checked="" 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"/> Surface water POD to Ground Water POA (SW/GW)       |

**Will all of the proposed changes affect the entire water use permit?**

- 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 permit to be changed.

**For a change in place of use:** N/A

**Does the permit holder of record own or control the land TO which the place of use is being moved?**

Yes  No

N/A

**Is the proposed place of use contiguous to the authorized place of use?**  Yes  No

N/A

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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 # 16873**

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 “CODES” from previous page)	PROPOSED (the “to” or “on” lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acre(s) (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acre(s) (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date				
<b>EXAMPLE</b>																								
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	S	9	E	15	NW	NW	100	1	10.0	POD #5	
“	“	“	“	“	“	“	“	“	EXAMPLE	“		“	2	S	9	E	15	SW	NW	200		5.0	POD #6	
												APOA	See original permit for Place of Use (POU).									L-101882 L-109663	5/11/2009	
TOTAL ACRES											TOTAL ACRES										392.4			

**Additional remarks: See attached original permit showing the allowed place of use (POU) for one well. This permit amendment will amend the actual point of appropriation (POA) of the permitted well as well as add an additional well to the permit (APOA). The allowed POU will not change.**

**Actual well development is different than required based on conditions of approval but permit application file contains documentation from Mike Zwart approving alternative well construction via attached email.**

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

If YES, list the other certificate, permit, or ground water registration numbers: 5971

 If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

**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](http://apps2.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

As provided in the attached well log BAKE 52217.

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