

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 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: http://apps.wrd.state.or.us/apps/misc/wrd fee calculator. 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? 5 List them here: Certificates 35454, 43742, 49118, 49020, 61946, QISO Please include a separate Part 5 for each water right. (See instructions on page 6) RECEIVED BY OWRI
		Attachments:
\boxtimes		Completed Transfer Application Map. SEP 19 2016
\boxtimes		Completed Evidence of Use Affidavit and supporting documentation.
\boxtimes	□ N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the SAME WR er 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.
	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
	⊠ N/A	Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.
		(For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete Other/Explanation Staff: 503-986-0 Date:/ SALEM, OR

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

Please be sure that the transfer application map you submit includes all the required items and

	matches t	the existing water right map. Check all boxes that apply.
\boxtimes	□ N/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.
	N/A	If more than three water rights are involved, separate maps are needed for each water right.
\boxtimes		Permanent quality printed with dark ink on good quality paper. RECEIVED BY OWRD
\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.
		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
		Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
	⊠ N/A	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 permit.
	⊠ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposite to the 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°).

_ r , ,	TEE WORKSHEET for PERMANENT TRANSFER Part 3 of 5	- Fee	Worksheet
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,000
2	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 = 2 (2b) If only one change, this will be 0 Multiply line 2b by \$800 and enter "" "" "" "" "" "" "" "" "" "" "" "" ""	2	1,600
3	Number of water rights included in transfer <u>6(3a)</u> Subtract 1 from the number in 3a above: <u>5 (3b)</u> If only one water right this will be 0		
4	Multiply line 3b by \$450 and enter » » » » » » » » » » » » » » » » » » »	3	2250
5	Do you propose to change the place of use or character of use? No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »	SEP SALE	M, OR 300
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	4,700
	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?	SE	VED BY OWR P 19 2016 ALEM, OR
7	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » » »	7	ILLIVI, UR
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » » Transfer Fee:	8	\$5150

*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).

T.	FEE WORKSHEET for SUBSTITUTION		
1	Base Fee (includes change to one well)	1	\$725.00
2	Number of wells included in substitution (2a) Subtract 1 from the number in 3a above: (2b) If only one well this will be 0 Multiply line 2b by \$350 and enter » » » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » Fee for Substitution:	3	0

Part 4 of 5 - Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS N	AME		PHONE NO.	ADDITIONAL CONTACT NO.				
Guido Land & Equip	ment Co., LLC		(541) 673-1088	(541) 673-1060				
Callahan Ridge, LLC								
ADDRESS				FAX NO.				
640 Shady Drive								
CITY	STATE	ZIP	E-MAIL					
Roseburg	OR	97471						
By providing an i	E-MAIL ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALL C	ORRESPONDENCE FROM THE				
				NTS WILL ALSO BE MAILED.				

Roseburg	OR	97471	L-MAIL	
	DDRESS, C		TO RECEIVE ALL C	ORRESPONDENCE FROM THE
DEPARTMENT ELECTRONICA	ALLY. CO	PIES OF THE FINA	L ORDER DOCUMEN	ITS WILL ALSO BE MAILED.
Agent Information – The ag	ent is auth	norized to represen	t the applicant in all	matters relating to this application.
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	
By providing an e-mail at Department electronic				
Explain in your own words we are planning on consolic quasi-municipal uses. We a use of water. If you need add "Attachment 1".	lating our	r water rights and oing from 5 autho	I changing our use orized diversions to	of water from irrigation to
Check this box if this pro Reinvestment Act. (Fede			inded by the Amer	
 ☑ By signing this application, I Department approval of the trauthorized to pursue the trans ☑ I affirm the applicant is a murname of the municipality or a ☑ I affirm the applicant is an entrondemnation the property to supporting documentation. 	fer as identicipality as predecessority with the	tified in OAR 690-33 s defined in ORS 546 or; OR e authority to conder	f the draft preliminary ovide landownership in 80-4010(5); OR 0.510(3)(b) and that th mn property and is acq	oiring by
the Department for publication	of a notic	e in a newspaper vonsecutive weeks.	vith general circulati If more than one qua	alifying newspaper is available, I
I (we) affirm that the informa	ation cont	ained in this appl	lication is true and	accurate.
Applicant signature More Surv Applicant signature	<u>ш</u>	Mona L Print Name (and Tit	lle if applicable) Guidi le if applicable)	8-29-16 Date 3-29-14 Date

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

transfer is located? \(\subseteq \text{ Yes } \subseteq \text{No} \) 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.

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 respectively final order is issued. Copies of notice			-						
Both the receiving landowner and appropriate Copies of notices and correspondence		-							
At this time, are the lands in this transfer app	lication i	n the process of beir	ng sold? □ Yes ⊠No						
If YES, and you know who the new land information table below. If you do not know assignment will have to be filed for at a land.	now who	the new landowner	_						
If a property sells, the certificated water runless a sale agreement or other documer http://www.oregon.gov/owrd/docs/transfe	nt states o	otherwise. For more							
RECEIVING LANDOWNER NAME		PHONE NO.	ADDITIONAL CONTACT NO.						
ADDRESS		I.	FAX NO.						
CITY STATE ZIP		E-MAIL							
Describe any special ownership circumstance	es here:								
Check here if any of the water rights prop an irrigation or other water district. (Tip : IRRIGATION DISTRICT NAME	osed for	transfer are or will be te and attach Supple							
Check here if any of the water rights prop an irrigation or other water district. (Tip : IRRIGATION DISTRICT NAME	osed for Comple	transfer are or will be te and attach Supple	be located within or served by mental Forman OR						
Check here if any of the water rights prop an irrigation or other water district. (Tip :	osed for Comple	transfer are or will be te and attach Supple	be located within or served by						
Check here if any of the water rights prop an irrigation or other water district. (Tip : IRRIGATION DISTRICT NAME	osed for Comples ADDRES STATE	transfer are or will be te and attach Supple ss	be located within or served by emental Forts ALEM, OR						
☐ Check here if any of the water rights prop an irrigation or other water district. (Tip : ☐ IRRIGATION DISTRICT NAME ☐ CITY ☐ Check here if water for any of the rights so	osed for Comples ADDRES STATE	transfer are or will be te and attach Supple is s	e located within or served by emental Forts ALEM, OR ZIP e agreement or other contract RECEIVED BY OWRD						
Check here if any of the water rights prop an irrigation or other water district. (Tip: IRRIGATION DISTRICT NAME CITY Check here if water for any of the rights s for stored water with a federal agency or expected.	ADDRES STATE upplied	transfer are or will be te and attach Supple is s	e agreement or other contract						
☐ Check here if any of the water rights prop an irrigation or other water district. (Tip : ☐ IRRIGATION DISTRICT NAME ☐ CITY ☐ Check here if water for any of the rights s for stored water with a federal agency or entire the control of the rights.	ADDRES ADDRES STATE ADDRES STATE ADDRES STATE	transfer are or will be te and attach Supple as and attach supple ander a water service atty.	e agreement or other contract RECEIVED BY OWRD SEP 3 0 2016 ZIP SALEM, OR						
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Check here if any of the water rights prop an irrigation or other water district. (Tip: IRRIGATION DISTRICT NAME CITY Check here if water for any of the rights s for stored water with a federal agency or entire to meet State Land Use Consistency Require corporation, or tribal governments within whe entiry NAME ENTITY NAME Douglas County Planning	ADDRES STATE ADDRES STATE ADDRES STATE ADDRES ADDRES Justice	transfer are or will be te and attach Supple as and attach Supple ander a water service ity.	e agreement or other contract RECEIVED BY OWRD SEP 3 0 2016 ZIP SALEM, OR Aty, city, municipal diverted, conveyed or used.						
Check here if any of the water rights propan irrigation or other water district. (Tip: IRRIGATION DISTRICT NAME CITY Check here if water for any of the rights so for stored water with a federal agency or entire to meet State Land Use Consistency Require corporation, or tribal governments within who entiry NAME ENTITY NAME Douglas County Planning CITY	ADDRES STATE ADDRES STATE ADDRES STATE ADDRES Justice STATE	transfer are or will be te and attach Supple as and attach Supple ander a water service atty. So ou must list all coundiction water will be as Building Room 106	e agreement or other contract RECEIVED BY OWRD SEP 3 0 2016 ZIP SALEM, OR Aty, 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.

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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 part of may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

SEP 3 0 2016

	CERTIFICATE # 35454	RECEIVED BY OWRD
Description of V	Vater Delivery System	SEP 19 2016
System capacity:	.3 cubic feet per second (cfs) OR	20. 20. 2010
	gallons per minute (gpm)	SALEM, OR
Describe the curr	ent water delivery system or the system that was in pla	ce 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. 30 HP electric pump with portable pipelines and impact sprinklers. POD 1 is actually used for this right

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)	T	wp	F	lng	Sec	1/4	. 1/6	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
4			27	s	6	w	4	SE	NW	7	4330 ft. N & 300 ft. E. from the interior corner on the west boundary of McKinney DLC 50
1	☐ Authorized ☐ Proposed		27	S	6	W	4	NE	NW	7	1315 ft. S & 2315 ft. E from the NW cor. Sec. 4
2	☐ Authorized ☐ Proposed		27	s	6	W	4	NE	NW	8	1040 ft. S. & 2175 ft. E. from the NW cor. Sec. 4
3	☐ Authorized ☐ Proposed		27	s	6	w	5	NE	NE.	1	20 ft. S. & 650 ft. W. from the NE Cor. Sec. 5

Check a	all type(s) of change(s) proposed below (c	hange	"CODES" are provided in parentheses):
\boxtimes	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
\boxtimes	Character of Use (USE)		Point of Appropriation/Well (POA)
	Point of Diversion (POD)		Additional Point of Appropriation (APOA)
\boxtimes	Additional Point of Diversion (APOD)		Substitution (SUB) RECEIVED BY OWRD
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV) 0 2016
Will all	of the proposed changes affect the entire	wate	r right? SALEM, OR
X Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the pro) section of Table 2 on the next page. Use the
☐ No	Complete all of Table 2 to describe the po	rtion (of the water right to be changed.
Revised 7/1	1/2013 Permanent Transfer Application	on Form	n – Page 7 of 26 TACS

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 # 35454

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.							Proposed Changes (see												CHANG	GES				
Twp	Rng			1/4 1/4	Tax Lot	Gvt Lot or DLC		Type of USE listed on	POD(s) or	Date	"CODES" from previous page)	Tv	vp	Rı	ıg	Sec	3/4	1/4	Tax Lot	Gvt	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
			¢ (6					PRON W		L. Livis	EXAMPLE.		,	'4 5	438	34	7		, ,	7 16		TENE !	122	
				W.W.	9101	1 4 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15.0	Irrestant	POD#1	1901	POR PROD	2	*	***	1		111	7"	5(00)		÷10.001		P001#5	19111
										H	A Principal		E.			20 20 6 5	SW.	NW	500		5.0		Pull#6	1901
												26	S	6	w	32	SE	SE	100	NA	NA	QM	1,2,3	1966
												26	S	6	w	33	SE	SE	1102	NA	NA	QM	1,2,3	1966
												27	s	6	w	4	NW	1/4	1100, 1102, 1200, 1205	NA	NA	QM	1,2,3	1966
												27	S	6	w	4	sw	1/4	1205	NA	NA	QM	1,2,3	1966
												27	s	6	w	5	NE	NE	100, 2201	NA	NA	QM	1,2,3	1966
												27	S	6	w	5	SE	NE	100, 2201	NA	NA	QM	1,2,3	1966
												27	s	6	w	5	NE	SE	100, 2201	NA	NA	QM	1,2,3	1966
												27	S	6	w	5	SE	SE	2201	NA	NA	QM	1,2,3	1966
				TOT	AL AC	RES:											7	ГОТА	L ACF	RES:				

Additional remarks: _____.

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Revised 7/1/2013

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TACS

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SALEM, OR

For P	Place of Use or Character of Use Changes	
	re there other water right certificates, water use permits or ground water registrations as ith the "from" or the "to" lands? 🛛 Yes 🗌 No	sociated
If Y	YES, list the certificate, water use permit, or ground water registration numbers: S-529	30.
a pri to a	primary right proposed for transfer must be included in the transfer or be cancelled. An a ground water registration must be filed separately in a ground water registration mod plication.	y change
For S	Substitution (ground water supplemental irrigation will be substituted for surface water irrigation)	r primary
	round water supplemental Permit or Certificate #; urface water primary Certificate # RECEIVED	BY OWRD
For a	a change from Supplemental Irrigation Use to Primary Irrigation Use SEP	9 2016
Iden	entify the primary certificate to be cancelled. Certificate #	EM, OR
For a	a change in point(s) of appropriation (well(s)) or additional point(s) of appropriat	ion:
	Well log(s) are attached for each authorized and proposed well(s) that are clearly lab associated with the corresponding well(s) in Table 1 above and on the accompanyin 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	
ANI	ND/OR	
	Describe the construction of the authorized and proposed well(s) in Table 3 for any not have a well log. For proposed wells not yet constructed or built, provide "a best for each requested information element in the table. The Department recombinated with assemble well driller, geologist, or certified water right examiner to assist with assemble to the construction of the authorized and proposed well(s) in Table 3 for any not have a well driller, provide "a best for each requested information element in the table. The Department recombination of the authorized and proposed well(s) in Table 3 for any not have a well log. For proposed wells not yet constructed or built, provide "a best for each requested information element in the table. The Department recombination element in the table.	estimate"

information necessary to complete Table 3.

Any well(s) in this listing must be clearly tied to corresponding well(s) described in SALEM 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 aguifer 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 -specifi rate (cfs or gpm). If less han full rate of water right

SEP 3 0 2016

CERTIFICATE # 91507

Description of Water Delivery System

System capacity: 3 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. 30 HP electric pump with portable pipelines and impact sprinklers. POD 1 is actually used for this right

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)	Т	wp	F	lng	Sec	1/4	34	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
4	☐ Authorized☐ Proposed		27	s	6	w	4	SE	NW	7	1620 ft. S & 140 ft. W. from the N1/4 Corner of Section 4
1	☐ Authorized ☐ Proposed		27	s	6	w	4	NE	NW	7	1315 ft. S & 2315 ft. E from the NW cor. Sec. 4
2	☐ Authorized ☐ Proposed		27	s	6	w	4	NE	NW	8	1040 ft. S. & 2175 ft. E. from the NW cor. Sec. 4
3	☐ Authorized ☐ Proposed		27	s	6	w	5	NE	NE	1	20 ft. S. & 650 ft. W. from the NE Cor. Sec. 5

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentle	neses)
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\bowtie	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
\boxtimes	Character of Use (USE)		Point of Appropriation/Well (POA)
\boxtimes	Point of Diversion (POD)		Additional Point of Appropriation (APOA)
	Additional Point of Diversion (APOD)		Substitution (SUB) RECEIVED BY OWRD
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV) 2016
Will all	of the proposed changes affect the entire	wate	r right? SALEM, OR
Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the pro-	' lands) section of Table 2 on the next page. Use the changes. RECEIVED BY OWRD
⊠ No	Complete all of Table 2 to describe the po	ortion o	of the water right to be changed. SEP 1 9 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 # 91507

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.

	Γhe	e lis	_		t app	ears o	n the c	certific	ate BE	or "off" land FORE PROP right that will	POSED CHA	NGES	Proposed Changes (see			The	e lis	ting			appea		ΓER PI	on" lands) ROPOSED	CHANG	ES
T	ďΡ	Rn		Sec		1/4	Tax Lot	Gvt Lot or DLC		Terra CHINE	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Tw	P	Rı	g	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
				is.		7.4°	A) A)			Tank in the state of the state	PODO		EXAMPLE POLICOD	34	C S			7		NW.	7 (F.		10.0		eus.	+1001
				4	300			2000	ES .		FULL CO.					91			Sic.		e min					1901
27	S	6	w	4	NE	NW	1100	7	0.1	IR	4	1990	Edder Branch	26	S	6	w	32	SE	SE	100	NA	NA	QM	1,2,3	1990
27	s	6	w	4	SE	NW	1100	7	1.5	IR	4	1990		26	s	6	w	33	SE	SE	1102	NA	NA	QM	1,2,3	1990
27	s	6	w	4	SE	NW	1100 1205	50	6.0	IR	4	1990		27	S	6	w	4	NW	1/4	1100, 1102, 1200, 1205	NA	NA	QM	1,2,3	1990
27	S	6	w	4	NE	sw	1205	50	8.4	IR	4	1990		27	s	6	w	4	sw	1/4	1205	NA	NA	QM	1,2,3	1990
27	S	6	w	4	SE	sw	1205	50	2.5	IR	4	1990		27	s	6	w	5	NE	NE	100, 2201	NA	NA	QM	1,2,3	1990
														27	s	6	w	5	SE	NE	100, 2201	NA	NA	QM	1,2,3	1990
														27	S	6	w	5	NE	SE	100, 2201	NA	NA	QM	1,2,3	1990
														27	S	6	w	5	SE	SE	2201	NA	NA	QM	1,2,3	1990
						TOTA	L ACI	RES:	18.5			(-	ГОТА	L ACR	ES:				
	A ir	ddi Ico	tion rre	nal r	emai 0.1 A	rks: <u>S</u> C is	ame in LC	POD OT 7 i	as prin	mary (C-35 n FROM p	5454) NE/N property	W 0.1	AC should	be]	LC	T '	7 no	ot E	59E	D o	BLM BY	. Ass	sessor D	RECENT	ED BY	are DW _{RD}
	Re	evise	d 7/	1/201	13		P	ermane	ent Tran	sfer Application	on Form – Pag	ge 11 of	26						TAC	S	0 2016	;		SALE	19 2016	

For Place of Use or Character of Use Cl	Changes
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I'di Tiacc	of Use of Character of Use Changes	
	e other water right certificates, water use permits or ground water regularized or the "to" lands? Yes No	istrations associated
If YES,	list the certificate, water use permit, or ground water registration num	bers: <u>C-35454</u>
a primar	to ORS 540.510, any "layered" water use such as an irrigation right by right proposed for transfer must be included in the transfer or be cannot water registration must be filed separately in a ground water registon.	ncelled. Any change
For Subst	itution (ground water supplemental irrigation will be substituted for sirrigation)	
	water supplemental Permit or Certificate #; water primary Certificate #;	RECEIVED BY OWRD
For a char	nge from Supplemental Irrigation Use to Primary Irrigation Use	SEP 19 2016
Identify	the primary certificate to be cancelled. Certificate #	SALEM, OR
For a char	nge in point(s) of appropriation (well(s)) or additional point(s) of	appropriation:
ass ma Tip	ell log(s) are attached for each authorized and proposed well(s) that are ociated with the corresponding well(s) in Table 1 above and on the p. b: You may search for well logs on the Department's web page at:	ECEIVED BY OWRD
	p://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx	SEP 3 0 2016
AND/OI	R	SALEM OR
not for lice	scribe the construction of the authorized and proposed well(s) in Table have a well log. For <i>proposed wells not yet constructed or built</i> , proposed requested information element in the table. The Department recensed well driller, geologist, or certified water right examiner to assist formation necessary to complete Table 3.	e 3 for any wells that do vide "a best estimate" ommends you consult a

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

Proposed or Authorized POA Name or Number	Is well already built? ((Yes or No)	If an existing well: OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specifi rate (cfs or gpm). If less han full rate water right

CERTIFICATE # 43742

Description of Water Delivery System

System capacity: $\underline{0.3+}$ 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. 30 HP electric pump with portable pipelines and impact sprinklers.

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)	Т	wp	J	lng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
1	✓ Authorized✓ Proposed		27	s	6	W	4	NE	NW	7	1315 ft. S & 2315 ft. E from the NW cor. Sec. 4
2	☐ Authorized ☐ Proposed		27	s	6	w	4	NE	NW	8	1040 ft. S. & 2175 ft. E. from the NW cor. Sec. 4
3	☐ Authorized ☐ Proposed		27	s	6	w	5	NE	NE	1	20 ft. S. & 650 ft. W. from the NE Cor. Sec. 5
	☐ Authorized ☐ Proposed								,		

Cł	ieck a	all type(s) of change(s) proposed below (c	hange	e "CODES" are provided in parentheses):
	\boxtimes	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
	\boxtimes	Character of Use (USE)		Point of Appropriation/Well (POA)
		Point of Diversion (POD)		Additional Point of Appropriation BY A) WRD
	\boxtimes	Additional Point of Diversion (APOD)		Substitution (SUB)
		Surface Water POD to Ground Water		Government Action POD (GOV) SEP 3 0 2016
		POA (SW/GW)		SALEM, OR
W	ill all	of the proposed changes affect the entire	wate	
	Yes	"CODES" listed above to describe the pro	posed	
X	No	Complete all of Table 2 to describe the po	rtion (of the water right to be RECEIVED BY OWRD

SEP 19 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 # 43742

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.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANG 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.															
Twj	Þ	Rn		Sec		1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	DOD(s)	Priority Date	"CODES" from previous page)	Tv	wp	Rı	ng	Sec	1 /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
					C.46		AT PLANTS	11015	A ST PA			1	FAAMFLE		5.71	April 1	S S	La F	1			. NAS		1		7. N
	, i	#	E	15	N.E.		100		150	Irrigation	POD 2	1901	POLIFOR	2	3			1	N.	NW	500	i	10.0	4-250	POR #5	1901
		To all		1 5				48	3		Servery c				5		E		SW	M	500		5.0	3.8	100	1961
27	S	6	w	4	sw	NW	1102		4.9	IR	POD-1	1955		26	s	6	w	32	SE	SE	100	NA	NA	QM	1,2,3	1955
27	S	6	w	4	SE	NW	1100	9	0.5	IR	POD-1	1955	44,	26	S	6	w	33	SE	SE	1102	NA	NA	QM	1,2,3	1955
27	S	6	w	4	NE	sw	1205	10	6.3	IR	POD-1	1955		27	s	6	w	4	NW	1/4	1100, 1102, 1200, 1205	NA	NA	QM	1,2,3	1955
27	S	6	w	4	NE	sw	1205		9.5	IR	POD-1	1955		27	S	6	w	4	sw	1/4	1205	NA	NA	QM	1,2,3	1955
														27	S	6	w	5	NE	NE	100, 2201	NA	NA	QM	1,2,3	1955
														27	s	6	w	5	SE	NE	100, 2201	NA	NA	QM	1,2,3	1955
														27	S	6	w	5	NE	SE	100, 2201	NA	NA	QM	1,2,3	1955
												DE.		27	S	6	w	5	SE	SE	2201	NA	NA	QM	1,2,3	1955
4												HE(EIVED BY	0	WF	RD.										
2						TOTA	L ACI	RES:	21.2				SEP 3 0 20	16			1			ГОТА	L ACF	ES:				

Additional remarks: .

Revised 7/1/2013

Permanent Transfer Application Form – Page 14 of 26 SALEM, OR

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SEP 19 2016

For Place of Use or Character of Use Character	anges
A	

For Place of Use of Character of Use Changes	
Are there other water right certificates, water use permits or ground water with the "from" or the "to" lands? Yes No	registrations associated
If YES, list the certificate, water use permit, or ground water registration n	umbers:
Pursuant to ORS 540.510, any "layered" water use such as an irrigation rig a primary right proposed for transfer must be included in the transfer or be to a ground water registration must be filed separately in a ground water re application.	cancelled. Any change
For Substitution (ground water supplemental irrigation will be substituted firrigation)	or surface water primary
Ground water supplemental Permit or Certificate #; Surface water primary Certificate #	RECEIVED BY OWR
For a change from Supplemental Irrigation Use to Primary Irrigation U Identify the primary certificate to be cancelled. Certificate #	SEP 1 9 2016
For a change in point(s) of appropriation (well(s)) or additional point(s)	of appropriation, OR
Well log(s) are attached for each authorized and proposed well(s) that associated with the corresponding well(s) in Table 1 above and on the 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	t are clearly labeled and
AND/OR	
Describe the construction of the authorized and proposed well(s) in T not have a well log. For proposed wells not yet constructed or built, for each requested information element in the table. The Department licensed well driller, geologist, or certified water right examiner to as information necessary to complete Table 3.	provide "a best estimate" recontinuo partico de la provincia d
able 3. Construction of Point(s) of Appropriation	0.44

Ta

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and 90 wn on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? ((Yes or No)	If an existing well: OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specifi rate (cfs or gpm). If less han full rate water right

CERTIFICATE # 49118

Description	of	Water	Delivery	System
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System capacity: <u>1+</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. 50 HP electric pump with portable pipe and impulse sprinklers. This pump serves for POD 5, 6 & 7

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)	T	wp	F	ing	Sec	- 1/4	V4 V4		20 ft. S. & 650 ft. W.
5	☐ Authorized☐ Proposed		26	s	6	w	32	SE	SE	11	110 ft. N. & 490 ft. W. from the SE cor. Sec. 32
3	☐ Authorized ☐ Proposed		27	s	6	w	5	NE	NE	1	20 ft. S. & 650 ft. W. from the NE Cor. Sec. 5
	☐ Authorized ☐ Proposed										
	☐ Authorized ☐ Proposed								and the same of th		

Check a	all type(s) of change(s) proposed below (c	hange	"CODES" are provided in parentheses):
\boxtimes	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
\boxtimes	Character of Use (USE)		Point of Appropriation/Well (POA)
\boxtimes	Point of Diversion (POD)		Additional Point of Appropriation (APOA)
	Additional Point of Diversion (APOD)		Substitution (SUB)
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOVFP 3 0 2016
Will all	of the proposed changes affect the entire	wate	r right? SALEM, OR
Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the pro) section of Table 2 on the next page. Use the changes.
⊠ No	Complete all of Table 2 to describe the po	rtion o	of the water right to be changed RECEIVED BY OWRD

SEP 19 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 # 49118

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.

Th	e li		_		appe	ars or	the c	ertific	ate BE		ds) POSED CHA I be changed.	NGES	Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.													
Гwр	P	lng	S	Sec	14	V	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Tv	P	Rı	ıg	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table I)	Priorit Date	
	J.						100		150	Irrigation	Popai Fou=2	Alunt	FOR POB		-	The second second			NW.		510		10.0		100 F		
	1	2		L						CALLERY STREET	3.7.	14 to 15	200		2		E		SW		Silo		3.0	100	Pop 4	i juni	
6 S	6	5 1	W	32	SE	SE	100		0.4	IR	POD-5	1975		26	s	6	w	32	SE	SE	100	NA	NA	QM	3	1975	
7 S	6	5 1	W	5	NE	NE	100		8.2	IR	POD-5	1975		26	S	6	w	33	SE	SE	1102	NA	NA	QM	3	1975	
														27	s	6	w	4	NW	1/4	1100, 1102, 1200, 1205	NA	NA	QM	3	1975	
														27	S	6	w	4	sw	1/4	1205	NA	NA	QM	3	1975	
														27	s	6	w	5	NE	NE	100, 2201	NA	NA	QM	3	1975	
														27	S	6	w	5	SE	NE	100, 2201	NA	NA	QM	3	1975	
														27	S	6	w	5	NE	SE	100, 2201	NA	NA	QM	3	1975	
														27	s	6	w	5	SE	SE	2201	NA	NA	QM	3	1975	
2																											
<u> </u>					1	ATOT	L ACI	RES:	8.6				RECE						-	ГОТА	L ACR	ES:					

Additional remarks:

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SEP 3 0 2016

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SEP 19 2016

SALEM, OR

SALEM. OR

	Certificate # 49118
For P	lace of Use or Character of Use Changes
	there other water right certificates, water use permits or ground water registrations associated the "from" or the "to" lands? Yes No
If Y	ES, list the certificate, water use permit, or ground water registration numbers:
a pri to a	many right proposed for transfer must be included in the transfer or be cancelled. Any change ground water registration must be filed separately in a ground water registration modification ication.
For S	ubstitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)
	and water supplemental Permit or Certificate #; ace water primary Certificate #
For a	change from Supplemental Irrigation Use to Primary Irrigation Use
Iden	tify the primary certificate to be cancelled. Certificate #
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
ANI	http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx D/OR SALEM, 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 wells positive to

information necessary to complete Table 3.

SALEM, OR

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.

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

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)	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 -specifi rate (cfs or gpm). If less han full rate of water right

CERTIFICATE # 49020

Description	of	Water	Delivery	System
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System capacity: $\underline{1+}$ 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. 50 HP electric pump with portable pipe and impulse sprinklers. This pump serves for POD 5, 6 & 7

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?	Tag # L)	T	wp	F	tng	Sec	3/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Pod-6	✓ Authorized✓ Proposed		26	s	6	w	32	SE	SE	11	100 ft. N. & 540 ft. W. from the SE cor. Sec. 32
POD-3	☐ Authorized ☐ Proposed		27	s	6	w	5	NE	NE	1	20 ft. S. & 650 ft. W. from the NE Cor. Sec. 5
	☐ Authorized ☐ Proposed										
	☐ Authorized ☐ Proposed										

Check a	all type(s) of change(s) proposed below (c	hange	e "CODES" are provid	led in parentheses):
\boxtimes	Place of Use (POU)		Supplemental Use to F	Primary Use (S to P)
\boxtimes	Character of Use (USE)		Point of Appropriation	/Well (POA)
\boxtimes	Point of Diversion (POD)		Additional Point of Ap	opropriation (APOA) RECEIVED BY OWRD
\boxtimes	Additional Point of Diversion (APOD)		Substitution (SUB)	RECEIVED BY OWNE
	Surface Water POD to Ground Water POA (SW/GW)		Government Action Po	OD (GOYEP 3 0 2016
Will all	of the proposed changes affect the entire	wate	r right?	SALEM, OR
Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the pro-			the next page. Use the

No Complete all of Table 2 to describe the portion of the water right to be charged VED BY OWRD

SEP 19 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 # 49020

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

Т	he		_		appe	ars o	n the d	certific	ate BE		nds) POSED CHA		Proposed Changes (see			Th	e lis	ting			appea		TER PI	on" lands) ROPOSED	CHANG	ES
Tw		Rnį	g	Sec	γ,	4	Tax Lot	Gvt Let or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES" from previous page)	Tv	νp	Ri	ng	Sec	**	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
4		1		15		Ne.	100	1 4	150	trigation	POD#1 FOD#7	1991	POL POD	T.	170							3.4	10:0		POD-25	1911
		300			9 -7		Seed.		F costs 3		1	45	¥	5	15.6	9			SW	NW	500	- W	5.0	35 1 2	PEUSA	1901
27	S	6	w	5	NE	SE	2201		15.6	IR	POD-6	1976		26	s	6	w	32	SE	SE	100	NA	NA	QM	3	1976
7	S	6	w	5	SE	SE	2201		5.3	IR	POD-6	1976		26	S	6	w	33	SE	SE	1102	NA	NA	QM	3	1976
27	S	6	w	5	SE	SE	2200		11.7	IR	POD-6	1976		27	s	6	w	4	NW	1/4	1100, 1102, 1200, 1205	NA	NA	QM	3	1976
7	S	6	w	8	NE	NE	2200	1	1.2	IR	POD-6	1976		27	s	6	w	4	sw	1/4	1205	NA	NA	QM	3	1976
														27	s	6	w	5	NE	NE	100, 2201	NA	NA	QM	3	1976
														27	s	6	w	5	SE	NE	100, 2201	NA	NA	QM	3	1976
														27	s	6	w	5	NE	SE	100, 2201	NA	NA	QM	3	1976
														27	s	6	w	5	SE	SE	2201	NA	NA	QM	3	1976
														27	s	6	w	5	SE	SE	2200		11.7	IR	3, 6	1976
														27	S	6	w	8	NE	NE	2200	1	1.2	IR ECEIVE	3,6	1976
					-	ТОТА	L AC	RES:	33.8				RECE	V	=D	B	10	WP	·	ГОТА	L ACI	RES:	12.9	LOEIVE	****	יאר

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	Certificate # 49020
For P	Place of Use or Character of Use Changes
	there other water right certificates, water use permits or ground water registrations associated the "from" or the "to" lands? Yes No
If Y	ES, list the certificate, water use permit, or ground water registration numbers:
a pr to a	suant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to imary right proposed for transfer must be included in the transfer or be cancelled. Any change ground water registration must be filed separately in a ground water registration modification lication.
For S	ubstitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)
	und water supplemental Permit or Certificate #; face water primary Certificate #
For a	change from Supplemental Irrigation Use to Primary Irrigation Use
Iden	ntify the primary certificate to be cancelled. Certificate #
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
ANI	D/OR
	Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For <i>proposed wells not yet constructed or built</i> , provide "a best estimate" for each requested information element in the table. The Department recommends you consult a

information necessary to complete Table 3.

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.

licensed well driller, geologist, or certified water right examiner to assist with assembling the

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 Sevent. Completed well (in feet)	P Source aquifer (sand, gravel, basalt, etc.)	Well -specif rate (cfs or gpm). If les han full rate water right	
							REC	EIVED BY	OWRD		

SEP 19 2016

CERTIFICATE # 61946

Description of W	ater Delivery System	
System capacity:	1+ 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. 50 HP electric pump with portable pipe and impulse sprinklers. This pump serves for POD 5, 6 & 7

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA) (Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Twp		Rng		Sec	5/4	1%	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)	
7	✓ Authorized✓ Proposed		27	S	6	w	5	NE	NE	1	600 ft. W. from the NE cor. Sec. 5	
3	☐ Authorized ☐ Proposed		27	S	6	w	5	NE	NE	1	20 ft. S. & 650 ft. W. from the NE Cor. Sec. 5	
	☐ Authorized ☐ Proposed			oreside								
	☐ Authorized ☐ Proposed											

Check a	all type(s) of change(s) proposed below (change	e "CODES" are provided in parentheses):
\boxtimes	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
\boxtimes	Character of Use (USE)		Point of Appropriation/Well (POA)
\boxtimes	Point of Diversion (POD)		Additional Point of Appropriation (APOA) RECEIVED BY OWRD
\boxtimes	Additional Point of Diversion (APOD)		Substitution (SUB)
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GGPV)3 0 2016
Will all	of the proposed changes affect the entir	e wate	r right? SALEM, OR
⊠ Yes	Complete only the Proposed ("to" or "on "CODES" listed above to describe the pr) section of Table 2 on the next page. Use the changes.
☐ No	Complete all of Table 2 to describe the po	ortion (of the water right to be changed.
			RECEIVED BY OWRD

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SALEM, OR

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Table 2. Description of Changes to Water Right Certificate # 61946

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.								Proposed Changes (see																		
Twp	R	lng	Sec		4 1/4	Ta Lo	ix L	Gvt	Acres	Type of USE listed on Certificate	POD(e) or	Priority Date	"CODES" from previous page)	Tv	vр	Rr	ig	Sec	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
die die								17	15.0	la rigatión.	POD=1 POD=2	1961	POLITICO				THE PERSON NAMED IN		NY	VW	2500		10.0		POD #S	1961
			17 20		1				1	200		206.3			7 52				SW	NW	500	3	5.0		eon ≥6	1901
27 S	6	W	V 5	NE	SE	10 220			18.2	IR	POD-7	1980		26	S	6	w	32	SE	SE	100	NA	NA	QM	3	1980
27 S	6	5 W	V 5	SE	SE	10	0,		5.7	IR	POD-7	1980		26	S	6	w	33	SE	SE	1102	NA	NA	QM	3	1980
27 S	6	5 W	V 5	SE	SE				12.5	IR	POD-7	1980		27	s	6	w	4	NW	1/4	1100, 1102, 1200, 1205	NA	NA	QM	3	1980
27 S	6	5 W	V 8	NE	NE	20	00	1	1.4	IR	POD-7	1980		27	S	6	w	4	sw	1/4	1205		NA	QM	3	1980
														27	s	6	w	5	NE	NE	100, 2201	NA	NA	QM	3	1980
														27	S	6	w	5	SE	NE	100, 2201	NA	NA	QM	3	1980
														27	s	6	w	5	NE	SE	100, 2201	NA	NA	QM	3	1980
														27	S	6	w	5	SE	SE	2201	NA	NA	QM	3	1980
											RECEIVE	DAV		27	S	6	w	5	SE	SE	200		12.5	IR	3,7	1980
											05-	PARC	WRD	27	S	6	w	8	NE	NE	200	1	1.4	IR	3,7	1980
					TOT	AL A	CRI	ES:	37.8		SEP 3	0 2016							7	ГОТА	L ACE	RES:	13.9	CEIVED	DV OWE	\m

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Permanent Transfer Application Form - Page 24 of 26 ALEM, OR

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		Certificate # 61946
For P	lace of Use or Character of Use Changes	
	there other water right certificates, water use permits or ground water registrate the "from" or the "to" lands? Yes No	ions associated
If Y	ES, list the certificate, water use permit, or ground water registration numbers:	: <u>SW-253.</u>
a pr to a	suant to ORS 540.510, any "layered" water use such as an irrigation right that is imary right proposed for transfer must be included in the transfer or be cancelled ground water registration must be filed separately in a ground water registration ication.	ed. Any change
For S	ubstitution (ground water supplemental irrigation will be substituted for surfaction)	•
Grou	und water supplemental Permit or Certificate #;	RECEIVED BY
	ace water primary Certificate #	SEP 19 26.0
For a	change from Supplemental Irrigation Use to Primary Irrigation Use	
Iden	tify the primary certificate to be cancelled. Certificate #	SALEM, OR
For a	change in point(s) of appropriation (well(s)) or additional point(s) of appropriation	opriation:
	Well log(s) are attached for each authorized and proposed well(s) that are cleawith the corresponding well(s) in Table 1 above and on the accompanying appropriate. 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 for have a well log. For proposed wells not yet constructed or built, provide "a b	

to complete Table 3.

SEP 3 0 2016

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.

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

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)	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). If less han full rate of water right