

1330 Teakwood Avenue Coos Bay, Oregon 97420 Ph: (541) 269-0732

Fx: (541) 269-0732 Fx: (541) 269-2044 www.dyerpart.com

			TRA	N S	MITTAL		
			IKA		MIT I AL		
DATE		A	pril 4, 2017				
то			ate Fitzgerald		COPY TO		RECEIVED
10			Vater Right Services Divisi	ion	COPTIO		
			dministrator	.011			APR 05 2017
			Vater Rights Services Divis	sion			ATT 00 2017
			regon Water Resources De		ent		OWRD
		7	25 Summer St. NE, Suite	A			OVVID
		S	alem, Oregon 97301				
				7	24		
FROM		В	arbara Negherbon, PE, CV	VRE \	210		
PROJECT	NAME		andon Water Rights Appli				
PROJECT	NO.	1	01.84				
INCLUDE	D		Agreement		Product submittal data		Specifications
			Copy of letter		Supplies		CD / Diskette
			Plans / Drawings		Catalog cuts	$\boxtimes$	Other
CODIES	DATE		DESCRIPTION				
COPIES 1	DATE 4/4/17		DESCRIPTION Cover Letter for Transfe	er Anni	ication		
1	3/27/17	,	Application for Perman				
1	3/20/17		Check No. 65170 for \$1		_		
1	3/27/17	7			ority Estimate Application	n (for 7	Transfer)
1	3/20/17	7	Check No. 65171 for \$1				
1	4/4/17		Cover Letter for Storag				
1	3/27/17				ore Water in a Reservoir	r	
1	3/20/17	7	Check No. 65172 for \$1				
1	4/4/17		Cover Letter for Surfac				
1	3/27/17		Application for a Perm				
1	3/20/17		Check No. 65173 for \$2	2,330 (1	for Surface water)		
TRANSM	ITTED	П	For your signature		For your use	П	For bids due
THATTOM			For Approval		As requested		Checked as noted
		$\boxtimes$	For review and comment		One copy retained		Prints returned after loan to us
COMMEN	ITS						
Kate,							
Please s	ee the a	ttac	hed cover letters for	the th	ree water right app	licati	ons.
The Trai	nsfer ap	plic	ation should be broug	ght to	Kelly Starnes and I	Dwig	ht French's attention.
	-	-				_	the French's attention.

Thanks, Barbara

Please let me know if you have any questions or comments.



April 4, 2017

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

Attn: Dwight French

Water Right Services Division Administrator

Kelly Starnes

Transfer Program Advisor

Kate Fitzgerald

Reimbursement Authority

Re: City of Bandon

Application for Permanent Water Right Transfer for Certificate Number 92293 / Geiger Creek

Project No. 101.84

Dear Dwight, Kelly, and Kate:

The City of Bandon is submitting an application to transfer the type of water use from domestic to municipal for Certificate Number 92293. The existing point of diversion is on main Ferry Creek and is currently used to divert water for use at the water treatment plant. This water right will be used to divert water to the off-channel reservoir but will not increasing the diversion amount.

This water right is associated with the 100 acre-foot off-channel reservoir project that the City is working on and is being submitted in conjunction with the following applications:

a. Application for a Permit to Store Water in a Reservoir (Standard Review) for the proposed 100 acre-foot Off-Channel Reservoir

b. Application for a Permit to Use Surface Water

Attached is an application for Transfer Reimbursement Authority. The City wishes to expedite the process reviewing this application.

Sincerely,

Barbara Negherbon, PE

Project Manager

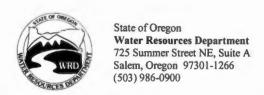
cc: Robert Mawson

Richard Anderson

1330 TEAKWOOD AVENUE COOS BAY, OREGON 97420 TELEPHONE: 541-269-0732 FAX: 541-269-2044 WEB: www.dyerpart.com RECEIVED

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# 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.

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Check all iter	ms included with this application. $(N/A = Not Applicable)$	APR 05 2017
$\boxtimes \checkmark$	Part 1 - Completed Minimum Requirements Checklist.	OWRD
$\boxtimes$ $\checkmark$	Part 2 – Completed Transfer Application Map Checklist.	OWND
	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_ealculator. If you have q Customer Service at (503) 986-0801.	
	or a Complex of Application	
	Part 5 – Information about Water Rights to be Transferred: <b>How many</b> be transferred? 1 List them here: 92293  Please include a separate Part 5 for each water right. (See instructions of	
	Attachments:	
$\boxtimes \checkmark$	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 o right is on.)	wn the land the water
□ N/A	Supplemental Form D – For water rights served by or issued in the nan 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 land 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 struuse of water is for irrigation only, and d) the use is located within an inexclusive farm use zone.	nly on federal lands or actural 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 diversion 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



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

OV	MHD	he 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 <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> . 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.
$\boxtimes$	V	Permanent quality printed with dark ink on good quality paper.
		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, $11 \times 17$ inches, or up to $30 \times 30$ inches. For $30 \times 30$ inch maps, one extra copy is required.
$\boxtimes$		A north arrow, a legend, and scale.
	0V/	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, 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.
		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.
$\boxtimes$	/	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.
$\boxtimes$	V	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 $-42.53764^{\circ}$ ).

	FEE 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 cts)  Types of change proposed:	1	\$1,000
	☐ Place of Use ☐ Character of Use ☐ Point of Diversion/Appropriation ☐ Point of Diversion/Appropriation		
	Number of above boxes checked = $\frac{1}{2a}$		
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » »	2	0
3	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  Multiply line 3b by \$450 and enter » » » » » » » » » » » » » » » » »	3	0
4	Do you propose to add or change a well, or change from a surface water POD to a well?  No: enter 0 »» » » » » » » » » » » » » » » » » »	4	0
5	Do you propose to change the place of use or character of use?  No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »	5	300
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	1,300
	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 benefit to fish and wildlife habitat?  If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » Transfer Fee:	8	1,300

\*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 $\underline{0}$ (2a) Subtract 1 from the number in 3a above: $\underline{0}$ (2b) If only one well this will be 0		
2	Multiply line 2b by \$350 and enter » » » » » » » » » » » » » »	2	0
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 NA	AME		PHONE NO.	ADDITIONAL CONTACT NO.
Robert Mawson/City	of Bandon		541-347-2437	
ADDRESS				FAX NO.
P.O. Box 67				541-347-1415
CITY	STATE	ZIP	E-MAIL	
Bandon	Oregon	97411	citymanager@ci.b	oandon.or.us
BY PROVIDING AN E	-MAIL ADDRESS, C	CONSENT IS G	IVEN TO RECEIVE ALL	CORRESPONDENCE FROM THE
DEPARTMENT ELEC	TRONICALLY. CO	PIES OF THE	FINAL ORDER DOCUME	NTS WILL ALSO BE MAILED.

AGENT/BUSINESS NAME Barbara Negherbon			PHONE NO. <b>541-269-0732</b>	ADDITIONAL CONTACT NO.
ADDRESS 1330 Teakwood Ave.				FAX NO. 541-269-2044
СПУ	STATE	ZIP	E-MAIL	
Coos Bay	Oregon	97420	bnegherbon@dye	
DEPARTMENT ELECTRONICA				CORRESPONDENCE FROM THE ENTS WILL ALSO BE MAILED.
Explain in your own words Change character of use from			_	ransfer application, and why:
	_	-	-	ousehold purposes, domestic cre or noncommercial garden
The term "municipal use" municipal corporation for				the water service system of a systems.
The City of Bandon's water been municipal use sinc				ipal use and has generally
If you need additional space, con-	tinue on a s	eparate piece o	f paper and attach to the a	pplication as "Attachment 1".
Check this box if this pr Reinvestment Act. (Fed	•	- 1	ly funded by the Ame	erican Recovery and
<ul> <li>□ By signing this application, I Department approval of the t authorized to pursue the trans</li> <li>□ I affirm the applicant is a mu name of the municipality or a I affirm the applicant is an encondemnation the property to supporting documentation.</li> </ul>	ransfer, I wasfer as iden nicipality a predecess atity with the	that, upon receil that, upon receil be required tiffied in OAR (s defined in OR or; OR e authority to c	to provide landownership 190-380-4010(5); <b>OR</b> LS 540.510(3)(b) and that ondemn property and is a	information and evidence that I am the right is in the cquiring by

to right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper:

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

Robert Mawson, City Manager Print Name (and Title if applicable)

APR 05 2017





Applicant signature

and/or e-mail addre	d? XYe	es	If NO, i he applic	include signatures ant's) or attach aff	of all de fidavits e	on thereof, proposed for edded landowners (and mailing of consent (and mailing and/or r right(s) were conveyed.								
Check the following boxes t	hat apply	·:												
The applicant is resp continue to be sent to		_	etion of	change(s). Not	tices ar	nd correspondence should								
	The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.													
						ompletion of change(s). ner and the applicant.								
At this time, are the lands in	ı this tran	sfer appli	ication i	n the process of	f being	sold?  Yes No								
information table below assignment will have to	. If you of be filed f	do not kno for at a lat	ow who ter date.	the new landov	wner w	•								
If a property sells, the counless a sale agreement <a href="http://www.oregon.gov/">http://www.oregon.gov/</a>	or other o	document	states c	therwise. For i	more ir									
RECEIVING LANDOWNER NAME				PHONE NO.		ADDITIONAL CONTACT NO.								
ADDRESS						FAX NO. RECEIV								
СІТУ	STATE	ZIP		E-MAIL		APR 0 5 20								
Describe any special owner.  Check here if any of the an irrigation or other was	water rig	ghts propo	osed for	transfer are or v		OWRI located within or served by								
IRRIGATION DISTRICT NAME			ADDRES	SS										
СПҮ			STATE			ZIP								
for stored water with a f	-	_	ther ent	ity.	ervice a	agreement or other contrac								
ENTITY NAME			ADDRES	SS										
СІТҮ			STATE			ZIP								
To meet State Land Use Co corporation, or tribal govern			se juriso	diction water wi										
ENTITY NAME  City of Bandon			P.O. B											
CITY Bandon			STATE Oregon			ZIP 97411								
ENTITY NAME			ADDRES			//711								
CITY			STATE			ZIP								

### **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 RECEIVED

#### Microsoft Word 2003

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Unlock the document by one of the following:

**OWRD** 

- 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.

Part 5 of 5 - Water Right Information

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 # 92293**

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Description	of	Water	<b>Delivery</b>	System
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System capacity: 1.6 cubic feet per second (cfs) OR

\_\_\_\_ gallons per minute (gpm)

OWRD

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. **See attached** 

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	1/4 1/4		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
1	Authorized Proposed		28	S	14	w	29	NW	SE	1100	1193.45 feet North and 2709.05 feet East from SW corner, Section 29
	Authorized Proposed							-			
	Authorized Proposed										
	☐ Authorized ☐ Proposed										

Check	all type(s) of c	hange(s) pro	posed be	elow (ch	ange '	"CODES" ar	re provi	ded in par	entheses):
	Place of Use	(POU)		[		Supplemental	Use to !	Primary Us	e (S to P)
$\boxtimes$	Character of	Use (USE)		[		Point of Appro	opriation	n/Well (PO	A)
	Point of Dive	ersion (POD)		[		Additional Po	int of A	ppropriatio	n (APOA)
	Additional P	oint of Divers	sion (AP	OD) [		Substitution (S	SUB)		
	Surface Water POA (SW/G	er POD to Gro W)	ound Wa	ter [		Government A	Action P	OD (GOV)	)
Will all	of the propos	ed changes a	ffect the	entire v	vater	right?			
X Yes	1	ly the Proposited above to				section of Talehanges.	ble 2 on	the next pa	age. Use the
☐ No	Complete all	of Table 2 to	describe	the port	ion of	the water rig	ht to be	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 at

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#### Table 2. Description of Changes to Water Right Certificate # 92293

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated w 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.						NGES	Proposed Changes (see			The	e lis	ting	PR as it		OWRD											
Tw	γp	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 page)	Tv	vp	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
														2	S	9	E	2	sw	NW	500		5.0		POD #6	1901
28	S	14	w	19	NW	sw	N/A		16.35	Domestic	POD #1	1916	POD	28	s	14	w	19	NW	sw	N/A		16.35	Municipal	POD #1	1916
28	S	14	w	19	NE	sw	N/A		40.00	Domestic	POD #1	1916		28	S	14	w	19	NE	sw	N/A		40.00	Municipal	POD #1	1916
28	S	14	w	19	NW	SE	N/A		40.00	Domestic	POD #1	1916		28	s	14	w	19	NW	SE	N/A		40.00	Municipal	POD #1	1916
28	S	14	w	19	NE	SE	N/A		40.00	Domestic	POD #1	1916		28	S	14	w	19	NE	SE	N/A		40.00	Municipal	POD #1	1916
28	S	14	w	19	sw	sw	N/A		5.77	Domestic	POD #1	1916		28	S	14	w	19	sw	sw	N/A		5.77	Municipal	POD #1	1916
28	s	14	w	19	SE	sw	N/A		39.74	Domestic	POD #1	1916		28	S	14	w	19	SE	sw	N/A		39.74	Municipal	POD #1	1916
28	S	14	w	19	sw	SE	N/A		40.00	Domestic	POD #1	1916		28	S	14	w	19	sw	SE	N/A		40.00	Municipal	POD #1	1916
28	S	14	w	19	SE	SE	N/A		40.00	Domestic	POD #1	1916		28	S	14	w	19	SE	SE	N/A		40.00	Municipal	POD #1	1916
28	S	14	w	30	NW	NW	N/A		40.00	Domestic	POD #1	1916		28	S	14	w	30	NW	NW	N/A		40.00	Municipal	POD #1	1916
28	s	14	w	30	NE	NW	N/A		40.00	Domestic	POD #1	1916		28	s	14	w	30	NE	NW	N/A		40.00	Municipal	POD #1	1916
28	S	14	w	30	NW	NE	N/A		40.00	Domestic	POD #1	1916		28	s	14	w	30	NW	NE	N/A		40.00	Municipal	POD #1	1916
28	S	14	w	30	NE	NE	N/A		40.00	Domestic	POD #1	1916		28	s	14	w	30	NE	NE	N/A		40.00	Municipal	POD #1	1916

28	S	14	W	30	sw	NW	N/A	40.00	Domestic	POD #1	1916	28	s	14	w	30	sw	NW	N/A	40.00	Municipal	POD #1	1916
28	S	14	w	30	sw	NW	N/A	40.00	Domestic	POD #1	1916	28	s	14	w	30	sw	NW	N/A	40.00	Municipal	POD #1	1916
28	S	14	w	30	SE	NW	N/A	40.00	Domestic	POD #1	1916	28	S	14	w	30	SE	NW	N/A	40.00	Municipal	POD #1	1916
28	S	14	w	30	sw	NE	N/A	40.00	Domestic	POD #1	1916	28	S	14	w	30	sw	NE	N/A	40.00	Municipal	POD #1	1916
28	S	14	w	30	SE	NE	N/A	40.00	Domestic	POD #1	1916	28	s	14	w	30	SE	NE	N/A	40.00	Municipal	POD #1	1916
28	S	14	w	30	NW	sw	N/A	40.00	Domestic	POD #1	1916	28	s	14	w	30	NW	sw	N/A	40.00	Municipal	POD #1	1916
28	S	14	w	30	NE	sw	N/A	40.00	Domestic	POD #1	1916	28	S	14	w	30	NE	sw	N/A	40.00	Municipal	POD #1	1916
28	S	14	w	30	NW	SE	N/A	40.00	Domestic	POD #1	1916	28	S	14	w	30	NW	SE	N/A	40.00	Municipal	POD #1	1916
28	S	14	w	30	NE	SE	N/A	40.98	Domestic	POD #1	1916	28	s	14	w	30	NE	SE	N/A	40.98	Municipal	POD #1	1916
28	S	14	w	30	sw	sw	N/A	38.71	Domestic	POD #1	1916	28	S	14	w	30	sw	sw	N/A	38.71	Municipal	POD #1	1916
28	S	14	w	30	SE	sw	N/A	39.59	Domestic	POD #1	1916	28	s	14	w	30	SE	sw	N/A	39.59	Municipal	POD #1	1916
28	S	14	w	30	sw	SE	N/A	38.60	Domestic	POD #1	1916	28	S	14	w	30	sw	SE	N/A	38.60	Municipal	POD #1	1916
28	s	14	w	30	SE	SE	N/A	37.28	Domestic	POD #1	1916	28	S	14	w	30	SE	SE	N/A	37.28	Municipal	POD #1	1916
28	S	14	w	31	NW	NW	N/A	15.58	Domestic	POD #1	1916	28	S	14	w	31	NW	NW	N/A	15.58	Municipal	POD #1	1916
28	S	14	w	31	NE	NW	N/A	21.02	Domestic	POD #1	1916	28	S	14	w	31	NE	NW	N/A	21.02	Municipal	POD #1	1916
28	S	14	w	31	SE	NW	N/A	5.91	Domestic	POD #1	1916	28	S	14	w	31	SE	NW	N/A	5.91	Municipal	POD #1	1916
28 5	S	15	w	25	NE	NW	N/A	20.59	Domestic	POD #1	1916	28	S	15	w	25	NE	NW	N/A	20.59	Municipal	POD #1	1916
28 5	S	15	w	25	NW	NE	N/A	40.00	Domestic	POD #1	1916	28	S	15	w	25	NW	NE	N/A	40.00	Municipal	POD #1	1916
28 5	S	15	w	25	NE	NE	N/A	40.00	Domestic	POD #1	1916	28	s	15	w	25	NE	NE	N/A	40.00	Municipal	POD #1	1916
28 5	5 1	15	w	25	sw	NW	N/A	7.94	Domesti	1	1916	28	S	15	w	25	sw	NW	N/A	7.94	Municipal	POD #1	1916

1632

28 5	S	15	w	25	SE	NW	N/A	40.00	Domestic	POD #1	1916	28	S	15	w	25	SE	NW	N/A	40.00	Municipal	POD #1	1916
28 5	s	15	w	25	sw	NE	N/A	40.00	Domestic	POD #1	1916	28	S	15	w	25	sw	NE	N/A	40.00	Municipal	POD #1	1916
28 5	S	15	w	25	SE	NE	N/A	40.00	Domestic	POD #1	1916	28	S	15	w	25	SE	NE	N/A	40.00	Municipal	POD #1	1916
28 5	S	15	w	25	NW	sw	N/A	35.28	Domestic	POD #1	1916	28	S	15	w	25	NW	sw	N/A	35.28	Municipal	POD #1	1916
28 5	S	15	w	25	NE	sw	N/A	40.00	Domestic	POD #1	1916	28	S	15	w	25	NE	sw	N/A	40.00	Municipal	POD #1	1916
28 8	S	15	w	25	NW	SE	N/A	40.00	Domestic	POD #1	1916	28	S	15	w	25	NW	SE	N/A	40.00	Municipal	POD #1	1916
28 5	S	15	w	25	NE	SE	N/A	40.00	Domestic	POD #1	1916	28	S	15	w	25	NE	SE	N/A	40.00	Municipal	POD #1	1916
28 5	S	15	w	25	sw	sw	N/A	52.63	Domestic	POD #1	1916	28	S	15	w	25	sw	sw	N/A	52.63	Municipal	POD #1	1916
28 5	S	15	w	25	SE	sw	N/A	40.00	Domestic	POD #1	1916	28	S	15	w	25	SE	sw	N/A	40.00	Municipal	POD #1	1916
28 5	5	15	w	25	sw	SE	N/A	37.23	Domestic	POD #1	1916	28	S	15	w	25	sw	SE	N/A	37.23	Municipal	POD #1	1916
28 5	S	15	w	25	SE	SE	N/A	37.42	Domestic	POD #1	1916	28	S	15	w	25	SE	SE	N/A	37.42	Municipal	POD #1	1916
28 5	S	15	w	36	NW	NW	N/A	39.08	Domestic	POD #1	1916	28	S	15	w	36	NW	NW	N/A	39.08	Municipal	POD #1	1916
28 5	S	15	w	36	NE	MW	N/A	24.26	Domestic	POD #1	1916	28	S	15	w	36	NE	MW	N/A	24.26	Municipal	POD #1	1916
28 5	5	15	w	36	NE	NE	N/A	11.26	Domestic	POD #1	1916	28	s	15	w	36	NE	NE	N/A	11.26	Municipal	POD #1	1916
28 5	5	15	w	36	sw	NW	N/A	43.03	Domestic	POD #1	1916	28	S	15	w	36	sw	NW	N/A	43.03	Municipal	POD #1	1916
28 5	5	15	w	36	SE	NW	N/A	1.01	Domestic	POD #1	1916	28	S	15	w	36	SE	NW	N/A	1.01	Municipal	POD #1	1916
28 5	5	15	w	36	NW	sw	N/A	41.87	Domestic	POD #1	1916	28	S	15	w	36	NW	sw	N/A	41.87	Municipal	POD #1	1916
28 S	3	15	w	36	NE	sw	N/A	29.19	Domestic	POD #1	1916	28	s	15	w	36	NE	sw	N/A	29.19	Municipal	POD #1	1916
28 5	5	15	w	36	NW	SE	N/A	20.38	Domestic	POD #1	1916	28	S	15	w	36	NW	SE	N/A	20.38	Municipal	POD #1	1916
28 S	5	15	w	36	NE	SE	N/A	17.91			1	28	S	15	w	36	NE	SE	N/A	17.91	Municipal	POD #1	1916

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Permanent Trans

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28	S	15	w	36	sw	sw	N/A	33.73	Domestic	POD #1	1916	28	S	15	w	36	sw	sw	N/A	33.73	Municipal	POD #1	1916
28	S	15	w	36	SE	sw	N/A	50.00	Domestic	POD #1	1916	28	S	15	w	36	SE	sw	N/A	50.00	Municipal	POD #1	1916
28	S	15	w	36	sw	SE	N/A	43.60	Domestic	POD #1	1916	28	S	15	w	36	sw	SE	N/A	43.60	Municipal	POD #1	1916
28	S	15	w	36	SE	SE	N/A	36.57	Domestic	POD #1	1916	28	S	15	w	36	SE	SE	N/A	36.57	Municipal	POD #1	1916
29	S	15	w	1	NW	NW	N/A	25.85	Domestic	POD #1	1916	29	S	15	w	1	NW	NW	N/A	25.85	Municipal	POD #1	1916
29	S	15	w	1	NE	NW	N/A	34.77	Domestic	POD #1	1916	29	S	15	w	1	NE	NW	N/A	34.77	Municipal	POD #1	1916
29	S	15	w	1	NW	NE	N/A	24.85	Domestic	POD #1	1916	29	S	15	w	1	NW	NE	N/A	24.85	Municipal	POD #1	1916
29	S	15	w	1	sw	NW	N/A	31.71	Domestic	POD #1	1916	29	S	15	w	1	sw	NW	N/A	31.71	Municipal	POD #1	1916
29	S	15	w	1	SE	NW	N/A	33.60	Domestic	POD #1	1916	29	S	15	w	1	SE	NW	N/A	33.60	Municipal	POD #1	1916
29	s	15	w	1	노 써	NE	N/A	24.95	Domestic	POD #1	1916	29	S	15	w	1	sw	NE	N/A	24.95	Municipal	POD #1	1916
					7	OTA	L ACRES:										,	ТОТА	L ACRES:				

Additional remarks: \_\_\_\_\_.

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								Certi	ficate #	
For Pla	ce of Use	or Characte	r of Use	Changes						
		water right ce or the "to" la			-	or ground	water regis	strations as	sociated	
If YE <b>R368</b>		certificate, wa	iter use p	ermit, or	ground w	ater registr	ation numb	ers: <u>9755.</u>	, S27233, S2	27232,
a prir	nary right pround water	S 540.510, an proposed for registration	transfer 1	must be in	ncluded in	the transfe	er or be can	celled. A	ny change	
For Sul	bstitution	(ground wate irrigation)	r suppler	nental irri	igation w	ill be subst	ituted for si	-		
Grour	nd water su	,	ermit or	Certificat	e # N/A:			RE	ECEIV	/ED
	Ground water supplemental Permit or Certificate # N/A; Surface water primary Certificate # N/A.									0.47
For a c	hange froi	m Suppleme	ntal Irris	gation Us	e to Prin	narv Irriga	tion Use		APR 05 2	
		nary certificat				•			OWR	D
For a c	hange in p	oint(s) of ap	propriat	tion (well	(s)) or ad	ditional p	oint(s) of a	ppropriat	ion:	
,	with the co <b>Tip</b> : You r	are attached orresponding may search fo wrd.state.or.	well(s) in r well log	Table 1 ags on the 1	above and Departme	on the accent's web p	companying	•		ssociated
AND	OR									
1	have a well requested i	ne construction log. For properties of the properties of the logist, or certain Table 3.	oposed w lement in	<i>ells not ye</i> the table	et constru . The Dej	oartment re	ilt, provide commends	"a best est you consu	imate" for each	each d well
Any well(accomparapplication well(s) with	(s) in this land the sying application on the sylventrians applied to the sylventrians	on of Point(s isting must be cation map. s received. The he same source om approving	e clearly Failure to he infornce aquife	tied to control provide nation is nation is nation is nation is not	rrespondi the inform necessary uthorized	nation will for the dep point(s) of	delay the partment to appropriate	orocessing assess who 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 (and, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less han full rate of water right

Revised	7/1/2013

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# Attachment for Permanent Transfer Application Form RECEIVED

City of Bandon

APR 05 2017

Certificate # 92293

**OWRD** 

Describe the current water delivery system or the system that was in place at sometime 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.

Water is diverted at POD #1 by use of two 20 HP pumps with 350 gpm capacity and one 50 HP pump with 700 gpm capacity. The pumps are submersible turbines with 8-inch intake and discharge sizes and are manufactured by Franklin.

Water is conveyed from this pump station to Middle Pond through 12-inch ductile iron raw water pipe, which is used to settle out sediment. From there raw water is pumped to the water treatment plant, which has a total capacity of 2.0 MG.

From the water treatment plant, treated water is conveyed to the City through a series of 12-inch transmission mains, and 8-inch, 6-inch, and 4-inch service mains. The following is a summary of the service mains:

<u>Size</u>	approximate length	type of pipe
12-inch	20,000 feet	PVC, DI, AC
10-inch	19,500 feet	PVC, DI, AC
8-inch	10,000 feet	PVC, DI, AC
6-inch	9,000 feet	PVC, DI, AC