



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

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

This permit amendment 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.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed 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 Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: Permit G-17998
 Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. 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 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(For Staff Use Only)

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

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

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Part 2 of 5 – Permit Amendment Map Checklist

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

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

- Permit checklist items including: N/A If more than three permits are involved, separate maps for each permit; Permanent quality printed with dark ink on good quality paper; Map size requirements (8 1/2 x 11 inches to 30 x 30 inches); North arrow, legend, and scale; Scale requirements (1 inch = 400 feet, 1 inch = 1,320 feet); Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines; Tax lot boundaries (property lines) are required; Major physical features including rivers and creeks; Major water delivery system features; Existing place of use including hachuring; Change in place of use with hachuring; Existing point(s) of diversion or well(s); Change in point(s) of diversion or well(s).

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Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,160
2	Types of change proposed: <input type="checkbox"/> Place of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>1 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	\$0
3	Number of permits included in Permit Amendment <u>1 (3a)</u> Subtract 1 from the number in 3a: <u>0 (3b)</u> <i>If only one permit this will be 0</i> Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » »	3	\$0
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input checked="" type="checkbox"/> Yes: enter \$410 »	4	\$410
5	Do you propose to change the place of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 » <input type="checkbox"/> Yes: enter the cfs for the portions of the permits to be amended (see example below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$350, then enter on line 5 » » » » » » » » » »	5	\$0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$1,570
7	Is this permit amendment: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »	7	\$0
8	Subtract line 7 from line 6 » » » » » » » » » » Permit Amendment Fee:	8	\$1,570

*Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:

1. For irrigation calculate cfs for each permit involved as follows:
 - a. Divide total authorized cfs by total acres in the permit (*for S-12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be changed to get the application cfs (*x 45 ac = 0.56 cfs*).
 - b. If the water right permit 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 S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
2. Add cfs for the portions of permits on all the land included in the application; however **do not count cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land.** The fee should be assessed only once for each “on the ground” acre included in the application. (*In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0.*)

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Robinson Farm LLC c/o Chris Robinson			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS PO Box 100				FAX NO.
CITY Amity	STATE OR	ZIP 97101	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 Doann Hamilton			PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 632-5983 (Cell)
ADDRESS 18487 S. Valley Vista Road				FAX NO. (503) 632-5983
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.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 permit amendment; and why:
We have to use an extremely low rate of pumping on the new Reed Well (YAMH 57192, 57394) to avoid pulling sand. This lowered rate makes the well unusable for our nursery operations. Therefore, we would like to drill a new well to supply our needs.

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

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

Is the applicant the permit holder of record? Yes No

If NO, include either:

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

Has the Completion ("C") Date of the permit(s) in this application expired? Yes No

If YES, this application will not be accepted by the Department.

If NO, what are the completion dates of the permit(s)? October 15, 2023

- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing of this Permit Amendment Application if the completion date of the permit expires within 6 months of the date of filing this application.

By my signature below, I confirm that I understand:

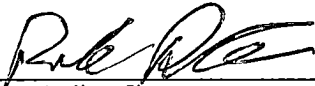
- Prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: News-Register.

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


 Applicant Signature

Richard Rowley
 Print Name and title if applicable

9/23/19
 Date


 Applicant Signature

Chris Robinson
 Print Name and title if applicable

9/23/19
 Date

Check one of the following:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.

Check the appropriate box, if applicable:

- Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

- Check here if water for any of the permits 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 local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME Yamhill County Department of Planning and Development	ADDRESS 525 NE 4th Street	
CITY McMinnville	STATE OR	ZIP 97128

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 5 of 5 – Water Use Permit Information

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

PERMIT # G-17998

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)
(Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-)	Twp			Rng		Sec		¼¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Reed Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	YAMH 57192, 57394	5	S	4	W	7	SE	NE	DLC 43	2,400 feet south and 85 feet west from the NE corner, Section 7.	
Whiteson Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	YAMH 453	5	S	4	W	8	SE	NW	DLC 80	890 feet south and 1,520 feet east from the NE corner, DLC 43.	
Proposed Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NA	5	S	4	W	7	SE	NE	DLC 43	2,325 feet south and 650 feet west from the NE corner, Section 7.	

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

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Surface water POD to Ground Water POA (SW/GW) |

Will all of the proposed changes affect the entire water use permit?

- Yes Complete only the proposed (“to” 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 permit to be changed.

For a change in place of use:

Does the permit holder of record own or control the land TO which the place of use is being moved?
 Yes No

If NO, the landowner of the land TO which the place of use is being moved must be assigned to the permit as a permit holder of record by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? Yes No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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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 Use Permit # G-17998

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	Acre (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acre (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date			
									APOA	5	S	4	W	6	SE	SE	100	DLC 40	0.2	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	NE	NE	100	DLC 40	0.1	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	NE	NE	100	DLC 80	18.1	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	NE	NE	100	Lot 8	2.5	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	SW	NE	100	DLC 43	2.0	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	SE	NE	100	DLC 80	2.7	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	SE	NE	100	Lot 7	0.1	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	SE	NE	100	DLC 43	25.9	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	NE	SE	100	DLC 43	14.0	Wells 2, 3 & 4	June 30, 2016
									APOA	5	S	4	W	7	NW	SE	100	DLC 43	2.0	Wells 2, 3 & 4	June 30, 2016
TOTAL ACRES									TOTAL ACRES									67.6			

Additional remarks: None.

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

If YES, list the other certificate, permit, or ground water registration numbers: PERMIT G-15225, GR-2000, T-12561, T-11605, CERTIFICATE 81063 AND 40629

If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

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
Reed Well 2	Yes	YAMH 57192, 57394	SEE WELL LOGS YAMH 57192 AND 57394							
Whiteson Well 3	Yes	YAMH 453	SEE WELL LOG YAMH 453							
Proposed Well 4	NO	NA	150 feet	8 inch	0 to 150 feet	0 to 30 feet	TBD	NA	Alluvium	
									Total:	758 gpm

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STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

YAMH 57192

8/6/2015

WELL I.D. LABEL# L 119327
START CARD # 1027208
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D. 2930
First Name _____ Last Name _____
Company ROBINSON FARM LLC
Address POB 100
City AMITY State OR Zip 97101

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal: _____

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

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

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 98.00 ft.

BORE HOLE SEAL
Dia From To Material From To Amt sacks/lbs

12	0	42	Bentonite Chips	0	42	31	S
10	42	98			Calculated	28	
8	98	105			Calculated		

How was seal placed: Method A B C D E
 Other POUR/PROBE/HYDRATE
Backfill placed from 98 ft. to 105 ft. Material CAVING GRAVEL
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount _____ Actual Amount _____

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia 12 From 0 To 6

(7) PERFORATIONS/SCREENS
Perforations Method drive down
Screens Type _____ Material _____
Perf/ Casing/Screen Dia From To Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

Perf	Casing	8	85	96	.2	1	300	
------	--------	---	----	----	----	---	-----	--

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
140 _____ 98 4
Temperature 54 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 148 ppm
From To Description Amount Units

--	--	--	--	--	--

(9) LOCATION OF WELL (legal description)
County YAMHILL Twp 5.00 S N/S Range 4.00 W E/W WM
Sec 7 SE 1/4 of the NE 1/4 Tax Lot 100
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
NONE, NEXT TO 9950 SW RIVERBEND RD, MCMINNVILLE

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration _____
Completed Well 7/17/2015 _____ 28
Flowing Artesian? Dry Hole?
WATER BEARING ZONES Depth water was first found 28.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)

7/17/2015	28	105	140		28
-----------	----	-----	-----	--	----

(11) WELL LOG
Ground Elevation _____
Material From To
top soil 0 6
clay, brown 6 23
clay blue gray w/occ fine sand 23 63
sand, black w/some gray clay 63 72
sand, w/occ fine/med gravel in clay 72 84
gravel, poorly sorted w/sand in clay 84 104
claystone, dark gray 104 105

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Date Started 7/16/2015 Completed 7/17/2015

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number _____ Date _____
Signed _____

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 1438 Date 7/20/2015
Signed DAVID PAYSINGER (E-filed)
Contact Info (optional) bluewaterdrilling.com 503 868 7878

