

**CLAIM OF  
BENEFICIAL USE  
for Surface Water Permits  
claiming 0.1 cfs or less**



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

A fee of \$230 must accompany this form for permits  
with priority dates of July 9, 1987, or later.

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**SECTION 1  
GENERAL INFORMATION**

**1. File Information:**

|                                 |  |                                    |
|---------------------------------|--|------------------------------------|
| APPLICATION #<br><b>S-88926</b> | PERMIT # (IF APPLICABLE)<br><b>S-55379</b> | PERMIT AMENDMENT # (IF APPLICABLE) |
|---------------------------------|--|------------------------------------|

**2. Property Owner (current owner information):**

|   |                    |                     |                        |
|---|--------------------|---------------------|------------------------|
| APPLICANT/BUSINESS NAME<br><b>Bethany Garrett</b> |                    | PHONE NO.           | ADDITIONAL CONTACT NO. |
| ADDRESS<br><b>12963 Tiller Trail Hwy</b>          |                    |                     |                        |
| CITY<br><b>Days Creek</b>                         | STATE<br><b>OR</b> | ZIP<br><b>97479</b> | E-MAIL                 |

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

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

|  |                    |                     |  |
|--|--------------------|---------------------|--|
| PERMIT HOLDER OF RECORD<br><b>Mark and Sabrina Garrett</b> |                    |                     |  |
| ADDRESS<br><b>P.O. Box 2191</b>                            |                    |                     |  |
| CITY<br><b>Roseburg</b>                                    | STATE<br><b>OR</b> | ZIP<br><b>97470</b> |  |

|   |       |     |  |
|---|-------|-----|--|
| ADDITIONAL PERMIT HOLDER OF RECORD<br><b>NA</b> |       |     |  |
| ADDRESS   |       |     |  |
| CITY  | STATE | ZIP |  |

**4. Date of Site Inspection:**

**September 8, 2022**

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

| NAME            | DATE     | ASSOCIATION WITH THE PROJECT |
|-----------------|----------|------------------------------|
| Sabrina Garrett | 9/8/2022 | Permittee                    |
|                 |          |                              |

**6. County:**

Douglas

**7. If any property described in the place of use of the permit 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**

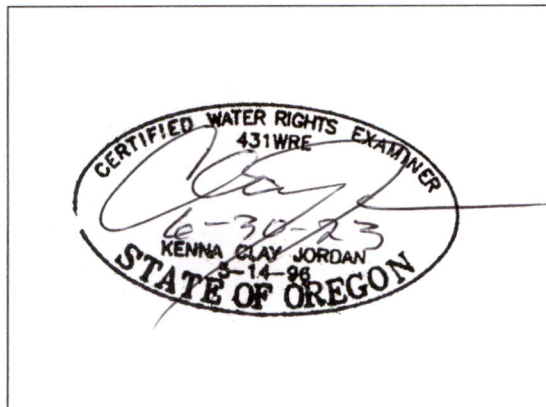
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CWRE Statement, Seal and Signature

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



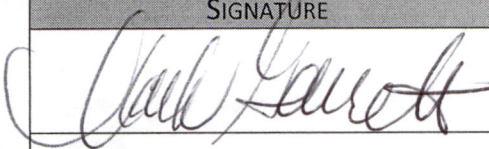
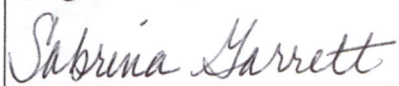
|                                       |                    |                                  |                        |  |
|---------------------------------------|--------------------|----------------------------------|------------------------|--|
| CWRE NAME<br><b>Kenna Clay Jordan</b> |                    | PHONE NO.<br><b>541 430-6926</b> | ADDITIONAL CONTACT NO. |  |
| ADDRESS<br><b>460 Jordan Lane</b>     |                    |                                  |                        |  |
| CITY<br><b>Roseburg</b>               | STATE<br><b>OR</b> | ZIP<br><b>97471</b>              | E-MAIL                 |  |

Permit Holder's of Record Signature or Acknowledgement

**Each** permit 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     |
|--|--------------------|------------------|----------|
|  | Mark Garrett       | OWNERS OF PERMIT | 09/21/22 |
|  | Sabrina Garrett    | OWNERS OF PERMIT | 09-21-22 |

**SECTION 3  
CLAIM DESCRIPTION**

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**1. POD source and, if from surface water, the tributary:**

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| POD<br>NAME OR NUMBER | SOURCE             | TRIBUTARY    |
|-----------------------|--------------------|--------------|
| POD                   | South Umpqua River | Umpqua River |
|                       |                    |              |

**2. Developed use(s), period of use, and rate for each use:**

| POD<br>NAME OR NUMBER               | USES              | IF IRRIGATION,<br>LIST CROP TYPE | SEASON OR MONTHS<br>WHEN WATER<br>WAS USED | ACTUAL RATE OR<br>VOLUME<br>USED<br>(CFS, GPM, OR AF) |
|-------------------------------------|-------------------|----------------------------------|--|---|
| POD                                 | Human Consumption | NA                               | Year round                                 | 0.005 CFS   |
|                                     |                   |                                  |  |   |
|                                     |                   |                                  |  |   |
| <b>Total Quantity of Water Used</b> |                   |                                  |  | <b>0.005 CFS</b>                                      |

**3. Provide a general narrative description of the distribution works. This description must trace the water system from each point of diversion to the place of use:**

Water is pumped from the river via a ¾ HP jet pump. Preliminary water treatment is done in a pump house near the POD. Water is then put into a 1500 gallon plastic tank outside the pump house. Water is pumped from the tank via a ½ HP submersible pump to a second 1500 gallon tank near a barn on TL-801. A ½ HP submersible pump in the tank delivers water to a 2500 gallon buried concrete tank on TL-800 and is under the floor of a pump house. Secondary treatment is done and a ½ HP submersible pump delivers water to the house.

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

**4. Variations:**

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below.

**NO**

(e.g. "The permit allowed three points of diversion. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

**5. Claim Summary:**

| POD / POA<br>NAME OR # | MAXIMUM RATE<br>AUTHORIZED | CALCULATED<br>THEORETICAL RATE<br>BASED ON SYSTEM | AMOUNT OF<br>WATER<br>MEASURED | USE                  | # OF ACRES<br>ALLOWED | # OF ACRES<br>DEVELOPED |
|------------------------|----------------------------|---|--------------------------------|----------------------|-----------------------|-------------------------|
| POD                    | 0.005 CFS                  | 0.05 CFS  |                                | Human<br>consumption | NA                    | NA                      |

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**SECTION 4**

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**SYSTEM DESCRIPTION**

Are there multiple PODs?

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**NO**

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

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

**A. Place of Use**

Attach Claim of Beneficial Use map.

**Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (Gov Lot), Quarter-Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, Gov Lot, and QQ.**

**B. Diversion and Delivery System Information**

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport and apply the water from the point of diversion to the place of use.

**1. Is a pump used?**

**YES**

If "NO" items 2 through item 5 may be deleted.

**2. Pump Information:**

| MANUFACTURER | MODEL      | SERIAL NUMBER | TYPE (CENTRIFUGAL, TURBINE OR<br>SUBMERSIBLE) |
|--------------|------------|---------------|---|
| Goulds       | C48AA33A06 | 2132CH        | Jet (centrifugal)                             |



**3. Theoretical Pump Capacity:**

| HORSEPOWER | OPERATING PSI | LIFT FROM SOURCE TO PUMP<br>*IF A WELL, THE WATER LEVEL<br>DURING PUMPING | LIFT FROM PUMP TO<br>PLACE OF USE | TOTAL PUMP<br>OUTPUT<br>(IN CFS) |
|------------|---------------|---|-----------------------------------|----------------------------------|
| 3/4        | 30            | 15 ft.  | 7 ft.                             |                                  |

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**4. Provide pump calculations:**

$$\text{River Pump } Q = \frac{(\text{HP})(\text{Pump Efficiency})}{(\text{Total Head in Feet})} = \frac{.75 (6.61)}{(76.2+7+15)} = \frac{4.9575}{98.2} = 0.05 \text{ CFS}$$

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Being a jet pump, some water is diverted back to the jet unit

**5. Measured Pump Capacity (using meter if meter was present and system was operating):**

| INITIAL METER READING | ENDING METER READING | DURATION OF TIME<br>OBSERVED | TOTAL PUMP OUTPUT<br>(IN CFS) |
|-----------------------|----------------------|------------------------------|-------------------------------|
|                       |                      |                              |                               |

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

**6. Sprinkler Information:**

| SIZE | OPERATING<br>PSI | SPRINKLER<br>OUTPUT<br>(GPM) | TOTAL NUMBER<br>OF SPRINKLERS | MAXIMUM<br>NUMBER USED | TOTAL SPRINKLER OUTPUT<br>(CFS) |
|------|------------------|------------------------------|-------------------------------|------------------------|---------------------------------|
| NA   |                  |                              |                               |                        |                                 |

Reminder: For sprinkler output determination use the reference information at the end of this document.

**7. Drip Emitter Information:**

| SIZE | OPERATING<br>PSI | EMITTER<br>OUTPUT<br>(GPM) | TOTAL NUMBER<br>OF EMITTERS | MAXIMUM<br>NUMBER USED | TOTAL EMITTER OUTPUT<br>(CFS) |
|------|------------------|----------------------------|-----------------------------|------------------------|-------------------------------|
| NA   |                  |                            |                             |                        |                               |

**8. Drip Tape Information:**

| DRIPPER<br>SPACING IN<br>INCHES | GPM PER<br>100 FEET | TOTAL<br>LENGTH OF<br>TAPE | MAXIMUM<br>LENGTH OF TAPE<br>USED | TOTAL TAPE<br>OUTPUT<br>(CFS) | ADDITIONAL INFORMATION |
|---------------------------------|---------------------|----------------------------|-----------------------------------|-------------------------------|------------------------|
| NA                              |                     |                            |                                   |                               |                        |

**C. Storage**

1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)?

YES

If "NO", item 2 and 3 relating to this section may be deleted.

If "YES" is it a:           Storage Tank  
                                  Bulge in System / Reservoir

YES

NO

Complete appropriate table(s), unused table may be deleted.



**2. Storage Tank:**

| MATERIAL<br>(CONCRETE, FIBERGLASS, METAL, ETC.) | CAPACITY<br>(IN GALLONS) | ABOVE GROUND OR BURIED |
|---|--------------------------|------------------------|
| Plastic   | 1500                     | above                  |
| Plastic   | 1500                     | above                  |
| Concrete  | 2500                     | buried                 |

**3. Bulge in System / Reservoir:**

| RESERVOIR NAME OR NUMBER<br>(CORRESPOND TO MAP) | APPROXIMATE DAM HEIGHT | APPROXIMATE CAPACITY (IN<br>ACRE FEET) |
|---|------------------------|--|
| NA  |                        |  |

**D. Gravity Flow Pipe**

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

**1. Does the system involve a gravity flow pipe?**

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

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**E. Gravity Flow Canal or Ditch**

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

**1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?**

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

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NO

**F. Additional notes or comments related to the system:**

Pump at POD is shared with certificate 45894 (domestic)

**SECTION 5  
CONDITIONS**

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

**1. Time Limits:**

Permits and any extension 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 was to be completed. 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 extension final order:

|                        | DATE FROM<br>PERMIT | DATE ACCOMPLISHED* | DESCRIPTION OF ACTIONS TAKEN BY<br>WATER USER TO COMPLY WITH THE TIME<br>LIMITS |
|------------------------|---------------------|--------------------|---|
| ISSUANCE DATE          | 6/17/2022           |                    |   |
| BEGIN CONSTRUCTION (A) | 6/17/2027           | 6/18/2022          | Construction complete when permit   |

|                                   |           |           |   |
|-----------------------------------|-----------|-----------|---|
|                                   |           |           | issued  |
| COMPLETE CONSTRUCTION (B)         |           |           |   |
| COMPLETE APPLICATION OF WATER (C) | 6/17/2027 | 6/18/2022 | Water used under terms and conditions of permit |

\* MUST BE WITHIN PERIOD BETWEEN PERMIT OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

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

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NO

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

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

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**3. Measurement Conditions:**

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

NO

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.

**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        |
|--------------------|----------------|
| Prior to 6/17/2022 | Pump installer |

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):

- 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? **NA**

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.**

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**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**

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*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?

**NO**

| DESCRIPTION<br>(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<br>(DATE) | IF INSTALLED, BY WHOM |
|--|------------------------|-----------------------|
| <b>See attached letter from ODF&amp;W</b>  |                        |                       |

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.)

**7. Other conditions required by permit, permit amendment final order, or extension final order:**

a. Was the water user required to restore the riparian area if it was disturbed? **YES**

b. 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):

- 1. Diversion existing when permit issued. Riparian area not disturbed**
- 2. Fish Passage – see attached letter from ODF&W**



**SECTION 6**  
**ATTACHMENTS**

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

| ATTACHMENT NAME         | DESCRIPTION   |
|-------------------------|---|
| <b>ODF&amp;W letter</b> | <b>Fish screen approval, no by-pass and no stream obstruction</b> |
| <b>COBU map</b>         | <b>COBU map on mylar</b>  |
|                         |   |

**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 poly 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.

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.

**Base map – Douglas County GIS Tax Lots in AutoCad over current scaled ORmap for assumed best fit. Mapping adjusted and oriented to survey CS 47/72. Mapping proofed during field inspection.**

## 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.)

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- 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
- NA 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
- NA Locations of meters and/or measuring devices in relationship to point of diversion
- 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 East Gregory Road

Central Point, OR 97502

(541) 826-8774

Fax: (541) 826-8776

www.odfw.com

July 14, 2022



Mark Garrett  
PO Box 2191  
Roseburg, OR 97470

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Dear Mark,

Regarding OWRD water right permit S-55379, ODFW is satisfied that the fish screening requirement has been met. ODFW has also determined that a fish bypass device is not necessary, and that no dam or artificial barrier exists. Thank you.

Sincerely,

Rich Kilbane  
SW Field Coordinator  
Fish Screening and Passage Program

(541) 857-2421



# Jordan Engineering

Structural-Civil-Geotech  
460 Jordan Lane  
Roseburg, OR 97471  
541-673-1931

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Water Resources Department  
Mr. Gerry Clark  
725 Summer St. NE, Suite A  
Salem, OR 97301

Claim Of Beneficial Use:  
Application: S-88926  
Permit: S-55379

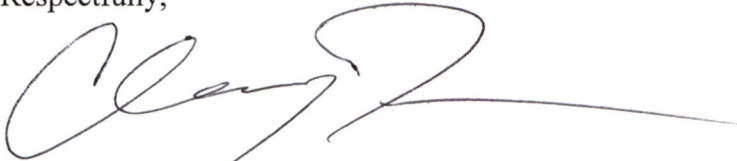
September 26, 2022

Mr. Clark:

Inclosed are the Claim of Beneficial Use (COBU) form, Mylar map, letter from Rich Kilbane of the Department of Fish and Wildlife dated July 14, 2022 stating pump is adequately screened and fish bypass device is not necessary and a check #2793 in the sum of \$230 made out to the Department.

If there are any questions please officially contact the applicant with a copy to me.

Respectfully,



Clay Jordan, P.E., S.E., Geotech, CWRE

cc: Mr. Mark Garrett

file: Garrett S-55379 COBU wrd-cl.wpd