

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



**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)

**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. **YES NO**

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

**1. File Information**

APPLICATION #

**T-12603**

**RECEIVED**

**NOV 13 2023**

**OWRD**

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

APPLICANT/BUSINESS NAME <b>Cathy Johnson</b>		PHONE NO. <b>541-569-2272</b>	ADDITIONAL CONTACT NO.	
ADDRESS <b>175 Highway 82</b>				
CITY <b>Lostine</b>	STATE <b>OR</b>	ZIP <b>97857</b>	E-MAIL <b>cathy@silvercreekteam.com</b>	

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 <b>Cathy Johnson</b>				
ADDRESS <b>175 Highway 82</b>				
CITY <b>Lostine</b>	STATE <b>OR</b>	ZIP <b>97857</b>		

**4. Date of Site Inspection:**

**August 25, 2023**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Cathy Johnson</b>	<b>Aug. 25, 2023</b>	<b>Applicant</b>

**6. County:**

**Wallowa**

**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

Add additional tables for owners of record as needed

**RECEIVED**  
**NOV 18 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 <b>Jeffrey S. Hsu</b>		PHONE NO. <b>541-963-6092</b>	ADDITIONAL CONTACT NO.	
ADDRESS <b>2006 Adams Ave</b>				
CITY <b>La Grande</b>	STATE <b>OR</b>	ZIP <b>97850</b>	E-MAIL <b>jeff@bgbsurveyors.com</b>	

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
<i>Cathy Johnson</i>	CATHY JOHNSON	OWNER	11/3/2023

**RECEIVED**

**NOV 13 2023**

**OWRD**

**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
<b>POD#2</b>	<b>Lostine River</b>

**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
<b>POD#2</b>	<b>0.45 cfs</b>	<b>12.6 cfs (POD#2 only)</b>	<b>n/a</b>

**RECEIVED  
NOV 13 2023  
OWRD**

## 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#2

### 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
n/a					

#### 2. Motor Information

MANUFACTURER	HORSEPOWER
n/a	

#### 3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)

#### 4. Provide pump calculations:

#### 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

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

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

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

Attach measurement notes.

**RECEIVED**  
**NOV 18 2023**  
**OWRD**

**C. Gravity Flow Canal or Ditch**

(THE DEPARTMENT TYPICALLY USES MANNING’S FORMULA FOR CANALS AND DITCHES)

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.

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)
Earth	4	1.5	1	0.22	48	5115	0.9%	12.6

3. Provide calculations:

See Attached. Elevation difference and distance taken from POD to diversion structure at South line of place of use as shown on map. Cross section of ditch measured at ditch adjacent to diversion structure along South line of place of use.

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)
n/a			

Attach measurement notes.

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

At time of inspection, irrigation season had passed and no measurement could be taken.

**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:

**RECEIVED**  
**NOV 13 2023**  
**OWRD**

	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	<b>August 28, 2017</b>	
COMPLETENESS DATE FROM ORDER (C)	<b>October 1, 2018</b>	<b>System was a preexisting system at time of application</b>

\* 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

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

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? **YES** 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
<b>David Bates</b>	<b>Wallowa Watermaster</b>	<b>Conversation with Mr. Bates on 9/7/2023, he indicated that this device was approved.</b>

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED
<b>Parshall Flume</b>	<b>Working</b>	<b>Unknown – Prior to 2018</b>

RECEIVED

NOV 13 2023

OWRD

4. Recording and reporting conditions

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

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
1994	Oregon Department of Fish and Wildlife

**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

If not, go to <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>, complete and attach a copy of the 'ODFW Small Pump Screen 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** *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

If not, contact and work with ODFW to ensure compliance. To demonstrate compliance, provide signed documentation from ODFW. A form is available at:

<https://www.oregon.gov/OWRD/Forms/Pages/default.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? 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):

RECEIVED

NOV 18 2023

OWRD



**SECTION 6**  
**ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
<b>Ditch Calculation</b>	<b>Ditch Calculation</b>
<b>Fish Screen Inspection Form</b>	<b>Fish Screen Inspection Form</b>

**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.

**Point of Diversion, headgate, fish screen and parshall flume tied with RTK GPS. Cross Section of ditch at place of use also tied with RTK GPS. Ditch placed by aerial photo and LIDAR data. Aerial Photo produced by Oregon State Imagery Program dated 2017. Lidar Data from DOGAMI, dated 2012.**

**RECEIVED**  
**NOV 13 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.) **\*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

RECEIVED  
NOV 13 2023  
OWRD

## Ditch Capacity Calculator

using Manning's Formula

---

### Data Entry (fill in underlined blanks)

---

Top Width = 4 feet  
Bottom Width = 1.5 feet  
Depth = 1 feet  
Fall = 48 feet per 5115 feet of distance  
Grade = 0.00938416 , or 0.9%  
n Factor = 0.02

### Results calculated

---

Area of cross-section = 2.75 square feet  
Wetted Perimeter = 4.701562 feet  
Hydraulic Radius = 0.584912  
Velocity = 4.576 feet per second  
  
**Calculated Ditch Capacity = 12.6 cubic feet per second**

RECEIVED  
NOV 13 2023  
OWRD



**Oregon Department of Fish and Wildlife  
Oregon Water Resources Department**

**Fish Screen Inspection Form**

**Applicant**

Name: Cathy Johnson	Phone: 541-568-2272
Applicant: 175 Hwy 82, Lostine OR 97857	E-mail: cathy@silvercreekteam.com
Application Number: T-12603	Water Right Permit Number:
Water Right Amount (cfs):	

**Diversion**

Stream: Lostine River	Tributary to: Wallowa River
Address (if different from applicant):	Gravity Type (gravity or pump):
Location: T 1 S , R 43 E , Sec 22	GPS Coordinates (UTM):45.470194 , 117.42544
SATS:	

**Pump Information**

Brand:	Horsepower:	Intake Size:
--------	-------------	--------------

**Screen Information**

Type/Brand: ODFW Rotary Drum	Installed By: ODFW
Date Installed: 1994	Date of Inspection: 09/26/2023
Inspected by: Chuck Simpson	Agency: ODFW
Comments: Screen meets criteria at 4.0 CFS 85% submergence level	

After talking with Water Master David bates and ODFW Engineer Joel Watts Screen will meet criteria with this additional water right Chuck Simpson ODFW Screens Manager Enterprise

- Screen meets current state criteria for fish protection
- Screen does not meet current state criteria for fish protection
- Another screen inspection should be done before water use begins
- Fish passage meets current criteria
- Fish passage does not meet current criteria
- Fish passage not required
- Another fish passage inspection should be completed before water use begins
- Bypass structure meets current state criteria
- Bypass structure does not meet current state criteria
- Bypass structure not required

**RECEIVED  
NOV 18 2023  
OWRD**

**RECEIVED  
NOV 18  
OWRD**