

## Completion Checklist for Claims of Beneficial Use

Application # G 14939                      Transfer # \_\_\_\_\_  
 Date Received 11/5/2012  
 CWRE Name Darryl Anderson              Claim Logged yes  
 File Marked \_\_\_\_\_  
 Oversized Map # 727 yes folder V  
 Reviewer E.O.

### Map Review:

- Map on polyester film (OAR 690-014-0170(1) & 310-0050(1)(b))
- Application & permit #; or transfer # (OAR 690-014-0100(1))
- Disclaimer (OAR 690-014-0170(5))
- North arrow (OAR 690-310-0050(2)(c))
- CWRE stamp and signature (OAR 690-014 & 310-0050)
- Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map) (014 & 310)
- Township, range, section, and tax lot numbers (OAR 690-310-0050(4))
- \_\_\_\_\_ Source illustrated if surface water (OAR 690-014-0170(3))
- \_\_\_\_\_ Point(s) of diversion or appropriation (illustrated) (OAR 690-014(4) & 690-310-0050)
- \_\_\_\_\_ Point(s) of diversion or appropriation (coordinates)(OAR 690-014(4) & 690-310-0050)
- \_\_\_\_\_ Conveyance structures illustrated (pump, pipelines, ditches, etc.) (OAR 690-310-0050)
- \_\_\_\_\_ Description of the location, in relation to the point of diversion or appropriation, of any fish screens, by-pass devices, and measuring devices required (OAR 690-014-0170(4))
- \_\_\_\_\_ Place of use (1/4 1/4, or projected 1/4 1/4 lines within DLCs, or Gov Lots; if irrigation, # of acres in each subdivision; if for domestic or human consumption, location of dwelling or spigot) (OAR 690-310-0050, 690-014, 690-380-6010)

### Report Review:

- On form or format provided by the Department (OAR 690-014-0100(1))
- Application & permit #; or transfer # (OAR 690-014)
- Ownership information (OAR 690-014)
- Date of survey (OAR 690-014)
- Person interviewed (OAR 690-014)
- County (OAR 690-014)
- \_\_\_\_\_ Description of conveyances system (from POD to POU) (OAR 690-014-0100)
- \_\_\_\_\_ Source(s) of water (OAR 690-014-0100)
- \_\_\_\_\_ Place of use location (OAR 690-014-0100)
- \_\_\_\_\_ Type of use (OAR 690-014-0100)
- \_\_\_\_\_ Extent of use (OAR 690-014-0100)
- \_\_\_\_\_ Rate and Duty (OAR 690-014-0100)
- \_\_\_\_\_ Diversion rate for each use (OAR 690-014-0100)
- \_\_\_\_\_ Diversion works description (pump make, serial model, capacity, and description) (OAR 690-014-0100)
- \_\_\_\_\_ System capacity (OAR 690-014-0100)
  - \_\_\_\_\_ Calculated capacity of system (required)
  - \_\_\_\_\_ Measured amount of use (optional)
- \_\_\_\_\_ Permit/Transfer Final Order Conditions (OAR 690-014-0100)
  - \_\_\_\_\_ Time limits
  - \_\_\_\_\_ Initial water level measurements
  - \_\_\_\_\_ Annual static water level measurements
  - \_\_\_\_\_ Measurement, recording, and reporting
    - \_\_\_\_\_ Meter/measuring device
    - \_\_\_\_\_ Water use reporting
  - \_\_\_\_\_ Fish screening and/or by-pass
  - \_\_\_\_\_ Pump test (ground water)
  - \_\_\_\_\_ Other conditions
- \_\_\_\_\_ CWRE stamp and signature (OAR 690-014-0100)
- Signature(s) of permittee or transfer holder (OAR 690-014-0100)

DEF = deficient

N/A = Not Applicable

S:\groups\wr\certs\Resource Center\Forms\_Checklists\_Mailing Instructions\COBU Checklist 1-11-2012.rtf

# CLAIM OF BENEFICIAL USE

## for Permits claiming more than 0.1 cfs and All Transfers



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

No fee is required for submitting this form for a transfer.

A fee of \$150 must accompany this form to be accepted for permits  
with a priority date of July 9, 1987, or later. (ORS 536.050(1))

**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.wrd.state.or.us/OWRD/WR/cwre\\_info.shtml#](http://www.wrd.state.or.us/OWRD/WR/cwre_info.shtml#).

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.

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.wrd.state.or.us/OWRD/mgmt\\_reimbursement\\_authority.shtml](http://www.wrd.state.or.us/OWRD/mgmt_reimbursement_authority.shtml).

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### SECTION 1 GENERAL INFORMATION

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#### 1. File Information

APPLICATION # (G, R, S OR T) <b>G-14939</b>	PERMIT # (IF APPLICABLE) <b>G-14055</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>NA</b>
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#### 2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME <b>3S Ranches</b>		PHONE NO. <b>541-493-2772</b>	ADDITIONAL CONTACT NO. <b>NA</b>
ADDRESS <b>29327 Weaver Springs Lane</b>			
CITY <b>Burns</b>	STATE <b>OR</b>	ZIP <b>97720</b>	E-MAIL <b>NA</b>

If the current property owner is not the permit or transfer holder of record, it is recommended that an assignment be filed with the Department. **The COBU must be signed by each permit or transfer holder of record.**

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

PERMIT OR TRANSFER HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT OR TRANSFER HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Travis Singhose	12/12/2006	Owner

6. County:

7. If any property described in the place of use of the permit or transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(4)):

\*\*Mark "NA" if there are no owners of property not included in this claim

OWNER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL OWNER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

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**SECTION 2**  
**SYSTEM DESCRIPTION**

**A. Points of Diversion/Appropriation**

1. Point of diversion/appropriation name or number:

POINT OF DIVERSION/APPROPRIATION (POD/POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well 1	HARN 51288	L83217
Well 2	HARN 1990	

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 diversion/appropriation source and, if from surface water, the tributary:

POD/POA NAME OR NUMBER	SOURCE	TRIBUTARY
Well 1	groundwater	NA
Well 2	groundwater	NA

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

POD/POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	RATE OR VOLUME FOR USE (CFS, GPM, OR AF)
Well 1	irrigation	Alfalfa, grass	Mar. 1 – Oct. 31	2.1 cfs
Well 2	Irrigation	Alfalfa, grass	Mar. 1 – Oct. 31	0.4 cfs
<b>Total Quantity of Water Used</b>				<b>2.5 cfs</b>

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

**Water is pumped from 2 wells through a series of 8" and 6" mainlines and a storage pond to 3 pivots. Well #1 pumps directly to a small pivot and to a pond for in system storage, where it is then pumped into 2 large pivots. Well #2 pumped directly to the small pivot. (See attached map and photographs.)**

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## SECTION 2

### SYSTEM DESCRIPTION (B through H)

Are there multiple PODs or POAs?

YES

If "YES" you will need to copy and complete Sections 2B through 2H for each POD/POA.

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

Well 1

#### B. Place of Use

1. Is the right for municipal use?

NO

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
25S	30E	W.M.	21	SE SW			Irrigation	26.2	0.0
25S	30E	W.M.	21	SW SE			Irrigation	23.8	0.0
25S	30E	W.M.	21	SE SE			Irrigation	34.7	0.0
25S	30E	W.M.	27	NW NW			Irrigation	33.2	0.0
25S	30E	W.M.	27	SW NW			Irrigation	1.0	0.0
25S	30E	W.M.	27	SE SW			Irrigation	32.0	0.0
25S	30E	W.M.	28	NW NE			Irrigation	1.6	0.0
25S	30E	W.M.	28	NE NE			Irrigation	36.5	0.0
25S	30E	W.M.	28	SE NE			Irrigation	1.5	0.0
<b>Total Acres Irrigated</b>								<b>190.5</b>	<b>0.0</b>

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.

#### C. Diversion and Delivery System Information

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 diversion/appropriation to the place of use.

1. Is a pump used?

YES

2. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
NA	NA	NA	Turbine	10"	12"
Western Roller Pump	NA	D68249	Turbine	6"	8"

3. Motor Information

MANUFACTURER	HORSEPOWER
GE Motor	125
Marathon Electric Motor	75

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**4. 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)
125	93.05	45	13.68	3.02
75	See	Attached	Sheets	

**5. Provide pump calculations:**

See Attached

**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)
NA			

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

**7. Is the distribution system piped?**

YES

**8. Mainline Information**

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
8"	9324	steel	buried
6"	1765	steel	Buried

**9. Lateral or Handline Information**

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

**10. Sprinkler Information**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
See	Attached				

**Reminder: For sprinkler output determination use the reference information at the end of this document.**

**11. Pivot Information**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
Valley	1062'	15	486.00	1.08
Valley	1455'	15	869.38	1.94
Valley	666'	15	165.41	0.37

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

Well 1 includes an additional 0.4 cfs to make up for any deficiency in Well 2 flows.

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**D. Groundwater Source Information (Well and Sump)**

**1. Is the appropriation from ground water (well or sump)?**

YES

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2. Describe the access port (type and location) or other means to measure the water level in the well:

Access West side of Well – 2” Access Port

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
12”	100’	100’	5/19/93	N/A	Doug Stills	Timothy K. Riley

4. In addition to the information requested in item “3” above, provide any other information which may help the Department locate any well logs associated with this appropriation.

HARN 51288

5. Is the appropriation from a dug well (sump)? NO

**E. Storage**

1. Does the distribution system include in-system storage (i.e. storage tank, bulge in system / reservoir) YES

If “YES” is it a: Storage Tank NO

Bulge in System / Reservoir YES

*Complete appropriate table(s), unused table may be deleted.*

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
NA		

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Pond/Bulge in System	5’	13

**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? 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? NO

**H. Reservoir**

1. Does the claim involve a reservoir modified through a transfer? NO

Reminder: Complete this section if the reservoir right has been modified through the transfer process. If the claim is for a permitted reservoir use the Claim of Beneficial Use form for reservoirs.

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## SECTION 2

### SYSTEM DESCRIPTION (B through H)

Are there multiple PODs or POAs?

**YES**

If "YES" you will need to copy and complete Sections 2B through 2H for each POD/POA.

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

Well 2

#### B. Place of Use

1. Is the right for municipal use?

**NO**

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
25S	30W	W.M.	27	SE SW			Irrigation	32.0	0
<b>Total Acres Irrigated</b>								<b>32.0</b>	<b>0</b>

**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.**

#### C. Diversion and Delivery System Information

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 diversion/appropriation to the place of use.

1. Is a pump used?

**YES**

2. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
NA	NA	NA	Submersible	4"	6"

3. Motor Information

MANUFACTURER	HORSEPOWER
NA	10

4. 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)
10	52.14	45	0.40	0.37

5. Provide pump calculations:

See Attached

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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)
NA			

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

7. Is the distribution system piped?

YES

8. Mainline Information

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6"	67'	steel	Buried

9. Lateral or Handline Information

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

10. Sprinkler Information

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
See	Attached				

Reminder: For sprinkler output determination use the reference information at the end of this document.

11. Pivot Information

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
Valley	666'	15	165.41	0.37

12. Additional notes or comments related to the system:

NA

D. Groundwater Source Information (Well and Sump)

1. Is the appropriation from ground water (well or sump)?

YES

2. Describe the access port (type and location) or other means to measure the water level in the well:

No access port, submersible pump

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
16"	120'	120'	N/A	7/16/06	Travis Singhose	Timothy K. Riley

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4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

HARN 1990

5. Is the appropriation from a dug well (sump)? NO

**E. Storage**

1. Does the distribution system include in-system storage (i.e. storage tank, bulge in system / reservoir) NO

**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? 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? NO

**H. Reservoir**

1. Does the claim involve a reservoir modified through a transfer? NO

**Reminder: Complete this section if the reservoir right has been modified through the transfer process. If the claim is for a permitted reservoir use the Claim of Beneficial Use form for reservoirs.**

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## SECTION 3 CONDITIONS

All conditions contained in the permit, permit amendment, 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:

Permits, transfer final orders, 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, extension or transfer final order:

	DATE FROM PERMIT OR TRANSFER	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	Aug 29, 2001		
BEGIN CONSTRUCTION (A)	Aug 29, 2002	1993	Well 1 was completed prior to permit being issued
COMPLETE CONSTRUCTION (B)	Oct 1, 2010	2010	Meter installed on Well 2
COMPLETE APPLICATION OF WATER (C)	Oct 1, 2012	2010	Construction completed and water used

\* MUST BE WITHIN PERIOD BETWEEN PERMIT, TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

### 2. Is there an extension final order(s)?

YES

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

VOLUME	PAGE	DATE EXTENDED TO
Not listed on	Final Order	10/1/2012

### 4. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement?

YES

*If "NO", items 4b through 4d relating to this section may be deleted.*

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b. What month was the initial measurement to be taken in?

NOV 05 2012

Not indicated in permit

c. Was the measurement submitted to the Department?

YES

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d. If the initial measurement was not submitted, provide that measurement now, if available:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
NA			

### 5. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements?

NO

### 6. Pump Test (Required for most ground water permits prior to issuance of a certificate)

a. Did the permit require the submittal of a pump test?

YES NO

*If "NO", items 6b through 6e relating to this section may be deleted.*

- b. Has the pump test been previously submitted to the Department? YES NO
- c. Is the pump test attached to this claim? YES NO
- d. Has the pump test been approved by the Department? YES NO
- e. Has a pump test exemption been approved by the Department? YES NO

7. Measurement Conditions:

- a. Does the permit, permit amendment, transfer final order, or any extension final order require the installation of a meter or 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 diversion or appropriation.**

- b. Has a meter been installed? YES
- c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 1	Aquamaster	30991	working	Meter turned off	2006
Well 2	Aquamaster	NA	working	Meter turned off	2010

8. Recording and reporting conditions

- a. Is the water user required to report the water use to the Department? YES
- b. Have the reports been submitted? YES

METHOD OF SUBMITTING REPORT (PAPER OR ELECTRONIC)	WATER USER REPORTING ID
<i>Paper</i>	

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

9. Fish Screening

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

10. 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

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

- a. Were there special well construction standards? NO
- b. Was submittal of a ground water monitoring plan required? NO
- c. Was the water user required to restore the riparian area if it was disturbed? NO
- d. Was a fishway required? NO
- e. Was submittal of a letter from an engineer required prior to storage of water? NO
- f. Was submittal of a water management and conservation plan required? NO
- g. Other conditions? NO

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NOV 05 2012

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

NA

## SECTION 4 VARIATIONS

Include a description of variations from the permit, permit amendment final order, extension final order, or transfer final order. (i.e. "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.")

**The permit allows for 200.1 acres of irrigation. The water user only developed 190.5 acres. 9.6 acres in the SW ¼ SW ¼ of Section 22 listed on this permit are being moved to another permit, and are not included on this claim of beneficial use. The two larger pivots use more water than is listed on this permit, but the entire area covered by these irrigation systems are covered by multiply water rights.**

## SECTION 5 ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Map	Map
Well Logs (2)	Well Logs (2)
Pivot Flows (3)	Pivot Flows (3)
Worksheet for pressure pipe – Well 2 to Pivot 4	Worksheet for pressure pipe – Well 2 to Pivot 4
Theoretical pump capacity – Well 2 to Pivot 4	Theoretical pump capacity – Well 2 to Pivot 4
Worksheet for pressure pipe – Well 1 to pond	Worksheet for pressure pipe – Well 1 to pond
Theoretical pump capacity – Well 1 to pond	Theoretical pump capacity – Well 1 to pond
Worksheet for pressure pipe – Pond To Pivot 1	Worksheet for pressure pipe – Pond To Pivot 1
Theoretical pump capacity – Pond To Pivot 1	Theoretical pump capacity – Pond To Pivot 1
Worksheet for pressure pipe – Pond To Pivot 2	Worksheet for pressure pipe – Pond To Pivot 2
Theoretical pump capacity – Pond To Pivot 2	Theoretical pump capacity – Pond To Pivot 2
Photographs	Photographs

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## SECTION 6 CLAIM SUMMARY

POD / POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well 1	2.5 cfs	3.9 cfs (see variations)	NA	Irrigation	200.1	190.5
Well 2	0.4 cfs	0.37 cfs	NA	Irrigation	32.0	32.0

## 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.

**This survey was completed using a Trimble 5700 RTK GPS system, and the corner tied is an aluminum cap monument located at the north west corner of section 27.**

*FP's map  
only shows  
32.0 acres  
- double counted  
Sec 27 SWSE  
Total = 190.5*

### 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")

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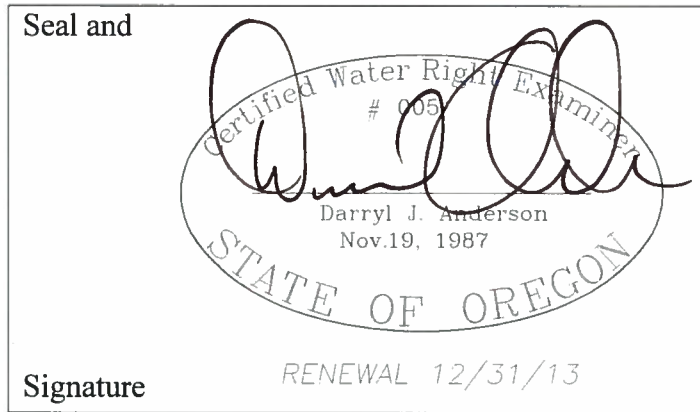
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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**SECTION 8  
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>Darryl J. Anderson</b>		PHONE NO. <b>541-947-4407</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>17861 Highway 395</b>			
CITY <b>Lakeview</b>	STATE <b>OR</b>	ZIP <b>97630</b>	E-MAIL <b>darryla@andersonengineering.com</b>

Permit or Transfer Holder's of Record Signature or Acknowledgement

*This Claim of Beneficial Use must be signed by each permit or transfer holder of record.*

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	DATE
	<b>Travis Singhose</b>	<b>10-21-12</b>

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STATE OF OREGON  
**WATER WELL REPORT**  
(as required by ORS 537.765)

*HARNEY*  
~~2004~~  
 1990

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MAY 24 1993

25s/30e/27c

(START CARD) # 49106

WATER RESOURCES DEPT.

(1) OWNER: Well Number \_\_\_\_\_  
 Name Doug Stills  
 Address P.O. Box 247  
 City Culver State OR Zip 97734

(2) TYPE OF WORK:  
 New Well  Deepen  Recondition  Abandon

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  
 Other \_\_\_\_\_

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval  Yes  No Depth of Completed Well 00 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

Diameter	HOLE		Material	SEAL		Amount sacks or pounds
	From	To		From	To	
18"	0	18	Bentonite	0	18	28sacks
12"	18	100				

How was seal placed: Method  A  B  C  D  E  
 Other poured and tamped

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: 12"	+1	100	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_  
 (7) PERFORATIONS/SCREENS:  
 Perforations Method factory cut  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60	100	1/8x3/16	20	12		<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  

Yield gal/min	Drawdown	Drill stem at	Time
300	45	82	5 hr.

Temperature of Water 50° Depth Artesian Flow Found \_\_\_\_\_  
 Was a water analysis done?  Yes  No By whom \_\_\_\_\_  
 Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
 Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
 County Harney Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 25S N or S. Range 30 E B or W. WM.  
 Section 27 SE 1/4 SW 1/4  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) Weaver Springs RD

(10) STATIC WATER LEVEL:  
34 ft. below land surface. Date 5-19-93  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
34'	100'	300	34

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
Topsoil	0	2	
Clay brn	2	20	
Clay sand fine	20	25	
clay yellow	25	45	34
claystone gravel	45	57	34
cinders blk	57	78	34
clay tan	78	83	34
cinder brn	83	100	34

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Date started 5-13-93 Completed 5-19-93

(unbonded) Water Well Constructor Certification:  
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.  
 WWC Number \_\_\_\_\_  
 Signed \_\_\_\_\_ Date \_\_\_\_\_

(bonded) Water Well Constructor Certification:  
 I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.  
 WWC Number 1424  
 Signed Timothy K. Riey Date 5-20-93

# HARN 51288

## STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765)

WELL I.D. # L 83217  
START CARD # 185150

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

(1) LAND OWNER Name Travis Singhose Well Number \_\_\_\_\_  
Address 29327 Wedder Springs Ln  
City Burns State OR Zip 97720

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 120 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
<u>existing</u>						
<u>20</u>	<u>75</u>	<u>105</u>				
<u>16</u>	<u>105</u>	<u>120</u>				

How was seal placed: Method  A  B  C  D  E  
 Other existing

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>16</u>	<u>+1</u>	<u>120-250</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:  
 Perforations Method \_\_\_\_\_  
 Screens Type mosaic Material stainless steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>75</u>	<u>115</u>	<u>.150</u>	<u>cont'd</u>	<u>16</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
<u>100</u>	<u>0</u>		<u>1 hr.</u>

Temperature of water 57° Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done  NO  Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County Harney Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 25S N or S Range 30E E or W. WM.  
Section 27 SW 1/4 3W 1/4  
Tax Lot 2400 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Wedder Springs Rd

(10) STATIC WATER LEVEL:  
65 ft. below land surface. Date 7-16-06  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found existing

From	To	Estimated Flow Rate	SWL
<u>65</u>	<u>120</u>	<u>1500</u>	<u>65</u>

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
<u>(cleanest)</u>			
<u>cinders blk</u>	<u>75</u>	<u>115</u>	<u>65</u>
<u>clay, claystone yellow</u>	<u>115</u>	<u>120</u>	<u>65</u>

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**WATER RESOURCES DEPT** **SALEM, OREGON**  
**SALEM, OR**

Date started 7-10-06 Completed 7-16-06  
(unbonded) Water Well Constructor Certification:  
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
WVC Number \_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

(bonded) Water Well Constructor Certification:  
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
WVC Number 1424  
Signed Tina K. Ry Date 7-17-06

# Well 1 to Pond Worksheet for Pressure Pipe

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Project Description	
Worksheet	Pressure Pipe - 2
Flow Element Method	Pressure Pipe Hazen-Williams Formula
Solve For	Pressure at 1

---

Input Data	
Pressure at 2	5.00 psi
Elevation at 1	4,083.05 ft
Elevation at 2	4,096.73 ft
Length	5,902.00 ft
C Coefficient	130.0
Diameter	8 in
Discharge	3.02 cfs

---

Results	
Pressure at 1	93.05 psi
Headloss 2	189.4 ft
Energy Grade at 1	4,298.85 ft
Energy Grade at 2	4,109.43 ft
Hydraulic Grade at 1	4,297.69 ft
Hydraulic Grade at 2	4,108.26 ft
Flow Area	0.3 ft <sup>2</sup>
Wetted Perimeter	2.09 ft
Velocity	8.65 ft/s
Velocity Head	1.16 ft
Friction Slope	0.032 ft/ft 095

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Theoretical Pump Capacity - Well 1 to Pond

Travis Singhose Permit G-14055 FINAL PROOF SURVEY

Flow            3.02 CFS  
Head            93.05 PSI see calculations on loss  
LIFT            45 Feet  
Efficiency       75% Turbine Pump

**HP**                    **118.7** OK 125 HP pump  
                              This well also covers other water rights/  
                              irrigation systems

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**SUMMARY OF NOZZLE FLOWS**

Pivot #1 Flows

Travis Singhose Permit G-14055 FINAL PROOF SURVEY

#	NOZZLE SIZE	DIAMETER	PSI	FLOW (FT^3/S)	TOTAL (FT^3/SEC)	FLOW (GPM)	TOTAL FLOW (GPM)	
0	4	0.03125	15	0.000	0.000	0.09	0.00	
0	5	0.03906	15	0.000	0.000	0.14	0.00	
0	6	0.04688	15	0.000	0.000	0.20	0.00	
0	7	0.05469	15	0.001	0.000	0.28	0.00	
0	8	0.06250	15	0.001	0.000	0.36	0.00	
0	9	0.07031	15	0.001	0.000	0.46	0.00	
0	10	0.07813	15	0.001	0.000	0.56	0.00	
0	11	0.08594	15	0.002	0.000	0.68	0.00	
0	12	0.09375	15	0.002	0.000	0.81	0.00	
0	13	0.10156	15	0.002	0.000	0.95	0.00	
4	14	0.10938	15	0.002	0.010	1.11	4.42	
1	15	0.11719	15	0.003	0.003	1.27	1.27	
1	16	0.12500	15	0.003	0.003	1.44	1.44	
1	17	0.13281	15	0.004	0.004	1.63	1.63	
1	18	0.14063	15	0.004	0.004	1.83	1.83	
1	19	0.14844	15	0.005	0.005	2.04	2.04	
0	20	0.15625	15	0.005	0.000	2.26	0.00	
5	21	0.16406	15	0.006	0.028	2.49	12.44	
4	22	0.17188	15	0.006	0.024	2.73	10.93	
7	23	0.17969	15	0.007	0.047	2.99	20.90	
5	24	0.18750	15	0.007	0.036	3.25	16.25	
7	25	0.19531	15	0.008	0.055	3.53	24.69	
5	26	0.20313	15	0.009	0.043	3.81	19.07	
7	27	0.21094	15	0.009	0.064	4.11	28.80	
7	28	0.21875	15	0.010	0.069	4.42	30.97	
5	29	0.22656	15	0.011	0.053	4.75	23.73	
6	30	0.23438	15	0.011	0.068	5.08	30.47	
5	31	0.24219	15	0.012	0.060	5.42	27.12	
7	32	0.25000	15	0.013	0.090	5.78	40.45	
5	33	0.25781	15	0.014	0.068	6.15	30.73	
7	34	0.26563	15	0.015	0.102	6.52	45.67	
6	35	0.27344	15	0.015	0.092	6.91	41.48	
4	36	0.28125	15	0.016	0.065	7.31	29.25	
1	37	0.28906	15	0.017	0.017	7.73	7.73	
0	38	0.29688	15	0.018	0.000	8.15	0.00	
0	39	0.30469	15	0.019	0.000	8.58	0.00	
1	42	0.32813	15	0.022	0.022	9.95	9.95	
103	<b>TOTAL FLOW NOZZLES</b>				1.032		463.26	

#	END GUN (IN)	DIAMETER	PSI	FLOW (FT^3/S)		FLOW (GAL/MIN)	TOTAL FLOW
0	0	1	44	0.353	0.000	158.35	0.000
1	0.38	0.375	45.9	0.051	0.051	22.74	22.744
0	0.5	0.5	44	0.088	0.000	39.59	0.000
0				<b>FT^3/S</b>			<b>GAL/MIN</b>
<b>FLOW TOTAL</b>					1.08		486.00



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 PO BOX 28  
 LAKEVIEW, OREGON 97630  
 (541) 947-4470 FAX 947-2321

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# Pond to Pivot 1 Worksheet for Pressure Pipe

---

## Project Description

Worksheet	pond to pivot 1
Flow Element	Pressure Pipe
Method	Hazen-Williams Formula
Solve For	Pressure at 1

---

## Input Data

Pressure at 2	50.00 psi
Elevation at 1	4,097. ft
	70
Elevation at 2	4,086. ft
	36
Length	3,223. ft
	00
C	130.0
Coefficient	
Diameter	8 in
Discharge	1.08 cfs

---

## Results

Pressure at 1	51.76 psi
Headloss	15.41 ft
Energy Grade at 1	4,217. ft
	24
Energy Grade at 2	4,201. ft
	84
Hydraulic Grade at 1	4,217. ft
	09
Hydraulic Grade at 2	4,201. ft
	69
Flow Area	0.3 ft <sup>2</sup>
Wetted Perimeter	2.09 ft
Velocity	3.09 ft/s
Velocity Head	0.15 ft
Friction Slope	0.004 ft/ft
	780

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Theoretical Pump Capacity - Pond to Pivot 1

Travis Singhose Permit G-14055 FINAL PROOF SURVEY

Flow            1.08 CFS  
Head            51.76 PSI see calculations on loss  
LIFT             7 Feet  
Efficiency      70% Turbine Pump

**HP**                            22.1 OK 75 HP pump  
                                     39.7 HP from other pivot

**61.8** HP total for 2 pivots

note: This well also covers other  
water rights/irrigation systems

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**SUMMARY OF NOZZLE FLOWS**

Pivot #2 Flows

Travis Singhoose Permit G-14055 FINAL PROOF SURVEY

#	NOZZLE SIZE	DIAMETER	PSI	FLOW (FT <sup>3</sup> /S)	TOTAL (FT <sup>3</sup> /SEC)	FLOW (GPM)	TOTAL FLOW (GPM)
1	14	0.10938	15	0.002	0.002	1.11	1.11
0	15	0.11719	15	0.003	0.000	1.27	0.00
1	16	0.12500	15	0.003	0.003	1.44	1.44
1	17	0.13281	15	0.004	0.004	1.63	1.63
1	18	0.14063	15	0.004	0.004	1.83	1.83
2	19	0.14844	15	0.005	0.009	2.04	4.07
0	20	0.15625	15	0.005	0.000	2.26	0.00
1	21	0.16406	15	0.006	0.006	2.49	2.49
3	22	0.17188	15	0.006	0.018	2.73	8.19
5	23	0.17969	15	0.007	0.033	2.99	14.93
5	24	0.18750	15	0.007	0.036	3.25	16.25
5	25	0.19531	15	0.008	0.039	3.53	17.64
6	26	0.20313	15	0.009	0.051	3.81	22.89
5	27	0.21094	15	0.009	0.046	4.11	20.57
8	28	0.21875	15	0.010	0.079	4.42	35.39
5	29	0.22656	15	0.011	0.053	4.75	23.73
5	30	0.23438	15	0.011	0.057	5.08	25.39
6	31	0.24219	15	0.012	0.073	5.42	32.54
5	32	0.25000	15	0.013	0.064	5.78	28.89
6	33	0.25781	15	0.014	0.082	6.15	36.87
5	34	0.26563	15	0.015	0.073	6.52	32.62
5	35	0.27344	15	0.015	0.077	6.91	34.56
6	36	0.28125	15	0.016	0.098	7.31	43.88
7	37	0.28906	15	0.017	0.120	7.73	54.08
5	38	0.29688	15	0.018	0.091	8.15	40.74
7	39	0.30469	15	0.019	0.134	8.58	60.08
7	40	0.31250	15	0.020	0.141	9.03	63.20
6	41	0.32031	15	0.021	0.127	9.49	56.92
7	42	0.32813	15	0.022	0.155	9.95	69.68
6	43	0.33594	15	0.023	0.139	10.43	62.61
4	44	0.34375	15	0.024	0.097	10.93	43.70
1	45	0.35156	15	0.025	0.025	11.43	11.43

137	<b>TOTAL FLOW NOZZLES</b>				1.937		869.38
-----	---------------------------	--	--	--	-------	--	--------

#	END GUN (IN)	DIAMETER	PSI	FLOW (FT <sup>3</sup> /S)		FLOW (GAL/MIN)	TOTAL FLOW
0	0	1	44	0.353	0.000	158.35	0.000
0	0.38	0.375	45.9	0.051	0.000	22.74	0.000
0	0.5	0.5	44	0.088	0.000	39.59	0.000
0				<b>FT<sup>3</sup>/S</b>			<b>GAL/MIN</b>

**FLOW TOTAL**

1.94

869.38



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## Pond to Pivot 2 Worksheet for Pressure Pipe

---

### Project Description

Worksheet	pond to pivot 2
Flow Element	Pressure Pipe
Method	Hazen-Williams Formula
Solve For	Pressure at 1

---

### Input Data

Pressure at 2	50.00 psi
Elevation at 1	4,097.70 ft
Elevation at 2	4,089.13 ft
Length	874.00 ft
C	130.0
Coefficient	
Diameter	8 in
Discharge	1.94 cfs

---

### Results

Pressure at 1	51.64 psi
Headloss	12.36 ft
Energy Grade at 1	4,217.30 ft
Energy Grade at 2	4,204.94 ft
Hydraulic Grade at 1	4,216.82 ft
Hydraulic Grade at 2	4,204.46 ft
Flow Area	0.3 ft <sup>2</sup>
Wetted Perimeter	2.09 ft
Velocity	5.56 ft/s
Velocity Head	0.48 ft
Friction Slope	0.014 ft/ft
	142

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Theoretical Pump Capacity - Pond to Pivot 2

Travis Singhose Permit G-14055 FINAL PROOF SURVEY

Flow            1.94 CFS  
Head            51.64 PSI see calculations on loss  
LIFT             7 Feet  
Efficiency       70% Turbine Pump

**HP**                            39.7 OK 75 HP pump  
                                     22.1 HP from other pivot  
  
                                     **61.8** HP total for 2 pivots

note: This well also covers other  
water rights/irrigation systems

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**SUMMARY OF NOZZLE FLOWS**

Pivot #4 Flows

Travis Singhose Permit G-14055 FINAL PROOF SURVEY

#	NOZZLE SIZE	DIAMETER	PSI	FLOW (FT^3/S)	TOTAL (FT^3/SEC)	FLOW (GPM)	TOTAL FLOW (GPM)
4	14	0.10938	15	0.002	0.010	1.11	4.42
0	15	0.11719	15	0.003	0.000	1.27	0.00
1	16	0.12500	15	0.003	0.003	1.44	1.44
1	17	0.13281	15	0.004	0.004	1.63	1.63
1	18	0.14063	15	0.004	0.004	1.83	1.83
1	19	0.14844	15	0.005	0.005	2.04	2.04
0	20	0.15625	15	0.005	0.000	2.26	0.00
2	21	0.16406	15	0.006	0.011	2.49	4.98
3	22	0.17188	15	0.006	0.018	2.73	8.19
8	23	0.17969	15	0.007	0.053	2.99	23.88
5	24	0.18750	15	0.007	0.036	3.25	16.25
7	25	0.19531	15	0.008	0.055	3.53	24.69
7	26	0.20313	15	0.009	0.060	3.81	26.70
5	27	0.21094	15	0.009	0.046	4.11	20.57
3	28	0.21875	15	0.010	0.030	4.42	13.27
1	29	0.22656	15	0.011	0.011	4.75	4.75
1	30	0.23438	15	0.011	0.011	5.08	5.08
0	31	0.24219	15	0.012	0.000	5.42	0.00
0	32	0.25000	15	0.013	0.000	5.78	0.00
0	33	0.25781	15	0.014	0.000	6.15	0.00
0	34	0.26563	15	0.015	0.000	6.52	0.00
0	35	0.27344	15	0.015	0.000	6.91	0.00
0	36	0.28125	15	0.016	0.000	7.31	0.00
0	37	0.28906	15	0.017	0.000	7.73	0.00
0	38	0.29688	15	0.018	0.000	8.15	0.00
0	39	0.30469	15	0.019	0.000	8.58	0.00
0	40	0.31250	15	0.020	0.000	9.03	0.00
0	41	0.32031	15	0.021	0.000	9.49	0.00
0	42	0.32813	15	0.022	0.000	9.95	0.00
0	43	0.33594	15	0.023	0.000	10.43	0.00
0	44	0.34375	15	0.024	0.000	10.93	0.00
0	45	0.35156	15	0.025	0.000	11.43	0.00
50	<b>TOTAL FLOW NOZZLES</b>				0.356		159.73
#	END GUN (IN)	DIAMETER	PSI	FLOW (FT^3/S)		FLOW (GAL/MIN)	TOTAL FLOW
0	0	1	44	0.353	0.000	158.35	0.000
1	0.22	0.21875	24.7	0.013	0.013	5.68	5.677
0	0.5	0.5	44	0.088	0.000	39.59	0.000
0				<b>FT^3/S</b>			<b>GAL/MIN</b>
				<b>FLOW TOTAL</b>	0.37		165.41



ANDERSON ENGINEERING & SURVEYING, INC.  
 PO BOX 28  
 LAKEVIEW, OREGON 97630  
 (541) 947-4470 FAX 947-2321

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## Well 2 to Pivot 4 Worksheet for Pressure Pipe

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### Project Description

Worksheet	Pressure Pipe - 1
Flow Element	Pressure Pipe
Method	Hazen-Williams Formula
Solve For	Pressure at 1

---

### Input Data

Pressure at 2	50.00 psi
Elevation at 1	4,076. ft
	40
Elevation at 2	4,076. ft
	80
Length	67.00 ft
C	130.0
Coefficient	
Diameter	6 in
Discharge	0.37 cfs

---

### Results

Pressure at 1	50.25 psi
Headloss	0.18 ft
Energy Grade at 1	4,192. ft
	36
Energy Grade at 2	4,192. ft
	18
Hydraulic Grade at 1	4,192. ft
	31
Hydraulic Grade at 2	4,192. ft
	13
Flow Area	0.2 ft <sup>2</sup>
Wetted Perimeter	1.57 ft
Velocity	1.88 ft/s
Velocity Head	0.06 ft
Friction Slope	0.002 ft/ft
	669

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Theoretical Pump Capacity - Well 2 to Pivot 4

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Flow            0.37 CFS  
Head            50.25 PSI see calculations on loss  
LIFT             45 Feet  
Efficiency       70% Submersible Pump

**HP**                            **9.7** OK 10 HP pump running small pivot  
   also receives water from 125 HP pump

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**TRAVIS SINGHOSE**  
**CLAIM OF BENEFICIAL USE**  
Inspection Photographs  
Application G-14939 Permit G-14055

Job: 2006-165  
Date: February, 2007



**WELL #2**



**WELL #1**

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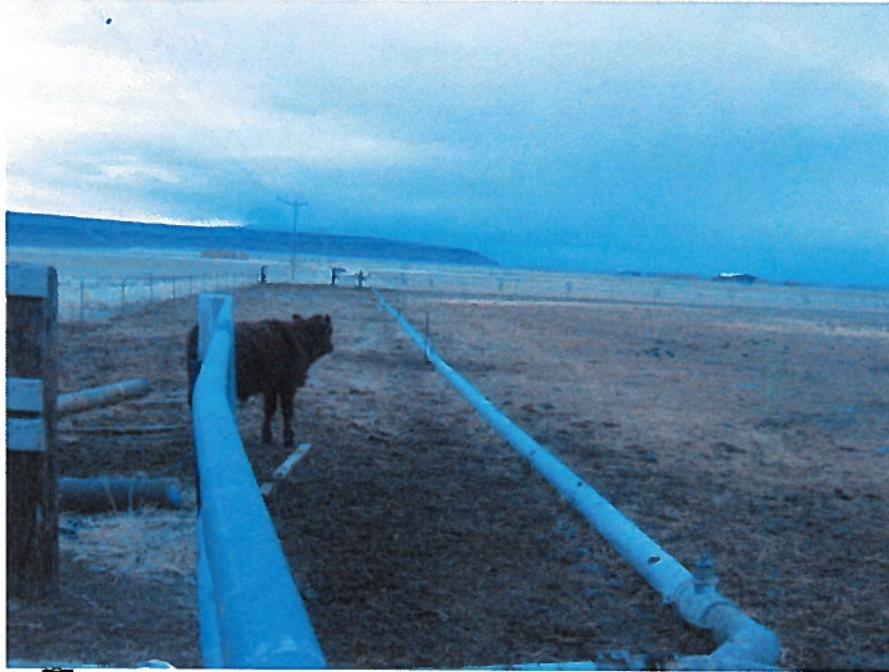
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Anderson Engineering & Surveying, Inc.  
P.O. Box 28  
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Lakeview, Oregon 97630

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**MAIN LINE FROM WELL #1**



**FLOW METER ON WELL #1**



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**FLOWMETER AT WELL #2**



**FLOWMETER AT WELL #2**

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Date: February 2007



**Pump at Pond for Pivots #1 and #2**



**Pond/Bulge in System Storage**

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Date: February, 2007



**TYPICAL PIVOT CENTER**



**PIVOT IN FIELD**

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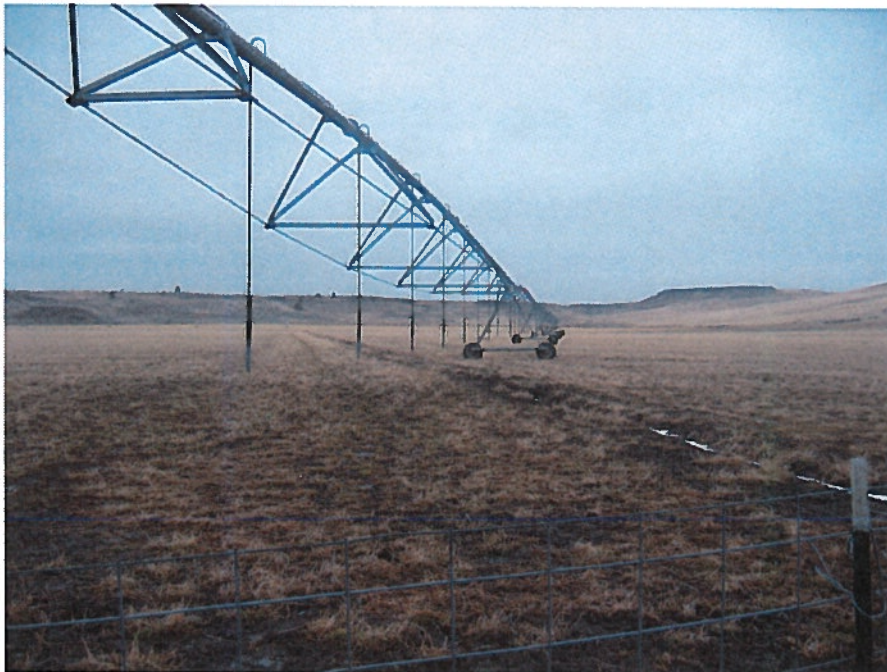
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Date: February, 2007



**PIVOT IN FIELD**



**PIVOT IN FIELD**

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**SALEM, OR**

October 4, 2012

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SALEM, OR

Kelly Starnes, Permit Amendment Specialist  
Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem, Oregon 97301-1271

**RE: Permit Amendment Application & Final Proof for T-11308**

Dear Kelly;

Please withdraw the above referenced Permit Application.

I am enclosing a revised Claim of Beneficial Use Site Report and Map as you discussed with Darryl Anderson earlier. This should complete our water right issues..

Please call if there is a question.

Sincerely;



Travis Singhose  
29327 Weaver Springs Lane  
Burns, Oregon 97720

Enclosure



# Oregon

John A. Kitzhaber, MD, Governor

**Water Resources Department**  
North Mall Office Building  
725 Summer Street NE, Suite A  
Salem, OR 97301-1271  
503-986-0900  
FAX 503-986-0904

November 7, 2012

3S Ranches  
Travis Singhorse  
29327 Weaver Springs Lane  
Burns OR 97720

On November 5, 2012 the Water Resources Department received the Claim of Beneficial Use (COBU) for the following file(s):

Application G-14939 Permit G-14055

The COBU included a report and map. In the future the Department will review your submittal. At that time we will review these items and provide a final certificate, proposed certificate, or a request for additional information.

If you are interested in having your COBU reviewed sooner, you may pay to have your file processed immediately, using the Reimbursement Authority program, which is described at: [http://www.wrd.state.or.us/OWRD/mgmt\\_reimbursement\\_authority.shtml](http://www.wrd.state.or.us/OWRD/mgmt_reimbursement_authority.shtml)

Customer Service phone: (503) 986-0801

If you sell the property, please contact the Department, or have the new owners contact the Department about the need to file an assignment.

Your receipt is enclosed.

Cc: file



# Oregon

John A. Kitzhaber, MD, Governor

Water Resources Department  
North Mall Office Building  
725 Summer Street NE, Suite A  
Salem, OR 97301-1271  
503-986-0900  
FAX 503-986-0904

November 21, 2011

TRAVIS SINGHOSE  
29327 WEAVER SPRINGS LN  
BURNS, OR 97720

REFERENCE: Application G-14939 / Permit G-14055

Dear Permit Holder:

The Water Right Services Division received your written progress report for Permit G-14055. Receipt of the progress report was published on the Department's weekly Public Notice, dated September 27, 2011. The Department did not receive any public comment on the progress report.

After reviewing your Progress Report, the Department determined that diligence toward completion of the project and compliance with the terms and conditions of the permit and extension has been demonstrated.

If you have any questions, please feel free to contact me by telephone at (503) 986-0812.

Sincerely,

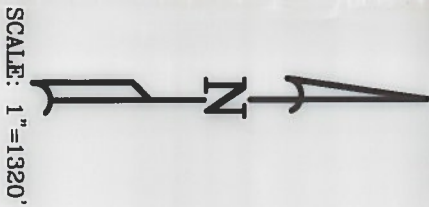
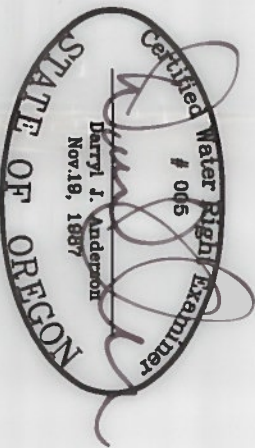
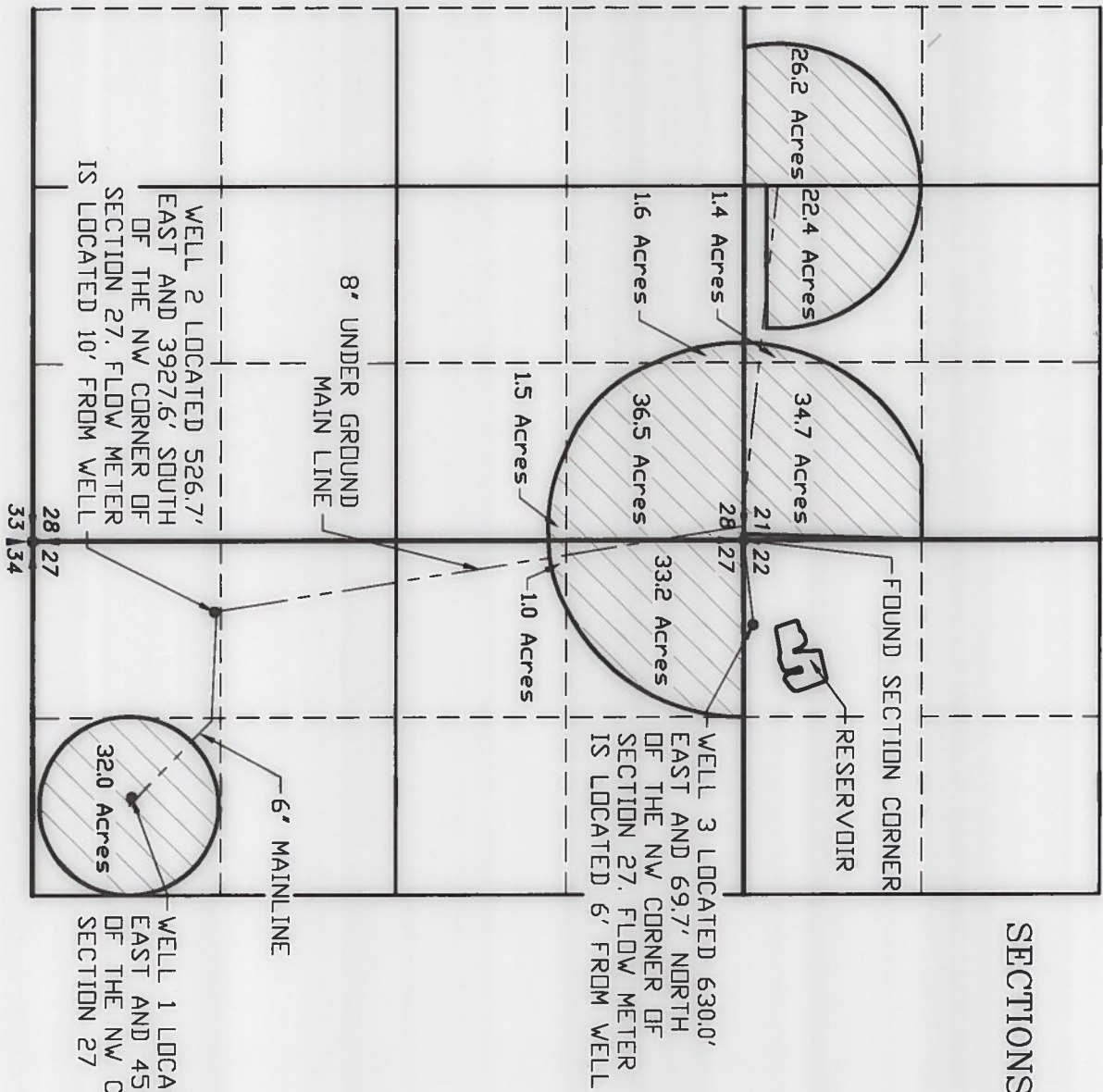
Jerry Gainey  
Extensions

Water Right Services Division

Enclosure

cc: Application G-14939  
Watermaster District 10 – Tony Rutherford

CLAIM OF BENEFICIAL USE MAP  
FOR  
TRAVIS SINGHOSE  
SECTIONS 21, 27, AND 28, TOWNSHIP 25 SOUTH RANGE 30 EAST,  
HARNEY COUNTY, OREGON



SCALE: 1"=1320'

- LEGEND**
- SECTION LINE
  - 1/4 SECTION LINE
  - 1/16 SECTION LINE
  - IRRIGATION MAIN LINE

IRRIGATED AREA

PERMIT NO. G-14055  
APPLICATION NO. G-14939

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WATER RESOURCES DEPT  
SALEM, OREGON

NOTE:  
PREPARATION OF THIS MAP IS FOR IDENTIFYING PROPOSED WATER RIGHTS ONLY. IT HAS NO INTENT TO PROVIDE LOCATIONS OR DIMENSIONS OF PROPERTY BOUNDARIES.

REVISION	BY



**ANDERSON ENGINEERING AND SURVEYING, INC.**  
P.O. BOX 28  
LAKEVIEW, OREGON  
97630 (541)  
947-4407 FAX  
947-2321

FOR:  
TRAVIS SINGHOSE  
29327 WEAVER SPRINGS LN  
BURNS, OR 97720  
(541) 493-2772

**CLAIM OF BENEFICIAL USE**  
PERMIT NO. G-14055  
APPLICATION NO. G-14939

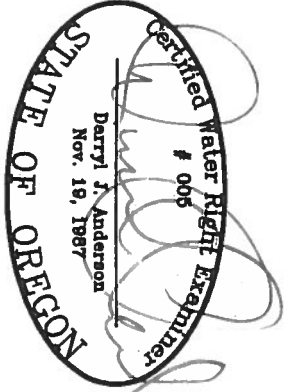
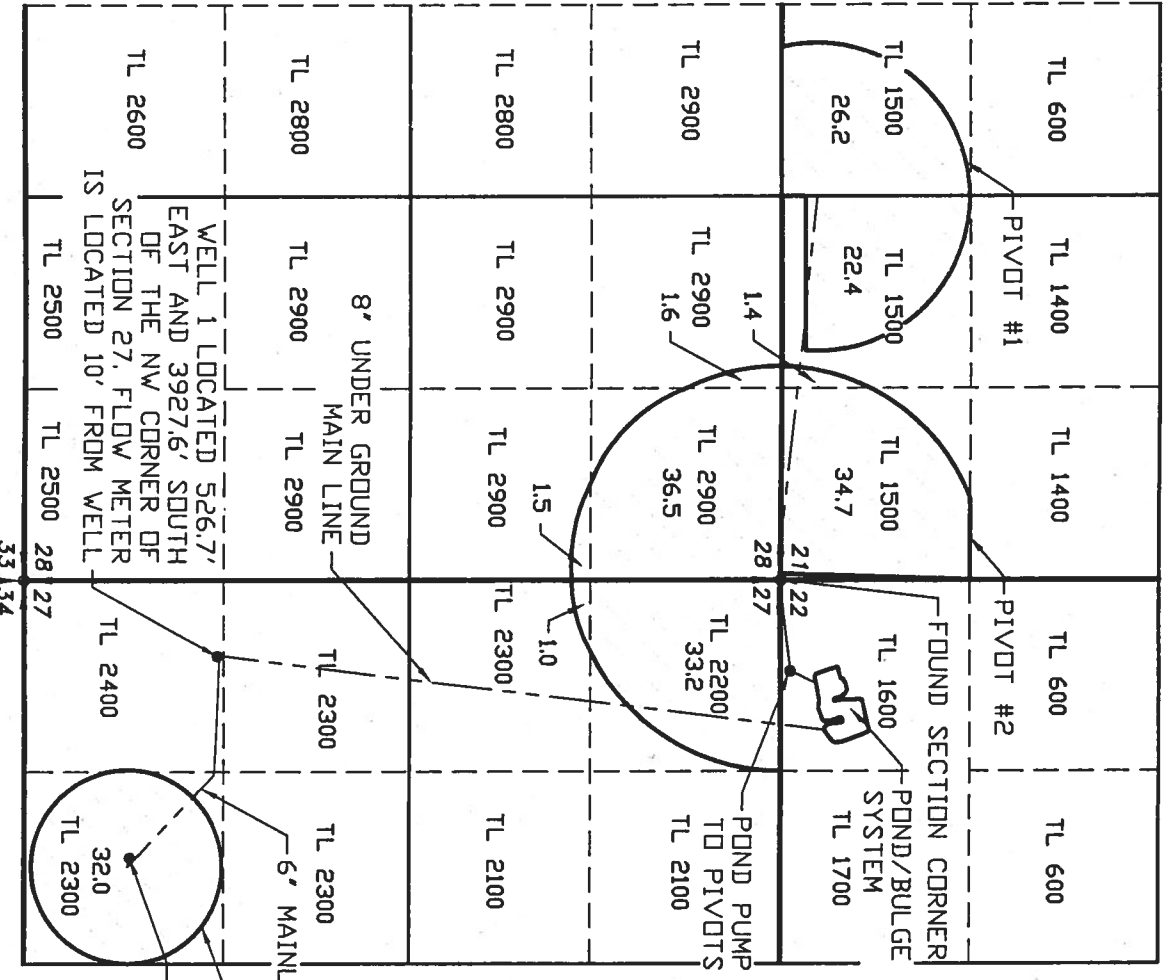
DATE:	JAN 2007
SCALE:	1"=1320'
DWG. BY:	J.E.H.
JOB:	2006-165
FILE:	2006-165
SHEET:	1 OF 1

COBU MAP # 727

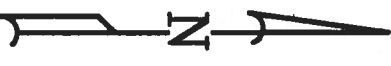
CLAIM OF BENEFICIAL USE MAP

FOR TRAVIS SINGHOSE

SECTIONS 21, 27, AND 28, TOWNSHIP 25 SOUTH RANGE 30 EAST, HARNEY COUNTY, OREGON



RENEWAL 12/31/13



SCALE: 1"=1320'

- LEGEND**
- SECTION LINE
  - 1/4 SECTION LINE
  - 1/16 SECTION LINE
  - IRRIGATION MAIN LINE
  - IRRIGATED AREA

PERMIT NO. G-14055  
 APPLICATION NO. G-14939

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JAN 9 2012

SLSM, OR

<p>DATE: JAN 2007                  SCALE: 1"=1320'                  DWG. BY: J.E.H.                  JOB: 2006-. . .                  FILE: 2006-165                  SHEET: 1 OF 1</p>	<p><b>CLAIM OF BENEFICIAL USE</b>                  PERMIT NO. G-14055                  APPLICATION NO. G-14939</p>	<p>FOR:                  TRAVIS SINGH' SE                  29327 WEAVER S LINGS LN                  BURNS, OR 97720                  (541) 493-2772</p>	<p><b>ANDERSON ENGINEERING AND SURVEYING, INC.</b>                  P.O. BOX 28                  LAKEVIEW, OREGON                  97630 (541)                  947-4407 FAX                  947-2321</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">REVISION</th> <th style="width: 50%;">BY</th> </tr> <tr> <td> </td> <td> </td> </tr> </table>	REVISION	BY		
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