

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. **RECEIVED**

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: 60741 (Attachment 1)**
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 2)**
- Completed Evidence of Use Affidavit and supporting documentation. **(Attachment 3)**
- 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 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 4)**
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. **(Attachment 5)**
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

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

Other/Explanation _____

Staff: _____ 503- _____ 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 T&K Sester Family, LLC; ATTN: Ted Sester			PHONE NO. 503-351-8954	ADDITIONAL CONTACT NO.
ADDRESS 24200 SE Highway 212				FAX NO.
CITY Damascus	STATE OR	ZIP 97089	E-MAIL ted@sesterfarms.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.				

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

AGENT/BUSINESS NAME Summit Water Resources, LLC; ATTN: Ted Ressler			PHONE NO. 503-967-7050 x204	ADDITIONAL CONTACT NO.
ADDRESS 4784 SE 17th Avenue, Suite 111				FAX NO.
CITY Portland	STATE OR	ZIP 97202	E-MAIL tressler@summitwr.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 requesting to add 3 additional wells to the water right to provide redundancy for supply and operational flexibility for irrigation of the associated lands.
 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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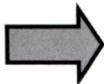
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By my signature below, I confirm that I understand:

- 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 Gresham Outlook.
- 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.



Ted Sester / president
Applicant signature

Ted Sester
Print Name (and Title if applicable)

7/3/2023
Date

Applicant signature

Print Name (and Title if applicable)

Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No*

**If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.*

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.

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At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see: https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

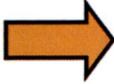
RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	
Describe any special ownership circumstances:				
The confirming Certificate shall be issued in the name of: <input type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner				

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	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	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 Multnomah County land Use Planning Division	ADDRESS 1600 SE 190th Avenue	
CITY Portland	STATE OR	ZIP 97233

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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February 21, 2024

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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 # **60741****Description of Water Delivery System**System capacity: _____ cubic feet per second (cfs) **OR****180** gallons per minute (gpm)

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. **Groundwater is pumped from the well using a submersible pump and conveyed to a system bulge, from which the water is pump and applied for irrigation using sprinklers.**

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)
Moller Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MULT 2519 (NO TAG)	1	S	4	E	15	NW	SW	301	1,350 feet North and 540 feet East from the SW corner of Section 15
Moller Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT CONSTRUCTED	1	S	4	E	15	SW	SW	500	70 feet North and 65 feet East from the SW corner of Section 15
Sester Farms Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MULT 3476 (NO TAG)	1	S	4	E	16	NW	SE	300	1,070 ft South and 50 ft East from the center of Section 16
Sester Farms Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MULT 67819 (L-52963)	1	S	4	E	16	SE	SE	300	2,285 ft South and 1,450 ft East from center of Section 16

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

- | | |
|--|--|
| <input 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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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 # 60741

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Description of Water Delivery System

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System capacity: _____ cubic feet per second (cfs) **OR**
180 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. Groundwater is pumped from the well using a submersible pump and conveyed to a system bulge, from which the water is pump and applied for irrigation using sprinklers.

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Moller Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT CONSTRUCTED	1	S	4	E	15	SW	SW	500	70 feet North and 65 feet East from the SW corner of Section 15
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Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

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

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

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

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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.

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180 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. Groundwater is pumped from the well using a submersible pump and conveyed to a system bulge, from which the water is pump and applied for irrigation using sprinklers.

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.)

Table with 10 columns: 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, 1/4 1/4, Tax Lot, DLC or Gov't Lot, Measured Distances (from a recognized survey corner). Rows include Moeller Well 1, Moeller Well 2, Sester Farms Well 1, and Sester Farms Well 3.

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

- Place of Use (POU)
Character of Use (USE)
Point of Diversion (POD)
Additional Point of Diversion (APOD)
Surface Water POD to Ground Water POA (SW/GW)
Supplemental Use to Primary Use (S to P)
Point of Appropriation/Well (POA)
Additional Point of Appropriation (APOA)
Substitution (SUB)
Government Action POD (GOV)

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 60741

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.															
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date					
EXAMPLE																											
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901	
														2	S	9	E	2	SW	NW	500		5.0		POD #6	1901	
1	S	4	E	15	SW	SW	400 500 600	--	32.9	IR	Moller Well 1	9/17/1980	APOA	1	S	4	E	15	SW	SW	400 500 600	--	32.9	IR	Moller Well 1, Moller Well 2, Sester Farms Well 1, Sester Farms Well 3	9/17/1980	
							TOTAL ACRES:	32.9													TOTAL ACRES:	32.9					

Additional remarks: This transfer proposes changes only to a 32.9-acre portion of the certificate. No changes are proposed for the remaining 46.5-acre portion.

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Please use and attach additional pages of Table 2 as needed. Do you have questions about how to fill-out the tables?
See page 6 for instructions. Contact the Department at 503-986-0900 and ask for Transfer Staff.

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

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.												Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.													
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
														2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
1	S	4	E	15	SW	SW	400 500 600	--	32.9	IR	Moeller Well 1	9/17/1980	APOA	1	S	4	E	15	SW	SW	400 500 600	--	32.9	IR	Moeller Well 1, Sester Farms Well 1, Sester Farms Well 3	9/17/1980
TOTAL ACRES:								32.9						TOTAL ACRES:								32.9				

Additional remarks: This transfer proposes changes only to a 32.9-acre portion of the certificate. No changes are proposed for the remaining 46.5-acre portion.

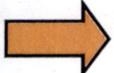
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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: _____.

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

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

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department's web page at:

http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-_____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
Moller Well 2	No	N/A	520 ft (est)	10 in (est)	0-350 (est)	0-350 (est)	350-520 (est)	405 (est)	Troutdale (est)	

Well logs for existing constructed wells provided in Attachment 5.

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For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: _____.



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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department's web page at:

http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-_____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
Moeller Well 2	No	N/A	520 ft (est)	10 in (est)	0-350 (est)	0-350 (est)	350-520 (est)	405 (est)	Troutdale (est)	

Well logs for existing constructed wells provided in Attachment 5.

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Attachment 1
Water Right Information

14278

STATE OF OREGON
COUNTY OF MULTNOMAH
CERTIFICATE OF WATER RIGHT

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THIS CERTIFICATE ISSUED TO

GARY MELVIN MOLLER
34519 SE LUSTED
GRESHAM, OREGON 97030

confirms the right to use the waters of A WELL in the SANDY RIVER BASIN for the purpose of IRRIGATING 79.4 ACRES.

The right has been perfected under Permit G-9005. The date of priority is SEPTEMBER 17, 1980. The right is limited to not more than 0.4 CUBIC FOOT PER SECOND or its equivalent in case of rotation, measured at the well.

The well is located as follows:

NW 1/4 SW 1/4, SECTION 15, T 1 S, R 4 E, W.M.; 1350 FEET NORTH AND 540 FEET EAST FROM SW CORNER SECTION 15.

The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated and shall be further limited to a diversion of not to exceed 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year.

The right shall conform to such reasonable rotation system as may be ordered by the proper state officer.

A description of the place of use under the right, and to which such right is appurtenant, is as follows:

NE 1/4 SW 1/4 19.9 ACRES
NW 1/4 SW 1/4 26.6 ACRES
SW 1/4 SW 1/4 32.9 ACRES
SECTION 15
TOWNSHIP 1 SOUTH, RANGE 4 EAST, W.M.

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.

WITNESS the signature of the Water Resources Director, affixed this date APRIL 14, 1989.

/s/ WILLIAM H. YOUNG

Water Resources Director

Recorded in State Record of Water Right Certificates numbered 60741

G-9940.DM

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Attachment 2
Transfer Application Map

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Attachment 3
Evidence of Use Affidavit

14278

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 MULTNOMAH)

I, TED SESTER, in my capacity as PRODUCTION MANAGER, SESTER FARMS, INC.,
 mailing address 33205 SE OXBOW DR, GRESHAM, OR 97080
 telephone number (503)351-8954, being first duly sworn depose and say:



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 OWRD

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)
60741	1	S	4	E	WM	15	SW	SW	--	32.9

OR

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

(continues on reverse side)

14278

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

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

7/3/2023
Date

Signed and sworn to (or affirmed) before me this 3 day of July, 2023.



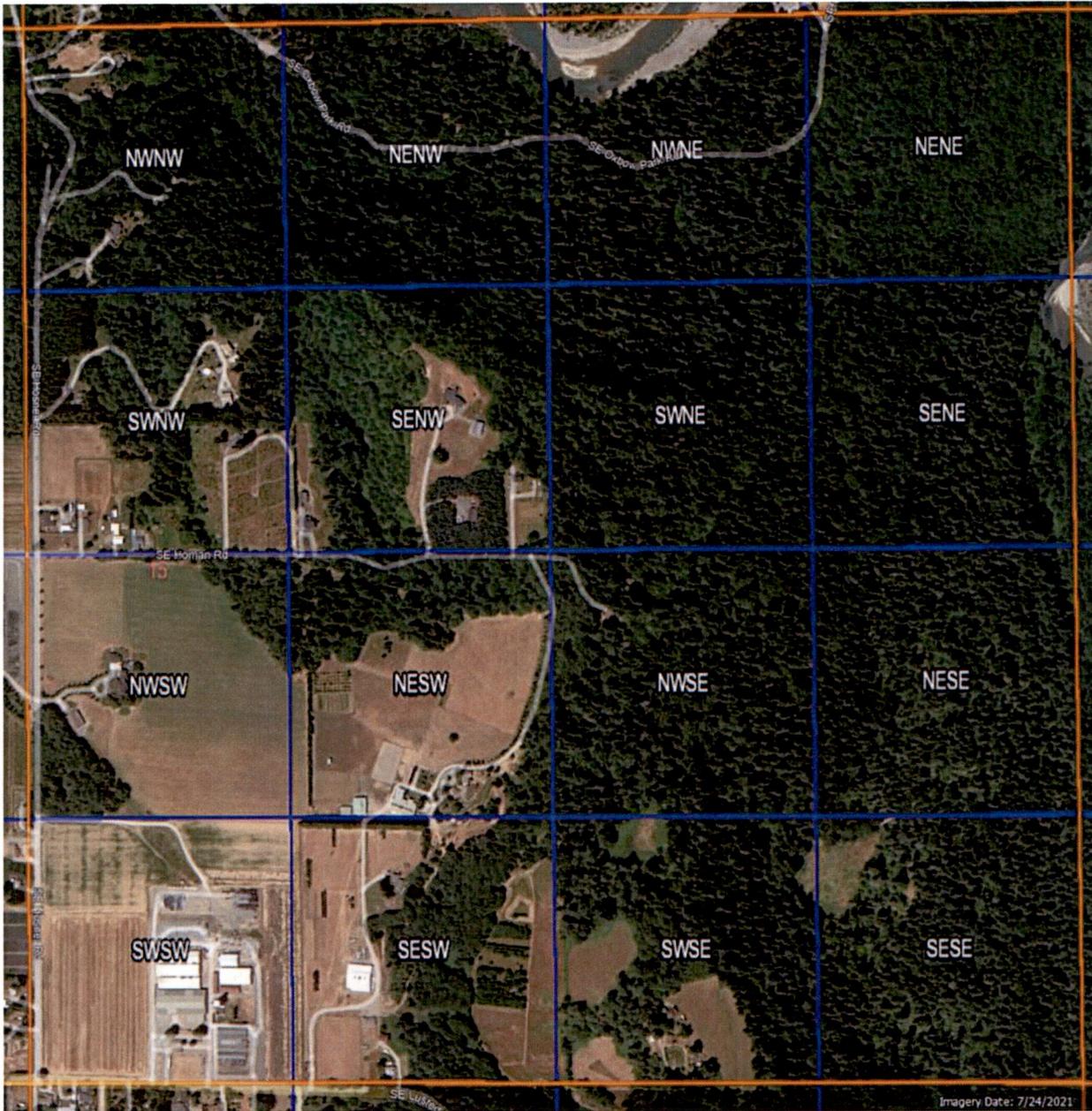
[Signature]
Notary Public for Oregon

My Commission Expires: July, 14 2024

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input checked="" type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<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.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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Township 1 South, Range 4 East, Section 15



Aerial Image Source: GoogleEarth

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Attachment 4
Land Use Information Form

Land Use Information Form



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

NOTE TO APPLICANTS

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

This form is NOT required if:

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

NOTE TO LOCAL GOVERNMENTS

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

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Land Use Information Form

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Applicant(s): T&K Sester Family, LLC; ATTN: Ted Sester

Mailing Address: 24200 SE Highway 212

City: Damascus

State: OR

Zip Code: 97089

Daytime Phone: 503-351-8954

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
<u>1S</u>	<u>4E</u>	<u>15</u>	<u>SWSW</u>	<u>500</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>Irrigation</u>
<u>1S</u>	<u>4E</u>	<u>16</u>	<u>NWSE</u>	<u>300</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>Irrigation</u>
<u>1S</u>	<u>4E</u>	<u>16</u>	<u>SESE</u>	<u>300</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input type="checkbox"/> Used	<u>Irrigation</u>

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

Multnomah

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water
 Water Right Transfer
 Permit Amendment or Ground Water Registration Modification
 Limited Water Use License
 Allocation of Conserved Water
 Exchange of Water

Source of water: Reservoir/Pond
 Ground Water
 Surface Water (name) _____

Estimated quantity of water needed: 0
 cubic feet per second
 gallons per minute
 acre-feet

Intended use of water: Irrigation
 Commercial
 Industrial
 Domestic for _____ household(s)
 Municipal
 Quasi-Municipal
 Instream
 Other _____

Briefly describe:

The applicant is submitting a transfer application requesting to use 3 additional wells to supply water for irrigation under a portion of an existing water right, Certificate 60741. No new authorization for water is associated with this transfer application. Water appropriated under this water right will continue to be used for irrigation on the farm land associated with the referenced water right.



Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): **MCC 39.4220(A)**
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
	RECEIVED	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	JUL 12 2023	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
	OWRD	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Name: Rithy Khut Title: Land Use Planner

Signature:  Digitally signed by Rithy Khut
DN: cn=Rithy Khut, o=Multnomah County, ou=Land Use Planning Division, email=rithy.khut@multco.us, c=US Phone: 503-988-0176 Date: 06/30/2023

Government Entity: Multnomah County - Land Use Planning Division

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

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JUL 12 2023

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Attachment 5
Well Logs

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

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

Should read 15/4E-15 per Kent Barnes phone call, 5/10/80
State Well No. 15/4E-15
State Permit No. **RECEIVED**

RECEIVED
MAY 27 1980
WATER RESOURCES DEPT
SALEM, OREGON
002519

JUL 1 2 2023

(1) OWNER: Name Moller's Nursery Inc.
Address R.T. 2 Box 535
Gresham, Oregon

(10) LOCATION OF WELL: County Mult. Driller's well number OWRD
SW 1/4 SW 1/4 Section 15 T. 1S R. 1E W.M.
Bearing and distance from section or subdivision corner

(2) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(11) WATER LEVEL: Completed well.
Depth at which water was first found 29 ft.
Static level 41.0 ft. below land surface. Date 3/1/80
Artesian pressure _____ lbs. per square inch. Date _____

(3) TYPE OF WELL: Rotary Driven
Cable Jetted
 Bored (4) PROPOSED USE (check):
Domestic Industrial Municipal
Irrigation Test Well Other

(12) WELL LOG: Diameter of well below casing none
Depth drilled 525 ft. Depth of completed well 520 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

(5) CASING INSTALLED: Threaded Welded
1.0" Diam. from 6.3 ft. to 4.10 ft. Gage .250
" Diam. from _____ ft. to _____ ft. Gage _____
8" Diam. from 38.0 ft. to 52.0 ft. Gage .250

MATERIAL	From	To	SWL
red clay	0	13	
brown clay& sand	13	23	
gray clay & sand	23	29	8
gray clay & gravel & boulder	29	36	
brown clay & boulders	36	47	
brown clay & sand	47	54	
cemented gravel	54	79	
brown clay & boulders	79	96	
cemented gravel	96	112	
gray clay & gravel	112	122	
gray clay stone	122	135	
brown clay & gravel	135	186	
brown clay & sand	186	208	
brown clay & gravel	208	232	
brown sandstone	232	286	
brown retten rock	286	297	
cemented gravel	297	315	
brown clay	315	332	105
blue clay & sand	332	337	125

(6) PERFORATIONS: Perforated? Yes No.
Type of perforator used torch
Size of perforations 6 in. by 1/8 in.
400 perforations from 4.10 ft. to 52.0 ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

Work started 10/16 1979 Completed 3/17 1980
Date well drilling machine moved off of well 3/17 1980

(7) SCREENS: Well screen installed? Yes No
Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Nick Smith Date 3/17/80
(Drilling Machine Operator)
Drilling Machine Operator's License No. 882

(8) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No. If yes, by whom? Ted
d: 250 gal./min. with 70 ft. drawdown after 8 hrs.
" 235 " " 60 " " 2 " "
" 250 " " 70 " " 6 " "
Bailer test none gal./min. with _____ ft. drawdown after _____ hrs.
_____ sian flow _____ g.p.m.
temperature of water 59 Depth artesian flow encountered _____ ft.

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name Ted Pulliam Well Drilling
(Person, firm or corporation) (Type or print)
Address 18211 S.E. Powell, Gresham, Ore.
[Signed] Ted W. Pulliam
(Water Well Contractor)
Contractor's License No. 616 Date 3/17 1980

(9) CONSTRUCTION:
Well seal—Material used Cement 4% Bent.
Well sealed from land surface to 360 ft.
Diameter of well bore to bottom of seal 14 - 12 in.
Diameter of well bore below seal 10 in.
Number of sacks of cement used in well seal 79 sacks
How was cement grout placed? Grout Pumped

Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

14278

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

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

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

State Well No. 10/4E-15

State Permit No. _____

RECEIVED

JUL 12 2023

(1) OWNER:

Name Moller's Nursery Inc.
Address R.T. 2 Box 535
Gresham, Oregon

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) CASING INSTALLED:

Threaded Welded

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

(6) PERFORATIONS:

Perforated? Yes No.

Type of perforator used _____

Size of perforations in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is
lowered below static level

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

l:	gal./min. with	ft. drawdown after	hrs.
"	"	"	"
"	"	"	"

Bailer test gal./min. with _____ ft. drawdown after _____ hrs.
sian flow _____ g.p.m.
temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used _____
Well sealed from land surface to _____ ft.
Diameter of well bore to bottom of seal _____ in.
Diameter of well bore below seal _____ in.
Number of sacks of cement used in well seal _____ sacks
How was cement grout placed? _____

Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Mult. Driller's well number OWRD
SW ¼ SW ¼ Section 15 T. 1 S R. 1 E W.M.
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

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

(12) WELL LOG:

Diameter of well below casing _____

Depth drilled _____ ft. Depth of completed well _____ ft.

Formation: Describe color, texture, grain size and structure of materials;
and show thickness and nature of each stratum and aquifer penetrated,
with at least one entry for each change of formation. Report each change in
position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
blue clay & fine sand	337	390	
cemented gravel	390	458	
gray clay & gravel	458	471	
brown clay & gravel	471	495	
blue clay & gravel	495	520	
blue clay	520	525	

MAR 27 1980

WATER RESOURCES DEPT
SALEM, OREGON

Work started _____ 19 Completed _____ 19
Date well drilling machine moved off of well _____ 19

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision.
Materials used and information reported above are true to my
best knowledge and belief.

[Signed] _____ Date _____, 19____
(Drilling Machine Operator)

Drilling Machine Operator's License No. _____

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is
true to the best of my knowledge and belief.

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

Address _____

[Signed] _____ (Water Well Contractor)

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

RECEIVED

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

MAY 24 1993

WATER RESOURCES DEPT.
SALEM, OREGON

Mult
3476

1S/4E/16

(START CARD) # 45258

(1) OWNER:

Name SESTER FARM INC.
Address 33205 SE OXBOW
City GRESHAM State OR Zip 97080

(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 433 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or bags
Diameter	From	To	Material	From	To	
14	0	65	Cement	0	65	43
10	65	284	Cement	244	284	36
8	284	433				

How was seal placed: 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: 10	+1	65	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8	+1	433	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 433

(7) PERFORATIONS/SCREENS:

Perforations Method Air Knife
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
380	430	1-8/21	1400	8		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
300+		400	4hr.

Temperature of Water 52 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Mult Latitude _____ Longitude _____
Township 1S N or S. Range 4E E or W, WM. _____
Section 16 1/4 _____ 1/4 _____
Tax Lot 11 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) same as above
Water Right Permit # G11445

(10) STATIC WATER LEVEL:

199 ft. below land surface. Date 4-20-93
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 20

From	To	Estimated Flow Rate	SWL
20	40	N/A	6
319	433	300+	199

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
top soil	0	6	
sandy clay yellow	6	7	
frac. weathered rock	7	56	6
frac. weathered rock gray	56	87	
frac. rock gray	87	141	
broken rock gray	141	183	
rock gray	183	247	
weathered rock&clay blue	247	319	
cement gravel gray	319	366	↑
cement gravel&sandstone	366	382	

cement gravel gray	382		199
large 3-8" diam., gravel with very little fines		433	↓
Recom. pump set 399' @ 300gpm			

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OWRD

Date started 3-9-93 Completed 4-20-93

(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 Arnon K. Edin WWC Number 1547
Date 4-19-93

(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 David Williams WWC Number 616
Date 4-19-93

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MULT 67819

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State of Oregon

State Well ID L52963
Start Card # 140108

WATER WELL REPORT (as required by ORS 537.765)

Page 1 of 1

WATER RESOURCES DEPT.
SALEM, OREGON

OWRD

(1) OWNER: Well No. L52963
 Name SESTER FARM INC.
 Address 33205 SE OXBOW
 City GRESHAM St OR Zip 97080

(2) TYPE OF WORK: NEW WELL

(3) DRILL METHOD: ROTARY AIR

(4) PROPOSED USE: IRRIGATION

(5) BORE HOLE CONSTRUCTION:
 Special Construction Approval NO _____ Depth of Compl. Well 470 ft
 Explosives used NO _____ Type _____ Amount _____
 HOLE SEAL

Diam.	From	To	Material	From	To	Amount
14	0	100	CEMENT	0	100	64 SACKS
12	100	280	CEMENT	200	280	36 SACKS
10	280	470				

Seal placement method C&SET PLUG&PUSH
 Backfill: from _____ ft to _____ ft Material _____
 Gravel: from _____ ft to _____ ft Size _____

(6) CASING/LINER:

Casing	Diam.	From	To	Gauge	Material	Connection
	10	+1	280	.250	STEEL	WELDED
	8	0	470	.250	STEEL	WELDED

Liner _____
 Final Location of shoe(s) 280' 9.5"/470' 7.5" TUBEX

(7) PERFORATIONS/SCREENS:
 Perf. Method AIR KNIFE
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diam.	Tele/pipe Size	Casing/liner
340	460	1/8X2	1800			CASING

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

Yield GPM	Draw-down	Drill stem at	Time
160	110		1 hr.
160	110		24 hr

 Temperature of water 51F Depth Artesian Flow Found _____
 Was water analysis done? NO By whom _____
 Reason for water not suitable for use _____
 Depth of strata _____

(9) LOCATION OF WELL by legal description:
 County MULT Lat. ° ' " Long. ° ' "
 Township 1 S Range 4 E WM.
 Section 16 SE 1/4 SE 1/4
 Tax Lot 300 Lot Block Subdivision
 Street Address of Well (or nearest Address)
 NEAREST TO 33605 LUSTED RD GRESHAM, OR

(10) STATIC WATER LEVEL:
 330 ft. below land surface. Date 09/14/02
 Artesian pressure _____ lb per square in. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 340

From	To	Est Flow Rate	SWL
340	470	160 GPM	330

(12) WELL LOG:

Material	From	To	SWL
TOP SOIL	0	2	
RED CLAY	2	64	
RED CLAY & GRAVEL	64	71	
CEMENTED GRAVEL & BOULDERS	71	200	
CEMENTED GRAVEL W/SEAMS OF YELLOW CLAY	200	340	
FINE BLACK CEMENT GRAVEL	340	395	330
FINE MULTI COLORED CEMENTED GRAVEL	395	460	330
FINE MULTI COLORED CEMENTED GRAVEL WITH	460		330
YELLOW SAND		470	330

TED PULLIAM WELL DRILLING
 9480 S.E. 172nd
 Boring, Oregon 97009
 Phone 665-3353

Date started 08/27/02 Completed 09/14/02

(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 water supply well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed _____ WWC Number _____
 Date _____

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed *Ted Pulliam* WWC Number 616
 Date 09/28/02

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July 6, 2023

Ms. Lisa Jaramillo
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1271

Subject: Application for a Permanent Water Right Transfer
Certificate 60741

Mr. Jaramillo:

On behalf of the applicant, T&K Sester Family, LLC, please find enclosed an Application for a Permanent Water Right Transfer involving a portion of Certificate 60741 accompanied by a check in the amount of \$2,600 for payment of the application filing fee.

If you have any questions regarding the enclosed application, you can reach me at 503-967-7050 x204. Please copy me on any correspondence regarding this application.

Respectfully submitted,

Theodore Ressler, RG, CWRE
Summit Water Resources, LLC

Cc: Ted Sester – T&K Sester Family, LLC.

Enclosures:

Application for a Permanent Water Right Transfer involving Certificate 60741
Check #21336 in the amount of \$2,600

Ressler, Ted

From: FRENCH Kim R * WRD <Kim.R.FRENCH@water.oregon.gov>
Sent: Monday, July 17, 2023 10:45 AM
To: Ressler, Ted
Subject: T&K Sester Family LLC Transfer

Hi Ted,

I was doing the intake for the new transfer application that you sent for T&K Sester Family LLC and the fees are \$60 short. It appears that the calculated fees on the Fee Worksheet in the application didn't carry down correctly. If you look at the sheet, the fees in line 6 (\$2660) carried down to line 8 as \$2600.

I hate to send this entire thing back for \$60, so if you could send a check, I can get this processed and in the queue.

Let me know if that works for you.

Thanks,

Kim French | Water Rights Transfer Specialist

Water Resources Department | 725 Summer St. NE, Suite A | Salem, Oregon 97301

Phone: 503 979-9607 Email: kim.r.french@water.oregon.gov

Integrity | Service | Technical Excellence | Teamwork | Forward-Looking

Life is too short to spend one minute unhappy! Be Happy!

The Salem office re-opened to the public on May 1, 2022. Given that many staff will continue teleworking remotely or have job duties that take them into the field on a regular basis, availability of staff in the office is not guaranteed 8 a.m. - 5 p.m. every day. **Customers and visitors are encouraged to schedule an appointment in advance if they wish to meet in person with specific staff members.** Alternative methods for meeting, such as by phone or virtually via Teams, are also available.

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Permanent Transfer Application Intake Checklist

Checked by <u>Kim French</u> Date <u>7/17/23</u>	Type of Change(s) Proposed: <input type="checkbox"/> POU <input type="checkbox"/> POD <input type="checkbox"/> APOD <input type="checkbox"/> POA <input checked="" type="checkbox"/> APOA <input type="checkbox"/> USE <input type="checkbox"/> Substitution <input type="checkbox"/> Gov't Action <input type="checkbox"/> Sup to Primary <input checked="" type="checkbox"/> SW to GW
Calculated Fee \$2660	Certificate(s): 60741
Fee Received \$2660	Check all Certs in WRIS to make sure they are not cancelled
If application involves multiple certificates, does it meet OAR 690-380-3220? If no, why?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Is the application complete? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If no, why?	
Notes:	

1.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Have all the applicants signed? If not, whose signature is missing?	
2.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Evidence of Use included?	
3.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	Land Use Form included?
4.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	Consent Form included
5.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Part 5 of application: Has the applicant completed the entire page and does the information match the description of the explanation on Part 4 of the application?	
6.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	Has the applicant indicated that the place of use is in <u>or</u> near an irrigation district? Name of the District
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	If Yes, have they included a Form D?
7.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	<i>For multiple certificates:</i> Do each of the certificates listed on the Min Req Checklist Page 1 have their own separate completed Part 5, Tables 1 & 2? If no, which certificates are missing a separate Part 5, Tables 1 & 2?
8.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	If a change in point of appropriation, have the well logs been included?
9.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO		Has the map been completed and signed by a CWRE?
10.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO		Does the map meet the requirements? If not, what is missing?
11.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	Map waiver included?
12.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	If a change in place of use is within Umatilla County, is there a Supplemental Form U included?

If there are no deficiencies identified, accept the application. Put this checklist in the transfer folder. If this application is deficient, it **CANNOT** be accepted. It should be returned with a letter explaining the deficiencies identified.

Application Returned Date: _____

