

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

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.

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Check all items included with this application. (N/A = Not Applicable)

- Part 1 – Completed Minimum Requirements Checklist.
- 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.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 2 List them here: C-28656 & 33151**
Please include a separate Part 5 for each water right. (See instructions on page 6)

Attachments:

- Completed Transfer Application Map.
- 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 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)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- Application fee not enclosed/insufficient
- Land Use Form not enclosed or incomplete
- Additional signature(s) required
- Map not included or incomplete
- Part _____ is incomplete

Other/Explanation _____
 Staff: _____ 503-986-0 _____ Date: ____/____/____

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

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- 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.
- 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.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 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 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- 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.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- 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.
- 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.
- 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°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

FEE WORKSHEET for PERMANENT TRANSFER (Part 3 of 5 – Fee Worksheet

1	Base Fee (includes one type of change to one water right for up to 1 cfs)	<i>1</i>	\$1,160
	Types of change proposed: <input checked="" type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i>		
		RECEIVED MAY 25 2018 OWRD	
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	<i>2</i>	\$930
3	Number of water rights included in transfer <u>2 (3a)</u> Subtract 1 from the number in 3a above: <u>1 (3b)</u> <i>If only one water right this will be 0</i>		
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » »	<i>3</i>	\$520
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input checked="" type="checkbox"/> Yes: enter \$410 »	<i>4</i>	\$410
5	Do you propose to change the place of use or character of use? <input type="checkbox"/> No: enter 0 on line 5 » <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see example below*): <u>0.60 (5a)</u> Subtract 1.0 from the number in 5a above: <u>0 (5b)</u> If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$350, then enter on line 5 » » » » » » » » » » » »		
		RECEIVED MAY 25 2018 OWRD 0	
6	Add entries on lines 1 through 5 above » » » » » » » » » » » » Subtotal:	<i>6</i>	\$3020
7	Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> 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 » » If no box is applicable, enter 0 on line 7 »	<i>7</i>	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » » » Transfer Fee:	<i>8</i>	

*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 ÷ 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)	<i>1</i>	\$840.00
	Number of wells included in substitution _____ (2a) Subtract 1 from the number in 3a above: _____ (2b) <i>If only one well this will be 0</i>		
2	Multiply line 2b by \$410 and enter »	<i>2</i>	
3	Add entries on lines 1 through 2 above » » » » » » Fee for Substitution:	<i>3</i>	

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME William Dunbar/Dunbar Silvies River Ranch		PHONE NO. 541-589-0107	ADDITIONAL CONTACT NO. RECEIVED
ADDRESS 9622 Victor Rd		FAX NO. MAY 25 2018	
CITY Anchorage	STATE AK	ZIP 99515	E-MAIL OWRD
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 Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME Scott D. Montgomey		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401
ADDRESS PO Box 767		FAX NO. 844-273-9878	
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com
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.			

Explain in your own words what you propose to accomplish with this transfer application, and why: Combined wells together from all certificates & move off corners from two fields to a new pivot field under existing certificate 11060. Combining wells & changing well system to center pivot sprinkler instead of flood will save water & make the system more efficient.

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

Check One Box

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

I understand that prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Burns Herald.

I (we) affirm that the information contained in this application is true and accurate.

Applicant signature	William Dunbar Print Name (and Title if applicable)	Date
Applicant signature	Print Name (and Title if applicable)	Date

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*

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Part 4 of 5 – Applicant Information and Signature

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Applicant Information

APPLICANT/BUSINESS NAME William Dunbar/Dunbar Silvie's River Ranch		PHONE NO. 541-589-0107	ADDITIONAL CONTACT NO.
ADDRESS 9622 Victor Rd			FAX NO.
CITY Anchorage	STATE AK	ZIP 99515	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.			

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME Scott D. Montgomery		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401
ADDRESS PO Box 767			FAX NO. 844-273-9878
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com
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.			

Explain in your own words what you propose to accomplish with this transfer application, and why: Combined wells together from all certificates & move off corners from two fields to a new pivot field under existing certificate 11060. Combining wells & changing well system to center pivot sprinkler instead of flood will save water & make the system more efficient.

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

Check One Box

By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); OR

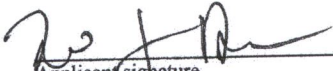
I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; OR

I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

I understand that prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Burns Herald

I (we) affirm that the information contained in this application is true and accurate.




Applicant signature

William Dunbar
Print Name (and Title if applicable)

Date 5/2/2018

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

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Check the following boxes that apply:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- 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.
- Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see:

<http://www.oregon.gov/owrd/docs/transfer-propertytransactions.pdf>

RECEIVING LANDOWNER NAME NA			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	

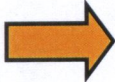
Describe any special ownership circumstances here: _____

- Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (**Tip: Complete and attach Supplemental Form D.**)

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

- Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP

 To meet State Land Use Consistency Requirements, you must list all county, city, municipal corporation, or tribal governments within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME Harney County	ADDRESS 450 N Buena Vista	
CITY Burns	STATE OR	ZIP 97720

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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.

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Part 5 of 5 – Water Right Information

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 # 28656

Description of Water Delivery System

System capacity: 0.13 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. **Water is pumped from well & conveyed by buried pipe to risers that irrigate the 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-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Howes Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		23	S	32	E	27	SE	NW		20.5 Chains S & 21 Chains E from the NW cor, Sec 27
#1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		23	S	32	E	27	NW	SW		1320' N & 1320' E from the SW cor, Sec 27
#2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		23	S	32	E	28	SW	NE		2890' N & 1520' W from the SE cor, Sec 28

Check all type(s) of change(s) proposed below (change “CODES” are provided in parentheses):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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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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 # 28656

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 "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES 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	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					
23	S	32	E	27	NE	NW		8.0	IS	Howes Well	1955	POU/APOA	23	S	32	E	27	NE	SW		7.5	IS	Howes #2, #3	1955			
23	S	32	E	27	NW	NW		5.1	IS	Howes Well	1955	POU/APOA	23	S	32	E	27	NW	SW		7.6	IS	Howes #2, #3	1955			
23	S	32	E	27	SW	NW		7.0	IS	Howes #2	1955	POU/APOA	23	S	32	E	27	SW	SW		7.5	IS	Howes #2, #3	1955			
23	S	32	E	27	SE	NW		10.0	IS	Howes #2	1955	POU/APOA	23	S	32	E	27	SE	SW		7.5	IS	Howes #2, #3	1955			
												POU/APOA															
TOTAL ACRES:							30.1							TOTAL ACRES:							30.1						

Additional remarks: _____.

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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? Yes No

If YES, list the certificate, water use permit, or ground water registration numbers: 1991 SW “IR”

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 irrigation)

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

Tip: You may search for well logs on the Department’s web page at:

http://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 than full rate of water right
Howes Well	Yes	See well log								
#3	Yes	See well log								
#2	Yes	See well log								

CERTIFICATE # 33151

Description of Water Delivery System

System capacity: **0.49** 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. **Water is pumped from well & conveyed by buried pipe to risers that flood 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-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		23 S	32 E	28	NW SW	4700	1320' N & 1320' E from the SW cor, Sec 27
Howes Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		23 S	32 E	27	SE NW	4600	20.5 Chains S & 21 Chains E from the NW cor, Sec 27
#2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		23 S	32 E	28	SW NE	4700	2890' N & 1520' W from the SE cor, Sec 28

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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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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 # 33151

List the change proposed for the acreage in each ¼ ¼. 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 "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	Rng	Sec	¼	¼	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		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date				
23	S	32	E	28	NE	SE	4700		7.9	IS	#2	1959	POU/APOA	23	S	32	E	27	NE	SW	4600		9.8	IS	Howes well, #2 & #3	1959
23	S	32	E	28	NW	SE	4700		8.3	IS	#2	1959	POU/APOA	23	S	32	E	27	NW	SW	4600		9.8	IS	Howes well, #2 & #3	1959
23	S	32	E	28	SW	SE	4700		12.1	IS	#2	1959	POU/APOA	23	S	32	E	27	SW	SW	4600		9.7	IS	Howes well, #2 & 3	1959
23	S	32	E	28	SE	SE	4700		10.7	IS	#2	1959	POU/APOA	23	S	32	E	27	SE	SW	4600		9.7	IS	Howes well, #2 & #3	1959
TOTAL ACRES:								39.0					TOTAL ACRES:								39.0					

Additional remarks: _____.

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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? Yes No

If YES, list the certificate, water use permit, or ground water registration numbers: **33152 SW “IR”**.



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 irrigation)

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

Tip: You may search for well logs on the Department’s web page at:

http://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 than full rate of water right
#3	See well log									
Howes Well										
#2										

OBSERVATION WELL

WATER WELL REPORT

STATE OF OREGON G1385

State Well No. 23/32-28B(2) State Permit No. G1273

File Original and First Copy with the STATE ENGINEER, SALEM, OREGON

HARN 599

(1) OWNER: Name L.L. Jacobs Address Burns Oregon

HUGH CASEY

(2) LOCATION OF WELL: County Harney Owner's number, if any #1 NW 1/4 NE 1/4 Section 28 T. 23S R. 32E W.M. Bearing and distance from section or subdivision corner 655' S & 1660' W from NE corner of sec 28.

(3) TYPE OF WORK (check): New Well [checked] Deepening [] Reconditioning [] Abandon []

PROPOSED USE (check): Domestic [] Industrial [] Municipal [] Irrigation [checked] Test Well [] Other []

(5) TYPE OF WELL: Rotary [] Cable [] Dug [] Driven [] Jetted [] Bored []

(6) CASING INSTALLED: Threaded [] Welded [] Diam. from ft. to ft. Gage

(7) PERFORATIONS: Perforated? [] Yes [] No Type of perforator used SIZE of perforations in. by in.

(8) SCREENS: Well screen installed [] Yes [] No Manufacturer's Name Model No. Slot size Set from ft. to ft.

(9) CONSTRUCTION: Was well gravel packed? [] Yes [] No Size of gravel: Gravel placed from ft. to ft. Was a surface seal provided? [] Yes [] No To what depth? Material used in seal- Did any strata contain unusable water? [] Yes [] No Type of water? Depth of strata Method of sealing strata off

(10) WATER LEVELS: Static level ft. below land surface Date Artesian pressure lbs. per square inch Date Log Accepted by: Submitted by L.L. Jacobs. [Signed] (Owner) Date, 19

(11) WELL TESTS: Drawdown is amount water level is lowered below static level Was a pump test made? [] Yes [] No If yes, by whom? Yield: gal./min. with ft. drawdown after hrs.

Bailer test gal./min. with ft. drawdown after hrs. Artesian flow g.p.m. Date Temperature of water Was a chemical analysis made? [] Yes [] No

(12) WELL LOG: Diameter of well 10 inches. Depth drilled 140 ft. Depth of completed well 140 ft. Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

Table with columns MATERIAL, FROM, TO. Handwritten log entries: Well No. 1. 0-8' top soil, 8'-32' brown gypsiferous sand, 32-49 blue clay, 49-55 coarse gravel & water, 55-72 smaller gravel water, 72-107 blue clay, 107-111 gravel sand water, 111-140 blue sedimentary clay. casing 9.5' perforations 50' - 18'

RECEIVED

MAY 25 2018

OWRD

Work started 19 Completed 19

(13) PUMP: Manufacturer's Name Type: H.P.

Well Driller's Statement: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. NAME (Person, firm, or corporation) (Type or print) Address Driller's well number [Signed] (Well Driller) License No. Date, 19

HARN 51470

HARN 51470

STATE PERMIT # G1273

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 93561

START CARD # 197408

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number
Name WILLIAM J. DUNBAR
Address 11050 HIDEAWAY LAKE CIRCLE
City ANCHORAGE State AK Zip 99507

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 300 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
			<u>EXISTING SEAL UNDISTURBED</u>			

How was seal placed: Method A B C D E
 Other

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Casing:	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
<u>ORIGINAL CASING</u>	<u>10"</u>	<u>0</u>	<u>93'</u>					
Liner:								

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>375</u>		<u>280'</u>	<u>1 1/2 hr.</u>
<u>500</u>		<u>140'</u>	<u>1 hr.</u>
<u>600</u>		<u>100'</u>	<u>1/2 hr.</u>

Temperature of water 52° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom RECEIVED
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other
Depth of strata: _____
JUL 18 2008

(9) LOCATION OF WELL (legal description)
County HARNEY
Tax Lot 4700 Lot _____
Township 23 N or S Range 32 E or W WM
Section 28 NW 1/4 NE 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 3498 RYE GRASS LN.

(10) STATIC WATER LEVEL
40 ft. below land surface. Date 7-04-08
43 ft. below land surface. Date 7-15-08
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES ORIGINAL WELL LOG
Depth at which water was first found 8'

From	To	Estimated Flow Rate	SWL
<u>55</u>	<u>285</u>	<u>600+</u>	<u>43'</u>

(12) WELL LOG Ground Elevation 4150
Material From To SWL
SEE ORIGINAL WELL LOG 23/32-28B(2) 0 2 140
BLUE GRAY SOFT CLAYSTONE 140 186 43'
BROKEN
SOFT SANDSTONE WITH CLAYSTONE LAYERS 186 285 43'
BROKEN
HARD SANDSTONE 285 300 43'
(NOTE: HARN 519)
(ST. OF OR G1385)

Date Started 7-04-08 Completed 7-14-08

(unbonded) Water Well Constructor Certification
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.

WWC Number _____ Date MAY 25 2018

Signed _____

(bonded) Water Well Constructor Certification OWRD
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.

WWC Number 1355 Date 7-15-08

Signed Arthur L. Jay

HARN 51521

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 93561

START CARD # 199654

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Owner Well I.D. _____
First Name William Last Name DUNBAR
Company _____
Address 11050 HIDEAWAY LAKE CIRCLE
City ANCHORAGE State AK Zip 99567

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/Commercial Livestock Dewatering Injection
 Thermal Other _____

(5) BORE HOLE CONSTRUCTION Special Standard: Yes (attach copy)
Depth of Completed Well 295 ft.

BORE HOLE			SEAL			Scks/lbs
Dia	From	To	Material	From	To	
10"	110	295	SEAL	UNDISTURBED		

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Csng	Lnr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
	✓	8"	+	2	295	2.50	-			✓

Shoe Inside Outside Other Location of shoe(s) _____
Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method HOLTE PERFORATOR
Screens Type _____ Material _____

Perf	Scrn	Csng	Lnr	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size
✓			✓		170	290	1/8	1"	192	4" P.E.

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min 260 Drawdown _____ Drill stem/Pump depth 170 Duration (hr) 16

Temperature _____ °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) _____
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 23 N of S Range 32 E or W W.M.
Sec 28 NW 1/4 of the NE 1/4 Tax Lot 4700
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
Street Address of Well (or nearest address) 3498 RYEGRASS LN. BURNS, OR

(10) STATIC WATER LEVEL
Date _____ SWL (psi) _____ + SWL (ft) _____
Existing Well/Predeepening _____
Completed Well 2-01-09 - 39'
Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found _____

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)

(11) WELL LOG Ground Elevation _____
Material _____ From _____ To _____
SEE ORIGINAL WELL REPORT
RECEIVED BOTTOM 5' OF ORIGINAL WELL FILLED IN
MAY 25 2018
OWRD
Date Started 1-27-09 Completed 1-29-09

(unbonded) Water Well Constructor Certification
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 1739 Date 2-02-09
Signed Chavez Jay

(bonded) Water Well Constructor Certification
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.
License Number 1355 Date 2-01-09
Signed Arthur L Jay
Contact Info. (optional) _____

WATER WELL REPORT

State Well No. 23/32-28G
 State Permit No. _____

HARNEY 602

STATE OF OREGON G1614

(1) OWNER:
 Name L.L. Jacobs
 Address Burns Oregon

(2) LOCATION OF WELL:
 County Harney Owner's number, if any #2
SW 1/4 NE 1/4 Section 28 T. 23S R. 32E W.M.
 Bearing and distance from section or subdivision corner
2355' S and 1660' W
from NE cor of section 28

(3) TYPE OF WORK (check):
 New Well Deepening Reconditioning Abandon
 If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check): Domestic Industrial Municipal
 Irrigation Test Well Other
(5) TYPE OF WELL: Rotary Driven
 Cable Jetted
 Dug Bored

(6) CASING INSTALLED: Threaded Welded
 " Diam. from _____ ft. to _____ ft. Gage _____
 " Diam. from _____ ft. to _____ ft. Gage _____
 " Diam. from _____ ft. to _____ ft. Gage _____

(7) PERFORATIONS: Perforated? Yes No
 Type of perforator used _____
 SIZE of perforations in. by in.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.

(8) SCREENS: Well screen installed Yes No
 Manufacturer's Name _____
 Type _____ Model No. _____
 Dia. _____ Slot size _____ Set from _____ ft. to _____ ft.
 _____ Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:
 Was well gravel packed? Yes No Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.
 Was a surface seal provided? Yes No To what depth? _____ ft.
 Material used in seal—
 Did any strata contain unusable water? Yes No
 Type of water? _____ Depth of strata _____
 Method of sealing strata off _____

(10) WATER LEVELS:
 Static level _____ ft. below land surface Date _____
 Artesian pressure _____ lbs. per square inch Date _____
 Log Accepted by: Submitted by L.L. Jacobs.
 [Signed] _____ Date _____, 19____
 (Owner)

(11) WELL TESTS: Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes No If yes, by whom? _____
 Yield: 1000 gal./min. with _____ ft. drawdown after _____ hrs.
 " " " " " "
 " " " " " "
 Bailer test gal./min. with _____ ft. drawdown after _____ hrs.
 Artesian flow _____ g.p.m. Date _____
 Temperature of water _____ Was a chemical analysis made? Yes No

(12) WELL LOG: Diameter of well 14 inches.
 Depth drilled _____ ft. Depth of completed well 250 ft.
 Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Well No 2		
1.7" casing		
0-5' top soil		
5-32' brown quick sand		
32-50' blue clay		
50-69' gravel and water		
69-110' blue clay		
110-116' gravel and water		
116-140' blue clay		
140-162' gravel and water		
162-217' blue clay		
217-228' sand and gray clay		
228-238' gravel and water		
238-250' blue clay		
casing 146'		
perforations 50'-140'		
RECEIVED		
MAY 25 2018		
OWRD		

Work started _____ 19____ Completed _____ 19____

(13) PUMP: Manufacturer's Name Perless deep well
 Type: Turbine H.P. 30 H.P.

Well Driller's Statement:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 NAME _____ (Person, firm, or corporation) (Type or print)
 Address _____
 Driller's well number _____
 [Signed] _____ (Well Driller)
 License No. _____ Date _____, 19____