

February 3, 2017

Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301

Subject: Application for Transfer to Certificate 91496

Please find enclosed with this letter an Application for a Transfer, on behalf of the City of Scappoose. This Transfer Application is being submitted to add an additional Point of Appropriation (POA) for municipal water supply under Certificate 91496. The City would like to drill a replacement well at their Dutch Canyon site to replace their current well, which has had notable declines in productivity. The current well will be moved to a back-up position. The City would like to have the new well online for the coming summer, and as such, this Transfer is being submitted with a Reimbursement Authority request.

Respectfully submitted,

Jason Melady, RG, CWRE GSI Water Solutions, Inc.

Cc: Darryl Sykes – City of Scappoose

Enclosures:

Application for Transfer to Certificate 91496
Reimbursement Authority Estimate Application
Check in the amount of \$1,575 (\$1,350 for the Transfer and \$125 for the RA)

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SALEM, OR



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. RECEIVED BY OWRD

Check all ite	ms included with this application. (N/A = Not Applicable)	FEB 0 6 2017
	Part 1 - Completed Minimum Requirements Checklist.	1 20 0 0 2011
	Part 2 - Completed Transfer Application Map Checklist.	SALEM, OR
	Part 3 – Application Fee, payable by check to the Oregon Water Resourcempleted 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 of Customer Service at (503) 986-0801.	•
	Part 4 - Completed Applicant Information and Signature.	
	Part 5 – Information about Water Rights to be Transferred: How many be transferred? 1 List them here: Certificate 91496 Please include a separate Part 5 for each water right. (See instructions	
	Attachments:	
	Completed Transfer Application Map.	
$\boxtimes \checkmark$	Completed Evidence of Use Affidavit and supporting documentation.	
□ N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not oright is on.)	wn the land the water
□ N/A	Supplemental Form D – For water rights served by or issued in the nar district. Complete when the transfer applicant is not the irrigation district.	
N/A N/A	Land Use Information Form with approval and signature (or signed lar stub). Not required if water is to be diverted, conveyed, and/or used or if all of the following apply: a) a change in place of use only, b) no struse of water is for irrigation only, and d) the use is located within an ir exclusive farm use zone.	nly on federal lands or uctural changes, c) the
N/A	Water Well Report/Well Log for changes in point(s) of appropriation (point(s) of appropriation.	well(s)) or additional
□ ⊠ N/A	Geologist Report for a change from a surface water point of diversion of appropriation (well), if the proposed well is more than 500' from the and more than 1000' upstream or downstream from the point of divers 380-2130 for requirements and applicability.	e surface water source
	(For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING R Application fee not enclosed/insufficient Map not included or inc	te
	Staff:503-986-0 Date: / /	

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 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. $\boxtimes \checkmark$ The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required. A north arrow, a legend, and scale. \boxtimes \checkmark 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. 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. 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. If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at

least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or

FEE WORKSHEET for PERMANENT TRANSFER Par	t 3 of 5	- Fee	Worksheet
1 Base Fee (includes one type of change to one water right for up to 1 ct		1	\$1,000
Types of change proposed: RECEIVED BY O	WRD		
Place of Use			
Character of Use FEB 0 6 2017			
Point of Diversion/Appropriation			
Number of above boxes checked = $\frac{1}{2}$ (2a) SALEM, OR			
Subtract 1 from the number in line 2a = 0 (2b) If only one change, this will be Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » »		2	\$0
	·	2	\$0
Number of water rights included in transfer 1 (3a) Subtract 1 from the number in 3a above: 0 (3b) If only one water right	4.1111		
be 0	inis wiii		11
3 Multiply line 3b by \$450 and enter » » » » » » » » » » » »	» » »	3	\$0
Do you propose to add or change a well, or change from a surface wat	er POD		
to a well?			
No: enter 0 »» » » » » » » » » » » » » » » »	» »		17
4 Xes: enter \$350 » » » » » » » » » » » » » » » » » »	» »	4	\$350
Do you propose to change the place of use or character of use?			
No: enter 0 on line 5 » » » » » » » » » » » » » »			
Yes: enter the cfs for the portions of the rights to be transferred (see		
example below*): (5a)			
Subtract 1.0 from the number in 5a above: (5b)			
If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » »			
If 5b is greater than 0, round up to the nearest whole number:		_	
and multiply 5c by \$300, then enter on line 5 » » » » »		5	\$0
6 Add entries on lines 1 through 5 above » » » » » » » » » » » »	Subtotal:	6	\$350
Is this transfer:			
necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932?			
endorsed in writing by ODFW as a change that will result in a ne	.4		
benefit to fish and wildlife habitat?	i		
If one or more boxes is checked, multiply line 6 by 0.5 and enter on lin	ne 7 "		
7 If no box is applicable, enter 0 on line 7» » » » » » » » » » »		7	\$0
8 Subtract line 7 from line 6 » » » » » » » » » » » » » » Transf	fer Fee:	8	\$1,350

*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	ME		PHONE NO.	ADDITIONAL CONTACT NO.				
City of Scappoose			(503)543-7146	Darryl Sykes				
ADDRESS				FAX NO.				
33568 E Columbia Ave								
СПУ	STATE	ZIP	E-MAIL					
Scappoose	OR	97056	dsykes@cityofscap	cityofscappoose.org				
BY PROVIDING AN E-	MAIL ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALL O	CORRESPONDENCE FROM THE				
DEPARTMENT ELECT	RONICALLY. CO	PIES OF THE I	FINAL ORDER DOCUME	NTS WILL ALSO BE MAILED.				

Agent Information – The ag	gent is auth	orized to represent	t the applicant in	all matters relati	ng to this application.
AGENT/BUSINESS NAME GSI Water Solutions, Inc. Attn	: Jason Me	lady	PHONE NO. (503)239-8799	ADDITIONA	AL CONTACT NO.
ADDRESS 55 SW Yamhill Street, Suite 30				FAX NO.	
CITY Portland	STATE OR	ZIP 97204	E-MAIL jmelady@gsiws	.com	
BY PROVIDING AN E-MAIL A DEPARTMENT ELECTRONIC					
Explain in your own words The purpose of this transfer of appropriation to Certification	is to add	a replacement we			ation, and why:
If you need additional space, con	tinue on a s	eparate piece of pap	er and attach to the	application as "A	ttachment 1".
Check this box if this particle Reinvestment Act. (Fed	_		unded by the Ar	nerican Recove	ery and
 By signing this application, Department approval of the authorized to pursue the tran I affirm the applicant is a muname of the municipality or I affirm the applicant is an excondemnation the property to supporting documentation. 	transfer, I wasfer as iden inicipality a predecess tity with the	vill be required to protified in OAR 690-3 s defined in ORS 54 or; OR le authority to conde	f the draft preliming ovide landownersh 80-4010(5); OR 0.510(3)(b) and the min property and is	ip information and at the right is in the acquiring by	evidence that I am
I understand that prior to Dep the Department for publication right is located, once per week suggest publishing the notice. I (we) affirm that the inform Applicant signature.	n of a notice of two continuities in the following in the	ce in a newspaper on onsecutive weeks. owing newspaper: (with general circular one of the south County Spulication is true and County Spulication is t	ulation in the are e qualifying news otlight.	a where the water
Applicant signature	v	Print Name (and T	itle if applicable)	Date	SALEM, OR

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? X Yes No If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or email addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.

Check the following boxes th	hat apply:	•			
The applicant is resp continue to be sent to			tion of change(s). No	tices and correspondence shou	ld
_		_		he proposed change(s) after the hould be sent to this landowne	
				ole for completion of change(s) andowner and the applicant.	
At this time, are the lands in	this tran	sfer appli	cation in the process of	of being sold? Yes No	
If YES, and you know winformation table below assignment will have to	. If you d	lo not kno	w who the new lando	emplete the receiving landown of wher will be, then a request fo	er r
If a property sells, the counless a sale agreement http://www.oregon.gov/	or other d	locument	states otherwise. For		
RECEIVING LANDOWNER NAME NA			PHONE NO.	ADDITIONAL CONTACT NO.	
ADDRESS				FAX NO. RECEIVED BY (JWBD
СІТУ	STATE	ZIP	E-MAIL		
Describe any special owners	ship circu	mstances	here: NA	FEB 0 6 201	
Describe any special owner.					
7 1	•		nere. <u>NA</u>	SALEM, OF	1
☐ Check here if any of the	water rig	hts propo	sed for transfer are or	will be located within or serve	
• •	water rig	hts propo	sed for transfer are or	will be located within or serve	
Check here if any of the an irrigation or other wa	water rig	hts propo	sed for transfer are or Complete and attach S	will be located within or serve supplemental Form D.)	
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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.

Other Alternatives:

- 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.

CERTIFICATE # 91496

Description of Water Delivery System System capacity: 0.89 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. Groundwater is pumped from the existing Dutch Canyon well using an 8-stage turbine pump and transmitted through 100 linear feet of 8-inch diameter pipe, then through 3,300 linear feet of 12-inch diameter pipe, it then ties into the 12-inch diameter supply line, and flows 5,700 linear feet to the Keys Road Treatment Plant. From there, water is distributed throughout the Municipal drinking water system.

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Т	Twp		lng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Dutch Canyon Well		COLU 100	3	N	2	w	13	NE	sw	2200	1,544.48 feet North and 2000.48 feet East from SW corner, Section 13
DC-E	DC-E ☐ Authorized ☐ Proposed		3	N	2	w	13	NE	sw	2200	1,425 ft North and 1,855 ft East from the SW corner, Section 13

C-L	□ Proposed	IVA		14			15	NE	511	2200	corner, Section 13	
Check	all type(s) of c	hange(s) pro	pose	d b	elow	(ch	ange	"COD	ES" a	re pro	vided in parentheses):	
	Place of Use	(POU)				[Supple	menta	l Use to	o Primary Use (S to P)	
	Character of	Use (USE)				[Point o	f App	ropriati	ion/Well (POA)	
	Point of Dive	ersion (POD)				[\boxtimes	Additio	onal P	oint of	Appropriation (APOA)	
	Additional Po	oint of Diver	sion ((AP	OD)			Substitution (SUB)				
	Surface Water POA (SW/GV		ound	Wa	ter	[Govern	ment	Action	POD (GOV)	
Will al	l of the propos	ed changes	affect	t the	e ent	ire v	vater	right?	•			
Yes Yes	Complete onl "CODES" lis						-			able 2 o	on the next page. Use the	
☐ No	Complete all	of Table 2 to	desc	cribe	e the	port	ion o	f the w	ater ri	ght to b	e changed.	
								T	12	586	ECEIVED BY OWRD	

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

Do you have questions about how to fill-out the tables? Contact the Department at 503-986-0900 and ask for Transfer Staff.

Table 2. Description of Changes to Water Right Certificate # 91496

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	and manda									ES									
Twp	Rı	ng	Sec		1/4 1/4		I av	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	Tv	vp	Rr	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 1)	Priority Date
													EXAMPLE													
2 S	9	E	15	NI	EN	w	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	Entire Place of Use Municipal Dutch Canyon Well; DC-E						1979						
			•		TOT	AL	ACR	ES:			•								-	ГОТА	L ACI	RES:				

Additional remarks: The new well is proposed to replace the existing well, which has performance issues. The existing well will be kept as an emergency backup source, with the understanding that the combined rate will not exceed the certificated amount of 0.89 cfs.

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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: <u>Permit G-17643, GR-926, Permit G-17644, 5573, 42700.</u>

-

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 # NA; Surface water primary Certificate # NA.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

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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	ls 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	Well -specific rate (cfs or gpm). <u>If</u> less han full rate of water right
Well	Yes	COLU 100	227'	12"	0- 226'9"	0-45'	186'9"- 226'9"	61' bgs	Sand and gravel	
DC-E	No	NA	227'	12"	0-227'	0-45'	185-225'	NA	Sand and gravel	