



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](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? 1 List them here: 83738**  
 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):**

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Part _____ is incomplete
<input type="checkbox"/> Additional signature(s) required	
Other/Explanation _____	
Staff: _____ 503-986-0_____	Date: ____/____/____

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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/](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)	1	\$1,160
	Types of change proposed: <input checked="" type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>1 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b) If only one change, this will be 0</u>		<b>RECEIVED</b>  <b>JAN 23 2019</b>  <b>OWEB</b>
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	0
	Number of water rights included in transfer <u>1 (3a)</u> Subtract 1 from the number in 3a above: <u>0 (3b) If only one water right this will be 0</u>		
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » »	3	0
	Do you propose to add or change a well, or change from a surface water POD to a well? <input checked="" type="checkbox"/> No: enter 0 » <input type="checkbox"/> Yes: enter \$410 »	4	0
	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>0.16 (5a)</u> Subtract 1.0 from the number in 5a above: <u>-0.84 (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 » » » » » » » » » » » » » » » »		
5		5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » » » » » » » » Subtotal:	6	1160.00
	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» »		
7		7	
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » <b>Transfer Fee:</b>	8	<u>1160<sup>00</sup></u>

*\*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)	1	\$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 » » » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » » <b>Fee for Substitution:</b>	3	

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Part 4 of 5 - Applicant Information and Signature

Applicant Information

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APPLICANT/BUSINESS NAME Sexton Land LLC		PHONE NO. 541-519-5718	ADDITIONAL CONTACT NO.
ADDRESS 47307 Anthony Lakes Hwy			FAX NO.
CITY Haines	STATE OR	ZIP 97833	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

APPLICANT/BUSINESS NAME Paul Garvin / Farallon Consulting		PHONE NO. 503-247-7188	ADDITIONAL CONTACT NO.
ADDRESS 4380 SW Macadam Ave Ste 500			FAX NO.
CITY Portland	STATE OR	ZIP 97239	E-MAIL pgarvin@farallonconsulting.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:  
I would like to flip flop some of my 1895 ground with my 1873.

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: Baker City Herald.

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

  
Applicant signature

John R. Sexton  
Print Name (and Title if applicable)

1-3-19  
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 and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.*

Check the following boxes that apply:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant. OWRD
- 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			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 <b>Powder Valley Water Control District</b>	ADDRESS <b>P.O. Box 189      690 E St.</b>		
CITY <b>North Powder</b>	STATE <b>OR</b>	ZIP <b>97867</b>	

- 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	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 <b>Baker County</b>	ADDRESS <b>1995 3<sup>rd</sup> St.</b>		
CITY <b>Baker City</b>	STATE <b>OR</b>	ZIP <b>97814</b>	

ENTITY NAME	ADDRESS		
CITY	STATE	ZIP	

## INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 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.

### 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 5, ~~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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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 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

# 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 # 83738**

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**Description of Water Delivery System**

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System capacity: 50 cubic feet per second (cfs) OR  
 \_\_\_\_\_ gallons per minute (gpm)

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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. **Currently the water is diverted from the North Powder River through the Hutchison Hillside ditch delivered to my property through and open ditch and then used to flood irrigate my property.**

**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)
HH / GM	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		7	S	38	E	5	NW	NE		2760' South & 2380' West from the E1/4 corner of Sect. 32
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										

**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 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.

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 # 83738**

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				
<b>EXAMPLE</b>																										
2	S	9	E	15	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
7	S	39	E	7	SW	SW	1600		8.2	Irrigation	HH/GM	1873	POU	7	S	39	E	7	NW	SW	1600		8.2	Irrigation	HH/GM	1873
7	S	39	E	7	NW	SW	1600		8.2	Irrigation	HH/GM	1895	POU	7	S	39	E	7	SW	SW	1600		8.2	Irrigation	HH/GM	1895
TOTAL ACRES:							16.4						TOTAL ACRES:							16.4						

Additional remarks: C-83738 describes the POD as being located in the NWNE of Sect. 5 T6S, R. 38E. There was a scrivener's error on the certificate and the actual location of the Hutchison Hillside-Gardner Millrace ditch is in the NWNE of Sect. 5 T7S, R38E. RECEIVED

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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: **34641, 12040, 83801, 83803.**



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**

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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](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

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# Supplemental Form D



Oregon Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem, Oregon 97301-1266  
 503-986-0900  
 www.oregon.gov/OWRD

## Water Right Transfers Within the Boundaries of or Served by an Irrigation or Other District

[For transfers submitted under OAR Chapter 690 Division 380]

The Department requires non-district applicants to communicate with districts during the planning and preparation of transfer applications involving water rights having a point of diversion/appropriation (POD/POA) or place of use (POU) served by or located within the boundaries of a district. In some cases district consent to the transfer will be required.

This form must be included with your transfer application if the transfer involves rights served by or located within the boundaries of a district. Use this form for either permanent or temporary transfers.

### 1. APPLICANT INFORMATION

NAME SEXTON LAND LLC		PHONE (HM)	
PHONE (WK)	CELL 541-519-5718	FAX	
ADDRESS 47307 ANTHONY LAKES HWY			
CITY HAINES	STATE OR	ZIP 97833	E-MAIL**

### 2. DISTRICT INFORMATION

DISTRICT NAME POWDER VALLEY WATER CONTROL DISTRICT		PHONE (HM)	
PHONE (WK) 541-898-2366	CELL	FAX	
ADDRESS P.O. Box 189			
CITY NORTH POWDER	STATE OR	ZIP 97867	E-MAIL**

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\*\* By providing an e-mail address, the applicant and/or the district consent to receive all correspondence from the Department electronically. Copies of final order documents will also be mailed.

### 3. WATER RIGHTS ISSUED IN THE NAME OF, or LOCATED WITHIN, or SERVED BY AN IRRIGATION OR OTHER DISTRICT

a. List the water right(s) involved in this transfer:

	Application / Decree	Permit / Previous Transfer	Certificate	Is the Water Right in the Name of a District or BOR*?
1.	North Powder	-	83738	YES <input type="checkbox"/>
2.		-		YES <input type="checkbox"/>
3.		-		YES <input type="checkbox"/>

Attach additional pages for additional water rights if necessary.

\*Bureau of Reclamation

b. Determine a district's association with your points of diversion (POD) or appropriation (POA) and places of use (POU). [If you are uncertain how to respond to the questions, please consult the district.]

**CURRENT ASSOCIATIONS** Please answer the following "yes" or "no" questions:

YES  NO  One or more of the current POD(s) / POA(s) involved in the transfer are served by a district or rely on Bureau of Reclamation (BOR) water.

YES  NO  All or a portion of the current POU involved in this proposed transfer receives water for either primary or supplemental irrigation from the district; i.e., the POU is currently layered with a district or BOR water supplied water right(s).

**PROPOSED ASSOCIATIONS** Please answer the following "yes" or "no" questions:

YES  NO  One or more of the proposed POD(s) / POA(s) involved in the transfer are currently served or will be served by a district if the transfer is approved, or rely on BOR water.

YES  NO  All or a portion of the proposed POU involved in this proposed transfer currently receives or will receive either primary or supplemental irrigation from the district; i.e., the POU will be layered with a district or BOR water supplied water right(s).

COMMENTS OR ADDITIONAL INFORMATION ABOUT RELATIONSHIPS BETWEEN APPLICANT'S AND DISTRICT'S and/or BOR'S WATER RIGHTS

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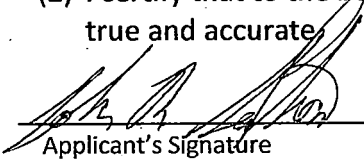
**4. APPLICANT'S SIGNATURE**

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(1) I certify that I have notified the district about the proposed water right transfer application by [check one]:

email,  phone,  postal mail,  in person, or  other (please specify) \_\_\_\_\_

(2) I certify that to the best of my knowledge the information contained in this Supplemental Form D is true and accurate.

  
Applicant's Signature

John R. Sexton  
Name (print)

1-3-19  
Date

**5. (WHEN REQUIRED) DISTRICT CONSENT TO THE PROPOSED WATER RIGHT TRANSFER**

**District consent is required if any box on this form is marked "YES."**

The district certifies the following:

- (1) The district has reviewed the applicant's proposed water right transfer application and maps; and
- (2) The district consents to the proposed water right transfer application.

YES  NO  After proof of completion, the confirming water right certificate is to remain in the name of the U.S. Bureau of Reclamation or the district.

YES  NO  The district will be responsible for submitting the claim of beneficial use.

\_\_\_\_\_  
District Manager Signature

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Date

# Application for Water Right Transfer

## Evidence of Use Affidavit



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

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon )  
 ) ss  
 County of BAKER)

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I, DICK SEXTON, in my capacity as OWNER/OPERATOR,  
 mailing address 47307 ANTHONY LAKES HWY., HAINES, OR 97833  
 telephone number (541)519-5718, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation                       Professional expertise

2. I attest that:

- Water was used during the previous five years on the **entire** place of use for Certificate # 83738; **OR**
- My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township		Range		Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

**OR**

- Confirming Certificate # \_\_\_\_\_ has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: \_\_\_\_\_ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # \_\_\_\_\_ (For Historic POD/POA Transfers)

(continues on reverse side)

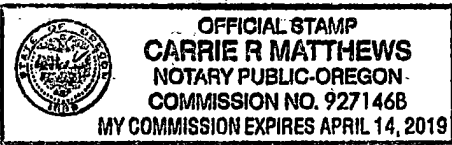
3. The water right was used for: (e.g., crops, pasture, etc.): CROPS & PASTURE

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

[Signature]  
Signature of Affiant

1-3-19  
Date

Signed and sworn to (or affirmed) before me this 03 day of January, 2019.



Carrie R. Matthews  
Notary Public for Oregon

My Commission Expires: 4/14/2019

Supporting Documents:	Examples:
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of <b>confirming</b> water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> <li>● Power usage records for pumps associated with irrigation use</li> <li>● Fertilizer or seed bills related to irrigated crops</li> <li>● Farmers Co-op sales receipt</li> </ul>
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> <li>● District assessment records for water delivered</li> <li>● Crop reports submitted under a federal loan agreement</li> <li>● Beneficial use reports from district</li> <li>● IRS Farm Usage Deduction Report</li> <li>● Agricultural Stabilization Plan</li> <li>● CREP Report</li> </ul>
<input checked="" type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – <a href="http://www.oregonexplorer.info/imagery">www.oregonexplorer.info/imagery</a> OWRD – <a href="http://www.wrd.state.or.us">www.wrd.state.or.us</a> Google Earth – <a href="http://earth.google.com">earth.google.com</a> TerraServer – <a href="http://www.terra-server.com">www.terra-server.com</a></p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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OREGON SECRETARY OF STATE  
**Corporation Division** OWRD

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**Business Name Search**

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**Business Entity Data**

12-17-2018  
09:53

Registry Nbr	Entity Type	Entity Status	Jurisdiction	Registry Date	Next Renewal Date	Renewal Due?
068373-97	DLLC	ACT	OREGON	03-06-2002	03-06-2019	
<b>Entity Name</b> SEXTON LAND LLC						
<b>Foreign Name</b>						

New Search Printer Friendly

**Associated Names**

<b>Type</b>	PPB	PRINCIPAL PLACE OF BUSINESS			
<b>Addr 1</b>	47307 ANTHONY LAKES HWY				
<b>Addr 2</b>					
<b>CSZ</b>	HAINES	OR	97833	<b>Country</b>	UNITED STATES OF AMERICA

Please click [here](#) for general information about registered agents and service of process.

Type	AGT	REGISTERED AGENT	Start Date	03-06-2002	Resign Date
<b>Name</b>	JOHN	R	SEXTON		
<b>Addr 1</b>	47307 ANTHONY LAKES HWY				
<b>Addr 2</b>					
<b>CSZ</b>	HAINES	OR	97833	<b>Country</b>	UNITED STATES OF AMERICA

<b>Type</b>	MAL	MAILING ADDRESS			
<b>Addr 1</b>	47307 ANTHONY LAKES HWY				
<b>Addr 2</b>					
<b>CSZ</b>	HAINES	OR	97833	<b>Country</b>	UNITED STATES OF AMERICA

Type	MEM	MEMBER	Resign Date
<b>Name</b>	JOHN	R	SEXTON
<b>Addr 1</b>	47307 ANTHONY LAKES HWY		
<b>Addr 2</b>			
<b>CSZ</b>	HAINES	OR	97833
<b>Country</b>	UNITED STATES OF AMERICA		

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