

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. RECEIVED Check all items included with this application. (N/A = Not Applicable)FEB 1 1 2019 X Part 1 - Completed Minimum Requirements Checklist. OWRD M Part 2 – Completed Transfer Application Map Checklist. \boxtimes 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. \square Part 4 – Completed Applicant Information and Signature. \boxtimes Part 5 – Information about Water Rights to be Transferred: How many water rights are to be transferred? 5 List them here: C-52784, 67903, 76942, 88719 & 86164 Please include a separate Part 5 for each water right. (See instructions on page 6) Attachments: \boxtimes Completed Transfer Application Map. M 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.) \bowtie 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. X 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 usec 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. 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 Map not included or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part ____ is incomplete Other/Explanation Staff: 503-986-0 Date:

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Part 2 of 5 - Transfer Application Map Checklist

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

		sure that the transfer application map you submit includes all the required items and he existing water right map. Check all boxes that apply.
\boxtimes	□ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/ . CWRE stamp and signature are not required for substitutions.
\boxtimes	□ N/A	If more than three water rights are involved, separate maps are needed for each water right.
\boxtimes		Permanent quality printed with dark ink on good quality paper.
		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
\boxtimes		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.
\boxtimes		Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
\boxtimes		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.
\boxtimes	□ N/A	Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
\boxtimes		Existing point(s) of diversion or well(s) with distance and bearing or coordina es from a recognized survey corner. This information can be found in your water right certificate or permit.
	□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example $-42^{\circ}32^{\circ}15.5^{\circ}$) 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 cts)	1	\$1,160
	Types of change proposed: RECEIVED		
	≥ Place of Use		
į	Character of Use FEB 1 1 2019		
	Point of Diversion/Appropriation		
	Number of above boxes checked = $\frac{2(2a)}{(2a)}$	1	
_	Subtract 1 from the number in line $2a = 1 (2b)$ If only one change, this will be 0		#0 2 0
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » »	2	\$930
	Number of water rights included in transfer 5 (3a)		
	Subtract 1 from the number in 3a above: 4 (3b) If only one water right this will		:
	be 0	,	#2000
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » »	3 .	\$2080
	Do you propose to add or change a well, or change from a surface water POD		
	to a well?		
4	No: enter 0 »» » » » » » » » » » » » » » » » » »		¢410
4	Yes: enter \$410 » » » » » » » » » » » » » » » » » » »	4	\$410
	Do you propose to change the place of use or character of use?		
	No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »		
	Yes: enter the cfs for the portions of the rights to be transferred (see		
	example below*): 2.92 (5a)		
	Subtract 1.0 from the number in 5a above: 1.92 (5b)		
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » » » »		
_	If 5b is greater than 0, round up to the nearest whole number: 2 (5c) and	ا ہ	6700 1
5	multiply 5c by \$350, then enter on line 5 » » » » » » » »	5	\$700 ′
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$5280
	Is this transfer:		
	necessary to complete a project funded by the Oregon Watershed		
	Enhancement Board (OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net		
	benefit to fish and wildlife habitat?	ļ	
7	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »	7	60
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » » » » »	7	\$0
8	Subtract line 7 from line 6 » » » » » » » » » » » » Transfer Fee:	8	\$5280

*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 \div 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	OP.	
1	Base Fee (includes change to one well)	1	\$840.00
	Number of wells included in substitution (2a)		
	Subtract 1 from the number in 3a above: (2b) If only one well this will be 0		
2	Multiply line 2b by \$410 and enter » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above " " " Fee for Substitu.ion:	3	

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FFB 1 1 2019 Part 4 of 5 - Applicant Information and Signature

Applicant Information		I I 2010								
APPLICANT/BUSINESS NAME Buckley Church/Church Famil Farms Inc		WRD nc & Church Hay	PHONE NO. 541-408-6747	ADDITIONAL CONTACT NO.						
ADDRESS PO Box 751				FAX NO.						
CITY Christmas Valley	STATE OR	ZIP 97641	E-MAIL							
BY PROVIDING AN E-MAIL A	DDRESS, O	CONSENT IS GIVEN	TO RECEIVE ALL	CORRESPONDENCE FROM THE						
DEPARTMENT ELECTRONIC										
Agent Information — The ag	ent is auth	norized to represen	t the applicant in al	l matters relating to this application						
Scott D Montgomery			541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401						
ADDRESS PO Box 767				FAX NO.						
CITY Terrebonne	STATE	ZIP	E-MAIL							
	OR DDRESS, O	97760 CONSENT IS GIVEN	scott@apeands.co	CORRESPONDENCE FROM THE						
Check this box if this pr Reinvestment Act. (Fed			ınded by the Ame	rican Recovery and						
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.										
the Department for publication right is located, once per week suggest publishing the notice is I (we) affirm that the inform	of a notice for two controlled for the follo	te in a newspaper wonsecutive weeks. wing newspaper: I tained in this applications.	vith general circular If more than one qu Lakeview Examiner lication is true and	l accurate.						
Applicant signature Applicant Signature Applicant signature	1	Buckley Church Family Fan Buckley Church Church Hay Farms,	ch, President	01/23/19 01/23/19 Date						
Is the applicant the sole own	er of the	•		ortion thereof, proposed for						

transfer is located? Tes No If NO, include signatures of all deeded landowner. (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 to	hat apply	:								
The applicant is resp continue to be sent to		-	tion of	change(s). Notic	es and correspondence	e should				
		_		1	e proposed change(s) a uld be sent to this land					
					for completion of hadowner and the application					
At this time, are the lands in	this tran	sfer applic	cation in	n the process of	being sold? 🗌 Yes 🛭] No				
If YES, and you know v information table below assignment will have to	. If you d	o not knov	w who t							
If a property sells, the counless a sale agreement http://www.oregon.gov/	or other o	document	states o	therwise. For me	ore information see:	vner,				
RECEIVING LANDOWNER NAME				PHONE NO.	ADDITIONAL CONTA	CT NO.				
NA ADDRESS				<u> </u>	FAX NO.					
CITY	STATE	ZIP		E-MAIL						
Check here if any of the an irrigation or other wa	_									
IRRIGATION DISTRICT NAME NA			ADDRES							
CITY			STATE		Zh'					
Check here if water for a for stored water with a f	-				vice agreement or oth	er contra				
ENTITY NAME NA			ADDRES	S						
CITY			STATE		ZIP					
To meet State Land Use Co.	•	-								
corporation, or tribal govern	ments w	ithin whos			I be diverted, conveye	d or used				
ENTITY NAME Lake County Planning			ADDRES							
CITY Lakeview			STATE ZIP 97630							

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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 # 52784

Description of Water Delivery System

System capacity: 0.71 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. The right was used under a swing arm pivot system per T-11355 from 4/19/2012 to 10/31/2016.

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)	Ţì	wp	R	ng	Sec	! /4	/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#1	□ Authorized □ Proposed	LAKE 1077	27	s	17	E	32	NE	sw	8000	1320' N 7 2640' E from SW Cor, Sec 32
#4	☐ Authorized ☐ Proposed	LAKE 1411	28	s	16	E	21	SE	NW	100	1990' S & 3280' W from NE cor, Sec 21
#5	☐ Authorized ☐ Proposed	LAKE 51631	27	s	16	E	25	NE	SE	1400	800' S & 10' W from the E1/4 cor, Sec 25
#6	☐ Authorized ☐ Proposed	LAKE 50469	27	s	16	E	25	sw	sw	2800	1315' N & 1315' E from the SW cor, Sec 25

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses): Place of Use (POU) Supplemental Use to Primary Use (S to P) Character of Use (USE) Point of Appropriation/Well (PDA) Point of Diversion (POD) Additional Point of Appropriation (APOA) X Additional Point of Diversion (APOD) Substitution (SUB) Surface Water POD to Ground Water Government Action POD (GOV) POA (SW/GW) 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 # 52784

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)												PROPOSED (the "to" or "on" lands)														
'	The listing that appears on the certificate BEFORE PROPOSED CHANGE											NGES	Proposed	The listing as it would appear AFTER PROPOSED (CHANG	ES					
	List only that part or portion of the water right that will be changed.										Changes (see	are made.															
Т	γp	Rn	g	Sec		/4 · / 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	"CODES" from previous page)	Tv	P.	Rı	ig.	Sec	1/4	/4	Tax Lot	Gyt Lot or DLC	Acres	New Type of USE	POD(s)/POA(s) to be used (from Table 1)	Priority Date
26	s	18	E	32	NE	s	W	8000		6.7	IR	#1	1978	POU/POA/ APOA	27	s	16	E	25	SE	sw	2800		31.4		5 & 6	1978
26	s	18	E	32	SE	S	W	8000		6.2	IR	#1	1978	POU/POA/ APOA	27	s	16	E	25	sw	SE	3100		22.3		5 & 6	1978
26	s	18	E	32	NE		SE	8000		22.5	IR	#1	1978	POU/POA	28	s	16	E	21	sw	NW			2.5		#4	1978
26	S	18	E	32	NV	v S	SE	8000		5.3	IR	#1	1978	POU/POA	28	s	16	E	21	SE	NW			0.3		#4	1978
26	s	18	E	32	SW	7 5	SE	8000		10.3	IR	#1	1978	POU/POA/ APOA													
26	s	18	E	32	SE		SE	8000		5.5	IR	#1	1978	POU/POA/ APOA													
		-	:																								
	TOTAL ACRES: 56.5															-	ГОТА	L ACR	ES:	56.5							

Additional remarks: ____.

Revised 7/27/2017

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For Place of Use or Character of Use Changes

LOLI	face of Ose of Character of Ose Changes	
	there other water right certificates, water use permits or ground water registrant the "from" or the "to" lands? Yes No	ations associated
If Y	ES, list the certificate, water use permit, or ground water registration numbers	s:
a pr to a	suant to ORS 540.510, any "layered" water use such as an irrigation right that imary right proposed for transfer must be included in the transfer or be cancel ground water registration must be filed separately in a ground water registration.	led. A sy change
For S	ubstitution (ground water supplemental irrigation will be substituted for surf irrigation)	ace water primary
	und water supplemental Permit or Certificate #; face water primary Certificate #	RECEIVED
For a	change from Supplemental Irrigation Use to Primary Irrigation Use	FEB 1 1 2019
Ider	ntify the primary certificate to be cancelled. Certificate #	OWRD
For a	change in point(s) of appropriation (well(s)) or additional point(s) of app	propriation:
	Well log(s) are attached for each authorized and proposed well(s) that are classociated with the corresponding well(s) in Table 1 above and on the accormap. 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	
AN	D/OR	
	Describe the construction of the authorized and proposed well(s) in Table 3 not have a well log. For <i>proposed wells not yet constructed or built</i> , provide each requested information element in the table. The Department recommer licensed well driller, geologist, or certified water right examiner to assist wi information necessary to complete Table 3.	e "a best estimate" for ads you consult a
ny we	Construction of Point(s) of Appropriation ell(s) in this listing must be clearly tied to corresponding well(s) described in Impanying application map. Failure to provide the information will delay the	

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 \mathbf{A} 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	f an existing well: OWRD Well ID Tag No.	Total well	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	level of completed	Source aquifer	Well -speci rate (cfs o gpm). <u>If</u> le han full rate water righ
#1	See well log									
#4	See well log									

Proposed or Authorized POA Name or Number	Is well already	If an existing well: DWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Source aquifer	Well -speci rate (cfs o gpm). If le han full rate water righ
#5	See well log								
#6	See well log								

CERTIFICATE # 67903

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Description of Water Delivery System

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System capacity: <u>0.29</u> cubic feet per second (cfs) **OR**

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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 #5 & conveyed by buried pipe to a wheel line system.

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)	T	wp'	R	ng	Sec	1/4	/ 4	Tax Eot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#5	□ Authorized □ Proposed	LAKE 1397/4097	28	s	16	E	15	sw	NW		2650' N & 1310' E from SW cor, Sec 15
A	☐ Authorized ☐ Proposed	LAKE 687	26	s	18	E	31	NE	NE		1410' N & 1320' E from the C1/4 cor, Sec 31

Check a	ll type(s) of change(s) proposed below (c	hange	"CODES" are provided in parentheses):								
\boxtimes	Place of Use (POU)		Supplemental Use to Primary Use (S to P)								
	Character of Use (USE)	\boxtimes	Point of Appropriation/Well (POA)								
	Point of Diversion (POD)		Additional Point of Appropriation (APOA)								
	Additional Point of Diversion (APOD)		Substitution (SUB)								
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV)								
Will all of the proposed changes affect the entire 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.										

Complete all of Table 2 to describe the portion of the water right to be changed.

⊠ No

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 # 67903

List the change proposed for the acreage in each ½ 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 CHANC												PROPOSED (the "to" or "on" lands)											
1	The	list	ting	that	appe	ears o	n the o	certifi	cate BE	FORE PROI	POSED CHA	ANGES	Proposed	The listing as it would appear AFTER PROPOSED CHANGES											
ļ			Lis	t only	y that	part o	r porti	on of t	he water	right that wil	l be changed.	•	Changes (see												
T	wp	Rn		Sec	rojentija.	1/4	Tax Lot	Gyt Lot or DLC		Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES" from previous page)	Tw		Rng	2	Sec	1/4	1/4	Tax Lot	Gyt Lot or DLC	Acres	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
28	s	16	E	15	sw	NW			7.6	IR	#5	1978	POU/POA	26	\mathbf{s}	18	E	31	NE	NE	200		5.8	A	1978
28	S	16	E	15	SE	NW			8.4	IR	#5	1978	POU/POA	26	\mathbf{s}	18	E	31	NW	NE	200		5.9	A	1978
28	s	16	E	15	NE	sw			7.2	IR	#5	1978	POU/POA	26	s :	18	E	31	sw	NE	200		5.8	A	1978
													POU/POA	26	\mathbf{s}	18	E	31	SE	NE	200		5.7	Α	1978
	TOTAL ACRES: 23.2							· ·		TOTAL ACRES: 23.2															

Additional remarks:_____

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For Place of Use or Character of Use Changes

	there other water right certificates, water use permits or ground water registre the "from" or the "to" lands? Yes No	rations associated
If Y	ES, list the certificate, water use permit, or ground water registration number	rs:
a pr to a	muant to ORS 540.510, any "layered" water use such as an irrigation right that mary right proposed for transfer must be included in the transfer or be cance ground water registration must be filed separately in a ground water registration.	lled. Any change
For S	ubstitution (ground water supplemental irrigation will be substituted for surirrigation)	face water primary
	and water supplemental Permit or Certificate #; ace water primary Certificate #	RECEIVED
	change from Supplemental Irrigation Use to Primary Irrigation Use	FEB 1 1 2019
	tify the primary certificate to be cancelled. Certificate #	OWRD
For a	change in point(s) of appropriation (well(s)) or additional point(s) of ap	propriation:
	Well log(s) are attached for each authorized and proposed well(s) that are cassociated with the corresponding well(s) in Table 1 above and on the accomap. 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	- ·
AN	D/OR	
	Describe the construction of the authorized and proposed well(s) in Table 3 not have a well log. For <i>proposed wells not yet constructed or built</i> , provide each requested information element in the table. The Department recomme licensed well driller, geologist, or certified water right examiner to assist winformation necessary to complete Table 3.	e "a best estimate" for nds yoʻ consult a
iny we	Construction of Point(s) of Appropriation (l(s) in this listing must be clearly tied to corresponding well(s) described in mpanying application map. Failure to provide the information will delay the application until it is received. The information is necessary for the department.	processing of your

Ta

A th 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.

	Is well already built? ((Yes or No)	If an existing	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	completed	Source g aquifer g (sand, gravel, ha	ell -speci ate (cfs o om). <u>If</u> le in full rate water righ
#5	See well log								
Α	See well log								

CERTIFICATE # 76942

									-						
Descri	Description of Water Delivery System System capacity: 0.81 cubic feet per second (cfs) OR														
System	capacity: 0.8	<u>l</u> cubic feet p	er sec	con	d (cf	s) O	R								
		gallons pe	er mir	nute	gpı (gpı	m)									
five year and app buried	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 A & conveyed by buried pipe to a center pivot sprinkler [Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)														
(Note: If the	Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)														
Is this POD/POA POD/POA OWRD Well Log ID# (or Number with Certificate or is it Proposed? Tag # L) Is this POA, OWRD Well Lot. DLC or Gov't Lot. Ring Sec 1/4 1/4 Measured Distances (from a recognized or Gov't Lot.)															
Well A	☐ Authorized☐ Proposed	LAKE 687	26	s	18	E	31	NE	NE	200	1410' N & 1320' E from the C1/4 cor, Sec 31				
Check	all type(s) of c	hange(s) pro	pose	d b	elow	/ (ch	ange '	'COD	ES" a	re prov	vided in parentheses):				
\boxtimes	Place of Use		r							-	Primary Use (S to P)				
	Character of	` ,						• •			on/Well (PJA)				
	Point of Dive	, ,								_	Appropriation (APOA)				
	Additional P	oint of Diver	sion ((AP	OD)			Substit	ution ((SUB)					
Surface Water POD to Ground Water Government Action POD (GOV) POA (SW/GW)											POD (GOV)				
Will al	l of the propos	ed changes a	affect	t the	e ent	tire v	vater	right?	1						
X Yes	_	ly the Propos sted above to	-				-			able 2 o	n the next page. Use the				
☐ No	Complete all	of Table 2 to	desc	ribe	e the	port	ion of	the w	ater rig	ght to b	e 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 # 76942

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)	PROPOSED (the "to" or "on" lands)									
The listing that appears on the certificate BEFORE PROPOSED CHANGES	The listing as it would appear AFTER PROPOSED CHANGES									
List only that part or portion of the water right that will be changed.	Changes (see are made.									
Twp Rng Sec 1/4 1/4 Tax Gyt Lot of DLC Type of USE POA(s) (name or number from Table 1)	"CODES" from previous page) Ring Sec 1/4 1/4 Tax Lot or Lot or DLC New Type of USE (from Table 1)									
	POU 26 S 18 E 31 NE NE 200 16.1 Well A 1980)								
	POU 26 S 18 E 31 NW NE 200 16.4 Well A 1980)								
	POU 26 S 18 E 31 SW NE 200 16.2 Well A 1980)								
	POU 26 S 18 E 31 SE NE 200 16.0 Well A 1980)								
TOTAL ACRES:	TOTAL ACRES: 64.7									

Additional	remarks:	

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Certificat : # 76942

For Place of Use or Character of Use Changes	
Are there other water right certificates, water use permits or ground water reg with the "from" or the "to" lands? Yes No	istrations associated
If YES, list the certificate, water use permit, or ground water registration num	ibers:
Pursuant to ORS 540.510, any "layered" water use such as an irrigation right a primary right proposed for transfer must be included in the transfer or be can to a ground water registration must be filed separately in a ground water registration.	ncelled. Any change
For Substitution (ground water supplemental irrigation will be substituted for irrigation)	surface water primary
Ground water supplemental Permit or Certificate #; Surface water primary Certificate #	RECEIVED
For a change from Supplemental Irrigation Use to Primary Irrigation Use	FEB 1 1 2019
Identify the primary certificate to be cancelled. Certificate #	OWRD
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 associated with the corresponding well(s) in Table 1 above and on the act 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 not have a well log. For <i>proposed wells not yet constructed or built</i> , proveach requested information element in the table. The Department recomblicensed well driller, geologist, or certified water right examiner to assist information necessary to complete Table 3.	vide "a best estimate" fo mends you consult a
shla 2 Construction of Doint(s) of Annuanciation	

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)	- The State of the	Source aquifer	Well -speci rate (cfs o gpm). <u>If</u> le han full rate water righ
Well A	See well log									

OMBD

CERTIFICATE #88719

Description of Water Delivery System System capacity: 0.48 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 B & corveyed by buried pipe to a wheel line system. 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.) Tax Is this If POA, Lot. POD/POA POD/POA OWRD Well Measured Distances DLC Authorized on Name or Log ID# (or (from a recognized Twp 1/4 1/4 Rng Sec or Number the Certificate or Well ID survey corner) Gov't is it Proposed? Tag # L-Lot M Authorized 1290' N & 1260' E from Well B **LAKE 676** 26 S 18 \mathbf{E} 29 SW SW 8000 SW cor, Sec 29 Proposed Authorized 1410' N & 320' E from S 200 Well A 26 18 E 31 NE NE the C1/4 cor, Sec 31 N Proposed Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses): Place of Use (POU) Supplemental Use to Primary Use (S to P) M

□ Place of Use (POU)
 □ Character of Use (USE)
 □ Point of Appropriation/Well (POA)
 □ Point of Diversion (POD)
 □ Additional Point of Appropriation (APOA)
 □ Additional Point of Diversion (APOD)
 □ Substitution (SUB)
 □ Surface Water POD to Ground Water POA (SW/GW)
 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 # 88719

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 CHANGE											PROPOSED (the "to" or "on" lands)														
	The	e lis	ting	g tha	t app	ears c	n the	certifi	cate BE	FORE PROI	POSED CHA	ANGES	Proposed The listing as it would appear AFTER PROPOSED CHANGES													
			Lis	t onl	y that	part o	or porti	on of t	the water	right that wil	l be changed.		Changes (see								a	re ma	de.			
Т	Twp Rng Sec 4 4 Tax Lot or Acres listed on Certificate POA(s) (name Prior Dac Certificate from Table 1)									Priority Date	"CODES" from previous page)	Tw	p.	Rn	g	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	of USE	POD(s)/s POA(s) to be used (from Table 1)	. Priority Date		
28	s	18	E	29	sw	SE	8000		3.3	IR	Well B	1983	POU/POA	26	s	18	E	31	NE	NĘ	200		0.8		Well A	1983
													POU/POA	26	s	18	E	31	NW	NE	200		0.9		Well A	1983
										-			POU/POA	26	s	18	E	31	sw	NE	200		0.8		Well A	1983
									!				POU/POA	26	S	18	E	31	SE	NE	200		0.8		Well A	1983
		TOTAL ACRES: 3.3														7	ГОТА	L ACF	RES:	3.3						

Additional remarks:_____.

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LOLL	lace of Use of Character of Use Changes	
	there other water right certificates, water use permits or ground water registration the "from" or the "to" lands? Yes No	ons associated
If Y	ES, list the certificate, water use permit, or ground water registration numbers:	
a pr to a	suant to ORS 540.510, any "layered" water use such as an irrigation right that is imary right proposed for transfer must be included in the transfer or be cancelled ground water registration must be filed separately in a ground water registration lication.	d. Any change
For S	ubstitution (ground water supplemental irrigation will be substituted for surfacirrigation)	e water primary
	und water supplemental Permit or Certificate #; face water primary Certificate #	RECEIVED FEB 1 1 2019
For a	change from Supplemental Irrigation Use to Primary Irrigation Use	
Ide	ntify the primary certificate to be cancelled. Certificate #	OWRD
For a	change in point(s) of appropriation (well(s)) or additional point(s) of appro	priation:
	Well log(s) are attached for each authorized and proposed well(s) that are clea associated with the corresponding well(s) in Table 1 above and on the accomp 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	•
AN	D/OR	
	Describe the construction of the authorized and proposed well(s) in Table 3 fo not have a well log. For <i>proposed wells not yet constructed or built</i> , provide "a each requested information element in the table. The Department recommends licensed well driller, geologist, or certified water right examiner to assist with information necessary to complete Table 3.	a best estimate" for s you consult a
ny we ne acco ansfer	Construction of Point(s) of Appropriation ll(s) in this listing must be clearly tied to corresponding well(s) described in Take impanying application map. Failure to provide the information will delay the propagation until it is received. The information is necessary for the department bosed well(s) will access the same source aquifer as the authorized point(s) of application.	ocering of your to assess whether

1 able 3. Construction of Point(s) of Appropriation	n
Any wall(e) in this listing must be clearly tied to cor	٠,.

th tra (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.	well	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	completed	Source Saquifer	Well -speci rate (cfs o gpm). If le han full rate water righ
Well A	See well log			-						
Well B	See Well log				-					

CERTIFICATE #86164 Description of Water Delivery System System capacity: 1.07 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 8 & conveyed to a wheel line system by buried conduit. 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.) Tax If POA, Is this Lot, POD/POA POD/POA OWRD Well Measured Distances DLC Name or Authorized on Log ID# (or (from a recognized Sec 1/4 1/4 Twp Rng or Number the Certificate or Well ID survey corner) Gov't is it Proposed? Tag # L-) Lot Authorized 1990' S & 3280' W from #4 **LAKE 1411** 28 \mathbf{S} 16 \mathbf{E} 21 SE NW 100 the NE cor, Sec 21 No Proposed Authorized 800' S & 10' W from the **LAKE** 27 \mathbf{S} E 25 NE SE 1400 #5 17 E1/4 cor, Sec 25 N Proposed 51631 1850' S & ' 340' E from S NW #8 **LAKE 1369** 28 16 | E 1 SE 100 the NW cor, Sec 1 Proposed Authorized 1410' N & 1320' E from Well A **LAKE 687** 28 S 18 E 31 NE NE 200 the C1/4 cor, Sec 31 No Proposed Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses): Supplemental Use to Primary Use (S to P) M Place of Use (POU) Character of Use (USE) \boxtimes Point of Appropriation/Well (POA) Additional Point of Appropriation (APOA) Point of Diversion (POD) Additional Point of Diversion (APOD) Substitution (SUB) Surface Water POD to Ground Water Government Action POD (GOV)

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Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the

Complete all of Table 2 to describe the portion of the water right to be changed.

⊠ No

POA (SW/GW)

Will all of the proposed changes affect the entire water right?

"CODES" listed above to describe the proposed changes.

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 # 86164

List the change proposed for the acreage in each ½ 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) e listing that appears on the certificate BEFORE PROPOSED CH								,		45045											on" lands)				
	The	e lis		_							1			Proposed			The	e lis	sting	as it	would				ROPOSED	CHANG	ES
	w 77		Li	st or	ıly 1	that	part o	r porti	on of t	he water	right that wil	l be changed.	1	Changes (see						La company		a	re ma	ide.	TT: 0 :	raa-waa	* 200 - 120 - 50
T	wp	Rı	ng	Sec	X	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES" from previous page)	T	vp	Rr	ig	Sec	1/4	1/4	Tax Lot	Gyt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
28	S	16	E	1	I	NE	NE	200		. 1.4	IR	#8	1987	POU/POA	26	s	18	E	31	NE	NE	200		8.0		Well A	1987
28	S	16	E	1	N	١W	NE	100		7.2	IR	#8	1987	POU/POA	26	s	18	E	31	NW	NE	200		8.0		Well A	1987
28	S	16	E	1	5	sw	NE	100		2.6	IR	#8	1987	POU/POA	26	s	18	E	31	sw	NE	200		8.0		Well A	1987
28	S	16	E	1		SE	NE	200		3.5	IR	#8	1987	POU/POA	26	s	18	E	31	SE	NE	200		7.9		Well A	1987
28	S	16	E	1	1	NE	NW	100		7.3	IR	#8	1987	POU/POA	27	s	17	E	30	NE	sw	1900		4.2		#5	1987
28	S	16	E	1	N	١W	NW	100		15.4	IR	#8	1987	POU/POA	27	s	17	E	30	NW	sw	1900	3	3.9	_	#5	1987
28	S	16	E	1	5	sw	NW	100		38.8	IR	#8	1987	POU/POA	27	s	17	E	30	sw	sw	1900	4	3.4		#5	1987
28	s	16	E	1	!	SE	NW	100		9.4	IR	#8	1987	POU/POA	27	s	17	E	30	SE	sw	1900		4.4		#5	1987
											ı			POU/POA	28	s	16	E	21	sw	NW	100		19.7		#4	1987
											ł			POU/POA	28	s	16	E	21	SF	NW	100		2.4		#4	1987
														POU/POA	28	s	16	E	1	NW	SE	300		15.7		#4	1987
	TOTAL ACRES: 85.6									TOTAL ACRES: 85.6																	

Additional remarks: . .

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Permanent Transfer Application Form – Page 19 of 21

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 # 86164

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

		AUTHORIZED (the "from" or "off" lands) e listing that appears on the certificate BEFORE PROPOSED CH																•			on" lands)						
	The	e lis		_									ANGES	Proposed			The	e lis	ting	as it	would				ROPOSED	CHANG	ES
	32	T. 18	LI C	st o	nıy	tnat	part o	r porti	on of t	ne water	right that wil	l be changed.	11.04 " 00.75	Changes (see		2	3,	,			.0264	a	re ma	ae.	Trigrence carright	non(a)	In the second
	a St							Tax	Gvt		Type of USE	POD(s) or POA(s) (name	Dalasies	"CODES" from previous				Ağı Ağı				Tax	Gvt		New Type	POD(s)/ POA(s) to	Priority
T	wp	Ri	ıg	Se	c.	1/4	1/4	Lot	Lot or	Acres	listed on	or number	Date	page)	Tv	vp	Rı	ıg	Sec	1/4	1/4	Lot	Lot or	Acres	of USE	be used	Date
		1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1							DLC		Certificate	from Table 1)			3 ,03					د در از در در از		A.	DLC			(from Table 1)	
28	s	16	E	1		NE	NE	200		1.4	IR	#8	1987	POU/POA	26	s	18	E	31	NE	NE	300		8.0		Well A	1987
28	s	16	E	1	[]	NW	NE	100		7.2	IR	#8	1987	POU/POA	26	s	18	E	31	NW	NE	200		8.0		Well A	1987
28	s	16	E	1	l :	sw	NE	100		2.6	IR	#8	1987	POU/POA	26	s	18	E	31	sw	NE	200		8.0		Well A	1987
28	s	16	E	: 1		SE	NE	200		3.5	IR	#8	1987	POU/POA	26	s	18	E	31	SE	NE	200		7.9		Well A	1987
28	s	16	E	1	ı	NE	NW	100		7.3	IR	#8	1987	POU/POA	27	s	17	E	30	NE	sw	1900		4.2		#5	1987
28	S	16	E	. 1	וו	NW	NW	100		15.4	IR	#8	1987	POU/POA	27	s	17	E	30	NW	sw	1900	3	3.9		#5	1987
28	S	16	E	1	1 1	sw	NW	100		38.8	IR	#8	1987	POU/POA	27	s	17	E	30	sw	sw	1900	4	3.4		#5	1987
28	S	16	E	1	!	SE	NW	100		9.4	IR	#8	1987	POU/POA	27	s	17	E	30	SE	sw	1900		4.4		#5	1987
														POU/POA	28	s	16	E	21	sw	NW	100		5.8		#4	1987
														POU/POA	28	s	16	E	21	SE	NW	100		0.6		#4	1987
						Т	OTA	L ACR	RES:	85.6										-	ГОТА	L ACF	ES:	85.6			

Additional remarks:_____

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For Place of Use or Character of Use Changes

	e there other the the "from"	_		•	-	or ground	water regis	strations as	sociated	
If	YES, list the	certificate, w	ater use p	permit, or	ground w	ater regist	ration num	bers:	.:	
√ a to	ursuant to OR primary right a ground wate plication.	proposed for	transfer i	must be ir	ncluded ir	the transfe	er or be car	icelled. An	y change	
For	Substitution	(ground wate irrigation)	r suppler	nental irri	igation w	ill be substi	ituted for s	urface wate	er primary	
	ound water surface water pr				te#	<u>;</u>			RECEIV	ED
For	a change fro	m Suppleme	ntal Irriş	gation Us	e to Prin	nary Irriga	ation Use		FEB 1 1 2	019
Ide	entify the prin	nary certificat	te to be ca	ancelled.	Certificat	e#			OWRD)
For	a change in p	ooint(s) of ap	propriat	tion (well	(s)) or ad	ditional p	oint(s) of a	ppropriat	ion:	
	with the co) are attached orresponding may search fo .wrd.state.or.	well(s) ir or well log	Table 1 gs on the	above and Departme	d on the accent's web p	companyin			ssociated
Al	ND/OR									
	have a well requested	ne construction log. For <i>pro</i> information en logist, or cert en Table 3.	<i>posed we</i> lement in	ells not ye the table	t construct. The Dep	cted or buil partment re	lt, provide 'commends	a best esti you consu	mate" for earlit a licensed	ach I well
Any waccomapplication well(s)	3. Construction of the second	isting must be cation map. It is received. The same source	e clearly Failure to ne inform	tied to co provide t ation is n r as the au	rrespondi he inform ecessary i athorized	nation will for the depa point(s) of	delay the partment to a appropriati	rocessing on assess whe don (POA).	of your trans ther the pro	sfer posed
Proposed Authorize POA Name of Number	ed Is well already built?	If an existing well: OWRD Well ID Tag No: L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less han full rate o water right
#4	See well Log	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			******			r see to de	<u> </u>	<u> </u>
#5	See well									

#8

Well A

See well

Log See well

Log

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OWRD

13122^{TACS}

Application for Water Right Transfer

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

Evidence of Use Affidavit

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 RECEIVED SS County of Lake) FEB 1 1 2019 I, BUCK CHURCH, CHURCH FAMILY FARMS & CHURCH HAY FARMS INC. in my capacity as PRESIDENT, OWRD mailing address PO Box 751, CHRISTMAS VALLEY, OR 97641 telephone number (541)408-6747, 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 # 52784.67903, 76942, 88719 & 86164: OR My knowledge is specific to the use of water at the following locations within the last five years: Mer Sec Governor Graphicable) 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

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.

RECEIVED

FEB 1 1 2019

OWRD



ignature of Affiant

Signed and sworn to (or affirmed) before me this 5 day of February, 20 19.

OFFICIAL STAMP
PATRICIA ELSA EFFINGHAM
NOTARY PUBLIC-OREGON
COMMISSION NO. 956604
SION EXPIRES NOVEMBER 20, 2020

My Commission Expires: 1/20/2020

Supporting/Documents	<u>Estamples</u> de la comples de la complexión
Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	 Power usage records for pumps associated with irrigation use Fertilizer or seed bills related to irrigated crops Farmers Co-op sales receipt
Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	 District assessment records for water delivered Crop reports submitted under a federal loan agreement Beneficial use reports from district IRS Farm Usage Deduction Report Agricultural Stabilization Plan CREP Report
Aerial photos containing sufficient detail to establish location and date of photograph	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. Sources for aerial photos: OSU—www.oregonexplorer.info/imagery OWRD — www.wrd.state.or.us Google Earth — earth.google.com TetraServer — www.terraserver.com
Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

DRNELIUS OR (117) 0 BOX 544 ILLSBORO, OR 97123 13-640-2371

BUCKLEY D CHURCH (AG-L1016963PAL-

12/31/18)

CHURCH FAMILY FARMS INC (1002748) PO BOX 751 CHRISTMAS VALLEY, OR 97641

INVOICE

Invoice #: Invoice Date: 36113999 05/23/18 06/20/18 05/21/18 Due Date: Delivery Date: Order #: PO#:

Sales Rep:

Tilden-Browning, Jake

Ship Via: Customer Vehicle County: WASHINGTON roduct G. Groduct Description (1) 1000044007 - 12-0-0-26 THIO SUL BULK 2925.0000 LB 0.1625 0.15

Safety Data Sheets are available upon request for applicable products. Contact your local branch for details.

No Recommendation has been made or provided by seller concerning the use of any pesticide covered by this invoice. For a medical emergency involving this product, call 1-866-944-8565. For help with any spill, leak, fire or exposure, call Chemtrec at 1-800-424-9300.

*** Invoice Notes ***

SHIP TO ORDER(S): 11940654

(CHURCH FAMILY FARMS DELIVERY) 88451 RAVEN RIDGE LANE, CHRISTMAS VALLEY, OR. 97641

lank you for your continued business, we appreciate it!

'S Staff dditional Unformation & Invoice Sub Total: Sales Tax: Payment Terms: 5% 15TH PROX 20TH PROX 475.31 0.00 475.31 Invoice Total: Less Prepay Used: 0.00 Less Prepay Discount: 0.00 Gross Invoice Total: 475.31 Less Potential Net Discount if paid by 06/15/18: 23.77 **Amount Due:** 451.54 Remit To: 14.25.44 CROP PRODUCTION SERVICES, INC. PO BOX 544 HILLSBORO, OR 97123

1 of 2

RECEIVED FEB 1 1 2019 **OWRD**

RNELIUS OR (117)) BOX 544 LLSBORO, OR 97123 3-640-2371

BUCKLEY D CHURCH (AG-L1016963PAL-12/31/18)

CHURCH FAMILY FARMS INC (1002748) CHRISTMAS VALLEY, OR 97641

ihip Via: Customer Vehicle County: WASHINGTON

Invoice #: 36113999 Invoice Date: 05/23/18 **Due Date:** 06/20/18 Delivery Date: 05/21/18 Order #: 11940654

PO#: Sales Rep Tilden-Browning, Jake

INVOICE

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- 1. Any claim for shortage or domage or condition of product (excluding chemical analysis) must be made at once upon arrival of goods. Fallare to comply with this notice will result in a waiver of roch claims. If goods are delivered to the track of the customer or his agent, Crap Production Services' responsibility respecting any shortage, change to continues, and/or condition of the product classified analysis (cased) and sold the customer or his agent, Crap Production Services, Inc. burdy represents that the is familiar with the characteristics, and notice and the complication of the goods covered hereby.

 2. Crap Production Services, Inc. burdy represents that the Fair Labor Shandards Act of 1938, as amended, has been complied with in the production of the goods covered hereby.

 3. Customer represents and warrants that he is familiar with the characteristics, adjustments of the product and/or equipment tool or leased increased. The REM ARRANTES NESSPECTING THE PRODUCT OF THE PRODUCT OF THE THERM ARE NO INPLIED WARRANTIES OF FITNESS FOR A PARTICLEAR PURPOSE, MERCHANTABILITY, OR OTHERWISE RESPECTING THE PRODUCT OR EQUIPMENT OR SERVICE SEACET THAT THE PRODUCT AND EQUIPMENT AND SERVICE SHALL BE OF SELLER'S STANDARD QUALITY. Customer warrants that he has been provided adopted product and equipment, information and instructions, and will follow the proper direction in use of the ornduct and equipment, information and instructions, and will follow the proper direction in use of the ornduct and equipment, information and instructions, and will follow the product or equipment and shall not be liable for any included in using the product or equipment to special damages of for any beddity inputy or property damages. Crap Production Services, Inc., shall not be liable for any included in using the product or equipment to do or leased hereunder.

 3. Indianalization Customer grapts in investigate, indemnify, defend and hold Crap Production Services, Inc., families of, from and against all liability, loss, damages, indian t

STATE		MON	HLY RAT	В		APR	
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- CFS without written notification to the customer, will comply with finers natities adopted by the states pertaining to permissible default penalty charges and finance charge rates.
 Your acceptance of definery of any goods or services after January 1, 2009 constitutes acceptance of these ferms by you.

ank you for your continued business, we appreciate it!

dditional Information	Payment Terms: 5% 15TH PROX 20TH PROX Invoice Sub Total:	475.31
	Sales Tax:	0.00
	Invoice Total:	475.31
	Less Prepay Used:	0.00
	Less Prepay Discount:	0.00
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	Remit.To No. 1888	
	CROP PRODUCTION SERVICES, INC.	
	2 of 2	

HILLSBORO, OR 97123

RECEIVED FEB 1 1 2019

DRNELIUS OR (117)) BOX 544 ILLSBORO, OR 97123 13-640-2371

BUCKLEY D CHURCH (AG-L1016963PAL-

CHURCH FAMILY FARMS INC (1002748) PO BOX 751 CHRISTMAS VALLEY, OR 97641

INVOICE

Invoice #: 35618356 Invoice Date: 04/26/18

05/20/18 04/23/18 Due Date: Delivery Date: Order #: 11503267 PO#:

Sales Rep:

Tilden-Browning, Jake

RECEIVED

FEB 1 1 2019

OWRD

Ship Via: Direct Ship County: LAKE nded to sc Price 1000161645 - 8.4-28-18 7 S 56900.0000 LB 0.2785 0.26 15,846.65

Safety Data Sheets are available upon request for applicable products. Contact your local branch for details.

No Recommendation has been made or provided by seller concerning the use of any pesticide covered by this invoice. For a medical emergency involving this product, call 1-866-944-8565. For help with any spill, leak, fire or exposure, call Chemtree at 1-800-424-9300.

*** Blend Analysis ***

roduct: 8.4-28-18 7 S (1000161645) Percent Daranteed Analysis By L93/Acre 8.396 27.985 17.990 N P K 6.996 14.392

*** Invoice Notes ***

HIP TO ORDER(S): 11503267 (CHURCH FAMILY FARMS DELIVERY) 88451 RAVEN RIDGE LANE, CHRISTMAS VALLEY, OR. 97641

ank you for your continued business, we appreciate it!

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1 of 2

Remit To Street CROP PRODUCTION SERVICES, INC. PO BOX 544 HILLSBORO, OR 97123

DRNELIUS OR (117) 0 BOX 544 ILLSBORO, OR 97123 03-640-2371

BUCKLEY D. CHURCH (AG-L1016963PAL-

12/31/18)

CHURCH FAMILY FARMS INC (1002748) PO BOX 751 CHRISTMAS VALLEY, OR 97641

Ship Via: Direct Ship

County: LAKE

Invoice #: 35618356 Invoice Date: 04/26/18 Due Date: 05/20/18 Delivery Date: 04/23/18 Order #: 11503267 11503267

PO#:

Sales Rep: Tilden-Browning, Jake

INVOICE

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2. Crop Production Services, Inc. hereby represents that the Pail Labor, Standards Act of 1938, as immediad, has been complied with in the production of the goods covered bereby.

2. Crop Production Services, Inc. hereby represents that the Pail Labor, Standards Act of 1938, as a production of the product of the production of the goods covered bereby.

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 Your acceptance of delivery of any goods or services after January 1, 2009 constitutes acceptance of these terms by you.

rank you for your continued business, we appreciate it!

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2 of 2

DUCTION SERVICES, INC. PO BOX 544 HILLSBORO, OR 97123

RECEIVED FEB 1 1 2019

IN PRODUCTION SERVICES, INC. WELIUS OR (117) BOX 544 LSBORO, OR 97123 -640-2371

BUCKLEY D CHURCH (AG-L1016963PAL-12/31/18)

Invoice #:

36777696 Invoice Date: Due Date: Delivery Date: 06/29/18 07/20/18

INVOICE

Order #: PO#: Sales Rep:

Tilden-Browning, Jake

12427446

CHURCH HAY FARM INC. (1569650) BUCKLEY D. CHURCH II PO BOX 751 CHRISTMAS VALLEY, OR 97641

ip Via: Customer Vehicle County: WASHINGTON oduce Resolute Descriptions 11,700.00 1000704343 - SONIC ALFALFA TR 50#/LB 3000,0000 LB 3,9000 3.71

Lots: 15-17357-ND-AN (2,900.0000) / 18-17435-ND-AN (100.0000)

Safety Data Sheets are available upon request for applicable products. Contact your local branch for details.

No Recommendation has been made or provided by seller concerning the use of any posticide covered by this invoice. For a medical emergency involving this product, call 1-866-944-8555. For help with any spill, leak, fire or exposure, call Chemtrec at 1-800-424-9300.

*** Invoice Notes ***

HP-TO ORDER(S)::12427446 (CHURCH HAY) 88451 RAVEN RIDGE LN, CHRISTMAS VALLEY, OR. 97641

ank you for your continued business, we appreciate iti

S Staff					
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1 of 2

Remit To: Mar 525

CROP PRODUCTION SERVICES, INC.

PO BOX 544 HILLSBORO, OR 97123

RECEIVED FEB 1 1 2019

UNELIUS OR (117) **BOX 544** LSBORO, OR 97123 -640-2371

BUCKLEY D CHURCH (AG-L1016963PAL-

12/31/18)

CHURCH HAY FARM INC. (1569650) BUCKLEY D. CHURCH II

CHRISTMAS VALLEY, OR 97641

alp Via: Customer Vehicle County: WASHINGTON

Invoice Date: 06/29/18 07/20/18 06/26/18 Due Date: Delivery Date: Order #: 12427446

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Invoice #:

Tilden-Browning, Jake

INVOICE

36777696

- 1. Any claim for sharings or damage or condition of product (excluding chemical analysis) must be made at once upon arrival of goods. Falliure to compily with this notice will result in a warver of such claims. If pools are delivered to the track of the customer or his sign. Crop Production Services' responsibility respecting any shorings, damage to containers, and/or candidates. Act of 1938, as anomated, has been compiled with in the production of the goods covered hereby.

 2. Crop Production Services, inc. bereby represents that the Fair Labor Standards Act of 1938, as anomated, has been compiled with in the production of the goods covered hereby.

 3. Customer represents and varament that he is familiar within the characteristics; quionities, and potentialities of the product and/or engineeral sold or leaved hereunder. THERE ARE NO EXPRESS. WARRANTIES RESPECTIVE THE PRODUCT, EQUIPMENT OR SERVICES EXCEPT THAT IT SHALL CONFORM TO THE DESCRIPTION SET FORTH, THERE ARE NO IMPLIED WARRANTIES OF FIRST-SES FOR A PARTICULAR PURPOSE, MERCHANTAGULTY, OR OTHERS RESPECTIVE THE PRODUCT AND EQUIPMENT OR SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OR SERVICE EXCEPT THAT THE PRODUCT AND EQUIPMENT OR SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OR SERVICE EXCEPT THAT THE PRODUCT AND EQUIPMENT OR SERVICE EXCEPT THAT THE PRODUCT AND EQUIPMENT OR SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OR SERVICE EXCEPT THAT THE PRODUCT AND EQUIPMENT OR SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OF SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OF SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OF SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OF SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OF SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OF SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OR EQUIPMENT OF SERVICE EXCEPT THAT IT SHALL CONFORM THE PRODUCT OF SERVICE EXCEPT THAT IT SHALL CONFORM THE

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2 of 2

CROP PRODUCTION SERVICES, INC. HILLSBORD, OR 97123

RECEIVED FEB 1 1 2019 OWRD

Koehler Custom Fertilizing LLC PO BOX 834 CHRISTMAS VALLEY, OR 97641

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FEB 1 1 2019

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Invoice

Bill To			:			
Church Hay Fa	ırm, INC.					
PO BOX 751 Christmas Vall	ey, Or		٠.	 		
97641		 din pie	٠.			٠.
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Ship	То			

P.O. Number	Terms	Rep	Ship	Via	F.O.B.		Project
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ALL POINTS ENGINEERING & SURVEYING

P.O. Box 767 (CRR) Terrebonne, Oregon 97760

TRANSM	MITTAL
To: Oregon Water Resources Department 725 Summer St. NE Suite A Salem, OR 97301-1266 [x] Prints [] Plans [x] Map/Plat [] Specie	Date: 2/6/2019 Job: 18-050 Attention: Re: Transfer Application fications [] Change order [X] Other
Copies No.	Description
1 1 Application (21 sheets letter	bond)
1 2 LUCS (3 sheets letter bond)	
1 3 Evidence of Use Affidavit (1	2 sheets letter bond)
1 Maps (5 sheets ledger bond)	
1 5 Check for OWRD fee	
These are transmitted as checked below:	
[x] For OWRD approval [] Approved as sul [] Copies for distribution [] Returned for co [x] Review and comment [] For bids due [orrections [] Returned corrected prints
Remarks: I've been in discussions with Marcy Osborne reg that she be assigned as the case worker due to he Thanks and if you have questions please don't he Signed:	r familiarity with the project.

RECEIVED FEB 1 1 2019 OWRD



ALL POINTS ENGINEERING & SURVEYING

P.O. Box 767 (CRR) Terrebonne, Oregon 97760

TRANSMITTAL

To:	Date: 2/6/2019 Job: 18-050			
Oregon Water Resources Department 725 Summer St. NE Suite A	Attention:			
Salem, OR 97301-1266	Re: Transfer Application			
[x] Prints [] Plans [x] Map/Plat [] Spe	ecifications [] Change order [X] Other			
Copies No.	Description			
1 1 Application (21 sheets let	the companies of the contract			
1 2 LUCS (3 sheets letter bond 1 3 Evidence of Use Affidavit				
1 4 Maps (5 sheets ledger bon				
1 5 Check for OWRD fee				
These are transmitted as checked below:	•			
[x] For OWRD approval [] Approved as[] Copies for distribution [] Returned for[x] Review and comment [] For bids due	r corrections [] Returned corrected prints			
Remarks: I've been in discussions with Marcy Osborne that she be assigned as the case worker due to Thanks and if you have questions please don'	regarding this application for transfer and request her familiarity with the project. It hesitate to call (541) 548-5833.			
Signed:				
This is a cornected Application of mo	o copy of page 19 of the op for Church Transfer!			
•	RECEIVED			

FEB 1 1 2019 OWRD 1 3 1 2 2