

**CLAIM OF
BENEFICIAL USE
for Transfer New or Additional
POD Only**

OREGON 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.

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 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

Type of Authorized Change

This Claim is being submitted for a transfer where the only authorized change was a change in either point(s) of diversion or additional point(s) of diversion, or a combination of both.

If additional changes were authorized, you will need to select a different form.

YES NO

1. File Information

APPLICATION #

T-13116

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2. Property Owner (current owner information)

| | | | |
|---|--------------------|----------------------------------|----------------------------------|
| APPLICANT/BUSINESS NAME Walker & Jenny Sirnio et al | | PHONE NO. 520-360-2953 | ADDITIONAL CONTACT NO. |
| ADDRESS 35056 Matthews Rd | | | |
| CITY Eugene | STATE OR | ZIP 97405 | E-MAIL jsirnio@aol.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 applicant/owner | | |
| ADDRESS | | |
| CITY | STATE | ZIP |

4. Date of Site Inspection:

| |
|----------------|
| 8-17-23 |
|----------------|

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

| NAME | DATE | ASSOCIATION WITH THE PROJECT |
|---|----------------|--|
| Jenny Sirnio | 7-21-23 | owner |
| Dan Reitz/Oregon Water Services Inc. | 7-21-23 | Pump and fish screen contractor |

6. County:

| |
|-------------|
| Lane |
|-------------|

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 | | |
| ADDRESS | | |
| CITY | STATE | ZIP |

| | | |
|-----------------|-------|-----|
| OWNER OF RECORD | | |
| ADDRESS | | |
| CITY | STATE | ZIP |

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| | | |
|-----------------|-------|-----|
| OWNER OF RECORD | | |
| ADDRESS | | |
| CITY | STATE | ZIP |

| | | |
|-----------------|-------|-----|
| OWNER OF RECORD | | |
| ADDRESS | | |
| CITY | STATE | ZIP |

| | | |
|-----------------|-------|-----|
| OWNER OF RECORD | | |
| ADDRESS | | |
| CITY | STATE | ZIP |

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.



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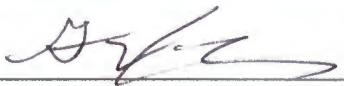
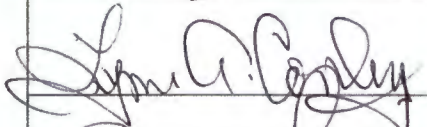
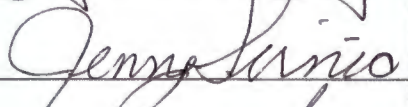
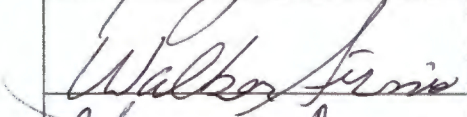
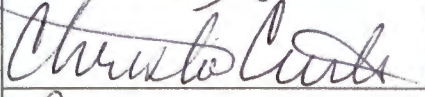
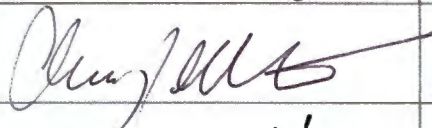
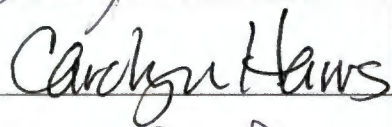
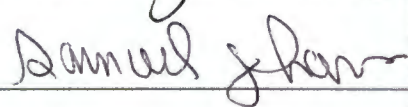

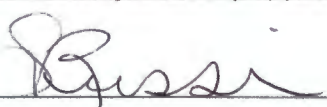
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| | | | | |
|-------------------------------------|--------------------|----------------------------------|---|--|
| CWRE NAME Dennis Boeger | | PHONE NO. 541-302-4996 | ADDITIONAL CONTACT NO. | |
| ADDRESS 1011 S. Bertelsen | | | | |
| CITY Eugene | STATE OR | ZIP 97402 | E-MAIL dboeger@boegerassociates.com | |

Transfer Holder of Record Signature or Acknowledgement

Each transfer 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 |
|---|--------------------|--------------------|---------|
|  | Gary Conley | Owner TL 100/POD 2 | 9/25/23 |
|  | Lynn Conley | Owner TL 100/POD 2 | 9/25/23 |
|  | Jenny Sirnio | Owner TL 200/POD 2 | 9/25/23 |
|  | Walker Sirnio | Owner TL 200/POD 2 | 9/25/23 |
|  | Christine Curtis | Owner TL 300/POD 1 | 9/25/23 |
|  | Christopher Curtis | Owner TL 300/POD 1 | 9/25/23 |
|  | Carolyn Harris | Owner TL 400/POD 3 | 9/25/23 |
|  | Sam Harris | Owner TL 400/POD 3 | 9/25/23 |
|  | Michelle Russi | Owner TL 500/POD 3 | 9/25/23 |
|  | Scott Russi | Owner TL 500/POD 3 | 9/25/23 |

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SECTION 3
CLAIM DESCRIPTION

Note: The Claim only needs to describe the new or additional point(s) of diversion. This Claim does not need to provide information for the original point(s) of diversion unless the original point of diversion is either a new or additional point of diversion on another right involved in this transfer.

1. New or additional point of diversion name or number:

| POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP) | SOURCE |
|---|-----------------------------|
| POD 1 (TL 300 - Existing) | Coast Fork Willamette River |
| POD 2 (TL 100/200) | Coast Fork Willamette River |
| POD 3 (TL 400/500) | Coast Fork Willamette River |

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, YES NO

or extension final? If yes, describe below.

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

3. Claim Summary:

| NEW OR ADDITIONAL POD NAME OR # | MAXIMUM RATE AUTHORIZED IN ORDER | CALCULATED THEORETICAL RATE BASED ON SYSTEM | AMOUNT OF WATER MEASURED |
|------------------------------------|-------------------------------------|--|-----------------------------|
| POD 1 (TL 300 - Ex) | 0.022 cfs | | |
| POD 2 (TL 100/200) | 0.035 cfs | | |
| POD 3 (TL 400/500) | 0.038 cfs | | |

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SECTION 4 - SYSTEM DESCRIPTION

Are there multiple new or additional Points of Diversion (POD)s?

YES NO

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

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

POD 1 (TL 300 - Curtis, Existing POD)

A. POD System Information

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

1. Pump Information

| MANUFACTURER | MODEL | SERIAL NUMBER | TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE) | INTAKE SIZE | DISCHARGE SIZE |
|--------------|-------|---------------|--|-------------|----------------|
| Gould | J10S | L2183273 | Centrifugal | 1-1/4" | 1" |

2. Motor Information

| MANUFACTURER | HORSEPOWER |
|--------------|------------|
| A.O. Smith | 1 hp |

3. Theoretical Pump Capacity

| HORSEPOWER | OPERATING PSI | LIFT FROM SOURCE TO PUMP | LIFT FROM PUMP TO PLACE OF USE | TOTAL PUMP OUTPUT (IN CFS) |
|------------|---------------|--------------------------|--------------------------------|----------------------------|
| 1 hp | 50 | 15 ft | 5 ft | 0.04 CFS |

4. Provide pump calculations:

@50 psi = 127 ft TDH=20+127=147 ft $Q_{pump} = 7.04 \frac{\frac{ft^4}{sec}(1 hp)}{147ft} = 0.05 cfs$

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) |
|-----------------------|----------------------|---------------------------|----------------------------|
| | | | |

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

B. Gravity Flow Pipe

1. Does the diversion involve a gravity flow pipe?

YES NO

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

C. Gravity Flow Canal or Ditch

1. Does the diversion involve a gravity flow ditch or canal?

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

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D. Additional notes or comments related to the system:

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POD 2 (TL 100 - Conley/TL 200 - Sirnio)

A. POD System Information

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

1. Pump Information

| MANUFACTURER | MODEL | SERIAL NUMBER | TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE) | INTAKE SIZE | DISCHARGE SIZE |
|--------------|-------|---------------|--|-------------|----------------|
| Gould | J10S | | Centrifugal | 1-1/4" | 1" |

2. Motor Information

| MANUFACTURER | HORSEPOWER |
|--------------|------------|
| A.O. Smith | 1 hp |

3. Theoretical Pump Capacity

| HORSEPOWER | OPERATING PSI | LIFT FROM SOURCE TO PUMP | LIFT FROM PUMP TO PLACE OF USE | TOTAL PUMP OUTPUT (IN CFS) |
|------------|---------------|--------------------------|--------------------------------|----------------------------|
| 1 hp | 50 | 15 ft | 5 ft | 0.03 CFS |

4. Provide pump calculations:

@50 psi = 127 ft TDH=20+127=147 ft $Q_{pump} = 6.61 \frac{\frac{ft^4}{sec}(1 hp)}{147ft} = 0.04 cfs$

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) |
|-----------------------|----------------------|---------------------------|----------------------------|
| | | | |

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

B. Gravity Flow Pipe

1. Does the diversion involve a gravity flow pipe? YES NO

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

C. Gravity Flow Canal or Ditch

1. Does the diversion involve a gravity flow ditch or canal? YES NO

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

D. Additional notes or comments related to the system:

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POD 3 (TL 400 - Harris/TL 500 - Russi)

A. POD System Information

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

1. Pump Information

| MANUFACTURER | MODEL | SERIAL NUMBER | TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE) | INTAKE SIZE | DISCHARGE SIZE |
|-----------------|---------|---------------|--|-------------|----------------|
| Flint & Walling | 4F19S10 | F0921WTX | Submersible | 1-1/4" | 1" |

2. Motor Information

| MANUFACTURER | HORSEPOWER |
|--------------|------------|
| A.O. Smith | 1 hp |

3. Theoretical Pump Capacity

| HORSEPOWER | OPERATING PSI | LIFT FROM SOURCE TO PUMP | LIFT FROM PUMP TO PLACE OF USE | TOTAL PUMP OUTPUT (IN CFS) |
|------------|---------------|--------------------------|--------------------------------|----------------------------|
| 1 hp | 50 | 15 ft | 5 ft | 0.03 CFS |

4. Provide pump calculations:

$$\text{@50 psi} = 127 \text{ ft TDH} = 20 + 127 = 147 \text{ ft} \quad Q_{\text{pump}} = 6.61 \frac{\frac{\text{ft}^4}{\text{sec}} (1 \text{ hp})}{147 \text{ ft}} = 0.04 \text{ cfs}$$

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) |
|-----------------------|----------------------|---------------------------|----------------------------|
| | | | |

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

B. Gravity Flow Pipe

1. Does the diversion involve a gravity flow pipe? YES NO
If "NO", items 2 through 4 relating to this section may be deleted.

C. Gravity Flow Canal or Ditch

1. Does the diversion involve a gravity flow ditch or canal? YES NO
If "NO", items 2 through 4 relating to this section may be deleted.

D. Additional notes or comments related to the system:

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SECTION 5 - 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 NEW AND/OR ADDITIONAL POD(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE" |
|----------------------------------|--------------------|--|
| ISSUANCE DATE | May 12, 2021 | |
| COMPLETENESS DATE FROM ORDER (C) | October 1, 2022 | September 21, 2022 |

* 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)?

YES NO

If "NO", you may delete the following table.

If for a transfer extension order, provide the following information:

| VOLUME | PAGE | DATE EXTENDED TO |
|--------|---------|------------------|
| 120 | 531-538 | |

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 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.

b. Has a meter been installed?

YES NO

c. Meter Information

| POD NAME OR # | MANUFACTURER | SERIAL # | CONDITION (WORKING OR NOT) | CURRENT METER READING | DATE INSTALLED |
|--------------------|--------------|----------|----------------------------|-----------------------|----------------|
| POD 1 (TL 300) | Master Meter | 20277523 | Working | 270 | 9-21-22 |
| POD 2 (TL 100/200) | Master Meter | 20277524 | Working | 70 | 9-21-22 |
| POD 3 (TL 400/500) | Master Meter | 22205907 | Working | 50 | 9-21-22 |

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

4. 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.

5. Fish Screening

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion? YES NO

If "NO", items b through e 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 NO

c. When was the fish screening installed?

| DATE | BY WHOM |
|---------|---|
| 9-21-22 | Dan Reitz – Oregon Water Services, Inc. |

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 and** the **total** diversion rate of all rights at the point of diversion is less than 225 gpm (0.5 cfs) and the permit was issued prior to February 1, 2011:

- Has the self-certification form previously been submitted to the Department? NA YES NO

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

- Has the ODFW approval been previously submitted? NA YES NO

6. By-pass Devices

a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion? YES NO

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

7. Other conditions required by the transfer final order or extension final order:

a. Was the water user required to restore the riparian area if it was disturbed? YES NO

b. Was a fishway required? YES NO

c. 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):

SECTION 6 - ATTACHMENTS

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

| ATTACHMENT NAME | DESCRIPTION |
|-----------------|-------------|
| | |
| | |
| | |

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 polyester 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.

For the purpose of this Claim, the map identifying the location of the place of use does not require a new survey. The location of the place of use identified on the Claim map should be based on the original right of record at the time the transfer final order was issued. In transfers approved for additional points of diversion, the original points must be identified the map 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.

Property boundaries for the subject site are per the Blue Heron Subdivision recorded on File 75, Slides 951-952 on file in the Lane County Oregon Surveyors Office, in Lane County, Oregon Survey and established per found monuments by field survey. Field survey also established all improvements on the site. Aerial images generated thru RLID Maps Pro (1-16-2018) and on Google Earth helped to confirm irrigated areas.

Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

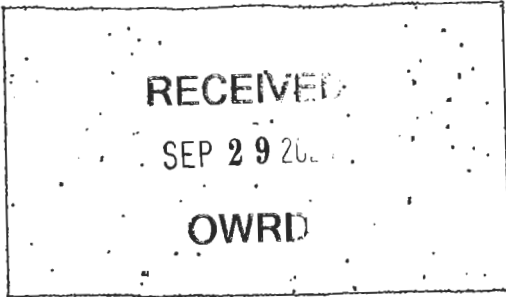
(Reminder: Incomplete maps and/or claims may be returned.)

- 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.) ***Not required for this type of Claim of Beneficial Use**
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Walker & Jenny Sirnio et al

35056 Mathews Rd Eugene OR 97405

Transaction Type: CODU

Fees Received: \$ 230⁰⁰

Cash Check: Check No. 6774

Name(s) on Check: W.J. Sirnio Jenny Sirnio

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

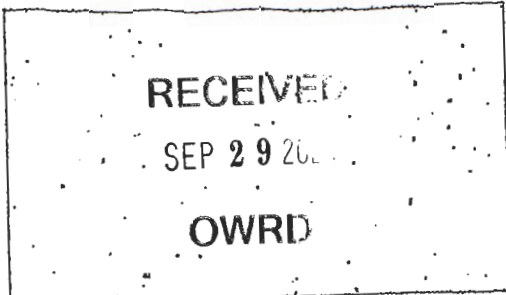
If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,
OWRD Customer Service Staff

Submission received by: Nick Reese
(Name of OWRD staff)

Instructions for OWRD staff:

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Fold and put one copy of the Submission Receipt with check/cash into the Safe slot. Place the other copy of the Submission Receipt with submittal in the Customer Service slot.



Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Walker & Jenny Sirnio et al

35056 Mathews Rd Eugene OR 97405

Transaction Type: COPU

Fees Received: \$ 230⁰⁰

Cash

Check:

Check No.

6774

Name(s) on Check: W.J. Sirnio Jenny Sirnio

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,

OWRD Customer Service Staff

Submission received by:

Nick Reese

(Name of OWRD staff)

Instructions for OWRD staff:

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Oregon

Tina Kotek, Governor

Water Resources Department

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

www.oregon.gov/owrd

10/2/2023

Walker & Jenny Sirmio
35056 Matthews Rd
Eugene, OR 97405

RE: Transfer T-13116

Dear Transfer Holder,

On September 29th, 2023, the Department received the Claim of Beneficial Use that you submitted for the above referenced file.

Enclosed, you will find as refund check in the amount of \$230.00. You are receiving this check because the right involved in the transfer has a priority date prior to July 9, 1987. Due to the priority date of the right, there was no fee required to submit the Claim.

If you have any additional questions, please feel free to contact me at [503-986-0811](tel:503-986-0811).

Sincerely,
Nick Reece

Public Service Representative
Certificates

cc:
file T-13116
Dennis Boeger, CWRE

Enclosures:
Check (#6774)