



Josh Newton
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(541) 318-9817
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August 19, 2024

VIA E-MAIL ONLY:

JEREMY.T.GIFFIN@WATER.OREGON.GOV

ANN.L.REECE@WATER.OREGON.GOV

SARAH.A.HENDERSON@WATER.OREGON.GOV

Jeremy Giffin
Watermaster - District 11
Oregon Water Resources Department
231 SW Scalehouse Loop, Suite 103
Bend, OR 97702

Ann Reece
Sarah A. Henderson
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301

Re: T-14174

Dear Mr. Giffin, Ms. Reece, and Ms. Henderson:

We represent the Confederated Tribes of the Warm Springs Reservation of Oregon (“Tribe”). The Department of Water Resources (“Department”) has provided the Tribe with certain information concerning several transfer applications. This letter pertains to T-14174, which is further identified in **Appendix A** hereto (the “Application”).

The Tribe has reviewed the Application, along with additional information about the Application provided by the Department. **Based on that information, the Tribe does not object to the Department processing the Application in accordance with applicable law,** and the Department’s customary practice, *provided* that installation of a flow meter on the identified pipe is required and must be installed prior to diversion of water, consistent with the Department’s Watermaster review attached as **Appendix B**. This flow meter is intended to facilitate and ensure that OWRD is able to monitor the new place of use to verify application of water. The Tribe’s position set forth in this letter is contingent upon the implementation and use, for monitoring purposes, of said flow meter.

The Tribe expressly reserves, and does not waive, all rights, claims, and defenses that it may possess in connection with the Application, including, but not limited to, whether the Application violates the Treaty of June 25, 1855, with the Tribes of Middle Oregon, 12 Stat. 963, or the Confederated Tribes of the Warm Springs Reservation Water Rights Settlement Agreement, dated November 17, 1997, as amended.

Please let us know if you have any questions.

Sincerely,

Josh Newton
of BEST BEST & KRIEGER LLP

Jeremy Giffin
Ann Reece
Sarah A. Henderson
August 19, 2024
Page 2

JN

cc: Robert A. Brunoe
Austin Smith, Jr.
Brad Houslet
David Filippi, Esq.
Alison K. Toivola, Esq.

Appendix A

Application for Permanent Water Right Transfer

Part 1 of 5 – Minimum Requirements Checklist

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

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

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

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- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 2 List them here: 87898 & 90836**
Please include a separate Part 5 for each water right. (See instructions on page 6)
NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

Attachments:

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

(For Staff Use Only)

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

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

Other/Explanation _____

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

Part 2 of 5 – Transfer Application Map

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

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

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

Part 4 of 5 – Applicant Information and Signature

Applicant Information

| | | | |
|--|--------------------|----------------------------------|---|
| APPLICANT/BUSINESS NAME THEODORE C. LYSTER III / POLLY CREEK RANCH, LLC | | PHONE NO. 541-447-1015 | ADDITIONAL CONTACT NO. |
| ADDRESS PO BOX 28 | | | FAX NO. |
| CITY BEND | STATE OR | ZIP 97709 | E-MAIL tlysterrancher@gmail.com |
| BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED. | | | |

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

| | | | |
|--|--------------------|----------------------------------|------------------------------------|
| AGENT/BUSINESS NAME JOHN A. SHORT / WATER RIGHT SERVICES, LLC | | PHONE NO. 541-389-2837 | ADDITIONAL CONTACT NO. |
| ADDRESS PO BOX 1830 | | | FAX NO. |
| CITY BEND | STATE OR | ZIP 97709 | E-MAIL johnshort@usa.com |
| BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED. | | | |

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

REARRANGE POU OF 2 CERTIFICATES TO MATCH FARMING PRACTICES.

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

Check One Box

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

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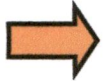
FEB 15 2023

OWRD
SALEM, OREGON

By my signature below, I confirm that I understand:

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

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



T.C. Lyster
Applicant signature

T.C. Lyster, Manager
Print Name (and Title if applicable)

2/5/23
Date

Applicant signature

Print Name (and Title if applicable)

Date

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

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

Check the following boxes that apply:

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

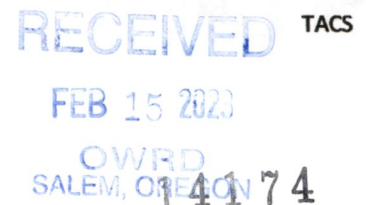
At this time, are the lands in this transfer application in the process of being sold? Yes No

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

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

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

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

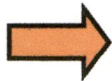


Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

| | | |
|--|---------|-----|
| IRRIGATION DISTRICT NAME N/A | ADDRESS | |
| CITY | STATE | ZIP |

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

| | | |
|---------------------------|---------|-----|
| ENTITY NAME N/A | ADDRESS | |
| CITY | STATE | ZIP |



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

| | | |
|--|--|---------------------|
| ENTITY NAME CROOK COUNTY PLANNING DEPARTMENT | ADDRESS 300 NE 3RD ST , ROOM 12 | |
| CITY PRINEVILLE | STATE OR | ZIP 97754 |

| | | |
|-------------|---------|-----|
| ENTITY NAME | ADDRESS | |
| CITY | STATE | ZIP |

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Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 87898

Description of Water Delivery System

System capacity: 1.235 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

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OWRD
 STATE OF COLORADO

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **POD THROUGH OPEN DITCH, PUMPED THROUGH BURIED PIPELINES TO BULGE-IN-SYSTEM AND TO PIVOTS AND SPRINKLERS**

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

| POD/POA Name or Number | Is this POD/POA Authorized on the Certificate or is it Proposed? | If POA, OWRD Well Log ID# (or Well ID Tag # L-___) | Twp | | Rng | | Sec | ¼ ¼ | | Tax Lot, DLC or Gov't Lot | Measured Distances (from a recognized survey corner) |
|------------------------|---|--|-----|---|-----|---|-----|-----|----|---------------------------|--|
| | | | | | | | | | | | |
| POD | <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | 14 | S | 17 | E | 22 | SE | SE | 2500 | 1122' N, 346' W OF NW COR SEC 26 |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | | | | |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | | | | |
| | <input type="checkbox"/> Authorized <input type="checkbox"/> Proposed | | | | | | | | | | |

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

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

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 87898

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

| AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed. | | | | | | | | | | | Proposed Changes (see "CODES" from previous page) | PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made. | | | | | | | | | | | | | | | |
|--|-----|-----|---|----|---------|----------------------|-------|---|---|------------------|---|---|------|---------|----|---|---------|----------------------|-------|--------------------|--|------------------|------|------|----|--------|------|
| Twp | Rng | Sec | ¼ | ¼ | Tax Lot | Gvt Lot or DLC | Acres | Type of USE listed on Certificate | POD(s) or POA(s) (name or number from Table 1) | Priority Date | | Twp | Rng | Sec | ¼ | ¼ | Tax Lot | Gvt Lot or DLC | Acres | New Type of USE | POD(s)/ POA(s) to be used (from Table 1) | Priority Date | | | | | |
| EXAMPLE | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | S | 9 | E | 15 | NE | NW | 100 | | 15.0 | Irrigation | POD #1 | POD #2 | 1901 | POU/POD | 2 | S | 9 | E | 1 | NW | NW | 500 | 1 | 10.0 | | POD #5 | 1901 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | POD #6 | 1901 |
| | | | | | | | | | | | | | | POU | 14 | S | 17 | E | 26 | SW | NE | 2602 | | 1.7 | IR | POD | 1868 |
| | | | | | | | | | | | | | | " | " | " | " | " | " | NW | NW | " | | 5.2 | " | " | " |
| | | | | | | | | | | | | | | " | " | " | " | " | " | SW | NW | " | | 1.3 | " | " | " |
| | | | | | | | | | | | | | | " | " | " | " | " | " | SE | NW | " | | 9.8 | " | " | " |
| | | | | | | | | | | | | | | " | " | " | " | " | " | NE | SW | " | | 4.3 | " | " | " |
| | | | | | | | | | | | | | | " | " | " | " | " | " | NW | SW | " | | 22.7 | " | " | " |
| | | | | | | | | | | | | | | " | " | " | " | " | " | SW | SW | " | | 17.7 | " | " | " |
| | | | | | | | | | | | | | | " | " | " | " | " | " | SE | SW | " | | 25.5 | " | " | " |
| | | | | | | | | | | | | | | " | " | " | " | " | " | NW | SE | 3000 | | 0.4 | " | " | " |
| | | | | | | | | | | | | | | " | " | " | " | " | " | SW | SE | 2602 | | 9.6 | " | " | " |
| TOTAL ACRES: | | | | | | | | | | | | TOTAL ACRES: | | | | | | | | | | | 98.2 | | | | |

Additional remarks: **THERE IS NO CHANGE PROPOSED FOR THE DOMESTIC AND STOCK USE PORTION OF THE CERTIFICATE.**

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 OVID
 SALEM, OREGON

14174

Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 90836

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SALEM, OREGON

Description of Water Delivery System

System capacity: 0.49 cubic feet per second (cfs) OR
_____ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **WELLS PUMP OPEN DISCHARGE FOR FLOOD IRRIGATION AND TO BULGE PONDS, THEN PUMPED TO PLACE OF USE SPRINKLERS AND PIVOTS.**

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

| POD/POA Name or Number | Is this POD/POA Authorized on the Certificate or is it Proposed? | If POA, OWRD Well Log ID# (or Well ID Tag # L-___) | Twp | | Rng | | Sec | ¼ ¼ | | Tax Lot, DLC or Gov't Lot | Measured Distances (from a recognized survey corner) |
|------------------------|---|--|-----------|----------|-----------|----------|-----------|-----------|-----------|---------------------------|--|
| WELL 1 | <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed | CROO 50157 | 14 | S | 17 | E | 23 | SE | SE | 2602 | 528' N, 26' W of SE Cor S 23 |
| WELL 2 | <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed | CROO 50162 | " | " | " | " | " | " | " | " | 431' N, 441' W of SE Cor S 23 |
| WELL 3 | <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed | CROO 3222 | " | " | " | " | " | " | " | " | 304' N, 900' W of SE Cor S 23 |
| WELL 4 | <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed | CROO 50163 | " | " | " | " | " | " | " | " | 330' N, 1014' W of SE Cor S 23 |

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

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

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 90836

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

| AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed. | | | | | | | | | | Proposed Changes (see "CODES" from previous page) | PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made. | | | | | | | | | | | | | |
|--|-----|-----|-----|---------|----------------------|-------|---|---|------------------|--|---|--------------|-----|-----|---------|----------------------|-------|----------------------------|--|---------------|--------------------|---------|--------------|------|
| Twp | Rng | Sec | ¼ ¼ | Tax Lot | Gvt Lot or DLC | Acres | Type of USE listed on Certificate | POD(s) or POA(s) (name or number from Table 1) | Priority Date | | Twp | Rng | Sec | ¼ ¼ | Tax Lot | Gvt Lot or DLC | Acres | New Type of USE | POD(s)/ POA(s) to be used (from Table 1) | Priority Date | | | | |
| | | | | | | | | | | POU | 14 | S | 17 | E | 23 | | SE | SE | 2602 | | 9.4 | IR | WELLS 1-4 | 1996 |
| | | | | | | | | | | " | " | " | " | " | 26 | | NE | NE | " | | 3.4 IR/ 4.0 IS | IR & IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | NW | NE | " | | 10.0 IR/ 5.0 IS | IR & IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | SW | NE | " | | 7.8 IR/ 7.3 IS | IR & IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | NE | NW | " | | 1.8 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | NW | NW | " | | 20.3 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | SW | NW | " | | 38.5 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | SE | NW | " | | 12.6 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | NE | SW | " | | 4.3 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | NW | SW | " | | 30.0 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | SW | SW | " | | 31.3 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | SE | SW | " | | 25.5 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | NW | SE | 3000 | | 0.4 | IS | " | " |
| | | | | | | | | | | " | " | " | " | " | " | | SW | SE | 2602 | | 9.6 | IS | " | " |
| | | | | | | | | | | " | " | " | " | 35 | | NW | NW | 210 | | | 1.2 | IS | " | " |
| TOTAL ACRES: | | | | | | | | | | | | TOTAL ACRES: | | | | | | 30.6 AC. IR / 191.8 AC. IS | | | | | | |

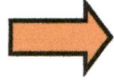
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 FEB 14 2022
 SALEM DIVISION

14174

For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: C-90836.



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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

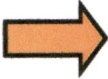
| Proposed or Authorized POA Name or Number | Is well already built? (Yes or No) | If an existing well: OWRD Well ID Tag No. L-_____ | Total well depth | Casing Diameter | Casing Intervals (feet) | Seal depth(s) (intervals) | Perforated or screened intervals (in feet) | Static water level of completed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

For Place of Use or Character of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: C-83656,

C-87898, C-89614, & C-89615.



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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

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FEB 15 2022

OWRD
OREGON

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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

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

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

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

| Proposed or Authorized POA Name or Number | Is well already built? (Yes or No) | If an existing well: OWRD Well ID Tag No. L-____ | Total well depth | Casing Diameter | Casing Intervals (feet) | Seal depth(s) (intervals) | Perforated or screened intervals (in feet) | Static water level of completed well (in feet) | Source aquifer (sand, gravel, basalt, etc.) | Well-specific rate (cfs or gpm). If less than full rate of water right |
|---|------------------------------------|--|------------------|-----------------|-------------------------|---------------------------|--|--|---|--|
| | | | | | | | | | | |
| | | | | | | | | | | |
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Cross 3222

14S 17E 26AD

STATE OF OREGON WATER SUPPLY WELL REPORT

(START CARD) # 80379

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number #8 Name GARY GUMPERT Address 28600 E HWY 26 City PENNINGTON State OR Zip 97754

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 230 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Row 1: 16", 0, 78, CONCRETE, 0, 78, 96 BAGS. Row 2: 8", 78, 78.

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other Purge w/ 1" TRIMMER Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 12", 42, 78, 200, [X], [], [X], []. Liner: [], [], [], [], [], [], [], [].

Final location of shoe(s) 78' NO SEAL

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. All cells are empty.

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [X] Air [] Artesian. Yield gal/min 1006 gpm, Drawdown 0, Drill stem at 730, Time 1 hr.

Temperature of water 56° Depth Artesian Flow Found Was a water analysis done? [] Yes By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

(9) LOCATION OF WELL by legal description: County CROOK Latitude Longitude Township 14 or 15 Range 17 or W. WM. Section 26 NE 1/4 SE 1/4 Tax Lot 2600 Lot Block Subdivision Street Address of Well (or nearest address) MILL CR RD

(10) STATIC WATER LEVEL: +1 ft. below land surface. Date 7/14/95 Artesian pressure 0 lb. per square inch. Date 7/14/95

(11) WATER BEARING ZONES: Depth at which water was first found 135'

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 135, 154, 50, +1. Row 2: 535, 550, 50, +1.

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Rows include: Gravel, Gravel Sandstone + Bentonite, Grey Clay, Blue Sandstone, Brown Claystone, Hard Grey Sandstone + Caliche, Brown Claystone, Blue Sandstone, Hard Black Basalt, Blue Sandstone.

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WATER RESOURCES DEPARTMENT SALEM, OREGON

RECEIVED FEB 15 2022 GWRD SALEM OREGON

Date started 7/14/95 Completed 7/14/95 (unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Signed [Signature] WWC Number Date

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed [Signature] WWC Number 1555 Date 7/17/95

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145/17E/26 AD

STATE OF OREGON
WATER SUPPLY WELL REPORT

CROOK 3282

NOV - 6 1995

(START CARD) # 80385

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT.

(1) OWNER: Well Number #9
Name GARY SUGGEST
Address 286650 E HWY 26
City PRINEVILLE State OR Zip 97134

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 570 ft.
Explosives used Yes No Type Amount

HOLE SEAL

| Diameter | From | To | Material | From | To | Sacks or pounds |
|----------|------|-----|-----------|------|----|-----------------|
| 12" | 0 | 26 | CEMENTITE | 0 | 26 | 16 SACKS |
| 8" | 26 | 570 | | | | |

How was seal placed: Method A B C D E
 Other GRANULAR BENTONITE LOOSE DRY
Backfill placed from ___ ft. to ___ ft. Material
Gravel placed from ___ ft. to ___ ft. Size of gravel

(6) CASING/LINER:

| Diameter | From | To | Gauge | Steel | Plastic | Welded | Threaded |
|------------|------|-----|-------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| Casing: 8" | +1 | 26 | 26 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner: 6" | 0 | 570 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations Method FACTORY PERF
 Screens Type Material

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|-----|-----------|--------|----------|----------------|--------------------------|-------------------------------------|
| 30.5 | 570 | 1/8 | 648 | 180x6" | 6", 1.5" | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

(8) WELL TESTS: Minimum testing time is 1 hour

| Yield gal/min | Drawdown | Drill stem at | Time |
|---------------|----------|---------------|-------|
| 100+ GPM | 0 | 570 | 1 hr. |

Flowing Artesian Air Pump Bailer

Temperature of water 60° Depth Artesian Flow Found
Was a water analysis done? Yes By whom
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other
Depth of strata:

(9) LOCATION OF WELL by legal description:
County CROOK Latitude Longitude
Township 14 N or S Range 17 E or W. WM.
Section 26 SE 1/4 NE 1/4
Tax Lot 260 Lot Block Subdivision
Street Address of Well (or nearest address) MILL CROOK

(10) STATIC WATER LEVEL:
10' ft. below land surface. Date 9/3/95
Artesian pressure 0 lb. per square inch. Date 9/3/95

(11) WATER BEARING ZONES:
Depth at which water was first found 335

| From | To | Estimated Flow Rate | SWL |
|------|-----|---------------------|-----|
| 335 | 570 | 100+ GPM | 10' |

(12) WELL LOG:
Ground Elevation

| Material | From | To | SWL |
|--------------------------|------|-----|-----|
| TOP SOIL GRAY + Boulders | 0 | 8 | |
| BROWN CLAY | 8 | 17 | |
| SEPTIC TANK | 17 | 70 | |
| HARD BLACK BASALT | 70 | 335 | |
| BLUE GRASS | 335 | 570 | 10 |

Date started 9/3/95 Completed 9/3/95

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

WWC Number
Signed Date

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 1553
Signed Date 10/30/95

STATE OF OREGON
WATER SUPPLY WELL REPORT CR00
(as required by ORS 537.765) 50162

~~CR00~~
~~3283~~

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NOV - 6 1995

14S17E/26AD

(START CARD) # 74271

Instructions for completing this report are on the last page of this form.

WATER RESOURCES DEPARTMENT

(1) OWNER: Well Number #6

Name GARY GUMPERT
Address 286050 E HWY 26
City PRINEVILLE State OR Zip 97754

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 610 ft.
Explosives used Yes No Type _____ Amount _____

| HOLE | | SEAL | | | | | |
|----------|------|------|----------|------|----|-----------------|--|
| Diameter | From | To | Material | From | To | Sacks or pounds | |
| 12" | 0 | 50 | CEMENT | 0 | 50 | 35 SACKS | |
| 8" | 50 | 610 | | | | | |

How was seal placed: Method A B C D E
 Other Type III Cement Pumped w/Trimmer
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

| Casing/Liner | Diameter | From | To | Gauge | Steel | Plastic | Welded | Threaded |
|--------------|----------|------|-----|-------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| | | | | | | | | |
| Casing | 8" | +2 | 80 | 250 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner | 6" | 0 | 540 | 188 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method FAISOLY
 Screens Type _____ Material _____

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|-----|-----------|--------|----------|----------------|--------------------------|-------------------------------------|
| 440 | 540 | 1/8" | 1100 | 7/8" | 6", 188 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

(8) WELL TESTS: Minimum testing time is 1 hour

| Yield gal/min | Drawdown | Drill stem at | Time |
|---------------|----------|---------------|-------|
| 150 gpm | 0 | 600' | 1 hr. |

Temperature of water 56° Depth Artesian Flow Found 440'
Was a water analysis done? Yes By whom _____

Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____

Depth of strata: _____

SALEM, OREGON
(9) LOCATION OF WELL by legal description:
County COOK Latitude _____ Longitude _____
Township 19 N or S Range 17 E or W. WM.
Section 26 SE 1/4 NE 1/4
Tax Lot 2600 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) MILL CREEK CONCRETE RD.

(10) STATIC WATER LEVEL:
+2 ft. below land surface. Date 2/17/95
Artesian pressure 12 lb. per square inch. Date 2/17/95

(11) WATER BEARING ZONES:
Depth at which water was first found 440'

| From | To | Estimated Flow Rate | SWL |
|------|------|---------------------|-----|
| 440' | 540' | 150 + 6 gpm | +2 |

(12) WELL LOG:
Ground Elevation _____

| Material | From | To | SWL |
|-------------------|------|-----|-----|
| CLAY + FRAGMENTS | 0 | 31 | |
| GRAY CLAYSTONE | 31 | 47 | |
| GRAY BASALT | 47 | 365 | |
| BROWN BASALT MILD | 365 | 410 | +2 |
| HARD BLACK BASALT | 410 | 590 | |
| BROWN CLAYSTONE | 590 | 610 | |

Date started 2/10/95 Completed 2/16/95

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
WWC Number _____
Signed _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 1555
Signed Bill C... Date 11/1/95

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14S/17E/26AD

STATE OF OREGON WATER SUPPLY WELL REPORT

CR00 3284

NOV - 6 1995

(START CARD) # 7704

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number #7

Name Gary Gumpert Address 26050 E Hwy 26 City Prineville State OR Zip 97754

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration [] Abandonment

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 550 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: Diameter, From, To, Material, From, To, Sacks or pounds. Row 1: 12", 0, 50, CEMENT, 0, 50, 32 SACKS. Row 2: 8", 50, 550

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other CEMENT PUMPED w/TRIMMIE Backfill placed from - ft. to - ft. Material Gravel placed from - ft. to - ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 8", +1, 55, 250, [X], [], [X], []. Liner: 6", 10, 550, 186, [X], [], [X], []

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: [X] Perforations Method FAULTY [] Screens Type Material. Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: 470, 550, 1/4", 880, 1/2", 6", 186, [], [X]

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [X] Air [] Artesian. Yield gal/min 50 gpm Drawdown 0 Drill stem at 550 Time 1 hr.

Temperature of water 56° Depth Artesian Flow Found 235' Was a water analysis done? [] Yes By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

(9) LOCATION OF WELL by legal description: County CROOK Latitude Longitude Township 14 N or S Range 17 E or W. WM. Section 26 SE 1/4 NE 1/4 Tax Lot 2600 Lot Block Subdivision Street Address of Well (or nearest address) MILL CR CEMETERY RD

(10) STATIC WATER LEVEL: +1 ft. below land surface. Date 9/6/95 Artesian pressure 8 lb. per square inch. Date 9/6/95

(11) WATER BEARING ZONES: Depth at which water was first found 235'

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 235', 250, 50 gpm, +1

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Rows: BROWN CLAY (0-8'), TAN CLAY (8'-42'), GRAY BASALS (42-210'), BLUE GONIAS (210-335'), GRAY BASALS (335-550')

RECEIVED FEB 15 2023 OWR/D SALEM, OREGON

Date started 9/5/95 Completed 9/6/95 (unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Signed _____ Date _____ WWC Number _____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Bill [Signature] WWC Number 1555 Date 10/30/95

Land Use Information Form



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

NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and/or used only on federal lands; **OR**
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and **all** of the following apply:
 - a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; **and**
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

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FEB 15 2021
OWRD
SALEM, OREGON

Land Use Information Form



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

Applicant(s): POLLY CREEK RANCH, LLC

RECEIVED

Mailing Address: PO BOX 28

FEB 15 2023

City: BEND

State: OR

Zip Code: 97709

Daytime Phone: _____

OWRD
 SALEM, OREGON

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

| Township | Range | Section | ¼ ¼ | Tax Lot # | Plan Designation (e.g., Rural Residential/RR-5) | Water to be: | | | Proposed Land Use: |
|-------------|-------------|---------------|-------|-------------|---|--|--|--|--------------------|
| <u>14 S</u> | <u>17 E</u> | <u>23, 26</u> | _____ | <u>2602</u> | <u>EFU2</u> | <input checked="" type="checkbox"/> Diverted | <input checked="" type="checkbox"/> Conveyed | <input checked="" type="checkbox"/> Used | <u>IRRIGATION</u> |
| <u>14 S</u> | <u>17 E</u> | <u>22, 23</u> | _____ | <u>2500</u> | <u>EFU2</u> | <input checked="" type="checkbox"/> Diverted | <input checked="" type="checkbox"/> Conveyed | <input type="checkbox"/> Used | — |
| <u>14 S</u> | <u>17 E</u> | <u>26</u> | _____ | <u>3000</u> | <u>EFU2</u> | <input type="checkbox"/> Diverted | <input checked="" type="checkbox"/> Conveyed | <input checked="" type="checkbox"/> Used | — |
| <u>14 S</u> | <u>17 E</u> | <u>35</u> | _____ | <u>201</u> | <u>RR5</u> | <input type="checkbox"/> Diverted | <input checked="" type="checkbox"/> Conveyed | <input checked="" type="checkbox"/> Used | — |

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

Crook

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water
 Water Right Transfer
 Permit Amendment or Ground Water Registration Modification
 Limited Water Use License
 Allocation of Conserved Water
 Exchange of Water

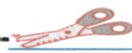
Source of water: Reservoir/Pond
 Ground Water
 Surface Water (name) MILL CREEK

Estimated quantity of water needed: 1.725 cubic feet per second
 gallons per minute
 acre-feet

Intended use of water: Irrigation
 Commercial
 Industrial
 Domestic for _____ household(s)
 Municipal
 Quasi-Municipal
 Instream
 Other _____

Briefly describe:

Permanent Transfer to rearrange the place of use for Irrigation and Supplemental Irrigation purposes for crops & pasture.



Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

For Local Government Use Only

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

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): *Farm use is an outright allowed use in EFD and supported by the Comprehensive plan - 18.16.010*
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

| Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.) | Cite Most Significant, Applicable Plan Policies & Ordinance Section References | Land-Use Approval: | |
|---|--|--|--|
| | | <input type="checkbox"/> Obtained <input type="checkbox"/> Denied | <input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued |
| | | <input type="checkbox"/> Obtained <input type="checkbox"/> Denied | <input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued |
| | | <input type="checkbox"/> Obtained <input type="checkbox"/> Denied | <input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued |
| | | <input type="checkbox"/> Obtained <input type="checkbox"/> Denied | <input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued |
| | | <input type="checkbox"/> Obtained <input type="checkbox"/> Denied | <input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued |

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Name: Katie McDonald Title: Planner
 Signature: Katie McDonald Phone: 541-447-8211 Date: 1-25-2023
 Government Entity: Crook County Community Development

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information



Applicant name: _____
 City or County: _____ Staff contact: _____
 Signature: _____ Phone: _____ Date: _____

RECEIVED

FEB 15 2023

OWRD
SALEM, OR 97141-1774

Application for Water Right Transfer

Evidence of Use Affidavit



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

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

State of Oregon)
) ss
 County of **DESCHUTES**)

I, JOHN A. SHORT, in my capacity as WATER RIGHT SPECIALIST,
 mailing address P.O. BOX 1830, BEND, OR 97709
 telephone number (541) 389-2837, being first duly sworn depose and say:

RECEIVED
 FEB 15 2023
 COURT
 SALEM, OREGON

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

- Personal observation Professional expertise

2. I attest that:

- Water was used during the previous five years on the **entire** place of use for Certificate # **87898 & 90836; OR**
- My knowledge is specific to the use of water at the following locations within the last five years:

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

AND

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

(continues on reverse side)

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

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

[Signature]
Signature of Affiant

January 24, 2023
Date

Signed and sworn to (or affirmed) before me this 24 day of January, 2023.

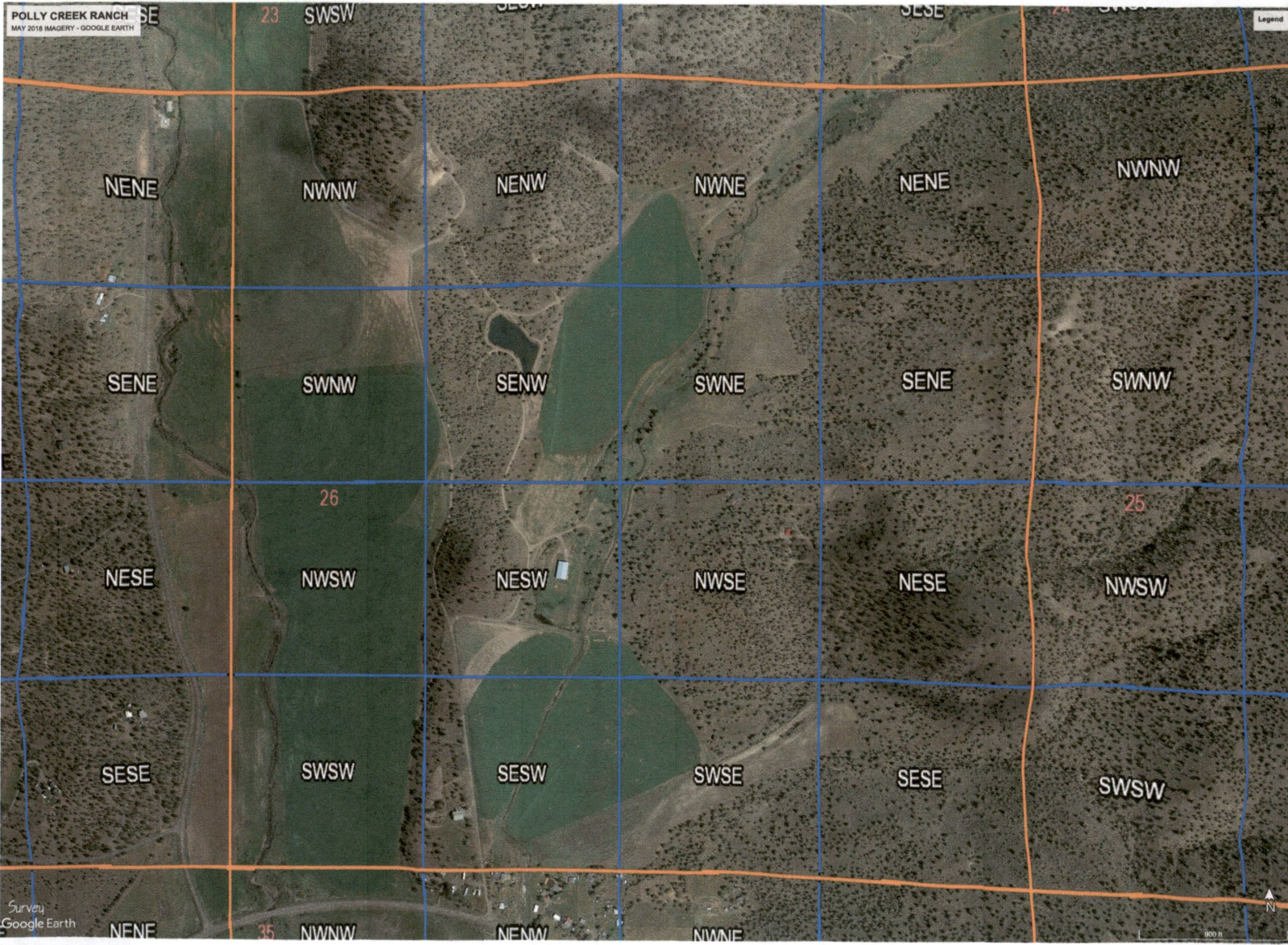


[Signature]
Notary Public for Oregon

My Commission Expires: July 12, 2025

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

RECEIVED
FEB 15 2023
OWRD
SALEM, OREGON



Permanent Transfer Application Checklist

Check the Certificates in WRIS

Transfer # T- 14174

| | | |
|--------------------------------|--|---|
| Checked by <u> Dante </u> | Type of Change(s) Proposed: NO other changes allowed other than those listed | |
| Date <u> 2/17/2023 </u> | <input checked="" type="checkbox"/> POU <input type="checkbox"/> POD <input type="checkbox"/> APOD <input type="checkbox"/> POA <input type="checkbox"/> APOA <input type="checkbox"/> USE | |
| Fee Received: \$2380 | | How many rights to be Transferred? 2 |
| Calculated Fee: \$2380 | | |
| Deficiencies and Observations: | | Certificate #(s) 87898 90836 |

If OK, check box; if not, fill in.

1. Is the applicant information complete? Have all the applicants listed at the top of the page signed at the bottom?
If not, what is missing? Whose signature is missing? _____
2. Has the applicant indicated that the place of use is in or near an irrigation district? Have they included a Form D? N/A.
Name of the District _____
3. Part 5 of application, has the applicant completed the entire page and does the information match the description of the explanation of the reasons on Part 4 of the application?
If not, you may need to contact the applicant or agent? _____
4. For multiple certificates, do each of the certificates listed on Application Page 1 have their own separate completed Part 5 tables 1 & 2? (*compare with OAR 690-380-3220-may need to return*)
If no, which certificates are missing a separate Part 5, tables 1 & 2? _____
5. Has the map been completed and signed by a CWRE? Does the map meet the requirements?
If not, what is missing? _____. Map waiver included?
6. If a change in point of appropriation, have the well logs been included? N/A.
7. If a change in place of use within Umatilla County, have the applicant(s) provided a Supplemental Form U? N/A.
8. Has applicant filled out the Minimum Requirements Checklist (Part 1 of 5)? Is the application complete? If not, what is missing (check Evidence of Use and Land Use)? _____

9. If all boxes on this checklist are checked (with no remaining deficiencies identified), accept the application. Put this check sheet in the transfer folder.

OR:

- This application is deficient, and **CANNOT** be accepted.
It should be returned and the **deficiencies listed in the "staff" section at the bottom of Application Page 1**, unless the applicant or agent can resolve the deficiencies within 2-3 days.

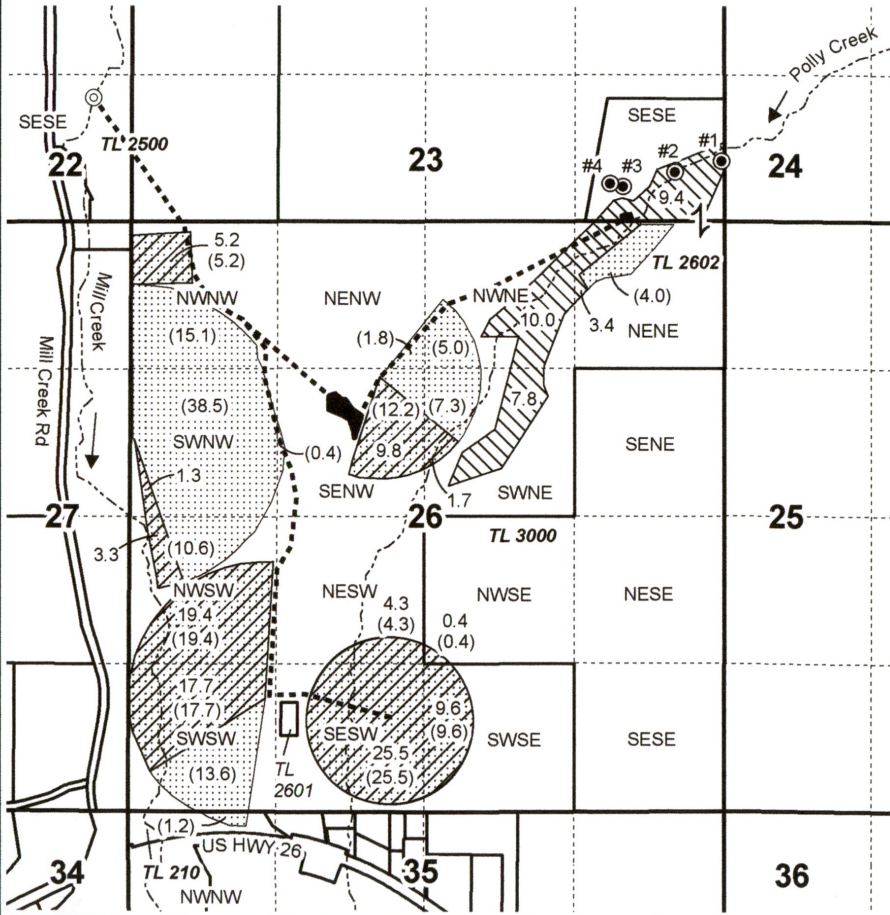
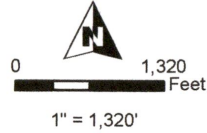
Actions taken:

_____ date _____

Permanent Transfer Application Checklist

| FEE WORKSHEET for PERMANENT TRANSFER (except Substitution) | | | |
|--|--|---|---------|
| 1 | Base Fee (includes one type of change to one water right for up to 1 cfs) | 1 | \$1,360 |
| | Types of change proposed: <input type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = _____ (2a) Subtract 1 from the number in line 2a = _____ (2b) <i>If only one change, this will be 0</i> | | |
| 2 | Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » » | 2 | 0 |
| | Number of water rights included in transfer _____ (3a) Subtract 1 from the number in 3a above: _____ (3b) <i>If only one water right this will be 0</i> | | |
| 3 | Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » » | 3 | 0 |
| | Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input type="checkbox"/> Yes: enter \$410 » | | |
| 4 | | 4 | 0 |
| | Do you propose to change the place of use or character of use? <input type="checkbox"/> No: enter 0 on line 5 » <input type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see example below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$350, then enter on line 5 » » » » » » » » » » | | |
| 5 | | 5 | 0 |
| 6 | Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal: | 6 | 0 |
| | Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » | | |
| 7 | If no box is applicable, enter 0 on line 7» | 7 | 0 |
| 8 | Subtract line 7 from line 6 » Transfer Fee: | 8 | |

**T14S R17E, WM,
CROOK COUNTY, OR**



- Well
- ⊙ POD
- Ditch/Pipeline
- - - - - Creek
- Bulge-in-System
- C-87898 POU IR "ON" 12/31/1868
- C-90836 POU IR "ON" 2/29/1996
- C-90836 POU (IS) "ON" 2/29/1996
- Section
- Quarter Quarter
- Taxlot

FEB 15 2023
 OVID
 SALEM, OREGON

POD & POA Locations:

- POD: 1122' N, 346' W of NW Cor Sec 26
- Well #1 (CROO 50157): 528' N, 26' W of SE Cor Sec 23
- Well #2 (CROO 50162): 431' N, 441' W of SE Cor Sec 23
- Well #3 (CROO 3222): 304' N, 900' W of SE Cor Sec 23
- Well #4 (CROO 50163): 330' N, 1014' W of SE Cor Sec 23



RENEWAL DATE 12/31/2024



**PERMANENT TRANSFER "ON" MAP
Polly Creek Ranch**

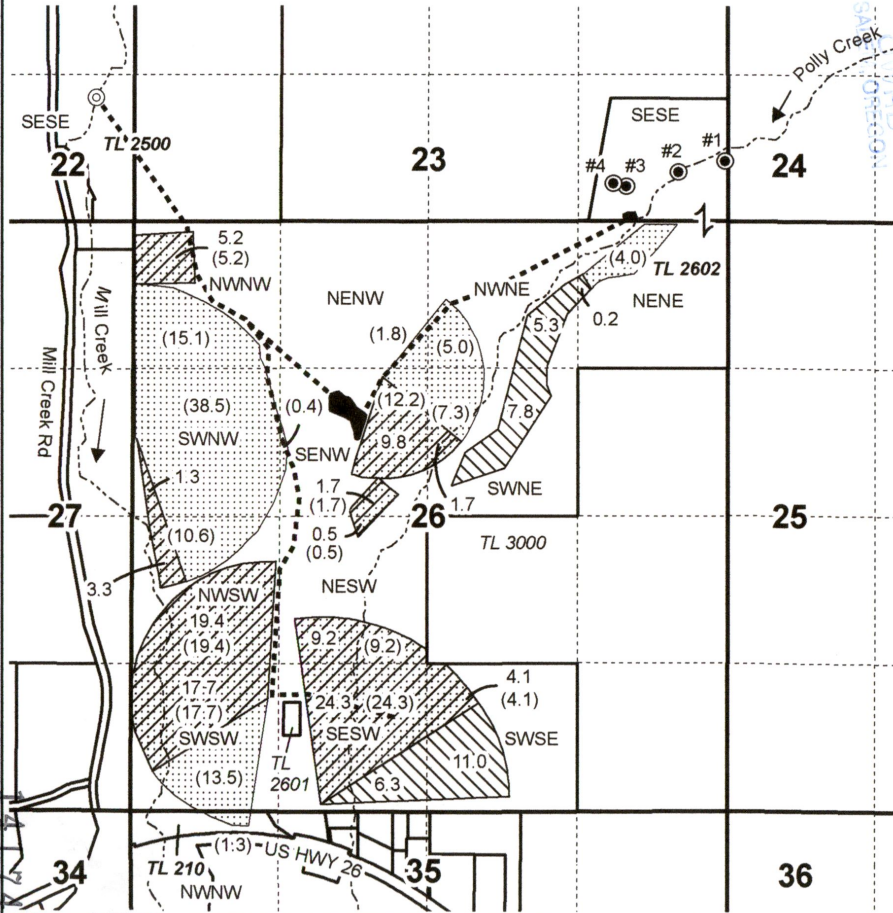
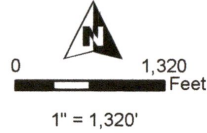
Date: 1/22/2023

C-87898 & C-90836

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

WATER RIGHT SERVICES, LLC
 PO BOX 1830, BEND, OR 97709
 WWW.OREGONWATER.US CCB # 197121
 johnshort@usa.com 541-389-2837

**T14S R17E, WM,
CROOK COUNTY, OR**



- Well
- POD
- Ditch/Pipeline
- Creek
- Bulge-in-System
- C-87898 POU IR "OFF" 12/31/1868
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RENEWAL DATE 12/31/2024



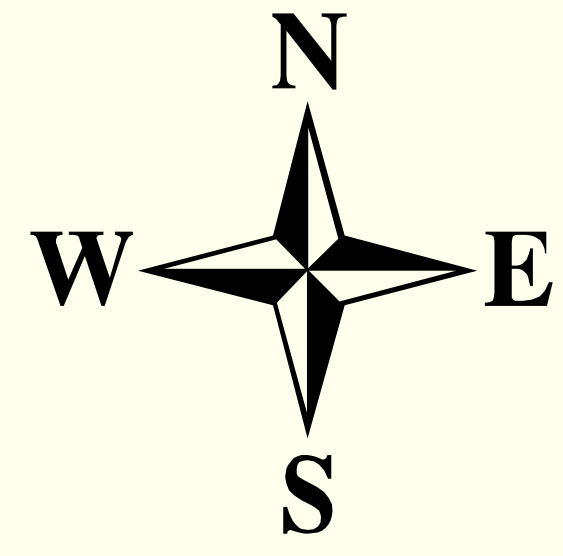
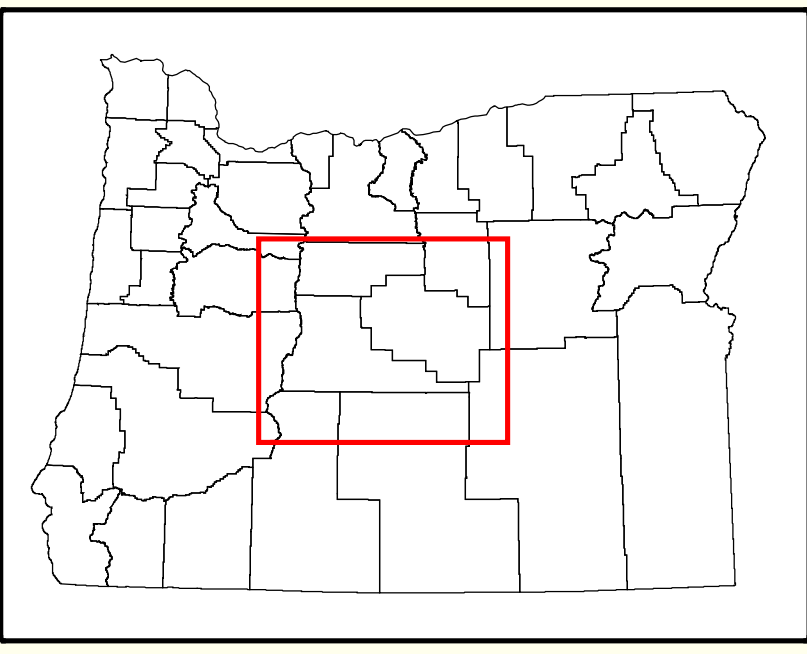
**PERMANENT TRANSFER "OFF" MAP
Polly Creek Ranch**

Date: 1/22/2023

C-87898 & C-90836

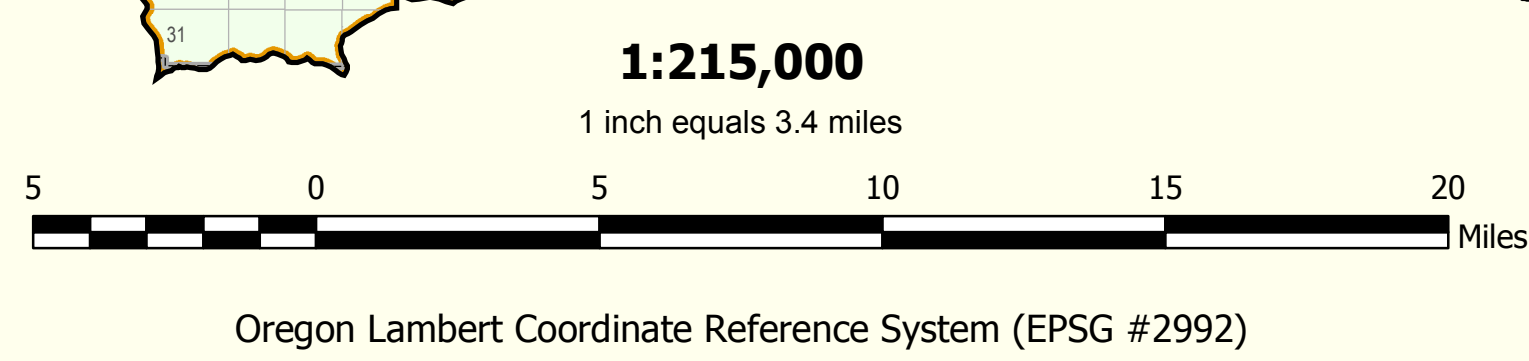
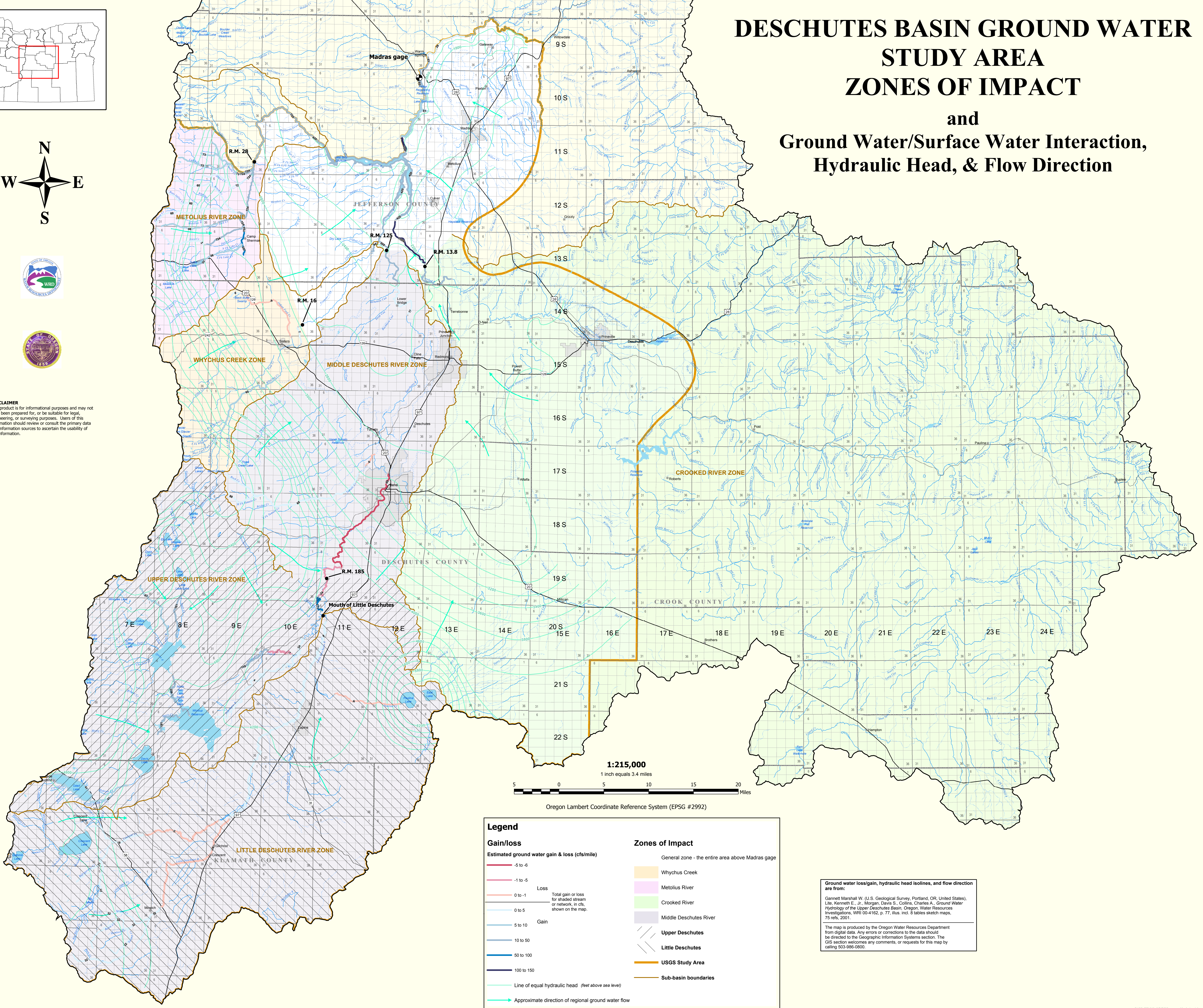
This map is not intended to provide legal dimensions or locations of property ownership lines.

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DISCLAIMER
 This product is for informational purposes and may not have been prepared for, or be suitable for, legal, engineering, or surveying purposes. Users of this information should review or consult the primary data and information sources to ascertain the usability of the information.

DESCHUTES BASIN GROUND WATER STUDY AREA ZONES OF IMPACT and Ground Water/Surface Water Interaction, Hydraulic Head, & Flow Direction



| Legend | |
|---|---|
| Gain/loss | |
| Estimated ground water gain & loss (cfs/mile) | |
| | -5 to -6 |
| | -1 to -5 |
| | 0 to -1 |
| | 0 to 5 |
| | 5 to 10 |
| | 10 to 50 |
| | 50 to 100 |
| | 100 to 150 |
| | Line of equal hydraulic head (feet above sea level) |
| | Approximate direction of regional ground water flow |
| Zones of Impact | |
| | General zone - the entire area above Madras gage |
| | Whychus Creek |
| | Metolius River |
| | Crooked River |
| | Middle Deschutes River |
| | Upper Deschutes |
| | Little Deschutes |
| | USGS Study Area |
| | Sub-basin boundaries |

Ground water loss/gain, hydraulic head isolines, and flow direction are from:
 Gannett Marshall W. (U.S. Geological Survey, Portland, OR, United States), Lite, Kenneth E., Jr., Morgan, Davis S., Collins, Charles A., *Ground Water Hydrology of the Upper Deschutes Basin, Oregon*, Water Resources Investigations, WRI 00-4162, p. 77, illus., incl. 6 tables sketch maps, 75 refs, 2001.

The map is produced by the Oregon Water Resources Department from digital data. Any errors or corrections to the data should be directed to the Geographic Information Systems section. The GIS section welcomes any comments, or requests for this map by calling 503-986-0800.

Appendix B

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-

Review Due Date:

Applicant Name:

Proposed Changes: POU POD POA USE OTHER

Reviewer(s):

Date of Review:

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:

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:

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:

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:

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:

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