

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.

esources Department, and or at: ave questions, call
nany water rights are to ons on page 6)
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20 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
on. SALEM, OR
not own the land the water
e name of an irrigation district.
d land use form receipt ed only on federal lands or o structural changes, c) the an irrigation district or an
ion (well(s)) or additional
sion to a ground water point in the surface water source version. See OAR 690-
NG REASON(S): or incomplete

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

		sure that the transfer application map you submit includes all the required items and the existing water right map. Check all boxes that apply.
	□ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see 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.
\boxtimes		The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or Ep to WAD 0 inches. For 30 x 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 ALEIMOCHAE 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, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
\boxtimes		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
		Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
	□ N/A	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.
	□ N/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 $-42^{\circ}32'15.5"$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

*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

Applicant Information

APPLICANT/BUSINESS NAI			PHONE NO.	ADDITIONAL CONTACT NO.
CHILDERS HAY RAN	ICH, INC.			
ADDRESS				FAX NO.
30040 WEAVER SPRII	NGS LANE			
CITY	STATE	ZIP	E-MAIL	
BURNS	OR	97720		
By providing an E-	MAIL ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALL	CORRESPONDENCE FROM THE
DEPARTMENT ELECT	TRONICALLY. CO	PIES OF THE	FINAL ORDER DOCUM	ENTS WILL ALSO BE MAILED.

AGENT/BUSINESS NAME I OHN A. SHORT / WATER R	IGHT SER	VICES, LLC	PHONE NO. 541-389-2837	ADDITIONAL CONTACT NO.
ADDRESS PO BOX 1830				FAX NO.
CITY	STATE	ZIP	E-MAIL	2. 201
BEND By providing an e-mail a	OR DDRESS, C	97709 ONSENT IS GIVEN	JOHNSHORT@U TO RECEIVE ALL C	SA.COM CORRESPONDENCE FROM THE
DEPARTMENT ELECTRONIC				1
Explain in your own words	what you	propose to acco	mplish with this tra	ansfer application, and why:
ADDING WELLS 12-17	FOR BET	TER WATER	MANAGEMENT	
If you need additional space, con	tinue on a s	eparate piece of pap	er and attach to the ap	plication as "Attachment 1".
Check this box if this p	roject is fu	illy or partially f	unded by the Amer	rican Recovery and
Reinvestment Act. (Fed	eral stimu	lus dollars)	•	·
 I affirm the applicant is a muname of the municipality or I affirm the applicant is an encondemnation the property to supporting documentation. 	a predecessontity with the	or; OR e authority to conde	mn property and is acc	quiring by
the Department for publication right is located, once per weel suggest publishing the notice	n of a notice of two controls in the follo	e in a newspaper onsecutive weeks. wing newspaper: rained in this app	with general circulat If more than one que clication is true and	
the Department for publication right is located, once per weel suggest publishing the notice I (we) affirm that the inform Applicant signature	n of a notice of two controls in the follo	e in a newspaper onsecutive weeks. wing newspaper: rained in this appropersion of Section 1997.	with general circulat If more than one que clication is true and Muzio, Presic itle if applicable)	accurate. RECEIVED BY ON Date OCT 2 1 2016
the Department for publication right is located, once per week suggest publishing the notice I (we) affirm that the information Applicant signature Applicant signature	n of a notice of two continuous c	e in a newspaper onsecutive weeks. wing newspaper: rained in this appropriate of the print Name (and T	with general circulat If more than one que clication is true and Mozio, Presic itle if applicable)	ion in the area where the water palifying newspaper is available, accurate. RECEIVED BY ON Sent 1014116

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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.

The applicant is resp.						
continue to be sent to		_	etion of	change(s). N	Notices ar	nd correspondence should
The receiving landov final order is issued.		_				oosed change(s) after the se sent to this landowner.
				_		ompletion of change(s). ner and the applicant.
At this time, are the lands in	this trans	sfer appli	cation in	n the process	of being	sold? ☐ Yes ☒ No
If YES, and you know winformation table below. assignment will have to	If you d	lo not kno	ow who		_	the receiving landowner ill be, then a request for
If a property sells, the ce unless a sale agreement of http://www.oregon.gov/o	or other d	locument	states o	therwise. Fo	or more in	
RECEIVING LANDOWNER NAME N/A		,,,,		PHONE NO.		ADDITIONAL CONTACT NO.
ADDRESS						FAX NO.
CITY	STATE	ZIP		E-MAIL		
Check here if any of the an irrigation or other wa		hts propo	sed for	transfer are o	or will be	lanatad suithin on samual i
IRRIGATION DISTRICT NAME	ter distric	et. (Tip : 0		te and attach		
	ter distric	et. (Tip: 0	Comple	te and attach		
IRRIGATION DISTRICT NAME N/A CITY	nny of the	rights su	ADDRESS STATE	s and attach	Supplem	ental Form D.)
IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a feel entity name	nny of the	rights su	ADDRESS STATE	te and attach s ander a water ty.	Supplem	zip
IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a fe	nny of the	rights su	ADDRES STATE applied uther entite	te and attach s ander a water ty.	Supplem	zip
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IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a feet stored water wat	onsistency	rights su ency or of y Require vithin who	STATE splied uther entitle Address state state state address state state address state address state address state state state address state state state address state state address state state state address state address state	and attach s ander a water ty. s vou must list diction wate ss BUENA VIST	service a	zip zip zip y, city, municipal diverted, conveyed or use
IRRIGATION DISTRICT NAME N/A CITY Check here if water for a for stored water with a fermitty name N/A CITY To meet State Land Use Cocorporation, or tribal government of the component of t	onsistency	rights su ency or of y Require vithin who	ADDRES STATE ADDRES STATE ADDRES STATE STATE ADDRES AD	and attach s ander a water ty. s vou must list diction wate ss BUENA VIST	all countr will be	zip zip zip y, city, municipal diverted, conveyed or use

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:

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- 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.

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

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CERTIFICATE # 90726

Description of Water Delivery System

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System capacity: 13.21 cubic feet per second (cfs) OR

gallons per minute (gpm)

SALEM, OR

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. **PUMPS DRIVE PIVOTS 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)	T	wp	R	ng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
WELL 1	✓ Authorized ☐ Proposed	HARN 1098	25	s	30	E	35	sw	sw	4000	1300' N, 1350' W OF S 1/4 COR SEC 35
WELL 2	☐ Authorized☐ Proposed	HARN 1097	**	10	**	**	**	NW	SE	**	1330' N. 1280' W OF S 1/4 COR SEC 35
WELL 3	☐ Authorized☐ Proposed	HARN 1323	26	11	30	**	2	sw	NW	300	1340' S, 1350' W OF N 1/4 COR SEC 2
WELL 4	☐ Authorized☐ Proposed	HARN 1322	17	,,	"	**	17	NW	NE	88	1310' S, 1280' E OF N 1/4 COR SEC 2
WELL 5	Authorized Proposed	HARN 50887	**	11	**	**	17	sw	NE	99	1350' S, 1280' E OF N 1/4 COR SEC 2
WELL 6		HARN 51539/ 1318	17	**	**	**	1	NW	sw	99	260' S, 40' E OF W 1/4 COR SEC 1
WELL 7		HARN 1319 /51543	**	17	**	**	17	NW	sw	99	1310' S, 1310' E OF W 1/4 COR SEC 1
WELL 8	Authorized Proposed	HARN 50315 / 51793	11	17	**	**	**	SE	SE	77	1330'S, 1310' W OF W 1/4 COR SEC 1
WELL 9	✓ Authorized ☐ Proposed	N/A	11	11	31	77	6	SE	NE	1100	1330' S, 1310' W OF NE COR SEC 6
WELL 10		N/A	**	11	**	99	**	NW	NE	**	80' S, 60' E OF N 1/4 COR SEC 6
WELL 11	✓ Authorized ☐ Proposed	HARN 50640	17	11	**	**	11	sw	NW	99	280' N, 160' E OF W 1/4 COR SEC 6
WELL 12	☐ Authorized ☐ Proposed	L-98091	11	17	"	11	"	SE	NW	**	20' N, 220' W OF CEN COR SEC 7
WELL 13	☐ Authorized ☐ Proposed	L-98089	11	11	"	11	11	NW	SE	11	1740' S, 30' E OF CEN COR SEC 7

WELL 14	☐ Authorized ☐ Proposed	HARN 51694	**	**	30	**	1	sw	sw	SE " 1800' S, 30' E OF CEN COR SEC 7 NE 1100 1450' S, 1110' E OF N 1/4 COR SEC 6 SW 300 300' S, 50' E OF W 1/4 COR SEC 1 ES" are provided in parentheses) mental Use to Primary Use (S to P) f Appropriation/Well (POA) ation (SUB) ment Action POD (GOV)					
WELL 15	Authorized L-102524 " " " " " SW SE " 1800' S, 30' E OF CEN COR SEC 7														
WELL 16	Selection Sel														
WELL 17	Substitution (SUB) Substitution (SUB) Substitution (SUB) Substitution (SUB) Substitution (SUB) COR SEC 1 COR SEC 1														
Check	all type(s) of c	hange(s) pro	opos	ed b	elow	(cha	ange	"COD	ES" a	re pro	vided in parentheses):				
	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 o	of App	ropriat	ion/Well (POA)				
	Point of Dive	ersion (POD))				\boxtimes	Additio	onal P	oint of	Appropriation (APOA)				
	Additional P	oint of Diver	sion	(AP	OD)	[Substit	ution	(SUB)					
			ounc	l Wa	iter	[Govern	nment	Action	POD (GOV)				
Will al	l of the propos	sed changes	affec	t the	e ent	ire v	vater	right?							
Yes!	Complete on "CODES" lis	•					,			able 2 o	on the next page. Use the				

☐ No Complete all of Table 2 to describe the portion of the water right to be changed.

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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 # 90726

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.

	The	lis			t app	ears o	n the	certific	cate BE		nds) POSED CHA	ANGES	Proposed Changes (see			Th	e lis	ting			appea		TER PI	on" lands) ROPOSED	CHANG	ES
Т	wp	Rn	ng	Sec	1/2	1 1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)		"CODES" from previous page)	Tv	wp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
													EXAMPLE													
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
														2	S	9	E	2	sw	NW	500		5.0		POD #6	1901
													APOA	25	S	30	E	35	NE	sw	4000		31.5	IR	WELLS 1-17	6-4-80
													**	"	**	**	**	**	NW	sw	**		32	**	11	11
													11	"	**	**	**	**	sw	sw	11		33.4	**	11	**
													**	"	**	"	**	**	SE	sw	11		33.5	11	11	11
													11	"	**	11	11	**	NE	sw	11		31.7	99	ę.	**
													**	"	**	**	**	"	NW	SE	**		32.6	17	PT	11
-													11	"	**	"	**	**	sw	SE	11		33.1	11	11	11
2,													11	"	"	"	**	"	SE	SE	11		33	11	11	11
7													**	26	S	30	E	1	NE	sw	300		31.6	11	81	11
•													**	"	"	**	"	**	NW	sw	**		32.3	"	99	19

Additional remarks: N/A.

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Revised 7/1/2013

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Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

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The	e li			t app	ears o	n the	certific	cate BE		nds) POSED CHA	ANGES	Proposed Changes (see			The	e lis	ting			appea		TER PI	on" lands) ROPOSED	CHANG	ES
Twp	R	ng	Sec	1/1	1 1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES" from previous page)	Tı	wp	Rı	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
												EXAMPLE													
2 S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
T		T											2	S	9	E	2	sw	NW	500		5.0		POD #6	1901
												APOA	26	S	30	E	1	sw	sw	11		31.7	IR	WELLS 1-17	6-4-80
												41	"	11	**	**	**	SE	sw	11		32.4	**	11	**
												11	"	**	77	17	11	NE	SE	**		32.7	11	11	**
		T										**	"	11	**	**	**	NW	SE	**		33.3	11	11	88
												71	11	"	**	**	11	sw	SE	11		32.7	11	11	**
												99	"	11	**	**	**	SE	SE	**		33.3	99	ŧŧ	99
		T										77	"	"	**	**	2	NE	NE	66	1	32.4	11	19	**
												"	"	11	11	**	**	NW	NE	77	2	32.7	11	19	11
		T										"	"	"	**	**	**	sw	NE	**		32.4	**	99	**
												66	"	**	77	11	**	SE	NE	**		33.3	***	11	77

Additional remarks: N/A.

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Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

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Table 2. Description of Changes to Water Right Certificate # 90726

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	Rng Sec 1/4 1/4 Tax Lot or Acres listed on POA(s) (name the second secon												Proposed Changes (see			Th	e lis	ting			appe		TER P	on" lands) ROPOSED	CHANG	ES
Twp	F	₹ng	Se	c	1/4	3/4	Tax Lot	1 1	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES"	T	мp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
													EXAMPLE													
2 S	9	1	E 1	5	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
	Γ		T	T										2	S	9	E	2	sw	NW	500		5.0		POD #6	1901
													APOA	26	S	30	E	2	NE	NW	11	3	31.9	IR	WELLS 1-17	6-4-80
													"	"	**	**	**	**	NW	NW	**	4	32.6	**	99	**
													"	"	11	11	**	**	sw	NW	11		32.8	**	**	ŧŧ
													"	**	**	**	**	**	SE	NW	**		33.5	11	64	11
													77	11	**	31	**	6	NE	NE	1100		33.4	11	89	11
													99	"	**	**	**	**	NW	NE	**		33.6	**	20	**
													***	"	**	**	**	**	sw	NE	11		33.9	11	77	11
													11	"	**	**	**	**	SE	NE	**		34.2	11	19	11
													11	"	**	**	**	**	NE	NW	**		34.4	11	99	11
													11	"	"	**	**	**	NW	NW	11	1	34.4	**	71	11

Additional remarks: N/A.

Revised 7/1/2013

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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.

The	e li		-		app	ears o	n the	certifi	cate BE		nds) POSED CHA	NGES	Proposed Changes (see			Th	e lis	ting			appe		TER PI	on" lands) ROPOSED	CHANG	ES
Twp	R	ng	S	Sec	1/4	1/4	Tax Lot	Gvt Lot of DLC		Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES"	Т	wp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
		-								and the second s			EXAMPLE													
2 S	9	E	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
		T												2	S	9	E	2	sw	NW	500		5.0		POD #6	1901
													APOA	26	s	31	E	6	sw	NW	"	2	35.1	IR	WELLS 1-17	6-4-80
													11	"	**	**	**	99	SE	NW	**		35.1	**	**	**
					-	ГОТА	LAC	RES:												ГОТА	L ACI	RES:	1056.5			

Additional remarks: N/A

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For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands?

Yes
No

If YES, list the certificate, water use permit, or ground water registration numbers: N/A.

Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

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

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

For a change from Supplemental Irrigation Use to Primary Irrigation Use

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

SALEM, OR

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department's web page at:

http://apps.wrd.state.or.us/apps/gw/well log/Default.aspx

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

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 of water right
WELL #9	YES	N/A								
WELL #10	YES	N/A	134'							