

**CLAIM OF
BENEFICIAL USE
for Transfer with Multiple
Changes - Groundwater**



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 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.

RECEIVED
JUL 20 2023
OWRD

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>

GENERAL INFORMATION

Type of Authorized Change

This Claim is being submitted for a transfer involving multiple changes.

YES

Mark all that apply:

1. Change in POA(s) or Additional POA(s) 2. Change in Place of Use
3. Change in Character of Use

A separate section will be completed for each type of change authorized in the transfer final order.

1. File Information

APPLICATION #

T-13756

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Sunnyside Dairy, LLC		PHONE No. 509-837-4779	ADDITIONAL CONTACT No.
ADDRESS 4581 Maple Grove Rd			
CITY Sunnyside	STATE WA	ZIP 98944	E-MAIL rosalio@sunnysidedairy.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 Same as above		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

05/17/2023

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Andy Root	05/17/2023	Farm Manager

6. County:

Harney

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

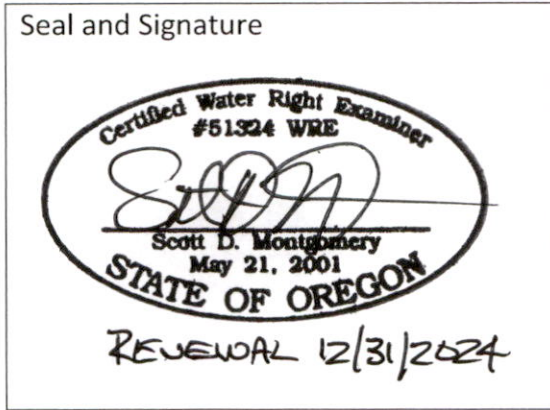
Add additional tables for owners of record as needed

RECEIVED
JUL 20 2023
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 Scott D Montgomery		PHONE No. 541-548-5833	ADDITIONAL CONTACT No. 541-420-0401
ADDRESS PO Box 767			
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.com

Transfer Holder of Record Signature or Acknowledgement

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
	Rosalio Brambilla	Manager	7-19-23

RECEIVED
JUL 20 2023
OWRD

SECTION 3
Changes Made

Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

Change #1

Change in POA(s) or Additional POA(s)

Did the transfer order authorize a change in the points of appropriation or additional points of appropriation? **YES**

If "NO", this Section can be deleted.

1. New or additional 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)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
#6	HARN 52027	L-112499	Malheur Lake Basin
#7	HARN 621	None	Malheur Lake Basin

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

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final? **NO**

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

RECEIVED
JUL 20 2023
OWRD

3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
#6	1/80 cfs per acre	2.06	Not on
#7	1/80 cfs per acre	4.12	Not on

System Description

Are there multiple new or additional Points of Appropriation (POA)? **YES**

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

#6 HARN 52027

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE 8" SIZE
Fairbanks Morse	320TDH	H16FL7100B0220F	Turbine	12"	8"

2. Motor Information

MANUFACTURER	HORSEPOWER
GE	100

RECEIVED

JUL 20 2023

3. 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)
100	40	230'	10'	2.06

OWRD

4. Provide pump calculations:

$Q = 7.04 \text{ ft}^4/\text{sec}/\text{hpxhp} = \frac{(7.04)(100)}{341.6} = 2.06 \text{ cfs}$
$\text{Total head, ft} = 101.6' + 230' + 10' = 341.6'$

5. 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)
NA			

6. Additional notes or comments related to the system:

B. Groundwater Source Information (Well and Sump)

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

NO

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

#7 HARN 621

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Fairbanks Morse	0173926	H16KL7100B0220F	Turbine	14"	10"

2. Motor Information

MANUFACTURER	HORSEPOWER
GE	200

3. 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)
200	40	230'	10'	4.12

4. Provide pump calculations:

$$Q = \frac{7.04 \text{ ft}^4/\text{sec}/\text{hpxhp}}{\text{Total head, ft}} = \frac{(7.04)(200)}{341.6} = 4.12 \text{ cfs}$$

$$\text{Total head, ft} = 101.6' + 230' + 10' = 341.6'$$

5. 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)
NA			

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

6. Additional notes or comments related to the system:

B. Groundwater Source Information (Well and Sump)

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

RECEIVED NO
JUL 20 2023
OWRD

Change #2

Change in Place of Use

Did the transfer order authorize a change in the place of use?

YES

If "NO", this Section can be deleted.

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
182.6	182.6
300.8	300.8

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

NEW USE(S)	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
	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.")

Change #3

Change in Character of Use

Did the transfer order authorize a change in character of use?

NO

RECEIVED

JUL 20 2023

OWRD

SECTION 4 CONDITIONS

All conditions contained in the transfer final order, 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 CHANGES WERE COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	11/28/2022	
COMPLETENESS DATE FROM ORDER (C)	10/1/2024	6/26/2023

* 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, or any extension final order require the installation of a meter or other 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 appropriation.

b. Has a meter been installed? YES

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
#6	McCrometer	14-05957-08	Not running	666385 AF	Fall 2014
#7	Lindsay Flowmaster	GT21101235	Not running	0	Summer 2023

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

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

RECEIVED

JUL 20 2023

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED

4. Recording and reporting conditions

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

5. Other conditions required by the transfer 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. 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):

**SECTION 5
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Well logs	HARN 621 & 52027
Aerial imagery	June 2020 image from USDA/FSA
Site photos	Pictures of irrigation system & place of use

RECEIVED

JUL 20 2023

OWRD

SECTION 6

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.

The changes that were authorized under the transfer final order must be mapped based on the developed locations; new or additional points of appropriation and place of use.

In cases where the order involved additional points of appropriation, the additional points should be mapped based on their developed locations. The original points of appropriation should be mapped based on the original right of record at the time the transfer final order was issued.

In cases where the order involved changing the place of use for a portion of a water right, the portion of the place of use being changed should be mapped based on the developed location. If the transfer also included portions of the place of use that were not being modified, but were receiving a new or additional point of appropriation, the place of use for those lands should be mapped based on the original right of record at the time the transfer final order was issued.

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.

The irrigation system & place of use were tied to approximate boundaries using a Trimble GeoXT 6000 GIS data collector. Point data was imported to Trimble Pathfinder software, converted to Statewide Lambert Projection & overlaid with aerial imagery to verify accuracy.

RECEIVED

JUL 20 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

JUL 20 2023

OWRD

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 112499

START CARD # 1022349

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Owner Well I.D. #6 First Name Last Name Company SUNNYSIDE DAIRY LLC Address 4581 MAPLE GROVE RD City SUNNYSIDE State WA Zip 98944

(2) TYPE OF WORK [X] New Well [] Deepening [] Conversion [] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD [X] Rotary Air [X] Rotary Mud [] Cable [] Auger [] Cable Mud [] Reverse Rotary [] Other

(4) PROPOSED USE [] Domestic [X] Irrigation [] Community [] Industrial/Commercial [] Livestock [] Dewatering [] Injection [] Thermal [] Other

(5) BORE HOLE CONSTRUCTION Special Standard: [] Yes (attach copy) Depth of Completed Well 500 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amount, Scks/lbs. Includes rows for 24", 20", and 12" diameters with materials like BENTONITE and amounts like 36 SCKS.

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other POURED DRY Backfill placed from 0 ft. to 335 ft. Material GRAVEL Size 3/8 Explosives used: [] Yes Type Amount

(6) CASING/LINER Table with columns: Casing, Liner, Dia, From, To, Gauge, Steel, Plastic, Welded, Thrd. Includes rows for 20" and 12" diameters.

Shoe [] Inside [] Outside [] Other Location of shoe(s) Temporary casing [] Yes Diameter From To

(7) PERFORATIONS/SCREENS Perforations Method FACTORY Screens Type Material

Table with columns: Perf, Screen, Casing, Liner, Screen Dia, From, To, Screen/slot width, Slot length, # of slots, Tele/pipe size. Includes a row for 230-335 diameter screen with 3 slots.

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Flowing Artesian Yield gal/min 1000 Drawdown 200' Duration (hr) 1

Table with columns: From, To, Description, Amount, Units. Includes a row for temperature 67 F.

(9) LOCATION OF WELL (legal description) County HARNEY Twp 23 No 3 Range 33 E or W.M. Sec 34 NW 1/4 of the NW 1/4 Tax Lot 5901 Street Address of Well (or nearest address) 5901 QUINCEY RD. CRANE

(10) STATIC WATER LEVEL Table with columns: Existing Well/Predeepening, Completed Well, Date, SWL(psi), SWL(ft). Includes row for completed well on 3-16-14 with SWL of 21.

WATER BEARING ZONES Table with columns: SWL Date, From, To, Est Flow, SWL (psi), SWL (ft). Includes rows for 2-24-14 and 3-16-14 with depths of 10' and 21'.

(11) WELL LOG RECEIVED BY OWRD Table with columns: Material, From, To. Includes layers like SANDY TOPSOIL, TAN CLAY-BRN SAND, GRAY CLAY-BRN SAND, DARK GRAY CLAY, FRACT. GRAY CLAY-SAND, DARK GRAY STICKY CLAY + LIGHT GREEN CLAYSTONE LAYERS WITH SAND, LIGHT GREEN CLAYSTONE WITH SAND + GRAVEL, GRAY PYMILE, BRN. CLAYSTONE-BLACK SAND, BLACK SANDSTONE, BRN. CLAY-CLAYSTONE LAYERS.

Date Started 2-23-14 Completed 3-16-14

(unbonded) Water Well Constructor Certification I certify that the work I performed on this well is in compliance with Oregon water supply well construction standards. License Number 1739 Date 3-23-14 Signed [Signature]

(bonded) Water Well Constructor Certification I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. License Number 1355 Date 3-23-14 Signed [Signature]

The original and first copy of this report are to be filed with the

WATER WELL REPORT

STATE OF OREGON

DEC 24 1974

State Well No. 23S/32E-33d

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

(Please type or print)

STATE ENGINEER

State Permit No.

HARNEY

(Do not write above this line)

SALEM, OREGON

16.5' N 1/4 E of SW cor. of NE 1/4 of SE 1/4 sec 33, 23 1/2

(1) OWNER:

Name Harman Schimbecker Address 8006 NE 125 Ave Vancouver, Washington

(2) TYPE OF WORK (check):

New Well [X] Deepening [] Reconditioning [] Abandon [] If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary [X] Cable [] Dug [] Driven [] Jetted [] Bored []

(4) PROPOSED USE (check):

Domestic [] Industrial [] Municipal [] Irrigation [X] Test Well [] Other []

(10) LOCATION OF WELL:

County HARNEY Driller's well number #7 SE 1/4 SE 1/4 Section 33 T. 23 R. 33 E. W.M. Bearing and distance from section or subdivision corner 6' So 20'E of the NW corner of the SE 1/4 of the SE 1/4

(11) WATER LEVEL: Completed well.

Depth at which water was first found 15 ft. Static level 7 ft. below land surface. Date 12/18/74 Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

Table with columns: MATERIAL, From, To, SWL. Rows include Topsoil Sandy, Sandstone Brown, Clay Br to Blue, Gravel, fine, unconsol., Claystone, hard, Gravel, med, unconsol., Sand Black, Clay, gray, soft, Clay, blue, soft, Sandstone, green, Gravel, fine, Claystone, gray, Claystone, brown.

RECEIVED JUL 20 2023 OWRD

Work started 12/10 19 74 Completed 12/13 19 74 Date well drilling machine moved off of well 12/13 19 74

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] W.D. Penhale Date 12/18, 1974 (Drilling Machine Operator)

Drilling Machine Operator's License No. 491

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name Western Drilling Co. (Person, firm or corporation) (Type or print)

Address Box 751

[Signed] John W. McArthur (Water Well Contractor)

Contractor's License No. 426 Date 12/18, 19 74

CASING INSTALLED:

14" Diam. from 0 ft. to 257 ft. Gage .025

PERFORATIONS:

Type of perforator used Factory Perforated Perforated? [X] Yes [] No. Size of perforations 3/16 in. by 3 in. 11,850 perforations from 20 ft. to 257 ft.

(7) SCREENS:

Well screen installed? [] Yes [X] No Manufacturer's Name Type Model No. Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

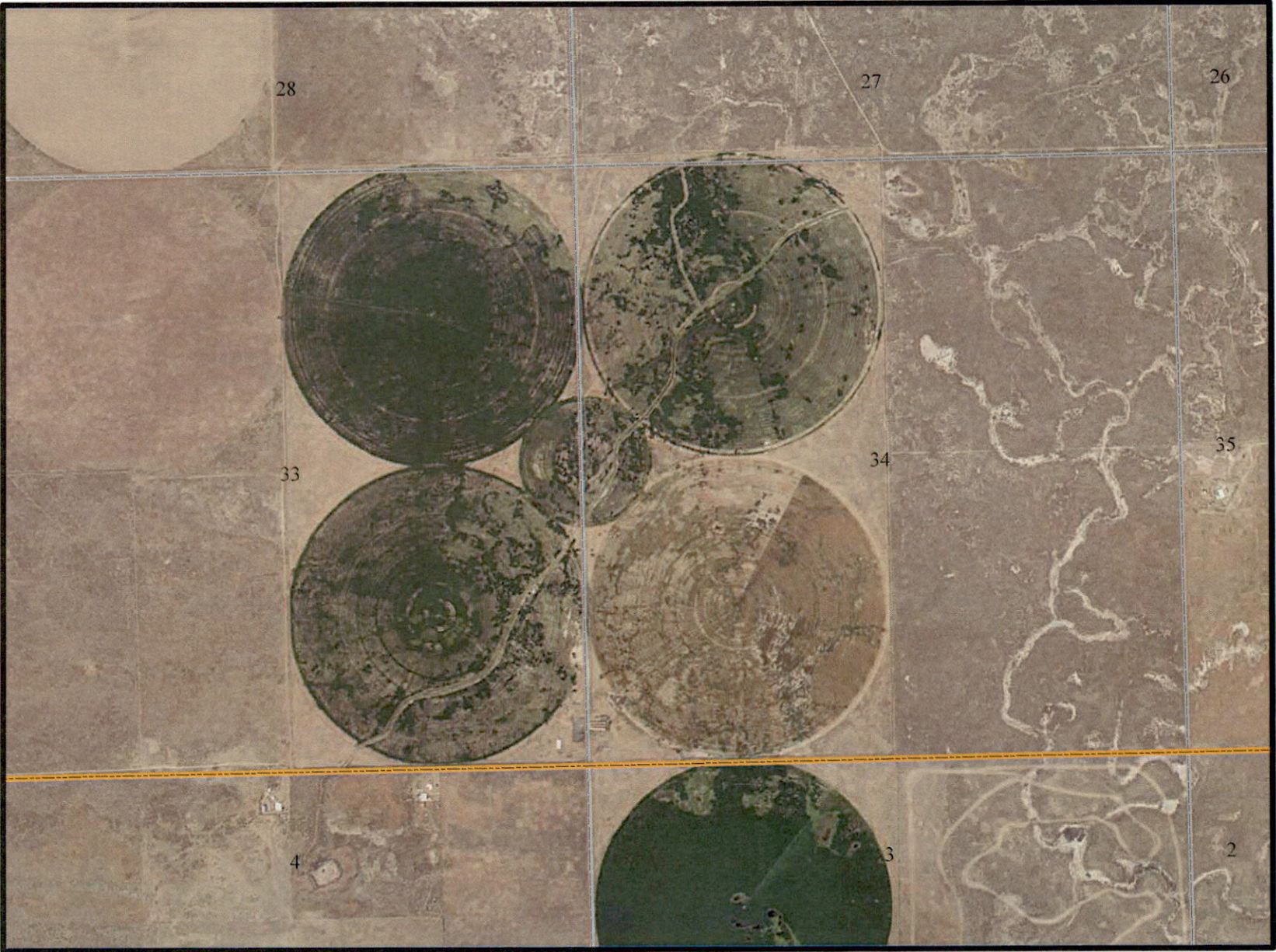
Drawdown is amount water level is lowered below static level Was a pump test made? [] Yes [X] No Yield: gal./min. with ft. drawdown after hrs. Bailer test gal./min. with ft. drawdown after hrs. Artesian flow g.p.m. Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

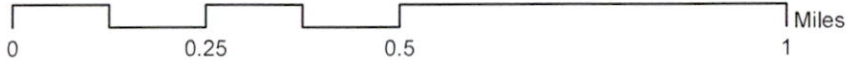
Well seal—Material used Cement Well sealed from land surface to 20 ft. Diameter of well bore to bottom of seal 24 in. Diameter of well bore below seal 24 in. Number of sacks of cement used in well seal 15 sacks Number of sacks of bentonite used in well seal Brand name of bentonite Number of pounds of bentonite per 100 gallons of water Was a drive shoe used? [] Yes [X] No Plugs Size: location ft. Did any strata contain unusable water? [] Yes [X] No Type of water depth of strata Method of sealing strata off Was well gravel packed? [X] Yes [] No Size of gravel: 3/4 minus Gravel placed from 20 ft. to 257 ft.

T23S R 33E, W.M.

2020 aerial imagery from NRCS Gateway website imported into ArcMap GIS software in statewide Lambert projection.



RECEIVED
JUL 20 2023
OWRD





ALL POINTS
ENGINEERING & SURVEYING, INC.
P.O. Box 767
Terrebonne, Oregon 97760

TRANSMITTAL

ATTN: Rosalio Brambilla
Sunnyside Dairy, LLC
4581 Maple Grove Rd
Sunnyside, WA 98944

Date: 6/29/23
Re: COBU

Prints Plans Plat Specifications Change order Other

Hello Rosalio

Attached is your Claim of Beneficial Use (COBU) and Final Proof Map for T-13756.

Please review and if it looks OK, sign page 3 of the COBU and forward all the documents to OWRD, ATTN: Certificates, 725 Summer St NE, Suite A Salem, OR 97301-1266 for processing. You will also need to send a check made out to OWRD for their fees of \$230.

Also attached is a Certificate Reimbursement Authority Estimate Application to get the Certificate faster, so we can do the transfer to add the new well. This needs to go in with the COBU along with a check made out to OWRD for their fees of \$125.

If you have any questions please don't hesitate to call us at 541-548-5833 or email.

Copies	No.	Description
1	1	Claim of Beneficial Use (11 pages letter bond)
1	2	COBU Map (1 page mylar)
1	3	Well Logs (2 pages letter bond)
1	4	Aerial Imagery (1 page letter bond)
1	5	Cert Reimb Authority Estimate App (1 page letter bond)
1	6	Invoice

Signed: _____

RECEIVED

JUL 20 2023

OWRD