

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 **RECEIVED**
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.

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.

1. File Information

APPLICATION # T-12832

2. Property Owner (current owner information)

APPLICANTS Gregg and Wilma Hyde		PHONE NO. 541-846-6469	ADDITIONAL CONTACT NO.	
ADDRESS 501 Panther Gulch Road				
CITY Williams	STATE Oregon	ZIP 97544	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 Gregg and Wilma Hyde				
ADDRESS 501 Panther Gulch Road				
CITY Williams	STATE Oregon	ZIP 97544		

4. Date of Site Inspection:

September 13, 2022

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Gregg Hyde	Sept. 13, 2022	Owner

6. County:

Josephine

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				
CITY	STATE	ZIP		

Add additional tables for owners of record as needed

**SECTION 2
SIGNATURES**

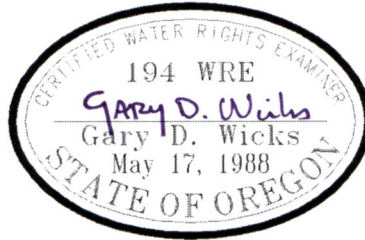
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CWRE Statement, Seal and Signature

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



Renewal Date: 6-30-24

CWRE NAME Gary D. Wicks		PHONE NO. 541-479-3436	ADDITIONAL CONTACT NO. 541-660-9912
ADDRESS 311 NE "D" Street			
CITY Grants Pass	STATE Oregon	ZIP 97526	E-MAIL gdwicks@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
	Gregg Hyde	Owner	9-21-22
	Wilma Hyde	Owner	9/21/22

SECTION 3
Changes Made

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

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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? **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	East Fork Williams Creek
Spanish	East Fork Williams Creek
APOD	East Fork Williams Creek via Spanish Ditch

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	0.30 cfs	0.35 cfs	NA
Spanish	0.80 cfs	2.67 cfs	NA
APOD	0.20 cfs	0.26 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.

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POD Name or Number this section describes:

POD 1

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
Jacuzzi	10DB2-5	6H8/PT11	Centrifugal	3"	2"

2. Motor Information

MANUFACTURER	HORSEPOWER
Jacuzzi	10

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
10	40 psi	6'	80'	0.35 cfs

4. Provide pump calculations:

$$Q = \frac{10(6.61)}{6 + 101.6 + 80} = 0.35 \text{ cfs}$$

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)
7663700 gal.	NA		

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

6. Additional notes or comments related to the system:

The system had been shut down by the Watermaster for the season.

B. Gravity Flow Pipe

1. Does the diversion involve a gravity flow pipe? **NO**

C. Gravity Flow Canal or Ditch

1. Does the diversion involve a gravity flow ditch or canal? **NO**

POD Name or Number this section describes:

APOD

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
Berkeley	B27PL	M12570	Centrifugal	2.5"	2"

2. Motor Information

MANUFACTURER	HORSEPOWER
Balcor	10

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
10	60 psi	2'	100'	0.26 cfs

4. Provide pump calculations:

$$Q = \frac{10(6.61)}{2 + 152.4 + 100} = 0.26 \text{ cfs}$$

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)
6128100 gal.	NA		

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

6. Additional notes or comments related to the system:

The system had been shut down by the Watermaster for the season.

B. Gravity Flow Pipe

1. Does the diversion involve a gravity flow pipe? **NO**

C. Gravity Flow Canal or Ditch

1. Does the diversion involve a gravity flow ditch or canal? **NO**

POD Name or Number this section describes:

SPANISH

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	NA		

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

6. Additional notes or comments related to the system:

The system had been shut down by the Watermaster for the season.

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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YES

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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?

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)
SEE	BELOW							

3. Provide calculations:

A concrete basin was constructed at the downstream end of the rotary fish screen assembly. This basin has stop boards on the outlet to provide a pool deep enough for the APOD pump suction. The capacity of the opening above the normal stop board height was computed as the ditch capacity using the flow equation for a sharp crested weir. The opening is 1.62 ft. wide and 0.65 ft. high. The pool depth upstream of the stop boards is 1.30 ft. (See Photo Page 5)

$$Q = C_d L_e H^{1.5}$$

$$H = 0.65' \quad L_e = L - 0.2H = 1.62 - 0.2(0.65) = 1.49' \quad C_d = 3.22 + 0.4(H/P) = 3.22 + 0.4(.65/1.30) = 3.42$$

$$Q = 3.42(1.49)(0.65)^{1.5} = 2.67 \text{ cfs}$$

NOTE:

A Parshall Flume was installed in Spanish Ditch by the Watermaster 15 ft. downstream from APOD. The normal flow through the flume is 0.8 cfs during the irrigation season when the pump at APOD is running.

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			

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
2.0 acres	2.0 acres

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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.")

Change #3

Change in Character of Use

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

NO

If "NO", this Section can be deleted.

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	April 2, 2020	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2021	Meters were installed September 15, 2021

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

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NO

2. Is there an extension final order(s)?
If "NO", you may delete the following table.

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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? **YES**

c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POD1	McCrometer	21-07621-04	working	7663700 gal.	Sept. 15, 2021
APOD	McCrometer	21-07622-04	working	6128100 gal.	Sept. 15, 2021

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

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.

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
2012?	Rotary drum screen and bypass by ODFW
March 12, 2021	Owner

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? **YES**
(See attached letter from ODFW: cc to Corey Courchane)

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	IF INSTALLED (DATE)	IF INSTALLED, BY WHOM
(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.		
Rotary drum screen with bypass	2012?	RECEIVED SEP 27 2022 OWRD 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? **NO**
- 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):

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**SECTION 5
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Letter	Fish screen/bypass approval letter from ODFW: Sept. 20, 2021
Photo Page 1	POD1 pump, meter and fish screen
Photo Page 2	APOD pump and fish screen
Photo Page 3	POD1 and APOD Flow Meters
Photo Page 4	"SPANISH" POD: 18" HDPE Pipe in East Williams Creek
Photo Page 5	ODFW rotary drum screen
Map	Claim of Beneficial use Map

**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.

A traverse survey from the W1/4 Cor. of Sec. 11 to each of the POD's was used to establish their locations. The POU's were determined from Josephine County GIS imagery dated 2021 that had been rotated and scaled to fit the survey data.



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POD 1 Pump and Flow Meter



POD 1 Fish Screen in East Fork of Williams Creek



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APOD Pump in Spanish Ditch



APOD Pump and Flow Meter

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POD 1 Flow Meter



APOD Flow Meter

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18" HDPE Pipe Inlet at "Spanish" POD



"Spanish" POD

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Rotary Drum Screen at APOD



APOD Pump at Rotary Drum Screen

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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)
- 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.)
- 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



Oregon

Kate Brown, Governor

Department of Fish and Wildlife

Rogue Watershed District Office

1495 E Gregory Rd

Central Point, OR 97502-9430

(541) 826-8774

Fax: (541) 826-8776

www.myodfw.com

September 20, 2021



Gregg & Wilma Hyde
501 Panther Gulch Rd.
Williams, OR 97544

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Dear Gregg,

Regarding OWRD water right transfer T-12832, ODFW is satisfied that the requirements for fish screening have been met at all three POD's.

The details are as follows: the Spanish Ditch POD has a criteria-compliant rotary drum screen and bypass system capable of handling the extra water proposed in the transfer. The pump at POD 1 is properly screened and requires no fish bypass device. The pump at APOD takes water from within the Spanish Ditch, behind the existing rotary drum screen, so no additional screening or bypass device is necessary. Thank you.

Sincerely,

Rich Kilbane
SW Field Coordinator
Fish Screening and Passage Program
(541) 857-2421

Cc: Corey Courchane, OWRD

