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

		For questions, please call (503) 986-0900, and ask for Transfer Section.	RECEIVED	
Chec	k all iter	ms included with this application. (N/A = Not Applicable)	FEB 2 , 0 202 5	_
\boxtimes		Part 1 – Completed Minimum Requirements Checklist.	OWAD	
\boxtimes	·	Part 2 – Completed Transfer Application Map Checklist.		
\boxtimes		Part 3 – Application Fee, payable by check to the Oregon Water Resou completed Fee Worksheet, page 3. Try the new online fee calculator a http://apps.wrd.state.or.us/apps/misc/wrd fee calculator.		and
\boxtimes		Part 4 – Completed Applicant Information and Signature.		
		Part 5 – Information about Water Rights to be Transferred: How many be transferred? 1 List them here: Certificate: 78603 Please include a separate Part 5 for each water right. (See instruction NOTE: A separate transfer application is required for each water criteria in OAR 690-380-3220 are met.	ons on page 6)	to
		Attachments:		
\boxtimes		Completed Transfer Application Map.		
\boxtimes		Completed Evidence of Use Affidavit and supporting documentation.		
\boxtimes	∏ N/A	Affidavit(s) of Consent from Landowner(s) (if the applicant does not overight is on.)		
	⊠ n/a	district. Complete when the transfer applicant is not the irrigation dist	rict.	
	∏ N/A	signature (or signed land use form receipt stub) from each local land use water is to be diverted, conveyed, and/or used. Not required if water conveyed, and/or used only on federal lands or if all of the following a place of use only, b) no structural changes, c) the use of water is for in the use is located within an irrigation district or an exclusive farm use	se authority in wh is to be diverted, pply: a) a change i rigation only, and o zone.	in d)
\boxtimes	□ N/A	point(s) of appropriation.		
	⊠ N/A	Geologist Report for a change from a surface water point of diversion point of appropriation (well), if the proposed well is more than 500' fr source and more than 1000' upstream or downstream from the point 690-380-2130 for requirements and applicability.	om the surface wa	ater
		(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 enclose Additional signature(s) required is incomplete	ed or incomplete	
	1	Other/Explanation 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.

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,			ne existing water right map. Check all boxes that apply.
 □ 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. □ N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and labe] N/A	see http://apps.wrd.state.or.us/apps/wr/cwre license view/. CWRE stamp and signature
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latitude-longitude coordinates may be expressed as either degrees-minutes for one 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°).		□ N/A	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 are used, least one digit after the decimal (example – 42°32′15.5″) or degrees-decimal with five or

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	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 1 (3a)		
	Subtract 1 from the number in 3a above: 0 (3b) If only one water right this will be 0		
3	Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » » » » »	3	\$0
	Do you propose to add or change a well, or change from a surface water POD to a well?		
	No: enter 0 X Yes: enter \$480 for the 1 st well to be added or changed <u>\$480 (4a)</u>		
	Do you propose to add or change additional wells?		
	No: enter 0 Yes: multiply the number of additional wells by \$410 \$0 (4b)		
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » » » »	4	\$480
	Do you propose to change the place of use or character of use?		
	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 » » » » » » » » » » » » » »		
l <u>.</u>	If 5b is greater than 0, round up to the nearest whole number:(5c) and multiply	_	40
5	5c by \$410, then enter on line 5 » » » » » » » » » » » » » » » » » »	5	•
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$1,840
	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 » » » » » » » » » » » » » » » » » »	7	\$0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » Transfer Fee:	8	\$1,840

*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).

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

Part 4 of 5 - Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.	
Vitaly Anfilofieff		503-307-7660			
ADDRESS			FAX NO.		
29099 S. Jackson Rd					
CITY	STATE	ZIP	E-MAIL		
Canby	OR 97013 Vitaly.aspencp@gm				

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

AGENT/BUSINESS NAME Doann Hamilton / Pacif	ic Hydro-Geology,	Inc.	PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946 (cell)
ADDRESS 18487 S. Valley Vista Ro	oad			FAX NO. (503) 632-5983
CITY	STATE	ZIP	E-MAIL	
Mulino	m			

Explain in your own words what you propose to accomplish with this transfer application, and why:

With the installation of Well 5 (CLAC 70589) for T-11659, the well performance was determined capable of irrigating the rest of our property south of the creek, thereby eliminating the need for Well 4 (CLAC 12545) in this area and leaving Well 4 to irrigate the northern portion.

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 an
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.

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: Woodburn Independent.
- 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.

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Applicant Signature		Vital. Print Nam		itle if applicable)	Date
Applicant Signature		Print Nam	ne (and T	itle if applicable)	Date
Is the applicant the sole owner located? Yes No*	of the land	on which	the wate	r right, or portion the	ereof, proposed for transfer is
					ses if different than the applicant or individuals/entities to which t
Check the following boxes that	apply:				
The applicant is responsent to the applicant.	sible for co	mpletion o	of change	e(s). Notices and corr	espondence should continue to
The receiving landown issued. Copies of notice					change(s) after the final order is wner.
Both the receiving land and correspondence sh				Contract of the street of the	etion of change(s). Copies of not
At this time, are the lands in th	s transfer a	application	in the pr	rocess of being sold?	Yes No
at a later date. If a property sells, the certi unless a sale agreement or https://www.oregon.gov/center-th/	other docu	ment state	es otherv	vise. For more inforn	nation see:
ECEIVING LANDOWNER NAME				PHONE NO.	ADDITIONAL CONTACT NO.
DDRESS					FAX NO.
CITY	STATE	ZIP		E-MAIL	
Describe any special ownership	circumsta	nces:			
	he issued i	n the name			
The confirming Certificate shall	De 133ueu 1		e of:	Applicant Rece	ving Landowner
Check here if any of the	water rig	hts propo	sed for	transfer are or wi	l be located within or serve
Check here if any of the an irrigation or other water	water rig	hts propo	sed for	transfer are or wi	l be located within or serve
Check here if any of the an irrigation or other water	water rig	hts propo	sed for plete ar	transfer are or wi	l be located within or serve
Check here if any of the in irrigation or other water RRIGATION DISTRICT NAME	water rig	hts propo	sed for plete ar	transfer are or wi	l be located within or serve
Check here if any of the an irrigation or other water RRIGATION DISTRICT NAME	water rig district. (hts propo Tip: Com	osed for plete ar ADDRESS STATE	transfer are or wind attach Supplem	l be located within or served ental Form D.)
an irrigation or other water IRRIGATION DISTRICT NAME NA CITY Check here if water for	water rig district. (hts propo Tip: Com	osed for plete ar ADDRESS STATE	transfer are or wind attach Supplem	l be located within or served ental Form D.)

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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 Clackamas Co. Department of Transportation and Development, Planning Division	150 Beavercreek Road				
CITY	STATE	ZIP			
Oregon City	Oregon	97045			

FEB 2 0 2025 OWRD

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 # 78603

Description of Water Delivery System System capacity: _____ cubic feet per second (cfs) OR 152.7 gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use.

Water is pumped from the authorized Well 4 (CLAC 12545) using a 30 Hp submersible pump to convey water through a 5-inch buried PVC mainline to supply a drip irrigation system and a hard hose traveler.

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)	T	wp	F	Rng	Sec	*	Х	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 4	Authorized Proposed	CLAC 12545	4	s	1	E	27	sw	sw	DLC 43	340 feet north and 1,170 feet east from the SW corner Section 27
Well 5	☐ Authorized ☐ Proposed	CLAC 70589	4	s	1	E	34	sw	NW	DLC 43	50 feet north and 980 feet west from the SE corner of DLC 43

								OI DLC 43			
Check	Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):										
	Place of Use	(POU)		[Supplementa	l Use to	Primary Use (S t	o P)		
	Character of	Use (USE)		[X I	Point of Appr	opriation	on/Well (POA)			
	Point of Dive	ersion (POD)		[Additional Po	int of A	appropriation (AP	OA)		
	Additional Po	oint of Divers	ion (APOI	D) [Substitution ((SUB)				
	Surface Wate POA (SW/GV	er POD to Gro V)	ound Wat	er [Government	Action	POD (GOV)			
Will all	of the propose	ed changes a	ffect the	entire w	ater r	ight?					
Yes	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.								Use the		
⊠ No	Complete all	of Table 2 to	describe	the port	tion o	f the water r	ight to	be changed. RECEIVED			
								FEB 2.0 2025			

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 # 78603

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.																
Tw	р	Rng	g	Sec	,	Y4 Y4	Tax	2012032000 F	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	%	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
4	s	1	E	34	NE	NV	V 40	00	DLC 43	2.3	IR	Well 4	5-31- 1983	POA	4	s	1	E	34	NE	NW	400	DLC 43	2.3	IR	Well 5	5-31-198
4	s	1	E	34	NW	NV	V	00,	DLC 43	11.8	IR	Well 4	5-31- 1983	POA	4	s	1	E	34	NW	NW	400, 501	DLC 43	11.8	IR	Well 5	5-31-198
4	s	1	E	34	sw	/ NV	v 40	00, 01	DLC 43	8.7	IR	Well 4	5-31- 1983	POA	4	s	1	E	34	sw	NW	400, 501	DLC 43	8.7	IR	Well 5	5-31-198
4	s	1	E	34	SE	NV	V 40	00	DLC 43	3.7	IR	Well 4	5-31- 1983	POA	4	s	1	E	34	SE	NW	400	DLC 43	3.7	IR	Well 5	5-31-198
				-		+	+																				
						TO	OTAL	ACR	RES:	26.5											то	TAL AC	RES:	26.5			

Additional remarks: None.

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For	Place	of Us	e or	Character	of	Use	Changes	- NA
-----	-------	-------	------	-----------	----	-----	---------	------

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: NA.

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 # NA; Surface water primary Certificate # NA.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

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

\boxtimes	Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated
	with the corresponding well(s) in Table 1 above and on the accompanying application map.
	Tip: You may search for well logs on the Department's web page at:
	http://apps.wrd.state.or.us/apps/gw/well log/Default.aspx

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
Well 4	Yes	CLAC 12545		See Well Log CLAC 12545						Not less than full
Well 5	Yes	CLAC 70589	See Well Log CLAC 70589						rate of water right	

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b 14 OWAD

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	ate of Oregon										RECEIVED	
County	of CLACKAMAS	1		·							FEB 2,0 2025	
I, <u>VITAL</u>	Y ANFILOFIEFF, ir	n my ca	pacity	as <u>par</u>	t owne	er / OPER	ATOR,				OWAD	
mailing	g address <u>2909</u>	9 S. JAC	KSON R	D., CAN	BY, OR	97013					OWID	
teleph	one number (<u>5</u>	03) 30	7-7660	, being	first d	luly swo	rn depo	se and s	say:			
1.	My knowledg				status	of the w	: ::::::::::::::::::::::::::::::::::::	ht is ba sional e				
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 #	Ra	nge	Mer	Sec	% %		Gov't Lot or DLC	Acres (if applicable)			
	78603	4	s	1	E	WM	34	NE	NW	DLC 43	2.3	
	78603	4	S	1	E	WM	34	NW	NW	DLC 43	11.8	
	78603	4	S	1	E	WM	34	sw	NW NW	DLC 43	8.7	
	78603	4	S	1	E	wm	34	SE		DLC 43	3.7	
OR								<u> </u>				
	Confirming C	ertifica	te#	ha	s beer	n issued	within t	he past	five ye	ars; 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 <u>not</u> leased instream.); OR											
	The water rig would be reb							ntation	that a	presumption	of forfeiture for non-use	
	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)

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

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above 1/22/2025

statements, my application will be considered incomplete.

Signed and sworn to (or affirmed) before me this 22 day of 3 day of 3

OFFICIAL STAMP MILBRY GARCIA NOTARY PUBLIC - OREGON COMMISSION NO. 1029460 COMMISSION EXPIRES OCTOBER 16, 2026

Signature of Affiant

My Commission Expires: October 16, 2026

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	Copy of instream lease or lease number

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14614 -

FEB 2,0 2025



45°11 14614

Application for Water Right Transfer



Oregon Water Resources Department

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

Consent by Deeded Landowner

State of Oregon)			
County of <u>Clackamas</u>)ss)	RECEIVE	D	
I <u>Demitry Anfiloflieff</u> in my/our capacity a	as part owner	FEB 2,0 202	25	
T Definitify Affinioniem in my/our capacity a	as <u>part owner</u> ,	OWAD		
mailing address 29099 S. Jackson Rd, Can	nby, OR 97013,	311112		
telephone number <u>503-951-2076</u> , duly sv	worn depose and say th	at I		
consent to the proposed change to Wate	er Right Certificate Num	ber <u>78603</u>		
described in a Water Right Transfer Appli	ication (T- <u>NA</u>),	(hanneles sumbas if lessure)		
submitted by Vitaly Anfiloflieff		(transfer number, if known)		
on the property in tax lot number(s) 400	and 501, Section 34	Township 4S	Range <u>1E</u> ,	

located at <u>No site address for either tax lot; however, both are located just south of TL 4 1E 27, Lot 1900</u>

located at: 29099 S. Jackson Rd, Canby, OR 97013

(site address)

Signature of Affiant

Signature of Affiant

)ate

01/22/2025

Date

Subscribed and Sworn to before me this 22 day of Tanuary

Man G.D. Manuari

Notary Public for Oregon

My commission expires October 16, 2026

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

								PHO	NE	
Vitaly An	nfilofieff							503	-307-766	0
MAILING A	ADDRESS									
29099 S.	Jackson	n Rd.								
CITY				STATE	ZIP	EMAIL				
Canby				OR	97013	Vitaly.	aspencp@	gmail.com	ı	
transporte	ide the fo d), and/o	llowing info r used or d	eveloped.	Applicants	for municip	oal use, or	oe diverted (ses within irr	igation dis	
Township	Range	Section	4 ¼	Tax Lot #	Plan Designat Rural Resident	tion (e.g.,	nformation r	Water to be:	iow.	Proposed Land Use:
45	1E	34		400	EFU	J	☐ Diverted	Conveyed	Used	Irrigation
45	1E	34		501	EFL	J	Diverted	Conveyed	Used	Irrigation
							☐ Diverted	☐ Conveyed	Used	
							Diverted	☐ Conveyed	Used	
			e water is	proposed t	to be diverte	ed, conve	yed, and/or u	used or deve	loped:	
Clackama	s County	/								
		nd Use Info		orm must	be complete	ed and su	bmitted for <u>e</u>	each county	and city, as	s applicable.
ype of app	lication t	o be filed w	vith the Or		er Resources					
	to Use or	Store Water		ter Right Tr hange of W			Amendment o		ter Registrat	tion Modificati

This Land Use Information Form is to accompany a water right transfer application that proposes to change the point of appropriation (well) for a portion of an existing water right (Certificate 78603).

cubic feet per second

Surface Water (name)

Industrial

Instream

gallons per minute

Other_

Ground Water

Commercial

Quasi-Municipal

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 🔿

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acre-feet

Domestic for _____ household(s)

FEB 2.0 2025

Last Revised: 10/2023

OWAD

Source of water: Reservoir/Pond

Intended use of water:

Briefly describe:

Estimated quantity of water needed: 79.8

Municipal

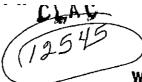
For Local Government Use Only

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

Please check the appropriate box	below and provide the	requested inf	ormation	
□ Land uses to be served by the propose regulated by your comprehensive plant.				
☐ Land uses to be served by the propose approvals as listed in the table below already been obtained. Record of Act been obtained but all appeal period.	r. (Please attach documentation ion/land-use decision and acc	on of applicable l companying findi	and-use approv	als which have
Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applica & Ordinance Section F		Land-L	Jse 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
Local governments are invited to express Resources Department regarding this pr	-			-
Clackamas County's ZDO allows farm us applicant is growing Marijuana, which is 506ad88a-76	not proposed currently.	is irrigation for b	lackberry farm. I	Land Use required IF
Name: Mya Ganzer 4c29-b1bf-	DN: CN = 506ad88a-766d- 4c29-b1bf-f269eb813d5a	_Title: Planner	1	
f269eb813d5	a. / Date: 2025.02.18 11:52:01 -	_ Date: <u>2/18/25</u>		
Governmental Entity: Clackamas Coun	ty	Phone: <u>503 74</u>	12 4520	
Receipt Acki	nowledging Request for	Land Use Info	rmation	
Note to Local Government Representative Please complete this form and return it to this form while the applicant waits, you me have 30 days from the date of OWRD's Pul Oregon Water Resources Department. Ple for a new permit to use or store water, a co	the applicant. For new water ri ay complete this receipt and re blic Notice of the application to ase note while OWRD can acce	curn it to the appl submit the comp ot a signed receip	licant. If you sign pleted Land Use I It as part of intak	the receipt, you will nformation Form to se for an application
Applicant Name: Vitaly Anfilofieff		· 		
Staff Name: Mya Ganzer 506ac 766d-	4c-99_ b1bf-/269eb813d5a	_ Title: <u>Planner</u>	1 .	
Staff Signature: <u>b1bf-</u>	/DN: CN = 506ad88a-766c 4c29-b1bf-f269eb813d5a /Date: 2025.02.18 11:52:3	_ Date: _ 2/18/25	; 	
Governmental Entity: Clackamas 2690	b813d5à vos ou	_ Phone: <u>_ 503 7</u> -	42 452(PEC F	:WED

Phone: _503 742 452 RECEIVED

WATER WELL REPORT STATE OF OREGON



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MAR 2 1983

State Well No. 45/1E-2)cd

WATER RESOURCES DEPT. SALEM, OREGON

	State Well No	12 IE 9/16
T.	State Permit No.	

1) OWNER:	(10) LOCATION OF WELL:							
Name Boyd Yoder	County Clackamas Driller's well r	umber						
Address 29099 S. Jackson Rd.	S.E. 4 S.W. 4 Section 27 T. 4 S.	R. 1 E. W.M.						
City Canby State OR 97013	Tax Lot # Lot Blk	Subdivision						
2) TYPE OF WORK (check):	Address at well location: Same							
New Well X Deepening □ Reconditioning □ Abandon □	(11) WATER LEVEL: Completed we							
f abandonment, describe material and procedure in Item 12.	_ ~~	:1L•						
(3) TYPE OF WELL: (4) PROPOSED USE (check):	37	ft. ad surface. Date 2-22-83						
Rotary Air 🔉 Driven 🛘 Domestic 🔾 Industrial 🗎 Municipal 🗎		square inch. Date						
Mud	(12) WELL LOG: Diameter of well below to	using 811						
(5) CASING INSTALLED: Steel Plastic	Depth drilled 282 ft. Depth of co							
Threaded Welded	Formation: Describe color, texture, grain size and struc	ture of materials; and show						
	thickness and nature of each stratum and aquifer penetr for each change of formation. Report each change in po	ated, with at least one entry sition of Static Water Level						
" Diam. from	and indicate principal water-bearing strata.							
LINER INSTALLED:	MATERIAL	From To SWL						
	Top Soil	0]						
(A) DEPEND LATING	Clay	1 55						
(6) PERFORATIONS: Perforated? I Yes No	Gravel-Sand	55 62						
Size of perforations 1/8 in. by 1½ in.	Clav	62 86						
1400 perforations from 258 ft. to 265 ft.	Sand Compated some Gravel	86 118						
890 perforations from 225 it to 295 it.	Clay	118 122						
perforations from	Gravel	122 126						
•	Clay	3 26 3 40 .						
(7) SCREENS: Well screen installed? Yes X No	Sandatone	140 145						
Manufacturer's Name	Clay	145 166						
Type Model No	Sandstone Gravel	166 170						
Diam. Slot Size Set from ft. to ft.	Clay	170 190						
Diam. Slot Size Set from ft. to ft.	Sand Gravel	190 194						
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Clay	194 225						
The summary that we do? In You will be seen the wildow?	Sandstone and Clay	225 245 37						
pump test made? ☐ Yes No If yes, by whom? Yield: gal/min. with ft. drawdown after hrs.	Clay	245 258						
Yteld: gal/min. with ft. drawdown after hrs.	Sandstone	258+ 265 37 265 280						
Air test XXX 310 gal./min. with drill stem at 210 ft. 2 hrs.	Clay	280 282 37						
Bailer test gal./min. with ft. drawdown after hrs.	Sandstone	200 202 71						
ian flow g.p.m.	· · · · · · · · · · · · · · · · · · ·							
Temperature of water Depth artesian flow encountered It.	Work started 2⊶11 1983 Completed	2-23 1983						
(9) CONSTRUCTION: Special standards: Yes 🗆 No 🏖	Work started 2-11 1983 Completed Date well drilling machine moved off of well	2-23 1983						
Well seal—Material used	Drilling Machine Operator's Certification:	<u> </u>						
Well sealed from land surface to18ft_	This well was constructed under my direct su	nominian Matariala						
Diameter of well bore to bottom of seal12 in.	and information reported above are true to my be	st knowledge and belief.						
Diameter of well bore below seal	[Signed] (Orilling Machine Operator)							
Number of sacks of cement used in well sealsacks	Drilling Machine Operator's License No.							
How was cement grout placed? Pumped.	Drining Machine Operator's License No							
	Water Well Contractor's Certification:							
No.	This well was drilled under my jurisdiction a the best of my knowledge and belief.							
Was pump installed?	Name DONNELLY DRILLING GO. (Person, firm or corporation)	*************************						
Did any strata contain unusable water?	(Person, firm or corporation) Address P. O Box 5 Aurora OR							
Type of Water? depth of strata								
Method of sealing strata off	[Signed] (Water Well Contractor)						
Was well gravel packed? ☐ Yes Ki No Size of gravel:	Contractor's License No806Date	2-2819.83.						
Gravel placed from		- RECEIVED						

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

WATER RESOURCES DEPARTMENT, SALEM, OREGON 97310 within 30 days from the date of well completion. RECEIVED FEB 2 0 2025

CLAC 70589

OWND

STATE OF OREGON
WATER SUPPLY WELL, REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L [100759
START CARD#	208758

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
First Name Demitry Last Name Anfilofieff	County CLACKA Twp 4 S N/S Range E E/W WM
Company	Sec 34 SW 1/4 of the NW 1/4 Tax Lot 501
Address PO Box 379 City Woodburn State OR Zip 97071	Tax Map Number 4 1E 34 Lot
City Woodburn State OR Zip 97071	Lat Division DD
(2) TYPE OF WORK New Well Deepening Conversion	Long or DD DMS or DD
Alteration (repair/recondition) Abandonment	Street address of well Nearest address
	29453 Canby-Marquam Highway (Hwy 170), Canby, OR
(3) DRILL METHOD	27435 Candy-Manquain Figures (17wy 170), Candy, OK
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER I EVEL
Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
(A) PROPOSED LISE Democia Wilmington Township	Existing Well / Predeepening
(4) PROPOSED USE Domestic Inrigation Community	Completed Well 06-12-2014 55
Industrial/ Commercial Livestock Dewatering	Flowing Artesian? Dry Hole?
Thermal Injection Other	WATER BEARING ZONES Depth water was first found 17
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	SWL Date From To Est Flow SWL(psi) + SWL(ft)
Depth of Completed Well 287 ft.	Sand/araval Zonass
BORE HOLE SEAL sacks/	NA 17 128 - NM
Dia From To Material From To Amt lbs	sandlaravel zones:
20 0 20 Bentonite 0 5 10 S	06-12-2014 145 287 400 55
16 20 309 Cement 5 133 105 S	
	(11) WELL LOG Ground Flevation
	Ground Elevation
How was seal placed: Method A B C D E	Material From To
¥ Other bentonite poured	Top soil, brown 0 4
Backfill placed from ft. to ft. Material	Clay, brown, medium, silty-sandy 4 17
Filter pack from 133 ft. to 243 ft. Material Premier sand Size 10x20	Clay, brown, medium, sandy & gravel, 3"- 17 20
Explosives used: Yes Type Amount	Sand, brown, medium & some gravel 20 29
	Clay, grey, soft 29 32 Sand, brown, medium, cementation & some clay 32 38
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Sand, multi-colored, coarse & some pea gravel 38 40
	Sand, brown, medfine & gravel, 1.5"-, cementation 40 43
(a) 10 x 2 144.5 .25 (b) x	Clay, grey & brown, medium-soft, silty-sandy 43 50
10 154.5 160 .25	Gravel, 1.5"- & sand, brown, medfine, cementation 50 59
10 165 166.5 .25 0 x x 1 171.5 260 .25 0 x	Clay, grey & brown, medium 59 61
	Sand, brown, medium & some small gravel 61 66
○ 10	Clay, grey, medium 66 68
Shoe Inside Outside Other Location of shoe(s)	Clay, multi-colors, medium, sandy-silty 68 77
Temp casing Yes Dia From To	Sand, brown, medium, cementation 77 79
(7) PERFORATIONS/SCREENS	Clay, brown, medium 79 80
Perforations Method	Sand, brown, medium 80 82
Screens Type v-wire wrap Material 304SS	Clay, brown, hard 82 85 Sand, brown, medium 85 95

Pert/ Casing/ Screen Scrn/slot Slot # of Tele/ Screen Liner Dia From To width length slots pipe size	Date Started 05-19-2014 Completed 06-12-2014
	(t t t NW t W II Constant CodGodin
Scree 10 144.5 154.5 040 cont P3 Scree 10 160 165 11 11 11	(unbonded) Water Well Constructor Certification
10 1766 1316	I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well
Scree 10 166.5 171.5 11 11 11 11 11 11 11 11 11 11 11 11 11	construction standards. Materials used and information reported above are true to
	the best of my knowledge and belief.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1927 Date 06-18-2014
	Password : (if filing electronically)
	Signed Range Agent
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 389 106 4	
389 106 4	(bonded) Water Well Constructor Certification
	I accept responsibility for the construction, deepening, alteration, or abandonment
	work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well
Temperature 53 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.
Water quality contain CHIVE Contain Post Indian Amount Units	
From To Description Amount Units	License Number 649 Date 06-18-2014
100.20	Password : (if filing electronically)
	Signed Contact Info (opponal)
· · · · · · · · · · · · · · · · · · ·	Comact ngo (OBRORAL)

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

Form Version: 0.89

CLAC 70589

WATER SUPPLY WELL REPORT - continuation page

WELL I.D. # L 100759

START CARD # 208758

(5) BORE HOLE CONSTRUCTION	(10) STATIC WATER LEVEL			
BORE HOLE SEAL sacks/	Water Bearing Zones			
Dia From 10 Material From To Amt lbs				
	SWL Date From To Est Flow SWL(psi) + SWL(ft)			
FILTER DAGE				
FILTER PACK From To Material Size				
243 309 Premier sand 6x9				
	(11) WELL LOG			
(6) CASING/LINER				
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Material From To Gravel, 1.5"- & sand, black, med-crse w/some wood 95 105			
Competition to dauge on tist with the	Clay, grey, soft-hard, sandy-silty 105 113			
	Gravel, 2"-, cementation & some sand, brown 113 128			
	Clay, grey, medium-hard 128 145			
	Gravel, 2"- & sand, black, medium 145 154			
	Clay, blue-grey, soft, silty 154 159			
	Sand, black, medium-fine 159 162			
	Gravel, 2"- & sand, black, medium & some wood 162 166 Clay, grey, soft, silty 166 167			
8 8 H H H H H H H H H H H H H H H H H H	Clay, grey, soft, silty 166 167 Gravel, 6"- with sand, black, medium & wood 167 171			
8 8 H H R S H H	Clay, blue-grey, medium 171 174			
	Sand, black, medium 174 176			
	Clay, grey, medium, silty 176 229			
	Sand, black, medium-fine 229 232			
	Clay, grey & brown, medium 232 241			
(7) PERFORATIONS/SCREENS	Sand, black, medium 241 242			
Pert/ Casing/ Screen Scrn/slot Slot # of Tele/	Clay, blue-grey, medium-hard, some silty-sandy 242 261 Sand, black, medium-coarse & some wood 261 274			
Screen Liner Dia From To width length slots pipe size	Sand, black, medium-coarse & some wood 261 274 Clay, grey-blue, medium 274 282			
	Sand, black, fine, cementation 282 287			
	Clay, dark brown, medium, silty 287 297			
	Silt, dark brown, hard, cemented & sand, black, fine 297 309			
(8) WELL TESTS: Minimum testing time is 1 hour				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)				
Tela garriiii Biawaowii Biiii steiiri airip depiri Baration (iii)	Comments/Remarks			
Water Quality Concerns				
From To Description Amount Units Steel plate welded to bottom of casing. Bore diameters are nominal.				
RECEIVED BY OWRD				
# 1 M 1 A A A A A A A A A A A A A A A A A	DECEIVED			
JUN 2 0 2014	RECEIVED			

SALEM, OR

FEB 2 0 2025