

CLAIM OF BENEFICIAL USE for Groundwater Permits claiming more than 0.1 cfs



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

RECEIVED
SEP 23 2019
OWRD

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

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.

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 503-986-0900 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-15973 | PERMIT # (IF APPLICABLE) G-15578 | PERMIT AMENDMENT # (IF APPLICABLE) |
|---------------------------------|--|------------------------------------|

2. Property Owner (current owner information)

| | | | |
|--|--------------------|----------------------------------|--------------------------------------|
| APPLICANT/BUSINESS NAME Willis Kimball | | PHONE NO. 541-620-0705 | ADDITIONAL CONTACT NO. NA |
| ADDRESS 53688 Hwy 26 | | | |
| CITY Mt. Vernon | STATE OR | ZIP 97865 | E-MAIL kimball@ortelco.net |

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 Willis Kimball | | | |
| ADDRESS 53688 Hwy 26 | | | |
| CITY Mt. Vernon | STATE OR | ZIP 97865 | |

| | | | |
|---|--------------------|------------------|--|
| ADDITIONAL PERMIT HOLDER OF RECORD NA | | | |
| ADDRESS NA | | | |
| CITY NA | STATE NA | ZIP NA | |

4. Date of Site Inspection:

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

| NAME | DATE | ASSOCIATION WITH THE PROJECT |
|-----------------------|-----------------------|------------------------------|
| Willis Kimball | June 12, 2019- | Owner/ Operator |
| | | |

6. County:

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

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

Add additional tables for owners of record as needed

RECEIVED

SEP 23 2019

OWRD

**SECTION 2
SIGNATURES**

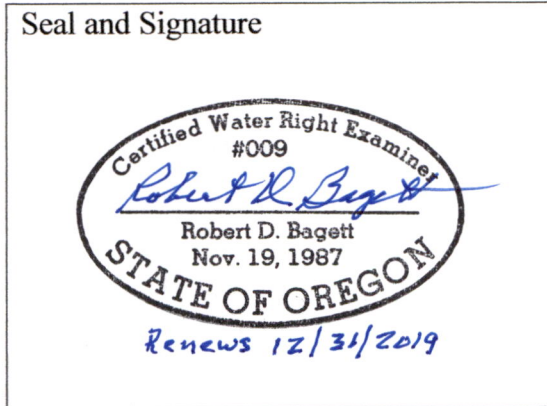
RECEIVED

SEP 23 2019

OWRD

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 Robert D. Baggett | | PHONE NO. 541-620-0717 | ADDITIONAL CONTACT NO. 541-575-1251 | |
| ADDRESS P. O. Box 476 | | | | |
| CITY John Day | STATE OR | ZIP 97845 | E-MAIL bob@johndaysurveyors.com | |

Permit Holder 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 |
|-----------|-----------------------|-----------------------|------|
| | Willis Kimball | Owner/Operator | |
| | | | |
| | | | |
| | | | |
| | | | |

SECTION 3

CLAIM DESCRIPTION

1. Point of appropriation name or number:

| POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP) | WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE) | WELL TAG # (IF APPLICABLE) |
|---|--|-------------------------------|
| Well 308 | GRAN 308 | L127856 |
| Well 307 | GRAN 307 | None |

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 appropriation source, if indicated on permit:

| POA NAME OR NUMBER | SOURCE BASIN LOCATED WITHIN | TRIBUTARY |
|-----------------------|--------------------------------|-----------|
| Well 308 | Rann Creek Basin | NA |
| Well 307 | Birch Creek Basin | NA |

3. 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 308 | Irrigation | Alfalfa | March 1-October 31 | 0.21 cfs |
| Well 307 | Irrigation | Alfalfa | March 1-October 31 | 0.24 cfs |
| Total Quantity of Water Used | | | | |

4. 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:

Well 308: Water is pumped from this well and delivered easterly via 4" portable mainline 490 ft. to intersection with buried 6" mainline from Well 307, thence easterly 360 ft. to the center pivot. Water from this well is also connected to wheel lines and hand lines to sprinkler irrigate the field.

Well 307: Water is pumped from this well and delivered easterly 780 ft. via 6" PVC mainline with risers to SE corner of field. Wheel lines and hand lines connect to risers to irrigate field. Water is also pumped via 6" buried mainline with risers westerly 150 ft., thence northeasterly 350 ft., thence easterly 360 ft. to the center pivot to sprinkler irrigate the field

The risers in mainlines are set at intervals accommodate wheel lines and hand lines.

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).

5. 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

(e.g. "The permit allowed three points of appropriation. 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 allowed 9.5 acres primary and 5.73 acres supplemental irrigation. The water user only developed 7.24 acres primary and 6.33 supplemental irrigation within the SE1/4NW1/4 and the NE1/4SW1/4 Section 27.

6. Claim Summary:

Received
MAY 03 2024

| POA NAME OR # | MAXIMUM RATE AUTHORIZED | CALCULATED THEORETICAL RATE BASED ON SYSTEM | AMOUNT OF WATER MEASURED | USE | # OF ACRES ALLOWED | # OF ACRES DEVELOPED |
|---------------|-------------------------|---|--------------------------|------------|-----------------------|-------------------------|
| Well 308 | 0.19 cfs | | NA | Irrigation | Irr. 9.5 Supp.5.73 | Irr. 7.24 Supp. 6.33 |
| Well 307 | 0.19 cfs | | NA | Irrigation | Irr. 9.5 Supp.5.73 | Irr. 7.24 Supp.6.33 |

SECTION 4 SYSTEM DESCRIPTION

Are there multiple POAs?

YES

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):

Well 308

A. Place of Use

1. Is the right for municipal use?

NO

If "YES" the table below may be deleted.

| TWP | RNG | MER | SEC | QQ | GLot | DLC | USE | IF IRRIGATION, # PRIMARY ACRES | IF IRRIGATION, # SUPPLEMENTAL ACRES |
|------------------------------|-----|-----|-----|------|------|-----|------------|--------------------------------|-------------------------------------|
| 13S | 29E | WM | 27 | SEnw | NA | NA | Irrigation | | 5.02 |
| 13S | 29E | WM | 27 | NEsw | NA | NA | Irrigation | 7.24 | 1.31 |
| Total Acres Irrigated | | | | | | | | 7.24 | 6.33 |

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.

B. 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 appropriation to the place of use.

1. Is a pump used?

YES

If "NO" items 2 through item 6 may be deleted.

2. Pump Information

| MANUFACTURER | MODEL | SERIAL NUMBER | TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE) | INTAKE SIZE | DISCHARGE SIZE |
|--------------|------------|---------------|--|-------------|----------------|
| Grundfos | A 98924093 | PC11711 001 | Submersible | 4" | 4" |

Received

MAY 03 2024

OWRD

RECEIVED

SEP 23 2019

OWRD

3. Motor Information

| MANUFACTURER | HORSEPOWER |
|--------------|------------|
| Grundfos | 5 |
| | |

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) |
|------------|---------------|--|--------------------------------|----------------------------|
| 5 | 40 | 70 ft. | Zero | 0.21 cfs |

5. Provide pump calculations:

See attached Exhibit A

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 | NA | NA | NA |

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

7. Is the distribution system piped?

YES

If "NO" items 8 through item 11 may be deleted.

8. Mainline Information

| MAINLINE SIZE | LENGTH | TYPE OF PIPE | BURIED OR ABOVE GROUND |
|-------------------|----------|--------------|------------------------|
| From Well 308--6" | 100 ft | PVC | Buried |
| From Well 308--4" | 490 ft. | Aluminum | Above ground- Portable |
| From Well 307--6" | 1690 ft. | PVC | Buried |

9. Lateral or Handline Information

| LATERAL OR HANDLINE SIZE | LENGTH | TYPE OF PIPE | BURIED OR ABOVE GROUND |
|--------------------------|-----------|--------------|------------------------|
| 3" Handline | 1,320 ft. | Aluminum | Above |
| 3" Wheel line | 400 ft. | Aluminum | Above |
| | | | |

10. Sprinkler Information

| SIZE | OPERATING PSI | SPRINKLER OUTPUT (GPM) | TOTAL NUMBER OF SPRINKLERS | MAXIMUM NUMBER USED | TOTAL SPRINKLER OUTPUT (CFS) |
|------|---------------|------------------------|----------------------------|---------------------|------------------------------|
| 9/64 | 45 | 3.7 | 24 | 12 | 0.10 cfs |
| 5/32 | 45 | 4.7 | 20 | 11 | 0.12 cfs |
| | | | | | |

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) |
|--------------|-----------------------|---------------|--------------------------|--------------------------|
| Zimmatic | 459 ft. | 20 | 120 gpm | 0.27 cfs |
| | | | | |
| | | | | |

12. Additional notes or comments related to the system:

This system is in place and although not in operation on the day of my inspection, it is obvious that the water is used efficiently and effectively. Nice alfalfa field.

C. Groundwater Source Information (Well and Sump)

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

YES

If "NO", items 2 through 8 relating to this section may be deleted.

RECEIVED

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

SEP 23 2019

The access port is a 2" pipe on top of the casing, 30 inches above ground level.

OWRD

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 |
|-----------------|--------------|-------------|----------------------------------|---------------------------------|------------------------------|-----------------|
| 8" | 1 to 42 ft. | 72 ft. | 08/02/1979 | NA | C.H. Herberger | T. Landweer |
| | | | | | | |

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.

NA

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

NO

If "NO", items 6 through 8 relating to this section may be deleted.

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

D. Storage

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

NO

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

If "YES" is it a:

Storage Tank

NO

Bulge in System / Reservoir

NO

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

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?

RECEIVED NO

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

SEP 23 2019

F. Gravity Flow Canal or Ditch

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

OWRD

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

NO

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

SECTION 5 CONDITIONS

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 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 permit extension order:

| | DATE FROM PERMIT | DATE ACCOMPLISHED* | DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS |
|-----------------------------------|---|--------------------|--|
| ISSUANCE DATE | March 29, 2004 | | |
| BEGIN CONSTRUCTION (A) | NA | | |
| COMPLETE CONSTRUCTION (B) | NA | | This system has been in place since 2005. |
| COMPLETE APPLICATION OF WATER (C) | October 1, 2008 Extended to October 1, 2018 | September 1, 2018 | Following issuance of the extension of time, water user installed flow meters & used water for irrigation of fields. |

* 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

3. Initial Water Level Measurements:

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

NO

If "NO", items 4b through 4d 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?

NO

If "NO", items 5b through 5e 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

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

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

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

6. Measurement Conditions:

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

If "NO", items 7b through 7f 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 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 308 | Sparling | B002901219- | Working | Empty | August 2018 |
| Well 307 | Sparling | B002172418- | Working | Empty | Sept. 1, 2018 |

If a meter has been installed, items 7d through 7f 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? NO

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

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

- a. Were there special well construction standards? NO
- b. Was submittal of a ground water monitoring plan required? NO
- c. Was submittal of a water management and conservation plan required? NO
- d. Other conditions? NO

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

SECTION 6
ATTACHMENTS

RECEIVED

SEP 23 2019

OWRD

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

| ATTACHMENT NAME | DESCRIPTION |
|-----------------|--------------------------------------|
| EXHIBIT A | Well 308- Pump capacity calculations |
| EXHIBIT B | Well 307- Pump capacity calculations |
| | |

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.

Used GPS in RTK mode to locate Well #308, Well #307, flowmeters, mainlines, pivot, the irrigated acres and the brass capped monument at the NW corner of Section 27, T.13 S., R.29E., W.M.

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.)

- X Map on polyester film
- X Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- X Township, Range, Section, Donation Land Claims, and Government Lots
- X If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- NA Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- X Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- X Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- X Point(s) of diversion or appropriation (illustrated and coordinates)
- X Tax lot boundaries and numbers
- NA Source illustrated if surface water
- X Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- X Application and permit number or transfer number
- X North arrow
- X Legend
- X CWRE stamp and signature

SECTION 4 SYSTEM DESCRIPTION

Are there multiple POAs?

YES

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):

Well 307

A. Place of Use

1. Is the right for municipal use?

NO

If "YES" the table below may be deleted.

| TWP | RNG | MER | SEC | QQ | GLot | DLC | USE | IF IRRIGATION, # PRIMARY ACRES | IF IRRIGATION, # SUPPLEMENTAL ACRES |
|------------------------------|-----|-----|-----|------|------|-----|------------|--------------------------------------|---|
| 13S | 29E | WM | 27 | SEnw | NA | NA | Irrigation | | 5.02 |
| 13S | 29E | WM | 27 | SEnw | NA | NA | Irrigation | 7.24 | 1.31 |
| Total Acres Irrigated | | | | | | | | 7.24 | 6.33 |

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.

B. 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 appropriation to the place of use.

1. Is a pump used?

YES

If "NO" items 2 through item 6 may be deleted.

2. Pump Information

| MANUFACTURER | MODEL | SERIAL NUMBER | TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE) | INTAKE SIZE | DISCHARGE SIZE |
|--------------|---------|------------------|---|----------------|-------------------|
| Unknown | Unknown | Unknown | Unknown | 4" | 4" |

3. Motor Information

| MANUFACTURER | HORSEPOWER |
|--------------|------------|
| Unknown | Unknown |
| | |

Received
MAY 03 2024

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) |
|------------|------------------|---|-----------------------------------|----------------------------------|
| 7.5 | 45 | 110 ft. | Zero | 0.24 cfs |

OWRD

5. Provide pump calculations:

See attached Exhibit B

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 | NA | NA | NA |

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

7. Is the distribution system piped?

YES

If "NO" items 8 through item 11 may be deleted.

8. Mainline Information

| MAINLINE SIZE | LENGTH | TYPE OF PIPE | BURIED OR ABOVE GROUND |
|---------------|--------|--------------|------------------------|
| 4" | | PVC | Buried |
| | | | |
| | | | |

9. Lateral or Handline Information

| LATERAL OR HANDLINE SIZE | LENGTH | TYPE OF PIPE | BURIED OR ABOVE GROUND |
|--------------------------|----------|--------------|------------------------|
| 3" wheel line | 1320 ft. | Aluminum | Above |
| 4" hand line | 360 ft. | Aluminum | Above |
| | | | |

10. Sprinkler Information

| SIZE | OPERATING PSI | SPRINKLER OUTPUT (GPM) | TOTAL NUMBER OF SPRINKLERS | MAXIMUM NUMBER USED | TOTAL SPRINKLER OUTPUT (CFS) |
|------|---------------|------------------------|----------------------------|---------------------|------------------------------|
| 9/64 | 45 | 3.7 | 24 | 14 | 0.12 cfs |
| 5/32 | 45 | 4.7 | 20 | 11 | 0.12 cfs |
| | | | | | |

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) |
|--------------|-----------------------|---------------|--------------------------|--------------------------|
| Zimmatic | 459 ft. | 20 psi | 120 gpm | 0.27 cfs |
| | | | | |

12. Additional notes or comments related to the system:

C. Groundwater Source Information (Well and Sump)

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

YES

If "NO", items 2 through 8 relating to this section may be deleted.

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

None found

RECEIVED
SEP 23 2019
OWRD

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 |
|-----------------|--------------|-------------|----------------------------------|---------------------------------|------------------------------|-----------------|
| 8" | 1 - 125 ft. | 145 ft. | 08/02/1979 | NA | C.H. Herberger | T. Landweer |
| | | | | | | |

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.

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

NO

If "NO", items 6 through 8 relating to this section may be deleted.

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

D. Storage

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

NO

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

If "YES" is it a: Storage Tank

NO

Bulge in System / Reservoir

NO

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

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?

NO

F. 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

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

RECEIVED

SEP 23 2019

OWRD

Pump Capacity Calculation Sheet

using Department designed formula:

$(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$

Efficiency: 7.04

Centrifugal = 6.61

Turbine = 7.04

Data Entry (fill in underlined blanks)

HP = 5
Efficiency = 7.04
Lift = 70
PSI = 40

Results Calculated

(hp)(efficiency) = 35.2
Head based on psi = 101.6
Total dynamic head = 171.6
(head + lift)

Pump Capacity = 0.21 feet per second

WILLIS KIMBALL

PERMIT G-15578

WELL # 308

EXHIBIT A

RECEIVED

SEP 23 2019

OWRD

Pump Capacity Calculation Sheet

using Department designed formula:

$(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$

Efficiency: 7.04

Centrifugal = 6.61

Turbine = 7.04

Data Entry (fill in underlined blanks)

HP = 7.5
Efficiency = 7.04
Lift = 110
PSI = 45

Results Calculated

$(hp)(\text{efficiency}) =$ 52.8
Head based on psi = 114.3
Total dynamic head = 224.3
(head + lift)

Pump Capacity = 0.24 feet per second

WILLIS KIMBALL

PERMIT G-15578

WELL #307

EXHIBIT B



Oregon

Kate Brown, Governor

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

September 24, 2019

Willis Kimball
53688 Highway 26
Mt. Vernon OR 97865

On September 23, 2019, the Water Resources Department received the Claim of Beneficial Use (COBU) for the following file(s):

Application G-15973 Permit G-15578

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 is 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) 986-0900

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
Robert D Bagett, CWRE

COPY

ROBERT D. BAGETT, PLS, CWRE

Certified Water Right Examiner
P.O. Box 476
John Day, Oregon 97845
Phone (541) 620-0717
e-mail bobbagett@gmail.com
Office Location – 217 N. Canyon Boulevard

April 29, 2024

Gerry Clark, OWRD

Re: Permit G-15578 COBU Amended pages and map

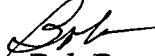
Good afternoon Gerry,

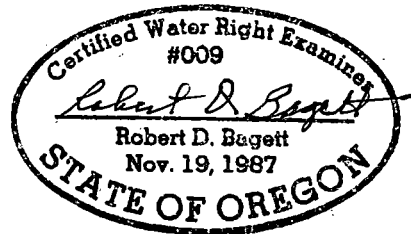
Per our telephone conversation this morning I am herewith submitting amended pages 4 & 5 for Well # 308 and page 1 for Well# 307's PART 4, also the amended Final Proof Survey Map.

As we discussed, while doing the field work on a recent project, I discovered that I inadvertently used the wrong coordinates for the NW corner of Section 27. The COBU and the map need to be corrected.

Thank you,

With best regards,


Bob Bagett, PLS, CWRE



Renews 12/31/2025

Received

MAY 03 2024

OWRD