



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.

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? 1 List them here: Certificate 60433**
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 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’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

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

- Application fee not enclosed/insufficient
- Land Use Form not enclosed or incomplete
- Additional signature(s) required
- Map not included or incomplete
- Part _____ is incomplete

Other/Explanation _____
Staff: _____ 503-986-0_____ Date: ____/____/____

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Part 2 of 5 – Transfer Application Map Checklist

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

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 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°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

The State of Oregon, acting by and through the Board of Trustees of Oregon State University		PHONE NO. (541) 737-5818	ADDITIONAL CONTACT NO.
ADDRESS 448 Strand Agriculture Hall		FAX NO.	
CITY Corvallis	STATE OR	ZIP 97331	E-MAIL Carrie.Burkholder@oregonstate.edu
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/Pacific Hydro-Geology, Inc.		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946 (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 transfer application, and why: **The referenced location of the authorized well for this water right is incorrect. In addition, there are other wells on our property we intend to use as additional sources for this water right. Therefore, we would like to correct the location for the authorized well, and have all of the other existing wells authorized for use under this right.**

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)

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.

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By my signature below, I confirm that I understand:

- 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: Corvallis Gazette-Times.
- 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.



Nicole Neuschwander
Applicant Signature

Applicant Signature

Nicole Neuschwander
**Director of Planning and Strategic
Real Property Management**
Oregon State University
Print Name and title if applicable

9/30/19
Date

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.*

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

Describe any special ownership circumstances here: NA

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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 Benton County Planning Division	ADDRESS 360 SW Avery Ave.	
CITY Corvallis	STATE OR	ZIP 97333

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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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 # 60433

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Description of Water Delivery System

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System capacity: **0.891** 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 using a 25 Hp turbine pump, and then conveyed through a 6-inch mainline, tapering down to a 4-inch mainline. Laterals are connected to these mainlines to supply impact sprinklers and drip lines to irrigate fruit and nut trees, row crops, and grains.**

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 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	BENT 4678	12 S	4 W	6	NW SE	DLC 52	1,395 feet south and 1,990 feet west from the NE corner DLC 52.
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	BENT 4675	12 S	4 W	6	NE SE	DLC 52	1,655 feet south and 1,535 feet west from the NE corner DLC 52.
Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LINN 10536	12 S	4 W	6	SW SE	DLC 52	Reference: 1,060 feet north and 1,820 feet west from the SE corner Section 6.
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NA	12 S	4 W	6	SW SE	DLC 52	1,065 feet north and 1,730 feet west from the SE corner Section 6.
Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 54464	12 S	4 W	6	SW SE	DLC 52	1,215 feet north and 1,870 feet west from the SE corner Section 6.

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"/> 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 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) |

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 # 60433

Description of Water Delivery System

System capacity: 0.891 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 using a 25 Hp turbine pump, and then conveyed through a 6-inch mainline, tapering down to a 4-inch mainline. Laterals are connected to these mainlines to supply impact sprinklers and drip lines to irrigate fruit and nut trees, row crops, and grains.**

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 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	BENT 4678	12	S	4	W	6	NW	SE	DLC 52	1,395 feet south and 1,990 feet west from the NE corner DLC 52.
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	BENT 4675	12	S	4	W	6	NE	SE	DLC 52	1,655 feet south and 1,535 feet west from the NE corner DLC 52.
Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LINN 10536	12	S	4	W	6	SW	SE	DLC 52	Reference: 1,060 feet north and 1,820 feet west from the SE corner Section 6. Re-described: 1,055 feet north and 1,715 feet west from the SE corner Section 6.
Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 54464	12	S	4	W	6	SW	SE	DLC 52	1,215 feet north and 1,870 feet west from the SE corner Section 6.

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"/> 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 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) |

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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 # 60433

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands)										PROPOSED (the "to" or "on" lands)										
The listing that appears on the certificate BEFORE PROPOSED CHANGES										The listing as it would appear AFTER PROPOSED CHANGES										
List only that part or portion of the water right that will be changed.										are made.										
Twp	Rng	Sec	1/4	1/4	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	DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
										APOA	12	S	4	SW	NE	DLC 52	8.0	IS	Wells 1, 2, 3, and 4	5-16-1979
										APOA	12	S	4	SE	NE	DLC 52	5.2	IS	Wells 1, 2, 3, and 4	5-16-1979
										APOA	12	S	4	NE	SW	DLC 52	6.0	IS	Wells 1, 2, 3, and 4	5-16-1979
										APOA	12	S	4	NE	SE	DLC 52	18.2	IS	Wells 1, 2, 3, and 4	5-16-1979
										APOA	12	S	4	NW	SE	DLC 52	37.9	IS	Wells 1, 2, 3, and 4	5-16-1979
										APOA	12	S	4	SW	SE	DLC 52	19.01	IS	Wells 1, 2, 3, and 4	5-16-1979
										APOA	12	S	4	SE	SE	DLC 52	12.7	IS	Wells 1, 2, 3, and 4	5-16-1979
										APOA	12	S	4	NE	NE	DLC 52	2.35	IS	Wells 1, 2, 3, and 4	5-16-1979
										APOA	12	S	4	NW	NE	DLC 52	0.7	IS	Wells 1, 2, 3, and 4	5-16-1979
TOTAL ACRES:										TOTAL ACRES:										
										110.06										

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Additional remarks: In the process of creating the map for this transfer application, it has become apparent that the location of the authorized well as referenced in the certificate is incorrect. Therefore, among other things, this application proposes to re-describe the location of the Authorized well, identified as Well 3 (LINN 10536).

Additionally, the place of use for this water right, Certificate 60433, was apparently established at time of proof under the presumption that the supplemental acres were underlain by groundwater registrations GR-2992, GR-2993, and GR-2994, with no existing rights beneath the primary acres. However, another groundwater registration, GR-2995, exists beneath the primary portion of this right. We believe that the University originally intended for GR-2992, GR-2993, GR-2994, and GR-2995 to completely interlock and cover all, or most of, the place of use now authorized under Certificate 60433. GR-2995 was inexplicably not recognized as an underlying primary right, but it nevertheless exists. GR-2995 is being modified concurrently with this transfer to completely conform with GR-2992, GR-2993, GR-2994, and Certificate 60433. Therefore, it will be necessary to diminish the primary portion of Certificate 60433 to supplemental use in order to eliminate the conflict with the primary use registered under the modified GR-2995. Accordingly, an Affidavit for the Voluntary Partial Diminution of a Water Right Certificate is being submitted concurrently with this transfer application.

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For Place of Use or Character of Use Changes - NA

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

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

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 # NA;

Surface water primary Certificate # NA.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

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
Well 1	Yes	BENT 4678	See well log BENT 4678							
Well 2	Yes	BENT 4675	See well log BENT 4675							
Well 3	Yes	LINN 10536	See well log LINN 10536							
Well 4	Yes	LINN 54464	See well log LINN 54464							

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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 LINN)

I, SCOTT ROBBINS, in my capacity as MANAGER,
mailing address 448 STRAND AGRICULTURE HALL, CORVALLIS, OR 97331
telephone number (541) 737-5818, being first duly sworn depose and say:

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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)
60433	12	S	4	W	WM	6	SW	NE	DLC 52	8.0
60433	12	S	4	W	WM	6	SE	NE	DLC 52	5.2
60433	12	S	4	W	WM	6	NE	SW	DLC 52	6.0
60433	12	S	4	W	WM	6	NE	SE	DLC 52	18.2
60433	12	S	4	W	WM	6	NW	SE	DLC 52	37.9
60433	12	S	4	W	WM	6	SW	SE	DLC 52	19.01
60433	12	S	4	W	WM	6	SE	SE	DLC 52	12.7
60433	12	S	4	W	WM	7	NE	NE	DLC 52	2.35
60433	12	S	4	W	WM	7	NW	NE	DLC 52	0.7

- 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)

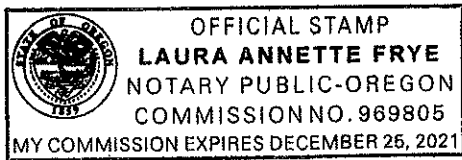
3. The water right was used for: (e.g., crops, pasture, etc.): FRUIT AND NUT TREES, ROW CROPS AND GRAINS.

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.

[Signature]
Signature of Affiant

12/18/19
Date

Signed and sworn to (or affirmed) before me this 18 day of December, 2019.



[Signature]
Notary Public for Oregon

My Commission Expires: December 25, 2021

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 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 style="text-align: center;">RECEIVED DEC 19 2019 OWRD</p>	<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.terra-server.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

13320 -

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 LINN)

I, SCOTT ROBBINS, in my capacity as MANAGER,
 mailing address 448 STRAND AGRICULTURE HALL, CORVALLIS, OR 97331
 telephone number (541) 737-5818, being first duly sworn depose and say:

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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	1/4 - 1/4		Gov't Lot or DLC	Acres (if applicable)
60433	12	S	4	W	WM	6	SW	NE	DLC 52	8.0
60433	12	S	4	W	WM	6	SE	NE	DLC 52	5.2
60433	12	S	4	W	WM	6	NE	SW	DLC 52	6.0
60433	12	S	4	W	WM	6	NE	SE	DLC 52	18.2
60433	12	S	4	W	WM	6	NW	SE	DLC 52	37.9
60433	12	S	4	W	WM	6	SW	SE	DLC 52	19.01
60433	12	S	4	W	WM	6	SE	SE	DLC 52	12.7
60433	12	S	4	W	WM	7	NE	NE	DLC 52	2.35
60433	12	S	4	W	WM	7	NW	NE	DLC 52	0.7

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.

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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)

3. The water right was used for: (e.g., crops, pasture, etc.): FRUIT AND NUT TREES, ROW CROPS AND GRAINS.

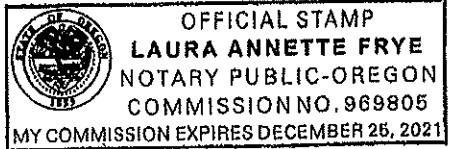
4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

[Signature]
Signature of Affiant

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12/18/19
Date

Signed and sworn to (or affirmed) before me this 18 day of December, 2019.



[Signature]
Notary Public for Oregon

My Commission Expires: December 26, 2021

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 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.terra-server.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

STATE ENGINEER
Salem, Oregon

Well Record

Bent STATE WELL NO. 12/1W-6K
4675 COUNTY Benton
APPLICATION NO. GR-2993

OWNER: Oregon State College

MAILING ADDRESS: Corvallis, Oregon

LOCATION OF WELL: Owner's No. #2

CITY AND STATE:

NW 1/4 SE 1/4 Sec. 6 T. 12 S., R. 4 W., W.M.

Bearing and distance from section or subdivision

corner 1537' W. 1815' S. of James Robinette
D.L.C. 52

Altitude at well

TYPE OF WELL: drilled Date Constructed

Depth drilled 31 Depth cased 31+

Section

CASING RECORD:

10-inch

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FINISH:

AQUIFERS:

WATER LEVEL:

17-feet

PUMPING EQUIPMENT: Type Pacific Centrifugal H.P. 7.5
Capacity 180 G.P.M.

WELL TESTS:

Drawdown ft. after hours G.P.M.

Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F., 19.....

SOURCE OF INFORMATION GR-2802

DRILLER or DIGGER

ADDITIONAL DATA:

Log Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

STATE ENGINEER
Salem, Oregon

Well Record

STATE WELL NO. 12/4W-6K
COUNTY BENTON
APPLICATION NO. GR-2992

OWNER: Oregon State College

MAILING ADDRESS: Corvallis,

LOCATION OF WELL: Owner's No. _____

CITY AND STATE: Oregon

NW 1/4 SE 1/4 Sec. 6 T. 12 ^{N.} S., R. 4 ^{E.} W., W.M.

Bearing and distance from section or subdivision
corner 2025' W. 1550' S. of James Robinette D.L.C. 52

Altitude at well _____

TYPE OF WELL: Drilled Date Constructed _____

Depth drilled 34 Depth cased 34

Section _____

CASING RECORD:

10-inch

FINISH:

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AQUIFERS:

WATER LEVEL:
16-feet

PUMPING EQUIPMENT: Type Gardner Denver Centrifugal H.P. 5
Capacity 120 at 130' G.P.M.

WELL TESTS:

Drawdown _____ ft. after _____ hours _____ G.P.M.
Drawdown _____ ft. after _____ hours _____ G.P.M.

USE OF WATER Irrigation Temp. _____ °F. _____, 19.

SOURCE OF INFORMATION GR-2801

DRILLER or DIGGER _____

ADDITIONAL DATA:

Log _____ Water Level Measurements _____ Chemical Analysis _____ Aquifer Test _____

REMARKS:

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the

WATER WELL REPORT
LINN 10536

WATER RESOURCES DEPARTMENT
SALEM, OREGON 97310
within 30 days from the date of well completion.

STATE OF OREGON

(Please type or print)

(Do not write above this line)

State Well No. 10536

State Permit No. G-8586

(1) OWNER:

Name USDA, Science & ED. Admin., Ag. Research
Address 1333 Broadway-Suite 400
Oakland, Ca. 94612

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
I Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) CASING INSTALLED:

Threaded Welded
10" Diam. from 1'2" to 24'3" Gage .365
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

(6) PERFORATIONS:

Perforated? Yes No.

Type of perforator used

Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name Johnson
Type Watermark-Stainless Steel
Diam. 8" Slot size .125 Set from 24'3" ft. to 34'4" ft.
Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? Drill Cont.

1: 400 gal./min. with 1'4" ft. drawdown after 6 hrs.

" See attached pump test data "

Ball test none gal./min. with ft. drawdown after hrs.

Flow g.p.m.

Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Coat Cement

Well sealed from land surface to 18 ft.

Diameter of well bore to bottom of seal 14 in.

Diameter of well bore below seal 10 in.

Number of sacks of cement used in well seal 21 sacks

How was cement grout placed? Grout was mixed and pumped to bottom of 14" annulus through a 1" tetric pipe.

Was a drive shoe used? Yes No Plugs Size: location ft.

Did any strata contain unusable water? Yes No

Type of water? depth of strata

Method of sealing strata off

Was well gravel packed? Yes No Size of gravel:

Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Linn Driller's well number
1/4 1/4 Section 6 T. 12S R. 4W W.M.

Bearing and distance from section or subdivision corner
approx. 300ft. east of existing 8" well

(11) WATER LEVEL: Completed well.

Depth at which water was first found 12 ft.
Static level 12'1" ft. below land surface. Date 5-28-80
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 8"
Depth drilled 36 ft. Depth of completed well 35'10" ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Topsoil, Brown	0	6"	
Sandy Loam, with med.-coarse gravel, Brown	6"	3'	
Sand & gravel, coarse, Brown loosely cemented, dry	3	16	
Sand & gravel, med.-coarse, Brown, some wood, first water at 19'	16	21	
Sand & gravel, Very coarse, cobbles to 4" dia., Greenish brown, loose	21	34.5	
Clay, Gray & Brown	34.5	36	
Screen assembly:			
1'4" - Riser pipe & Packer			
10'3" - Screen area			
1'6" - Tail Pipe			
13'4" Total length, Top of assembly:		22'6"	

Work started 5-7 19 80 Completed 5-29 19 80
Date well drilling machine moved off of well 5-29 19 80

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Victor J. Todd Date 5-30, 1980
(Drilling Machine Operator)

Drilling Machine Operator's License No. 1152

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name Vic Todd Well Drilling Inc.
(Person, firm or corporation) (Type or print)

Address 523 SE 38th Av., Albany, Or. 97321

[Signed] Victor J. Todd
(Water Well Contractor)

Contractor's License No. 678 Date 5-30, 1980

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 49893
START CARD # 127160

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number _____
Name OSU Horticulture
Address 4017 Als
City Corvallis State OR Zip 97331

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

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

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 40 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
<u>16"</u>	<u>0</u>	<u>18'</u>	<u>cement</u>	<u>0</u>	<u>18</u>	<u>9sacks</u>
<u>12"</u>	<u>18'</u>	<u>40'</u>				

How was seal placed: Method A B C D E
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	<u>12"</u>	<u>+2'</u>	<u>34'</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<u>06"</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 34' 06"

(7) PERFORATIONS/SCREENS:
 Perforations Method Acetylene torch
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>24'</u>	<u>34'</u>	<u>1/2"</u>	<u>100</u>	<u>12"</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<u>06"</u>	<u>x12"</u>				<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
<u>130gpm</u>	<u>.06"</u>		<u>1 hr.</u>

Temperature of water 55 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Linn Latitude _____ Longitude _____
Township 12 S N or S Range 4 W E or W. WM.
Section 6 NW 1/4 SE 1/4
Tax Lot 2100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 3332 Peoria Rd - Corvallis

(10) STATIC WATER LEVEL:
18' ft. below land surface. Date 8-31-01
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 20'

From	To	Estimated Flow Rate	SWL
<u>20'</u>	<u>40'</u>	<u>130 gpm</u>	<u>18'</u>

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>Top soil</u>	<u>0</u>	<u>3</u>	
<u>Loam</u>	<u>3</u>	<u>8</u>	
<u>Sandy clay & gravel</u>	<u>8</u>	<u>20</u>	
<u>Brown sand & gravel</u>	<u>20</u>	<u>32</u>	<u>18</u>
<u>Blue clay</u>	<u>32</u>	<u>40</u>	

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WATER RESOURCES DEPT.
SALEM, OREGON

Date started 8-23-01 Completed 8-31-01

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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.

WWC Number _____
Signed _____ Date _____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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.

WWC Number 1378
Signed Master Warr Date 9-7-01



Banner Document # I 13298282

Payment Request

Send form directly to Business Center

Note to Vendor:

Payment is enclosed for the following, please do not invoice.

Ship To: Oregon State University
 Dept: _____
 City: _____
 Phone: _____ Fax: _____

Banner Check Date: _____
 Selected Invoice #: 60433 Date 09/30/2019
 Attn: _____
 Address: _____
 State: _____ Zip: _____
 Email: _____

Note to Oregon State University Business Affairs:

CTA - I wish to have documents mailed with payment* - Include the documents to be attached in Nollj using the "Invoice - CTA" doc type.
 Pickup - Hold check for Pickup* Name: Trisha Squires Phone: 7-5915
 Direct Deposit Override - Generate a manual check payment - The Direct Deposit Override box must be checked on FAAINVE during invoice entry.

*NOTE: Special Check Handling Requires Document Indicator = 1

Vendor Information - As it appears in Banner

Name: OR Water Resources Department Vendor Number: 932-109-926
 Address: 752 Summer Street NE Suite A
 City: Salem State: Oregon Zip: 97301-1266
 Phone: 503-986-0926 Fax: _____ Email: _____

Business / Refund Purpose (be specific - who, what, when, where, why)

Payment for Water Rights Transfer. To correct the location for the authorized well, and have all of the other existing wells authorized for use.

Complete the following for Postage and Supply Orders, Memberships, Subscriptions, etc.

Description of Purchase	Quantity	Unit Price	Total
Groundwater Registration Modification - correct location of well and authorize use	1	\$1570.00	\$ 1,570.00
			\$
			\$
			\$
			\$

Shipping & Special Handling Charges \$
Check Total \$ 1,570.00

Index Code	Account Code	Activity Code	Amount
AGA510	24704	AC2U	\$ 1,570.00
			\$
			\$
			\$
			\$

Contact Name: Trisha Squires Phone: 541-737-5915
 Prepared By (if different from above): OWRD Phone: _____

Departmental Approval

I certify that the expense(s) itemized above has been reviewed and is an accurate, allowable, and appropriate expenditure. It is within my budgetary authority to approve the above expense(s).

Signature: William Boggs
 Printed Name: William Boggs

Date: 11/14/2019 | 15:27:16 PST
 Title: Excutive Associate Dean

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12/2019



Imagery Date: 7/26/2018 44°33'09.00" N 123°13'03.89

Received by OWRD

DEC 16 2019

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Salem, OR

Land Use Information Form



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

Applicant(s): Oregon State University College of Agricultural Sciences c/o Carrie Burkholder

Mailing Address: 448 Strand Agriculture Hall

City: Corvallis

State: OR

Zip Code: 97331

Daytime Phone: (541) 737-5818

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
<u>12S</u>	<u>4W</u>	<u>6</u>	_____	<u>2100</u>	<u>EPU</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>IR</u>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	_____
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	_____
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	_____

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

Linn County

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B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water
 Water Right Transfer
 Permit Amendment or Ground Water Registration Modification
 Limited Water Use License
 Allocation of Conserved Water
 Exchange of Water

Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: 0.891 cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-Municipal Instream Other _____

Briefly describe:

This Land Use Information Form is to accompany a water right transfer application that proposes to add additional wells for a an existing water right (Certificate 60433).

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

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For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): Linn County Code 928.310(B)(1)(2)
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

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Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Irrigation and Farming are outright uses in the EFC zoning district pursuant to LCC 928.310(B)(1) and (2).

Name: Allyssa Schrems Title: Assistant Planner
 Signature: Allyssa Schrems Phone: 541-967-3816 Date: 11/22/19
 Government Entity: Linn County

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____
 City or County: _____ Staff contact: _____
 Signature: _____ Phone: _____ Date: _____

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