

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

Application for Permanent Water Right Transfer

Part 1 of 5 – Minimum Requirements Checklist

This transfer application <u>will be returned</u> 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.

		For questions, prease can (505) 500-0500, and ask for Transfer Section.
Che	ck all ite	ms included with this application. (N/A = Not Applicable)
\boxtimes		Part 1 – Completed Minimum Requirements Checklist.
\boxtimes		Part 2 – Completed Transfer 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: <u>http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator</u> . If you have questions, call Customer Service at (503) 986-0801.
\boxtimes		Part 4 – Completed Applicant Information and Signature.
		Part 5 – Information about Water Rights to be Transferred: How many water rights are to be transferred? <u>1</u> List them here: <u>90952</u> Please include a separate Part 5 for each water right. (See instructions on page 6)
		Attachments:
\boxtimes		Completed Transfer Application Map.
\boxtimes		Completed Evidence of Use Affidavit and supporting documentation.
\boxtimes	Pending	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.
	□ N/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 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.
\boxtimes	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
	N/A 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):

Other/Explanation

Staff:

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Date:

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Your t	ansfer application will be returned if any of the map requirements listed below are not met.
	e be sure that the transfer application map you submit includes all the required items and les 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 <u>http://apps.wrd.state.or.us/apps/wr/cwre_license_view/</u> . CWRE stamp and signature are not required for substitutions.
	V/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, 11×17 inches, or up to 30×30 inches. For 30×30 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.
	J/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
	OWRD ^{mit.}
FEB 01	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 desimal (example 42°22'15 5") or degrees desimal with five or
SALEM,	DR least one digit after the decimal (example – 42.53764°).

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	FEE WORKSHEET for PERMANENT TRANSFER Part 3 of 5	– Fee	Worksheet	t
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			
	Character of Use			
	Point of Diversion/Appropriation			
	Number of above boxes checked = $3(2a)$			
	Subtract 1 from the number in line $2a = (2b)$ If only one change, this will be 0			
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » » » » » »	2	1,600	
	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	2	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?			
4	$\square \text{ No: enter } 0 \gg \gg$	4	350	
	Yes: enter \$350 » » » » » » » » » » » » » » » » » » »	4	550	
	\square No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »			
	\boxtimes Yes: enter the cfs for the portions of the rights to be transferred (see			
	example below*): 0.02 (5a)			
	Subtract 1.0 from the number in 5a above: 0 (5b)			
	If 5b is 0 or less, enter 0 on line $5 \gg $			
	If 5b is greater than 0, round up to the nearest whole number: (5c) and			
5	multiply 5c by \$300, then enter on line 5 » » » » » » » » »	5	0	
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	2,950	1
	Is this transfer:	REC	EIVED BY	OWF
	necessary to complete a project funded by the Oregon Watershed			
	Enhancement Board (OWEB) under ORS 541.932?		FEB 01 2	016
	endorsed in writing by ODFW as a change that will result in a net			
	benefit to fish and wildlife habitat?		SALEM, C	R
	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	\$ 2,950	}

*Example for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 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 \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							
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						

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Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.			
S20 DYNAMICS							
ADDRESS				FAX NO.			
63027 LOWER MEADOW DR	IVE, STE.	1					
CITY	STATE	ZIP	E-MAIL				
BEND	OR	97701					
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE							
DEPARTMENT ELECTRONIC	ALLY. CO	PIES OF THE FINA	L ORDER DOCUMENT	S WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME		PHONE NO. ADDITIONAL CONTACT							
JOHN A. SHORT / WATER RI	GHT SER	541-389-2837							
ADDRESS				FAX NO.					
P.O. BOX 1830									
CITY	E-MAIL								
BEND	OR	johnshort@usa.com							
BY PROVIDING AN E-MAIL AI	DDRESS, C	CONSENT IS GIVEN	TO RECEIVE ALL COR	RESPONDENCE FROM THE					
DEPARTMENT ELECTRONICA	LLY. CO	PIES OF THE FINAL	L ORDER DOCUMENTS	S WILL ALSO BE MAILED.					
Explain in your own words what you propose to accomplish with this transfer application, and why:									
TRANSFER FROM DIFFERENT PROPERTY FOR NURSERY USE.									
If you need additional space, cont	inue on a s	eparate piece of pape	er and attach to the applic	cation as "Attachment 1".					

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

Check One Box

By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); OR

I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**

I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

I understand that prior to Department approval of the transfer application, 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 water right 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: Frontier Advertiser.

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

Applicant signature

APICCON LEE It Name (and Title if applicable)

1/20/2016

Date

Applicant signature

Print Name (and Title if applicable)

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes 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 e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.

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Check the following boxes that 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.

Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

At this time, are the lands in this transfer application in the process of being sold? \Box Yes \boxtimes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see: http://www.oregon.gov/owrd/docs/transfer-propertytransactions.pdf

RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
СІТҮ	STATE	ZIP	E-MAIL	

Describe any special ownership circumstances here: N/A

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

IRRIGATION DISTRICT NAME	ADDRESS	
CENTRAL OREGON IRRIGATION DISTRICT	1055 SW LAKE COURT	
CITY	STATE	ZIP
REDMOND	OR	97756

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

ENTITY NAME	ADDRESS		
СІТҮ	STATE	ZIP	

To meet State Land Use Consistency Requirements, you must list all county, city, municipal corporation, or tribal governments within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME	ADDRESS				
DESCHUTES CO. COMMUNITY DEV.	117 NW LAFAYETTE AVENUE				
CITY	STATE	ZIP			
BEND	OR	97701			

ENTITY NAME	ADDRESS	
СІТҮ	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 # 90952

Description of Water Delivery System

System capacity: 0.26 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. TYPICAL COMMUNITY BURIED WATER SYSTEM

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)	Тwp		R	ng	Sec	И	Х	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
WELL	Authorized	DESC 5107	17	S	13	Е	16	SE	NE	4800	640' N & 1400' E OF C ¼ COR., SEC. 16
WELL	Authorized	L117528	17	S	14	E	22	NW	SW	1400	700' E & 680'S OF E 1/4 COR., SEC. 22
	Authorized Proposed										
	Authorized Proposed										

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

ULN	an type(s) of enange(s) proposed below (CII all S	codels are provided in pareneneses).
\boxtimes	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
\boxtimes	Character of Use (USE)	\boxtimes	Point of Appropriation/Well (POA)
	Point of Diversion (POD)		Additional Point of Appropriation (APOA)
	A difficul Deint of Dimension (ADOD)		$O_{\rm rel} = t^2 t_{\rm rel} t_{\rm rel} $

Additional Point of Diversion (APOD)	Substitution (SUB)
Surface Water POD to Ground Water	Government Action

POA (SW/GW)

Government Action POD (GOV)

Will all of the proposed changes affect the entire water right?

- Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- \boxtimes No Complete all of Table 2 to describe the portion 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.

List the change proposed for the acreage in each $\frac{1}{4}$ $\frac{1}{4}$. 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	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.											ES					
Т	мр	Rng	-	Sec		1/4	Tax Lot	Gvt Lot or DLC		1	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES" from previous page)	Τv	vp	Rr	ng	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
17	s	13	E	16	SE	NE			1.9	IR	WELL	1990	WELL	17	s	14	E	22	NW	sw	1400		30	NU	L- 117528	1990
	R	EC	ΕI	/EC	BY	ow	RD																			
			۲E	R 0	1 2	010																				
			S	ALE	м, С	R																				
																										_
]	ΓΟΤΑ	L ACH	RES:	1.9]	ΓΟΤΑ	LACE	RES:	30			

Additional remarks: N/A.

Revised 7/1/2013

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 # 90952

List the change proposed for the acreage in each 1/4 1/4. 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.

1	AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANC 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.															
Tw	p	Rng		Sec		4	Tax Lot	Gvt	Acres	1445-04-246-2	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	T)	vр	R	ng	Sec	4	1/4	Tax Lot	Gyt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
	N.S.												EXAMPLE		r se pre Ser se se					2.5						34 J.C
2	5	9	L	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	20)6/200	7	5	9	Ē.	1	NW	NW	580	1	10.0		POD #5	1901
														2	8	9	E	2	SW	NW	500		540		POD #6	1901
17	s	13	E	16	SE	NE			1.9	IR	WELL	1990	WELL	17	s	14	E	22	NW	sw	1400		1.9	NU	L- 117528	1990
					-																					
															-											
									-																	
]	TOTA	L ACR	ES:	1.9										Т	OTA	L ACR	ES:	1.9			
	Ad	diti	on	al re	emar	ks: N	/A.																REC	EIVED B	YOWR	D

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For Place of Use or 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? \Box Yes \boxtimes No

If YES, list the certificate, water use permit, or ground water registration numbers: _____.

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.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # N/A; Surface water primary Certificate # N/A.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # N/A

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://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

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)	Scal 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). <u>If</u> less han full rate of water right
							RE	CEIVED B	YOWRD
								FEB 01 2	2 0 1 6
	already built?	Is well well: already OWRD Well built? ID Tag No.	Is well well: already OWRD Well Total built? ID Tag No. well	Is well well: already OWRD Well Total built? ID Tag No. well Casing	Is well well: already OWRD Well Total Casing built? ID Tag No. well Casing Intervals	Is well well: already OWRD Well Total Casing Seal built? ID Tag No. well Casing Intervals depth(s)	Is well well: Perforated already OWRD Well Total Casing Seal or screened built? ID Tag No. well Casing Intervals depth(s) intervals	Is well well: already OWRD Well Total well (Yes or No) L- depth depth Diameter (feet) (intervals) (in	Is well well: already OWRD Well Total built? ID Tag No. L- Casing Diameter Casing Diameter (Yes or No) L- Casing Diameter (Seal depth(s) (intervals)

SALEM, OR

Application for Water Right Transfer Evidence of Use Affidavit



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon

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SS

County of DESCHUTES)

I, JOHN A. SHORT, in my capacity as WATER RIGHT SPECIALIST,

mailing address P.O. BOX 1830, BEND, OR., 97709

telephone number (541)389-2837, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

Personal observation
Professional expertise

2. I attest that:

□ Water was used during the previous five years on the **entire** place of use for Certificate # ____; **OR**

My knowledge is specific to the use of water at the following locations within the last five years:

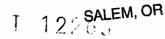
Certificate #	Township	Range	Mer	Sec	14 14	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # 90952 has been issued within the past five years; OR
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion <u>not</u> leased instream.); OR
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____(For Historic POD/POA Transfers) RECEIVED BY OWRD

(continues on reverse side)

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- 3. The water right was used for: (e.g., crops, pasture, etc.): IR
- 4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

Signature of Affiant

1-27-2016 Date

Signed and sworn to (or affirmed) before me this 27^{m} day of 320^{10} .



Notary Public for Oregon

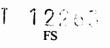
June 29, 2018 My Commission Expires:

Supporting Documents	Examples
Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	 Power usage records for pumps associated with irrigation use
	 Fertilizer or seed bills related to irrigated crops
	• Farmers Co-op sales receipt
Records such as FSA crop reports, irrigation	District assessment records for water delivered
district records, NRCS farm management plan, or records of other water suppliers	• Crop reports submitted under a federal loan agreement
records of other water suppliers	 Beneficial use reports from district
	IRS Farm Usage Deduction Report
	Agricultural Stabilization Plan
	• CREP Report
Aerial photos containing sufficient detail to establish location and date of photograph	Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.
	Sources for aerial photos:
	OSU –www.oregonexplorer.info/imagery
	OWRD – www.wrd.state.or.us
	Google Earth – earth.google.com TerraServer – www.terraserver.com
Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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SALEM, OR



Evidence of Use Affidavit - Page 2 of 2

	Receipt for Request for Land Use Information	
Applicant name: 520	DYNAMICS	
City or County: Desch	utes Staff contact: Anthony	Raquine
Signature: Anthou	0	V27/16
(
Revised 3/4/2010	Ground Water/3	WR

.

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STATE OF OREGON WATER SUPPLY WELL REPORT	DESC	60194 W	ELL I.D. LABEL# L	528 5647	
(as required by ORS 537.765 & OAR 690-205-0210)	3/3/	2015	ORIGINAL LOG #		
	3/3/		UNIGHAL LOG #	<u>I</u>	
1) LAND OWNER Owner Well I.D.		4			
First Name DAVE Last Name HOUSE		(9) LOCATION	OF WELL (legal desci	ription)	
Company		County DESCHUTES	Twp <u>17.00 S</u> N/S	Range 14.00 H	E E/W WN
Address 13 LINCOLN LAUREL ROAD,		Sec 22 NW	1/4 of the SW 1/4	Tax Lot 140	0
City BLAIRSTON State NJ Zip 07825	<u></u>	Tax Map Number		Lot	
ITTE OF WORK	Conversion	Lat	" or 44.08371100		DMS or DD
Alteration (complete 2a & 10) Abandonme	nt(complete 5a)	Long	" or <u>-121.04454000</u>		DMS or DD
2a) PRE-ALTERATION Dia + From To Gauge Sti Pistc Wid Ti	ard		iress of well C Nearest	address	-
		-	RKET RD, BEND OR 9770	1	
Material From To Amt sacks/lbs			,		
Seal:					
3) DRILL METHOD		(10) STATIC WA			
Rotary Air Rotary Mud Cable Auger Cable N	/iud	5	Date	SWL(psi) +	SWL(ft)
Reverse Rotary Other		Existing Well / Pr Completed Well		=	(16
			2/20/2010		615
PROPOSED USE Domestic Irrigation Comm	unity	1	•	Dry Hole?	
Industrial/ Commercial Livestock Dewatering		WATER BEARING ZO	ONES Depth water w	as first found	660.00
Thermal Injection Other		SWL Date Fro	m To Est Flow	v SWL(psi)	+ SWL(ft)
BORE HOLE CONSTRUCTION Special Standard	(Attach conv	2/26/2015 6	60 770 20	1	615
Depth of Completed Well <u>770.00</u> ft.			100 770 20		
BORE HOLE SEAL	sacks/				
	Amt lbs				
12 0 18 Bentonite Chips 0 18	10 S				H
8 18 639 Calculate	ed 10.21] [
6 639 770		(11) WELL LOG			
Calculat		(II) WELL LOG	Ground Elevation		
How was seal placed: Method A B C I) [E	Mate	rial	From	To
Other BENTONITE DRY		Sandy top soil		0	2
Backfill placed from ft. to ft. Material		Broken lava		2	4
Filter pack from ft. to ft. MaterialS	Size	Lava	· · · · · · · · · · · · · · · · · · ·	4	52
Explosives used: Yes Type Amount		Brown SS	· · · · · · · · · · · · · · · · · · ·	<u> </u>	64 105
		Lava Basalt	· · · · · · · · · · · · · · · · · · ·	105	202
5a) ABANDONMENT USING UNHYDRATED BENT(Proposed Amount Actual Amount	JNIIE	Brown SS		202	369
		Basalt		369	400
5) CASING/LINER		Gray Lava		400	430
	lstc Wid Thrd	Crevices lava no retur	ns	430	624
	X X H	Broken lava No Retur	ns	624	642
6 3 636 .188		SS Congl		642	770
	H H H	RECEIVED	BY OWRD		
	H H H		or offic		
Shoe Inside Outside X Other Location of shoe(· · · · · · · · · · · · · · · · · · ·
		FEB 0	2016		
Temp casing Yes Dia From To					
) PERFORATIONS/SCREENS					
Perforations Method		Date Started 2/25/2	1 OB		L
Screens Type Material	# of Tele/	Date Started 2723/2	Complet	ed <u>2/26/2015</u>	
	# of Tele/ slots pipe size	(unbonded) Water V	Vell Constructor Certification)0	
Screen Liner Dia From To width length	siots pipe size		k I performed on the constru		ng, alteration, o
		abandonment of this	well is in compliance w	ith Oregon wa	ter supply wel
		construction standard	s. Materials used and inform		
		the best of my knowle	2		
		License Number	Date		
B) WELL TESTS: Minimum testing time is 1 hour					
	ing Artesian	Signed			
Vield gal/min Drawdown Drill stem/Pump depth Durat	ion (hr)	(bonded) Water Wel	Constructor Certification		
20 760	1	I accept responsibility	for the construction, deepe	ning, alteration.	, or abandonme
		work performed on th	is well during the construction	a dates reported	above. All wo
		performed during this	is time is in compliance w	ith Oregon wa	ter supply we
Temperature 66 °F Lab analysis Yes By		construction standards	. This report is true to the be	st of my knowle	dge and belief.
Water quality concerns? Yes (describe below) TDS amount		License Number 125	5 Date 3	/3/2015	
From To Description Am	ount Units				
		Signed WILLIAM	DOUG AIKEN (E-filed)		
		- THEFT			
		Contact Info (optional			

ORIGINAL - WATER RESOURCES DEPARTMENT THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

T 12265

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

LOCATION OF WELL

Latitude: 44.0837524771 Datum: WGS84 Longitude: -121.0444613005 Township/Range/Section/Quarter-Quarter Section: WM 17S 14E 22 NWSW Address of Well: 25606 ALFALFA MARKET RD, BEND OR 97701 **Oregon Water Resources Department**

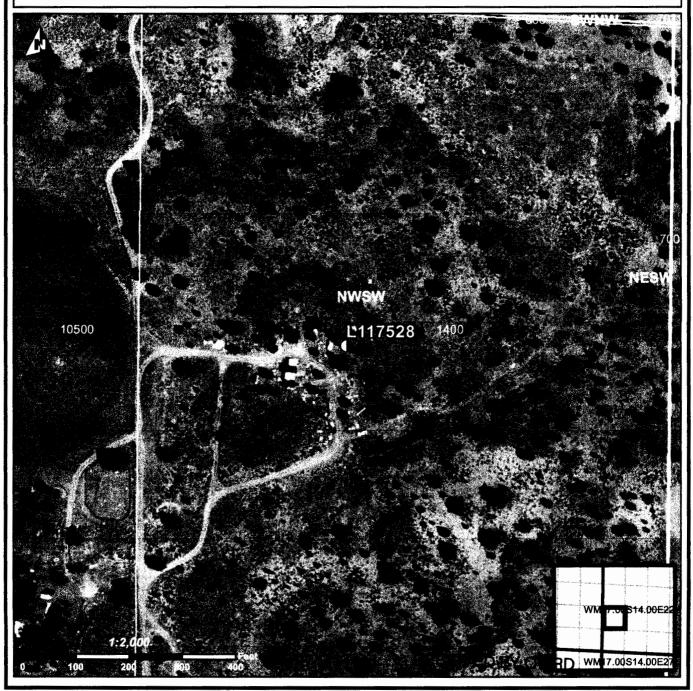
725 Summer St NE, Salem OR 97301 (503)986-0900



Well Label: L117528 Well Log: DESC 60194 Printed: April 20, 2015

DISCLAIMER: This map is intended to represent the approximate location of the exempt use well provided by the land owner. It is not intended to be construed as survey accurate in any manner.

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SALEM, OR 1 12200

NOTICE TO WATER WELL CORFECCE IVED	RECEIVEDPAG	EI /	
are to be med with the	L REPORT	malise-11	rd
WATER RESOURCES DEPARTMENT G 3 1981 STATE OF C			
within 20 down from WATER RESOURCES DEPTicate spect	MATER RESOURCES DEBT	ermit No	
of well completion. SALEM: OREGON (Do not write abo	ove thisALEM, OREGON	~ 5107	
		601-1	
(1) OWNER:	(10) LOCATION OF WELL:		
Name Mr. Claud Powell		well number	.
Address 450 S.E.Beed Market Rd. Bend. Oreg. 97701	SE 14 NE 14 Section 16 T.	<u>17-S r. 13-E w</u>	V.M.
	Bearing and distance from section or su	ubdivision corner	
(2) TYPE OF WORK (check):			·
New Well 💁 Deepening 🗋 Reconditioning 🗋 Abandon 🗌			
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Comple	ted well.	-
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found	560	ft.
Rotary 🔀 Driven 🗆 Domestic 🎉 Industrial 🗆 Municipal 🗆	Static level 545 st. below	v land surface. Date 4-24-	-81
Cable Dug Bored Irrigation Test Well	· · · · · · · · · · · · · · · · · · ·	er square inch. Date	
(5) CASING INSTALLED: Threaded [] Welded []	(12) WELL LOG: Diameter o	f well below casing8	
" Diam. from <u>1</u> ft. to <u>25</u> ft. Gage . <u>250</u>	Depth drilled 605 ft. Depth o	f completed well 605	ft:
	Formation: Describe color, texture, gra		
" Diam. from ft. to ft. Gage	and show thickness and nature of each with at least one entry for each change of		
(6) PERFORATIONS: Perforated? [] Yes KNo.	position of Static Water Level and indic		
e of perforator used	MATERIAL	From To SW	л.
Size of perforations in. by in.	Sand & pumice	0 2	
perforations from	Gray Lava	2, 46	
perforations from ft. to ft.	Frac. lava	46 64	
perforations from	Gray lava RECEIVED	BY 0 44 94	
	Frac lava	122	
(7) SCREENS: Well screen installed? Yes X No	Broken Scorio	122 194	
Manufacturer's Name	Frac. lava FEB-01	2016 194 202	
Type	Scorio	202 229	
Diam,	Gray lava	229 264	
Diam,	Conglamorate SALEM,	OR 264 278 278 296	
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Brn. sandstone Gray lava	278 296	
IOWELEU DEIOW BLAIC IEVEI	Frac Lava	312 331	
Was a pump test made? Ves P No If yes, by whom?	Dense basalt	331 341	
Yield: gal./min. with ft. drawdown after hrs.	Broken lava & sed.	341 348	
· · · · · · · · · · · · · · · · · · ·	Sed. and clay	348 357	
	Scorio	357 372	
AIR TEST 20 gal./min. with O ft. drawdown after 2 hrs.	Gray lava	372 440	
Artesian flow g.p.m.	Cont. next page	<u>.</u>	
Temperature of water 51 Depth artesian flow encountered ft.	Work started 4-7-81 19	Completed 4-24-81 19)
CONSTRUCTION	Date well drilling machine moved off o		9
Well seal-Material used CEMENT SLUERY	Drilling Machine Operator's Certifi		
	This well was constructed und	ler my direct supervisi	ion.
Well sealed from land surface to	Materials used and information re best knowledge and belief.	ported above are true to	my
Diameter of well bore below seal		V Data 4-10	81
Number of sacks of cement used in well seal	[Signed]	Date 6 - 10, 19	
How was cement grout placed? PRESSURE GROUTEd	Drilling Machine Operator's Licens	se No	
	Water Well Contractor's Certification		
	This well was drilled under my true to the best of my knowledge a	and belief.	rt is
		ling	
Was a drive shoe used? 🗆 Yes 🙀 No Plugs Size: location ft.	Name Reed's Well Dril.		
Was a drive shoe used? Yes X No Plugs	Name Reed's Well Dril	(Type or print)	1004
	(Person, firm or corporation)	Bend, Oreg. 97	701
Did any strata contain unusable water? 🗋 Yes 🗙 No	Address 20219 Meadow Ln	(Type or print)	701
Did any strata contain unusable water? Type of water? depth of strata	Address 20219 Meadow Ln	(Type or print)	·701
Did any strata contain unusable water? Type of water? depth of strata Method of sealing strata off	Address 20219 Meadow Ln	Bend, Oreg. 97	

NOTICE TO WATER WELL COT A OF IVED	P PIGE 2		
The original and first copy of his pool	L RERECEIVED	Inli	3- 11-1
WATER RESOURCES DEPARTMANG 3 1981 STATE OF	OREGON JUN 18 1981 State Well No.		SE-16ad
SALEM, OREGON 97310 within 30 days from WALER RESOURCES DEPT	or print)		
of well completion. SALEM. CHECON (Do not write al	ove this line) RESOURCES DEPI		
	SALEM. OREGON	/	
(1) OWNER :	(10) LOCATION OF WELL:		
Name Mr. Claud Powell	County Driller's well n	umber	
Address	S.E 34 NE 14 Section 16 T. 17-5	SR. 13-	- F W.M.
	Bearing and distance from section or subdivisi		
(2) TYPE OF WORK (check):	Towning and anothics right between or papertain		
New Well 🗌 Deepening 🗌 Reconditioning 🗍 Abandon 🗌			
If abandonment, describe material and procedure in Item 12.	(11) WATER I EVEL Completed		
(3) TYPE OF WELL: (4) PROPOSED USE (check):	(11) WATER LEVEL: Completed w	/en.	
Rotary D Driven D	Depth at which water was first found		ft.
Cable 🗍 Jetted 🗍 Domestic 🗋 Industrial 📑 Municipal	Static level ft. below land	surface. Dat	te
Dug 🗌 Bored 🗋 Irrigation 🗋 Test Well 🗌 Other 🗌	Artesian pressure lbs. per squar	re inch. Dat	te
(5) CASING INSTALLED: Threaded [] Welded []			and a second
"Diam. from	(12) WELL LOG: Diameter of well	below casing	
" Diam. from	Depth drilled ft. Depth of comp	leted well	
" Diam, from	Formation: Describe color, texture, grain size		
	and show thickness and nature of each stratu with at least one entry for each change of forma		
(6) PERFORATIONS: Perforated? Yes No.	position of Static Water Level and indicate prin		
e of perforator used	MATERIAL	From	To SWL
Size of perforations in. by in.	Brown lava	440 4	154
perforations from ft. to ft.	Gray lava	454 4	180
perforations from ft. to ft.	Brn. Scorio	480 4	+97
perforations from ft. to ft.	Sed. & clay	497 5	504
	Scorio & clay	504 5	513
(7) SCREENS: Well screen installed? Yes I No	Gray sedimentary rock	513 5	60
Manufacturer's Name	Frac, sedimentary rock	560 5	79 545
Type	Scorio	579 5	595 545
Diam	Broken lava & scorio	595 6	05 545
Diam Slot size Set from ft. to ft.			
(8) WELL TESTS: Drawdown is amount water level is			
lowered below static level		└──	
Was a pump test made? 🗋 Yes 🗋 No If yes, by whom?	CEIVED BY OWRD	<u> </u>	
Yield: gal./min. withft. drawdown after hrs.		ļ	
	FEB 01 2016	┢	
н н ж	120 01 2010	┢────┝──	
Bailer test gal./min. with ft. drawdown after hrs.			
	SALEM, OR		
Temperature of water Depth artesian flow encountered ft.	Work started 19 Complet	ed	19
CONSTRUCTION:	Date well drilling machine moved off of well		19
Well seal-Material used	Drilling Machine Operator's Certification:		
Well sealed from land surface toft	This well was constructed under my	direct s	upervision.
Diameter of well bore to bottom of seal in.	Materials used and information reported best knowledge and belief.	above are	true to my
Diameter of well bore below seal		Dete	10
Number of sacks of cement used in well seal	[Signed]	Date	
How was cement grout placed?	Drilling Machine Operator's License No.	******	
	Water Well Contractor's Certification:		
	This well was drilled under my jurisd true to the best of my knowledge and be		this report is
Was a drive shoe used? 🗋 Yes 🗋 No Plugs Size: location ft.			
Did any strata contain unusable water?. 🗋 Yes 🔲 No	(Person, firm or corporation)	(Туре	or print)
Type of water? depth of strata	Address		
Method of sealing strata off			
	[Signed]	ractor)	
Was well gravel packed? Ves Nd Size of gravel;			
Gravel placed from ft. to ft.	Contractor's License No, Date		
(IISE ADDITIONAL ST	TERTS IF NECESSARY)		ST-45656_110

P*45656-11