



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

Application for Water Right Transfer

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

1. TYPE OF TRANSFER APPLICATION

Please check one	
<input checked="" type="checkbox"/> Permanent Transfer	<input type="checkbox"/> Instream Transfer
<input type="checkbox"/> Temporary Transfer (1 to 5 yrs.)	<input type="checkbox"/> Permanent
• total number of years: _____	<input type="checkbox"/> Time-Limited
(begin year: _____)	<input type="checkbox"/> Drought Transfer
(end year: _____)	<input type="checkbox"/> Other

2. APPLICANT INFORMATION

RECEIVED

Name: City of Sisters -- Eileen Stein, City Manager JAN 02 2009
First Last

Address: PO Box 39 WATER RESOURCES DEPT
SALEM, OREGON
Sisters OR 97759
City State Zip

Phone: (541) 549-6022
Home Work Other

Fax: (541) 549-0561 E-Mail address: estein@ci.sister.or.us

3. AGENT INFORMATION

(The agent listed is authorized to represent the applicant in all matters relating to this transfer application.)

Name: GSI Water Solutions, Inc. Attn.: Adam Sussman
First Last

Address: 1600 Western Boulevard, Suite 240
Corvallis OR 97333
City State Zip

Phone: (541) 753-0745
Home Work Other

Fax: (541) 754-4211 E-Mail address: asussman@gsiwatersolutions.com

- If an agent is listed above, please check **one** of the following:
 - Please send all correspondence to Agent. Send *copies* of correspondence to Applicant; **or**
 - Please send all correspondence to Applicant. Send *copies* of correspondence to Agent.

T 10766

4. PROPOSED CHANGE(S) TO WATER RIGHT(S)

- List **all** water rights to be affected by this transfer. Indicate the certificate, permit, decree or other identifying number(s) in the table below: *(Attach additional pages as necessary.)*

	Application / Decree	Permit / Previous Transfer	Certificate
1.	G-12591	G-11418	85243
2.			
3.			RECEIVED
4.			JAN 02 2009
5.			WATER RESOURCES DEPT
6.			SALEM, OREGON

- Attach a **separate Supplemental Form A** (Description of Proposed Change(s) to a Water Right) for **each** water right listed above.
- Check **all** proposed change(s) included in this transfer application:
 - Place of Use Point of Diversion (POD) Additional Point of Diversion
 - Character of Use Point of Appropriation (POA, or well) Additional POA
 - Instream Transfer Surface Water POD to Ground Water POA
 - Substitution of Supplemental Groundwater right for Primary Surface water right
 - Historic POD change Other
- Reason(s) for change(s): The proposed changes will allow the City to maximize operational flexibility, source and system capacity and redundancy, and reflect the current service area.

5. WATER DELIVERY SYSTEM

- Describe the **current** water delivery system **or** the system that **was in place** at some time **within the last 5 years**. Include information on the pumps, canals, pipelines and sprinklers used to divert, convey and apply the water at the authorized place of use. If the transfer involves multiple rights that have independent systems, describe each system separately.

The description must be sufficient to demonstrate that the full quantity of water to be transferred can be conveyed from the authorized source and applied at the authorized location and that the applicant is ready, willing, and able to exercise the right.

Currently, this water right is appropriated from one City well (Well #2). Water is pumped from Well #2 directly into the City's water distribution system and is either delivered directly to customers or is directed to fill the City's above ground concrete reservoir, which is located approximately 2 miles south of Well #2.

- System capacity: 1.78 cubic feet per second (cfs). If the transfer involves multiple rights that have independent systems, describe the capacity for each system separately.

The City of Sisters' water system is interconnected.

T 10766

6. EVIDENCE OF BENEFICIAL WATER USE

- Attach one or more **Evidence of Use Affidavits** (Supplemental Form B) demonstrating that each of the right(s) involved in the transfer have been exercised in the last five years in accordance with the terms and conditions of the right or that a presumption of forfeiture for non-use could be rebutted. The Evidence of Use Affidavit(s) **must include supporting documentation** such as the following:
 - ▶ Copies of receipts from sales of irrigated crops or for expenditures relating to use of water;
 - ▶ Records such as Farm Service Agency crop reports, irrigation district records, an NRCS farm management plan, or records of other water suppliers;
 - ▶ Dated aerial photographs of the lands or other photographs containing sufficient detail to establish location and date of the photograph; *or*
 - ▶ If the right has **not** been used during the past five years, documentation that the presumption of forfeiture would be rebutted under ORS 540.610(2).

7. AFFECTED DISTRICTS

- Are any of the water rights proposed for transfer located within or served by an irrigation or other water district? Yes No
- Will any of the water rights be located within or served by an irrigation or other water district after the proposed transfer? Yes No
- Is 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? Yes No

If "Yes", for any of the above, list the name and mailing address of the district, agency and/or entity:

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

8. LOCAL GOVERNMENTS

- List the name and mailing address of all local governments (i.e., each county, city, municipal corporation, or tribal government within whose jurisdiction water will be diverted, conveyed or used).

City of Sisters Planning Dept.—PO Box 39 Sisters, OR 97759

Deschutes County, 117 NW Lafayette Ave., Bend, OR 97701

T 10766

9. LAND OWNERSHIP

- Does the applicant own the lands **FROM** which the right is being transferred? Yes No

*If "No", provide the following information. For Temporary Transfers, also include a **notarized statement granting consent** to the transfer from **each** of the landowners (for Permanent Transfers see Section 12(c)):*

Names of Current Landowner(s): N/A – the applicant is a municipality
First Last

Address: _____

City State Zip

- Does the applicant own the lands **TO** which the right is being transferred?
 Yes No N/A - NOT APPLICABLE TO INSTREAM TRANSFERS

If "No", provide the following information:

Names of Receiving Landowner(s): N/A – the applicant is a municipality
First Last

Address: _____

City State Zip

- Check **one** of the following:
 - The receiving landowner will be responsible for completion of the proposed changes after the final order is issued. All notices and correspondence should be sent to this landowner.
 - The applicant will remain responsible for completion of changes. Notices and correspondence should continue to be sent to the applicant and applicant's agent.
 - N/A. (Not applicable. Application is for an Instream Water Right Transfer.)

10. Other Remarks (optional)

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

T 10766

11. ATTACHMENTS

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

<p>Supplemental Form A – Description of Proposed Change(s) to a Water Right</p> <p><input checked="" type="checkbox"/> A <u>separate</u> Supplemental Form A is enclosed for <u>each</u> water right to be affected by this transfer.</p> <p>Supplemental Form B – Evidence of Use Affidavit(s)</p> <p><input checked="" type="checkbox"/> At least one Evidence of Use Affidavit documenting that the right has been used during the last five years or that the right is not subject to forfeiture under ORS 540.610 is attached. The affidavit provided must be the original (not a copy), <u>and</u></p> <p><input type="checkbox"/> The Evidence of Use Affidavit must be accompanied by supporting documentation.</p> <p>Map</p> <p><input checked="" type="checkbox"/> <i>Water Right Transfer</i> The map must be prepared by a Certified Water Right Examiner and meet the requirements of OAR 690-380-3100 unless a waiver has been granted. The map provided must be the original, not a copy.</p> <p><input type="checkbox"/> <i>Temporary Transfer or Historical POD Change</i> A map meeting the requirements of OAR 690-380-3100 must be included but need <u>not</u> be prepared by a Certified Water Right Examiner.</p> <p>Water Well Report(s)/Well Log(s):</p> <p><input checked="" type="checkbox"/> The application is for a change in point of appropriation or change from surface water to ground water and copies of all water well reports are attached.</p> <p><input type="checkbox"/> Water well reports are not available and a description of construction details including well depth, static water level, and information necessary to establish the ground water body developed or proposed to be developed is attached.</p> <p><input type="checkbox"/> N/A. The application does <u>not</u> involve a change in point of appropriation or a change from surface water to ground water, so water well reports are <u>not</u> required.)</p>	<p>Land Use Information For Proposed Changes:</p> <p><i>For Instream Transfers:</i></p> <p><input type="checkbox"/> Notice of the intent to file an instream transfer application has been provided to each affected local government along the proposed reach, and copies of the notices are enclosed. (<i>For instream transfers a Land Use Information Form is not required.</i>)</p> <p><i>For All Other Transfers:</i></p> <p><input checked="" type="checkbox"/> Land Use Information Form is enclosed; <i>or</i></p> <p><input type="checkbox"/> <u>All</u> of the following criteria are met, therefore a Land Use Information Form is not required:</p> <ul style="list-style-type: none"> ① In EFU zone or irrigation district, ② Change in place of use only, ③ No structural changes needed, including diversion works, delivery facilities, other structures, <i>and</i> ④ Irrigation only. <p>Fees:</p> <p><input checked="" type="checkbox"/> Amount enclosed: <u>\$1,525 (1,400 application fee & \$125 for Reimbursement Authority estimate</u> See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0900.</p> <p><u>Instream Water Right Transfers, also include:</u></p> <p>Supplemental Form C – Instream Water Right Transfer</p> <p><input type="checkbox"/> Complete this form to describe the desired nature and attributes for the proposed instream water right.</p> <p><u>Temporary Transfers, also include:</u></p> <p>Recorded Deed:</p> <p><input type="checkbox"/> The applicant must submit a copy of the current deed of record for the land from which the authorized place of use or point of diversion/appropriation is being moved.</p> <p>Affidavit of Consent:</p> <p><input type="checkbox"/> If the applicant is NOT the owner of record for the land from which the authorized place of use or point of diversion/appropriation is being moved, a notarized statement from the actual owner of record consenting to the proposed transfer must be submitted.</p>
--	---

T 10766

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

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

- Answered each question completely.
- Included all the required attachments.
- Provided original signatures for **all** named deed holders, or other parties, with an interest in the water right.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount.

12. SIGNATURES

▪ Check one of the following, as appropriate, and sign the application in the signature box below:

In accordance with OAR 690-380-3000(13)(a), I (we) understand that prior to Department approval of a permanent transfer and upon my receipt of a draft Preliminary Determination for the proposed transfer, I (we) will be required [pursuant to OAR 690-380-4010(5)] to provide the following landownership information and evidence demonstrating that I (we) are authorized to pursue the transfer:

- (a) A report of ownership and lien information that has been prepared by a title company *within the last three months*;
- (b) A copy of written notification of the proposed transfer provided by the applicant to **all** lien holders on the subject lands unless the report of ownership and lien information shows that a water right conveyance agreement has been recorded for the subject lands. *If a water right conveyance agreement has been recorded for the subject lands, a copy of the agreement and identification of the owner of the lands at the time the agreement was recorded must be submitted; and*
- (c) If the landowner identified in the report of ownership and lien information is **not** the applicant, a notarized statement consenting to the transfer (*attached*) signed by the landowner identified in the report or an authorized representative of the entity to whom the interest in the water right has been conveyed as identified in a water right conveyance agreement or other documentation demonstrating that the applicant is authorized to pursue the transfer in the absence of the consent of the landowner.

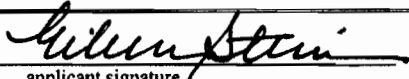
I (we) affirm that interest in the water right has been conveyed to someone other than the landowner, and documents, including a water right conveyance agreement, report of ownership and lien information, and any required lienholder notification are enclosed, demonstrating that I am (we are) authorized to pursue the transfer. I (we) understand that we may be required to provide additional information upon receipt of the draft Preliminary Determination.

I (we) affirm that 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. Therefore, pursuant to OAR 690-380-3000(13)(b), the applicant is **NOT** required to provide the above described report of ownership and lien information.

I (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the water right proposed for transfer is appurtenant by condemnation. Documentation is provided with this application supporting this statement. Therefore, pursuant to OAR 690-380-3000(13)(c), the applicant is **NOT** required to provide the above described report of ownership and lien information. (NOTE: Such an entity may only apply for a transfer under this subsection if it has filed a condemnation action to acquire the property.

I (we) affirm that this is a temporary transfer and a copy of the deed for the "from" land (and affidavits of consent from any other landowners, if applicable) is enclosed.

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

	Eileen Stein, City Manager	12-19-08
applicant signature	name and title if applicable (print)	date
_____	_____	_____
applicant signature	name and title if applicable (print)	date

T 10766

Attachment A
Supplemental Form A

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

T 10766

Water Right Transfer Supplemental Form A

DESCRIPTION OF PROPOSED CHANGE(S) TO A WATER RIGHT

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

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

▪ Certificate Number or other identifying number: 85243

1. TYPE OF CHANGE(S) PROPOSED

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input checked="" type="checkbox"/> Change (The old point of diversion or appropriation will <u>not</u> be used for the portion of the water right affected by the transfer.) <input type="checkbox"/> Additional (Both the old <u>and</u> new points of diversion or appropriation will be used for the portion of the water right affected by the transfer.) <input type="checkbox"/> Historic Point of Diversion or Appropriation Change (Unauthorized point of diversion or appropriation used for more than 10 years.) <input type="checkbox"/> Surface Water to Ground Water (A new point of appropriation will be used instead of the old point of diversion. The old point of diversion will <u>not</u> be used.) <input type="checkbox"/> Point of Diversion Change due to Government Action (The old point of diversion or appropriation can no longer be used due to government action.) <input type="checkbox"/> Exchange (Water from another source will be used in exchange for supplying an equal amount of replacement water to that source.)	<input type="checkbox"/> All of the right will be exercised at a different location than currently authorized (Use of water at the current location will be discontinued.) <input checked="" type="checkbox"/> Only a portion of the right will be exercised at a different location than currently authorized (Use of water at the current location will be discontinued.)	<p style="text-align: center;">Proposed new use:</p> <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal <input type="checkbox"/> Quasi-municipal <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Instream (complete and attach <i>Supplemental Form C</i>) <input type="checkbox"/> Domestic (indicate number of households) _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Substitution (A supplemental ground water right will be substituted for a primary surface water right.) <input type="checkbox"/> Supplemental Use to Primary Use (Primary water right shall be cancelled and the supplemental water right will change to primary use.)

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

T 10766

2. CURRENT WATER RIGHT INFORMATION

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

<input checked="" type="checkbox"/> Certified Right	<u>85243</u>	<u>G-11418</u>
	Certificate Number	Permit Number or Decree Name
<input type="checkbox"/> Adjudicated, Non-certificated Right	_____	_____
	Name of Decree	Page Number
<input type="checkbox"/> Permit for which Proof has been Approved	_____	_____
	Permit Number	Date Claim of Beneficial Use Submitted
<input type="checkbox"/> Transferred Right for which Proof has been Filed	_____	_____
	Previous Transfer Number	Date Claim of Beneficial Use Submitted

- Name on Permit, Certificate, or Decree: City of Sisters
- County: Deschutes
- Authorized Use(s) to be Affected by Transfer: Municipal
- Priority Date(s): June 25, 1991

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

- Source(s) of Water to be Affected by Transfer: groundwater

Tributary to: N/A

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

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

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?
 - Yes No N/A – **This is a municipal water right**

If “**Yes**”, what are the Permit, Registration or Certificate Numbers? _ _____

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

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

T 10766

▪ Certificate Number or other identifying number: 85243

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

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

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

(i.e., the allowed point(s) of diversion or appropriation listed on the water right that will be affected by the proposed transfer, the "FROM" point(s) of diversion or appropriation)

If Ground Water, OWRD Well Log ID No. (or Well ID Tag No. L-)	Source and Priority Date	Township	Range	Mer	Sec	¼ ¼	Survey Coordinates (coordinates from a recognized survey corner)
DESC 1034 <i>well 2</i>	Groundwater 6/25/1991	15 S	10 E	WM	05	SW SW	1,280 feet North and 1,175 feet East from the SW corner of Section 5

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

Yes No (Surface water source only.)

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

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

or

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

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

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

OWRD Well No. as identified in table above	Diameter	Type and size of casing	No. of feet of casing	Intervals casing is perforated (in feet)	Seal depth	Est. depth to water	Est. depth to water bearing stratum	Type of access port or measuring device	Total well depth
See Attachment D for Well Logs									
T 10766									

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

OWRD Well No. as identified in table above	Diameter	Type and size of casing	No. of feet of casing	Intervals casing is perforated (in feet)	Seal depth	Est. depth to water	Est. depth to water bearing stratum	Type of access port or measuring device	Total well depth
--	----------	-------------------------	-----------------------	--	------------	---------------------	-------------------------------------	---	------------------

▪ Certificate Number or other identifying number: 85243 _____

Will the ENTIRE water right be affected by this transfer? Yes No

If "Yes", the remainder of this page does not need to be completed. Go on to the next page.

If "No", the following information **must be provided only** for those places of use that are involved in the transfer (i.e., **list only the portion of the water right to be affected by the change.**)

Attach additional pages as necessary.

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

Location of Existing Authorized Place of Use to be Affected:

(i.e., the allowed lands listed on the water right that will be affected by the proposed transfer, the "FROM" lands)

Source and Priority Date	Township	Range	Mer	Sec	¼ ¼ Section	Acres (if applicable)
See Attachment F for authorized POU Table for Certificate 85243						

RECEIVED
 JAN 02 2009
 WATER RESOURCES DEPT
 SALEM, OREGON

T 10764

Source and Priority Date	Township	Range	Mer	Sec	¼ ¼ Section	Acres (if applicable)

▪ Certificate Number or other identifying number: 85243

3. PROPOSED CHANGES TO THE WATER RIGHT

Describe proposed changes to the water right involving point(s) of diversion and/or appropriation. Survey coordinates described below should accurately correspond to the points shown on the accompanying application map. Attach additional pages as necessary.

Location of Proposed Point(s) of Diversion or Appropriation:

(i.e., the "TO" point(s) of diversion or appropriation)

N/A – Instream Water Right Transfer

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

Source	Township	Range	Mer	Sec	¼ ¼ Section	Survey Coordinates (coordinates from a recognized survey corner)
Groundwater <i>Well 3</i>	15 S	10 E	WM	04	SE NW	1,890 feet South and 2,325 feet East from the NW corner of Section 4

- If there are proposed point(s) of appropriation (wells) listed in the table above, are the well(s) already constructed? Yes No N/A - No proposed well(s) listed above.

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

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

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

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

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

Well already built? (Yes/No)	If an existing well, OWRD Well Log ID No. (or Well ID Tag No. L-)	Diameter	Type and size of casing	No. of feet of casing	Intervals casing is perforated (in feet)	Seal depth	Est. depth to water	Est. depth to water bearing stratum	Type of access port or measuring device	Total well depth
------------------------------	--	----------	-------------------------	-----------------------	--	------------	---------------------	-------------------------------------	---	------------------

See Attachment D for Well Logs — *DESC 57902*

T 10766

Well already built? (Yes/No)	If an existing well, OWRD Well Log ID No. (or Well ID Tag No. L-)	Diameter	Type and size of casing	No. of feet of casing	Intervals casing is perforated (in feet)	Seal depth	Est. depth to water	Est. depth to water bearing stratum	Type of access port or measuring device	Total well depth

▪ Certificate Number or other identifying number: 85243 _____

Describe proposed changes to the water right involving place of use. Information described below should accurately correspond to the proposed place of use shown on the accompanying application map. Attach additional pages as necessary.

Location of Proposed Place of Use: (i.e., the "TO" lands) N/A – Instream Water Right Transfer
 (NOTE: Complete this table **only** if a Change in Place of Use is being proposed.)

Source	Township	Range	Mer	Sec	¼ ¼ Section	Tax Lot, DLC or Gov't Lot	Acres (if applicable)
See map in Attachment G.							

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
SALEM, OREGON

I 10766

City of Sisters
 Permit G-11418 Certificate 85243

Authorized Place of Use

Notes: *The Place of Use is shown according to that listed on Certificate 85243*

Under the provision of ORS 540.510 (3) the City of Sisters may lawfully provide and use water under their municipal permit or certificate in locations other than those listed below

Q-Q	Section	Twp	Range	Mer	Use	# of primary acres	# of supplemental acres
SW NE	04	15 S	10 E	WM	MU	--	--
SE NW	04	15 S	10 E	WM	MU	--	--
NE SW	04	15 S	10 E	WM	MU	--	--
NW SW	04	15 S	10 E	WM	MU	--	--
SW SW	04	15 S	10 E	WM	MU	--	--
SE SW	04	15 S	10 E	WM	MU	--	--
NE SE	04	15 S	10 E	WM	MU	--	--
NW SE	04	15 S	10 E	WM	MU	--	--
SW SE	04	15 S	10 E	WM	MU	--	--
SE SE	04	15 S	10 E	WM	MU	--	--
NE SW	05	15 S	10 E	WM	MU	--	--
SE SW	05	15 S	10 E	WM	MU	--	--
NE SE	05	15 S	10 E	WM	MU	--	--
NW SE	05	15 S	10 E	WM	MU	--	--
SW SE	05	15 S	10 E	WM	MU	--	--
SE SE	05	15 S	10 E	WM	MU	--	--
SE NE	08	15 S	10 E	WM	MU	--	--
NE NW	08	15 S	10 E	WM	MU	--	--
NW NW	08	15 S	10 E	WM	MU	--	--
NW NE	09	15 S	10 E	WM	MU	--	--
SW NE	09	15 S	10 E	WM	MU	--	--
SE NE	09	15 S	10 E	WM	MU	--	--
NE NW	09	15 S	10 E	WM	MU	--	--
NW NW	09	15 S	10 E	WM	MU	--	--
SE NW	09	15 S	10 E	WM	MU	--	--
SW NW	09	15 S	10 E	WM	MU	--	--
NW SW	09	15 S	10 E	WM	MU	--	--

RECEIVED

JAN 02 2009

WATER RESOURCES DEPT
 SALEM, OREGON

T 10760