

# Watermaster Review Form: Water Right Transfer



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

Transfer Application: T- 14020

Review Due Date: \_\_\_\_\_

Applicant Name: Silver Sage Farms LLC

Proposed Changes:  POU  POD  POA  USE  OTHER

Reviewer(s): Dally Swindlehurst

Date of Review: 10/17/22

1. Do you have evidence that the right has not been used in the last 5 years and that the presumption of forfeiture would not likely be rebuttable?  Yes  No If "Yes", attach evidence (e.g. dated aerial photo showing pavement or building on the land for >5 yrs.)
2. Is there a history of regulation on the source that serves this (or these) right(s) that has involved the transferred right(s) and downstream water rights?  Yes  No  
Generally characterize the frequency of any regulation or explain why regulation has not occurred: \_\_\_\_\_
3. Have headgate notices been issued for the source that serves the transferred right(s)?  
 Yes  No  Records not available.
4. In your estimation, after the proposed change, would distribution of water for the right(s) result in regulation of other water rights that would not have occurred if use under the original right(s) was/were maximized?  Yes  No If "Yes", explain: \_\_\_\_\_
5. In your estimation, if the proposed change is approved, are there upstream water rights that would be affected?  Yes  No If "Yes", describe how the rights would be affected and list the rights most affected: \_\_\_\_\_
6. Check here  if it appears that downstream water rights benefit from return flows resulting from the current use of the transferred right(s)? If you check the box, generally characterize the locations where the return flows likely occur and list the water rights that benefit most: \_\_\_\_\_.  N/A
7. For POD changes and instream transfers, check here  if there are channel losses between the old and new PODs or within the proposed instream reach? If you check the box, describe and, if possible, estimate the losses: \_\_\_\_\_.  N/A
8. For instream transfers that propose protection of a reach beyond the mouth of the source stream:  N/A Would the quantity be measureable into the receiving stream consistent with OAR 690-077-0015(8)?  Yes  No

9. For POU changes:  N/A Is it likely the original place of use would continue to receive water from the same source?  Yes  No If "Yes", explain: \_\_\_\_\_
10. For POU or USE changes:  N/A In your best judgment, would use of the existing right at "full face value," result in the diversion of more water than can be used beneficially and without waste?  Yes  No If "Yes", explain: \_\_\_\_\_
11. For POU changes that involve micro-irrigation:  N/A
- a. Has the applicant made changes (absent a transfer) to convert to micro-irrigation within the current place of use boundary of the water right proposed for transfer, and previously demonstrated to the Department through monitoring and site inspections by the Watermaster that the proposed transfer will not result in injury or enlargement?  Yes  No If "Yes", explain: \_\_\_\_\_
  - b. Has a temporary transfer of this nature been previously filed and approved on the same lands (or portions thereof) as those lands involved in this transfer?  Yes  No If "Yes", answer the following:
    - i. Were there any problems with more acres being irrigated (or wetted) than were authorized under the temporary transfer?  Yes  No  
If "Yes", explain: \_\_\_\_\_
    - ii. Did the designated areas that were to remain dry (or not wetted) under the temporary transfer actually remain dry?  Yes  No  
If "No", explain: \_\_\_\_\_
    - iii. Did the applicant comply with and meet all of the conditions of the temporary transfer?  Yes  No If "No", explain: \_\_\_\_\_
    - iv. Do you have any other observations regarding the temporary transfer?  Yes  No If "Yes", describe: \_\_\_\_\_
    - v. Did the applicant demonstrate to the Department through monitoring and site inspections by the Watermaster that neither injury nor enlargement occurred as a result of the temporary transfer?  Yes  No  
If "No", explain: \_\_\_\_\_
  - c. To the best of your knowledge, if this transfer is approved, does it appear that:
    - i. "Injury" will occur to other water rights that share the same source?  Yes  No If "Yes", explain: \_\_\_\_\_
    - ii. "Enlargement" of the water right being transferred will occur?  Yes  No If "Yes", explain: \_\_\_\_\_
12. Are there other issues not identified through the above questions that should be considered in determining whether the change "can be effected without injury to other rights"?  Yes  No If "Yes", explain: \_\_\_\_\_

13. What alternatives may be available for addressing any issues identified above: \_\_\_\_\_

14. Do conditions need to be included in the transfer order to avoid enlargement of the right or injury to other rights?  No  Yes, as checked and provided below:

For POU changes that involve micro-irrigation, provide the monitoring and reporting conditions necessary to prevent injury/enlargement: \_\_\_\_\_

A Headgate should be required prior to diverting water.

Measurement Devices for POD or POA: (if this condition is selected, also fill in the top sections of Page 4)

**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/appropriation (new and existing)

**OR**  at each new point of diversion/appropriation

with the exception that water rights issued to the Bureau of Reclamation or an irrigation district (or similar entity) are not subject to this condition.

**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.**

Reservoir water use measurement: (if this condition is selected, also fill in the top sections of Page 4)

**a. Before water use may begin under this order, the water user shall install staff gages\***, or, with prior approval of the Director, other suitable measuring devices, that measure the entire range and stage between empty and full in each reservoir. Staff gages shall be United States Geological Survey style.

**b. Before water use may begin under this order, if the reservoir is located in channel, weirs or other suitable measuring devices must be installed upstream and downstream of the reservoir, and, an adjustable outlet valve must be installed. The water user shall maintain such devices in good working order. A written waiver may be obtained, if in the judgment of the Director, the installation of weirs or other suitable measuring devices, or the adjustable outlet valve, will provide no public benefit.**

\* The following alternative device(s) should be substituted for the bold, underlined device in the above selected condition:

Weir

Submerged Orifice

Parshall Flume

Flow Restrictor

Other: \_\_\_\_\_

**Oregon Water Resources Department**

**Measurement Condition Information for the Applicant**

*(To be sent with the Draft Preliminary Determination or Final Order)*

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In order to avoid enlargement of the right or injury to other rights, a TFM 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: Dally Swindlehurst

District: 10

Address: 450 N Buena Vista

City/State/Zip: Burns OR 97720

Phone: 541-573-2591

Email: donald.s.swindlehurst@water.oregon.gov

**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-         

*(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