



Eagle Point Irrigation District

P.O. Box 157
Eagle Point, OR 97524
541-826-3411

2429 Brophy Rd.
fax 541-826-8738
epidist@centurylink.net

Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266

RE: T-13073
3-27-19

Enclosed is the claim of beneficial use form, site review, and map for transfer T-13073. Please call me if you have any questions or need additional information.

Sincerely,

David Ford,
EPID

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OWRD



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

District Permanent Water Right Transfer Claim of Beneficial Use

1. APPLICANT INFORMATION

District: Eagle Point Irrigation District

Contact Person: David Ford

Phone: 541-826-3411

Mailing Address: P.O. box 157

City: Eagle Point

State: OR

Zip: 97524

E-Mail address: deford@centurylink.net

Transfer Number: T - 13073

2. WATER RIGHT(S)

Pursuant to OAR Chapter 690, Division 385, the district is submitting to the Water Resources Department this claim of beneficial use, with the appropriate fee, for the following water right(s):

NOTE: Fees do not apply if the priority date is prior to July 9, 1987.

PERMIT NUMBER	CERTIFICATE NUMBER	DECREE (name, volume, and page)	PRIMARY (P) OR SUPP (S)
6396-	89373	Eagle Point Irrigation	X P <input type="checkbox"/> S
-			<input type="checkbox"/> P <input type="checkbox"/> S
-			<input type="checkbox"/> P <input type="checkbox"/> S
-			<input type="checkbox"/> P <input type="checkbox"/> S

3. AUTHORIZED POINT(S) OF DIVERSION (POD) / APPROPRIATION (POA)

The authorized point(s) of diversion / appropriation for the water right modified by the transfer are as follows:

PERMIT NUMBER	DECREE or CERTIFICATE	POD / POA #	SOURCE	LOCATION - MEASURED DISTANCES
6396-	89373	1	Big Butte CR.	35S 2E WM Sec. 10 NE/NE. 1130 FEET SOUTH AND 700 FEET WEST FROM THE NE CORNER OF SECTION 10.
6396-	89373	2	Big Butte CR.	35S 2E WM Sec. 3 NW/NW. 1030 FEET SOUTH AND 290 FEET EAST FROM THE NW CORNER OF SECTION 3
-				
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Dec 2017

6. SIGNATURES

The district certifies that it has inspected the place of use listed in Table I, and confirms the change in place of use has been completed consistent with the terms and conditions of the final order approving the transfer.



Signature of District Manager
or District Board Chairperson

3-27-19
Date

David Ford
Type or Print Name of District Manager
or District Board Chairperson

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CLAIM OF BENEFICIAL USE Site Report

Transfer Number: T - 13073 _____ District Internal Notice #: T- 2018-001 _____

User Name: Scott Rosendahl _____

Place of Use:

USE	POD #	TWP	RNG	SEC	QQ	DLC	GOV'T LOT	TAX LOT	ACRES
IR		35 S	1E	4	NE NE			100	3.23
IR		35 S	1E	4	SE NE			100	.67

District Conveyance System:

Description of Delivery System: EPID open canal to 10 inch headgate. _____

Headgate: Rosendahl _____ Canal: EPID main canal _____

Beneficial Use:

Description of Beneficial Use: Full beneficial use made for Irrigation purposes. _____

Method Used to Apply Water: Pump, sprinkler. _____

Method Used to Calculate Beneficial Use: Full beneficial use not to exceed 1/80 of one cfs per acre on a rotational basis. _____

User Interviewed: Yes No

Beneficial Use Made as Authorized: Yes No

Description of Beneficial Use if Less than Authorized:

Inspected By: *Scott Rosendahl*

Date: 3-27-19

Instructions: Attach and label the corresponding final proof map.

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