



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

Application for Permanent Water Right Transfer

Part 1 of 5 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 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:

- 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: ____/____/____

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

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

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certified), 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°).

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Applicant Information

APPLICANT/BUSINESS NAME Buckley Church/Church Family Farms, Inc & Church Hay Farms Inc		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 ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME Scott D Montgomery		PHONE NO. 541-548-5833	ADDITIONAL CONTACT NO. 541-420-0401
ADDRESS PO Box 767		FAX NO.	
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this transfer application, and why:
 Rearrange locations of place of use to accommodate center pivot sprinkler configurations & remove corners from wheel line fields to replace with center pivot systems.


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: Lakeview Examiner

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

 *Buckley Church*
Applicant signature

Buckley Church, President
Church Family Farms, Inc

01/23/19
Date

Buckley Church
Applicant signature

Buckley Church, President
Church Hay Farms, Inc

01/23/19
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 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 that apply:

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

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

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

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see: <http://www.oregon.gov/owrd/docs/transfer-propertytransactions.pdf>

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


Describe any special ownership circumstances here: _____

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

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME Lake County Planning	ADDRESS 513 Center St	
CITY Lakeview	STATE OR	ZIP 97630

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Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 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-____)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 1077	27	S	17	E	32	NE	SW	8000	1320' N 7 2640' E from SW Cor, Sec 32
#4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 1411	28	S	16	E	21	SE	NW	100	1990' S & 3280' W from NE cor, Sec 21
#5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 51631	27	S	16	E	25	NE	SE	1400	800' S & 10' W from the E1/4 cor, Sec 25
#6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> 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):

- | | |
|--|--|
| <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 checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

- Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the water right to be changed.

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Please use and attach additional pages of Table 2 as needed.
See page 6 for instructions.

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

Table 2. Description of Changes to Water Right Certificate # 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) 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					
26	S	18	E	32	NE	SW	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	SW	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	NW	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	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					TOTAL ACRES:							56.5								

Additional remarks: _____.

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For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the “from” or the “to” lands? Yes No

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



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

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 -speci rate (cfs or gpm). If le than full rate water righ
#1	See well log									
#4	See well log									

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, water right
#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: 0.29 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. **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-___)	Twp	Rng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
#5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 1397/4097	28 S	16 E	15	SW	NW		2650' N & 1310' E from SW cor, Sec 15
A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 687	26 S	18 E	31	NE	NE		1410' N & 1320' E from the C1/4 cor, Sec 31

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 checked="" 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 # 67903

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.													
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
28	S	16	E	15	SW	NW		7.6	IR	#5	1978	POU/POA	26	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	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	S	18	E	31	SE	NE	200		5.7		A	1978
TOTAL ACRES:							23.2						TOTAL ACRES:							23.2					

Additional remarks: _____.

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For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the “from” or the “to” lands? Yes No

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



Pursuant to ORS 540.510, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

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

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

Tip: You may search for well logs on the Department’s web page at:
http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -spec rate (cfs or gpm). If less than full rate water right
#5	See well log									
A	See well log									

CERTIFICATE # 76942

Description of Water Delivery System

System capacity: **0.81** 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 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 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	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well A	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> 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 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.

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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) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.											
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date		
										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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13122

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:

Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

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

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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 clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department's web page at:
http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-spec rate (cfs or gpm). If less than full rate water right
Well A	See well log									

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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 & 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-___)	Twp		Rng		Sec	¼ - ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well B	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 676	26	S	18	E	29	SW	SW	8000	1290' N & 1260' E from SW cor, Sec 29
Well A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		26	S	18	E	31	NE	NE	200	1410' N & 320' E from the C1/4 cor, Sec 31

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 checked="" 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 (GO') |

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 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				
28	S	18	E	29	SW	SE	8000		3.3	IR	Well B	1983	POU/POA	26	S	18	E	31	NE	NE	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					TOTAL ACRES:							3.3							

Additional remarks: _____.

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For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the “from” or the “to” lands? Yes No

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



Pursuant to ORS 540.510, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

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

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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 clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department’s web page at:
http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No.	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 -speci rate (cfs or gpm). If less than full rate water right
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.)

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)
#4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 1411	28 S	16 E	21	SE NW	100	1990' S & 3280' W from the NE cor, Sec 21
#5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 51631	27 S	17 E	25	NE SE	1400	800' S & 10' W from the E1/4 cor, Sec 25
#8	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 1369	28 S	16 E	1	SE NW	100	1850' S & 340' E from the NW cor, Sec 1
Well A	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 687	28 S	18 E	31	NE NE	200	1410' N & 1320' E from the C1/4 cor, Sec 31

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 checked="" 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.

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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 # 86164

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				
28	S	16	E	1	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	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	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	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	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	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		19.7		#4	1987
													POU/POA	28	S	16	E	21	SE	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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OWRD 13122

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 ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.												Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.													
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date				
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	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	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	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	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
TOTAL ACRES:							85.6						TOTAL ACRES:							85.6						

Additional remarks: _____.

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QWRD
13122

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: _____.



Pursuant to ORS 540.510, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

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

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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 clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

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

http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

- Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less, than full rate of water right
#4	See well Log									
#5	See well Log									
#8	See well Log									
Well A	See well Log									

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13122^{TACS}

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 LAKE)

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 OWRD

I, BUCK CHURCH, CHURCH FAMILY FARMS & CHURCH HAY FARMS INC, in my capacity as PRESIDENT,
 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:

Certificate #	Township	Range	Mer	Sec	1/4, 1/8	Gov. Lot or DEC	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

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.

Maen
Signature of Affiant

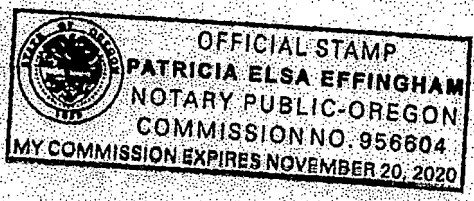
020519
Date

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Signed and sworn to (or affirmed) before me this 5 day of February, 2019.



Patricia E. Effingham
Notary Public for Oregon

My Commission Expires: 11/20/2020

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 confirming water right certificate that shows issue date
<input checked="" type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<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"> • 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
<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 – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

ORNELIUS OR (117)
PO BOX 544
HILLSBORO, OR 97123
503-640-2371

INVOICE

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

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

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

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Ship Via: Customer Vehicle County: WASHINGTON

Product #	Product Description	Quantity	Gross Unit Price	Rounded Net Disc Price	Gross Ext'd Price
1000044007	12*0-0-26 THIO.SUL BULK	2925.0000 LB	0.1625	0.15	475.31

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

Thank you for your continued business, we appreciate it!
S Staff

Additional 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
Gross Invoice Total:	475.31
Less Potential Net Discount if paid by 06/15/18:	23.77
Amount Due:	451.54

Remit To: Hillsboro, OR

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

IRNELZIUS OR (117)
 BOX 544
 HILLSBORO, OR 97123
 3-640-2371

INVOICE

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

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

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

RECEIVED
 FEB 11 2019
 OWRD

Ship Via: Customer Vehicle County: WASHINGTON

- Any claim for shortage or damage or condition of product (excluding chemical analysis) must be made at once upon arrival of goods. Failure to comply with this notice will result in a waiver of such claims. If goods are delivered to the truck of the customer or his agent, Crop Production Services' responsibility respecting any shortage, damage to containers, and/or condition of the product (excluding chemical analysis) ceases upon delivery to such truck.
- Crop Production Services, Inc. hereby represents that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of the goods covered hereby.
- Customer represents and warrants that he is familiar with the characteristics, quantities, and potentialities of the product and/or equipment sold or leased hereunder. THERE ARE NO EXPRESS WARRANTIES RESPECTING THE PRODUCT, EQUIPMENT OR SERVICE EXCEPT THAT IT SHALL CONFORM TO THE DESCRIPTION SET FORTH. THERE ARE NO IMPLIED WARRANTIES OF FITNESS FOR A PARTICULAR PURPOSE, MERCHANTABILITY, OR OTHERWISE RESPECTING THE PRODUCT OR EQUIPMENT OR SERVICE EXCEPT THAT THE PRODUCT AND EQUIPMENT AND SERVICE SHALL BE OF SELLER'S STANDARD QUALITY. Customer warrants that he has been provided adequate product and equipment, information and instructions, and will follow the proper direction in use of the product and equipment.
- Crop Production Services' liability for damages shall in no event exceed the purchase price of the particular delivery with respect to which such damages are claimed. Crop Production Services, Inc. shall not be liable for any incidental, consequential or special damages or for any bodily injury or property damages. Crop Production Services, Inc. does not warrant and shall not be liable for any results obtained in using the product or equipment sold or leased hereunder either alone or in combination with other substances or equipment, and shall not in any case be liable to customer or any other person or corporation for damages to person or property or otherwise, incurred as a result of the use, treatment, storage, handling, application or performance of the product or equipment sold or leased hereunder.
- Indemnification - Customer agrees to investigate, indemnify, defend and hold Crop Production Services, Inc. harmless of, from and against all liability, loss, damages, injury, claims, judgments, demands, penalties, fines, suits or proceedings, whether judicial, administrative or otherwise, and attorneys' fees and other costs and expenses of whatsoever kind and nature, to the equipment or any person or property whatsoever, arising out of the use, storage, operation or performance of the product or equipment provided by or on behalf of Crop Production Services, Inc., in connection with the purchase or lease or use by customer of Crop Production Services, Inc. materials, product or equipment.
- The terms of credit for customers making purchases are as follows: (i) payment in full is due and payable on the 5th day of the month following the statement date; (ii) for statement amounts not paid by the 21st day of the month following the statement, you shall also be liable for a one time default penalty fee equal to four percent (4%) of the unpaid amount for purchases in Mississippi, North Carolina or five percent (5%) in South Carolina, Georgia, Alabama, Virginia, Maryland, Delaware, New York, Pennsylvania, Connecticut, Maine, Vermont, Rhode Island, New Hampshire, West Virginia, & Texas; (iii) for amounts not paid by the 21st day of the month following the statement date, you shall also be liable for a finance charge on the unpaid balance at the highest rate allowable by statutory law. In the event of any conflict between the terms of the invoice, statement and the Customer Profile, the terms of the invoice shall control. Other terms of sale are utilized in different parts of the country to include 5% 15th proximo, net 20th proximo, as well as other terms of sale.
- Any invoice not paid in full prior to the 21st day of the month will be assessed a finance charge of 2% per month (24.0% APR) except as listed below. The finance charge will be computed as of CPS accounting month end closing and each succeeding month end until the balance is paid in full.

STATE	MONTHLY RATE	APR
Arkansas, Alabama, California, Colorado	1.50%	18.0%
Connecticut, Florida, Georgia, Hawaii, Idaho, Louisiana, Massachusetts, Minnesota, Montana, Nevada, North Carolina, North Dakota, Oklahoma, Oregon, South Carolina, Utah, Washington, Wisconsin, Wyoming,		
Indiana, Mississippi	1.75%	21.0%
Maine	First \$25,000 1.8%	21.6%
	Above \$25,000 1.6%	12.0%
Nebraska	1.33%	16.0%
New Mexico	First \$500 1.50%	18.0%
	Above \$500 1.4%	12.0%
West Virginia	First \$1,500 1.5%	18.0%
	Above \$1,500 1.0%	12.0%

- CPS without written notification to the customer, will comply with future statutes adopted by the states pertaining to permissible default penalty charges and finance charge rates.
- Your acceptance of delivery of any goods or services after January 1, 2009 constitutes acceptance of these terms by you.

Thank you for your continued business, we appreciate it!

S Staff

Additional 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
 Gross Invoice Total: 475.31
 Less Potential Net Discount if paid by 06/15/18: 23.77
 Amount Due: 451.54

Remit To: PAYEE

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

ARNELIUS OR (117)
PO BOX 544
HILLSBORO, OR 97123
503-640-2371

INVOICE

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

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

Invoice #: 35618356
Invoice Date: 04/26/18
Due Date: 05/20/18
Delivery Date: 04/23/18
Order #: 11503267
PO#:
Sales Rep: Tilden-Browning, Jake

RECEIVED
FEB 11 2019
OWRD

Ship Via: Direct Ship County: LAKE

Product #	Product Description	Quantity	Gross Unit Price	Rounded Price	Net Disc Price	Sales Tax	Gross Ext 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 Chemtrec at 1-800-424-9300.

*** Blend Analysis ***

Product	8.4-28-18	7 S	(1000161645)						
Percent	8.396	27.985	17.990	6.996	14.392	0.705			
Warranted Analysis By	N	P	K	S	Cl	Zn			
LBS/Acre									

*** Invoice Notes ***

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

Thank you for your continued business, we appreciate it!
S Staff

Additional Information

Payment Terms: 5% 15TH PROX 20TH PROX

Invoice Sub Total:	15,846.65
Sales Tax:	0.00
Invoice Total:	15,846.65
Less Prepay Used:	0.00
Less Prepay Discount:	0.00
Gross Invoice Total:	15,846.65
Less Potential Net Discount if paid by 05/15/18:	792.33
Amount Due:	15,054.32

Remit To:

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

ORNELIUS OR (117)
 O BOX 544
 HILLSBORO, OR 97123
 03-640-2371

INVOICE

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

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

Invoice #: 35618356
 Invoice Date: 04/26/18
 Due Date: 05/20/18
 Delivery Date: 04/23/18
 Order #: 11503267
 PO#:
 Sales Rep: Tilden-Browning, Jake

RECEIVED
 FEB 11 2019
 OWRD

Ship Via: Direct Ship County: LAKE
 additions

- Any claim for shortage or damage or condition of product (excluding chemical analysis) must be made at once upon arrival of goods. Failure to comply with this notice will result in a waiver of such claims. If goods are delivered to the truck of the customer or his agent, Crop Production Services' responsibility respecting any shortage, damage to containers, and/or condition of the product (excluding chemical analysis) ceases upon delivery to such truck.
- Crop Production Services, Inc. hereby represents that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of the goods covered hereby.
- Customer represents and warrants that he is familiar with the characteristics, quantities, and potentialities of the product and/or equipment sold or leased hereunder. THERE ARE NO EXPRESS WARRANTIES RESPECTING THE PRODUCT, EQUIPMENT OR SERVICE EXCEPT THAT IT SHALL CONFORM TO THE DESCRIPTION SET FORTH. THERE ARE NO IMPLIED WARRANTIES OF FITNESS FOR A PARTICULAR PURPOSE, MERCHANTABILITY, OR OTHERWISE RESPECTING THE PRODUCT OR EQUIPMENT OR SERVICE EXCEPT THAT THE PRODUCT AND EQUIPMENT AND SERVICE SHALL BE OF SELLER'S STANDARD QUALITY. Customer warrants that he has been provided adequate product and equipment, information and instructions, and will follow the proper directions in use of the product and equipment.
- Crop Production Services' liability for damages shall in no event exceed the purchase price of the particular delivery with respect to which such damages are claimed. Crop Production Services, Inc. shall not be liable for any incidental, consequential or special damages or for any bodily injury or property damages. Crop Production Services, Inc. does not warrant and shall not be liable for any results obtained in using the product or equipment sold or leased hereunder either alone or in combination with other substances or equipment, and shall not in any case be liable to customer or any other person or corporation for damages to person or property or otherwise, incurred as a result of the use, treatment, storage, handling, application or performance of the product or equipment sold or leased hereunder.
- Indemnification - Customer agrees to investigate, indemnify, defend and hold Crop Production Services, Inc. harmless of, from and against all liability, loss, damages, injury, claims, judgments, demands, penalties, fines, suits or proceedings, whether judicial, administrative or otherwise, and attorney's fees and other costs and expenses of whatsoever kind and nature, to the equipment or any person or property whatsoever, arising out of the use, storage, operation or performance of the product or equipment provided by or on behalf of Crop Production Services, Inc., in connection with the purchase or lease or use by customer of Crop Production Services, Inc. materials, product or equipment.
- The terms of credit for customers making purchases are as follows: (i) payment in full is due and payable on the 5th day of the month following the statement date; (ii) for statement amounts not paid by the 21st day of the month following the statement, you shall also be liable for a one time default penalty fee equal to four percent (4%) of the unpaid amount for purchases in Mississippi, North Carolina or five percent (5%) in South Carolina, Georgia, Alabama, Virginia, Maryland, Delaware, New York, Pennsylvania, Connecticut, Maine, Vermont, Rhode Island, New Hampshire, West Virginia, & Texas; (iii) for amounts not paid by the 21st day of the month following the statement date, you shall also be liable for a finance charge on the unpaid balance at the highest rate allowable by statutory law. In the event of any conflict between the terms of the invoice, statement and the Customer Profile, the terms of the invoice shall control. Other terms of sale are outlined in different parts of the country to include 3% 15th proximo, net 20th proximo, as well as other terms of sale.
- Any invoice not paid in full prior to the 21st day of the month will be assessed a finance charge of 2% per month (24.0% APR) except as listed below. The finance charge will be computed as of CPS accounting month end closing and each succeeding month end until the balance is paid in full.

STATE	MONTHLY RATE	APR
Arkansas, Alabama, California, Colorado	1.50%	18.0%
Connecticut, Florida, Georgia, Hawaii		
Idaho, Louisiana, Massachusetts		
Minnesota, Montana, Nevada, North Carolina, North Dakota, Oklahoma		
Oregon, South Carolina, Utah		
Washington, Wisconsin, Wyoming		
Indiana, Mississippi	1.75%	21.0%
Maine	First \$25,000 1.8%	21.0%
	Above \$25,000 1.0%	12.0%
Nebraska	1.33%	16.0%
New Mexico	First \$500 1.00%	18.0%
	Above \$500 1.0%	18.0%
West Virginia	First \$1,500 1.5%	18.0%
	Above \$1,500 1.0%	12.0%

- CPS without written notification to the customer, will comply with future statutes adopted by the states pertaining to permissible default penalty charges and finance charge rates.
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Thank you for your continued business, we appreciate it!
 IS Staff

Additional Information

Payment Terms: 5% 15TH PROX 20TH PROX

Invoice Sub Total: 15,846.65
 Sales Tax: 0.00
 Invoice Total: 15,846.65
 Less Prepay Used: 0.00
 Less Prepay Discount: 0.00
 Gross Invoice Total: 15,846.65
 Less Potential Net Discount if paid by 05/15/18: 792.33
 Amount Due: 15,054.32

Remit To: **CPS**

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

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

INVOICE

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

Invoice #: 36777696
Invoice Date: 06/29/18
Due Date: 07/20/18
Delivery Date: 06/26/18
Order #: 12427446
PO#:
Sales Rep: Tilden-Browning, Jake

RECEIVED

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

Ship Via: Customer Vehicle County: WASHINGTON

Product	Product Description	Quantity	Unit	Gross Price	Net Disc Price	Rounded	Gross Ext'd
1000704343	SONIC ALFALFA TR 50#/LB	3000.0000	LB	3.9000		3.71	11,700.00

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 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): 12427446
(CHURCH HAY) 88451 RAVEN RIDGE LN, CHRISTMAS VALLEY, OR. 97641

Thank you for your continued business, we appreciate it!
S Staff

Additional Information

Payment Terms: 5% 15TH PROX 20TH PROX

Invoice Sub Total: 11,700.00
Sales Tax: 0.00
Invoice Total: 11,700.00
Less Prepay Used: 0.00
Less Prepay Discount: 0.00
Gross Invoice Total: 11,700.00
Less Potential Net Discount if paid by 07/15/18: 585.00
Amount Due: 11,115.00

Remit To: ~~44-234~~

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

1 of 2

13122

CROP PRODUCTION SERVICES, INC.
 INELIUS OR (117)
 BOX 544
 HILLSBORO, OR 97123
 503-640-2371

INVOICE

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

Invoice #: 36777696
 Invoice Date: 06/29/18
 Due Date: 07/20/18
 Delivery Date: 06/26/18
 Order #: 12427446
 PO#:
 Sales Rep: Tilden-Browning, Jake

RECEIVED

FEB 11 2019

OWRD

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

Ship Via: Customer Vehicle County: WASHINGTON
 Status:

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Indiana, Mississippi	1.75%	21.0%
Mohe	1.8%	21.0%
Below \$25,000	1.0%	12.0%
Nevada	1.3%	16.0%
New Mexico	1.50%	18.0%
Above \$500	1.0%	12.0%
West Virginia	1.5%	18.0%
Above \$1,500	1.0%	12.0%

- CPS without written notification to the customer, will comply with finance charges adopted by the state pertaining to permissible default penalty charges and finance charge rates.
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Thank you for your continued business, we appreciate it!
 S Staff

Additional Information:

Payment Terms: 5% 15TH PROX 20TH PROX

Invoice Sub Total: 11,700.00
 Sales Tax: 0.00
 Invoice Total: 11,700.00
 Less Prepay Used: 0.00
 Less Prepay Discount: 0.00
 Gross Invoice Total: 11,700.00
 Less Potential Net Discount if paid by 07/15/18: 585.00
 Amount Due: 11,115.00

Remit To: ~~CROP PRODUCTION SERVICES, INC.~~

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

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

Invoice

RECEIVED

FEB 11 2019

OWRD

Date	Invoice #
9/19/2017	740

Bill To
Church Hay Farm, INC. PO BOX 751 Christmas Valley, Or. 97641

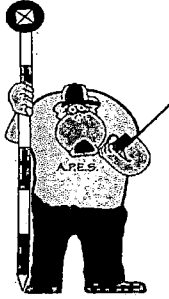
Ship To

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
			9/19/2017			

Quantity	Item Code	Description	Price Each	Amount
13.100	Triticale Seed	Forerunner Triticale Seed - Fall 6 Totes @ 2000# ea. + 22 extra small Bags	0.3675	4,814.25

[Handwritten Signature]
 PAID CHECK # 2764
 10/3/17

Thank you for your business.	Total	\$4,814.25
------------------------------	--------------	------------



**ALL POINTS
ENGINEERING & SURVEYING**
P.O. Box 767 (CRR)
Terrebonne, Oregon 97760

TRANSMITTAL

To:
Oregon Water Resources Department
725 Summer St. NE Suite A
Salem, OR 97301-1266

Date: 2/6/2019 Job: 18-050

Attention:

Re: Transfer Application

Prints Plans Map/Plat Specifications Change order Other

Copies	No.	Description
1	1	Application (21 sheets letter bond)
1	2	LUCS (3 sheets letter bond)
1	3	Evidence of Use Affidavit (12 sheets letter bond)
1	4	Maps (5 sheets ledger bond)
1	5	Check for OWRD fee

These are transmitted as checked below:

For OWRD approval Approved as submitted Approved as noted
 Copies for distribution Returned for corrections Returned corrected prints
 Review and comment For bids due Other

Remarks:

I've been in discussions with Marcy Osborne regarding this application for transfer and request that she be assigned as the case worker due to her familiarity with the project.
 Thanks and if you have questions please don't hesitate to call (541) 548-5833.

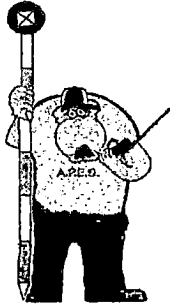
Signed: _____

RECEIVED

FEB 11 2019

OWRD

13122



ALL POINTS
ENGINEERING & SURVEYING
P.O. Box 767 (CRR)
Terrebonne, Oregon 97760

TRANSMITTAL

To:
Oregon Water Resources Department
725 Summer St. NE Suite A
Salem, OR 97301-1266

Date: 2/6/2019 Job: 18-050
Attention:
Re: Transfer Application

Prints Plans Map/Plat Specifications Change order Other

Copies	No.	Description
1	1	Application (21 sheets letter bond)
1	2	LUCS (3 sheets letter bond)
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For OWRD approval Approved as submitted Approved as noted
 Copies for distribution Returned for corrections Returned corrected prints
 Review and comment For bids due Other

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Thanks and if you have questions please don't hesitate to call (541) 548-5833.

Signed: _____

This is a corrected copy of page 19 of the Application & map for Church Transfer!

RECEIVED

FEB 11 2019

OWRD 13122