Application for Permanent Water Right Transfer



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

Part 1 of 5 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section. Received by OWRD Check all items included with this application. (N/A = Not Applicable)DEC 1 3 2024 \bowtie Part 1 – Completed Minimum Requirements Checklist. X Salem, OR Part 2 – Completed Transfer Application Map Checklist. M 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. X Part 4 – Completed Applicant Information and Signature. X Part 5 – Information about Water Rights to be Transferred: How many water rights are to be transferred? 2 List them here: Cert. 46854 & 48426 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. 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. 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. Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. 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): Application fee not enclosed/insufficient ___ Map not included or incomplete ____ Land Use Form not enclosed or incomplete ____ Evidence of Use Form not enclosed or incomplete Additional signature(s) required ____ Part _____ is incomplete Other/Explanation Staff: 503-Date:

Part 2 of 5 - Transfer Application Map

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

		sure that the transfer application map you submit includes all the required items and he 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
\boxtimes		Permanent quality printed with dark ink on good quality paper.
\boxtimes		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
\boxtimes		A north arrow, a legend, and scale.
\boxtimes		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.
\boxtimes		Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
\boxtimes		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	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

	EEE WORKSHEET for DERMANENT TRANSEED (except Substitution)											
	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									
	Types of change proposed:											
	Place of Use Character of Use Point of Diversion/Appropriation											
	Number of above boxes checked = 1 (2a)											
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0											
2	Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » »	2	0									
	Number of water rights included in transfer 2 (3a)											
	Subtract 1 from the number in 3a above: 1 (3b) If only one water right this will be 0											
3	Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » » » » »	3	610									
	Do you propose to add or change a well, or change from a surface water POD to a well?											
	No: enter 0 Yes: enter \$480 for the 1st well to be added or changed 480 (4a)											
	De very propose to add an about a additional wells?											
	Do you propose to add or change additional wells? No: enter 0 X Yes: multiply the number of additional wells by \$410 410 (4b)											
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » » »	4	890									
4	Do you propose to change the place of use or character of use?	4	830									
	No: enter 0 on line 5											
	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											
5	5c by \$410, then enter on line 5 » » » » » » » » » » » » » » » » » »	5	0									
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	2,860									
	Is this transfer:											
	necessary to complete a project funded by the Oregon Watershed Enhancement Board											
	(OWEB) under ORS 541.932?											
	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	If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » » » »	-	0									
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » Transfer Fee:	8	\$2,860									
* [Example for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres)	and	145.0 acres									

*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 \div 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								
	Number of wells included in substitution(2a)										
	Subtract 1 from the number in 2a above: (2b) If only one well this will be 0										
2	Multiply line 2b by \$480 and enter » » » » » » » » » » » » » »	2									
3	Add entries on lines 1 through 2 above » » » » » Fee for Substitution!	ed 30y	OWRD								

14575 - DEC 132024

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO. ADDITIONAL CONTACT NO.					
Arita Volker			(541) 510-0918					
ADDRESS				FAX NO.				
26527 Old River Rd.								
CITY	STATE	ZIP	E-MAIL					
Monroe	OR	97456	lvolker@99w.us					
BY PROVIDING AN E-MAIL ADDRES	s, consent	IS GIVEN TO RECEIVE	ALL CORRESPONDENCE FR	OM THE DEPARTMENT				
ELECTRONICALLY. COPIES OF THE F	INAL ORDE	R DOCUMENTS WILL A	LSO BE MAILED.					

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

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Will McGill Surveying, LL	C		(503) 931-0210	(503) 510-3026
ADDRESS				FAX NO.
15333 Pletzer Rd. SE				
CITY	STATE	ZIP	E-MAIL	
Turner	OR	97392	willmcgill.surveying	g@gmail.com
BY PROVIDING AN E-MAIL	ADDRESS, CONSE	IT IS GIVEN TO RI	ECEIVE ALL CORRESPONDENCE	E FROM THE DEPARTMENT
ELECTRONICALLY. COPIES	OF THE FINAL ORD	ER DOCUMENTS	WILL ALSO BE MAILED.	

Explain in your own words what you propose to accomplish with this transfer application, and why: It is proposed to authorize an APOD for Cert. 46854 that lines up with the end of the existing buried mainline. It is also proposed to authorize two existing wells as APOAs for Cert. 48426. They are connected to the same irrigation system.

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.

DEC 1 3 2024
Salem, OR

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: Corvallis Gazette-Times.
- 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 efund of all or part of a fee is appropriate in the interests of fairness to the public

of the Department.	appropria	ite in the interests (or fairness to the public	or neces	sary to correct an error
I (we) affirm that the informati	on contain	ed in this applicati	on is true and accurate		
Applicant signature		POA L	Incom Volke, Name (and Title if appli	icable)	<u>/2+2</u> -24 Date
Applicant signature		Print	_ Name (and Title if appli	icable)	Date
Is the applicant the sole owner located? X Yes No*	of the land	on which the wate	er right, or portion there	of, propo	osed for transfer is
*If NO, include signatures of all de attach affidavits of consent (and a water right(s) were conveyed.					지수는 이 사람들이 아니는 그들은 그는 사람들이 되었다. 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
Check the following boxes that o	apply:				
The applicant is respon sent to the applicant.	sible for co	ompletion of chang	e(s). Notices and corres	pondence	e should continue to be
The receiving landowner issued. Copies of notice					fter the final order is
Both the receiving land and correspondence sh		5 5 vs. 20 to 2000	10.751 page 1990 - 1990 - 1990	on of cha	nge(s). Copies of notices
At this time, are the lands in thi	s transfer a	application in the p	rocess of being sold?] Yes ⊠	No
If YES, and you know who to below. If you do not know wat a later date.					
If a property sells, the certifunless a sale agreement or https://www.oregon.gov/o	other docu	ument states other	wise. For more informat	tion see:	wner,
RECEIVING LANDOWNER NAME			PHONE NO.	ADDITION	NAL CONTACT NO.
ADDRESS				FAX NO.	Received by OWRD
CITY	STATE	ZIP	E-MAIL		DEC 1 3 2024
Describe any special ownership	circumsta	nces:			
The confirming Certificate shall	be issued i	in the name of:	Applicant Receiving	ng Lando	wner Salem, OR

		or will be located within or served						
IRRIGATION DISTRICT NAME	rict. (Tip: Complete and attach Su ADDRESS	ppiementai romi b.)						
CITY	STATE	ZIP						
The state of the s	of the rights supplied under a wate th a federal agency or other entity							
ENTITY NAME ADDRESS								
CITY	STATE	ZIP						
	ency Requirements, you must list nts within whose jurisdiction wate	all county, city, municipal er will be diverted, conveyed or use						
ENTITY NAME	ADDRESS							
Benton County	4500 SW Research Wa	ау						
CITY	STATE	ZIP						
Corvallis	OR	97333						
	Ţ-							
ENTITY NAME	ADDRESS							
CITY	STATE	ZIP						

DEC 1 3 2024
Salem, OR

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.

				CI	ERTI	FICAT	ΓΕ # <u>4</u>	6854	-		
Descri	otion of Water	Delivery Syst	tem								
System	capacity: 2.9	6 cubic feet p	er s	ecoi	nd (c	fs) O	R				
		gallons p	er m	inut	e (gr	om)					
five ye and ap	ars. Include info	ormation on t the authori	the p	oum plac	ps, c e of	anals	s, pipe	elines,	and sp	rinkler	some time within the la sused to divert, convey, lelivers water through
	cation of Autho POD/POA nam		-								ropriation (POA) 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)	Tv	wp	F	Rng	Sec	х х		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
POD 1	✓ Authorized✓ Proposed	1/1	14	s	5	w	14	NW	NE	100	990' S and 1790' W from NE corner, section 14
POD 2	✓ Authorized✓ Proposed		14	s	5	w	14	sw	NE	100	2530' S and 1400' W from NE corner, section 14
POD 3	☐ Authorized ☐ Proposed		14	s	5	w	14	sw	NE	100	1700' S and 1370' W from NE corner, section 14
	Authorized Proposed										
Check	all type(s) of ch	nange(s) prop	ose	d be	elow	(cha	nge "	CODES	" are	provide	ed in parentheses):
	Place of Use					(0.10.					o Primary Use (S to P)
	Character of	•					_				on/Well (POA)
	Point of Dive	•					_				Appropriation (APOA)
	Additional Po		ion	(ΔΡ(וחכ		_	Substit			appropriation (Al OA)
	Surface Wate	er POD to Gr		ē. 	•		_			*	POD (GOV)
Will all	of the propose	ed changes a	ffect	t the	ent	ire w	ater ı	right?			
⊠ Yes	ATT CONTROL DESCRIPTION OF THE PROPERTY OF THE	nly the Propo ed above to		•						able 2	on the next page. Use the
□No						•				right to	be changedeived by O
□0	complete an					- poi		c v			To strate by O

DEC 1 3 2024

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

Do you have guestions 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 # 46854

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	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.																	
Twp	Rng		Sec	½ ½	Tax Lo	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Tv	vp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
											APOD	14	S	5	w	13	NW	NW	400		19.8	Irrigation	POD 1, 2, 3	1963
											APOD	14	s	5	w	13	sw	NW	400		19.1	Irrigation	POD 1, 2, 3	1963
											APOD	14	s	5	w	13	NW	sw	400		9.8	Irrigation	POD 1, 2, 3	1963
											APOD	14	s	5	w	14	NE	NE	100		40.0	Irrigation	POD 1, 2, 3	1963
											APOD	14	s	5	w	14	NW	NE	100	4	10.7	Irrigation	POD 1, 2, 3	1963
											APOD	14	s	5	w	14	sw	NE	100	5	0.1	Irrigation	POD 1, 2, 3	1963
											APOD	14	s	5	w	14	SE	NE	100		32.0	Irrigation	POD 1, 2, 3	1963
											APOD	14	s	5	w	14	NE	SE	100	3	13.5	Irrigation	POD 1, 2, 3	1963
	<u></u>			TO	OTAL AC	RES:												то	TAL AC	RES:	145.0			

Additional	remark	ks:	

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TACS

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? \(\subseteq\) Yes \(\supseteq\) 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 # _____. Received by OWRD For a change from Supplemental Irrigation Use to Primary Irrigation Use DEC 1 3 2024 Identify the primary certificate to be cancelled. Certificate # Salem, OR 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

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.

do not have a well log. For proposed wells not yet constructed or built, provide "a best

assembling the information necessary to complete Table 3.

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

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

CERTIFICATE # 48426

				O.L.		ICAI	L 11 40	7720			
Descrip	otion of Water	Delivery Syst	em								
System	capacity: 2.5	7 cubic feet p	er se	econ	ıd (c	fs) O l	R				
		gallons pe	er mi	nute	e (gp	m)					
five ye and ap <u>PVC m</u>	ars. Include info ply the water a ainline to linea	ormation on the strain of the	the p zed p yster	oum place <u>m.</u>	ps, c e of	anals use. <u>4</u>	, pipe 40 HP	lines, a turbin	and sp ie pun	orinklers np deliv	some time within the lass used to divert, convey, vers water through buries
	POD/POA nam		•					A STATE OF THE STATE OF	•		ropriation (POA) 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)		wp		Ing	Sec		%	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Home Place Well	Authorized Proposed	BENT 6763	14	s	5	w	14	NE	NE	100	10' S and 460' W from the NE corner, section 14
Well 1	☐ Authorized ☐ Proposed	BENT 6759	14	s	5	w	14	SE	NE	100	1720' S and 740' W from the NE corner, section 14
Well 2	☐ Authorized ☐ Proposed	BENT 6760	14	s	5	w	14	SE	NE	100	1720' S and 140' W from the NE corner, section 14
	Authorized Proposed										
Check	all type(s) of ch		oose	d be	elow	(cha	_				ed in parentheses): o Primary Use (S to P)
	Character of	ā (ā)							5.05	Š	on/Well (POA)
	Point of Dive						_				Appropriation (APOA)
	Additional P	oint of Divers	sion	(APC	DD)		_	Substit			
	Surface Wat POA (SW/GV	er POD to Gr N)	ound	d Wa	ater			Goveri	nment	Action	POD (GOV)
Will al	l of the propos	ed changes a	ffect	t the	ent	ire w	ater r	ight?			
⊠ Yes		nly the Propo ted above to								able 2	on the next page. Use the
☐ No	Complete al	l of Table 2 to	o des	scrib	e th	e por	tion o	f the v	water	right to	be changed.
											Received by OWRE

DEC 1 3 2024

Salem, OR

Table 2. Description of Changes to Water Right Certificate # 48426

List the change proposed for the acreage in each ½ ½. 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	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.																		
Twp	Rng			% %	Tax Lot	Gvt	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	Tv	vp	Rı	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priorit y Date
											APOA	14	s	5	w	13	NW	NW	400		0.2	Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	13	sw	NW	400		0.9	Irrigation	Home Place Well, Well 1, 2	1973
										,	APOA	14	s	5	w	14	SE	NE	100		2.3	Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	13	NW	NW	400		19.8	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	13	sw	NW	400		19.1	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	13	NW	sw	400	8	9.8	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	14	NE	NE	100		40.0	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	14	NW	NE	100	4	10.7	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
							ts.				APOA	14	s	5	w	14	sw	NE	100	5	0.1	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	14	SE	NE	100		32.0	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
							3.7				APOA	14	s	5	w	14	NE	SE	100	3	25.8	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	14	NW	SE	100	6	11.0	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	14	sw	SE	100	2	10.6	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
											APOA	14	s	5	w	14	sw	SE	100	46	0.3	Supplemental Irrigation	Home Place Well, Well 1, 2	1973
				TC	TAL ACI	RES:												то	TAL AC	RES:	182.6			

Additional remarks: 182.6 acres (3.4 acres IR, 179.2 acre IS).

Received by OWRD

DEC 1 3 2024

F	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? \square Yes \square 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.
F	For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)
	Ground water supplemental Permit or Certificate #; Surface water primary Certificate #
F	For a change from Supplemental Irrigation Use to Primary Irrigation Use
	Identify the primary certificate to be cancelled. Certificate #
F	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 <i>proposed wells not yet constructed or built</i> , 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.
n	ole 3. Construction of Point(s) of Appropriation by well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the

Ta

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
								Received	by OWR	0
								DEC 1	3 2024	
								Salem	, OR	

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

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

Home flace Wey WATER WELL REPORT STATE OF OREGON

(Please type or print)

MAR 2 91977

State Well No. ..

(Do not write above this line) RESOURCES DEPT.

	THE COURT	rini -			
1) OWNER:	(10) LOCATION OF	WELL:			
Warne William Volker	County Benton	Driller's well nu	ımber	C/12/	T.
Address Rt.1	34 34 Section	14 T. 14S	R.	5W	W.M.
Monroe, Oregon 97456	Bearing and distance from			r	
(2) TYPE OF WORK (check):	Dearing and distance Long				
New Well					·. ·
If abandonment, describe material and procedure in Item 12.	(14) YEVA MIRATE E RATIFAT	. Completed w	1101		
	(11) WATER LEVEL		2.00		
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was i	irst found	25		ft.
Rotary Driven Domestic Industrial Municipal Domestic Industrial Municipal	Static level 13	ft. below land			3/15/7
Dug 🔲 Bored 🖂 Irrigation 🗆 Test Well 🖾 Other 🖂	Artesian pressure	lbs. per squar	re inch.	Date	
CACING INCOLUE ED.					8
CASING INSTALLED: Threaded Welded X	(12) WELL LOG:	Diameter of well	below ca	sing	
3 "Diam, from 0 ft. to 46 ft. Gage 250	Depth drilled 48	ft. Depth of comp	leted wel	1 4	8 ft.
"Dlam, from ft, to ft, Gage	Formation: Describe color,	texture, grain size	and struc	eture of n	naterials;
"Diam, from ft. to ft. Gage	and show thickness and na with at least one entry for e	ture of each stratu	m and a tion. Rer	quifer per ort each o	netrated, hange in
PERFORATIONS: Perforated? N Yes No.	position of Static Water Lea	el and indicate prin	icipal wa	ter-bearin	g strata.
Type of perforator used Torch cut	MATERIAL		From	То	SWL
1	Topsoil		0	2	
Size of perforations 2 in. by 4 in. 220 perforations from 25 tt to 43 ft.	Clay&Gravel		2	12	
perforations from a second from the second frow the second from the second from the second from the second fro	Sand&Gravel		12	42	
perforations fromft. toft.		7	12	48	
perforations from ft. to ft.	Cemented grav	er	42	40	
(7) SCREENS: Well screen installed? Yes X No			-	1	
Manufacturer's Name		.;·, · <u>;</u> :	1		-
Type Model No.					
Diam, Slot size Set from ft. to ft.	Received	by OWRD	1	1	
Diam. Slot size Set from ft. to ft. to ft.			 	-	
Diant	DEC	1 3 2024	1	-	
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	DEO	I O LOLI			
Was a pump test made? [] Yes [] No If yes, by whom?	Salor	n OB			
	Jaio	11, O11			
Yield: gal./min. with ft. drawdown after hrs.		-			
A", " " " "		77			
Bailer test 300 gal./min. with 15 ft. drawdown after A hrs.					
Artesian flow g.p.m.					
perature of water Depth artesian flow encountered	Work started 3/15	77 19 Comple	ted	3/16/7	7 19
	Date well drilling machine			3/16/7	7 19
(9) CONSTRUCTION:		<i>≔</i> 1 - ·			.
Well seal-Material used	Drilling Machine Opera This well was cons			t cuna	vision
Well sealed from land surface toft.	Materials used and infe	ormation reported	above	are tru	e to my
Diameter of well bore to bottom of seal12 in.	best knowledge and beli	of. Co		7/40/	'ee
Diameter of well bore below seal	[Signed] (Donald	be towing	. Date	3/18/	<i>.</i>], 1 ₁ 9
Number of sacks of cement used in well seal9	M Summa)	achine Operator			
Number of sacks of bentonite used in well seal sacks	Drilling Machine Opera	tor's License No.		043	
Brand name of bentonite	Water Well Contractor's	Certification			
Number of pounds of bentonite per 100 gallons	water wen contractors		diati	and this	nonent in
of water lbs./100 gals.		knowledge and be	elief.		
Was a drive shoe used? XYes I No Plugs Size: location ft.		rilling Co.	Inc.		
Did any strata contain unusable water? Yes No	Name Corvallis I	or corporation)		Type or pr	int)
Type of water? depth of strata	Address 3440 SW 32				
	01	Ni	10		
Method of sealing strata off	[Signed]	(Water Well Con	MANA.	Щ	
Was well gravel packed? Tyes Kno Size of gravel:			3/18	777	40
Gravel placed from ft. to ft.	Contractor's License No		K TY		, 19
(USE ADDITIONAL S	SHEETS IF NECESSARY)	. 上生	0 1 9) = 8	SP*45656-119

STATE OF OREGON

WATER WELL REPORT

Gent RECEIVED 6759 MAY S 0 1939 @

Well 1		
	11/1/1/13	
(START ČĀRD)	# 9893	

(as required by Oka 551.765)	(START CARD) #	
(1) OWNER; Well Number: WALER F	ESO JA OCATION OF WELL by legal description:	
Name Bill Olses SAL	M. OREGO 2770 Latitude	, ,
	Township Nors, range Est W,	WM.
THE PARTY OF THE PROPERTY OF		
(2) TYPE OF WORK:	Tax Lot Lot Block Subdivision	
New Well Deepen Recondition Abandon	Street Address of Well (or nearest address)	
(3) DRILL METHOD		
Rotary Air Rotary Mud A Cable	(10) STATIC WATER LEVEL:	100
(4) PROPOSED USE:	ft. below land surface. Date 5/5	107
Domestic Community Industrial Irrigation	Artesian pressure lb. per square inch. Date	
☐ Thermal ☐ Injection ☐ Other	(11) WATER BEARING ZONES:	
(5) BORE HOLE CONSTRUCTION:	Depth at which water was first found	
Special Construction approval Yes No Depth of Completed Well 35 ft	From To Estimated Flow Rate	SWL
Yes No L Explosives used Type Amount	19 34 700+	8
HOLE SEAL Amount Diameter From To Material From To sacks or pounds		
16" 0 18 Cement 0 18 14. Sacks	(12) WELL LOG: Crowd elevation	
12" 18 35	Ground elevation	
	Material From To	SWL
How was seal placed: Method		
Other	7005011	62
Backfill placed fromft. toft. Material	Sand & Gravel 2 19	8
Gravel placed fromft. toft. Size of gravel	Sand & Gravel Blue 33 35	8
(6) CASING/LINER:		
Diameter From To Gauge Steel Plastic Welded Threaded	37.27	
Casing: 12" 4: 1 35 250 M	7	
Liner:		
	Received by OWRD	
Final location of shoe(s) 35 37	·	
(7) PERFORATIONS/SCREENS:	DEC 1 3 2024	
Perforations Method Torch Cut		
Screens Type Material	Salem, OR	
Slot Tele/pipe From To size Number Diameter size Casing Liner		
19 34 3x5 295 D		
	- 1.1/90 - 1.2/90	<u> </u>
	Date started 5/4/89 Completed 5/5/89	<i>-</i>
(8) WELL TESTS: Minimum testing time is 1 hour	(unbonded) Water Well Constructor Certification:	
Flowing	I certify that the work I performed on the construction, altered abandonment of this well is in compliance with Oregon well cons	ation, o
☐ Pump ☐ Bailer	standards. Materials used and information reported above are true to	my bes
Yield gal/min Drawdown Drill stem at Time	knowledge and belief. WWC Number	411
700+ 35 1hr.	Signed Kuts D Mules Date	· · /
	(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or aband	donment
Temperature of water Depth Artesian Flow Found Was a water analysis done?	work performed on this well during the construction dates reported a	bove. al
Did any strata contain water not suitable for intended use? Too little	work performed during this time is in compliance with Oreg construction standards. This report is true to the best of my knowle	gon wel edge and
□ Salty □ Muddy □ Odor □ Colored □ Other	belief. WWC Number 2	
Depth of strata:	Signed Onald for Date 5/20/	89
ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SEC	OND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER	9809C 3/8

MEGENEU

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

JUL 26 1988 6760 6760

well 2

145/5W-13 145/5taxt Card

(1) OWNER; WATER RESOURCES DETY	(9) LOCATION OF WELL by legal description:	
Name INTRE TORMS Address 26527 ON River Cd.	County Bentsh Vatitude Longitude Longitude For W. J. Nor S, Range 56 E or W. J.	<u> </u>
City MANRAL State OR Zip 97456		WM
(2) TYPE OF WORK:	Section	
New Well Deepen Recondition Abandon	Tax Lot Lot Block Subdivision Street Address of Well (or nearest address) Same	
(3) DRILL METHOD	ones Audies of Well (of hearest address)	
Rotary Air Rotary Mud Cable	(10) STATIC WATER LEVEL:	
Other	ft. below land surfaçã. Date 43	0/88
(4) PROPOSED USE:	Artesian pressure lb. per square inch. Date	/
☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation	(11) WATER BEARING ZONES:	
☐ Thermal ☐ Injection ☐ Other	Depth at which water was first found	
BORE HOLE CONSTRUCTION:		SWL
Special Construction approval Yes No Depth of Completed Well 33 ft.		14/C
Explosives used Type Amount	19 32 3001	144
HOLE SEAL Amount		
Diameter From To Material From To sacks or pounds		
12 18 33 Cement 0 18 13 Sacks	(12) WELL LOG: Ground elevation	
16 10 13	Material .: From To	SWL
		SWL
How was seal placed: Method	Sandy Logan 3 15	
Other	Clay of Grovel 15 17	
Backfill placed fromft. toft. Material	Sound & GRAVEL 17 30	14
Gravel placed fromft. toft. Size of gravel	Comented Gravel 30 33	
(6) CASING/LINER:		
Diameter From To Gauge Steel Plastic Welded Threaded		
Casing: 10 12 2 4.50	· ·	
Liner:		
	Beceived by OWRD	
location of shoe(s) 33 34	Received by OWRD	
PERFORATIONS/SCREENS:	DEC 1 9 2024	
Perforations Method Tokech Cut	DLC 1 5 2021	
Screens Type Material	Colomo	
Slot Tele/pipe	- Salem, DR	
m To size Number Diameter size Casing Liner		
10 90 104-214		·
19 32 1975 310		
	*	
	1/20/20 //20/20	<u> </u>
	Date started 6/35/88 Completed 6/30/88	
(8) WELL TESTS: Minimum testing time is 1 hour	(unbonded) Water Well Constructor Certification:	
Flowing	I certify that the work I performed on the construction, altera abandonment of this well is in compliance with Oregon well cons	
☐ Pump ☐ Bailer ☐ Air ☐ Artesian	standards. Materials used and information reported above are true to	
Yield gal/min Drawdown Drill stem at Time	knowledge and belief.	
300+ 33 1hr.	Signed Date	
	(bonded) Water Well Constructor Certification:	
Temperature of water Depth Artesian Flow Found	I accept responsibility for the construction, alteration, or aband work performed on this well during the construction dates reported a	
Was a water analysis done? Yes By whom None	work performed during this time is in compliance with Oreg	gon well
Did any strata contain water not suitable for intended use? Too little	construction standards. This report is true to the best of my knowledge belief.	edge and
Salty Muddy Odor Colored Other None	WWC Number	137
Depth of strata:	Signed Donald formy Date 7	10/ 22
WHITE COPIES - WATER RESOURCES DEPARTMENT YELLOW C	COPY - CONSTRUCTOR PINK COPY - CUSTOMER 9	9809C 10/86

Salem, OR

DURABLE LIMITED POWER OF ATTORNEY OF ARITA VOLKER

- LET IT BE KNOWN, that I, Arita Volker, have made, constituted and appointed and by these presents do make, constitute and appoint my son, Lincoln Volker, as my true and lawful attorney-in-fact, to act jointly or individually for me and in my name, place and stead and for my use and benefit for the following limited purposes:
- 1. **DISPOSITION OF REAL PROPERTY:** To lease, let, grant, bargain, sell, contract to sell, convey, exchange, remise, release and dispose of any real of which I am now or hereafter may be possessed or in which I may have any right, title or interest, including rights of homestead, for any price or sum and upon such terms and conditions as to either of my said attorney-in-fact may seem proper;
- 2. AGREEMENTS: To sign, make, execute, acknowledge and deliver in my name any and all deeds, contracts, bills of sale, leases, promissory notes, drafts, acceptances, evidences of debt, obligations, mortgages, trust deeds, land contracts, pledges, satisfactions, releases, receipts, bonds, writs and any and all other instruments whatsoever related to the disposition of my real property, with such general or special agreements and covenants, including those of warranty, as my attorney-in-fact may seem right, proper and expedient;
- 4. **DURABILITY:** The authority granted herein shall be of unlimited duration, unless and until it is revoked by me in writing or by the event of my death. It is my intent that this be a durable power of attorney and the authority granted herein shall be exercisable despite my subsequent disability or incompetence, pursuant to ORS 127.005, as may be hereafter amended. These powers of attorney shall be exercisable by my attorney-in-fact on my behalf, notwithstanding that I may become legally disabled or incompetent.
- 5. **THIRD PARTY RELIANCE:** Third persons may conclusively rely upon the continued validity of this Durable General Power of Attorney until receiving actual notice of its revocation. Third persons may rely upon a copy of this instrument in its entirety or any portion thereof certified as such by my attorney-in-fact.
- 6. **GOVERNING LAW:** All questions pertaining to the validity, interpretation and administration of this power shall be determined in accordance with the laws of the State of Oregon.
- 7. **MISCELLANEOUS:** In construing this Durable General Power of Attorney, if the context so requires, the singular pronoun shall be taken to mean and include the plural, the masculine, the feminine and the neuter and that generally all grammatical changes shall be made, assumed and implied to make the provisions hereof apply equally to corporations and to more than one individual.

DURABLE LIMITED POWER OF ATTORNEY OF ARITA VOLKER

Page 1 of 2

IN WITNESS WHEREOF, 2024.	Arita Volker	ay of
STATE OF ARIZONA, County of Mohav	/e) ss.	
The foregoing instrument was acknowled by Arita Volker.	nowledged before me on this/7 day of	
DONNA ASEBROEK Notary Public - Mohave County Commission No. 664791 My Commission Expires 05/14/2028	NOTARY PUBLIC FOR ARIZONA My Commission Expires: 5/14/28	Received by O
		DEC 1 3 2024
ACCEPTANCE OF APPO	INTMENT AS ATTORNEY-IN-FACT	Salem, OR
I hereby accept this appointment as on this Z5 day of September, 2024	s attorney-in-fact for Arita Volker, who is my 1	nother,
	Lincoln Volker	
STATE OF OREGON, County of Benton) ss.	
The foregoing instrument was ackn September, 2024, by Lincoln Volker.	owledged before me on this Zz day of	
OFFICIAL STAMP PAIGE REVEE COCHRANE NOTARY PUBLIC-OREGON	NOTARY PUBLIC FOR OREGON	

My Commission Expires: 11-8-2025

AUTOMATIC REVOCATION: Upon the death, disability, or

incapacity of my attorney-in-fact, this power of attorney shall automatically be revoked and

without further force and effect.

MY COMMISSION EXPIRES NOVEMBER 08, 2025

OF ARITA VOLKER

DURABLE LIMITED POWER OF ATTORNEY

Page 2 of 2

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.

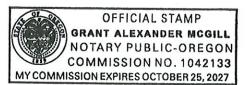
State o	f Oregon)					
County	of <u>Benton</u>)) ss					
, <u>Linco</u>	LN VOLKER, in m	y capacity as	Operat	or				
	address <u>2652</u>				<u>5</u>			Received by OWRE
elepho	one number (<u>5</u>	41)510-0918	, being first (duly swor	n depose	and say:		DEC 1 3 2024
1.	My knowledg	e of the exer	cise or statu	s of the v	vater righ	t is based o	n (check one):	
	□ Person	onal observat	ion		Professi	onal expert	ise	Salem, OR
2.	I attest that:							
	Certif	ficate # <u>4685</u>	<u>4, 48426</u> ; O F	₹			place of use fo	
i	∐ My kı	nowledge is s	pecific to th	e use of v	water at t	he following		hin the last five years:
	Certificate #	Township	Range	Mer	Sec	1/4 1/4	Gov't Lot or DLC	Acres (if applicable)
	12							
			=					
OR		I	H		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Confirming Co	ertificate#_	has bee	en issued	within th	e past five y	ears; OR	
	instream leas	e number is:	(Note	e: If the e	ntire righ	t proposed		years. The eased instream.); OR
	The water rig					tation that a	a presumption	of forfeiture for non-use
	Water has be 10 years for C						opriation for n	nore than
			(c	ontinues	on rever	se side)		14575 -

- 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 of Affiant	

/2-/2-24 Date

Signed and sworn to (or affirmed) before me this 12 day of 2024.



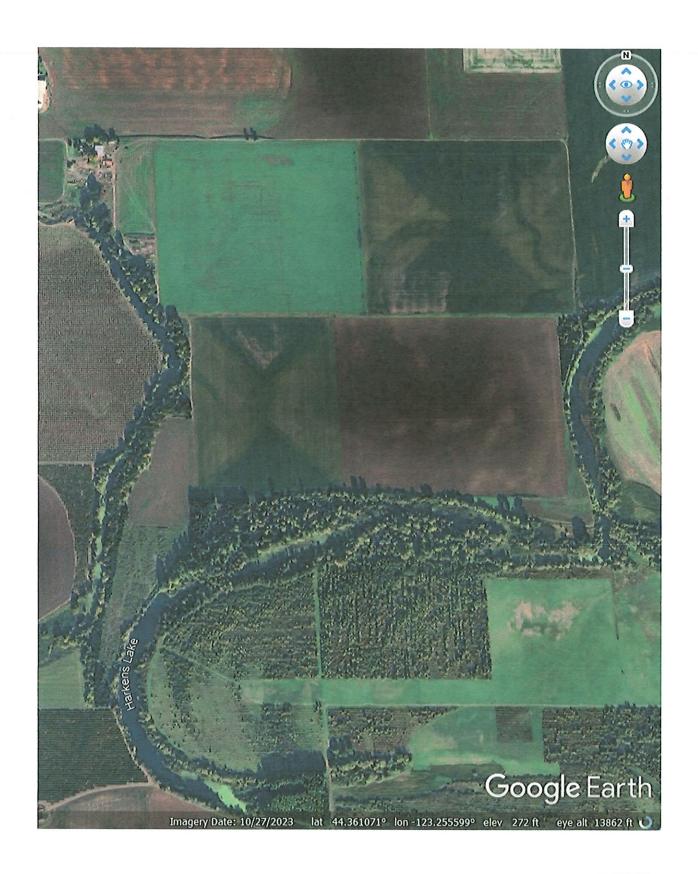
Notary Public for Oregon

My Commission Expires: 10/25/27

Supporting Documents	Examples					
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					
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	 Power usage records for pumps associated with irrigation use Fertilizer or seed bills related to irrigated crops Farmers Co-op sales receipt 					
Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	 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 					
Aerial photos containing sufficient detail to establish location and date of photograph	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. Sources for aerial photos: OSU –www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com					
Approved Lease establishing beneficial use within the last 5 years Received by OWRD	Copy of instream lease or lease number					

DEC 1 3 2024

14575 -



Received by OWRD
DEC 1 3 2024

Salem, OR

14575 -

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DEC 1 \$ 2024
Salem, OR

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

NAME								PHO	NE		
Arita Volker								(54:	(541) 510-0918		
MAILING	ADDRESS										
26527	Old River	Rd.									
CITY				STATE	ZIP	EMAIL					
Monroe				OR	97456	lvolke	volker@99w.us				
	ınd Locati										
(transport	ed), and/c	or used or	developed.	Applicants	for municip	al use, or	oe diverted (i irrigation us nformation r	es within irr	igation dis		
Township	Range	Section	14 14		Plan Designati Rural Resident					Proposed Land Use:	
14S	5W	14	SWNE	100	EFU	!	⊠ Diverted	Conveyed	Used	farming	
145	5W	14	SENE	100	EFU		□ Diverted	Conveyed	Used	farming	
							Diverted	Conveyed	Used		
							☐ Diverted	Conveyed	Used		
List all cou	inties and	cities whe	re water is	proposed to	o be diverte	d, conve	/ed, and/or ι	ised or deve	loped:		
Benton											
B. <u>Descri</u>	ption of F	roposed	<u>Use</u>				omitted for <u>e</u>	each county	and city, a	s applicable.	
Perm	it to Use or ed Water U	Store Wate	er 🛚 Wa	regon Wate ater Right Tra change of Wa	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Permit			ter Registra	tion Modification	
Source of	water:	Reservo	ir/Pond	☐ Ground	Water	Surfac	e Water (nam	e) <u>Martin's</u>	<u>Lake</u>		
Estimated	quantity o	of water ne	eded: <u>456</u>	<u>.5</u>	cubic fee	t per seco	nd 🗌 gal	lons per minu	ite 🛛 a	icre-feet	
Intended use of water:											
Briefly des	cribe:							-			
It is prop 48426.	osoed to a	authorize	an additio	onal POD to	o Cert. 468	54 and t	wo additio	nal POAs (e	xisting we	ells) to Cert.	

Note to applicant: For new water right applications only, if the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt on the bottom of page 4 and include it with the application filed with the Oregon Water Resources Department.

See Page 4 ->

Received by OWRD

DEC 1 3 2024

Last Revised: 10/2023

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 be	elow and provide the requested info	<u>rmation</u>		
Land uses to be served by the proposed regulated by your comprehensive plan.	water use(s), including proposed construction Cite applicable ordinance section(s): _55.	on, are allowed	outright or are not	
approvals as listed in the table below. (P	water use(s), including proposed construction Please attach documentation of applicable landland-use decision and accompanying finding ave not ended, check "Being Pursued."	nd-use approva	als which have	
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:		
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued	
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued	
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued	
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued	
	pecial land use concerns or make recommend osed use of water in the box below or on a se		Oregon Water	
		,		
Name: Mes Whigh	Title: Asso Date: 12/1	ciale F	lamer	
Signature:	Date: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	2/2024		
Governmental Entity: Benfon	County OR Phone: 541.	-766-3	559	
Receipt Ackno	owledging Request for Land Use Info	rmation		
this form while the applicant waits, you may have 30 days from the date of OWRD's Publi Oregon Water Resources Department. Please	ne applicant. For new water right applications of complete this receipt and return it to the application to Submit the complete of the application to submit the complete note while OWRD can accept a signed receip impleted Land Use Information Form is required	licant. If you sign pleted Land Use ot as part of intal	n the receipt, you will Information Form to ke for an application	
Applicant Name:		Received	by OWRD	
Staff Name:	Title:	DEC 1	1 3 2024	
Staff Signature:	Date:	Salar	OB	
Governmental Entity:	Dhana	Salen	1, 011	