

September 19, 2017

Shonee D. Langford T: 503-540-4261 slangford@schwabe.com

Kelly Starnes Transfer Program Analyst Oregon Water Resources Department 725 Summer Street NE Salem OR 97301

RE: Application for Permit Amendment, Permit S-54385

Dear Kelly:

Enclosed for filing on behalf of St. Hilaire Brothers Hermiston Farm, LLC is an Application for Permit Amendment together with supporting documentation. Also enclosed is a check in the amount of \$3100.00 to cover the application fee. I will serve as the applicant's agent.

Please let me know if you have any questions or if the Department needs additional information to complete its review.

Best regards,

Shonee D. Langford

SDL Enclosure

cc:

(all w/encl./via email)

Carl St. Hilaire

Paul Wattenburger CWRE, P.E. Ph.D.

PDX\119604\201595\SDL\21504260.1

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State of Oregon
Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900

Application for **Permit Amendment**

Part 1 of 5 - Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

Che	ck all it	ems included with this application. $(N/A = Not)$	Applicable)	RECEIVED BY OWND
X		Part 1 - Completed Minimum Requirements Che	cklist.	SEP 2 1 2017
\boxtimes	V	Part 2 – Completed Application Map Checklist.		
\boxtimes	V	Part 3 – Application Fee, payable by check to the completed Fee Worksheet, page 3. Try the new o http://apps.wrd.state.or.us/apps/misc/wrd_fee_ca/Service at (503) 986-0801.	nline fee calculator at	:
X	V	Part 4 – Completed Applicant Information and Si	gnature.	
		Part 5 – Information about Permits to be Amende them here: <u>S-54385</u> Please include a separate Part 5 for each permit. (_	_
\boxtimes	$\sqrt{}$	Completed Permit Amendment Application Map Water Right Examiner).	(Does not have to be	prepared by a Certified
	N/A N/A	Request for Assignment Form and statutory fee. completed if the applicant is not the permit holder permit; or the landowner of the proposed place of needs to be assigned to the permit (the Request for http://www.oregon.gov/owrd/pubs/docs/forms/reif the applicant is the permit holder of record.	er of record and needs f use is not the permit or Assignment Form is	to be assigned to the holder of record and savailable online at
	⊠ N/A	Affidavit(s) of Consent are required from all perr to the applicant, or other permit holders of record		
	N/A N/A	Land Use Information Form with approval and si stub). Land use form is not required if any of the Water is to be diverted, conveyed, and All of the following apply: a) a change changes, c) the use of water is for irrigan irrigation district or an exclusive fa The proposed changes are all located enclosed in Water Right Application 1	e following apply: d/or used only on fede e in place of use only, gation only, and d) the arm use zone. on the property review	ral lands. b) no structural use is located within
	⊠ N/A	Water Well Report/Well Log for changes in point point(s) of appropriation.	t(s) of appropriation (well(s)) or additional
		(For S WE ARE RETURNING YOUR APPLICATION Application fee not enclosed insufficient Land Use Form not enclosed or incomplete	Map not included Assignment Form Part is incomple	or incomplete and fee not enclosed insufficient

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

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does <u>not</u> have to be presented by OWRD Certified Water Right Examiner. Check all boxes that apply.

			SEP 21 2017
	N/A	If more than three permits are involved, separate maps for each permit.	
\boxtimes		Permanent quality printed with dark ink on good quality paper.	SALEM, OR
\boxtimes		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, 11 x 17 inches, or u inches. For 30 x 30 inch maps, one extra copy is required.	ip to 30 x 30
\boxtimes	V	A north arrow, a legend, and scale.	
		The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$, $1 \text{ inch} = 1,320 \text{ feet}$, the scale of assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$, or a scale that happroved by the Department.	•
\boxtimes_{ι}		Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized purvey lines.	oublic land
\boxtimes	V	Tax lot boundaries (property lines) are required. Tax lot numbers are recommendation	nded.
\boxtimes	V	Major physical features including rivers and creeks showing direction of flow, l reservoirs, roads, and railroads.	akes and
\boxtimes	V	Major water delivery system features from the point(s) of diversion/appropriation main pipelines, canals, and ditches.	on such as
\boxtimes	V	Existing place of use that includes separate hachuring for each water use permit date, and use including number of acres in each quarter-quarter section, government in each quarter-quarter section as projected within government lots, donation la other recognized public land survey subdivisions. If less than the entirety of the being changed, a separate hachuring is needed for the portion of the permit left	ment lot, or nd claims, or e permit is
\boxtimes	□ N/A	If you are proposing a change in place of use, show the proposed place of use whachuring that includes separate hachuring for each permit, priority date, and us number of acres in each quarter-quarter section, government lot, or in each quarter-equarter section as projected within government lots, donation land claims, or other recognished public land survey subdivisions.	se including rter-quarter
⊠*	V	Existing point(s) of diversion or well(s) with distance and bearing or coordinate recognized survey corner. This information can be found in your water use per	
* C(OPY OF (ORIGINAL POD MAP INCLUDED (NO PROPOSED CHANGES TO POD)	
	N/A N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposition and label it clearly with distance and bearing or coordinates. If GPS coare used, latitude-longitude coordinates may be expressed as either degrees-min with at least one digit after the decimal (example $-42^{\circ}32'15.5''$) or degrees-dec five or more digits after the decimal (example -42.53764°).	oordinates nutes-seconds

	FEE WORKSHEET for PERMIT AMENDMENT		
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,000
	Types of change proposed: ☐ RECEIVE ☐ Place of Use	D BY	OWRD
		2 1 20	17
	Number of above boxes checked = $\frac{1}{2}$ (2a)		
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0	EM, O	R
2	Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » »	2	0
	Number of permits included in Permit Amendment 1 (3a)		
	Subtract 1 from the number in 3a: 0 (3b) If only one permit 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?		
	\boxtimes No: enter $0 \gg $		
4	Yes: enter \$350 » » » » » » » » » » » » » » » »	4	0
	Do you propose to change the place of use?		
	No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »	RECEI	VED BY OW
	Yes: enter the cfs for the portions of the permits to be amended (see		
	example below*): 7.58 (5a)	SF	P 2 1 2017
	Subtract 1.0 from the number in 5a above: 6.58 (5b)		
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » » » »		ALEM, OR
5	If 5b is greater than 0, round up to the nearest whole number: 7.0 (5c) and multiply 5c by \$300, then enter on line 5 » » » » » » » » »	5	\$2,100
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$3,100
- 0	Is this permit amendment:	U	\$5,100
	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 » » » » » » » » Permit Amendment Fee:	8	\$3,100

- *Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:
- 1. For irrigation calculate cfs for each permit involved as follows:
 - a. Divide total authorized cfs by total acres in the permit (for S-12345, 1.25 cfs \div 100 ac); then multiply by the number of acres to be changed to get the application cfs (x 45 ac = 0.56 cfs).
 - b. If the water right permit 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 S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of permits on all the land included in the application; however do not count cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land. The fee should be assessed only once for each "on the ground" acre included in the application. (In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

Applicant Information

APPLICANT/BUSINESS N	AME		PHONE NO.	ADDITIONAL CONTACT NO.
St. Hilaire Brothers H	lermiston Farm, LL	541-564-1000	See Agent Contact Info.	
ADDRESS			FAX NO.	
84186 Highway 37				
CITY	STATE	ZIP	E-MAIL	
Hermiston	OR	97838-6393	carl@jshfarms.coi	m
By providing an I	E-MAIL ADDRESS,	CONSENT IS GIVE	EN TO RECEIVE ALL O	CORRESPONDENCE FROM THE
DEPARTMENT ELEC	CTRONICALLY. CO	PIES OF THE FIR	NAL ORDER DOCUME	NTS WILL ALSO BE MAILED.

Agent In	formation – The ag	ent is auth	orized to represent	the applicant in all	matters relating to this application	on.							
AGENT/BU	SINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.								
Shonee L	angford/ Schwabe, Wi	lliamson &	k Wyatt	503-540-4261	503-540-4262								
ADDRESS					FAX NO.								
530 Cente	330 Center St. NE, Suite 730 503-796-2900												
CITY													
Salem	Salem OR 97301 slangford@schwabe.com												
By PRO	VIDING AN E-MAIL A	DDRESS, C	ONSENT IS GIVEN	TO RECEIVE ALL O	CORRESPONDENCE FROM THE								
	By providing an e-mail address, consent is given to receive all correspondence from the Department electronically. Copies of the Final Order documents will also be mailed.												
This per	Explain in your own words what you propose to accomplish with this permit amendment; and why: This permit amendment application proposes to change the place of use of 303 acres of primary irrigation.												
If you nee	If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".												
	ck this box if this pr (Federal stimulus d		ılly or partially fi	unded by the Ame	rican Recovery and Reinvestn	nent							
Is the ap	Hermiston Far	m LLC is	a joint permit ho	lder with Lloyd a	applicant St. Hilaire Brothers nd Lois Piercy. The Piercys have the proposed permit amendmen	ave							
If No	O, include either:												
	A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), OR												
	An affidavit of c	onsent fro	om the permit ho	lder(s) of record th	nat gives permission for the								

I understand that prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit 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: Hermiston Herald

that/the/information contained in this application is true and accurate. Applicant Signatu Applicant Signature cant Signature

applicant to amend the permit.

Carl St. Hilaire, Member Print Name (and Title if applicable)

Lloyd Piercy Print Name (and Title if applicable)

Lois Piercy Print Name (and Title if applicable)

Check one of the following:		
The applicant is responsible for comple continue to be sent to the applicant.	tion of change(s). Notices an	nd correspondence should
∑ The permit holder(s) of record will be refinal order is issued. Copies of notices of record.		
Check the appropriate box, if applicable:		
Check here if any of the permits proposed by an irrigation or other water district.	d for amendment are or will b	be located within or served
IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP
Check here if water for any of the permits so contract for stored water with a federal age		e agreement or other
ENTITY NAME	ADDRESS	
CITY	STATE	ZIP
To meet State Land Use Consistency Requirement, municipal corporation, or tribal government conveyed or used.		
ENTITY NAME Umatilla County	ADDRESS 216 SE 4 th St.	
CITY Pendleton	STATE OR	ZIP 97801
ENTITY NAME	ADDRESS	

STATE

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CITY

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 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 permit being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

PERMIT # S-54385

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Twp	Rng	Sec	<i>1414</i>	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
1			5 N	30 E	8	SW NW		2910 feet North and 120 feet East from SW Corner, Section 8
	Authorized Proposed					RE	CEIVE	D BY OWRD
	Proposed						SEP	2 1 2017
	☐ Authorized☐ Proposed						SAL	EM, OR
_	all of the proposed cha	anges affect	the entired ("to" l	e water uands) sec	SW/G use pe tion o	W) ermit? f Table 2 on		
	No Complete all	of Table 2 to	describe	the portion	on of	the permit to	be cha	nged.
Sec 1/4 Lot, DLC Measured Distances Grown a recognized survey corner)								
	Secondary Seco							
The perm unless th	nitted place of use can be change to non-contigu	e moved only lous lands is	y to lands in furthe	s that are rance of r	contig mitiga	guous to the	authorizervation	efforts undertaken

Revised 7/1/2013

496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

Table 2. Description of Changes to Water Use Permit # S-54385

List the change proposed for the acreage in each ½½. 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.

				ng th	nat ap	pears	on the	e certi IANG	ES	f' lands) FORE PRO		Proposed Changes (see			Th	e li:	sting			appear			nds) SED CHAN	NGES
Tv		Rı		Sec		1/4	Tax Lot	Gvt Lot or	Acres	POD(s) or POA(s) (name or	Priority Date	"CODES" from previous page)			Twp Rn		Sec	1/4	1/4	Tax Lot		Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date
												EXAMPL	E											
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	S	9	E	15	NW	NW	100	1	10.0	POD #5	
"	"	"	"	46	4	44	"	66	EXAMPLE	"		ч	2	S	9	E	15	SW	NW	200		5.0	POD #6	
4	N	30	E	30	NE	NE	3102/ 3201		40.0	1	11/17/ 2006	POU	4	N	30	E	29	NE	NW	3103		12.0	1	11/17/ 2006
4	N	30	E	30	NW	NE	3102		40.0	1	11/17/ 2006	POU	4	N	30	E	29	NE	NW	3102		19.0	1	11/17/ 2006
4	N	30	E	30	sw	NE	3102		40.0	1	11/17/2006	POU	4	N	30	E	29	NW	NW	3102		32.0	1	11/17/ 2006
4	N	30	E	30	SE	NE	3102		31.5	1	11/17/2006	POU	4	N	30	E	29	sw	NW	3102		40.0	1	11/17/ 2006
4	N	30	E	30	NE	SE	3102		31.5	1	11/17/2006	POU	4	N	30	E	29	SE	NW	3102		31.0	1	11/17/ 2006
4	N	30	E	30	NW	SE	3102		40.0	1	11/17/ 2006	POU	4	N	30	E	29	SE	NW	3103		9.0	1	11/17/2006
4	N	30	E	30	sw	SE	3102		40.0	1	11/17/ 2006	POU	4	N	30	E	29	NE	SW	3103		8.0	1	11/17/ 2006
4	N	30	E	30	SE	SE	3102		40.0	1	11/17/ 2006	POU	4	N	30	E	29	NE	SW	3102		32.0	1	11/17/ 2006
													4	N	30	E	29	NW	SW	3102		40.0	1	11/17/ 2006
		·											4	N	30	E	29	sw	SW	3102		15.0	1	11/17/ 2006

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							4	N	30	E	29	sw	sw	3103	25.0	1	11/17/ 2006
							4	N	30	E	29	SE	sw	3102	12.0	1	11/17/ 2006
							4	N	30	E	29	SE	sw	3103	28.0	1	11/17/2006
	ТОТ	AL AC	CRES	303.0									ТОТ	AL ACRES	303.0		

Additional remarks: None.

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	Permit # <u>S-54385</u>
	re there other water rights certificates, water use permits or ground water registrations associated ith the "from" or "to" lands? Yes No
1	If YES, list the other certificate, permit, or ground water registration numbers: N/A. PORTIONS COVERED BY TEMPORARY TRANSFER T-11616.
,	If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.
	or 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://apps2.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 <i>proposed wells not yet constructed or built</i> , provide "a best estimate" for each requested information element in the table. The Department recommends you consult a 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 than full rate of water right

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