

**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.**

**A separate form shall be completed for each permit.**

*In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.*

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.

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>

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1. File Information:

**SECTION 1**

**GENERAL INFORMATION**

APPLICATION # <b>S-88731</b>	PERMIT # (IF APPLICABLE) <b>S-55277</b>	PERMIT AMENDMENT # (IF APPLICABLE)
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME Jeff, Erin, and Rogun Weigel		PHONE No. 541-290-2086	ADDITIONAL CONTACT No.
ADDRESS 93407 Catching Creek Lane			
CITY Myrtle Point	STATE OR	ZIP 97458	E-MAIL w3timber@hotmail.com

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 NA		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

**4. Date of Site Inspection:**

9/9/2022
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**5. Person(s) interviewed and description of their association with the project:**

NAME	DATE	ASSOCIATION WITH THE PROJECT
Erin Weigel	9/9/2022	Permit Owner

**6. County:**

Curry
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**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		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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**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 <b>Marc J. Van Camp</b>		PHONE NO. <b>541-297-1880</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>P.O. Box 995</b>			
CITY <b>Coos Bay</b>	STATE <b>OR</b>	ZIP <b>97420</b>	E-MAIL <b>vancampconsulting@gmail.com</b>

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
	<b>Jeff Weigel</b>	<b>Permit Owner</b>	
	<b>Erin Weigel</b>	<b>Permit Owner</b>	<b>10-3-22</b>
	<b>Rogun Weigel</b>	<b>Permit Owner</b>	<b>10-3-2022</b>

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## SECTION 3

### CLAIM DESCRIPTION

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

POD NAME OR NUMBER	SOURCE	TRIBUTARY
POD #1	Unnamed Spring	Rogue River

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

POD NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
POD #1	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:

The POD consists of a stainless-steel spring cistern that diverts water into a short length of 3" polyline. From the polyline water is directed into a 30-year-old cast-iron 1.25" mainline that brings water to a pressure reducer and totalizing flowmeter. Approximately 40' before the pressure reducer and flow meter the mainline diverges to certificate's #84262 place of use. From the totalizing flowmeter water is delivered to the place of use with a 1.5" pvc pipe. The 30-year-old cast-iron pipe was pre-existing and shared with certificate #84262.

**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 NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
POD#1	0.005 CFS	0.038*	0.005	Human Consumption	NA	NA

\*Calculated theoretical rate is not representative of volume diverted to POU due to pressure reducer on system, and being shared with certificate #84262.

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SECTION 4  
SYSTEM DESCRIPTION

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NO

Are there multiple PODs?

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):

POD #1

**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?

NO

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

**6. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
NA					

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

**7. Drip Emitter Information:**

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
NA					

**8. Drip Tape Information:**

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

**C. Storage**

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

NO

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

**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.

2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)
1.25"	Cast Iron ~30 years old	82	400'	2117'	18.9%	0.038*

3. Provide calculations:

See attachment Pipe Calculator.

\*Calculated theoretical rate is not representative of volume diverted to POU due to pressure reducer on system, and being shared with certificate #84262.

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.

**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?

NO

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

F. Additional notes or comments related to the system:

\*Calculated theoretical rate is not representative of volume diverted to POU due to pressure reducer on system, and being shared with certificate #84262. No more than 500 gallons per day are used.

**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 PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	8/21/2020		
BEGIN CONSTRUCTION (A)	8/21/2025	9/1/2021	Construct pipeline from existing mainline to place of use
COMPLETE CONSTRUCTION (B)	8/21/2025	9/30/2021	Complete all plumbing to place of use
COMPLETE APPLICATION OF WATER (C)	8/21/2025	8/1/2022	Install totalizing flowmeter, began using water, recording and reporting volumes

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

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NO

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

**3. Measurement Conditions:**

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a. Does the permit, permit amendment, or any extension final order require the installation of a meter or 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
POD #1	DAE Controls	21027947	working	066	8/1/2022

*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? **YES**

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

b. Have the reports been submitted? **YES**

If the reports have not been submitted, attach a copy of the reports if available.

**5. Fish Screening:**

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion? **NO**

**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? **NO**

**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?

NO

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

No riparian area was disturbed, point of diversion and the majority of mainline was previously developed under certificate #84262

**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Pipe Calculator	OWRD Gravity Flow Pipe Capacity Calculator
COBU Map	Claim of Beneficial Use Map

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## SECTION 7

## CLAIM OF BENEFICIAL USE MAP

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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.

GPS Survey

### 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
- 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

**Pipe Capacity Calculator**for pipes flowing full, using the Hazen-Williams Formula

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**Data Entry (fill in underlined blanks)**

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Interior Diameter = 1.25 inches, or 0.104167 feet  
Roughness Coefficient (C) = 82  
Fall = 400 feet per 2117 feet of distance  
Grade = 0.1889466 , or 18.9%

**Results calculated**

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Area of cross-section = 0.00852 square feet  
Wetted Perimeter = 0.32725 feet  
Hydraulic Radius = 0.02604  
Velocity = 4.41391 feet per second

**Pipe Capacity = 0.038 cubic feet per second**