

# Application for Permanent Water Right Transfer Part 1 of 5 – Minimum Requirements Checklist

Th	is transfer application will be returned if Parts 1 through 5 and attachments are not completed and included.  For questions, please call (503) 986-0900, and ask for Transfer Section	n.
Check/all ite	ms included with this application. (N/A = Not Applicable)	RECEIVED BY OWRD
<b>1</b>	Part 1 – Completed Minimum Requirements Checklist.	MAR <b>0 9</b> 2017
	Part 2 – Completed Transfer Application Map Checklist.	
	Part 3 – Application Fee, payable by check to the Oregon Water R completed Fee Worksheet, page 3. Try the new online fee calculate <a href="http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator">http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator</a> . If you has Customer Service at (503) 986-0801.	or at:
	Part 4 - Completed Applicant Information and Signature.	
	Part 5 – Information about Water Rights to be Transferred: <b>How to be transferred?</b> 1 List them here: 57784  Please include a separate Part 5 for each water right. (See instructions)	
	Attachments:	
	Completed Transfer Application Map.	
	Completed Evidence of Use Affidavit and supporting documentation	ion.
□ N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does right is on.)	not own the land the water
□ N/A	Supplemental Form D – For water rights served by or issued in the district. Complete when the transfer applicant is not the irrigation	_
□ N/A	Land Use Information Form with approval and signature (or signe stub). Not required if water is to be diverted, conveyed, and/or use if all of the following apply: a) a change in place of use only, b) no use of water is for irrigation only, and d) the use is located within exclusive farm use zone.	ed only on federal lands or o structural changes, c) the
□ N/A	Water Well Report/Well Log for changes in point(s) of appropriat point(s) of appropriation.	ion (well(s)) or additional
□ ¶N/A	Geologist Report for a change from a surface water point of divers of appropriation (well), if the proposed well is more than 500' from and more than 1000' upstream or downstream from the point of di 380-2130 for requirements and applicability.	m the surface water source
	(For Staff Use Only)	
	WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING Application fee not enclosed/insufficient Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete	or incomplete
	Other/Explanation Staff: 503-986-0 Date: /	/
	" Nomice 202"/UU"U 124U. /	,

Y	our trans	sfer application will be returned if any of the map requirements listed bel	ow are not met.
		e sure that the transfer application map you submit includes all the require the existing water right map. Check all boxes that apply.	ed items and
	□ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For CWREs, see <a href="http://apps.wrd.state.or.us/apps/wr/cwre_license_view/">http://apps.wrd.state.or.us/apps/wr/cwre_license_view/</a> . CWRI signature are not required for substitutions.	
	N A	If more than three water rights are involved, separate maps are needed for	each water right.
4		Permanent quality printed with dark ink on good quality paper.	
4		The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, inches. For 30 x 30 inch maps, one extra copy is required.	
U		A north arrow, a legend, and scale.	<b>0 9</b> ,2017
<u>-</u>		The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale Proof/Claim of Beneficial Use Map (the map used when the permit was cert scale of the county assessor map if the scale is not smaller than 1 inch = 1,3 scale that has been pre-approved by the Department.	ificated), the
4	/	Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognizes	ed public land
1	//	Tax lot boundaries (property lines) are required. Tax lot numbers are recom	mended.
		Major physical features including rivers and creeks showing direction of floreservoirs, roads, and railroads.	w, lakes and
4	/	Major water delivery system features from the point(s) of diversion/appropr main pipelines, canals, and ditches.	iation such as
		Existing place of use that includes separate hachuring for each water right, a use including number of acres in each quarter-quarter section, government land quarter-quarter section as projected within government lots, donation land corecognized public land survey subdivisions. If less than the entirety of the value changed, a separate hachuring is needed for lands left unchanged.	ot, or in each laims, or other
		Proposed place of use that includes separate hachuring for each water right, use including number of acres in each quarter-quarter section, government l quarter-quarter section as projected within government lots, donation land c recognized public land survey subdivisions.	ot, or in each
<u>r</u>		Existing point(s) of diversion or well(s) with distance and bearing or coordine recognized survey corner. This information can be found in your water rightermit.	
	□N/A	If you are proposing a change in point(s) of diversion or well(s), show the p and label it clearly with distance and bearing or coordinates. If GPS coordinates least one digit after the decimal (example – 42°32'15.5") or degrees-decimal more digits after the decimal (example – 42.53764°).	nates are used, seconds with at

	FEE WORKSHEET for PERMANENT TRANSFER ( Talt 3 OF 3	– ree	worksneet	
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,000	
	Types of change proposed:			
	☐ Place of Use			
	Character of Use			
	Point of Diversion/Appropriation			
	Number of above boxes checked = $\frac{1}{2}$			
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0			
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » » »	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 this will			
	be 0			
3	Multiply line 3b by \$450 and enter » » » » » » » » » » » » » »	3	0	
	Do you propose to add or change a well, or change from a surface water POD			
	to a well?			
	No: enter 0 » » » » » » » » » » » » » » » » » »			
4	Yes: enter \$350 » » » » » » » » » » » » » » » » »	4	0	
	Do you propose to change the place of use or character of use?	DECE	VED BY	NAM
	Not enter 0 on line 5 » » » » » » » » » » » » » » » » » »	HECE	VED BY O	ועע
	Yes: enter the cfs for the portions of the rights to be transferred (see			L
	example below*): $0.3(5a)$	N	AR 0 9.2017	1
	Subtract 1.0 from the number in 5a above: <u>-0.7 (5b)</u>			
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » »	1	SALEM, OR	
	If 5b is greater than 0, round up to the nearest whole number:(5c)			
5	and multiply 5c by \$300, then enter on line 5 » » » » » » » »	5	0	
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	1000	-
	Is this transfer:			
	necessary to complete a project funded by the Oregon Watershed			
	Enhancement Board (OWEB) under ORS 541.932?			
	endorsed in writing by ODFW as a change that will result in a net	1		
	benefit to fish and wildlife habitat?			
7	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »	7		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » » » » »	8	1000	
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » Transfer Fee:  ole for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 10		1000 P	<u></u>
	pplemental Certificate 87654 (1/80 cfs per acre) on the same land:	io acres)	and 43.0 acres	>
	ririgation 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 ÷100 ac); then	multiply	by the number	r
L	of acres to be transferred to get the transfer cfs ( $x$ 45 $ac$ = 0.56 $cfs$ ).	) of a ofa	DOT 0.000	
b.	If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87	654 45 6	per acre, ) ac x 0.0125	
	cfs/ac = $0.56$ cfs)	001, 10.0		
	d cfs for the portions of water rights on all the land included in the transfer; however do not coun			1
rig	hts on acreage for which you have already calculated the cfs fee for the primary right on the	same la	nd. The fee	. 1
sho	ould be assessed only once for each "on the ground" acre included in the transfer. (In this example 6 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also	o hecom	a would be only	iy
v.J	· ·	U UCCUIIIE		1
	FEE WORKSHEET for SUBSTITUTION	/	14	1
1	Base Fee (includes change to one well)	1	\$725.00	-
	Number of wells included in substitution (2a)			

**TACS** 

Subtract 1 from the number in 3a above: (2b) If only one well this will be 0

Multiply line 2b by \$350 and enter » » » » » » » » » » » » » » »

Add entries on lines 1 through 2 above » » » » Fee for Substitution:

2

2

# Part 4 of 5 – Applicant Information and Signature

Applicant Information				RECEIVED BY O
APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Don & Lois Hough			541-432-2641	FAX NO MAR 0 9,2017
ADDRESS 86201 Bicentenial Ln				FAX NO. WAN U 3,2011
CITY	STATE	ZIP	E-MAIL	CALEM OD
Jospeh	OR	97846		SALEM, OR
	DDRESS, O	CONSENT IS G	IVEN TO RECEIVE ALL (	CORRESPONDENCE FROM THE
DEPARTMENT ELECTRONICA				
	ent is auti	norized to repr		matters relating to this application
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
ADDRESS				rax no.
CITY	STATE	ZIP	E-MAIL	
				CORRESPONDENCE FROM THE
DEPARTMENT ELECTRONICA	ALLY, CO	PIES OF THE	FINAL ORDER DOCUME	NTS WILL ALSO BE MAILED.
	1		40 4 0.4 .4 0	ansfer application, and why:
Check this box if this pr	oject is f	ully or partia		
Reinvestment Act. (Fed	eral stim	ulus dollars)		
<ul> <li>By signing this application, I Department approval of the tauthorized to pursue the transfer I affirm the applicant is a muname of the municipality or a I affirm the applicant is an encondemnation the property to supporting documentation.</li> </ul>	ransfer, I value of the second resident the second residence of the second res	d that, upon recovill be required attified in OAR of the state of the	to provide landownership in 590-380-4010(5); <b>OR</b> RS 540.510(3)(b) and that the condemn property and is according to the condemn property according to	information and evidence that I am the right is in the quiring by
the Department for publication	of a notice for two controls the followation c	ce in a newspa consecutive we owing newspa atained in this	nper with general circula ceks. If more than one q per: Wallowa Cu	l accurate.
Applicant signature	gn	Print Name	YI HOUGH 3 (and Title if applicable)	}_ <u>6-</u> / 6 Date
				portion thereof, proposed for 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.

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Permanent Transfer Application Form – Page 5 of 5

		•		
The applicant is resp continue to be sent to the sent to t		-	f change(s). Not	ices and correspondence should
				ne proposed change(s) after the ould be sent to this landowner.
_			-	e for completion of change(s). ndowner and the applicant.
At this time, are the lands in	this tran	sfer application	in the process of	being sold? 🗌 Yes 🖾 No
	. If you d	lo not know wh	o the new landov	nplete the receiving landowner oner will be, then a request for
If a property sells, the counless a sale agreement <a href="http://www.oregon.gov/">http://www.oregon.gov/</a>	or other o	locument states	otherwise. For r	
RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
СПТУ	STATE	ZIP	E-MAIL	RECEIVED BY OWR
Check here if any of the	water rig	1.4 1 6		SALEM, OR
an irrigation or other wa  IRRIGATION DISTRICT NAME  Silver Lake Ditch	_	et. ( <b>Tip</b> : Compl	ete and attach Su	pplemental Form D.)
IRRIGATION DISTRICT NAME Silver Lake Ditch CITY	_	ADDRI 63329 STATE	ete and attach Su ESS Tenderfoot Valley	pplemental Form D.)  Rd  ZIP
IRRIGATION DISTRICT NAME Silver Lake Ditch CITY Joseph	ter distric	ADDRI 63329 STATE OR	ete and attach Su ESS Tenderfoot Valley under a water se atity.	pplemental Form D.)
IRRIGATION DISTRICT NAME Silver Lake Ditch CITY Joseph  Check here if water for a for stored water with a f	ter distric	ADDRI 63329 STATE OR erights supplied ency or other en	ete and attach Suess  Tenderfoot Valley  under a water seatity.	Rd  ZIP 97846
IRRIGATION DISTRICT NAME Silver Lake Ditch CITY Joseph Check here if water for a for stored water with a f ENTITY NAME CITY To meet State Land Use Co.	any of the dederal ago	ADDRI 63329 STATE OR  rights supplied ency or other ency o	ete and attach Suess  Tenderfoot Valley  under a water sentity.  Ess  you must list all	Perplemental Form D.)  Rd  ZIP  97846  rvice agreement or other contract
IRRIGATION DISTRICT NAME Silver Lake Ditch CITY Joseph Check here if water for a for stored water with a f ENTITY NAME CITY To meet State Land Use Cocorporation, or tribal government.	any of the dederal ago	ADDRI STATE  Requirements, thin whose juris	ete and attach Suess  Tenderfoot Valley  under a water sentity.  ESS  you must list all esdiction water wi	rvice agreement or other contract    ZIP   97846     ZIP
IRRIGATION DISTRICT NAME Silver Lake Ditch CITY Joseph Check here if water for a for stored water with a f ENTITY NAME CITY To meet State Land Use Cocorporation, or tribal govern	any of the dederal ago	ADDRI STATE  Requirements, thin whose juris	ete and attach Sures et an	rvice agreement or other contract    ZIP   97846     ZIP
IRRIGATION DISTRICT NAME Silver Lake Ditch CITY Joseph  Check here if water for a for stored water with a f  ENTITY NAME CITY  To meet State Land Use Cocorporation, or tribal govern  ENTITY NAME Wallowa County Planning CITY	any of the dederal ago	ADDRI 63329 STATE OR  ADDRI 63329 STATE OR  ADDRI ADDRI 63329 STATE OR  ADDRI 6101 S STATE OR  STATE OR  ADDRI 6101 S STATE	ete and attach Suress  Tenderfoot Valley  under a water sentity.  ESS  you must list all esdiction water witess river street	rvice agreement or other contract    ZIP   97846     ZIP     2IP     County, city, municipal

## **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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	se use a separate and paste addit						_				ions on page 6, to he form.
							ATE#				RECEIVED BY OWRE
Descri	iption of Water	Delivery Sy	ste	m							MAR 0 9 2017
Systen	n capacity:	cubic fee	t pe	r sec	ond (	cfs)	OR				
		gallons p	er n	ninut	e (gp	m)					SALEM, OR
five ye and ap able 1. Le	ears. Include into	formation on the authorized	the ed p	pum place	ps, constant of us	anal: se	s, pipe  of Di	lines a	on (PC	inklers  D) or	ome time within the last used to divert, convey  Appropriation (POA)
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)	If POA, OWRD Well Log ID# (or Well ID Twp Rng Sec 1/4 1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)						
POD1	□ Authorized     □ Proposed		3	s	45	E	5	NE	NW	lot4	870' SOUTH AND 1100' WEST FROM THE N1/4 CORNER OF SECTION5
	☐ Authorized ☐ Proposed										
	☐ Authorized ☐ Proposed										
	☐ Authorized ☐ Proposed										
											vided in parentheses):
							_				Primary Use (S to P)
	Character of	` '					∐ F	Point o	f App	ropriati	on/Well (POA)
	Point of Dive	ersion (POD)						Additio	onal Po	oint of	Appropriation (APOA)
	Additional Po	oint of Diver	sion	(AP	OD)			Substit	ution (	(SUB)	
	Surface Water POA (SW/G)		oun	d Wa	ater			Govern	ment.	Action	POD (GOV)
Will a	ll of the propos	ed changes a	affe	ct th	e ent	ire v	water	right?			
Yes	Complete on "CODES" lis									ible 2 o	on the next page. Use the
⊠ No					•					ght to b	e changed.

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

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

### Table 2. Description of Changes to Water Right Certificate # 57784

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 CHANGES  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.																					
Tv	vp	Rn	g	Sec	1/4	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		"CODES" from previous		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		
2	S	45	E	24	NW	SE	7600		11.5	IRR	POD1	1977	POU	2	S	45	E	24	SE	sw	7600		9.9	IRR	POD1	1977		
9.7	**	**	"	**	NE	sw	7600		0.5	IRR	POD1	1977	POU	"	**	**	**	**	NW	SE	7600		1.3	IRR	POD1	1977		
																						R	ECEI	VED BY (	)WRD			
																								R 0 9 2017				
_																							SA	LEM, OR				
																								1				
						TOTA	L ACI	DEC.	12.0		The Karamananan			_						FOTA	L ACF	EC.	12.0 *					

Additional remarks: David Bates, Dist 7 Watermaster, Assisted with this application.

For Pl	ace of Use	or Characte	r of Use	Changes						•
		water right co or the "to" la				s or ground	water regis	strations as	ssociated	
If Y	ES, list the	certificate, w	ater use	permit, or	r ground v	water regist	ration num	bers:		
a pri to a g	mary right	S 540.510, as proposed for er registration	transfer	must be i	ncluded i	n the transf	er or be car	ncelled. A	ny change	
For Su	bstitution	(ground watering irrigation)	er supple	emental in	rigation w	rill be subst	ituted for s			D BY OWRD
		applemental			te #					
Surfa	ace water p	rimary Certif	icate #_	•					MAR	<b>9</b> ,2017
For a	change fro	m Suppleme	ntal Irr	igation U	se to Prin	nary Irrig	ation Use		SALE	M, OR
Ident	ify the prin	nary certifica	te to be	cancelled.	Certifica	ite #				, 0. 1
For a	change in 1	point(s) of a	propri	ation (wel	l(s)) or a	dditional p	oint(s) of a	ppropria	tion:	
AND	with the co Tip: You i http://apps	a) are attached orresponding may search for s.wrd.state.or	well(s)	in Table 1 ogs on the	above an Departm	d on the ac ent's web p	companyin			
	Describe to have a well requested	he construction of the log. For printer printe	oposed i	wells not y	et construe. The De	ucted or but partment re	ilt, provide ecommends	"a best est you const	timate" for a	each d well
Any well accompa application well(s) w	l(s) in this langing application until it is vill access to	on of Point(s listing must be ication map. s received. The he same sour om approvin	e clearly Failure he inforce aquif	tied to co to provide mation is er as the a	the infornecessary uthorized	for the depoint(s) of	l delay the partment to appropriat	assess whi ion (POA)	of your tran	nsfer oposed
Proposed or Authorized POA Name or Number	Is well already built? ((Yes or No)	If an existing well: OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less han full rate of water right