

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.

Che	ck all itei	ems 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 completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd fee calculator. If you have questions, call Customer Service at (503) 986-0801.	ent, and
\boxtimes		Part 4 – Completed Applicant Information and Signature.	
\boxtimes		Part 5 – Information about Water Rights to be Transferred: How many water rights be transferred? 4 List them here: 91366, 91367, 91448, 82369 Please include a separate Part 5 for each water right. (See instructions on page 6) VE	
		Attachments:	
\boxtimes		Completed Transfer Application Map.	2016
\boxtimes		Completed Evidence of Use Affidavit and supporting documentation.	en con
	⊠ N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the right is on.)	ie water
	⊠ N/A	Supplemental Form D – For water rights served by or issued in the name of an irriga district. Complete when the transfer applicant is not the irrigation district.	tion
\boxtimes	□ N/A	Land Use Information Form with approval and signature (or signed land use form re stub). Not required if water is to be diverted, conveyed, and/or used only on federal if all of the following apply: a) a change in place of use only, b) no structural change use of water is for irrigation only, and d) the use is located within an irrigation district exclusive farm use zone.	lands or es, c) the
\boxtimes	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or adopoint(s) of appropriation.	ditional
	⊠ N/A	Geologist Report for a change from a surface water point of diversion to a ground we of appropriation (well), if the proposed well is more than 500' from the surface water and more than 1000' upstream or downstream from the point of diversion. See OAF 380-2130 for requirements and applicability.	r source
		(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	Algorith March Agentson

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

es the existing water right map. Check all boxes that apply.
A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/ . CWRE stamp and signature are not required for substitutions.
A If more than three water rights are involved, separate maps are needed for each water right.
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, 75 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 SALEM , 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.
Township, Range, Section, 1/4 1/4, 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 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.
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.
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°).

	FEE WORKSHEET for PERMANENT TRANSFER Part 3 of 5	- Foo	Workshoet
1	Base Fee (includes one type of change to one water right for up to 1 cts)	1	\$1,000
:	Types of change proposed:		
	☐ Place of Use		
	Character of Use		
	Point of Diversion/Appropriation		į
	Number of above boxes checked = $\frac{2(2a)}{}$		
	Subtract 1 from the number in line $2a = \frac{1}{2b}$ If only one change, this will be 0		1
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » »	2	\$800
	Number of water rights included in transfer 4 (3a)		
	Subtract 1 from the number in 3a above: 3 (3b) If only one water right this will		
	be 0		
3	Multiply line 3b by \$450 and enter » » » » » » » » » » » » » »	3	\$1350
	Do you propose to add or change a well, or change from a surface water POD		
	to a well?		İ
	□ No: enter 0 »» » » » » » » » » » » » » » » » »		
4		4	\$350
	Do you manage to change the place of uge on change to of uge?		
	No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »	FIVED	BA OMUD
	IXI Yes' enter the cts for the portions of the rights to be transferred (see	i 1	
	example below*): $\frac{7.24(5a)}{}$	JUN 2 (2016
	Subtract 1.0 from the number in 5a above: 6.24 (5b)		
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » »	SALEN	I. OF
	If 5b is greater than 0, round up to the nearest whole number: 7 (5c) and		
5	multiply 5c by \$300, then enter on line 5 » » » » » » » »	5	\$2100
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$5600
	Is this transfer:		
	necessary to complete a project funded by the Oregon Watershed		
	Enhancement Board (OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net		
	benefit to fish and wildlife habitat?		
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » »	7	\$0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » Transfer Fee:	8	\$5600

*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	

Part 4 of 5 - Applicant Information and Signature

Δ	nnlia	rant	Infe	rm	ation
	hhm	Lant	THIL	<i>7</i> 1 111	ativu

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
GOLDEN RULE FARMS, I	NC			
ADDRESS				FAX NO.
PO BOX 255				
CITY	STATE	ZIP	E-MAIL	
CHRISTMAS VALLEY	OR	97641		
BY PROVIDING AN E-MAIL	ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALI	CORRESPONDENCE FROM THE
				IENTS WILL ALSO BE MAILED.

AGENT/BUSINESS NAME	OUT OF	Word II o	PHONE NO.	ADDITIONAL CONTACT NO.				
JOHN A. SHORT/ WATER RI ADDRESS	SS FAX NO.							
PO BOX 1830								
CITY	STATE	ZIP	E-MAIL	USA COM				
BEND By providing an e-mail at	OR ODRESS. (97709 CONSENT IS GIVE	JOHNSHORT@I	CORRESPONDENCE FROM THE				
				ENTS WILL ALSO BE MAILED.				
Explain in your own words	what you	nronose to acc	omnlish with this to	ransfer application, and why:				
Apiani in your own words	wiiai you	i propose to acc	ompusii widi diis d	ansier application, and wily.				
CHANGING FROM WHI	אוו ושי	IEC TO DIVO	re					
you need additional space, cont	inue on a s	separate piece of pa	per and attach to the a	pplication as "Attachment 1".				
Check this box if this pro			funded by the Ame	erican Recovery and				
Reinvestment Act. (Fede	eral stimi	ılus dollars)						
By signing this application, I	undoretone	-	One Box	, dotomoination and major to				
				information and evidence that I am				
authorized to pursue the trans	fer as iden	tified in OAR 690	-380-4010(5)· OR					
I affirm the applicant is a mur name of the municipality or a	nicipality a	s defined in ORS 3	540.510(3)(b) and that	the right is in the RECEIVED B				
I affirm the applicant is an en			lemn property and is a	equiring by				
condemnation the property to								
supporting documentation.								
				SALEM,				
				ay be required to submit payme				
				tion in the area where the water				
				ualifying newspaper is available				
aggest publishing the notice in	n the follo	wing newspaper	:					
l (we) affirm that the inform	tion con	tained in this ap	plication is true and	d accurate.				
	\mathcal{H}	Traclas	PRIKOH-PRE	2 1-10-10				
	// /\	11 1/100 017	4 TUU VII 1/405	3 67646				
Applicant signature		Print Name (and	Title if applicable)	Date				
Applicant signature	V	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 t	nat apply	:									
The applicant is resp continue to be sent to		-	etion of	change(s). Not	tices a	nd correspondence should					
		-				posed change(s) after the pe sent to this landowner.					
		* *		•		completion of change(s). ner and the applicant.					
At this time, are the lands in	n this tran	sfer appli	ication is	n the process of	f being	g sold? 🗌 Yes 🛭 No					
	. If you d	lo not kno	ow who		-	the receiving landowner will be, then a request for					
If a property sells, the counless a sale agreement http://www.oregon.gov/	or other o	locument	states o	therwise. For 1	more i						
RECEIVING LANDOWNER NAME N/A				PHONE NO.		ADDITIONAL CONTACT NO.					
ADDRESS				L		FAX NO. RECEIVED BY OWRD					
CITY	STATE	ZIP		E-MAIL							
Describe any special ownership circumstances here: N/A SALEM, OF 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.)											
Check here if any of the an irrigation or other wa	water rig	hts propo	osed for Complet	transfer are or verant and attach Su		located within or served by					
Check here if any of the	water rig	hts propo	sed for	transfer are or verant and attach Su		located within or served by					
Check here if any of the an irrigation or other wa	water rig	hts propo	osed for Complet	transfer are or verant and attach Su		located within or served by					
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A CITY	water rig	hts proport. (Tip :	Complete ADDRES	transfer are or vite and attach Sussimples	upplen	located within or served by nental Form D.)					
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a feet of the stored water	water rig	hts proport. (Tip :	Complete ADDRES	transfer are or vite and attach Sussimples	upplen	located within or served by nental Form D.)					
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a feet	water rig	hts proport. (Tip :	ADDRES STATE applied uther enti	transfer are or vite and attach Sussimples	upplen	located within or served by nental Form D.)					
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a feet stored water with a feet N/A CITY To meet State Land Use Co	water rig	rights su	ADDRES ADDRES ADDRES ADDRES STATE ADDRES STATE	transfer are or vie and attach Sussimilar a water setty.	ervice	zip zip					
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a fentity name N/A CITY To meet State Land Use Cocorporation, or tribal gover ENTITY NAME HARNEY CO PLANNING DE	water rig	rights su	address state applied uther enti address state applied uther enti address state address	transfer are or vite and attach Sussinger a water setty.	ervice	zIP zIP zIP zip ty, city, municipal diverted, conveyed or used.					
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a ferritry NAME N/A CITY To meet State Land Use Cocorporation, or tribal gover	water rig	rights su	address state applied uther enti address state applied uther enti address state address	transfer are or vite and attach Sussinger a water setty.	ervice	zIP zIP zIP zip ty, city, municipal diverted, conveyed or used.					
Check here if any of the an irrigation or other was IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a feet stored water water for a feet stored water for a feet stored water for a feet stored water with a feet stored water wate	water rig	rights su	sed for Complete Address STATE Address STATE STATE Address STATE Address STATE Address STATE Address STATE Address STATE	transfer are or vie and attach Sussinger a water setty. Sour must list all diction water was by 450 N. BUEN	ervice	zip zip zip zip ty, city, municipal diverted, conveyed or used.					

INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please save the application form to your computer. Unlock the document by using one of the following

instructions for your Microsoft Word software version:

Microsoft Word 2003

Unlock the document by one of the following:

Using the Tools menu => click Unprotect Document;
 OR

• Using the Forms toolbar => click on the Protect/Unprotect icon.

To relock the document to enable the checkboxes to work, you will need to:

Using the Tools menu => click Protect Document;
 OR

• Using the Forms toolbar => click on the Protect/Unprotect icon.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

Microsoft Word 2007

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

Microsoft Word 2010

- Unlock the document by clicking the **Review** tab, toggle the **Restrict Editing icon** at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the "Allow only this type of editing in the document: Filling in forms" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the Editing Restrictions/Allow Only This Type of Editing/Filling In Forms box from the drop-down menu, then check Yes, Start Enforcing Protection. You do not need to assign a password for the editing restrictions.

 RECEIVED BY OWRD

JUN 20 2016

Other Alternatives:

SALEM, OR

- 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 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 # 82369

Description of Water Delivery System

System capacity: <u>1.79</u> 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. **PUMP DRIVES WHEEL LINES DIRECTLY**

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)	Тwр	Rng	Sec	44	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)	
WELL 4	□ Authorized □ Proposed	HARN 1494	27 S	34 E	9	NW SW	1400	2140' N, 1125' E OF SW COR SEC 9	
WELL 2	☐ Authorized ☐ Proposed	HARN 1488	11 11		"	NE NW	400	590' S, 1345' E OF NW COR SEC 9	
WELL 3	☐ Authorized ☐ Proposed	HARN 51851	11 11	" "	,	SE SE	**	505' N, 730' W OF SE COR SEC 9	
WELL 1	☐ Authorized ☐ Proposed	HARN 1495	11 11	" "	11	NE NE	**	1302' S, 1302' W OF NE COR SEC 9	

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses): 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) \boxtimes Additional Point of Appropriation (APOA) Additional Point of Diversion (APOD) Substitution (SUB) Surface Water POD to Ground Water Government Action POD (GOV) POA (SW/GW) 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. No Complete all of Table 2 to describe the portion of the water right to be changed. RECEIVED BY OWRD

JUN 20 2016

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 # 82369

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.

Th	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	rioposeu								CHANG	ES						
Twp	Rr		Sec Sec		part o	Tax Lot	Gvt Lot or DLC	Toma effici	POD(s) or	Date	Changes (see "CODES" from previous		vp	Rı	ıg	Sec	1/4	1/4	Tax Lot	Gvt	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
											POU/APOA	27	s	34	E	9	SE	NW	1400		30.7	IR	WELL 1 WELL 2 WELL 3 WELL 4	11-20-78
											91	"	"	"	"	**	sw	NW	"		34.1	"	"	=
											11	"	"	"	"	"	NE	sw	"		29	"	"	"
											"	"	,,	**	"	**	NW	sw	"		10	,,	"	11
											••	"	"	**	"	8	SE	NE	"		23.4	,,	"	11
											"	"	"	**	"	9	NW	NW	"		7.3	"	"	**
										B	11	"	"	"	"	"	SE	SE	400		8.7	11	"	"
								<u>v</u>	ا ہے	C T														
								ALE	1 100	K Ti														
								<u>\$</u>	0 ,	D D K														
								D		\$														
					ГОТА	L ACF	RES:											ГОТА	L ACI	RES:	143.2			

Additional remarks: N/A.

Revised 7/1/2013

Permanent Transfer Application Form - Page 8 of 15

TACS

For Place of Use or Character of Use Changes

associated blemental to ny change dification
olemental to ny change dification
ny change dification
ater primary
IVED BY OWAD
JN 20 2016
SALEM, OR
ALECIAI, OFF
ation:
labeled and ing application
y wells that do est estimate" you consult a embling the
and shown on ssing of your assess whether priation ess the same
es yen ss

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). <u>If</u> less han full rate of water right	

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

		(CEI	RTII	FICA	ATE#	<u>9136′</u>	7	REC	EIVED BY OWRD
ption of Water	Delivery Sy	stem	l							HIN 9 0 2040
capacity: 2.8		JUN 2 0 2016								
	gallons po	er mi	nute	e (gp	m)					SALEM, OR
		_				,		•	,	/
Is this POD/POA Authorized on the Certificate or	If POA, OWRD Well Log ID# (or Well ID					Sec			Tax Lot, DLC or Gov't	Measured Distances (from a recognized survey corner)
				_					Lot	
Proposed	HARN 1495	"	"	"	**	"	NE	NE	"	1302' S, 1302' W OF NE COR SEC 9
✓ Authorized✓ Proposed	HARN 51851	"	"	"	**	,	SE	SE	"	505' N, 730' W OF SE COR SEC 9
☐ Authorized ☐ Proposed	HARN 1488	"	**	"	"	**	NE	NW	400	590' S, 1345' E OF NW COR SEC 9
☐ Authorized ☐ Proposed	HARN 1494	27	s	34	E	9	NW	sw	1400	2140' N, 1125' E OF SW COR SEC 9
all type(s) of c	hange(s) pro	pose	ed b	elow	v (ch	ange '	'COD	ES" a	re prov	vided in parentheses):
		.			(_	Primary Use (S to P)
Character of	Use (USE)									• ` ` '
Point of Dive	ersion (POD)						Additio	onal P	oint of A	Appropriation (APOA)
Additional P	oint of Diver	sion ((AP	OD)			Substit	ution	(SUB)	
		ound	Wa	ater			Govern	nment	Action	POD (GOV)
l of the propos	sed changes :	affect	t th	e ent	tire v	water	right	?		
•	•	•				,			able 2 o	on the next page. Use the
							•		ght to b	e changed.
	De the current wars. Include intoly the water at cation of Auth POD/POA name of Pod/POA Authorized on the Certificate or is it Proposed Authorized Proposed Authorized Proposed Authorized Proposed Proposed Authorized Proposed Authorized Proposed Authorized Proposed Authorized Proposed Authorized Proposed Authorized Proposed Interposed Authorized Proposed Interposed Authorized Proposed Interposed Authorized Proposed Interposed Interpose Interpo	gallons per gallon	gallons per minor the current water delivery systems. Include information on the poly the water at the authorized plantation of Authorized and Proper POD/POA name is not specified Is this POD/POA name is not specified authorized on the Certificate or is it Proposed? Authorized HARN 1495 " Authorized HARN 1495 " Authorized HARN 1488 " Proposed HARN 1488 " Authorized HARN 1494 27 all type(s) of change(s) proposed Place of Use (POU) Character of Use (USE) Point of Diversion (POD) Additional Point of Diversion (POD) In the proposed changes affect (Codditional Poposed (Codditional Po	ption of Water Delivery System capacity: 2.87 cubic feet per secon gallons per minute be the current water delivery system ars. Include information on the pum obly the water at the authorized place of the cation of Authorized and Proposed POD/POA name is not specified on Is this POD/POA Authorized and Proposed POD/POA name is not specified on Is this POD/POA OWRD Well Log ID# (or Well ID Tag # L) Authorized HARN 1495 " " Authorized HARN 1495 " " Proposed 51851 " " Authorized HARN 1488 " " Proposed HARN 1488 " " Authorized HARN 1494 27 S all type(s) of change(s) proposed by Place of Use (POU) Character of Use (USE) Point of Diversion (POD) Additional Point of Diversion (AP Surface Water POD to Ground Wa POA (SW/GW) I of the proposed changes affect the Complete only the Proposed ("to" "CODES" listed above to describe	acapacity: 2.87 cubic feet per second (cf gallons per minute (gp per the current water delivery system or the ars. Include information on the pumps, copy the water at the authorized place of using the cation of Authorized and Proposed Polypode Authorized on the Certificate or is it Proposed? St this POD/POA Authorized on the Certificate or is it Proposed? If POA, OWRD Well Log ID# (or Well ID Tag # L)	acapacity: 2.87 cubic feet per second (cfs) O	acapacity: 2.87 cubic feet per second (cfs) OR	acapacity: 2.87 cubic feet per second (cfs) ORgallons per minute (gpm) The cethe current water delivery system or the system that was ars. Include information on the pumps, canals, pipelines a poly the water at the authorized place of use. PUMP DRIVE cation of Authorized and Proposed Point(s) of Diversion (POD/POA name is not specified on the certificate, assign of the Certificate or is it Proposed? Is this POD/POA Authorized on the Certificate or is it Proposed? HARN 1495 Twp Rng Sec 1/4	gallons per minute (gpm) the the current water delivery system or the system that was in plants. Include information on the pumps, canals, pipelines and sprobly the water at the authorized place of use. PUMP DRIVES W. Cation of Authorized and Proposed Point(s) of Diversion (PC POD/POA name is not specified on the certificate, assign it a name of the Certificate or is it Proposed? Is this POD/POA, OWRD Well Log ID# (or Well ID Tag # L) Authorized HARN 1495 " " " " " NE	ption of Water Delivery System a capacity: 2.87 cubic feet per second (cfs) OR gallons per minute (gpm) be the current water delivery system or the system that was in place at so ars. Include information on the pumps, canals, pipelines and sprinklers ply the water at the authorized place of use. PUMP DRIVES WHEEL cation of Authorized and Proposed Point(s) of Diversion (POD) or POD/POA name is not specified on the certificate, assign it a name or not the Certificate or is it Proposed? Is this POD/POA

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 # 91367

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.								Proposed	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES															
Tw	TP	Rng		Sec .		part o	Tax Lot	Gvt Lot or DLC	 	POD(s) or POA(s) (name or number from Table 1)	Date	Changes (see "CODES" from previous page)	Tv	v p	Rı	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC		New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
												POU/APOA	27	s	34	E	9	NE	NE	400		22.1	IR	WELL 1 WELL 2 WELL 3 WELL 4	12-18-08
												**	"	,,	**	"	"	NW	NE	**		30	**	"	"
												**	**	,,	**	"	"	SE	NE	11		37.4	11	11	"
												**	"	"	"	"	"	sw	NE	11		31.3	*1	11	11
												*1	**	,,	"	**	"	NW	SE	**		31.4	*1	,,	11
												98	"	,	**	"	"	NE	SE	**		29.8	11	"	11
												11	"	"	**	"	10	NW	NW	**		4	**	**	11
												**	"	"	**	11	"	sw	NW	11		35.6	**	"	11
												*1	"	,,	**	11	"	SE	NW	11		8.4	†1	"	**
	1																								
	TOTAL ACRES:									1		.		7	ГОТА	L ACF	RES:	230							

Additional remarks: N/A.

RECEIVED BY OWRD

2016

Revised 7/1/2013

Permanent Transfer Application Form – Page 11 of 15

TACS

SALEM, OR

I

For P	lace of Use or Character of Use Changes	
	there other water right certificates, water use permits or ground water registre the "from" or the "to" lands? Yes No	rations associated
If YE	S, list the certificate, water use permit, or ground water registration numbers	s: <u>N/A.</u>
a prir to a g	nant to ORS 540.510, any "layered" water use such as an irrigation right that mary right proposed for transfer must be included in the transfer or be cancel ground water registration must be filed separately in a ground water registration.	lled. Any change
For S	ubstitution (ground water supplemental irrigation will be substituted for sur	face water primary
Gra	irrigation)	RECEIVED BY OWRD
	and water supplemental Permit or Certificate # N/A; ace water primary Certificate # N/A.	JUN 20 2016
For a	change from Supplemental Irrigation Use to Primary Irrigation Use	
Iden	tify the primary certificate to be cancelled. Certificate # N/A	SALEM, OF
For a	change in point(s) of appropriation (well(s)) or additional point(s) of ap	propriation:
	Well log(s) are attached for each authorized and proposed well(s) that are consisted with the corresponding well(s) in Table 1 above and on the accomap. 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	
ANI	D/OR	
	Describe the construction of the authorized and proposed well(s) in Table 3 not have a well log. For <i>proposed wells not yet constructed or built</i> , provid for each requested information element in the table. The Department recombicensed well driller, geologist, or certified water right examiner to assist winformation necessary to complete Table 3.	de "a best estimate" nmends you consult a
	Construction of Point(s) of Appropriation	Table 1 and shown on

Tab

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). <u>If</u> less han full rate of water right

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.

		•	CER	RTIF	FICA	\TE	# <u>9136</u>	66 & 9	1448	F	RECEIVED BY OWRD				
Descri	Description of Water Delivery System System capacity: 2.58 cubic feet per second (cfs) OR JUN 20 2016														
System	capacity: 2.5	8 cubic feet p	er se	econ	d (c	fs) O	R				JUN 20 2016				
	-	gallons pe	er m	inute	e (gp	m)					SALEM, OFF				
Descri	be the current v	vater delivery	syst	tem	or th	e sy	stem th	nat wa	s in pla	ace at s	ome time within the last				
											used to divert, convey				
and ap	ply the water at	the authorize	ed pl	ace	of us	se. <u>P</u>	PUMP	DRIN	ES W	HEEL	LINES DIRECTLY				
Table 1. Lo	cation of Auth	orized and l	Prop	oseo	d Po	int(s) of D	iversi	on (PC	D) or	Appropriation (POA)				
(Note: If the	POD/POA nan	ne is not spec	ified	on	the o	certif	ficate,	assign	it a na	me or i	number here.)				
	Is this	If POA,			-					Tax					
POD/POA	POD/POA POD/POA OWRD Well Lot, Measured Distances Name or Authorized on Log ID# (or DLC (form a magnified)														
Number	Number the Certificate or Well ID Twp Rng Sec 1/4 1/4 or survey corner)														
	is it Proposed? Tag # L														
WELL 1	✓ Authorized✓ Proposed	**	1302' S, 1302' W OF NE COR SEC 9												
WELL 2	□ Authorized □ Proposed	HARN 1488	"	**	"	"	"	NE	NW	400	590' S, 1345' E OF NW COR SEC 9				
WELL 3	☐ Authorized ☐ Proposed	HARN 51851	"	**	"	"	•	SE	SE	"	505' N, 730' W OF SE COR SEC 9				
WELL 4	☐ Authorized ☐ Proposed	HARN 1494	27	s	34	E	9	NW	sw	1400	2140' N, 1125' E OF SW COR SEC 9				
CI. I	(.)		•					(COD	EC#		• 1 •				
			opos	ea b	elov	v (ch	_			_	vided in parentheses):				
	Place of Use	` '					_				Primary Use (S to P)				
	Character of	Use (USE)					∐ F	Point o	of App	ropriati	on/Well (POA)				
	Point of Dive	ersion (POD)	+				\boxtimes A	Additio	onal P	oint of	Appropriation (APOA)				
	Additional P	oint of Diver	sion	(AP	OD))		Substit	ution	(SUB)					
	Surface Water POA (SW/G	er POD to Gr W)	ounc	i Wa	ater			Govern	nment	Action	POD (GOV)				
Will a	ll of the propos	sed changes a	affec	t th	e en	tire v	water	right?	•						
⊠ Yes	s Complete on	ly the Propos	sed ('	"to"	or "	on"	lands)	section	n of Ta	able 2 o	on the next page. Use the				
	_	sted above to	-												
П No	Complete all	of Table 2 to	des	crib	e the	por	tion of	the w	ater ri	ght to b	e changed.				

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 # 91366 & 91448

List the change proposed for the acreage in each ½½. 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.

T	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			The	e lis	ting			appea		TER PI	on" lands) ROPOSED	CHANG	ES					
Twp	R	ing	Sec		1/4	Tax Lot	Gvt Lot or DLC		1	POD(s) or POA(s) (name or number from Table 1)	Date	Changes (see "CODES" from previous page)	,		Twp		Rng		Sec	1/4	1/4 1/4 TA		Gvt Lot or DLC		New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
												POU/APOA	27	s	34	E	4	sw	SE	400		9.6	IR	WELL 1 WELL 2 WELL 3 WELL 4	6-4-79		
												**	"	**	"	"	**	NW	sw	**		28.9	**	"	"		
												**	"	"	"	"	**	NE	sw	**		5.3	"	"	"		
												**	"	**	**	,,	"	sw	sw	**		35.9	"	"	"		
												**	"	"	"	"	"	SE	sw	"		37.1	,,	"	"		
												44	"	,,	**	"	9	NW	NW	11		6.6	**	"	"		
												"	"	11	,,	"	"	NE	NW	11		29.3	11	"	*		
												66	"	"	"	"	••	NW	NE	**		7.3	**	"	"		
								AEC	EIVED B	OWRD		ű	"	71	••	"	"	NW	SE	"		3.7	"	"	"		
	T								JUN 20 2	016		**	"	"	**	"	"	NE	SE	"		5	"	"	"		
									Character 1			u	"	ш	"	"	"	sw	SE	"		9.3	"	٠,	66		
									SAILENI,			ű	"	"	"	"	"	SE	SE	"		18	"	"	46		
	TOTAL ACRES:												7	ГОТА	L ACF	RES:	206										

Additional remarks: N/A.

Revised 7/1/2013

Permanent Transfer Application Form – Page 14 of 15

TACS

For Place of Use or Character of Use Changes

		water right co or the "to" la				s or ground	l water regis	strations as	ssociated	
If	YES, list t	he certificate	, water ı	ıse permit	, or grour	nd water re	gistration n	umbers: 9	<u> 1366 & 914</u>	48.
a to	primary rig	ORS 540.510 ght proposed water registra	for trans	fer must b	e include	d in the tra	nsfer or be	cancelled.	Any chang	ge
For Su	bstitution	(ground wate irrigation)	er supple	emental irr	rigation w	vill be subs	tituted for s	urface wat	er primary	
		ipplemental l			te # <u>N/A</u> ;			REC	EIVED BY	OWRD
	•	rimary Certif	_						JUN 20 20)16
For a c	hange fro	m Suppleme	ntal Irr	igation U	se to Prii	nary Irrig	ation Use			
Ident	ify the prin	nary certifica	te to be	cancelled.	Certifica	ate # <u>N/A</u>			SALEM, C	R
For a c	hange in p	ooint(s) of ap	propri	ation (wel	l(s)) or a	dditional p	ooint(s) of a	ppropria	tion:	
⊠	with the co Tip: You i http://apps) are attached orresponding may search fo .wrd.state.or.	well(s) or well le	in Table 1 ogs on the	above an Departm	nd on the accent's web p	companyin	•		ssociated
AND										
	have a well requested	the construction of the log. For print pri	oposed :	wells not y in the table	vet constr e. The De	ucted or but partment re	<i>uilt</i> , provide ecommends	"a best es you consi	timate" for all tallicense	each d well
Any well accompa- application well(s) w	(s) in this l nying appli on until it is ill access t	on of Point(s isting must b ication map. s received. T he same sour om approvin	e clearly Failure he infor ce aquif	tied to co to provide mation is er as the a	orrespond the infor necessary uthorized	mation will for the depoint(s) of	l delay the j partment to f appropriat	processing assess wh ion (POA)	of your tranether the pre	nsfer oposed
Proposed or Authorized POA Name or Number	Is well already built? ((Yes or No)	If an existing well: OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less han full rate o water right

1 12411