



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

Application for District Temporary Water Right Transfer

Please type or print legibly in dark ink. If your application is incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "N/A" to indicate "Not Applicable." As you complete this form, please refer to notes and guidance included on the application. A summary of review criteria and procedures that are generally applicable to these applications is available at www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

Application for the _____ irrigation season.
 year

1. APPLICANT/AGENT INFORMATION

IRRIGATION DISTRICT EAST FORK IRRIGATION DISTRICT			PHONE NO. 541-354-1185	ADDITIONAL CONTACT NO.
ADDRESS PO BOX 162			FAX 541-354-5833	
CITY ODELL	STATE OR	ZIP 97044	E-MAIL JAYLENE.EFID@HREC.NE.T	
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.				

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.	
CITY	STATE	ZIP	E-MAIL	
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.				

2. PROPOSED CHANGE(S) TO WATER RIGHT(S)

- List **all** water rights to be affected by this transfer. Indicate the certificate, permit, decree or other identifying number(s) in the table below: If a certificate has been issued and reflects the current status of the water right, you need only list the certificate number.
 (Attach additional pages as necessary.)

	Application / Decree	Permit / Previous Transfer	Certificate
1.	- /	- / T-12676	80929
2.	- /	- / -	
3.	- /	- / -	
4.	- /	- / -	
5.	- /	- / -	
6.	- /	- / -	

- Check **all** proposed change(s) included in this transfer application:
 - Place of Use Point of Diversion or Point of Appropriation
 - Surface Water source to Ground Water source
 - Character or Type of Use

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3. CONSULTATION WITH STATE AGENCIES, LOCAL GOVERNMENTS, AND TRIBAL GOVERNMENTS

Is this transfer application for a change in point of diversion in response to an emergency?

Yes No

Has the district conferred with the Oregon Department of Fish and Wildlife, Division of State Lands, and affected local governments (e.g., county, city, municipal corporation), and tribal governments about the proposed point of diversion change? Yes No

If "Yes", for any of the above, list the agency or government name and the name and phone number of the appropriate contact person:

Agency/
Gov't Name: _____ Contact Name: _____ Phone: _____

Agency/
Gov't Name: _____ Contact Name: _____ Phone: _____

Agency/
Gov't Name: _____ Contact Name: _____ Phone: _____

Agency/
Gov't Name: _____ Contact Name: _____ Phone: _____

Agency/
Gov't Name: _____ Contact Name: _____ Phone: _____

4. CONSENT FOR A CHANGE IN TYPE OF USE OF A WATER RIGHT TO STORE WATER

Is this transfer application for a change in type of use of a water right to store water?

Yes No

Has the district received written consent to the change from the operator of the reservoir if different than the district, or from the appropriate federal agency if the water right to store water is issued in the name of a federal governmental agency? Yes No

If "Yes", for any of the above, label and attach a dated and signed copy of the written consent.

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5. ATTACHMENTS

Check each of the following attachments included with this application. The application will be returned if all required attachments are not included.

<p>Supplemental Form A – Description of Proposed Change(s) to a Water Right <input type="checkbox"/> A separate Supplemental Form A is enclosed for each water right to be affected by this transfer.</p> <p>Map XX Temporary Transfer A map meeting the requirements of OAR 690-385-3300 must be included but need not be prepared by a Certified Water Right Examiner.</p> <p>Consent to Transfer <input type="checkbox"/> A copy of the written consent, if applicable, for a change in type of use of a water right to store water.</p>	<p>Supplemental Water Right Statement <input type="checkbox"/> A written statement, if applicable, identifying supplemental water rights that will not be transferred, but remain unexercised at the authorized place of use during the irrigation season.</p> <p>Water Well Reports/Well Logs: <input type="checkbox"/> The application is for a change from surface water to ground water and copies of all water well reports are attached. <input type="checkbox"/> Water well reports are not available and attached is a description of construction details including well depth, static water level, and information necessary to establish the ground water body developed or proposed to be developed. <input type="checkbox"/> The application is for a surface water transfer and water well reports are not required.</p> <p>Fees: XX Amount enclosed: \$824.95 See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0900.</p>
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6. SIGNATURES

The district certifies the following:

- (1) The water right(s) proposed for transfer is a water right(s) subject to transfer and has not been forfeited for nonuse under ORS 540.610;
- (2) Each user affected by the proposed transfer has provided written authorization for the transfer and such authorization is on file with the district; and
- (3) The district has notified each affected user that the Department may condition or reject the transfer at any time to the extent necessary to avoid injury to an existing water right, and that the use of water on lands from which the water right is transferred (authorized place of use) and at the proposed place of use during the same irrigation season or calendar year may subject both the user and district to civil penalties.

On behalf of the district, I affirm that the information contained in this application is true and accurate.


 District Manager signature

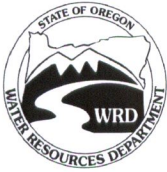
John R. Buckley _____ 4/9/18
 name (print) date

OR

 Authorized District Representative signature

Jaylene Hattig _____ 4/9/18
 name (print) date

<p>Before submitting your application to the Department, be sure you have:</p> <ul style="list-style-type: none"> • Answered each question completely. • Included all the required attachments. • Included a check payable to the Oregon Water Resources Department for the appropriate amount. 	<p>RECEIVED APR 12 2018</p>
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District Temporary Water Right Transfer Application

Supplemental Form A

DESCRIPTION OF PROPOSED CHANGE(S) TO A WATER RIGHT

List only **one** water right per page. **A separate Supplemental Form A must be completed for each certificate, permit, decree, or other right involved in the proposed transfer.**

Attach additional copies of Supplemental Form A as needed to describe other certificates, permits, decrees or other rights involved in this transfer.

- Certificate Number or other identifying number: 80929

1. TYPE OF CHANGE(S) PROPOSED

(Check ***all*** that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> Change to facilitate a change in Place of Use (The old point of diversion or appropriation will <u>not</u> be used for the portion of the water right affected by the transfer.) <input type="checkbox"/> Surface Water to Ground Water (A new point of appropriation will be used <u>instead of</u> the old point of diversion. The old point of diversion will <u>not</u> be used.) <input type="checkbox"/> Change in Point of Diversion in Response to an Emergency	<input type="checkbox"/> <u>All</u> of the right will be exercised at a different location than currently authorized (Use of water at the current location will be discontinued.) <input checked="" type="checkbox"/> <u>Only a portion</u> of the right will be exercised at a different location than currently authorized (Use of water at the current location will be discontinued.)	Proposed new use: <input type="checkbox"/> Change a water right to Store Water <input type="checkbox"/> Diminish an irrigation water right (primary) to a supplemental water right

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2. CURRENT WATER RIGHT INFORMATION

Water Right Subject to Transfer (check and complete one of the following):

<input checked="" type="checkbox"/> Certificated Right	<u>80929</u>	_____
	Certificate Number	Permit Number or Decree Name
<input type="checkbox"/> Adjudicated, Non-certificated Right	_____	_____
	Name of Decree	Page Number
<input type="checkbox"/> Permit for which Proof has been Approved	<u>-</u>	_____
	Permit Number	Date Claim of Beneficial Use Submitted
<input type="checkbox"/> Transferred Right for which Proof has been Filed	<u>-</u>	_____
	Previous Transfer Number	Date Claim of Beneficial Use Submitted

- Name on Permit, Certificate, or Decree: EAST FORK IRRIGATION DISTRICT
- County: HOOD RIVER
- Authorized Use(s) to be Affected by Transfer: IRRIGATION
- Priority Date(s): 03/13/1964

*If there are **multiple Priority Dates** identified on the water right, any information provided on **pages 3 through 6** of this form **must identify** which priority date is associated with each of the authorized and proposed points of diversion or appropriation and places of use.*

- Source(s) of Water to be Affected by Transfer: IRRIGATION

Tributary to: HOOD RIVER

*If there are **multiple Sources** listed on the water right, any information provided on **pages 3 through 6** of this form **must identify** which source is associated with each of the authorized and proposed points of diversion or appropriation and places of use.*

For applications proposing a Change in Place of Use or Character of Use:

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?
 Yes No N/A – No Change in Place of Use or Character of Use

If “Yes”, what are the Permit, Registration or Certificate Numbers? _____

*Pursuant to ORS 540.510, any “layered” water use or a right that is supplemental to a primary right proposed for transfer **must be included in the transfer or be cancelled**, except as provided in OAR 690-380-2240(5).*

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▪ Certificate Number or other identifying number: 80929

The following information **must be provided** *only* for those points of diversion or appropriation that **are involved in the transfer** (i.e., **list only the portion of the water right you propose to transfer.**) Attach additional pages as necessary.

A Point of Diversion (POD) describes the location of diversion from a surface water source.

A Point of Appropriation (POA) describes the location of appropriation from a ground water source or well.

If a point of diversion or appropriation is not numbered on the decree or water right certificate or permit, assign it a unique number in the following table (e.g. POD #1 or POA(well) #1). Use the number to refer to the point of diversion or appropriation serving the place of use described in Table I (Authorized Place of Use) and Table II (Proposed Place of Use).

Location of Existing Authorized Point(s) of Diversion or Appropriation to be Changed:

(i.e., the allowed point(s) of diversion or appropriation listed on the water right that will be affected by the proposed transfer, the "OFF or FROM" point(s) of diversion or appropriation)

Government lot(GOV" T LOT) and donation land claim numbers (DLC) must be included in the table below **only** if the information is reflected on the existing water right.

IF POA, OWRD WELL LOG ID NO. (OR WELL ID TAG NO. L-)	POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES
	1	1 S	10 E	04	NW SW	0	1	3750 FEET SOUTH AND 430 FEET EAST FROM THE NW CORNER OF SECTION 4

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▪ Certificate Number or other identifying number: 80929

▪ Does the water right being transferred involve a ground water source(s)?

Yes No (*Surface water source only.*)

If “**Yes**”, for each authorized point of appropriation (well) involved, you must either:

A. Supply a copy of the well log(s) for each point of appropriation that is **clearly labeled** and associated with the corresponding well in the table above and on the accompanying application map. (NOTE: You may search for well logs on the Department’s web page at: <http://www.wrd.state.or.us>)

or

B. If a well log is **not** available, you must describe the construction of the authorized point of appropriation by completing the table below. Attach additional copies as necessary.

Construction of Existing Authorized Point(s) of Appropriation – (Only needed if no well log is available.)

Wells in this listing must be **clearly tied** to corresponding well location(s) described in the table above and shown on the accompanying application map.

OWRD WELL NO. AS IDENTIFIED IN TABLE ABOVE	DIAMETER	TYPE AND SIZE OF CASING	NO. OF FEET OF CASING	INTERVALS CASING IS PERFORATED (IN FEET)	SEAL DEPTH	EST. DEPTH TO WATER	EST. DEPTH TO WATER BEARING STRATUM	TYPE OF ACCESS PORT OR MEASURING DEVICE	TOTAL WELL DEPTH

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	TOTAL:	6.50	
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▪ Certificate Number or other identifying number: _____

3. PROPOSED CHANGES TO THE WATER RIGHT

Describe proposed changes to the water right involving point(s) of diversion and/or appropriation necessary to facilitate a change in place of use. Measured distances described below should accurately correspond to the points shown on the accompanying application map. Attach additional pages as necessary.

Location of Proposed Point(s) of Diversion or Appropriation:

(i.e., the "ON or TO" point(s) of diversion or appropriation)

*(NOTE: Complete this table **only** if a Change in Point of Diversion or Appropriation is being proposed to facilitate a Change in Place of Use.)*

IF POA, OWRD WELL LOG ID NO. (OR WELL ID TAG NO. L-)	POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES

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▪ Certificate Number or other identifying number: 80929

If there are proposed point(s) of appropriation (wells) listed in the table above, are the well(s) already constructed?

Yes No N/A – No proposed well(s) listed above.

If “Yes”, attach and clearly label the corresponding well log(s) for each proposed well, or if well log(s) are **not** available, describe the construction of the well(s) using the table below. (NOTE: You may search for well logs on the Department’s web page at: <http://www.wrd.state.or.us>)

If “No”, describe the anticipated construction for the proposed well(s) in the following table:

Construction of Proposed Point(s) of Appropriation or Well(s)

Wells in this listing must be clearly tied to corresponding well location(s) described in the table above and shown on the accompanying application map.

OWRD WELL NO. AS IDENTIFIED IN TABLE ABOVE	DIAMETER	TYPE AND SIZE OF CASING	NO. OF FEET OF CASING	INTERVALS CASING IS PERFORATED (IN FEET)	SEAL DEPTH	EST. DEPTH TO WATER	EST. DEPTH TO WATER BEARING STRATUM	TYPE OF ACCESS PORT OR MEASURING DEVICE	TOTAL WELL DEPTH

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