

**CLAIM OF
BENEFICIAL USE
for Transfer with Multiple
Changes – Surface Water**



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

A fee of \$230 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.

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A separate form shall be completed for each transfer.

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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 503-979-9103.

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 involving multiple changes.

YES

Mark all that apply:

- | | |
|--|--|
| 1. <input checked="" type="checkbox"/> Change in POD(s) or Additional POD(s) | 2. <input checked="" type="checkbox"/> Change in Place of Use |
| 3. <input type="checkbox"/> Change in Character of Use | 4. <input type="checkbox"/> Change in Character of Use – Reservoir |

A separate section will be completed for each type of change authorized in the transfer final order.

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1. File Information

APPLICATION #
T-10898

2. Property Owner (current owner information)

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APPLICANT/BUSINESS NAME Blue Mountain Angus, LLC Steve and Carolyn Mullen		PHONE NO. 541-820-3371	ADDITIONAL CONTACT NO.
ADDRESS 64444 Indian Creek Road			
CITY Prairie City	STATE OR	ZIP 97869	E-MAIL

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 Blue Mt. Angus, LLC Steve and Carolyn Mullin		
ADDRESS 64444 Indian Creek Road		
CITY Prairie City	STATE OR	ZIP 97869

4. Date of Site Inspection:

9/3/2022

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Dan Mullin	9/3/ 2022	Son and ranch manager

6. County:

Grant

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)):

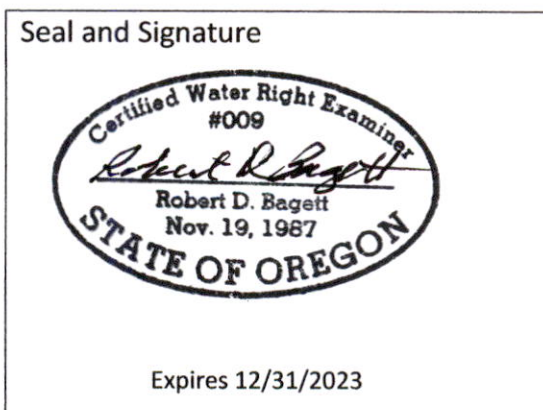
OWNER OF RECORD NA		
ADDRESS NA		
CITY NA	STATE NA	ZIP NA

Add additional tables for owners of record as needed

SECTION 2 SIGNATURES

CWRE Statement, Seal and Signature

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



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CWRE NAME Robert D. Baggett	PHONE NO. 541-620-0717	ADDITIONAL CONTACT NO. 541-575-1251
ADDRESS P. O. Box 476		
CITY John Day	STATE OR	ZIP 97845
E-MAIL bob bagett@gmail.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
	Steve Mullin	Member	9-23-22
	Carolyn Mullin	Member	9-23-22

SECTION 3

Changes Made

Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

Change #1

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New or Additional Point of Diversion

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Change in POD(s) or Additional POD(s)

Did the transfer order authorize a change in the points of diversion or additional points of diversion?

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YES

If "NO", this Section can be deleted.

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

POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)	SOURCE
POD #1	Indian Creek

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final?

NO

If yes, describe below.

(e.g. "The order allowed three new/additional points of diversion. The water user only developed one of the points.")

NA

3. Claim Summary: NEW OR ADDITIONAL POD NAME OR #	MAXIMUM RATE AUTHORIZED IN ORDER	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
POD # 1	1.5 cfs	134.7 cfs	NA

System Description

Are there multiple new or additional Points of Diversion (POD)?

YES

If "YES" you will need to copy and complete Sections A, B, or C in this Section for each POD. **RECEIVED**

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

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Pod #1

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A. POD System Information

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

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
NA					

2. Motor Information

MANUFACTURER	HORSEPOWER
NA	

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
NA				

4. Provide pump calculations:

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 (IN CFS)
NA			

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

6. Additional notes or comments related to the system:

B. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the diversion involve a gravity flow pipe?

NO

If "NO", items 2 through 4 relating to this section may be deleted.

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C. Gravity Flow Canal or Ditch

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Does the diversion involve a gravity flow ditch or canal?

YES

If "NO", items 2 through 4 relating to this section may be deleted.

2. Complete the table:

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 RATE (IN CFS)
Earth	10'	7'	2'	0.02	0.8'	112'	0.007	134.7 CFS

3. Provide calculations:

Hillis Ditch--See attached Exhibit A

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

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)
NA	NA	NA	NA

Attach measurement notes.

Change #2

Change in Place of Use

Did the transfer order authorize a change in the place of use?

YES

If "NO", this Section can be deleted.

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
40	40

2. Variations:

Was the use developed differently from what was authorized by the transfer final order?

NO

If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

NA

SECTION 3

Changes Made

Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

Change #1

New or Additional Point of Diversion

Change in POD(s) or Additional POD(s)

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Did the transfer order authorize a change in the points of diversion or additional points of diversion?

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YES

If "NO", this Section can be deleted.

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

POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)	SOURCE
POD #2	Indian Creek

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final?

NO

If yes, describe below.

(e.g. "The order allowed three new/additional points of diversion. The water user only developed one of the points.")

NA

3. Claim Summary: New OR ADDITIONAL POD NAME OR #	MAXIMUM RATE AUTHORIZED IN ORDER	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
POD #2	1.5 CFS	226.5 cfs	NA

System Description

Are there multiple new or additional Points of Diversion (POD)?

YES

If "YES" you will need to copy and complete Sections A, B, or C in this Section for each POD.

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

Pod #2

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A. POD System Information

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

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
NA					

2. Motor Information

MANUFACTURER	HORSEPOWER
NA	

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
NA				

4. Provide pump calculations:

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 (IN CFS)
NA			

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

6. Additional notes or comments related to the system:

B. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the diversion involve a gravity flow pipe?

NO

If "NO", items 2 through 4 relating to this section may be deleted.

Attach measurement notes.

C. Gravity Flow Canal or Ditch

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Does the diversion involve a gravity flow ditch or canal?

YES

If "NO", items 2 through 4 relating to this section may be deleted.

2. Complete the table:

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 RATE (IN CFS)
Earth	11'	6'	2.5'	0.03	4.7'	194'	0.024	226.5 CFS

3. Provide calculations:

John Long Ditch--See attached Exhibit B.

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

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)
NA	NA	NA	NA

Attach measurement notes.

Change #3

Change in Character of Use

Did the transfer order authorize a change in character of use?

If "NO", this Section can be deleted.

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NO

Change #4

Change in Character of Use – Reservoir

Did the transfer order authorize a change in character of use for a reservoir?

NO

If "NO", this Section can be deleted.

SECTION 4

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 AUTHORIZED CHANGES WERE COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	September 3, 2020	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2021	October 1, 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

If "NO", you may delete the following table.

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?

YES

If "NO", items b through f relating to this section may be deleted.

Reminder: 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.

b. Has a meter been installed?

NO

c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
NA					

If a meter has been installed, items d through f relating to this section may be deleted.

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? YES

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
Eric Julsrud	Watermaster	9/4/2020

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED
POD #1-Nuway flume with staff gauge	Working	9/4/2020
POD #2-Nuway flume with staff gauge	Working	9/4/2020

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4. Recording and reporting conditions

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

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

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5. Fish Screening

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion? YES

If "NO", items b through e relating to this section may be deleted.

Reminder: If fish screening devices were required, the COBU map must indicate their location in relation to the point of diversion.

b. Has the fish screening been installed? YES

c. When was the fish screening installed?

DATE	BY WHOM
POD #1 --- 1998	ODFW
POD #2 --- 1998	ODFW

Reminder: If the permit or transfer final order was issued on or after February 1, 2011, the fish screen is required to be approved by the Oregon Department of Fish and Wildlife regardless of the rate of diversion.

d. If the diversion **involves a pump** and the **total** diversion rate of all rights at the point of diversion is less than 225 gpm (0.5 cfs) and the permit was issued prior to February 1, 2011:

- Has the self-certification form previously been submitted to the Department? **NA**

If not, go to <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>, complete and attach a copy of the 'ODFW Small Pump Screen Self Certification' form to this claim, and send a copy of it to the Oregon Department of Fish and Wildlife (ODFW).

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. The ODFW self certification form needs to have been previously submitted or be attached to this form.

e. If the diversion does **not involve a pump** or the **total** diversion rate of all rights at the point of diversion is 225 gpm (0.5 cfs) or greater:

- Has the ODFW approval been previously submitted?

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If not, contact and work with ODFW to ensure compliance. To demonstrate compliance, provide signed documentation from ODFW. A form is available at:

<https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. In order to receive a favorable approval, the ODFW/WRD "Fish Screen Inspection" form needs to have been previously submitted or be attached to this form.

6. By-pass Devices

a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion? **YES**

If "NO", items b and c relating to this section may be deleted.

Reminder: If by-pass devices were required, the COBU map must indicate their location in relation to the point of diversion.

b. Have by-pass devices been installed? **YES**

c. Describe the diversion works as related to whether a by-pass device is installed or unnecessary:

(Provide a letter from ODFW indicating the device is approved or is unnecessary. If there is no letter from ODFW, explain whether or not a by-pass device is necessary.)

DESCRIPTION (E.G. "ODFW HAS APPROVED THE BY-PASS DEVICE" OR "NO BY-PASS DEVICE IS NECESSARY BECAUSE THERE IS A DIRECT DIVERSION FROM THE STREAM VIA A PUMP ON RIVER LEFT STREAM BANK WITH FOOT VALVE DESCENDING DIRECTLY INTO NATURAL POOL.") IN ADDITION, YOU MAY ATTACH PHOTOS TO THIS CLAIM.	IF INSTALLED (DATE)	IF INSTALLED, BY WHOM
ODFW HAS APPROVED THE BY-PASS DEVICE-- POD #1.	1998	ODFW
ODFW HAS APPROVED THE BY-PASS DEVICE-- POD #2.	1998	ODFW

7. Other conditions required by the transfer final order or extension final order:

- a. Was the water user required to restore the riparian area if it was disturbed? YES
- b. Was a fishway required? NO
- c. Other conditions? NO

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

a. Riparian areas were returned to their natural state.

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SECTION 5
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
Exhibit A	Ditch Capacity Calculations- Hillis Ditch
Exhibit B	Ditch Capacity Calculations- John Long Ditch
Exhibit C	ODFW Fish Screen Approval Letter-- Hillis Ditch
Exhibit D	ODFW Fish Screen Approval Letter—John Long Ditch

SECTION 6
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 diversion, 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.

EDM traverse survey.

Map Checklist

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Please be sure that the map you submit includes ALL the items listed below.

(Reminder: Incomplete maps and/or claims may be returned.)

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

Ditch Capacity Calculator

using Manning's Formula

Data Entry (fill in underlined blanks)

Top Width = 10 feet
Bottom Width = 7 feet
Depth = 2 feet
Fall = 0.8 feet per 112 feet of distance
Grade = 0.00714286 , or 0.7%
n Factor = 0.02

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Results calculated

Area of cross-section = 17 square feet
Wetted Perimeter = 12 feet
Hydraulic Radius = 1.41667
Velocity = 7.921 feet per second

Calculated Ditch Capacity = 134.7 cubic feet per second

BLUE MOUNTAIN ANGUS, LLC

T-10898

HILLIS DITCH

EXHIBIT A

Ditch Capacity Calculator

using Manning's Formula

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Data Entry (fill in underlined blanks)

Top Width = 11 feet
Bottom Width = 6 feet
Depth = 2.5 feet
Fall = 4.7 feet per 194 feet of distance
Grade = 0.0242268, or 2.4%
n Factor = 0.03

Results calculated

Area of cross-section = 21.25 square feet
Wetted Perimeter = 13.0711 feet
Hydraulic Radius = 1.62573
Velocity = 10.660 feet per second

Calculated Ditch Capacity = 226.5 cubic feet per second

BLUE MOUNTAIN ANGUS, LLC

T-10898

JOHN LONG DITCH

EXHIBIT B

Checklist for Claims of Beneficial Use Received at CSG Counter

Application #:	WRD Reviewer:
Transfer #: T-10898	
Date Received: 9-26-2022	
CWRE Name: Robert Baget	
Priority Date (s): 1877/1910, 1905, June 1, 1910	

Fees Required:

- ☐ YES ☒ NO ☐ A fee of \$230 must accompany this form for permits with priority dates of July 9, 1987, or later.
- ☐ YES ☒ NO ☐ A fee of \$230 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))

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)

MONEY SLIP

DATE:		RECEIPT #:	
RECEIVED FROM:		APPLICATION:	
		PERMIT	
		TRANSFER	
CASH CHECK #	OTHER IDENTIFY	TOTAL REC'D \$	
<input type="checkbox"/>	<input type="checkbox"/>		
TREASURY: 4178 MISC CASH/ACCT.			
COIN	OTHER		
IDENTIFY	IDENTIFY		
4143 Interest Letter	4204 Map Water Right Plan	4204 Date Water	
TREASURY: 4216 WAD OPERATING ACCT.			
MISCELLANEOUS			
6407 COPY & TAPE FEES	4611		
6410 RESEARCH FEES			
6408 MISC REVENUE (IDENTIFY)			
75163 DEPOSIT LHS (IDENTIFY)			
6240 EXTENSION OF TIME			
WATER RIGHTS			
6201 SURFACE WATER	Right Fee	6204	RECORD FEE
6203 GROUNDWATER			
6205 TRANSFER			
WELL CONSTRUCTION			
6216 WELL DRILL CONSTRUCTION	SLAM FEE	6219	RECORD FEE
6202 LANDOWNER'S PERMIT		6220	
OTHER	IDENTIFY	COBU	3720.00
TREASURY: 6407 HYDROLOGIC FEE			
6213 POWER LICENSE FEE (PROVIDER)			
6221 HYDRO LICENSE FEE (PROVIDER)			
HYDRO APPLICATION			
SPECIAL INSTRUCTIONS:			
<input type="checkbox"/> RETURN TO APPLICANT - LETTER ATTACHED			

Groundwater File Review:

- ☐ Pump Test not required (Priority Date prior to December 20, 1988) *If no, include pump test flyer w/acknowledgment letter
- ☐ Pump Test required (Priority Date on or after December 20, 1988)
- ☐ Pump Test submitted
- ☐ Pump Test not submitted



Oregon

Kate Brown, Governor

Water Resources Department

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

Fax (503) 986-0904

9/27/2022

Blue Mountain Angus LLC
ATTN: Steve and Carolyn Mullen
64444 Indian Creek Rd
Prairie Cit, OR 97869

Dear Applicant,

On 9-21-2022, the Water Resources Department received the Claim of Beneficial Use (COBU) for the following files:

Application T-10898

The COBU included a report and map. In the future the Department will review your submittal. At that time we will review these items and provide a final certificate, proposed certificate, or a request for additional information.

If you are interested in having your COBU reviewed sooner, you may pay to have your file processed immediately, using the Reimbursement Authority program, which is described at: <https://www.oregon.gov/owrd/programs/waterrights/ra/pages/default.aspx>.

Customer Service phone: (503) 986-0900

Enclosed is your receipt for the \$230.00 COBU recording fee.

If you sell the property, please contact the Department, or have the new owners contact the Department about the need to file an assignment.

Sincerely,
Dante Luongo

Cc: file



Oregon

Department of Fish and Wildlife

John Day Fish Screening and Passage
357 Patterson Bridge Rd.

P.O. Box 515

John Day, OR 97845

Voice: 541-575-0561

FAX (541) 575-0868

www.dfw.state.or.us/

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SEP 26 2022

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September 19, 2022

Blue Mountain Angus, LLC
Steve and Carolyn Mullin
64444 Indian Creek Road
Prairie City, OR 97869

Dear Mr. and Mrs. Mullin,

Your fish screen was inspected on 9/19/2022. In reference to water right transfer file number T-10898 this letter confirms that a National Marine Fisheries Service criteria fish screen as approved by ODFW is located on the property near GPS coordinates: 44.38368, -118.74514, Hills Ditch.

In regard to the inspection of the fish screen located on Indian Creek, the following has been determined:

1. The screen located at coordinates 44.38368, -118.74514 is a 7'x24" ODFW shop-built rotary drum screen.
2. This screen is approved for water use up to 1,719.29 GPM or 3.83 CFS.
3. All screen and pump configurations meet National Marine Fisheries Service criteria at the time of inspection, any changes or modifications to the configurations will not be covered by this certification letter.
4. This screen utilizes a by-pass return pipe.

Please contact me if you have any questions regarding this letter.

Sincerely,

Nathaniel Ashley
Fish Screening and Passage Coordinator

CC: Oregon Water Resources Department

EXHIBIT C



Oregon

Department of Fish and Wildlife

John Day Fish Screening and Passage

357 Patterson Bridge Rd.

P.O. Box 515

John Day, OR 97845

Voice: 541-575-0561

FAX (541) 575-0868

www.dfw.state.or.us/

September 19, 2022

Blue Mountain Angus, LLC
Steve and Carolyn Mullin
64444 Indian Creek Road
Prairie City, OR 97869

Dear Mr. and Mrs. Mullin,

Your fish screen was inspected on 9/19/2022. In reference to water right transfer file number T-10898 this letter confirms that a National Marine Fisheries Service criteria fish screen as approved by ODFW is located on the property near GPS coordinates: 44.37733, -118.74244, John Long Ditch.

In regard to the inspection of the fish screen located on Indian Creek, the following has been determined:

1. The screen located at coordinates 44.37733, -118.74244 is a 5'x18" ODFW shop-built rotary drum screen.
2. This screen is approved for water use up to 888.82 GPM or 1.98 CFS.
3. All screen and pump configurations meet National Marine Fisheries Service criteria at the time of inspection, any changes or modifications to the configurations will not be covered by this certification letter.
4. This screen utilizes a by-pass return pipe.

Please contact me if you have any questions regarding this letter.

Sincerely,

Nathaniel Ashley
Fish Screening and Passage Coordinator

CC: Oregon Water Resources Department



RECEIVED

SEP 26 2022

OWRD

EXHIBIT D