# Application for Water Right **Transfer**

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

## Part 1 of 4 - Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

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

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		FOR ALL TRANSFER APPLICATIONS  JUL 9 2010	
Che	ck all ite	ems included with this application. $(N/A = Not Applicable)$	
$\boxtimes$		Part 1 – Completed Minimum Requirements Checklist.  WATER GOODS AND US SALEM ONES ON	+-}
$\boxtimes$		Part 2 – Completed Transfer Application Map Checklist.	
$\boxtimes$		Part 3 – Completed Transfer Application – Applicant Information and Signature.	
$\boxtimes$		Part 4 – Completed Transfer Application – Water Right Information. Please include a separate Part 4 for each water right. List all water right certificates to be transferred here: <u>60971</u> .	
		Attachments:	
$\boxtimes$		Completed Transfer Application Map.	
$\boxtimes$		Completed Evidence of Use Affidavit and supporting documentation.	
$\boxtimes$		Fees – Amount enclosed: \$ <u>670.00</u> . See the Department's Fee Schedule at <u>www.wrd.state.or.us</u> or call (503) 986-0883.	
	N/A	Affidavit(s) of Consent.	
	N/A	Supplemental Form $D$ – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.	
	N/A	Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands if <b>all</b> of the following apply: a) a change in place of use only, b) no structural changes, c) to use of water is for irrigation only, and d) the use is located within an irrigation district or a exclusive farm use zone.	the
	N/A	For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, Water Well Report/Well Log.	
$\boxtimes$	N/A	For Temporary Transfer (one to five years) Begin Year 2010 End Year 2014.	
$\boxtimes$	N/A	For Temporary Transfer only – Current recorded deed for the land <b>from</b> which the authorized place of use is being moved.	
		(For Staff Use Only)	
	U U	ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
	I —	Application fee not enclosed/insufficient Map not included or incomplete	
		Land Use Form not enclosed or incomplete  Additional signature(s) required Part is incomplete	
		er/Explanation	
		f:503-986-0 Date://	

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

		sure that the transfer application map you submit includes all the required items and he existing water right map. Check all boxes that apply.
	N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For list of CWREs see <a href="http://www1.wrd.state.or.us/pdfs/cwre_listing.pdf">http://www1.wrd.state.or.us/pdfs/cwre_listing.pdf</a> . CWRE stamp and signature are not required for temporary changes, historic point of diversion changes, and substitutions.
	N/A	If more than three water rights are involved, separate maps are needed for each water right.
$\boxtimes$		Permanent quality printed with dark ink on white or clear paper or film.
$\boxtimes$		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, or up to 30 x 30 inches. For 30 x 30 inch maps, three (3) paper copies and an electronic copy in a .pdf, .tiff or .jpg format are required.
$\boxtimes$		A north arrow, a legend, and scale.
		The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
$\boxtimes$		Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
$\boxtimes$		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
$\boxtimes$		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
$\boxtimes$		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
		Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
	□ N/A	Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
$\boxtimes$		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
1	⊠ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example $-42^{\circ}32^{\circ}15.5^{\circ}$ ) or degrees-decimal with five or more digits after the decimal (example $-42.53764^{\circ}$ ).

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# Part 3 of 4 - Applicant Information and Signature

Applicant Information
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APPLICANT/BUSINESS NAM	E	PHONE NO.	ADDITIONAL CONTACT NO.	
Kraemer Farms, LLC / I	Ray Stafford	(503) 845-2489	(503) 932-5439 (cell)	
ADDRESS				FAX NO.
13318 Dominic Road NE				(503) 845-6474
CITY	STATE	ZIP	E-MAIL	
Mount Angel	o.com			

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

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Pacific Hydro-Geology Inc. / M:	alia or Gre	g Kupillas	(503) 632-5016	(503) 310-5553 (cell)
ADDRESS				FAX NO.
18487 S. Valley Vista Road				(503) 632-5983
CITY	STATE	ZIP	E-MAIL	
Mulino	OR	97042	phg@bctonline.com	

Mulino	OR	97042	phg@bctonline.com
	pondence	to Agent. Send	ollowing: d copies of correspondence to Applicant; OR Send copies of correspondence to Agent.
Check this box if this pr Reinvestment Act. (Fed			funded by the American Recovery and
Is the applicant the sole own transfer is located? X Yes		land on which th	the water right, or portion thereof, proposed for
	ent (and n	nailing addresses	mailing address if different than the applicant's) es) from all landowners or individuals/entities to
	Perma	nent Transfers Only	ly (check one box)
	understand ransfer, I w	that, upon receipt o	of the draft preliminary determination and prior to provide landownership information and evidence that I am
I affirm the applicant is a muname of the municipality or a			540.510(3)(b) and that the right is in the
			condemn property and is acquiring by sed for transfer is appurtenant and have
Applicant signature  Applicant signature	<b>d</b>	Name (and title if a	oplication is true and accurate.  TAFFORD Tapplicable) (print)  Tapplicable) (print)  Date  Tapplicable) (print)  Date

In your own words tell us what change(s) you want made and the reason for the change(s): We need to temporarily move some existing water rights in order to irrigate row crops on land not currently covered by water rights.

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Check the following boxes	that app	oly:						
The applicant is resp continue to be sent to		-	etion of	change(s). Noti	ces and correspondence shoul	ld		
					e proposed change(s) after the buld be sent to this landowner			
The receiving landov of notices and corres				-	completion of change(s). Cope and the applicant.	pies		
At this time, are the lands in	this tran	sfer appli	ication in	n the process of	being sold? ☐ Yes ⊠ No			
	. If you d	do not kn	ow who	. •	aplete the receiving landowner ner will be, then a request for			
unless a sale agreement	or other o	locument	states o	therwise. (To le	d belong to the new owner, earn about sale agreements sfer-PropertyTransactions.pdf	)		
RECEIVING LANDOWNER NAME Not Applicable				PHONE NO.	ADDITIONAL CONTACT NO.			
ADDRESS		_			FAX NO.	-		
СІТҮ	STATE	ZIP		E-MAIL				
Describe any special ownership circumstances here:								
Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. ( <b>Tip</b> : Complete and attach Supplemental Form D.)								
IRRIGATION DISTRICT NAME			ADDRES	S 				
CITY			STATE		ZIP			
Check here if water for a for stored water with a fe					vice agreement or other contr	act		
ENTITY NAME			ADDRES	S				
СІТҮ			STATE		ZIP			
					ocal governments (each count iction water will be diverted,	⊣ ty,		
ENTITY NAME  Marion County Planning Depar	tment		ADDRES P.O. Bo	S <b>x 14500</b>				
CITY Salem		_	STATE OR		ZIP 97309			
ENTITY NAME			ADDRES	s				
CITY			STATE		ZIP			

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### Part 4 of 4 - Water Right Information

Please use a separate Part 4 for each water right being changed. See instructions at http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

	CERTIFICATE # 60971	WAR BLOOM
Description of Water Delive	ery System	JUL 02 2010
System capacity: 0.76 cubic	feet per second (cfs) OR	WATER DECEMBER CENT
gall	ons per minute (gpm)	South Colors

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines and sprinklers used to divert, convey and apply the water at the authorized place of use. Water is pumped from the authorized well (MARI 5663/56867) using a combination of a 30 Hp submersible pump in the well and a 30 Hp booster pump, then conveyed to the place of use through 6-inch mainlines to handlines equipped with impact sprinklers.

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Twp	Rng	Sec	1/4 1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Olsen Well		MARI 5663/56867	6 S	1 E	19	NW NE	100	560 FEET SOUTH AND 3480 FEET EAST FROM THE NW CORNER, SECTION 19
	☐ Authorized ☐ Proposed							
	Authorized							
	Proposed							
	Authorized							
	Proposed							

	☐ Proposed									
Check	all type(s) of c	change(s) pro	posed b	elow (ch	ange	"CODES" a	re prov	vided in	parenth	eses):
$\boxtimes$	Place of Use	(POU)				Supplementa	l Use to	Primary	y Use (S	to P)
	Character of	Use (USE)				Point of App	ropriati	on/Well	(POA)	
	Point of Dive	ersion (POD)				Additional Po	oint of A	Appropri	iation (A	POA)
	Additional P	oint of Divers	sion (AP	OD)		Substitution (	(SUB)			
	Historic POI	O (HPOD)				Government.	Action	POD (G	OV)	
	Surface Wate POA (SW/G	er POD to Gr W)	ound Wa	iter						
Will al	of the propos	sed changes a	iffect the	e entire v	vater	right?				
☐ Yes	Complete on "CODES" lis	ly the Propos sted above to	•	,			the ne	xt page.	Use the	
No.	Complete all	of Table 2 to	describe	e the port	ion of	the water rig	ght to b	e change	d.	

Table 2. Description of Changes to Water Right Certificate # 60971

List only the part of the right that will be changed. For the acreage in each ½ ½, list the change proposed. If more than one change, specify the acreage associated with each POD/POA.

	), to be " (1	£.	42	3 1	л 3						Ţ
	POD(s)/ POA(s) to be used (from Table 1)	5// 40a	200	Olsen Well 3	Olsen Well 3						
Proposed ("to" lands) AFTER THE CHANGES	New Type of POD(s)/ USE (from Table 1)			Irrigation	Irrigation						
	Gvt Acres (if DLC applicable)		w.	13.0	22.0						35.0
	Gvt Lot or DLC	1000		_	_						RES
A (spr	Tax Lot	8		200	200						L ACI
d ("to" lar	7, 7,	<u> </u>	Ź	SW NE	SE NW				_		TOTAL ACRES
esodo	Sec	 2000		19 8	19						
Pre	Rng		L	E E	l E						-
	Twp	7	:A::	8	S		_				-
		( i	*1	9	9				• · · · · · · · · · · · · · · · · · · ·		
Dronocad	Changes (see "CODES" from previous page)	004304	: 46	ΩOd	Mod	POU					
HANGES	POD(s) or POA(s) (name or number from Table 1)		***	Olsen Well 3	Olsen Well 3	Olsen Well 3					
Authorized ("from" lands) as they appear BEFORE THE CI	Type of USE listed on Certificate			Irrigation	Irrigation	Irrigation					
pear BEF(	Gvt Acres Lot or (if DLC applicable)		2000	2.5	27.7	4.8					35.0
ey ap	Gvt Lot or DLC		, ,	1							ES
as th	Tax Lot	7% 7% 7 70% 70% 70% 70%	*	100	100	100					LACR
lands)	74	Ž		NE	NE	WN					TOTAL ACRES
rom"	7, 4,	iiii. V.	\$	NE	WW	NE					
g,,) p	Sec	<b>47</b>	.3	61	19	19					
lorize	Rng		3	1 E	1 E	1 E					
Auth	Twp	<i>S</i> 0	3	S 9	S 9	S 9					-

Additional remarks: None.

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#### For Place of Use or Character of Use Changes

<b>T</b> ,	oi i iacc	or esc or er	iaiactci	or ese er	ianges					
		e other water "from" or the					ground wa	ter registra	ations assoc	iated
	If YES, 1	ist the certifi	cate, wate	er use pen	mit, or gr	ound water	r registratio	n number	s:	
	a primary	to ORS 540. y right proposed and water region.	sed for tra	ansfer mu	st be incl	uded in the	transfer of	be cancel	led. Any cl	hange
F	or Subst	itution (grou irriga	nd water ation)	suppleme	ntal irriga	ation will b	e substitut	ed for surf	ace water p	rimary
		water suppler water primary				#;				
F	or a chai	nge from Su	pplement	tal Irriga	tion Use	to Primar	y Irrigatio	n Use		
	Identify 1	the primary o	ertificate	to be can	celled. C	ertificate #	<u> </u>			
F	or a chai	nge in point(	s) of app	ropriatio	n (well(s	)) or addit	ional poin	t(s) of apr	propriation	:
	We ass	ell log(s) are a ociated with olication map o://apps2.wrd	attached f the correst. ( <b>Tip</b> : Y	for each ausponding of ou may s	uthorized well(s) in earch for	and propo Table 1 at well logs o	sed well(s) ove and or on the Depa	that are cl	learly labele	ed and
	OR									
		scribe the connot have a w		of the au	thorized	and propos	ed well(s)	in Table 3	for any wel	ls that
Any well(s accompany transfer app	) in this l ving appli plication.	ion of Point( isting must b cation map. For propose examiner for	e clearly Failure to d wells,	tied to con provide we recom	rrespondi adequate mend tha	information you const	n is likely alt a license	to delay th ed well dri	e processin	g of your ist, or
Proposed or Authorized	Is well already	If an existing well, OWRD	Total		Casing	Seal	Perforated or	Static water level of	Source aquifer	Well - specific rat (cfs or

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

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