

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



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

A fee of \$200 must accompany this form for permits with priority dates of July 9, 1987, or later.

Claims received without the correct fee of \$200 will be returned.

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A separate form shall be completed for each permit.

In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.

This form is subject to revision. Begin each new claim by checking for a new version of this form at:
http://www.oregon.gov/owrd/pages/wr/cwre_info.aspx

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. **Every item must have a response.** If any requested information does not apply to the claim, insert "NA." **Do not delete or alter any section of this form unless directed by the form.** The Department may require the submittal of additional information from any water user or authorized agent.

"Section 8" of this form is intended to aid in the completion of this form and should not be submitted.

If you have questions regarding the completion of this form, please call 503-986-0900 and ask for the Certificate Section.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see http://www.oregon.gov/owrd/pages/mgmt_reimbursement_authority.aspx

SECTION 1

GENERAL INFORMATION

1. File Information

APPLICATION # G- 15273	PERMIT # (IF APPLICABLE) G- 15623	PERMIT AMENDMENT # (IF APPLICABLE)
----------------------------------	---------------------------------------------	------------------------------------

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Shelly K. Hummel		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS 63307 Silverado Drive			
CITY Bend	STATE OR	ZIP 97701	E-MAIL

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

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

PERMIT HOLDER OF RECORD Same		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD N/A		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection: **7-19-2012 & 9-11-2018**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Shelly K. Hummel	7-19-2012 & 9-11-2018	Owner
Jay Walsh	"	

6. County: **Deschutes**

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

OWNER OF RECORD N/A		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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**SECTION 2
SIGNATURES**

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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 Gary L. DeJarnatt		PHONE NO.	ADDITIONAL CONTACT NO. John Short 541-389-2837
ADDRESS 20735 Double Peaks Drive			
CITY Bend	STATE OR	ZIP 97701	E-MAIL

Permit Holder's of Record Signature or Acknowledgement

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

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

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	Shelly Hummel	owner	11/26/18

**SECTION 3
CLAIM DESCRIPTION**

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1. Point(s) of Appropriation (POA):

POA NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)
Well	DESC 52841	L-38145

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

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

POA NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
Well	IR	Pasture & Landscaping	Mar 1 to Oct 31	0.03 cfs
Total Quantity of Water Used				0.03 cfs

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

Pumped from Well to cistern, two (2) submersible pumps in cistern and to buried sprinklers.

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

4. Variations:

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below. YES NO

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

N/A

5. 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	0.03 cfs	0.14 cfs	N/A	IR	2.59	2.59

**SECTION 4
SYSTEM DESCRIPTION**

Are there multiple POAs?

YES NO

If "YES" you will need to copy and complete Sections 4B through 4F for each POA.

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

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Well DESC 52841 L-38145

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4. Place of Use

Attach Claim of Beneficial Use map.

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

B. Appropriation and Delivery System Information

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

1. Is a pump used?

YES NO

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

2. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
			Submersible

3. 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)
7.5	15	350 ft	2 ft	0.14

4. Provide pump calculations:

See attached OWRD 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)
N/A			

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

6. Sprinkler Information

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

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

7. Additional notes or comments related to the system:

**19 zones, of which 7 zones are in the pasture. Approximately 50 ft centers.
Rainbird system**

C. Groundwater Source Information (Well and Sump)

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

Turtleback cover

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2. 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
N/A						

3. In addition to the information requested in item "2" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

N/A

4. Is the appropriation from a dug well (sump)?

YES NO

If "NO", items 5 through 7 relating to this section may be deleted.

D. Storage

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

YES NO

If "NO", item 2 and 3 relating to this section may be deleted.

If "YES" is it a: Storage Tank

YES NO

Bulge in System / Reservoir

YES NO

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

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Cement	3000	Buried

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
N/A		

E. 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?

YES NO

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

F. Gravity Flow Canal or Ditch

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

YES NO

1. Provide description and calculations if necessary:

N/A

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**SECTION 5
CONDITIONS**

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

1. Time Limits:

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

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	03-28-2014		
BEGIN CONSTRUCTION (A)			
COMPLETE CONSTRUCTION (B)	10-01-2018	10-01-2018	System Complete
COMPLETE APPLICATION OF WATER (C)	10-01-2018	10-01-2018	Complete application of water to Beneficial Use

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

2. Is there an extension final order(s)? YES NO

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? YES NO

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

4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements? YES NO

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

5. 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 5b through 5e 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

****The Claim will not be reviewed until a pump test or exemption has been approved by the Department.**

YES NO

6. Measurement Conditions:

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device?

If "NO", items 6b through 6f 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 appropriation.

b. Has a meter been installed?

YES NO

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well	Sensus		Working		

If a meter has been installed, items 6d through 6f relating to this section may be deleted.

7. Recording and reporting conditions

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

YES NO

If "NO", item 7b relating to this section may be deleted.

b. Have the reports been submitted?

YES NO

METHOD OF SUBMITTING REPORT (PAPER OR ELECTRONIC)	WATER USER REPORTING ID
Electronic	61850

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

8. Other conditions required by permit, permit amendment final order, or extension final order

a. Were there special well construction standards?

YES NO

b. Was submittal of a ground water monitoring plan 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):

Ground Water Mitigation Obligation: 4.4 AF from Mitigation Project MP-3

SECTION 6

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Pump Calcs	OWRD pump calculations
CBU Map	Claim of Beneficial Use Map
OWRD email	Mitigation Confirmation

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.

On site measurements and NAIP Imagery

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 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
- N/A 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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Pump Capacity Calculation Sheet		HUMMEL DESC52841 L-38145			
using Department designed formula:					
$(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$					
Efficiency:					
Centrifugal = 6.61					
Turbine = 7.04					
Data Entry (fill in underlined blanks)					
HP =	<u>7.5</u>				
Efficiency =	<u>7.04</u>				
Lift =	<u>352</u>				
PSI =	<u>15</u>				
Results Calculated					
$(hp)(\text{efficiency}) =$	52.8				
Head based on psi =	38.1				
Total dynamic head =	390.1				
(head + lift)					
Pump Capacity =	0.14	cfs			

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Bryce Withers <brycewrs@gmail.com>

finding how a permit's mitigation obligation has been fulfilled

johnshort@usa.com <johnshort@usa.com>
To: Bryce Withers <brycewrs@gmail.com>

Wed, Nov 7, 2018 at 3:07 PM

John A. Short CCB# 197121

541-389-2837

Water Right Services, LLC
PO Box 1830
Bend, OR 97709
johnshort@usa.com
oregonwater.us

Begin forwarded message:

From: HENDERSON Sarah A * WRD <Sarah.A.Henderson@oregon.gov>
Subject: RE: finding how a permit's mitigation obligation has been fulfilled
Date: November 7, 2018 at 3:05:31 PM PST
To: "johnshort@usa.com" <johnshort@usa.com>

Hi John,

No the tracking of the mitigation credits are not on the website. App G-15273 acquired 4.4 mitigation credits on 6/1/2004 from MP-3.

Let me know if you need any other information. And you can contact me directly if you have more.

Have a fantastic day.

Sarah

Sarah Henderson | Flow Restoration Program Coordinator, Transfer and Conservation Division

Water Resources Department | 725 Summer St. NE, Suite A | Salem, Oregon 97301

Ph: [503.986.0884](tel:503.986.0884) | Fax: [503.986.0901](tel:503.986.0901)

Email: sarah.a.henderson@oregon.gov | Web: <http://www.oregon.gov/owrd>

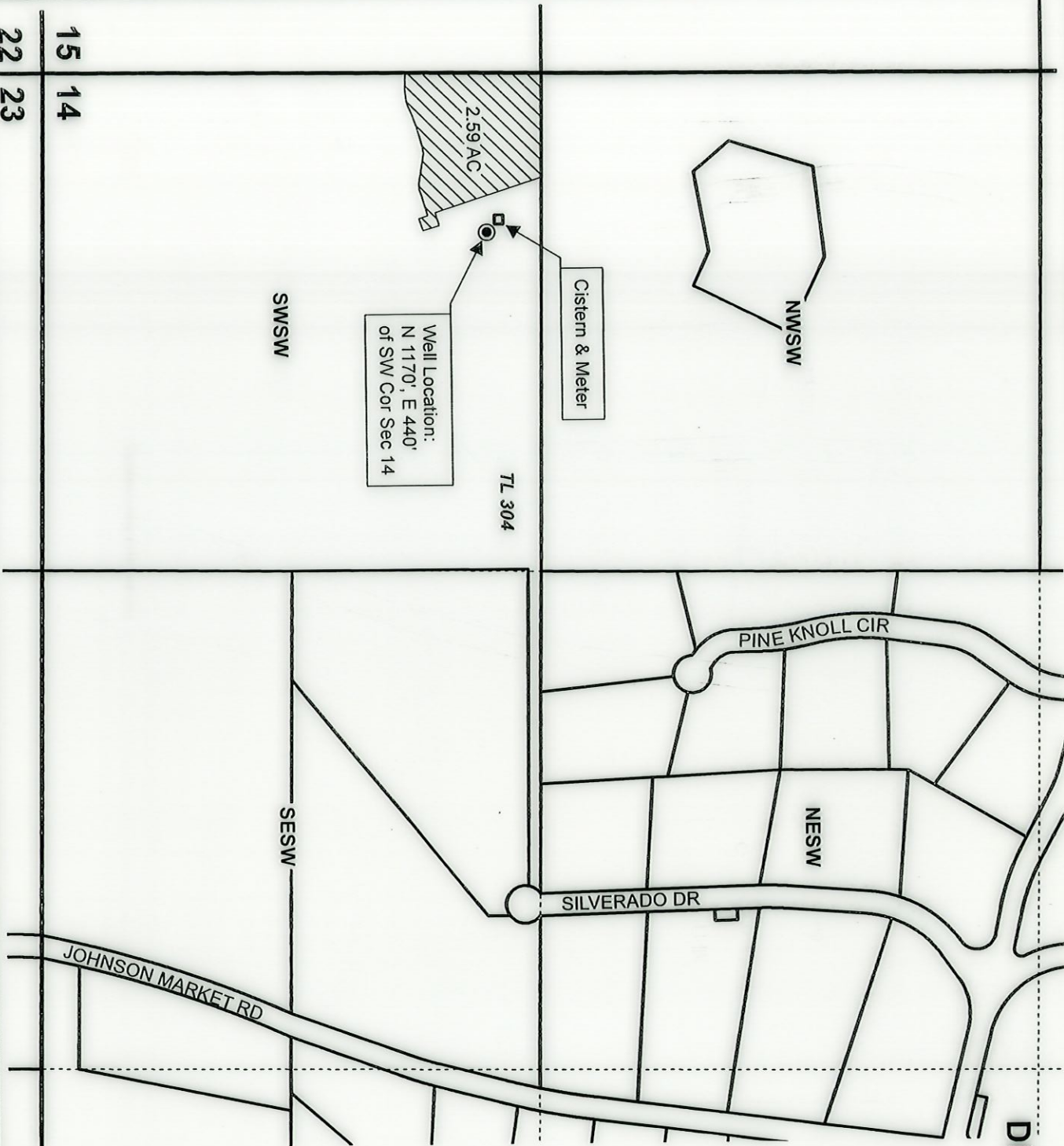
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From: johnshort@usa.com [<mailto:johnshort@usa.com>]
Sent: Monday, November 05, 2018 10:16 AM
To: HENDERSON Sarah A * WRD; WILKE Laura K * WRD
Cc: Bryce Withers
Subject: finding how a permit's mitigation obligation has been fulfilled

**T17S R11E, WM
DESCHUTES COUNTY, OR**



Well Location:
N 1170', E 440'
of SW Cor Sec 14

Cistern & Meter

TL 304

SWSW

NWSW

NESW

SESW

SILVERADO DR

PINE KNOLL CIR

JOHNSON MARKET RD



- Well
- ▨ POU IR
- Section
- Quarter Quarter
- Tax Lot

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RENEWAL DATE 12/31/2019



CLAIM OF BENEFICIAL USE MAP

Shelly K. Hummel

Ap G-15273

Permit G-15623

Project #18044

Date: 10/26/2018

This map is not intended to provide legal dimensions or locations of property ownership lines.

WATER RIGHT SERVICES, LLC

PO BOX 1830, BEND, OR 97709
WWW.OREGONWATER.US CCB # 197121
johnshort@usa.com 541-389-2837



Oregon
Kate Brown, Governor

Water Resources Department
725 Summer St NE, Suite A
Salem, OR 97301
(503) 986-0900
Fax (503) 986-0904

December 3, 2018

Shelly Hummel
63307 Silverado Drive
Bend, OR 97703

→ zip code changed from 97701 to 97703

On November 29, 2018, the Water Resources Department received the Claim of Beneficial Use (COBU) for the following file(s):

Application G-15273 Permit G-15623

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.

Please be aware that the Department has not received a Pump Test as required by the permit. Until such time that a Pump Test is submitted and approved, the Department unable to review your Claim.

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

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.

Cc: file
Gary DeJarnatt
John Short

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Jay Walsh
541-480-5310

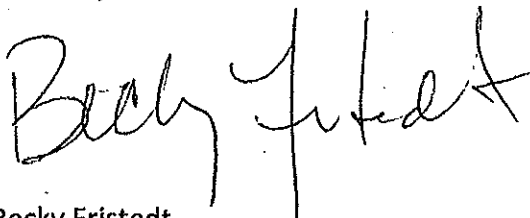
Re: 4 Hour Well Flow Test
Property Address:
63307 Silverado Dr,
Bend, Oregon 97703

August 7, 2019

On August 1, 2019 Thompson Pump and Irrigation Inc. performed a 4 hour well flow test at 63307 Silverado Dr., Bend Oregon for Oregon Water Resources.
Static water level 1 hour before test measured at 300'.
Well Pump ran at 50 GPM for 4 hours
Static water level at the conclusion of test measured at 310'.
Well recovered within 10 minutes back to 300' static water level.

Time	Pump GPM	Static Level in FT
12:15pm	50	303
12:30pm	50	305
12:45	50	306
1:00	50	306
2:00	50	307
2:15	50	308
2:30	50	310
2:45	50	310
3:00	50	310
3:15	50	310
3:30	50	310
3:45	50	310
4:00	50	310
4:15	50	310
4:25	Recovery	300

Sincerely,



Becky Fristedt

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Thompson 
 Pump & Irrigation Inc.

**Thompson Pump &
 Irrigation**

63002 Sherman Rd
 Bend, OR 97703
 (541) 382-1438

INVOICE

INVOICE #	18462
ACCOUNT #	6097
DATE	07-Aug-19
TIME	03:04
EMPLOYEE	12 - Mark L.
TERMINAL	2
PAGE #	1

SOLD TO:

WATER TEST
 +
 63002 SHERMAN RD
 BEND, OR 97703

SHIP TO:

WATER TEST

ITEM	DESCRIPTION	QTY	SALE	U/M	EXT
WTL	WATER TESTING LABOR	1.00	550.00	EACH	550.00
	4 hour well test done at 63307 silverado dr. static water level tested prior to test and after recovery.				
CARD AUTH	*****6435 03466C			CARD	550.00

I AGREE TO PAY THE ABOVE TOTAL ACCORDING TO THE POSTED TERMS AND CONDITIONS

SIGNATURE JAY S WALSH



SUBTOTAL \$	550.00
TAX \$	0.00
TOTAL \$	550.00

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Charge accounts, Net 10th of the month. A finance charge of 1.5% per month (18% per year) will be charged on past due accounts. All materials remain property of Thompson Pump & Irrigation until paid.

SEP 03 2019

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