

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)

- 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: C91239**
 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.
- Completed Evidence of Use Affidavit and supporting documentation.
- N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

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

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

Other/Explanation _____

Staff: _____ 503- _____ Date: 14/09

Part 2 of 5 – Transfer Application Map

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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°).

Part 3 of 5 – Fee Worksheet

| FEE WORKSHEET for PERMANENT TRANSFER (except Substitution) | | | |
|--|---|---|----------------|
| 1 | Base Fee (includes one type of change to one water right for up to 1 cfs) | 1 | \$1,360 |
| 2 | Types of change proposed: <input checked="" type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$1090 and enter » | 2 | \$1,090 |
| 3 | Number of water rights included in transfer <u>1 (3a)</u> Subtract 1 from the number in 3a above: <u>0 (3b)</u> <i>If only one water right this will be 0</i> Multiply line 3b by \$610 and enter » | 3 | \$0 |
| 4 | Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: enter \$480 for the 1 st well to be added or changed <u>\$480 (4a)</u> Do you propose to add or change additional wells? <input checked="" type="checkbox"/> No: enter 0 <input type="checkbox"/> Yes: multiply the number of additional wells by \$410 _____ (4b) Add line 4a to line 4b and enter » | 4 | \$480 |
| 5 | Do you propose to change the place of use or character of use? <input type="checkbox"/> No: enter 0 on line 5 <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see below*): <u>0.89 (5a)</u> Subtract 1.0 from the number in 5a above: <u>-0.11 (5b)</u> If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: <u>0 (5c)</u> and multiply 5c by \$410, then enter on line 5 » | 5 | \$0 |
| 6 | Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal: | 6 | \$2,930 |
| 7 | Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 » | 7 | \$0 |
| 8 | Subtract line 7 from line 6 » Transfer Fee: | 8 | \$2,930 |

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*Example for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:
 1. For irrigation calculate cfs for each water right involved as follows:
 a. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs ÷ 100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac = 0.56 cfs).
 b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
 2. Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land.** The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

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

Part 4 of 5 – Applicant Information and Signature

Applicant Information

| | | | |
|--|--------------------|---------------------|--|
| APPLICANT/BUSINESS NAME Deming Ranch Land & Cattle, LLC | | PHONE NO. | ADDITIONAL CONTACT NO. |
| ADDRESS 2064 Camp Whitney Circle | | | FAX NO. |
| CITY Rocklin | STATE CA | ZIP 95765 | E-MAIL jhicks@fayranches.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 All Points Engineering and Surveying, Inc | | PHONE NO. 541-548-5833 | ADDITIONAL CONTACT NO. 541-420-0401 |
| ADDRESS PO Box 767 | | | FAX NO. |
| CITY Terrebonne | STATE OR | ZIP 97760 | E-MAIL scott@apeands.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:
Change place of use to location better sorted for farming and change well to existing well on applicants property.

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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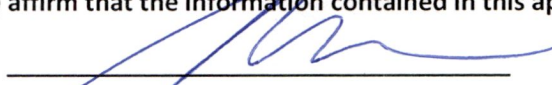
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By my signature below, I confirm that I understand:

- 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: Klamath Falls Herald and News.
- 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 **Steven Morgan, Member** 8/12/23
 Print Name (and Title if applicable) 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.

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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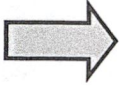
| | | | |
|--|--------------------|---------------------------------|---------------------------------------|
| RECEIVING LANDOWNER NAME <u>Steven Morgan</u> | | PHONE NO. <u>916 2125472</u> | ADDITIONAL CONTACT NO. OWRD |
| ADDRESS <u>796 W. Wise Rd</u> | | FAX NO. | |
| CITY <u>Lincoln</u> | STATE <u>CA</u> | ZIP <u>95648</u> | 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 NA | 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.

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 Klamath County | ADDRESS | |
| CITY | STATE | ZIP |

| | | |
|-------------|---------|-----|
| 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 # 91239

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Description of Water Delivery System

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System capacity: 2.7 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

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

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) |
|------------------------|---|---|-----|---|-----|---|-----|-----|----|---------------------------|--|
| | | | | | | | | | | | |
| #1 | <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed | KLAM 2145 | 36 | S | 14 | E | 25 | SW | NW | 4200 | 1770' S & 90' E from NW cor, Sec 25 |
| #2 | <input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed | KLAM 2142 | 36 | S | 14 | E | 24 | NE | SW | 4500 | 1510' N & 1750' E from SW cor S24 |

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

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

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

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

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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 # 91239

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 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 36 | S | 14 | E | 25 | SE | NW | 4500 | | 0.4 | IS | #1 | 1961 | POU/POA | 36 | S | 14 | E | 25 | SE | NW | 4500 | | 5.9 | IS | #2 | 1961 |
| 36 | S | 14 | E | 25 | NE | SW | 4500 | | 20.6 | IS | #1 | 1961 | POU/POA | 36 | S | 14 | E | 25 | NE | SW | 4500 | | 26.6 | IS | #2 | 1961 |
| 36 | S | 14 | E | 25 | SW | SE | 4500 | | 11.8 | IS | #1 | 1961 | POU/POA | 36 | S | 14 | E | 25 | NE | SE | 4500 | | 15.0 | IS | #2 | 1961 |
| 36 | S | 14 | E | 36 | NW | NE | 4500 | | 38.4 | IS | #1 | 1961 | POU/POA | 36 | S | 14 | E | 25 | NW | SE | 4500 | | 23.7 | IS | #2 | 1961 |
| TOTAL ACRES: | | | | | | | 71.2 | | | | | | | | | | | | | | | | TOTAL ACRES: | 71.2 | | |

Additional remarks: Only transferring part on TL 4500.

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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 |
|---|------------------------------------|---|------------------|-----------------|-------------------------|---------------------------|--|--|---|--|
| See well logs | | | | | | | | | | |

14303

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 KLAMATH)

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I, STEVEN MORGAN, in my capacity as MANAGING MEMBER OF DEMING RANCH, LAND & CATTLE INC.,
 mailing address 2064 CAMP WHITNEY CIRCLE, ROCKLIN, CA 95765
 telephone number (____)____, 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 # 91239; **OR**

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

| Certificate # | Township | Range | Mer | Sec | 1/4 1/4 | Gov't Lot or DLC | Acres (if applicable) |
|---------------|----------|-------|-----|-----|---------|------------------|-----------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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)

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

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

8/4/23
Date

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

*Notarized
Document Attached*

*Notarized
Document Attached*

Notary Public for Oregon

My Commission Expires: _____

| 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 checked="" 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.terra-server.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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CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

- See Attached Document (Notary to cross out lines 1-6 below)
- See Statement Below (Lines 1-6 to be completed only by document signer[s], *not* Notary)

1 _____
 2 _____
 3 _____
 4 _____
 5 _____
 6 _____

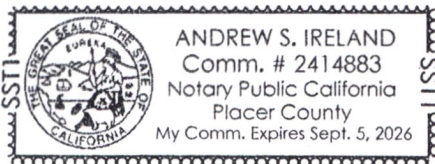
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Signature of Document Signer No. 1 Signature of Document Signer No. 2 (if any)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
 County of Placer

Subscribed and sworn to (or affirmed) before me
 on this 4th day of August, 2023,
 by Steven K. Morgan
 (1) _____
 (and (2) _____),
 Name(s) of Signer(s)



proved to me on the basis of satisfactory evidence
 to be the person(s) who appeared before me.

Signature [Handwritten Signature]
 Signature of Notary Public

Seal
 Place Notary Seal Above

OPTIONAL

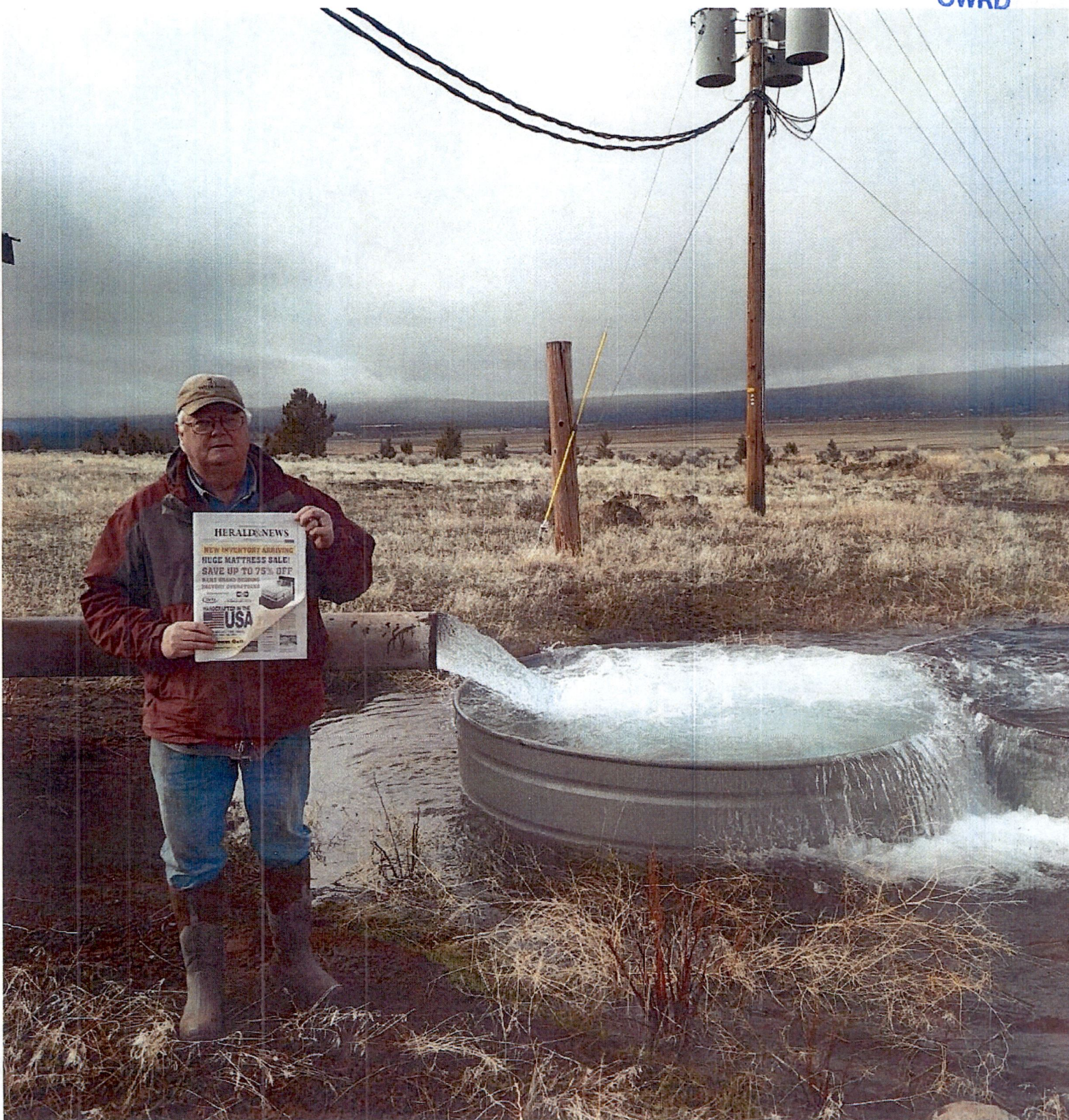
Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document Application for Water Right
 Title or Type of Document: Transfer Evidence of Use Affidavit Document Date: 8/4/23
 Number of Pages: 2 Signer(s) Other Than Named Above: None

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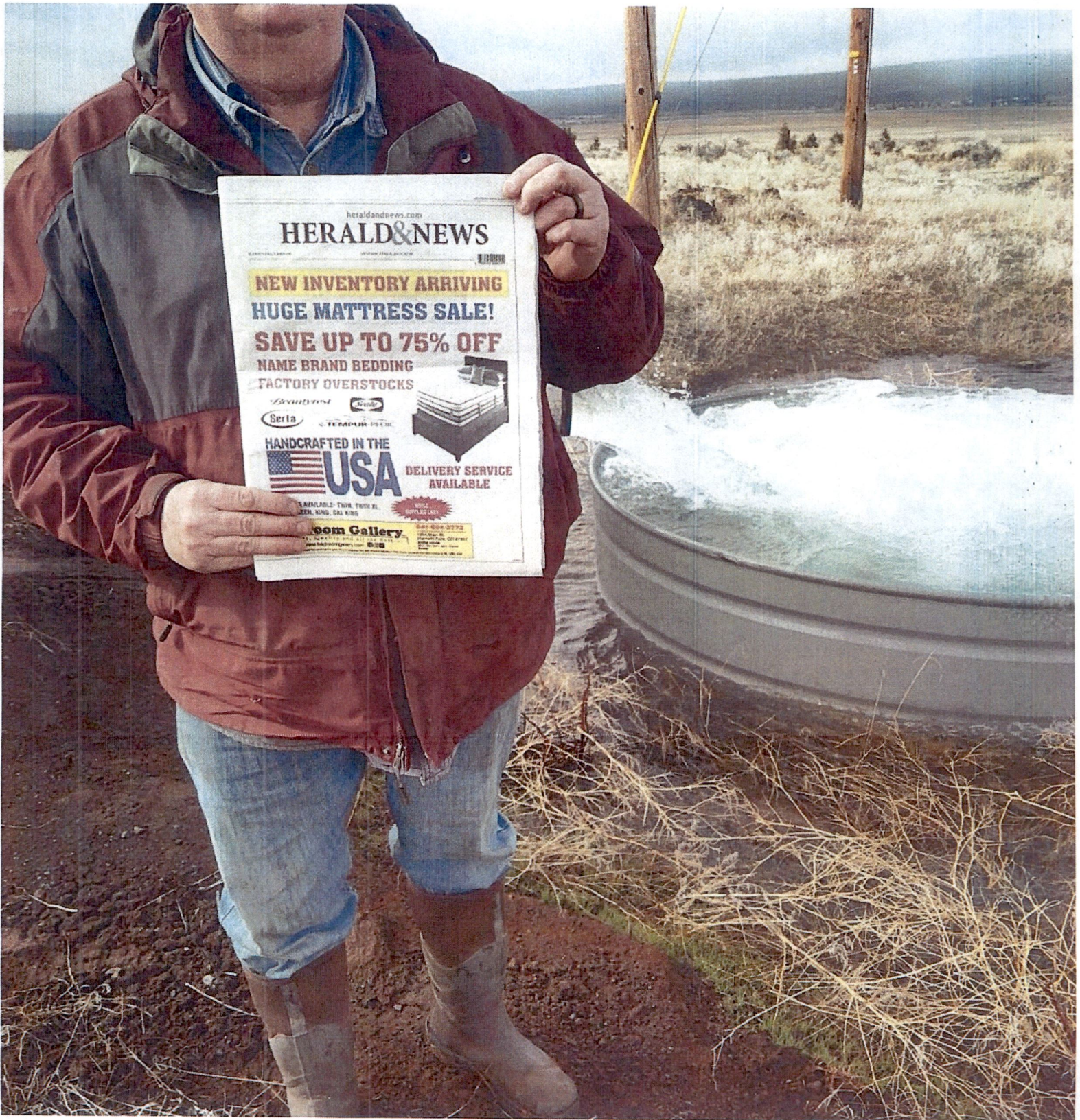
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SATI

heraldandnews.com

HERALD & NEWS

S, OREGON

SATURDAY, APRIL 8, 2023 | \$2.50

NEW INVENTORY ARRIVED

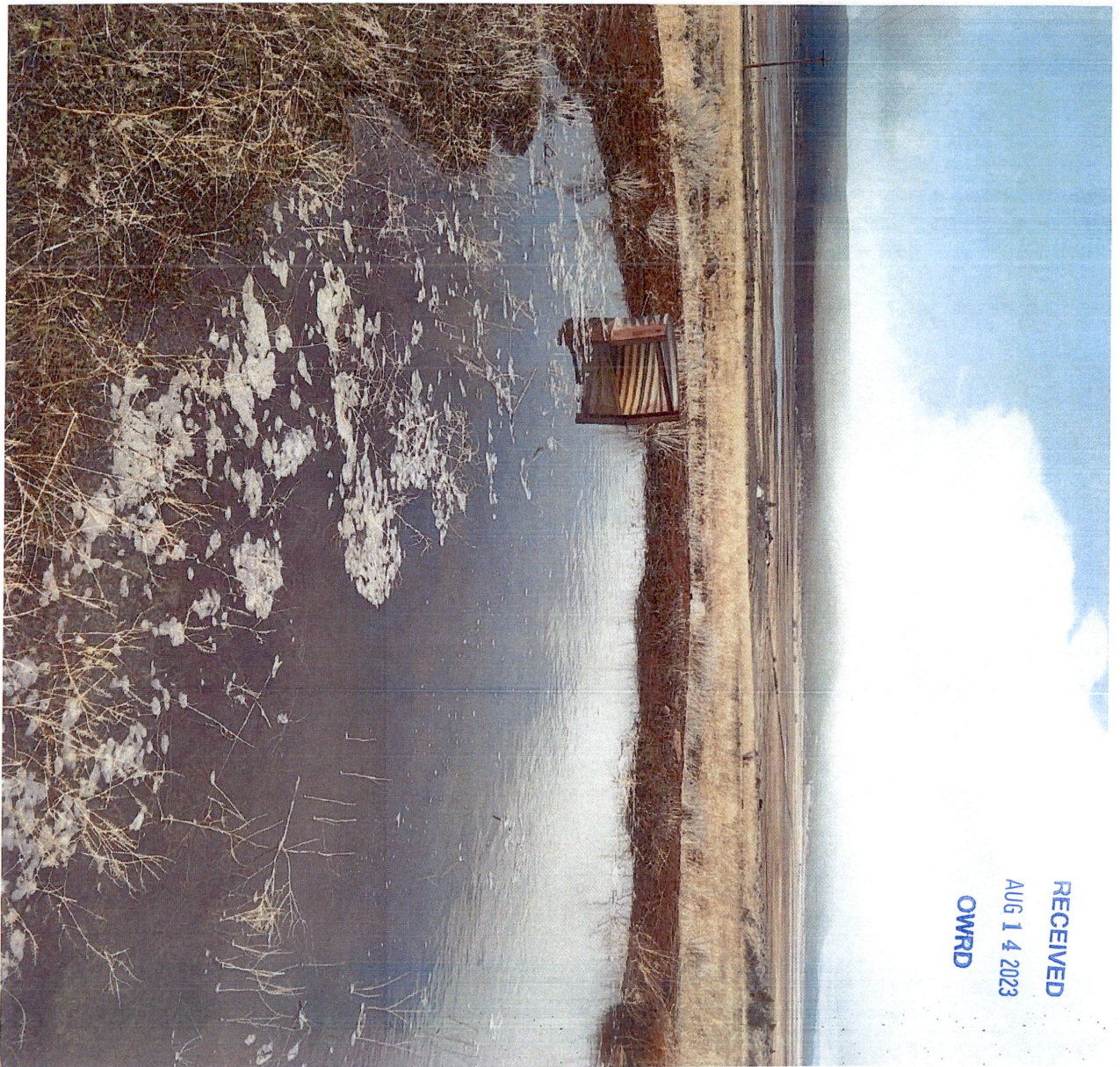
GE MATTRESS SALE

SAVE UP TO 75% OFF

THE BRAND BEDDING

These photos of well Pumping done on 4-11-23

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4-11-23

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KLAM 2145
RECEIVED OBSERVATION WELL
JAN 5 1961 WATER WELL REPORT
 STATE ENGINEER STATE OF OREGON G1911

KLAM 2145
 State Well No. 36/14-25E(1)
 State Permit No. _____

File Original and First Copy with the STATE ENGINEER, SALEM, OREGON

(1) OWNER: GERBER, MONTGOMERY & REED
 Name Henry C. Gerber & Dave J. Campbell
 Address 329 High St. Klamath Falls, Ore.

(2) LOCATION OF WELL:
 County Klamath Owner's number, if any— 2
AW $\frac{1}{4}$ NW $\frac{1}{4}$ Section 25 T36 S. R14 E. W.M.
 Bearing and distance from section or subdivision corner
1785 feet South and 95 feet east from Northwest corner of Sec. 25, Twp 36 S. Range 14, E.W.M.

(3) TYPE OF WORK (check):
 New Well Deepening Reconditioning Abandon
 If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):
 Domestic Industrial Municipal Rotary Driven
 Irrigation Test Well Other Cable Jetted
 Dug Bored

(5) TYPE OF WELL:
 Rotary Driven
 Cable Jetted
 Dug Bored

(6) CASING INSTALLED: Threaded Welded
18 " Diam. from 0 ft. to 64 ft. Gage 2.50
 " Diam. from _____ ft. to _____ ft. Gage _____
 " Diam. from _____ ft. to _____ ft. Gage _____

(7) 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. |
| perforations from _____ | ft. | to | ft. |

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

(9) CONSTRUCTION:
 Was well gravel packed? Yes No Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.
 Was a surface seal provided? Yes No To what depth? 6.0 ft.
 Material used in seal—
 Did any strata contain unusable water? Yes No
 Type of water? _____ Depth of strata _____
 Method of sealing strata off cement

(10) WATER LEVELS:
 Static level 9 1/2 ft. below land surface Date Jan 2
 Artesian pressure _____ lbs. per square inch Date _____

Log Accepted by: _____
 [Signed] _____ Date _____, 19____
 (Owner)

(11) WELL TESTS: Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes No If yes, by whom? _____
 Yield: 2360 gal./min. with 97 ft. drawdown after 4 hrs.
 " " " " " "
 " " " " " "
 Bailer test gal./min. with _____ ft. drawdown after _____ hrs.
 Artesian flow g.p.m. Date _____
 Temperature of water 62 Was a chemical analysis made? Yes No

(12) WELL LOG: Diameter of well 18 inches.
 Depth drilled 708 ft. Depth of completed well 708 ft.
 Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

| MATERIAL | FROM | TO |
|--------------------|------|-----|
| top soil | 0 | 5 |
| lava rock boulders | 5 | 61 |
| clay | 61 | 92 |
| lava rock | 92 | 220 |
| sandstone | 220 | 280 |
| lava rock | 280 | 370 |
| broken lava rock | 370 | 420 |
| lava | 420 | 570 |
| burnt lava | 570 | 680 |
| water | | |
| giving | 680 | 692 |
| clay | | |
| solid lava | 692 | 708 |

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Work started Aug 1960. Completed Jan 1961

(13) PUMP:
 Manufacturer's Name _____
 Type: _____ H.P. _____

Well Driller's Statement:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 NAME W. L. Hartley & Son
 (Person, firm, or corporation) (Type or print)
 Address Baronza Ave.
 Driller's well number _____
 [Signed] Robert F. Hartley
 (Well Driller)
 License No. 164 Date Jan 2, 1961

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

KLAM 2142
WATER WELL REPORT

RECEIVED

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

*KLAM
2142*

STATE OF OREGON
(Please type or print)

JAN 4 1980

State Well No. *365/146-24ca*

(Do not write above this line)

State Permit No.

(1) OWNER:

Name HAMMOND & DOKE, INC. (LARRY DOKE)
Address P. O. BOX 498
BLY, OREGON 97622

(2) TYPE OF WORK (check):

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

(3) TYPE OF WELL:

Rotary Driven
 Jetted
 Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) CASING INSTALLED:

Threaded Welded
16" Diam. from 0 ft. to 32 ft. Gage .250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

(6) PERFORATIONS:

Perforated? Yes No.
Type of perforator used
Size of perforations in. by in.
..... perforations from ft. to ft.
..... perforations from ft. to ft.
..... perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name
Type Model No.
Diam. Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
a pump test made? Yes No If yes, by whom? Modoc Pump
Yield: 3,000 gal./min. with 12 ft. drawdown after 24 hrs.
4,000 " " 24 " 24 "
" " " " " "
test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water 70° Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Cement - Bentonite Grout
Well sealed from land surface to 30 ft.
Diameter of well bore to bottom of seal 20 in.
Diameter of well bore below seal 15 in.
Number of sacks of cement used in well seal 25 sacks
How was cement grout placed? Pressure-Grouted from
30 Ft. up to Land Surface.

(10) LOCATION OF WELL:

County Klamath Driller's well number AR-557-79
NE 1/4 SW 1/4 Section 24 T. 36S R. 14 E. W.M.
Bearing and distance from section or subdivision corner
2 miles north of highway 140 on Dairy Creek
Rd. (Take right turn at yellow cattle guard)

(11) WATER LEVEL: Completed well.

Depth at which water was first found 350 ft.
Static level 206 ft. below land surface. Date 12/11/79
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 15 Inch
Depth drilled 890 ft. Depth of completed well 890 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 |
|--|------------|-----------|------------|
| Soil Zone (Gravelly, Brown) | 0 | 3 | |
| Grey Basalt (Fine-grained, Ultra Hard) | 3 | 70 | |
| Claystone (Volcanic-Red, Soft Rock) | 70 | 85 | |
| Basalt (Grey, Ultra-Hard) | 85 | 190 | |
| Basalt (Brown-Red-Fractured) | 190 | 215 | |
| Basalt (Grey, Hard) | 215 | 400 | 266 |
| Basalt (Grey, Ultra-Hard) | 400 | 425 | |
| Basalt (Brown-Red, Fractured With Void Areas H2O Bearing) | 425 | 525 | |
| Basalt (Grey, Hard) | 525 | 635 | |
| Basalt (Brown-Red, Fractured With Void Areas, H2O Bearing) | 635 | 705 | |
| Basalt (Grey, Ultra-Hard) | 705 | 790 | |
| Basalt (Grey, Hard) | 790 | 825 | |
| Basalt (Red, Very Fractured With Void Areas, H2O Bearing) | 825 | 875 | |
| Basalt (Red, Hard) | 875 | 890 | |
| Work started | 11/5/ 1979 | Completed | 12/5/ 1979 |
| Date well drilling machine moved off of well | | | 12/11/79 |

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] Gary Stooksbery Date 12/27/ 1979
(Drilling Machine Operator)
Drilling Machine Operator's License No. 801

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 RAPID WATER WELL DRILLING COMPANY
(Person, firm or corporation) (Type or print)
Address 545 North G Street, Lakeview, Ore.
[Signed] Gary Stooksbery
(Water Well Contractor)
Contractor's License No. 652 Date 12/27/ 1979

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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.

Land Use Information Form



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

Applicant(s): Deming Ranch Land & Cattle, LLC

Mailing Address: 2064 Camp Whitney Circle

City Rocklin

State: CA

Zip Code: 95765

Daytime Phone:

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A. Land and Location

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

| Township | Range | Section | ¼ ¼ | Tax Lot # | Plan Designation (e.g., Rural Residential/RR-5) | Water to be: | Proposed Land Use: |
|----------|-------|---------|-------|-----------|---|---|--------------------|
| 36S | 14E | 26 | SE NW | 4500 | EFU | <input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used | IS |
| 36S | 14E | 26 | NE SW | 4500 | EFU | <input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used | IS |
| 36S | 14E | 26 | NE SE | 4500 | EFU | <input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used | IS |
| 36S | 14E | 26 | NW SE | 4500 | EFU | <input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used | IS |
| 36S | 14E | 24 | NE SW | 4500 | EFU | <input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input type="checkbox"/> Used | IS |

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

Klamath

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: 3.0 per acre 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:

Change place of use to location better sorted for farming and change well to existing well on applicants property

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):

Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

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

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

Name: Erik Nobel Title: PLanning Diector

Signature:  Phone: 541-851-3648 Date: 7-21-2023

Government Entity: Klamath County

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: _____



ALL POINTS
ENGINEERING & SURVEYING, INC.
 P.O. Box 767 (CRR)
 Terrebonne, Oregon 97760

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 OWRD

TRANSMITTAL

To: Oregon Water Resources Dept
 725 Summer St NE, Suite A
 Salem, OR 97301-1266

Date: 8/8/2023
 Attention: Transfers
 RE: Transfer C91239

Prints Plans Plat Specifications.

Attached is a Transfer on Certificate 91239 for Deming Ranch Land & Cattle, LLC

If you have any questions please don't hesitate to call or email me.

| Copies | No. | Description |
|--------|-----|--|
| 1 | 1 | Application for Transfer (9 pages letter bond) |
| 1 | 2 | Transfer Map (1 page bond) |
| 1 | 3 | Evidence of Use w/Supporting Docs (13 pages letter bond) |
| 1 | 4 | Well logs (2 pages letter bond) |
| 1 | 5 | Land Use Form (2 pages letter bond) |
| 1 | 5 | Check for \$2930 |

Signed: Deuse Montgomey

STATE OF OREGON
 COUNTY OF KLAMATH
 CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

HENRY C. GERBER & R. M. RANCH CO.
 KLAMATH FALLS, OR

confirms the right to use the waters of WELL No. 1 in the SOUTH FORK SPRAGUE RIVER BASIN for the purpose of SUPPLEMENTAL IRRIGATION of 275.9 ACRES.

This right was perfected under Permit G-1795. The date of priority is MAY 9, 1961. The amount of water to which such right is entitled and hereby confirmed, for the purposes aforesaid, is limited to an amount actually beneficially used for said purposes, and shall not exceed 2.7 CUBIC FEET PER SECOND or its equivalent in case of rotation, measured at the well.

The well is located as follows:

| Twp | Rng | Mer | Sec | Q-Q | Measured Distances |
|------|------|-----|-----|-------|---|
| 36 S | 14 E | WM | 25 | SW NW | 1770 FEET SOUTH AND 90 FEET EAST FROM THE NW CORNER OF SECTION 25 |

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 3.0 acre-feet per acre for each acre irrigated during the irrigation season of each year; and shall conform to such reasonable rotation system as may be ordered by the proper state officer.

A description of the place of use to which this right is appurtenant is as follows:

| SUPPLEMENTAL IRRIGATION | | | | | |
|-------------------------|------|-----|-----|-------|-------|
| Twp | Rng | Mer | Sec | Q-Q | Acres |
| 36 S | 14 E | WM | 25 | SW NW | 25.4 |
| 36 S | 14 E | WM | 25 | SE NW | 0.4 |
| 36 S | 14 E | WM | 25 | NE SW | 20.6 |
| 36 S | 14 E | WM | 25 | NW SW | 37.2 |
| 36 S | 14 E | WM | 25 | SW SW | 33.4 |
| 36 S | 14 E | WM | 25 | SE SW | 28.8 |
| 36 S | 14 E | WM | 25 | SW SE | 11.8 |
| 36 S | 14 E | WM | 27 | NE NE | 36.8 |
| 36 S | 14 E | WM | 27 | NW NE | 21.6 |
| 36 S | 14 E | WM | 27 | SW NE | 0.1 |
| 36 S | 14 E | WM | 27 | SE NE | 21.4 |
| 36 S | 14 E | WM | 36 | NW NE | 38.4 |

This certificate describes that portion of the water right confirmed by Certificate 33926, State Record of Water Right Certificates, NOT modified by the provisions of an order of the Water Resources Director entered APR 19 2016, approving Transfer Application T-11810.

The issuance of this superseding certificate does not confirm the status of the water right in regard to the provisions of ORS 540.610 pertaining to forfeiture or abandonment.

The right to the use of the water for the purposes aforesaid is restricted to the lands or place of use herein described.

WITNESS the signature of the Water Resources Director, affixed APR 19 2016.



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



Business Name Search

[New Search](#)

[Printer Friendly](#)

Business Entity Data

08-15-2023

11:40

| Registry Nbr | Entity Type | Entity Status | Jurisdiction | Registry Date | Next Renewal Date | Renewal Due? |
|--|-------------|---------------|--------------|---------------|-------------------|--------------|
| 652702-91 | FLLC | ACT | CALIFORNIA | 12-28-2009 | 12-28-2023 | |
| Entity Name DEMING RANCH LAND & CATTLE, LLC | | | | | | |
| Foreign Name | | | | | | |

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Associated Names

| | | | | | |
|---------------|--------------------|-----------------------------|-------|----------------|--------------------------|
| Type | PPB | PRINCIPAL PLACE OF BUSINESS | | | |
| Addr 1 | 6558 LONETREE BLVD | | | | |
| Addr 2 | | | | | |
| CSZ | ROCKLIN | CA | 95765 | Country | UNITED STATES OF AMERICA |

Please click [here](#) for general information about registered agents and service of process.

| | | | | | | |
|------------------|---------------------------------|-----------------------------|-------------------|----------------|--------------------------|--|
| Type | AGT | REGISTERED AGENT | Start Date | 12-28-2009 | Resign Date | |
| Of Record | 158720-88 | CORPORATION SERVICE COMPANY | | | | |
| Addr 1 | 1127 BROADWAY STREET NE STE 310 | | | | | |
| Addr 2 | | | | | | |
| CSZ | SALEM | OR | 97301 | Country | UNITED STATES OF AMERICA | |

| | | | | | |
|---------------|--------------------|-----------------|-------|----------------|--------------------------|
| Type | MAL | MAILING ADDRESS | | | |
| Addr 1 | 6558 LONETREE BLVD | | | | |
| Addr 2 | | | | | |
| CSZ | ROCKLIN | CA | 95765 | Country | UNITED STATES OF AMERICA |

| | | | | | |
|---------------|--------------------|--------|--------|--------------------|--------------------------|
| Type | MEM | MEMBER | | Resign Date | |
| Name | STEVEN | | MORGAN | | |
| Addr 1 | 796 WEST WISE ROAD | | | | |
| Addr 2 | | | | | |
| CSZ | LINCOLN | CA | 95648 | Country | UNITED STATES OF AMERICA |

| | | | | | |
|---------------|--------------------------|---------|---------|--------------------|--|
| Type | MGR | MANAGER | | Resign Date | |
| Name | DANIEL | | KOMINEK | | |
| Addr 1 | 2064 CAMP WHITNEY CIRCLE | | | | |

14303














| | | | | | |
|--------|---------|----|-------|--|----------------------------------|
| Addr 2 | | | | | |
| CSZ | ROCKLIN | CA | 95765 | | Country UNITED STATES OF AMERICA |

[New Search](#) [Printer Friendly](#) **Name History**

| Business Entity Name | Name Type | Name Status | Start Date | End Date |
|---------------------------------|-----------|-------------|------------|----------|
| DEMING RANCH LAND & CATTLE, LLC | EN | CUR | 12-28-2009 | |

Please [read](#) before ordering [Copies](#).

[New Search](#) [Printer Friendly](#) **Summary History**

| Image Available | Action | Transaction Date | Effective Date | Status | Name/Agent Change | Dissolved By |
|---|-------------------------------------|------------------|----------------|--------|-------------------|--------------|
|  | AMENDED ANNUAL REPORT | 11-14-2022 | | FI | | |
|  | AMNDMT TO ANNUAL RPT/INFO STATEMENT | 09-01-2022 | | FI | | |
|  | AMENDED ANNUAL REPORT | 11-11-2021 | | FI | | |
|  | AMENDED ANNUAL REPORT | 12-08-2020 | | FI | | |
|  | AMENDED ANNUAL REPORT | 12-19-2019 | | FI | | |
|  | AMENDED ANNUAL REPORT | 11-29-2018 | | FI | | |
|  | AMENDED ANNUAL REPORT | 11-21-2017 | | FI | | |
|  | AMENDED ANNUAL REPORT | 11-22-2016 | | FI | | |
|  | AMENDED ANNUAL REPORT | 12-15-2015 | | FI | | |
| | CHANGE OF REGISTERED AGENT/ADDRESS | 03-24-2015 | | FI | | |
|  | AMENDED ANNUAL REPORT | 12-17-2014 | | FI | | |
|  | AMENDED ANNUAL REPORT | 11-20-2013 | | FI | | |
| | ANNUAL REPORT PAYMENT | 11-26-2012 | | SYS | | |
| | ANNUAL REPORT PAYMENT | 11-28-2011 | | SYS | | |
|  | AMENDED ANNUAL REPORT | 12-03-2010 | | FI | | |
|  | APPLICATION FOR AUTHORITY | 12-28-2009 | | FI | Agent | |

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For comments or suggestions regarding the operation of this site,
please contact : corporation.division@sos.oregon.gov

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Permanent Transfer Application Intake Checklist

Transfer # T-14303

| | |
|---|--|
| Reviewer Corie Date 8/14/2023 | Type of Change(s) Proposed: <input checked="" type="checkbox"/> POU <input type="checkbox"/> POD <input type="checkbox"/> APOD <input checked="" type="checkbox"/> POA <input type="checkbox"/> APOA <input type="checkbox"/> USE <input type="checkbox"/> Substitution <input type="checkbox"/> Gov't Action <input type="checkbox"/> Sup to Primary <input type="checkbox"/> SW to GW |
| Calculated Fee \$2930 Use fee calculator on back of this form | Fee Received \$2930 |
| Certificate(s): 91239 | Check <u>all</u> Certs in WRIS to confirm they are not cancelled |
| For multiple certificates, does application meet requirement of OAR 690-380-3220? If no, why? Use the flow chart for multiple Certs | <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A |
| Notes: | |

| | | | |
|--|--|-----------------------------|--|
| Application: OAR 690-380-3000; OAR 690-380-3220 | | | |
| 1. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | Have ALL of the applicant's signed and dated the application? If no, whose signature is missing? |
| 2. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | Part 5 of application: Does the information match the description of the explanation on Part 4 of the application? |
| 3. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| | For multiple certificates: Each certificate proposed for transfer has their own separate completed Part 5, Tables 1 & 2? If no, which certificate(s) are missing separate Part 5, Tables 1 & 2? | | |

| | | | |
|--|---|-----------------------------|--|
| Map Requirements: OAR 690-380-3100 | | | |
| 4. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | Has the map been completed and signed by a CWRE? |
| 5. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| | Map Waiver? The map waiver must be issued by the Department | | |
| Notes: Map doesn't show flow direction. | | | |

| | | | |
|--------------------------------------|---|-----------------------------|---|
| Attachments: OAR 690-380-3000 | | | |
| 6. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | Evidence of Use included, signed, & notarized w/supporting documentation? |
| 7. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| | Land Use Form included and signed by the County? | | |
| 8. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| | Consent Form included, signed, and notarized? | | |
| 9. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| | District: Place of use is in <u>or</u> near an irrigation district? | | |
| | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| | If Yes, is Form D included? Name of the District | | |
| 10. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| | For changes in POA/APOA – are the well logs included? | | |
| 11. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| | For change in POU within Umatilla County, Supplemental Form U included? | | |

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Application complete: no deficiencies identified, assign a T-number and put this checklist in T-folder. |
| <input type="checkbox"/> | Application DEFICIENT: DO NOT accept - return to applicant with letter explaining deficiencies identified. |

Oregon Water Resources Department
Transfer Fee Calculation for Permanent (Non-District) Transfer

| | |
|---|------------------------|
| Today's Date: Tuesday, August 15, 2023 | Fee Calculation |
| Base Fee (includes one type of change to one water right for up to 1 cfs) | \$1,360.00 |
| Fill in information below-- Check each box that applies. | |
| Types of Change Proposed: | |
| <input checked="" type="checkbox"/> Place of Use | |
| <input checked="" type="checkbox"/> Point of Diversion (POD)/Appropriation (POA); and/or Additional POD/POA; and/or SW POD to GW POD | |
| <input type="checkbox"/> Character of Use | \$1,090.00 |
| Enter total number of water rights included in transfer. <input type="text" value="1"/> | \$0.00 |
| <input checked="" type="checkbox"/> Check this box if you propose to add or change a well, or change from a surface water POD to a well. | \$480.00 |
| Enter total number of groundwater wells (POAs) included in transfer. <input type="text" value="1"/> | \$0.00 |
| <input type="checkbox"/> Check this box if you propose to change the place of use or character of use for a NON-irrigation right. | |
| <input type="checkbox"/> Check this box if you propose to change the place of use or character of use for an irrigation right. | |
| Total Transfer CFS(rounded up to the next whole cfs): | |
| Subtotal: | \$2,930.00 |
| Check each box that applies. | |
| <input type="checkbox"/> The transfer is necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932. | |
| <input type="checkbox"/> The transfer is endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat. | |
| Discount: | |
| Transfer Fee: | \$2,930.00 |
| <input type="button" value="Return to Edit"/> <input type="button" value="Clear"/> | |