

December 11, 2017

State of Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, OR 97301-1266

RE: Temporary and Permanent Transfer Applications: Ground Water Cert. No. 15553

To Whom It May Concern:

Enclosed, please find a Temporary and Permanent Transfer Application for Ground Water Cert. No. 15553. The intent of both of these applications is to add a well to the subject water right.

I have enclosed separate Application Fee checks for both requests. If you have any questions, please contact me at (509) 540-4474 or by e-mail at <u>billneve.wrs@gmail.com</u> at your convenience.

Best Regards

Bill Neve

Water Right Solutions, LLC

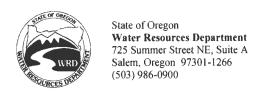
Enclosures: Temporary Transfer Application – Cert. 15553

Permanent Transfer Application – Cert. 15553 Application Fee Checks (2) - \$810 & \$1,570

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DEC 1 4 2017

SALEM, OR



# Application for Permanent Water Right Transfer

Part 1 of 5 - Minimum Requirements Checklist

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

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

Check all ite	ms included with this application. $(N/A = Not Applicable)$
$\boxtimes$	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: <a href="http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator">http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator</a> . If you have questions, call Customer Service at (503) 986-0801.
$\boxtimes$	Part 4 – Completed Applicant Information and Signature.
	Part 5 – Information about Water Rights to be Transferred: <b>How many water rights are to be transferred?</b> 1 List them here: 15553  Please include a separate Part 5 for each water right. (See instructions on page 6)
	Attachments:
$\boxtimes$	Completed Transfer Application Map.
$\boxtimes$	Completed Evidence of Use Affidavit and supporting documentation.
N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
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 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 <b>all</b> 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.
C 1 4 2017	(For Staff Use Only)  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

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

		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.
$\boxtimes$		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 x 17 inches, or up to 30 x 30 inches. For 30 x 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.
X /107 <b>*-1</b> ~	LEM, OR	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.
(1)	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.
	□ 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	Workshe
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		
2	Number of above boxes checked = $\frac{1}{2a}$ Subtract 1 from the number in line $2a = \frac{0}{2b}$ If only one change, this will be 0 Multiply line 2b by \$930 and enter $3a + 3a $	2	0
2	Number of water rights included in transfer 1 (3a) Subtract 1 from the number in 3a above: 0 (3b) If only one water right this will be 0	3	0
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » » » » »	4	\$410
	Do you propose to change the place of use or character of use?  No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »		
5	and multiply 5c by \$350, then enter on line 5 » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » » » » » Subtotal:  Is this transfer:	6	\$1,570
7	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »  If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » Transfer Fee:	8	\$1,570

of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

For irrigation calculate cfs for each water right involved as follows:

Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs ÷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

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

Anı	plican	t Info	rms	ation
AU	piicaii		71 1112	4 U.O.I

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Robertson Family, LLC A	ttn: Stephen	Robertson	541-419-1718	
ADDRESS				FAX NO.
1076 SE Garrison Village V	Vay			
CITY	STATE	ZIP	E-MAIL	
College Place	WA	99324	steve@delmaswin	es.com
BY PROVIDING AN E-MAI	IL ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALL	CORRESPONDENCE FROM THE
				ENTS WILL ALSO BE MAILED.

AGENT/BUSINESS NAME Water Right Solutions, LLC	Attn: Rill N	Neve	PHONE NO. <b>509-540-4474</b>	ADDITIONAL	ADDITIONAL CONTACT NO.	
ADDRESS	1010	307-340-4474	FAX NO.			
PO Box 511	710	EMAIL				
CITY Walla Walla	STATE WA	ZIP <b>99362</b>	E-MAIL billneve.wrs@s	gmail.com	:	
BY PROVIDING AN E-MAIL A			EN TO RECEIVE AI	LL CORRESPONDE		
DEPARTMENT ELECTRONIC	ALLY. CO	PIES OF THE FI	NAL ORDER DOCU	MENTS WILL ALSO	D BE MAILED.	
Explain in your own words am requesting to add a we will allow for more efficient	ell as an a	dditional poin	t of appropriation	n to Certificate No	o. 15553. This	
and am in the process of pu	rchasing	lands within T	ax Lot 300.			
If you need additional space, cor	ntinue on a s	separate piece of	paper and attach to the	he application as "Att	tachment 1".	
Check this box if this pre Reinvestment Act. (Fed	•	* 1 *	funded by the A	american Recover	y and	
		Check	One Box			
Department approval of the	transfer, I w	that, upon receip will be required to	provide landowners	inary determinat on a hip information and e	nd prior to BY O	
Department approval of the tauthorized to pursue the tran  I affirm the applicant is a mu name of the municipality or	transfer, I wasfer as iden inicipality a predecess	that, upon receip will be required to tified in OAR 690 s defined in ORS or; <b>OR</b>	ot of the draft preliming provide landowners of the draft preliming provide landowners of the draft preliming provide landowners of the draft preliming provide land the draft preliming provide landowners of the draft preliming	hip information and be hat the right is in the	vidence that I am	
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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.

### Part 4 of 5 - Applicant Information and Signature

#### **Applicant Information**

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APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Robertson Family, LLC Att	n: Stephen	Robertson	541-419-1718	
ADDRESS				FAX NO.
1076 SE Garrison Village Wa	у			
CITY	STAIF	ZIP	E-MAIL	
College Place	WA	99324	steve@delmaswine	es.com
BY PROVIDING AN E-MAIL	ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALL O	ORRESPONDENCE FROM THE
DEPARTMENT ELECTRONI	CALLY, CO	PIES OF THE	FINAL ORDER DOCUME	NTS WILL ALSO BE MAILED.

College Place	WA	99324	steve(a)deimaswine	es.com
				ORRESPONDENCE FROM THE
DEPARTMENT ELECTRO	ONICALLY, CO	PIES OF THE	FINAL ORDER DOCUME	NTS WILL ALSO BE MAILED.
<b>Agent Information</b> – T	he agent is auth	norized to rep	resent the applicant in all	matters relating to this application
AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Water Right Solutions, LI	LC Attn: Bill !	Veve	509-540-4474	
ADDRESS				FAX NO.
PO Box 511		·		
CITY	STATE	ZIP	E-MAIL.	
Walla Walla	WA	99362	bilineve.wrs@gma	
				CORRESPONDENCE FROM THE
DEPARTMENT ELECTRO	ONICALLY, CO	PIES OF THE	FINAL ORDER DOCUME	NTS WILL ALSO BE MAILED.
Explain in your own w	ords what you	propose to	accomplish with this tra	ansfer application, and why:
*	-		7	
				Certificate No. 15553. This
	* '		•	the owner of Tax Lot 400
and am in the process (	of purchasing	lands within	1 Lax Lot 300.	
If you need additional space	e, continue on a	separate piece	of paper and attach to the ap	oplication as "Attachment 1".
				<u> </u>
<del></del>	1 0		ally funded by the Ame	rican Recovery and
Reinvestment Act.	(Federal stimi	ulus dollars)		
			ck One Box	
			eipt of the draft preliminary	
				nformation and evidence that I am
authorized to pursue th				
			RS 540.510(3)(b) and that the	RECEIVED BY OWF
name of the municipali			condemn property and is ac-	
condemnation the prop	an entry which the	to authority to	anaged for transfer is appur	tonant and have
supporting documentat	ion	water right pr	oposed for transfer is appur	tenant and have DEC 1 4 2017
Supporting documentat				
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				ly be required <b>Musilit pay</b> ment
				tion in the area where the water
-				alifying newspaper is available,
suggest publishing the no	otice in the folk	owing newspa	aper: East Oregonian	
I (we) affirm that the in	formation con	tained in thi	s application is true and	accurate.
11 4 0				
It fold tobe		Sizohen	John Kaberlin	11/8/17
Applicant signature		Print Name	(and Title if applicable)	Date
> 10000		. /		1 1
	, 3	Yasho	dhan Naravane	-11/27/17
Appleant signature	ZZ.	Yasko Print Name	In Robows (and Title if applicable)  Ahan Naparane  (and Title if applicable)	-11/27/17 Date
.,	Z	Print Name	(and little if applicable)	- 11/27/17 Date partial thereof proposed for

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for 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 email addresses) from all landowners or individuals entities to which the water right(s) were conveyed.

✓ The counting of the countin	• • •						
continue to be sent to the	*	of change(s). Notice	es and 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.							
		_	for completion of change(s). lowner and the applicant.				
At this time, are the lands in th	is transfer application	on in the process of b	eing sold? ⊠ Yes □ No				
	you do not know wl	no the new landowne	blete the receiving landowner er will be, then a request for				
If a property sells, the certiful unless a sale agreement or on the http://www.oregon.gov/ow	other document state	es otherwise. For mor	re information see:				
RECEIVING LANDOWNER NAME Robertson Family, LLC Attn: Ste	phen Robertson	PHONE NO. <b>541-419-1718</b>	ADDITIONAL CONTACT NO.				
ADDRESS 1076 SE Garrison Village Way			FAX NO.				
CITY ST	ATE ZIP	E-MAIL					
College Place W	/A 99324	steve@delmaswin	es.com				
certificate.	ter rights proposed t		ver all lands associated with t				
certificate.  Check here if any of the wa	district. (Tip: Comp	for transfer are or wil					
certificate.  Check here if any of the wa an irrigation or other water  IRRIGATION DISTRICT NAME  Walla Walla River Irrigation Distr	district. (Tip: Complete ADD 323	for transfer are or will plete and attach Suppress Evans Street	ll be located within or served b				
Check here if any of the wa an irrigation or other water	district. (Tip: Comp	for transfer are or will plete and attach Suppress Evans Street	ll be located within or served b				
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certificate.  ☐ Check here if any of the wa an irrigation or other water  ☐ RRIGATION DISTRICT NAME  ☐ Walla Walla River Irrigation Distr  ☐ City  ☐ Check here if water for any	district. (Tip: Complete State State of the rights supplied agency or other of the state of the supplied agency or other of the supplied agency or other of the state of the supplied agency or other of the state of the supplied agency or other or ot	For transfer are or will plete and attach Supplete and attach Suppletes Suppletes Street  TE  ed under a water serventity.	Il be located within or served be pplemental Form D.) - SEE  ZIP 97862  rice agreement or other contrac				
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Check here if any of the wa an irrigation or other water IRRIGATION DISTRICT NAME  Walla Walla River Irrigation Districty  Milton-Freewater  Check here if water for any for stored water with a feder entity name  ENTITY NAME  CITY  To meet State Land Use Consist corporation, or tribal government entity name  ENTITY NAME  Umatilla County Planning Department of the county Planning	of the rights supplied agency or other of the rights supplied agency or other of the rights within whose justices within whose justices agency or other of the rights supplied agency or other of the rights agency or other or othe	For transfer are or will plete and attach Suppress Evans Street TE  ed under a water serventity.  FRESS TE  s, you must list all corisdiction water will FRESS SE Fourth Street TE	ZIP 97862  rice agreement or other contrace  RECEIVED BY ON  ZIP  DEC 1 4 2017  Dunty, city, municipal M, OR be diverted, conveyed or used.				

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 # <u>15553</u>

# Description of Water Delivery System System capacity: 0.375 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. Well, submersible pump, 3" discharge mainline, dripline, handline sprinklers

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Т	wp	R	ng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#1 (POA)	☐ Authorized☐ Proposed	4920	6	N	35	E	33	NE	sw	300	459 feet South and 386 feet West from the NE corner of Sec. 33
#2 (APOA)	☐ Authorized ☐ Proposed	4878	6	N	35	E	33	NE	SW	400	760 feet South and 1100 feet West from the Center 1/4 corner of Sec. 33
	Authorized Proposed										
	☐ Authorized ☐ Proposed										

Check a	Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):									
	Place of Use (POU)		Supplemental Use to Primary Use (S to P)  Point of Appropriation Well (POA)							
	Character of Use (USE)		Point of Appropriation/Well (POA)							
	Point of Diversion (POD)	$\boxtimes$	Additional Point of Appropriation (APOK)							
	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?							
X 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 po	rtion	of the water right 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 and ask for Transfer Staff.

#### Table 2. Description of Changes to Water Right Certificate # 15553

List the change proposed for the acreage in each ½ ½. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

,	AUTHORIZED (the "from" or "off" lands)  The listing that appears on the certificate BEFORE PROPOSED CHANGES  List only that part or portion of the water right that will be changed.									Proposed Changes (see	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.															
Tv	Twp			Sec		1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(a) or	Priority 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
6	N	35	Е	33	NE	sw	300		9.06	Irrigation	POA #1	5/29/45	APOA	6	N	35	E	33	NE	sw	300		9.06	n/a	POA #1 & #2	5/29/45
				-																						26
										*																
																										/
						ΓΟΤΑ	L ACF	ES:	9.06									<u> </u>	7	ГОТА	L ACI	RES:	9.06			

Additional remarks: The proposed transfer application seeks to add an additional POA to Cert. No. 15553.

Revised 7/27/2017

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**TACS** 

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 # 15553

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										Proposed Changes (see									ER PI							
Twp		Rng	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)	Tw	ф	Rn	g	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
6	N	35	E	33	NE	sw	300		10	Irrigation	POA #1	5/29/45	APOA	6	N	35	E	33	NE	sw	300		10	n/a	POA #1 & #2	5/29/45
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					7	[ATO	L ACR	ES:	10										T	OTA	L ACR	ES:	10	ĮŲ.	DE	Ø)

#### For Place of Use or Character of Use Changes

rui i iac	e of ose of Character of ose Changes	
	re other water right certificates, water use permits or ground water regise "from" or the "to" lands?   Yes  No N/A – as this is an APOA to	
If YES	, list the certificate, water use permit, or ground water registration num	bers:
a prima	nt to ORS 540.510, any "layered" water use such as an irrigation right to ary right proposed for transfer must be included in the transfer or be car and water registration must be filed separately in a ground water registration.	ncelled. Any change
For Subs	stitution (ground water supplemental irrigation will be substituted for si irrigation)	urface water primary
	water supplemental Permit or Certificate #; water primary Certificate #;	RECEIVED BY OWRD
For a cha	ange from Supplemental Irrigation Use to Primary Irrigation Use	DEC 1 4 2017
Identify	the primary certificate to be cancelled. Certificate #	SALEM, OR
For a cha	ange in point(s) of appropriation (well(s)) or additional point(s) of a	ppropriation:
w T	Vell log(s) are attached for each authorized and proposed well(s) that are ith the corresponding well(s) in Table 1 above and on the accompanyin ip: You may search for well logs on the Department's web page at: <a href="mailto:tp://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx">tp://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx</a>	
AND/C	OR .	
ha re di	rescribe the construction of the authorized and proposed well(s) in Table ave a well log. For <i>proposed wells not yet constructed or built</i> , provide equested information element in the table. The Department recommends riller, geologist, or certified water right examiner to assist with assemble complete Table 3.	"a best estimate" for each you consult a licensed well
	onstruction of Point(s) of Appropriation ) in this listing must be clearly tied to corresponding well(s) described i	n Table 1 and shown on the

#### Ta

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 of water right
#1 (POA)	Yes	UMAT 4920	150	10"				35'	Gravel	
#2 (APOA)	Yes	UMAT 4878	140	10"	10"/19' 8"/75'	19'	n/a	48'	Gravel (see attached WRD letter)	