

This form is subject to revision. Begin each new claim by checking for a new version of this form and downloading a new one if necessary.

**Oregon Water Resources Department**  
**725 Summer St. NE, Suite A**  
**Salem, OR 97301-1266**

If you have questions regarding the completion of this form, contact:

Gerry Clark by e-mail at [Gerald.E.CLARK@wrđ.state.or.us](mailto:Gerald.E.CLARK@wrđ.state.or.us) or by phone at 503-986-0811,

Or Jerry Gainey by e-mail at [Jerry.W.GAINEY@wrđ.state.or.us](mailto:Jerry.W.GAINEY@wrđ.state.or.us) or by phone at 503-986-0812.

The Department has a new program that allows a permit holder to pay the cost to have a private contractor review of the claim and, if appropriate, prepare a certificate. This new program means a certificate can be issued in about a month. The Department has a list of trained contractors that are selected on a rotating basis. For more information on this program see: <http://www.wrđ.state.or.us/programs/index.shtml>.

\*\*This box can be deleted

## CLAIM OF BENEFICIAL USE

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. Every numbered item must have a response. If any requested information does not apply to the Claim, insert "n/a." Do not delete any section of this form unless directed by the form. The Department may require the submittal of additional information from any water user or authorized agent. **A separate form shall be completed for each permit or transfer final order.**

### I. General Information

#### 1. File Information

Application Number (G, R, S or T)	Permit Number (if applicable)
T 10266	

#### 2. Property owner (current owner information)

##### a. Individuals

Name	Joel Gisler	
Mailing Address	18550 Julias Trail	
City/State/Zip	Bend, OR 97701	
Phone #	541-815-0966	
Fax #		
e-mail address		

##### b. Businesses/Organizations

Name		<b>RECEIVED</b>  <b>JUN 10 2009</b>  <b>WATER RESOURCES DEPT</b> <b>SALEM, OREGON</b>
Contact Person and Title		
Mailing Address		
City/State/Zip		
Phone		
Fax		
e-mail		

If the current property owner is not the permittee or transfer holder of record, it is recommended that an assignment be filed with the Department. The COBU must be signed by the permit/transfer holder of record.

3. Permittee / Transferee of record (this may, or may not, be the current property owner)

c. Individuals

	Individual 1	Individual 2
Name	Charles Woolsey	
Mailing Address	19330 Pinehurst Rd.	
City/State/Zip	Bend, OR 97701	

d. Businesses/Organizations

Name	
Contact Person and Title	
Mailing Address	
City/State/Zip	

4. Date of Site Inspection:

5. Person(s) interviewed and description of their association with the project:

Name	Date	Association with the project
Joel Gisler	6-10-08	Land owner where water was transferred to

6. County:

7. Tax Lot Information:

Tax map number	Tax lot number
16-11-27	208
16-11-27	214

8. If any property described in the place of use of the permit or transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(3)):

\*\*Mark "NA" if there are no owners of property not included in this claim

Name	N/A
Contact Person and Title	
Mailing Address	
City/State/Zip	
Phone #	

Name	
Contact Person and Title	
Mailing Address	
City/State/Zip	
Phone #	

**RECEIVED**

JUN 10 2009

WATER RESOURCES DEPT  
SALEM, OREGON

## II. Points of Diversion/Appropriation and Place of Use

For each point of diversion or appropriation, provide the following information. If the claim is for more than one point of diversion/appropriation, copy and complete this section for each point of diversion or appropriation.

1. Provide a general narrative description of the distribution works. This description must trace the water system from the point of diversion or appropriation to and include the place of use:

Water is moved down the Tumalo Feed Canal, then the Couch Lateral to the West Couch Lateral to the subject property. A small pond is kept full for the pumping of the irrigation water. Water is pumped through a 4" intake pipe from the pond into and out of the 5hp pump and into a 3" output line then drops down to a 2" buried PVC mainline. The water is delivered to 100 Rainbird Maxi-Paw Rotor sprinklers, set up in 10 "zones" with 10 sprinklers in each zone. Each zone is operated for 1/2 hour. The entire system is operated for 8 hours per day.

2. Point of diversion/appropriation name or number (correspond to map):

Point of diversion/appropriation name or number (correspond to map)	Well log ID # for all work performed on the well (if applicable)	Well tag # (if applicable)
N/A		

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, and deepenings)

3. Point of diversion/appropriation source and, if from surface water, the tributary:

Source	Tributary to
Please see attached sheet (copy of pages 121 thru 125 of Special Order Volume 73, Page 120)	Deschutes River

4. Point of diversion/appropriation location:

(DLC, Government Lot, 1/4 1/4, Section, Township, Range)	Reference to a recognized public land survey corner by distance and bearing or by coordinates
See attachment described above.	

5. Actual use(s), period of use, and rate for each use:

Uses	If irrigation, list crop type	When water is used	Rate for use
Irrigation	Pasture	April 15 thru Sept. 30	Not to exceed 9.91 acre feet per acre

**Total Quantity of Water** *9.91 Ac. Feet per Acre*

6. Place of use for the point of diversion or appropriation:

DLC	Gov lot	1/4 1/4	Section	Township	Range	Use	# of primary acres	# of supplemental acres
		SE/NW	27	16S	11E	Irr	3.0	3.0

RECEIVED

JUN 10 2009

WATER RESOURCES DEPT  
SALEM, OREGON

--	--	--	--	--	--	--	--	--	--

**Total Acres Irrigated**                      **3.0** \_\_\_\_\_

**Groundwater Source Information (Well and Sump)**

\*\*If the appropriation is not from ground water (well or sump), this section, items 1-5, can be deleted.

1. Describe the access port (type and location) or other means to measure the water level in the well in the box below:

--

2. If well logs are not available, provide as much of the following information as possible:

Casing Diameter	Casing Depth	Total Depth	Completion Date of Original Well	Completion Dates of Alterations	Who the well was drilled for	Well drilled by

In addition to the information requested in item "2" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

--

\*\*If the appropriation is not from a sump, the following section, items 3-4, can be deleted. Construction standards for sumps can be found in OAR 690-210-0400.

3. If the appropriation involves a **SUMP**, provide the following information for each **SUMP**:

Length	Width	Average diameter	Maximum depth	Surface area (in acres)	Volume in cubic feet or acre feet

4. If the sump is curbed constructed with watertight surface curbing, describe the curbing in the table below:

Curbing material (concrete, concrete tiles, or steel)	If concrete, provide the thickness of the wall

5. Provide sump volume calculations in the box below:

<p style="font-size: 1.2em; font-weight: bold; color: blue;">RECEIVED</p> <p style="font-size: 1.1em; color: blue;">JUN 10 2009</p> <p style="font-size: 1.1em; color: blue;">WATER RESOURCES DEPT SALEM, OREGON</p>
--

**Reservoir Data**

\*\*If this claim is not for a reservoir, or the system does not involve a reservoir as part of the distribution system, this section, items 1-7, can be deleted.

1. If the reservoir required the submittal of as-built plans and specifications, complete the table below:

Have the documents been submitted? yes or no	When were the documents submitted	Have they been approved by the Department?

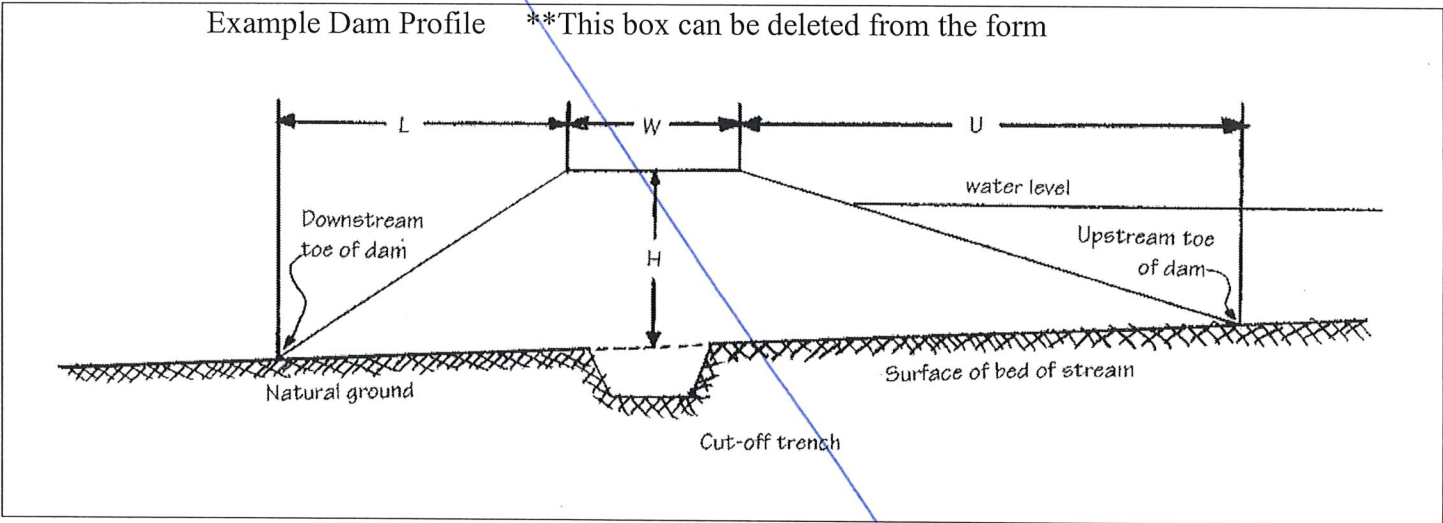
2. If the reservoir stores less than 9.2 acre-feet of water or if the dam is less than 10 feet in height, and as-built plans and specifications are not required, complete the table below.

Maximum depth	Average depth	Surface area (in acres)	Volume in acre feet

3. Provide reservoir volume calculations in the box below:

4. Provide the following information concerning the physical characteristics of the dam:

Crest width (W)	Dam height at centerline (H)	Distance from downstream top of dam to downstream toe (L)	Distance from upstream top of dam to upstream toe (U)	Water level at inspection	Downstream slope	Upstream slope



5. In the box below, provide a drawing showing the cross section of the dam at the maximum section indicating details and dimensions. The drawing should be drawn at a standard even scale.

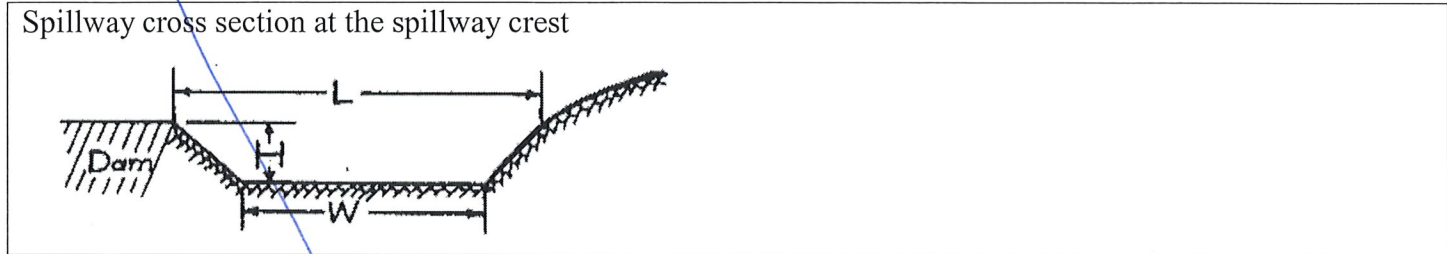
RECEIVED  
 JUN 10 2009  
 WATER RESOURCES DEPT  
 SALEM, OREGON

6. Describe the outlet works (size and type of the outlet conduit and location) in the box below:

--

7. Describe the emergency spillway (dimensions and location) in the box below:

Spillway location	Bottom width (W)	Top width (L)	Spillway depth (H)



**Storage tank data**

\*\*If this system does not include a storage tank as part of the distribution system, this section, item 1, can be deleted.

1. If the system involved a storage tank, complete the table below:

Material (concrete, fiberglass, metal, etc.)	Capacity in gallons	Above ground or buried

**Gravity flow pipe** (The Department typically uses the Hazen-William's formula for a gravity flow pipe system)

\*\*If this claim does not rely on a gravity flow pipe to convey the water as part of the distribution system, this section, items 1-3, can be deleted.

1. If the system involves a gravity flow pipe, complete the table below.

Pipe size	Pipe type	"C" factor	Amount of fall	Length of pipe	Slope	Computed rate of water flow

2. Provide calculations in the box below:

<p style="font-size: 24px; font-weight: bold; color: blue; margin: 0;">RECEIVED</p> <p style="font-size: 18px; font-weight: bold; color: blue; margin: 5px 0;">JUN 10 2009</p> <p style="font-size: 14px; font-weight: bold; color: blue; margin: 0;">WATER RESOURCES DEPT SALEM, OREGON</p>
--

3. If an actual measurement was taken, provide the following:

Date of Measurement	Who made the measurement	Measurement method	Measured quantity of water

Attach measurements notes

**Gravity flow canal or ditch** (The Department typically uses Manning's formula for canals and ditches)

\*\*If this claim does not rely on a gravity flow canal or ditch to convey the water as part of the distribution system, this section, items 1-3, can be deleted.

1. If the system involves a gravity canal or ditch, complete the table below.

Canal or ditch type (material)	Top width of canal or ditch	Bottom width of canal or ditch	Depth	"N" factor	Amount of fall	Length of canal/ditch	Slope	Computed volume

2. Provide calculations in the box below:

**RECEIVED**

JUN 10 2009

WATER RESOURCES DEPT  
SALEM, OREGON

3. If an actual measurement was taken, provide the following:

Date of Measurement	Who made the measurement	Measurement method	Measured quantity of water

Attach measurements notes

**System Information:**

Provide the following information concerning the diversion and delivery system. Trace the flow of water from the point of diversion/appropriation to the place of use.

1. Pump information

Brand	Model	Serial Number	Type (centrifugal, turbine or submersible)	Intake size	Discharge size
Baldor	unknown	unknown	centrifugal	4"	3"

2. Motor information

Brand	Model	Horsepower	Max RPM	Voltage
Baldor	1ML1409T	5	3500	230

3. Meter information (if required in permit or transfer final order)

Make	Serial #	Condition (working or not)	Current meter reading	Notes
N/A				

4. Measurement device description

Device description	Condition (working or not)	Notes

5. Measured pump capacity (using meter if meter was present and system was operating)

Initial meter reading	Ending meter reading	Duration of time observed	Total pump output

6. Theoretical pump capacity

Horsepower	Operating psi	Lift from source to pump *If a well, the water level during pumping (see pump test results)	Lift from pump to place of use	Total pump output
5	60	4 FEET	3 FEET	0.21 cfs

7. Provide pump calculations in the box below:

$$Q = \frac{(5) (6.61)}{7 + 152.4 (60\text{psi})} = 0.21 \text{ cfs}$$

**RECEIVED**

JUN 10 2009

WATER RESOURCES DEPT  
SALEM, OREGON



\*\*This box can be deleted from the form

$$Q_{\text{pump}} = \frac{(\text{Hp})(550 \text{ ft lb/sec/Hp})(\text{efficiency})}{(62.4 \text{ lb/cu ft})(\text{lift} + \text{press})} = \frac{(\text{efficiency})(\text{Hp})}{\text{total head}}$$

in feet in feet

or

$$Q_{\text{pump}} = \frac{(\text{Hp})(\text{conversion factor})}{(\text{lift} + \text{pressure})} = \text{cfs}$$

*total head in feet*

Conversion factors:

Centrifugal Pump, 75% eff.  $\frac{(550 \text{ ft lb/sec/Hp})(.75)}{(62.4 \text{ lb/cu ft})} = 6.61 \text{ ft}^4/\text{sec/Hp}$

Turbine & Submersible Pumps, 80% eff.  $\frac{(550 \text{ ft lb/sec/Hp})(.80)}{(62.4 \text{ lb/cu ft})} = 7.04 \text{ ft}^4/\text{sec/Hp}$

*Efficiencies have been assumed to be 75% for centrifugal pump installations and 80% for turbine or submersible pumps. See the list below of converted psi's to feet of head. These figures account for minor friction losses. If the system involves unusually long pipelines friction losses should be accounted for by using standard charts and formulas.*

**Refer to the conversion table below to compute PSI to head for pump pressure in feet.**

$$[(\text{psi}/.433)(1.1)] = \text{head (in feet/psi)} = 2.54 \text{ feet head/psi}$$

PSI	HEAD	PSI	HEAD
25	63.5	55	139.7
30	76.2	60	152.4
35	88.9	65	165.1
40	101.6	70	177.8
45	114.3	75	190.5
50	127.0	80	203.2

8. Mainline information

Mainline size	Length	Type of pipe	Buried or above ground
2"	2620 feet	PVC	Buried

9. Lateral or handline information

Lateral or handline size	Length	Type of pipe	Buried or above ground

RECEIVED  
JUN 10 2009  
WATER RESOURCES DEPT  
SALEM, OREGON

10. Sprinkler information    Make and model: RAIN Bird 2045A Maxi-Paw Rotor

Make	Model	Size	Operating psi	Sprinkler output	Maximum number used	Total sprinkler output
Maxi-Paws	2045A		60	4.2 gpm	10 at any one time	42 gpm

Refer to the chart of sprinkler output at various pressures for most nozzle sizes attached to this document.

$$Q_{\text{sprinklers}} = \frac{(\text{max \# heads})(\text{gpm/head})}{448.8 \text{ gpm/cfs}} = \text{cfs}$$

**11. Additional notes or comments related to the system:**

The system has 10 “zones” with 10 Maxi-Paw sprinklers in each zone. The system is operated for ½ hour per zone and for 8 hours per day. Therefore the usage for the system is 42 gpm per zone.

**RECEIVED**

JUN 10 2009

WATER RESOURCES DEPT  
SALEM, OREGON

**III. CONDITIONS**

Please pay special attention to this section. All conditions contained in the permit or transfer final order shall be addressed. Reports that do not address all performance related conditions will be returned.

**1. Time Limits:**

a. Permits or transfer Final Orders contain any or all of the following dates; the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use is to be completed by. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or transfer final order:

	Dates from permit or transfer final order	Date accomplished	Description of actions taken by water user to comply with the time limits
Begin construction		Sept. 2007	
Complete construction		Sept. 2007	Installed underground system
Complete application of water	10-1-2008	April 2008	System is operating and water beneficially used

**2. Initial Water Level Measurements:**

\*\*If the Claim is for surface water or a reservoir, or if the water user was not required to submit static water level measurements, items b through e relating to this section can be deleted.

- a. Was the water user required to submit an initial static water level measurement?      YES    NO    **NA**
- b. What month was the initial measurement to be taken in?
- c. Did an authorized individual (as stated in the permit or transfer final order) make the initial static water level measurement in the month required?  
      YES    NO

d. If "YES", was the measurement submitted to the Department? YES NO

e. If the initial measurement not been submitted, provide that measurement now if available:

Date of measurement	Who made measurement	Method	Measurement

**3. Annual Static Water Level Measurements:**

\*\*If the Claim is for surface water or a reservoir, or if the water user was not required to submit static water level measurements, items b through e relating to this section can be deleted.

a. Was the water user required to submit annual static water level measurements? YES NO **NA**

b. In the box below, provide the month in which the static water level was to be made:

c. Were the static water level measurements taken in the month required? YES NO

d. If "YES", were those measurements submitted to the Department? YES NO

e. If the annual measurements were not submitted, provide the measurements now in the box below:

Year	Month	Measurement made by	Measurement

**4. Measurement, recording, and reporting conditions:**

a. Does the permit or transfer final order require the installation of a meter or approved measuring device?  
YES **NO**

If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion or appropriation.

\*\*If "NO", items b through g relating to this section can be deleted.

b. Has a meter been installed? YES NO

c. Provide the date the meter was installed:

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? YES NO

e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

Name	Title	Approximate date



- f. Is the water user required to report the water use to the Department? YES  NO
- g. Have the reports been submitted? YES  NO

If the reports have not been submitted, attach a copy of the reports if available.

**5. Fish Screening and/or By-pass Devices**

- a. Are any points of diversion required to be screened and/or have a by-pass device to prevent fish from entering the point of diversion? YES  NA *NOT PER special Order Vol 73 PAGES 120-125*

If fish screening and/or by-pass devices were required, the COBU map must indicate their location in relation to the point of diversion.

\*\*If "NO", items b through i relating to this section can be deleted

- b. Has the fish screening been installed?  YES  NO

**RECEIVED**  
 JUN 10 2009  
 WATER RESOURCES DEPT  
 SALEM, OREGON

- c. When was the fish screening installed?

Date	By whom
Unknown, contact Tumalo Irrigation for this info.	Tumalo Irrigation District at the headgate on Tumalo Creek and the Deschutes River

- d. Is the **total** diversion rate of all rights at the point of diversion less than 0.5 cfs? YES NO
- e. If the total diversion rate is less than 0.5 cfs, has the water user self certified the fish screen. YES NO
- f. Has a self certification form been previously submitted to the Department? YES NO
- g. If not, is the self certification form attached to this Claim? YES NO
- h. If the total diversion rate is greater than 0.5 cfs, has ODFW approved the screening? YES NO
- i. Has the water user previously submitted a letter from ODFW approving the screening? YES NO
- j. If not, is the approval letter attached to the Claim? YES NO
- k. Has the by-pass device been installed? YES NO

l. Describe the by-pass device:

When installed	By whom	Approved by ODFW	Description

**6. Pump Test** (Required for ground permits prior to issuance of a certificate, but not a requirement of permit development)

- a. Did the permit require the submittal of a pump test? YES  NO NA

- b. Has the pump test been previously submitted to the Department? YES NO
- c. Has the pump test been approved by the Department? YES NO
- d. If no, is the pump test attached to this Claim? YES NO

7. **Other Permit Conditions** (examples: special well construct standards, water conservation plans, no obstructions to fish without a fishway, etc.; number as appropriate.)

#### IV. Variations, Attachments, Conclusions, Map and Signatures

##### Variations

Include a description of variations from the permit or transfer final order

##### Attachments

If you are attaching any documents to this report, provide a list below:

Attachment name	Description
FINAL ORDER	FINAL Order For T-10266
DEED	DEED Proving ownership of Subject Property being irrigated.
Performance Chart	Performance Chart for Rain Bird "Maxi Row 2045A"

##### Permit and Transfer Final Order Rates and System Rates Comparisons:

POD or POA name or #	Maximum rate allowed by permit or transfer final order	Calculated theoretical rate of water based on system	Actual amount of water measured (if measured)	Developed use	# of acres allowed by permit or transfer final order	# of acres developed
Deschutes	0.09 maximum	<del>0.24 cfs</del> 0.21 cfs		Irrigation	3.0	3.0
River & tributaries	(varies per season) See Special Order					
See Special Order						

##### Claim of Beneficial Use Map

The Claim of Beneficial Use Map must be submitted with this Claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on poly film at a scale of 1" = 1320', 1" = 400', or the original full-size scale of the county assessor map for the location.

In the following box, provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

A combination of traverse survey and a RTK GPS system.

**RECEIVED**

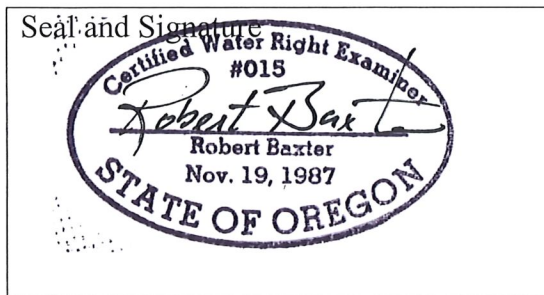
JUN 10 2009

WATER RESOURCES DEPT  
SALEM, OREGON

[Empty rectangular box]

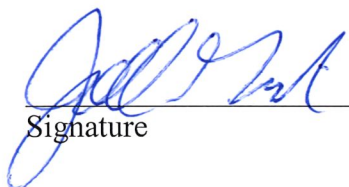
CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.



Permit or Transfer Holders Signature or Acknowledgement

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

	<i>Joel Guster</i>	<i>6-9-09</i>
Signature	Print or type name	Date

_____	_____	_____
Signature	Print or type name	Date

**RECEIVED**  
JUN 10 2009  
WATER RESOURCES DEPT  
SALEM, OREGON