



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

Application for Groundwater Registration Modification

Part 1 of 5 – Minimum Requirements Checklist

This Groundwater Registration Modification application <u>will be returned</u> if Parts 1 through 4 and all required attachments are not completed and included.

		For au	uestions, please call (503) 986-0900	and ask for Transfer	Section.					
	ck all in	cluded wi	th this application $(N/A = Not Ap)$	plicable)						
文		Part 1 –	Completed Minimum Requirement	s Checklist.	RECEIVED					
¥		Part 2 –	Completed Application Map Check	tlist.	DEC 13 2017					
		Part 3 –	Completed Applicant Information a	and Signature.						
以		Registra	Completed Groundwater Registration Information. (Only one Groundwater registrations to be modified as	dwater registration per						
		-	ted Groundwater Registration Modid by a Certified Water Right Exami		Iap (Does not have to be					
X(Ground (\$875.0	water registration modification fees 0 for a place of use change only; \$1	Amount enclosed: \$,450 for any other char	1450 nge or combination).					
		Attachr	nents:							
	N ∕N/A	to be completed if the and is not the registration available at df. Assignment is not a to request recognition of a tc.) or the applicant is e certificate of registration.								
X	□ N/A		se Information Form with approval and use form not required if any of	_ , _	d land use form receipt					
			Water is to be diverted, conveyed,	and/or used only on fe	ederal lands.					
	,	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.								
	X N/A	Water V point(s)	Vell Report/Well Log for changes in of appropriation.	ı point(s) of appropriat	ion (well(s)) or additional					
				aff Use Only)	٠.					
	ļ		RETURNING YOUR APPLICATION							
			ication fee not enclosed/insufficient	Map not included or	-					
			Use Form not enclosed or incomplete		nd fee not enclosed/insufficient					
			tional signature(s) required	Part is incom	plete					
		-	olanation503-986-0	Data /						
	1	Statt:	503-986-0	Date:/	_/					

Part 2 of 4 - Groundwater Registration Modification Map Checklist

Your Groundwater Registration Modification application <u>will be returned</u> 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 prepared by a Certified Water Right Examiner. Check all boxes that apply.

\boxtimes	Permanent quality printed with dark ink on good quality paper.
× .	The size of the map can be 8½ x 11 inches, 8½ x 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.
X	The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$, $1 \text{ inch} = 1,320 \text{ feet}$, 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 preapproved by the Department.
\boxtimes	Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
	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.
\boxtimes	Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.
\boxtimes	Existing place of use that includes hachuring, 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 registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.
⊠ ∏ N/A	If you are proposing a modification in place of use, show the proposed place of use with hachuring including 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 appropriation with distance and bearing or coordinates from a recognized survey corner.
⊠ □ N/A	If you are proposing a modification in point(s) of appropriation, 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°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

OWRD

Applicant Informati	:		PHONE NO.	ADDITIONAL CONTACT NO.
epold Farms/ Rod Liepol DRESS	<u>ld</u>		503-913-3033	503-781-2759 FAX NO.
480 SE Richey Rd		T circ		<u>. </u>
TY oring	STATE OR	ZIP 97009	E-MAIL	
Y PROVIDING AN E-MAI	L ADDRESS, C	ONSENT IS GIVE		ORRESPONDENCE FROM THE
EPARTMENT ELECTRON	NICALLY. COP	PIES OF THE FIN	AL ORDER DOCUMEN	NTS WILL ALSO BE MAILED.
e nt Information – Th	e agent is auth	orized to represe	ent the applicant in all	matters relating to this application
PLICANT/BUSINESS NAME	_		PHONE NO.	ADDITIONAL CONTACT NO.
l County Surveyors & Pl	lanners, Inc.		503-668-3151	FAX NO.
660 Pleasant St/ P.O. Bo	x 955			TAX NO.
ΓΥ __	STATE	ZIP	E-MAIL	
ndy	OR	97055	daleh@allcountys	
	,			ORRESPONDENCE FROM THE NTS WILL ALSO BE MAILED.
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require it. If you need additional spa	ace, continue on	a separate piece o	of paper and attach to the	e application as "Attachment h"
If you need additional spa	,	•		e application as "Attachment "El
If you need additional spa	this project is	s fully or partia	lly funded by the A	merican Recovery and
If you need additional spa	this project is	s fully or partia	lly funded by the Ais)	
If you need additional spanning Check this box if Reinvestment A By signing this application Department approval	this project is Act. (Federal scation, I (we) under the Groundy	s fully or partia stimulus dollar (Chanderstand that, upowater modification	lly funded by the Ars) eck one box) on receipt of the draft pro	merican Recovery and
If you need additional spa ☐ Check this box if Reinvestment A ☐ By signing this applied Department approval information and evid OR	this project is Act. (Federal section, I (we) under the Grounds lence that I am a licant is a munic	s fully or partia stimulus dollars (Chaderstand that, upowater modification authorized to pursu	lly funded by the Ars) eck one box) on receipt of the draft pro	merican Recovery and DEC 13 2017 eliminary determination and to provide landownership lentified in OAR 690-382-0400(16)
If you need additional spa ☐ Check this box if Reinvestment A ☐ By signing this applic Department approval information and evid OR ☐ I (we) affirm the appl the name of the muni ☐ I (we) affirm that the	this project is Act. (Federal section, I (we) under the Grounds lence that I am a licant is a municipality or a present the Groundwalend the G	(Chaderstand that, upon water modification authorized to pursu cipality as defined edecessor; OR entity with the auther registration pro	eck one box) on receipt of the draft properties the modification as id in ORS 540.510(3)(b) a	merican Recovery and DEC 13 2017 eliminary determination and to provide landownership lentified in OAR 690-382-0400(16) and that the right is in erty and is acquiring

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 Groundwater registration has been conveyed. 12789

portion thereof, is located? Xes No If NO, include signatures of all deeded landowners (and mailing

Check the appropriate box, if applicable: ☐ Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district. IRRIGATION DISTRICT NAME **ADDRESS** None CITY STATE ZIP ☐ Check here if water for the Groundwater registration is supplied under a water service agreement or other contract with a federal agency or other entity. ENTITY NAME ADDRESS None CITY STATE ZIP To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used. **ENTITY NAME ADDRESS Clackamas County** 150 Beavercreek Rd CITY STATE ZIP **Oregon City** OR 97045 **ENTITY NAME** ADDRESS

STATE



ZIP

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INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 4 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 4 and paste as many additional sets of Part 4 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 4, 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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Part 4 of 4 - Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

Table 1. Location of Authorized and Proposed Point(s) of Appropriation (POA)

(Note: If the POA name is not specified in the registration, assign it a name or number here.)

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	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)		
Well #1	Authorized	STATE: 2/3-1R(1) COUNTY: 04516	2 S		3	E	1	SE	SE	1000	N86°W, 1305' from SE corner of Section 1		
Well #2	☐ Authorized ☐ Proposed		2	S	3	; E	1	SE	SE	2300	840' West amd 1270' North from corner of Section 1		
	Authorized					!			1				
•	Proposed									1			
	Authorized			1									
	☐ Proposed			1		į							

Check all type parentheses)		oelow	(modification "CODES" are provided in						
Plac	ee of Use (POU)	\boxtimes	Point of Appropriation (well) (POA)						
Cha	racter of Use (USE)	\boxtimes	Additional Point of Appropriation (APOA)						
Will all of th	e proposed changes affect the entir	e Gro	undwater registration?						
⊠ Yes	Complete only the proposed ("to" l "CODES" listed above to describe		section of Table 2 on the next page. Use the posed changes.						
☐ No	Complete all of Table 2 to describe the portion of the registration to be changed.								



Please use and attach additional pages of Table 2 as needed. See page 5 for instructions.

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

Table 2. Description of Modifications to Registration GR-1044 (Certificate # GR-1006)

List only the part of the registration that will be modified. For the acreage in each ¼ ¼, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

					ıppe	ars in	the reg	gistrat	ion BEF		s) OSED CHA at will be char		Proposed Changes (see		The	listi	ing a			appear		ER PR	n" lands) OPOSED (CHANGI	ES
Twp		Rng	5	Sec	ļ	4 1/4	Tax Lot	Gvt Lot or DLC	Acres	listed on	POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Twp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POA(s) to be used (from Table 1)	
	, 25 mg		ಕ್ಷಕ್ಕ	[79Ñ				ga kar Taga ya M				E	XAMPLE		Ž.	100		, 2000 J							
2 5	3	9		15		NW	17 1		15.0	Irrigation	POD #1 POD #2	1901	.POU/POD	-	, · . · .	E	-		NW	500	1.	10.0		POD #5	1901
"	4	. .	"	- 66 -	- 66	66 , 1	"		e . 	EXAMPLE	gradian Comment	66 pm	.	2 S	9	E.	.2	SW	NW	500		5.0		POD #6	1901
The second secon		!			-	:							POA/APOA	2 S	3	E	1	SE	SE	2300		34.7	Irrigation	Well #2	
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Additional remarks: _____.

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Groundwater Registration # GR-1044 (Certificate # GR-1006)

For a modification in place of use or character of use:

Are there other water right certificates, water use permits, or Groundwater registrations associated with the "from" or "to" lands? ☐ Yes ☒ No

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:



Pursuant to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the "to" lands must be filed separately with a Groundwater registration modification.

For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:

Well log(s) are attached for each well 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/)

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 adequate information is likely to delay the processing of your modification 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	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
2	No	N/A	400'	6"	20'	20'	40'	unk.	unk.	30 gpm
NOTE:	Well #2	NOT	YET	BUILT						
								REC	CEIVE	:D

DEC 13 2017



