

**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

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-13547

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2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME COOL SPRINGS RANCH LLC		PHONE NO. 803-622-9491	ADDITIONAL CONTACT NO.
ADDRESS 216 Newberg Rd		Brinkley melvin	
CITY Chapin	STATE South Carolina	ZIP 29036	E-MAIL wbmelvin@gmail.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 Stanley J. Yost, trustee of the Paul James Yost Testamentary Trust		
ADDRESS 48 Conservancy		
CITY Irvine	STATE California	ZIP 92618

4. Date of Site Inspection:

9/16/22 ; Aug 23

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Chad Dotson	9/16/22; Aug 23	Project manager 541-231-1455

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 NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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		541-231-1455

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OWNER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

Superseded

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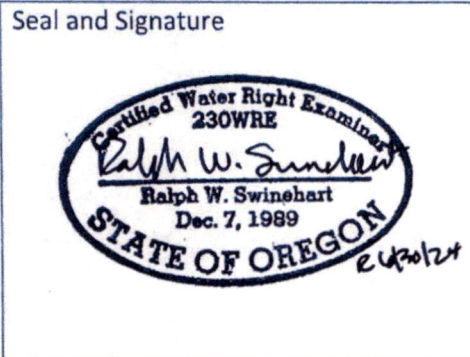
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SECTION 2
SIGNATURES

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 Ralph W. Swinehart		PHONE NO. 541-398-1550	ADDITIONAL CONTACT NO.
ADDRESS PO Box 266			
CITY Enterprise	STATE Oregon	ZIP 97828	E-MAIL ralphswinehart45@gmail.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
	Brinkley Melvin	Managing Member	11-30-2023

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 #6	

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
#6	.46 cfs	* part of larger system	

.46 cfs OK

not in use @
time of insp.

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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):

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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 **NA**

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE

2. Motor Information **NA**

MANUFACTURER	HORSEPOWER

3. Theoretical Pump Capacity **NA**

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

4. Provide pump calculations: **NA**

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.

2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)
8"	PVC	140	140'	4000'		1.5 cfs

for total system

3. Provide calculations:

see attached sheet

4. If an actual measurement was taken, provide the following: NA

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)

Attach measurement notes.

C. Gravity Flow Canal or Ditch NA

(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)

3. Provide calculations:

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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)

Attach measurement notes.

D. Additional notes or comments related to the system:

SECTION 5

CONDITIONS

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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	Oct 27, 2021	
COMPLETENESS DATE FROM ORDER (C)	Oct 1, 2023	June 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

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

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

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

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED

4. Recording and reporting conditions

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

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

b. Have the reports been submitted? YES NO

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

5. Fish Screening

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion? **YES** 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
1996	ODFW

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.

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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.

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

- b. Have by-pass devices been installed?

YES

NO

- c. Describe the diversion works as related to whether a by-pass device is installed or unnecessary:

(Provide a letter from ODFW indicating the device is approved or is unnecessary. If there is no letter from ODFW, explain whether or not a by-pass device is necessary.)

DESCRIPTION (E.G. "ODFW HAS APPROVED THE BY-PASS DEVICE" OR "NO BY-PASS DEVICE IS NECESSARY BECAUSE THERE IS A DIRECT DIVERSION FROM THE STREAM VIA A PUMP ON RIVER LEFT STREAM BANK WITH FOOT VALVE DESCENDING DIRECTLY INTO NATURAL POOL.") IN ADDITION, YOU MAY ATTACH PHOTOS TO THIS CLAIM.	IF INSTALLED (DATE)	IF INSTALLED, BY WHOM

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?
- b. Was a fishway required?
- c. Other conditions?

YES

NO

YES

NO

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):

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SECTION 6
ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Pipeline capacity	calculations
Fish Screen Insp. form	ODPW

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.

Field inspection of area that has been irrigated and verification with aerial photos
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Oregon Department of Fish and Wildlife
Oregon Water Resources Department

Fish Screen Inspection Form

Applicant

Name: Dave Yost	Phone: 541-426-4379
Applicant:	E-mail:
Application Number:	Water Right Permit Number: C#7803 C#82707
Water Right Amount (cfs): 1.20	

Diversion

Stream: Gooseberry	Tributary to: Chesnimnus
Address (if different from applicant):	Gravity Type (gravity or pump):
Location: T2N, R46E, S 6	GPS Coordinates(UTM): -117.10543N,45.69027E
SATS:	

Pump Information

Brand:	Horsepower:	Intake Size:
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Screen Information

Type/Brand: 3' x 18" Rotary Drum portable	Installed By: Oregon Department of Fish and Wildlife
Date Installed: 1996	Date of Inspection: July 2020
Inspected by: Chuck Simpson	Agency: Oregon Department of fish and Wildlife
Comments:	

- ☒ 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

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**WALLOWA MOUNTAIN
ENGINEERING**

P.O. BOX 266
ENTERPRISE, OREGON
503 426-4085

Job No. _____
Project Yost Ranch
Description Irrig Pipeline Capacity
Made by DWS Date 10/24/20 Page 1 of _____

Determine Capacity of existing 8" Gooseberry Pipeline

Elevation @ Gooseberry Diversion #6
from USGS Quad map ≈ 3560

Elevation @ nearest irrigated field ≈ 3420

Available static head = 140'

1.5 cfs = 675 gpm

in 8" PVC pipeline velocity = 4.3 fps acceptable

headloss = .83' / 100'

Distance to first field = 4000' $\pm$

$$h_L = \frac{4000}{100} \times .83' / 100' = 33'$$

Available dynamic head @ 675 gpm = 140' - 33' = 107'

$$\frac{107'}{2.31' / \text{psi}} = 46 \text{ psi} \quad \text{adequate}$$

Conclusion: 8" PVC mainline is adequate for a flow of 1.5 cfs

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