

District Temp

Name Eagle Point Irrigation District

Address PO Box 157  
Eagle Point, OR 97524  
epidist@centurylink.net

Change in POU  
Date Filed 3/20/2024  
Initial notice date 3/26/2024  
DPD issued date \_\_\_\_\_  
PD issued date \_\_\_\_\_  
PD notice date \_\_\_\_\_  
Date of FO 5/3/2024 Vol 131 Page 29-32

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 Big Butte Creek

Trib. of Rogue River

Use Irrigation, Supp. Irrigation, Pond Maint. County Jackson

Quantity of water (CFS) \_\_\_\_\_ No. of Acres \_\_\_\_\_

Name of ditch \_\_\_\_\_

App# S-8358 Per # S-6396 Cert # 89373 PR Date 8-21-1915

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 #
<u>3-20-2024</u>	<u>\$ 975.38</u>	<u>142574</u>

FEES REFUNDED		
Date	Amount	Receipt #





# 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

[www.oregon.gov/owrd](http://www.oregon.gov/owrd)

May 3, 2024

Eagle Point Irrigation District  
PO Box 157  
Eagle Point, OR 97524

REFERENCE: District Temporary Transfer Application T-14425

Enclosed is a copy of the final order approving your DISTRICT TEMPORARY water right transfer application.

The temporary change shall be effective at the **beginning of this current irrigation season**. The use shall revert to the original authorized place of use at the **end of the same irrigation season**.

If you have any questions related to the approval of this temporary transfer, you may contact your caseworker, Ann Reece, by telephone at (503) 979-3214 or by e-mail at [Ann.L.Reece@water.oregon.gov](mailto:Ann.L.Reece@water.oregon.gov).

Sincerely,

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

cc: Shavon L. Haynes, Watermaster Dist. # 13 (via email)

Enclosure



BEFORE THE WATER RESOURCES DEPARTMENT  
OF THE  
STATE OF OREGON

In the Matter of Transfer Application	)	FINAL ORDER APPROVING
T-14425, Jackson County	)	A DISTRICT TEMPORARY TRANSFER
	)	

**Authority**

Oregon Revised Statute (ORS) 540.570 establishes the process in which a district may submit a request to temporarily transfer a water right within district boundaries. Oregon Administrative Rule (OAR) Chapter 690, Division 385 implements the statutes and provides the Department's procedures and criteria for evaluating district transfer applications.

**Applicant**

EAGLE POINT IRRIGATION DISTRICT  
PO BOX 157  
EAGLE POINT, OR 97524

**Findings of Fact**

1. On March 20, 2024, Eagle Point Irrigation District (EPID) filed a district transfer application to temporarily change the place of use under Certificate 89373. The Department assigned the application number T-14425.
2. Notice of the application for transfer was published on March 26, 2024, pursuant to ORS 540.570 and OAR 690-385-3400. One comment was timely filed in response to the notice.
3. On March 27, 2024, the EPID corrected the priority date on the application.
4. Comments received on April 25, 2024, allege the water user irrigated more acres than allowed under several combined water authorizations in prior years, including prior temporary transfers under Certificate 89373. The comments also mentioned problems with water use reporting from various meters. Pursuant to ORS 540.570, the department shall consider comments that pertain to the potential for injury to an existing water right or to the enlargement of the water use subject to transfer in determining whether to condition, reject or revoke a temporary transfer. The comments did not address injury to any existing water right. Furthermore, pursuant to 540.570(6) transfer T-14425 is conditioned to be revoked at any time to the extent necessary to avoid injury if the Department finds the transfer causes injury to any existing water right, 540.570(6). The proposed change in places of use, as conditioned, will not result in enlargement of the rights as defined in OAR 690-385-0100(6). Consideration or investigation of prior use of water without benefit of a water

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 536.075 and OAR 137-004-0080, 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.



right or other legal water use authorization is outside the scope of the review process for a temporary transfer. Any water use under the temporary transfer T-14425 is subject to the conditions in this final order, and will be subject to regulation by the Department pursuant to ORS 540.045.

5. The portion of the first right to be transferred is as follows:

**Certificate:** 89373 in the name of EAGLE POINT IRRIGATION DISTRICT (perfected under Permit S-6396)

**Use:** PRIMARY IRRIGATION OF 9.4 ACRES

**Priority Date:** AUGUST 21, 1915

**Rate:** 0.11 Cubic Foot per Second

**Limit/Duty:** The amount of water used for irrigation together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second, or its equivalent for each acre irrigated, and shall be further limited to a diversion of not to exceed 4.5 acre-feet per acre for each acre irrigated during the irrigation season of each year.

**Source:** BIG BUTTE CREEK, TRIBUTARY TO ROGUE RIVER

**Authorized Points of Diversion:**

Twp	Rng	Mer	Sec	Q-Q	GLot	Measured Distances
35 S	2 E	WM	3	NW NW	4	1030 FEET SOUTH AND 290 FEET EAST FROM THE NW CORNER OF SECTION 3
35 S	2 E	WM	10	NE NE		1130 FEET SOUTH AND 700 FEET WEST FROM THE NE CORNER OF SECTION 10

**Authorized Place of Use:**

IRRIGATION								
Twp	Rng	Mer	Sec	Q-Q	Acres	Tax Lot	Water User	Notice
35 S	1 W	WM	27	NW SW	9.4	500,600	Rogue Family Farms	2024-001

6. Transfer Application T-14425 proposes to change the place of use to:

**Proposed Place of Use:**

IRRIGATION								
Twp	Rng	Mer	Sec	Q-Q	Acres	Tax Lot	Water User	Notice
35 S	1 W	WM	27	NW SW	4.9	400,500	Rogue Family Farms	2024-001
35 S	1 W	WM	28	NE SE	4.5	400	Rogue Family Farms	2024-001
<b>Total:</b>					<b>9.4</b>			

7. The district temporary transfer application satisfies the criteria of ORS 540.570 and OAR 690-385-3000, contains the information required under OAR 690-385-3200, and includes a map meeting the requirements of OAR 690-385-3300.



8. Water has been used within the last five years according to the terms and conditions of the rights. There is no evidence available that would demonstrate that the rights are subject to forfeiture under ORS 540.610.
9. The water rights are subject to transfer as defined in OAR 690-385-0100(17).
10. Diversion structures, district canals, pumps, pump stations, ditches, pipeline, and sprinkler systems sufficient to use the full amount of water allowed under the existing rights are present.
11. The proposed change in places of use, as conditioned, will not result in enlargement of the rights as defined in OAR 690-385-0100(6).
12. The proposed change in places of use would not result in injury to other water rights as defined in OAR 690-385-0100(4).
13. All other applicable requirements for district temporary water right transfers are met.

#### **Conclusions of Law**

The temporary change in places of use proposed in Temporary Transfer Application T-14425 is consistent with the requirements of ORS 540.570 and OAR 690-385-3500.

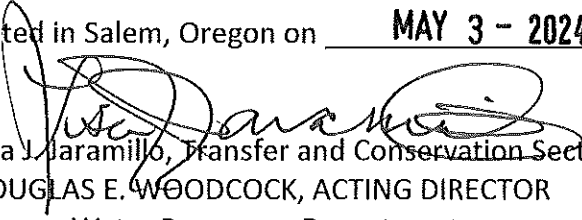
#### **Now, therefore, it is ORDERED:**

1. The temporary changes in places of use proposed in Transfer Application T-14425 are approved.
2. The lands from which the water right is removed under Certificate 89373 shall receive no water under the transferred right during the 2024 irrigation season.
3. The use shall revert to the authorized places of use after the 2024 irrigation season.
4. Any application for permanent transfer of Certificate 89373 shall be subject to a full and complete review to determine consistency with the requirements of OAR Chapter 690, Divisions 380 or 385. Approval of this temporary transfer does not establish a precedent for approval of a subsequent application filed for a permanent transfer.
5. The time during which water is used on the proposed lands under this approved temporary transfer does not apply toward a finding of forfeiture of Certificate 89373, under ORS 540.610.
6. The water user shall maintain and operate the existing measurement devices and shall make such improvements as may be required by the Department.
7. The use of water under this temporary transfer may be conditioned or revoked at any time to the extent necessary to avoid injury if the Department finds the transfer causes injury to any existing water right.



8. Pursuant to ORS 536.900, a district and user may be subject to civil penalties for allowing the use of water on both the land from which water is transferred, and the lands to which the water is transferred, during the same irrigation season or calendar year.
9. The use of water at the temporary places of use authorized by this transfer shall be in accordance with the terms and conditions of Certificate 89373.
10. The use of the remaining water rights described by Certificate 89373 not involved in this transfer shall continue to be in accordance with the terms and conditions of Certificate 89373.

Dated in Salem, Oregon on MAY 3 - 2024

  
Lisa J. Jaramillo, Transfer and Conservation Section Manager, for  
DOUGLAS E. WOODCOCK, ACTING DIRECTOR  
Oregon Water Resources Department

Mailing Date: MAY 4 - 2024



## REECE Ann L \* WRD

**From:** Richard Harrington <richard.w.harrington@att.net>  
**Sent:** Thursday, April 25, 2024 4:28 PM  
**To:** REECE Ann L \* WRD  
**Subject:** Comments on T-14425

Hello Ann Reece:

Please consider these Comments in the evaluation of Application for T-14425 submitted by EPID for Rogue Family Farms (RFF).

Every year beginning with 2019, RFF has irrigated more acres than their water rights have allowed. Here is a summary of information found in: 1), applications for hemp licenses where the applicant is asked: for a map of the proposed site; how many acres will be grown; the acres harvested the previous year; and the source of irrigation water: 2), Limited License Applications; and 3), Water Use Reporting data.

Year	Acres Applied For	Acres Harvested	Acres Water permit	Legal Water Source	Reported lbs Harvested	Pounds Per		
Acre		Comments		Reference				
2019	21.83	21.83	21.83	LL-1790	16,373	750.	Used 0.23 AF of 8.2 AF available	1, 2,
3								
2020	21.83	10	9.4	EPID TT	10,000	1,000	12.43 ac. with no water right	3, 4, 5
2021	24.1	15	9.4	EPID TT	5,000	333	14.7 ac. with no water right	4, 6, 7
2022	26.1	25	9.4	EPID TT	7,000	280	16.7 ac. with no right.	6, 8, 9
2023	38.2	40	38.2	LL-1950; C-89373	15,000	375	3.0 AF LL for 33.6 ac.; No TT.	8, 10,
11								
2024.	40		14	LL-1968				10, 13

As your records show, EPID did not apply for a TT for RFF in 2023. RFF applied for 8.2 AF from the XP Reservoir (XPR) under LL-1950 [11], but because of inadequate rainfall in the 2022/2023 wet season, the XP Reservoir (XPR) contained only 3 AF of its 8.2 AF estimated capacity. Thus the LL FO was for 3.0 AF. On May 30, 2023, an ODWR inspection found RFF to be irrigating without a permit. NOV 2313002 was issued on June 2, 2023 [15].

A condition of LL-1950 was the recording and reporting of the water use. RFF ignored the water pumped illegally and began keeping a log of their water use with June 13 as day one [16]. Comparing the meter reading at the end of the 2022 season [17] with the reported meter reading on June 13 revealed that 2.07 of the allowed 3.0 AF had been pumped before June 13. However, RFF was



gifted a replenishment of 2.07 AF by OWRD from EPID water in the combined XPR/"Bulge". With this gift, RFF was able to reach its water use limit of 3 AF — reporting that as of September 16, 2023, to having just made it with 2.96 AF, thus achieving "compliance". In reality, however, RFF had actually used up the legal 3 AF as of July 17 according to the pumping records. So, for some 33.6 acres dependent upon the 3 AF of LL water, the 2.07 AF gift made it possible to avoid another citation for irrigating without a permit.

However, the 33.6 acres were almost certainly to have been irrigated with EPID water under the cover of LL-1950. The evidence for this is the EPID POD meter record which shows that 30.35 AF were pumped from the canal in 2023 [17,18], in excess of the generous maximum of 20.7 AF allowed for the C-89373 POU 4.6 acres at 4.5 AF/acre. Additionally, the May 30 inspection observed that the "conveyance system" for delivering "bulge" water to the POU 4.6 acres was not metered [19] (and OWRD inexplicably did not subsequently require it to be).

One other fact in unravelling what was going on is that the LL-1950 FO allowed for the C-89373 4.6 POU acres to receive "supplemental irrigation" from the LL 3 AF [14] [23] as requested by the Applicant, the need for which defies believability. Plumbing for this "supplemental irrigation" logically required that at some point the LL and EPID pipelines had to join because they both were to supply the same 4.6 acre drip system. With this fact in mind, and the fact that there was no meter for the "bulge" water outflow, it is especially curious why the "supplemental irrigation" provision was included in the FO — the LL water was not needed, but the necessary shared plumbing was an obvious means by which EPID "bulge" water could be diverted to the 33.6 water-starved acres without being recorded by the LL-1950 meter at its XPR outflow.

One other curious set of facts was the observation by inspectors on August 24 that "there was an observed break in the irrigation system feeding the place of use for LL-1950 and S-55239"; and a statement: "Sunrise pond...there is a meter on the diversion and there is no connection to the irrigated area served by LL-1950 and the S-55239 place of use." [19] These statements are noteworthy because these 2 contiguous locations are legally separate, the one identified as "Jacob 3" is owned by RFF; the other "Jacob 4", is leased by RFF; but these cannot legally be using the same water source(s) without the necessary permits. That there was such an observation suggests that RFF was using EPID water also on Jacob 4.

It is important to emphasize that it is not believable that 33.6 acres of hemp could be grown on 3 AF (or even 5.07 AF) while at the same time there is the unaccounted for use of EPID water far in excess of what the 4.6 POU acres could account for. Nor is it believable that the 4.6 POU acres were actually provided "supplemental irrigation" from the LL 3 AF.

In 2022, there was no Limited License, only a TT. ODA hemp licensing information supplied by RFF shows 26.1 acres applied for to grow hemp, but water for the TT was limited to the 9.4 acres of C-89373, so some 16.7 acres were irrigated illegally. Comparing the 2022 T-13959 map with June 19, 2022 Google Earth Pro aerial views [20] unavoidably leads to the question of how this was pulled off so openly and so flawlessly? This aerial view corroborates the ODA Hemp License data that documents far more acres were



grown than 9.4.

Similarly, for 2020 and 2021, the only available water was the 9.4 acres of TT water; the brazenness is difficult to understand.

In 2019, there was LL-1790 for 8.2 AF, but OWRD's annual water use reporting site only shows 0.23 AF used [2], although RFF reported to ODA that 21.83 acres were harvested. I reported a drop of almost 25 feet in the SWL between April and the end of the irrigation season in my well without a pump installed, but that was never acknowledged to be from illegal groundwater pumping by RFF despite the results of an interference test pumping by OWRD [21].

So, after 5 years of unrestrained illegal water use by RFF, we appear to be sliding for a 6th. The obvious lesson from the past years is that RFF takes water without a permit as it so chooses— application form information regarding acreage, AF, water sources and maps are submitted as required, but otherwise ignored by RFF.

For 2024, the ODA hemp license application says 40 acres are being applied for at the former Jacob 3 site now renamed "Rogue 1" [12]; while the LL-1968 Application Map [22] says 23.4 acres (9.4 TT plus 14 LL-1968). However, RFF has been tilling the same areas planted last year, which is consistent with the 40 acre figure. Therefore, at this point it is impossible to know what the true intentions of RFF are for 2024. In 2023, the 3 AF of LL water provided cover for irrigating Jacob 3 and Jacob 4 with EPID water, so it is safe to predict that with the recently approved 8.2 AF from LL-1968, there will be plenty of cover for RFF to again irrigate with EPID

water wherever it chooses without regard for water laws — **if T-14425 is approved.**

Hopefully you now understand this out-of-control outlaw situation; it cannot continue yet another year on the hope that someday "compliance" will happen.

Thank you,

Richard Harrington

References exceeded the yahoo email attachment capacity so are sent in 2 additional emails: [Comments on T-14425 References part A](#) and [part B](#)

## REECE Ann L \* WRD

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**From:** Richard Harrington <richard.w.harrington@att.net>  
**Sent:** Thursday, April 25, 2024 4:30 PM  
**To:** REECE Ann L \* WRD  
**Subject:** Comments on T-14425 References part A  
**Attachments:** LL-1790 FO.pdf; LL-1790 water use.png; Jacob 3-2020.pdf; Jacob 3-2021.pdf; T-13403 (2020).pdf; 2022 Jacob-3.pdf; Jacob 3 2022 added acres.pdf; T-13643 FO.pdf; Jacob-3 2023.pdf; T-13959 FO.pdf; LL-1950 FO.pdf; Jacob-3 2024.pdf; LL-1968 FO.pdf

## References for T-14425 Comments

1. LL-1790 FO. In 2019, RFF leased the property from then owner, Ross Hrncir, and purchased it from him in October, 2019.
2. LL-1790 water use.
3. Jacob 3-2020
4. Jacob 3-2021
5. T-13403 FO
6. 2022 Jacob-3 Hemp License Application and  
2022 Jacob-3 Added Additional Acres to Application
7. T-13643 FO
8. Jacob 3 2023
9. T-13959 FO
10. Jacob-3 2024
11. LL-1950 FO
13. LL-1968 FO



## REECE Ann L \* WRD

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**From:** Richard Harrington <richard.w.harrington@att.net>  
**Sent:** Thursday, April 25, 2024 4:31 PM  
**To:** REECE Ann L \* WRD  
**Subject:** Comments on T-14425 References part B  
**Attachments:** 2313002NOV.pdf; LL-1950 Water Use .pdf; EPID POD -2024.jpeg; EPID POD-2022..JPG; RFF Lands & Water 6192022.png; Planting 2022-1.png; Planting 2022-2.png; Kemper report highlighted.pdf; LL-1968 Map.pdf; LL-1950 map.pdf

15. 231002 NOV

16. LL-1950 Water Use. As reported to comply with LL-1950 FO

17. EPID POD. Meter photo March, 2024

18. EPID POD Meter photo October 20, 2022

19. Doug Woodcock personal communication, 2024

20. Google Earth Pro aerial. June 19, 2022; Planting 2022 -1 and -2 (workers are visible) Clearly more than 9.4 acres being grown.

21. Kemper Report. See Conclusions on page 16. RFF was illegally pumping groundwater but ODRW would not acknowledge or follow up on the Report.

22. LL-1968 map

23 LL-1950 map. See map #1 or #2 Double hatched area on right was the 4.6 acres identified for "supplemental irrigation".

## Oregon Water Resources Department

### **Final Order Limited License Application LL-1790**



#### *Appeal Rights*

This is a final order in other than a contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 536.075 and OAR 137-004-0080 you may either 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.

#### *Requested Water Use*

On June 20, 2019, the Water Resources Department received completed application **LL-1790** from Ross Hrcir for the use of 30 gallons per minute of stored water from XP Reservoir (Permit R-15198), tributary to Little Butte Creek, located in the NE ¼, SE ¼, Township 35 South, Range 1 West, W.M., for irrigation, for the period of June 10, 2019 through August 30, 2019.

#### *Authorities*

The Department may approve a limited license pursuant to its authority under ORS 537.143, 537.144 and OAR 690-340-0030.

ORS 537.143(2) authorizes the Director to revoke the right to use water under a limited license if it causes injury to any water right or a minimum perennial streamflow.

#### *Findings of Fact*

1. The forms, fees, and map have been submitted, as required by OAR 690-340-0030(1).
2. The Department provided public notice of the application on June 25, 2019, as required by OAR 690-340-0030(2).
3. This limited license request is limited to an area within a single drainage basin, as required by OAR 690-340-0030(3).
4. The Department has determined that water is available for the requested use.
5. The Department has not received comments related to the possible issuance of the limited license.
6. Permit R-15198 allows for the storage of 8.2 acre-feet of water for multiple purpose use.
7. Pursuant to OAR 690-340-0030(4)(5), conditions have been added with regard to notice and water-use measurement.

8. Jackson County has indicated that the proposed use is compatible with the applicable acknowledged comprehensive land-use plan. A copy of the land use compatibility is in the file.

### *Conclusions of Law*

The proposed water use will not impair or be detrimental to the public interest pursuant to OAR 690-340-0030(2), as limited in the order below.

### *Order*

Therefore, pursuant to ORS 537.143, ORS 537.144, and OAR 690-340-0030, application **LL-1790** is approved as conditioned below.

1. The period and rate of use for **LL-1790** shall be from the date of this Final Order through August 30, 2019, for the use of 30 gallons per minute, further limited to 8.2 acre-feet of **stored water only** from XP Reservoir (Permit R-15198), for the purpose of irrigation.
2. The licensee shall give notice to the Watermaster in the district where use is to occur not less than 15 days or more than 60 days in advance of using the water under the limited license. The notice shall include the location of the diversion, the quantity of water to be diverted, and the intended use and place of use. In the case of this application, this order serves as the notice described above.
3. Before water use may begin under this limited license, the licensee shall install a totalizing flow meter at each point of diversion. The totalizing flow meter must be installed and maintained in good working order. In addition the licensee shall maintain a record of all water use, including the total number of hours of pumping, the total quantity pumped, and the categories of beneficial use to which the water is applied. During the period of the limited license, the record of use shall be submitted to the Department annually, and shall be submitted to the Watermaster upon request.
4. The Director may revoke the right to use water for any reason described in ORS 537.143(2), and OAR 690-340-0030(6). Such revocation may be prompted by field regulatory activities or by any other information.
5. Use of water under a limited license shall not have priority over any water right exercised according to a permit or certificate, and shall be subordinate to all other authorized uses that rely upon the same source.
6. By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.
7. A copy of this limited license shall be kept at the place of use, and be made available for inspection by the Watermaster or other state authority.

NOTE: This water-use authorization is temporary. Applicants are advised that issuance of this final order does not guarantee that any permit for the authorized use will be issued in the future; any investments should be made with that in mind.

Issued July 11, 2019



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

Enclosures - fish screen criteria

cc: Shavon L. Haynes, District Watermaster  
Pete Samarin, ODFW  
Bill Meyers, DEQ  
Hydrographics  
File



If you need further assistance, please contact the Water Rights Section at the address, phone number, or fax number below. When contacting the Department, be sure to reference your limited license number for fastest service.

Remember, this limited license does not provide a secure source of water. Water use can be revoked at any time. Such revocation may be prompted by field regulatory activities or many other reasons.

Water Rights Section  
Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem OR 97301-1271  
Phone: (503) 986-0817      Fax: (503) 986-0901

# Water Use Report

**Report ID 68162**

XP RESERVOIR;

74 FEET WEST FROM E1/4 CORNER, SECTION 28

(35S-1W-28-NE SE)

[App: LL 1790 EX](#)

[App: LL 1829 \\*](#)

[ROSS HRNCIR](#)

Records per page:

## Water Used

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total Water Used	Irrigated Acres
-----	-----	-----	-----	-----	-----	-----	-----	-----	------------------	-----------------

						0.09	0.23	0.23		0.23
--	--	--	--	--	--	------	------	------	--	------

ends. Example: the 2014 water year begins Oct. 1, 2013 and ends Sep. 30, 2014.

## Method(s) of Measurement:

thly readings and then reporting the difference between one  
(xt)

uring the month;

in the reservoir/pond during the month, as represented by the volume of water

h month.

et" (AF), regardless of the original measurement unit reported. One AF is the volume of  
= 325,850 gallons.

no water was used during those months; if a year is not listed, no report of water use

# INDUSTRIAL HEMP PROGRAM

Legal Business Name: Rogue Family Farms LLC

E-RECEIVED  
4/25/2024  
OWRD

## Grower

Date: \_\_\_\_\_ Seed: Yes \_\_\_\_\_ No \_\_\_\_\_

Complete: Yes X No \_\_\_\_\_ Date: 1/23/20 Approved: Yes X No \_\_\_\_\_ Date: 1/23/20

Actions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Actions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Actions: \_\_\_\_\_  
\_\_\_\_\_  
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Date: \_\_\_\_\_

Actions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## CHANGE OF INFORMATION

Date: \_\_\_\_\_

From: \_\_\_\_\_

To: \_\_\_\_\_

Actions: \_\_\_\_\_

## REFUNDED

Date: \_\_\_\_\_

Actions: \_\_\_\_\_

Actions: \_\_\_\_\_

Actions: \_\_\_\_\_



## 2020 HEMP REGISTRATION APPLICATION GROWER/GROW SITE

E-RECEIVED  
4/25/2024  
OWRD

**A: GROWER INFORMATION:**

1. Registrant's Business Name: Rogue Family Farms LLC
2. 2019 Hemp Grower Registration Number: (if applicable) [REDACTED]  
(example: AG-R1234567IHG)
3. Legal Status of Registrant: Individual \_\_\_\_\_ LLC XXXXXX other \_\_\_\_\_
4. Oregon Secretary of State Registration Number: [REDACTED]  
(NOT your tax id number)
5. Members/Officers of Business: (if applicable)
- Name: Jacob Fisher Title: Member
- Name: \_\_\_\_\_ Title: \_\_\_\_\_
- Name: \_\_\_\_\_ Title: \_\_\_\_\_
- Name: \_\_\_\_\_ Title: \_\_\_\_\_
6. Contact Person: (main contact) Jacob Fisher
- Telephone Number: \_\_\_\_\_ Cell: 1 (660) 591-5891
- Mailing Address: 1424 N. River Rd
- City: Gold Hill State: OR Zip: 97525
- Email: FISHERJACOB@YAHOO.COM

TO DIVISION  
JAN 14



**B: GROW SITE INFORMATION:** (Address where Hemp is being grown; complete if applicable)

7. Site 1: Grow site name Jacob #3  
(Limit 10 characters)

Street Address: 13003 OR Hwy 62

City: Eagle Point State: OR Zip: 97524 County: Jackson

**\*IMPORTANT: Attach a copy of a map showing boundaries of this growing area. Keep for your records.**

**C: PRODUCTION AREA INFORMATION:** (Hemp location(s) at Grow site, list each separately)

8. Site 1: (location of Hemp on property)

Area Type: Field ☒ Greenhouse/Indoor ☐

Size: 21.83

Specify: Acres ☒ Square Feet ☐

Intended Use: (Check all that apply)

Flower ☒ Hemp Seed ☐ Fiber ☐ Biomass ☒ Other ☐

Area Name: XP 1  
(Limit 10 Character Maximum)

Longitude: 42.496155 Latitude: 122.816476

List Global Positioning System (GPS) coordinates in decimal form. (Example: 44.123456, -123.123456)

Site 2: (location of Hemp on property)

Area Type: Field ☐ Greenhouse/Indoor ☐

Size: \_\_\_\_\_

Specify: Acres ☐ Square Feet ☐

Intended Use: (Check all that apply)

Flower ☐ Hemp Seed ☐ Fiber ☐ Biomass ☐ Other ☐

Area Name: \_\_\_\_\_  
(Limit 10 Character Maximum)

Longitude: \_\_\_\_\_ Latitude: \_\_\_\_\_

List Global Positioning System (GPS) coordinates in decimal form. (Example: 44.123456, -123.123456)

Site 3: (location of Hemp on property)

Area Type: Field ☐ Greenhouse/Indoor ☐

Size: \_\_\_\_\_

Specify: Acres ☐ Square Feet ☐

Intended Use: (Check all that apply)

Flower ☐ Hemp Seed ☐ Fiber ☐ Biomass ☐ Other ☐

Area Name: \_\_\_\_\_  
(Limit 10 Character Maximum)

Longitude: \_\_\_\_\_ Latitude: \_\_\_\_\_

List Global Positioning System (GPS) coordinates in decimal form. (Example: 44.123456, -123.123456)

**D. SIGNATURE AND ACKNOWLEDGMENT:**

9. Applicant for registration acknowledges and agrees that:

- Any information provided to the Department of Agriculture will be publicly disclosed and will be provided to law enforcement agencies without notice to the applicant;
- The Department of Agriculture may enter any field, facility or greenhouse used for production or handling of hemp or agricultural hemp seed and may take samples of the crop, including agricultural hemp seed, as necessary for the administration of the hemp laws;
- All fees lawfully due to the Department of Agriculture are timely paid;
- The information provided is true and correct and the applicant's signature is an attestation of that fact;
- If using irrigated water, applicant has or will obtain the appropriate water use permit. Information concerning water use permits can be found at <https://oda.fyi/WaterResources> ;
- If leasing land for hemp production or processing, applicant obtained permission from the land owner prior to applying to grow or process hemp.

I, (Print your name) Jacob Fisher agree to general conditions that in addition to meeting all laws and regulations pertaining to hemp growers and handlers, ORS 571.300 to 571.315, as amended by Oregon Laws 2016, Chapter 71, Oregon Laws 2017, and Oregon Laws 2018, Chapter 531 and OAR 603-048-0010 to 603-048-2480, all production, storing, processing, handling, packaging, labeling, marketing and selling of agricultural hemp seed must meet all applicable seed laws. Regulation as specified in ORS 633.500 through 633.996 and seed regulations OAR 603-056-0490. By signature below I attest that the information in this application form is true, correct and the above requirements are understood.

Signature Jacob Fisher Date: 01/01/2020

*\*Keep a copy of this application and all other records associated with your hemp business as required by Oregon Administrative Rule.*



**E. END OF YEAR CROP REPORT: (if you grew hemp in 2019, please provide details below)**

10. Total area Harvested: 21.83 Acres ☒ or-Square Feet ☐ Pounds Hemp Harvested 16,373

**Check box if you did NOT grow hemp in 2019** ☐

**F. FEE AND PAYMENT INFORMATION:**

**11. IMPORTANT PAYMENT DETAILS: DO NOT EMAIL CREDIT CARD INFORMATION**

*If registering an additional Grow Site Production area to a current Grow site address, NO additional Grower Registration fee required. Grower registration fees are due for each separate address of Hemp production area properties.*

	FEE	FEES SUBMITTED
<input type="checkbox"/> Hemp Grower Registration	\$250.00	\$ _____
<input checked="" type="checkbox"/> Hemp Grow Site Registration	\$500.00	\$ <u>500.00</u>

**Registrations for Grower registration and Hemp Grow Site Registration are valid for a one-year (calendar year) term beginning January 1, 2020 and ending on December 31, 2020 unless revoked. FEES CANNOT BE PRO-RATED AND ARE NON-REFUNDABLE once a registration has been issued.**

**For CHECKS and MONEY ORDERS, mail USPS only to:**

Oregon Department of Agriculture  
PO Box 4395, Unit 17  
Portland, OR 97208-4395

**For CREDIT CARD charges, mail or fax to:**

Oregon Department of Agriculture  
625 Capitol Street NE, Suite 100  
Salem, OR 97301-2532  
**Secure Fax: (503)986-4746**

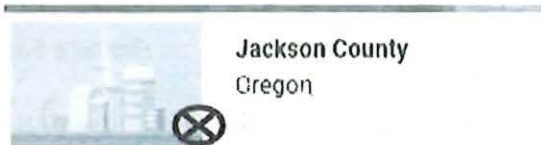
Make CHECKS payable to: Oregon Department of Agriculture. All dishonored checks or electronic payments will incur a \$25.00 administrative fee as per ORS 30.701.

.....

**Rogue River Farms LLC – OR SOS Registration # - [REDACTED]  
ODA Hemp Grower Registration # [REDACTED]  
Fields Plot Map Exhibits**

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**13003 Hwy 62, - Eagle Point, OR 97524  
Grow Site Name: Jacob #3; Area Name: XP 1 - (Approximately 21.83 Acres)**







Check box if assigned inspection

Legal Business Name: Rogue Family Farms LLCComplete ☒Incomplete ☐Date Issued 2/26 AG

Inspector:

Date Inspected:

Notes:

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Registration Type: Grower

Seed: ☐ NONE☐ Hemp Seed  
Registration☐ Retail/Wholesale  
Seed Dealer License

Actions:

02/08/21 - grow site area name too long, production area 1 "XP1" not listed on map, "XPGH2" gps lat/long coordinates incorrect, #10 end of year report (is that 10 or 40?), map is incorrect, sent email ~ GJ

02/10/21 - rcv'd revision correcting grow site name/coordinates/end of year report/map, complete application scanned, ready for specialist review and approval ~

Actions: 2/26 APPROVED, READY TO EMAIL. AG03/04/21 - emailed applicant, entered into database, ready for QA/QC ~ GJ

Actions:

## DATABASE

Entry Date: 03/04

QA/QC Date: \_\_\_\_\_

Initials: gj

Initials: \_\_\_\_\_

## CHANGE FORMS

Change Form Received? Y ☐ N ☒Date Received: Database Entry Updated? Y ☐ N ☒Date:  Initials: 

## CANCEL/REFUND

Cancellation Requested On: \_\_\_\_\_

Refund Requested? Y ☐ N ☒Database Entry Updated? Y ☒ N ☐Date:  Initials: Crop Loss Received? ☐Test Reports Received? ☐

OREGON  
DEPARTMENT OF  
AGRICULTURE2021 HEMP GROWER / GROW SITE  
REGISTRATION APPLICATION

## GROWER INFORMATION

Instructions can be found at: <https://oda.direct/HempGrowerInstructions>1. Registrant's Business Name Rogue Family Farms LLC2. 2020 Hemp Grower Registration Number (if applicable) [REDACTED]  
(example: AG-R1234567IHG)3. Legal Status of Registrant: Individual ☐ LLC ☒ Other \_\_\_\_\_4. Oregon Secretary of State Registration Number [REDACTED]  
<https://sos.oregon.gov/business/Pages/register.aspx> (If [REDACTED] tax ID number)

5. List Key Participants: (List members, officers, owners, or other key participants who are authorized to make changes to the registration. Use continuation form if you need to add more key participants.)

Name Jacob Fisher Title Sole Member Phone (660) 591-5891

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

6. Main Contact Person: (This person will be listed on the printed registration, and will be the primary contact for registration and inspection appointments.)

Name Roosevelt Shannon Email RSHANNONCO@Gmail.com

Status of main contact: (check all that apply):

Owner ☐ Consultant ☒ Employee ☐ Other (Please list) \_\_\_\_\_Phone (541) 479-3969 Cell Phone (305) 586-6560Mailing Address 300 Eagle Ridge DrCity Grants Pass State OR ZIP 97526

7. Grow Site Information: (Address where the hemp is being grown; complete if applicable)

Grow site name (Limit to 10 characters) Jacob #3Street address: 13003 Hwy 62 County JacksonCity Eagle Point State OR Zip 97524\*Attach copy of a [map showing boundaries](#) of this growing site. Keep a copy for your records.



**8. Production Area Information:** Hemp grow site location(s), list each production area separately.  
(Production Area names and other information provided must be used on all testing forms).

**Area 1.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XP 1

Area: Field ☒ Number of acres 24.1 or Greenhouse/Indoor ☐ Size \_\_\_\_\_ square feet

**Hemp Intended use (check all that apply):**

Flower ☒ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☐ or Other ☐

How many harvests are planned for this area in 2021? 1

**Location of Area 1 on property**

Latitude 42.496635 Longitude -122.816778

List Global Positioning System (GPS) coordinates (In Decimal: e.g. 44.123456, -123.123456)

\* Attach copy of a [map showing boundaries](#) of this area. Keep a copy for your records.

**Area 2.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 1

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,700 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2021? 1

**Location of Area 2 on property**

Latitude 42.495606 Longitude -122.814439

List Global Positioning System (GPS) coordinates (In Decimal: e.g. 44.123456, -123.123456)

\* Attach copy of a [map showing boundaries](#) of this area. Keep a copy for your records.

**Area 3.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 2

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,700 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2021? 1

**Location of Area 3 on property**

Latitude 42.495092 Longitude -122.814471

List Global Positioning System (GPS) coordinates (In Decimal: e.g. 44.123456, -123.123456)

\* Attach copy of a [map showing boundaries](#) of this area. Keep a copy for your records.





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## 2021 PRODUCTION AREA CONTINUATION FORM HEMP GROWER / SITE REGISTRATION

Registrant's Business Name: Rogue Family Farms LLC ( [REDACTED] )

**Site 1: Grow Site Information:** (Address where the hemp is being grown; complete if applicable)

Grow site name (Limit to 10 characters) Jacob #3

Street Address 13003 OR Hwy 62 County Jackson

City Eagle Point State OR Zip 97524

\*IMPORTANT: Attach copy of a map showing boundaries of this growing area. Keep a copy for your records.

**Production Area Information: Hemp grow site location(s), list each production area separately**

**Area 4. (location of Hemp on property)**

Provide Area Name (Limit to 10 Characters) XPGH 3

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,800 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area? 1

**Location of Hemp on property**

Latitude 42.496429 Longitude -122.821413

List Global Positioning System (GPS) coordinates (In Decimal: e.g. 44.123456, -123.123456)

\* Attach copy of a map showing boundaries of this area. Keep a copy for your records.

**Area 5. (location of Hemp on property)**

Provide Area Name (Limit to 10 Characters) XPGH 4

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,800 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area? 1

**Location of Hemp on property**

Latitude 42.49646 Longitude -122.82122

List Global Positioning System (GPS) coordinates (In Decimal: e.g. 44.123456, -123.123456)

\* Attach copy of a map showing boundaries of this area. Keep a copy for your records.

9. Are you are storing or drying your own hemp produced at another location please provide address?  
 Yes ☐ No ☒ (If you are commercially drying for others you will be required to have a Handlers Registration). If yes provide hemp storage address:

Street Address \_\_\_\_\_ County \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

#### 10. End of the year Hemp Crop Report

If you grew hemp in 2020, please provide the following information:

Acres or square feet harvested: 10 acres Pounds of hemp harvested: 10,000 lbs

Check box if you did not grow hemp in 2020 ☐

#### 11. Irrigation of a commercial crop in Oregon requires a legal source of water for production. Please visit this link <https://oda.fyi/WaterResources> for more information on water use permits.

What legal source of water will you be using for irrigation of your production site?

Groundwater ☐ Surface Water ☒ Other: Eagle Point Irrigation

If you will be using a water right please include the permit or certificate number here: \_\_\_\_\_

#### 12. Signature and Acknowledgement:

Applicant for registration acknowledges and agrees that:

- The information provided is true and correct, applicant's signature is proof of that fact;
- Any information provided to the Department may be publicly disclosed and may be provided to law enforcement agencies without notice to the applicant;
- The Department may enter any field, facility or greenhouse used for production or handling of hemp or agricultural hemp seed and may take samples and test for total THC concentration of the crop, including agricultural hemp seed, as necessary for the administration of the hemp laws;
- All fees lawfully due to the Department must be timely paid;
- If using irrigated water, applicant has or will obtain the appropriate water use permit. Information concerning water use permits can be found at <https://oda.fyi/WaterUsePermits>;
- If leasing land for hemp production or processing, applicant obtained permission from the land owner prior to applying to grow or process hemp;
- A pre-harvest test for total THC must be conducted for each production area before harvest as required by [OAR 603-048-0600](https://www.legis.or.gov/legislation/bills/2019/0600).

I (print your name) Jacob Fisher agree to general conditions that in addition to meeting all laws and regulations pertaining to hemp growers and handlers, ORS 571.260 to 571.348 and OAR Chapter 603, Division 48, all production, storing, processing, handling, packaging, labeling, marketing and selling of agricultural hemp seed must meet all applicable seed laws. Regulations as specified in ORS 633.500 through 633.996 and seed regulations OAR 603-056- 0490. By signature below I attest that the information in this application form is true, correct, and the above requirements are understood.

Signature \_\_\_\_\_ Date \_\_\_\_\_



9. Are you storing or drying your own hemp produced at another location please provide address?  
Yes ☐ No ☒ (If you are commercially drying for others you will be required to have a Handlers Registration). If yes provide hemp storage address:

Street Address \_\_\_\_\_ County \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**10. End of the year Hemp Crop Report**

If you grew hemp in 2020, please provide the following information:

Acres or square feet harvested: 10 Acres Pounds of hemp harvested: 10,000 lbs

Check box if you did not grow hemp in 2020 ☐

**11. Irrigation of a commercial crop in Oregon requires a legal source of water for production. Please visit this link <https://oda.fyi/WaterResources> for more information on water use permits.**

What legal source of water will you be using for irrigation of your production site?

Groundwater ☐ Surface Water ☒ Other: \_\_\_\_\_

If you will be using a water right please include the permit or certificate number here: \_\_\_\_\_

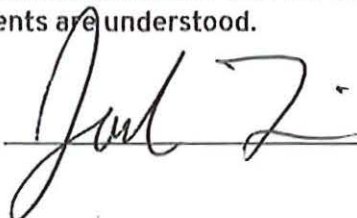
**12. Signature and Acknowledgement:**

Applicant for registration acknowledges and agrees that:

- The information provided is true and correct, applicant's signature is proof of that fact;
- Any information provided to the Department may be publicly disclosed and may be provided to law enforcement agencies without notice to the applicant;
- The Department may enter any field, facility or greenhouse used for production or handling of hemp or agricultural hemp seed and may take samples and test for total THC concentration of the crop, including agricultural hemp seed, as necessary for the administration of the hemp laws;
- All fees lawfully due to the Department must be timely paid;
- If using irrigated water, applicant has or will obtain the appropriate water use permit. Information concerning water use permits can be found at <https://oda.fyi/WaterUsePermits>;
- If leasing land for hemp production or processing, applicant obtained permission from the land owner prior to applying to grow or process hemp;
- A pre-harvest test for total THC must be conducted for each production area before harvest as required by OAR 603-048-0600.

I (print your name) Jacob Fisher agree to general conditions that in addition to meeting all laws and regulations pertaining to hemp growers and handlers, ORS 571.260 to 571.348 and OAR Chapter 603, Division 48, all production, storing, processing, handling, packaging, labeling, marketing and selling of agricultural hemp seed must meet all applicable seed laws. Regulations as specified in ORS 633.500 through 633.996 and seed regulations OAR 603-056- 0490. By signature below I attest that the information in this application form is true, correct, and the above requirements are understood.

Signature



Date

22 Jan 2021



**13. Fee and Payment Information:** (if registering additional grow sites, no additional grower registration fee is required)

	FEE	FEES SUBMITTED
<input type="checkbox"/> Hemp Grower Registration	\$250	\$ _____
<input checked="" type="checkbox"/> Hemp Grow Site Registration	\$500	\$ 500.00

Registrations for Grower Registration and Hemp Grow Site Registration are valid for a one-year term beginning January 1, 2021, and ending December 31, 2021, unless revoked. Fees cannot be pro-rated and are non-refundable once a registration has been issued.

**For checks or money orders,  
mail (USPS only) to:**

Oregon Department of Agriculture  
PO Box 4395, Unit 17  
Portland, OR 97208-4395

**For credit card charges, mail or fax to:**

Oregon Department of Agriculture  
635 Capitol St. NE, Suite 100  
Salem, OR 97301-2532  
**Secure Fax: (503) 986-4746**

**DO NOT EMAIL CREDIT CARD INFORMATION**

Make checks payable to Oregon Department of Agriculture.

All dishonored checks or electronic payments will incur a \$25 administrative fee as per ORS 30.701.

\*\*\*\*\*

A receipt is available by email or fax for credit card payments ONLY. If you would like to receive a receipt, provide an email address: \_\_\_\_\_  
or a fax number: \_\_\_\_\_

**Receipt is for proof of payment only.  
Registration will not be issued until application has been approved.**

**For Discover, Visa or MasterCard charges complete the following information**

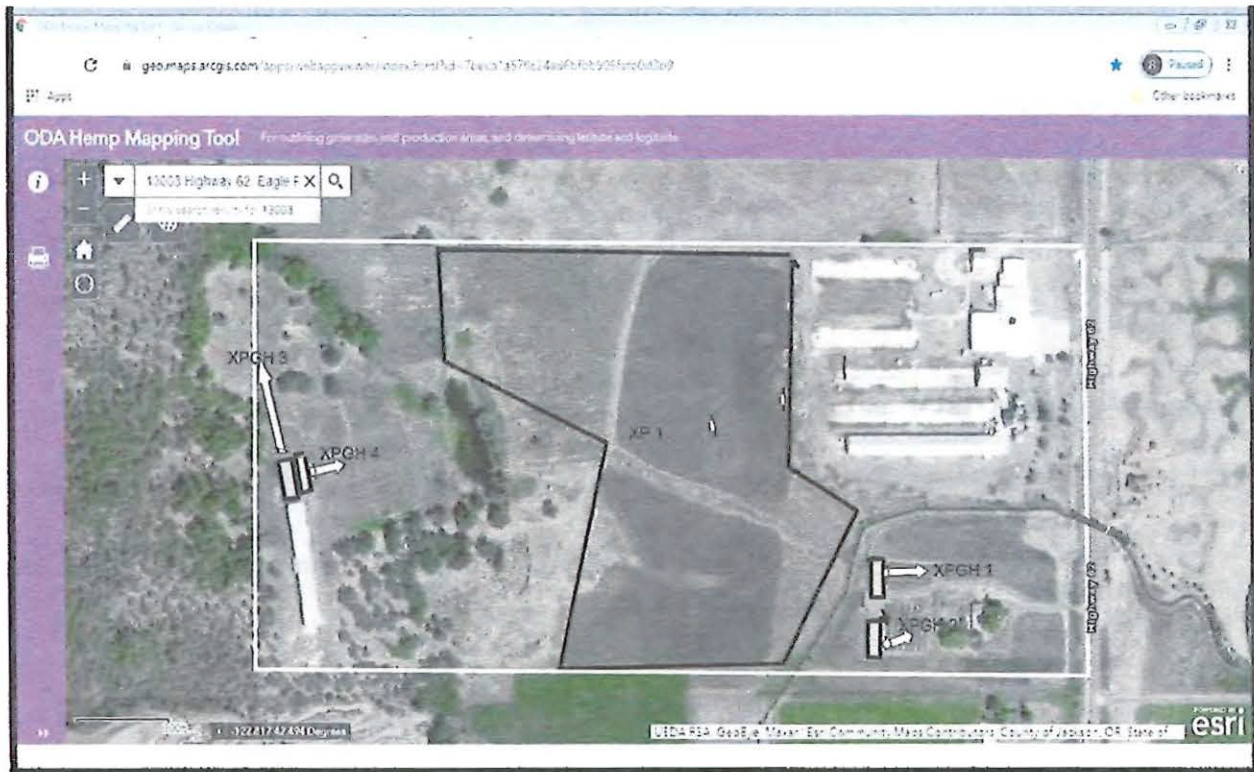
Name of Cardholder \_\_\_\_\_ Phone \_\_\_\_\_  
Address of Cardholder \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Signature: \_\_\_\_\_ Total Charges: \$ \_\_\_\_\_  
Card Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

**DO NOT EMAIL CREDIT CARD INFORMATION**

**Keep a copy of this application and all other records associated with your hemp business as required by Oregon Administrative Rule for three years from disposition of crop.**

**Rogue Family Farms LLC – OR SOS Registration # - [REDACTED]**  
**ODA Hemp Grower Registration # [REDACTED]**  
**Fields Plot Map Exhibits**

**13003 Hwy 62, - Eagle Point, OR 97524**  
**Grow Site Name: Jacob #3; Area Name: XP 1**





**Rogue Family Farms LLC – OR SOS Registration # - [REDACTED]  
ODA Hemp Grower Registration # [REDACTED]  
Fields Plot Map Exhibits**

**13003 Hwy 62, - Eagle Point, OR 97524**

**Grow Site Name: Jacob #3; Area Name: XP 1 - (Approximately 21.83 Acres)**







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2021 HEMP GROWER / GROW SITE  
REGISTRATION APPLICATION

GROWER INFORMATION

Instructions can be found at: <https://oda.direct/HempGrowerInstructions>

1. Registrant's Business Name Rogue Family Farms LLC [REDACTED]

2. 2020 Hemp Grower Registration Number (if applicable) [REDACTED]  
(example: AG-R1234567IHG)

3. Legal Status of Registrant: Individual ☐ LLC ☒ Other \_\_\_\_\_

4. Oregon Secretary of State Registration Number [REDACTED]  
<https://sos.oregon.gov/business/Pages/register.aspx> (If [REDACTED] tax ID number)

5. List Key Participants: (List members, officers, owners, or other key participants who are authorized to make changes to the registration. Use continuation form if you need to add more key participants.)

Name Jacob Fisher Title Sole Member Phone (660) 591-5891

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

6. Main Contact Person: (This person will be listed on the printed registration, and will be the primary contact for registration and inspection appointments.)

Name Roosevelt Shannon Email RSHANNONCO@Gmail.com

Status of main contact: (check all that apply):

Owner ☐ Consultant ☒ Employee ☐ Other (Please list) \_\_\_\_\_

Phone (541) 479-3969 Cell Phone (305) 586-6560

Mailing Address 300 Eagle Ridge Dr

City Grants Pass State OR ZIP 97526

7. Grow Site Information: (Address where the hemp is being grown; complete if applicable)

Grow site name (Limit to 10 characters) Jacob #3 (AG-R1065290HGS)

Street address: 13003 Hwy 62 County Jackson

City Eagle Point State OR Zip 97524

\*Attach copy of a map showing boundaries of this growing site. Keep a copy for your records.



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

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# Application for District Temporary Water Right Transfer

Please type or print legibly in dark ink. If your application is incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "N/A" to indicate "Not Applicable." As you complete this form, please refer to notes and guidance included on the application. A summary of review criteria and procedures that are generally applicable to these applications is available at [www.wrd.state.or.us/OWRD/PUBS/forms.shtml](http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml).

Application for the 2020 irrigation season.  
year

## 1. APPLICANT/AGENT INFORMATION

IRRIGATION DISTRICT Eagle Point Irrigation District			PHONE NO. 541 826-3411	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 157			FAX NO. 541 826-8738	
CITY Eagle Point	STATE OR	ZIP 97524	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.				

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.				

## 2. PROPOSED CHANGE(S) TO WATER RIGHT(S)

- List **all** water rights to be affected by this transfer. Indicate the certificate, permit, decree or other identifying number(s) in the table below: If a certificate has been issued and reflects the current status of the water right, you need only list the certificate number.  
(Attach additional pages as necessary.)

	Application / Decree	Permit / Previous Transfer	Certificate
1.	- /	- / -	89373
2.	- /	- / -	
3.	- /	- / -	
4.	- /	- / -	
5.	- /	- / -	
6.	- /	- / -	

- Check **all** proposed change(s) included in this transfer application:

- ☒ Place of Use      ☐ Point of Diversion or Point of Appropriation  
☐ Surface Water source to Ground Water source  
☐ Character or Type of Use

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### 3. CONSULTATION WITH STATE AGENCIES, LOCAL GOVERNMENTS, AND TRIBAL GOVERNMENTS

MAR 19 2020

Is this transfer application for a change in point of diversion in response to an emergency?

☐ Yes ☒ No

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Has the district conferred with the Oregon Department of Fish and Wildlife, Division of State Lands, and affected local governments (e.g., county, city, municipal corporation), and tribal governments about the proposed point of diversion change? ☐ Yes ☒ No

*If "Yes", for any of the above, list the agency or government name and the name and phone number of the appropriate contact person:*

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

### 4. CONSENT FOR A CHANGE IN TYPE OF USE OF A WATER RIGHT TO STORE WATER

Is this transfer application for a change in type of use of a water right to store water?

☐ Yes ☒ No

Has the district received written consent to the change from the operator of the reservoir if different than the district, or from the appropriate federal agency if the water right to store water is issued in the name of a federal governmental agency? ☐ Yes ☒ No

*If "Yes", for any of the above, label and attach a dated and signed copy of the written consent.*



## 5. ATTACHMENTS

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MAR 19 2020

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Check each of the following attachments included with this application. The application will be returned if all required attachments are not included.

### Supplemental Form A –

#### Description of Proposed Change(s) to a Water Right

- ☒ A separate Supplemental Form A is enclosed for each water right to be affected by this transfer.

#### Map

- ☒ Temporary Transfer  
A map meeting the requirements of OAR 690-385-3300 must be included but need not be prepared by a Certified Water Right Examiner.

#### Consent to Transfer

- ☐ A copy of the written consent, if applicable, for a change in type of use of a water right to store water.

### Supplemental Water Right Statement

- ☐ A written statement, if applicable, identifying supplemental water rights that will not be transferred, but remain unexercised at the authorized place of use during the irrigation season.

#### Water Well Reports/Well Logs:

- ☐ The application is for a change from surface water to ground water and copies of all water well reports are attached.
- ☐ Water well reports are not available and attached is a description of construction details including well depth, static water level, and information necessary to establish the ground water body developed or proposed to be developed.
- ☐ The application is for a surface water transfer and water well reports are not required.

#### Fees:

- ☒ Amount enclosed: \$831.62  
See the Department's Fee Schedule at [www.wrd.state.or.us](http://www.wrd.state.or.us) or call (503) 986-0900.

## 6. SIGNATURES

The district certifies the following:

- (1) The water right(s) proposed for transfer is a water right(s) subject to transfer and has not been forfeited for nonuse under ORS 540.610;
- (2) Each user affected by the proposed transfer has provided written authorization for the transfer and such authorization is on file with the district; and
- (3) The district has notified each affected user that the Department may condition or reject the transfer at any time to the extent necessary too avoid injury to an existing water right, and that the use of water on lands from which the water right is transferred (authorized place of use) and at the proposed place of use during the same irrigation season or calendar year may subject both the user and district to civil penalties.

On behalf of the district, I affirm that the information contained in this application is true and accurate.

  
District Manager signature

David Ford  
name (print)

3-17-20  
date

OR

\_\_\_\_\_  
Authorized District Representative signature

\_\_\_\_\_  
name (print)

\_\_\_\_\_  
date

### Before submitting your application to the Department, be sure you have:

- Answered each question completely.
- Included all the required attachments.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount.



**District Temporary Water Right Transfer Application**  
**Supplemental Form A**



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**DESCRIPTION OF PROPOSED CHANGE(S) TO A WATER RIGHT**

List only one water right per page. A separate Supplemental Form A must be completed for each certificate, permit, decree, or other right involved in the proposed transfer.

Attach additional copies of Supplemental Form A as needed to describe other certificates, permits, decrees or other rights involved in this transfer.

■ Certificate Number or other identifying number: 89373

**1. TYPE OF CHANGE(S) PROPOSED**

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> Change to facilitate a change in Place of Use (The old point of diversion or appropriation will <b>not</b> be used for the portion of the water right affected by the transfer.)	<input type="checkbox"/> <b>All of the right will be exercised at a different location than currently authorized</b> (Use of water at the current location will be discontinued.)	Proposed new use: <input type="checkbox"/> Change a water right to Store Water
<input checked="" type="checkbox"/> <b>Surface Water to Ground Water</b> (A new point of appropriation will be used instead of the old point of diversion. The old point of diversion will <b>not</b> be used.)	<input checked="" type="checkbox"/> <b>Only a portion of the right will be exercised at a different location than currently authorized</b> (Use of water at the current location will be discontinued.)	<input type="checkbox"/> <b>Diminish</b> an irrigation water right (primary) to a supplemental water right
<input type="checkbox"/> Change in Point of Diversion in Response to an Emergency		



**2. CURRENT WATER RIGHT INFORMATION**Water Right Subject to Transfer (check and complete one of the following):

<input type="checkbox"/> Certificated Right	89373	S-6396
	Certificate Number	Permit Number or Decree Name
<input type="checkbox"/> Adjudicated, Non-certificated Right		
	Name of Decree	Page Number
<input type="checkbox"/> Permit for which Proof has been Approved	-	
	Permit Number	Date Claim of Beneficial Use Submitted
<input type="checkbox"/> Transferred Right for which Proof has been Filed	-	
	Previous Transfer Number	Date Claim of Beneficial Use Submitted

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- Name on Permit, Certificate, or Decree: Eagle Point Irrigation District
- County: Jackson
- Authorized Use(s) to be Affected by Transfer: Irrigation
- Priority Date(s): 2/20/1924

*If there are multiple Priority Dates identified on the water right, any information provided on pages 3 through 6 of this form must identify which priority date is associated with each of the authorized and proposed points of diversion or appropriation and places of use.*

- Source(s) of Water to be Affected by Transfer: Big Butte Creek

Tributary to: Rogue River

*If there are multiple Sources listed on the water right, any information provided on pages 3 through 6 of this form must identify which source is associated with each of the authorized and proposed points of diversion or appropriation and places of use.*

**For applications proposing a Change in Place of Use or Character of Use:**

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?

☐ Yes    ☒ No    ☐ N/A – No Change in Place of Use or Character of Use

If "Yes", what are the Permit, Registration or Certificate Numbers? \_\_\_\_\_

*Pursuant to ORS 540.510, any "layered" water use or a right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled, except as provided in OAR 690-380-2240(5).*



▪ Certificate Number or other identifying number: 89373



*The following information must be provided only for those points of diversion or appropriation that are involved in the transfer (i.e., list only the portion of the water right you propose to transfer.) Attach additional pages as necessary.*

A Point of Diversion (POD) describes the location of diversion from a surface water source.

A Point of Appropriation (POA) describes the location of appropriation from a ground water source or well.

If a point of diversion or appropriation is not numbered on the decree or water right certificate or permit, assign it a unique number in the following table (e.g. POD #1 or POA(well) #1). Use the number to refer to the point of diversion or appropriation serving the place of use described in Table I (Authorized Place of Use) and Table II (Proposed Place of Use).

**Location of Existing Authorized Point(s) of Diversion or Appropriation to be Changed:**

*(i.e., the allowed point(s) of diversion or appropriation listed on the water right that will be affected by the proposed transfer, the "OFF or FROM" point(s) of diversion or appropriation)*  
*Government lot(GOV'T LOT) and donation land claim numbers (DLC) must be included in the table below only if the information is reflected on the existing water right.*

IF POA, OWRD WELL LOG ID NO. (OR WELL ID TAG NO. L- )	POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES
	1	35 S	2 E	10	NE NE			1130 feet south & 700 feet west from NE cor. sec. 10
	2	35 S	2 E	3	NW NW		4	1030 feet south & 290 feet east from NW cor. Sec. 3

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■ Certificate Number or other identifying number: 89373

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■ Does the water right being transferred involve a ground water source(s)?

☐ Yes ☒ No (Surface water source only.)

If "Yes", for each authorized point of appropriation (well) involved, you must either:

A. Supply a copy of the well log(s) for each point of appropriation that is **clearly labeled** and associated with the corresponding well in the table above and on the accompanying application map. (NOTE: You may search for well logs on the Department's web page at: <http://www.wrd.state.or.us>)

or

B. If a well log is **not** available, you must describe the construction of the authorized point of appropriation by completing the table below. Attach additional copies as necessary.

**Construction of Existing Authorized Point(s) of Appropriation – (Only needed if no well log is available.)**

Wells in this listing must be **clearly tied** to corresponding well location(s) described in the table above and shown on the accompanying application map.

OWRD WELL NO. AS IDENTIFIED IN TABLE ABOVE	DIAMETER	TYPE AND SIZE OF CASING	NO. OF FEET OF CASING	INTERVALS CASING IS PERFORATED (IN FEET)	SEAL DEPTH	EST. DEPTH TO WATER	EST. DEPTH TO WATER BEARING STRATUM	TYPE OF ACCESS PORT OR MEASURING DEVICE	TOTAL WELL DEPTH

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**Location of Existing Authorized Place of Use to be Affected:**

*Government lot and donation land claim numbers must be included in the tables below only if the information is reflected on the existing water right.*

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▪ Certificate Number or other identifying number: 89373

**3. PROPOSED CHANGES TO THE WATER RIGHT**

*Describe proposed changes to the water right involving point(s) of diversion and/or appropriation necessary to facilitate a change in place of use. Measured distances described below should accurately correspond to the points shown on the accompanying application map. Attach additional pages as necessary.*

**Location of Proposed Point(s) of Diversion or Appropriation:**  
(i.e., the "ON or TO" point(s) of diversion or appropriation)

(NOTE: Complete this table only if a Change in Point of Diversion or Appropriation is being proposed to facilitate a Change in Place of Use.)

IF POA, OWRD WELL LOG ID NO. (OR WELL ID TAG NO. L- )	POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES

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▪ Certificate Number or other identifying number: 89373

If there are proposed point(s) of appropriation (wells) listed in the table above, are the well(s) already constructed?

☐ Yes    ☐ No    ☒ N/A – No proposed well(s) listed above.

If “Yes”, attach and clearly label the corresponding well log(s) for each proposed well, or if well log(s) are **not** available, describe the construction of the well(s) using the table below. (NOTE: You may search for well logs on the Department’s web page at: <http://www.wrd.state.or.us>)

If “No”, describe the anticipated construction for the proposed well(s) in the following table:

**Construction of Proposed Point(s) of Appropriation or Well(s)**

*Wells in this listing must be clearly tied to corresponding well location(s) described in the table above and shown on the accompanying application map.*

OWRD WELL NO. AS IDENTIFIED IN TABLE ABOVE	DIAMETER	TYPE AND SIZE OF CASING	NO. OF FEET OF CASING	INTERVALS CASING IS PERFORATED (IN FEET)	SEAL DEPTH	EST. DEPTH TO WATER	EST. DEPTH TO WATER BEARING STRATUM	TYPE OF ACCESS PORT OR MEASURING DEVICE	TOTAL WELL DEPTH

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▪ Certificate Number or other identifying number: 89373

**Location of Proposed Place of Use:** (i.e., the "ON or TO" lands)

Remarks: \_\_\_\_\_



**5. ATTACHMENTS**

Check each of the following attachments included with this application. The application will be returned if all required attachments are not included.

**Supplemental Form A –****Description of Proposed Change(s) to a Water Right**

- ☒ A separate Supplemental Form A is enclosed for each water right to be affected by this transfer.

**Map**

- ☒ Temporary Transfer  
A map meeting the requirements of OAR 690-385-3300 must be included but need not be prepared by a Certified Water Right Examiner.

**Consent to Transfer**

- ☐ A copy of the written consent, if applicable, for a change in type of use of a water right to store water.

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**Supplemental Water Right Statement**

- ☐ A written statement, if applicable, identifying supplemental water rights that will not be transferred, but remain unexercised at the authorized place of use during the irrigation season.

**Water Well Reports/Well Logs:**

- ☐ The application is for a change from surface water to ground water and copies of all water well reports are attached.
- ☐ Water well reports are not available and attached is a description of construction details including well depth, static water level, and information necessary to establish the ground water body developed or proposed to be developed.
- ☐ The application is for a surface water transfer and water well reports are not required.

**Fees:**

- ☒ Amount enclosed: \$831.62  
See the Department's Fee Schedule at [www.wrd.state.or.us](http://www.wrd.state.or.us) or call (503) 986-0900.

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**6. SIGNATURES**

The district certifies the following:

- (1) The water right(s) proposed for transfer is a water right(s) subject to transfer and has not been forfeited for nonuse under ORS 540.610;
- (2) Each user affected by the proposed transfer has provided written authorization for the transfer and such authorization is on file with the district; and
- (3) The district has notified each affected user that the Department may condition or reject the transfer at any time to the extent necessary to avoid injury to an existing water right, and that the use of water on lands from which the water right is transferred (authorized place of use) and at the proposed place of use during the same irrigation season or calendar year may subject both the user and district to civil penalties.

On behalf of the district, I affirm that the information contained in this application is true and accurate.



District Manager signature

OR

David Ford  
name (print)

3-17-20  
date

Authorized District Representative signature

name (print)

date

**Before submitting your application to the Department, be sure you have:**

- Answered each question completely.
- Included all the required attachments.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount.





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

# Application for District Temporary Water Right Transfer

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Please type or print legibly in dark ink. If your application is incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "N/A" to indicate "Not Applicable." As you complete this form, please refer to notes and guidance included on the application. A summary of review criteria and procedures that are generally applicable to these applications is available at [www.wrd.state.or.us/OWRD/PUBS/forms.shtml](http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml).

Application for the 2020 irrigation season  
year

## 1. APPLICANT/AGENT INFORMATION

IRRIGATION DISTRICT <b>Eagle Point Irrigation District</b>			PHONE NO. <b>541 826-3411</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>P.O. Box 157</b>			FAX NO. <b>541 826-8738</b>	
CITY <b>Eagle Point</b>	STATE <b>OR</b>	ZIP <b>97524</b>	E-MAIL	
<b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b>				

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

## 2. PROPOSED CHANGE(S) TO WATER RIGHT(S)

- List **all** water rights to be affected by this transfer. Indicate the certificate, permit, decree or other identifying number(s) in the table below: If a certificate has been issued and reflects the current status of the water right, you need only list the certificate number.  
(Attach additional pages as necessary.)

	Application / Decree	Permit / Previous Transfer	Certificate
1.	- /	- / -	89373
2.	- /	- / -	
3.	- /	- / -	
4.	- /	- / -	
5.	- /	- / -	
6.	- /	- / -	

- Check **all** proposed change(s) included in this transfer application:

- ☒ Place of Use      ☐ Point of Diversion or Point of Appropriation  
☐ Surface Water source to Ground Water source  
☐ Character or Type of Use

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**3. CONSULTATION WITH STATE AGENCIES, LOCAL GOVERNMENTS, AND TRIBAL GOVERNMENTS**

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Is this transfer application for a change in point of diversion in response to an emergency?

☐ Yes ☒ No

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Has the district conferred with the Oregon Department of Fish and Wildlife, Division of State Lands, and affected local governments (e.g., county, city, municipal corporation), and tribal governments about the proposed point of diversion change? ☐ Yes ☒ No

*If "Yes", for any of the above, list the agency or government name and the name and phone number of the appropriate contact person:*

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agency/

Gov't Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**4. CONSENT FOR A CHANGE IN TYPE OF USE OF A WATER RIGHT TO STORE WATER**

Is this transfer application for a change in type of use of a water right to store water?

☐ Yes ☒ No

Has the district received written consent to the change from the operator of the reservoir if different than the district, or from the appropriate federal agency if the water right to store water is issued in the name of a federal governmental agency? ☐ Yes ☒ No

*If "Yes", for any of the above, label and attach a dated and signed copy of the written consent.*



**5. ATTACHMENTS**

Check each of the following attachments included with this application. The application will be returned if all required attachments are not included.

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<b>Supplemental Form A –</b> <b>Description of Proposed Change(s) to a Water Right</b> <input checked="" type="checkbox"/> A <u>separate</u> Supplemental Form A is enclosed for <u>each</u> water right to be affected by this transfer. <b>Map</b> <input checked="" type="checkbox"/> Temporary Transfer A map meeting the requirements of OAR 690-385-3300 must be included but need not be prepared by a Certified Water Right Examiner. <b>Consent to Transfer</b> <input type="checkbox"/> A copy of the written consent, if applicable, for a change in type of use of a water right to store water.	<b>Supplemental Water Right Statement</b> <input type="checkbox"/> A written statement, if applicable, identifying supplemental water rights that will not be transferred, but remain unexercised at the authorized place of use during the irrigation season. <b>Water Well Reports/Well Logs:</b> <input type="checkbox"/> The application is for a change from surface water to ground water and copies of all water well reports are attached. <input type="checkbox"/> Water well reports are not available and attached is a description of construction details including well depth, static water level, and information necessary to establish the ground water body developed or proposed to be developed. <input type="checkbox"/> The application is for a surface water transfer and water well reports are not required. <b>Fees:</b> <input checked="" type="checkbox"/> Amount enclosed: <u>\$831.62</u> See the Department's Fee Schedule at <a href="http://www.wrd.state.or.us">www.wrd.state.or.us</a> or call (503) 986-0900.
---	--

**6. SIGNATURES**

The district certifies the following:

- (1) The water right(s) proposed for transfer is a water right(s) subject to transfer and has not been forfeited for nonuse under ORS 540.610;
- (2) Each user affected by the proposed transfer has provided written authorization for the transfer and such authorization is on file with the district; and
- (3) The district has notified each affected user that the Department may condition or reject the transfer at any time to the extent necessary too avoid injury to an existing water right, and that the use of water on lands from which the water right is transferred (authorized place of use) and at the proposed place of use during the same irrigation season or calendar year may subject both the user and district to civil penalties.

On behalf of the district, I affirm that the information contained in this application is true and accurate.

  
District Manager signature

David Ford  
name (print)

3-17-20  
date

OR

\_\_\_\_\_  
Authorized District Representative signature

\_\_\_\_\_  
name (print)

\_\_\_\_\_  
date

**Before submitting your application to the Department, be sure you have:**

- Answered each question completely.
- Included all the required attachments.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount.



**District Temporary Water Right Transfer Application**  
**Supplemental Form A**

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**DESCRIPTION OF PROPOSED CHANGE(S) TO A WATER RIGHT**

List only one water right per page. A separate Supplemental Form A must be completed for each certificate, permit, decree, or other right involved in the proposed transfer.

Attach additional copies of Supplemental Form A as needed to describe other certificates, permits, decrees or other rights involved in this transfer.

▪ Certificate Number or other identifying number: 89373

**1. TYPE OF CHANGE(S) PROPOSED**

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> Change to facilitate a change in Place of Use (The old point of diversion or appropriation will <u>not</u> be used for the portion of the water right affected by the transfer.)	<input type="checkbox"/> All of the right will be exercised at a different location than currently authorized (Use of water at the current location will be discontinued.)	Proposed new use: <input type="checkbox"/> Change a water right to Store Water
<input type="checkbox"/> Surface Water to Ground Water (A new point of appropriation will be used instead of the old point of diversion. The old point of diversion will <u>not</u> be used.)	<input checked="" type="checkbox"/> Only a <u>portion</u> of the right will be exercised at a different location than currently authorized (Use of water at the current location will be discontinued.)	<input type="checkbox"/> Diminish an irrigation water right (primary) to a supplemental water right
<input type="checkbox"/> Change in Point of Diversion in Response to an Emergency		



## 2. CURRENT WATER RIGHT INFORMATION

Water Right Subject to Transfer (check and complete one of the following):

<input type="checkbox"/> Certificated Right	89373	S-6396
	Certificate Number	Permit Number or Decree Name
<input type="checkbox"/> Adjudicated, Non-certificated Right	-	-
	Name of Decree	Page Number
<input type="checkbox"/> Permit for which Proof has been Approved	-	-
	Permit Number	Date Claim of Beneficial Use Submitted
<input type="checkbox"/> Transferred Right for which Proof has been Filed	-	-
	Previous Transfer Number	Date Claim of Beneficial Use Submitted

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- Name on Permit, Certificate, or Decree: Eagle Point Irrigation District
- County: Jackson
- Authorized Use(s) to be Affected by Transfer: Irrigation
- Priority Date(s): 2/20/1924

*If there are **multiple Priority Dates** identified on the water right, any information provided on pages 3 through 6 of this form must identify which priority date is associated with each of the authorized and proposed points of diversion or appropriation and places of use.*

- Source(s) of Water to be Affected by Transfer: Big Butte Creek

Tributary to: Rogue River

*If there are **multiple Sources** listed on the water right, any information provided on pages 3 through 6 of this form must identify which source is associated with each of the authorized and proposed points of diversion or appropriation and places of use.*

### For applications proposing a Change in Place of Use or Character of Use:

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?

☐ Yes    ☒ No    ☐ N/A – No Change in Place of Use or Character of Use

If "Yes", what are the Permit, Registration or Certificate Numbers? \_\_\_\_\_

*Pursuant to ORS 540.510, any "layered" water use or a right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled, except as provided in OAR 690-380-2240(5).*



■ Certificate Number or other identifying number: 89373

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*The following information must be provided only for those points of diversion or appropriation that are involved in the transfer (i.e., list only the portion of the water right you propose to transfer.) Attach additional pages as necessary.*

A Point of Diversion (POD) describes the location of diversion from a surface water source.

A Point of Appropriation (POA) describes the location of appropriation from a ground water source or well.

If a point of diversion or appropriation is not numbered on the decree or water right certificate or permit, assign it a unique number in the following table (e.g. POD #1 or POA(well) #1). Use the number to refer to the point of diversion or appropriation serving the place of use described in Table I (Authorized Place of Use) and Table II (Proposed Place of Use).

**Location of Existing Authorized Point(s) of Diversion or Appropriation to be Changed:**

*(i.e., the allowed point(s) of diversion or appropriation listed on the water right that will be affected by the proposed transfer, the "OFF or FROM" point(s) of diversion or appropriation)*  
*Government lot(GOV'T LOT) and donation land claim numbers (DLC) must be included in the table below only if the information is reflected on the existing water right.*

IF POA, OWRD WELL LOG ID NO. (OR WELL ID TAG NO. L- )	POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES
	1	35 S	2 E	10	NE NE			1130 feet south & 700 feet west from NE cor. sec. 10
	2	35 S	2 E	3	NW NW		4	1030 feet south & 290 feet east from NW cor. Sec. 3

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■ Certificate Number or other identifying number: 89373

■ Does the water right being transferred involve a ground water source(s)?

☐ Yes ☒ No (Surface water source only.)

If "Yes", for each authorized point of appropriation (well) involved, you must either:

A. Supply a copy of the well log(s) for each point of appropriation that is **clearly labeled** and associated with the corresponding well in the table above and on the accompanying application map. (NOTE: You may search for well logs on the Department's web page at: <http://www.wrd.state.or.us>)

or

B. If a well log is **not** available, you must describe the construction of the authorized point of appropriation by completing the table below. Attach additional copies as necessary.

**Construction of Existing Authorized Point(s) of Appropriation – (Only needed if no well log is available.)**

*Wells in this listing must be clearly tied to corresponding well location(s) described in the table above and shown on the accompanying application map.*

OWRD WELL NO. AS IDENTIFIED IN TABLE ABOVE	DIAMETER	TYPE AND SIZE OF CASING	NO. OF FEET OF CASING	INTERVALS CASING IS PERFORATED (IN FEET)	SEAL DEPTH	EST. DEPTH TO WATER	EST. DEPTH TO WATER BEARING STRATUM	TYPE OF ACCESS PORT OR MEASURING DEVICE	TOTAL WELL DEPTH

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Last Revised August 2009

13403



*Government lot and donation land claim numbers must be included in the tables below only if the information is reflected on the existing water right.*

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▪ Certificate Number or other identifying number: 89373

**3. PROPOSED CHANGES TO THE WATER RIGHT**

*Describe proposed changes to the water right involving point(s) of diversion and/or appropriation necessary to facilitate a change in place of use. Measured distances described below should accurately correspond to the points shown on the accompanying application map. Attach additional pages as necessary.*

**Location of Proposed Point(s) of Diversion or Appropriation:**  
*(i.e., the "ON or TO" point(s) of diversion or appropriation)*

*(NOTE: Complete this table only if a Change in Point of Diversion or Appropriation is being proposed to facilitate a Change in Place of Use.)*

IF POA, OWRD WELL LOG ID NO. (OR WELL ID TAG NO. L- )	POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES

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▪ Certificate Number or other identifying number: 89373

If there are proposed point(s) of appropriation (wells) listed in the table above, are the well(s) already constructed?

☐ Yes    ☐ No    ☒ N/A – No proposed well(s) listed above.

If “Yes”, attach and clearly label the corresponding well log(s) for each proposed well, or if well log(s) are not available, describe the construction of the well(s) using the table below. (NOTE: You may search for well logs on the Department’s web page at: <http://www.wrd.state.or.us>)

If “No”, describe the anticipated construction for the proposed well(s) in the following table:

**Construction of Proposed Point(s) of Appropriation or Well(s)**

*Wells in this listing must be clearly tied to corresponding well location(s) described in the table above and shown on the accompanying application map.*

OWRD WELL NO. AS IDENTIFIED IN TABLE ABOVE	DIAMETER	TYPE AND SIZE OF CASING	NO. OF FEET OF CASING	INTERVALS CASING IS PERFORATED (IN FEET)	SEAL DEPTH	EST. DEPTH TO WATER	EST. DEPTH TO WATER BEARING STRATUM	TYPE OF ACCESS PORT OR MEASURING DEVICE	TOTAL WELL DEPTH

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▪ Certificate Number or other identifying number: 89373

**Location of Proposed Place of Use:** (i.e., the "ON or TO" lands)

TABLE II. – PROPOSED PLACE OF USE												
POD# or POA#	PRIORITY DATE	USE	LEGAL DESCRIPTION							ACRES	USER NAME	DINN
			TWP	RNG	SEC	QQ	DLC	GOV'T LOT	TAX LOT			
1&2	2/20/1924	IR	35S	1 W	27	NW SW			500	5.1	Rogue Family Farms	2020-001
1&2	2/20/1924	IR	35 S	1 W	28	NE SE			400	4.3	Rogue Family Farms	2020-001
<b>TOTAL:</b>										<b>9.4</b>		

13403



**5. ATTACHMENTS**

Check each of the following attachments included with this application. The application will be returned if all required attachments are not included.

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4/25/2024  
OWRD

**Supplemental Form A –****Description of Proposed Change(s) to a Water Right**

- ☒ A separate Supplemental Form A is enclosed for each water right to be affected by this transfer.

**Map**

- ☒ Temporary Transfer  
A map meeting the requirements of OAR 690-385-3300 must be included but need not be prepared by a Certified Water Right Examiner.

**Consent to Transfer**

- ☐ A copy of the written consent, if applicable, for a change in type of use of a water right to store water.

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MAR 27 2020

**Supplemental Water Right Statement**

- ☐ A written statement, if applicable, identifying supplemental water rights that will not be transferred, but remain unexercised at the authorized place of use during the irrigation season.

**Water Well Reports/Well Logs:**

- ☐ The application is for a change from surface water to ground water and copies of all water well reports are attached.
- ☐ Water well reports are not available and attached is a description of construction details including well depth, static water level, and information necessary to establish the ground water body developed or proposed to be developed.
- ☐ The application is for a surface water transfer and water well reports are not required.

**Fees:**

- ☒ Amount enclosed: \$831.62  
See the Department's Fee Schedule at [www.wrd.state.or.us](http://www.wrd.state.or.us) or call (503) 986-0900.

OWRD

**6. SIGNATURES**

The district certifies the following:

- (1) The water right(s) proposed for transfer is a water right(s) subject to transfer and has not been forfeited for nonuse under ORS 540.610;
- (2) Each user affected by the proposed transfer has provided written authorization for the transfer and such authorization is on file with the district; and
- (3) The district has notified each affected user that the Department may condition or reject the transfer at any time to the extent necessary to avoid injury to an existing water right, and that the use of water on lands from which the water right is transferred (authorized place of use) and at the proposed place of use during the same irrigation season or calendar year may subject both the user and district to civil penalties.

On behalf of the district, I affirm that the information contained in this application is true and accurate.

  
District Manager signature

David Ford  
name (print)

3-17-20  
date

OR

Authorized District Representative signature

name (print)

date

**Before submitting your application to the Department, be sure you have:**

- Answered each question completely.
- Included all the required attachments.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount.

Oregon Department of Agriculture  
2022 Renewal Application

#593837 18229 02/24/22 DOC CK  
R \$500.00 A \$500.00

License(s) Expire December 31 - Renewal Application and Payment Due by January 1, 2022

Make any Name, Address, and/or Telephone number changes **directly** below. Ownership change? #595827 18315 03/27/22 DOC CK  
R \$325.00 A \$325.00

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4/25/2024  
OWRD

ROGUE FAMILY FARMS LLC  
ROOSEVELT SHANNON  
300 EAGLE RIDGE DR  
GRANTS PASS OR 97526

Phone: 541-479-3969  
Phone/Fax:  
Cell Phone: 305-586-6560  
Email: rshannonco@gmail.com

JACOB 3  
13003 OR HWY 62  
EAGLE POINT OR 97524

LICENSE SUMMARY

License Number	License Description	Fee Amount (From Worksheet)	Check Box If no longer needed
<b>Commodity Inspection</b>			
	Hemp Grow Site	\$500.00 — PAID	<input type="checkbox"/>
	Hemp Grower License	\$250.00	<input type="checkbox"/>

Key Participant Fee Calculation:

Number of Key Participants \_\_\_\_\_ x \$75 each = \$ \_\_\_\_\_

Total Amount Due (Fee Amount): \$ \_\_\_\_\_

TO DIVISION  
MAR 25

PAYMENT METHOD

PAY ONLINE at <https://MyLicense.oda.state.or.us>

Accepting debit/credit card or electronic check.  
We do not charge a processing fee.  
Online website closes mid March.

For Checks or Money Orders, mail via USPS only to:  
Payable to Oregon Department of Agriculture

Oregon Department of Agriculture  
PO Box 4395, Unit 17  
Portland OR 97208-4395

All dishonored checks or electronic payments will incur a \$25 administration fee per ORS 30.701

Need Information or License no longer needed? See page 2 for instructions.



Oregon Dept of Agriculture  
Salem Oregon

ROGUE FAMILY FARMS LLC

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**Need Information?**

ODA website: [www.oregon.gov/oda/programs/hemp/pages/about hemp.aspx](http://www.oregon.gov/oda/programs/hemp/pages/about hemp.aspx)

**Agency Hemp Program**

Email: [hemp@oda.oregon.gov](mailto:hemp@oda.oregon.gov) or Call: 503-986-4652

---

**How do we contact you?**

We may need to contact you to process the license renewal. If your contact information is different from the name and phone number identified on the top of page 1, please provide us with the following information:

Form completed by: Roosevelt Shannon Title: Consultant

Phone number: (541) 479-3969 Date: 11/29/2021

---

**License No Longer Needed Instructions**

**Option #1** - Send email to [mylicense-help@oda.oregon.gov](mailto:mylicense-help@oda.oregon.gov). Please include business name, license number, and a brief explanation.

**Option #2** - On page 1, under the "License Summary", on the right side, "Check Box If no longer needed" - check the box and return the renewal to Oregon Department of Agriculture, 635 Capitol Street Ste 100, Salem, OR 97301-2532

ROGUE FAMILY FARMS LLC

11/03/2021

License Number License Description

Hemp Grower License

Legal Status of Registrant: Individual ☐ LLC ☒ Other \_\_\_\_\_

Oregon Secretary of State Registration Number \_\_\_\_\_  
<https://sos.oregon.gov/business/Pages/register.aspx> (If applicable, NOT your tax ID number)

Employer Identification Number (EIN) 82-1765252

List Key Participants: (List members, officers, owners, or other key participants who are authorized to make changes to the license. Use continuation form if you need to add more key participants.)

First Name	Middle	Last Name	DOB	Title	Phone
Jacob	W	Fisher	02/07/1988	Sole Member	660.591.589

Are you storing your own hemp produced at another location please provide address?

Yes ☐ No ☒ If you are commercially drying for others you will be required to have a Handlers License). If yes provide hemp storage address:

Street Address \_\_\_\_\_ County Jackson

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### End of the year Hemp Crop Report

If you grew hemp in 2021, please provide the following information:

Acres or square feet harvested: 15 Acres Pounds of hemp harvested: 5,000 lbs

Check box if you did not grow hemp in 2021 ☐

ROGUE FAMILY FARMS LLC



Oregon Dept of Agriculture  
Salem Oregon

ROGUE FAMILY FARMS LLC

License Number      License Description

AG-R1065290HQS      Hemp Grow Site

Instructions can be found at <https://oda.direct/HempGrowerInstructions>

**Product Area Information:** Hemp grow site location(s), list each production area separately.

Copy this page for additional production areas.

(Production Area names and other information provided must be used on all testing forms).

**Area 1.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XP 1

Area: Field ☒ Number of acres 24.1 or Greenhouse/Indoor ☐ Size \_\_\_\_\_ square feet

**Hemp Intended use (check all that apply):**

Flower ☒ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☐ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 1 on property**

Longitude 42.496635 Latitude -122.816778

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

**Area 2.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 1

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,700 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 2 on property**

Longitude 42.495606 Latitude -122.814439

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

**Area 3.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 2

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,700 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 3 on property**

Longitude 42.495092 Latitude -122.814471

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

ROGUE FAMILY FARMS LLC

11/03/2021

Oregon Dept of Agriculture  
Salem Oregon

ROGUE FAMILY FARMS LLC

License Number      License Description

AG-R1065288HGS      Hemp Grow Site

Instructions can be found at <https://oda.direct/HempGrowerInstructions>

**Product Area Information:** Hemp grow site location(s), list each production area separately.

Copy this page for additional production areas.

(Production Area names and other information provided must be used on all testing forms).

**Area 1.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 3

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,800 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 1 on property**

Longitude 42.496429 Latitude -122.821413

List Global Positioning System (GPS) coordinates (in Decimal: eg. 44.123456, -123.123456)

**Area 2.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 4

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,800 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 2 on property**

Longitude 42.49646 Latitude -122.82122

List Global Positioning System (GPS) coordinates (in Decimal: eg. 44.123456, -123.123456)

**Area 3.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) \_\_\_\_\_

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☐ Size \_\_\_\_\_ square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☐ or Other ☐

How many harvests are planned for this area in 2022? \_\_\_\_\_

**Location of Area 3 on property**

Longitude \_\_\_\_\_ Latitude \_\_\_\_\_

List Global Positioning System (GPS) coordinates (in Decimal: eg. 44.123456, -123.123456)

ROGUE FAMILY FARMS LLC



Map required showing boundaries of each production area required.

Mapping tool available to outline and label your grow site and production areas, as well as calculate latitude, longitude, acres and square feet at the following website: <https://oda.fyi/HempMapTool>. When you go to this page, click on the "i" on the left side of the page to open the list of instructions which will guide you through the process to produce map you can download, print, and include with your renewal.

**Irrigation of a commercial crop in Oregon requires a legal source of water for production. Please visit this link <https://oda.fyi/WaterResources> for more information on water use permits.**

What legal source of water will you be using for irrigation of your production site?

Groundwater ☐ Surface Water ☒ Other \_\_\_\_\_

If you will be using a water right please include the permit or certificate number here: \_\_\_\_\_

Applicant acknowledges and agrees that:

- The information provided in this renewal application is true and correct, applicant's signature below is proof of that fact;
- Applies to Growers: Criminal Background checks will be mandatory for all key participants (No felony convictions related to controlled substances within the last ten (10) years) before applications can be considered for approval.
- Information provided to the Department may be publicly disclosed and may be provided to law enforcement agencies without notice to the applicant;
- The Department may enter any field, facility or greenhouse used for production or handling of hemp or agricultural hemp seed and may take samples and test for total THC concentration of the crop, including agricultural hemp seed, as necessary for the administration of the hemp laws;
- All fees lawfully due to the Department must be timely paid;
- Applies to Growers: If using irrigation water, applicant has or will obtain the appropriate water use permit. Information concerning water use permits can be found at <https://oda.fyi/WaterUsePermits>;
- If leasing land for hemp production or processing, applicant obtained permission from the land owner prior to applying to grow or process hemp;
- Growers must ensure an authorized laboratory conducts pre-harvest testing for total THC in accordance with OAR 603-048-0600 for each production area before harvest.
- Growers and handlers must meet all laws and regulations pertaining to hemp growers and handlers including ORS 571.260 to 571.348 and OAR Chapter 603, Division 48.
- All production, storing, processing, handling, packaging, labeling, marketing, and selling of agricultural hemp seed must meet all applicable seed laws. Seed laws include ORS 633.500 through 633.996 and seed regulations found in OAR 603-056-0490.
- Individuals must be licensed with the Department as a hemp handler before handling hemp, as required by Oregon Administrative Rule.
- Individuals must be licensed with the Department as a hemp grower before growing hemp, as required by Oregon Administrative Rule.
- All records associated with your hemp business will be maintained for no less than three (3) years after the total disposition of each process lot or each harvest lot.

By signature below, I attest that the information in this application form is true, correct, and the above requirements are understood.

Signature

*Jacob Fisher*

Date

08 Mar 2022

Print Name

Jacob Fisher

Oregon Department of Agriculture  
2022 Renewal Application

E-RECEIVED  
4/25/2024  
OWRD

License(s) Expire December 31 - Renewal Application and Payment Due by January 1, 2022

Make any Name, Address, and/or Telephone number changes directly below. Ownership change? N (Y/N)

Mailing

ROGUE FAMILY FARMS LLC  
ROOSEVELT SHANNON  
300 EAGLE RIDGE DR  
GRANTS PASS OR 97526

Phone: 541-479-3969  
Phone/Fax:  
Cell Phone: 305-586-6560  
Email: rshannonco@gmail.com

Location

JACOB 3  
13003 OR HWY 62  
EAGLE POINT OR 97524

LICENSE SUMMARY

License Number	License Description	Fee Amount (From Worksheet)	Check Box If no longer needed
Commodity Inspection [REDACTED]	Hemp Grow Site	\$500.00	<input type="checkbox"/>
Total Amount Due (Fee Amount):		\$ 500.00	

ROGUE FAMILY FARMS LLC

PAYMENT METHOD

PAY ONLINE at <https://MyLicense.oda.state.or.us>

Accepting debit/credit card or electronic check.  
We do not charge a processing fee.  
Online website closes mid March.

For Checks or Money Orders, mail via USPS only to:  
Payable to Oregon Department of Agriculture

Oregon Department of Agriculture  
PO Box 4395, Unit 17  
Portland OR 97208-4395

All dishonored checks or electronic payments will incur a \$25 administration fee per ORS 30.701

Need Information or License no longer needed? See page 2 for instructions.

PS



Oregon Dept of Agriculture  
Salem Oregon

ROGUE FAMILY FARMS LLC

Map required showing boundaries of each production area required.

Mapping tool available to outline and label your grow site and production areas, as well as calculate latitude, longitude, acres and square feet at the following website: <https://oda.fyi/HempMapTool>. When you go to this page, click on the "i" on the left side of the page to open the list of instructions which will guide you through the process to produce map you can download, print, and include with your renewal.

Irrigation of a commercial crop in Oregon requires a legal source of water for production. Please visit this link <https://oda.fyi/WaterResources> for more information on water use permits. What legal source of water will you be using for irrigation of your production site?

Groundwater ☐ Surface Water ☒ Other \_\_\_\_\_

If you will be using a water right please include the permit of certificate number here: LL-1790

ROGUE FAMILY FARMS LLC

B2

**Rogue Family Farms LLC – OR SOS Registration # - [REDACTED]**  
**ODA Hemp Grower Registration # [REDACTED]**  
**Fields Plot Map Exhibits**

**13003 Hwy 62, - Eagle Point, OR 97524**  
**Grow Site Name: Jacob #3; Area Name: XP 1**







# Oregon

Kate Brown, Governor

E-RECEIVED  
4/25/2024  
OWRD

Water Resources Department

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

Fax (503) 986-0904

July 30, 2019

Ross Hincir  
PO Box 966  
Hallettsville, TX 77964

Reference: Permit LL-1790

Congratulations on acquiring a new water right! The intent of this letter is to set you on the right path for compliance with the water use reporting requirements specified in your water right.

Generally, a measurement device must be installed prior to use of water. Once water use begins you will need to record the quantity used each month and submit a report to the Department annually between October 1<sup>st</sup> and December 31<sup>st</sup>. Please read your water right carefully, as there may be additional or more specific measuring requirements.

You will need to keep a separate record of the volume of water used each month at each reporting point (point of diversion/well). If you have a meter, make an initial meter reading, and then record the meter reading at the end of each month. To find the water used each month, subtract the previous month's reading from the reading you just recorded. Enter a zero for each month when no water was used. It is important to know what unit of measurement your meter reads in and if your meter has a multiplication factor.

For a right to store water in a pond or reservoir, report the amount in storage, as measured on a uniform day of the month each month. If the right is for storage of less than 9.2 AF, you do not need to measure the stored volume, but may report the total allowed volume for any months when the reservoir is not empty. Report zeroes for any months when the reservoir is empty.

Your User ID (and Password) for reporting water use is: 32756.

A Report ID has been assigned for each point for which you are required to report water use:

Report ID	Facility Name	Location
68162	XP RESERVOIR	463 FT SOUTH & 774 FT WEST FROM E1/4 CORNER, SECTION 28

We encourage you to submit your water use data online (see enclosed instructions). Please report zeros for any months when water is not being used. If you do not have access to the internet, or prefer not to report online, you may use the enclosed paper reporting form. (You may also use this form for keeping your monthly record and then report the monthly amounts online at the end of the water year, or monthly, or quarterly.)

If you have questions or concerns, contact us by email at [wateruse@wrd.state.or.us](mailto:wateruse@wrd.state.or.us) or by phone at 503-986-0905.

Sincerely,

Tracy Fox  
Water Measurement Analyst

enclosures

OREGON  
DEPARTMENT OF  
AGRICULTURE

## Hemp Grower / Production Area Change of Status Report Form

TO DIVISION

MAY 31

One form per grow site. Check all that apply:

Add or increase production area size (fee required) ☒ Reduce acres or sq ft (no fee) ☐  
Remove production area (no fee) ☐ Remove all production areas: Did not grow hemp this season ☐

### Grower Information

1. Business Name: Rogue Family Farms LLC

2. Hemp Registration Number: [REDACTED] -IHG

3. Grow Site Name: JACOB 3

4. Grow Site Address: 13003 OR Hwy 62 City, State, ZIP: Eagle Point, OR 97524

### 5. Current Contact Information

Main Contact Name: Roosevelt Shannon Phone: (541) 479-3969

Mailing Address: 300 Eagle Ridge Dr

City, State, Zip: Grants Pass, OR 97526 Email: rshannonco@gmail.com

### 6. New Contact Information

Main Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

### Check Appropriate Change of Status Action

Add or increase size of production area (fee required) ☒ Reduce acres or sq ft. ☐ or Remove production area ☐

List each production area individually

Production Area Name (limit to 10 characters): XP 1

Latitude: 42.496635 Longitude: -122.816778

Area: Field ☒ Number of Acres 2 or Greenhouse / Indoor: ☐ Square Feet: \_\_\_\_\_

Intended Use (check all that apply): Flower ☒ Seed (other) ☐ Seed (self-use) ☐

Fiber ☐ Biomass ☐ Propagation (self-use) ☐ Propagation (other) ☐

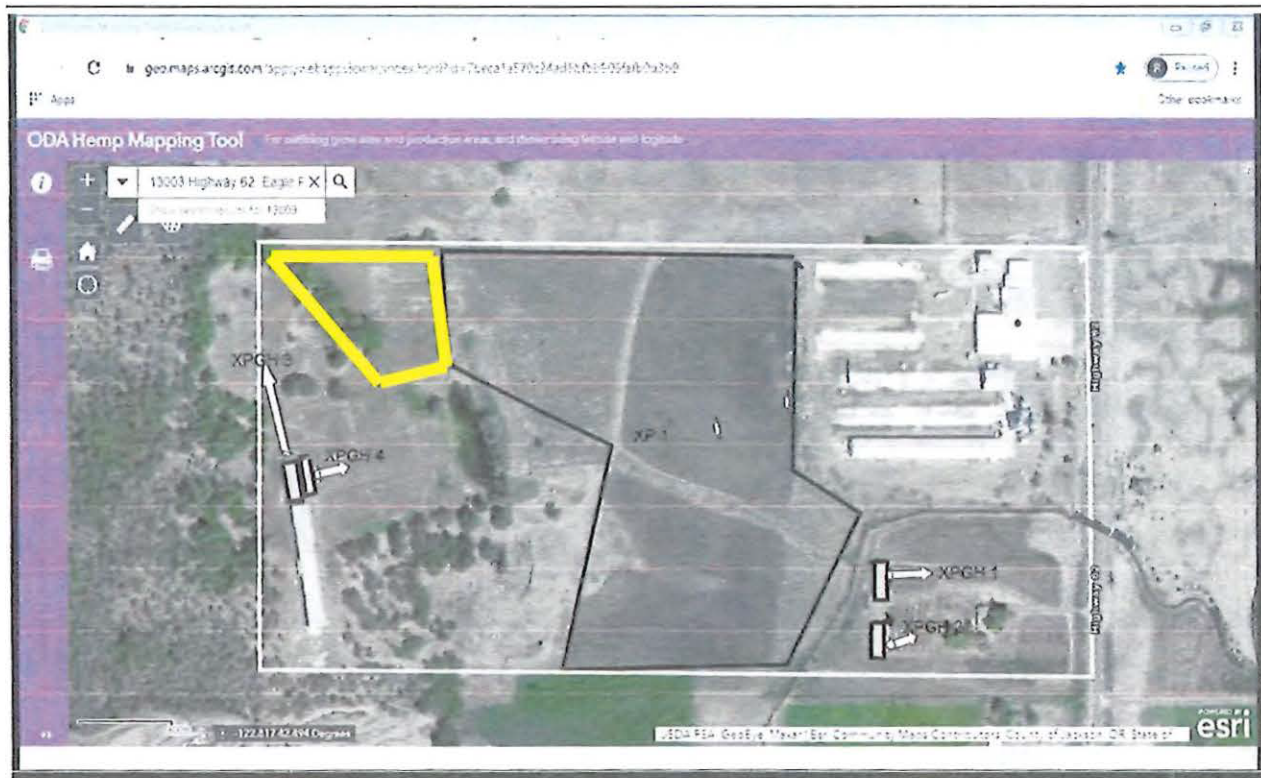
Other (please specify): \_\_\_\_\_



Rogue Family Farms LLC - OR SOS Registration # - [REDACTED] ODA  
Hemp Grower Registration # [REDACTED]  
Fields Plot Map Exhibits

E-RECEIVED  
4/25/2024  
OWRD

13003 Hwy 62, - Eagle Point, OR 97524 Grow Site  
Name: Jacob #3; Area Name: XP 1



Add On Boundary =

BEFORE THE WATER RESOURCES DEPARTMENT  
OF THE  
STATE OF OREGON

In the Matter of Transfer Application                     )  
T-13643, Jackson County                                    )  
  )

FINAL ORDER APPROVING  
A DISTRICT TEMPORARY TRANSFER

**Authority**

Oregon Revised Statute (ORS) 540.570 establishes the process in which a district may submit a request to temporarily transfer a water right within district boundaries. Oregon Administrative Rule (OAR) Chapter 690, Division 385 implements the statutes and provides the Department's procedures and criteria for evaluating district transfer applications.

**Applicant**

EAGLE POINT IRRIGATION DISTRICT  
PO BOX 157  
EAGLE POINT, OR 97524

**Findings of Fact**

1. On March 4, 2021, Eagle Point Irrigation District (EPID) filed a district transfer application to permanently change the place of use under Certificate 89373. The Department assigned the application number T-13643.

2. Notice of the application for transfer was published on March 23, 2021, pursuant to ORS 540.570 and OAR 690-385-3400. No comments were filed in response to the notice.

3. The portion of the first right to be transferred is as follows:

**Certificate:** 89373 in the name of EAGLE POINT IRRIGATION DISTRICT (perfected under Permit S-6396)

**Use:** PRIMARY IRRIGATION OF 9.4 ACRES

**Priority Date:** AUGUST 21, 1915

**Rate:** 0.11 Cubic Foot per Second

**Limit/Duty:** The amount of water used for irrigation together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second, or its equivalent for each acre irrigated, and shall be further limited to a diversion of not to exceed 4.5 acre-feet per acre for each acre irrigated during the irrigation season of each year.

**Source:** BIG BUTTE CREEK, TRIBUTARY TO ROGUE RIVER

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 536.075 and OAR 137-004-0080, 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.



**Authorized Points of Diversion:**

Twp	Rng	Mer	Sec	Q-Q	GLot	Measured Distances
35 S	2 E	WM	3	NW NW	4	1030 FEET SOUTH AND 290 FEET EAST FROM THE NW CORNER OF SECTION 3
35 S	2 E	WM	10	NE NE		1130 FEET SOUTH AND 700 FEET WEST FROM THE NE CORNER OF SECTION 10

**Authorized Place of Use:**

IRRIGATION								
Twp	Rng	Mer	Sec	Q-Q	Acres	Tax Lot	Water User	Notice
35 S	1 W	WM	27	NW SW	9.4	500,600	Rogue Family Farms	2021-001

4. Transfer Application T-13643 proposes to change the place of use to:

**Proposed Place of Use:**

IRRIGATION								
Twp	Rng	Mer	Sec	Q-Q	Acres	Tax Lot	Water User	Notice
35 S	1 W	WM	27	NW SW	5.1	500	Rogue Family Farms	2021-001
35 S	1 W	WM	28	NE SE	4.3	400	Rogue Family Farms	2021-001
Total:					9.4			

- The district temporary transfer application satisfies the criteria of ORS 540.570 and OAR 690-385-3000, contains the information required under OAR 690-385-3200, and includes a map meeting the requirements of OAR 690-385-3300.
- Water has been used within the last five years according to the terms and conditions of the rights. There is no evidence available that would demonstrate that the rights are subject to forfeiture under ORS 540.610.
- The water rights are subject to transfer as defined in OAR 690-385-0100(17).
- Diversion structures, district canals, pumps, pump stations, ditches, pipeline, and sprinkler systems sufficient to use the full amount of water allowed under the existing rights are present.
- The proposed change in place of use, as conditioned, will not result in enlargement of the rights as defined in OAR 690-385-0100(6).
- The proposed change in place of use would not result in injury to other water rights as defined in OAR 690-385-0100(4).
- All other applicable requirements for district temporary water right transfers are met.

**Conclusions of Law**


The temporary change in place of use proposed in Temporary Transfer Application T-13643 is consistent with the requirements of ORS 540.570 and OAR 690-385-3500.

Now, therefore, it is ORDERED:

1. The temporary change in place of use proposed in Transfer Application T-13643 is approved.
2. The lands from which the water right is removed under Certificate 89373 shall receive no water under the transferred right during the 2021 irrigation season.
3. The use shall revert to the authorized place of use after the 2021 irrigation season.
4. Any application for permanent transfer of Certificate 89373 shall be subject to a full and complete review to determine consistency with the requirements of OAR Chapter 690, Divisions 380 or 385. Approval of this temporary transfer does not establish a precedent for approval of a subsequent application filed for a permanent transfer.
5. The time during which water is used on the proposed lands under this approved temporary transfer does not apply toward a finding of forfeiture of Certificate 89373, under ORS 540.610.
6. The water user shall maintain and operate the existing measurement devices and shall make such improvements as may be required by the Department.
7. The use of water under this temporary transfer may be conditioned or revoked at any time to the extent necessary to avoid injury if the Department finds the transfer causes injury to any existing water right.
8. Pursuant to ORS 536.900, a district and user may be subject to civil penalties for allowing the use of water on both the land from which water is transferred, and the lands to which the water is transferred, during the same irrigation season or calendar year.
9. The use of water at the temporary place of use authorized by this transfer shall be in accordance with the terms and conditions of Certificate 89373.
10. The use of the remaining water rights described by Certificate 89373 not involved in this transfer shall continue to be in accordance with the terms and conditions of Certificate 89373.

AUG 04 2021

Dated in Salem, Oregon on \_\_\_\_\_

  
Lisa J. Jaramillo, Transfer and Conservation Section Manager for  
THOMAS M. BYLER, DIRECTOR  
Oregon Department of Water Resources

Mailing Date: ~~\_\_\_\_\_~~ AUG 06 2021



Oregon Department of Agriculture  
2023 Renewal Application

#632233 19096 12/27/22 DOC CK  
R \$1,225.00 A \$1,225.00

License(s) Expire December 31 - Renewal Application and Payment Due by December 1, 2022

Make any Name, Address, and/or Telephone number changes **directly** below. Ownership change? \_\_\_\_\_(Y/N)

Mailing

ROGUE FAMILY FARMS LLC  
ROOSEVELT SHANNON  
300 EAGLE RIDGE DR  
GRANTS PASS OR 97526

Phone: 541-479-3969  
Phone/Fax:  
Cell Phone: 305-586-6560  
Email: rshannonco@gmail.com

E-RECEIVED  
4/25/2024  
OWRD

Location

JACOB 3  
13003 OR HWY 62  
EAGLE POINT OR 97524

COPY SENT TO  
DEC 28 2022

LICENSE SUMMARY

License Number	License Description	Fee Amount (From Worksheet)	Check Box If no longer needed
[REDACTED]	Hemp Grow Site	\$875.00	<input type="checkbox"/>
[REDACTED]	Hemp Grower License	\$350.00	<input type="checkbox"/>

Total Amount Due (Fee Amount):

\$ 1225<sup>00</sup>

ROGUE FAMILY FARMS LLC

PAYMENT METHOD

PAY ONLINE at <https://MyLicense.oda.state.or.us>

Accepting debit/credit card or electronic check.  
We do not charge a processing fee.  
Online website closes mid March.

For Checks or Money Orders, mail via USPS only to:  
Payable to Oregon Department of Agriculture

Oregon Department of Agriculture  
PO Box 4395, Unit 17  
Portland OR 97208-4395

All dishonored checks or electronic payments will incur a \$25 administration fee per ORS 30.701

Need Information or License no longer needed? See page 2 for instructions.

**Need Information?**

ODA website: [www.oregon.gov/oda/programs/hemp/pages/about hemp.aspx](http://www.oregon.gov/oda/programs/hemp/pages/about hemp.aspx)

**Agency Hemp Program**

Email: [hemp@oda.oregon.gov](mailto:hemp@oda.oregon.gov) or Call: 503-986-4652

**How do we contact you?**

We may need to contact you to process the license renewal. If your contact information is different from the name and phone number identified on the top of page 1, please provide us with the following information:

Form completed by: ROOSEVELT SHANNON Title: CFO  
Phone number: (541) 479-3969 Date: 11/26/2022

**License No Longer Needed Instructions**

**Option #1** - Send email to [mylicense-help@oda.oregon.gov](mailto:mylicense-help@oda.oregon.gov). Please include business name, license number, and a brief explanation.

**Option #2** - On page 1, under the "License Summary", on the right side, "Check Box if no longer needed" - check the box and return the renewal to Oregon Department of Agriculture, 635 Capitol Street Ste 100, Salem, OR 97301-2532



License Number

License Description

Hemp Grower License

Legal Status of Registrant: Individual ☒ LLC ☐ Other \_\_\_\_\_

Oregon Secretary of State Registration Number 133075994

<https://sos.oregon.gov/business/Pages/register.aspx> (If applicable, NOT your tax ID number)

Employer Identification Number (EIN) 494-92-8947

**List Key Participants:** (List members, officers, owners, or other key participants who are authorized to make changes to the license. Use continuation form if you need to add more key participants.)

First Name	Middle	Last Name	DOB	Title	Phone
JACOB	W	FISHER	2/7/1983	Sole Member	(644) 591-5891

**Are you storing your own hemp produced at another location please provide address?**

Yes ☐ No ☒ (If you are commercially drying for others you will be required to have a Handlers License). If yes provide hemp storage address:

Street Address \_\_\_\_\_ County \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**End of the year Hemp Crop Report**

If you grew hemp in 2022, please provide the following information:

Acres or square feet harvested: 25 Pounds of hemp harvested: 7000

Check box if you did not grow hemp in 2022 ☐

License Number      License Description

**Hemp Grow Site**

Instructions can be found at <https://oda.direct/HempGrowerInstructions>

**Product Area Information:** Hemp grow site location(s), list each production area separately.

Copy this page for additional production areas.

(Production Area names and other information provided must be used on all testing forms).

**Area 1.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XP 1

Area: Field ☒ Number of acres 26.5 or Greenhouse/Indoor ☐ Size \_\_\_\_\_ square feet

**Hemp Intended use (check all that apply):**

Flower ☒ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☐ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 1 on property**

Longitude 42.496635 Latitude -122.816778

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

**Area 2.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 1

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,700 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 2 on property**

Longitude 42.495606 Latitude -122.814439

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

**Area 3.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 2

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,700 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 3 on property**

Longitude 42.495092 Latitude -122.814471

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

ROGUE FAMILY FARMS LLC



[illegible]

### Hemp Grow Site

Instructions can be found at <https://oda.direct/HempGrowerInstructions>

**Product Area Information:** Hemp grow site location(s), list each production area separately.

Copy this page for additional production areas.

(Production Area names and other information provided must be used on all testing forms).

Area 1. (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) XPGH 3

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,800 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 1 on property**

Longitude 42.496429      Latitude -122.821413

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

**Area 2, (location of Hemp on property)**

Provide Area Name (Limit to 10 Characters) XPGH 4

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☒ Size 2,800 square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☒ or Other ☐

How many harvests are planned for this area in 2022? 1

**Location of Area 2 on property**

Longitude 42.49646 Latitude -122.82122

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

**Area 3.** (location of Hemp on property)

Provide Area Name (Limit to 10 Characters) \_\_\_\_\_

Area: Field ☐ Number of acres \_\_\_\_\_ or Greenhouse/Indoor ☐ Size \_\_\_\_\_ square feet

**Hemp Intended use (check all that apply):**

Flower ☐ Fiber ☐ Biomass ☐

Hemp seed: self-use ☐ or Other ☐ Propagation: self-use ☐ or Other ☐

How many harvests are planned for this area in 2022? \_\_\_\_\_

**Location of Area 3 on property**

Longitude \_\_\_\_\_ Latitude \_\_\_\_\_

List Global Positioning System (GPS) coordinates (In Decimal: eg. 44.123456, -123.123456)

Map required showing boundaries of each production area required.

Mapping tool available to outline and label your grow site and production areas, as well as calculate latitude, longitude, acres and square feet at the following website: <https://oda.fyi/HempMapTool>. When you go to this page, click on the "i" on the left side of the page to open the list of instructions which will guide you through the process to produce map you can download, print, and include with your renewal.

**Irrigation of a commercial crop in Oregon requires a legal source of water for production. Please visit this link <https://oda.fyi/WaterResources> for more information on water use permits.**

What legal source of water will you be using for irrigation of your production site?

Groundwater ☒ Surface Water ☐ Other \_\_\_\_\_

If you will be using a water right please include the permit of certificate number here: \_\_\_\_\_

Applicant acknowledges and agrees that:

- The information provided in this renewal application is true and correct, applicant's signature below is proof of that fact;
- Criminal Background checks will be mandatory for all key participants (No felony convictions related to controlled substances within the last ten (10) years) before applications can be considered for approval.
- Information provided to the Department may be publicly disclosed and may be provided to law enforcement agencies without notice to the applicant;
- The Department may enter any field, facility or greenhouse used for production or handling of hemp or agricultural hemp seed and may take samples and test for total THC concentration of the crop, including agricultural hemp seed, as necessary for the administration of the hemp laws;
- All fees lawfully due to the Department must be timely paid;
- If using irrigation water, applicant has or will obtain the appropriate water use permit. Information concerning water use permits can be found at <https://oda.fyi/WaterUsePermits>;
- If leasing land for hemp production, an informed consent form must be signed by the owner of the premises or the property owner's legal representative for the grow site;
- Growers must ensure an authorized laboratory conducts pre-harvest testing for total THC in accordance with OAR 603-048-0600 for each production area before harvest.
- Growers and handlers must meet all laws and regulations pertaining to hemp growers and handlers including ORS 571.260 to 571.348 and OAR Chapter 603, Division 48.
- All production, storing, processing, handling, packaging, labeling, marketing, and selling of agricultural hemp seed must meet all applicable seed laws. Seed laws include ORS 633.500 through 633.996 and seed regulations found in OAR 603-056-0490.
- Individuals must be licensed with the Department as a hemp grower before growing hemp, as required by Oregon Administrative Rule.
- All records associated with your hemp business will be maintained for no less than three (3) years after the total disposition of each harvest lot.

By signature below, I attest that the information in this application form is true, correct, and the above requirements are understood.

Signature \_\_\_\_\_ Date 15 Dec 2022

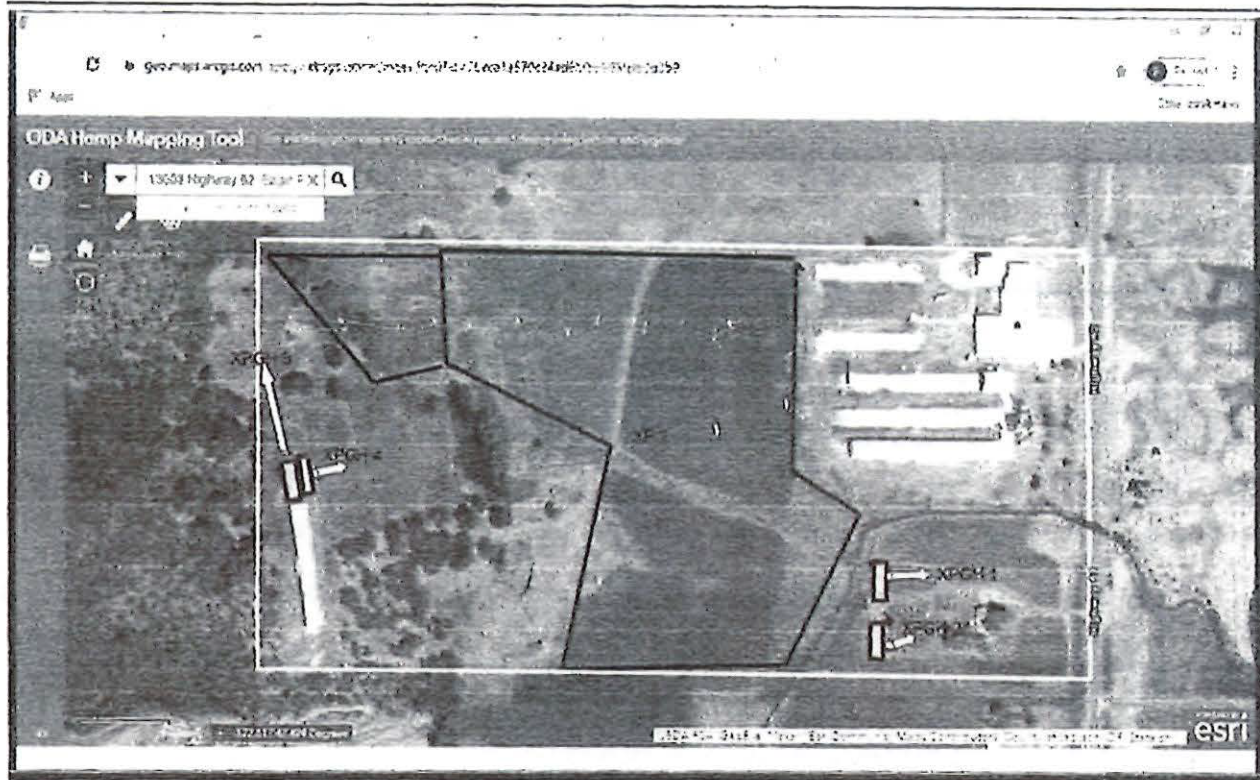
Print Name JACOB W. FISHER



Rogue Family Farms LLC - OR SOS Registration # - [REDACTED] ODA  
Hemp Grower Registration # [REDACTED]  
Fields Plot Map Exhibits

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OWRD

13003 Hwy 62, - Eagle Point, OR 97524 Grow Site  
Name: Jacob #3; Area Name: XP 1 - 26.5 Acres





**OREGON  
DEPARTMENT OF  
AGRICULTURE**

**Property Owner Authorization Form**

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OWRD

I hereby affirm that I am the owner of the property located at:

Property Address/Location: 13003 OR Hwy 62

City: Eagle Point State: OR Zip Code: \_\_\_\_\_

Tax Map and Parcel Number: 35 - 1W - 28 - 400  
35 - 1W - 27 - 500  
35 - 1W - 27 - 600  
35 - 1W - 27 - 400

By signing below, I hereby acknowledge and grant permission to allow: \_\_\_\_\_  
 ("Applicant") to operate a hemp related business as defined by ORS 571.260 – 571.348 at the above-described address. I further acknowledge that I have been informed that industrial hemp will be grown at the above-described address. I understand that the Applicant may allow employees of the Oregon Department of Agriculture (ODA) and the Oregon Liquor and Cannabis Commission (OLCC) to access my property at the above-described address in order to inspect for compliance with ODA licensing laws. This consent shall be for valid for one calendar year beginning January 1, 2023. I understand that once a license is issued by ODA, my revocation of this consent is not grounds for ODA to terminate, suspend or otherwise take action against the licensee.

Signature of Owner: [Signature] Date: 02-01-2023

Printed Owner Name: JACOB W. FISHER (\*\*)

Property Owner contact phone number: (660) 591-5891

\*This Property Owner Authorization Form does not authorize the Applicant listed on the form to start growing industrial hemp at the above-described address. Applicant must first be issued a license by ODA\*

\*\* - Sole Member - Rogue Family Farms LLC



Special Order Volume 125, Page 712

**Authorized Points of Diversion:**

Twp	Rng	Mer	Sec	Q-Q	GLot	Measured Distances
35 S	2 E	WM	3	NW NW	4	1030 FEET SOUTH AND 290 FEET EAST FROM THE NW CORNER OF SECTION 3
35 S	2 E	WM	10	NE NE		1130 FEET SOUTH AND 700 FEET WEST FROM THE NE CORNER OF SECTION 10

**Authorized Place of Use:**

IRRIGATION								
Twp	Rng	Mer	Sec	Q-Q	Acres	Tax Lot	Water User	Notice
35 S	1 W	WM	27	NW SW	9.4	500,600	Rogue Family Farms	2022-001

4. Transfer Application T-13959 proposes to change the place of use to:

**Proposed Place of Use:**

IRRIGATION								
Twp	Rng	Mer	Sec	Q-Q	Acres	Tax Lot	Water User	Notice
35 S	1 W	WM	27	NW SW	3.92	400,500	Rogue Family Farms	2022-001
35 S	1 W	WM	28	NE SE	5.48	400	Rogue Family Farms	2022-001
Total:					9.4			

5. The district temporary transfer application satisfies the criteria of ORS 540.570 and OAR 690-385-3000, contains the information required under OAR 690-385-3200, and includes a map meeting the requirements of OAR 690-385-3300.
6. Water has been used within the last five years according to the terms and conditions of the rights. There is no evidence available that would demonstrate that the rights are subject to forfeiture under ORS 540.610.
7. The water rights are subject to transfer as defined in OAR 690-385-0100(17).
8. Diversion structures, district canals, pumps, pump stations, ditches, pipeline, and sprinkler systems sufficient to use the full amount of water allowed under the existing rights are present.
9. The proposed change in places of use, as conditioned, will not result in enlargement of the rights as defined in OAR 690-385-0100(6).
10. The proposed change in places of use would not result in injury to other water rights as defined in OAR 690-385-0100(4).
11. All other applicable requirements for district temporary water right transfers are met.

**Conclusions of Law**

The temporary change in places of use proposed in Temporary Transfer Application T-13959 is consistent with the requirements of ORS 540.570 and OAR 690-385-3500.



Now, therefore, it is ORDERED:

1. The temporary changes in places of use proposed in Transfer Application T-13959 are approved.
2. The lands from which the water right is removed under Certificate 89373 shall receive no water under the transferred right during the 2022 irrigation season.
3. The use shall revert to the authorized places of use after the 2022 irrigation season.
4. Any application for permanent transfer of Certificate 89373 shall be subject to a full and complete review to determine consistency with the requirements of OAR Chapter 690, Divisions 380 or 385. Approval of this temporary transfer does not establish a precedent for approval of a subsequent application filed for a permanent transfer.
5. The time during which water is used on the proposed lands under this approved temporary transfer does not apply toward a finding of forfeiture of Certificate 89373, under ORS 540.610.
6. The water user shall maintain and operate the existing measurement devices and shall make such improvements as may be required by the Department.
7. The use of water under this temporary transfer may be conditioned or revoked at any time to the extent necessary to avoid injury if the Department finds the transfer causes injury to any existing water right.
8. Pursuant to ORS 536.900, a district and user may be subject to civil penalties for allowing the use of water on both the land from which water is transferred, and the lands to which the water is transferred, during the same irrigation season or calendar year.
9. The use of water at the temporary places of use authorized by this transfer shall be in accordance with the terms and conditions of Certificate 89373.
10. The use of the remaining water rights described by Certificate 89373 not involved in this transfer shall continue to be in accordance with the terms and conditions of Certificate 89373.

**SEP 20 2022**

Dated in Salem, Oregon on \_\_\_\_\_



Lisa J. Jaramillo, Transfer and Conservation Section Manager, for  
DOUGLAS E. WOODCOCK, ACTING DIRECTOR  
Oregon Water Resources Department

**SEP 21 2022**

Mailing Date: \_\_\_\_\_

## OREGON DEPARTMENT OF AGRICULTURE

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4/25/2024  
OWRDPRODUCTION  
LSM

JOLSON

Applicant ID: [REDACTED] GTID: [REDACTED] Lic Type: [REDACTED] OHQID: [REDACTED]

Please note You are not able to change any fields.

[Back To Program Queue](#)

## Mailing Address

Name: ROGUE FAMILY FARMS LLC  
Address Line1: ROOSEVELT SHANNON  
Address Line2: 300 EAGLE RIDGE DR  
City State Zip: GRANTS PASS OR 97526

## License Address

DBA: JACOB 3  
License No/Applicant ID.: [REDACTED]  
License Status: Inactive - Expired  
Expiration Date: 12/31/2023  
Address Line1: 13003 OR HWY 62  
City State Zip: EAGLE POINT OR 97524

## Attest Statement

Name	Phone	Attested On
JACOB FISHER	6605915891	12/01/2023 10:51:03 AM

Registrant Legal Status: LLC

Oregon Secretary of State Registration Number: [REDACTED]

Employer Identification Number (EIN): 821765252

FSA Farm Number: [REDACTED]

List Key Participants: (List members, officers, owners, or other key participants who are authorized to make changes to the registration.)

Name	DOB	Title	Phone
JACOB FISHER	2/7/1983	CEO	6605915891

Are You Storing or Drying Your Own Hemp Produced At Another Location? No

Did You Grow Hemp Last Year? Yes

Acres/SQ Feet Harvested	Pounds of Hemp Harvested
40	15000



OREGON DEPARTMENT OF AGRICULTURE

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PRODUCTION  
LSM JOLSON

Applicant ID: GTID: Lic Type: OHQID:

Please note You are not able to change any fields.

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Mailing Address

Name: ROGUE FAMILY FARMS LLC  
Address Line1: ROOSEVELT SHANNON  
Address Line2: 300 EAGLE RIDGE DR  
City State Zip: GRANTS PASS OR 97526

License Address

DBA: JACOB 3  
License No/Applicant ID.:  
License Status: Inactive - Expired  
Expiration Date: 12/31/2023  
Address Line1: 13003 OR HWY 62  
City State Zip: EAGLE POINT OR 97524

Attest Statement

Name	Phone	Attested On
JACOB FISHER	6605915891	12/01/2023 10:51:03 AM

What legal source of water will you be using for irrigation of your production site? EPID & Reservoir  
If you will be using a water right please include the permit or certificaion number: R-15198

Production Area

Area Name	Area Type & Size	Intended Use	Hemp Seed	Propagation	Planned Harvests	Latitude	Longitude
GH 1	Greenhouse/Indoor 4000 Square Feet			Y	0	-122.821	42.496
GH 2	Greenhouse/Indoor 4000 Square Feet	Flower			1	-122.821	42.496
ROGUE 1	Field 40 Acres	Flower			1	42.497	-122.817
ROGUE 2	Field 2.7 Acres	Flower			1	-122.813	42.496

# Watermaster Review Form: Water Right Transfer



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

Transfer Application: T-14425

Review Due Date: 04/21/2024

Applicant Name: Eagle Point Irrigation District

Proposed Changes: ☒ POU ☐ POD ☐ POA ☐ USE ☐ OTHER

Reviewer(s): S. Haynes

Date of Review: 04/25/2024

1. Do you have evidence that the right has not been used in the last 5 years and that the presumption of forfeiture would not likely be rebuttable? ☐ Yes ☒ No If "Yes", attach evidence (e.g. dated aerial photo showing pavement or building on the land for >5 yrs.)
2. Is there a history of regulation on the source that serves this (or these) right(s) that has involved the transferred right(s) and downstream water rights? ☒ Yes ☐ No Generally characterize the frequency of any regulation or explain why regulation has not occurred:  
Regulation occurs each year on the source creek.
3. Have headgate notices been issued for the source that serves the transferred right(s)?  
☐ Yes ☐ No ☒ Records not available.
4. In your estimation, after the proposed change, would distribution of water for the right(s) result in regulation of other water rights that would not have occurred if use under the original right(s) was/were maximized? ☐ Yes ☒ No If "Yes", explain:
5. In your estimation, if the proposed change is approved, are there upstream water rights that would be affected? ☐ Yes ☒ No If "Yes", describe how the rights would be affected and list the rights most affected:



6. Check here ☐ if it appears that downstream water rights benefit from return flows resulting from the current use of the transferred right(s)? If you check the box, generally characterize the locations where the return flows likely occur and list the water rights that benefit most:

☒ N/A

7. For POD changes and instream transfers, check here if there are channel losses between the old and new PODs or within the proposed instream reach? If you check the box, describe and, if possible, estimate the losses:

☒ N/A

8. For instream transfers that propose protection of a reach beyond the mouth of the source stream:

☒ N/A Would the quantity be measureable into the receiving stream consistent with OAR 690-077-0015(8)? ☐ Yes ☐ No

9. For POU changes: ☐ N/A Is it likely the original place of use would continue to receive water from the same source? ☐ Yes ☒ No If "Yes", explain:

10. For POU or USE changes: ☐ N/A In your best judgment, would use of the existing right at "full face value," result in the diversion of more water than can be used beneficially and without waste? ☐ Yes ☒ No If "Yes", explain:

11. For POU changes that involve micro-irrigation: ☒ N/A

- a. Has the applicant made changes (absent a transfer) to convert to micro-irrigation within the current place of use boundary of the water right proposed for transfer, and previously demonstrated to the Department through monitoring and site inspections by the Watermaster that the proposed transfer will not result in injury or enlargement?

☐ Yes ☐ No If "Yes", explain:

- b. Has a temporary transfer of this nature been previously filed and approved on the same lands (or portions thereof) as those lands involved in this transfer?

☒ Yes ☐ No If "Yes", answer the following:

- i. Were there any problems with more acres being irrigated (or wetted) than were authorized under the temporary transfer? ☒ Yes ☐ No If "Yes", explain:

There was concerns about enlargement of the POU. If this application is approved it will require additional site visits to verify compliance.

- ii. Did the designated areas that were to remain dry (or not wetted) under the temporary transfer actually remain dry? ☒ Yes ☐ No If "No", explain:

- iii. Did the applicant comply with and meet all of the conditions of the temporary transfer? ☒ Yes ☐ No If "No", explain:

- iv. Do you have any other observations regarding the temporary transfer?

☒ Yes ☐ No If "Yes", describe:

There is concern about enlargement.

- v. Did the applicant demonstrate to the Department through monitoring and site inspections by the Watermaster that neither injury nor enlargement occurred as a result of the temporary transfer? ☐ Yes ☒ No If "No", explain:

- c. To the best of your knowledge, if this transfer is approved, does it appear that:

- i. "Injury" will occur to other water rights that share the same source?

☐ Yes ☒ No If "Yes", explain:

- ii. "Enlargement" of the water right being transferred will occur?

☒ Yes ☐ No If "Yes", explain:

There has been evidence that enlargement of POU has occurred but not at the POD



12. Are there other issues not identified through the above questions that should be considered in determining whether the change "can be effected without injury to other rights"?

☐ Yes ☒ No If "Yes", explain:

13. What alternatives may be available for addressing any issues identified above:

Allow OWRD staff access to POU to ensure that enlargement does not take place.

14. Do conditions need to be included in the transfer order to avoid enlargement of the right or injury to other rights? ☒ No ☐ Yes, as checked and provided below:

☐ For POU changes that involve micro-irrigation, provide the monitoring and reporting conditions necessary to prevent injury/enlargement:

☐ A Headgate should be required prior to diverting water.

☐ Measurement Devices for POD or POA: (if this condition is selected, also fill in the top sections of Page 4)

*a. Before water use may begin under this order, the water user shall install a **totalizing flow meter**\*, or, with prior approval of the Director, another suitable measuring device, ☐ at each point of diversion/appropriation (new and existing) **OR** at each new point of diversion/appropriation ☐ with the exception that water rights issued to the Bureau of Reclamation or an irrigation district (or similar entity) are not subject to this condition.*

*b. The water user shall maintain the meters or measuring devices in good working order.*

*c. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.*

☐ Reservoir water use measurement: (if this condition is selected, also fill in the top sections of Page 4)

*a. Before water use may begin under this order, the water user shall install **staff gages**\*, or, with prior approval of the Director, other suitable measuring devices, that measure the entire range and stage between empty and full in each reservoir. Staff gages shall be United States Geological Survey style.*

*b. Before water use may begin under this order, if the reservoir is located in channel, weirs or other suitable measuring devices must be installed upstream and downstream of the reservoir, and, an adjustable outlet valve must be installed. The water user shall maintain such devices in good working order. A written waiver may be obtained, if in the judgment of the Director, the installation of weirs or other suitable measuring devices, or the adjustable outlet valve, will provide no public benefit.*

\* The following alternative device(s) should be substituted for the bold, underlined device in the above selected condition:

☐

Weir

☐

Submerged Orifice

☐

Parshall Flume

☐

Flow Restrictor

☐

Other: \_\_\_\_

**Oregon Water Resources Department**  
**Measurement Condition Information for the Applicant**  
*(To be sent with the Draft Preliminary Determination or Final Order)*

Transfer #: T-

☐ In order to avoid enlargement of the right or injury to other rights, a \_\_\_\_\_ will  
 be required to be installed prior to diversion of water, as a condition of this transfer:  
☐ at each point of diversion/appropriation (new and existing) **OR**  
☐ at each new point of diversion/appropriation.

For additional information, or to obtain approval of a different type of measurement device, the applicant should contact the area Watermaster:

Watermaster name:

District:

Address:

City/State/Zip:

Phone:

Email:

**Note:** If a device other than the one specified in the Preliminary Determination or Final Order is approved by the Watermaster, fill out and mail the form below to the Salem office.

\*\*\*\*\*

**Approval of an Alternate Measurement Device**      **T-**  
*(to be filled out after consultation with the applicant, or after a site visit)*

On behalf of the Director, I authorize use of the following suitable **alternate measurement device**:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Watermaster signature

\_\_\_\_\_  
 District

\_\_\_\_\_  
 Date

If this form is used for approval of an alternative measurement device, it must be mailed to:

Oregon Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem, OR 97301-1266





# 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

[www.oregon.gov/owrd](http://www.oregon.gov/owrd)

March 22, 2024

Eagle Point Irrigation District  
PO Box 157  
Eagle Point, OR 97524

Reference: District Temporary Transfer T- 14425

On March 20, 2024, we received your district temporary transfer application requesting Place of Use changes for use of water from Big Butte Creek, Tributary to Rogue River. The application was accompanied by \$975.38. Your receipt 142574 is enclosed.

By copy of this letter, we are asking the Watermaster for their report regarding the potential for injury to existing water rights which may be caused by the change.

This application will be published on the Department's weekly notice dated March 26, 2024, viewable at [http://apps.wrd.state.or.us/apps/misc/wrd\\_notice\\_view/?notice\\_id=21](http://apps.wrd.state.or.us/apps/misc/wrd_notice_view/?notice_id=21). A copy of the application can be assessed through this public notice link. Pursuant to Oregon administrative rules, the Department is requesting public comments on the recently filed district transfer application listed above. Comments may be submitted by any interested persons within 30 days of the weekly notice publication date. Comments must be received by the Department on or before April 24, 2024. For details on how to file comments please refer to the Department's weekly notice. Details for filing protests, if applicable, are also noted on the weekly notice.

If you have any questions, please call the Transfer Section, (503) 986-0935.

cc: Watermaster # 13, Shavon L. Haynes (via email)  
File

enclosure

# EAGLE POINT IRRIGATION DISTRICT

TEMPORARY TRANSFER – CERTIFICATE 89373

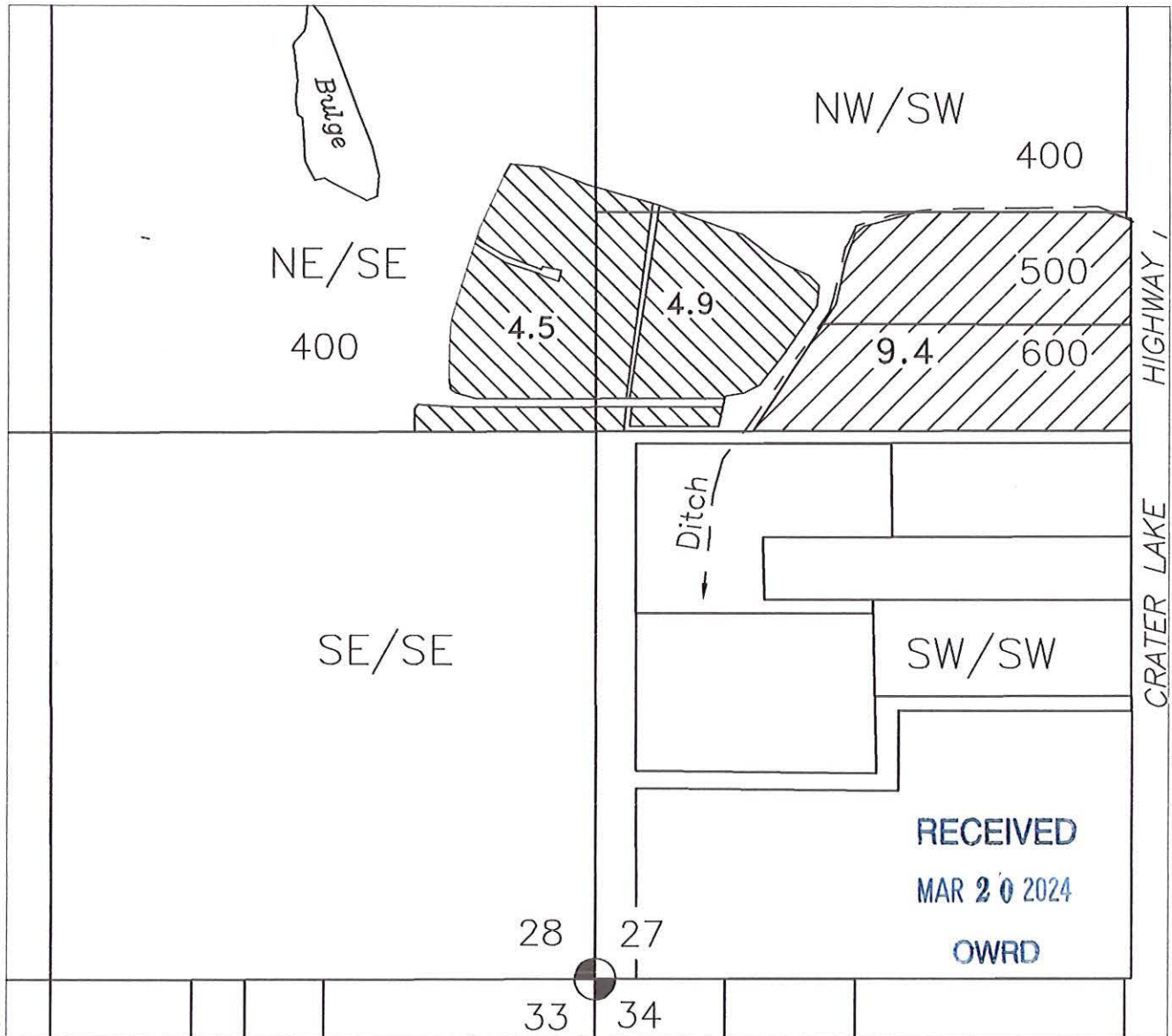
CHANGE IN PLACE OF USE

SECTIONS 27 & 28, TOWNSHIP 35 SOUTH, RANGE 1 WEST, W.M.

District Internal Notice  
# T-2024-001

JACKSON COUNTY, OREGON

Assessor Map T-35S-R1W-27  
Assessor Map T-35S-R1W-28



Water User From & To:  
Rogue Family Farms, LLC

EAGLE POINT IRRIGATION DISTRICT  
2329 BROPHY ROAD – P.O. BOX 157  
EAGLE POINT, OR 97524  
PHONE 541-826-3411  
FAX 541-826-8738



9.4 Acres OFF  
TL-500, 600 Sec. 27



9.4 Acres ON  
TL-400, 500 Sec. 27  
TL-400 Sec. 28

This map is not intended to provide legal  
dimensions or locations of property ownership lines



Scale  
1 inch = 400 feet

2/22/2024 n.e.d.



**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # **142574**

INVOICE # \_\_\_\_\_

RECEIVED FROM: Eagle Point Irrigation District  
BY: \_\_\_\_\_

APPLICATION	
PERMIT	
TRANSFER	T-14425

CASH: ☐ CHECK:# 10996 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 975.38

**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 \$ \_\_\_\_\_

0203 GROUND WATER \$ \_\_\_\_\_

0205 TRANSFER \$ 975.38

**WELL CONSTRUCTION**

0218 WELL DRILL CONSTRUCTOR \$ \_\_\_\_\_

LANDOWNER'S PERMIT \$ \_\_\_\_\_

OTHER (IDENTIFY) \_\_\_\_\_

**0536 TREASURY 0437 WELL CONST. START FEE**

0211 WELL CONST START FEE \$ \_\_\_\_\_

0210 MONITORING WELLS \$ \_\_\_\_\_

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: **142574**

DATED: 3-20-2024 BY: [Signature]



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

# Application for District Temporary Water Right Transfer

Please type or print legibly in dark ink. If your application is incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "N/A" to indicate "Not Applicable." As you complete this form, please refer to notes and guidance included on the application. A summary of review criteria and procedures that are generally applicable to these applications is available at [www.wrd.state.or.us/OWRD/PUBS/forms.shtml](http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml).

Application for the \_\_\_\_\_ irrigation season.  
year

## 1. APPLICANT/AGENT INFORMATION

IRRIGATION DISTRICT Eagle Point Irrigation District			PHONE NO. 541-826-3411	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 157				FAX NO.
CITY Eagle Point	STATE OR	ZIP 97524	E-MAIL epidist@centurylink.net	
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/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.				

## 2. PROPOSED CHANGE(S) TO WATER RIGHT(S)

- List **all** water rights to be affected by this transfer. Indicate the certificate, permit, decree or other identifying number(s) in the table below: If a certificate has been issued and reflects the current status of the water right, you need only list the certificate number.  
(Attach additional pages as necessary.)

	Application / Decree	Permit / Previous Transfer	Certificate
1.	- /	- / -	89373
2.	- /	- / -	
3.	- /	- / -	
4.	- /	- / -	
5.	- /	- / -	
6.	- /	- / -	

- Check **all** proposed change(s) included in this transfer application:
  - ☒ Place of Use
  - ☐ Point of Diversion or Point of Appropriation
  - ☐ Surface Water source to Ground Water source
  - ☐ Character or Type of Use

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**3. CONSULTATION WITH STATE AGENCIES, LOCAL GOVERNMENTS, AND TRIBAL GOVERNMENTS**

Is this transfer application for a change in point of diversion in response to an emergency?

☐ Yes ☒ No

Has the district conferred with the Oregon Department of Fish and Wildlife, Division of State Lands, and affected local governments (e.g., county, city, municipal corporation), and tribal governments about the proposed point of diversion change? ☐ Yes ☐ No

*If "Yes", for any of the above, list the agency or government name and the name and phone number of the appropriate contact person:*

Agency/ Gov't Name: _____	Contact Name: _____	Phone: _____
Agency/ Gov't Name: _____	Contact Name: _____	Phone: _____
Agency/ Gov't Name: _____	Contact Name: _____	Phone: _____
Agency/ Gov't Name: _____	Contact Name: _____	Phone: _____
Agency/ Gov't Name: _____	Contact Name: _____	Phone: _____

**4. CONSENT FOR A CHANGE IN TYPE OF USE OF A WATER RIGHT TO STORE WATER**

Is this transfer application for a change in type of use of a water right to store water?

☐ Yes ☒ No

Has the district received written consent to the change from the operator of the reservoir if different than the district, or from the appropriate federal agency if the water right to store water is issued in the name of a federal governmental agency? ☐ Yes ☐ No

*If "Yes", for any of the above, label and attach a dated and signed copy of the written consent.*

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## 5. ATTACHMENTS

Check each of the following attachments included with this application. The application will be returned if all required attachments are not included.


<b>Supplemental Form A –</b> <b>Description of Proposed Change(s) to a Water Right</b> <input checked="" type="checkbox"/> A <u>separate</u> Supplemental Form A is enclosed for <u>each</u> water right to be affected by this transfer. <b>Map</b> <input checked="" type="checkbox"/> Temporary Transfer A map meeting the requirements of OAR 690-385-3300 must be included but need not be prepared by a Certified Water Right Examiner. <b>Consent to Transfer</b> <input type="checkbox"/> A copy of the written consent, if applicable, for a change in type of use of a water right to store water.	<b>Supplemental Water Right Statement</b> <input type="checkbox"/> A written statement, if applicable, identifying supplemental water rights that will not be transferred, but remain unexercised at the authorized place of use during the irrigation season. <b>Water Well Reports/Well Logs:</b> <input type="checkbox"/> The application is for a change from surface water to ground water and copies of all water well reports are attached. <input type="checkbox"/> Water well reports are not available and attached is a description of construction details including well depth, static water level, and information necessary to establish the ground water body developed or proposed to be developed. <input type="checkbox"/> The application is for a surface water transfer and water well reports are not required. <b>Fees:</b> <input checked="" type="checkbox"/> Amount enclosed: \$975.38 See the Department's Fee Schedule at <a href="http://www.wrd.state.or.us">www.wrd.state.or.us</a> or call (503) 986-0900.
---	---


## 6. SIGNATURES

The district certifies the following:

- (1) The water right(s) proposed for transfer is a water right(s) subject to transfer and has not been forfeited for nonuse under ORS 540.610;
- (2) Each user affected by the proposed transfer has provided written authorization for the transfer and such authorization is on file with the district; and
- (3) The district has notified each affected user that the Department may condition or reject the transfer at any time to the extent necessary to avoid injury to an existing water right, and that the use of water on lands from which the water right is transferred (authorized place of use) and at the proposed place of use during the same irrigation season or calendar year may subject both the user and district to civil penalties.

On behalf of the district, I affirm that the information contained in this application is true and accurate.

  
District Manager signature

  
name (print)

3-15-24  
date

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OR

\_\_\_\_\_  
Authorized District Representative signature

\_\_\_\_\_  
name (print)

\_\_\_\_\_  
date

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### Before submitting your application to the Department, be sure you have:

- Answered each question completely.
- Included all the required attachments.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount.





## District Temporary Water Right Transfer Application

### Supplemental Form A

#### DESCRIPTION OF PROPOSED CHANGE(S) TO A WATER RIGHT

List only one water right per page. A separate Supplemental Form A must be completed for each certificate, permit, decree, or other right involved in the proposed transfer.

Attach additional copies of Supplemental Form A as needed to describe other certificates, permits, decrees or other rights involved in this transfer.

- Certificate Number or other identifying number: 89373

#### 1. TYPE OF CHANGE(S) PROPOSED

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> <b>Change to facilitate a change in Place of Use</b> (The old point of diversion or appropriation will <u>not</u> be used for the portion of the water right affected by the transfer.)	<input type="checkbox"/> <b>All of the right will be exercised at a different location than currently authorized</b> (Use of water at the current location will be discontinued.)	Proposed new use: <input type="checkbox"/> <b>Change</b> a water right to Store Water
<input type="checkbox"/> <b>Surface Water to Ground Water</b> (A new point of appropriation will be used instead of the old point of diversion. The old point of diversion will <u>not</u> be used.)	<input checked="" type="checkbox"/> <b>Only a <u>portion</u> of the right will be exercised at a different location than currently authorized</b> (Use of water at the current location will be discontinued.)	<input type="checkbox"/> <b>Diminish</b> an irrigation water right (primary) to a supplemental water right
<input type="checkbox"/> <b>Change in Point of Diversion in Response to an Emergency</b>		

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## 2. CURRENT WATER RIGHT INFORMATION

Water Right Subject to Transfer (*check and complete one of the following*):

<input checked="" type="checkbox"/> Certificated Right	89373	
	Certificate Number	Permit Number or Decree Name
<input type="checkbox"/> Adjudicated, Non-certificated Right		
	Name of Decree	Page Number
<input type="checkbox"/> Permit for which Proof has been Approved	-	
	Permit Number	Date Claim of Beneficial Use Submitted
<input type="checkbox"/> Transferred Right for which Proof has been Filed	-	
	Previous Transfer Number	Date Claim of Beneficial Use Submitted

- Name on Permit, Certificate, or Decree: Eagle Point Irrigation District
- County: Jackson
- Authorized Use(s) to be Affected by Transfer: irrigation
- Priority Date(s): 2/20/1924

*If there are **multiple Priority Dates** identified on the water right, any information provided on pages 3 through 6 of this form **must identify** which priority date is associated with each of the authorized and proposed points of diversion or appropriation and places of use.*

- Source(s) of Water to be Affected by Transfer: Big Butte Creek

Tributary to: Rogue River

*If there are **multiple Sources** listed on the water right, any information provided on pages 3 through 6 of this form **must identify** which source is associated with each of the authorized and proposed points of diversion or appropriation and places of use.*

**For applications proposing a Change in Place of Use or Character of Use:**

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?

☐ Yes    ☒ No    ☐ N/A – No Change in Place of Use or Character of Use

*If "Yes", what are the Permit, Registration or Certificate Numbers? \_\_\_\_\_*

*Pursuant to ORS 540.510, any "layered" water use or a right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled, except as provided in OAR 690-380-2240(5).*

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▪ Certificate Number or other identifying number: 89373

*The following information **must be provided only** for those points of diversion or appropriation that **are involved in the transfer** (i.e., **list only the portion of the water right you propose to transfer.**) Attach additional pages as necessary.*

A Point of Diversion (POD) describes the location of diversion from a surface water source.

A Point of Appropriation (POA) describes the location of appropriation from a ground water source or well.

If a point of diversion or appropriation is not numbered on the decree or water right certificate or permit, assign it a unique number in the following table (e.g. POD #1 or POA(well) #1). Use the number to refer to the point of diversion or appropriation serving the place of use described in Table I (Authorized Place of Use) and Table II (Proposed Place of Use).

**Location of Existing Authorized Point(s) of Diversion or Appropriation to be Changed:**

*(i.e., the allowed point(s) of diversion or appropriation listed on the water right that will be affected by the proposed transfer, the "OFF or FROM" point(s) of diversion or appropriation)*

*Government lot(GOV'T LOT) and donation land claim numbers (DLC) must be included in the table below **only** if the information is reflected on the existing water right.*

IF POA, OWRD WELL LOG ID NO. (OR WELL ID TAG NO. L- )	POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES
	1	35 S	2 E	10	NE NE			1130 feet south & 700 feet west from NE cor. sec. 10
	2	35 S	2 E	3	NW NW		4	1030 feet south & 290 feet east from NW cor. Sec. 3

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■ Certificate Number or other identifying number: 89373

- Does the water right being transferred involve a ground water source(s)?

☐ Yes ☒ No (Surface water source only.)

If “Yes”, for each authorized point of appropriation (well) involved, you must either:

- A. Supply a copy of the well log(s) for each point of appropriation that is **clearly labeled** and associated with the corresponding well in the table above and on the accompanying application map. (NOTE: You may search for well logs on the Department’s web page at: <http://www.wrd.state.or.us>)

or

- B. If a well log is **not** available, you must describe the construction of the authorized point of appropriation by completing the table below. Attach additional copies as necessary.

**Construction of Existing Authorized Point(s) of Appropriation – (Only needed if no well log is available.)**

Wells in this listing must be **clearly tied** to corresponding well location(s) described in the table above and shown on the accompanying application map.

OWRD WELL NO. AS IDENTIFIED IN TABLE ABOVE	DIAMETER	TYPE AND SIZE OF CASING	NO. OF FEET OF CASING	INTERVALS CASING IS PERFORATED (IN FEET)	SEAL DEPTH	EST. DEPTH TO WATER	EST. DEPTH TO WATER BEARING STRATUM	TYPE OF ACCESS PORT OR MEASURING DEVICE	TOTAL WELL DEPTH



▪ Certificate Number or other identifying number: 89373

*The following information **must be provided** only for those places of use that **are involved in the transfer** (i.e., list only the portion of the water right you propose to transfer.) Attach additional pages as necessary.*

**Location of Existing Authorized Place of Use to be Affected:**

(i.e., the allowed lands listed on the water right that will be affected by the proposed transfer, the "OFF or FROM" lands)

*Government lot and donation land claim numbers must be included in the tables below only if the information is reflected on the existing water right.*

[illegible]

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▪ Certificate Number or other identifying number: 89373

### **3. PROPOSED CHANGES TO THE WATER RIGHT**

*Describe proposed changes to the water right involving point(s) of diversion and/or appropriation necessary to facilitate a change in place of use. Measured distances described below should accurately correspond to the points shown on the accompanying application map.*

*Attach additional pages as necessary.*

#### **Location of Proposed Point(s) of Diversion or Appropriation:**

*(i.e., the "ON or TO" point(s) of diversion or appropriation)*

*(NOTE: Complete this table **only** if a Change in Point of Diversion or Appropriation is being proposed to facilitate a Change in Place of Use.)*

IF POA, OWRD WELL LOG ID NO. (OR WELL ID TAG NO. L- )	POD# or POA#	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	MEASURED DISTANCES



▪ Certificate Number or other identifying number: 89373

If there are proposed point(s) of appropriation (wells) listed in the table above, are the well(s) already constructed?

☐ Yes    ☐ No    ☒ N/A – No proposed well(s) listed above.

If “Yes”, attach and **clearly label** the corresponding well log(s) for each proposed well, **or** if well log(s) are **not** available, describe the construction of the well(s) using the table below. (NOTE: You may search for well logs on the Department’s web page at: <http://www.wrd.state.or.us>)

If “No”, describe the anticipated construction for the proposed well(s) in the following table:

**Construction of Proposed Point(s) of Appropriation or Well(s)**

*Wells in this listing must be clearly tied to corresponding well location(s) described in the table above and shown on the accompanying application map.*

OWRD WELL NO. AS IDENTIFIED IN TABLE ABOVE	DIAMETER	TYPE AND SIZE OF CASING	NO. OF FEET OF CASING	INTERVALS CASING IS PERFORATED (IN FEET)	SEAL DEPTH	EST. DEPTH TO WATER	EST. DEPTH TO WATER BEARING STRATUM	TYPE OF ACCESS PORT OR MEASURING DEVICE	TOTAL WELL DEPTH

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▪ Certificate Number or other identifying number: 89373

*Describe proposed changes to the water right involving place of use. Information described below should accurately correspond to the proposed place of use shown on the accompanying application map. Attach additional pages as necessary.*

**Location of Proposed Place of Use:** (i.e., the "ON or TO" lands)

TABLE II. – PROPOSED PLACE OF USE												
POD# or POA#	PRIORITY DATE	USE	LEGAL DESCRIPTION							ACRES	USER NAME	DINN
			TWP	RNG	SEC	QQ	DLC	GOV'T LOT	TAX LOT			
1&2	2/20/1924	IR	35S	1 W	27	NW SW			400, 500	4.90	Rogue Family Farms	2024-001
1&2	2/20/1924	IR	35 S	1 W	28	NE SE			400	4.50	Rogue Family Farms	2024-001
TOTAL:										9.4		

Remarks: \_\_\_\_\_

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Oregon Water Resources Department  
Transfer Fee Calculation for Temporary District Transfer[Main](#)[Help](#)[Return](#)[Contact Us](#)

Today's Date: Thursday, February 22, 2024		Fee Calculation
Base Fee (includes temporary change to one water right for up to 1 cfs) Fill in information below— Check each box that applies.		\$950.00
Enter total number of water rights included in transfer. <input type="text" value="1"/>		\$0.00
<input type="checkbox"/> Check this box if you propose to change the place of use for a NON-irrigation use.		(see NOTE if box checked for submittal of digital format map below)
<input type="checkbox"/> Check this box if you propose to change the place of use for an irrigation use.		
Enter the number of acres in the footprint of the place of use to be transferred. <input type="text" value="9.4"/> (If a supplemental certificate also covers the same land as an included primary right, count the acreage only once.)		\$25.38
Total Transfer CFS(rounded up to the next whole cfs):		
Subtotal:		\$975.38
<input type="checkbox"/> Check the box if you are submitting the application and map in a digital format.		*NOTE — If this box checked and map in Department-approved digital format, this fee is used in place of the \$2.70/acre of land irrigated (standard format) fee above.
Transfer Fee:		
		\$975.38
<input type="button" value="Return to Edit"/> <input type="button" value="Clear"/>		

RECEIVED

MAR 20 2024

OWRD