

Application for Permanent Water Right Transfer



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

Part 1 of 4 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 4 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 – Completed Applicant Information and Signature.
- Part 4 – Information about Water Rights to be Transferred: **How many water rights are to be transferred?** 2 **List them here:** 36925, 41587

Please include a separate Part 4 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.

- Application Fee** - payable by check to the Oregon Water Resources Department, the online fee calculator is located:
https://apps.wrd.state.or.us/apps/wr/wr_transfer_calculator/permanent_transfer.aspx

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):

___ Application fee not enclosed/insufficient	___ Map not included or incomplete
___ Land Use Form not enclosed or incomplete	___ Evidence of Use Form not enclosed or incomplete
___ Additional signature(s) required	___ Part ___ is incomplete

Other/Explanation _____

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

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Part 2 of 4 – 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°).

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Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME John and/or Dian Frisch		PHONE NO. (541) 786-0078	ADDITIONAL CONTACT NO. (541) 786-2421
ADDRESS 62816 Lower Cove Rd			FAX NO.
CITY Cove	STATE OR	ZIP 97824	E-MAIL Johnfrisch71@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		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.
CITY	STATE	ZIP	E-MAIL
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this transfer application, and why:
 We moved the point of diversion (POD) for certificate #41587 as a community safety measure. The original POD caused the screen to be in a location where people swim regularly. The change for certificate #36925 is to better match the POD with planned infrastructure and system capacities.
 If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check One Box

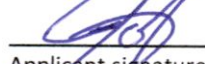
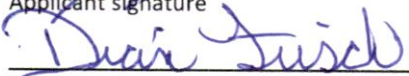
- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **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.

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: East 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.



 Applicant signature	<u>John Frisch</u> Print Name (and Title if applicable)	<u>3-4-26</u> Date
 Applicant signature	<u>Dian Frisch</u> Print Name (and Title if applicable)	<u>3-4-26</u> 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			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				

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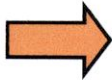
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Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. **(Tip: Complete and attach Supplemental Form D.)**

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



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

ENTITY NAME Union County	ADDRESS 1106 K Avenue	
CITY LaGrande	STATE OR	ZIP 97850

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 4 pages, please **save the application form to your computer**. Unlock the document by using one of the following instructions for your Microsoft Word software version:

Microsoft Word 2003

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;

OR

- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the **Tools** menu => click **Protect Document**;

OR

- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

Microsoft Word 2007

- Unlock the document by clicking the **Review** tab, then click **Protect Document**, then click **Stop Protect**
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

Microsoft Word 2010

- Unlock the document by clicking the **Review** tab; toggle the **Restrict Editing icon** at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the "**Allow only this type of editing** in the document: **Filling in forms**" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the **Editing Restrictions/Allow Only This Type of Editing/Filling In Forms** box from the drop-down menu, then check **Yes, Start Enforcing Protection**. You do not need to assign a password for the editing restrictions.

Other Alternatives:

- Photocopy pages or tables in Part 4, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page ~~5~~ 6 of ~~9~~ 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 4 and paste as many additional sets of Part 4 pages as needed at the end of the application.

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

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CERTIFICATE # 36925

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Description of Water Delivery System

System capacity: 1.48 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. Turbine pump with buried PVC mainline and a combination of wheellines and handlines to place of use

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 -T-	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		2	S	40	E	29	SE	SW		135 ft North and 3355 ft. West from NE cor Sec 32, T2S, R40
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<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 type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input checked="" type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

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

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

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 # 36925

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				
															2	S	9	E	2	SW	NW	500		5.0		POD #6	1901			
2	S	40	E	32	NW	NE	5000		21.9	Irrigation		1962	APOD	2	S	40	E	32	NW	NE	5000		21.9	Irrigation	POD-T-	1962				
2	S	40	E	32	NE	NE	5000		37.4	Irrigation		1962	APOD	2	S	40	E	32	NE	NE	5000		37.4	Irrigation	POD -T-	1962				
TOTAL ACRES:							59.3																TOTAL ACRES:							59.3

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Additional remarks: _____.

For Place of Use or Character of Use Changes

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

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

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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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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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Description of Water Delivery System

System capacity: **2.67** 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. **Turbine pump with buried PVC mainline and a combination of wheellines and handlines to place of use**

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 -K-	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		2	S	40	E	29	SE	SW		60 ft. North and 2220 ft. East from SE cor Sec 30, T2S, R40E
POD -T-	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		2	S	40	E	29	SE	SW		135 ft North and 3355 ft. West from NE cor Sec 32, T2S, R40E
	<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):

- Place of Use (POU)
- Character of Use (USE)
- Point of Diversion (POD)
- Additional Point of Diversion (APOD)
- Surface Water POD to Ground Water POA (SW/GW)
- Supplemental Use to Primary Use (S to P)
- Point of Appropriation/Well (POA)
- Additional Point of Appropriation (APOA)
- Substitution (SUB)
- 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.

For Place of Use or Character of Use Changes

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

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

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

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

Ground water supplemental Permit or Certificate # _____;

Surface water primary Certificate # _____.

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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.

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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

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 Union)
 I, John Frisch, in my capacity as owner/operator
 mailing address 62816 Lower Cove Rd, Cove, OR 97824
 telephone number (541) 786-0078, being first duly sworn depose and say:

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

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2. I attest that:
 Water was used during the previous five years on the **entire** place of use for Certificate # 41587; **OR**

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

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

OR

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

(continues on reverse side)

14838 -

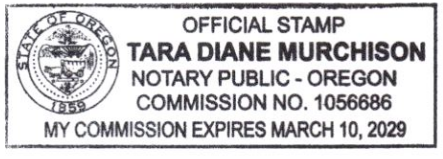
3. The water right was used for: (e.g., crops, pasture, etc.): corn, pumpkins, pature, alfalfa

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

3-5-26
Date

Signed and sworn to (or affirmed) before me this 5 day of March, 2026.



Tara Diane Murchison
Notary Public for Oregon

My Commission Expires: March 10, 2029

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 checked="" 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 checked="" 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 type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

Received
MAR 09 2026
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MAR 23 2026
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roducer Print)

FARM AND TRACT DETAIL LISTING

roducer Name and Address
 N A FRISCH
 6 LOWER COVE RD
 E, OR 97824-8416

DATE: 06/10/2025

PAGE: 2

Crop/Comm	Var/Type	Int Use	Irr Pr	Rpt Unit	Rpt/Det Qty	Rpt/Det Pvt	Rpt/Det Exp	Rpt/Det Vol	Rpt/Det NA	Rpt/Det Failed
SBEET		PR	I	A	39.41					
WHEAT	SW	GR	I	A	38.26					

Tract	CLU/Field	Crop/Commodity	Var/Type	Int Use	Irr. Pr.	Org Stat	Nat. Sod	C/C Stat	Rpt Unit	Rpt Qty	Det Crop Qty Land	Field ID	Plant Count	Planting Date	Planting Period	End Date
529	10	MIXFG	IGS	GZ	I	C	N	I	A	14.64	Yes			05/01/2016	01	
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																
11		GRASS	FRE	SD	I	C	N	I	A	32.77	Yes			04/24/2022	01	2030
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																
12		GRASS	FRE	SD	I	C	N	I	A	16.59	Yes			04/25/2022	01	2030
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																
13		ALFAL		FG	I	C	N	I	A	21.65	Yes			05/08/2020	01	2026
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																
14A		CORN	YEL	GR	I	C	N	I	A	2.80	Yes			05/30/2025	01	
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																
14B		PUMKN	JAC	FH	I	C	N	I	A	2.78	Yes			05/30/2025	01	
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																
14C		COVRC	MIX	CO	I	C	N	C	A	2.78	Yes			04/10/2025	01	
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																
14D		FALOW			I	C	N	I	A	2.78	Yes				01	
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																
15		MIXFG	IGS	FG	I	C	N	I	A	1.85	Yes			10/30/2017	01	
roducer OO - JOHN A FRISCH Share 100.00 FSA Physical Location Union, Oregon NAP Unit 1420 Signature Date																

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 OWRD

to Number/Legal Description: T2S/R40E/S29 Farmland: 115.17 Cropland: 95.86 Reported on Cropland: 95.86 Difference: 0.00 Reported on Non-Cropland: 0.00



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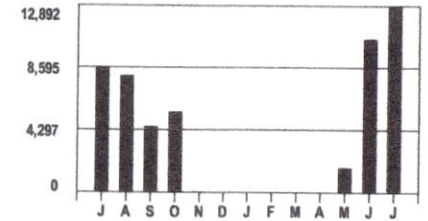
DIAN S FRISCH
62816 LOWER COVE RD
COVE OR 97824-8416

Your kWh Usage History - Last 13 Months

Number of Days
This period
30

Current Month's
Average kWh
Per Day
429.73

Average Cost
Per Day
20.22



Questions on your bill? Contact us at 541-523-3616 or login online via our web portal at www.ebill.otec.coop

Account Number: [REDACTED]						
Meter Number	Reading Dates:	From	To	Billing Days	Multiplier	Statement Date
82816378		06/11/25	07/11/25	30	1	07/15/25
Service Address	Rate Schedule	Previous Reading	Present Reading	Read Type	kWh Usage	AMOUNT DUE
BOOTH LN & GR RONDE RIVER	30-SMIRRIG	57398	70290	Consumer Read	12892	
Previous Account Balance Forward						773.60
Payment Credits 06/23/25 - Thank You!						-773.60
Remaining Balance						0.00
Monthly Delivery Charge						55.00
Irrigation Rate - 12892 kWh X 0.04706						606.70
Billed Demand - 35.88 kW X 6.5						233.22
Actual Demand - 35.88 kW						
BPA Irrigation Discount						-72.22
TOTAL CURRENT CHARGES						822.70
CURRENT ACCOUNT BALANCE						822.70
THANK YOU FOR YOUR PROMPT PAYMENT						
Cycle Billing Cycle 3	Payment Due Date	08/04/25		TOTAL AMOUNT DUE		\$822.70

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MAR 23 2026
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MAR 09 2026
OWRD



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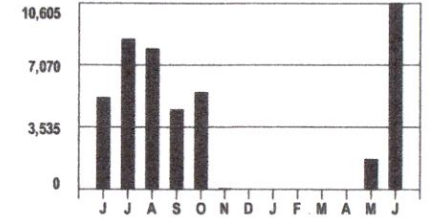
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62816 LOWER COVE RD
COVE OR 97824-8416

Your kWh Usage History - Last 13 Months

Number of Days This period	31
Current Month's Average kWh Per Day	342.10
Average Cost Per Day	16.10



Questions on your bill? Contact us at 541-523-3616 or login online via our web portal at www.ebill.otec.coop

Account Number: ██████████						
Meter Number 82816378	Reading Dates:	From 05/11/25	To 06/11/25	Billing Days 31	Multiplier 1	Statement Date 06/13/25
Service Address BOOTH LN & GR RONDE RIVER	Rate Schedule 30-SMIRRIG	Previous Reading 46793	Present Reading 57398	Read Type Consumer Read	kWh Usage 10605	AMOUNT DUE
Previous Account Balance Forward						370.50
Payment Credits 05/23/25 - Thank You!						-370.50
Remaining Balance						0.00
Monthly Delivery Charge						55.00
Irrigation Rate - 10605 kWh X 0.04706						499.07
Billed Demand - 35.64 kW X 6.5						231.66
Actual Demand - 35.64 kW						
BPA Irrigation Discount						-12.13
TOTAL CURRENT CHARGES						773.60
CURRENT ACCOUNT BALANCE						773.60
THANK YOU FOR YOUR PROMPT PAYMENT						
<div style="text-align: right;"> <p>Received MAR 23 2026 OWRD</p> <p>Received MAR 09 2026 OWRD</p> </div>						
Cycle Billing Cycle 3	Payment Due Date	07/03/25		TOTAL AMOUNT DUE		\$773.60



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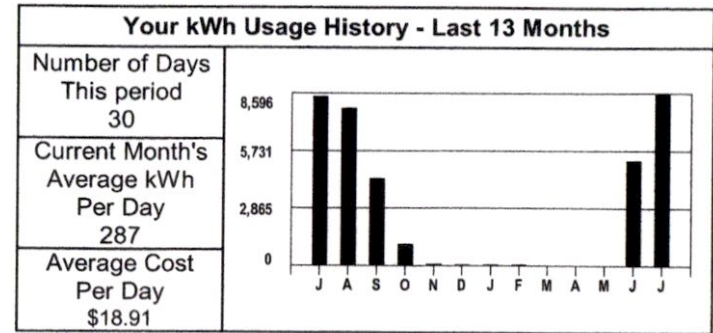
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COVE OR 97824-8416



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Account Number: ██████████						
Meter Number 82816378	Reading Dates:	From 06/11/24	To 07/11/24	Billing Days 30	Multiplier 1	Statement Date 07/15/24
Service Address	Rate Schedule	Previous Reading	Present Reading	Read Type	kWh Usage	AMOUNT DUE
BOOTH LN & GR RONDE RIV CO	IRR DMD	18180	26776	Utility Read	8596	
Previous Account Balance Forward						\$501.35
Payment Credits 07/09/24 - Thank You!						-\$501.35
Remaining Balance						\$0.00
Monthly Delivery Charge						\$47.00
IRRIGATION DEMAND Rate 8596 kWh X 0.047060						\$404.53
Billed Demand 32.850 kW X 4.7500						\$156.04
Actual Demand 32.850 kW						
BPA Irrigation Discount						-\$40.20
TOTAL CURRENT CHARGES						\$567.37
CURRENT ACCOUNT BALANCE						\$567.37
THANK YOU FOR YOUR PROMPT PAYMENT						
Cycle 3	Payment Due Date	08/04/24		TOTAL AMOUNT DUE		\$567.37

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MAR 23 2026
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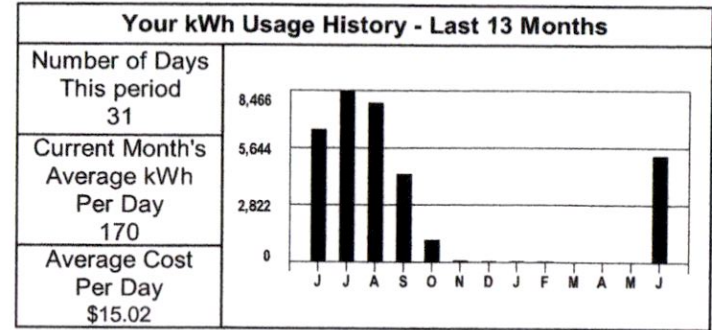
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Questions on your bill?
Contact us at 541-523-3616 or login online via our web portal at www.ebill.otec.coop

Account Number: [REDACTED]		Meter Number	Reading Dates:	From	To	Billing Days	Multiplier	Statement Date
		82816378		05/11/24	06/11/24	31	1	06/13/24
Service Address	Rate Schedule	Previous Reading	Present Reading	Read Type	kWh Usage	AMOUNT DUE		
BOOTH LN & GR RONDE RIV CO	IRR DMD	12905	18180	Utility Read	5275			
Previous Account Balance Forward								\$35.26
Remaining Balance								*\$35.26
Monthly Delivery Charge								\$47.00
IRRIGATION DEMAND Rate						5275 kWh X 0.047060	\$248.24	
Billed Demand						35.870 kW X 4.7500	\$170.38	
Actual Demand						35.870 kW		
Late Charge On Past Due								\$0.52
BPA Irrigation Discount								-\$0.05
TOTAL CURRENT CHARGES								\$466.09
CURRENT ACCOUNT BALANCE								\$501.35
THANK YOU FOR YOUR PROMPT PAYMENT								
<p>*ACCOUNTS WITH PAST DUE CHARGES ARE SUBJECT TO DISCONNECT Please Note - A 1.5% per month late charge will be added to Previous Balance NEED ASSISTANCE? PLEASE CONTACT OTEC FOR PAYMENT OPTIONS 541-523-3616</p>								
Cycle 3	Payment Due Date	07/03/24		TOTAL AMOUNT DUE		\$501.35		

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Application for Water Right Transfer Evidence of Use Affidavit



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

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

State of Oregon)
) ss
 County of Union)

I, John Frisch, in my capacity as owner/lessor, mailing address 62816 Lower Cove Rd, Cove, OR 97824 telephone number (541) 786-0078, being first duly sworn depose and say:

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 MAR 23 2026

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

- Personal observation Professional expertise

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2. I attest that:

- Water was used during the previous five years on the entire place of use for Certificate # 36925; OR

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 MAR 09 2026

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

OWRD

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

OR

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

(continues on reverse side)



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

3-5-26
 Date

Signed and sworn to (or affirmed) before me this 5 day of March, 2026



Tara Diane Murchison
 Notary Public for Oregon

My Commission Expires: March 10, 2029

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 checked="" 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 checked="" 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 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.</p> <p>If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

Received
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 MAR 09 2026
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A - 579 (09-13-16)

Form Number: 3095

REPORT OF COMMODITIES FARM AND TRACT DETAIL LISTING

DATE: 06/10/2025
PAGE: 1

Operator Name and Address

JOHN A FRISCH
16 LOWER COVE RD
SEASIDE, OR 97824-8416

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MAR 09 2026
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Original: KAK
Revision: KAK
Cropland: 309.79
Farmland: 330.63

Tract Number	CLU/Field	Crop/Commodity	Var/Type	Int Use	Irr. Pr.	Org Stat	Nat. Sod	C/C Stat	Rpt Unit	Rpt Qty	Det Qty	Crop Land	Field ID	Plant Count	Planting Date	Planting Period	End Date
708	1A	MIXFG	LSG	GZ	N	C	N	I	A	47.26		Yes			05/16/2025	01	
Producer OO - JOHN A FRISCH						Share 100.00 FSA Physical Location Union, Oregon						NAP Unit 1420		Signature Date			
	1B	HERBS	PEP	PR	I	C	N	I	A	25.00		Yes			04/09/2021	01	2028
Producer OT - DENNIS J MURCHISON						Share 100.00 FSA Physical Location Union, Oregon						NAP Unit 33		Signature Date 01/17/2025			
	2	MIXFG	LSG	GZ	N	C	N	I	A	20.67		Yes			05/16/2025	01	
Producer OO - JOHN A FRISCH						Share 100.00 FSA Physical Location Union, Oregon						NAP Unit 1420		Signature Date			
	3A	HERBS	PEP	PR	I	C	N	I	A	30.00		Yes			04/09/2021	01	2028
Producer OT - DENNIS J MURCHISON						Share 100.00 FSA Physical Location Union, Oregon						NAP Unit 33		Signature Date 01/17/2025			
	3B	MIXFG	LSG	GZ	N	C	N	I	A	21.81		Yes			05/16/2025	01	
Producer OO - JOHN A FRISCH						Share 100.00 FSA Physical Location Union, Oregon						NAP Unit 1420		Signature Date			
	4	MIXFG	LSG	GZ	N	C	N	I	A	32.57		Yes			04/24/2025	01	
Producer OO - JOHN A FRISCH						Share 100.00 FSA Physical Location Union, Oregon						NAP Unit 1420		Signature Date			
	5	MIXFG	LSG	GZ	N	C	N	I	A	93.72		Yes			04/24/2025	01	
Producer OO - JOHN A FRISCH						Share 100.00 FSA Physical Location Union, Oregon						NAP Unit 1420		Signature Date			

708 Summary

Cr/Co	Var/Type	Int Use	Irr Pr	Rpt Unit	Rpt Qty	PP	Cr/Co	Var/Type	Int Use	Irr Pr	Rpt Unit	Rpt Qty	PP	Cr/Co	Var/Type	Int Use	Irr Pr	Rpt Unit	Rpt Qty
HERBS	PEP	PR	I	A	55.00	01	MIXFG	LSG	GZ	N	A	216.03							

Tract Number/Legal Description: T2S/R40E/S32
Cropland: 271.03

Reported on Cropland: 271.03

Difference: 0.00

Reported on Non-Cropland: 0.00

714	1	MIXFG	LSG	GZ	N	C	N	I	A	38.76		Yes			04/09/2025	01	
Producer OO - JOHN A FRISCH						Share 100.00 FSA Physical Location Union, Oregon						NAP Unit 1420		Signature Date			

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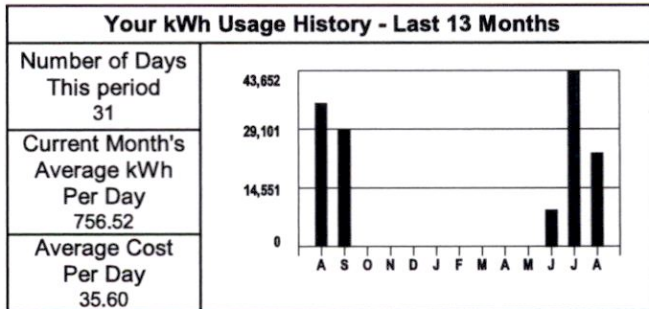
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DENNIS J MURCHISON
C/O MURCHISON FARMS
62737 LOWER COVE RD
COVE OR 97824-8439



Account Number: [REDACTED]						
Meter Number 46494691	Reading Dates:	From 07/11/25	To 08/11/25	Billing Days 31	Multiplier 1	Statement Date 08/13/25
Service Address BOOTH LN 75HP PUMP	Rate Schedule 30-SMIRRIG	Previous Reading 37381	Present Reading 60833	Read Type Consumer Read	kWh Usage 23452	AMOUNT DUE
Previous Account Balance Forward						3,490.68
Payment Credits 08/04/25 - Thank You!						-3,490.68
Remaining Balance						0.00
Monthly Delivery Charge						55.00
Irrigation Rate - 23452 kWh X 0.04706						1,103.65
Billed Demand - 70.01 kW X 6.5						455.07
Actual Demand - 70.01 kW						
BPA Irrigation Discount						-357.95
TOTAL CURRENT CHARGES						1,255.77
CURRENT ACCOUNT BALANCE						1,255.77
THANK YOU FOR YOUR PROMPT PAYMENT						
Cycle Billing Cycle 3	Payment Due Date	09/02/25	TOTAL AMOUNT DUE	\$1,255.77		

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MAR 09 2026
OWRD

Return this portion with payment. Make checks payable to "OTEC"

OR01930F



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OREGON TRAIL ELECTRIC COOPERATIVE
PO BOX 226
BAKER CITY OR 97814-0226

Received
MAR 23 2026
OWRD

Account Name DENNIS J MURCHISON
Account Number [REDACTED]
Due Date 09/02/25

Amount Due: \$1,255.77	Amount Paid:
-------------------------------	---------------------

PAYMENTS RECEIVED AFTER 08/13/25 MAY NOT APPEAR ON THIS BILL

Check here if your address or telephone has changed. (Please provide your updated information).



DENNIS J MURCHISON
C/O MURCHISON FARMS
62737 LOWER COVE RD
COVE OR 97824-8439

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5

OREGON TRAIL ELECTRIC COOPERATIVE
PO BOX 226
BAKER CITY OR 97814-0226



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OREGON TRAIL ELECTRIC COOPERATIVE

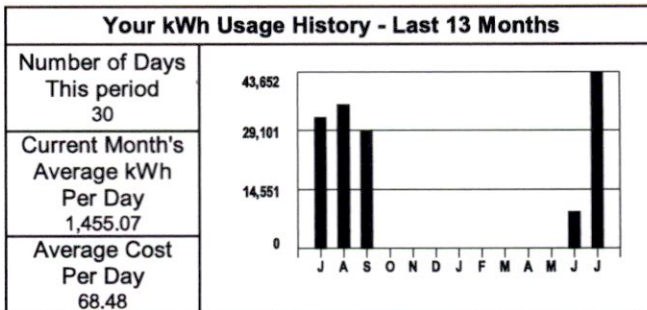
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C/O MURCHISON FARMS
62737 LOWER COVE RD
COVE OR 97824-8439



Questions on your bill? Contact us at 541-523-3616 or login online via our web portal at www.ebill.otec.coop

Account Number: ██████████						
Meter Number 46494691	Reading Dates:	From 06/11/25	To 07/11/25	Billing Days 30	Multiplier 1	Statement Date 07/15/25
Service Address BOOTH LN 75HP PUMP	Rate Schedule 30-SMIRRIG	Previous Reading 93729	Present Reading 37381	Read Type Consumer Read	kWh Usage 43652	AMOUNT DUE
Previous Account Balance Forward						969.80
Remaining Balance						*969.80
Monthly Delivery Charge						55.00
Irrigation Rate - 43652 kWh X 0.04706						2,054.26
Billed Demand - 70.92 kW X 6.5						460.98
Actual Demand - 70.92 kW						
BPA Irrigation Discount						-63.91
Late Fee						14.55
TOTAL CURRENT CHARGES						2,520.88
CURRENT ACCOUNT BALANCE						3,490.68
THANK YOU FOR YOUR PROMPT PAYMENT						
<p><i>Received</i> <i>MAR 09 2026</i> <i>OWRD</i></p>						
<p>*ACCOUNTS WITH PAST DUE CHARGES ARE SUBJECT TO DISCONNECT Please Note - A 1.5% per month late charge will be added to Previous Balance NEED ASSISTANCE? PLEASE CONTACT OTEC FOR PAYMENT OPTIONS 541-523-3616</p>						
Cycle Billing Cycle 3	Payment Due Date	08/04/25	TOTAL AMOUNT DUE	\$3,490.68		

Return this portion with payment. Make checks payable to "OTEC" OR01930F




USE FOR RETURNED MAIL ONLY
OREGON TRAIL ELECTRIC COOPERATIVE
PO BOX 226
BAKER CITY OR 97814-0226

Account Name DENNIS J MURCHISON
Account Number ██████████
Due Date 08/04/25

Amount Due: \$3,490.68	Amount Paid:
-------------------------------	---------------------

Received
MAR 23 2026
OWRD

PAYMENTS RECEIVED AFTER 07/15/25 MAY NOT APPEAR ON THIS BILL
 Check here if your address or telephone has changed. (Please provide your updated information).

 DENNIS J MURCHISON
C/O MURCHISON FARMS
62737 LOWER COVE RD
COVE OR 97824-8439

0
5

OREGON TRAIL ELECTRIC COOPERATIVE
PO BOX 226
BAKER CITY OR 97814-0226




OREGON TRAIL ELECTRIC COOPERATIVE

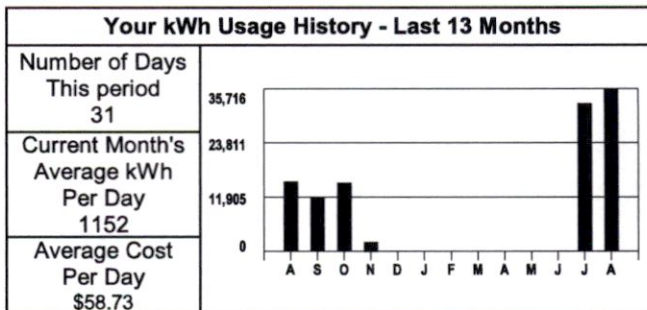
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C/O MURCHISON FARMS
62737 LOWER COVE RD
COVE OR 97824-8439



Questions on your bill?
Contact us at 541-523-3616 or login online via our web portal at www.ebill.otec.coop

Account Number: ██████████						
Meter Number 46494691	Reading Dates:	From 07/11/24	To 08/11/24	Billing Days 31	Multiplier 1	Statement Date 08/14/24
Service Address BOOTH LN CO 75HP PUMP	Rate Schedule IRR DMD	Previous Reading 19176	Present Reading 54892	Read Type Utility Read	kWh Usage 35716	AMOUNT DUE
Previous Account Balance Forward						\$1,947.66
Payment Credits 07/29/24 - Thank You!						-\$1,947.66
Remaining Balance						\$0.00
Monthly Delivery Charge						\$47.00
IRRIGATION DEMAND Rate		35716 kWh X 0.047060				\$1,680.79
Billed Demand		72.480 kW X 4.7500				\$344.28
Actual Demand		72.480 kW				
BPA Irrigation Discount						-\$251.41
TOTAL CURRENT CHARGES						\$1,820.66
CURRENT ACCOUNT BALANCE						\$1,820.66
THANK YOU FOR YOUR PROMPT PAYMENT				Received	Received	
				MAR 23 2026	MAR 09 2026	
				OWRD	OWRD	
Cycle 3	Payment Due Date	09/03/24	TOTAL AMOUNT DUE		\$1,820.66	

Return this portion with payment. Make checks payable to "OTEC"

OR01930F



USE FOR RETURNED MAIL ONLY
Oregon Trail Electric Cooperative
PO Box 226
Baker City OR 97814-0226

Account Name MURCHISON DENNIS J
Account Number ██████████
Due Date 09/03/24

Amount Due: \$1,820.66

Amount Paid:

PAYMENTS RECEIVED AFTER 08/14/24 MAY NOT APPEAR ON THIS BILL

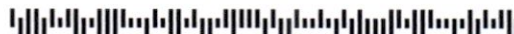
Check here if your address or telephone has changed. (Please provide your updated information).



MURCHISON DENNIS J
C/O MURCHISON FARMS
62737 LOWER COVE RD
COVE OR 97824-8439

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OREGON TRAIL ELECTRIC COOPERATIVE
PO BOX 226
BAKER CITY OR 97814-0226



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OREGON TRAIL ELECTRIC COOPERATIVE

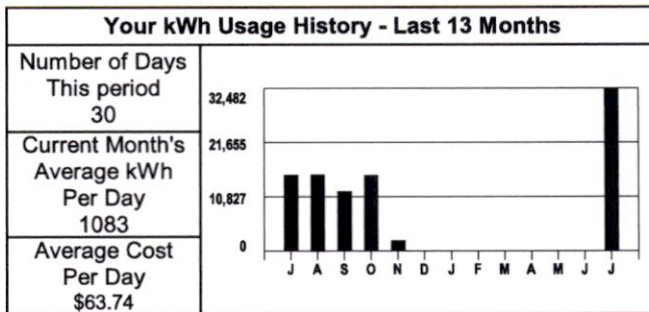
"WE'RE PUTTING OUR ENERGY TO WORK FOR YOU"

www.otec.coop

A Touchstone Energy Cooperative

Office Hours: 8:00 am to 5:00 pm Monday - Thursday
9:00 am to 5:00 pm Friday

MURCHISON DENNIS J
C/O MURCHISON FARMS
62737 LOWER COVE RD
COVE OR 97824-8439



Questions on your bill?
Contact us at 541-523-3616 or login online via our web portal at www.ebill.otec.coop

Account Number: ██████████

Meter Number	Reading Dates:	From	To	Billing Days	Multiplier	Statement Date
46494691		06/11/24	07/11/24	30	1	07/15/24
Service Address	Rate Schedule	Previous Reading	Present Reading	Read Type	kWh Usage	AMOUNT DUE
BOOTH LN CO 75HP PUMP	IRR DMD	86694	19176	Utility Read	32482	
Previous Account Balance Forward						\$35.00
Remaining Balance						*\$35.00
Monthly Delivery Charge						\$47.00
IRRIGATION DEMAND Rate 32482 kWh X 0.047060						\$1,528.60
Billed Demand 70.850 kW X 4.7500						\$336.54
Actual Demand 70.850 kW						
Late Charge On Past Due						\$0.52
TOTAL CURRENT CHARGES						\$1,912.66
CURRENT ACCOUNT BALANCE						\$1,947.66
THANK YOU FOR YOUR PROMPT PAYMENT						
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>Received</p> <p>MAR 23 2026</p> <p>OWRD</p> </div> <div style="text-align: center;"> <p>Received</p> <p>MAR 09 2026</p> <p>OWRD</p> </div> </div>						
*ACCOUNTS WITH PAST DUE CHARGES ARE SUBJECT TO DISCONNECT						
Please Note - A 1.5% per month late charge will be added to Previous Balance						
NEED ASSISTANCE? PLEASE CONTACT OTEC FOR PAYMENT OPTIONS 541-523-3616						
Cycle 3	Payment Due Date	08/04/24	TOTAL AMOUNT DUE	\$1,947.66		

Return this portion with payment. Make checks payable to "OTEC"

OR01930F



USE FOR RETURNED MAIL ONLY
Oregon Trail Electric Cooperative
PO Box 226
Baker City OR 97814-0226

Account Name MURCHISON DENNIS J
Account Number ██████████
Due Date 08/04/24

Amount Due: \$1,947.66	Amount Paid:
------------------------	--------------

PAYMENTS RECEIVED AFTER 07/15/24 MAY NOT APPEAR ON THIS BILL

Check here if your address or telephone has changed. (Please provide your updated information).



MURCHISON DENNIS J 0
C/O MURCHISON FARMS 17
62737 LOWER COVE RD
COVE OR 97824-8439

OREGON TRAIL ELECTRIC COOPERATIVE
PO BOX 226
BAKER CITY OR 97814-0226



01067 00013622012 5 0000000000 000194766 000197634 4

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Land Use Information Form



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

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NOTE TO APPLICANTS

In order for your application to be processed by the Oregon Water Resources Department (OWRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be diverted, conveyed, used, and developed. The planning official may choose to complete the form while you wait or return the "Receipt Acknowledging Request for Land Use Information" to you. Applications received by OWRD without the Land Use Information Form, or the signed receipt, will be returned to you. **IMPORTANT:** Please note that while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for OWRD's acceptance of all other applications. Please be aware that your application cannot be approved without land use approval.

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This form is **NOT** required if:

- 1) Water is to be diverted, conveyed, and used on federal lands only; **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 a new water right or modifying an existing water right. The Oregon Water Resources Department (OWRD) requires applicants to obtain land use information to ensure the water right does not result in land uses that are incompatible with your comprehensive plan. Please complete the form and return it to the applicant for inclusion in their application. **NOTE:** For new water right applications only, if you are unable to complete this form while the applicant waits, you may complete the "Receipt Acknowledging Request for Land Use Information" and return it to the applicant.

You will receive notice via OWRD's weekly Public Notice once the applicant formally submits their request to OWRD. The notice will give more information about OWRD's water right process and provide additional comment opportunities. If you previously only completed the receipt for an application for a new permit to use or store water, you will have 30 days from the Public Notice date to complete the Land Use Information Form and return it to OWRD. Your attention to this request for information is greatly appreciated. If you have questions concerning this form, please contact OWRD's Customer Service Group at 503-986-0900 or WRD_DL_customerservice@water.oregon.gov.

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Land Use Information Form



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

NAME John and/or Dian Frisch			PHONE (541)786-0078	
MAILING ADDRESS 62816 Lower Cove Rd				
CITY Cove	STATE OR	ZIP 97824	EMAIL Johnfrisch71@gmail.com	

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:
2S	40E	29	SESW	04601		<input checked="" type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	agriculture
2S	40E	29	SESW	04601		<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	agriculture
2S	40E	32	NWNE	05000		<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	agriculture
2S	40E	32	NENE	05000		<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	agriculture

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

Union

NOTE: A separate Land Use Information Form must be completed and submitted for each county and city, as applicable.

B. Description of Proposed Use

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

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

Source of water: Reservoir/Pond Ground Water Surface Water (name) Old Grande Ronde River Channel

Estimated quantity of water needed: 5.00 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:

This is change in point of diversion only.
--

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

See Page 4 →

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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 use(s), including proposed construction, are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): EFU UC-AI

Land uses to be served by the proposed water use(s), 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

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

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none

Name: Inga Williams Title: Planning Director
 Signature: [Signature] Date: 2/25/26
 Governmental Entity: Union County Phone: 541 963 1014

Receipt Acknowledging Request for Land Use Information

Note to Local Government Representative:
 Please complete this form and return it to the applicant. **For new water right applications only**, if you are unable to complete this form while the applicant waits, you may complete this receipt and return it to the applicant. If you sign the receipt, you will have 30 days from the date of OWRD's Public Notice of the application to submit the completed Land Use Information Form to Oregon Water Resources Department. Please note while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for all other applications.

Applicant Name: _____

Staff Name: _____ Title: _____

Staff Signature: _____ Date: _____

Governmental Entity: _____ Phone: _____

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Oregon Water Resources Department
Transfer Fee Calculation for Permanent (Non-District) Transfer

- Home Main
- Help
- Return
- Contact Us

Today's Date: Thursday, March 12, 2026

Fee Calculation

Base Fee (includes one type of change to one water right for up to 1 cfs)

\$2,040.00

Fill in information below-- Check each box that applies.

Types of Change Proposed:

- Place of Use
- Point of Diversion (POD)/Appropriation (POA); and/or Additional POD/POA; and/or SW POD to GW POD
- Character of Use

\$0.00

Enter total number of water rights included in transfer.

\$915.00

Check this box if you propose to add or change a well, or change from a surface water POD to a well.

Enter total number of groundwater wells (POAs) included in transfer.

\$0.00

Check this box if you propose to change the place of use or character of use for a NON-irrigation right.

Check this box if you propose to change the place of use or character of use for an irrigation right.

Total Transfer CFS(rounded up to the next whole cfs):

Subtotal:

\$2,955.00

Check each box that applies.

- The transfer is necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932.
- The transfer is endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat.

Discount:

Transfer Fee:

\$2,955.00

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