

CWRE Claims of Beneficial Use Intake Form

CWRE: GARY KAISER

"A" DATE: N/A

"B" DATE: N/A

"C" DATE: EXTENDED TO OCTOBER 1, 2007

Application # N/A

Permit # N/A

Transfer # 8106

Date 9/26/2007

Reviewer J W GAINNEY

Map Review:

YES Map on mylar/polyester film (OAR 690-014-0170(1) & 310-0050(1)(b))

YES Application & permit #; or transfer # (OAR 690-014-0100(1))

YES Disclaimer (OAR 690-014-0170(5))

YES North arrow (OAR 690-310-0050(2)(c))

YES CWRE stamp and signature (OAR 690-014 & 310-0050)

YES Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map) (014 & 310)

YES Township, range, section, and tax lot numbers (OAR 690-310-0050(4))

YES Source illustrated if surface water (OAR 690-014-0170(3))

YES Point(s) of diversion or appropriation (illustrated) (OAR 690-014(4) & 690-310-0050)

YES Point(s) of diversion or appropriation (coordinates)(OAR 690-014(4) & 690-310-0050)

YES Conveyance structures illustrated (pump, pipelines, ditches, etc.) (OAR 690-310-0050)

YES Description of the location, in relation to the point of diversion or appropriation, of any fish screens, by-pass devices, and measuring devices required (OAR 690-014(4))

YES Place of use (1/4 1/4, or projected 1/4 1/4 lines within DLCs, or Gov Lots; if irrigation, # of acres in each subdivision; if for domestic or human consumption, location of dwelling or spigot) (OAR 690-310-0050, 690-014, 690-380-6010)

Report Review:

YES On form or format provided by the Department (OAR 690-014-0100(1))

YES Application & permit #; or transfer # (OAR 690-014)

YES Ownership information (OAR 690-014)

YES Date of survey (OAR 690-014)

YES Person interviewed (OAR 690-014)

YES County (OAR 690-014)

YES Tax lot information (OAR 690-014)

YES Description of conveyances system (from POD to POU) (OAR 690-014-0100)

YES Source(s) of water (OAR 690-014-0100)

YES Point of diversion/appropriation location (OAR 690-014-0100)

YES Use, period of use, and rate for use (OAR 690-014-0100)

YES Place of use location (OAR 690-014-0100)

YES Type of use (OAR 690-014-0100)

YES Extent of use (OAR 690-014-0100)

YES Rate and Duty (OAR 690-014-0100)

YES Diversion rate for each use (OAR 690-014-0100)

YES Diversion works description (pump make, serial model, capacity, and description) (OAR 690-014-0100)

YES System capacity (OAR 690-014-0100)

YES Calculated capacity of system (required)

_____ Measured amount of use (optional)

YES Permit/Transfer Final Order Conditions (OAR 690-014-0100)

YES Time limits

_____ Initial water level measurements

_____ Annual static water level measurements

_____ Measurement, recording, and reporting

_____ Meter/measuring device

_____ Water use reporting

YES Fish screening and/or by-pass

COMMENT: Approval letter from ODFW attached.

_____ Pump test (ground water)

_____ Other conditions

YES CWRE stamp and signature (OAR 690-014-0100)

YES Signature(s) of permittee or transfer holder (OAR 690-014-0100)

DEF = deficient

N/A = Not Applicable

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.

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

Gerry Clark by e-mail at Gerald.E.CLARK@wrdd.state.or.us or by phone at 503-986-0811,

Or Jerry Gainey by e-mail at Jerry.W.GAINEY@wrdd.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.wrdd.state.or.us/OWRD/mgmt_reimbursement.shtml.

**This box can be deleted

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

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-3106	

2. Property owner (current owner information)

a. Individuals

Name	ALLEN & KIM MARSHALL	
Mailing Address	637 BUTTE FALLS - PROSPECT Hwy.	
City/State/Zip	PROSPECT, OR 97536	
Phone #	(541) 560-3500	
Fax #	CELL (541) 890-6592	
e-mail address		

b. Businesses/Organizations

Name	NA	
Contact Person and Title		
Mailing Address		
City/State/Zip		
Phone		
Fax		
e-mail		

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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	ALLEY MARSHALL	KIM MARSHALL
Mailing Address	637 BUTTE FALLS - PROSPECT Hwy.	637 BUTTE FALLS - PROSPECT Hwy.
City/State/Zip	PROSPECT, OR 97536	PROSPECT, OR 97536

d. Businesses/Organizations

Name	LIA
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
ALLEY MARSHALL	8-15-05	PROPERTY OWNER
ALLEY MARSHALL	8-28-07	PROPERTY OWNER

6. County:

JACKSON

7. Tax Lot Information:

Tax map number	Tax lot number
32 3E 33	2500
32 3E 34	500

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

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

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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:

A 200 HP DIESEL MOTOR AND 10" SUBMERSIBLE PUMP WAS INSTALLED AT P.O.D. #2 AS SHOWN ON THE APPLICATION MAP, NEW P.O.D ON THE BENEFICIAL USE MAP. P.O.D. #1 AS SHOWN ON THE APPLICATION MAP WAS NOT INSTALLED. THE MAIN LINE IS 3115' OF BURIED 10" P.V.C. PIPE. THERE ARE 15 VALVES WITH 10" OPENERS IN THE MAIN LINE. THE 108.8 ACRES ARE FLOOD IRRIGATED FROM THE VALVE IN THE MAIN LINE USING THE EXISTING OPEN DITCH SYSTEM TO CONVEY THE WATER. THESE DITCHES HAVE BEEN HISTORICALLY USED TO IRRIGATE THE BALCON. IRRIGATION IS ON A 2 WEEK ROTATION WITH ONE VALVE BEING OPEN AT A TIME.

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)
NEW POINT OF DIVERSION		

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
RED BLANKET CREEK	ROGUE 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
SW 1/4 NW 1/4 SEC. 34, T32S, R2E, W.17	100' N. & 550' E. FROM THE W. 1/4 COR SECTION 34

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 & HAY	APRIL 1 - OCT. 31	

Total Quantity of Water 1600 GPM MEASURED

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
		SW NE	33	32 S.	2 E.	IRR	20.1	
		NW SE	33	32 S.	2 E.	IRR	6.0	
		NE SE	33	32 S.	2 E.	IRR	20.0	
		SE NE	33	32 S.	2 E.	IRR	40.0	
		SW NW	34	32 S.	2 E.	IRR	22.7	

Total Acres Irrigated 108.8

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
NA								

2. Provide calculations in the box below:

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
CATERPILLAR Pump, LLC.	X	X	SUBMERSIBLE	10"	10"

INFORMATION NOT AVAILABLE = X

2. Motor information

Brand	Model	Horsepower	Max RPM	Voltage
ISUZU	X	200	1300	DIESEL

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

Make	Serial #	Condition (working or not)	Current meter reading	Notes
BLUE-WHITE INDUSTRIES	F-2000	WORKING	19,400 GAL.	

4. Measurement device description

Device description	Condition (working or not)	Notes
NA		

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
16,200	19,400	2 MINUTES	3,200 GAL

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
200	50 ASS.	0	36'	3877 GPM

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7. Provide pump calculations in the box below:

$$\frac{7.04 \times 200}{36 + 127} = \frac{1408}{163} = 8.638 \text{ cfs} \times 448.8 = 3877 \text{ GPM}$$

**This box can be deleted from the form

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

or

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

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
10"	3115'	PVC	Buried

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9. Lateral or handline information

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

10. Sprinkler information Make and model:

Make	Model	Size	Operating psi	Sprinkler output	Maximum number used	Total sprinkler output
NA						

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:

LATERALS ARE ALL EXISTING OPEN DITCHES THAT HAVE HISTORICALLY BEEN USED TO IRRIGATE THE RAUCH

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		MAY 2003	BEGAN INSTALLING 10" PVC BURIED MAIN LINE
Complete construction		JUNE 2004	COMPLETED INSTALLING 10" MAIN AND PUMP AND FISH SCREEN
Complete application of water	with final order 10-1-07	AUG. 24, 2007	INSTALLED ODFW APPROVED FISH SCREEN 8-9-07 AND METER ON 8-24-07

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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

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c. Provide the date the meter was installed:

AUGUST 24, 2007

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
NA		

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) NO NA

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

c. When was the fish screening installed?

Date	By whom
8-9-07	ALLEN MARSHALL

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)

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1. Describe the by-pass device:

When installed	By whom	Approved by ODFW	Description
NA			

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

RECORD AREA IRRIGATED IN THE SW 1/4 NW 1/4 SEC. 34 PER PERMIT B767, CERT. 7905 = 16.0 AC., 1.6 AC. OF THIS PERMIT FALLS OUTSIDE THE MARSHALL PROPERTY AND WITHIN PP&L PROPERTY.
 RECORD AREA IRRIGATED IN THE SW 1/4 NW 1/4 SEC. 34 PER PERMIT No. 5983, CERT. 7174 = 8.0 AC., 0.7 AC. OF THIS PERMIT FALLS OUTSIDE THE MARSHALL PROPERTY AND WITHIN PP&L PROPERTY.
 THIS WILL CHANGE THE TOTAL MAXIMUM RATE ALLOWED BY PERMITS FROM 1.54 CFS TO 1.51 CFS

Attachments

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

Attachment name	Description
USE MAPS - SHEET 182	MAPS PROGRAM BY CURB
FISH SCREEN INSPECTION FORM	ODFW FISH SCREEN INSPECTION FORM

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
NEW P.O.D.	1.51 CFS (678 GPM)	8.638 CFS (3877 GPM)	3.565 CFS (1600 GPM)	IRR.	111.1	108.8

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.

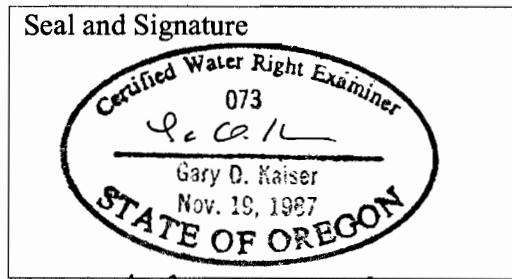
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In the following box, provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial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

A NIKOL DTM 530 TOTAL STATION WAS USED TO MEASURE THE SURVEY TIE FROM THE W. 1/4 COR. SEC. 24 TO THE P.O.D. ALSO TO MEASURE THE LENGTH OF THE 10" PVC MAIN LINE AND THE CLEFT.

CWRE Statement, Seal and Signature

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



Exp. 6-30-09

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.

Allen Marshall 9-19-07
Signature Print or type name Date

Kim Marshall 9-19-07
Signature Print or type name Date

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