

CLAIM OF BENEFICIAL USE for Surface Water Permits claiming more than 0.1 cfs



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 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>

Go to "Resources for Water Right Examiners (CWRE)" Page
<https://www.oregon.gov/OWRD/programs/WaterRights/COBU/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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SECTION 1 GENERAL INFORMATION

1. File Information:

APPLICATION # S-86000	PERMIT # S-54520	PERMIT AMENDMENT # T-
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Dan and Nina Micke		PHONE No. 530-200-0890	ADDITIONAL CONTACT No.
ADDRESS 87754 Highway 140 West			
CITY Lakeveiw	STATE OR	ZIP 97630	CITY Lakeveiw

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

PERMIT OR TRANSFER HOLDER OF RECORD Dan and Nina Micke		
ADDRESS 87754 Highway 140 West		
CITY Lakeview	CITY Lakeview	CITY Lakeview

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

2014

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Dan Micke	2014	Owner

6. County:

Lake

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

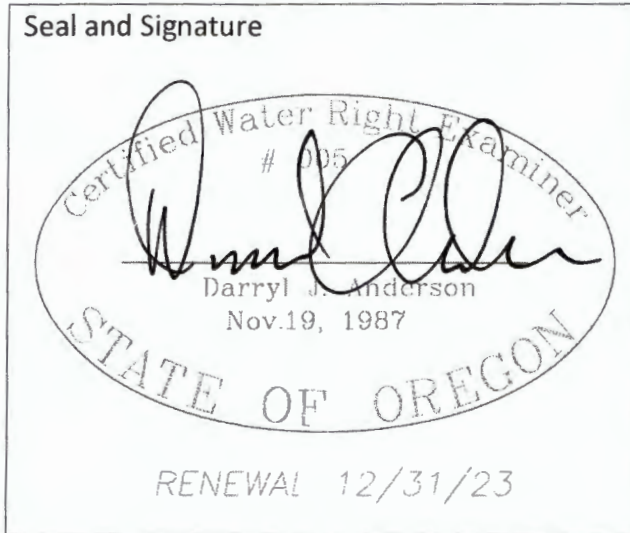
Add additional tables for owners of record as needed

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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 Darryl Anderson		PHONE No. 541-947-4407	ADDITIONAL CONTACT No.
ADDRESS 17681 Highway 395			
CITY Lakeview	STATE OR	ZIP 97630	CITY Lakeview

Permit Holder 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
	DANIEL H. Micke	owner	2-27-23
	Nina S. Micke	owner	2/27/23

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SECTION 3
CLAIM DESCRIPTION

1. Point of diversion name or number:

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

2. Point of diversion source and tributary:

POD NAME OR NUMBER	SOURCE	TRIBUTARY
POD #1	Reservoir, Certificate	Fish Creek

3. 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	Primary & Supplemental Irrigation	Pasture	April 1-Sept. 30	75.00 AF
Total Quantity of Water Used				75.00 AF

4. 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:

12" CMP outlet drains into ditches to the point of irrigation needs at the primary and secondary locations as seen on the map.

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).

5. Variations:

Was the use developed differently from what was authorized by the permit, or permit amendment 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.")

NA

6. Claim Summary:

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POD NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
POD #1	75.0 AF 1.315 cfs	75.0 AF 1.315 cfs	NA	Primary Irrigation	1.05	1.05
				Supplemental Irrigation	104.15	104.15

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SECTION 4 SYSTEM DESCRIPTION

Are there multiple PODs? 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):

POD #1

A. Place of Use

1. Is the right for municipal use? NO

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
39S	18E	WM	18	NE NW			Irrigation		22.4
39S	18E	WM	18	NW NW			Irrigation	1.05	38.95
39S	18E	WM	18	SW NW			Irrigation		38.8
39S	18E	WM	18	SE NW			Irrigation		4.0
Total Acres Irrigated								1.05	104.15

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

7. Is the distribution system piped? NO

C. Storage

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

If "YES" is it a: NO
 Storage Tank NO
 Bulge in System / Reservoir YES

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Reservoir Certificate	17'	75.0

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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?

YES

2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)
12"	CMP	60	1.49'	97'	.015	2.72

3. Provide calculations:

$$Q = 0.285 * C * D^{2.63} * S^{0.54} \text{ (gal/min)}$$

$$Q = 0.285 * 60 * 12''^{2.63} * .015^{0.54} = 1,219.92 \text{ gal/min}$$

$$1,219.92 \text{ gal/min} * (1 \text{ ft}^3 / 7.48 \text{ gal}) * (1 \text{ min} / 60 \text{ sec}) = \underline{2.72 \text{ CFS}}$$

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?

YES

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)
Native Soil	4.0'	2.0'	1.5"	.04	24.6'	1463'	0.0168	20.25

3. Provide calculations:

$$Q = (1.49/n) * A * R^{2/3} * \sqrt{S}$$

$$Q = (1.49/.04) * 4.5 * 0.9^{2/3} * \sqrt{0.0168}$$

$$Q = 20.25 \text{ CFS}$$

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.

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F. Additional notes or comments related to the system:

NA

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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 permit extension of time:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	1/15/2009		
BEGIN CONSTRUCTION (A)	1/15/2009	2004	Reservoir constructed
COMPLETE CONSTRUCTION (B)	10/1/2018	6/2018	v-notch measurement weir installed
COMPLETE APPLICATION OF WATER (C)	10/1/2018	6/2018	Water was used

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

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

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

a. Did the Extension Final Order require the submittal of Progress Reports? NO

3. Measurement Conditions:

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

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					

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

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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
Brian Meyer	Water Master	2014

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED
V-notch measurement weir	working	June 2018

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? **NO**

b. Was a fishway required? **NO**

c. Was submittal of a water management and conservation plan required? **NO**

d. 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

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SECTION 6
ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	A map to accompany the claim of beneficial use for permit No. S-54520.

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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.

Survey performed with Real Time GPS – Corner tie is a brass cap at the northeast corner of Section 18, Township 39 South, Range 18 East, of the Willamette Meridian.

Map Checklist

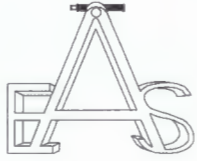
Please be sure that the map you submit includes ALL the items listed below.
(Reminder: Incomplete maps and/or claims may be returned.)

- 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

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ANDERSON

ENGINEERING & SURVEYING, INC.



PO Box 28
17681 Hwy 395
Lakeview, Oregon 97630
541-947-4407
541-947-2321 FAX



TRANSMITTAL LETTER

Oregon Water Resources Department

725 Summer Street NE

Suite A

Salem OR 97301-1266

DATE: 2/28/2023

JOB NO: 2013-098

ATTENTION:

RE: Small Reservoirs

Claim of Beneficial Use

WE ARE SENDING YOU ATTACHED:

PRINTS PLANS

OTHER _____

COPIES	DATE	DESCRIPTION
1		Claim of Beneficial Use Application 3 R-85767 Permit # R-13906
1		Claim of Beneficial Use Application 3 R-85766 Permit # R-13905
1		Claim of Beneficial Use Application 3 R-85764 Permit # R-13903
1		Claim of Beneficial Use Application 3 R-85763 Permit # R-13902
1		Claim of Beneficial Use Application 3 R-85755 Permit # R-13901
1		Claim of Beneficial Use Application 3 R-85756 Permit # R-13904

THESE ARE TRANSMITTED AS CHECKED BELOW:

FOR APPROVAL FOR REVIEW AND COMMENT

AS REQUESTED FOR SIGNATURE

OTHER _____

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REMARKS _____

If there are any questions, please contact Ryan Conn ryanc@andersonengineering.com

Thank you

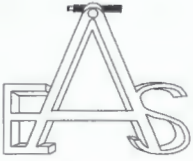
COPY TO _____

SIGNED *Barb Thompson*

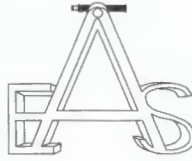
If enclosures are not as noted, please notify us at once

ANDERSON
ENGINEERING & SURVEYING, INC.

**TRANSMITTAL
LETTER**



PO Box 28
17681 Hwy 395
Lakeview, Oregon 97630
541-947-4407
541-947-2321 FAX



Oregon Water Resources Department
725 Summer Street NE
Suite A
Salem, OR 97301-1266

DATE: 2/28/2023	JOB NO: 2013-098
ATTENTION:	
RE:	
Application S-86000	
Permit S-54520	

WE ARE SENDING YOU ATTACHED:

- PRINTS PLANS
 OTHER _____

COPIES	DATE	DESCRIPTION
2		Claim of Beneficial Use Application with Map

THESE ARE TRANSMITTED AS CHECKED BELOW:

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- FOR APPROVAL FOR REVIEW AND COMMENT
 AS REQUESTED FOR SIGNATURE
 OTHER _____

REMARKS _____

If there are any questions, please contact Ryan Conn ryanc@andersonengineering.com

COPY TO _____

SIGNED Barb Thompson

If enclosures are not as noted, please notify us at once