

**CLAIM OF
BENEFICIAL USE
for Transfer with Multiple
Changes - Groundwater**



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 7" 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>

GENERAL INFORMATION

Type of Authorized Change

This Claim is being submitted for a transfer involving multiple changes.

YES NO

Mark all that apply:

1. Change in POA(s) or Additional POA(s) 2. Change in Place of Use
3. Change in Character of Use

A separate section will be completed for each type of change authorized in the transfer final order.

1. File Information

APPLICATION #
T-9085

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2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Joan D. Scannell Revocable Living Trust		PHONE NO. 541-419-0024	ADDITIONAL CONTACT NO.
ADDRESS PO Box 1831			
CITY Sisters	STATE OREGON	ZIP 97759	E-MAIL scannjo@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 T.W. and Joan Scannell		
ADDRESS PO Box 1831		
CITY Sisters	STATE OREGON	ZIP 97759

4. Date of Site Inspection:

April 1, 2024 (review of aerial photos from August 2003 completed for pre-C-date review)

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Joan Scannell	April 1, 2024	Property Owner

6. County:

Deschutes

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)):

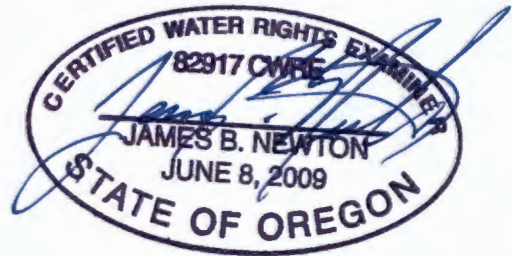
OWNER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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CWRE NAME Jim Newton	PHONE NO. 360 907-4162	ADDITIONAL CONTACT NO. NA
ADDRESS 21145 Scottsdale Drive		
CITY Bend	STATE OREGON	ZIP 97701
E-MAIL newtonjim@hotmail.com		



EXPIRES:
RENEWS:

1/1/2025

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
	Joan Scannell	<i>Owner</i>	9/29/24

**SECTION 3
Changes Made**

Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

Change #1

Change in POA(s) or Additional POA(s)

Did the transfer order authorize a change in the points of appropriation or additional points of appropriation?

YES NO

If "NO", this Section can be deleted.

1. New or additional 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)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
Well	DESC-51001 (based on well depth, static water level and age and location)	NA	Not noted in Transfer Final Order

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

If well logs are available, items A and B below can be deleted

A. 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"	62	78'	1977	NA	Ed Furman	Davidson Drilling

B. In addition to the information requested in item "A" above, provide any other information which

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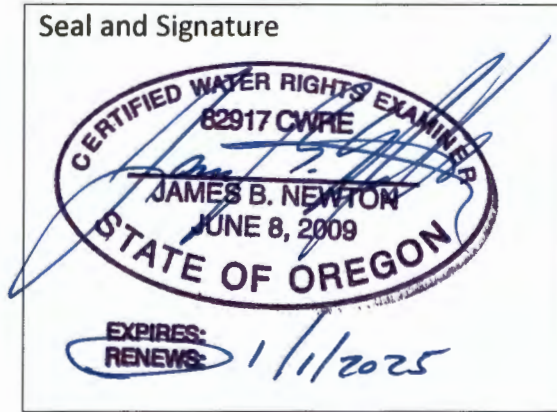
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**SECTION 2
SIGNATURES**

CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.



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CWRE NAME Jim Newton		PHONE NO. 360 907-4162	ADDITIONAL CONTACT NO. NA	
ADDRESS 21145 Scottsdale Drive				
CITY Bend	STATE OREGON	ZIP 97701	E-MAIL newtonjim@hotmail.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
	Joan Scannell		

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SECTION 3
Changes Made

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Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

Change #1

Change in POA(s) or Additional POA(s)

Did the transfer order authorize a change in the points of appropriation or additional points of appropriation? **YES NO**

If "NO", this Section can be deleted.

1. New or additional 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)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
Well	DESC-51001 (based on well depth, static water level and age and location)	NA	Not noted in Transfer Final Order

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

If well logs are available, items A and B below can be deleted

A. 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"	62	78'	1977	NA	Ed Furman	Davidson Drilling

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

1st water at 35'. Reported static water level at 35'. Originally drilled as exempt domestic well.

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final? **YES NO**

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

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3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
Well	0.06 cfs	0.26 cfs	Not Measured

System Description

Are there multiple new or additional Points of Appropriation (POA)? **YES NO**

If "YES" you will need to copy and complete either Section A or B in this Section for each POA.

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

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Franklin Electric	S675-5XX Pump E	Not Available	Submersible	NA	2"

2. Motor Information

MANUFACTURER	HORSEPOWER
Franklin Electric	5 HP

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)
5 HP	40	35'	0'	0.26

4. Provide pump calculations:

Using Department designed formula: $(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$
 Turbine & Submersible Efficiency = 7.04

HP =	5
Efficiency =	7.04
Lift =	35
PSI =	40
(hp)(efficiency) =	35.2
Head based on psi =	101.6
Total dynamic head =	136.6
(head + lift)	
Pump Capacity =	0.26 cfs

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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)
NA	NA	NA	NA

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

6. Additional notes or comments related to the system:

The original submersible pump was replaced on August 4, 2006 with a same horsepower, similar, like kind, pump. The above pump information and calculations are for the current submersible pump.

B. Groundwater Source Information (Well and Sump)

1. Is the appropriation from a dug well (sump)? **YES NO**

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

Change #2

Change in Place of Use

Did the transfer order authorize a change in the place of use? **YES NO**

If "NO", this Section can be deleted.

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
5	5

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If the new use(s) was not irrigation or nursery: NA

2. Variations:

Was the use developed differently from what was authorized by the transfer final order? **YES NO**

If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

Change #3

Change in Character of Use

Did the transfer order authorize a change in character of use? **YES NO**

If "NO", this Section can be deleted.

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SECTION 4
CONDITIONS

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 AUTHORIZED CHANGES WERE COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	9/19/2002	
COMPLETENESS DATE FROM ORDER (C)	10/1/2003	October 1, 2003; confirmed based on review of aerial photos dated August 2003 noting complete application of POU.

* 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.

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.

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.

5. Other conditions required by the transfer 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**

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SECTION 5
ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Figure 1	Vicinity Map
Figure 2	Claim of Beneficial Use Map – Transfer T-9085
Figure 3	Claim of Beneficial Use Map – Transfer T-9085 Aerial

SECTION 6
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.

The changes that were authorized under the transfer final order must be mapped based on the developed locations; new or additional points of appropriation and place of use.

In cases where the order involved additional points of appropriation, the additional points should be mapped based on their developed locations. The original points of appropriation should be mapped based on the original right of record at the time the transfer final order was issued.

In cases where the order involved changing the place of use for a portion of a water right, the portion of the place of use being changed should be mapped based on the developed location. If the transfer also included portions of the place of use that were not being modified, but were receiving a new or additional point of appropriation, the place of use for those lands should be mapped 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.

A review of aerial photos that were available from Google Earth Pro dated August 2003 (during the development period and prior to the C-date of October 1, 2003) noting that the entire POU was in use. Further, a site visit was conducted in-person by Jim Newton (CWRE) with Joan Scannell (owner) to review and confirm the place of use is consistent with the POU developed prior to the C-date and to obtain dated information relating to the well and water system that was in use in 2003 and is currently still in use. Well location was confirmed to be consistent with the original transfer map and that the same well is still in use as the POA for the transfer.

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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
- NA** Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- NA** Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- NA** Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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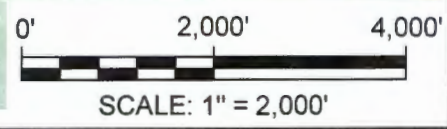
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Vicinity Map
 OCT 01 2024 Joan Scannell Properties
 Salem, OR Deschutes County, Oregon

DESIGNED BY: J. Newton	DRAWN BY: R2D	DATE: SEPT 2024	PROJECT NO. CG 1159-101	FIGURE 1
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CLAIM OF BENEFICIAL USE M A P

TAX LOTS 701 & 705

Located in NE-NW Qtr-Qtr and
in the NW-NE Qtr-Qtr
of Section 33, T.14S., R.10E., W.M.
Deschutes County, Oregon

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NOTES

1. This map was prepared for the purpose of identifying the location of water rights only and is not intended to provide legal dimensions or locations of property ownership lines.

LEGEND

- Place of Use
- Well Location

Source: Aerial base provided by Google Earth Pro Image, date August 2003.



Claim of Beneficial Map - Transfer T-9085 Aerial
Joan Scannell Properties
Deschutes County, Oregon

DESIGNED BY: J. Newton	DRAWN BY: R2D	DATE: SEPT 2024	PROJECT NO. CG 1159-101	FIGURE 3
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are to be filed with the
MAP
WATER RESOURCES DEPARTMENT.
SALEM, OREGON 97310
 within 30 days from the date
 of well completion.

WATER WELL REPORT

STATE OF OREGON
 (Please type or print)

(Do not write above this line)

State Well No. A/10/13
 State Permit No. _____

desc
 51001

4 10 33 00 701

(1) OWNER:

Name F.A. Zimmerman
 Address 1001 N. 1st St.
Salem, Oregon

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
 If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
 Cable Jetted
 Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
 Irrigation Test Well Other

(5) CASING INSTALLED:

Threaded Welded
8" Diam. from 11 ft. to 62 ft. Gage _____
 _____ " Diam. from _____ ft. to _____ ft. Gage _____
 _____ " Diam. from _____ ft. to _____ ft. Gage _____

(6) PERFORATIONS:

Perforated? Yes No.
 Type of perforator used Factory
 Size of perforations _____ in. by _____ in.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No
 Manufacturer's Name _____
 Type _____ Model No. _____
 diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
 diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes No If yes, by whom? Newton
 Yield: 7.5 gal./min. with 1 ft. drawdown after 8 hrs.
 _____ " " " " " " " " " " " "
 _____ " " " " " " " " " " " "
 Fall test gal./min. with ft. drawdown after hrs.
 Artesian flow g.p.m.
 Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Cement
 Well sealed from land surface to 20 ft.
 Diameter of well bore to bottom of seal 12 in.
 Diameter of well bore below seal 10 in.
 Number of sacks of cement used in well seal 10 sacks
 How was cement grout placed? grout

 Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
 Did any strata contain unusable water? Yes No
 Type of water? _____ depth of strata _____
 Method of sealing strata off _____
 Was well gravel packed? Yes No Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Deschutes Driller's well number _____
NW 1/4 NE 1/4 Section 33 T. 14 S. R. 10 E
 Bearing and distance from section or subdivision corner
Indian Ed. mdws
lot 1 BKS TL 701

(11) WATER LEVEL: Completed well.

Depth at which water was first found 35
 Static level 35 ft. below land surface. Date 6/10/13
 Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 8"
 Depth drilled 78 ft. Depth of completed well 78

Formation: Describe color, texture, grain size and structure of material and show thickness and nature of each stratum and aquifer penetrate with at least one entry for each change of formation. Report each change position of Static Water Level and indicate principal water-bearing strata

MATERIAL	From	To	SWL
<u>cong. gray</u>	<u>0</u>	<u>14</u>	
<u>sandstone gray</u>	<u>14</u>	<u>35</u>	
<u>br</u>	<u>35</u>	<u>52</u>	<u>35</u>
<u>sandstone cong</u>	<u>52</u>	<u>78</u>	

PART OF THIS
 LOOKS LIKE
 LESLIE GRAVES
 HANDWRITING.
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Work started _____ 19 _____ Completed _____ 19
 Date well drilling machine moved off of well _____ 19 _____

Drilling Machine Operator's Certification:
 This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
 [Signed] _____ Date _____, 19_____
 (Drilling Machine Operator)
 Drilling Machine Operator's License No. _____

Water Well Contractor's Certification:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 Name Davidson Drilling
 (Person, firm or corporation) (Type or print)
 Address _____
 [Signed] _____
 (Water Well Contractor)
 Contractor's License No. _____ Date 6/13, 1913

STATE OF OREGON

COUNTY OF DESCHUTES

**ORDER APPROVING A CHANGE IN PLACE OF USE,
POINT OF APPROPRIATION,
AND PARTIAL CANCELLATION OF CERTAIN WATER RIGHTS**

Pursuant to ORS 537.705, after notice was given and no objections were filed, and finding that no injury to existing water rights would result, this order approves, as conditioned or limited herein, TRANSFER 9085 submitted by

T. W. AND JOAN SCANNELL
P.O. BOX 1831
SISTERS, OREGON 97759.

The right to be modified, as evidenced by a PORTION of Certificate 72242, was perfected under Permit G-11250 with a date of priority of DECEMBER 17, 1990. The right allows the use of A WELL, in the SQUAW CREEK BASIN, for IRRIGATION OF 5.0 ACRES. The amount of water to which this right is entitled is limited to an amount actually beneficially used and shall not exceed 0.06 cubic foot per second, if available at the original well; SW¼ NW¼, SECTION 3, T 15 S, R 10 E, W.M.; 1425 FEET SOUTH AND 238 FEET EAST FROM THE NW CORNER, SECTION 3, or its equivalent in case of rotation, measured at the well.

The amount of water used for irrigation, together with the amount secured under any other right existing on the same lands, is limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated and shall be further limited to a diversion of not to exceed 3.0 acre-feet per acre for each acre irrigated during the irrigation season of each year.

NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is a final order in other than a contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review must be filed within the 60 day time period specified by ORS 183.484(2).

Pursuant to ORS 536.075 and OAR 137-004-080 and DAR 690-01-005, you may either petition for judicial review or petition the Director for reconsideration of this order.

The use shall conform to any reasonable rotation system ordered by the proper state officer.

The authorized place of use is as follows:

SW¼ NW¼ 5.0 ACRES
SECTION 3
TOWNSHIP 15 SOUTH, RANGE 10 EAST, W.M.

This use may be regulated if analysis of data available discloses that the appropriation will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway in quantities necessary for recreation, fish and wildlife in effect as of the priority date of this right or as those quantities may be subsequently reduced.

The well shall be maintained in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon.

When required by the department, the user shall install and maintain a weir, meter or other suitable measuring device and shall keep a complete record of the amount of ground water withdrawn.

The Director may require water level or pump test results every ten years.

Failure to comply with any of the provisions of this right may result in action including, but not limited to restrictions on the use, civil penalties, or cancellation of the right.

This right is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

The right to use water for the above purpose is restricted to beneficial use on the lands or place of use described.

The applicant proposes to change the place of use to:

NW¼ NE¼ 2.53 ACRES
NE¼ NW¼ 2.47 ACRES
SECTION 33
TOWNSHIP 14 SOUTH, RANGE 10 EAST, W.M.

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The applicant proposes to change the point of appropriation to:

NW¼ NE¼, SECTION 33, T 14 S, R 10 E, W.M.; 672 FEET SOUTH AND 247 FEET EAST FROM THE N¼ CORNER, SECTION 33.

An affidavit was received from Joseph Angel, the owner of certain land and the water right appurtenant to it. A portion of the water right has been abandoned and is requested to be canceled.

The portion is described by Certificate 11562, State Record of Water Rights Certificates. The date of priority is December 6, 1935. The water use was for supplemental irrigation of 3.8 acres from Swamp Creek.

A description of the place of use of the abandoned portion is as follows:

SW¼ NW¼ 3.8 ACRES (Tax lot 1501)
SECTION 3
TOWNSHIP 15 SOUTH, RANGE 10 EAST, W.M.

An affidavit was received from Joseph Angel, the owner of certain land and the water right appurtenant to it. A portion of the water right has been abandoned and is requested to be canceled.

The portion is described by Certificate 31244, State Record of Water Rights Certificates. The date of priority is March 27, 1959. The water use was for primary irrigation of 1.4 acres and supplemental irrigation of 3.7 acres from a well in the Squaw Creek Basin.

A description of the place of use of the abandoned portion is as follows:

SW¼ NW¼ 3.7 ACRES (Tax lot 1501) SUPPLEMENTAL
SE¼ NW¼ 1.4 ACRES (Tax lot 1501) PRIMARY
SECTION 3
TOWNSHIP 15 SOUTH, RANGE 10 EAST, W.M.

ORS 540.621 provides: "Whenever the owner of a perfected and developed water right certifies under oath to the Water Resources Commission that the water right has been abandoned by the owner and that the owner desires cancellation thereof, the Commission shall enter an order canceling the water right."

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THESE CHANGES TO AN EXISTING WATER RIGHT MAY BE MADE PROVIDED THE FOLLOWING CONDITIONS ARE MET BY THE WATER USER:

1. The proposed changes shall be completed on or before October 1, 2003.
2. The quantity of water diverted at the new point of appropriation (well), together with the quantity diverted at the old point of appropriation, shall not exceed the quantity of water lawfully available from the original point of appropriation.
3. When required by the Department the water user shall install an in-line flow meter or other suitable device for measuring and recording the quantity of water used. The type and plans of the measuring device must be approved by the Department prior to beginning construction and shall be installed under the general supervision of the Department.
4. Water shall be acquired from the same aquifer as the original point of appropriation.
5. The former place of use shall no longer be irrigated as part of this water right.

The portion of the water rights that have been abandoned and that are requested to be canceled are canceled.

Certificate 72242 is canceled. A new certificate will be issued to confirm that portion of the right NOT involved in this transfer. When satisfactory proof of the completed change is received, a new certificate confirming this water right will be issued.

WITNESS the signature of the Water Resources Director, affixed SEPT. 19, 2002.



Paul R. Cleary, Director

Received by OWRD

OCT 01 2024

Salem, OR

Pump Capacity Calculation Sheet

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 = 5
Efficiency = 7.04
Lift = 35
PSI = 40

Results Calculated

(hp)(efficiency) = 35.2
Head based on psi = 101.6
Total dynamic head = 136.6
(head + lift)

Pump Capacity = 0.26 feet per second

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OCT 01 2024

Salem, OR

Received
OCT 23 2024
OWRD



Received by OWRD
OCT 01 2024
Salem, OR

Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: TW + Jean Scannell PO Box 1831
Sisters OR 97759

Transaction Type: CBC

Fees Received: \$ 230.00

Cash Check: Check No. 1663

Name(s) on Check: Jean Scannell

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: W. M. Peller
(Name of OWRD staff)

Received
OCT 23 2024
OWRD

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.