# **CLAIM OF** BENEFICIAL USE for Surface Water Permits claiming 0.1 cfs or less



**Oregon Water Resources Department** 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

A fee of \$200 must accompany this form for permits with priority dates of July 9, 1987, or later. Claims received without the correct fee of \$200 will be returned.

# 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: http://www.oregon.gov/owrd/pages/wr/cwre info.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 503-986-0900 and ask for the Certificate Section.

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:

http://www.oregon.gov/owrd/pages/mgmt reimbursement authority.aspx

# GENERAL INFORMATION

NOV 1 5 2019

RECEIVED

OWRD

#### 1. File Information

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
S-86624	S-54377	

SECTION 1

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME ANDREW BOBILLOT		PHONE No. 541-530-8		ADDITIONAL CONTACT NO.
ADDRESS				
3937 GLENBROOK LOOP				
CITY	STATE	ZIP	E-MAIL	
RIDDLE	OREGON	97469		

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. <u>Each permit holder of record must sign this form.</u>

3. Permit holder of record (this may, or may not, be the current property owner)

PERMIT HOLDER OF RECORD		
ANDREW BOBILLOT		
ADDRESS		
3937 GLENBROOK LOOP		
CITY	STATE	ZIP
RIDDLE	OREGON	97469

ADDITIONAL PERMIT HOLDER OF RE	ECORD	
ADDRESS		
CITY	STATE	ZIP

- 4. Date of Site Inspection: MAY 30 AND SEPT. 18,2019
- 5. Person(s) interviewed and description of their association with the project:

Name	DATE	ASSOCIATION WITH THE PROJECT
ANDREW BOBILLOT	05/30/2019	OWNER
ANDREW BOBILLOT	09/18/2019	OWNER

- 6. County: **DOUGLAS**
- 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(4)):

OWNER OF RECORD			
ADDRESS			
CITY	STATE	ZIP	

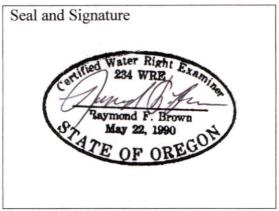
Add additional tables for owners of record as needed

NOV 1 5 2019 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.



RECEIVED NOV 1 5 2019 OWRD

RENEWS 12/31/2019

CWRE NAME		PHONE No	0.	ADDITIONAL CONTACT NO.
RAYMOND F. BROWN		541-839-	6185	541-680-8950
ADDRESS				
P.O. BOX 539				
CITY	STATE	ZIP	E-MAIL	
CANYONVILLE	OREGON	97417	Survey1@	frontier.com

# Permit Holder's of Record Signature or Acknowledgement

**Each** permit holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
Chylw Belillo	ANDREW BOBILLOT	OWNER	11-9-19
y .			

# CLAIM DESCRIPTION

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

POD Name or Number	Source	TRIBUTARY	
POD	GALESVILLE RESERVIOR PERMIT R-9964	COW CREEK	

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

POD Name or Number	Uses	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
POD	PASTURES AND COMMERCIAL GARDENS	GRASS/HAY, GARDEN VEGETABLES AND FLOWERS	MAR. 01 – OCT. 31	11.15 AF
Total Quanti	ty of Water Used			11.15 AF

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

WATER IS PUMPED BY A 2 H.P. CENTRIFUGAL PUMP THROUGH A 2 INCH PVC PIPE FOR 23 FEET, THEN PUMPED THROUGHA 2 INCH PVC PIPE FOR 538 FEET TO THE METER AND DIST. POINT. WATER IS THEN RAN THROUGH 2 INCH POLY PIPE TO RAINBIRDS LOCATED THROUGH OUT THE AREA OF USE, THERE IS 25 FEET DIFFERENCE FROM THE WATER LEVEL AT THE POINT OF DIVERSION TO THE DIST. POINT.

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

#### 4. Variations:

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below.

NO

(e.g. "The permit allowed three points of diversion. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

RECEIVED

NOV 1 5 2019

**OWRD** 

5. Claim Summary:

POD	0.07 CFS	0.08 CFS		IRRIGATION	5.0 AC	5.0 AC
	AUTHORIZED	RATE BASED ON SYSTEM	MEASURED		ALLOWED	
POD/POA NAME OR #	MAXIMUM RATE	CALCULATED THEORETICAL	AMOUNT OF WATER	USE	# OF ACRES	# OF ACRES

RECEIVED
NOV 1 5 2019
OWRD

# SYSTEM DESCRIPTION

Are there multiple PODs?	NO
If "YES" you will need to copy and complete Sections 4B through 4E for each POD.	
POD Name or Number this section describes (only needed if there is more than one):	

# A. Place of Use

Attach Claim of Beneficial Use map.

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

# **B. Diversion and Delivery System Information**

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport <u>and</u> apply the water from the point of diversion to the place of use.

1. Is a pump used?

YES

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

2. Pump Information

Manufacturer	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
FLOTEC	C48M2EC11C3	7496180	CENTRIFUGAL

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	*IF T FROM SOURCE TO PUMP  *IF A WELL, THE WATER LEVEL  DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
2.0 H.P.	50 PSI	5.0 FEET	20.0 FEET	0.08 CFS

# 4. Provide pump calculations:

2.0 X 6.61	132.2
=	= 0.08  CFS
127.0 + 25.0	152.0

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER	DURATION OF TIME	TOTAL PUMP OUTPUT
READING	READING	OBSERVED	(IN CFS)

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

RECEIVED

NOV 1 5 2019

OWRD

6. Sprinkler Information

Size	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
5/32	40.00 PSI	4.4 GPM	7.0	7.0	0.07 CFS

Reminder: For spri	nkler output determination use the reference information at the end of this doc	ument.
7. Additional note	es or comments related to the system:	
		9
C. Storage		
1. Does the distribulge in system / re	ution system include in-system storage (e.g. storage tank, eservoir)	NO
If "NO", item 2 an	d 3 relating to this section may be deleted.	
If "YES" is it a:	Storage Tank	NO
	Bulge in System / Reservoir	NO
	Complete appropriate table(s), unused table may be deleted.	
D. Gravity Flow (THE DEPARTMENT TY	w Pipe pically uses the Hazen-William's formula for a gravity flow pipe system)	
1. Does the system	n involve a gravity flow pipe?	NO
If "NO", items 2 th	rough 4 relating to this section may be deleted.	
•	v Canal or Ditch pically uses Manning's formula for canals and ditches)	
1. Provide descrip	tion and calculations if necessary:	

RECEIVED NOV 1 5 2019 **OWRD** 

# CONDITIONS

All conditions contained in the permit, permit amendment, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

#### 1. Time Limits:

Permits and any extension final orders contain any or all of the following dates: the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use was to be completed. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in

the permit or extension final order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	JAN. 04, 2007		
BEGIN CONSTRUCTION (A)			
COMPLETE CONSTRUCTION (B)		MAY 25, 2019	FINISH INSTALL OF WATER METER AND FISH SCREEN
COMPLETE APPLICATION OF WATER (C)	OCT. 01, 2011	AUG. 31, 2019	COMPLETE APPLICATION OF WATER

<sup>\*</sup> 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

- 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

If "NO", items 3b through 3f relating to this section may be deleted.

Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion.

b. Has a meter been installed?

YES

c. Meter Information

		(WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
RM, INC	20180375	WORKING	620X100	5/25/2019
I	RM, INC	RM, INC 20180375		(

If a meter has been installed, items 3d through 3f relating to this section may be deleted.

4. Recording and reporting conditions

RECEIVED

a. Is the water user required to report the water use to the Department?

NOV 1 5 2019

NO

WR

If "NO", item 4b relating to this section may be deleted.

OWRD

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?

YES

If "NO", items 5b through 5e relating to this section may be deleted.

Reminder: If fish screening devices were required, the COBU map must indicate their location in relation to the point of diversion.

b. Has the fish screening been installed?

YES

c. When was the fish screening installed?

DATE	By Whom
APR. 02, 2019	ANDREW BOBILLOT

Reminder: If the permit or transfer final order was issued on or after February 1, 2011, the fish screen is required to be approved by the Oregon Department of Fish and Wildlife regardless of the rate of diversion.

- d. If the diversion **involves a pump**  $\underline{and}$  the **total** diversion rate of all rights at the point of diversion is less than 225 gpm (0.5 cfs):
  - Has the self-certification form previously been submitted to the Department? NA
    - If not, go to <a href="http://www.oregon.gov/owrd/Pages/pubs/forms.aspx">http://www.oregon.gov/owrd/Pages/pubs/forms.aspx</a>, complete and attach a copy of the self-certification form to this claim, and send a copy of it to the Oregon Department of Fish and Wildlife (ODFW).

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. The ODFW self certification form needs to have been previously submitted or be attached to this form.

e. If the diversion does **not involve a pump**  $\underline{or}$  the **total** diversion rate of all rights at the point of diversion is 225 gpm (0.5 cfs) or greater:

RECEIVED

NOV 1 5 2019

• Has the ODFW approval been previously submitted?

NA

OWRD

 If not, contact and work with ODFW to ensure compliance. To demonstrate compliance, provide signed documentation from ODFW. A form is available at http://www.oregon.gov/owrd/Pages/pubs/forms.aspx

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. In order to receive a favorable approval, the ODFW/WRD "Fish Screen Inspection" form needs to have been previously submitted or be attached to this form.

- 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

If "NO", items 6b and 6c relating to this section may be deleted.

Reminder: If by-pass devices were required, the COBU map must indicate their location in relation to the point of diversion.

- 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. 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):	

# **ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
ODF&W	ODF&W FISH SCREEN LETTER
MAP	FINAL PROOF MAP
MAI	That i koof had

# **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.

SITE WAS SURVEYED USING A TOTAL STATION, TIE TO THE NEAREST GOVERNMENT CORNER, THEN ESTIMATED PROPERTY LINES BY EXISTING FENCES

NOV 1 5 2019 OWRD

# Map Checklist

 $\boxtimes$ 

 $\boxtimes$ 

Legend

CWRE stamp and signature

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

 $\boxtimes$ Map on polyester film. X Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)  $\boxtimes$ Township, Range, Section, Donation Land Claims, and Government Lots X If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters X Locations of fish screens and/or fish by-pass devices in relationship to point of diversion  $\boxtimes$ Locations of meters and/or measuring devices in relationship to point of diversion  $\boxtimes$ Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)  $\boxtimes$ Point(s) of diversion or appropriation (illustrated and coordinates) X Tax lot boundaries and numbers X Source illustrated if surface water X Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines") X Application and permit number or transfer number X North arrow RECEIVED

NOV 1 5 2019

OWRD



April 11, 2019

# Department of Fish and Wildlife

Rogue Watershed District Office 1495 East Gregory Road Central Point, OR 97502 (541) 826-8774 Fax: (541) 826-8776 www.odfw.com



Andrew Bobillot 3937 Glenbrook Loop Rd. Riddle, OR 97469

Dear Andy,

Regarding OWRD water right permit S-54377 (application S-86624), ODFW has determined that the fish screen at the point-of-diversion meets current fish protection criteria, and that a fish bypass device is not necessary. Thank you.

Sincerely,

Rich Kilbane

Ruch

SW Field Coordinator

Fish Screening and Passage Program

(541) 826-8774 ext. 243

RECEIVED

NOV 1 5 2019

OWRD

Cc: Raymond Brown, CWRE