

**CLAIM OF
BENEFICIAL USE
for Transfers
Place of Use Only**



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

RECEIVED

OCT 04 2022

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.

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 7" 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 where the only authorized change was a change in place of use.

YES

If additional changes were authorized, you will need to select a different form.

1. File Information

APPLICATION #

T-12309

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Crossroads Land, LLC % Blake Crosby, Member		PHONE NO. 503.982.5166	ADDITIONAL CONTACT NO.
ADDRESS 8648 Crosby Road NE			
CITY Woodburn	STATE Oregon	ZIP 97071	E-MAIL blake.crosby@crosbyhops.com

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

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

TRANSFER HOLDER OF RECORD Crossroads Land, LLC			
ADDRESS 8648 Crosby Road NE			
CITY Woodburn	STATE Oregon	ZIP 97071	

4. Date of Site Inspection:

September 23, 2022

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Blake Crosby	September 23, 2022	Owner

6. County: **Marion**

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

OWNER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

RECEIVED

OCT 04 2022

OWRD

**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.




CWRE NAME Corbey Boatwright	PHONE NO. 503.363.9225	ADDITIONAL CONTACT NO.	
ADDRESS Boatwright Engineering, Inc. 2613 12th Street SE			
CITY Salem	STATE Oregon	ZIP 97302	E-MAIL corbey@boatwrightengr.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
	Blake Crosby	Member Crossroads Land, LLC	9-30-22

RECEIVED
OCT 04 2022
OWRD

SECTION 3

RECEIVED

EXTENT OF CHANGE COMPLETED

OCT 04 2022

OWRD

1. Claim Summary:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
13.4	13.4

If the use(s) was not irrigation or nursery:

WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER? (INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)
NA

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.")

SECTION 4

CONDITIONS

All conditions contained in the transfer, 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 CHANGE WAS COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	July 30, 2018	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2021	August 13, 2020

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

2. Is there an extension final order(s)? **NO**

3. Measurement Conditions:

a. Does the transfer final order require the installation of a meter or approved measuring device? **NO**

4. Other conditions required by the transfer final order:

a. 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):

NA

**SECTION 5
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use	Map

**SECTION 6
CLAIM OF BENEFICIAL USE MAP**

A 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 must identify the developed new place of use. The existing point(s) of diversion or point(s) of appropriation are required to be included on the Claim map, based on the locations described in the transfer final order.

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.

Aerial photographs were used to determine the place of use. Google Earth, photos dated 5-18-2019, 8-13-2020 and 6-17-2021.

RECEIVED
OCT 04 2021
OWRD

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
- 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
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.) ***Not required for this type of Claim of Beneficial Use**
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Transfer application number
- North arrow
- Legend
- CWRE stamp and signature

RECEIVED
OCT 04 2022
OWRD

Checklist for Claims of Beneficial Use Received at CSG Counter

Application #:	WRD Reviewer:Dante Luongo
Transfer #:12309	
Date Received:10-4-2022	
CWRE Name:Corbey Boatwright	
Priority Date (s):9-8-1949	

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))

MONEY SLIP

DATE:	RECEIPT #:
ISSUED FROM:	APPLICATION PERMIT / TRANSFER #:
CASH CHECK # OTHER (IDENTIFY)	TOTAL RECEIVED:
UNIT TREASURY (OAR 690-014-0100(1))	
DEPT CODES OTHER (IDENTIFY)	
UNIT TREASURY (OAR 690-014-0100(1))	
MISCELLANEOUS COPY & PRINT FEES 4611	
0410 RESEARCH FEES	
0415 MISC RENEWAL (IDENTIFY)	
0418 DEPOSIT LINES (IDENTIFY)	
0240 EXTENSION OF TIME	
WATER RIGHTS	
0201 SURFACE WATER	
0202 GROUND WATER	
0205 TRANSFER	
WELL CONSTRUCTION	
0210 WELL DRILL CONSTRUCTION	
LANDOWNER'S PERMIT	
0200 OTHER (IDENTIFY) COBU	
0207 TREASURY (OAR 690-014-0100(1))	
0220 POWER LICENSE FEE (PUMPING)	
0221 HYDRO LICENSE FEE (PUMPING)	
HYDRO APPLICATION	

SPECIAL INSTRUCTIONS:

RETURN TO APPLICANT – LETTER ATTACHED

Report Review:

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

Groundwater File Review:

- 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

10/4/2022

Crossroads Land LLC
ATTN: Blake Crosby
8648 Crosby Rd NE
Woodburn, OR 97071

Dear Applicant,

On 10-04-2022, the Water Resources Department received the Claim of Beneficial Use (COBU) for the following files:

Application T-12309

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