



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

AMENDED T-10117
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"/> Temporary Transfer (1 to 5 yrs.) • total number of years: _____ (begin year: _____) (end year: _____)	<input type="checkbox"/> Instream Transfer <input type="checkbox"/> Permanent <input type="checkbox"/> Time-Limited <input type="checkbox"/> Drought Transfer <input type="checkbox"/> Other	Is this project fully or partially funded by the American Recovery and Reinvestment Act? (Federal stimulus dollars) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

2. APPLICANT INFORMATION

Name: Mt. Jefferson Farms, Inc. by Walter R. Miller & Sally N. Miller

Address: PO Box 12708

City: Salem State: Oregon Zip: 97309

Home Phone: _____ Work Phone: 503-363-0632 Other Phone: _____

Fax: _____ E-Mail address: _____

3. AGENT INFORMATION

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

Name: Don Knauer

Address: PO Box 5416

City: Salem State: Oregon Zip: 97304

Home Phone: _____ Work Phone: 503-585-8474 Other Phone: _____

Fax: _____ E-Mail address: _____

- 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.

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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-6050	G-5678	46586
2.	G-7680	G-7109	57856
3.	41289	30830	36903
4.	49887	37753	57883
5.	53989	40260	57884
6.	G-15463	G-15178	

- 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 N. SANTIAM RIVER IS CHANGING CHANNEL LOCATION & ENCRUACHING ON FIELDS.

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.

SEE ATTACHED FINAL PROOF SURVEY REPORTS

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

SAME AS ABOVE

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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
If "Yes," list the name and mailing address of the district or water district:

- Will any of the water rights be located within or served by an irrigation or other water district after the proposed transfer? Yes No
If "Yes," list the name and mailing address of the district or water district:

- 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," list the name and mailing address of the agency or other entity:
USBR 1150 North Curtis Road Suite 100 Boise Idaho 83706
- Are any of the water rights proposed for transfer issued in the name of an irrigation district?
 Yes No
*If "Yes," the applicant **must** attach Supplemental Form D demonstrating district concurrence with the proposed transfer.*

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).

Linn County Planning PO Box 100 Albany Oregon 97321

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9. LAND OWNERSHIP

- Does the applicant own the lands where the portion of water right proposed for transfer is currently located? 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 of the application form.)*

Names of Current Landowner(s): _____

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): _____

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)

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SALEM, OREGON

11. ATTACHMENTS

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

Supplemental Form A –

Description of Proposed Change(s) to a Water Right

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

Supplemental Form B –

Evidence of Use Affidavit(s)

- At least one Evidence of Use Affidavit documenting that the right(s) has been used during the last five years or that the right(s) is not subject to forfeiture under ORS 540.610 is attached. The affidavit provided must be the original (not a copy), **and**
- The Evidence of Use Affidavit **must** be accompanied by **supporting documentation**.

Supplemental Form C –

Instream Water Right Transfer Only

- Complete this form to describe the desired nature and attributes for the proposed instream water right.

Supplemental Form D –

For Water Rights in the Name of an Irrigation District

- Complete this form for any water rights proposed for transfer that are issued in the name of an irrigation

Fees:

- Amount enclosed: \$ 3525
See the Department's Fee Schedule at www.wrd.state.or.us or call (503) 986-0900.

Map:

- Water Right Transfer**
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.
- Temporary Transfer or Historical POD Change**
A map meeting the requirements of OAR 690-380-3100 must be included but need **not** be prepared by a Certified Water Right Examiner.

Water Well Report(s)/Well Log(s):

- The application is for a change in point of appropriation or a change from surface water diversion to ground water appropriation and copies of all water well reports are attached.
- 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.
- N/A. The application does **not** involve a change in point of appropriation or a change from surface water to ground water, so water well reports are **not** required.)

Land Use Information For Proposed Changes:

For Instream Transfers

- 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. *(For instream transfers a Land Use Information Form is not required.)*

For All Other Transfers

- Land Use Information Form is enclosed; *or*
- All** of the following criteria are met, therefore a Land Use Information Form is not required:
- 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, **and**
 - ④ Irrigation only.

Temporary Transfers, also include:

- Recorded Deed**
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.
- Affidavit of Consent**
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.

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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) and (6)] to provide the following landownership information and evidence demonstrating that I (we) am authorized to pursue the transfer:
- (a) A report of ownership information that has been prepared by a title company within the three months prior to the issuance of the draft Preliminary Determination showing current land ownership of the subject lands, unless there is a recorded water right conveyance agreement;
 - (b) If applicable, a copy of any water right conveyance agreement on the subject lands. If a water right conveyance agreement has been recorded for the subject lands, the report of ownership information must be prepared by a title company within the three months of the water right conveyance agreement being recorded or show ownership of the subject property at the time the water right conveyance agreement was recorded; and
 - (c) If the landowner identified in the report of ownership information or the individual or entity to whom the interest in the water right has been conveyed is not the applicant, a **notarized statement consenting to the transfer** 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.

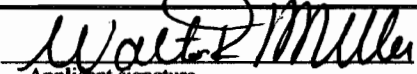

I (we) affirm that the applicant is a municipality, as defined in ORS 540.510(3)(b), and that the right is in the name of the municipality or a predecessor. Therefore, pursuant to OAR 690-380-3000(13)(b), the applicant is NOT required to provide the above described report of ownership information.

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 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 this is a historic point of diversion transfer and that I (we) must provide a report of current ownership prepared by a title company prior to the Department finalizing my request.

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

 Applicant Signature	<u>WALTER R. MILLER</u> Name and title if applicable (print)	<u>9/08/09/</u> Date
 Applicant Signature	<u>Sally N. Miller</u> Name and title if applicable (print)	<u>9/8/09</u> Date

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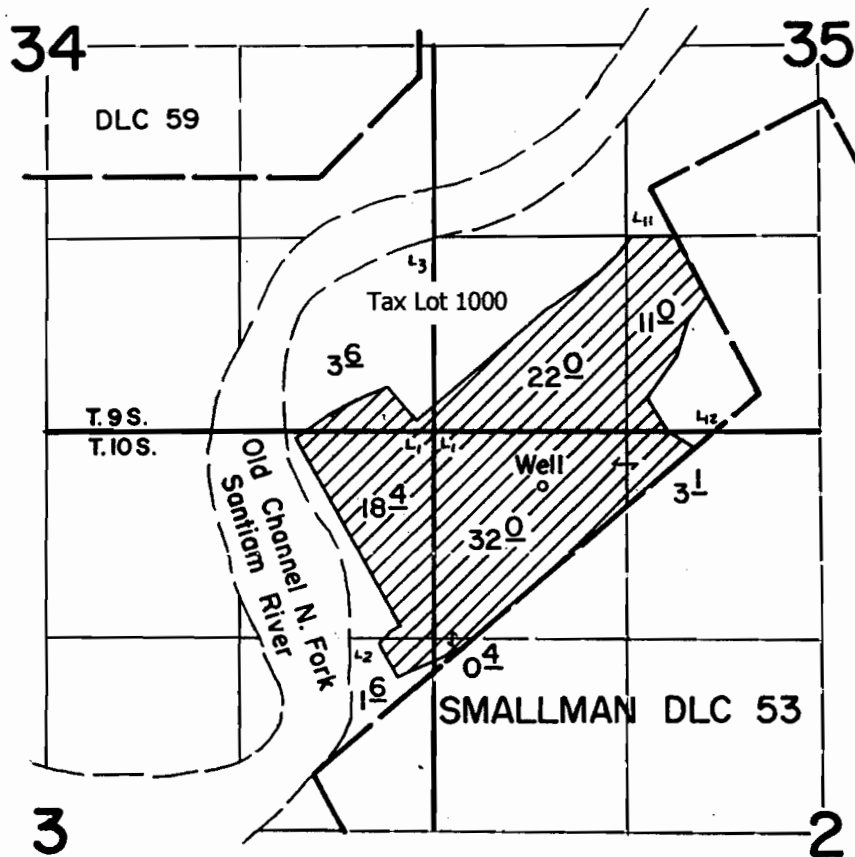
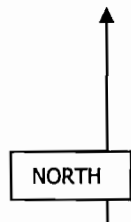
TRANSFER APPLICATION MAP IN THE NAME OF

MILLER FORESTS, INC.

T 9 & 10 S R 2 W, W.M.

FROM: LAND AND WELL

MAP TO AMEND ORIGINAL MAP FOR T-10117



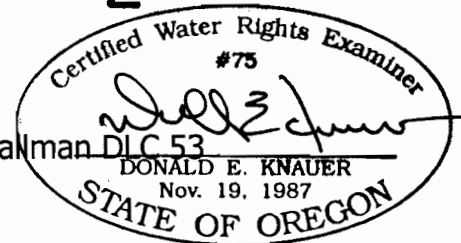
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SALEM, OREGON

Well: 1970' N & 1550' E from the W'ly NW cor. Smallman DLC 53

Scale 1" = 1320'

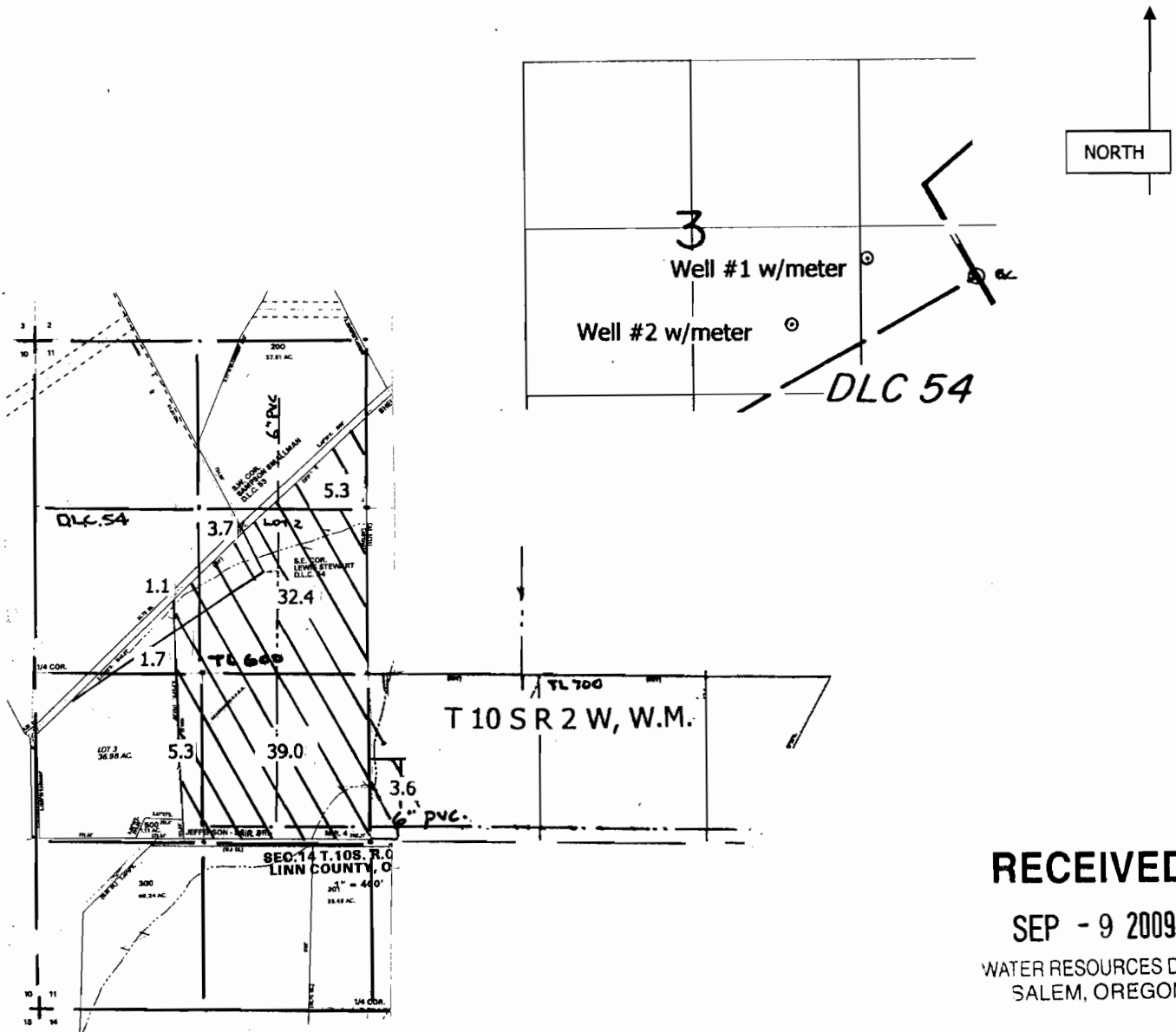


RENEWAL DATE: 6/30/2011

This map is for water right purposes only.

TRANSFER APPLICATION MAP IN THE NAME OF
 MT. JEFFERSON FARMS, INC., Walter R. Miller
 T 10 S R 2 W, W.M.

TO: LAND AND WELLS

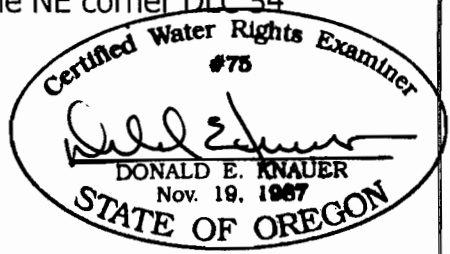


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 SALEM, OREGON

Proposed Pt of Appropriation Well 1: 140' N & 860' W from the NE corner DLC 54
 Proposed Pt of Appropriation Well 2: 350' S & 1450' W from the NE corner DLC 54

Scale 1" = 1320'



This map is for water right purposes only.

RENEWAL DATE: 6-30-2011

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.

<p>▪ Certificate Number or other identifying number: 46586 _____</p>
--

1. TYPE OF CHANGE(S) PROPOSED

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<p><input checked="" type="checkbox"/> Change (The old point of diversion or appropriation will not be used for the portion of the water right affected by the transfer.)</p> <p><input type="checkbox"/> Additional (Both the old and new points of diversion or appropriation will be used for the portion of the water right affected by the transfer.)</p> <p><input type="checkbox"/> Historic Point of Diversion or Appropriation Change (Unauthorized point of diversion or appropriation used for more than 10 years.)</p> <p><input type="checkbox"/> Surface Water Diversion to Ground Water Appropriation (A new point of appropriation will be used instead of the old point of diversion. The old point of diversion will not be used.)</p> <p><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.)</p> <p><input type="checkbox"/> Exchange (Water from another source will be used in exchange for supplying an equal amount of replacement water to that source.)</p>	<p><input checked="" 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.)</p> <p><input 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> <p align="center">RECEIVED SEP - 9 2009 WATER RESOURCES DEPT SALEM, OREGON</p>	<p>Proposed new use:</p> <p><input type="checkbox"/> Irrigation</p> <p><input type="checkbox"/> Municipal</p> <p><input type="checkbox"/> Quasi-municipal</p> <p><input type="checkbox"/> Commercial</p> <p><input type="checkbox"/> Industrial</p> <p><input type="checkbox"/> Instream (complete and attach <i>Supplemental Form C</i>)</p> <p><input type="checkbox"/> Domestic (indicate number of households) _____</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Substitution (A supplemental ground water right will be substituted for a primary surface water right.)</p> <p><input type="checkbox"/> Supplemental Use to Primary Use (Primary water right shall be cancelled and the supplemental water right will change to primary use.)</p>

2. CURRENT WATER RIGHT INFORMATION

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

<input checked="" type="checkbox"/> Certificated Right	46586	G-5678
	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

- Name on Permit, Certificate, or Decree: Walter D. & Patricia R. Miller _____
- County: Linn _____
- Authorized Use(s) to be Affected by Transfer: irrigation _____
- Priority Date(s): 3-29-1973 _____

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: well _____

Tributary to: Smallman Creek _____

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

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

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?
 - Yes No N/A – No Change in Place of Use or Character of Use

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

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

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 SALEM, OREGON

▪ Certificate Number or other identifying number: _____

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 or the authorized point(s) of diversion or appropriation that serves the lands being transferred, if applicable)

If Ground Water, OWRD Well Log ID No. (or Well ID Tag No. L-____)	Source and Priority Date	Township	Range	Mer	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner
well	3-29-1973	10S	2W	WM	2	NWNW	LOT 1	1970' N & 1550' E from the WNW corner DLC 53

▪ 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.

SEE OWRD FINAL PROOF SURVEY REPORT FOR DESCRIPTION OF SOURCE.

▪ Certificate Number or other identifying number: _____

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.

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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)

ALL LANDS SHOWN ON FINAL PROOF SURVEY MAP.

▪ Certificate Number or other identifying number: _____

3. PROPOSED CHANGES TO THE WATER RIGHT

Describe proposed changes to the water right involving point(s) of diversion and/or appropriation. Direction and distance from a recognized survey corner 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	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner
WELL 1	10S	2W	WM	3	NE SE		140' N & 860' W from the NE cor DLC 54
WELL 2					NW SE		350' S & 1450' W from the NE cor DLC 54

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

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

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

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

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
YES	L-42575									
YES	L-42577									

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SALEM, OREGON

▪ Certificate Number or other identifying number: _____

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)
WELL 1 & 2	10S	2W		11	NE NW		5.3
					SW NW	54	1.1
					SW NW		1.7
					SE NW	2	32.4
					NE SW		39.0
					NW SW		5.3
					NW SE		3.6

Remarks: _____

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SEP - 9 2009

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 SALEM, OREGON

INFO- MR. MILLER, He said this was all irr. by Mr. Bethel this summer of 53. They will be irr. it all this summer.

SOURCE- Sump - about 30 x 30 8 1/2' deep
S' SW 1/4

MOTOR- Newman 50 HP @ 3600

PUMP- Berkely D.D. Cent 3x4

DESCRIPTION OF LAND TO BE IRRIGATED OR PLACE OF USE

PIPE - 8"	Buried PVC				Alum				Twp.	Range	Sec.
	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4			
Plenty of pipe for the job											
3000' + 5" Alum											
HEADS- 3 140' Vameers (250-300 gpm each)											
(all three max)											
LIFT- +5' to +10'											
CROP- was Pasture, will be beans this summer.											
TIE- Photo DFN-6LL-229											

These were used by Bethel, Miller will use hand lines. They still have the Vameers

Priority date March 29, 1973
Amount of water 1.7 c.f.s.
Time limit to begin construction April 9, 1973
Time limit to completely apply water 10-1-73
Time limit to completely apply water 10-1-73
Remarks: Limitations 1/80" c.f.s. 1/4 a.f.

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2/18/73

mg

sheet 3 of 3

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 42575

START CARD # 200927

(1) LAND OWNER
Owner Well I.D. 5017
First Name Rob Last Name Miller
Company Mt. Jefferson Farms
Address P.O. Box 12708
City Salem State OR Zip 97309

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

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

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

(5) BORE HOLE CONSTRUCTION
Special Standard [] (Attach copy)
Depth of Completed Well 130 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs.
Row 1: 18, 0, 20, Bentonite, 0, 18, 22, S
Row 2: 16, 20, 130, , , , ,

How was seal placed: Method [] A [] B [] C [] D [] E
[X] Other Poured dry
Backfill placed from 18 ft. to 130 ft. Material 3/4x1/2 washed rock
Filter pack from ft. to ft. Material Size
Explosives used: [] Yes Type Amount

(6) CASING/LINER
Table with columns: Casing, Liner, Dia, From, To, Gauge, Std, Plstc, Wld, Thrd
Row 1: [X], [], 12, 2, 130, 250, [], [], [X], []

Shoe [] Inside [] Outside [] Other Location of shoe(s)
Temp casing [X] Yes Dia 16 From 0 To 130

(7) PERFORATIONS/SCREENS
Perforations Method Torch cut
Screens Type Material

Table with columns: Perf, Casing, Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tel/pipe size
Row 1: [], [], [], 25, 130, 2.67, 10, 2,000

(8) WELL TESTS: Minimum testing time is 1 hour
[X] Pump [] Bailer [] Air [] Flowing Artesian
Yield gal/min 470 Drawdown 73 Drill stem/Pump depth 84 Duration (hr) 4

Temperature 54 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below)
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County LINN Twp 10 S N/S Range 2 W E/W WM
Sec 3 SE 1/4 of the NE 1/4 Tax Lot 400
Tax Map Number Lot
Lat " or " DMS or DD
Long " or " DMS or DD
[] Street address of well [X] Nearest address
Shelburn Rd., Scio, OR 97374

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Predeepening
Completed Well 04-22-2009 13.7
Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES
Depth water was first found 14
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft)
Row 1: 04-22-2009, 14, 128, 470, 13.67

(11) WELL LOG
Ground Elevation
Material From To
Sandy loam 0 4
Gravel & sand 4 12
Dirty silty gravel 12 25
Dirty sandy gravel 25 60
Coarse gravel 60 70
Dirty gravel tight 70 79
Coarse gravel w/some sediments 79 89
Coarse gravel sandy 89 94.5
Clay silt lens 94.5 95
Brown sand w/some silt lenses 95 108
Sandy gravel 108 128
Silty clay brown 128 130
JONES DRILLING CO., INC.
29400 SANTIAM HWY
LEBANON, OR 97355
541-367-2560
1-800-915-8388
Date Started 04-13-2009 Completed 04-22-2009

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

License Number 1411 Date 04-29-2009
Password: (if filing electronically)
Signed [Signature]

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

License Number 1684 Date 04-29-2009
Password: (if filing electronically)
Signed [Signature]
Contact Info (optional) jonesdrilling@gmail.com

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ORIGINAL - WATER RESOURCES DEPARTMENT
WATER RESOURCES DEPT
SALEM, OREGON
APR 30 2009

SEP - 9 2009

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 42577

START CARD # 200929

(1) LAND OWNER Owner Well I.D. 5019
First Name Rob Last Name Miller
Company Mt. Jefferson Farms
Address P.O. Box 12708
City Salem State OR Zip 97309

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

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

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION Special Standard Attach copy
Depth of Completed Well 140 ft.

BORE HOLE SEAL

Dia	From	To	Material	From	To	Amt	lbs
18	0	19	Bentonite	0	18	30	S
16	19	140					

How was seal placed: Method A B C D E
 Other Poured dry
Backfill placed from 18 ft. to 140 ft. Material 1/2x3/4 round rock
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input type="checkbox"/>	<input checked="" type="checkbox"/>	12	2	140	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia 18 From 0 To 140

(7) PERFORATIONS/SCREENS

Perf	Casing	Screen	From	To	Scrn/slot width	Slot length	# of slots	Tel/ pipe size
			19	140	.375	10	1,050	

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
600	50		4
800	65		1

Temperature 54 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below)
From _____ To _____ Amount _____ Units _____
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(9) LOCATION OF WELL (legal description)
County LINN Twp 10 S N/S Range 2 W E/W WM
Sec 3 SE 1/4 of the NE 1/4 Tax Lot 400
Tax Map Number _____ Lot _____
Lat _____ or _____ DMS or DD
Long _____ or _____ DMS or DD
 Street address of well Nearest address
Shelburn Dr. - Scio, OR 97374

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	05-12-2009		16 1/2"

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 18

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
05-12-2009	18	140	800		16 1/2"

(11) WELL LOG

Material	From	To
Topsoil	0	3
Dirty gravel	3	54
Gravel dirty	54	60
Dirty gravel	60	65
Sandy gravel	65	94
Fine sand w/some gravel brown	94	122
Gravel & sand	122	140

JONES DRILLING CO., INC.
29400 SANTIAM HWY.
LEBANON, OR 97355
541-367-2560 541-451-2686
1-800-915-8388

Date Started 05-04-2009 Completed 05-12-2009

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

License Number 1411 Date 05-18-2009
Password: (if filing electronically) _____
Signed *K. D. [Signature]*

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

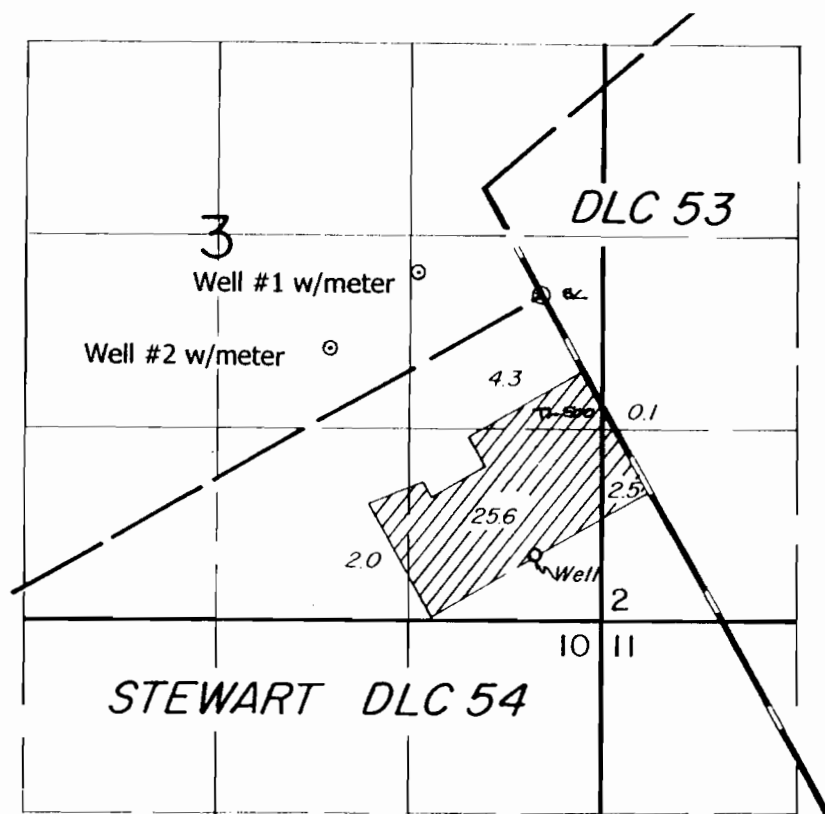
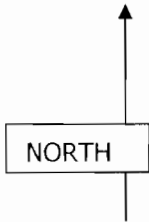
License Number 1684 Date 05-18-2009
Password: (if filing electronically) _____
Signed *[Signature]*
Contact Info (optional) jonesdrilling@hotmail.com

RECEIVED WATER RESOURCES ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK
SALEM, OREGON

SEP - 9 2009

WATER RESOURCES DEPT
SALEM, OREGON

TRANSFER APPLICATION MAP
 MT. JEFFERSON FARMS, INC.
 Section 3, T 10 S R 2 W, W.M.
 Scale 4" = 1 mile



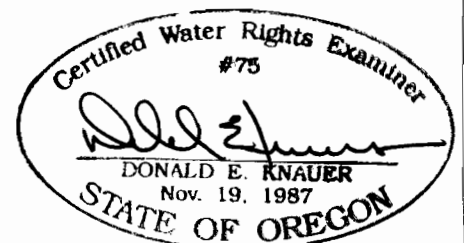
Proposed Pt. of Appropriation, WELL #1: 140' N & 860' W from the NE corner DLC 54
 Proposed Pt. of Appropriation, WELL #2: 350' S & 1450' W from the NE corner DLC 54
 Existing Pt. of Appropriation: 450' N & 450' W from the SE corner sec.3

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WATER RESOURCES DEPT
 SALEM, OREGON

This map is for water
 right purposes only.



RENEWAL DATE: 6-30-2011

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: 57856 _____

1. TYPE OF CHANGE(S) PROPOSED

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> Change (The old point of diversion or appropriation will not be used for the portion of the water right affected by the transfer.) <input checked="" type="checkbox"/> Additional (Both the old and 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 Diversion to Ground Water Appropriation (A new point of appropriation will be used instead of the old point of diversion. The old point of diversion will not 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 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.)

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WATER RESOURCES DEPT
SALEM, OREGON

2. CURRENT WATER RIGHT INFORMATION

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

<input checked="" type="checkbox"/> Certificated Right	57856 Certificate Number	G-7109 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

- Name on Permit, Certificate, or Decree: Walter R. Miller _____
- County: Linn _____
- Authorized Use(s) to be Affected by Transfer: irrigation _____
- Priority Date(s): 2-1-1977 _____

*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: well _____

Tributary to: Smallman Creek _____

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

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

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?
 Yes No N/A – No Change in Place of Use or Character of Use
THIS APPLICATION FOR PT OF APPROPRIATION ONLY.

If "Yes", what are the Permit, Registration or Certificate Numbers? 53266

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

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WATER RESOURCES DEPT
SALEM, OREGON

▪ Certificate Number or other identifying number: _____

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 or the authorized point(s) of diversion or appropriation that serves the lands being transferred, if applicable)

If Ground Water, OWRD Well Log ID No. (or Well ID Tag No. L-____)	Source and Priority Date	Township	Range	Mer	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner
Well	2-1-1977	10S	2W		3	SESE	800	450' N & 450' W from the SE corner sec 3

- 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.

SEE WELL LOG ATTACHED.

▪ Certificate Number or other identifying number: _____

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.

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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)

ALL AREAS SHOWN ON OWRD FINAL PROOF SURVEY.

▪ Certificate Number or other identifying number: _____

3. PROPOSED CHANGES TO THE WATER RIGHT

Describe proposed changes to the water right involving point(s) of diversion and/or appropriation. Direction and distance from a recognized survey corner 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	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner
Well 1 L-42575	10S	2W		3	NE SE		140' N & 860' W from the NE corner DLC 54
Well 2 L-42577					NW SE		350' S & 1450' W from the NE corner DLC 54

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

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

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

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

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.

SEE ATTACHED WELL LOGS.

Location of Proposed Place of Use: NO CHANGES TO PLACE OF USE.

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EXISTING WELL

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the
STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

RECEIVED WATER WELL REPORT
APR 3 1967
STATE OF OREGON
(Please type or print)
ENGINEER G-4182

State Well No. 10/26-3 OR
State Permit No.

(1) OWNER:

Name Mr. Joe Solis
Address P.O. Box #7
Brooks, Ore.

(2) LOCATION OF WELL:

County Lin Driller's well number 213
SW 1/4 SE 1/4 Section #3 T. 10S R. 2W W.M.
Bearing and distance from section or subdivision corner

(4) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

PROPOSED USE (check):

Domestic Industrial Municipal Irrigation Test Well Other
Rotary Cable Dug Driven Jetted Bored

(6) CASING INSTALLED:

Threaded Welded
6" Diam. from 0 ft. to 100 ft. Gage 250
6" Diam. from 90 ft. to 100 ft. Gage 250

(7) PERFORATIONS:

Perforated? Yes No
Type of perforator used Mills
Size of perforations 1/2 in. by 2 in.
5" 150 perforations from 100 ft. to 25 ft.
6" 15 perforations from 100 ft. to 97 ft.

(8) SCREENS:

Well screen installed? Yes No
Manufacturer's Name
Type _____ Model No. _____
Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:

Well seal—Material used in seal Bentonite-puddle clay
Depth of seal 20 ft. Was a packer used? NO
Diameter of well bore to bottom of seal 10 in.
Were any loose strata cemented off? Yes No Depth _____
Was a drive shoe used? Yes No
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____

(10) WATER LEVELS:

Static level 15 ft. below land surface Date 3/13/67
Artesian pressure _____ lbs. per square inch Date _____

(11) WELL TESTS: Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? Stattler
Yield: 175 gal./min. with 30 ft. drawdown after 1 hr.
250 " " 62 " " 1 "
325 " " 57 " " 1 "
425 " " 67 " " 1 hr.
Artesian flow _____ g.p.m. Date _____
Temperature of water _____ Was a chemical analysis made? Yes No

(12) WELL LOG: Diameter of well below casing _____

Depth drilled 100 ft. Depth of completed well 100 ft.
Formation: Describe by color, character, class of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Top soil	0'	2'
Clay (yellow-tan-firm)	2'	12'
Clay-gravel (brown-firm)	12'	22'
Silted gravel	22'	28'
Cement gravel	28'	35'
Silted gravel	35'	40'
Cement gravel	40'	48'
Silted gravel	48'	50'
River gravel-sand (loose)	50'	55'
Cement gravel	55'	80'
Sea gravel-sand with brown clay layers (soft-loose)	80'	90'
Sandy shale-sandstone-sand	90'	95'
clay-gravel (firm)	95'	100'

Installed 10' long 6" liner from at bottom of well to cope with sand layer. Welded on metal ring seal to top of 6" liner.

Work started 3/1/67 19 Completed 3/13/67 19
Date well drilling machine moved off of well 3/13/67 19

(13) PUMP:

Manufacturer's Name _____
Type: _____ H.P. _____
Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Pete Tolmasoff Well Drilling
(Person, firm or corporation) (Type or print)
Address TURKEY, Ore.

Drilling Machine Operator's License No. 320
[Signed] Pete Tolmasoff
(Water Well Contractor)
Contractor's License No. 410 Date 3/21/67 19

(USE ADDITIONAL SHEETS IF NECESSARY)

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SEP - 9 2009

WATER RESOURCES DEPT
SALEM, OREGON

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 42575

START CARD # 200927

(1) LAND OWNER Owner Well I.D. 5017
First Name Rob Last Name Miller
Company Mt. Jefferson Farms
Address P.O. Box 12708
City Salem State OR Zip 97309

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [] Attach copy
Depth of Completed Well 130 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, sacks/lbs. Row 1: 18, 0, 20, Bentonite, 0, 18, 22, S. Row 2: 16, 20, 130.

How was seal placed: Method [] A [] B [] C [] D [] E

[X] Other Poured dry
Backfill placed from 18 ft. to 130 ft. Material 3/4x1/2 washed rock
Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(6) CASING/LINER Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Row 1: 12, 2, 130, 250, [X].

Shoe [] Inside [] Outside [] Other Location of shoe(s)

Temp casing [X] Yes Dia 16 From 0 To 130

(7) PERFORATIONS/SCREENS
Perforations Method Torch cut
Screens Type Material

Table with columns: Perf, Casing, Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tel/pipe size. Row 1: 25, 130, 2.67, 10, 2,000.

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

Table with columns: Pump/Bailer/Air/Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 470, 73, 84, 4.

Temperature 54 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below)

Table with columns: From, To, Description, Amount, Units. Includes 'RECEIVED' stamp.

(9) LOCATION OF WELL (legal description)
County LINN Twp 10 S N/S Range 2 W E/W WM
Sec 3 SE 1/4 of the NE 1/4 Tax Lot 400
Tax Map Number Lot
Lat ' ' or DMS or DD
Long ' ' or DMS or DD
[] Street address of well [X] Nearest address

Shelburn Rd., Scio, OR 97374

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Existing Well / Predeepening
Completed Well 04-22-2009 13.7
Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 14
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row 1: 04-22-2009, 14, 128, 470, 13.67.

(11) WELL LOG Ground Elevation
Material From To
Sandy loam 0 4
Gravel & sand 4 12
Dirty silty gravel 12 25
Dirty sandy gravel 25 60
Coarse gravel 60 70
Dirty gravel tight 70 79
Coarse gravel w/some sediments 79 89
Coarse gravel sandy 89 94.5
Clay silt lens 94.5 95
Brown sand w/some silt lenses 95 108
Sandy gravel 108 128
Silty clay brown 128 130

JONES DRILLING CO., INC.
29400 SANTIAM HWY
LEBANON, OR 97355
541-367-2560
1-800-915-8388

Date Started 04-13-2009 Completed 04-22-2009

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

License Number 1411 Date 04-29-2009
Password: (if filing electronically)
Signed [Signature]

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

License Number 1684 Date 04-29-2009
Password: (if filing electronically)
Signed [Signature]
Contact Info (optional) jonesdrilling@hotmail.com

STATE OF OREGON
 WATER SUPPLY WELL REPORT
 (as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 42577

START CARD # 200929

(1) LAND OWNER Owner Well I.D. 5019
 First Name Rob Last Name Miller
 Company Mt. Jefferson Farms
 Address P.O. Box 12708
 City Salem State OR Zip 97309

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

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

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION Special Standard Attach copy
 Depth of Completed Well 140 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
18	0	19	Bentonite	0	18	30	S
16	19	140					

How was seal placed: Method A B C D E

Other Poured dry

Backfill placed from 18 ft. to 140 ft. Material 1/2x3/4 round rock

Filter pack from ft. to ft. Material Size

Explosives used: Yes Type Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12		2	140	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s)

Temp casing Yes Dia 18 From 0 To 140

(7) PERFORATIONS/SCREENS
 Perforations Method Torch cut
 Screens Type Material

Perf	Casing/Screen	Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/pipe size
				19	140	.375	10	1,050	

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

<input checked="" type="radio"/> Pump	<input type="radio"/> Bailer	<input type="radio"/> Air	<input type="radio"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
600	50		4
800	65		1

Temperature 54 °F Lab analysis Yes By

Water quality concerns? Yes (describe below)

From	To	Amount	Units

(9) LOCATION OF WELL (legal description)
 County LINN Twp 10 S N/S Range 2 W E/W WM
 Sec 3 SE 1/4 of the NE 1/4 Tax Lot 400
 Tax Map Number Lot
 Lat " or " DMS or DD
 Long " or " DMS or DD
 Street address of well Nearest address

Shelburn Dr. - Scio, OR 97374

(10) STATIC WATER LEVEL Date 05-12-2009 SWL(psi) + SWL(ft)
 Existing Well / Predeepening 05-12-2009 16.1 ft.
 Completed Well
 Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 18

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
05-12-2009	18	140	800		16.1 ft.

(11) WELL LOG Ground Elevation

Material	From	To
Topsoil	0	3
Dirty gravel	3	54
Gravel dirty	54	60
Dirty gravel	60	65
Sandy gravel	65	94
Fine sand w/some gravel brown	94	122
Gravel & sand	122	140

JONES DRILLING CO., INC.
 29400 SANTIAM HWY.
 LEBANON, OR 97355
 541-367-2560 541-451-2686
 1-800-915-8388

Date Started 05-04-2009 Completed 05-12-2009

(unbonded) Water Well Constructor Certification

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

License Number 1411 Date 05-18-2009

Password: (if filing electronically)

Signed *K. D. [Signature]*

(bonded) Water Well Constructor Certification

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

License Number 1684 Date 05-18-2009

Password: (if filing electronically)

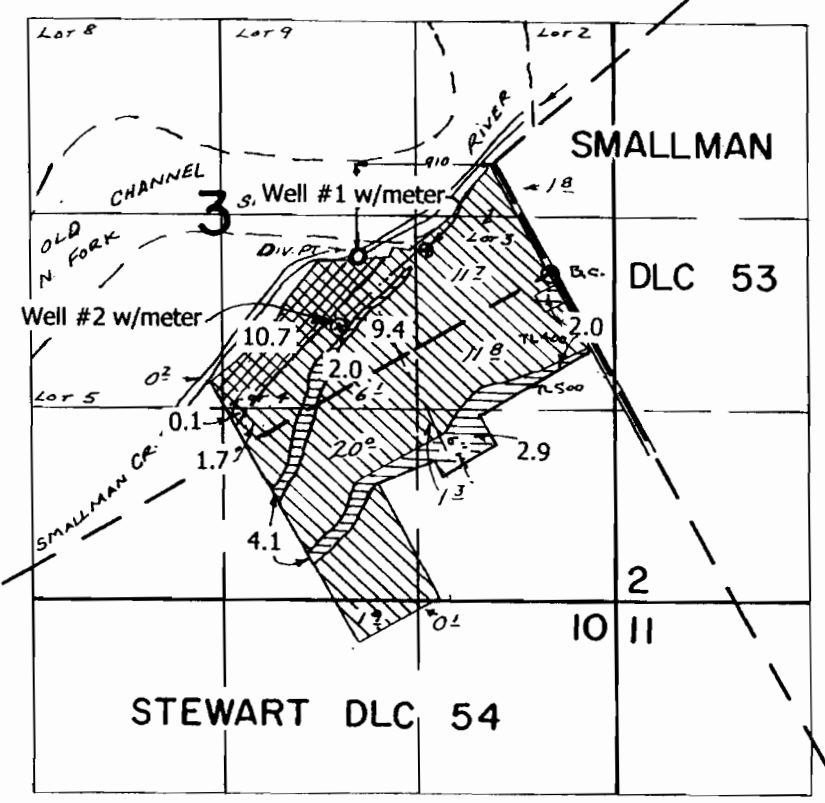
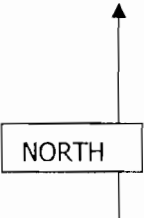
Signed *[Signature]*

Contact Info (optional) jonesdrilling@hotmail.com

RECEIVED WATER RESOURCES DEPT ORIGINAL - WATER RESOURCES DEPARTMENT
 THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK
 SALEM, OREGON

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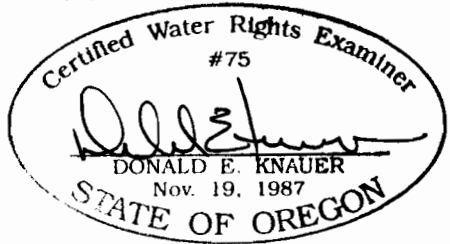
TRANSFER APPLICATION MAP
 MT. JEFFERSON FARMS, INC.
 Section 3, T 10 S R 2 W, W.M.
 Scale 4" = 1 mile



FROM TO

Proposed Pt. of Appropriation, WELL #1: 140' N & 860' W from the NE corner DLC 54
 Proposed Pt. of Appropriation, WELL #2: 350' S & 1450' W from the NE corner DLC 54
 Div. Pt.: 640' S & 910' W from the NW corner DLC 53

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This map is for water right purposes only.

RENEWAL DATE: 6/30/2011

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: 36903 _____

1. TYPE OF CHANGE(S) PROPOSED

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> Change (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 checked="" type="checkbox"/> Surface Water Diversion to Ground Water Appropriation (A new point of appropriation will be used <u>instead</u> 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.)	Proposed new use: <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.)

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SALEM, OREGON

2. CURRENT WATER RIGHT INFORMATION

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

<input checked="" type="checkbox"/> Certificated Right	36903 <small>Certificate Number</small>	30830 <small>Permit Number or Decree Name</small>
<input type="checkbox"/> Adjudicated, Non-certificated Right	 <small>Name of Decree</small>	 <small>Page Number</small>
<input type="checkbox"/> Permit for which Proof has been Approved	 <small>Permit Number</small>	 <small>Date Claim of Beneficial Use Submitted</small>

- Name on Permit, Certificate, or Decree: Venus Standley, Pearl Rice & Willis D. Simms
- County: Linn
- Authorized Use(s) to be Affected by Transfer: irrigation
- Priority Date(s): 8-27-1965

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: Smallman Creek

Tributary to: N. Santiam River

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

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

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?
 - Yes No N/A – No Change in Place of Use or Character of Use

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

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

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▪ Certificate Number or other identifying number: _____

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 or the authorized point(s) of diversion or appropriation that serves the lands being transferred, if applicable)

If Ground Water, OWRD Well Log ID No. (or Well ID Tag No. L-____)	Source and Priority Date	Township	Range	Mer	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner
DIV. PT.	Smallman Cr 8-27-1965	10S	2W		3	NWSE	4	640' S & 910' W from NW corner DLC 53

▪ Does the water right being transferred involve a ground water source(s)?
 Yes No (Surface water source only.)

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.

Will the ENTIRE water right be affected by this transfer? ^{Pt. App.} Yes ^{Place of use} 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)

Source and Priority Date	Township	Range	Mer	Sec	¼ ¼ Section	Tax Lot, DLC or Gov't Lot	Acres (if applicable)
Smallman Cr 8-27-1965		10S	2W	3	NW SE	4	10.7
					NE SW	5	0.2
					SW SE		0.1

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SALEM, OREGON

3. PROPOSED CHANGES TO THE WATER RIGHT

Describe proposed changes to the water right involving point(s) of diversion and/or appropriation. Direction and distance from a recognized survey corner 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	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner
WELL 1 L-42575	10S	2W		3	NE SE	3	140'N & 860' W from NE corner DLC 54
WEL 2 I-42577					NW SE	4	350' S & 1450' W from NE corner DLC 54

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.

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.

SEE ATTACHED WELL LOGS.

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)
Well 1 & 2	10S	2W		3	NE SE	400	2.0
					NW SE	4	2.0
					SW SE		4.1
					SE SE		2.9

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 WATER RESOURCES DEPT
 SALEM, OREGON

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 42575
START CARD # 200927

(1) LAND OWNER Owner Well I.D. 5017
First Name Rob Last Name Miller
Company Mt. Jefferson Farms
Address P.O. Box 12708
City Salem State OR Zip 97309

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well 130 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, sacks/lbs. Row 1: 18, 0, 20, Bentonite, 0, 18, 22, S

How was seal placed: Method [] A [] B [] C [] D [] E

[X] Other Poured dry
Backfill placed from 18 ft. to 130 ft. Material 3/4x1/2 washed rock
Filter pack from ft. to ft. Material Size
Explosives used: [] Yes Type Amount

(6) CASING/LINER
Table with columns: Casing Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Row 1: 12, 2, 130, 2.50, [X]

Shoe [] Inside [] Outside [] Other Location of shoe(s)
Temp casing [X] Yes Dia 16 From 0 To 130

(7) PERFORATIONS/SCREENS
Perforations Method Torch cut
Screens Type Material

Table with columns: Perf, Casing, Screen Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size. Row 1: 25, 130, 2.67, 10, 2,000

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

Table with columns: Pump/Bailer/Air/Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 470, 73, 84, 4

Temperature 54 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below)

Table with columns: From, To, Description, Amount, Units. Includes 'RECEIVED' stamp.

(9) LOCATION OF WELL (legal description)
County LINN Twp 10 S N/S Range 2 W E/W WM
Sec 3 SE 1/4 of the NE 1/4 Tax Lot 400
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [X] Nearest address

Shelburn Rd., Scio, OR 97374

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Existing Well / Predeepening
Completed Well 04-22-2009 13.7
Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 14
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row 1: 04-22-2009, 14, 128, 470, 13.67

(11) WELL LOG Ground Elevation
Table with columns: Material, From, To. Includes layers like Sandy loam, Gravel & sand, Dirty silty gravel, etc. Includes contact info for JONES DRILLING CO., INC.

Date Started 04-13-2009 Completed 04-22-2009

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

License Number 1411 Date 04-29-2009
Password: (if filing electronically)
Signed [Signature]

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

License Number 1684 Date 04-29-2009
Password: (if filing electronically)
Signed [Signature]
Contact Info (optional) jonesdrilling@gmail.com

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 42577

START CARD # 200929

(1) LAND OWNER Owner Well I.D. 5019
First Name Rob Last Name Miller
Company Mt. Jefferson Farms
Address P.O. Box 12708
City Salem State OR Zip 97309

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

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

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 140 ft.

BORE HOLE SEAL

Dia	From	To	Material	From	To	Amt	sacks/ lbs
18	0	19	Bentonite	0	18	30	S
16	19	140					

How was seal placed: Method A B C D E
 Other Poured dry
Backfill placed from 18 ft. to 140 ft. Material 1/2x3/4 round rock
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	12	<input checked="" type="checkbox"/>	2	140	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s)
Temp casing Yes Dia 18 From 0 To 140

(7) PERFORATIONS/SCREENS

Perforations Method Torch cut
Screens Type Material

Perf	Casing	Screen	Liner	Dia	From	To	Scrns/slot width	Slot length	# of slots	Tele/ pipe size
				19	140		.375	10	1,050	

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

Pump	Bailer	Air	Flowing Artesian	Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	600	50		4
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	800	65		1

Temperature 54 °F Lab analysis Yes By
Water quality concerns? Yes (describe below)
From To RECEIVED Amount Units
RECEIVED MAY 26 2009

(9) LOCATION OF WELL (legal description)
County LINN Twp 10 S N/S Range 2 W E/W WM
Sec 3 SE 1/4 of the NE 1/4 Tax Lot 400
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
 Street address of well Nearest address
Shelburn Dr. - Scio, OR 97374

(10) STATIC WATER LEVEL

Date	SWL(psi)	+ SWL(ft)
Existing Well / Predeepening 05-12-2009		16'-11"
Completed Well		

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 18

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
05-12-2009	18	140	800		16'-11"

(11) WELL LOG Ground Elevation

Material	From	To
Topsoil	0	3
Dirty gravel	3	54
Gravel dirty	54	60
Dirty gravel	60	65
Sandy gravel	65	94
Fine sand w/some gravel brown	94	122
Gravel & sand	122	140

JONES DRILLING CO., INC.
29400 SANTIAM HWY.
LEBANON, OR 97355
541-367-2560 541-451-2686
1-800-915-8388

Date Started 05-04-2009 Completed 05-12-2009

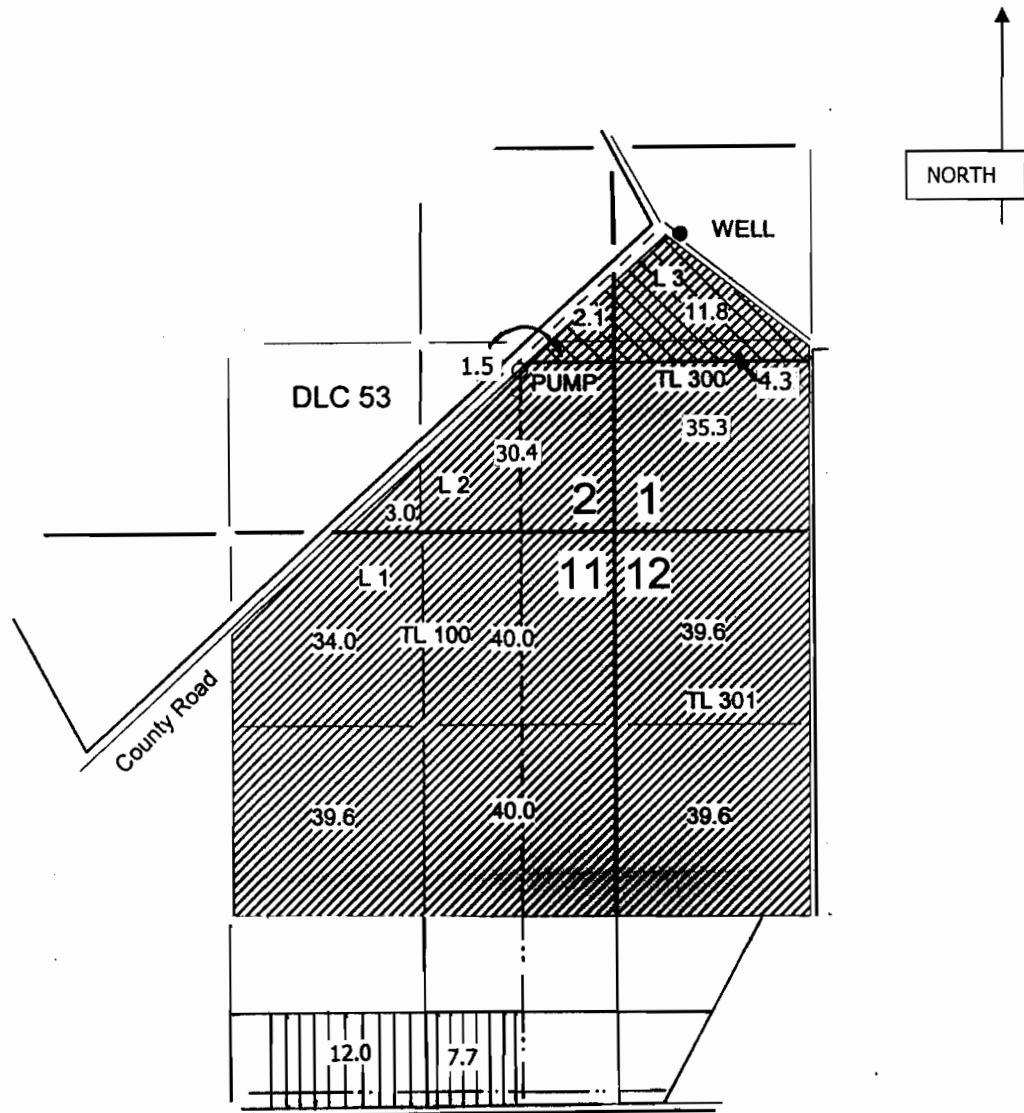
(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge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

License Number 1411 Date 05-18-2009
Password: (if filing electronically)
Signed KTD

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

License Number 1684 Date 05-18-2009
Password: (if filing electronically)
Signed Broyles
Contact Info (optional) jonesdrilling@hotmail.com

TRANSFER APPLICATION MAP IN THE NAME OF
 MT. JEFFERSON FARMS, INC., Walter R. Miller
 T 10 S R 2 W, W.M.



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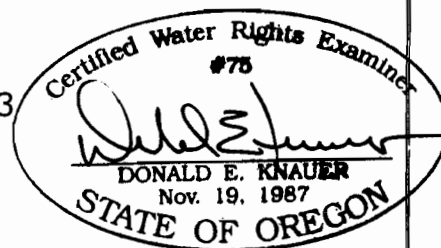
FROM



TO

WELL: 80' S & 160' E from the SE corner DLC 53

Scale 1" = 1320'



RENEWAL DATE: 6-30-2011

This map is for water
 right purposes only.

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: 57883

1. TYPE OF CHANGE(S) PROPOSED

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> Change (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 Diversion to Ground Water Appropriation (A new point of appropriation will be used <u>instead</u> 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.)	Proposed new use: <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.)
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p style="margin: 0;">RECEIVED</p> <p style="margin: 0;">SEP - 9 2009</p> <p style="margin: 0;">WATER RESOURCES DEPT</p> <p style="margin: 0;">SALEM, OREGON</p> </div>		

2. CURRENT WATER RIGHT INFORMATION

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

<input checked="" type="checkbox"/> Certificated Right	57883	37753
	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

- Name on Permit, Certificate, or Decree: Walter R. Miller
- County: Linn
- Authorized Use(s) to be Affected by Transfer: Irrigation
- Priority Date(s): 2-27-1975

*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: Sucker Slough & Smallman Creek

Tributary to: N. Santiam River

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

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

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?
 Yes No N/A – *No Change in Place of Use or Character of Use*

If "Yes", what are the Permit, Registration or Certificate Numbers? 57884 & G-15178

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

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▪ Certificate Number or other identifying number: _____

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 or the authorized point(s) of diversion or appropriation that serves the lands being transferred, if applicable)

If Ground Water, OWRD Well Log ID No. (or Well ID Tag No. L-____)	Source and Priority Date	Township	Range	Mer	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner

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

Yes No (Surface water source only.)

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

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

or

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

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

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

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

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▪ Certificate Number or other identifying number: _____

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)

Source and Priority Date	Township	Range	Mer	Sec	¼ ¼ Section	Tax Lot, DLC or Gov't Lot	Acres (if applicable)
Sucker Slough & Smallman Cr	10S	2W		1	NW SW	3	11.8
				1	SW SW	300	4.3
				2	NE SE	300	2.1
				2	SE SE	2	1.5

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▪ Certificate Number or other identifying number: _____

3. PROPOSED CHANGES TO THE WATER RIGHT

Describe proposed changes to the water right involving point(s) of diversion and/or appropriation. Direction and distance from a recognized survey corner 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	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner

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

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

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

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

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

▪ Certificate Number or other identifying number: _____

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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)
SAME	10S	2W		11	NE SE		7.7
				11	NW SE		12.0

Remarks: _____

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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: 57884 _____

1. TYPE OF CHANGE(S) PROPOSED

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> Change (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 Diversion to Ground Water Appropriation (A new point of appropriation will be used <u>instead</u> 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.)

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2. CURRENT WATER RIGHT INFORMATION

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

<input checked="" type="checkbox"/> Certified Right	57884	40260
	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

- Name on Permit, Certificate, or Decree: Walter R. Miller _____
- County: Linn _____
- Authorized Use(s) to be Affected by Transfer: Irrigation, Supplemental _____
- Priority Date(s): 3-8-1976 _____

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: Smallman Creek _____

Tributary to: N. Santiam River _____

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

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

- Are there **Other Water Rights**, Permits or Ground Water Registrations associated with this land?
 Yes No N/A – No Change in Place of Use or Character of Use

If "Yes", what are the Permit, Registration or Certificate Numbers? 57883 & G-15178

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

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▪ Certificate Number or other identifying number: _____

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 or the authorized point(s) of diversion or appropriation that serves the lands being transferred, if applicable)

If Ground Water, OWRD Well Log ID No. (or Well ID Tag No. L-____)	Source and Priority Date	Township	Range	Mer	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner

- Does the water right being transferred involve a ground water source(s)?
 Yes No (Surface water source only.)

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

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

or

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

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

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

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

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▪ Certificate Number or other identifying number: _____

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)

Source and Priority Date	Township	Range	Mer	Sec	¼ ¼ Section	Tax Lot, DLC or Gov't Lot	Acres (if applicable)
Sucker Slough & Smallman Cr	10S	2W		1	NW SW	3	11.8
				1	SW SW	300	4.3
				2	NE SE	300	2.1
				2	SE SE	2	1.5
Certificate Number or other identifying number: _____							

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3. PROPOSED CHANGES TO THE WATER RIGHT

Describe proposed changes to the water right involving point(s) of diversion and/or appropriation. Direction and distance from a recognized survey corner 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	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner

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

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

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

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

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

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▪ Certificate Number or other identifying number: _____

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)
SAME	10S	2W		11	NE SE		7.7
				11	NW SE		12.0

Remarks: _____

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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: Permit G-15178 _____

1. TYPE OF CHANGE(S) PROPOSED

(Check *all* that apply.)

Point of Diversion or Appropriation	Place of Use	Character of Use
<input type="checkbox"/> Change (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 Diversion to Ground Water Appropriation (A new point of appropriation will be used <u>instead</u> 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.)
<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: 0 auto;"> <p style="font-size: 24px; margin: 0;">RECEIVED</p> <p style="font-size: 18px; margin: 0;">SEP - 9 2009</p> <p style="font-size: 12px; margin: 0;">WATER RESOURCES DEPT SALEM, OREGON</p> </div>		

2. CURRENT WATER RIGHT INFORMATION

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

<input type="checkbox"/> Certificated Right	_____	_____
	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	G-15178	_____
	Permit Number	Date Claim of Beneficial Use Submitted

- Name on Permit, Certificate, or Decree: Walter R. Miller for Mt. Jefferson Farms, Inc _____
- County: Linn _____
- Authorized Use(s) to be Affected by Transfer: Supplemental Irrigation _____
- Priority Date(s): 4-5-2001 _____

*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: A well _____

Tributary to: Sucker Slough _____

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

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

- Are there **Other Water Rights, Permits or Ground Water Registrations** associated with this land?
 Yes No N/A – No Change in Place of Use or Character of Use

If "Yes", what are the Permit, Registration or Certificate Numbers? 57883 & 57884

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

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▪ Certificate Number or other identifying number: _____

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 or the authorized point(s) of diversion or appropriation that serves the lands being transferred, if applicable)

If Ground Water, OWRD Well Log ID No. (or Well ID Tag No. L-____)	Source and Priority Date	Township	Range	Mer	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner

- Does the water right being transferred involve a ground water source(s)?
 - Yes No (Surface water source only.)

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

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

or

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

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

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

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

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▪ Certificate Number or other identifying number: _____

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)

Source and Priority Date	Township	Range	Mer	Sec	¼ ¼ Section	Tax Lot, DLC or Gov't Lot	Acres (if applicable)
Sucker Slough & Smallman Cr	10S	2W		1	NW SW	3	11.8
				1	SW SW	300	4.3
				2	NE SE	300	2.1
				2	SE SE	2	1.5

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▪ Certificate Number or other identifying number: _____

3. PROPOSED CHANGES TO THE WATER RIGHT

Describe proposed changes to the water right involving point(s) of diversion and/or appropriation. Direction and distance from a recognized survey corner 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	Tax Lot, DLC or Gov't Lot	Direction & Distance from a Recognized Survey Corner

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

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

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

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

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

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▪ Certificate Number or other identifying number: _____

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)
Well	10S	2W		11	NE SE		7.7
				11	NW SE		12.0

Remarks: _____

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 SALEM, OREGON
 Supplemental Form A

DON KNAUER / Water Right Consultation and Water Right Surveys
PO Box 5416 Salem OR 97304 phone & fax: 503-585-8474 cell: 503-508-7862

September 8, 2009

Water Rights Section
Oregon Water Resources Department
725 Summer Street NE Suite A
Salem Oregon 97301-1271

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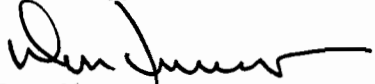
Re: Application S-86675 Permit 54440

Dear Sir,

Mr. Walter R. Miller, President of Mt. Jefferson Farms, Inc. has asked me to inform you of the following information. An application for transfer, T-10117, has been received by your office. On this date we have filed documents to amend that transfer application. The application includes a portion of land covered by Application 86675 Permit 54440. It is Mr. Millers intention to have the water right involved in the proposed transfer be the primary water right and if the transfer is allowed, he will agree to diminish permit 54440 from irrigation to supplemental irrigation for those acres covered by the transfer.

Please call if you have any questions.

Sincerely,



Don Knauer

C: Walter R. Miller
Application T-10117

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