


# Application for Permanent Water Right Transfer

## Part 1 of 5 – Minimum Requirements Checklist

**OREGON** Oregon Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem, Oregon 97301-1266  
 (503) 986-0900  
 www.oregon.gov/OWRD



**This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.**  
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: [http://apps.wrd.state.or.us/apps/misc/wrd\\_fee\\_calculator](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: 36859**  
 Please include a separate Part 5 for each water right..(See instructions on page 6)

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**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):**

<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"/> Evidence of Use Form not enclosed or incomplete
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> Part _____ is incomplete

Other/Explanation \_\_\_\_\_

Staff: \_\_\_\_\_ 503-986-0 \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Part 2 of 5 – Transfer Application Map

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

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/](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

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Applicant Information

APPLICANT/BUSINESS NAME <b>David Weiner</b>		PHONE NO. <b>(209) 245-4905</b>	ADDITIONAL CONTACT NO. <b>(530) 307-3050</b>
ADDRESS <b>23151 Lorentz Road</b>		FAX NO.	
CITY <b>Plymouth</b>	STATE <b>CA</b>	ZIP <b>95669</b>	E-MAIL
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME <b>Marc Van Camp / Van Camp Consulting</b>		PHONE NO. <b>541-297-1880</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>P.O. Box 995</b>		FAX NO.	
CITY <b>Coos Bay</b>	STATE <b>OR</b>	ZIP <b>97420</b>	E-MAIL <b>vancampconsulting@gmail.com</b>
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 purpose of this transfer is to move a portion of pasture irrigation of Certificate 36859 to the Cranberry bogs covered under S52289, this will provide a more resilient late season irrigation supply to the Cranberries.  
 If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

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
- du*  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
- du*  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.

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: \_\_\_\_\_
- 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.



*David Weiner*      **David Weiner**      **4-7-2021**  
 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.*

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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:

[https://www.oregon.gov/owrd/WRDFormsPDF/Transfer\\_Property\\_Transactions.pdf](https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf)

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

Describe any special ownership circumstances here: **NA**

- 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 <b>NA</b>	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 <b>NA</b>	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 <b>NA</b>	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	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

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;
- 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.

When 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.

After editing, re-lock the document to enable checkboxes 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 # 36859

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**Description of Water Delivery System**

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System capacity: 0.60 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. The 66.6 acres of pasutre has most recently been flood irrigated directly off the main line and using aluminium mainline all powered by a 30HP pump

**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)
2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NA	32	S	15	W	21	SW	NE		960' S & 1600' E FROM SW COR. OF NE-NW COR. SEC. 21, T32S, R13W, WM.
1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NA	32	S	15	W	21	NE	NW		70' N & 260' E FROM SW COR. OF NE-NW COR. SEC. 21, T32S, R13W, WM.
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										

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

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Place of Use (POU)                 | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE)                        | <input type="checkbox"/> Point of Appropriation/Well (POA)        |
| <input type="checkbox"/> Point of Diversion (POD)                      | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD)          | <input type="checkbox"/> Substitution (SUB)                       |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV)              |

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

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



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 # 36859**

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.													Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.																		
Twp	Rng	Sec	¼	¼	Tax Lot	Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp	Rng		Sec	¼	¼	Tax Lot	Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date										
<b>EXAMPLE</b>																																
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						
32	S	15	W	21	NW	NE	100		8.3	Irrigation	#1 & #2	1964	POU	32	S	15	W	21	NE	SE	100		6.6	Irrigation	#2	1964						
32	S	15	W	21	NE	NW	100		8.0	Irrigation	#1 & #2	1964	POU	32	S	15	W	21	SE	SE	100		1.4	Irrigation	#2	1964						
32	S	15	W	21	SE	NE	100		0.1	Irrigation	#1 & #2	1964	POU	32	S	15	W	16	NW	SE	301		4.9	Irrigation	#2	1964						
32	S	15	W	21	SW	NE	100		3.5	Irrigation	#1 & #2	1964	POU	32	S	15	W	16	NE	SW	301		0.8	Irrigation	#2	1964						
32	S	15	W	21	SE	NW	100		0.1	Irrigation	#1 & #2	1964	POU	32	S	15	W	16	SE	SW	300/301		4.8	Irrigation	#2	1964						
														32	S	15	W	16	SW	SE	301		1.5	Irrigation	#2	1964						
TOTAL ACRES:								20.0																TOTAL ACRES:								20.0

Additional remarks: \_\_\_\_\_.

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**For Place of Use or Character of Use Changes**

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

If YES, list the certificate, water use permit, or ground water registration numbers: Permits R11807/S52289 are existing on the "to" lands.



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

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

Ground water supplemental Permit or Certificate # \_\_\_\_\_;  
Surface water primary Certificate # \_\_\_\_\_.

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**For a change from Supplemental Irrigation Use to Primary Irrigation Use**

Identify the primary certificate to be cancelled. Certificate # \_\_\_\_\_

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

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- 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](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

**ATTACHMENTS**

- Evidence of Use Application
- Supporting Documentation
- Permanent Water Right Transfer Map

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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 CURRY)

I, DAVID WEINER, in my capacity as OWNER,  
 mailing address 23151 LORENTZ ROAD PLYMOUTH CA 95669

telephone number (530)307-3050, 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 # 36859; **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)

**OR**

- Confirming Certificate # \_\_\_\_\_ has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: \_\_\_\_\_ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # \_\_\_\_\_ (For Historic POD/POA Transfers)

(continues on reverse side)

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

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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David Weiner  
Signature of Affiant

4-14-2021  
Date

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Signed and sworn to (or affirmed) before me this 14<sup>th</sup> day of April, 2021.



Courtney T. Brophy  
Notary Public for Oregon

My Commission Expires: May 23, 2022

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 <b>confirming</b> 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"> <li>• Power usage records for pumps associated with irrigation use</li> <li>• Fertilizer or seed bills related to irrigated crops</li> <li>• Farmers Co-op sales receipt</li> </ul>
<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"> <li>• District assessment records for water delivered</li> <li>• Crop reports submitted under a federal loan agreement</li> <li>• Beneficial use reports from district</li> <li>• IRS Farm Usage Deduction Report</li> <li>• Agricultural Stabilization Plan</li> <li>• CREP Report</li> </ul>
<input 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 – <a href="http://www.oregonexplorer.info/imagery">www.oregonexplorer.info/imagery</a> OWRD – <a href="http://www.wrd.state.or.us">www.wrd.state.or.us</a> Google Earth – <a href="http://earth.google.com">earth.google.com</a> TerraServer – <a href="http://www.terra-server.com">www.terra-server.com</a></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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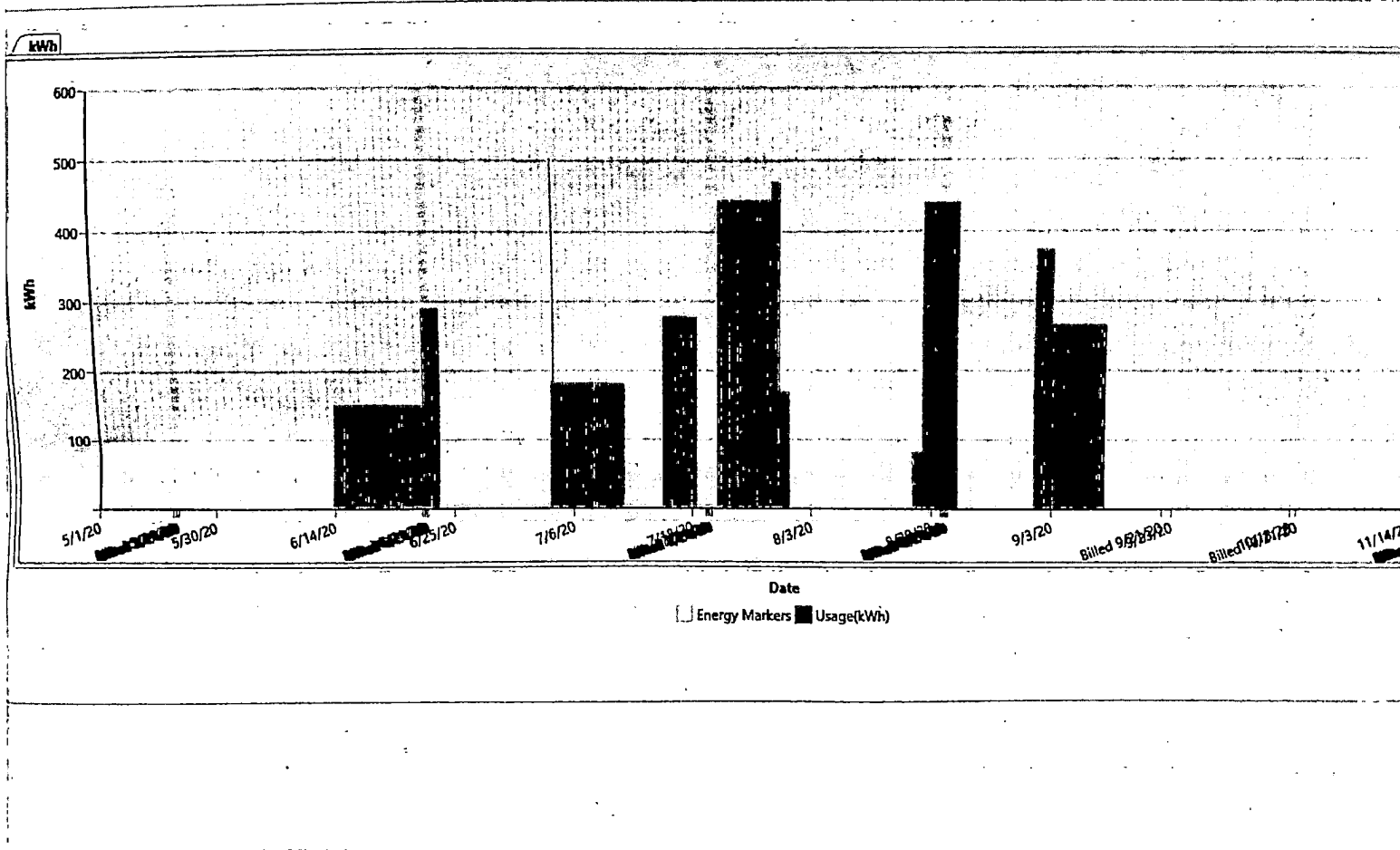
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# Daily Usages

Mbrsep : ██████████

Begin Date : 5/1/2020 End Date : 12/1/2020

Evidence of Use Supporting Documentation:  
2019 and 2020 Power Use @ POD #2



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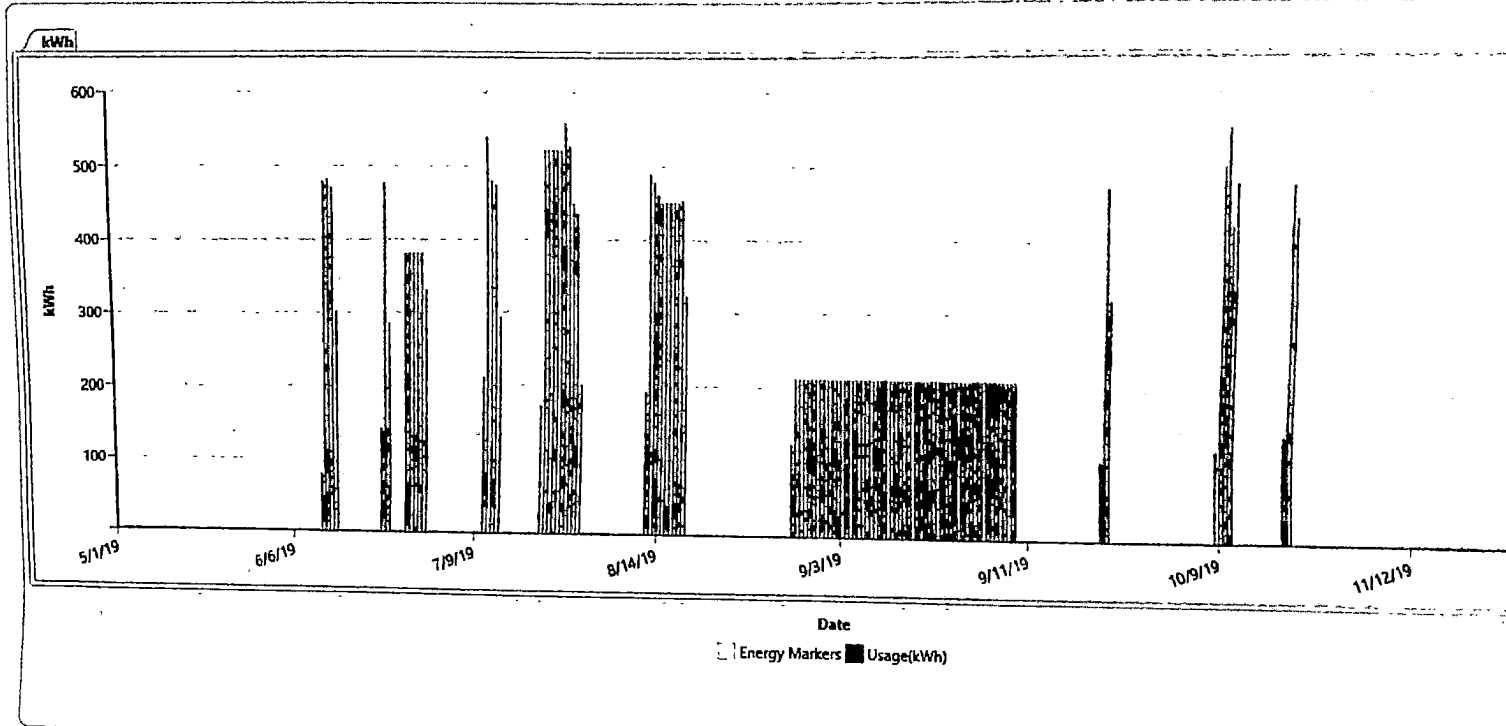
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# Daily Usages

Mbrsep : ██████████

Begin Date : 5/1/2019 End Date : 12/1/2019

Evidence of Use Supporting Documentation:  
2019 and 2020 Power Use @ POD #2





# Coos-Curry Electric Cooperative, Inc.

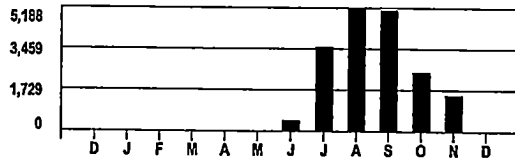
P.O. BOX 1268 43050 Hwy. 101  
 PORT ORFORD OREGON 97465  
 PHONE 541-332-3931

See reverse side for additional  
 information about your bill

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS						STATEMENT DATE
11/11/19 TO 12/12/19	██████████	WEINER DAVID	43691 HWY 101-15 HP IRR						12/21/19
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2 BASIC CHARGE	81061	26	18393	18393	31	1	0	3	0.00
SUBTOTAL									39.29
PREVIOUS AMOUNT DUE									169.25
THANK YOU FOR YOUR PAYMENT 12/09/19									-169.25
TOTAL AMOUNT DUE									39.29
AVERAGE KWH PER DAY: 0.00			AVERAGE KWH LAST MO: 51.27			AVERAGE THIS MO. LAST YR: 0.00			
STATEMENT DATE					12/21/19		TOTAL AMOUNT DUE		\$39.29

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 01/15/20**

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# Coos-Curry Electric Cooperative, Inc.

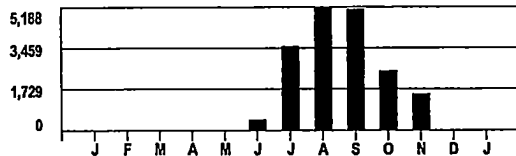
P.O. BOX 1268 43050 Hwy. 101  
 PORT ORFORD OREGON 97465  
 PHONE 541-332-3931

See reverse side for additional  
 information about your bill

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS						STATEMENT DATE
12/12/19 TO 01/12/20	██████████	WEINER DAVID	43691 HWY 101-15 HP IRR						01/21/20
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2 BASIC CHARGE	81061	26	18393	18393	31	1	0	3	0.00
SUBTOTAL									39.29
PREVIOUS AMOUNT DUE									39.29
THANK YOU FOR YOUR PAYMENT 01/06/20									-39.29
TOTAL AMOUNT DUE									39.29
AVERAGE KWH PER DAY: 0.00			AVERAGE KWH LAST MO: 0.00			AVERAGE THIS MO. LAST YR: 0.00			
STATEMENT DATE		01/21/20		TOTAL AMOUNT DUE			\$39.29		

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 02/14/20**

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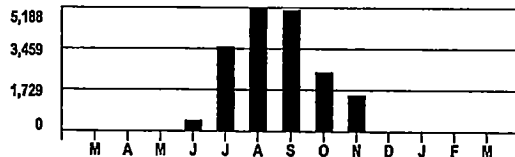
P.O. BOX 1268 43050 Hwy. 101  
 PORT ORFORD OREGON 97465  
 PHONE 541-332-3931

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 information about your bill

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS						STATEMENT DATE
02/12/20 TO 03/12/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR						03/21/20
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2	81061	26	18393	18393	29	1	0	3	0.00
BASIC CHARGE									39.29
SUBTOTAL									39.29
PREVIOUS AMOUNT DUE									39.29
THANK YOU FOR YOUR PAYMENT		03/02/20							-39.29
TOTAL AMOUNT DUE									39.29
AVERAGE KWH PER DAY: 0.00			AVERAGE KWH LAST MO: 0.00			AVERAGE THIS MO. LAST YR: 0.00			
STATEMENT DATE			03/21/20			TOTAL AMOUNT DUE			\$39.29

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 04/15/20**

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# Coos-Curry Electric Cooperative, Inc.

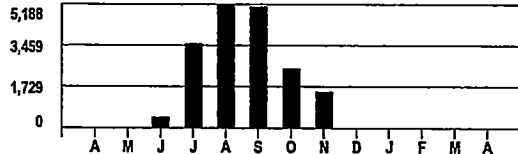
P.O. BOX 1268 43050 Hwy. 101  
 PORT ORFORD OREGON 97465  
 PHONE 541-332-3931

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 information about your bill

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS						STATEMENT DATE
03/12/20 TO 04/12/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR						04/21/20
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2	81061	26	18393	18393	31	1	0	3	0.00
BASIC CHARGE									39.29
SUBTOTAL									39.29
PREVIOUS AMOUNT DUE									39.29
THANK YOU FOR YOUR PAYMENT 04/02/20									-39.29
TOTAL AMOUNT DUE									39.29
AVERAGE KWH PER DAY: 0.00			AVERAGE KWH LAST MO: 0.00			AVERAGE THIS MO. LAST YR: 0.00			
STATEMENT DATE			04/21/20			TOTAL AMOUNT DUE			\$39.29

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 05/15/20**

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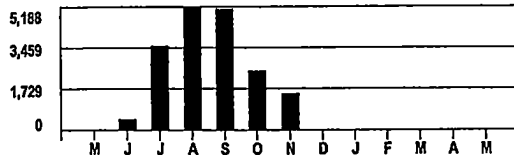
Your Touchstone Energy Cooperative

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS					STATEMENT DATE	
04/12/20 TO 05/12/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR					05/21/20	
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2	81061	26	18393	18393	30	1	0	3	0.00
BASIC CHARGE									39.29
SUBTOTAL									39.29
PREVIOUS AMOUNT DUE									39.29
THANK YOU FOR YOUR PAYMENT	05/04/20								-39.29
TOTAL AMOUNT DUE									39.29
AVERAGE KWH PER DAY: 0.00			AVERAGE KWH LAST MO: 0.00			AVERAGE THIS MO. LAST YR: 0.00			

STATEMENT DATE	05/21/20	TOTAL AMOUNT DUE	\$39.29
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**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 06/15/20**

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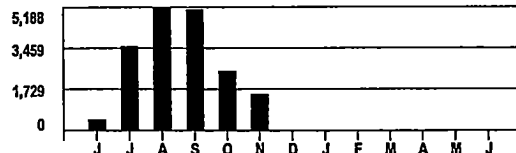
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PORT ORFORD OREGON 97465  
PHONE 541-332-3931

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SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS						STATEMENT DATE
05/12/20 TO 06/11/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR						06/21/20
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2 ENERGY CALCULATION BASIC CHARGE	81061	26	18393	18409	30	1	16	0	1.35
16 KWH X 0.084500 =									39.29
SUBTOTAL									40.64
PREVIOUS AMOUNT DUE									39.29
THANK YOU FOR YOUR PAYMENT 06/01/20									-39.29
TOTAL AMOUNT DUE									40.64
AVERAGE KWH PER DAY: 0.53			AVERAGE KWH LAST MO: 0.00			AVERAGE THIS MO. LAST YR: 15.19			
STATEMENT DATE			06/21/20			TOTAL AMOUNT DUE			\$40.64

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 07/16/20**

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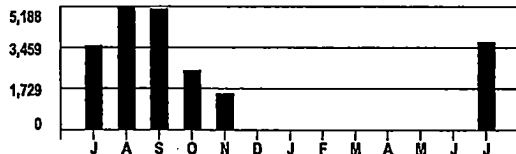
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 PORT ORFORD OREGON 97465  
 PHONE 541-332-3931

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 information about your bill

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS					STATEMENT DATE	
06/11/20 TO 07/12/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR					07/21/20	
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2	81061	26	18409	22130	31	1	3721	0	
ENERGY CALCULATION									324.10
BASIC CHARGE									39.29
SUBTOTAL									363.39
PREVIOUS AMOUNT DUE									40.64
THANK YOU FOR YOUR PAYMENT 06/30/20									-40.64
TOTAL AMOUNT DUE									363.39
AVERAGE KWH PER DAY: 120.03			AVERAGE KWH LAST MO: 0.53			AVERAGE THIS MO. LAST YR: 118.80			
STATEMENT DATE			07/21/20			TOTAL AMOUNT DUE		\$363.39	

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 08/14/20**

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# Coos-Curry Electric Cooperative, Inc.

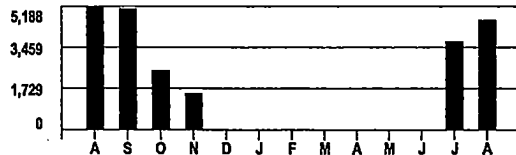
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 PORT ORFORD OREGON 97465  
 PHONE 541-332-3931

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 information about your bill

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS						STATEMENT DATE
07/12/20 TO 08/10/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR						08/21/20
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2	81061	26	22130	26760	29	1	4630	0	
ENERGY CALCULATION									403.27
BASIC CHARGE									39.29
SUBTOTAL									442.56
PREVIOUS AMOUNT DUE									363.39
THANK YOU FOR YOUR PAYMENT 08/03/20									-363.39
TOTAL AMOUNT DUE									442.56
AVERAGE KWH PER DAY: 159.66			AVERAGE KWH LAST MO: 120.03			AVERAGE THIS MO. LAST YR: 172.93			
STATEMENT DATE					08/21/20		TOTAL AMOUNT DUE		\$442.56

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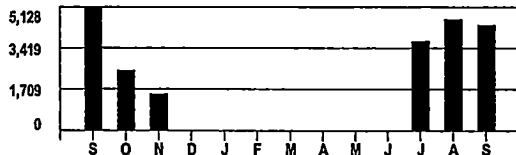
P.O. BOX 1268 43050 Hwy. 101  
 PORT ORFORD OREGON 97465  
 PHONE 541-332-3931

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 information about your bill

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS						STATEMENT DATE
08/10/20 TO 09/12/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR						09/21/20
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2	81061	26	26760	31155	33	1	4395	0	
ENERGY CALCULATION									382.80
BASIC CHARGE									39.29
SUBTOTAL									422.09
PREVIOUS AMOUNT DUE									442.56
THANK YOU FOR YOUR PAYMENT 09/01/20									-442.56
TOTAL AMOUNT DUE									422.09
AVERAGE KWH PER DAY: 133.18			AVERAGE KWH LAST MO: 159.66			AVERAGE THIS MO. LAST YR: 165.42			
STATEMENT DATE			09/21/20			TOTAL AMOUNT DUE			\$422.09

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# Coos-Curry Electric Cooperative, Inc.

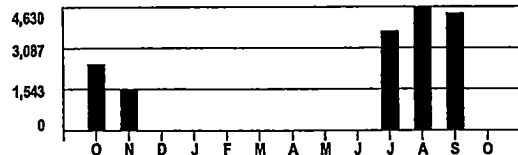
P.O. BOX 1268 43050 Hwy. 101  
 PORT ORFORD OREGON 97465  
 PHONE 541-332-3931

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 information about your bill

SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS					STATEMENT DATE	
09/12/20 TO 10/11/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR					10/21/20	
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2	81061	26	31155	31156	29	1	1	0	
ENERGY CALCULATION									0.09
BASIC CHARGE									39.29
SUBTOTAL									39.38
PREVIOUS AMOUNT DUE									422.09
THANK YOU FOR YOUR PAYMENT 10/05/20									-422.09
TOTAL AMOUNT DUE									39.38
AVERAGE KWH PER DAY: 0.03			AVERAGE KWH LAST MO: 133.18			AVERAGE THIS MO. LAST YR: 80.77			
STATEMENT DATE					10/21/20		TOTAL AMOUNT DUE		\$39.38

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 11/16/20**

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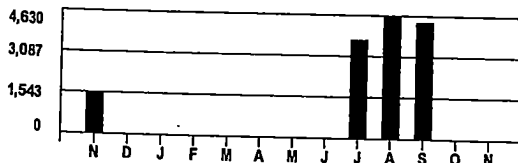
SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS					STATEMENT DATE	
10/11/20 TO 11/09/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR					11/21/20	
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2 BASIC CHARGE	81061	26	31156	31156	29	1	0	3	0.00
SUBTOTAL									39.29
PREVIOUS AMOUNT DUE									39.29
THANK YOU FOR YOUR PAYMENT		11/02/20							39.38
TOTAL AMOUNT DUE									-39.38
									39.29

AVERAGE KWH PER DAY: 0.00    AVERAGE KWH LAST MO: 0.03    AVERAGE THIS MO. LAST YR: 51.27

STATEMENT DATE: 11/21/20    TOTAL AMOUNT DUE: \$39.29

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 12/16/20**

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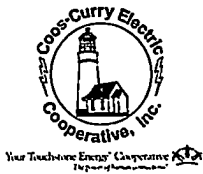
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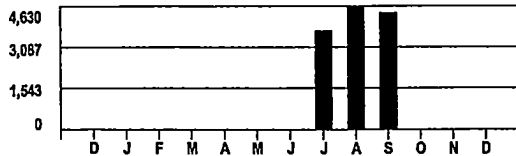
P.O. BOX 1268 43050 Hwy. 101  
PORT ORFORD OREGON 97465  
PHONE 541-332-3931

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SERVICE DATE	ACCOUNT NUMBER	MEMBER NAME	SERVICE ADDRESS					STATEMENT DATE	
11/09/20 TO 12/12/20	[REDACTED]	DAVID WEINER	43691 HWY 101-15 HP IRR					12/21/20	
SERVICE DESCRIPTION	METER NUMBER	RATE	METER READINGS		BILLING DAYS	MULT	KWH USAGE	CODE	CHARGES
			PREVIOUS	PRESENT					
P2-41R14R2	81061	26	31156	31156	33	1	0	3	0.00
BASIC CHARGE									39.29
SUBTOTAL									39.29
PREVIOUS AMOUNT DUE									39.29
THANK YOU FOR YOUR PAYMENT		12/02/20							-39.29
TOTAL AMOUNT DUE									39.29
AVERAGE KWH PER DAY: 0.00			AVERAGE KWH LAST MO: 0.00			AVERAGE THIS MO. LAST YR: 0.00			
STATEMENT DATE					12/21/20		TOTAL AMOUNT DUE		\$39.29

**CURRENT BILL DELINQUENT IF NOT PAID ON OR BEFORE THIS DATE 01/15/21**

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