

## 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.

Check	all iten	ns included with this application. (N/A = Not Applicable)
$\boxtimes$		Part 1 – Completed Minimum Requirements Checklist.
$\boxtimes$		Part 2 – Completed Transfer Application Map Checklist.
$\boxtimes$		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 Water Rights to be Transferred: <b>How many water rights are to be transferred?</b> <u>1</u> List them here: <u>67557</u> Please include a separate Part 5 for each water right. (See instructions on page 6)
		Attachments:
$\boxtimes$		Completed Transfer Application Map. Attachment #1
$\boxtimes$		Completed Evidence of Use Affidavit and supporting documentation. Attachments 3 & 4
	N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
	N/A	Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
	Ŋ/A	Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if <b>all</b> 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. <b>Attachment #5</b>
	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
	N/A	Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.
		(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  Additional signature(s) required Part is incomplete  Other/Explanation Staff: 503-986-0 Date: / /

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

	sure that the transfer application map you submit includes all the required items and the existing water right map. Check all boxes that apply.
⊠ □ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see <a href="http://apps.wrd.state.or.us/apps/wr/cwre_license_view/">http://apps.wrd.state.or.us/apps/wr/cwre_license_view/</a> . 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.
$\boxtimes$	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.
	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.
$\boxtimes$	Township, Range, Section, 1/4 1/4, 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.
$\boxtimes$	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 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. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
N/A □ 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.
	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.
RECEIVED  DEC 31 2015	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

	FEE WORKSHEET for PERMANENT TRANSFER Part 3 of 5	– Fee	Worksheet
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,000
	Types of change proposed:		
	Place of Use		
ļ	☐ Character of Use		
	Point of Diversion/Appropriation		
	Number of above boxes checked = $\frac{1(2a)}{}$		
	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: <u>0 (3b)</u> If only one water right this will		
_	be 0		
3	Multiply line 3b by \$450 and enter » » » » » » » » » » » » » » » » » » »	3	0
	to a well?		
٠.	No: enter 0 »» » » » » » » » » » » » » » » » » »		
4	Yes: enter \$350 » » » » » » » » » » » » » » » » »	4	0
	Do you propose to change the place of use or character of use?		
	No: enter 0 on line 5 » » » » » » » » » » » » » » » » »		
	Yes: enter the cfs for the portions of the rights to be transferred (see		
	example below*): 0.24 (5a)		
	Subtract 1.0 from the number in 5a above: -0.24 (5b)		
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » » » »		
_	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 » » » » » » » » » Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	5	1,000
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal: Is this transfer:		ECEIVED
	necessary to complete a project funded by the Oregon Watershed		ECEIVED
	Enhancement Board (OWEB) under ORS 541.932?	Г	EC 31 2015
	endorsed in writing by ODFW as a change that will result in a net	L	
	benefit to fish and wildlife habitat?		OWRD
	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	\$1,000
	le for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100)		

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  $\div$ 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).

	FEE WORKSHEET for SUBSTITUTION – N/A		
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	N/A

### Part 4 of 5 - Applicant Information and Signature

#### **Applicant Information**

APPLICANT/BUSINESS NAME		PHONE NO. ADDITIONAL CONTACT NO.						
Sunnyside Dairy, LLC (Rosalio	Brambila)		(509) 837-4779					
ADDRESS				FAX NO.				
4581 Maple Grove Road								
CITY	STATE	ZIP	E-MAIL					
Sunnyside	WA	98944	rosalio@oorddairy.com					
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE								
DEPARTMENT ELECTRONICA	DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.							

DEPARTMENT ELECTRONICA	ALLY. CO	PIES OF THE FINAL	L ORDER DOCUMEN	TS WILL ALSO BI	E MAILED.
Agent Information – The ag	ent is auth	orized to represent	the applicant in all n	natters relating to	this application.
AGENT/BUSINESS NAME Molly Reid / GSI Water Solution	ns Inc		PHONE NO. (509) 378-3284	ADDITIONAL CO (541) 310-7264	
ADDRESS 8019 W. Quinault Ave, Suite 20			(307) 370-3204	FAX NO.	
CITY Kennewick	STATE WA	ZIP 99336	E-MAIL mreid@gsiws.com		
BY PROVIDING AN E-MAIL A DEPARTMENT ELECTRONICA					ı
Explain in your own words Moving irrigation from whe pivot.	•		•	• •	· • •
If you need additional space, cont	inue on a s	eparate piece of pape	er and attach to the app	lication as "Attach	ment 1".
Check this box if this pr Reinvestment Act. (Fede	•		•	can Recovery a	nd
<ul> <li>☑ By signing this application, I Department approval of the t authorized to pursue the trans.</li> <li>☑ I affirm the applicant is a murname of the municipality or a ☐ I affirm the applicant is an encondemnation the property to supporting documentation.</li> </ul>	ransfer, I wasfer as iden nicipality a predecess tity with the	rill be required to pro tified in OAR 690-38 is defined in ORS 540 or; <b>OR</b> e authority to conder	the draft preliminary ovide landownership in 80-4010(5); <b>OR</b> 0.510(3)(b) and that the nn property and is acquain	formation and evideright is in the	
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 co	e in a newspaper vonsecutive weeks.	vith general circulation. If more than one qua	on in the area wh difying newspape	ere the water
I (we) affirm that the inform	ation con	tained in this appl		iccurate.	<i>15</i>

<b>L</b>	1 (we) aftern that the information conta	imed in this application is true a	and accurate.
	Kosho	Rosalio Brambila	12-30-15
Y	Applicant signature	Print Name (and Title if applicable)	Date
	Applicant signature	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? Xes No If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or email addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.

Check the following boxes to	hat apply	:							
	The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.								
	The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.								
				•	for completion of change(s). lowner and the applicant.				
At this time, are the lands in	this tran	sfer appli	ication in	the process of b	eing sold? 🗌 Yes 🖾 No				
	. If you d	lo not kno	ow who	•	olete the receiving landowner er will be, then a request for				
If a property sells, the counless a sale agreement <a href="http://www.oregon.gov/">http://www.oregon.gov/</a>	or other o	locument	states o	therwise. For mo					
RECEIVING LANDOWNER NAME				PHONE NO.	ADDITIONAL CONTACT NO.	]			
ADDRESS		<u>,, </u>		L	FAX NO.	-			
CITY	STATE	ZIP		E-MAIL					
				e and attach Sup	Il be located within or served plemental Form D.) – N/A	by			
CITY			STATE		ZIP	-			
for stored water with a f			ther enti	ty N/A	vice agreement or other contra	ict			
ENTITY NAME			ADDRES	S					
CITY			STATE	•	ZIP				
To meet State Land Use Corporation, or tribal govern	•	•			ounty, city, municipal be diverted, conveyed or used	d.			
ENTITY NAME Harney County Planning Depar	rtment		ADDRES 450 N B	Suena Vista Ave.					
CITY Burns			STATE OR	della viola ilve	ZIP 97720				
ENTITY NAME			ADDRES	S		]			
CITY			STATE		ZIP				
						_			

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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.

#### **CERTIFICATE # 67557**

# Description of Water Delivery System System capacity: 0.24 cubic feet per second (cfs) OR \_\_\_\_\_ gallons per minute (gpm) 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. 60 horsepower pump at well. Water is pumped

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. 60 horsepower pump at well. Water is pumped from wellhead into 20 feet of 8 inch pipe directly to center point of the pivot. Water then goes into drop tube sprinklers. Corners are irrigated from underground 8 inch mainline to above ground wheel and handlines.

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	1/4 1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #9	□ Authorized     □ Proposed	HARN 1348	26 S	31 E	18	NW NW	300 G- Lot 1	1260 ft S & 1290 ft E from the NW corner of Section 18.

Check a	all type(s) of change(s) proposed below (c	hange	e "CODES" are provided in parentheses):
$\boxtimes$	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
	Character of Use (USE)		Point of Appropriation/Well (POA)
	Point of Diversion (POD)		Additional Point of Appropriation (APOA)
	Additional Point of Diversion (APOD)		Substitution (SUB)
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV)
Will all	of the proposed changes affect the entire	wate	r right?
Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the pro		) section of Table 2 on the next page. Use the changes.
⊠ No	Complete all of Table 2 to describe the po	rtion (	of the water right to be changed.

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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 Right Certificate # 67557

List the change proposed for the acreage in each ½ 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.								ANGES	Proposed Changes (see			The	e lis	ting			appea		ΓER PF	on" lands) ROPOSED		ES				
Tv	νp	Rnį	g	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES" from previous page)	Tv	vp	Rı	ıg	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
26	s	31	E	18	NE	NW	200		10.5	Irrigation	Well #9	1980	POU	26	S	31	E	18	SE	NW	500		5.0	Irrigation	Well #9	1980
26	s	31	E	18	NW	NW	300	1	8.5	Irrigation	Well #9	1980	POU	26	S	31	E	18	SE	NW	600		5.0	Irrigation	Well #9	1980
													POU	26	s	31	E	18	SÉ	NW	700		3.3	Irrigation	Well #9	1980
													POU	26	S	31	E	18	SE	NW	800		5.7	Irrigation	Well #9	1980
	TOTAL ACRES: 19.0															-	ГОТА	L ACR	RES:	19.0						

Additional remarks: N/A.

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1	For Place of Use of Character of Use Changes
,	Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands?   Yes  No
	If YES, list the certificate, water use permit, or ground water registration numbers: N/A.
	Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.
I	For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)
	Ground water supplemental Permit or Certificate # <u>N/A;</u> Surface water primary Certificate # <u>N/A.</u>
I	For a change from Supplemental Irrigation Use to Primary Irrigation Use
	Identify the primary certificate to be cancelled. Certificate # $N/A$
I	For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation: N/A
	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: <a href="http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx">http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx</a>
	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 <i>proposed wells not yet constructed or built</i> , 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.
An acc ap	ble 3. Construction of Point(s) of Appropriation - N/A  my well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the companying application map. Failure to provide the information will delay the processing of your transfer plication until it is received. The information is necessary for the department to assess whether the proposed cell(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is

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	Well -specific rate (cfs or gpm). If less han full rate of water right
N/A										

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prohibited by law from approving POA changes that do not access the same source aquifer.