

**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

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**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 # G-12655	PERMIT # (IF APPLICABLE) G-16351	PERMIT AMENDMENT # (IF APPLICABLE) T-
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME RUSSELL S. FRASER & PATTI P. FRASER		PHONE NO. 541-551-9311	ADDITIONAL CONTACT NO.
ADDRESS 45965 HWY 101			
CITY BANDON	STATE OR	ZIP 97411	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 SAME		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

2-2-2023

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
RUSSELL FRASER	2-2-2023	OWNER

6. County:

COOS

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 N/A		
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

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



CWRE NAME GARY L. DEJARNATT		PHONE NO.	ADDITIONAL CONTACT NO. John Short 541-389-2837	
ADDRESS 2391 NW REDWOOD AVE				
CITY REDMOND	STATE OR	ZIP 97756	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
	RUSSELL S. FRASER	OWNER	3/24/23
	Patti Fraser	owner	3/24/23

**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)
POA	N/A	N/A

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
POA		

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

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)
POA	CRANBERRY OPERATIONS	CRANBERRIES	JAN 1 – MAY 31, NOV 1- DEC 31	0.11 CFS
Total Quantity of Water Used				0.11 CFS

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:

WATER IS PUMPED FROM THE POA AT THE SUMP THROUGH MAINLINES TO CRANBERRY BOGS.

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

(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.")

THE PERMIT ALLOWED FOR CRANBERRY OPERATIONS ON 10.0 ACRES, THE WATER USER ONLY DEVELOPED 5.0 ACRES AND THE SUMP POA. THE SUPPLEMENTAL CRANBERRY OPERATIONS USE AND WELLS WERE NOT DEVELOPED.

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
POA	0.11 CFS	1.17 CFS	N/A	CRANBERRY OPERATIONS	10.0	5.0

**SECTION 4
SYSTEM DESCRIPTION**

Are there multiple POAs?

YES NO

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):

POA

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
30S	15W	W.M.	12	SWSE			CRANBERRY OPERATIONS	N/A	N/A
30S	15W	W.M.	13	NWNE			CRANBERRY OPERATIONS	N/A	N/A
Total Acres Irrigated								N/A	N/A

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 NO

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

C. Groundwater Source Information (Sump)

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

YES 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.

2. If the appropriation involves a SUMP, provide the following information for each SUMP:

LENGTH	WIDTH	AVERAGE DEPTH	MAXIMUM DEPTH	SURFACE AREA (IN ACRES)	VOLUME IN CUBIC FEET OR ACRE FEET
570'	40'	10'	12'	0.52 AC	5.23 AF

3. If the sump is curbed constructed with watertight surface curbing, describe the curbing:

CURBING MATERIAL (CONCRETE, CONCRETE TILES, OR STEEL)	IF CONCRETE, PROVIDE THE THICKNESS OF THE WALL
N/A	N/A

4. Provide sump volume calculations:

570' L X 40' W X 10' AVG DEPTH = 228,000 cubic feet / 43,560 cubic feet / acre-foot = 5.23 AF

D. Diversion and Delivery System Information

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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.

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1. Is a pump used?

YES NO

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
PUMP #1 BERKELEY	ILLEG.	M1359	CENTRIFUGAL		
PUMP #2 BERKELEY	2-1/21PM	M1497	CENTRIFUGAL		

3. Motor Information:

MANUFACTURER	HORSEPOWER
#1 BALDOR	20
#2 BALDOR	15

4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
#1 - 20	40	5'	6'	1.17 CFS
#2 - 15	40	5'	10'	0.85 CFS

5. Provide pump calculations:

SEE ATTACHED OWRD PUMP CALCULATIONS.

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)
N/A			

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

7. Is the distribution system piped?

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

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
5"	320'	PVC	BURIED

9. Lateral or Handline Information:

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

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
9/64"	40	3.4	121	121	0.92 CFS

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)

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

13. Pivot Information:

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

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

YES NO

If "NO", item 2 and 3 relating to this section 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 NO

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 NO

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

H. Additional notes or comments related to the system:

**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	1/29/2009		
BEGIN CONSTRUCTION (A)	N/A	N/A	N/A
COMPLETE CONSTRUCTION (B)	1/29/2014	1/29/2009	CONSTRUCTION COMPLETE
COMPLETE APPLICATION OF WATER (C)	1/29/2014	1/29/2014	COMPLETE APPLICATION OF WATER TO BENEFICIAL USE

* 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 NO

If "NO", items a and 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 NO

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

4. Annual Static Water Level Measurements:

- a. Was the water user required to submit annual static water level measurements? YES NO OWRD

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

5. Pump Test:

- a. Did the permit require the submittal of a pump test? YES NO

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.

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 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 or appropriation.

- b. Has a meter been installed? YES NO

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POA	CENTRON	27029673	WORKING	0589	PRIOR TO PERMIT ISSUANCE

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

7. Recording and reporting conditions:

- a. Is the water user required to report the water use to the Department? YES NO

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

- b. Have the reports been submitted? YES NO

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

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

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

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

THE SUMP WAS REQUIRED TO PRODUCE GROUNDWATER FROM BETWEEN 0-60', THE CONDITION IS MET AS THE DEPTH OF THE SUMP IS 12'. THE RIPARIAN AREA WAS NOT DISTURBED IN THE PROCESS OF DEVELOPING THE SUMP.

**SECTION 6
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
CBU MAP	CLAIM OF BENEFICIAL USE MAP
PUMP CALCS	OWRD PUMP CAPACITY CALCULATIONS
WATER USE REPORT	2012-2013 WATER USE REPORT

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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.

ON-SITE DIRECT MEASUREMENT AND NAIP IMAGERY.

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
- N/A 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
- N/A 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

Pump Capacity Calculation Sheet		RUSS FRASER 15HP PUMP	
using Department designed formula:			
$(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$			
Efficiency:			
Centrifugal = 6.61			
Turbine = 7.04			
Data Entry (fill in underlined blanks)			
HP =	<u>15</u>		
Efficiency =	<u>6.61</u>		
Lift =	<u>15</u>		
PSI =	<u>40</u>		
Results Calculated			
$(hp)(\text{efficiency}) =$	99.15		
Head based on psi =	101.6		
Total dynamic head =	116.6		
(head + lift)			
Pump Capacity =	0.85	cubic feet per second	

Pump Capacity Calculation Sheet		<i>RUSS FRASER 20 HP PUMP</i>	
using Department designed formula:			
$(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$			
Efficiency:			
Centrifugal = 6.61			
Turbine = 7.04			
Data Entry (fill in underlined blanks)			
HP =	<u>20</u>		
Efficiency =	<u>6.61</u>		
Lift =	<u>11</u>		
PSI =	<u>40</u>		
Results Calculated			
$(hp)(\text{efficiency}) =$	132.2		
Head based on psi =	101.6		
Total dynamic head =	112.6		
(head + lift)			
Pump Capacity =	1.17	cubic feet per second	

2012

Oregon Water Resources Department October through September Water Use Recording and Reporting Form

2013

Consult the water right (permit, certificate, order) to determine applicable reporting conditions; the measurement, recording, and reporting conditions identified in a permitted or certified water right typically follow the place of use description. Use the columns below to document measurements for each authorized point of diversion/appropriation or reservoir. We ask that zeros be reported for any given month when water is not being used. Keep a copy of all measurement reports for your records. We encourage you to submit your water use data via our online utility when available, and to use the Monthly Water Use Forms for record keeping purposes. To lookup water rights, access the water use reporting webpage/online utility, or to obtain additional forms visit our web site: <http://www.wrd.state.or.us>

RUSSELL & PATTI FRASER
Water Right Holder's Name
FRASER Co (at) AOL.com
Water Right Holder's Email

HAWK FIELDS
Water Right Holder's Business Name or Entity Name
45965 Hwy 101 Bandon OR 97411
Water Right Holder's Complete Mailing Address

51033 50014
USER ID#
541-347-2923
Phone Number

Facility Report ID	→ 51033	Application: R71841 Permit: - R12100 Other:	Application: - Permit: - Other:	★ Application: G - 12655 Permit: G - 16351 Other:	Application: - Permit: - Other:
Describe the units of measurement as AF (acre-feet), G (gallons), KG (thousand gallons), MG (million gallons), CF (cubic feet), or MCF (million cubic feet)					
October - 2012	60,750.00 GAL				
November - 2012					
December - 2012					RECEIVED BY OWRD
January - 2013					
February - 2013	62,135.00 GAL		62,135		
March - 2013	71,405.00 GAL		71,405		DEC 30 2013
April - 2013	83,329.00 GAL		83,329		
May - 2013	132,412.00 GAL		132,412		SALEM, OR
June - 2013	291,053.00 GAL				RECEIVED
July - 2013	407,500.00 GAL				MAR 29 2013
August - 2013	283,000.00 GAL				
September - 2013	227,305.00 GAL				
TOTAL *					OWRD
Unit of Measurement	<input checked="" type="checkbox"/> G <input type="checkbox"/> KG <input type="checkbox"/> MG <input type="checkbox"/> AF <input type="checkbox"/> CF <input type="checkbox"/> MCF	<input type="checkbox"/> G <input type="checkbox"/> KG <input type="checkbox"/> MG <input type="checkbox"/> AF <input type="checkbox"/> CF <input type="checkbox"/> MCF	<input checked="" type="checkbox"/> G <input type="checkbox"/> KG <input type="checkbox"/> MG <input type="checkbox"/> AF <input type="checkbox"/> CF <input type="checkbox"/> MCF	<input type="checkbox"/> G <input type="checkbox"/> KG <input type="checkbox"/> MG <input type="checkbox"/> AF <input type="checkbox"/> CF <input type="checkbox"/> MCF	<input type="checkbox"/> G <input type="checkbox"/> KG <input type="checkbox"/> MG <input type="checkbox"/> AF <input type="checkbox"/> CF <input type="checkbox"/> MCF

Describe the method of measurement used: METER. If used for irrigation, total number of acres irrigated: 10AC

I certify this information is true and accurate to the best of my knowledge.

12/1/13 Date
Russell Fraser Signature
RUSSELL S. FRASER (OWNER, MGR) Name and Title (print)
HAWK FIELDS Company
541-347-2923 Phone Number

Please complete and mail to: Oregon Water Resources Department; Water Use Reporting Program; 725 Summer Street NE, Suite A; Salem, OR 97301.

★ These values represent water use per Ap G-12655, the systems are co-mingled, making reporting a challenge