

Application for Permanent Water Right Transfer

Part 1 of 5 – Minimum Requirements Checklist



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. 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: C-54425**
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):

- | | |
|--|--|
| <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.

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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°).

FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)		
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1 \$1,160
	Types of change proposed: <input checked="" type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i>	
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2 \$930
	Number of water rights included in transfer <u>1 (3a)</u> Subtract 1 from the number in line 3a above: <u>0 (3b)</u> <i>If only one water right this will be 0</i>	
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » »	3 \$0
	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input checked="" type="checkbox"/> Yes: enter \$410 »	
4		4 \$410
	Do you propose to change the place of use or character of use? <input type="checkbox"/> No: enter 0 on line 5 » <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see example below*): <u>0.35 (5a)</u> Subtract 1.0 from the number in line 5a above: <u>-.065 (5b)</u> If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: <u>0 (5c)</u> and multiply 5c by \$350, then enter on line 5 »	RECEIVED AUG 16 2021 OWRD
5		5 \$0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6 \$2,500
	Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »	
7	If no box is applicable, enter 0 on line 7 »	7 \$0
8	Subtract line 7 from line 6 » Transfer Fee:	8 \$2,500

1. For irrigation calculate cfs for each water right involved as follows:
 - a. Divide total authorized cfs by total acres in the water right (*for C12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be transferred to get the transfer cfs (*x 45 ac = 0.56 cfs*).
 - b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (*For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
2. Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land**. The fee should be assessed only once for each "on the ground" acre included in the transfer. (*In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0*).

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

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Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)			
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,360
2	Types of change proposed: OWRD <input checked="" type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$1090 and enter »	2	\$1,090
3	Number of water rights included in transfer <u>1 (3a)</u> Subtract 1 from the number in 3a above: <u>0 (3b)</u> <i>If only one water right this will be 0</i> Multiply line 3b by \$610 and enter »	3	\$0
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: enter \$480 for the 1 st well to be added or changed <u>\$480 (4a)</u> Do you propose to add or change additional wells? <input checked="" type="checkbox"/> No: enter 0 <input type="checkbox"/> Yes: multiply the number of additional wells by \$410 <u>\$0 (4b)</u> Add line 4a to line 4b and enter »	4	\$480
5	Do you propose to change the place of use or character of use? <input type="checkbox"/> No: enter 0 on line 5 <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see below*); <u>0.35 (5a)</u> Subtract 1.0 from the number in 5a above: <u>-0.65 (5b)</u> If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$410, then enter on line 5 »	5	\$0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$2,930
7	Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »	7	
8	If no box is applicable, enter 0 on line 7 » Subtract line 7 from line 6 » Transfer Fee:	8	\$2,930

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

- For irrigation calculate cfs for each water right involved as follows:
 - Divide total authorized cfs by total acres in the water right (for C12345, $1.25 \text{ cfs} \div 100 \text{ ac}$); then multiply by the number of acres to be transferred to get the transfer cfs ($\times 45 \text{ ac} = 0.56 \text{ cfs}$).
 - If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654, $45.0 \text{ ac} \times 0.0125 \text{ cfs/ac} = 0.56 \text{ cfs}$)
- Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land**. The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

FEE WORKSHEET for SUBSTITUTION			
1	Base Fee (includes change to one well)	1	\$990.00
2	Number of wells included in substitution _____ (2a) Subtract 1 from the number in 2a above: _____ (2b) <i>If only one well this will be 0</i> Multiply line 2b by \$480 and enter »	2	
3	Add entries on lines 1 through 2 above » » » » » » Fee for Substitution:	3	

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Aaron & Rebecca Borrer		PHONE NO. 541-633-3284	ADDITIONAL CONTACT NO.
ADDRESS PO Box 38		FAX NO.	
CITY Fort Rock	STATE OR	ZIP 97735	E-MAIL
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME John A. Short / Water Right Services, LLC		PHONE NO. 541-389-2837	ADDITIONAL CONTACT NO.
ADDRESS PO Box 1830		FAX NO.	
CITY Bend	STATE OR	ZIP 97709	E-MAIL johnshort@usa.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: Move a portion of C-54425 to a new place of use and new point of appropriation.			

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: **Frontier Advertiser**.
- 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.


Applicant signature

Aaron Borrer
Print Name (and Title if applicable)
Rebecca T Borrer
Print Name (and Title if applicable)

8/10/21
Date
8/10/21
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:

https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

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

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Describe any special ownership circumstances here: _____


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- ☐ Check here if 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 n/a	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 n/a	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 Lake County Planning Department	ADDRESS 513 Center St	
CITY Lakeview	STATE OR	ZIP 97630

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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 # **54425**

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Description of Water Delivery System

System capacity: **2.0** cubic feet per second (cfs) OR
_____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from well to pivot, handlines, and wheel lines.**

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 "OFF"	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 190	25 S	15 E	34	SE	NW	100	1340' S, 1200' W of N ¼ Cor Sec 34
Well "ON"	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LAKE 497/499	26 S	16 E	6	NW	SE	2299	2510' N, 1820' W of SE Cor Sec 6
	<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 checked="" 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 # 54425

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.													Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.													
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	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	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date					
EXAMPLE																											
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901	
														2	S	9	E	2	SW	NW	500		5.0		POD #6	1901	
25	S	15	E	34	NE	NW	100		7.0	IR	WELL "OFF"	1976	POU/POA	26	S	16	E	6	SW	SW	2299	L14	0.4	IR	WELL "ON"	1976	
"	"	"	"	"	NW	NW	"		7.0	"	"	"	"	"	"	"	"	"	SE	SW	"		25.4	"	"	"	
"	"	"	"	"	SW	NW	"		7.0	"	"	"	"	"	"	"	"	"	SW	SE	"		2.2	"	"	"	
"	"	"	"	"	SE	NW	"		7.0	"	"	"	"														
TOTAL ACRES:								28.0						TOTAL ACRES:								28.0					

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: _____.

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:

- ☒ 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

Application for Water Right
Transfer
Consent by Deeded Landowner



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

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State of Oregon)
)ss
County of LAKE)

We Richard W. & Sue Warmington in our capacity as Owner,
mailing address PO Box 33 Fort Rock OR 97735,
telephone number _____, duly sworn depose and say that We
consent to the proposed change(s) to Water Right Certificate Number 54425
described in a Transfer Application (T-tbid) submitted by Aaron & Rebecca Borrer,
(transfer number, if known)
on the property in tax lot number(s) 100, Section 34, Township 25
South, Range 15 East, W.M., located at (n/a -- no situs address).
(site address)

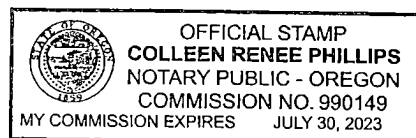
Sue Warmington
Signature of Affiant

7-14-21
Date

Signature of Affiant

Date

Subscribed and Sworn to before me this 14th day of July, 20121.



Colleen Renee Phillips
Notary Public for Oregon

My commission expires July 30, 2023

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

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NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

This form is **NOT** required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; **OR**
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and all of the following apply:
 - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; and
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

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): Aaron & Rebecca Borrer

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Mailing Address: PO Box 38

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City: Fort Rock

State: OR

Zip Code: 97735

Daytime Phone: _____

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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>26 S</u>	<u>16 E</u>	<u>6</u>		<u>2299</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>IR</u>

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

Lake County.

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: 0.35 ☒ 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:

Permanent water right transfer of a portion of existing certificate C-54425 to a new place of use and a new point of appropriation.

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

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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): Lake County Zoning Ordinance - Article 3 (A-2 zone)
- ☐ 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

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.

26-16-06-2299

Name: DARWIN F. HANSEN Title: Planning Director

Signature: [Signature] Phone: 541-977-6036 Date: 20 May 2021

Government Entity: LAKE COUNTY PLANNING DEPARTMENT

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: _____

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 DESCHUTES)

I, BRYCE M. WITHERS, in my capacity as WATER RIGHT SPECIALIST,

mailing address PO Box 1830 BEND, OR 97709

telephone number 541-389-2837, 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)
54425 (UNDER T-12310 SEE ATTACHED FINAL ORDER)	26	S	16	E	WM	6	SE	SW		26.7
"	"	"	"	"	"	"	SW	SE		1.3

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.): HAY

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.

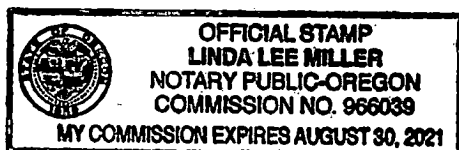
B. W. L.
Signature of Affiant

5-20-2021
Date

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Signed and sworn to (or affirmed) before me this 20 day of May, 2021.

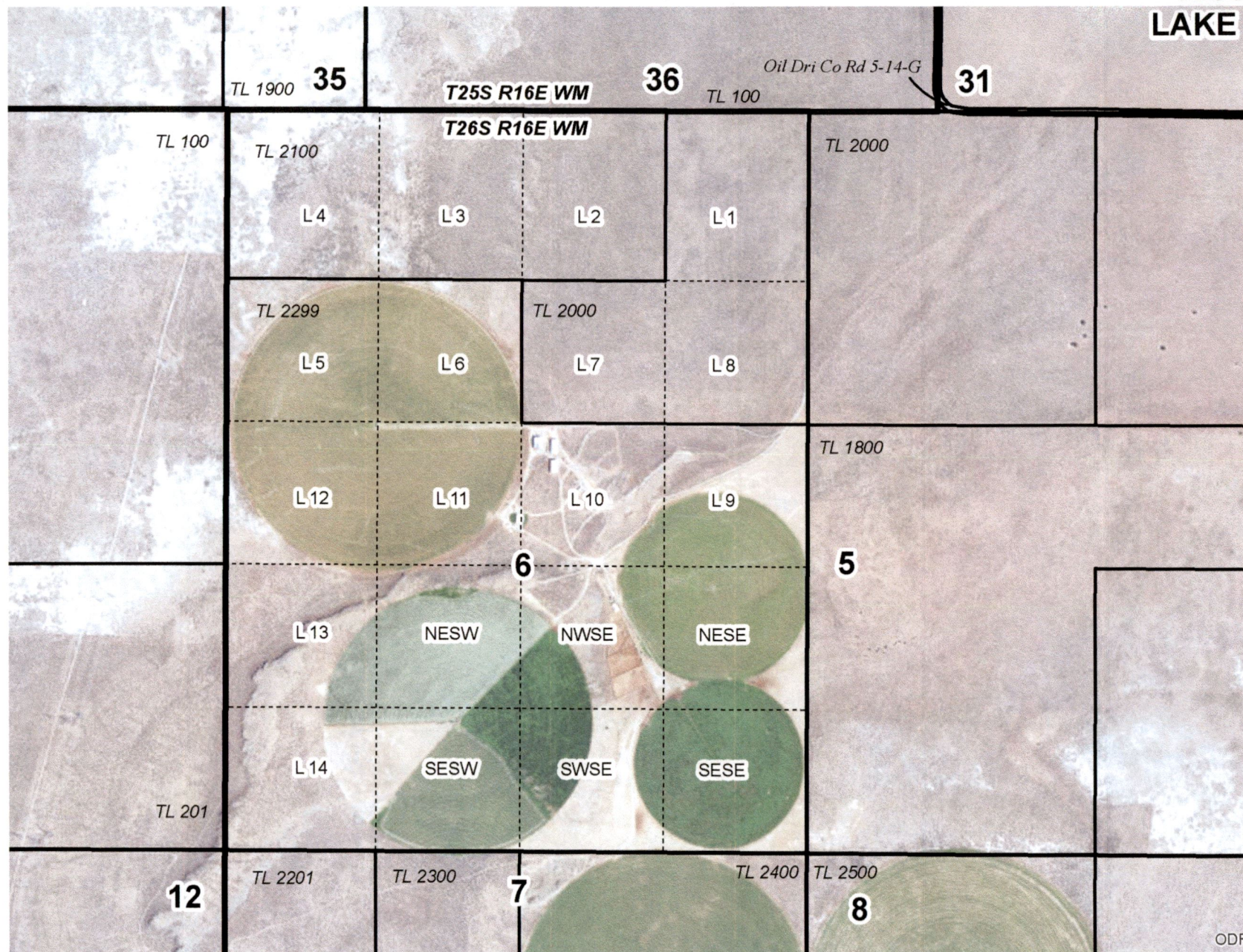


Linda Lee Miller
Notary Public for Oregon

My Commission Expires: August 30, 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	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. 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
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

**T26S R16E, WM,
LAKE COUNTY, OR**



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**"OregonAerial2020" ESRI Imagery
Borror Ranch**

Date: 5/20/2021

This map is not intended
to provide legal dimensions
or locations of property
ownership lines.

WATER RIGHT SERVICES, LLC

PO BOX 1830, BEND, OR 97709

WWW.OREGONWATER.US 541-389-2837

johnshort@usa.com

CCB # 197121

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BEFORE THE WATER RESOURCES DEPARTMENT
OF THE
STATE OF OREGON

OWRD

In the Matter of Transfer Application)
T-12310, Lake County)
)
) FINAL ORDER APPROVING A
) TEMPORARY CHANGE IN PLACE OF
) USE AND POINT OF APPROPRIATION

Authority

Oregon Revised Statute (ORS) 537.705 and 540.505 to 540.580 establish the process in which a water right holder may submit a request to temporarily transfer the place of use and, if necessary to convey the water to the temporary place of use, the point of appropriation authorized under an existing water right. Oregon Administrative Rule (OAR) Chapter 690, Division 380 implements the statutes and provides the Department's procedures and criteria for evaluating transfer applications.

Applicant

AARON AND REBECCA BORROR
PO BOX 38
FORT ROCK, OR 97735

Findings of Fact

1. On March 14, 2016, AARON AND REBECCA BORROR filed an application to temporarily change the place of use and change the point of appropriation to serve the proposed place of use under Certificate 54425 for a period of 5 years. The Department assigned the application number T-12310.
2. Notice of the application for transfer was published on March 22, 2016, pursuant to OAR 690-380-4000. No comments were filed in response to the notice.
3. The portion of the right to be transferred is as follows:

Certificate: 54425 in the name of GEORGE WARMINGTON (perfected under Permit G-6654)
Use: IRRIGATION of 28.0 ACRES
Priority Date: FEBRUARY 9, 1976
Rate: 0.35 CUBIC FEET PER SECOND
Limit/Duty: The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated and shall be further limited to a diversion of not to

This is a final order in other than a contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 536.075 and OAR 137-004-0080, you may petition for judicial review or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

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exceed 3.0 acre-feet per acre for each acre irrigated during the irrigation season of each year.

Source: WELL No. 1 within the FORT ROCK BASIN

Authorized Point of Appropriation:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25 S	15 E	WM	34	SE NW	1340 FEET SOUTH AND 1200 FEET WEST FROM THE N1/4 CORNER OF SECTION 34

Authorized Place of Use:

Twp	Rng	Mer	Sec	Q-Q	Acres
25 S	15 E	WM	34	NE NW	7.0
25 S	15 E	WM	34	NW NW	7.0
25 S	15 E	WM	34	SW NW	7.0
25 S	15 E	WM	34	SE NW	7.0
Total					28.0

4. Certificate 54425 does describe the location of the point of diversion, however information is available from the applicant indicating that the point of diversion is more accurately described as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25 S	15 E	WM	34	SE NW	1325 FEET SOUTH AND 1325 FEET EAST FROM THE NW CORNER OF SECTION 34

5. Temporary Transfer Application T-12310 proposes to temporarily change the place of use of the right to:

Twp	Rng	Mer	Sec	Q-Q	Acres
26 S	16 E	WM	6	SE SW	26.7
26 S	16 E	WM	6	SW SE	1.3
Total					28.0

6. A change in point of appropriation is necessary to convey the water to the proposed temporary place of use. Temporary Transfer Application T-12310 proposes to move the authorized point of appropriation approximately 2.7 miles South East to:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25 S	15 E	WM	34	SE NW	2510 FEET NORTH AND 1820 FEET WEST FROM THE SE CORNER OF SECTION 6

Temporary Transfer Review Criteria

7. Water has been used within the last five years according to the terms and conditions of the right. There is no evidence available that would demonstrate that the right is subject to forfeiture under ORS 540.610.
8. A pump, pipeline, and sprinkler system sufficient to use the full amount of water allowed under the existing right are present.

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9. The proposed changes would not result in enlargement of the rights.
10. The proposed changes would not result in injury to other water rights. This finding is made through an abbreviated review recognizing that the transfer may be revoked under ORS 540.523(5) if the Department later finds that the transfer is causing injury to any existing water right.

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Conclusions of Law

The temporary change in place of use and point of appropriation to serve the temporary place of use proposed in Temporary Transfer Application T-12310 are consistent with the requirements of ORS 540.523 and OAR 690-380-8000.

Now, therefore, it is ORDERED:

1. The temporary change in place of use and point of appropriation to serve the temporary place of use proposed in Temporary Transfer Application T-12310 are approved.
2. The former place of use **shall not** be irrigated as part of this water right during the 2016, 2017, 2018, 2019 and 2020 irrigation seasons.
3. The use shall revert to the authorized place of use at the end of the 2020 irrigation season. The authorization to use the temporary point of appropriation shall be terminated concurrently.
4. The approval of this temporary transfer may be revoked or modified if the Department finds the changes cause injury to any existing water right.
5. A subsequent application for permanent transfer of Certificate 54425 shall be subject to a full and complete review to determine consistency with the requirements of OAR Chapter 690, Division 380. Approval of this temporary transfer does not establish a precedent for approval of a subsequent application filed for a permanent transfer.
6. The use of water at the temporary place of use authorized by this transfer shall be in accordance with the terms and conditions of Certificate 54425.
7. The time during which water is used under this approved temporary transfer does not apply toward a finding of forfeiture under ORS 540.610.
8. Water use measurement conditions:
 - a. **Before water use may begin** under this order, the water user shall install a totalizing flow meter, or, with prior approval of the Director, another suitable measuring device, at each point of diversion (new and existing).
 - b. The water user shall maintain the meters or measuring devices in good working order.
 - c. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

9. The use of the remaining water right described by Certificate 54425 shall continue to be in accordance with the terms and conditions of Certificate 54425.

Dated at Salem, Oregon this 26 day of April, 2016.



Dwight French, Water Right Services Administrator, for
Thomas M. Byler, Director
Oregon Water Resources Department

Mailing Date: MAY 03 2016

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Oregon Water Resources Department

Measurement Condition Information for the Applicant
(to be sent with the Draft Preliminary Determination or Final Order) **OWRD**

Transfer #: T-12310

☒ In order to avoid enlargement of the right or injury to other rights, a totalizing and instantaneous read flowmeter will be required to be installed **prior to diversion of water**, as a condition of this transfer:

☒ at each point of diversion/appropriation (new and existing) or

☐ at each new point of diversion/appropriation.

For additional information, or to obtain approval of a different type of measurement device, the applicant should contact the area Watermaster:

Watermaster name: Brian Mayer

District: 12

Address: 513 Center St.

City/State/Zip: Lakeview OR 97630

Phone: 541 947 6038

Email: mayerbn@wrdd.state.or.us

Note: If a device other than the one specified in the Preliminary Determination or Final Order is approved by the Watermaster, fill out and mail the form below to the Salem office.

Approval of an Alternate Measurement Device **T-12310**
(to be filled out after consultation with the applicant, or after a site visit)

On behalf of the Director, I authorize use of the following suitable **alternate measurement device**:

Watermaster signature District Date

If this form is used for approval of an alternative measurement device, it must be mailed to:

Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301-1266

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

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

JUN - 7 1977 State Well No.

WATER RESOURCES DEPT. Permit No.

SALEM, OREGON

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(1) OWNER: Richard Warrington & George Warrington
Name George Warrington
Address Rt. 2 Box 152 McMinnville, Ore

(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 ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

CASING INSTALLED:

Threaded ☐ Welded ☒
" Diam. from 0 ft. to 43 ft. Gage 14 inch
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

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 _____

Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ 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 Arthur Reed
d: 1400 gal./min. with 75 ft. drawdown after 6 hrs.

" " " " " "

Bailer test gal./min. with ft. drawdown after hrs.

Artesian flow g.p.m.

Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal-Material used Cement

Well sealed from land surface to 40 ft.

Diameter of well bore to bottom of seal 18 in. at 145 feet Reduced

Diameter of well bore below seal 14 in. at 145 feet Reduced

Number of sacks of cement used in well seal 14 sacks

Number of sacks of bentonite used in well seal _____ sacks

Brand name of bentonite _____

Number of pounds of bentonite per 100 gallons _____

of water _____ (lbs./100 gals.)

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 Lake Driller's well number _____
SE 1/4 NW 1/4 Section 34 T. 25 R. 15 OWRD

Bearing and distance from section or subdivision corner
1325 feet South of the NW corner of section 34
east of the NW corner of section 34

(11) WATER LEVEL: Completed well.

Depth at which water was first found 42 ft.

Static level 31 ft. below land surface. Date 12-20-76

Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 14 "

Depth drilled 330 ft. Depth of completed well 330 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
Top soil	0	10	
cemented gravel	10	24	
Black Lava rock	24	35	
Blue clay	35	42	31
dark Blue clay	42	55	"
red clay	55	65	"
Soft Blue clay	65	137	"
light Blue clay with burned	138	145	"
Hard gray rock	146	154	"
Burned material with gravel	155	156	"
Hard gray rock	156	160	"
Burned material with sand, silt	160	170	"
Hard gray rock	170	200	"
Sand (coarse)	200	201	"
red clay	201	221	"
Brown & gray clay	221	300	"
Black sand (fine)	300	330	"

Work started 2-14 1976 Completed 3-17 1977

Date well drilling machine moved off of well 3-17 1977

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] Richard Warrington Date 4-17, 1977
(Drilling Machine Operator)

Drilling Machine Operator's License No. _____

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 _____ (Person, firm or corporation) (Type or print)

Address _____

[Signed] _____ (Water Well Contractor)

Contractor's License No. _____ Date _____, 19____

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

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

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

OCT 22 1979

State Well No. 265/16E-6

State Permit No. Lake 497

WATER RESOURCES DEPT
SALEM, OREGON

(1) OWNER:

Name Lyle Adams C. Welch Brown
Address 61690 Pettigrew
Band Oregon 97701

(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 ☐
☐ Jetted ☐
☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

(5) CASING INSTALLED:

Threaded ☐ Welded ☒

16" Diam. from 0 ft. to 18 ft. Gage 1350
" 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
Type Model No.
Diam. Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is
lowered below static level

a pump test made? ☐ Yes ☒ No If yes, by whom?

read:	gal./min. with	ft. drawdown after	hrs.
"	"	"	"
"	"	"	"
at test 900 gal./min. with	ft. drawdown after	1	hrs.
dan flow	g.p.m.		

Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Cement
Well sealed from land surface to 15
Diameter of well bore to bottom of seal 18 in.
Diameter of well bore below seal 16 in.
Number of sacks of cement used in well seal 8
How was cement grout placed? prime grout

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 Lake Driller's well number 68
NW 1/4 SE 1/4 Section 6 T.265 R.16E W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 550 ft.
Static level 96 ft. below land surface. Date Sept 27
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 16 1/8 190

Depth drilled 629 ft. Depth of completed well 629 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
Sand gravel cobbles	0	9	
Grey Brown conglomerate	9	310	
hard rock			
med grey rock	310	335	
grey hard rock	335	416	
grey brown med hard	416	454	
with boulders			
grey hard rock	454	485	
grey hard rock (broken)	485	515	
red hard	515	524	
grey hard	524	550	
grey + brown hard broken	550	623	96
water bearing			
grey hard basalt silt	623	629	

Work started Sept 19 1979 Completed Sept 27 1979

Date well drilling machine moved off of well Sept 27 1979

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] Lyle Adams Date Sept 28, 1979
(Drilling Machine Operator)

Drilling Machine Operator's License No. 1292

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 Lyle Adams
(Person, firm or corporation) (Type or print)

Address RT 3 Box 122 X Hillsboro Oregon
97123

[Signed] Lyle Adams
(Water Well Contractor)

Contractor's License No. 690 Date Sept 28, 1979

The original and first copy of this report are to be filed with the

RECEIVED WATER WELL REPORT

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

JUL 16 1980

STATE OF OREGON
(Please type or print)

WATER RESOURCES DEPT above this line)
SALEM, OREGON

State Well No. 265/168-6db

State Permit No. _____

(1) OWNER:

Name C. Wade Brown
Address 61690 Pettigrew
Bend Oregon 97701

(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 ☐
☐ Jetted ☐
☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

(5) CASING INSTALLED:

Threaded ☐ Welded ☐

" Diam. from _____ ft. to _____ ft. Gage _____
" 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 _____

Type _____ Model No. _____

Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

a pump test made? ☐ Yes ☐ No If yes, by whom?

Yield: gal./min. with ft. drawdown after hrs.

" " " " "

" " " " "

" " " " "

" " " " "

Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used _____

Well sealed from land surface to _____ ft.

Diameter of well bore to bottom of seal _____ in.

Diameter of well bore below seal _____ in.

Number of sacks of cement used in well seal _____ sacks

How was cement grout placed? _____

Was a drive shoe used? ☐ Yes ☐ No Plugs _____ Size _____ 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 Lake Driller's well number 68-13

T. 26 S. R. 16 E. W.M.

Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found _____ ft.

Static level 96 ft. below land surface. Date July 7-80

Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____ ft.

Depth drilled _____ ft. Depth of completed well _____ 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
reamed from 8" to 10" to 6.5"			
Gray Basalt hard	629	640	
Gray brown broken basalt w/s	640	645	96
Gray basalt hard	645	720	
gray green clay w/s	720	745	
Gray basalt - hard	745	765	
broken gray basalt	765	775	
Gray basalt hard	775	865	
broken white pumice	865	867	
Gray basalt - slightly broken w/s	867	872	96
Gray basalt - hard	872	900	

Work started June 28 1980 Completed July 7 1980

Date well drilling machine moved off of well July 7 1980

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] Tyle Adams Date July 9, 1980
(Drilling Machine Operator)

Drilling Machine Operator's License No. 12962

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 Tyle Adams
(Person, firm or corporation) (Type or print)

Address Box 467

[Signed] Tyle Adams
(Water Well Contractor)

Contractor's License No. 690 Date July 8 1980

STATE OF OREGON

CERTIFICATION OF VITAL RECORD

848067

I.D. TAG NO.

OREGON HEALTH AUTHORITY CENTER FOR HEALTH STATISTICS CERTIFICATE OF DEATH

136-2019-014125

STATE FILE NUMBER

TO BE COMPLETED BY FUNERAL FACILITY	Legal Name		First Richard	Middle William	Last Warmington	Suffix	Death Date May 27, 2019
	Sex Male	Age 64 years	Social Security Number [REDACTED]		County of Death Lake		
	Birthdate August 21, 1954		Birthplace McMinnville, Oregon		Was Decedent Ever in U.S. Armed Forces? No		
	Residence: 81365 Cougar Mountain Lane				City/Town Fort Rock		
	Residence County Lake		State or Foreign Country Oregon		Zip Code + 4 97735		Inside City Limits? No
	Marital Status at Time of Death Married		Spouse's Name Prior to First Marriage Susan Kay Reynoldson				
	Father's Name George H Warmington				Mother's Name Prior to First Marriage Barbara Jean Wilson		
	Informant's Name Susan Kay Warmington		Telephone Number Not Available	Relationship to Decedent Spouse		Mailing Address PO Box 33, Fort Rock, OR 97735	
	Place of Death Decedent's Residence		Facility Name				
	Location of Death 81365 Cougar Mountain Lane				City/Town or Location of Death Fort Rock		State Oregon
Method of Disposition Burial		Place of Disposition Fort Rock Cemetery			Location (City/Town and State) Fort Rock, Oregon		
Name and Complete Address of Funeral Facility Desert Rose Funeral Chapel 1705 N 4th St, Lakeview, Oregon 97630							
Date of Disposition June 02, 2019		Funeral Director's Signature Kristin A Thompson			Electronically Signed	OR License Number FS-0650	
Registrar's Signature Jennifer A. Woodward				Date Received May 29, 2019		Local File Number	
Amendment							
TO BE COMPLETED BY MEDICAL CERTIFIER	Was case referred to Medical Examiner? No		Autopsy? No		Were autopsy findings available to complete the cause of death?		Time of Death 09:10 AM
	CAUSE OF DEATH						Approximate Interval: Onset to Death
	IMMEDIATE CAUSE a. Undetermined Natural Causes						immediate
	Due to (or as a consequence of) ↓ b. Chronic Tobacco use						years
	Due to (or as a consequence of) ↓ c.						
	Due to (or as a consequence of) ↓ d.						
	Other significant conditions contributing to death Hypertension						
	Manner of Death Natural		If Female Not Applicable		OWRD		Did tobacco use contribute to death? Yes
	Date of Injury:		Time of Injury	Place of Injury		Injury at Work?	
	Location of Injury						
Describe how injury occurred						If transportation injury, specify.	
Name and Address of Certifier C. Scott Graham 620 S J Street, Lakeview, Oregon 97630							
Name and Title of Attending Physician If Other than Certifier						Date Signed May 29, 2019	
Medical Certifier C. Scott Graham		Electronically Signed	Title of Certifier D.O.		License Number DO21658		
Amendment							



20190532695

45-2CC (01/06)

I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORDS FACTS ON FILE IN THE OREGON CENTER FOR HEALTH STATISTICS.

May 29, 2019

DATE ISSUED:

JENNIFER A. WOODWARD, Ph.D.
STATE REGISTRAR

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

