



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

Application for Historic Change in Point of Diversion/Appropriation Part 1 of 5 – Minimum Requirements Checklist

This historic change in point of diversion/appropriation 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 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 the Transferred Water Rights: **How many water rights are to be transferred? 1 List them here: 13704**
 Please include a separate Part 5 for each water right. (See instructions on page 5)

Attachments:

- Completed Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- Completed Evidence of Use Affidavit and supporting documentation showing that water has been used on the land for five years prior to transfer filing AND diverted at the actual, current point of diversion/appropriation for more than 10 years.
- Statement from the local Watermaster, based upon the Watermaster's knowledge and Department records, that no complaint of injury has been made due to the use of water at the actual, current point of diversion/appropriation.
- Land Use Information Form with approval and signature (or signed land use form receipt stub).
- N/A Affidavit(s) of Consent from Landowner (if the applicant does not own the land the water right is on.)
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

(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 – Historic Change in Point of Diversion/Appropriation Application Map Checklist

Your historic change in point of diversion/appropriation application will be returned if any of the map requirements listed below are not met.

Please be sure that the historic change in point of diversion/appropriation application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- 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 white or clear paper or film.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, three (3) paper copies and an electronic copy in a .pdf, .tiff or .jpg format are required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) and county tax lot numbers are required.
- 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.
- Authorized 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.
- Actual, current point of diversion/appropriation. Show the 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°).
- 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 If for more than one actual, current point of diversion/appropriation, separate hachuring is needed for each place of use served by each point of diversion/appropriation, including the 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.

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FEE WORKSHEET for HISTORIC/POD/POA TRANSFER			
1	Base Fee (includes Historic POD change to one water right for up to 1 cfs)	1	\$1,160
2	Number of water rights included in transfer <u>1</u> (2a) Subtract 1 from the number in 2a above: <u>0</u> (2b) <i>If only one water right this will be 0</i> Multiply line 2b by \$520 and enter » » » » » » » » » » » » » » » »	2	0
3	Do you propose to change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input type="checkbox"/> Yes: enter \$410 »	3	0
4	Add entries on lines 1 through 3 above » » » » » » » » » Transfer Fee:	4	1160

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

Part 4 of 5 – Applicant Information and Signature

Applicant Information

Note: Applicant must be an INDIVIDUAL, as defined by OAR 690-380-2120, that is “a natural person and does not include a government body, organization, business enterprise, or other such entity.”

APPLICANT/BUSINESS NAME Saturno Land Company Oregon LLC			PHONE NO. 509-386-4099	ADDITIONAL CONTACT NO.
ADDRESS 41 S PALOUSE ST				FAX NO.
CITY WALLA WALLA	STATE WA	ZIP 99362	E-MAIL DOUGLASSATURNO509@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.				

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

AGENT/BUSINESS NAME Doug Saturno			PHONE NO. 509-386-4099	ADDITIONAL CONTACT NO.
ADDRESS 41 S PALOUSE ST				FAX NO.
CITY WALLA WALLA	STATE WA	ZIP 99362	E-MAIL DOUGLASSATURNO509@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.				

By signing this application, I understand that prior to Department approval of the historic change in point of diversion/appropriation, I will be required to provide landownership information and evidence that I am authorized to pursue the change as identified in OAR 690-380-4010(5).



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

Douglas Saturno
Applicant Signature

Douglas Saturno
manager
Print Name (and Title if applicable)

6-11-2020
Date

Applicant Signature

Print Name (and Title if applicable)

Date

Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for HISTORIC POD/POA TRANSFER			
1	Base Fee (includes Historic POD change to one water right for up to 1 cfs)	1	\$1,160
2	Number of water rights included in transfer <u>1 (2a)</u> Subtract 1 from the number in 2a above: <u>0 (2b)</u> <i>If only one water right this will be 0</i> Multiply line 2b by \$520 and enter » » » » » » » » » » » » » » » »	2	0
3	Do you propose to change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input type="checkbox"/> Yes: enter \$410 »	3	0
4	Add entries on lines 1 through 3 above » » » » » » » » Transfer Fee:	4	1160

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

Note: Applicant must be an INDIVIDUAL, as defined by OAR 690-380-2120, that is “a natural person and does not include a government body, organization, business enterprise, or other such entity.”

APPLICANT/BUSINESS NAME Douglas Saturno			PHONE NO. 509-386-4099	ADDITIONAL CONTACT NO.
ADDRESS 41 S PALOUSE ST			FAX NO.	
CITY WALLA WALLA	STATE WA	ZIP 99362	E-MAIL DOUGLASSATURNO509@GMAIL.COM	
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ADDRESS 41 S PALOUSE ST			FAX NO.	
CITY WALLA WALLA	STATE WA	ZIP 99362	E-MAIL DOUGLASSATURNO509@GMAIL.COM	
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By signing this application, I understand that prior to Department approval of the historic change in point of diversion/appropriation, I will be required to provide landownership information and evidence that I am authorized to pursue the change as identified in OAR 690-380-4010(5).



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

_____ Applicant Signature	_____ Print Name (and Title if applicable)	_____ Date
_____ Applicant Signature	_____ Print Name (and Title if applicable)	_____ Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No *If NO, include signatures of all deeded landowners (and mailing 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.*

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

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

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

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

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

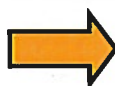
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Describe any special ownership circumstances here: _____

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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



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

ENTITY NAME WALLOWA COUNTY PLANNING	ADDRESS 101 SOUTH RIVER ST	
CITY ENTERPRISE	STATE OR	ZIP 97828

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

Explain in your own words what you propose to accomplish with this transfer application; and why: PUMP HAS BEEN USED IN THIS LOCATION FOR MANY DECADES PRIOR, LOCAL WATERMASTER APPROACHED AND ENCOURAGED A HPOD APP TO MAKE PUMP STATION LEGAL. LOCAL WATERMASTER ASSISTED WITH THIS APPLICATION

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

Part 5 of 5 – Water Right Information

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

CERTIFICATE # 13704

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Description of Water Delivery System

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System capacity: ^{3.0} 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. 25 HP PUMP TO BURIED MAINLINES THAT FEED TWO 1/2 PIVOTS AND HANDLINE SPRINKLERS FOR THE CORNERS

Table 1. Location of Authorized and Current 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 the Current POD/POA that has been used for more than 10 years?	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)
POD 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Current		2	S	45	E	7	SE	SE		600' NORTH & 1300' WEST FROM THE SE CORNER SECTION 7
POD 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Current		2	S	45	E	7	SE	NW		3184' WEST & 3386' NORTH FROM THE SE CORNER SECTION 7
	<input type="checkbox"/> Authorized <input type="checkbox"/> Current										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Current										

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

- Point of Diversion (POD) Additional Point of Diversion (APOD)
 Point of Appropriation/Well (POA) Additional Point of Appropriation (APOA)

Will the historic change in point of diversion/appropriation affect the entire water right?

- Yes Complete only the proposed section of Table 2 on the next page.
 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. Do you have questions about how to fill-out the tables? See page 5 for instructions, or contact the Department at 503-986-0900 and ask for Transfer Staff.

Table 2. Description of Changes to Water Right Certificate # 13704

List only the part of the right that will be changed. For the acreage in each ¼ ¼, list the change proposed. If more than one actual, current POD/POA, specify the acreage associated with each actual, current POD/POA.

Authorized ("from" lands) as they appear before the changes											Proposed Change (POD, POA, APOD, or APOA)	Current (in use for more than ten years) POD(s)/POA(s) to be used (from Table 1)	Priority Date
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)					
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2	POD	POD #5	1897
"	"	"	"	"	"	"	"	"	EXAMPLE	"	"	"	"
2	S	45	E	6	SW	SW	1601		8.8	POD 1	HPOD	HPOD	1935
"	"	"	"	"	SE	SW	"		1.0	"	"	"	"
2	S	45	E	7	NE	NW	"		19	"	"	"	"
"	"	"	"	"	NW	NW	"		15	"	"	"	"
"	"	"	"	"	SE	NW	2200		5	"	"	"	"

Additional remarks: _____

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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 current 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/)

OR

- Describe the construction of the authorized and current well(s) in Table 3 for any wells that do not have a well log.

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 adequate information is likely to delay the processing of your transfer application.

Current or Authorized POA Name or Number	OWRD Well ID Tag No. L-____ (if available)	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right

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Application for Water Right Historic POD/POA Transfer Watermaster Statement



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

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I, DAVID BATES, Watermaster of District 7,
state that to my knowledge, there has been no claim of injury due to use of an historic point of
diversion/appropriation for Certificate 13704

from Prairie Creek located as follows:
(source)

By Township, Range Section and distances from a Survey Corner:

Twp	Rng	Mer	Sec	Q-Q	DLC	GLot	Measured Distances
2S	45E	W.M.	7	SE NW			3184' WEST & 3386' NORTH FROM THE SE CORNER SECTION 7 T2S R45E W.M.

OR

by GPS coordinates: Latitude: _____ Longitude: _____

OR

as shown on the attached map.

Signature

5/29/2020

Date

Application for Water Right Transfer

Evidence of Use Affidavit



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

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

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State of Oregon)
)
 County of) ss

I, Jon VanderZanden, in my capacity as Farm operator

OWRD

mailing address

telephone number (541) 398-0819, 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 # ____; **OR**
- My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township		Range		Mer	Sec	¼ ¼		Gov't Lot or DLC	Acres (if applicable)
13704	2	S	45	E	WM	6	SW	SW		8.8
"	"	"	"	"	"	7	NE	NW		19
"	"	"	"	"	"	"	NW	NW		15
"	"	"	"	"	"	"	SE	NW		5

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 # 13704 (For Historic POD/POA Transfers)

(continues on reverse side)

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

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.

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Signature of Affiant

Date

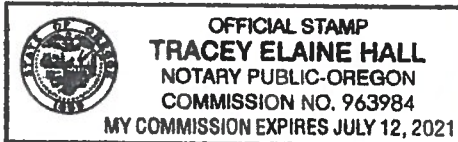
6/4/2020

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Signed and sworn to (or affirmed) before me this 4 day of June, 2020.

Tracey Elaine Hall
Notary Public for Oregon

My Commission Expires: 7/12/21



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

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NTAIN RD
R 97828



Questions about your bill: Call toll free 1-866-870-3419 pacificpower.net

BILLING DATE: Apr 28, 2020 ACCOUNT NUMBER: 26330785-004 4 DUE DATE: May 14, 2020 AMOUNT DUE: \$324.50

ITEM 9 - ELECTRIC SERVICE

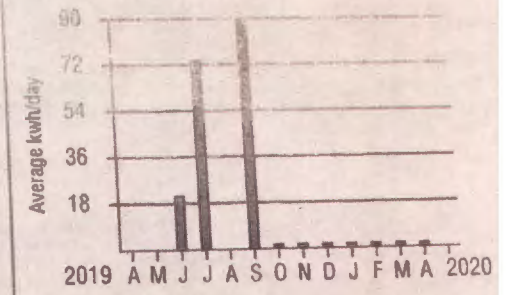
84400 Joseph Hwy # 25HP Enterprise OR
Horse Power Rating : 0025.0 Schedule 41X
Service ID: 374650531-001

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
75680182	Mar 23, 2020	Apr 21, 2020	29	394	461	1.0	67 kwh
75680182	Demand	Apr 21, 2020			2.129	1.0	2 kw
75680182	Reactive	Apr 21, 2020			3.028	1.0	3 kvar

Next scheduled read date: 05-20. Date may vary due to scheduling or weather.

NEW CHARGES - 04/20	UNITS	COST PER UNIT	CHARGE
Delivery Charge Secondary	67 kwh	0.0363600	2.44
Reactive Power Charge Sec	2 kvar	0.6500000	1.30
(Season End Est Charge Sec Is \$30.00)			
Supply Energy Sec 1ST Blk Wint for 8 day(s)	18 kwh	0.0863900	1.56
Supply Energy Sec Summer for 21 day(s)	49 kwh	0.0598700	2.93
Federal Tax Act Adjustment	67 kwh	-0.0045600	-0.31
Oregon Corp Activities Tax Adj		0.0041000	0.03
Public Purpose		0.0300000	0.24
Energy Conservation Charge	67 kwh	0.0033200	0.22
Low Income Assistance	67 kwh	0.0006900	0.05
Total New Charges			8.46

Historical Data - ITEM 9



Your Average Daily kwh Usage by Month

PERIOD ENDING	APR 2020	APR 2019
Avg. Daily Temp.	41	46
Total kwh	67	0
Avg. kwh per Day	?	0
Cost per Day	\$0.29	\$0.00

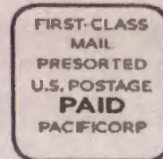
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ITEM 11 - ELECTRIC SERVICE

65765 Elk Mountain Rd # 100HP Enterprise OR
Horse Power Rating :100 W/vfd Schedule 41L

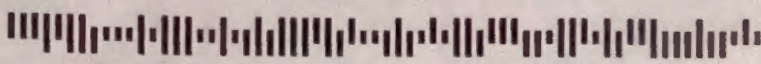
Historical Data - ITEM 11

15884 01 AD 1-0
 JON M VANDERZANDEN
 JAMIE VANDERZANDEN
 66240 ELK MOUNTAIN RD
 ENTERPRISE OR 97828-4074



Inquiries? Call your
 Business Solutions Team
 Toll free 1-866-870-3419,
 M-F, 6am-6pm PT
 pacificpower.net

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 5/10/2020



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Your Balance With Us

Previous Account Balance	331.73
Payments/Credits	-331.73
New Charges	+324.50
Current Account Balance	\$324.50

Payments Received

DATE	DESCRIPTION	AMOUNT
Apr 9, 2020	Payment Received - Thank You	331.73
Total Payments		\$331.73

Summary of Account Activity

ITEM 5 ELECTRIC SERVICE	66205 Getting Rd Enterprise OR Residential - Mf Home Schedule 4 METER # 85120900	304.51
ITEM 6 ELECTRIC SERVICE	64822 Brock Rd # 15HP Enterprise OR Horse Power Rating : 0015.0 Schedule 41X METER # 77424057	0.00
ITEM 7 ELECTRIC SERVICE	84400 Joseph Hwy # Pump Enterprise OR Snyder Place 60hp Schedule 1XL METER # 75680184	0.00
ITEM 8 ELECTRIC SERVICE	84400 Joseph Hwy # Pump Enterprise OR Pivot Schedule 41X METER # 77425333	0.00
ITEM 9 ELECTRIC SERVICE	84400 Joseph Hwy # 25HP Enterprise OR Horse Power Rating : 0025.0 Schedule 41X METER # 75680182	8.46
ITEM 11 ELECTRIC SERVICE	65765 Elk Mountain Rd # 100HP Enterprise OR Horse Power Rating :100 W/vfd Schedule 41L METER # 77425396	11.53
ITEM 13 ELECTRIC SERVICE	65984 Sunrise Rd # 25HP Enterprise OR Mclaughlin: 25hp Schedule 41X METER # 77426085	0.00

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See reverse