

**CLAIM OF  
BENEFICIAL USE  
for Groundwater 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](http://www.oregon.gov/OWRD)

RECEIVED  
FEB 21 2023  
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.

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**

**1. File Information:**

APPLICATION # <b>G-16261</b>	PERMIT # (IF APPLICABLE) <b>G-17759</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>T-12390</b>
---------------------------------	--	--

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

APPLICANT/BUSINESS NAME <b>Robert K. Gressley</b>		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS <b>1149 Foothill Drive</b>			
CITY <b>Ontario</b>	STATE <b>OR</b>	ZIP <b>97914</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 <b>Robert K. Gressley</b>			
ADDRESS <b>1149 Foothill Drive</b>			
CITY <b>Ontario</b>	STATE <b>OR</b>	ZIP <b>97914</b>	

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

RECEIVED  
FEB 21 2023  
OWRD

**4. Date of Site Inspection:**

<b>2/10/2023 &amp; 2/15/2023</b>
----------------------------------

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Bob Gressley</b>	<b>2/15/2023</b>	<b>Owner</b>

**6. County:**

<b>Malheur</b>
----------------

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

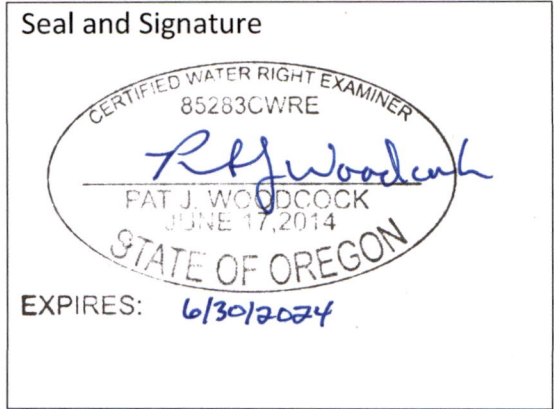
OWNER OF RECORD <b>NA</b>			
ADDRESS			
CITY	STATE	ZIP	

Add additional tables for owners of record as needed

**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.



RECEIVED  
FEB 21 2023  
OWRD

CWRE NAME <b>Pat J. Woodcock</b>		PHONE No. <b>541-889-4432</b>	ADDITIONAL CONTACT No.	
ADDRESS <b>11 NW 9<sup>th</sup> Street</b>				
CITY <b>Ontario</b>	STATE <b>OR</b>	ZIP <b>97914</b>	E-MAIL	

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
<i>Robert K Gressley</i>	<b>Robert K. Gressley</b>	<b>Owner</b>	<b>2-16-23</b>



## SECTION 3

### CLAIM DESCRIPTION

**1. Point of appropriation name or number:**

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well #5	MALH 2609	No Tag
Well #6	MALH 52545	L61641
Well #7	MALH 54124	L111640

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

**2. Point of appropriation source, if indicated on permit:**

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
Well #5	Malheur River Basin	RECEIVED
Well #6	Malheur River Basin	
Well #7	Malheur River Basin	FEB 21 2023

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

OWRD

POA 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)
Well #5	Supp. Irr.	Corn, Wheat, Onions	April 1 thru Oct. 15	933.134 AF
Well #6	Supp. Irr.	Corn, Wheat, Onions	April 1 thru Oct. 15	261.956 AF
Well #7	Supp. Irr.	Corn, Wheat, Onions	April 1 thru Oct. 15	274.280 AF
<b>Total Quantity of Water Used</b>				<b>1,469.370 AF</b>

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

<p><b>Well #5 – Water is pumped out of the ground and into a short above ground pipe that dumps into the concrete ditch. From the ditch water is applied to the fields with siphon tubes.</b></p>
<p><b>Well #6 – Water is pumped out of the ground and into a buried pipe line that dumps into the concrete ditch or into the Owyhee ditch that is parallel with the road which transports water to the concrete ditch on the East field.</b></p>
<p><b>Well #7 - Water is pumped out of the ground and into a buried pipe line that ties into the pipeline near Well #6. From there the water distribution is the same as Well #6.</b></p>

**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, permit amendment final order, or extension final order? If yes, describe below. **NO**

(e.g. "The permit allowed three points of appropriation. 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:**

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well #5	0.83 cfs	0.54 cfs	0	Supp. Irr.	88.5	88.5
Well #6	0.66 cfs	0.27 cfs	0	Supp. Irr	53.0	52.0
Well #7	0.66 cfs	0.40 cfs	0	Supp. Irr	53.0	52.0

RECEIVED

FEB 21 2023

OWRD

**SECTION 4A  
SYSTEM DESCRIPTION**

Are there multiple POAs?

YES

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

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

Well #5

RECEIVED

FEB 21 2023

**A. Place of Use**

1. Is the right for municipal use?

NO

If "YES" the table below may be deleted.

OWRD

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
18 S	47 E	WM	7	SWSE	NA	NA	Supp. Irr.	0	88.5
<b>Total Acres Irrigated</b>								0	88.5

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. Groundwater Source Information (Well)**

1. Is the appropriation from a well?

YES

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

2. Describe the access port (type and location) or other means to measure the water level in the well:

No access port

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
12"	-65'	-80'	5/30/1991	NA	Keith Gressley	Archie Page

4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

MALH 2609



### C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)?

NO

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

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

### D. 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 appropriation to the place of use.

1. Is a pump used?

YES

If "NO" items 2 through item 6 may be deleted.

#### 2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Unknown	Unknown	Unknown	Submersible	4"	6"

#### 3. Motor Information:

MANUFACTURER	HORSEPOWER
Unknown	Unknown

#### 4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
7.5	25	-40	75	0.54 cfs

#### 5. Provide pump calculations:

$$Q = \frac{(Hp) \times (Eff.)}{2.31 \times 5.2} = \frac{(7.5)(7.04)}{2.31 \times 5.2} = 0.54 \text{ cfs}$$

$$\text{Tot. Hd.} = 63.5 - 40 + 75$$

#### 6. 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)
933134 x 0.001 AF	933134 x 0.001 AF	NA	0

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

7. Is the distribution system piped?

YES

If "NO" items 8 through item 13 may be deleted.

RECEIVED

FEB 21 2023

OWRD

**8. Mainline Information:**

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6" dia.	9'	Steel	Above

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
NA			

**10. 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.

**11. Drip Emitter Information:**

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

**12. 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					

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NA				

RECEIVED  
 FEB 21 2023  
 OWRD



## E. 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.

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

RECEIVED

NO

FEB 21 2023

NO

OWRD

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

## F. 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

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)
12" dia	PVC	150	5.1'	29'	0.176	25.4 cfs

3. Provide calculations:

$$Q = AV = (A)(1.31)(C)(r^{0.63})(s^{0.54}) = (0.79)(1.31)(150)(0.42)(0.39) = 25.4 \text{ cfs}$$

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.

## G. 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

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)
Concrete	3'-6"	1'-0"	1'-4"	0.015	1.8'	1,116'	0.0016	5.1 cfs
Concrete	3'-6"	1'-0"	1'-4"	0.015	0.9'	1,342'	0.0007	3.4 cfs

3. Provide calculations:

$$Q = Av = (A)(1.486/n)(r^{0.67})(s^{0.5}) = (2)(99.1)(.65)(0.04) = 5.1 \text{ cfs}$$

**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.

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

None

RECEIVED

FEB 21 2023

OWRD



**SECTION 4B  
SYSTEM DESCRIPTION**

Are there multiple POAs? YES

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

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

Well #6

**A. Place of Use**

1. Is the right for municipal use? YES NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
18 S	46 E	WM	21	SWSW	NA	NA	Supp. Irr.	0	52.0
<b>Total Acres Irrigated</b>									52.0

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.

RECEIVED

FEB 21 2023

**B. Groundwater Source Information (Well)**

1. Is the appropriation from a well? YES

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

OWRD

2. Describe the access port (type and location) or other means to measure the water level in the well:

1-1/4" dia. Plug in top of casing

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
12"	-75'	-260'	11/04/2004	NA	Bob Gressley	Jon Fife

4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

None

### C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)?

NO

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

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

### D. 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 appropriation to the place of use.

1. Is a pump used?

YES

If "NO" items 2 through item 6 may be deleted.

#### 2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Unknown	Unknown	Unknown	Submersible	3"	4"

#### 3. Motor Information:

MANUFACTURER	HORSEPOWER
Unknown	Unknown

#### 4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
5	25	-140'	205'	0.27 cfs

#### 5. Provide pump calculations:

$$Q = (Hp) \times (Eff.) = (5)(7.04) = 0.27 \text{ cfs}$$

$$\text{Tot. Hd. } (63.5-140+205)$$

#### 6. 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)
261,956 x 0.001 AF	261,956 x 0.001 AF	0	0

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

7. Is the distribution system piped?

YES

If "NO" items 8 through item 13 may be deleted.

RECEIVED

FEB 21 2023

OWRD



**8. Mainline Information:**

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6" dia	10'	Steel	Above
6" dia	205'	Steel	Buried

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
NA			

**10. 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.

**11. Drip Emitter Information:**

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

**12. 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					

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NA				

RECEIVED  
 FEB 21 2023  
 OWRD

## E. 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.

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

RECEIVED

NO

FEB 21 2023

NO

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

OWRD

## F. 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

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)
6" dia.	PVC	150	0.5'	60'	0.0083	0.85 cfs

3. Provide calculations:

$$Q = AV = (A)(1.31)(C)(r^{0.63})(s^{0.54}) = (0.2)(1.31)(150)(0.27)(0.08) = 0.85 \text{ cfs}$$

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.

## G. 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

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)
Concrete	3'-6"	1'-0"	1'-4"	0.015	11'	1,595'	0.0069	10.3 cfs
Concrete	3'-6"	1'-0"	1'-4"	0.015	5.2'	1,519'	0.0034	7.7 cfs

3. Provide calculations:

$$Q = Av = (A)(1.486/n)(r^{0.67})(s^{0.5}) = (2)(99.1)(.65)(0.08) = 10.3 \text{ cfs}$$



**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.

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

None

RECEIVED  
FEB 21 2023  
OWRD

**SECTION 4C**  
**SYSTEM DESCRIPTION**

Are there multiple POAs?

YES

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

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

Well #7

**A. Place of Use**

1. Is the right for municipal use?

NO

If "YES" the table below may be deleted.

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
18 S	46 E	WM	21	SWSW	NA	NA	Supp. Irr.	0	53.0
<b>Total Acres Irrigated</b>									53.0

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.

RECEIVED

FEB 21 2023

**B. Groundwater Source Information (Well)**

1. Is the appropriation from a well?

OWRD

YES

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

2. Describe the access port (type and location) or other means to measure the water level in the well:

½" dia. Plug in top of casing

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
10"	-71'	-260'	4/16/2014	NA	Bob Gressley	Johnny Goff

4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

NA



### C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)?

NO

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

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

### D. 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 appropriation to the place of use.

1. Is a pump used?

YES

If "NO" items 2 through item 6 may be deleted.

#### 2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Unknown	Unknown	Unknown	Submersible	3"	3"

#### 3. Motor Information:

MANUFACTURER	HORSEPOWER
Unknown	Unknown

#### 4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
7.5	25	-180	250'	0.40 cfs

#### 5. Provide pump calculations:

$Q = (Hp) \times (Eff.) = (7.5)(7.04) = 0.40 \text{ cfs}$   
 Tot. Hd. (63.5-180+250)

#### 6. 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)
8937489 Gal	8937489 Gal	0	0

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

7. Is the distribution system piped?

YES

If "NO" items 8 through item 13 may be deleted.

RECEIVED  
 FEB 21 2023  
 OWRD

**8. Mainline Information:**

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
3" dia	6'	Steel	Above Ground
6" dia	362'	Steel	Buried

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
NA			

**10. 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.

**11. Drip Emmitter Information:**

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

**12. 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					

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NA				

RECEIVED  
FEB 21 2023



## E. 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.

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

RECEIVED

FEB 21 2023

NO

NO

OWRD

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

## F. 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

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)
6" dia	PVC	150	0.5'	60'	0.0083	0.85 cfs

3. Provide calculations:

$$Q = AV = (A)(1.31)(C)(r^{0.63})(s^{0.54}) = (0.2)(1.31)(150)(0.27)(0.08) = 0.85 \text{ cfs}$$

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.

## G. 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

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)
Concrete	3'-6"	1'-0"	1'-4"	0.015	11'	1,595'	0.0069	10.3 cfs
Concrete	3'-6"	1'-0"	1'-4"	0.015	5.2'	1,519'	0.0034	7.7 cfs

3. Provide calculations:

$$Q = Av = (A)(1.486/n)(r^{0.67})(s^{0.5}) = (2)(99.1)(.65)(0.08) = 10.3 \text{ cfs}$$

**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.

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

None

RECEIVED  
FEB 21 2023  
OWRD



## 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 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 order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	4/17/2017		
BEGIN CONSTRUCTION (A)	Not Stated	4/16/2014	Drilled wells & Installed buried pipe
COMPLETE CONSTRUCTION (B)	10/01/2009	5/01/2018	Installed Flow Meters
COMPLETE APPLICATION OF WATER (C)	10/01/2018	9/01/2018	Irrigated Lands

\* 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

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

### 3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? YES

*If "NO", items b through d relating to this section may be deleted.*

b. What month was the initial measurement to be taken in?

March

c. Was the measurement submitted to the Department? NO

d. If the initial measurement was not submitted, provide that measurement now, if available:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
To be done this Year			

### 4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements? YES

*If "NO", items b through e relating to this section may be deleted.*

RECEIVED

FEB 21 2023

OWRD

b. Provide the month, or months, the static water level measurement(s) were to be made:

March

c. Were the static water level measurements taken in the month(s) required? **NO**

d. If "YES", were those measurements submitted to the Department? **NO**

e. If the annual measurements were not submitted, provide the measurements now:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
<b>To be done this year</b>			

**5. Pump Test:**

a. Did the permit require the submittal of a pump test? **YES**

Ground water permits with priority dates on or after **December 20, 1988**, require the submittal of a pump test prior to issuance of a certificate. In some cases, the permit holder may qualify for a multiple well exemption or an unreasonable burden exemption.

For additional information regarding pump tests see:

<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

*If "NO", items b through e relating to this section may be deleted.*

b. Has the pump test been previously submitted to the Department? **RECEIVED** **NO**

c. Is the pump test attached to this claim? **FEB 21 2023** **NO**

d. Has the pump test been approved by the Department? **OWRD** **NO**

e. Has a pump test exemption been approved by the Department? **NO**

**\*\* Claims will not be reviewed until a pump test or exemption has been approved by the Department**

**6. Measurement Conditions:**

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 or appropriation.**

b. Has a meter been installed? **YES**

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
<b>Well #5</b>	<b>Micrometer</b>	<b>11-01331</b>	<b>Unknown</b>	<b>933134 x 0.001 AF</b>	<b>5/01/2018</b>
<b>Well #6</b>	<b>Micrometer</b>	<b>13-11939</b>	<b>Unknown</b>	<b>261956 x 0.001 AF</b>	<b>5/01/2018</b>
<b>Well #7</b>	<b>Octave</b>	<b>43505268</b>	<b>Working</b>	<b>8937489 Gal</b>	<b>5/01/2018</b>

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

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? **NO**



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
NA		

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED
NA		

**7. 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.*

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

- a. Were there special well construction standards? **NO**
- b. Was submittal of a ground water monitoring plan required? **NO**
- c. Was submittal of a water management and conservation plan required? **NO**
- d. Was a Well Identification Number (Well ID tag) assigned and attached to the well? **NO**

WELL ID #	DATE ATTACHED TO WELL

e. 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
----

RECEIVED  
FEB 21 2023  
OWRD

**SECTION 6**  
**ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
NA	

**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.

**Field measurements were achieved using a TOPCON GR-5 GPS.**

RECEIVED  
FEB 21 2023  
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
- 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

RECEIVED  
FEB 21 2023  
OWRD

RECEIVED  
FEB 21 2023  
OWRD

RECEIVED  
FEB 21 2023  
OWRD