

CLAIM OF BENEFICIAL USE for Surface Water 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.oregon.gov/OWRD

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**A fee of \$230 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:
<https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

Go to "Resources for Water Right Examiners (CWRE)" Page
<https://www.oregon.gov/OWRD/programs/WaterRights/COBU/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.

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>

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SECTION 1 GENERAL INFORMATION

1. File Information:

APPLICATION # S-88671	PERMIT # S-55217	PERMIT AMENDMENT # T-
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S-88761

Revised 7/1/2021

2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME ROGER MCMUNN		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS 1145 SE BARNES			
CITY GRESHAM	STATE OREGON	ZIP 97080	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 or holder of record (this may, or may not, be the current property owner):

PERMIT HOLDER OF RECORD MCMUNN PROPERTIES LLC			
ADDRESS 428 YEUST ROAD			
CITY AZALEA	STATE OREGON	ZIP 97410	Received MAY 28 2024

ADDITIONAL PERMIT HOLDER OF RECORD NA			OWRD
ADDRESS			
CITY	STATE	ZIP	

4. Date of Site Inspection:

SEPT. 12, 2023

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
BRIAN MCMUNN	SEPT. 12, 2023	AUTHORIZED SIGNER

6. County:

DOUGLAS

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(5)):

OWNER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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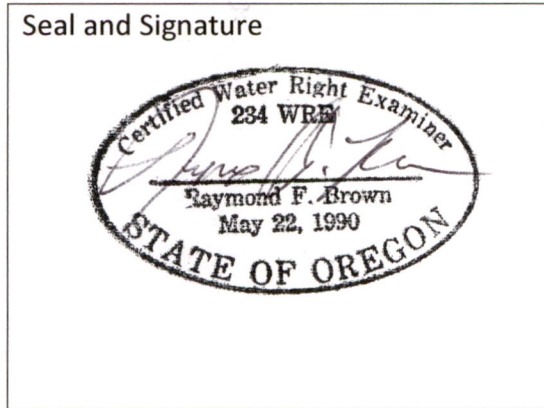
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**SECTION 2
SIGNATURES**

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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.



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EXP. 12/31/2023

CWRE NAME RAYMOND F. BROWN		PHONE NO. 541-839-6185	ADDITIONAL CONTACT NO. 541-680-8950
ADDRESS P.O. BOX 539			
CITY CANYONVILLE	STATE OREGON	ZIP 97417	E-MAIL Survey97417@gmail.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
	BRIAN MCMUNN	AUTHORIZED SIGNER	11/15/23
			7/25/24

**SECTION 3
CLAIM DESCRIPTION**

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1. Point of diversion name or number:

POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)
POD

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2. Point of diversion source and tributary:

POD NAME OR NUMBER	SOURCE	TRIBUTARY
	GALESVILLE RESERVIOR PERMIT R-9964	COW CREEK
POD	COW CREEK	SOUTH UMPQUA RIVER

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

POD 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)
POD	IRRIGATION	PRODUCE, HAY AND GRAZING	APRIL 01 – OCT. 01	33.45 AF
Total Quantity of Water Used				33.45 AF

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

FROM THE POD, WATER IS PUMPED FOR 2300 FEET THROUGH A 4 INCH MAIN LINE, WHERE IT IS BROKE DOWN TO 600 FEET OF 3 INCH LAY FLAT HOSE AND 770 FEET OF 2 INCH LAY FLAT HOSE, THEN RUNS FROM THE SAID LAY FLAT HOSE TO THE DRIP TAPES. COMPUTATIONS ARE FOR THE TOTAL SYSTEM. THE THREE LARGER ZONES ARE RAN ONE AT A TIME AND THE TWO SMALLER ZONES ARE RAN AT THE SAME TIME. AT TIME OF VISIT, ALL ABOVE GROUND LINES HAVE BEEN REMOVED FOR THE YEAR. SYSTEM CAPACITY IS 0.1875 CFS PER CERT. # 94273 = 0.1875 CFS AND PER PERMIT NO. S-88671 = 0.1625 CFS. TOTAL = 0.35 CFS

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, or permit amendment final order? If yes, describe below.

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.")

6. Claim Summary:

POD NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
POD	0.1875 CFS	0.1625 CFS	0.1625 CFS	IRRIGATION	15.0	13.0

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**SECTION 4
SYSTEM DESCRIPTION**

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NO

Are there multiple PODs?

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. 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
32 S	05 W	W.M.	12	NESE			IRRIGATION	10.3	
.32 S	05 W	W.M.	12	SESE			IRRIGATION	2.7	
Total Acres Irrigated								13.0 AC	

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 diversion 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
BALDOR	JPL1511T	V0008J11825	CENTRIFUGAL	2"	2"

3. Motor Information:

MANUFACTURER	HORSEPOWER
BALDOR	10 H. P.

4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
10 H.P.	80 PSI	5.0 FT	17.0 FT	0.294 CFS

5. Provide pump calculations:

(10 H.P.) X 6.61	66.10		
-----	=	-----	= 0.294 CFS
22.0' + 203.2		225.3	

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

If "NO" items 8 through item 13 may be deleted.

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
4"	1300 FT.	PVC	BURIED

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
3"	600 FT.	LAY FLAT HOSE	ABOVE GROUND
2"	770 FT.	LAY FLAT HOSE	ABOVE GROUND

10. Sprinkler Information:

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

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

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11. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
ZONE 1A 5/8"	12.0 PSI	113 GPM	21730	21730	0.252 CFS
ZONE 1B 5/8"	12.0 PSI	104 GPM	20000	20000	0.232 CFS
ZONE 1C 5/8"	12.0 PSI	118 GPM	22692	22692	0.263 CFS
ZONE 2 5/8"	12.0 PSI	43 GPM	7692	7692	0.096 CFS
ZONE 3 5/8"	12.0 PSI	50 GPM	9615	9615	0.111 CFS

12. Drip Tape Information:

DRIPPER SPACING IN INCHES	GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	ADDITIONAL INFORMATION
6"	.26 GPM	43462'	43462'	0.252 CFS	ZONE 1A
6"	.26 GPM	40000'	40000'	0.232 CFS	ZONE 1B
6"	.26 GPM	45385'	45385'	0.263 CFS	ZONE 1C
6"	.26 GPM	16538'	16538'	0.096 CFS	ZONE 2
6"	.26 GPM	19231'	19231'	0.111 CFS	ZONE 3

13. Pivot Information:

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NA				

C. 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
 Bulge in System / Reservoir*

NO
NO

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

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D. 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

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

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E. 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

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**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 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 permit extension of time:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	JUN. 13, 2019		
BEGIN CONSTRUCTION (A)	JUN. 13, 2020	JUNE, 2019	BEGAN INSTALLING 4" PIPE AND PLANTING FIELDS
COMPLETE CONSTRUCTION (B)			
COMPLETE APPLICATION OF WATER (C)	JUN. 13, 2024	JULY 01, 2019	BEGAN WATERING 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)?

NO

3. 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 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

c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POD	NETAFIM	19-60023975	WORKING	004458918	JULY 01, 2019

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4. Recording and reporting conditions:

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

5. Fish Screening:

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

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**

c. When was the fish screening installed?

DATE	BY WHOM
JULY 01, 2019	BRIAN MCMUNN

Reminder: If the permit 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.

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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**

If not, go to <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx> complete and attach a copy of the 'ODFW Small Pump Screen Self Certification' form to this claim, and send a copy of it to the Oregon Department of Fish and Wildlife (ODFW).

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. The ODFW self certification form needs to have been previously submitted or be attached to this form.

e. If the diversion does **not involve a pump** *or* the **total** diversion rate of all rights at the point of diversion is 225 gpm (0.5 cfs) or greater:

- Has the ODFW approval been previously submitted? **NA**

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?

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.

(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
NO BY-PASS DEVICE NEEDED		

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

- a. Was the water user required to restore the riparian area if it was disturbed? **NO**
- b. Was a fishway 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**

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

ATTACHMENT NAME	DESCRIPTION
MAP	FINAL PROOF MAP
ODF&W	ODF&W FISH SCREEN APPROVAL LETTER

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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.

AREA OF USE WAS SURVEYED BY USING A TOTAL STATION. I SURVEYED THE TOTAL FIELDS, THEN DEDUCTED THE AREA OF CERTIFICATE NUMBER 94273 (0.1875 CFS)

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
- X 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
- X 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

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Oregon

Tina Kotek, Governor

Department of Fish and Wildlife

Rogue Watershed District Office

1495 East Gregory Rd.

Central Point, OR 97502

Phone: 541-826-8774

Fax: 541-826-8776

www.odfw.com



August 21, 2023

Roger & Brian McMunn
428 Yeust Rd.
Azalea, OR 97410

Dear Roger & Brian,

Regarding OWRD water right Permit S-55217, ODFW has determined the fish screen at the pump point-of-diversion meets current fish protection criteria, and fish bypass devices are not necessary. Thank you.

Sincerely,

Josh Kelsey

Screens & Passage Coordinator
Oregon Dept. of Fish and Wildlife
1495 E. Gregory Rd.
Central Point, OR 97502
Office (541)-857-2424
Cell (541)-944-8557

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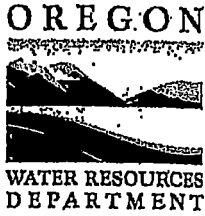
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Our mission is to protect and enhance Oregon's fish and wildlife and their habitats for use and enjoyment by present and future generations.

Please Send Further Correspondence
to: 1145 SE Barnes Rd
Gresham OR 97080

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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Roger McMinn
1145 SE Barnes, Gresham OR 97080

Transaction Type: Claim

Fees Received: \$ 230.00

Cash Check: Check No. 2002
Name(s) on Check: Same as above

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,
OWRD Customer Service Staff

Submission received by: Conie Lovinen
(Name of OWRD staff)

Instructions for OWRD staff:

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Fold and put one copy of the Submission Receipt with check/cash into the Safe slot. Place the other copy of the Submission Receipt with submission (application/other document) in the top drawer of filing cabinet.