

T-14111

Regular

T-14111

Name Henry & Lucille LepleyAddress 11221 North myrtle road
myrtle creek, or 97457Change in APCDDate Filed 10/28/2022Initial notice date 11/8/2022

DPD issued date _____

PD issued date _____

PD notice date _____

Date of FO 11/26/2024 Vol 133 Page 382-383

C-Date _____

COBU due date _____

COBU Received date _____

Certificate issued _____

Assignments: _____

Irrigation District _____

Agent _____

CWRE _____

CC's list _____

DESCRIPTION OF WATER RIGHT(s)

Name of Stream N myrtle Creek SpringTrib. of myrtle Creek, N myrtle CreekUse Domestic Irrigation County Douglas

Quantity of water (CFS) _____ No. of Acres _____

Name of ditch _____

App# 57797 Per # 54991 Cert # 26077 PR Date _____

App# _____ Per # _____ Cert # _____ PR Date _____

App# _____ Per # _____ Cert # _____ PR Date _____

App# _____ Per # _____ Cert # _____ PR Date _____

App# _____ Per # _____ Cert # _____ PR Date _____

FEES PAID

Date	Amount	Receipt #
10-28-22	1,360 ⁰⁰	139439

FEES REFUNDED

Date	Amount	Receipt #
12/4/2024	\$471 ⁹³	18059125

☐ - Oversized map - Location _____

WATER RESOURCES DEPARTMENT
REQUEST FOR DISTRIBUTION OF FUNDS

TO: **Fiscal Services Section**

DATE: 11-07-24

FROM: Dante Luongo, Transfer Specialist
Phone: 971-304-5006

SUBJECT: **TRANSFER FILE - Request for Payment or Refund**

TRANSFER FILE #: T-14111

RECEIPT #: 139439

Please prepare payment in the amount of \$ 477.93 , made payable to:

Name: Henry C. Lepley and Lucille B. Lepley
Organization
Address: 11221 North Myrtle Rd
City: Myrtle Creek, OR 97457

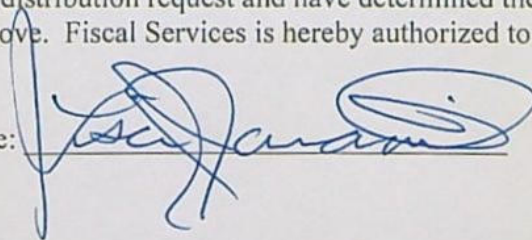
46610
0205

These funds are being paid or refunded as a result of (check one):

- ☒ Request for file to be Rejected/Withdrawn/Misfiled
- ☐ Excess fees were collected for application/PON
- ☐ Payment of PON
- ☐ Protest filing fee
- ☐ Other:

I have reviewed this distribution request and have determined the request to be justified as to the purpose indicated above. Fiscal Services is hereby authorized to process the requested distribution.

Authorized Signature:



Date:

11-21-2024

Received
SEP 23 2024
OWRD

RE: Transfer Application T-14111

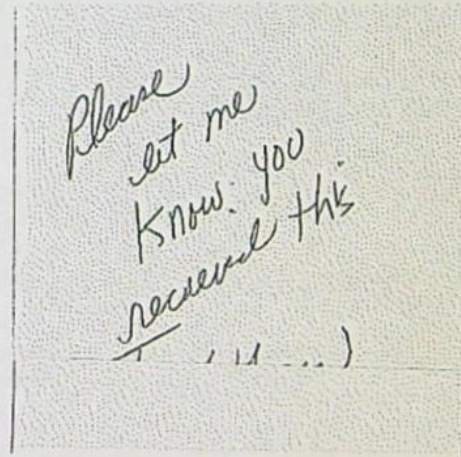
Attention Dante Luongo,

Dear Dante we would like to end the T-14111 transfer application process it has become to difficult for us at this time. We understand you will close this case. We ask for any money that can be returned to us. We want to thank you for all the work you have done on our behalf you are a credit to the State of Oregon

Sincerely,

Henry & Lucille
Lepley

9/19/24



E-MAIL : lblepey@gmail.com / PH: 1-541-863-7518

Lepley 11221North Myrtle Rd Myrtle Creek OR 97457



Oregon

Tina Kotek, Governor

Water Resources Department

North Mall Office Building

725 Summer St NE, Suite A

Salem, OR 97301

Phone 503 986-0900

Fax 503 986-0904

November 26, 2024

Henry and Lucille Lepley
11221 North Myrtle Road
Myrtle Creek, OR 97457

ORDER ON WITHDRAWN APPLICATION

Reference: Transfer Application T-14111

The above referenced transfer application was withdrawn from the record of the Water Resources Department on November 26, 2024, by Special Order Volume 133, Page 382 (copy enclosed).

The transfer application is no further force or effect.

If you have any questions related to the withdrawal of this transfer, you may contact your caseworker, Dante Luongo, by telephone at (971) 304-5006 or by e-mail at Dante.j.luongo@water.oregon.gov.

Sincerely,

Elyse D. Richman
Water Right Services Support
Transfers and Conservation Section

cc: Susan M. Douthit, Watermaster Dist. # 15 (via email)

Enclosure

BEFORE THE WATER RESOURCES DEPARTMENT
OF THE
STATE OF OREGON

In the Matter of Transfer Application)	FINAL ORDER WITHDRAWING
T-14111, Douglas County, Oregon)	AN APPLICATION FOR A WATER RIGHT
)	TRANSFER

Authority

ORS 540.505 to 540.580 establishes the process in which a water right holder may submit a request to transfer the point of diversion, place of use, or character of use authorized under an existing water right.

Applicant

HENRY C. LEPLEY JR AND LUCILLE B. LEPLEY
11221 NORTH MYRTLE ROAD
MYRTLE CREEK, OR 97457

Findings of Fact

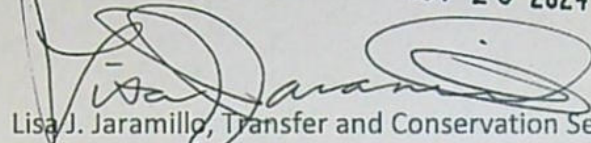
1. Transfer Application T-14111, in the name of HENRY C. LEPLEY JR AND LUCILLE B. LEPLEY, was filed on October 28, 2022, for an additional point of diversion under Certificate 26677.
2. On August 29, 2024, the Department issued a draft Preliminary Determination proposing to deny Transfer Application T-14111, due to injury to instream water right Certificate 73068. Pursuant to OAR 690-380-5050, consent to injury to an instream water right must be recommended by the agency that requested the instream water right.
3. On September 23, 2024, Henry C. Lepley Jr and Lucille B. Lepley, the applicants, submitted a request via mail that Transfer Application T-14111 be withdrawn.

This final order is subject to judicial review by the Court of Appeals under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482(1). Pursuant to ORS 536.075 and OAR 137-003-0675, you may petition for judicial review or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

Now, therefore, it is ORDERED:

Transfer Application T-14111, in the name of Henry C. Lepley Jr and Lucille B. Lepley, is withdrawn and is of no further force or effect.

Dated in Salem, Oregon on **NOV 26 2024**



Lisa J. Jaramillo, Transfer and Conservation Section Manager, for
IVAN GALL, DIRECTOR
Oregon Water Resources Department

Mailing date: **NOV 27 2024**

WATER RIGHT TRANSFER COVER SHEET

Transfer: T- 14111

Transfer Specialist:

Transfer Type: Regular Transfer

Dante

Applicant: HENRY & LUCILLE LEPLY 11221 NORTH MYRTLE ROAD MYRTLE CREEK, OR 97457 Email: _____ Phone: _____		Agent: <input type="checkbox"/> N/A UNAVAILABLE Email: _____ Phone: _____	
Irrigation District: <input type="checkbox"/> N/A Email: _____		CWRE: <input type="checkbox"/> N/A Email: _____	
Affected Local Gov'ts: <input type="checkbox"/> N/A Email: _____		Affected Tribal Gov't: <input type="checkbox"/> N/A UNAVAILABLE Email: _____	
Current Landowner if other than Applicant: <input type="checkbox"/> N/A Email: _____		Receiving Landowner: <input type="checkbox"/> N/A Email: _____	

Water Rights Affected

File Marked	App. File # or Decree Name	Permit	Certificate	RR/CR Needed	RR/CR Nos.
<input type="checkbox"/>	S7797	S4991	26677	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Key Dates & Initial Actions:

Rec'd: October 28, 2022	Proposed Action(s): ADDITIONAL POINT OF DIVERSION	
Fees Pd: 1360.00	WM District: 15	ODFW District:
Initial Public Notice: November 8, 2022	WM Review sent:	ODFW Review sent:
Acknowledgement Letter Sent <input checked="" type="checkbox"/>		GW Review sent: <input type="checkbox"/> N/A
County sent cc: of Ack Letter <input type="checkbox"/>	BOR notified (date): <input type="checkbox"/> N/A	
Newspaper quote requested:	Request for news \$ sent:	News \$ received:
Request to publish sent:	Affidavit of publication received:	Last day of publication:

Document	Drafted	Peer Review	Changes Made	Coordinator	Changes Made	Signature Bin	Signature Date
DPD	Date: <u>2-22-24</u> Initials: <u>FL</u>	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: <u>8-14-24</u> Initials: <u>CC</u>	Date: _____ Initials: _____	CW Sent: _____	N/A
PD <input checked="" type="checkbox"/>	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____	Date: _____
<i>Withholding</i> FO	Date: <u>10-1-24</u> Initials: <u>FL</u>	Date: <u>10-3-24</u> Initials: <u>JJ</u>	Date: <u>10-4-24</u> Initials: <u>FL</u>	Date: <u>10-8-24</u> Initials: <u>SH</u>	Date: <u>10-9-24</u> Initials: <u>FL</u>	Date: <u>11-14-24</u>	Date: <u>11/26/24</u>

Special Issues: _____

Special Order Volume: Vol. 133 Pages 302-303

WATER RIGHT TRANSFER COVER SHEET

Transfer: T- 14111

Transfer Specialist: *Sante L.*

Transfer Type: *Perma* Reimbursement Authority? ☐

Applicant: <i>Henry C. Lepley Jr. and Lucille B. Lepley</i>	Agent: <i>Timothy Fassbender</i>	Receiving Landowner:
Current Landowner if other than Applicant:	CWRE: <i>↓</i>	Irrigation District:
Affected Local Gov'ts:	Affected Tribal Gov't:	BOR Notified (date):

Water Rights Affected

File Marked	App. File # or Decree Name	Permit	Certificate	RR/CR Needed	RR/CR Nos.
<input type="checkbox"/>			<i>26677</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Key Dates & Initial Actions (Support Staff)

Rec'd:	Proposed Action(s):
Fees Pd: <i>\$1350.</i>	Acknowledgement Letter Sent <input type="checkbox"/>
Initial Public Notice:	County sent cc: of Ack Letter <input type="checkbox"/>
WM District: <i>15</i>	WM Review request sent:
ODFW District:	ODFW Review sent:
Groundwater	GW Review sent:

Caseworker Actions: Newspaper & PD Notice:

Newspaper notice needed: <input type="checkbox"/>	Name of Newspaper:
Newspaper notice sent to coordinator:	Newspaper notice quote requested (NRS1):
Request for news \$ sent:	News \$ received:
Affidavit of publication received:	Last day of publication:

Peer Review:

Document	Drafted	Peer Review	Coordinator	Changes Made	Signature Bin	Signature Date
DPD	Date: <i>8-9-23</i> Initials: <i>AL</i>	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	CW Sent: _____ WM Sheet <input type="checkbox"/> ODFW Sheet: <input type="checkbox"/>	N/A
PD	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____ Data Review Date: _____	Date: _____	Date: _____
FO	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ No. of docs for sig: _____	Date: _____

Special Issues: _____

Special Order Volume: Vol. _____ Pages _____

☐ RA

PERMANENT TRANSFER APPLICATION CHECKLIST – Single Cert

Transfer #: T- 1411			Applicant: Henry L. Lepley Jr. and Lucille A. Lepley		Caseworker: Danka L.	
Applicant Contact:			Phone Number: 541 863 7518		Email:	
Applicant Agent: Timothy Kossbender			Phone Number:		Email:	
CW	PR	Coord	County:	Certificate: 26677		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type of Change(s) Proposed: <input type="checkbox"/> POU <input type="checkbox"/> POD <input checked="" type="checkbox"/> APOD <input type="checkbox"/> POA <input type="checkbox"/> APOA <input type="checkbox"/> USE <input type="checkbox"/> Substitution <input type="checkbox"/> Gov't Action			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transfer requiring supplemental review criteria (supplemental checklists to be developed) <input type="checkbox"/> CHAR OF USE <input type="checkbox"/> CONSENT TO INJURY OF ISWR <input type="checkbox"/> SW to GW <input type="checkbox"/> SUPPLEMENTAL IR to PRIMARY IR			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Print for file or save all certificates in electronic "T" folder and highlight Priority Date, Rate, Use and Limit/Duty paragraph			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Supplemental checklist for transfers w/in a District (S:\groups\wr\TACS\WRISApps Templates\Transfer Checklists\SUPP_Within District Processing Checklist 9-5-2019) <input checked="" type="checkbox"/> N/A District Name: If this is a Living Certificate – check with Ann Reece			
Supplemental Language document referenced below is located here: S:\groups\wr\TACS\6. Transfers\2. Caseworker Tools and Training\Supplemental Language						

Transfer Application Review and Deficiencies						
CW	PR	Coord	Deficiencies that may cause a denial – please explain			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> POD authorized, not authorized for Domestic Use			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assign file in WRIS			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are all applicants/agents listed in WRIS with email addresses, if available?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have all permit/certificates been entered in WRIS under Transfer #?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Were Public Comments received? (if yes, enter commenter names/email on mailing list)		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If yes, were they timely?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Add finding for any comments received (see Supplemental Language document)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notes:			

Review "From" and "To" Lands and/or POD/POA						
CW	PR	Coord				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are the "from" acres on the map authorized POD(s)/POA(s)/POU?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the "from" map match the certificate map? If No, what is different?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are any of the "from" lands being cancelled/diminished?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, were cancellation/diminution affidavits submitted? (see findings in Supplemental Language doc)		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compare FROM POU in application (Table 2) with certificate. <i>Mark certificate with acres being xferred (FROM acres), any RR acres and any acres being cancelled.</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compare TO POU in Table 2 with the TO Lands on map (for accuracy)	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are any instream water rights affected? If Yes, Cert # 73068 (If Yes, check criteria for injury-upstream POD move, moving closer to SW, or return flows affected)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Layered/Supplemental Rights				
CW	PR	Coord	<input type="checkbox"/> N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are any supplemental rights being transferred? (verify that it is actually a supplemental right)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, are they being transferred to a "like" primary (i.e. similar reliability) or are they moving with a primary under the transfer?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are there any layered irrigation rights not included in the transfer?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If No, they must move with the primary, to a "like" primary, or be cancelled via a cancellation affidavit.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Layered right(s) Cert:	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notes:	

Transfer Review Criteria				
CW	PR	Coord		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Validity of the right – Has the right been used in the last 5 years and is not subject to forfeiture?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Evidence of use and supporting documentation <input type="checkbox"/> Confirming (not a remaining right) cert issued within the last 5 years <input type="checkbox"/> Rebuttal to forfeiture (ORS 540.610)	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ready, Willing and Able – <input type="checkbox"/> Current delivery system sufficiently described in application. Does delivery system have capacity to fully divert and use the authorized rate/duty of the right?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Would the proposed transfer result in enlargement? If Yes, why? What conditions, if any, will avoid?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Would the proposed transfer result in injury? If Yes, why? Instream injury What conditions, if any, will avoid?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If injury, has WM or GW provided a list of injured water right holders? <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If POD/POA/APOD/APOA change, will it be from the same source? <i>If No, deny per OAR 690-380-2110(2)</i> <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notes:	

Reviews and Conditions				
CW	PR	Coord	<i>If review is required and has not been submitted, contact reviewer. DPD cannot be issued without reviews.</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the Watermaster review been received? Conditions:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the ODFW review been received? (required on SW POD or APOD change only) <input type="checkbox"/> N/A Conditions:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the Groundwater review been received? <input type="checkbox"/> N/A Conditions: (required on POA change, APOA or SW to GW only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Draft Preliminary Determination and Cover Letter – 12 pt. Calibri font

CW	PR	Coord	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prepare ModPod workareas (see S:\groups\wr\TAGS\Resources & Reference\Procedures ModPod Procedures 10-2022 for instructions on creating work areas through ModPod)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prepare DPD (save as T-XXXXX-dpd) (where XXXXX is the transfer number)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prepare DPD Cover letter (save as T-XXXXX-dpd-cov)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prepare Notice (save as T-XXXXX-pd-notice)

Remaining Right(s)

CW	PR	Coord	<input type="checkbox"/> N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prepare Remaining Right (RR) (if applicable). Save as T-XXXXX-rr-CCCCC-NNNNN (CCCCC = current certificate number, NNNNN = new certificate number). Send with DPD, cover letter and notice for peer review.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assign new certificate number to remaining right cert (send cert number to Data with PD)
			Orig Cert # RR Cert #
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Make sure all RRs are issued in the original name*, conditions match and duty paragraph matches (if irrigation)
			*Note: Remaining rights can only be issued in the name of the current landowner(s) of the remaining rights IF 1) the Report of Ownership information supplied for the transfer covers all of the remaining right lands (as well as the right being transferred) and 2) the applicant asks for the remaining right to be issued in their name. IF there is a change to remaining right (other than what transfer authorizes) – ADD RECONSIDERATION LANGUAGE “other than contested case.”
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Send DPD, cover letter, remaining right and notice for Peer Review

Issue Draft Preliminary Determination

CW	PR	Coord	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DPD, cover letter and notice are peer reviewed and signed off by Analyst
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copy DPD and cover letter for paper file
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Save DPD and cover letter as PDF
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mail/email to applicant/agent/WM
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Add workflow item “Draft PD Issued”

Report of Ownership Information (ROI)

CW	PR	Coord			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does legal description in ROI/Deed match “from” lands?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have all owners on the ROI/Deed signed the application?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has a notarized statement of consent been submitted? (if applicable) <input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Newspaper Notice (if required)

CW	PR	Coord	<input type="checkbox"/> N/A		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name of newspaper: (A list of approved newspapers can be obtained from Elyse)		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prepare/send letter to applicant/agent regarding newspaper notice cost	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NRS1 delivered receipted funds to caseworker	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Preliminary Determination and Cover Letter Preparation

CW	PR	Coord	See cheat sheet at (S:\groups\wr\TACS\6. Transfers\Procedures\DPD to PD Conversion 12-8-2016) for more detailed instructions
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Was application amended after DPD was issued? - Make sure amended pages were scanned to WRIS (see support staff) and make sure you mark amended (replaced) pages with SUPERSEDE. Also make findings in PD. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, what was amended?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did amendment change determination from denial to approval? <i>Make findings in PD.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> If POD/POA changes or changes in "from" lands – re-review required from WM <input type="checkbox"/> If POA changes – re-review required from GW
<i>Note: If POD was amended and changed from a downstream move to upstream within an ISWR reach – Consent to Injury may be required.</i>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Save DPD as a new document (T-XXXXX-pd.doc) – 12 pt. Calibri font
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Remove "Draft" from document
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unhide hidden findings (cntrl-A, select Font, uncheck "hidden" box) and add dates
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If application was amended, add finding including date of amendment
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Change language resulting from any amendments in response to the DPD, including language under Determination and Proposed Action
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unhide appeal (protest) language at the end of the document
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prepare PD Cover Letter (save as T-XXXXX-pd-cov)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check email address(s) for accuracy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notes:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Send to caseworker/Kelly for Peer Review

Data Center Review of PD

CW	PR	Coord	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Email PD and RR(s)(with new cert numbers) to Duff for review – indicate if file is RA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data Center will send notification that file is complete
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Make any necessary changes to PD or prepare Revised DPD (if substantive changes)

Issue Preliminary Determination

CW	PR	Coord	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Print PD and put in Manager's box for signature and issuance (support will print cover letter)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Add workflow notes

Final Order			
CW	PR	Coord	See cheat sheet at (S:\groups\wr\TACS\6. Transfers\Procedures\PD to FO Conversion 12-8-2016) for more detailed instructions
Do not issue Final Order before this date: (protest period end date or 30 days after date of last newspaper publication)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have protests been received? If YES, STOP! Coordinate with Protest section.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If application had a newspaper notice, verify that Affidavit of Publication was received. Date:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Save PD as a new document (T-XXXXX-ord-approve (or deny))
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Remove "PRELIMINARY DETERMINATION" from document title and replace with "FINAL ORDER." Unhide hidden findings (cntrl-a, select Font, uncheck "hidden" box)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Replace "PROPOSING APPROVAL/DENIAL OF" with APPROVING/DENYING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Replace the "judicial review/reconsideration rights" box in the first page footer for the "Final Order" judicial review language; unhide and add Special Order Volume (support will add page #)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Update the hidden paragraph following the public notice and amendments findings (regarding issuance of PD)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Change "Determination and Proposed Action" to "Conclusions of Law" and update paragraph
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Replace "If application T-XXXXX is approved . . ." with Now, therefore, it is ORDERED."
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select list of conditions below "It is ORDERED" section and turn off Italics. Check numbering (start at "1").
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Delete Protest language, Document preparation box, and Notice Regarding Servicemembers; Insert "Mailing Date: _____"
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Final Check: All Conclusions of Law are supported by Findings and Transfer Review Criteria

Remaining Rights			
CW	PR	Coord	<input type="checkbox"/> N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Make sure all RR certs have new cert numbers and are entered on the right side of the footer of each RR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Update left side of footer to read: T-XXXXX.rr.YYYYY.ZZZZZ.ini, where YYYYY is original cert number, ZZZZZ is the new cert number, and .ini stands for your initials
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Print RR on certificate paper and include with Final Order for signature

Issue Final Order			
CW	PR	Coord	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pull "Working Copy" folder from file
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Print and put FO and RR in Manager's box for signature (manager will deliver to support for processing and issuance)

Mailing List

[illegible]

OWRD

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

List the change proposed for the acreage in each % %. 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.

[illegible]

TACS

ATT! DANTE LUONGA
Please DO NOT include the domestic use in this transfer

Thank you

Henry + Lucille Lepley

Oct-9-23

Lucille Lyle

Henry Lupton J.R.



Oregon
Kate Brown, Governor

Water Resources Department

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

Fax (503) 986-0904

November 8, 2022

HENRY & LUCILLE LEPLY
11221 NORTH MYRTLE ROAD
MYRTLE CREEK, OR 97457

Reference: Application T-14111

On October 28, 2022, OWRD received your water right Permanent Transfer Application. The application was accompanied by \$1360.00. Our receipt number 139439 is enclosed.

By copy of this letter, we are asking the Watermaster for a report regarding the potential for injury to existing water rights which may be caused by the requested change. A review form will also be sent to Oregon Department of Fish and Wildlife to determine if a fish screen is needed.

This application may require publication of a notice for two consecutive weeks in a newspaper with general circulation in the area where the water right is located. If it is determined that newspaper notice will be required, the Department will prepare the notice and notify you of the cost. You will be responsible for submitting payment to the Department prior to publication of the notice.

Except as provided under ORS 540.510(3) for municipalities, you may not use water from the new point of diversion until a final order approving the transfer application has been issued by the Department. In order to avoid any possible forfeiture of the water right, you should continue to use the water as described by your existing water right.

If the land is sold before the application is approved, the buyer's consent to the application will be required unless a recorded deed or other legal document clearly established that the water right was not conveyed in the sale.

Refer to the following page for a chart showing the steps and expected timelines for the processing of your application.

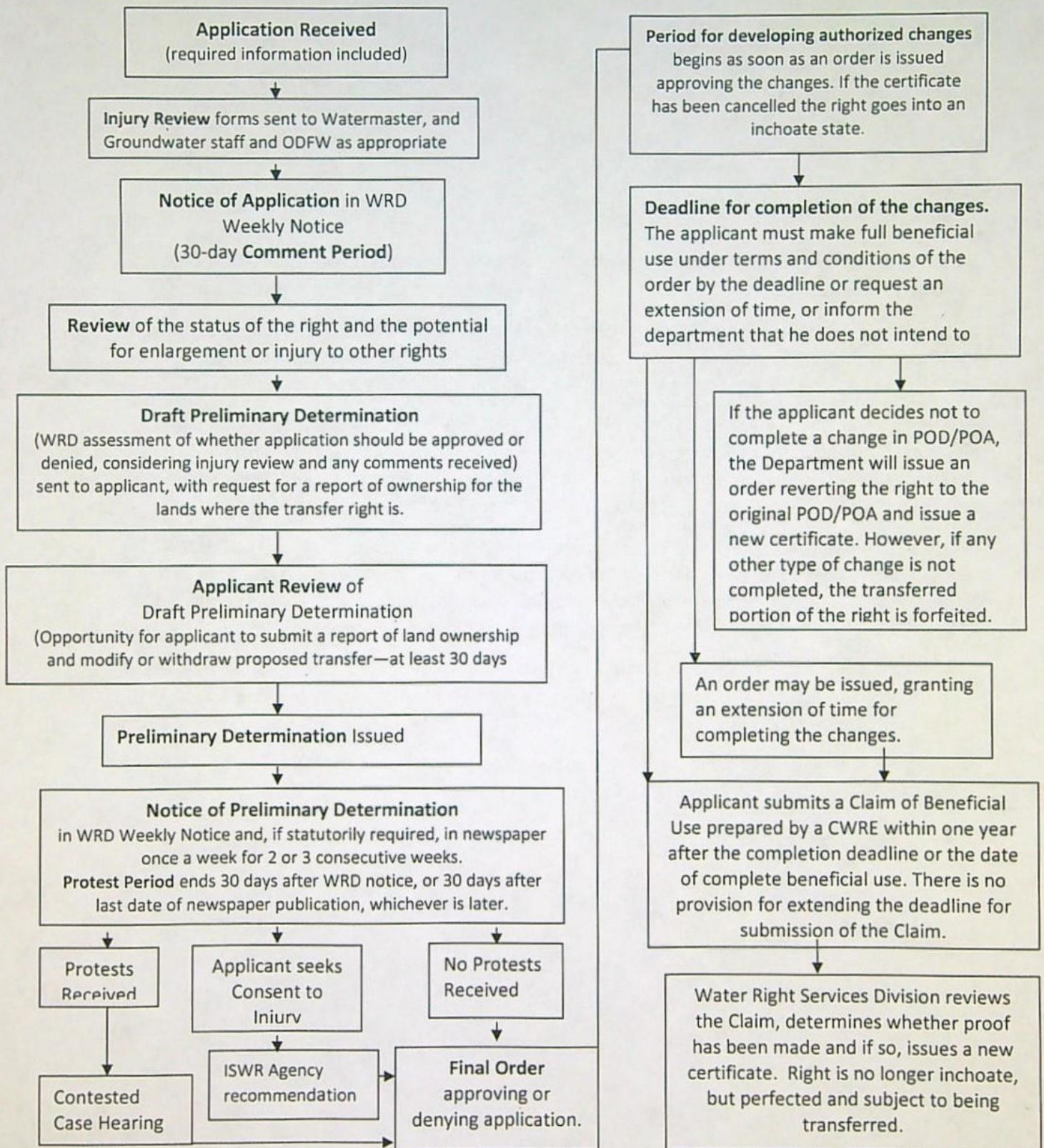
If you have any questions, please contact the Transfer Section at (503) 979-9931.

Cc: Watermaster Dist. #15, Susan M. Douthit (*via email*)

Enclosure

Regular Transfer Process (including "Proving Up" on the changes)

OAR 690 Division 380



**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **139439**

725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE # _____

RECEIVED FROM: <u>Henry C. Lepley, Jr.</u>	APPLICATION <u>T-1411</u>
BY: <u>Lucille B. Lepley</u>	PERMIT _____
	TRANSFER _____

CASH: <input type="checkbox"/>	CHECK: # <u>3282</u> <input checked="" type="checkbox"/>	OTHER: (IDENTIFY) <input type="checkbox"/>	TOTAL REC'D <u>\$1,360.00</u>
--------------------------------	--	--	-------------------------------

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES	\$ _____
OTHER: (IDENTIFY) _____	\$ _____
0243 I/S Lease _____	0244 Muni Water Mgmt. Plan _____
0245 Cons. Water _____	

4270 WRD OPERATING ACCT

MISCELLANEOUS		
0407 COPY & TAPE FEES	\$ _____	
0410 RESEARCH FEES	\$ _____	
0408 MISC REVENUE: (IDENTIFY) _____	\$ _____	
TC162 DEPOSIT LIAB. (IDENTIFY) _____	\$ _____	
0240 EXTENSION OF TIME	\$ _____	
WATER RIGHTS:		
0201 SURFACE WATER	EXAM FEE \$ _____	0202 RECORD FEE \$ _____
0203 GROUND WATER	\$ _____	0204 \$ _____
0205 TRANSFER	\$ <u>1360.00</u>	
WELL CONSTRUCTION		
0218 WELL DRILL CONSTRUCTOR	EXAM FEE \$ _____	0219 LICENSE FEE \$ _____
LANDOWNER'S PERMIT		0220 \$ _____
OTHER (IDENTIFY) _____		

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE	\$ _____	CARD# _____
0210 MONITORING WELLS	\$ _____	CARD# _____
OTHER (IDENTIFY) _____		

0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER

0233 POWER LICENSE FEE (FW/WRD)	\$ _____
0231 HYDRO LICENSE FEE (FW/WRD)	\$ _____
HYDRO APPLICATION	\$ _____

TREASURY OTHER / RDX

FUND _____	TITLE _____
OBJ. CODE _____	VENDOR # _____
DESCRIPTION _____	\$ _____

RECEIPT: **139439**

DATED: 10-28-2002 BY: Mona Kay

Application for Permanent Water Right Transfer



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

Part 1 of 5 – Minimum Requirements Checklist

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

For questions, please call (503) 986-0900, and ask for Transfer Section.

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Check all items included with this application. (N/A = Not Applicable)

- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Transfer Application Map Checklist.
- ☒ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at:
http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- ☒ Part 4 – Completed Applicant Information and Signature.
- ☒ Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: 26677M**

Please include a separate Part 5 for each water right. (See instructions on page 6)

NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

Attachments:

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

(For Staff Use Only)

14111

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

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

Other/Explanation _____

Staff: _____ 503- _____ Date: ____/____/____

Revised 7/7/20

TACS

Part 2 of 5 – Transfer Application Map

OWRD

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

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- ☒ ☐ N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- ☐ ☒ N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- ☒ Permanent quality printed with dark ink on good quality paper.
- ☒ The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- ☒ A north arrow, a legend, and scale.
- ☒ The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- ☒ Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- ☒ Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- ☒ Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- ☒ Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- ☒ Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- ☒ ☐ N/A Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- ☒ Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- ☒ ☐ N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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5505 8 9 730

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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, $1.25 \text{ cfs} \div 100 \text{ ac}$); then multiply by the number of acres to be transferred to get the transfer cfs ($\times 45 \text{ ac} = 0.56 \text{ cfs}$).
 - 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, $45.0 \text{ ac} \times 0.0125 \text{ cfs/ac} = 0.56 \text{ cfs}$)
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).

Revised 7/7/2022

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Henry C. Lepley Jr & Lucille B. Lepley			PHONE NO. 541-863-7518	ADDITIONAL CONTACT NO.
ADDRESS 11221 North Myrtle Road				FAX NO.
CITY Myrtle Creek	STATE OR	ZIP 97457	E-MAIL lucee@Frontier.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

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

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this transfer application, and why:
Need to at additionl Point of Diversion to existing Water Right so diversion point is within propey ownership. Existing Point of Diversion falls on Neighbors property currently and this is the result of original property being divided after original water right was approved.

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check One Box

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

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By my signature below, I confirm that I understand:

- Prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Salem Statesmans Journal.
- Amendments to the application may only be made in response to the Department's Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).
- Refunds may only be granted upon request and, as set forth in ORS 536.050(4)(a), if the Director determines that a refund of all or part of a fee is appropriate in the interests of fairness to the public or necessary to correct an error of the Department.

I (we) affirm that the information contained in this application is true and accurate.

Applicant signature

Henry C. Lepley Jr

Print Name (and Title if applicable)

Date

10-25-22

Applicant signature

Lucille B. Lepley

Print Name (and Title if applicable)

Date

10-25-22

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

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

Check the following boxes that apply:

- ☒ The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- ☐ The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.
- ☐ Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

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

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

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see:

https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

RECEIVING LANDOWNER NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.	RECEIVED OCT 28 2022 OWRD
CITY	STATE	ZIP	E-MAIL	
Describe any special ownership circumstances:				
The confirming Certificate shall be issued in the name of: <input type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner				

☐ Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

☐ Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all county, city, municipal corporation, or tribal governments within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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

Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions for how to copy and paste additional Part 5s, or to add additional rows to tables within the application.

CERTIFICATE # 26677

Description of Water Delivery System

System capacity: 0.23 cubic feet per second (cfs) OR

 gallons per minute (gpm)

Describe the current water delivery system or the system that was in place five years. Include information on the pumps, canals, pipelines, and sprinkler systems, and apply the water at the authorized place of use. Pump takes water from North Myrtle creek via pipe system to property and homes.

Once the application has been unlocked, you may:

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

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

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		28 S	4 W	27	NW	SE	1200	S 75°E 900' FROM CENTER SECTION 27
2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		28 S	4 W	27	SW	NE	900	N 86° E 1320' FROM CENTER SECTION 27
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed								
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed								

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

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

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

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

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

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.

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Additional remarks: ADDING ADDITIONAL POINT OF DIVERSION TO EXISTING WATER RIGHT CERT. 26677 SO THAT NEW POINT OF DIVERSION IS ON THE OWNERSHIP OF THAT PORTION OF EXISTING WATER RIGHT COVERS. THUS ELIMANATING THE NEED OF AN EASEMENT TO ACCESS AND USING EXISTING POINT OF DIVERSION.

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For Place of Use or Character of Use Changes

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

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



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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

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

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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.

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OCT 28 2022

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State of Oregon)
) ss
County of DOUGLAS

I, HENRY LEPLEY, in my capacity as OWNER,
mailing address 11221 NORTH MYRTLE ROAD
telephone number (541)863-7518, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

☒ Personal observation ☐ Professional expertise

2. I attest that:

☒ Water was used during the previous five years on the **entire** place of use for
Certificate # 26677; OR

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

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

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

(continues on reverse side)

14111

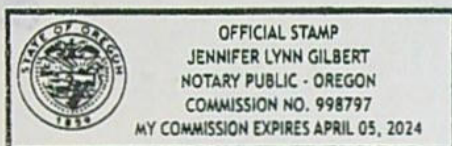
3. The water right was used for: (e.g., crops, pasture, etc.): PASTURE

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.

Henry Lepley
Signature of Affiant

10-25-22
Date

Signed and sworn to (or affirmed) before me this 25 day of October, 2022.



[Signature]

Notary Public for Oregon

My Commission Expires: April 5, 2024

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none">• Power usage records for pumps associated with irrigation use• Fertilizer or seed bills related to irrigated crops• Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none">• District assessment records for water delivered• Crop reports submitted under a federal loan agreement• Beneficial use reports from district• IRS Farm Usage Deduction Report• Agricultural Stabilization Plan• CREP Report
<input checked="" type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

RECEIVED

OCT 28 2022

OWRD

11221 N. Myrtle Rd

Evidence of Use map

Legend

- 11221 N Myrtle Rd
- Central Valley Construction and?

11221 N Myrtle Rd

North Myrtle Creek

RECEIVED
OCT 28 2022
OWRD

Google Earth



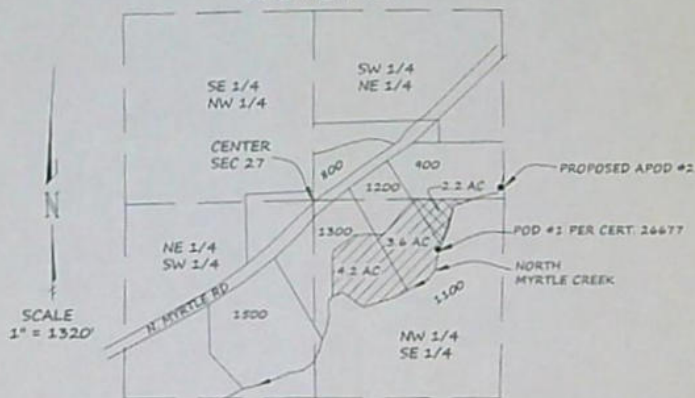
400 ft

RECEIVED

OCT 28 2022

OWRD

T 28 S, R 4 W, W.M.
SECTION 27



DENOTES AREA OF CERT. 26677
 DENOTES AREA OF ADDITIONAL POD

- DENOTES POD #1
- DENOTES POS #2

POD LOCATIONS

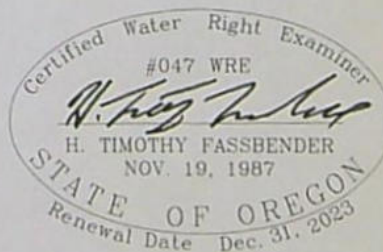
POD #1 - S 75° E 900' FROM
CENTER SEC. 27

POD #2 - N 86° E 1320' FROM
CENTER SEC. 27

NOTE:
THE PREPARATION OF THE MAP WAS
FOR THE PURPOSE OF IDENTIFYING THE
LOCATION OF THE WATER RIGHT ONLY.
IT IS NOT INTENDED TO PROVIDE
LOCATION NOR DIMENSIONS OF PROPERTY
OWNERSHIP LINES.

TRANSFER APPLICATION MAP
FOR
LUCY LEPLEY
11221 N. MYRTLE RD
MYRTLE CREEK, OR 97457
BY

H. TIMOTHY FASSBENDER, PLS, CWRE
2896 SARAH LANE
EUGENE, OR 97408
AUGUST 30, 2022



14111

Permanent Transfer Application Intake Completion Checklist

Check the Certificate(s) in WRIS

Transfer # T- 14111

Checked by: <u>Joan</u>	Type of Change(s) Proposed: <i>Mark the Proposed Changes</i>	Substitution	Supplemental to Primary	POU	POD	APOD
Date: <u>10/31/22</u>		Gov Action	Surface to Ground	USE	POA	APOA
Fee Received: <u>\$1360.00</u>		How many rights to be Transferred?				
Calculated Fee:		Certificate # <u>26677</u>				
Additional Observations: _____						

If OK and complete, check box to the left; if NOT, fill in.

- ☒ 1. Is applicant information complete? Have all applicants listed at the top of the page signed at the bottom?
If no, what is missing? Whose signature is missing? _____
- ☒ 2. Does applicant indicate the place of use is in or near an irrigation district? Is a Form D included? ☒ N/A.
Name of the district: _____
- ☒ 3. Part 5 of application, has the applicant(s) completed the entire page and does the information match the description of the explanation of the reasons for transfer on Part 4 of the application?
If no, you may need to contact the applicant or agent? _____
- ☒ 4. Is there only one (1) water right included in this transfer application?
If no, are the criteria of OAR 690-380-3220 for more than one WR met? Yes or No _____
If no, then the transfer application **CANNOT** be accepted. See attached "3220" Decision Tree Flowchart.
- ☒ 5. For multiple certificates do each of the certificates listed on Application Page 1 have their own separate completed Part 5 tables 1 & 2?
If no, which certificate(s) are missing a separate Part 5 tables 1 & 2? _____
- ☒ 6. Is the map prepared and signed by a CWRE? Does the map meet requirements?
If no, what is missing? _____. Map waiver included? ☐ Yes ☐ No
- ☒ 7. If a change in point of appropriation (POA), have the well logs been included? ☒ N/A.
- ☒ 8. If a change in place of use (POU) within Umatilla County, have the applicant(s) provided a Supplemental Form U? ☒ N/A.
- ☒ 9. If all boxes on this checklist are checked (with no remaining deficiencies identified), **ACCEPT** the application.
Put this application intake completeness check sheet in the transfer folder.

OR: ☐ If all boxes to the left are **NOT** checked, then this application is deficient and **CANNOT** be accepted.
It should be returned and the deficiencies listed in the "staff" section at the bottom of Application Page 1, unless the applicant or agent can resolve the deficiencies within 2-3 days.

Actions taken: none Date: 10/31/22

JS OK