

Checklist for Claims of Beneficial Use Received at CSG Counter

Application #	WRD Reviewer <i>CM</i>
Transfer # <i>13281</i>	
Date Received <i>8/2/2021 (Map)</i>	
CWRE Name <i>Natalie Jennings</i>	

Priority Date: *3/12/1956*

Fees Required:

YES NO A fee of \$200 must accompany this form for permits with priority dates of July 9, 1987, or later.

YES **(NO)** A fee of \$200 must accompany this form for any transfers including a water right with a priority date of July 9, 1987, or later.

Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

Fill in App or Transfer Number

Map Review:

- Map on polyester film (OAR 690-014-0170(1) & 310-0050(1)(b))
- Application & permit #; or transfer # (OAR 690-014-0100(1))
- Disclaimer (OAR 690-014-0170(5))
- North arrow (OAR 690-310-0050(2)(c))
- CWRE stamp and signature (OAR 690-014 & 310-0050)
- Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map) (014 & 310)
- Township, range, section, and tax lot numbers (OAR 690-310-0050(4))

MONEY SLIP

DATE:		RECEIPT #:	
RECEIVED FROM:		APPLICATION PERMIT	
		TRANSFER	
CASH	CHECK #	OTHER (IDENTIFY)	TOTAL RECD \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
0083 TREASURY 4178 MISC CASH ACCT.			
0407	COPIES		\$
	OTHER (IDENTIFY)		\$
0243 Instream Lease 0244 Min Water Right Plan 0245 Cons Water			
0083 TREASURY 4270 WRD OPERATING ACCT.			
MISCELLANEOUS			
0407	COPY & TAPE FEES	<i>4611</i>	\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE (IDENTIFY)		\$
TC142	DEPOSIT LAB (IDENTIFY)		\$
0140	EXTENSION OF TIME		\$
WATER RIGHTS			
	EXAM FEE		RECORD FEE
0201	SURFACE WATER	\$	0202 \$
0203	GROUND WATER	\$	0204 \$
0205	TRANSFER	\$	\$
WELL CONSTRUCTION			
	EXAM FEE		RECORD FEE
0218	WELL DRILL CONSTRUCTION	\$	0219 \$
<i>0200</i>	LANDOWNER'S PERMIT		0220 \$
	OTHER (IDENTIFY)	<i>COBU</i>	<i>\$200.00</i>
0087 TREASURY 0447 HYDROELECTRIC			
LIC NUMBER			
0233	POWER LICENSE FEE (FWWRD)		\$
0231	HYDRO LICENSE FEE (FWWRD)		\$
HYDRO APPLICATION			
			\$

Report Review:

- On form provided by the Department (OAR 690-014-0100(1))
- Application & permit #; or transfer # (OAR 690-014)
- Ownership information (OAR 690-014)
- Date of survey (OAR 690-014)
- Person interviewed (OAR 690-014)
- County (OAR 690-014)
- CWRE stamp and signature (OAR 690-014-0100)
- Signature(s) of all permittee of transfer holder (OAR 690-014-0100)

Groundwater File Review: *N/A*

Pump Test Required? YES NO Pump Test Submitted? YES NO*

*If no, include pump test flyer w/acknowledgment letter

RETURN TO APPLICANT – LETTER ATTACHED

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**CLAIM OF
BENEFICIAL USE
for Transfer New or Additional
POA Only**



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.oregon.gov/OWRD

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A fee of \$200 must accompany this form for any Transfer final orders including a water right with a priority date of July 9, 1987, or later.

Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

A separate form shall be completed for each transfer.

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at: <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

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 item must have a response.** If any requested information does not apply to the claim, insert "NA." **Do not delete or alter 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.

"Section 8" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-986-0900 and ask for the Certificate Section.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see:

<https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx>

**SECTION 1
GENERAL INFORMATION**

Type of Authorized Change

This Claim is being submitted for a transfer where the only authorized change was a change in point(s) of appropriation or additional point(s) of appropriation, or a combination of both. **YES** *If additional changes were authorized, you will need to select a different form.*

1. File Information

APPLICATION #
T-13281

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Hiland WC – Lombard WS		PHONE NO. 503-554-8333	ADDITIONAL CONTACT NO. 855-554-8333
ADDRESS PO Box 699			
CITY Newberg	STATE OR	ZIP 97132	E-MAIL matt@hilandwater.com

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. **Each** transfer holder of record must sign this form.

3. Transfer holder of record (this may, or may not, be the current property owner)

TRANSFER HOLDER OF RECORD Hiland WC – Lombard WS		
ADDRESS PO Box 699		
CITY Newberg	STATE OR	ZIP 97132

4. Date of Site Inspection:

7/21/21

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Matt Olson	7-21-21	Owner, VP, CCO

6. County:

Marion

7. If any property described in the place of use of the transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

OWNER OF RECORD Hiland WC – Lombard WS		
ADDRESS PO Box 699		
CITY Newberg	STATE OR	ZIP 97132

Add additional tables for owners of record as needed

**SECTION 2
SIGNATURES**

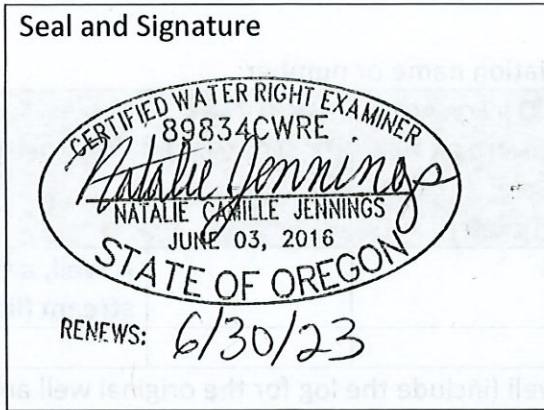
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CWRE Statement, Seal and Signature

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



CWRE NAME Natalie Jennings		PHONE NO. 504-554-9553	ADDITIONAL CONTACT NO.	
ADDRESS 501 E. 1st Street				
CITY Newberg	STATE OR	ZIP 97132	E-MAIL njennings@hbh-consulting.com	

Transfer Holder of Record Signature or Acknowledgement

Each transfer holder of record must sign this form in the space provided below.

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.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	Matthew Olson	Owner, VP, CCO	7-26-2021

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SECTION 3
CLAIM DESCRIPTION

Note: The Claim only needs to describe the new or additional point(s) of appropriation. This Claim does not need to provide information for the original point(s) of appropriation unless the original point of appropriation is either a new or additional point of appropriation on another right involved in this transfer.

1. New or additional point of appropriation name or number:

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
Well 2	MARI63906		A well, a tributary of an unnamed stream (little pudding river)

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

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final? **NO**

3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
Well 2	0.5 cfs	0.17 cfs (this well only based on pump capacity, well log capacity states 0.55 cfs) Well 1 capacity is in addition	630 cu. ft.

SECTION 4
SYSTEM DESCRIPTION

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Are there multiple new or additional Points of Appropriation (POA)?

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NO

If "YES" you will need to copy and complete a separate Section 4.

POA Name or Number this section describes (only needed if there is more than one):

Well 2

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Preferred Pump	AA75850	unknown	Submersible	unknown	2"

2. Motor Information

MANUFACTURER	HORSEPOWER
Pentek	5

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
5	65 (on picture of pressure tank)	22 ft. below ground	15 ft. from well @ ground level to system high point. Pump depth unknown	0.167 (well 2 only)

4. Provide pump calculations:

(0711890-0711260)cu. ft./360 s=0.175cfs

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 (IN CFS)
0711260	0711890	1 hr	0.175

Reminder: For pump calculations use the reference information at the end of this document.

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B. Groundwater Source Information (Well and Sump)

3. Is the appropriation from a dug well (sump)?

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NO

C. Additional notes or comments related to the system:

The map is being mailed separately.

SECTION 5

CONDITIONS

All conditions contained in the transfer final order, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

1. Time Limits:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE NEW AND/OR ADDITIONAL POA(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	10/27/2020	
COMPLETENESS DATE FROM ORDER (C)	10/1/2021	10/28/2020

* MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

2. Is there an extension final order(s)?

NO

3. Measurement Conditions:

a. Does the transfer final order, or any extension final order require the installation of a meter or other approved measuring device?

NO

4. Recording and reporting conditions

a. Is the water user required to report the water use to the Department?

NO

If "NO", item b relating to this section may be deleted.

b. Have the reports been submitted?

N/A

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

5. Other conditions required by the transfer final order or extension final order:
- a. Were there special well construction standards? **NO**
 - b. Was submittal of a ground water monitoring plan required? **NO**
 - c. Other conditions? **YES**

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

The quantity of water is restricted to beneficial use at the place of use described, and is subject to all other conditions and limitations contained in Certificate 36771 and any related decree. – **This was done because both well serve the same area and are located on the same tax lot as each other.**

The quantity of water diverted at the new additional point of appropriation (Well 2), together with that diverted at the original point of appropriation (Well 1), shall not exceed the quantity of water lawfully available at the original point of appropriation (Well 1). – **the points of use has not changed, so water usage hasn't changed either.**

Water shall be acquired from the same aquifer (water source) as the original point of appropriation. – **These wells are on the same tax lot and very similar depths, so they should be in the same aquifer.**

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**SECTION 6
ATTACHMENTS**

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Provide a list of any additional documents you are attaching to this report:

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ATTACHMENT NAME	DESCRIPTION
MARI 63906	Well 2 well log
Well Drillers Report	Well 1 well log
Claim of Beneficial Use Map	Claim of Beneficial Use Map (Submitted Separately)

**SECTION 7
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 polyester film at a scale of 1" = 1320 feet, 1" = 400 feet, or the original full-size scale of the county assessor map for the location.

For the purpose of this Claim, the map identifying the location of the place of use does not require a new survey. The location of the place of use identified on the Claim map should be based on the original right of record at the time the transfer final order was issued. In transfers approved for additional points of appropriation, the original points must be identified the map based on the original right of record at the time the transfer final order was issued.

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.

An aerial image in GIS accessed 7/28/21 was used for the basis of mapping as well as a site visit. The GIS service layer credit info is shown below for reference. There is not specific identification number.

Service Layer Credits: Sources: Esri, HERE, Garmin, USGS, Intermap, INCREMENT P, NRCan, Esri Japan, METI, Esri China (Hong Kong), Esri Korea, Esri (Thailand), NGCC, (c) OpenStreetMap contributors, and the GIS User Community
Source: Esri, DigitalGlobe, GeoEye, Earthstar Geographics, CNES/Airbus DS, USDA, USGS, AeroGRID, IGN, and the GIS User Community

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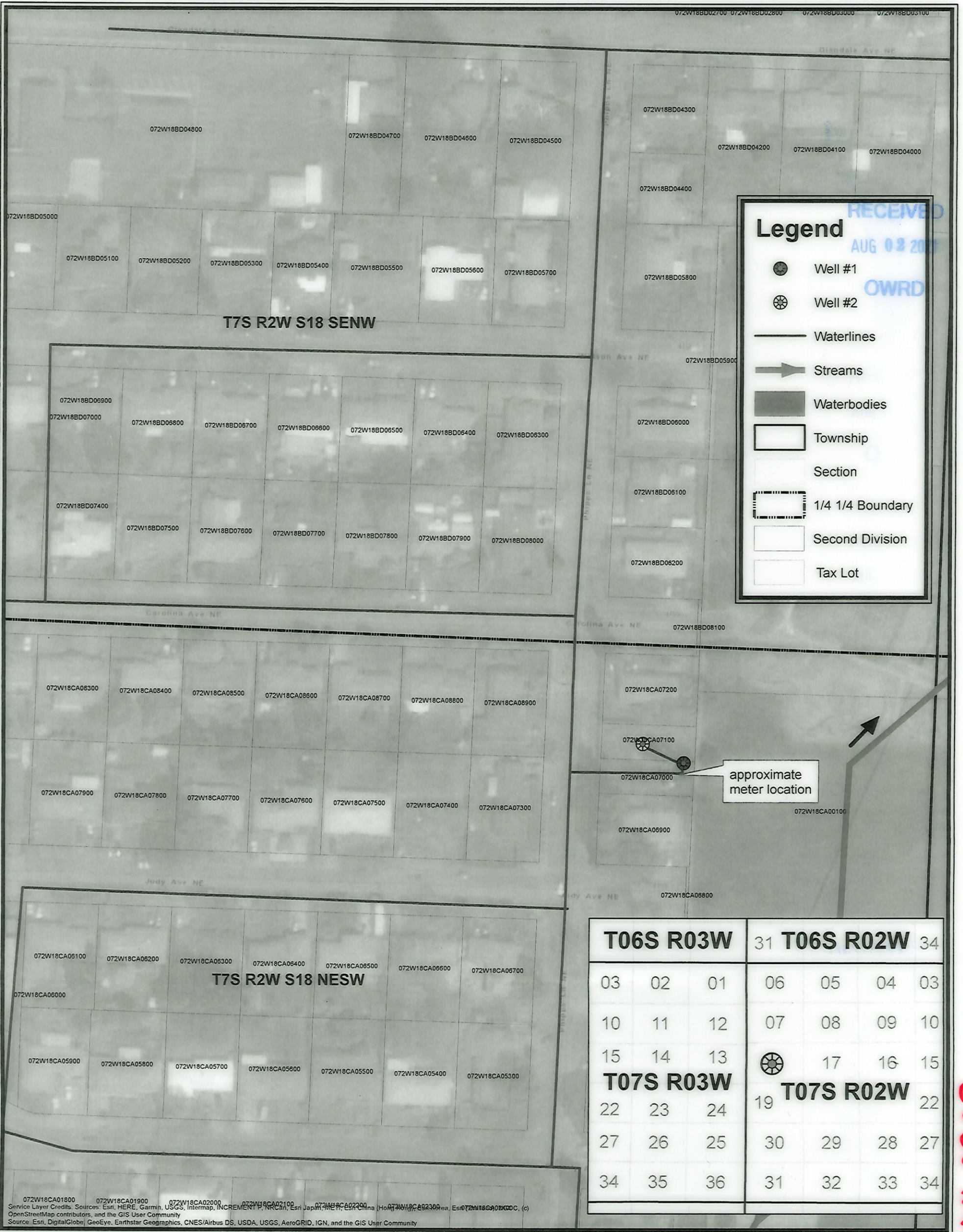
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Map Checklist

Please be sure that the map you submit includes ALL the items listed below.
(Reminder: Incomplete maps and/or claims may be returned.)

- Map on polyester film
- Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map) It is at 1" = 100 ft. because the other scales are too big to show the details of the system.
- Township, Range, Section, Donation Land Claims, and Government Lots
- ~~If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters~~
- ~~Locations of fish screens and/or fish by-pass devices in relationship to point of diversion~~
- Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- ~~Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.) *Not required for this type of Claim of Beneficial Use~~
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- ~~Source illustrated if surface water~~
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature



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Legend

- Well #1
- Well #2
- Waterlines
- Streams
- Waterbodies
- Township
- Section
- 1/4 1/4 Boundary
- Second Division
- Tax Lot

approximate
meter location

T06S R03W			31	T06S R02W			34
03	02	01	06	05	04	03	
10	11	12	07	08	09	10	
15	14	13					
T07S R03W							
22	23	24	19		17	16	15
			T07S R02W				22
27	26	25	30	29	28	27	
34	35	36	31	32	33	34	



TOWNSHIP 7S RANGE 2W SECTION 18 NE 1/4 OR SW 1/4
 POINT OF APPROPRIATION 1: NORTH 16° 10' EAST 3,129 FEET FROM SE CORNER TOWNER SAVAGE DLC37.
 POINT OF APPROPRIATION 2: 44° 57' 43.81"N, 122° 58' 49.56"W
 Disclaimer: This map is not intended to provide legal dimensions or locations of property ownership lines.

CERTIFIED WATER RIGHT EXAMINER
 898340WRE
Natalie Jennings
 NATALIE CANNON JENNINGS
 JUNE 03, 2016
 STATE OF OREGON
 RENEWS: 6/30/23

COBU MAP # 1304

	Claim of Beneficial Use Map	Lombard Water System	T-13281	1
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