

# Application for Permanent Water Right Transfer

## 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.

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](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: 67512**  
 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: \_\_\_\_/\_\_\_\_/\_\_\_\_



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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/](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 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>1 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$1090 and enter »	2	0
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 checked="" type="checkbox"/> No: enter 0 <input type="checkbox"/> Yes: enter \$480 for the 1 <sup>st</sup> well to be added or changed <u>0 (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	0
5	Do you propose to change the place of use or character of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 <input type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$410, then enter on line 5 »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$1,360
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 »	7	0
8	Subtract line 7 from line 6 » <b>Transfer Fee:</b>	8	<b>\$1,360</b>

\*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 » » » » » » » » » » <b>Fee for Substitution:</b>	3	<b>Received</b>

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## Part 4 of 5 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>Jim English / Panel Processing, INC</b>			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS <b>3090 Memorial Dr</b>			FAX NO.	
CITY <b>Klamath Falls</b>	STATE <b>OR</b>	ZIP <b>97601</b>	E-MAIL	
<b>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.</b>				

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

AGENT/BUSINESS NAME <b>Marc Van Camp / Van Camp Consulting</b>			PHONE NO. <b>541-297-1880</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>P.O. Box 995</b>			FAX NO.	
CITY <b>Coos Bay</b>	STATE <b>OR</b>	ZIP <b>97420</b>	E-MAIL <b>vancampconsulting@gmail.com</b>	
<b>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.</b>				

Explain in your own words what you propose to accomplish with this transfer application, and why:  
 The purpose of this transfer is to move the Panel Processing's portion of certificate 67512 to a new point of diversion located ~100' upstream from the certified point of diversion. This new POD will be on Panel Processing property, and conform with modern fire suppression standards and regulations.  
 If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

### Check One Box

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

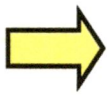
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**By my signature below, I confirm that I understand:**

- Prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: 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.**



Jim English  
Applicant signature

**Jim English, General Manager**  
Print Name (and Title if applicable)

4/8/2024  
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](https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf)

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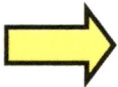
RECEIVING LANDOWNER NAME		PHONE NO.	ADDITIONAL CONTACT NO.	
ADDRESS			FAX NO.	
CITY	STATE	ZIP	E-MAIL	
Describe any special ownership circumstances:				
The confirming Certificate shall be issued in the name of: <input type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner				

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 <b>Klamath County</b>	ADDRESS <b>305 Main Street</b>	
CITY <b>Klamath Falls</b>	STATE <b>OR</b>	ZIP <b>97601</b>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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## INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please **save the application form to your computer**. Unlock the document by using one of the following instructions for your Microsoft Word software version:

### Microsoft Word 2003

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;

**OR**

- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the **Tools** menu => click **Protect Document**;

**OR**

- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

### Microsoft Word 2007

- Unlock the document by clicking the **Review** tab, then click **Protect Document**, then click **Stop Protect**
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

### Microsoft Word 2010

- Unlock the document by clicking the **Review** tab; toggle the **Restrict Editing icon** at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the “**Allow only this type of editing in the document: Filling in forms**” in the “Editing restrictions” section on the right-hand list of options.
- To relock the document, check the **Editing Restrictions/Allow Only This Type of Editing/Filling In Forms** box from the drop-down menu, then check **Yes, Start Enforcing Protection**. You do not need to assign a password for the editing restrictions.

### Other Alternatives:

- Photocopy pages or tables in Part 5, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page ~~5~~ 6 of ~~9~~ 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

**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 # 67512**

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**Description of Water Delivery System**

System capacity: **0.18** cubic feet per second (cfs) **OR**  
\_\_\_\_\_ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **The current system utilizes a 125 HP Burke Electric Co. electric motor and a Peerless Pump Centrifugal pump with a 10" subgrade mainline to deliver water to the fire suppression system.**

**Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)**  
(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or G o't Lot	Measured Distances (from a recognized survey corner)
POD 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		39 S	9 E	17	NE NW	GL11	360' S. and 340' W. from N. 1/4 Corner Section 17, T39S, R9E
POD 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		39 S	9 E	17	NE NW	GL11	371' S. and 2323' E. from NW Corner Section 17, T39S, R9E
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

**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 checked="" 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.



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 # 67512**

List the change proposed for the acreage in each 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)										PROPOSED (the "to" or "on" lands)										
The listing that appears on the certificate BEFORE PROPOSED CHANGES										The listing as it would appear AFTER PROPOSED CHANGES										
List only that part or portion of the water right that will be changed.										are made.										
Twp	Rng	Sec	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	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date	
<b>EXAMPLE</b>																				
2	S	9	NE	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	NW	500	1	10.0	POD #5	1901	
39	S	9	NE	203	GL11	-	Fire Suppression	POD #1	1977	POD	39	S	9	NE	203	GL11	-	POD #2	1977	
39	S	9	SE	1201	GL14	-	Fire Suppression	POD #1	1977	POD	39	S	9	SE	1201	GL14	-	POD #2	1977	
39	S	9	SE	1201	GL4	-	Fire Suppression	POD #1	1977	POD	39	S	9	SE	1201	GL4	-	POD #2	1977	
TOTAL ACRES:										TOTAL ACRES:										

Additional remarks: \_\_\_\_\_  
Revised 7/7/2022

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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 # \_\_\_\_\_.

**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](http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx)

**AND/OR**

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

**Table 3. Construction of Point(s) of Appropriation**

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right

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## Attachments

- Attachment A: Transfer Map
- Attachment B: Evidence of Use Affidavit
- Attachment C: Evidence of Use Supporting Documentation
- Attachment D: Land Use Compatibility Statement
- Attachment E: Title Report

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## Attachment A

### Transfer Map

Application for Permanent Water Right Transfer, Point of Diversion  
Change

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## Attachment B

### Evidence of Use Affidavit

Application for Permanent Water Right Transfer, Point of Diversion Change

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# Application for Water Right Transfer

## Evidence of Use Affidavit



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

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

State of Oregon )  
 ) ss  
 County of KLAMATH)

I, JIM ENGLISH, in my capacity as GENERAL MANAGER OF PANEL PROCESSING, INC.,  
 mailing address 3090 MEMORIAL DRIVE KLAMATH FALLS, OR 97601  
 telephone number (541)882-4406, being first duly sworn depose and say:

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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)
67512	39	S	9	E	WM	17	NE	NW	11	
67512	39	S	9	E	WM	8	SE	SW	14	
67512	39	S	9	E	WM	8	SE	SW	4	

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)

14457 -



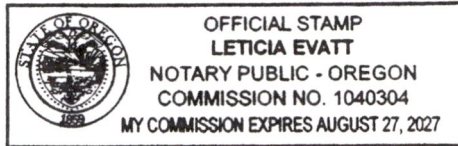
3. The water right was used for: (e.g., crops, pasture, etc.): FIRE SUPPRESSION

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.

*Jim Anglin*  
Signature of Affiant

4/8/2024  
Date

Signed and sworn to (or affirmed) before me this 08 day of April, 2024.



*Leticia Evatt*  
Notary Public for Oregon

Notary Public for Oregon

My Commission Expires: August 27, 2027

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 <b>confirming</b> 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"> <li>● Power usage records for pumps associated with irrigation use</li> <li>● Fertilizer or seed bills related to irrigated crops</li> <li>● Farmers Co-op sales receipt</li> </ul>
<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"> <li>● District assessment records for water delivered</li> <li>● Crop reports submitted under a federal loan agreement</li> <li>● Beneficial use reports from district</li> <li>● IRS Farm Usage Deduction Report</li> <li>● Agricultural Stabilization Plan</li> <li>● CREP Report</li> </ul>
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – <a href="http://www.oregonexplorer.info/imagery">www.oregonexplorer.info/imagery</a> OWRD – <a href="http://www.wrd.state.or.us">www.wrd.state.or.us</a> Google Earth – <a href="http://earth.google.com">earth.google.com</a> TerraServer – <a href="http://www.terraserver.com">www.terraserver.com</a></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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## Attachment C

### Evidence of Use Supporting Documentation

Application for Permanent Water Right Transfer, Point of Diversion  
Change

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PANEL PROCESSING OF OREGON INC  
3090 MEMORIAL DR  
KLAMATH FALLS OR 97601-5573



Inquiries? Call your  
Business Solutions Team  
Toll free **1-866-870-3419**,  
M-F, 6am-6pm PT  
pacificpower.net



BILLING DATE: Dec 1, 2023  
ACCOUNT NUMBER: 69332601-002 4  
DUE DATE: Dec 19, 2023  
AMOUNT DUE: \$29,456.91



**Your Balance With Us**

Previous Account Balance	27,315.90
Payments/Credits	-27,315.90
New Charges	+29,456.91
<b>Current Account Balance</b>	<b>\$29,456.91</b>

**Payments Received**

DATE	DESCRIPTION	AMOUNT
Nov 22, 2023	Payment Received - Thank You	27,315.90
<b>Total Payments</b>		<b>\$27,315.90</b>

From all of us at Pacific Power, we wish you a safe and happy holiday season.

**Looking for other ways to pay?**  
Visit PacificPower.net/Pay for all your options. You can choose to pay on your device using our mobile app, on our website, at a pay station in your community, or pay over the phone by calling 1-888-221-7070.

Note: You're helping the environment and yourself by participating in paperless billing - here's a \$2.00 credit.

**Summary of Account Activity**

<b>ITEM 1</b> ELECTRIC SERVICE	3033 Memorial Dr Klamath Falls OR Large General Svc Ratios 1-08 Schedule 30 METER # 80093234	18,847.89
<b>ITEM 2</b> ELECTRIC SERVICE	3033 Memorial Dr Klamath Falls OR Rear Bldg Ratios 12-6-2007 Schedule 30 METER # 82841267	8,416.43
<b>ITEM 3</b> ELECTRIC SERVICE	3300 Memorial Dr Klamath Falls OR Whse 3ph Primary Ratios 3-03 Schedule 28 METER # 75463600	1,692.59
<b>ITEM 4</b> ELECTRIC SERVICE	3090 Memorial Dr Klamath Falls OR New Office Building Schedule 23 METER # 75455426	500.00

Pump - Warehouse

Write account number on check & mail to: Pacific Power, PO Box 26000, Portland, OR 97256-0001

See reverse

RETAIN THIS PORTION FOR YOUR RECORDS.  
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PO BOX 26000  
PORTLAND OR 97256-0001



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Late Payment Charge for Oregon  
A late payment charge of 2.0% may be charged on any balance not paid in full each month.

Change of Mailing Address or Phone?  
Check here & provide information on back.

Account Number: 69332601-002 4  
Date Due: Dec 19, 2023

AMOUNT DUE: \$29,456.91

Please enter the amount enclosed.

PANEL PROCESSING OF OREGON INC  
3090 MEMORIAL DR  
KLAMATH FALLS OR 97601-5573

H 69332601 002 418 002945691

14457 -

BILLING DATE: **Dec 1, 2023** ACCOUNT NUMBER: **69332601-002 4** DUE DATE: **Dec 19, 2023** AMOUNT DUE: **\$29,456.91**

**Detailed Account Activity**

**ITEM 1 - ELECTRIC SERVICE**

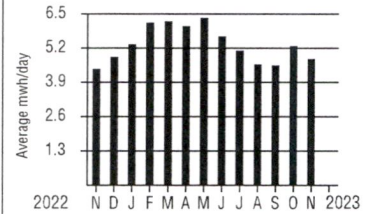
3033 Memorial Dr Klamath Falls OR  
 Large General Svc Ratios 1-08 Schedule 30  
 Service ID: 967064191-002

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
80093234	Oct 26, 2023	Nov 29, 2023	34	27455	27863	400.0	163,200 kwh
80093234	Demand	Nov 29, 2023			1.599	400.0	640 kw
80093234	Reactive	Nov 29, 2023			1.006	400.0	402 kvar

Next scheduled read date: 12-29. Date may vary due to scheduling or weather.

NEW CHARGES - 11/23	UNITS	COST PER UNIT	CHARGE
Basic Charge - 3P Sec Delivery	698 kw		334.00
Load Size Charge - 3P Sec Del	698 kw	0.7500000	523.50
Demand Charge Sec - Min 100 Kw	640 kw	6.1800000	3,955.20
Base Supply Demand Charge	640 kw	5.8000000	3,712.00
Delivery Charge Secondary			
for 25 day(s)	120,000 kwh	0.0103800	1,245.60
for 9 day(s)	43,200 kwh	0.0101600	438.91
Reactive Power Charge Sec	146 kvar	0.6500000	94.90
Supply Energy Secondary	163,200 kwh	0.0411000	6,707.52
System Benefits Charge	163,200 kwh	0.0043900	716.45
Public Purpose		0.0150000	265.92
Low Income Discount Recovery	163,200 kwh	0.0003800	62.02
Low Income Assistance	163,200 kwh	0.0010400	169.73
Paperless Bill Credit			-0.50
Klamath Falls City Utility Tax		0.0350000	622.64
<b>Total New Charges</b>			<b>18,847.89</b>

**Historical Data - ITEM 1**



**Your Average Daily kwh Usage by Month**

PERIOD ENDING	NOV 2023	NOV 2022
Avg. Daily Temp.	38	31
Total kwh	163200	150400
Avg. kwh per Day	4800	4424
Cost per Day	\$554.35	\$481.45

**Received**  
**MAY 13 2024**  
**OWRD**

**New Mailing Address or Phone?**

Please print your new information below and check the box on the reverse side of this Payment Stub. Thank you.

ACCOUNT NUMBER: **69332601-002 4**

LAST \_\_\_\_\_ FIRST \_\_\_\_\_ M.I. \_\_\_\_\_

NEW STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

ST \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

This product contains fiber from well-managed, independently certified forests.





Questions about your bill: Call toll free 1-866-870-3419 pacificpower.net

BILLING DATE: Dec 1, 2023 ACCOUNT NUMBER: 69332601-002 4 DUE DATE: Dec 19, 2023 AMOUNT DUE: \$29,456.91

**ITEM 2 - ELECTRIC SERVICE**

3033 Memorial Dr Klamath Falls OR  
Rear Bldg Ratios 12-6-2007 Schedule 30  
Service ID: 967064191-003

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
82841267	Oct 26, 2023	Nov 29, 2023	34	7844	8028	160.0	29,440 kwh
82841267	Demand	Nov 29, 2023			2.937	160.0	470 kw
82841267	Reactive	Nov 29, 2023			1.004	160.0	161 kvar

Next scheduled read date: 12-29. Date may vary due to scheduling or weather.

NEW CHARGES - 11/23	UNITS	COST PER UNIT	CHARGE
Basic Charge - 3P Sec Delivery	491 kw		334.00
Load Size Charge - 3P Sec Del	491 kw	0.7500000	368.25
Demand Charge Sec - Min 100 Kw	470 kw	6.1800000	2,904.60
Base Supply Demand Charge	470 kw	5.8000000	2,726.00
Delivery Charge Secondary			
for 25 day(s)	21,647 kwh	0.0103800	224.70
for 9 day(s)	7,793 kwh	0.0101600	79.18
Supply Energy Secondary	29,440 kwh	0.0411000	1,209.98
System Benefits Charge	29,440 kwh	0.0043900	129.24
Public Purpose		0.0150000	119.64
Low Income Discount Recovery	29,440 kwh	0.0003800	11.19
Low Income Assistance	29,440 kwh	0.0010400	30.62
Paperless Bill Credit			-0.50
Klamath Falls City Utility Tax		0.0350000	279.53
<b>Total New Charges</b>			<b>8,416.43</b>

**ITEM 3 - ELECTRIC SERVICE**

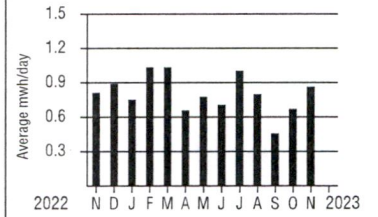
3300 Memorial Dr Klamath Falls OR  
Whse 3ph Primary Ratios 3-03 Schedule 28  
Service ID: 966864391-001

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
75463600	Oct 26, 2023	Nov 29, 2023	34	4435	4513	200.0	15,600 kwh
75463600	Demand	Nov 29, 2023			0.328	200.0	66 kw
75463600	Reactive	Nov 29, 2023			0.206	200.0	41 kvar

Next scheduled read date: 12-29. Date may vary due to scheduling or weather.

NEW CHARGES - 11/23	UNITS	COST PER UNIT	CHARGE
Basic Charge - 3P Pri Delivery	76 kw		31.00
Load Size Charge - 3P Pri Del	76 kw	0.8000000	60.80
Demand Charge Pri - Min 15 Kw	66 kw	5.1500000	339.90
Delivery Charge Primary			
for 25 day(s)	11,471 kwh	0.0117000	134.21
for 9 day(s)	4,129 kwh	0.0113200	46.74
Reactive Power Charge Pri	15 kvar	0.6000000	9.00
Supply Energy Primary	15,600 kwh	0.0572600	893.26
System Benefits Charge	15,600 kwh	0.0048900	76.28
Public Purpose		0.0150000	23.87
Low Income Discount Recovery	15,600 kwh	0.0003800	5.93
Low Income Assistance	15,600 kwh	0.0010400	16.22
Paperless Bill Credit			-0.50
Klamath Falls City Utility Tax		0.0350000	55.88
<b>Total New Charges</b>			<b>1,692.59</b>

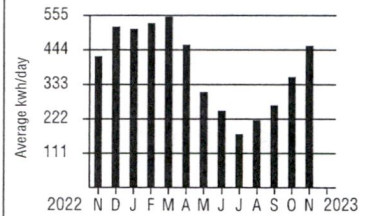
**Historical Data - ITEM 2**



**Your Average Daily kwh Usage by Month**

PERIOD ENDING	NOV 2023	NOV 2022
Avg. Daily Temp.	38	31
Total kwh	29440	27680
Avg. kwh per Day	866	814
Cost per Day	\$247.54	\$207.11

**Historical Data - ITEM 3**



**Your Average Daily kwh Usage by Month**

PERIOD ENDING	NOV 2023	NOV 2022
Avg. Daily Temp.	38	31
Total kwh	15600	14400
Avg. kwh per Day	459	424
Cost per Day	\$49.78	\$43.95

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MAY 13 2024

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Questions about your bill: Call toll free 1-866-870-3419 [pacificpower.net](http://pacificpower.net)

BILLING DATE: Dec 1, 2023 ACCOUNT NUMBER: 69332601-002 4 DUE DATE: Dec 19, 2023 AMOUNT DUE: \$29,456.91

**ITEM 4 - ELECTRIC SERVICE**

3090 Memorial Dr Klamath Falls OR  
 New Office Building Schedule 23  
 Service ID: 965332745-001

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
75455426	Oct 26, 2023	Nov 29, 2023	34	6816	6905	40.0	3,560 kwh
75455426	Demand	Nov 29, 2023			0.304	40.0	12 kw
75455426	Reactive	Nov 29, 2023			0.114	40.0	5 kvar

Next scheduled read date: 12-29. Date may vary due to scheduling or weather.

NEW CHARGES - 11/23	UNITS	COST PER UNIT	CHARGE
Basic Charge, 3P, Sec Delivery			25.90
Load Size Chg - 3P Sec > 15 Kw	12 kw	1.6500000	19.80
Delivery Charge Secondary			
for 25 day(s)	2,618 kwh	0.0535700	140.25
for 9 day(s)	942 kwh	0.0522100	49.18
Supply Energy Sec 1ST 3000 Kwh	3,000 kwh	0.0626900	188.07
Supply Energy Sec > 3000 Kwh	560 kwh	0.0470300	26.34
System Benefits Charge	3,560 kwh	0.0062600	22.29
Public Purpose		0.0150000	7.08
Low Income Discount Recovery	3,560 kwh	0.0003800	1.35
Low Income Assistance	3,560 kwh	0.0010400	3.70
Paperless Bill Credit			-0.50
Klamath Falls City Utility Tax		0.0350000	16.54
<b>Total New Charges</b>			<b>500.00</b>

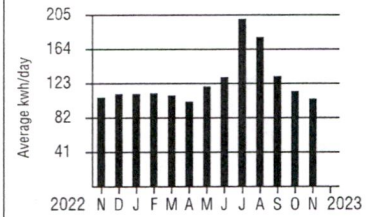
Effective November 5, 2023, the Oregon Public Utility Commission approved the recovery of wildfire mitigation and vegetation management expenses incurred by Pacific Power. The recovery of these costs is included in the delivery charge applied to the amount of energy used during the billing period. Your bill reflects charges based on the old and new delivery charge rates.

When you provide a check as payment, you authorize us to use the information from your check either to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as we receive your payment and you will not receive your check back from your financial institution. If you would like to opt out of this program and continue processing your payment as a check transaction, please call 1-800-895-0561. If you have opted out previously, please disregard this message.

**Manage your account with ease**

Popular billing options include Auto Pay, Equal Pay and choice of due dates. You can even earn a credit each month when you sign up for paperless billing. See details and enroll at [PacificPower.net/BillOptions](http://PacificPower.net/BillOptions)

**Historical Data - ITEM 4**



**Your Average Daily kwh Usage by Month**

PERIOD ENDING	NOV 2023	NOV 2022
Avg. Daily Temp.	38	31
Total kwh	3560	3640
Avg. kwh per Day	105	107
Cost per Day	\$14.71	\$12.49

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PANEL PROCESSING OF OREGON INC  
3090 MEMORIAL DR  
KLAMATH FALLS OR 97601-5573



Inquiries? Call your  
Business Solutions Team  
Toll free 1-866-870-3419,  
M-F, 6am-6pm PT  
pacificpower.net



BILLING DATE: Jan 3, 2024  
ACCOUNT NUMBER: 69332601-002 4  
DUE DATE: Jan 19, 2024  
AMOUNT DUE: \$26,081.68



Your Balance With Us

Previous Account Balance	29,456.91
Payments/Credits	-29,456.91
New Charges	+26,081.68
<b>Current Account Balance</b>	<b>\$26,081.68</b>

Payments Received

DATE	DESCRIPTION	AMOUNT
Dec 19, 2023	Payment Received - Thank You	29,456.91
<b>Total Payments</b>		<b>\$29,456.91</b>

Note: You're helping the environment and yourself by participating in paperless billing - here's a \$2.00 credit.

Summary of Account Activity

<b>ITEM 1</b>	3033 Memorial Dr Klamath Falls OR	16,283.83
<b>ELECTRIC SERVICE</b>	Large General Svc Ratios 1-08 Schedule 30 METER # 80093234	
<b>ITEM 2</b>	3033 Memorial Dr Klamath Falls OR	7,707.33
<b>ELECTRIC SERVICE</b>	Rear Bldg Ratios 12-6-2007 Schedule 30 METER # 82841267	
<b>ITEM 3</b>	3300 Memorial Dr Klamath Falls OR	1,689.24
<b>ELECTRIC SERVICE</b>	Whse 3ph Primary Ratios 3-03 Schedule 28 METER # 75463600	
<b>ITEM 4</b>	3090 Memorial Dr Klamath Falls OR	401.28
<b>ELECTRIC SERVICE</b>	New Office Building Schedule 23 METER # 75455426	

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Visit PacificPower.net/Pay for all your options. You can choose to pay on your device using our mobile app, on our website, at a pay station in your community, or pay over the phone by calling 1-888-221-7070.

Manage your account with ease

Popular billing options include Auto Pay, Equal Pay and choice of due dates. You can even earn a credit each month when you sign up for paperless billing. See details and enroll at PacificPower.net/BillOptions

Pump - Warehouse

See reverse

Write account number on check & mail to: Pacific Power, PO Box 26000, Portland, OR 97256-0001

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PACIFIC POWER  
PO BOX 26000  
PORTLAND OR 97256-0001



Late Payment Charge for Oregon  
A late payment charge of 2.0% may be charged on any balance not paid in full each month.

Change of Mailing Address or Phone?  
Check here & provide information on back.

Account Number: 69332601-002 4  
Date Due: Jan 19, 2024

AMOUNT DUE: \$26,081.68

Please enter the amount enclosed.

PANEL PROCESSING OF OREGON INC  
3090 MEMORIAL DR  
KLAMATH FALLS OR 97601-5573

H 69332601 002 415 002608168

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Questions about your bill: Call toll free 1-866-870-3419 pacificpower.net

BILLING DATE: Jan 3, 2024 ACCOUNT NUMBER: 69332601-002 4 DUE DATE: Jan 19, 2024 AMOUNT DUE: \$26,081.68

**Detailed Account Activity**

**ITEM 1 - ELECTRIC SERVICE**

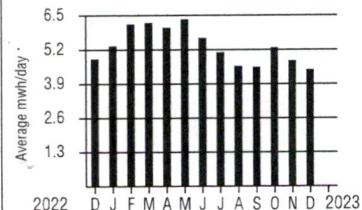
3033 Memorial Dr Klamath Falls OR  
 Large General Svc Ratios 1-08 Schedule 30  
 Service ID: 967064191-002

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
80093234	Nov 29, 2023	Dec 29, 2023	30	27863	28197	400.0	133,600 kwh
80093234	Demand	Dec 29, 2023			1.438	400.0	575 kw
80093234	Reactive	Dec 29, 2023			1.042	400.0	417 kvar

Next scheduled read date: 01-30. Date may vary due to scheduling or weather.

NEW CHARGES - 12/23	UNITS	COST PER UNIT	CHARGE
Basic Charge - 3P Sec Delivery	691 kw		334.00
Load Size Charge - 3P Sec Del	691 kw	0.7500000	518.25
Demand Charge Sec - Min 100 Kw	575 kw	6.1800000	3,553.50
Base Supply Demand Charge	575 kw	5.8000000	3,335.00
Delivery Charge Secondary	133,600 kwh	0.0103800	1,386.77
Reactive Power Charge Sec	187 kvar	0.6500000	121.55
Supply Energy Secondary	133,600 kwh	0.0411000	5,490.96
System Benefits Charge	133,600 kwh	0.0043900	586.50
Public Purpose		0.0150000	229.90
Low Income Discount Recovery	133,600 kwh	0.0003800	50.77
Low Income Assistance	133,600 kwh	0.0010400	138.94
Paperless Bill Credit			-0.50
Klamath Falls City Utility Tax		0.0350000	538.19
<b>Total New Charges</b>			<b>16,283.83</b>

**Historical Data - ITEM 1**



**Your Average Daily kwh Usage by Month**

PERIOD ENDING	DEC 2023	DEC 2022
Avg. Daily Temp.	36	26
Total kwh	133600	146000
Avg. kwh per Day	4453	4867
Cost per Day	\$542.79	\$537.22

**New Mailing Address or Phone?**

Please print your new information below and check the box on the reverse side of this Payment Stub. Thank you.

ACCOUNT NUMBER: 69332601-002 4

**Received**  
**MAY 13 2024**  
**OWRD**

\_\_\_\_\_  
 LAST FIRST M.I.

\_\_\_\_\_  
 NEW STREET ADDRESS

\_\_\_\_\_  
 CITY

\_\_\_\_\_  
 ST ZIP TELEPHONE NUMBER

14457 -

This product contains fiber from well-managed, independently certified forests.



BILLING DATE: **Jan 3, 2024** ACCOUNT NUMBER: **69332601-002 4** DUE DATE: **Jan 19, 2024** AMOUNT DUE: **\$26,081.68**

**ITEM 2 - ELECTRIC SERVICE**

3033 Memorial Dr Klamath Falls OR  
Rear Bldg Ratios 12-6-2007 Schedule 30  
Service ID: 967064191-003

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
82841267	Nov 29, 2023	Dec 29, 2023	30	8028	8133	160.0	16,800 kwh
82841267	Demand	Dec 29, 2023			2.96	160.0	474 kw
82841267	Reactive	Dec 29, 2023			1.014	160.0	162 kvar

Next scheduled read date: 01-30. Date may vary due to scheduling or weather.

NEW CHARGES - 12/23	UNITS	COST PER UNIT	CHARGE
Basic Charge - 3P Sec Delivery	489 kw		334.00
Load Size Charge - 3P Sec Del	489 kw	0.7500000	366.75
Demand Charge Sec - Min 100 Kw	474 kw	6.1800000	2,929.32
Base Supply Demand Charge	474 kw	5.8000000	2,749.20
Delivery Charge Secondary	16,800 kwh	0.0103800	174.38
Supply Energy Secondary	16,800 kwh	0.0411000	690.48
System Benefits Charge	16,800 kwh	0.0043900	73.75
Public Purpose		0.0150000	109.77
Low Income Discount Recovery	16,800 kwh	0.0003800	6.38
Low Income Assistance	16,800 kwh	0.0010400	17.47
Paperless Bill Credit			-0.50
Klamath Falls City Utility Tax		0.0350000	256.33
<b>Total New Charges</b>			<b>7,707.33</b>

**ITEM 3 - ELECTRIC SERVICE**

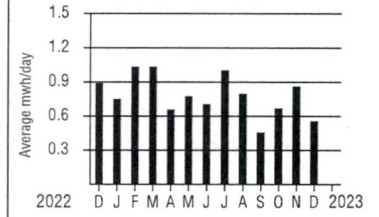
3300 Memorial Dr Klamath Falls OR  
Whse 3ph Primary Ratios 3-03 Schedule 28  
Service ID: 966864391-001

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
75463600	Nov 29, 2023	Dec 29, 2023	30	4513	4593	200.0	16,000 kwh
75463600	Demand	Dec 29, 2023			0.294	200.0	59 kw
75463600	Reactive	Dec 29, 2023			0.204	200.0	41 kvar

Next scheduled read date: 01-30. Date may vary due to scheduling or weather.

NEW CHARGES - 12/23	UNITS	COST PER UNIT	CHARGE
Basic Charge - 3P Pri Delivery	76 kw		31.00
Load Size Charge - 3P Pri Del	76 kw	0.8000000	60.80
Demand Charge Pri - Min 15 Kw	59 kw	5.1500000	303.85
Delivery Charge Primary	16,000 kwh	0.0117000	187.20
Reactive Power Charge Pri	17 kvar	0.6000000	10.20
Supply Energy Primary	16,000 kwh	0.0572600	916.16
System Benefits Charge	16,000 kwh	0.0048900	78.24
Public Purpose		0.0150000	23.81
Low Income Discount Recovery	16,000 kwh	0.0003800	6.08
Low Income Assistance	16,000 kwh	0.0010400	16.64
Paperless Bill Credit			-0.50
Klamath Falls City Utility Tax		0.0350000	55.76
<b>Total New Charges</b>			<b>1,689.24</b>

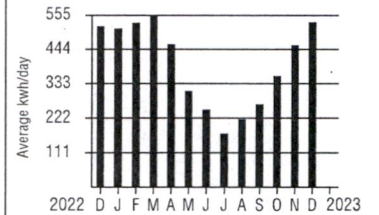
**Historical Data - ITEM 2**



**Your Average Daily kwh Usage by Month**

PERIOD ENDING	DEC 2023	DEC 2022
Avg. Daily Temp.	36	26
Total kwh	16800	26720
Avg. kwh per Day	560	891
Cost per Day	\$256.91	\$248.32

**Historical Data - ITEM 3**



**Your Average Daily kwh Usage by Month**

PERIOD ENDING	DEC 2023	DEC 2022
Avg. Daily Temp.	36	26
Total kwh	16000	15600
Avg. kwh per Day	533	520
Cost per Day	\$56.31	\$53.01

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BILLING DATE: **Jan 3, 2024** ACCOUNT NUMBER: **69332601-002 4** DUE DATE: **Jan 19, 2024** AMOUNT DUE: **\$26,081.68**

**ITEM 4 - ELECTRIC SERVICE**

3090 Memorial Dr Klamath Falls OR  
 New Office Building Schedule 23  
 Service ID: 965332745-001

METER NUMBER	SERVICE PERIOD		ELAPSED DAYS	METER READINGS		METER MULTIPLIER	AMOUNT USED THIS MONTH
	From	To		Previous	Current		
75455426	Nov 29, 2023	Dec 29, 2023	30	6905	6973	40.0	2,720 kwh
75455426	Demand	Dec 29, 2023			0.265	40.0	11 kw
75455426	Reactive	Dec 29, 2023			0.074	40.0	3 kvar

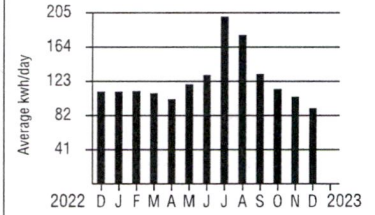
Next scheduled read date: 01-30. Date may vary due to scheduling or weather.

NEW CHARGES - 12/23	UNITS	COST PER UNIT	CHARGE
Basic Charge, 3P, Sec Delivery			25.90
Load Size Chg - 3P Sec > 15 Kw	12 kw	1.6500000	19.80
Delivery Charge Secondary	2,720 kwh	0.0535700	145.71
Supply Energy Sec 1ST 3000 Kwh	2,720 kwh	0.0626900	170.52
System Benefits Charge	2,720 kwh	0.0062600	17.03
Public Purpose		0.0150000	5.68
Low Income Discount Recovery	2,720 kwh	0.0003800	1.03
Low Income Assistance	2,720 kwh	0.0010400	2.83
Paperless Bill Credit			-0.50
Klamath Falls City Utility Tax		0.0350000	13.28
<b>Total New Charges</b>			<b>401.28</b>

Due to the rising costs of fuel and energy, the Oregon Public Utility Commission has approved a price increase, effective January 1, 2024, included on your bill. On January 2, 2024, the rate charged for low-income assistance decreased. Apply for a bill discount and learn more at [PacificPower.net/Assistance](http://PacificPower.net/Assistance).

When you provide a check as payment, you authorize us to use the information from your check either to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as we receive your payment and you will not receive your check back from your financial institution. If you would like to opt out of this program and continue processing your payment as a check transaction, please call 1-800-895-0561. If you have opted out previously, please disregard this message.

**Historical Data - ITEM 4**



**Your Average Daily kwh Usage by Month**

PERIOD ENDING	DEC 2023	DEC 2022
Avg. Daily Temp.	36	26
Total kwh	2720	3320
Avg. kwh per Day	91	111
Cost per Day	\$13.38	\$13.23



# FIRE PUMP TEST

## *PANEL PROCESSING ELECTRIC*

3090 MEMORIAL DR.  
KLAMATH FALLS, OREGON 97601

---

### PERFORMED BY:



Viking Automatic Sprinkler Co.  
4961 Industry Drive Medford, OR 97502  
24 Hrs O: 541.773.1052 F: 541.773.1609  
OR CCB #64837 • Metro Lic #2816 • CA C-16 LIC #279188  
*Boise • Longview • Medford • Portland • Seattle*

Test Date: JULY 7, 2023  
JOB # 8165

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## FIRE PUMP FLOW TEST DATA SHEET

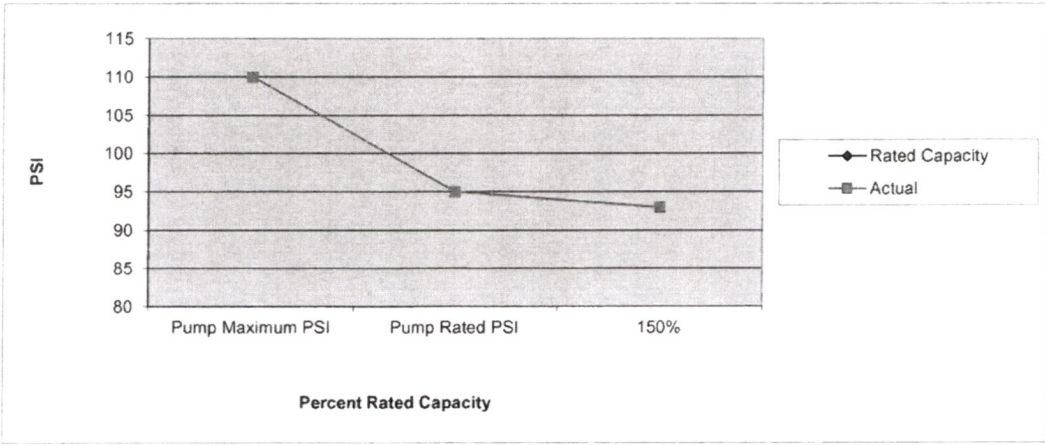
Building Name		PANEL PROCESSING - ELECTRIC			Job Number		8165		
Building Address		3090 MEMORIAL DR			Suite Number				
City	KLAMATH FALLS	State	OR	Zip Code	97601				
Date of Test	7/7/2023	Pump Designation		FIRE PUMP		Test Conducted By		JAMES BROWN	
Owner Representative		Jockey Pump Start PSI		N/A		Automatic Stop		YES	
		Jockey Pump Stop PSI		N/A		Manual Stop		YES	
Insurance or Fire Rep		Fire Pump Start PSI		58		Timer Setting		10 MIN.	
		Fire Pump Stop PSI		45		Transfer Switch		N/A	
		Automatic Operator Work		YES		Suction Size		10"	
		Manual Operator Work		YES		Discharge Size		10"	

PUMP		DRIVER		CONTROLLER	
Pump Type	HORIZONTAL	Driver Type	ELECTRIC	Controller Type	ELECTRIC
Pump Manufacture	PEERLESS	Driver Manufacture	BURKE	Controller Manufacture	SAFETY SWITCH
Pump Serial Number	67299	Driver Serial Number	161829	Controller Serial Number	AF 355
Pump Model Number	6AF-15	Driver Model Number	DAD-505S	Controller Model Number	1399938
Pump Rated GPM	1500	Driver Horse Power	125	Controller Horse Power	N/A
Pump Rated PSI	95	Driver RPM	1775	Controller Volts	575
Pump Rated RPM	1770	Driver Volts	220/440	Controller Phase	3
Pump Maximum PSI		Driver Amps	292/146	Controller Cycles	N/A
150%		Driver Phase	3	Controller Interrupt Cap	N/A
Pump Impeller Size	15	Driver Cycles	1	Controller Diesel Volts	N/A
Pump Stages	1	Driver Service Factor	N/A	Controller Grounded	YES

FIRE PUMP TEST DATA										
Suction Pressure	Discharge Pressure PSI	SPEED RPM	Net Head PSI	Streams			GPM	% of rated capacity	Volts	Amps
				Number	Size	Pitot PSI				
0	110	1792	110		2.5	0	0	CHURN		
0	95	1779	95	2	2.5	20,20	1502	100%		
0	93	1777	93	2	2.5	35,36	2001	133%		
			0							
			0							

**TECH NOTES**

NO TEST PORT OR ISOLATION. FLOW THROUGH HYDRANT 100 YARDS AWAY. COULD NOT GET TO 150%.



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# FIRE PUMP TEST

## *PANEL PROCESSING*

3090 MEMORIAL DR  
KLAMATH FALLS, OREGON 97601

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### PERFORMED BY:



Viking Automatic Sprinkler Co.  
4961 Industry Drive Medford, OR 97502  
24 Hrs O: 541.773.1052 F: 541.773.1609  
OR CCB #64837 • Metro Lic #2816 • CA C-16 LIC #279188  
*Boise • Longview • Medford • Portland • Seattle*

Test Date: AUGUST 24, 2022  
JOB # 6002

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### FIRE PUMP FLOW TEST DATA SHEET

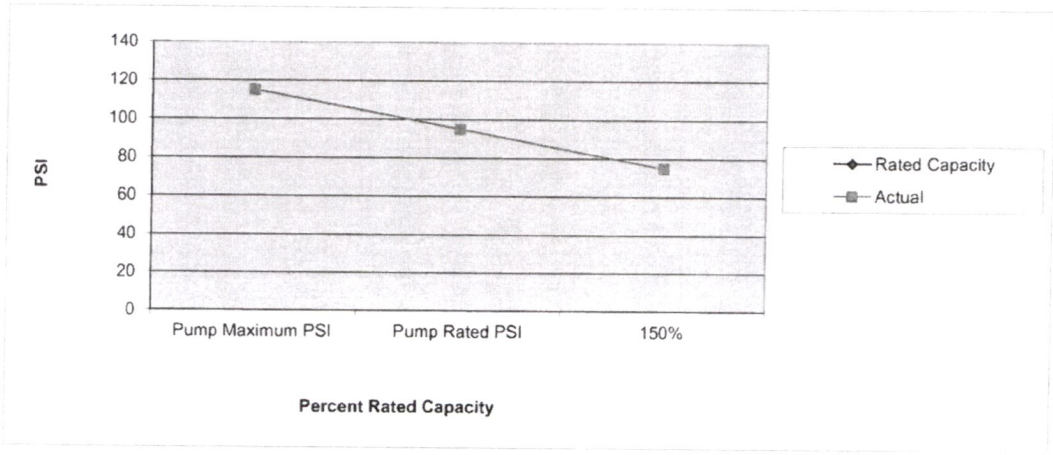
<b>Building Name</b>		PANEL PROCESSING			<b>Job Number</b>		6002
<b>Building Address</b>		3090 MEMORIAL DR			<b>Suite Number</b>		
<b>City</b>	KLAMATH FALLS	<b>State</b>	OR	<b>Zip Code</b>			97601
<b>Date of Test</b>	8/24/2022	<b>Pump Designation</b>			<b>Test Conducted By</b>		JAMES BROWN
<b>Owner Representative</b>		<b>Jockey Pump Start PSI</b>		<b>Automatic Stop</b>		YES	
		<b>Jockey Pump Stop PSI</b>		<b>Manual Stop</b>		YES	
<b>Insurance or Fire Rep</b>		<b>Fire Pump Start PSI</b>		<b>Timer Setting</b>		10 MIN.	
		<b>Fire Pump Stop PSI</b>		<b>Transfer Switch</b>		N/A	
		<b>Automatic Operator Work</b>		<b>Suction Size</b>		10"	
		<b>Manual Operator Work</b>		<b>Discharge Size</b>		10"	

PUMP		DRIVER		CONTROLLER	
<b>Pump Type</b>	HORIZONTAL	<b>Driver Type</b>	ELECTRIC	<b>Controller Type</b>	ELECTRIC
<b>Pump Manufacture</b>	PEERLESS	<b>Driver Manufacture</b>	BURKE	<b>Controller Manufacture</b>	SAFETY SWITCH
<b>Pump Serial Number</b>	67299	<b>Driver Serial Number</b>	161829	<b>Controller Serial Number</b>	AF 355
<b>Pump Model Number</b>	6AF-15	<b>Driver Model Number</b>	DAD-505S	<b>Controller Model Number</b>	1399938
<b>Pump Rated GPM</b>	1500	<b>Driver Horse Power</b>	125	<b>Controller Horse Power</b>	N/A
<b>Pump Rated PSI</b>	95	<b>Driver RPM</b>	1775	<b>Controller Volts</b>	575
<b>Pump Rated RPM</b>	1770	<b>Driver Volts</b>	220/440	<b>Controller Phase</b>	3
<b>Pump Maximum PSI</b>		<b>Driver Amps</b>	292/146	<b>Controller Cycles</b>	N/A
<b>150%</b>		<b>Driver Phase</b>	3	<b>Controller Interrupt Cap</b>	N/A
<b>Pump Impeller Size</b>	15	<b>Driver Cycles</b>	1	<b>Controller Diesel Volts</b>	N/A
<b>Pump Stages</b>	1	<b>Driver Service Factor</b>	N/A	<b>Controller Grounded</b>	YES

FIRE PUMP TEST DATA										
Suction Pressure	Discharge Pressure PSI	SPEED RPM	Net Head PSI	Streams			GPM	% of rated capacity	Volts	Amps
				Number	Size	Pitot PSI				
0	115	1793	115		2.5	0	0	CHURN	N/A	N/A
0	95	1780	95		2.5	20/20	1502	100%	N/A	N/A
0	75	1775	75		2.5	35/36	2001	133%	N/A	N/A

**TECH NOTES**

NO TEST PORT OR ISOLATION. FLOW THROUGH HYDRANT 100 YARDS AWAY. COULD NOT GET TO 150%



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### FIRE PUMP FLOW TEST DATA SHEET

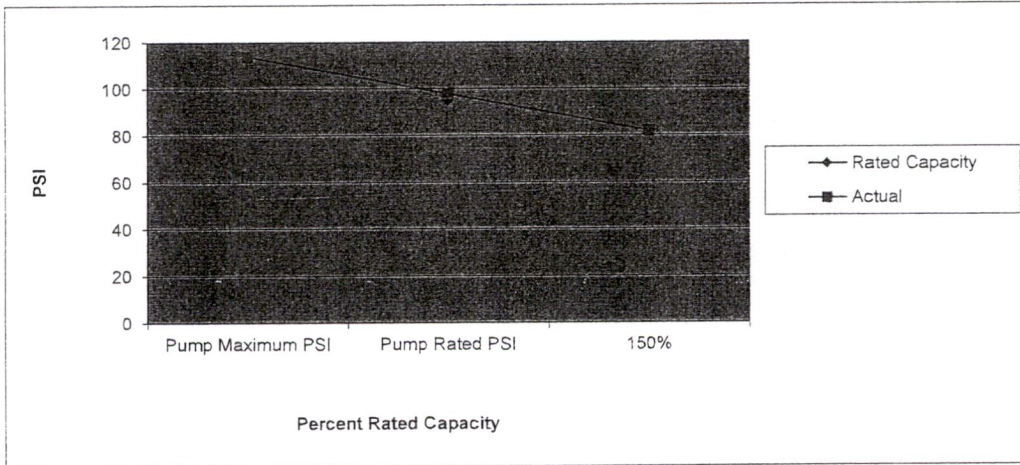
Building Name		PANEL PROCESSING			Job Number		4275	
Building Address		3090 MEMORIAL DR			Suite Number			
City	KLAMATH FALLS	State	OR	Zip Code	97601			
Date of Test	6/16/2021	Pump Designation			Test Conducted By		MIKE BAXTER	
Owner Representative		Jockey Pump Start PSI			Automatic Stop		NO	
		Jockey Pump Stop PSI			Manual Stop		YES	
Insurance or Fire Rep		Fire Pump Start PSI			Timer Setting			
		Fire Pump Stop PSI			Transfer Switch			
		Automatic Operator Work			Suction Size		6	
		Manual Operator Work			Discharge Size		6	
PUMP		DRIVER			CONTROLLER			
Pump Type	HORIZONTAL	Driver Type			Controller Type			
Pump Manufacture	PEERLESS	Driver Manufacture			Controller Manufacture			
Pump Serial Number	67299	Driver Serial Number			Controller Serial Number			
Pump Model Number	6AF-15	Driver Model Number			Controller Model Number			
Pump Rated GPM	1500	Driver Horse Power			Controller Horse Power			
Pump Rated PSI	95	Driver RPM			Controller Volts			
Pump Rated RPM	1770	Driver Volts			Controller Phase			
Pump Maximum PSI		Driver Amps			Controller Cycles			
150%		Driver Phase			Controller Interrupt Cap			
Pump Impeller Size	15	Driver Cycles			Controller Diesel Volts			
Pump Stages		Driver Service Factor			Controller Grounded			

FIRE PUMP TEST DATA										
Speed RPM	Suction Pressure PSI	Discharge Pressure PSI	Net Head PSI	Streams			GPM	% of rated capacity	Volts	Amps
				Number	Size	Pitot PSI				
1789	0	114	114					CHURN		
1771	0	98	98	2	2.5	20	1500	100%		
1776	0	82	82	2	2.5	OPEN	1943	130%		
			0				0	0%		
			0				0	0%		

TECH NOTES

NO TEST PORT OR ISOLATION. FLOW THROUGH HYDRANT 100 YARDS AWAY. COULD NOT GET TO 150%

19/21 100% - m32/35 PITOT ON FULL OPEN HYDRANT



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# Fire Pump Test Report

Panel Processing  
3090 Memorial Dr  
Klamath Falls, OR 97601  
6/11/2020

Conducted by:  
West Coast Fire

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# FIRE PUMP TEST REPORT

## Panel Processing

Company

Name: Panel Processing  
 Address: 3090 Memorial Dr  
 City/St/Zip: Klamath Falls, OR 97601

Pump

Manufacturer: Peerless  
 Model Number: 6AF-15  
 Serial Number: 67299  
 Pump Type: Horizontal RPM: 1770  
 Rating - Churn: 0 gpm @ psi  
 100%: 1,500 gpm @ 95 psi  
 150%: gpm @ psi  
 Elevations -  
 Pump: 2 ft Discharge Gauge: 2 ft Suction Gauge: ft  
 Diameters -  
 Impeller: 15 in Discharge Pipe: 6 in Suction Pipe: 6 in

Label:

Test

Date: 6/11/2020  
 Method: Fire hydrant

Start: 11:00:00 AM End: 12:00:00 PM  
 Discharge Device: HM Pitotless 2"

Flows

#	Disch Press	Suct Press	Flow	RPM	Amperes				Volts			Net Press	Corrected		% Flow
					A	B	C	A-B	B-C	A-C	Flow		Press		
1	109.0	0.0	0	1,793	0.0	0.0	0.0	0.0	0.0	0.0	110.0	0	107.0	0	
2	101.0	0.0	1,456	1,782	0.0	0.0	0.0	0.0	0.0	0.0	102.0	1,446	101.0	96	
3	89.0	0.0	1,851	1,779	0.0	0.0	0.0	0.0	0.0	0.0	90.0	1,842	89.0	123	

Test Notes

Fire pump has no controller. Auto start and manual start were tested and are in good working order. I tested the pump using a fire hydrant a 100 yards away. Pump bearing or motor bearings are loud and should be replaced. Pump performed well.

Flow Points

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# FIRE PUMP TEST REPORT

## Panel Processing

### Flow Point # 2

Noz #	Size inch	Coef	Pitot psi	Flow gpm
1	2.000		19.0	719
2	2.000		20.0	737
3	2.000		0.0	0
4	2.000		0.0	0
5	2.000		0.0	0
6	2.000		0.0	0
7	2.000		0.0	0
8	2.000		0.0	0

### Flow Point # 3

Noz #	Size inch	Coef	Pitot psi	Flow gpm
1	2.000		32.0	933
2	2.000		31.0	918
3	2.000		0.0	0
4	2.000		0.0	0
5	2.000		0.0	0
6	2.000		0.0	0
7	2.000		0.0	0
8	2.000		0.0	0

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# Fire Pump Test Report

Panel Processing  
3090 Memorial Dr  
Klamath Falls, OR 97601  
6/11/2019

Received  
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Conducted by:  
West Coast Fire  
7524 N Columbia  
Portland Or 97203

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# FIRE PUMP TEST REPORT

## Panel Processing

### Company

Name: **Panel Processing**  
Address: **3090 Memorial Dr**  
City/St/Zip: **Klamath Falls, OR 97601**

### Pump

Manufacturer: **Peerless** Label:  
Model Number: **6AF-15**  
Serial Number: **67299**  
Pump Type: **Horizontal** RPM: **1770**  
Rating - Churn: **0 gpm @ psi**  
100%: **1,500 gpm @ 100 psi**  
150%: **gpm @ psi**  
Elevations -  
Pump: **2 ft** Discharge Gauge: **2 ft** Suction Gauge: **ft**  
Diameters -  
Impeller: **15 in** Discharge Pipe: **6 in** Suction Pipe: **6 in**

### Test

Date: **6/11/2019** Start: **8:00:00 AM** End: **9:00:00 AM**  
Method: **Fire hydrant** Discharge Device: **HM Pitotless 2"**

### Flows

#	Disch Press	Suct Press	Flow	RPM	Amperes				Volts			Net Press	Corrected		% Flow
					A	B	C	A-B	B-C	A-C	Flow		Press		
1	109.0	0.0	0	1,794	0.0	0.0	0.0	0.0	0.0	0.0	110.0	0	107.0	0	
2	96.0	-5.0	1,474	1,782	0.0	0.0	0.0	0.0	0.0	0.0	102.0	1,464	101.0	146	
3	78.0	-10.0	1,950	1,779	0.0	0.0	0.0	0.0	0.0	0.0	89.0	1,940	88.0	129	

### Test Notes

Pump has a heavy packing leak. Pump has a 3 min run timer. Pump has no pump controller. Auto start was tested and is in good working order. Pump is primed with city water and draws from river. Tested pump using a fire hydrant 100 yards from pump house. Pump has no pump placard.

### Flow Points

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# FIRE PUMP TEST REPORT

## Panel Processing

### Flow Point # 2

Noz #	Size inch	Coef	Pitot psi	Flow gpm
1	2.000		20.0	737
2	2.000		20.0	737
3	2.000		0.0	0
4	2.000		0.0	0
5	2.000		0.0	0
6	2.000		0.0	0
7	2.000		0.0	0
8	2.000		0.0	0

### Flow Point # 3

Noz #	Size inch	Coef	Pitot psi	Flow gpm
1	2.000		36.0	989
2	2.000		34.0	961
3	2.000		0.0	0
4	2.000		0.0	0
5	2.000		0.0	0
6	2.000		0.0	0
7	2.000		0.0	0
8	2.000		0.0	0

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## **Attachment D**

### **Land Use Compatibility Statement**

**Application for Permanent Water Right Transfer, Point of Diversion  
Change**

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**MAY 13 2024**  
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**MARC J. VAN CAMP, P.E., C.W.R.E., L.S.I**  
vancampconsulting@gmail.com | (541) 297-1880  
P.O. Box 995 Coos Bay, Oregon 97420

**14457 -**



# 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](http://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

Applicant(s): PANEL PROCESSING, INC

Mailing Address: 3090 MEMORIAL DRIVE

City: KLAMATH FALLS

State: OR

Zip Code: 97601

Daytime Phone: 541-882-4406

## 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>39S</u>	<u>9E</u>	<u>17</u>	<u>NE-NW</u>	<u>203</u>	<u>HEAVY INDUSTRIAL</u>	<input checked="" type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>INDUSTRIAL</u>
<u>39S</u>	<u>9E</u>	<u>8</u>	<u>SE-SW</u>	<u>1201</u>	<u>HEAVY INDUSUTRIAL</u>	<input type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>INDUSTRIAL</u>

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) KLAMATH RIVER

Estimated quantity of water needed: 0.18    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 FIRE SUPPRESSION

Briefly describe:

The purpose of this transfer is to move the Panel Processing's portion of certificate 67512 to a new point of diversion located ~100' upstream from the certified point of diversion. This new POD will be on Panel Processing property, and conform with modern fire supression standards and regulations.

**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. →

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# For Local Government Use Only

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MAY 13 2024

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 **WRD** 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: Lizzy Gallagher Title: Planner II  
 Signature: [Signature] Phone: 541-851-3674 Date: 4/25/24  
 Government Entity: Klamath County Planning Dept

**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: \_\_\_\_\_





## Attachment E

### Title Report

Application for Permanent Water Right Transfer, Point of Diversion Change

Received

MAY 13 2024

OWRD

MARC J. VAN CAMP, P.E., C.W.R.E., L.S.I  
vancampconsulting@gmail.com | (541) 297-1880  
P.O. Box 995 Coos Bay, Oregon 97420

14457 -



404 Main St., Ste. 1, Klamath Falls, OR 97601  
PHONE (541) 883-3401 FAX (541) 882-0620

---

To: FSBO

Date: April 5, 2024  
Order No. 627681AM  
Reference: 3033 Memorial Dr  
Klamath Falls, OR 97601

Attn:

Your File No.:

We have enclosed our Status of Record Title Report pertaining to order number 627681AM.

***Thank you for the opportunity to serve you. Your business is appreciated!***

If you have any questions or need further assistance, please do not hesitate to contact your Title Officer listed below.

Sincerely,

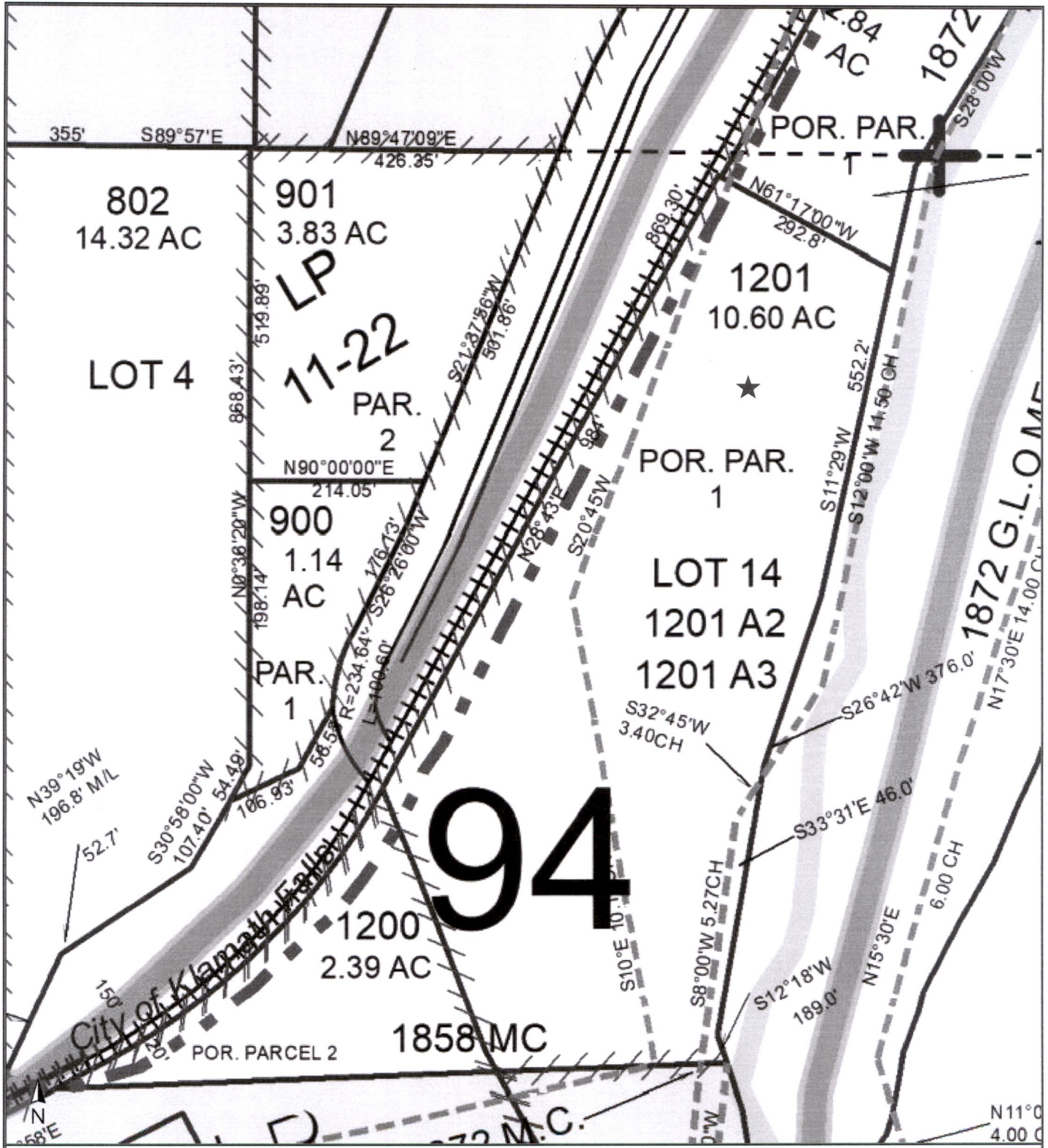
***Tonya Clayborn***

tonya.clayborn@amerititle.com  
Title Officer

**NOTICE: Please be aware that, due to the conflict between federal and state laws concerning the legality of the cultivation, distribution, manufacture or sale of marijuana, the Company is not able to close or insure any transaction involving land that is associated with these activities.**

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MAY 13 2024  
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14457 -



ParcelID: 820393  
 Tax Account #: 3909-00800-01201  
 3033 Memorial Dr, Klamath Falls OR 97601



This map/plat is being furnished as an aid in locating the herein described land in relation to adjoining streets, natural boundaries and other land, and is not a survey of the land depicted. Except to the extent a policy of title insurance is expressly modified by endorsement, if any, the company does not insure dimensions, distances, location of easements, acreage or other matters shown thereon.

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MAY 13 2024 13 2024

OWRD OWRD

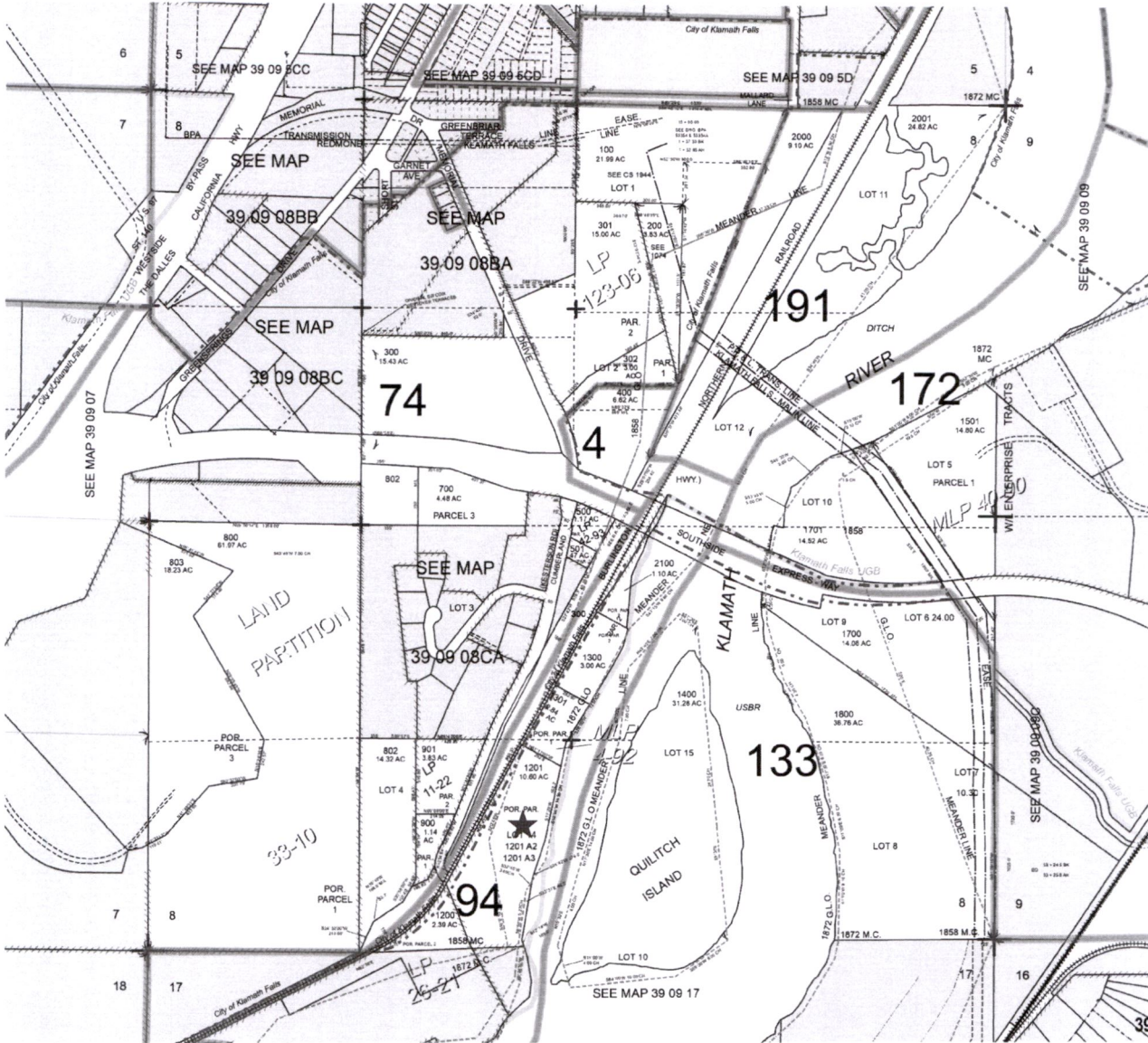


THIS MAP WAS PREPARED FOR ASSESSMENT PURPOSE ONLY  
Revised: 2/28/2023

SECTION 08 T.39S. R.09E. W.M.  
KLAMATH COUNTY

39 09 08

1" = 400'



Cancelled No.  
1201 A1  
801  
1900



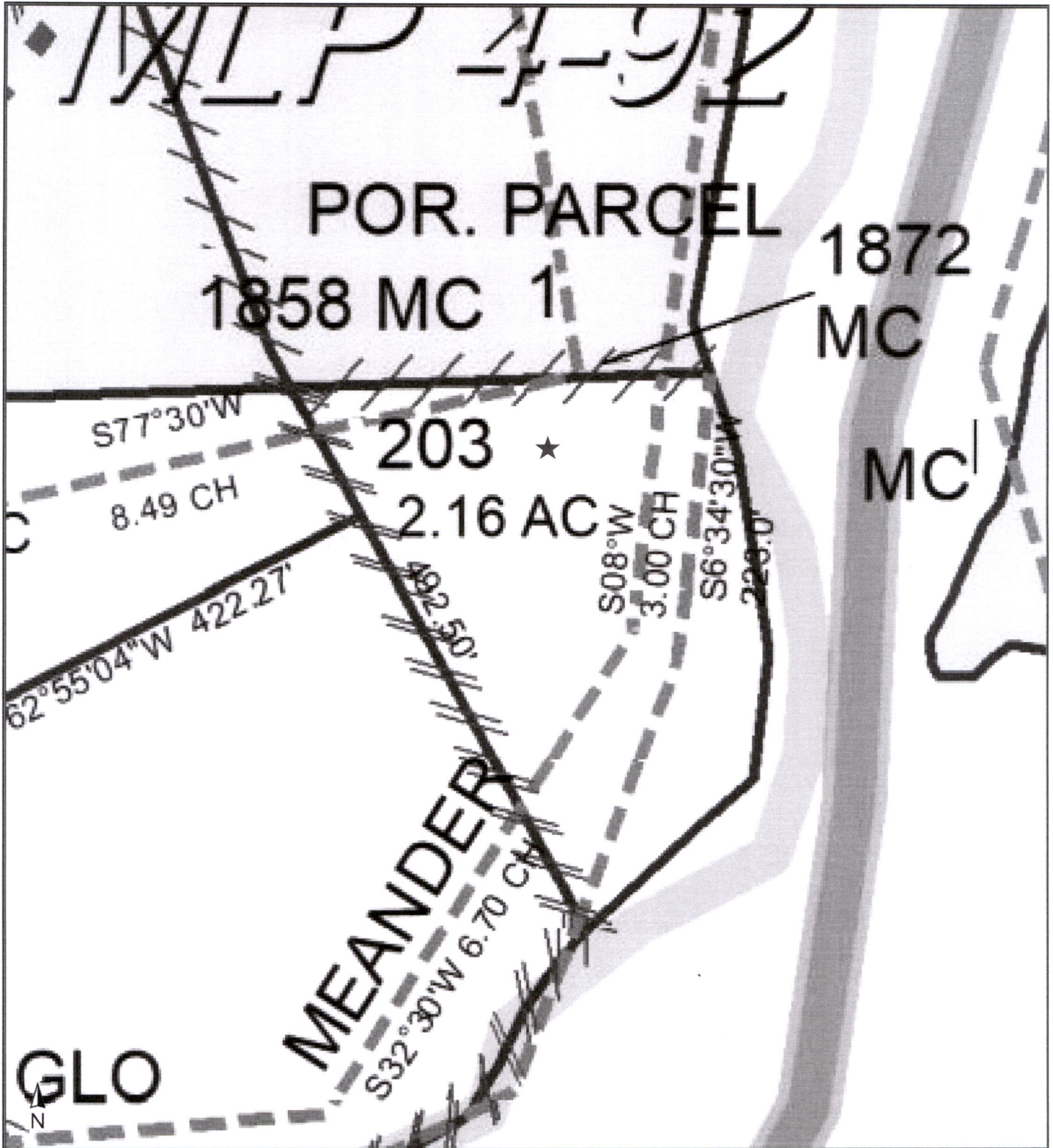
**ParcelID: 820393**  
**Tax Account #: 3909-00800-01201**  
**3033 Memorial Dr, Klamath Falls OR 97601**

This map/plat is being furnished as an aid in locating the herein described land in relation to adjoining streets, natural boundaries and other land, and is not a survey of the land depicted. Except to the extent a policy of title insurance is expressly modified by endorsement, if any, the company does not insure dimensions, distances, location of easements, acreage or other matters shown thereon.

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MAY 13 2024





ParcelID: 782754  
 Tax Account #: 3909-01700-00203  
 , OR 97601



This map/plat is being furnished as an aid in locating the herein described land in relation to adjoining streets, natural boundaries and other land, and is not a survey of the land depicted. Except to the extent a policy of title insurance is expressly modified by endorsement, if any, the company does not insure dimensions, distances, location of easements, acreage or other matters shown thereon.

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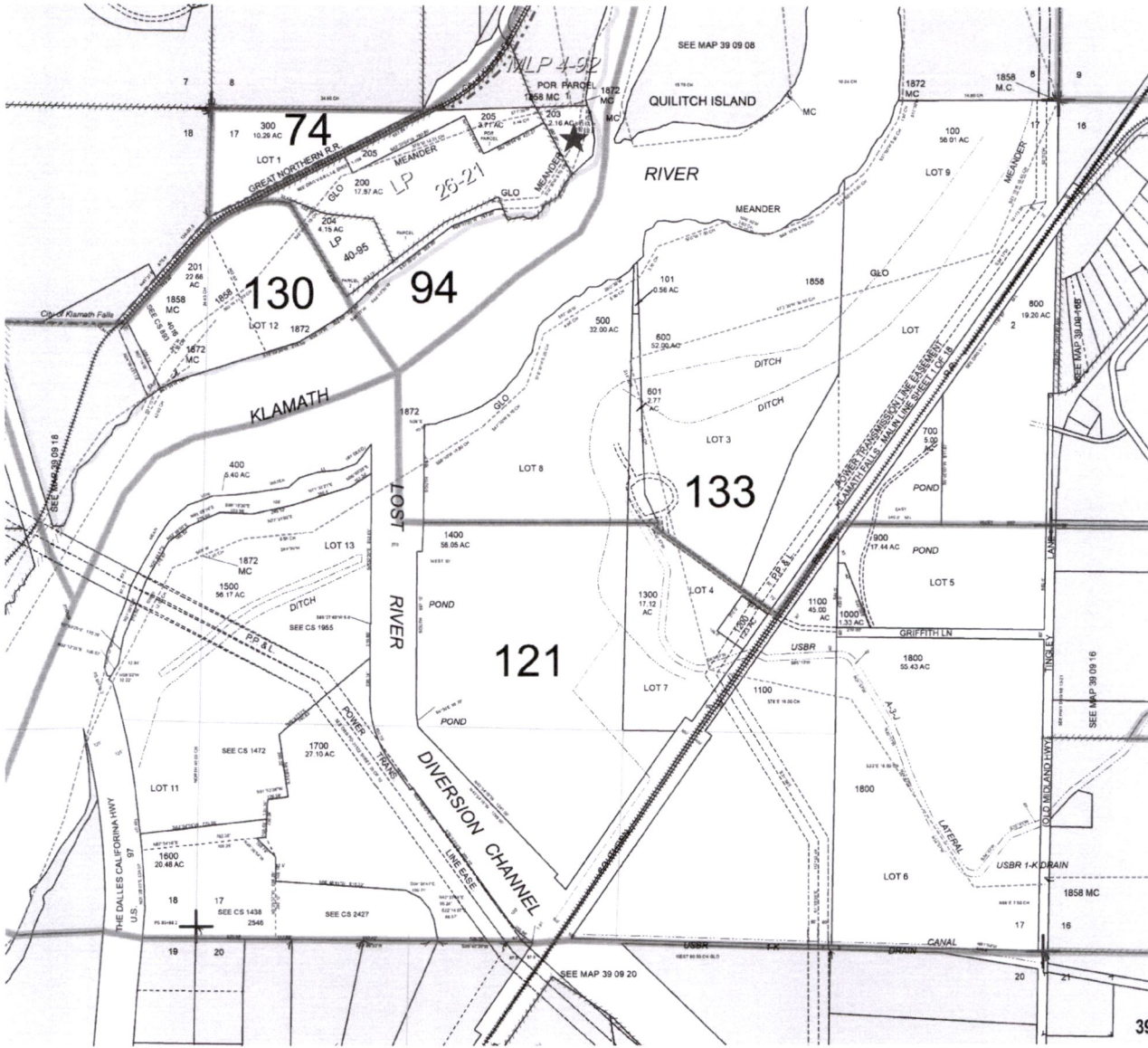


THIS MAP WAS PREPARED FOR  
ASSESSMENT PURPOSE ONLY  
Revised: 4/28/2022

SECTION 17 T.39S. R.09E. W.M.  
KLAMATH COUNTY

39 09 17

1" = 400'



Cancelled No.  
202

39 09 17

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MAY 13 2024  
OWRD



**ParcelID: 782754**  
**Tax Account #: 3909-01700-00203**  
**, OR 97601**

This map/plat is being furnished as an aid in locating the herein described land in relation to adjoining streets, natural boundaries and other land, and is not a survey of the land depicted. Except to the extent a policy of title insurance is expressly modified by endorsement, if any, the company does not insure dimensions, distances, location of easements, acreage or other matters shown thereon.

14457 -





404 Main St., Ste. 1, Klamath Falls, OR 97601  
PHONE (541) 883-3401 FAX (541) 882-0620

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**STATUS OF RECORD TITLE**

Panel Processing of Oregon, Inc.

April 5, 2024  
Title Number: 627681AM  
Title Officer: Tonya Clayborn  
Fee: \$200.00

Your Reference No.

**We have searched the status of record title as to the following described property:**

Parcel 1 of Land Partition 4-92 (Parcel 1 of Minor Land Partition 40-88) situated in the S1/2 of Section 8 and the NW1/4 of Section 17, Township 39 South, Range 9 East of the Willamette Meridian, Klamath County, Oregon.

**Vestee:**

**Panel Processing of Oregon, Inc. an Oregon foreign corporation**

and dated as of **April 4, 2024** at 7:30 a.m.

**Said property is subject to the following on record matters:**

**Tax Information:**

Taxes assessed under Code No. 094 Account No. 820393 Map No. 3909-00800-01201  
NOTE: The 2023-2024 Taxes: \$48,406.77, are Paid

Taxes assessed under Code No. 094 Account No. 897476 Map No. 3909-00800-01201 A2  
NOTE: The 2023-2024 Taxes: \$79,236.67, are Paid

Taxes assessed under Code No. 094 Account No. 872867 Map No. 3909-00800-01301  
NOTE: The 2023-2024 Taxes: \$4,055.05, are Paid

Taxes assessed under Code No. 094 Account No. 782754 Map No. 3909-01700-00203  
NOTE: The 2023-2024 Taxes: \$1,621.24, are Paid

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1. City liens, if any, of the City of Klamath Falls.
2. The rights of the public in and to that portion of the herein described property lying within the limits of public roads, streets or highways.
3. Rights of the public and governmental bodies in and to that portion of said premises now or at any time lying below the high water line of Klamath River, including any ownership rights which may be claimed by the State of Oregon as to any portion now or at any time lying below the ordinary high water line.

Such rights and easements for navigation and fishing as may exist over that portion of the property now or at any time lying beneath the waters of Klamath River.

All matters arising from any shifting in the course of Klamath River including but not limited to accretion, reliction and avulsion.

4. Agreement and the terms and conditions contained therein  
Between: United States of America  
And: H.N. Whiteline  
Purpose: Waiver of Riparian Rights  
Recorded: September 16, 1931  
Instrument No.: Volume 18, page 346, Deed Records
5. An easement including the terms and provisions thereof, affecting the portion of said premises and for the purposes stated therein as set forth in instrument:  
Granted To: The California Oregon Power Company  
Recorded: December 31, 1931  
Instrument No.: Volume 96, page 504, Deed Records
6. Agreement and the terms and conditions contained therein  
Between: Kesterson Lumber Company  
And: California Oregon Power Company  
Purpose: Release of claims for the raising and lowering the water level of the Klamath River  
Recorded: December 24, 1931  
Instrument No.: Volume 96, page 506, Deed Records
7. An easement including the terms and provisions thereof, affecting the portion of said premises and for the purposes stated therein as set forth in instrument:  
Granted To: Pacific Power & Light Company  
Recorded: December 16, 1965  
Instrument No.: M65, page 4728
8. Reservation of Oil, gas, minerals, including the terms and provisions contained therein, in deed from Great Northern Railway Company.  
Recorded: August 29, 1969  
Instrument No.: M69, page 7511
9. The Company makes no representation as to the present ownership of any such interests. There may be leases, grants, exceptions or reservations of interests that are not listed.
10. An easement including the terms and provisions thereof, affecting the portion of said premises and for the purposes stated therein as set forth in instrument:  
Granted To: Leonard R. Putnam and Mary Jean Putnam, husband and wife  
Recorded: January 6, 1989  
Instrument No.: M89, page 408

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11. An easement including the terms and provisions thereof, affecting the portion of said premises and for the purposes stated therein as set forth in instrument:  
Granted To: Pacific Power & Light Company  
Recorded: September 10, 1991  
Instrument No.: M91, page 17985
12. An unrecorded lease with certain terms, covenants, conditions and provisions set forth therein and such other exceptions as may appear necessary upon recording thereof,  
Lessor: Putnam and Sons, LLC, an Oregon Limited Liability Company  
Lessee: Sturdi-Craft, Inc., an Oregon Corporation  
Disclosed by: Memorandum of Lease  
Date: January 15, 2002  
Recorded: January 31, 2002  
Instrument No.: M02, page 6144  
  
The Lessee's interest in the lease shown next above was subordinated to the lien of the Trust Deed recorded January 29, 2002 in Book M02, page 5645 by Lease Subordination Agreement,  
Recorded: January 31, 2002  
Instrument No.: M02, page 6145
13. An easement including the terms and provisions thereof, affecting the portion of said premises and for the purposes stated therein as set forth in instrument:  
Recorded: January 30, 2003  
Instrument No.: M03, page 05899
14. An easement including the terms and provisions thereof, affecting the portion of said premises and for the purposes stated therein as set forth in instrument:  
Granted To: PacifiCorp, Inc.  
Recorded: January 27, 2005  
Instrument No.: M05, page 06084
15. The lack of a right of access to and from the Land as a result of the absence of an easement, public right, license or permit to cross the Burlington Northern Railroad Railroad.
16. Easements as shown on the Partition Plat No. 4-92.
17. A Financing Statement filed in the Office of the County Recorder showing:  
Debtor: None Shown only legal description  
Secured Party: Wells Fargo Bank, National Association  
Recorded: December 27, 2017  
Instrument No.: 2017-014678

A change to the above Financing Statement was filed:  
Recorded: August 31, 2022  
Instrument No.: 2022-010649  
Nature of Change: Continuation

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18. A Deed of Trust, including the terms and provisions thereof, to secure the amount noted below and other amounts secured thereunder, if any:  
Amount: \$6,800,000.00  
Trustor/Grantor: Panel Processing of Oregon, Inc., an Oregon foreign corporation  
Trustee: AmeriTitle  
Beneficiary: Putnam & Sons, LLC, an Oregon Limited Liability Company  
Dated: March 16, 2018  
Recorded: March 28, 2018  
Instrument No.: 2018-003745  
(Includes other Property)

NOTE: Any map or sketch enclosed as an attachment herewith is furnished for information purposes only to assist in property location with reference to streets and other parcels. No representation is made as to accuracy and the company assumes no liability for any loss occurring by reason of reliance thereon.

THIS IS NOT A TITLE REPORT, A COMMITMENT TO ISSUE TITLE INSURANCE OR A GUARANTEE OF ANY KIND. No liability is assumed with this report. The fee charged for this service does not include supplemental reports or other services. Further dissemination of the information in this report in a form purporting to insure title to the herein described land is prohibited by law.

*"Superior Service with Commitment and Respect for Customers and Employees"*

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14457 -

STATE OF OREGON  
COUNTY OF KLAMATH  
CERTIFICATE OF WATER RIGHT

THIS CERTIFICATE ISSUED TO

LEONARD R. PUTNAM  
DBA MERGANSER INDUSTRIAL PARK  
P.O. BOX 940  
KLAMATH FALLS, OREGON 97601

confirms the right to use the waters of KLAMATH RIVER, a tributary of PACIFIC OCEAN, for MAINTENANCE OF A FIRE SUPPRESSION SYSTEM.

This right was perfected under Permit 42729. The date of priority is SEPTEMBER 29, 1977. This right is limited to 0.18 CUBIC FOOT PER SECOND or its equivalent in case of rotation, measured at the point of diversion from the source.

The point of diversion is located as follows:

LOT 14 (NE 1/4 NW 1/4), SECTION 17, T 39 S, R 9 E, W.M.; 360 FEET SOUTH AND 340 FEET WEST FROM THE NORTH 1/4 CORNER OF SECTION 17.

The use 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:

LOT 4 (SE 1/4 SW 1/4)  
LOT 14 (SE 1/4 SW 1/4)  
SECTION 8  
  
N 1/2 NW 1/4  
SECTION 17  
TOWNSHIP 39 SOUTH, RANGE 9 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. The use confirmed herein may be made only at times when sufficient water is available to satisfy all prior rights, including rights for maintaining instream flows.

WITNESS the signature of the Water Resources Director, affixed JUNE 26, 1992.

/s/ MARTHA O. PAGEL

Martha O. Pagel

Recorded in State Record of Water Right Certificates numbered 67512.

56668.BWB