

Application for Permanent Water Right Transfer



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

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)

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- 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.
- 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: 93889 (Attachment A)**
Please include a separate Part 5 for each water right. (See instructions on page 6)
NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

Attachments:

- Completed Transfer Application Map. **Attachment B**
- Completed Evidence of Use Affidavit and supporting documentation. **Attachment C**
- 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. **Attachment D**
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. **Attachment E**
- 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: _____	Date: _____

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Part 2 of 5 – Transfer Application Map

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

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME City of Sisters, Attn: Paul Bertagna		PHONE NO. 541-549-6022	ADDITIONAL CONTACT NO.
ADDRESS PO Box 39			FAX NO.
CITY Sisters	STATE OR	ZIP 97759	E-MAIL pbertagna@ci.sisters.or.us
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 GSI Water Solutions, Inc., Attn: Trevor Grandy		PHONE NO. 971-200-8545	ADDITIONAL CONTACT NO.
ADDRESS 147 SW Shevlin Hixon Dr., Suite 201			FAX NO.
CITY Bend	STATE OR	ZIP 97702	E-MAIL tgrandy@gsiws.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this transfer application, and why:
 The applicant is proposing to add two points of appropriation (Well 3 and Well 4) to water right Certificate 93889. The applicant is also proposing to change the place of use of Certificate 93889 to be the "City of Sisters service area."
 If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check One Box

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- 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.

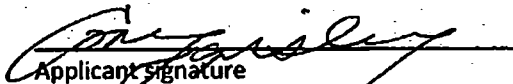
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By my signature below, I confirm that I understand:

- 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: The Nugget.
- 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).
- Refunds may only be granted upon request and, as set forth in ORS 536.050(4)(a), if the Director determines that a refund of all or part of a fee is appropriate in the interests of fairness to the public or necessary to correct an error of the Department.

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


Applicant signature

Cory Misley, City Manager
Print Name (and Title if applicable)

9/21/2021
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*

N/A: The applicant is a municipality

*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

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RECEIVING LANDOWNER NAME N/A		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.
CITY	STATE	ZIP	E-MAIL
Describe any special ownership circumstances: The applicant is a municipality			
The confirming Certificate shall be issued in the name of: <input type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner			


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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 City of Sisters	ADDRESS 520 East Cascade; PO Box 39	
CITY Sisters	STATE OR	ZIP 97759

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 93889

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Description of Water Delivery System

System capacity: 1.56 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **The City of Sisters' current point of appropriation, Well 2, is equipped with a submersible pump. Water is pumped from the well into the City's municipal water distribution system.**

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 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	DESC 1034	15	S	10	E	5	SW	SW	900	1,280 feet North and 1,175 feet East from SW corner of Section 5
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	DESC 57902	15	S	10	E	4	SE	NW	103	1,890 feet South and 2,325 feet East from NW corner of Section 4
Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	DESC 62447	15	S	10	E	9	SW	NE	401	1,505 feet South and 1,715 feet West from NE corner of Section 9

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

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

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 93889

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

AUTHORIZED (the "from" or "off" lands) 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	1/4	Tax Lot	Gvt Lot or DLC	Acre	Type of Use (listed on Certificate)	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	1/4	Tax Lot	Gvt Lot or DLC	Acre	New Type of USE	POD(s) or POA(s) to be used (from Table 1)	Priority Date			
EXAMPLE																							
2	S	9	E	1	NE	NW	100	Irrigation	POD # 2	1991	POD/POA	2	S	9	E	1	NW	SW	500	1	1000	POD # 3	1991
												2	S	9	E	2	SW	NW	500		50	POD # 4	1991

Additional Remarks: The applicant is proposing to add Wells 3 & 4 to Certificate 93889 and change the place of use to be the "City of Sisters service area."

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: N/A – The authorized use is municipal use, so the water rights are not 'layered'.



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 # _____.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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.

See Attachment E

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

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Attachment A

Certificate 93889

Application for a Permanent Water Right Transfer - City of Sisters

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STATE OF OREGON
COUNTY OF DESCHUTES
CERTIFICATE OF WATER RIGHT

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THIS CERTIFICATE ISSUED TO

CITY OF SISTERS
PO BOX 39
SISTERS OR 97759

confirms the right to the use of water perfected under the terms of Permit G-11418. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the point of diversion from the source. The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-12591

SOURCE OF WATER: WELL 2 IN WHYCHUS BASIN

PURPOSE OR USE: MUNICIPAL USES

MAXIMUM RATE: 1.56 CUBIC FEET PER SECOND

DATE OF PRIORITY: JUNE 25, 1991

The well is located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
15 S	10 E	WM	5	SW SW	WELL 2 - 1280 FEET NORTH AND 1175 FEET EAST FROM SW CORNER, SECTION 5

A description of the place of use is as follows:

Twp	Rng	Mer	Sec	Q-Q
15 S	10 E	WM	4	SW NE
15 S	10 E	WM	4	SE NW
15 S	10 E	WM	4	NE SW
15 S	10 E	WM	4	NW SW
15 S	10 E	WM	4	SW SW
15 S	10 E	WM	4	SE SW
15 S	10 E	WM	4	NE SE
15 S	10 E	WM	4	NW SE
15 S	10 E	WM	4	SW SE
15 S	10 E	WM	4	SE SE
15 S	10 E	WM	5	NE SW
15 S	10 E	WM	5	SE SW



NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484 and ORS 536.075. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 183.484, ORS 536.075 and OAR 137-004-0080, you may petition for judicial review and 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. In addition, under ORS 537.260 any person with an application, permit or water right certificate subsequent in priority may jointly or severally contest the issuance of the certificate within three months after issuance of the certificate.

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Twp	Rng	Mer	Sec	Q-Q
15 S	10 E	WM	5	NE SE
15 S	10 E	WM	5	NW SE
15 S	10 E	WM	5	SW SE
15 S	10 E	WM	5	SE SE
15 S	10 E	WM	8	SE NE
15 S	10 E	WM	8	NE NW
15 S	10 E	WM	8	NW NW
15 S	10 E	WM	9	NW NE
15 S	10 E	WM	9	SW NE
15 S	10 E	WM	9	SE NE
15 S	10 E	WM	9	NE NW
15 S	10 E	WM	9	NW NW
15 S	10 E	WM	9	SW NW
15 S	10 E	WM	9	SE NW
15 S	10 E	WM	9	NW SW

The City shall monitor and report the impact of water use under this right on water levels within the aquifer that provides water to the well under this right in accordance with the plan on file with the Department. If any well listed on this right displays a total static water-level decline of 25 or more feet over any period of years, as compared to the reference level, then the City shall discontinue use of, or reduce the rate or volume of withdrawal from, the well. Such action shall be taken until the water level recovers to above the 25-foot decline level or until the Department determines, based on the City or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The City shall in no instance allow excessive decline to occur within the aquifer as a result of use under this right.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this right, then use of water from the well shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well shall be maintained in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine the water level elevation in the well at all times.

When required by the Department, the water user shall install and maintain a weir, meter, or other suitable measuring device, and shall keep a complete record of the amount of ground water withdrawn.

The Director may require water level or pump test results every ten years.

Failure to comply with any of the provisions of this right may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the right.

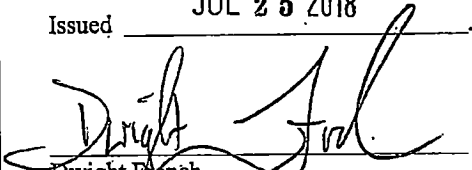
This right is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The right to the use of the water for the above purpose is restricted to beneficial use on the lands or place of use described; however, water may be applied to lands which are not specifically described above, provided the holder of this right complies with ORS 540.510.

Issued JUL 25 2018


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



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Attachment B

Application Map

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Attachment C

Evidence of Use Affidavit

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Application for Water Right Transfer Evidence of Use Affidavit



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

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss

County of DESCHUTES

I, CORY MISLEY, in my capacity as CITY MANAGER,

mailing address PO Box 39 Sisters, OR 97759

telephone number (541)549-6022, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the entire place of use for Certificate # _____; OR

My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

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)

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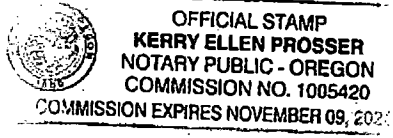
3. The water right was used for: (e.g., crops, pasture, etc.): MUNICIPAL WATER SUPPLY

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

[Signature]
Signature of Affiant

9/21/2021
Date

Signed and sworn to (or affirmed) before me this 21 day of September, 2021.



[Signature]
Notary Public for Oregon
My Commission Expires: 11/09/23

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 type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terra-server.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number
<input checked="" type="checkbox"/> 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).	This is a municipal water right and a presumption of forfeiture would be rebutted under ORS 540.610(2)(a) and (b). See water right Certificate 93889 in transfer application, Attachment A.

Attachment E

Well Logs: DESC 1034, DESC 57092, & DESC 62447

Application for a Permanent Water Right Transfer - City of Sisters

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13840 OCT 06 2021

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DESC 1034 RECEIVED

15S/10E/85

**STATE OF OREGON
WATER WELL REPORT**
(as required by ORS 637.765)

SEP 16 1991

(START CARD) # 27957

(1) OWNER: Well Number _____
Name Hap Taylor Construction **WATER RESOURCES DEPT** County Deschutes Latitude _____ Longitude _____
Address 2641 NE Ravenwood Dr. **SALEM OREGON** Township 15 S Nor S. Range 10 E Eor. W. W.M. _____
City Bend State OR Zip 97701
Section 8 W _____ W _____

(9) LOCATION OF WELL by legal description:
County Deschutes Latitude _____ Longitude _____
Township 15 S Nor S. Range 10 E Eor. W. W.M. _____
Section 8 W _____ W _____
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 15200 McKenzie Hwy
Sisters, OR

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 302 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount
Diameter	From To	Material	From To	sacks or pounds
22"	0 39	Cement	0 39	93 sacks
17"	39 190			
14"	190 244			
13"	244 302			

Hole was sealed by method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing 18"	+1	39	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14"	+13	244	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10"	238	302	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of sheets: _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tel./pipe size	Casing	Liner
242	302	1/8x3	2400	10"		<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Baller Air Flowing Artesian
Yield gal/min 1200 Drawdown .3ft Drill stem at 220 Time 8 hr:hr

Temperature of water 51 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Saky Muddy Odor Colored Other _____
Depth of strata: _____

(10) STATIC WATER LEVEL:
101 ft. below land surface Date 7/31/91
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 105'

From	To	Estimated Flow Rate	SWL
251	273		101
283	288		101
288	295	1200+	101
295	301		101

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Top soil	0	1	
Cobbles with sand & dirt	1	23	
Volcanic gravels	23	34	
Basalt black porous	34	50	
Basalt grey hard	50	63	
Cinders red	63	75	
Volcanic gravels grey & red	75	98	
Basalt grey medium fractured	98	103	
Pumice white	103	105	
Basalt grey fractured with round gravels	105	145	101
Conglomerate brown	145	155	101
Rock grey hard	155	160	101
Rock soft grey & brown	160	175	101
Gravel broken	175	193	101
Rock broken grey & brown	193	203	101
Conglomerate light brown	203	235	101
Rock broken with gravel	235	241	101
Basalt grey hard & porous	241	251	101
Basalt brown porous	251	273	101
Basalt grey hard	273	283	101
Basalt porous grey & lavender	283	288	101
Cinders red	288	295	101

Date started 7-19-91 Completed 8-12-91

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed [Signature] WWC Number 1358
Date 8-21-91

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.
Signed [Signature] WWC Number 723
Date 8-21-91

ORIGINAL & FIRST COPY: WATER RESOURCES DEPARTMENT SECOND COPY: CONSTRUCTOR THIRD COPY: CUSTOMER

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SEP 16 1991

(START CARD) # 27957 (cont'd)

STATE OF OREGON WATER WELL REPORT (as required by ORS 537.765)

(1) OWNER:

Name Han Taylor Construction (cont'd) Address City State Zip

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well ft. Explosives used Yes No Type Amount

Table with columns: HOLE Diameter, SEAL Material, Amount sacks or pounds

How was seal placed: Method A B C D E

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

(6) CASING/LINER:

Table with columns: Diameter, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Table with columns: Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water Depth Artesian Flow Found Was a water analysis done? Did any strata contain water not suitable for intended use? Salty Muddy Odor Colored Other Depth of strata

(9) LOCATION OF WELL by legal description:

County Latitude Longitude Township N or S, Range E or W, WM. Section M W Tax Lot Lot Block Subdivision Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:

a. below land surface. Date Artesian pressure b. per square inch. Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Table with columns: Material, From, To, SWL

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Date started Completed

(unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief. Signed Date WWC Number

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above, all work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief. Signed Date WWC Number

DESC 57902

DESC 57902

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

03-06-2007

WELL LABEL # 84019

AMENDED 3.6.07

AMENDED REPORT CARD # 1000329 3.20.07

(1) LAND OWNER Owner Well I.D. Sisters-Well #3

First Name Last Name
Company CITY OF SISTERS
Address 520 EAST CASCADE AVE
City SISTERS State OR Zip 97759

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

(3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other

(4) PROPOSED USE Domestic Irrigation Community Industrial/ Commercial Livestock Dewatering Thermal Injection Other

(5) BORE HOLE CONSTRUCTION Special Standard Attach copy Depth of Completed Well 288.00 ft

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, sacks/lbs

How was seal placed: Method A B C D E
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

Table for (6) CASING/LINER with columns: Casing, Liner, Dia, From, To, Gauge, Slt, Plstc, Wld, Thrd

Shoe Inside Outside Other Location of shoe(s)
Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS Perforations Method Screens Type Cont. Wire Wrap Material 304 SS

Table for (7) PERFORATIONS/SCREENS with columns: Perf/Screen, Casing/Liner, Dia, From, To, Scm/slot width, Slot length, # of slots, Tele/pipe size

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

Table for (8) WELL TESTS with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr)

Temperature 54 F Lab analysis Yes By
Water quality concerns? Yes (describe below) Description
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(9) LOCATION OF WELL (legal description)

County Deschutes Twp 10.00 S N/S Range 10.00 E E/W WM
Sec 4 SE 1/4 of the NW 1/4 Tax Lot 103
Tax Map Number Lot
Lat 0 or DMS or DD
Long 0 or DMS or DD
Street address of well Nearest address

NE LOT ABOUT 350 FT WEST OF CAMP POLK RD AT INTERSECTION WITH BARCLAY

(10) STATIC WATER LEVEL Date SWL(psi) SWL(ft)

Table for (10) STATIC WATER LEVEL with columns: Existing Well / Predeepening, Completed Well, Date, SWL(psi), SWL(ft)

WATER BEARING ZONES: Depth water was first found

Table for WATER BEARING ZONES with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft)

(11) WELL LOG Ground Elevation

Table for (11) WELL LOG with columns: Material, From, To

Date Started 11-27-2006 Completed 02-02-2007

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 1702 Date 03-06-2007
Electronically Filed
Signed RUSTY ROTTO (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1523 Date 03-06-2007
Electronically Filed
Signed ROBERT STADELI (E-filed)
Contact Info (optional)

13840

AMENDED
DESC 57902

AMENDED DESC 57902

3-6-07

03-06-2007

WELL I.D. # L 84019

Page 3 of 3

START CARD # 1000329

WATER SUPPLY WELL REPORT -
continuation page

Map of well



Oregon

Theodore R. Kulongoski, Governor

January 17, 2007

GEO TECH EXPLORATIONS
ROBERT STADELI #1523
19700 SW TETON
TUALATIN OR 97062

Water Resources Department
North Mall Office Building
725 Summer Street NE, Suite A
Salem, OR 97301-1266
503-986-0900
FAX 503-986-0904

JAN 19 2007

FINAL ORDER

Dear Robert:

The Special Standard request you submitted for owner: City of Sisters, Start Card number 1000329 is hereby approved for the following: You may use 3/4-inch unhydrated bentonite chips in this well from a depth of 155 ft bgs to 170 ft bgs due to a lost circulation zone. The sealing material from 155 ft bgs to land surface shall be cement grout. The placement of the bentonite shall conform to the Departments rules and the manufacturers specifications and result in a seal that is free of voids or bridges. Care shall be taken to minimize the introduction of bentonite dust (See OAR 690-210-0330). All other standards must be adhered to. Your Special Standard request form is enclosed.

The Well Construction Standards serve to protect ground water resources. By approving and issuing this special construction standard the Oregon Water Resources Department is not representing that a well constructed in accordance with this condition will maintain structural integrity or that it meets engineering standards. The well constructor/or landowner is responsible for ensuring that a well is constructed in a manner that protects ground water resources as required under Oregon Administrative Rules 690-200 through 690-240.

If you have any questions concerning this letter, I may be contacted at: (503) 986-0851, or by e-mail at Kristopher.R.Byrd@wrdd.state.or.us.

Sincerely,

Kristopher Byrd
Well Construction Program Coordinator
Enforcement Section

cc: Larry Carey, SC Region Well Inspector
File.

This is a final order in other than 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 either 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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WATER RESOURCES DEPT
SALEM, OREGON

13840

WATER SUPPLY WELL REPORT -

continuation page

AMENDED ESC 57902

3-20-07 DESC 57902

WELL I.D. # L 84019

AMENDED 03-06-2007

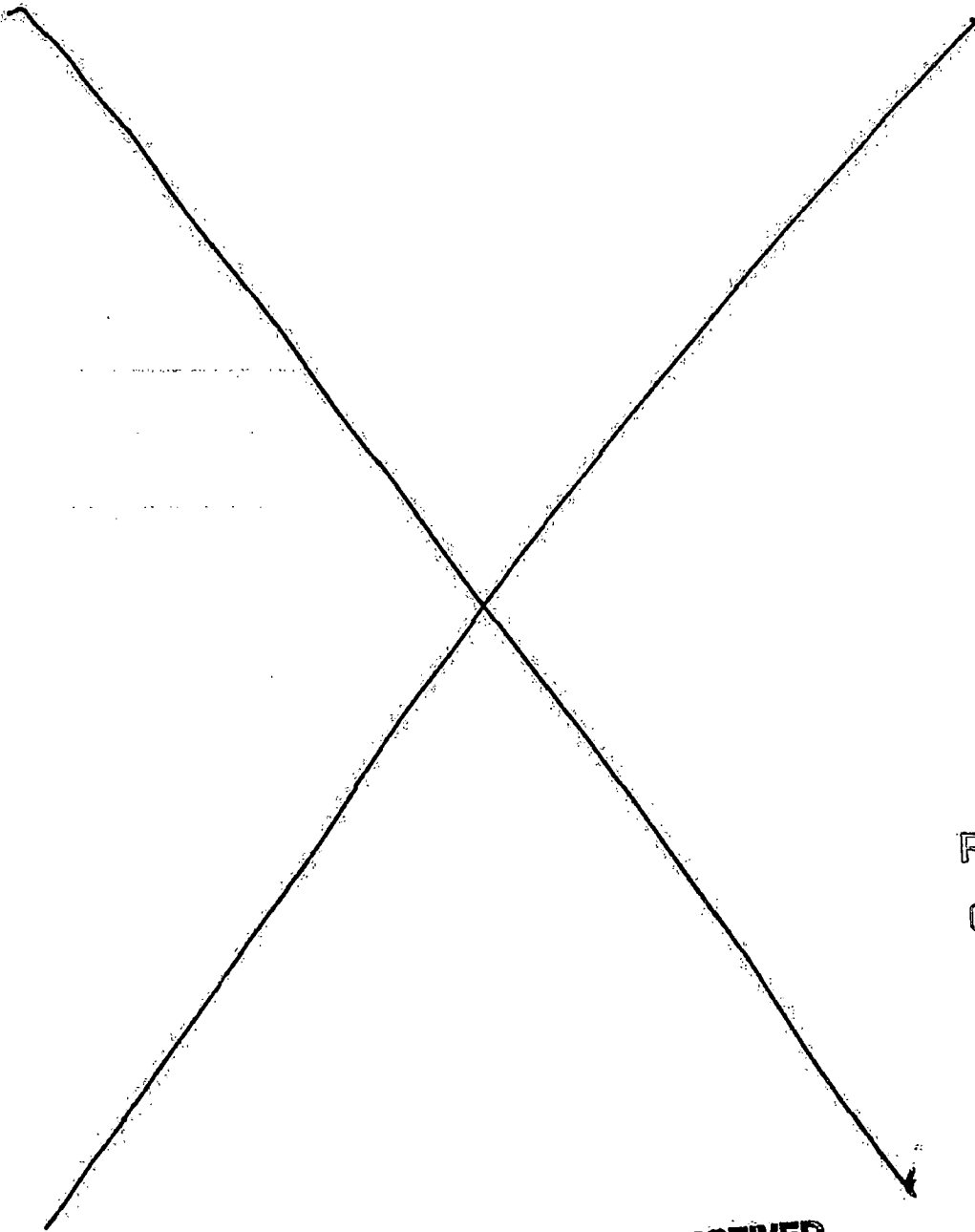
3-6-07

START CARD # 1000329

Page 4 of 4

Map of well

only 3 pages



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MAR 28 2007

WATER RESOURCES DEPT
SALEM, OREGON

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

DESC 62447

WELL I.D. LABEL# L 138648
START CARD # 1049398
ORIGINAL LOG #

1/20/2021

(1) LAND OWNER Owner Well I.D.
First Name Last Name
Company CITY OF SISTERS
Address PO BOX 39 525 E. CASCADE AVENUE
City SISTERS State OR Zip 97759

(2) TYPE OF WORK [X] New Well [] Deepening [] Conversion
[] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: [] [] [] [] [] [] [] []
Material From To Amt sacks/lbs
Seal: [] [] [] [] [] [] [] []

(3) DRILL METHOD
[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE [] Domestic [] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [X] Other MUNICIPAL

(5) BORE HOLE CONSTRUCTION Special Standard [X] (Attach copy)
Depth of Completed Well 293.00 ft.
BORE HOLE SEAL sacks/ lbs
Dia From To Material From To Amt lbs
22 0 200 Bentonite Chips 0 115 381 S
15 200 293 Calculated 211.65
Cement with 5% Bento 115 137 53 S
Calculated 14.5

How was seal placed: Method [] A [] B [X] C [] D [] E
[X] Other POURED DRY
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
[] [] [] [] [] [] [] [] [] []
[] [] [] [] [] [] [] [] [] []
Shoe [] Inside [] Outside [] Other Location of shoe(s)
Temp casing [X] Yes Dia 20 From + 0 To 200

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type CONTINUOUS WIRE Material 304 SS
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size
Screen Liner 12 190 290 .125

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [X] Bailer [] Air [] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
1970 13 160 24
Temperature 54 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount 112 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County DESCHUTES Twp 15.00 S N/S Range 10.00 E E/W WM
Sec 9 SW 1/4 of the NE 1/4 Tax Lot 401
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [] Nearest address
504 S LOCUST ST CREEKSIDE CAMPGROUND WELL#4

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 1/19/2021 76.8
Flowing Artesian? [] Dry Hole? []
WATER BEARING ZONES Depth water was first found 102.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
10/14/2020 102 165 100 57
10/19/2020 165 177 50 82
1/11/2021 201 280 1970 76.5

(11) WELL LOG Ground Elevation
Material From To
SANDY PUMICE AND GRAVEL 0 3
GRAY AND BROWN LAVA 3 45
RED CINDERS 45 50
GRAVELS W/BROWN SAND 50 65
SANDSTONE CONGLOMERATE 65 72
GRAY MILD LAVA 72 93
DARK BROWN SANDSTONE 93 102
GRAVELS AND SAND W/BASALT CHIPS 102 127
CEMENTED GRAVELS 127 141
FRACTURED BASALT W/CINDER 141 148
GRAY BASALT 148 165
BROKEN BASALT W/CLAY SEAMS 165 177
HARD GRAY BASALT 177 201
BROWN AND GRAY BROKEN LAVA 201 206
FRACTURED BROWN BASALT 206 233
GRAY WEATHERED BASALT 233 245
BROWN BROKEN BASALT 245 259
GRAY BASALT SOME FRACTURED 259 276
BROKEN BASALT 276 280
Date Started 10/12/2020 Completed 1/19/2021

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
License Number 1852 Date 1/19/2021
Signed JEB ABBAS (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 1720 Date 1/20/2021
Signed JACK ABBAS (E-filed) 13840
Contact Info (optional) JACK ABBAS

WATER SUPPLY WELL REPORT - continuation page

DESC 62447

WELL I.D. LABEL# L	138648
START CARD #	1049398
ORIGINAL LOG #	

1/20/2021

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

Material	From	To	Amt	sacks/lbs

(5) BORE HOLE CONSTRUCTION

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amt	sacks/lbs
			Bentonite Chips	137	142	9	S
					Calculated	5.8	
			Cement with 5% Bently	142	159	22	S
					Calculated	14	
			Bentonite Chips	159	169	19	S
					Calculated	18.4	
			Cement with 5% Bently	169	200	239	S
					Calculated	25	

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd

--	--	--	--	--	--	--	--	--

(7) PERFORATIONS/SCREENS

Perf/ Casing/ Screen Screen Liner Dia From To Scrn/slot width Slot length # of slots Tele/ pipe size

--	--	--	--	--	--	--	--	--

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

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

--	--	--	--

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(11) WELL LOG

Material	From	To
HARD GRAY BASALT	280	293

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Comments/Remarks

[Empty box for comments/remarks]



Water Solutions, Inc.

September 30, 2021

Kelly Starnes
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301

Re: Application for Permanent Water Right Transfer for Certificate 93889
City of Sisters

Dear Mr. Starnes:

GSI Water Solutions, Inc. (GSI) is submitting the enclosed permanent water right transfer application on behalf of the City of Sisters (City). Also enclosed is the \$3,680 application fee.

The City is proposing to add two points of appropriation (Well 3 and Well 4) to water right Certificate 93889 and change the place of use to the "City of Sisters service area."

Please contact me at 971-200-8545 if you have any questions regarding this application.

Sincerely,

A handwritten signature in black ink, appearing to read "Trevor Grandy", is written over a horizontal line.

Trevor Grandy
Water Resources Consultant

CC: Paul Bertagna, City of Sisters

Enclosures: Permanent Water Right Transfer Application
Check in the amount of \$3,680

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STATE OF OREGON
 COUNTY OF DESCHUTES
 CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

CITY OF SISTERS
 PO BOX 39
 SISTERS OR 97759

confirms the right to the use of water perfected under the terms of Permit G-11418. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the point of diversion from the source. The specific limits and conditions of the use are listed below.

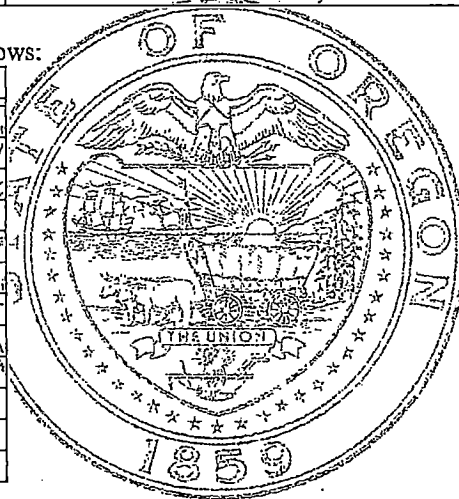
APPLICATION FILE NUMBER: G-12591
 SOURCE OF WATER: WELL 2 IN WHYCHUS BASIN
 PURPOSE OR USE: MUNICIPAL USES
 MAXIMUM RATE: 1.56 CUBIC FEET PER SECOND
 DATE OF PRIORITY: JUNE 25, 1991

The well is located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
15 S	10 E	WM	5	SW SW	WELL 2 - 1280 FEET NORTH AND 1175 FEET EAST FROM SW CORNER, SECTION 5

A description of the place of use is as follows:

Twp	Rng	Mer	Sec	Q-Q
15 S	10 E	WM	4	SW NE
15 S	10 E	WM	4	SE NW
15 S	10 E	WM	4	NE SW
15 S	10 E	WM	4	NW SW
15 S	10 E	WM	4	SW SW
15 S	10 E	WM	4	SE SW
15 S	10 E	WM	4	NE SE
15 S	10 E	WM	4	NW SE
15 S	10 E	WM	4	SW SE
15 S	10 E	WM	4	SE SE
15 S	10 E	WM	5	NE SW
15 S	10 E	WM	5	SE SW



NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484 and ORS 536.075. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 183.484, ORS 536.075 and OAR 137-004-0080, you may petition for judicial review and 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. In addition, under ORS 537.260 any person with an application, permit or water right certificate subsequent in priority may jointly or severally contest the issuance of the certificate within three months after issuance of the certificate.

Twp	Rng	Mer	Sec	Q-Q
15 S	10 E	WM	5	NE SE
15 S	10 E	WM	5	NW SE
15 S	10 E	WM	5	SW SE
15 S	10 E	WM	5	SE SE
15 S	10 E	WM	8	SE NE
15 S	10 E	WM	8	NE NW
15 S	10 E	WM	8	NW NW
15 S	10 E	WM	9	NW NE
15 S	10 E	WM	9	SW NE
15 S	10 E	WM	9	SE NE
15 S	10 E	WM	9	NE NW
15 S	10 E	WM	9	NW NW
15 S	10 E	WM	9	SW NW
15 S	10 E	WM	9	SE NW
15 S	10 E	WM	9	NW SW

The City shall monitor and report the impact of water use under this right on water levels within the aquifer that provides water to the well under this right in accordance with the plan on file with the Department. If any well listed on this right displays a total static water-level decline of 25 or more feet over any period of years, as compared to the reference level, then the City shall discontinue use of, or reduce the rate or volume of withdrawal from, the well. Such action shall be taken until the water level recovers to above the 25-foot decline level or until the Department determines, based on the City or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The City shall in no instance allow excessive decline to occur within the aquifer as a result of use under this right.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this right, then use of water from the well shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well shall be maintained in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine the water level elevation in the well at all times.

When required by the Department, the water user shall install and maintain a weir, meter, or other suitable measuring device, and shall keep a complete record of the amount of ground water withdrawn.

The Director may require water level or pump test results every ten years.

Failure to comply with any of the provisions of this right may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the right.

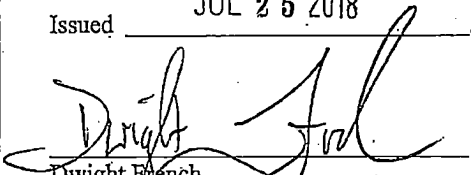
This right is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The right to the use of the water for the above purpose is restricted to beneficial use on the lands or place of use described; however, water may be applied to lands which are not specifically described above, provided the holder of this right complies with ORS 540.510.

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



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