

**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.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.**
The \$230 fee is included with this application.

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>

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>

(See Certificate Resources)

SECTION 1

GENERAL INFORMATION

1. File Information:

APPLICATION # G-18524	PERMIT # (IF APPLICABLE) G-17963	PERMIT AMENDMENT # (IF APPLICABLE) N/A
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME SARBANAND ENTERPRISES LLC		PHONE NO. 661-565-6421	ADDITIONAL CONTACT NO.	
ADDRESS 786 RD 188				
CITY DELANO	STATE CA	ZIP 93215	EMAIL	

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 SARBANAND ENTERPRISES LLC				
ADDRESS 786 RD 188				
CITY DELANO	STATE CA	ZIP 93215	EMAIL	

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

4. Date of Site Inspection:

9/11/2024

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Matt Hoezee	9/11/2024	Regional Ranch Manager

6. County:

Yamhill

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 N/A				
ADDRESS				
CITY	STATE	ZIP	EMAIL	

Add additional tables for owners of record as needed

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**SECTION 2
SIGNATURES**

CWRE Statement, Seal and Signature

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

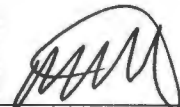


CWRE NAME Robyn Cook		PHONE NO. 971-200-8505	ADDITIONAL CONTACT NO.	
ADDRESS GSI Water Solutions, Inc., 650 NE Holladay Street, Suite 900				
CITY Portland	STATE OR	ZIP 97232	E-MAIL rcook@gsiws.com	

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
	Matt Hoezee	Regional Ranch Manager	10-22-2024

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**SECTION 3
CLAIM DESCRIPTION**

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 1 (-123.326071, 45.13168)	YAMH 50892	L-14742

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 1	Irrigation	Hazelnuts	March 1-October 31	0.051 cfs
Total Quantity of Water Used				0.051 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:

Water is pumped from Well 1 using a submersible pump, conveyed to the place of use via PVC mainline, and applied for irrigation with drip emitters.

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.")

None.

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 1	0.051 cfs	0.10 cfs	0.10 cfs	Irrigation	150.1	150.1

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**SECTION 4
SYSTEM DESCRIPTION**

Are there multiple POAs?

YES NO

If "YES" you will need to copy and complete a separate Section 4 for each POA.

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

Well 1

A. 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. Groundwater Source Information (Well)

1. Is the appropriation from a well?

YES NO

If "NO", items 2 through 4 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:

Vent hole on south side of well cap.

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
6 in	+1-19ft	260ft	11/4/97	N/A	Hyland Vineyards	Randall Lewis Wilcox

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.

See Attachment C – Well Log

C. Groundwater Source Information (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. Items 2 through 4 were deleted.

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

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Salem, OR

D. 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)
Unknown*	Unknown*	Unknown*	Submersible

*The submersible pump used to pump water from Well 1 was installed in the Well and was inaccessible during the site inspection.

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)
2 HP	30 PSI	63 ft	Component of operating pressure	0.10 cfs

4. Provide pump calculations:

See Attachment D – 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)
16554642.5 gal	16559740.0 gal	2.00 min	0.10 cfs

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)
N/A					

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

7. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
Unknown	35 PSI	0.008	20,113	2,750	0.051

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8. 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
N/A					

E. 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. Items 2 and 3 were deleted.

F. 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. Items 2 through 4 were deleted.

G. 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?

YES NO

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

H. Additional notes or comments related to the system:

None.

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NOV 04 2024

Salem, OR

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 extension final order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	2/14/2018		
BEGIN CONSTRUCTION (A)	2/14/2023	11/4/97	Well 1 was constructed prior to permit issuance.
COMPLETE CONSTRUCTION (B)	2/14/2023	Summer 2018	Installed irrigation on the entire place of use.
COMPLETE APPLICATION OF WATER (C)	2/14/2023	Summer 2019	Irrigated entire place of 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

If "NO", items a and b relating to this section may be deleted. Items a and b were deleted.

3. Initial Water Level Measurements:

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

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

b. What month was the initial measurement to be taken in?

March

c. Was the measurement submitted to the Department? YES NO

d. If the initial measurement was not submitted, provide that measurement now, if available:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
Initial measurement was submitted.			Received by OWRD

See Attachment E – Static Water Level Measurements

NOV 04 2024

Salem, OR

4. Annual Static Water Level Measurements:

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

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

b. Provide the month, or months, in which the static water level measurement(s) were to be made:

c. Were the static water level measurements taken in the month(s) required? **YES** **NO**

d. If "YES", were those measurements submitted to the Department? **YES** **NO**

e. If the annual measurements were not submitted, provide the measurements now:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT
Annual measurements were submitted.			

See Attachment E – Static Water Level Measurements

5. Pump Test:

a. Is a pump test required? **YES** **NO**

Ground water permits with priority dates on or after December 20, 1988, require the submittal of a pump test prior to issuance of a certificate. In some cases, the permit holder may qualify for a multiple well exemption or an unreasonable burden exemption.

For additional information regarding pump tests see:

<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

If "NO", items b through e 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**

N/A

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

See Attachment F – Pump Test

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** **NO**

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

Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of 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 1	Netafim	181006326	Working	16559642.5	Summer 2018

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

b. Have the reports been submitted? **YES** **NO**

See Attachment G – Water Use Reports. Please note that the water use report contains a typo. The report says that 105 acres were irrigated, however, 150.1 acres have been irrigated under this permit. *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. Was a Well Identification Number (Well ID tag) assigned and attached to the well? **YES** **NO**

WELL ID #	DATE ATTACHED TO WELL
L-14742	11/4/97

d. 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):

8c: A well ID tag was attached to Well 1 when it was constructed.
8d: Drip irrigation is used to irrigate the place of use.

**SECTION 6
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Attachment A	Permit G-17963
Attachment B	COBU Map
Attachment C	Well Log
Attachment D	Pump Calculations
Attachment E	Static Water Level Measurements
Attachment F	Pump Test
Attachment G	Water Use Reports

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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.

The place of use was visited during the site inspection. The extent of this place of use and irrigation system was located using aerial imagery (Google Earth, April 2023), a handheld GPS, and a field survey completed during the site inspection. The map was created using Geographic Information System (GIS) software and spatial datasets obtained from Yamhill County, ESRI, Bureau of Land Management (BLM), and United States Geological Survey (USGS). Additional data and information specific to the use of water under the water right described in this Claim of Beneficial Use report were obtained from the water right holder.

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NOV 04 2024
Salem, OR

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
- N/A Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- 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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Attachment A

Permit G-17963

Claim of Beneficial Use – SARBANAND ENTERPRISES LLC

STATE OF OREGON
COUNTY OF YAMHILL

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

SARBANAND ENTERPRISES LLC
786 RD 188
DELANO CA 93215

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-18524

SOURCE OF WATER: BELLEVUE WELL IN MUDDY CREEK BASIN

PURPOSE OR USE: IRRIGATION OF 150.1 ACRES

MAXIMUM RATE: 0.051 CUBIC FOOT PER SECOND

PERIOD OF USE: MARCH 1 THROUGH OCTOBER 31

DATE OF PRIORITY: JUNE 14, 2017

WELL LOCATION:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
5 S	5 W	WM	17	SW SE	600 FEET NORTH AND 1460 FEET WEST FROM SE CORNER, SECTION 17

The amount of water used for irrigation under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second and 2.5 acre-feet for each acre irrigated during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

Twp	Rng	Mer	Sec	Q-Q	Acres
5 S	5 W	WM	16	SW SW	10.4
5 S	5 W	WM	17	SW SE	15.5
5 S	5 W	WM	17	SE SE	23.0
5 S	5 W	WM	20	NE NE	40.0
5 S	5 W	WM	20	NW NE	30.9
5 S	5 W	WM	20	SW NE	4.0
5 S	5 W	WM	20	SE NE	7.0
5 S	5 W	WM	21	NW NW	16.8
5 S	5 W	WM	21	SW NW	2.5

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Measurement Devices, and Recording/Reporting of Annual Water Use Conditions:

- A. Before water use may begin under this permit, the permittee shall install a totalizing flow meter at each point of appropriation. The permittee shall maintain the device in good working order.
- B. The permittee shall allow the watermaster access to the device; provided however, where any device is located within a private structure, the watermaster shall request access upon reasonable notice.
- C. The permittee shall keep a complete record of the volume of water used each month, and shall submit an annual report which includes the recorded water-use measurements to the Department annually, or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water-use information, including the place and nature of use of water under the permit.
- D. The Director may provide an opportunity for the permittee to submit alternative measuring and reporting procedures for review and approval.

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NOV 04 2024

Static Water Level Conditions:

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To monitor the effect of water use from the well(s) authorized under this permit, the Department requires the water user to obtain, from a qualified individual (see below), and report annual static water level measurements. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.

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Measurements must be made according to the following schedule:

Before Use of Water Takes Place

Initial and Annual Measurements

The Department requires the permittee to report an initial water level measurement in the month specified above once well construction is complete and annually thereafter until use of water begins; and

After Use of Water has Begun

Seven Consecutive Annual Measurements

Following the first year of water use, the user shall report seven consecutive annual static water level measurements. The first of these seven annual measurements will establish the reference level against which future annual measurements will be compared. Based on an analysis of the data collected, the Director may require the user to obtain and report additional annual static water level measurements beyond the seven year minimum reporting period. The additional measurements may be required in a different month. If the measurement requirement is stopped, the Director may restart it at any time.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board and be submitted to the Department on forms provided by the Department. The Department requires the individual performing the measurement to:

- A. Identify each well with its associated measurement; and
- B. Measure and report water levels to the nearest tenth of a foot as depth-to-water below ground surface; and
- C. Specify the method used to obtain each well measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

The water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s) if any of the following events occur:

- A. Annual water level measurements reveal an average water level decline of three or more feet per year for five consecutive years; or
- B. Annual water level measurements reveal a water level decline of 15 or more feet in fewer than five consecutive years; or
- C. Annual water level measurements reveal a water level decline of 25 or more feet; or
- D. Hydraulic interference leads to a decline of 25 or more feet in any neighboring well with senior priority.

The period of non-use or restricted use shall continue until the water level rises above the decline level which triggered the action or until the Department determines, based on the permittee's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

Irrigation allowed under this permit shall be by drip irrigation or by an equally efficient method.

Well Identification Tag Condition:

Prior to using water from any well listed on this permit, the permittee shall ensure that the well has been assigned an OWRD Well Identification Number (Well ID tag), which shall be permanently attached to the well. The Well ID shall be used as a reference in any correspondence regarding the well, including any reports of water use, water level, or pump test data.

STANDARD CONDITIONS

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

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NOV 04 2024

If the number, location, source, or construction of any well deviates from that proposed in the permit application or required by permit conditions, this permit may be subject to cancellation, unless the Department authorizes the change in writing.

If substantial interference with surface water or a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well(s) shall be constructed and maintained in accordance with the General Standards for the Construction and Maintenance of Water Supply Wells in Oregon. The works shall be equipped with a usable access port adequate to determine water-level elevation in the well at all times.

If the riparian area is disturbed in the process of developing a point of appropriation, the permittee shall be responsible for restoration and enhancement of such riparian area in accordance with ODFW's Fish and Wildlife Habitat Mitigation Policy OAR 635-415. For purposes of mitigation, the ODFW Fish and Wildlife Habitat Mitigation Goals and Standards, OAR 635-415, shall be followed.

The use may be restricted if the quality of downstream waters decreases to the point that those waters no longer meet state or federal water quality standards due to reduced flows.

Where two or more water users agree among themselves as to the manner of rotation in the use of water and such agreement is placed in writing and filed by such water users with the watermaster, and such rotation system does not infringe upon such prior rights of any water user not a party to such rotation plan, the watermaster shall distribute the water according to such agreement.

Prior to receiving a certificate of water right, the permit holder shall submit to the Water Resources Department the results of a pump test meeting the Department's standards for each point of appropriation (well), unless an exemption has been obtained in writing under OAR 690-217. The Director may require water-level or pump-test data every ten years thereafter.

This permit 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.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

Construction of the well shall begin within five years of the date of permit issuance. The deadline to begin construction may not be extended. This permit is subject to cancellation proceedings if the construction deadline to begin is missed.

Complete application of the water shall be made within five years of the date of permit issuance. If beneficial use of permitted water has not been made before this date, the permittee may submit an application for extension of time, which may be approved based upon the merit of the application.

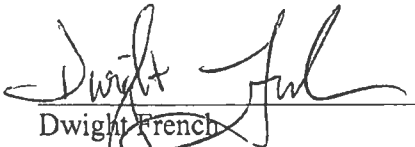
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Within one year after making beneficial use of water, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner.

Issued February 14, 2018



Dwight French
Water Right Services Division Administrator, for
Thomas M. Byler, Director
Oregon Water Resources Department



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NOV 04 2024

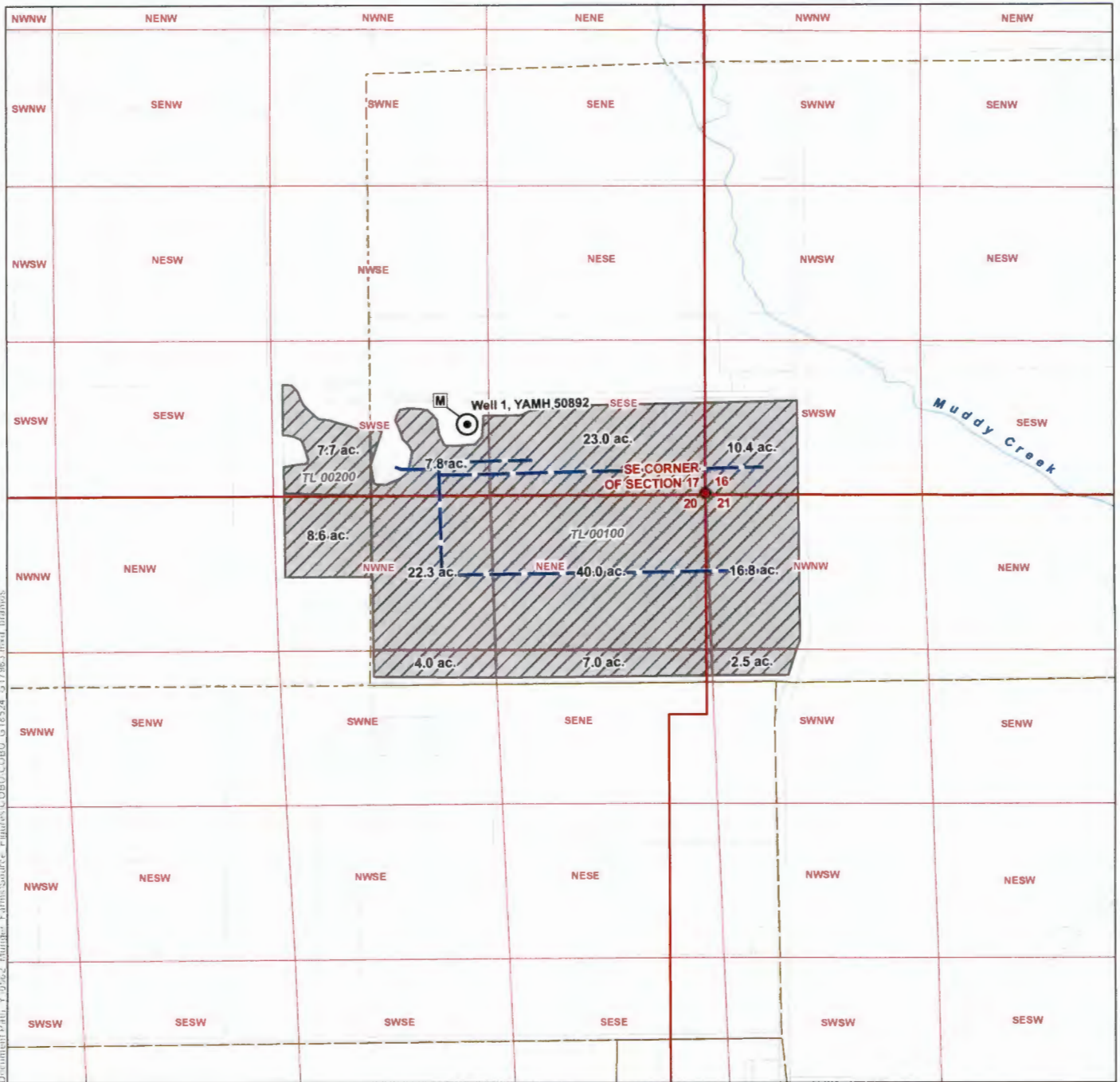
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Attachment B

COBU Map

Claim of Beneficial Use – SARBANAND ENTERPRISES LLC



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LEGEND

- Proposed Point of Appropriation (POA)
- Meter
- Proposed Place of Use (POU)
- Conveyance Line
- All Other Features**
- Tax Lot
- Watercourse
- Waterbody

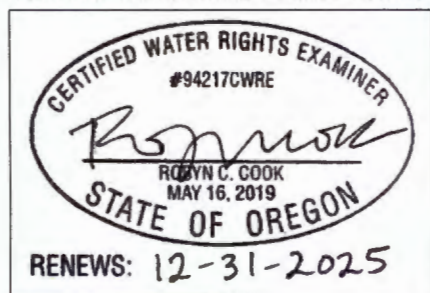
Claim of Beneficial Use Map
Sarbanand Enterprises, LLC.
Application G-18524; Permit G-17963
 Township 5 South, Range 5 West (W.M.)

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CERTIFIED WATER RIGHTS EXAMINER STAMP

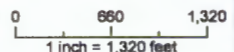


POA LOCATION DESCRIPTION

Point of Appropriation
 Located 600 feet North and 1,460 feet West from the SE corner of Section 17, Township 5 South, Range 5 West (W.M.) (-123.326071, 45.13168)

DISCLAIMER
 This map was prepared for the purpose of identifying the location of a water right only and it is not intended to provide legal dimensions or location of property ownership lines.

Date: September 24, 2024
 Data Sources: BLM, ESRI, OWRD, USGS



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Attachment C

Well Log

Claim of Beneficial Use - SARBANAND ENTERPRISES LLC

Yamh
50892

RECEIVED

Well Id No. L14742

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

DEC - 4 1997

(START CARD) # 098120

Instructions for completing this report are on the last page of this form WATER RESOURCES DEPT.

(1) OWNER: Hyland Vineyards Well Number _____
Name Hyland Vineyards
Address 17500 SW Oldsville Rd.
City McMinnville, OR State OR Zip 97128

SALEM, OREGON OF WELL by legal description:
County Yamh. Latitude _____ Longitude _____
Township 55 N or S Range 5W E or W. WM. _____
Section 17 SW 1/4 NW 1/4 _____
Tax Lot 5517 Lot 62700 Block _____ Subdivision _____
Street Address of Well (or nearest address) SW Vineyard Lane McMinnville OR 97128 off Muddy Valley Rd.

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 260 ft.
Explosives used Yes No Type _____ Amount _____

(10) STATIC WATER LEVEL:
91 ft. below land surface. Date Nov 4 97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 97 1/26 p.m

HOLE SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10 3/8"	0	19	Bentonite	0	19	9 SACKS
6"	19	260				

From	To	Estimated Flow Rate	SWL
97	98	1/2 G.P.M.	
290	250	2 1/2 G.P.M.	

How was seal placed: Method A B C D E
 Other Bentonite does placed top 19 feet
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(12) WELL LOG:
Ground Elevation _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	0	19	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	4	260	160	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Material	From	To	SWL
TOP SOIL	0	2	
Brown clay	2	9	
Medium hard blue basalt with fractured layers.	9	260	

(7) PERFORATIONS/SCREENS:

Perforations Method Electric drill
 Screens Type 1/2" circular Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
180	260	160		5/8" circular		<input type="checkbox"/>	<input checked="" type="checkbox"/>

Date started Oct 30 97 Completed Nov 4, 97
(unbonded) Water Well Constructor Certification:

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 22 Drawdown Air lift Drill stem at 260 Time 1 hr.
22 Pump set 248 4 hours

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Temperature of water 52° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

Signed Not Appl. WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
Signed Randall J. Wilder WWC Number 1195 Date Nov 20, 97

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Attachment D

Pump Calculations

Claim of Beneficial Use – SARBANAND ENTERPRISES LLC

Well 1 Pump Capacity 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 = 2
Efficiency = 7.04
Lift = 63
PSI = 30

Results Calculated

(hp)(efficiency) = 14.08
Head based on psi = 76.2
Total dynamic head = 139.2
(head + lift)

Pump Capacity = 0.10 cubic feet per second

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Attachment E

Static Water Level Measurements

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Measured Water Levels:

<u>Date</u>	<u>Time</u>	<u>Water Level (BLS)</u>	<u>WL Elev (ft AMSL)</u>	<u>Organization</u>	<u>OWRD</u>	<u>Method</u>	<u>Status</u>	<u>MP Height</u>
4/8/2024		51.00		CWRE	PERMIT CONDITION PROGRAM	ETAPE	STATIC	1.00
3/4/2024		51.60		CWRE	PERMIT CONDITION PROGRAM	ETAPE	STATIC	1.20
3/14/2023		52.00		CWRE	PERMIT CONDITION PROGRAM	ETAPE	STATIC	1.20
3/15/2022		51.70		CWRE	PERMIT CONDITION PROGRAM	ETAPE	RISING	1.20
3/12/2021		48.30		PROFESSIONAL ENGINEER	PERMIT CONDITION PROGRAM	ETAPE	RISING	1.20
3/17/2020		49.10		PROFESSIONAL ENGINEER	PERMIT CONDITION PROGRAM	ETAPE	RISING	1.20
3/19/2019		48.00		PROFESSIONAL ENGINEER	PERMIT CONDITION PROGRAM	ETAPE	RISING	1.20

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Attachment F

Pump Test

Claim of Beneficial Use – SARBANAND ENTERPRISES LLC



2133 DOUGLAS ST
 FOREST GROVE, OR 97116
 (503)-357-2222 (503)-657-8000
www.clearwaterpumpservices.com
clearwaterpump@hotmail.com

<u>Time</u>	<u>Flow Rate in Gallons Per Minute</u>	<u>Pumping Level</u>	<u>Discharge PSI</u>
10:15	37.5	63	40
10:45	27.2	63	40
11:15	28.3	63	40
11:45	27.2	63	40
12:15	27.2	63	40
12:45	28	63	40
1:15	27.7	63	40
1:45	27.2	63	40
2:15	27.5	63	40

Static Water Level: 58'

Well Depth: PUMP SET AT 100'

Pump Type: 2HP MOTOR

Pressure Tank: 2 WELL MATES MODEL WM 2SWB

Air Pressure:

Pressure Settings: 35-55

Water Filtration Equipment: AMIAD SCREEN FILTER

Date Completed: 10-21-2015

Job Site Address: 20700 SW MCKENZIE LN. MCMINNVILLE

Customer Name: SARBANAND

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Attachment G

Water Use Reports

Claim of Beneficial Use – SARBANAND ENTERPRISES LLC

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Water Use Report Based on Water Right



Permit: G 17963 *

SARBANAND ENTERPRISES LLC 786 RD 188 DELANO, CA 93215

Records per page: 10 [View All](#)

Acre-feet (AF) of Water Used

Water Year	Report ID	Facility	Acre-feet (AF) of Water Used												Total Water Used	Irrigated Acres
			Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
2023	67760	BELLEVUE WELL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.17	0.37	0.39	0.93	105.00	
2022	67760	BELLEVUE WELL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2021	67760	BELLEVUE WELL								0.12	0.21	0.33	0.35	0.03	1.05	105.00
2020	67760	BELLEVUE WELL								0.10	0.19	0.21	0.31	0.00	0.82	105.00
2019	67760	BELLEVUE WELL	0.00	0.00	0.00	0.00	0.00	0.00	0.14	0.17	0.21	0.19	0.00	0.71	105.00	
2018	67760	BELLEVUE WELL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

*The water year is named for the calendar year in which it ends. Example: the 2018 water year begins Oct. 1, 2017 and ends Sep. 30, 2018.

- The Water Resources Department makes reasonable efforts to screen the data for quality control; however, the Department cannot accept responsibility for errors, omissions, or accuracy of the information. Notification of any errors is appreciated. Send notifications to owrd.waterusereporting@water.oregon.gov or call 971-345-7489.
- Water use is reported by point of diversion (POD), rather than by water right.
- If a POD is shared with multiple water rights, it is not feasible to separate out the amount used under the water right being queried from water used by other rights using this same POD.
- Monthly amounts indicate:
 - For diverted rights, the total amount diverted during the month;
 - For storage rights, the amount generally stored in the reservoir/pond during the month, as represented by the volume of water impounded on approximately the same day each month.
- Water use amounts have all been converted to "acre-feet" (AF), regardless of the original measurement unit reported. One AF is the volume of water that will cover an acre of ground one foot deep = 325,850 gallons.
- Zeroes indicate that a report was received stating that no water was used during those months; if a year is not listed, no report of water use was received for that year.

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WATER RESOURCES
DEPARTMENT

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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Sarbanand Enterprises LLC
786 Rd 188 Delano CA 93215

Transaction Type: CBU

Fees Received: \$ 230

Cash

Check:

Check No. 09665

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: Nick Reece

(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.



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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Sacharand Enterprises LLC
706 Rd 188 Delano CA 93215

Transaction Type: CU

Fees Received: \$ 230

Cash Check: Check No. 09665
Name(s) on Check: Same as Above

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NOV 04 2024

Salem, OR

October 29, 2024

Gerry Clark
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1271

RE: Claim of Beneficial Use for Permit G-17963 (Application G-18524)

Gerry:

On behalf of Sarbanand Enterprises LLC, please find enclosed a Claim of Beneficial Use report for Permit G-17963.

Please do not hesitate to contact me at 541-753-0933 with questions about the enclosed COBU.

Sincerely,

A handwritten signature in blue ink that reads "Zach Pike-Urliacher".

Zach Pike-Urliacher
Water Resources Consultant

A handwritten signature in blue ink that reads "Robyn Cook".

Robyn Cook, RG, PG, CWRE
Principal Hydrologist

Enclosures:
Claim of Beneficial Use for Permit G-17963 and \$230 fee