

## Letter of Transmittal

To: Oregon Water Resources Department  
Gerry Clark  
725 Summer Street NE, Suite A  
Salem, OR 97301-1266

Date: July 19, 2016

RE: Split Permit G-12527

We are sending you:

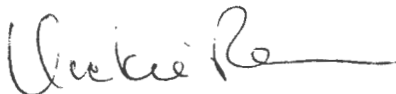
- |  |   |  |  |                                       |
|--|---|--|--|---------------------------------------|
| <input checked="" type="checkbox"/> Attached | <input type="checkbox"/> Under separate cover via _____ | the following items:                   |  |                                       |
| <input type="checkbox"/> Shop Drawings       | <input type="checkbox"/> Prints                         | <input type="checkbox"/> Plans         | <input type="checkbox"/> Samples       | <input type="checkbox"/> Pay Requests |
| <input type="checkbox"/> Specifications      | <input type="checkbox"/> Submittals                     | <input type="checkbox"/> Change orders | <input type="checkbox"/> Sign & Return | <input type="checkbox"/> Other        |

Copies	Date	Description
1	7/19/16	Affidavit of Non-Conveyance and Reading of Permit G-12527
1	7/19/16	Rescinding of COBU Letter
1	7/19/16	Application to Split a Permit & Request for Issuance of Replacement Permits
1		Deed 2013-007640
1	7/18/16	Split a Permit & Request for Issuance of Replacement Permits Map
1		Deed M06-04667
1	7/19/16	Fee check #2203 in the amount of \$125.00

These are transmitted as checked below:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> For approval | <input type="checkbox"/> Approved as submitted    |
| <input type="checkbox"/> For your use            | <input type="checkbox"/> Approved as noted        |
| <input type="checkbox"/> As requested            | <input type="checkbox"/> Returned for corrections |

Sincerely,



Vickie Ream  
Administrative Assistant

CC: Larry & Joan Sees  
3088-01  
Delivered via: US Mail

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**ACCEPTED**  
**AUG 01 2016**

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

# Application to Split A Permit and Request for Issuance of Replacement Permits (ORS 537.225)

## Part 1 of 5 – Minimum Requirements Checklist

**This application will be returned if Parts 1 through 5 and all required attachments are not completed and included.**  
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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**Check all items included with this application.**

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Completed Application with non-refundable \$125.00 Application Fee, Applicant(s)' Information and Signature(s).
- Part 4 – Other Landowner Information and proportionate rate(s).
- Part 5 – Water Right Permit Information. List the permit number to be assigned here: G-12527

**Attachments:**

- Completed application map prepared by Certified Water Right Examiner (CWRE).
- Completed Affidavit(s) from the applicant(s):
  - Certifying the permit has not been conveyed or withheld, and remains appurtenant to the applicant's land.
  - Certifying the applicant has read the permit.
- Copy(s) of current recorded deed(s) showing that the applicant(s) is/are an owner of the land(s) to which the permit is appurtenant.

**INSTRUCTIONS for editing the Application Form**

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 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.

**For Staff Accounting Purposes Only – PCA #46110 Object # \_\_\_\_\_**

## Part 2 of 4 –Application Map Checklist

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

Please be sure that the map you submit is based upon the original water right application map or permit amendment map and includes all the items listed below and meets the requirements of OAR 690-325-0050. Check all boxes that apply.

The map shall not include any unauthorized change to the authorized place of use outside of its original perimeters as exhibited on the original water right application map or approved permit amendment map nor any unauthorized change to the location of the point(s) of diversion or appropriation as exhibited on the original water right application map or approved permit amendment map.

- Certified Water Right Examiner (CWRE) Stamp and Signature. For a list of CWRE's, see [http://apps.wrd.state.or.us/apps/wr/cwre\\_license\\_view/](http://apps.wrd.state.or.us/apps/wr/cwre_license_view/).
- 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, or up to 30 x 30 inches. For 30 x 30 inch maps, one additional paper copy and an electronic copy in a .pdf, .tiff or .jpg format is required.
- A north arrow, a legend, and scale. The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- The place of use of each applicant's portion of the water right permit shall be clearly defined by outline and shaded or hachured and shall show the number of acres for each portion in each quarter-quarter section, government lot, or quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If the permit has multiple priority dates or uses, the lands to be served by each priority date and on which use is authorized, must be separately identified.
- The place of use of any part of the permit **not** being assigned shall be clearly defined by outline and shaded or hachured and shall show the number of acres for each portion in each quarter-quarter section, government lot, or quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If the permit has multiple priority dates or uses, the lands to be served by each priority date and on which use is authorized, must be separately identified.
- Each applicant's portion of the permit shall be referenced, by either alphabet letter or number, to each applicant(s) listed in the application form.
- The rate and any applicable acre-feet allowance of water use under the permit for each applicant's portion of the permit shall be clearly labeled on the map.
- The location of each authorized point of diversion or appropriation.

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Please use additional pages as needed

### Part 3 of 5 – Applicant Information and Signature

#### Applicant Information

APPLICANT/BUSINESS NAME LARRY & JOAN SEES		MAP ID (LETTER OR NUMBER) A	PHONE NO. (541) 281-2721	ADDITIONAL CONTACT NO. N/A
ADDRESS P.O. BOX 238				FAX NO. (541) 533-3128
CITY BEATTY	STATE OR	ZIP 97621	E-MAIL LJSEES@HUGHES.NET	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER AND REPLACEMENT PERMIT DOCUMENTS WILL ALSO BE MAILED.				

#### Agent Information – This agent is authorized to represent the above applicant in all matters relating to this application

AGENT/BUSINESS NAME ADKINS CONSULTING ENGINEERING, LLP		PHONE NO. (541) 892-1379	ADDITIONAL CONTACT NO. N/A
ADDRESS 2950 SHASTA WAY			FAX NO. (541) 884-5335
CITY KLAMATH FALLS	STATE OR	ZIP 97603	E-MAIL ADKINS@ADKINSENGINEERING.COM
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER AND REPLACEMENT PERMIT DOCUMENTS WILL ALSO BE MAILED.			

ORS 536.050(1)(aa) authorizes the Oregon Water Resources Department (OWRD) to collect fees based upon the actual cost of work to process an application under ORS 537.225.

I (we) understand the following:

- Upon receipt of my complete application and the non-refundable application fee in the amount of \$125.00, OWRD will, within fifteen (15) days, notify me in writing of the estimate of the cost of work.
- The non-refundable \$125.00 fee covers the cost of OWRD's staff to evaluate and provide the cost of work estimate for processing the application.
- Upon receiving the estimate I may agree or decline to enter into a formal contract to pay the estimated cost of work in advance to initiate the processing of the application.
- If I decline to enter into a formal contract, OWRD will close my application.
- An incomplete or inaccurate application may delay the process and increase the cost to process my request.
- OWRD does not guarantee a favorable review of the application.

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I (we) affirm that the most recent water use (if any) under my (our) portion of the permit has been exercised within the relevant terms and conditions of the permit.

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



Larry Sees  
Applicant signature

Larry J Sees  
Name (and title if applicable) (print)

7/19/2016  
Date

Joan A. Sees  
Applicant signature

Joan A. Sees  
Name (and title if applicable) (print)

7/19/2016  
Date

ACCEPTED  
AUG 01 2016

## Part 4 of 5 – Other Landowner Information

Please list the owner(s) of land under the permit who are not submitting the assignment and request for issuance of replacement water right permit.

### Landowner Information

LANDOWNER/BUSINESS NAME DAVID KRUEGAR		MAP ID (LETTER OR NUMBER) "B"	
MAILING ADDRESS 35000 SPRAGUE RIVER ROAD		CITY SPRAGUE RIVER	STATE OR
TOTAL NUMBER OF ACRES UNDER THE PERMIT (AS DEPICTED ON MAP) 40.00 ACRES		PROPORTIONATE RATE 0.50 CFS	ZIP 97639

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**AUG 01 2016**

**AMENDED**

PERMIT # G-12527

Completion date of the permit:

Name(s) currently appearing on permit: TERRY AND DESSA LEA HAGER

Type(s) of use as listed on permit: IRRIGATION

Note: Type of use must be one or more of the following uses approved for assignment under ORS 537.225(1) and OAR 690-325-0010: irrigation, nursery, temperature control, stock watering, or agricultural water use.

**Table 1. Location of Authorized Point(s) of Diversion (POD) or Appropriation (POA)**

POD/POA Name or Number	If POA, OWRD Well Log ID# (or Well ID Tag # L- )	Twp	Rng	Sec	¼/¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
WELL 1 (POA-1)	KLAM 2081	36 S	12 E	22	NE NW	100	930' SOUTH & 2430' EAST FROM THE NW CORNER OF SECTION 22
WELL 4 (POA-4)	KLAM 10447	36 S	12 E	28	NE NE	100	SOUTH 1°27'40" WEST, 784' FROM THE NE CORNER OF SECTION 28
WELL 5 (POA-5)	KLAM 2078	36 S	12 E	22	NE SW	600	50' SOUTH AND 2750 FEET WEST FROM THE EAST ¼ CORNER OF SECTION 22

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**Part 5 of 5 – Permit Information**

**PERMIT # G-12527**

**Completion date of the permit:**

**Name(s) currently appearing on permit: TERRY AND DESSA LEA HAGER**

**Type(s) of use as listed on permit: IRRIGATION**

Note: Type of use must be one or more of the following uses approved for assignment under ORS 537.225(1) and OAR 690-325-0010: irrigation, nursery, temperature control, stock watering, or agricultural water use.

**Table 1. Location of Authorized Point(s) of Diversion (POD) or Appropriation (POA)**

POD/POA Name or Number	If POA, OWRD Well Log ID# (or Well ID Tag # L- )	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
WELL 1 (POA-1)	KLAM 2081	36	S	12	E	22	SE	NW	100	930' SOUTH & 2430' EAST FROM THE NW ¼ CORNER OF SECTION 22
WELL 4 (POA-4)	KLAM 10447	36	S	12	E	28	NE	NE	100	748' SOUTH 1°27'40" WEST FROM THE NE ¼ CORNER OF SECTION 28
WELL 5 (POA-5)	KLAM 2078	36	S	12	E	22	NE	SW	600	50' SOUTH AND 2750 FEET WEST FROM THE EAST ¼ CORNER OF SECTION 22

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**Table 2. Description of Permit # G-12527.**

List all parts of the permit (both assigned and unassigned). For the acreage or place(s) of use in each ¼ ¼, list the Map ID (letter or number from map and Parts 3 and 4) for each parcel. The acreage listed must equal the total acreage on the permit.

Description of Permitted Lands												
Twp	Rng	Sec	¼ ¼		Tax Lot	Gvt Lot or DLC	Acres (if applicable)	Type of Use	POD(s) or POA(s) (name or number from Table 1)	Map ID (letter or number from map and Parts 3 and 4)		
2	S	9	E	15	NE	NW	100		15.0	IR	POD #1	"A"
2	S	9	E	15	NE	NW	200		4.0	NU	POD #2	"B"
↑EXAMPLE↑												
36	S	12	E	22	NE	NW	100	N/A	1.30	IR	POA-1	"A"
36	S	12	E	22	SW	NW	100	N/A	6.50	IR	POA-1	"A"
36	S	12	E	22	SE	NW	100	N/A	35.41	IR	POA-1	"A"
36	S	12	E	22	NW	SW	300	N/A	9.59	IR	POA-4	"A"
36	S	12	E	22	SW	SW	400 500	N/A	19.21	IR	POA-4	"A"
36	S	12	E	22	NW	SW	600	N/A	20.00	IR	POA-5	"B"
36	S	12	E	22	SW	SW	600	N/A	20.00	IR	POA-5	"B"
36	S	12	E	27	NW	NW	500 600	N/A	19.59	IR	POA-4	"A"
36	S	12	E	27	SW	NW	700 800	N/A	19.57	IR	POA-4	"A"
36	S	12	E	28	NE	NE	100	N/A	40.22	IR	POA-4	"A"
36	S	12	E	28	SW	NE	500	N/A	40.06	IR	POA-4	"A"
36	S	12	E	28	SE	NE	500 600 700	N/A	40.53	IR	POA-4	"A"
36	S	12	E	28	NE	SE	500 800 900	N/A	36.80	IR	POA-4	"A"
36	S	12	E	28	NW	SE	500	N/A	0.46	IR	POA-4	"A"
<b>TOTAL ACRES</b>									<b>309.24</b>			

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

Check here if any portion of the permit is located within an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME N/A	ADDRESS	
CITY	STATE	ZIP

Additional Remarks:

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

# Application to Split A Permit and Request for Issuance of Replacement Permits

## Affidavit of Non-Conveyance and Reading of Permit G-12527

State of Oregon )  
 ) ss  
 County of Klamath )

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We, LARRY & JOAN SEES, mailing address: P.O. BOX 238, BEATTY, OR 97621,  
 telephone number (541) 281-2721, being first duly sworn depose and say:

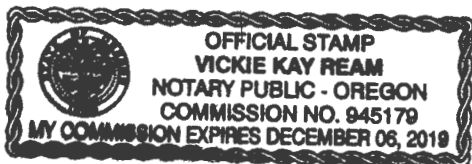
1. Permit G-12527, has not been conveyed or withheld and remains appurtenant to our land.

2. We attest that we have read Permit G-12527.

Larry Sees 7/19/2016  
 Signature of Affiant Date

Joan Arneal Sees 7/19/2016  
 Signature of Affiant Date

Signed and sworn to (or affirmed) before me this 19 day of July, 2016.



Vickie K. Ream  
 Notary Public for Oregon

My Commission Expires: 12/06/2019

July 19, 2016

Mr. Gerry Clark  
Oregon Water Resources Department  
725 Summer St. NE, Suite A  
Salem, OR 97301

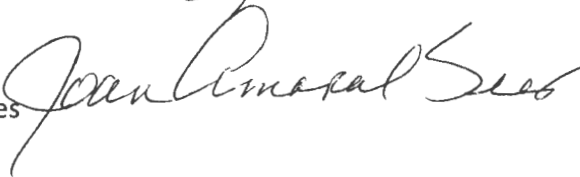
Re: Application G-12871, Permit G-12527, Permit Amendment T-10970  
Rescinding of Claim of Beneficial Use

Dear Mr. Clark,

We submitted a partial Claim of Beneficial Use for our permit G-12527 on August 24, 2012. Unfortunately, an additional landowner under this same permit is not ready or willing to submit a Claim of Beneficial Use at this time. Therefore, we request to rescind our Claim in order to submit an application to split the permit. Once the permit has been split, we will re-submit our Claim of Beneficial Use under the replacement permit.

Sincerely,

Larry Sees 

Joan Sees 

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- 10-2-2000 <sup>(aeb)</sup> assign. from Terry + Doss Leg  
Hager to winding Sprague River LLC

- 7-7-2004 ext. from

Zoom In

**ACCEPTED**  
AUG 01 2016