# Application for Permanent Water Right Transfer



### OREGON Oregon Water Resources Department

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

# Part 1 of 5 – Minimum Requirements Checklist

attachments are not completed and included.
For questions, please call (503) 986-0900, and ask for Transfer Section.

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

RECEIVED

		SEP 07 202					
Part 2 – Completed Transfer Application N	Map Checklist.	OWRD					
completed Fee Worksheet, page 3. Try the	e new online fee calculator at:	157000					
Part 4 – Completed Applicant Information	and Signature.						
be transferred? List them here:(	Pert. 67733, Permit G.	11189					
Attachments:							
Completed Transfer Application Map.							
Completed Evidence of Use Affidavit and	supporting documentation.						
Affidavit(s) of Consent from Landowner(s) right is on.)	(if the applicant does not own the I	and the water					
		irrigation					
signature (or signed land use form receipt water is to be diverted, conveyed, and/or conveyed, and/or used only on federal lan place of use only, b) no structural changes	stub) from each local land use auth used. Not required if water is to be ds or if all of the following apply: a), c) the use of water is for irrigation	ority in which diverted, a change in					
		or additional					
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 S	taff Use Only)						
1							
Land Use Form not enclosed or incomplete Additional signature(s) required	Evidence of Use Form not enclosed or Part is incomplete	ĺ					
Staff: 503-986-0	Date:/						
	Part 1 – Completed Minimum Requirement Part 2 – Completed Transfer Application Merit 3 – Application Fee, payable by check completed Fee Worksheet, page 3. Try the http://apps.wrd.state.or.us/apps/misc/wr Customer Service at (503) 986-0801.  Part 4 – Completed Applicant Information Part 5 – Information about Water Rights to the transferred? List them here: Please include a separate Part 5 for each Attachments:  Completed Transfer Application Map.  Completed Evidence of Use Affidavit and suffidavit(s) of Consent from Landowner(s) right is on.)  Supplemental Form D – For water rights sed district. Complete when the transfer application Oregon Water Resources Department's Lasignature (or signed land use form receipt water is to be diverted, conveyed, and/or conveyed, and/or used only on federal land place of use only, b) no structural changes the use is located within an irrigation distributed water Well Report/Well Log for changes in point(s) of appropriation.  Geologist Report for a change from a surface point of appropriation (well), if the propose source and more than 1000' upstream or conveyed and use form requirements and application fee not enclosed/insufficient Land Use Form not enclosed or incomplete Additional signature(s) required Other/Explanation	Part 4 – Completed Applicant Information and Signature.  Part 5 – Information about Water Rights to be Transferred: How many water be transferred?					

# Part 2 of 5 – Transfer Application Map

SEP 07 2021

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

	sure that the transfer application map you submit includes all the required items and ne existing water right map. Check all boxes that apply.
N/A □ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see <a href="http://apps.wrd.state.or.us/apps/wr/cwre_license_view/">http://apps.wrd.state.or.us/apps/wr/cwre_license_view/</a> . CWRE stamp and signature are not required for substitutions.
□ X N/A	If <b>more than three</b> water rights are involved, separate maps are needed for each water right.
$\boxtimes$	Permanent quality printed with dark ink on good quality paper.
	The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, $11 \times 17$ inches, or up to $30 \times 30$ inches. For $30 \times 30$ inch maps, one extra copy is required.
M	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.
$\bowtie$	Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
M M	Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
$\boxtimes$	Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
X	Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
□ 🗖 N/A	Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
	Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
⊠ □ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example $-42^{\circ}32'15.5''$ ) or degrees-decimal with five or more digits after the decimal (example $-42.53764^{\circ}$ ).

#### 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	\$1,160
-	Types of change proposed:		
	Place of Use RECE	VE	
	Character of Use		
	Point of Diversion/Appropriation SEP 0 7	202	1
	Number of above boxes checked = (2a)		
	Subtract 1 from the number in line 2a = (2b) If only one change, this will be 0	RD	
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » »	2	0
	Number of water rights included in transfer (3a)		
	Subtract 1 from the number in 3a above: (3b) If only one water right this will be 0		
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?		
	No: enter 0 »» » » » » » » » » » » » » » » » »		1
4	Yes: enter \$410 » » » » » » » » » » » » » » » »	4	410
	Do you propose to change the place of use or character of use?		
	No: enter 0 on line 5 » » » » » » » » » » » » » » » »		
	Yes: enter the cfs for the portions of the rights to be transferred (see		
	example below*): (5a)		
	Subtract 1.0 from the number in 5a above: (5b)		
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » »		
	If 5b is greater than 0, round up to the nearest whole number: (5c) and	_	^
5	multiply 5c by \$350, then enter on line 5 » » » » » » » »	5	1/1
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	1570
	Is this transfer:		
	necessary to complete a project funded by the Oregon Watershed		
	Enhancement Board (OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat?	İ	
7	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »  If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » » »	8	IKAA
*5.40	Subtract line 7 from line 0 " " " " " " " " " " " " " " " " " "		15 7 0

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

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

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

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

	FEE WORKSHEET for SUBSTITUTION		
1	Base Fee (includes change to one well)	1	\$840.00
	Number of wells included in substitution (2a) Subtract 1 from the number in 2a above: (2b) If only one well this will be 0		
2	Multiply line 2b by \$410 and enter » » » » » » » » » » » » » »	2	1.5
3	Add entries on lines 1 through 2 above » » » » Fee for Substitution:	3	

<sup>\*</sup>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:

plicant Information			2000		
LICANT/BUSINESS NAME PATTERSON N	urser	SOLES IN	PHONE NO. (503) 519-290	ADDITIONAL CONTACT NO.	SE
P.O. Box 68	,			FAX NO.	
Fort Carl	STATE	ZIP 97077	E-MAIL		_
PROVIDING AN E-MAIL ADD	RESS, CONSEN	IT IS GIVEN TO RECEIV	E ALL CORRESPONDENCE	FROM THE DEPARTMENT	om
ECTRONICALLY. COPIES OF TI	HE FINAL ORDI	ER DOCUMENTS WILL	ALSO BE MAILED.		
ent Information - The a	gent is autho	orized to represer	nt the applicant in all n	natters relating to this ap	olicati
ENT/BUSINESS NAME	1		PHONE NO.	ADDITIONAL CONTACT NO.	
STEVEN !	4pple	6416	(503) 362-40	FINANCE	
PRESS OF LINE	ILERE	ey CT S		FAX NO.	
Y =	STATE	ZIP	E-MAIL		
SALEM	OR	97302	STEVE JAP	legate.	
PROVIDING AN E-MAIL ADD ECTRONICALLY, COPIES OF THE	_			FROM THE DEPARTMENT	
olain in your own words	100				
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Print Name (and Title if applicable)

Applicant signature

Date

	арріу:			
The applicant is respon to be sent to the appli		completion of char	nge(s). Notices and cor	respondence should continue
			mpleting the proposed ould be sent to this lar	change(s) after the final order adowner.
notices and correspon	dence sho	ould be sent to this	landowner and the ap	
At this time, are the lands in th	nis transfe	r application in the	process of being sold?	? 🗌 Yes 🔀 No
If YES, and you know who	the new la	andowner will be,	please complete the re	ceiving landowner information est for assignment will have to
If a property sells, the cert unless a sale agreement o https://www.oregon.gov/	r other do	cument states oth	erwise. For more infor	mation see:
RECEIVING LANDOWNER NAME	4		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS	<u> </u>			FAX NO.
СІТУ	STATE	ZIP	E-MAIL	
				CED III / JIIJI
Check here if any of the wa				
Check here if any of the wairrigation or other water of IRRIGATION DISTRICT NAME			ttach Supplemental Fo	OWRD sed within or served by an
irrigation or other water of		p: Complete and a	ttach Supplemental Fo	OWRD sed within or served by an
IRRIGATION DISTRICT NAME  CITY	district. ( <b>Ti</b>	p: Complete and a  ADDRESS  STATE  ghts supplied unde	ttach Supplemental Fo	ced within or served by an orm D.)
IRRIGATION DISTRICT NAME  CITY  Check here if water for any	district. ( <b>Ti</b>	p: Complete and a  ADDRESS  STATE  ghts supplied unde	r a water service agree	ced within or served by an orm D.)
irrigation or other water of IRRIGATION DISTRICT NAME  CITY  Check here if water for any stored water with a federal	district. ( <b>Ti</b>	p: Complete and a  ADDRESS  STATE  ghts supplied unde or other entity.	r a water service agree	ced within or served by an orm D.)
irrigation or other water of IRRIGATION DISTRICT NAME  CITY  Check here if water for any stored water with a federal ENTITY NAME  CITY	y of the rigal agency	p: Complete and a  ADDRESS  STATE  ghts supplied unde or other entity.  ADDRESS  STATE	r a water service agree	ced within or served by an orm D.)  ZIP  ment or other contract for  ZIP  municipal corporation, or triba
IRRIGATION DISTRICT NAME  CITY  Check here if water for any stored water with a federal ENTITY NAME  CITY  To meet State Land Use Consing governments within whose justices and the control of the contro	y of the rigal agency	p: Complete and a  ADDRESS  STATE  ghts supplied unde or other entity.  ADDRESS  STATE	r a water service agree	ced within or served by an orm D.)  ZIP  ment or other contract for  ZIP  municipal corporation, or triba
IRRIGATION DISTRICT NAME  CITY  Check here if water for any stored water with a federal entiry NAME  CITY  To meet State Land Use Consideration of the control of the contr	y of the rigal agency	p: Complete and a  ADDRESS  STATE  ghts supplied under or other entity.  ADDRESS  STATE  quirements, you monthly water will be diver	r a water service agree	ced within or served by an orm D.)  ZIP  ment or other contract for  ZIP  municipal corporation, or triba
IRRIGATION DISTRICT NAME  CITY  Check here if water for any stored water with a federal ENTITY NAME  CITY  To meet State Land Use Consing governments within whose justices and the control of the contro	y of the rigal agency	p: Complete and a  ADDRESS  STATE  ghts supplied under or other entity.  ADDRESS  STATE  quirements, you move the supplied diver will be diver address  STATE	r a water service agree	ced within or served by an orm D.)  ZIP  ment or other contract for  ZIP  municipal corporation, or triba

## 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.

	сору	and paste addi	tional Part 5s,	, or to ad	ld additi			within	the form.
				CERTIF	ICATE #	6	7733		RECEIVED
		otion of Water capacity:			second (	(cfs) <b>O</b> I	R		SEP 0 7 202
	,		100 gallon						OWRD
Table	five yea and ap 1. Loc	e the current vars. Include info	water delivery ormation on t t the authoriz	y system the pump ged place	or the sos, canale of use.	ystem ls, pipe of Dive	lines, and sp	or Appr	some time within the last used to divert, convey,
Nan	/POA ne or mber	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	* *	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
ORI		Authorized Proposed	CLAC *	25	4E	29	SENE	1606	34'N. \$ 543'E From SN COT SENE
WE	2	Authorized Proposed	CLAC 16488	25	4E	29	NESE	1600	130' 5. \$ 100' E from 5w Cor SENE
		☐ Authorized ☐ Proposed							
		Authorized Proposed							
7	t - No Check:	16 : SEE AL	SO GN CH	osed be	low (ch:	ange "	CODES" are	Woz.	d in parentheses):
		Place of Use			•				Primary Use (S to P)
		Character of				_			on/Well (POA)
		Point of Dive				_			Appropriation (APOA)
	П		oint of Divers	ion (APO	D)		Substitution		
			er POD to Gro	-			Government	100	POD (GOV)
	Will all	of the propos	ed changes at	ffect the	entire v	water ı	right?		
	Yes		nly the Propos ed above to d			- 2		able 2 c	on the next page. Use the
	☐ No	Complete al	l of Table 2 to	describe	e the po	rtion o	f the water i	right to	be changed.

Please use and attach additional bages of Table 2 as needed. See page 6 for instructions.

Contact the Department at 503-986-0900 and ask for Transfer Staff. Do you have questions about how to fill-out the tables?

List the change proposed for the acreage in each ½ ½. 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.

	Priority Date		1901	1901	11/6/90	:	0	*	/	(4)					Q±
CHANGES	POD(s)/ POA(s) to be used (from Table 1)		Pob #5	9# QC/4	ORIG + WELL	=	"	N.		PA ON G					OLUMED AND THE DESCRIPTION OF THE PERSON OF
PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.	New Type of POD(s)/ DOW Type of be used (from Teble 1)				(	1	1	ı		45Hil 1					
or "or FTER P de.	Acres		10.0	5.0	2.85	1.14	6.01	3.62		1					18.48
the "to" or opear AFTE are made.	Gvt Lot or DLC		1							B					RES:
ED (th	Gvt Tax Lot Lot or DLC		200	200	28 SW NW 1600	"	:	=		4					TOTAL ACRES:
OPCIS it wou	74 74		NW	N	NE	NW SW	NE	NE SE		No charges					ē
PR ng as			NN	AS.	350		34 SE NE			shar					
e listi	Sec		<b>н</b>	7 E		:	62			No					
Ę	Rng		6	6	46					2					
	Twp		2 5	2 \$	25										
Proposed	"CODES" from previous page)	EXAMP.E	POU/FOD								18				
IGES	Priority Date		1901												
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.	POD(s) or POA(s) (name or number from Table 1)		POD #1 POC #2												
AUTHORIZED (the "from" or "off" lands) appears on the certificate BEFORE PROP to part or portion of the water right that will	Type of USE listed on Certificate		Irrigation												
from" d ficate	Acres		15.0												
(the " e cert	GVt Lot or DLC														ES:
on the	Gvt Tax LotLot or DLC		91												TOTAL ACRES:
THOR pears art or p	*		32												TOT/
AL lat ap	*		2												
ing th	Sec		73												$\  \ $
ne list	Rng		<u>п</u>										8 1	7	
		100000	HOSE CONTRACTOR OF CONTRACTOR	No. of Concession,			1		1	1	1	1 2	8 1		7

Additional remarks:

Revised 11/6/2019

Permanent Transfer Application Form – Page 8 of 9

SEP 07 2021

TACS

#### For Place of Use or Character of Use Changes

1	Are there other water right certificates, water use permits or ground water registrations assowith the "from" or the "to" lands? $\square$ Yes $\bowtie$ No- $\bowtie$ A	ociated									
	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.										
Fū	r Substitution (ground water supplemental irrigation will be substituted for surface water pr	rimary irrigation)									
	Ground water supplemental Permit or Certificate #; Surface water primary Certificate #	RECEIVED									
Fo	or a change from Supplemental Irrigation Use to Primary Irrigation Use	SEP 07 2021									
1	Identify the primary certificate to be cancelled. Certificate #	å									
Fo	or a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:	OWRD									
)	Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled with the corresponding well(s) in Table 1 above and on the accompanying application in Tip: You may search for well logs on the Department's web page at: <a href="http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx">http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx</a>										
,	AND/OR										
	Describe the construction of the authorized and proposed well(s) in Table 3 for any well have a well log. For proposed wells not yet constructed or built, provide "a best estimated requested information element in the table. The Department recommends you consult driller, geologist, or certified water right examiner to assist with assembling the information complete Table 3.	e" for each a licensed well									
ble	e 3. Construction of Point(s) of Appropriation										

#### Ta

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
ORIGINAL	Yes	CLASS 6386	200		SEE	Wou L	06)			100
Weu 2	455	CLAC 76488	208		( "	10	j			100

STATE ENGINEER Salem, Oregon	CLAC	Vell Record		TATE WELL	L NO2	/4-29H
Saloin, Orogon	(6386)	ORIGINA		PPLICATIO	N NO. G	R <b>-</b> 3892
OWNER: J. E. Jarvis	( Oran	MAILIN ADDRE	IG	1. Box 2	33	
		CITY A	ND			
LOCATION OF WELL: Owner			Eagle	Creek, O	regon	
SE 1/4 NE 1/4 Sec. 29 T.	2 S., R	4 w., W.M.	,		3	
Bearing and distance from secti						_
corner 1000' W. 350' N. f	rom Et cor.	Sec. 29	l		į	
***************************************		······································	·	<del>                                     </del>	X	-
		***************************************				
A 7				ļ		-
Altitude at well					\$ 1	
TYPE OF WELL: Drilled I						
Depth drilled 200 ft.	epth cased	50 ft.	Se	ection	29	(*)
CASING RECORD:						
8 inch casing set to 150	feet				RECEIV	'ED
					SEP 07 2	M21
					1	.021
FINISH:					OWRE	
4 cuts per 10" from 105	to 148					
AQUIFERS:						
AQUITERS:						
			• 707 1340			
WATER LEVEL:						
PUMPING EQUIPMENT: Type	e Jacuzzi	turbine	***********		H.P.	10
Capacity G.	P.M.			-		
WELL TESTS: Drawdown 80 ft.	after	hours	100			25.
Drawdown ft.	after	houre		***************************************		G.P.M
						G.P.M
USE OF WATER Irrigati SOURCE OF INFORMATION DRILLER or DIGGER	on Well Registr	Temp.	°F.	# CR_3536	***************************************	, 19
DRILLER or DIGGER ADDITIONAL DATA:				I dit-		
LogX Water Level Me						
REMARKS:			Tillary Sis	- Aqu	mer Test .	
Log Top soil			Thickness	m of our	Bottom	
Clay			1 2	- 2 5(		
Cemented gravel			50	100		
Heavy sand	h vrok		100	105	5	
Sand & gravel wit: Sandstone	n water	no record -	195	345	3	
Blue clay			180	180 200	Ś	
Well refill	ed to 175	State Printing 89316				

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210) 14 G II 2 5/22/2021

	rage 1 of 1	ĺ
WELL I.D. LABEL# I	140624	
START CARD#	1051942	
ORIGINAL LOC#		

(as required by ORS 537.765 & OAR 690-203-0210) WELL 51226	2021 ORIGINAL LOG#	1
(1) LAND OWNER Owner Well I.D.		
First Name Last Name	(9) LOCATION OF WELL (legal description)	)
Company PATTERSON NURSERY SALES	County CLACKAMAS Twp 2.00 S N/S Range 4.	.00 E E/W WM
Address         PO BOX 68           City         EAGLE CREEK         State         OR         Zip         97022	Sec 29 SE 1/4 of the NE 1/4 Tax Lo	
(2) TYPE OF WORK    New Well   Deepening   Conversion	Tax Map Number Lot Lat' " or	
Alteration (complete 2a & 10) Abandonment(complete 5a)	Lat "or or o	
(2a) PRE-ALTERATION	Long or	DMS or DD
Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address	
Casing:	32096 S.E. JUDD RD	
Material From To Amt sacks/lbs Seal:		
(3) DRILL METHOD	(10) STATIC WATER LEVEL	
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi)	+ SWL(ft)
Reverse Rotary Other	Existing Well / Pre-Alteration	14
	Completed Well 5/18/2021 Flowing Artesian? Dry Hole?	85.6
(4) PROPOSED USE Domestic Irrigation Community		
Industrial/Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first for	
Thermal Injection Other	SWL Date From To Est Flow SWL()	psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	5/18/2021 130 181 100	85.6
Depth of Completed Well 208.00 ft.		
BORE HOLE SEAL sacks/		
Dia From To Material From To Amt the		
15   0   30   Cement w/1% Bentonit   0   116   4512   P		
12   30   116   Calculated #349.75   8   116   208		
Calculated	(11) WELL LOG Ground Elevation	
How was seal placed: Method A B X C D E	Material From	n To
Other	top soil 0	
Backfill placed from ft. to ft. Material	brown clay	1 26
Filter pack from ft. to ft. Material Size	cemented gravel 20	
Explosives used: Yes Type Amount	brown clay w/ gravel seams 42	
	cemented gravel 4	
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	brown clay 10 gravel 11	
Proposed Amount Actual Amount	brown & gray clay	
(6) CASING/I INER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	joine & gray ciay 18	
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd  8		
	RECEIVED	
H H K KI H H K KI H K KI	11204112	
	SEP 0.7 2021	
	JEF V 4 2021	
Shoe Inside Outside Other Location of shoe(s) 205		
Temp casing Yes Dia 12 From + X 1 To 116	OWRD	
(7) PERFORATIONS/SCREENS	30000	
Perforations Method push down air perforator	<u> </u>	
Screens Type Material	Date Started5/11/2021 Completed 5/18/3	2021
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	(unbonded) Water Well Constructor Certification	military and the second control of the secon
Screen Liner Dia From To width length slots pipe size Pert Casing 8 135 181 .25 1 740	I certify that the work i performed on the construction, de	eenening, alteration, or
101 Subing 0 133 101 .23 1 740	abandonment of this well is in compliance with Orego	
	construction standards. Materials used and information repo	
	the best of my knowledge and belief.	
	License Number Date	
(8) WELL TESTS: Minimum testing time is 1 hour	Signed	
Pump Bailer • Air Flowing Artesian	Signed	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification	
100 216 3	I accept responsibility for the construction, deepening, alter	
	work performed on this well during the construction dates rep	
	performed during this time is in compliance with Orego construction standards. This report is true to the best of my k	
Temperature 57 °F Lab analysis Yes By		
Water quality concerns? Yes (describe below) TDS amount 41 ppm Prom To Description Amount Units	License Number 1771 Date 5/12/1921	
Decempation and Comp	Signed GEORGE YOUNGBERG (E-filed)	
	Contact Info (optional) Youngberg Pump & Well Drilling Ph	h. 503-630-3970
ODIGINAL WATER RESOURCES D	EDAD TATES OF	

# **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 o	of Oregon		)						RECEIVE
_	. 0. 1		) ss						SEP 07 202
Count	yof Clack	AMAS	)				0 -		1
1,	burt 4.	Nderwo	in my	capacity	as Tro	or man	ager		<b>OWRD</b>
mailin	burt F. [	195 SET	ickle (5.	1d	Sor	mg, CV			
	one number (_								
1.	My knowledg	e of the exer	cise or statu	s of the v	vater righ	nt is based o	n (check one):		
		onal observat		(		onal experti			
		onar observac			11010331	onal expert			
2.	I attest that:								
					-	n the <b>entire</b>	place of use f	or	
		ficate # _ 6	•						
	My ki	nowledge is s	pecific to the	e use of v	water at t	he following	g locations wit	hin the last five	years:
	Certificate #	Township	Range	Mer	Sec	1/4 1/4	Gov't Lot or DLC	Acres (if applicable	,
							OI DEC	(II applicable	
				-					
				1					
OP									
OR	Confirming C	autificate #		h h			ast five years;	OD.	
	instream leas						n the last five proposed for	years. The	
								ased instream.	); OR
						tation that a	presumption	of forfeiture fo	r non-use
	would be reb								
	Water has be 10 years for 0						opriation for r	nore than	
	To Acais IOI C	ci tilicate # _		(10	i i iistoric	TODIFORT	i di i si Ci s j		

Revised 7/1/2021

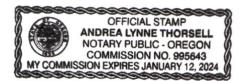
Evidence of Use Affidavit - Page 1 of 2

(continues on reverse side)

	Kow
3.	The water right was used for: (e.g., crops, pasture, etc.):
4.	I understand that if I do not attach one or more of the documents shown in the table below to support the above
	statements, my application will be considered incomplete

Figure of Affiant 8/26/21Date

Signed and sworn to (or affirmed) before me this 24th day of Agust, 2021.



Notary Public for Oregon

My Commission Expires: 012, 2029

Supporting Documents	Examples	
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	9
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	Power usage records for pumps associated with irrigation use	
	Fertilizer or seed bills related to irrigated crops	
	Farmers Co-op sales receipt	
Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or	District assessment records for water delivered  Crop reports submitted under a federal loan agreement.	
records of other water suppliers	Crop reports submitted under a federal loan agreement	
	Beneficial use reports from district	ECEIV
	IRS Farm Usage Deduction Report	
	Agricultural Stabilization Plan	EP 07
	CREP Report	}
		OWR
Aerial photos containing sufficient detail to establish location and date of photograph	Multiple photos can be submitted to resolve different areas of	0000
establish location and date of photograph	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	
Approved Losso establishing handing	TerraServer – www.terraserver.com	_
Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number	

