

ALL POINTS

ENGINEERING & SURVEYING, INC.

P.O. Box 767 (CRR) Terrebonne, Oregon 97760

TRANSMITTAL

To: Oregon Water Resources Dept 725 Summer St NE, Suite A Salem, OR 97301-1266 Date: 09/29/2017 Attention: Transfers

RE: Application for Permanent Water

Right XFER

[X] Prints [] Plans [] Plat [] Specifications.

Attached is a Application for Permanent Water Right Transfer on certificate C-92933 & 92935 for Jim Cate.

If you have any questions please call or email me.

Copies	No.	Description	
1	1	Application for Transfer (13 pages letter bond)	
1	2	Application map (1 page letter bond)	
1	3	Evidence of Use 2 pages letter bond)	
1	4	Land Use Form (4 pages letter bond)	
1	5	Check for \$2090	
1	6	Well logs (3 page3 letter bond)	RECEIVED BY OWRD

Signed:

SALEM, OR

OCT 02 2017

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.

Check all it	ems included with this application. $(N/A = Not Applicable)$
\boxtimes_{\sim}	Part 1 – Completed Minimum Requirements Checklist.
\boxtimes	Part 2 – Completed Transfer Application Map Checklist.
⊠ ~	Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed 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 questions, call Customer Service at (503) 986-0801.
\boxtimes /	Part 4 - Completed Applicant Information and Signature.
\boxtimes_{\checkmark}	Part 5 – Information about Water Rights to be Transferred: How many water rights are to be transferred? 2 List them here: 92933,& 92935 Please include a separate Part 5 for each water right. (See instructions on page 6)
	Attachments:
\boxtimes \checkmark	Completed Transfer Application Map.
⊠	Completed Evidence of Use Affidavit and supporting documentation.
□ N/A	
□ N/A	Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
⊠ ∏ N/A	Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if all of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
□ N/A	Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.
~	(For Staff Use Only)
0CT 02 2017 SALEM, OR	WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete Other/Explanation Staff: 503-986-0 Date: / /
O	Staff: 503-986-0 Date: / /

UCI	02 201	7.
Y	our trans	sfer application will be returned if any of the map requirements listed below are not met.
		sure that the transfer application map you submit includes all the required items and the existing water right map. Check all boxes that apply.
\boxtimes	□ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/ . CWRE stamp and signature are not required for substitutions.
	N/A	If more than three water rights are involved, separate maps are needed for each water right.
\boxtimes		Permanent quality printed with dark ink on good quality paper.
\boxtimes		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
\boxtimes		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 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 $1 \text{ inch} = 1,320 \text{ feet}$, or a scale that has been pre-approved by the Department.
\boxtimes		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.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
\boxtimes		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
\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.
\boxtimes	□ 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		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.
\boxtimes	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°).

新州	FEE WORKSHEET for PERMANENT TRANSFER Part 3 of 5	- Fee	Workshee
1	Base Fee (includes one type of change to one water right for up to 1 cts)	1	\$1,160
	Types of change proposed: Place of Use Character of Use Point of Diversion/Appropriation RECEIVED BY OWRD		
	Number of above boxes checked = 1 (2a)		
	Subtract 1 from the number in line $2a = \frac{0(2b)}{0(2b)}$ If only one change ALEMI QB0		
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » »	2	0
	Number of water rights included in transfer 2 (3a) Subtract 1 from the number in 3a above: 1 (3b) If only one water right this will be 0		
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » »	3	520
4	Do you propose to add or change a well, or change from a surface water POD to a well? No: enter 0 » » » » » » » » » » » » » » » » » »	4	410
5	Do you propose to change the place of use or character of use? No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	2090
0	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	2090

*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	\$840.00
	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 \$410 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 1	NAME		PHONE NO.	ADDITIONAL CONTACT NO.					
Jim Cate/Cate Farm	s	541-451-4939							
ADDRESS				FAX NO.					
34750 Santiam Hwy									
CITY	STATE	ZIP	E-MAIL						
Lebanon	OR	97355							
By PROVIDING AN	E-MAIL ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALL	CORRESPONDENCE FROM THI					
	,			NTS WILL ALSO BE MAILED.					

Lebanon	OR	97355			
BY PROVIDING AN E-MAIL A					
DEPARTMENT ELECTRONICA	ALLY. CO	PIES OF THE FINA	L ORDER DOCUME	NTS WILL ALSO	BE MAILED.
A A T . C		. 14			
Agent Information – The ag	ent is auth	iorized to represent			
AGENT/BUSINESS NAME			PHONE NO.		CONTACT NO.
Scott D. Montgomery ADDRESS			541-548-5833	541-420-040 FAX NO.	<u></u>
PO Box 767				FAX NO.	
CITY	STATE	ZIP	E-MAIL		
Terrebonne	OR	97760	scott@apeands.com		
BY PROVIDING AN E-MAIL A					
DEPARTMENT ELECTRONICA	ALLY. CO	PIES OF THE FINA	L ORDER DOCUME	NTS WILL ALSO	BE MAILED.
Explain in your own words	what you	nronose to accor	nnlish with this tr	ansfer applicat	ion and why:
Existing Well #1 not produc	•		•	morer appricat	ion, and why.
	•				
If you need additional space, cont	inue on a s	eparate piece of pape	er and attach to the ap	plication as "Atta	ichment 1".
Check this box if this pr	oject is fi	ılly or partially fu	anded by the Amer	rican Recovery	y and
Reinvestment Act. (Fede	•		•	•	
authorized to pursue the trans I affirm the applicant is a must name of the municipality or a laffirm the applicant is an encondemnation the property to supporting documentation.	nicipality a predecess tity with th	s defined in ORS 54 or; OR e authority to conder	0.510(3)(b) and that the mn property and is account of the control	quiring by	
I understand that prior to Depa the Department for publication right is located, once per week suggest publishing the notice i I (we) affirm that the inform	of a notice for two controls for the follo	ce in a newspaper vonsecutive weeks. owing newspaper:	with general circulat If more than one qu lication is true and	tion in the area valifying newspa	where the water aper is available, I
Applicant signature		Print Name (and Ti	tle if applicable)	Date	SALEM, OR
-	C .1				
Is the applicant the sole owr					
transfer is locate	a? IXI Ye	s I INO <i>If NO. ir</i>	aclude signatures of a	II deeded landowi	ners (and mailing

transfer is located? 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 e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.

Check the following boxes	that appl	<i>y:</i>		
The applicant is respond to be sent to			change(s). Not	cices and correspondence should
The receiving lando final order is issued.	wner wil Copies o	l be responsible for notices and cor	or completing t respondence sh	he proposed change(s) after the hould be sent to this landowner.
				le for completion of change(s). andowner and the applicant.
At this time, are the lands in	n this tran	nsfer application i	n the process o	f being sold? Yes No
	. If you d	lo not know who		mplete the receiving landowner oner will be, then a request for
If a property sells, the counless a sale agreement http://www.oregon.gov/	or other o	document states o	therwise. For n	
RECEIVING LANDOWNER NAME NA			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS	· · · · · · · · · · · · · · · · · · ·		<u> </u>	FAX NO.
CITY	STATE	ZIP	E-MAIL	
Describe any special owners Check here if any of the an irrigation or other was	water rig	hts proposed for t	ransfer are or v	will be located within or served b upplemental Form D.)
IRRIGATION DISTRICT NAME NA		ADDRES	S	
CITY		STATE	, , , , , , , , , , , , , , , , , , , ,	ZIP
Check here if water for a for stored water with a fe	ny of the	rights supplied u	nder a water se	rvice agreement or other contract
ENTITY NAME NA		ADDRESS	8	
CITY		STATE		ZIP
To meet State Land Use Concorporation, or tribal government	-	-		county, city, municipal ll be diverted, conveyed or used.
ENTITY NAME NA		ADDRESS	;	
CITY		STATE		ZIP
-		l .		RECEIVED BY OWRD

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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 # 92933

Description of Water Delivery System

System capacity: 2.53 cfs 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.

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well- Log ID# (or Well ID Tag # L)	T	Тwр		ing	Sec	1	14	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)		
#1		LINN 57038	11	s	2	w	22	NE	sw		1132.2' North & 1651.4' East from the SW cor, Sec 22		
#3	☐ Authorized ☐ Proposed	LINN 62049	11	S	2	w	21	sw	SE		0' North & 2500' West from SE corner Sec 21		

Check a	all type(s) of change(s) proposed below (c	hange	e "CODES" are provided in parentheses):
	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
	Character of Use (USE)		Point of Appropriation/Well (POA)
	Point of Diversion (POD)	\boxtimes	Additional Point of Appropriation (APOA)
	Additional Point of Diversion (APOD)		Substitution (SUB)
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV)
Will all	of the proposed changes affect the entire	wate	r right?
Yes Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the pro) section of Table 2 on the next page. Use the changes.
☐ No	Complete all of Table 2 to describe the po	rtion (of the water right to be changed.

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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 # 92933

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.

			A LUTTLI	20175	FN /41	"C 22	" co: 1	1-1								DD.	ODOS	IED (4	1 - 664 -	22 _ 66 _			
The	listin	g that					or "off" lan FORE PROI	as) POSED CHA	NGES				The	list	ting a						on" lands) ROPOSED	CHANG	ES
List only that part or portion of the water right that will be changed.						Proposed Changes (see	es (see are made.																
Twp	Rng	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)	Priority Date	"CODES" from previous page)	Twp		Rng		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
										APOA	11	S	2	w	20	NE	SE		55	1.2	IR	1 & 3	01/20/04
				-						APOA	11	s	2	w	20	SE	SE		55	5.2	IR	1 & 3	01/20/04
										APOA	11	s	2	w	21	sw	NE		50	2.5	IR	1 & 3	01/20/04
										APOA	11	S	2	w	21	sw	NW		50	19.0	IR	1 & 3	01/20/04
										APOA	11	S	2	w	21	SE	NW		50	23.2	IR	1 & 3	01/20/04
										APOA	11	S	2	w	21	NE	sw		50	29.0	IR	1 & 3	01/20/04
					RE	CEIVE	D BY OW	RD		APOA	11	s	2	w	21	NE	SW		55	11.0	IR	1 & 3	01/20/04
				- +		1	02 2017			APOA	11	s	2	w	21	NW	sw		50	22.8	IR	1 & 3	01/20/04
				-						APOA	11	S	2	W	21	NW	sw		55	10.5	IR	1 & 3	01/20/04
						SA	LEM, OR			APOA	11	S	2	W	21	sw	sw		55	39.0	IR	1 & 3	01/20/04
										APOA	11	s	2	w	21	SE	sw		55	37.0	IR	1 & 3	01/20/04
12										APOA	11	s	2	w	21	NW	SE		50	14.0	IR	1 & 3	01/20/04
275				- +						APOA	11	s	2	W	21	NW	SE		55	10.0	IR	1 & 3	01/20/04
0					-					APOA	11	s	2	w	21	sw	SE		55	36.4	IR	1 & 3	01/20/04
				_ -						APOA	11	s	2	w	21	SE	SE		55	4.2	IR	1 & 3	01/20/04
R	evised	7/27/20	017		Perma	nent Tra	nsfer Applica	tion Form – Pa	age 7 of	14						TAC	CS						

	APOA	11	S	2	w	22	NE	SW	3	1.9	IR	1 & 3	01/20/04
	APOA	11	s	2	w	22	SE	sw	56	4.7	IR	1 & 3	01/20/04
	APOA	11	s	2	w	22	NE	SE	49	6.5	IR	1 & 3	01/20/04
	APOA	11	S	2	w	22	NE	SE	1	12.3	IR	1 & 3	01/20/04
	APOA	11	S	2	w	22	NW	SE	2	14.2	IR	1 & 3	01/20/04
	APOA	11	S	2	W	22	sw	SE	56	39.8	IR	1 & 3	01/20/04
	APOA	11	S	2	w	22	SE	SE	56	7.3	IR	1 & 3	01/20/04
	APOA	11	S	2	w	27	NE	NE	56	6.0	IR	1 & 3	01/20/04
	APOA	11	S	2	w	27	NW	NE	56	37.6	IR	1 & 3	01/20/04
	APOA	11	S	2	W	27	sw	NE	56	4.4	IR	1 & 3	01/20/04
RECEIVED BY OWRD	APOA	11	S	2	W	27	sw	NE	58	20.7	IR	1 & 3	01/20/04
	APOA	11	S	2	w	27	SE	NE	58	12.9	IR	1 & 3	01/20/04
OCT 02 2017	APOA	11	S	2	w	27	SE	NE	56	0.8	IR	1 & 3	01/20/04
SALEM, OR	APOA	11	S	2	w	27	NE	NW	55	22.5	IR	1 & 3	01/20/04
	APOA	11	s	2	w	27	NE	NW	56	4.5	IR	1 & 3	01/20/04
	APOA	11	S	2	w	27	NW	NW	55	17.0	IR	1 & 3	01/20/04

APOA	11	S	2	w	27	sw	NW	55	9.7	IR	1 & 3	01/20/04
APOA	11	S	2	w	27	SE	NW	55	8.2	IR	1 & 3	01/20/04
APOA	11	S	2	w	27	SE	NW	56	0.7	IR	1 & 3	01/20/04
APOA	11	s	2	w	27	NE	SE	58	5.3	IR	1 & 3	01/20/04
APOA	11	s	2	w	27	NW	SE	58	10.7	IR	1 & 3	01/20/04
APOA	11	S	2	w	28	NE	NE	55	31.0	IR	1 & 3	01/20/04
APOA	11	s	2	w	28	NW	NE	55	36.7	IR	1 & 3	01/20/04
APOA	11	s	2	w	28	sw	NE	55	13.7	IR	1 & 3	01/20/04
APOA	11	s	2	w	28	SE	NE	55	12.8	IR	1 & 3	01/20/04
APOA	11	S	2	w	28	NE	NW	55	38.1	IR	1 & 3	01/20/04
APOA	11	S	2	w	28	NW	NW	55	39.9	IR	1 & 3	01/20/04
APOA	11	S	2	w	28	sw	NW	55	14.0	IR	1 & 3	01/20/04
APOA	11	S	2	w	28	SE	NW	55	14.4	IR	1 & 3	01/20/04
APOA	11	S	2	w	29	NE	NE	55	5.2	IR	1 & 3	01/20/04
APOA	11	S	2	w	29	SE	NE	55	1.7	IR	1 & 3	01/20/04

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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? \(\subseteq \text{Yes} \text{ No} \) If YES, list the certificate, water use permit, or ground water registration numbers: 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

For a change in point(s) of appropriation (well(s)) or additional point(s) o	f appropriation:
Identify the primary certificate to be cancelled. Certificate #	SALEM, OR
For a change from Supplemental Irrigation Use to Primary Irrigation Us	
Surface water primary Certificate #	OCT 02 2017
Ground water supplemental Permit or Certificate #;	RECEIVED BY OWRD
irrigation)	

F

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

Tip: You may search for well logs on the Department's web page at: http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? ((Yes or No)	If an existing well: OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less han full rate c water right
See well logs										

CERTIFICATE # 92935

Description of Water Delivery System System capacity: 0.8 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. 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.) Is this If POA. Lot, DLC POD/POA OWRD Well POD/POA Measured Distances Name or Authorized on Log ID# (or (from a recognized 1/4 1/4 Twp Rng Sec or Number the Certificate or Well ID survey corner) Gov't is it Proposed? Tag # L-) Lot 1132.2' North & 1651.4' LINN #1 11 S 2 W 22 NE SW East from the SW cor. 57038 Proposed Sec 22 0' North & 2500' West Authorized LINN from the SE corner sec #3 11 S 2 W 21 SW SE □ Proposed 62049 Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses): Supplemental Use to Primary Use (S to P) Place of Use (POU) Point of Appropriation/Well (POA) Character of Use (USE) Point of Diversion (POD) Additional Point of Appropriation (APOA) Additional Point of Diversion (APOD) Substitution (SUB) Surface Water POD to Ground Water Government Action POD (GOV) POA (SW/GW)

Will all of the proposed changes affect the entire water right?

Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.

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

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BALEM, OR

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

Γable 2. Description of Changes to Water Right Certificate # 92935

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

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																			
Twp	Rng	5	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	/p	R	g	Sec	1/4	1/4:	Tax Lot	Gyt Lot or DEC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
												APOA	11	S	2	w	21	NW	NE		50	3.8	IR	1 & 3	4/30/07
												APOA	11	S	2	w	21	sw	NE		50	9.7	IR	1 & 3	4/30/07
												APOA	11	S	2	w	21	NE	NW		50	11.3	IR	1 & 3	4/30/07
												APOA	11	s	2	w	21	NW	NW		50	9.3	IR	1 & 3	4/30/07
												APOA	11	s	2	w	21	sw	NW		50	13.9	IR	1 & 3	4/30/07
\top												APOA	11	s	2	w	21	SE	NW		50	16.3	IR	1&3	4/30/07

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For Place of Use or Character of Use Changes

10111	uce or ese	or Charact	ci di ese	Changes	'					
		water right of or the "to" l			-	s or ground	d water regi	strations a	ssociated	
If Y	ES, list the	certificate,	water use	permit, or	r ground v	water regis	tration num	bers:		
a pri to a g	imary right	S 540.510, a proposed fo er registratio	r transfer	must be i	ncluded i	n the trans	fer or be car	ncelled. Ar	ny change)
For Su	ıbstitution	(ground wat irrigation)	er supple	mental irr	igation w	ill be subs	tituted for s		er primary ECEIVED	BY OWR
		upplemental rimary Certif			te #	<u>:</u>			OCT 0	2 2017
	•	m Suppleme		0			ation Use		SALE	W, OR
Ident	ify the prin	nary certifica	ite to be c	ancelled.	Certificat	e #				
For a c	change in p	point(s) of a	ppropria	tion (well	(s)) or ad	lditional p	oint(s) of a	ppropriat	tion:	
	with the co Tip : You is http://apps	are attached presponding may search for wrd.state.or	well(s) in or well lo	n Table 1 gs on the	above and Departme	d on the acent's web p	companyin	•		ssociated
AND	/OR									
	have a wel requested i	ne construction of the log. For properties of the logist, or cere the Table 3.	oposed we element ir	<i>ells not ye</i> n the table	t construct. The Dep	cted or bui partment re	lt, provide 'ecommends	'a best esti you consu	mate" for e	each d well
Any weller accompare application well(s) with	(s) in this langing application on the second in the secon	on of Point(sisting must be cation map. sereceived. The same sour om approving	e clearly Failure to he inform ce aquife	tied to con provide to ation is no r as the au	rrespondi he inform ecessary othorized	nation will for the dep point(s) of	delay the partment to a appropriati	rocessing of assess whe for (POA).	of your tran ther the pro	sfer posed
Proposed or Authorized POA	Is well	If an existing well: OWRD Well	Гotal		Casing	Seal	Perforated or screened	Static water level of completed	Source aquifer	Well -specific rate (cfs or gpm). <u>If</u> less

well

(in feet)

han full rate of

water right

(sand, gravel.

basalt. etc.)

built?

((Yes or No)

ID Tag No.

Name or

Number

See well logs

Intervals

(feet)

depth(s)

(intervals)

intervals

(in feet)

well

depth

Casing

Diameter

STATE OF OREGON

JAN 0 5 2006

WATER SUPPLY WELL REPORTER RESOURCES DEPT
(as required by ORS 537.765)

Instructions for completing this report are SALEM, OREGON form.

(WELL I.D.)# L 80160 (START CARD) # 181838

(1) OWNER: Name Jim Colo		W	ell Numb	er 4137		(9) LOCATION OF	WELL by	_	_	ongitude	
	Tennesses Schoo	I De				Township 11		Range		W	WM.
City Lebanon	Tellinoses Colloc	State Oreg	-	Zip 9735	bit.	Section 22	8E	_	SW	1/4	** 2**
(2) TYPE OF	WODE	State Or Og		Zip er ex	_	Tax Lot 502				Subdivision	
				a) 🗆 Abradası		Street Address of We				_	
(3) DRILL MI			conditio	n) Abendon	ment	Lebenon, OR 973	55		Tellinessee	OUTOUT RU	
Rotary Air	Rotary Mud [Cable	Auger			(10) STATIC WATE					
Other	ED USE:				-	13 ft. bel			are inch.	Date 11/25	/2005
✓ Domestic		Industrial		igation		(II) WATER BEAR					
Thermal (5) BORE HO		Livestock TION:	O	her		Depth at which water wa					
	Yes No Ty				At.	From		То	Entiment	ed Flow Rate	SWL
HOLE	☐ 165 M NO 19	SEAL	Ame			From 18	32	10	1800+	EU FIOW RAIC	13
Diameter From	To Material			Carlo an and I		10	-		1000		1.0
18 0	To Mater	1 1	To	Sacks or pound 2 sacks	3		1		 		-
14 30	14		-		_		-		-		
									+		
		_	\rightarrow		-		1				
How was seal pla	aced: Method	_A	В	C D	□E	(12) WELL LOG:	Elevation _				
Other Pou	ared dry				_	3.04					
Backfill placed fi		ft.	Material			Materi	al		From	To	SWL
Gravel placed fro			Size of g			Comented clay & gra	vel		0	18	
(6) CASING/I					-	Send & gravel			/18 /	32	13
Diameter		Gauge Steel	Plastic	Weided Thre	ended						
Casing: 14	1 1 1	250				RECE	IVED B	Y OW	/RD		
14	28 32	250						-			
V :						-0	CT 02	2017			
Liner:											
Final location of:	shoe(s)						SALEM,	OF			
(7) PERFORA	TIONS/SCREEN	S:									
Perforation	s Method				_						
Screens	Type John	nson	Mater Tele/pipe	rial Stainles	18	JONES DRII	LING	CO., I	NC.		
18 28		Diameter 14	size	Casing	Liner	29400 SA	NTIAM	HWY		+	
					5 I	LEBANC	N, OR	97355			
				- 13	5	541-367-256	0 541-4	51-26	86		
				- 11	5 I		915-838				
					5 1	1-000	71.3-0.50				
					-						
(8) WELL TES	STS: Minimum to	esting time is	1 hour		-	Date started 11/22/2005			pleted 11/2	5/2005	
Pump	Bailer	Air		Flowing Artesian		(unbonded) Water Well I certify that the work				eration or ab	andonment
Yield gal/min	Drawdown	Drift stem	at	Time		of this well is in complian	ice with Oreg	on water	supply well o	onstruction s	tandards.
700	All	30		1 hr.	-	Materials used and inform and belief.	nation reporte	ed above a	ire true to the	best of my k	nowledge
				1 14.	-	1)	~ A		www.Ri	umber 1411	
1800	2'			30 mln	_	Signed Signed) VV	X	W WC N	Date 1/04	
Temperature of w		Depth Artesian	Flow Fo		- 1	(bonded) Water Well Co	nstructor C	ertification		2000	
Was a water analy		es By whom	. 10 4 10			I accept responsibility			,	handonment :	work
	ntain water not suitab	_	nee?	☐ Too little	-	performed on this well du	ring the cons	truction d	ates reported	above. All v	vork
	ddy Odor			☐ roo sittle		performed during this time construction standards. T					
Depth of strata:	day Lloude L	coloida []	Outel			Construction Standards 1	O a	are to the		umber 1684	
Deput of Strata.						Signed Tub	m	(Y WAC IN		2009
OPIGDIAL & D	TIP CT CODY WAT	ED DECOLU	CES D	EDA DTA (ENT	C SEC	COND COPY-COMSPR	LICTOR /	THIDE	COPY-CUS		
UNIVINALOCI	INDI CULI-WAI	LK KESUUN	CEO D	LIAKINEN	SEC	CITU CUL I-COMSTK	CLIUIC	TILLIAN	CUT I'CUS	LOWER	

Revisions Requested VED BY OWRD WELL I.D. LABEL# L 124984 START CARD# 1035374 (as required by ORS 537.765 & OAR 690-205-0210) AUG 1 4 2017 **ORIGINAL LOG#** (1) LAND OWNER Owner Well I.D. 5799 LINN First Name James & Ginger Last Name Cate (2) LOCATION OF WELL (legal description) Company Twp 11 S N/S Range 2 Address 34746 Santiam Hwy. Sec 21 1/4 of the SE 1/4 Tax Lot 2100 Zip_97355 State OR Tax Map Number (2) TYPE OF WORK New Well Deepening Conversion Alteration (complete 2a & 10) | Abandonment(complete 5a) or DMS or DD (2a) PRE-ALTERATION Street address of well 34746 Santiam Hwy. - Lebanon, OR 97355 Material sacks/lbs Seal: (3) DRILL METHOD (10) STATIC WATER LEVEL Rotary Air Rotary Mud Cable Auger Cable Mud Existing Well / Pre-Alteration Reverse Rotary Other Completed Well 07-25-2017 Domestic X Irrigation Community Flowing Artesian? (4) PROPOSED USE Industrial/Commercial Livestock Dewatering Depth water was first found 200 WATER BEARING ZONES Thermal Injection Other SWI, Date Est Flow SWL(psi) + SWL(ft) From To (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 07-21-2017 285 1,500 Depth of Completed Well 340 **BORE HOLE** SEAL Material To From From Amt lbs 16 60 Bentonite 60 58 S 12 60 120 Calculated 51 120 199 199 Cement 25 (11) WELL LOG 10 199 Calculated and Elexation How was seal placed: Method From To X Other Poured dry Brown clay Cemented sand & gravel 22 Backfill placed from _ __ ft. to __ ft. Material Brown sandy clay 22 25 Filter pack from Size ft. to ft. Material 25 55 Cemented sand & gravel Yes Type. Explosives used: Amount Gray clay 55 90 Compacted sand of Can 90 95 (5a) ABANDONMENT USING UNHYDRATED BENTONITE 95 100 Sticky gray clay **Pounds** Proposed Amount Actual Amount Sticky brown clay 100 110 (6) CASING/LINER Silty brown clay 110 115 Casing From Gauge Tan brown crumbly clay 115 160 12 X 199 250 \odot 1.5 Tan brittle clay 160 200 250 Blue/gray cemented sand 200 Gray cemented sand 250 255 255 260 Brown cemented sand Heavily broken sandston conglomerate water bearing 260 300 Shoe Inside Outside Other Location of shoe(s) Blue sandstone 340 JONES DRILLING CO., INC Temp casing X Yes Dia 16 From 0 29400 Santiam Hwy (7) PERFORATIONS/SCREENS Lebanon, OR 97355 1-800-915-8388 Perforations Method Screens Type Date Started 07-18-2017 Completed 07-25-2017 Material Perf/S Casing/ Screen Scm/slot # of Tele/ Slot (unbonded) Water Well Constructor Certification Liner length slots pipe size I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief. License Number (8) WELL TESTS: Minimum testing time is 1 hour Signed Pump O Air Flowing Artesian () Bailer Drill stem/Pump depth (bonded) Water Well Constructor Certification Duration (hr) Yield gal/min <u>Drawdown</u> I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief. °F Lab analysis Yes By _ Temperature 54 Yes (describe below) TDS amount 220 License Number Date 07-31-2017 Water quality concerns? Signed Contact Info

ORIGINAL - WATER RESOURCES DEPARTMENT

_	15963	
5	ie and in the second	MALA.

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS \$37.765)

(WELL I.D.)# L. 86270 (START CARD) # 191122

Name Jists Cate		County Linn Latitude	L	ongitude	
Address 34750 Santiam Hwy.			ngc 2	W	W
City Lebenon State Oreg	on Zip 97355		1/4 NE	1/4	
(2) TYPE OF WORK		Tax Lot 100 Lot Blox		Subdivision	
New Well Deepening [] Alteration (repair/re	mondition) Abandonment	Street Address of Well (or nearest address		340411131011	
(3) DRILL METHOD:	CONDITION , ADDITION THE	Lebenon, OR 97355	,, .		
	Access	(10) STATIC WATER LEVEL:			
Other	Auger	ft. below land surface.		Days 44/9	2/2006
(4) PROPOSED USE:				Date 11/2	2/2000
Domestic Community Industrial	√ fragation	(11) WATER BEARING ZONES:	square inch.	Desc	
Thermal Injection Livestock	Other	(II) WATER BEARING 20:123:			
(5) BORE HOLE CONSTRUCTION:	Other	Depth at which water was first found 90			
Special Construction approval Yes No Depth	of Completed Well 182 A	-			
Explosives used Yes No Type		From To	Latinat	cd Flow Ra	
HOLE SEAL.	Amoun	90 165	1500+	ICO I IOW ICS	te S
	75 0-1	table			· +
	To Sacks or pounds 7 8 sacks	1	ļ		1
1 1 1 1	50 28 sacks	1			
12 50 200			1		
200					
How was seal placed: Method A FII	B VC ID TE	(12) WELL LOG:			
Other Poured dry	Ale in the	Ground Elevation .			
Backfill placed from 11, to 11.	Material	Material	From	То	SW
Gravel placed from th. to th.	Size of gravel	Topsoil	G	2	24
(6) CASING/LINER:	Size of Bratts	Brown clay	2	7	
Diameter From To Gauge Steel	Plastic Welded Threaded	Cemented clay & gravel	7	39	-
Casing 12 +1 99 250		Blue clay	39	.90	
Casing		Black cemented sand	90	100	6
		Blue clay	190	120	1
		Blue sand & gravel	120	145	6
Liner:		Blue clay	145	155	
Luki.	4 = 4	Cemented sand & pea gravel	155	165	6
Final location of shoe(s)	1	Blue clay	165	200	
(7) PERFORATIONS/SCREENS:			, ,,,,		i
Perforations Method		Drilled to 200' caved back to 182'		1	
Screens Type	Material		Dic	-	;
Slet	Tele/pipe	JONES DRILLING CO.		Cardo de arroy	
From To size Number Diameter	size Casing Liner	29400 SANTIAM HV	VY.	REC	FIV
	L	LEBANON, OR 973	55		1 1
		541-367-2560 541-451-		NOV	2 4 2
					-
		1-800-915-8388	TAW	ER RES	DURC
				SALEM.	OREC
(8) WELLTESTS: Minimum testing time is	1 hour	Date started 11/17/2006	Completed 11/2	2/2006	i
(o)		(unbonded) Water Well Constructor Certi			
_!Pump Bailer Air	Flowing i Artesian	I certify that the work I performed on the		aration or	handar
Yield gal/min Drawdown Drill stem		of this well is in compliance with Oregon was Materials used and information reported abo	ster supply well	construction	standar
1300	1 %.	Materials used and information reported bo and belief.	ve are true to the	best of my	knowle
		111101	WWC N	umber 141	1
The second of the Same of Same	<u> </u>	Signed X	7	Date 11	
Temperature of water 54 Depth Artesian	Flow Found	(bonded) Water Well Constructor Certific	ation:	Daile 11	
Was a water analysis done? Yes By whom	I I I OA I VIIIN	I accept responsibility for the construction		handosmo	of sevel
	use? Too little	performed on this well during the construction	on dates reported	above. All	work
13rd any drafa contain water not cuitable for intended		performed during this time is in compliance construction standards. This report is true to	with Oregon was	ter supply v	ell
Did any strata contain water not suitable for intended	I there		CORP LIMITED AND THINK I	LIFE WAY TO BE INCOME.	n For LICENCE
Selty Muddy Oder Colored	RECEIVED	The state of the s		1 /	
	RECEIVED	Signed Is	WWCN	1 /	4-

SALEM, OR

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