Application for Permanent Water Right Transfer

O R E G O N
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.oregon.gov/OWRD

Part 1 of 5 – Minimum Requirements Checklist

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. JUN 17 2020 Part 2 – Completed Transfer Application Map Checklist. Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and \bowtie 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? 2 List them here: 39351 & 39423 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. Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.) 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. 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. Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability. (For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): ___ Map not included or incomplete Application fee not enclosed/insufficient Evidence of Use Form not enclosed or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part _____ is incomplete

This transfer application will be returned if Parts 1 through 5 and all required

Other/Explanation _

Staff:

Date:

503-986-0

Part 2 of 5 – Transfer Application Map

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

		sure that the transfer application map you submit includes all the required items and he existing water right map. Check all boxes that apply.
	□ 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.
\boxtimes		Permanent quality printed with dark ink on good quality paper. JUN 17 2020
		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
\boxtimes		A north arrow, a legend, and scale.
		The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
		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 $-42^{\circ}32'15.5''$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

Part 3 of 5 - Fee Worksheet

	FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)		
1	Base Fee (includes one type of change to one water right for up to 1 efs)	1	\$1,160
	Types of change proposed: Received by OWRD		5
	Place of Use		2
	Character of Use JUN 1 7 2020	Pf.	= -
	Point of Diversion/Appropriation		
	Number of above boxes checked = $\frac{2(2a)}{}$ Salem, OR		1 1
	Subtract 1 from the number in line $2a = \frac{1(2b)}{1}$ If only one change, this will be 0		
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » »	2	\$930
. , 6.	Number of water rights included in transfer 2 (3a)		
	Subtract 1 from the number in 3a above: 1 (3b) If only one water right this will be 0		
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » »	3	\$520
	Do you propose to add or change a well, or change from a surface water POD to a		
	well?		
	No: enter 0 » » » » » » » » » » » » » » » » » »		;
4	Yes: enter \$410 » » » » » » » » » » » » » » » »	4	0
	Do you propose to change the place of use or character of use?		
	No: enter 0 on line 5 » » » » » » » » » » » » » » » »		,
	$\overline{igwedge}$ Yes: enter the cfs for the portions of the rights to be transferred (see		
	example below*): <u>0.042 (5a)</u>		
	Subtract 1.0 from the number in 5a above: -0.958 (5b)		
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » »		
	If 5b is greater than 0, round up to the nearest whole number:(5c) and		
5	multiply 5c by \$350, then enter on line 5 » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$2,610
	Is this transfer:		
	necessary to complete a project funded by the Oregon Watershed		
	Enhancement Board (OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net benefit to		
	fish and wildlife habitat?		
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » »	7	
8	Subtract line 7 from line 6 » » » » » » » » » » » » Transfer Fee:	8	\$2,610

1. For irrigation calculate cfs for each water right involved as follows:

a. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs \div 100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac= 0.56 cfs).

b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)

2. Add cfs for the portions of water rights on all the land included in the transfer; however do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land. The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

	FEE WORKSHEET for SUBSTITUTION		
1	Base Fee (includes change to one well)	1	\$840.00
	Number of wells included in substitution(2a)		
	Subtract 1 from the number in 2a above:(2b) If only one well this will be 0	12	
2	Multiply line 2b by \$410 and enter » » » » » » » » » » » » » »	2	1
3	Add entries on lines 1 through 2 above » » » » Fee for Substitution:	3	

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

Part 4 of 5 – Applicant Information and Signature

Applicant Information

Applicant information				Descived by OWRD
APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Michael and Susan Milynarczy	k / Upper C	oos River Water		0.015-400-00-00-00
Association (UCRWA) - TL 400				JUN 1 7 2020
ADDRESS			¥	FAX NO.
64225 Solari Rd.				Colom: OR
CITY	STATE	ZIP	E-MAIL	Salem, Ort
Coos Bay	OR	97420	4	
By providing an e-mail addr	ESS, CONSEN	IT IS GIVEN TO RECEIN	/E ALL CORRESPONI	DENCE FROM THE DEPARTMENT
ELECTRONICALLY. COPIES OF TH	E FINAL ORD	ER DOCUMENTS WILL	ALSO BE MAILED.	

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Dustin and Emily Parkhu	rst / UCRWA – TL			
ADDRESS				FAX NO.
64225 SOLARI RD.				
CITY	STATE	ZIP	E-MAIL	•
Coos Bay	OR	97420		
BY PROVIDING AN E-MAIL	ADDRESS, CONSE	IT IS GIVEN TO R	ECEIVE ALL CORRESPONDE	NCE FROM THE DEPARTMENT
ELECTRONICALLY. COPIES	OF THE FINAL ORD	ER DOCUMENTS	WILL ALSO BE MAILED.	

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Adam Henry Kubli / UCRWA – TL	600	~		
ADDRESS				FAX NO.
64175 Solari Rd.				
CITY	STATE	ZIP	E-MAIL	
Coos Bay	OR	97420		
BY PROVIDING AN E-MAIL ADDRES	s, consent	IS GIVEN TO RECEIVE	ALL CORRESPONDENCE FR	OM THE DEPARTMENT
ELECTRONICALLY. COPIES OF THE F	INAL ORDE	R DOCUMENTS WILL A	LSO BE MAILED.	·

APPLICANT/BUSINESS NAME STEVE (UCRWA PRESIDENT) AND TINA	WINFREY / U	JCRWA - TL 801 &	PHONE NO. 541-269-0285	ADDITIONAL CONTACT NO. 541-290-5061
TL 1000				
ADDRESS		_		FAX NO.
64078 Solari Rd.	41			
CITY	STATE	ZIP	E-MAIL	
Coos Bay	OR	97420	winfrey5or@charter.n	et
By providing an e-mail addres	s, consent	IS GIVEN TO RECEIVE	ALL CORRESPONDENCE FR	OM THE DEPARTMENT
ELECTRONICALLY. COPIES OF THE F	INAL ORDE	R DOCUMENTS WILL A	LSO BE MAILED.	

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Donald and Diane Boyer			2	
ADDRESS			•	FAX NO.
64110 Solari Rd.				
CITY	STATE	ZIP	E-MAIL	•
Coos Bay	OR	97420		
BY PROVIDING AN E-MAIL ADDRES	s, consent	IS GIVEN TO RECEIVE	ALL CORRESPONDENCE FR	OM THE DEPARTMENT
ELECTRONICALLY. COPIES OF THE F	INAL O RDE	R DOCUMENTS WILL A	ILSO BE MAILED.	

				EC/III
APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Tyler and Steffanie Dean / U	CRWA - TL 600)		Received by OW
ADDRESS				FAX NO.
Solari Rd.				JUN 1 7 2020
CITY	STATE	ZIP	E-MAIL	
Coos Bay	OR	97420	TO THE ALL CORDECTIONS	ENCE FROM THE DEPARATION OR
BY PROVIDING AN E-MAIL ADD	DRESS, CONSEN	IT IS GIVEN TO REC	EIVE ALL CORRESPOND	ENCE FROM THE DEPARTMENT, OR
ELECTRONICALLY. COPIES OF T	THE FINAL ORDI	EK DOCUMENTS V	VILL ALSO BE IVIAILED.	
APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Robert and Tina George / UC	CRWA TL 700		-	
ADDRESS		70		FAX NO.
66340 Solari Rd.		_		
CITY	STATE	ZIP	E-MAIL	
Coos Bay	OR	97420	7 7	
				ENCE FROM THE DEPARTMENT
ELECTRONICALLY. COPIES OF T	THE FINAL ORD	ER DOCUMENTS V	VILL ALSO BE MAILED.	
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	agent is auth	norized to repre	esent the applicant i	n all matters relating to this applica
AGENT/BUSINESS NAME		norized to repre		
AGENT/BUSINESS NAME Marc Van Camp / Van Camp		norized to repre	PHONE NO.	
Agent Information — The AGENT/BUSINESS NAME Marc Van Camp / Van Camp ADDRESS PO Box 995		norized to repre	PHONE NO.	ADDITIONAL CONTACT NO.
AGENT/BUSINESS NAME Marc Van Camp / Van Camp ADDRESS PO Box 995	Consulting	ZIP	PHONE NO. 541-297-1880 E-MAIL	ADDITIONAL CONTACT NO.
AGENT/BUSINESS NAME Marc Van Camp / Van Camp ADDRESS PO Box 995 CITY Coos Bay	Consulting STATE OR	ZIP 97420	PHONE NO. 541-297-1880 E-MAIL vancampconsu	FAX NO. Iting@gmail.com
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- 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: <u>The World.</u>
- Amendments to the application may only be made in response to the Department's Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).

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

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7/
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	Michael Milynarczyk		
Applicant signature	Print Name (and Title if applicable)	Date	· · · · · · · · · · · · · · · · · · ·
	Susan Milynarczyk		Received by OWRD
Applicant signature	Print Name (and Title if applicable)	Date	poor to
	<u>Dustin Parkhurst</u>		Received by OWRD
Applicant signature	Print Name (and Title if applicable)	Date	W
	Emily Parkhurst		JUN 17 2020
Applicant signature	Print Name (and Title if applicable)	Date	
	Adam Henry Kubli		Salem, OR
Applicant signature	Print Name (and Title if applicable)	Date	
	Steve Winfrey, UCRWA President		,
Applicant signature	Print Name (and Title if applicable)	Date	
	Tina Winfrey		
Applicant signature	Print Name (and Title if applicable)	Date	
	Donald Boyer		
Applicant signature	Print Name (and Title if applicable)	Date	
	Diane Boyer		
Applicant signature	Print Name (and Title if applicable)	Date	
	Tyler Dean		
Applicant signature	Print Name (and Title if applicable)	Date	
	Steffanie Dean		
Applicant signature	Print Name (and Title if applicable)	Date	
0	Robert George		
Applicant signature	Print Name (and Title if applicable)	Date	
	Tina George		
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.

Please see Attachment "Consent by Deeded Landowner"



JUN 1 7 2020

					0.1
The applicant is resp	onsible fo to the app	or complet olicant.	ion of cl	hange(s). Notices a	and correspondence should
					oposed change(s) after the be sent to this landowner
					r completion of change(s). owner and the applicant.
At this time, are the lands in	n this tran	sfer applic	cation in	the process of be	ing sold? 🗌 Yes 🔀 No
	. If you d	o not knov	v who th		e the receiving landowner will be, then a request for
If a property sells, the country and the country and the country and the country and the country are sells, the country are selled, the coun	or other	document	t states o	otherwise. For mo	
RECEIVING LANDOWNER NAME	77.		-to the second	PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS					FAX NO.
CITY	STATE	ZIP ,		E-MAIL	
an irrigation or other wa	ater distri		ADDRESS	and attach Suppl	emental Form D.)
CITY		1			
		1	STATE		ZIP
			oplied ur		zip ce agreement or other
contract for stored water		federal age	oplied ur		1
contract for stored wate		federal age	oplied ur ency or o		1
contract for stored wate	er with a	federal age	applied une ency or of address state	other entity. u must list all cour	zip zip, city, municipal
CONTRACT for stored water contract for store	er with a	Requiremovithin who	applied unency or of address state ents, you se jurisd	other entity. u must list all cour	zip zip, city, municipal
CONTRACT FOR STORED WATER ENTITY NAME CITY To meet State Land Use Cocorporation, or tribal gover ENTITY NAME Coos County CITY	er with a	Requirements	and	other entity. u must list all cour liction water will b	zip zip zip
contract for stored water contract for stored water city To meet State Land Use Cocorporation, or tribal gover constity NAME Coos County	er with a	Requirements	and	other entity. u must list all cour liction water will b	zip zip aty, city, municipal e diverted, conveyed or us
CONTRACT FOR STORED WATER ENTITY NAME CITY To meet State Land Use Cocorporation, or tribal gover ENTITY NAME Coos County CITY	er with a	Requirements	and	other entity. u must list all cour liction water will b	zip zip zip
CONTRACT for stored water ENTITY NAME CITY To meet State Land Use Cocorporation, or tribal gover ENTITY NAME Coos County CITY Coquille	er with a	Requirement who	address state ents, you se jurisd Address 250 Nort STATE	other entity. u must list all cour liction water will b	zip zip zip

INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please save the application form to your computer. Unlock the document by using one of the following instructions for your Microsoft Word software version:

Microsoft Word 2003

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Unlock the document by one of the following:

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Using the Tools menu => click Unprotect Document;
 OR

Salem, OR

Using the Forms toolbar => click on the Protect/Unprotect icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the Tools menu => click Protect Document;
 OR
- Using the Forms toolbar => click on the Protect/Unprotect icon.

en unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

ter editing, re-lock the ocument to enable eckboxes to work.

Microsoft Word 2007

- Unlock the document by clicking the Review tab, then click Protect Document, then click
 Stop Protect
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

Microsoft Word 2010

- Unlock the document by clicking the **Review** tab; toggle the **Restrict Editing icon** at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the "Allow only this type of editing in the document: Filling in forms" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the Editing Restrictions/Allow Only This Type of Editing/Filling In Forms box from the drop-down menu, then check Yes, Start Enforcing Protection. You do not need to assign a password for the editing restrictions.

Other Alternatives:

- Photocopy pages or tables in Part 5, -mark through any non-applicable information, insert/attach
 photocopied pages to document in the appropriate location, and manually amend page numbers as
 necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

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 # 39351 Received by OWRD Description of Water Delivery System

System capacity: 0.06 cubic feet per second (cfs) OR

gallons per minute (gpm)

Salem, OR

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 distribution system is a shared system with Certificates 39351 and 39423 and Permit S-41386. The POD is a small diversion reservoir that directs water into a short section of 2" mainline which increases to a 3" mainline. The 3" mainline follows Smith Creek for approximately 5770'. At this point the 3" mainline diverges into three separate pipelines as follows. The first pipeline bears Easterly and is the mainline for permit S-41386 and the mainline for all of the UCRWA. The other 2 pipelines bear northeasterly, 1 being Riverview Christian Fellowship's (RCF) that supplies Certificate 39423 and the portion of Certificate 39351 described in T-2361 (referred to as "new school buildings" and "teachers residence" in Certificate 39351), 2 being the supply line for the portion of Certificate 39351 described as, "old school buildings".

The portion of 39351 described as "old school buildings" is not proposed to change in this tranfer and the extent of use is unknown to the applicant. Portion of 39351 described as "new school buildings" and "teachers residence" is owned by RCF, which used this portion and the school portion of Certificate 39423 as their primary water supply until 2018. In 2018 RCF was deemed a community water supply, and was therefore required to either treat the domestic surface water from Certificate 39351 and 39423 or use groundwater. RCF drilled a water right exempt well to supply their domestic expanded needs and consent to transfer said domestic expanded portions to UCRWA, while retaining the irrigation portion of 39423 for irrigation of grass lawn.

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)	Τ\	wp Rng		Sec	7/4	% %		Tax Lot, DLC or Gov't Lot		Measured Distances (from a recognized survey corner)
1	Authorized Proposed		25	s	12	w	34	NW	SE		2045' N. AND 925' E. from the S. 1/4 Cor., Sec. 34, T.25S., R.12W., W.M.	

Check al	ll type(s) of change(s) proposed below (ch	ange '	"CODES" are provided in parentheses):
\boxtimes	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
\boxtimes	Character of Use (USE)		Point of Appropriation/Well (POA)
	Point of Diversion (POD)		Additional Point of Appropriation (APOA)
$\ell \subset V_{i}$	Additional Point of Diversion (APOD)		Substitution (SUB)
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV)
Will all c	of the proposed changes affect the entire	water	right?
Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the prop		s) section of Table 2 on the next page. Use the changes.
⊠ No	Complete all of Table 2 to describe the po	rtion	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 # 39351

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.							NGES	S Proposed Changes (see																	
Tv	vp	Rn		Sec			Tax Lot	Gvt	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	"CODES" from previous page)	Twp Rng Sec % % Tax Lot Lot of				Gvt	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date				
	100												EXAMPLE		743											er in t
2	s	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
														2	S	9	E	2	sw	NW	500		5.0		POD#6	1901
25	s	12	w	26	NW	sw	300	NA	NA	New School Buildings	POD 1	1929	POU/USE	25	s	12	w	26	NW	sw	400		-	DOMESTIC EXPANDED	POD 1	1929
25	s	12	w	26	NW	sw	300	NA	NA	Teachers Residence	POD 1	1929	POU/USE	25	s	12	w	26	NW	sw	500			DOMESTIC EXPANDED	POD 1	1929
											-		POU/USE	25	s	12	w	26	NW	sw	600			DOMESTIC EXPANDED	POD 1	1929
					1, 1								POU/USE	25	s	12	w	26	NW	sw	801			DOMESTIC EXPANDED	POD 1	1929
	T												POU/USE	25	s	12	w	26	NW	sw	900			DOMESTIC EXPANDED	POD 1	1929
													POU/USE	25	s	12	w	26	NW	sw	1000			DOMESTIC EXPANDED	POD 1	1929
	_												POU/USE	25	s	12	w	27	NE	SE	600			DOMESTIC EXPANDED	POD 1	1929
													POU/USE	25	s	12	w	27	NE	SE	700	,		DOMESTIC EXPANDED	POD 1	1929
	T						_															(1			
N																										
	1		1			TO	TAL AC	RES:												TO	TAL AC	RES:			2	

Additional remarks: Being 0.021 cfs for new school building and 0.001 cfs for teachers residence.

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TACS

Certificate # 39351

For Place of Use or Character of Use Changes

		de di dide di character di disc changes	
		here other water right certificates, water use permits or ground wate the "from" or the "to" lands? $igtimes$ Yes $igcap$ No	r registrations associated
	If YES	s, list the certificate, water use permit, or ground water registration n	umbers: <u>39423.</u>
>	a prin to a g	uant to ORS 540.510, any "layered" water use such as an irrigation right proposed for transfer must be included in the transfer or beground water registration must be filed separately in a ground water reation.	e cancelled. Any change
	For Sul	ostitution (ground water supplemental irrigation will be substituted for irrigation)	N Company of the Comp
		nd water supplemental Permit or Certificate #; ce water primary Certificate #	Received by OWRD
	For a c	nange from Supplemental Irrigation Use to Primary Irrigation Use	JUN 17 2020
		ify the primary certificate to be cancelled. Certificate #	
	For a c	nange in point(s) of appropriation (well(s)) or additional point(s) of a	Salem, OR ppropriation:
		Well log(s) are attached for each authorized and proposed well(s) that associated with the corresponding well(s) in Table 1 above and on the 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	t are clearly labeled and
	AND/	OR	*
		Describe the construction of the authorized and proposed well(s) in T do not have a well log. For <i>proposed wells not yet constructed or built</i> estimate" for each requested information element in the table. The D you consult a licensed well driller, geologist, or certified water right e assembling the information necessary to complete Table 3.	, provide "a best Department recommends
		onstruction of Point(s) of Appropriation s) in this listing must be clearly tied to corresponding well(s) described	d 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			
								=	u.	
		1								

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.

		1
	CERTIFICATE # 39423	Received by OWRD
Description of Wa	ater Delivery System	Received by OWRD
System capacity:	<u>0.06</u> cubic feet per second (cfs) OR	JUN 17 2020
	gallons per minute (gpm)	
Describe the curr	ant water delivery system or the system that was in place	e at some file within the la

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 distribution system is a shared system with Certificates 39351 and 39423 and Permit S-41386. The POD is a small diversion reservoir that directs water into a short section of 2" mainline which increases to a 3" mainline. The 3" mainline follows Smith Creek for approximately 5770'. At this point the 3" mainline diverges into three separate pipelines as follows. The first pipeline bears Easterly and is the mainline for permit S-41386 and the mainline for all of the UCRWA. The other 2 pipelines bear northeasterly, 1 being Riverview Christian Fellowship's (RCF) that supplies Certificate 39423 and the portion of Certificate 39351 described in T-2361 (referred to as "new school buildings" and "teachers residence" in Certificate 39351), 2 being the supply line for the portion of Certificate 39351 described as, "old school buildings".

The portion of 39351 described as "old school buildings" is not proposed to change in this certificate and the extent of use is unknown to the applicant. Portion of 39351 described as "new school buildings" and "teachers residence" is owned by RCF, which used this portion and the school use portion of Certificate 39423 as their primary water supply until 2018. In 2018 RCF was deemed a community water supply, and was therefore required to either treat the domestic surface water from Certificate 39351 and 39423 or use groundwater. RCF drilled a water right exempt well to supply their domestic expanded needs and consent to transfer said domestic expanded portions to UCRWA, while retaining the irrigation portion of 39423 for irrigation of grass lawn.

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)	Tv	νp	Ri	ng	Sec	1/4	<i>44</i>		Measured Distances (from a recognized survey corner)
1	Authorized Proposed		25	S	12	w	34	NW	NW SE		2045' N. AND 925' E. from the S. 1/4 Cor., Sec. 34, T.25S., R.12W., W.M.

Check a	ll type(s) of change(s) proposed below (ch	ange '	"CODES" are provided in parentheses):
	Place of Use (POU)		Supplemental Use to Primary Use (S to P)
\boxtimes	Character of Use (USE)		Point of Appropriation/Well (POA)
	Point of Diversion (POD)		Additional Point of Appropriation (APOA)
	Additional Point of Diversion (APOD)		Substitution (SUB)
	Surface Water POD to Ground Water POA (SW/GW)		Government Action POD (GOV)
Will all d	of the proposed changes affect the entire	water	right?
Yes	Complete only the Proposed ("to" or "on" "CODES" listed above to describe the prop		s) section of Table 2 on the next page. Use the changes.
☐ No	Complete all of Table 2 to describe the po	rtion	of the water right to be changed.
			Received by OWRD

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Salem, OR

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 # 39423

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.

	T			_	at ap	pear	s on th	ne cert	tificate		ls) DPOSED CHAI		Proposed Changes (see	1		7	The	listir			ıld app		FTER F	n" lands) PROPOSED	CHANGES	i
Tw	γp	Rng		Sec		14	Tax Lo	Gvt	Acres	Type of USE listed on Certificate	POD(s) or		"CODES" from previous page)	Twp Rng Sec ¼¼ Tax Lot Lot		Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date						
													EXAMPLE													
2	s	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
														2	s	9	Е	2	sw	NW	500		5.0		POD #6	1901
25	s	12	w	26	NW	sw	300	NA	NA	School	POD 1	1970	POU/USE	25	s	12	w	26	NW	sw	400			DOMESTIC EXPANDED	POD 1	1970
			- 1							**			POU/USE	25	s	12	w	26	NW	sw	500			DOMESTIC EXPANDED	POD 1	1970
													POU/USE	25	s	12	w	26	NW	sw	600			DOMESTIC EXPANDED	POD 1	1970
									21				POU/USE	25	s	12	w	26	NW	sw	801			DOMESTIC EXPANDED	POD 1	1970
													POU/USE	25	s	12	w	26	NW	sw	900			DOMESTIC EXPANDED	POD 1	1970
													POU/USE	25	s	12	w	26	NW	sw	1000			DOMESTIC EXPANDED	POD 1	1970
						5 /			111				POU/USE	25	s	12	w	27	NE	SE	600			DOMESTIC EXPANDED	POD 1	1970
									- /				POU/USE	25	s	12	w	27	NE	SE	700			DOMESTIC EXPANDED	POD 1	1970
	П						y la																		361	
	П								*		0								B . F							
				_		ТО	TAL AC	RES:								7				TO	TAL AC	RES:	1			

Additional remarks:

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Permanent Transfer Application Form – Page 15 of 17

TACS

	For Pla	ce of Use or Character of Use Changes	
		here other water right certificates, water use permits or ground water r the "from" or the "to" lands? \Box Yes \Box No	registrations associated
	If YE	S, list the certificate, water use permit, or ground water registration nur	mbers:
\ \ \ \	a pri	uant to ORS 540.510, any "layered" water use such as an irrigation right mary right proposed for transfer must be included in the transfer or be ground water registration must be filed separately in a ground water reg	cancelled. Any change
	For Sul	ostitution (ground water supplemental irrigation will be substituted for	<u> </u>
		nd water supplemental Permit or Certificate #; ce water primary Certificate #	Received by OWRD
	For a c	hange from Supplemental Irrigation Use to Primary Irrigation Use	
	Ident	ify the primary certificate to be cancelled. Certificate #	JUN 1 7 2020
	For a c	hange in point(s) of appropriation (well(s)) or additional point(s) of ap	propriationem, OR
		Well log(s) are attached for each authorized and proposed well(s) that with the corresponding well(s) in Table 1 above and on the accompanying: 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 Takhave a well log. For <i>proposed wells not yet constructed or built</i> , provide requested information element in the table. The Department recomme	"a best estimate" for each

Table 3. Construction of Point(s) of Appropriation

complete Table 3.

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.

driller, geologist, or certified water right examiner to assist with assembling the information necessary to

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
-									,	
								*		×

Attachments:

- Evidence of Use Affidavit
- Consent by Deeded Landowner
- Land Use Information Form
- Permanent Water Right Transfer Map

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