State of Oregon
Water Resources Department
158 12<sup>th</sup> Street NE, Salem, OR 97310
(503)378-8455 • (800)624-3199
www.wrd.state.or.us

From: Swalley Irrigation District
PO Box 5126
Bend OR 97708
(541)388-0658
www.swalley.com • swalley@swalley.com

Application for Water Right

# **Transfer**

## RECEIVED

APR 2 3 2001

**APPLICATION FOR:** 

WATER RESOURCES DEPT. SALEM, OREGON

Please check one								
Water Right Transfer ☐ Temporary Transfer ☐ Permit Amendment ☐ Historic Point of Diversion ☐ Government Action Point of Diversion								
1. APPLICANT INFORMATION								
			of Oregon .					
	irst lb 61150 SE 27th	Last						
Bend OR 977	702							
Ci		State	Zip					
Phone		1-322-7110						
Н	ome	Work	Other					
Fax.		1ail address: <u>.</u>	·					
2. TYPE OF CHANGE								
■ Use ■ Place	of Use □ Point of I	Diversion	☐ Point of Appropriation					
Reason for Change . I	rrigation no longer desired	. Change to in	dustrial use for more .					
. beneficial use of	of the water.		·					
Is the land within an irri	gation or other water distr	ict? ■ Yes	□ No					
If Yes, Include district name: Swalley Irrigation District								
For Department Use								
App. No	Permit No.		Date					

# 3. CURRENT WATER RIGHT INFORMATION

■ Not applicable Priority Date: <u>September</u> Source of Water <u>Deschute</u> Are there other sources liste Location of Authorized Pe	s River ed on the wate	Au Co	ounty <u> </u>	Deschutes		cres .	
Priority Date: <u>September</u> Source of Water <u>Deschute</u> Are there other sources liste  Location of Authorized Po	s River ed on the wate	Co	ounty <u> </u>	Deschutes	ion of 1.17 ac	cres .	
Are there other sources liste	ed on the wate	er right				<u>·</u>	
	es	sion or		S $\blacksquare$	No		
	es	OLULI OL	Point of		on:		
(from recognized sur	vey corner)	Coordinates (from recognized survey corner)				p Range	
N. 985' & W 617' from East	st ¼ corner		SE NE	29	17 S	12E	
Location of Authorized Pl	ace of Use:						
Township Range	Section	Government Lot or DIC		1/4 1/4 Section	Tax Lot Number	Acres (if appropriate)	
17 S 12 E	22			SW SW		1.00	
17 S 12 E	28			NE NW		0.17	
Are there other lands descri Are there other water rights If yes, include a cop	or permits as	ssociate	ed with th		No s ■No		
Description of general deliv	very system (a	litch me	asuremen	ts, pump size, r	number of spr	inkler, etc.)	
Does not apply. After conde	emnation of la	and, wa	ater rights	were placed	in an in-strea	am lease	

#### 4. PROPOSED CHANGES TO THE WATER RIGHT

Change in Proposed use		Industrial r	ights				<u>.</u>	
	Point of Diversion or Point of Appropriate Change   Old point of diversion or point of appropriation will not be used for this portion of the water right.			Additional Both old and new points of diversion or points of appro- priation will be used for this portion of the water right.				
				oint of A  1/4 1/4  Section	Section	Township Range		
Change in Location of 1 To: S Township	Proposed Pl		Gove	canal divernment	version poin  1/4 1/4  Section	t.  Tax Lot  Number	Acres (if appropriate)	
17 S	12 E	29			SE NE		1.17	
Remarks:								
Remarks:								

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#### **5. LAND OWNERSHIP**

Answer only if for change in **Use** or **Place of Use.** 

Answer only if applicant is **not** the landowner.

Answer only if the receiving landowner is **not** the original landowner or the applicant.

Use/Place of Use							
Note: Off lands is now part of a County Road.							
Are the lands free of encumbrances? ■Yes □ No							
If no, name of encumbrance holder:							
If no, application must include written permission for the							
transfer from the encumbrance holder.							
Landowners							
This section does not apply to water delivery entities authorized to							
act on behalf of their member, making permit amendment requests,							
or requests for changes in point of diversion or point of							
appropriation only.							
Landowners:							
(List all landowners shown on deed)							
Address(es):							
City State Zip Application must include notarized statements from all							
landowners shown on deed giving permission for the transfer.							
Use an extra sheet if necessary.							
Ose all extra slicet if fiecessary.							
Receiving Landowner							
Treestring Eurovines							
Name:							
Address:							
City State Zip							
The Department of the should be should be should be							
The Department's records should be changed to show this							
landowner is responsible for completion of the changes.							
All notices and correspondence should be sent to this							
landowner.							
Applicant will remain responsible for sometimes C							
Applicant will remain responsible for completion of							
changes. Notices and correspondence should continue to							
be sent to applicant.							

### 6. EXHIBITS

Application may be rejected if all appropriate exhibits are not enclosed.

Land ■ □	Use Information Form: Enclosed Not needed: (must meet the following four requirements)  1. In EFU zone or irrigation districts 2. Change in place of use only. 3. No structural changes needed, including diversion works, delive facilities, other structures.  4. Irrigation only.	ing I		bject to forfeiture: Best evidence is an affidavit from a knowledgeable person describing the water use. Statements saying water was delivered or assessments/fees were paid are insufficient. Evidence must show actual use of the water for the authorized purpose, in the authorized place of use.		
	List all affected governments (city, county, state, tribal, federal):	Water □		r Well Reports:  If application is for a change in point of appropriation or change from surface water to ground water, attach copies of all water well reports. If reports are not		
Map: ■	Water Right Transfer: Must be prep by a Certified Water Right Examine			available, describe construction details including well depth, static water level, and information necessary to establish the ground water body developed or		
All others: Need not be prepared by a Certified Water Right Examiner.		a Fees:		proposed to be developed.  Amount enclosed \$ 300.00		
Deed:	Must accompany all applications, expermit amendment requests.	cept		See instruction book for fee schedule.		
		7. SIGN	ATUI	<u>RE</u>		
accura	swear that I (we) have read the aboute.  The signature county ROAD DEPT., DIRECT	Tom L	on and			
appl	icant signature	name (print)		date		
	Before you submit your application  Answered each question of Attached a legible map when the quarter/quarter and tax lot Included the necessary explanation of the appropriate amounts.	completely. hich includes number. hibits. to the Oregon	town	ship, range, section		

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