CLAIM OF BENEFICIAL USE for Transfers Place of Use Only

OREGON WATER RESOURCES DEPARTMENT
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

SECTION 1

GENERAL INFORMATION

Type of Authorized Change

This Claim is being submitted for a transfer where the only authorized change was a change in place of use. **YES**
If additional changes were authorized, you will need to select a different form.

1. File Information

APPLICATION #
T-11819

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2. Property Owner (current owner information)

Applicant/Business Name	Phone No.	Additional Contact No.
V Box Land & Livestock Inc	**541-709-1560**	

Address			
PO Box 156			
City	State	Zip	E-Mail
Juntura	**OR**	**97911**	**bentzem@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		
Same as above		
Address		
City	State	Zip

4. Date of Site Inspection:

10/2/24

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

Name	Date	Association with the Project
Erika Fitzpatrick	**10/2/24**	**Secretary, V Box Land & Livestock, Inc**

6. County:

Malheur

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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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.

Seal and Signature

CWRE NAME		PHONE NO.	ADDITIONAL CONTACT NO.
Scott D Montgomery		**541-548-5833**	**541-420-0401**
ADDRESS **PO Box 767**			
CITY **Terrebonne**	STATE **OR**	ZIP **97760**	E-MAIL **scott@apeands.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
Linda A. Bentz	**Linda A. Bentz**	**President, V Box Land & Livestock, Inc**	10/17/24

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SECTION 3

EXTENT OF CHANGE COMPLETED

1. Claim Summary:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
38.7	**38.7**

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

WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER? (INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)
NA

2. Variations:

Was the use developed differently from what was authorized by the transfer final order? **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."*)

SECTION 4

CONDITIONS

All conditions contained in the transfer, 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 Change Was Completed *This Date Must Fall Between The "Issuance Date" And The "Completeness Date"
Issuance Date	**3/6/2015**	
Completeness Date From Order (C)	**10/1/2016**	**7/1/2016**

* 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)? **NO**

3. Measurement Conditions:

a. Does the transfer final order require the installation of a meter or approved measuring device? **YES**

b. Has a meter been installed? **YES**

c. Meter Information

POD/POA Name or #	Manufacturer	Serial #	Condition (working or not)	Current Meter Reading	Date Installed
#1	**McCrometer**	**12-10022-08**	**Running**	**049.369 AF**	**2012**

4. Other conditions required by the transfer final order:

a. 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 5

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Well log	**MALH 2317/54243**
Aerial imagry	**USDA/FSA 2016 imagery**
Site photos	**Time/location stamped photos of wells & POU**

SECTION 6

CLAIM OF BENEFICIAL USE MAP

A 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 polyester 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.

For the purpose of this Claim, the map must identify the developed new place of use. The existing point(s) of diversion or point(s) of appropriation are required to be included on the Claim map, based on the locations described in the transfer final order.

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 irrigation system & place of use were tied to approximate boundaries using a Topcon FC-6000 field controller with magnet field software in a stand alone mode. Geodectic Statewide Lambert coordinates were overlaid w/aerial imagery to confirm accuracy.

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
- ☐ 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
- ☒ Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.) ***Not required for this type of Claim of Beneficial Use**
- ☒ 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")
- ☒ Transfer application number
- ☒ North arrow
- ☒ Legend
- ☒ CWRE stamp and signature

MALH 54243

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

6/28/2015

WELL I.D. LABEL# L 115846
START CARD # 1026183
ORIGINAL LOG # MALHEUR 2317

(1) LAND OWNER

Owner Well I.D.
First Name MIKE Last Name BENTZ
Company V BOX LAND AND LIVESTOCK
Address PO BOX 156
City JUNTURA State OR Zip 97911

(2) TYPE OF WORK

☐ New Well ☐ Deepening ☐ Conversion
☒ Alteration (complete 2a & 10) ☐ Abandonment(complete 5a)

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:	12	☐	0	14	.250	◉	○	☐	☐

	Material	From	To	Amt	sacks/lbs
Seal:					

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other

(4) PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/ Commericial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)
Depth of Completed Well 400.00 ft.

BORE HOLE

Dia	From	To
18	0	132
12	132	400

SEAL

Material	From	To	Amt	sacks/lbs
Bentonite Chips	0	132	167	S
		Calculated	165	
		Calculated		

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other POUR
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: ☐ Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
◉	○	12	☒	2	132	.250	◉	○	☒	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)
Temp casing ☐ Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type Material

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour

○ Pump ○ Bailer ◉ Air ○ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
500		400	1

Temperature °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS amount

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County MALHEUR Twp 24.00 S N/S Range 39.00 E E/W WM
Sec 7 SE 1/4 of the NW 1/4 Tax Lot 300
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
◉ Street address of well ○ Nearest address
20 MILES SOUTH OF JUNTURA ON GRANITE CREEK RESERVOIR RD

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration	5/29/2015		☐	246
Completed Well	5/31/2015		☐	246

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)

(11) WELL LOG

Ground Elevation

Material	From	To
tan sandstone	0	132
Existing hole	132	400

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SEP 24 2015
SALEM, OR

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Date Started 5/1/2015 Completed 5/31/2015

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number Date
Signed

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1943 Date 6/28/2015
Signed TRINITY L VILLINES (E-filed)
Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

ORIGINAL
File Original and Duplicate with the STATE ENGINEER, SALEM, OREGON

RECEIVED
DEC 19 1957
STATE ENGINEER
SALEM, OREGON

WATER WELL REPORT
STATE OF OREGON

Malh 2317

State Well No. 24/39 -19 L 11

State Permit No. G 324

(1) OWNER:
Name Budd Rogers
Address Riverside Oregon

(2) LOCATION OF WELL:
County Malheur Owner's number, if any—
NW¼ ¼ Section 7 T. 24 R. 39E W.M.
Bearing and distance from section or subdivision corner
N 80° 30' E 2540 feet
from NE cor of Sec 7
SE NW Sec 7 Twp 24 R 39 E.

(3) TYPE OF WORK (check):
Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐
If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):
Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

(5) TYPE OF WELL:
Rotary ☐ Driven ☐
Cable ☒ Jetted ☐
Dug ☐ Bored ☐

(6) CASING INSTALLED:
Threaded ☐ Welded ☐
12" Diam. from -1 ft. to 20' ft. Gage 3/8"
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

(7) PERFORATIONS:
Perforated? ☐ Yes ☒ No
Type of perforator used
SIZE of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(8) 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.

(9) CONSTRUCTION:
Was well gravel packed? ☐ Yes ☒ No Size of gravel:
Gravel placed from ft. to ft.
Was a surface seal provided? ☐ Yes ☐ No To what depth? ft.
Material used in seal—
Did any strata contain unusable water? ☐ Yes ☐ No
Type of water? Depth of strata
Method of sealing strata off

(10) WATER LEVELS:
Static level 245' ft. below land surface Date 7-8-56
Artesian pressure lbs. per square inch Date

Accepted by:
[Signed] Budd Rogers (Owner) Date Dec 16, 1957

(11) WELL TESTS:
Drawdown is amount water level is lowered below static level
Was a pump test made? ☐ Yes ☒ No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
" " " "
" " " "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m. Date
Temperature of water Was a chemical analysis made? ☐ Yes ☐ No

(12) WELL LOG:
Diameter of well 12" inches.
Depth drilled ft. Depth of completed well ft.
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Top Soil	0	4'
Sand Rock	4'	67'
Yellow Clay	67'	110'
Sand Strip	110'	115'
Yellow Sandstone	115'	245'
Sandstone with water	245	295'

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Work started 6-21 1956 Completed Stopped 7-8 1956

(13) PUMP:
Manufacturer's Name
Type: H.P.

Well Driller's Statement:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Holloway Drilling Co. (Person, firm, or corporation) (Type or print)
Address Ontario Oregon
Driller's well number
[Signed] Max Holloway (Well Driller)
License No. 16 Date Aug 28, 1957

(USE ADDITIONAL SHEETS IF NECESSARY)

Oregon Water Resources Department
Groundwater Information System

Groundwater Site: MALH 2317

Main Help
Return Contact Us

Site Identification (Click to Collapse...)

GW LogID: MALH 2317 Well Log Database
GW Well Tag Number: 115846
Tag Verified on Well: No
Site Type: WELL
Primary Use: IRRIGATION
Unused Status:
Site Source Organization:
Site Source OWRD:
Established By: zwartmj
Established Date: 08/08/2014
Bonded Company: HOLLOWAY DRILLING CO.
Stage: COMPLETE

Location (Click to Collapse...)

Latitude/Longitude

Latitude: 43.50066391 Horiz. Error: 100.00 ft.
Longitude: -117.98455284 Datum: WGS1984
Lat/Long Source: WR APPL MAP

Location

TRSQQ: WM 24.00S39.00E7NESW
Tax Map: 24S39E00300
Taxlot: 300
24 Quad: SHUMWAY RESERVOIR
Basin: 10 - Malheur
County: Malheur
WM District: 10
WM Region: E
LSD Elev: 4508.00 Accy: 10.00 Datum: NGVD1929
Elev Source: 7.5-MINUTE MAP
Groundwater Mapping Tool

Water Rights (Click to Collapse...)

Water Right PODs

POD	WRIS Details	Application	Permit	Cert	Transfers	Claim	supplemental	priority_date	Season of Use	max_rate_cfs	rate_cfs	rate_cfs_est	TRSQQ
POD 1 - A WELL > GRANITE CREEK BASIN	WRIS	G 303	G 324		T 11819			4/20/1956	3/1 ~ 10/31	0.480	0.480		WM24.00S39.00E7SENW
POD 1 - A WELL > GRANITE CREEK BASIN	WRIS	G 303	G 324	83865	T 11819			4/20/1956	3/1 ~ 10/31	0.800	0.800		WM24.00S39.00E7SENW
POD 1 - A WELL > GRANITE CREEK BASIN	WRIS	G 17865	G 18201					5/22/2014	3/1 ~ 10/31	2.760	0.920	•	WM24.00S39.00E7NESW

Well Construction History (Click to Collapse...)

Well Construction History

Well Log Id	Well Log	Work Type	Startcard	Well Tag	Owner Name	First Water	Max Case. Diam.	Max Case. Depth.	Max Seal Depth.	Max Depth	Completed Depth	Complete Date
MALH 2317	Log	NEW			BUDD ROGERS	245.00	12	20.00		295.00	295.00	7/8/1956
MALH 54243	Log	ALTERATION		115846	MIKE BENTZ		12			400.00	400.00	5/31/2015

Well Log	Aquifer	Aq at Max Depth	System Aquifer	Regional USGS Aquifer	Local USGS Aquifer
MALH 2317	Quaternary-Late Tertiary Vol & Volcaniclastic Aq	Quaternary-Late Tertiary Vol & Volcaniclastic Aq	Quaternary-Late Tertiary Volcanic and Volcaniclastic Rock Aquifers		
MALH 54243	Quaternary-Late Tertiary Vol & Volcaniclastic Aq	Quaternary-Late Tertiary Vol & Volcaniclastic Aq	Quaternary-Late Tertiary Volcanic and Volcaniclastic Rock Aquifers		

Well Test

No data matches search criteria.

Lithology (Click to Expand...)

Well Construction (Click to Expand...)

Measured Water Level (Click to Collapse...)

Records/Page 20 Find

Measured Water Level

Date	Time	Water Level (BLSD)	WL Elev (ft AMSL)	Organization	OWRD	Method	Status	MP Height
4/10/2024				PUMP INSTALLER	PERMIT CONDITION PROGRAM	NOT MEASURED	UNKNOWN	
4/5/2022		256.00	4252.00	PUMP INSTALLER	PERMIT CONDITION PROGRAM	OTHER	STATIC	1.00
3/17/2021		252.00	4256.00	PUMP INSTALLER	PERMIT CONDITION PROGRAM	OTHER	STATIC	1.00
3/10/2020		253.00	4255.00	PUMP INSTALLER	PERMIT CONDITION PROGRAM	OTHER	STATIC	1.00
3/27/2019		251.00	4257.00	PUMP INSTALLER	PERMIT CONDITION PROGRAM	OTHER	STATIC	1.00
3/30/2018		248.00	4260.00	PUMP INSTALLER	PERMIT CONDITION PROGRAM	OTHER	STATIC	1.00
3/29/2017		247.00	4261.00	PUMP INSTALLER	PERMIT CONDITION PROGRAM	OTHER	STATIC	1.00
5/31/2015		246.00	4262.00	DRILLER	WELL LOG	REPORTED	UNKNOWN	
7/8/1956		245.00	4263.00	DRILLER	WELL LOG	REPORTED	UNKNOWN	

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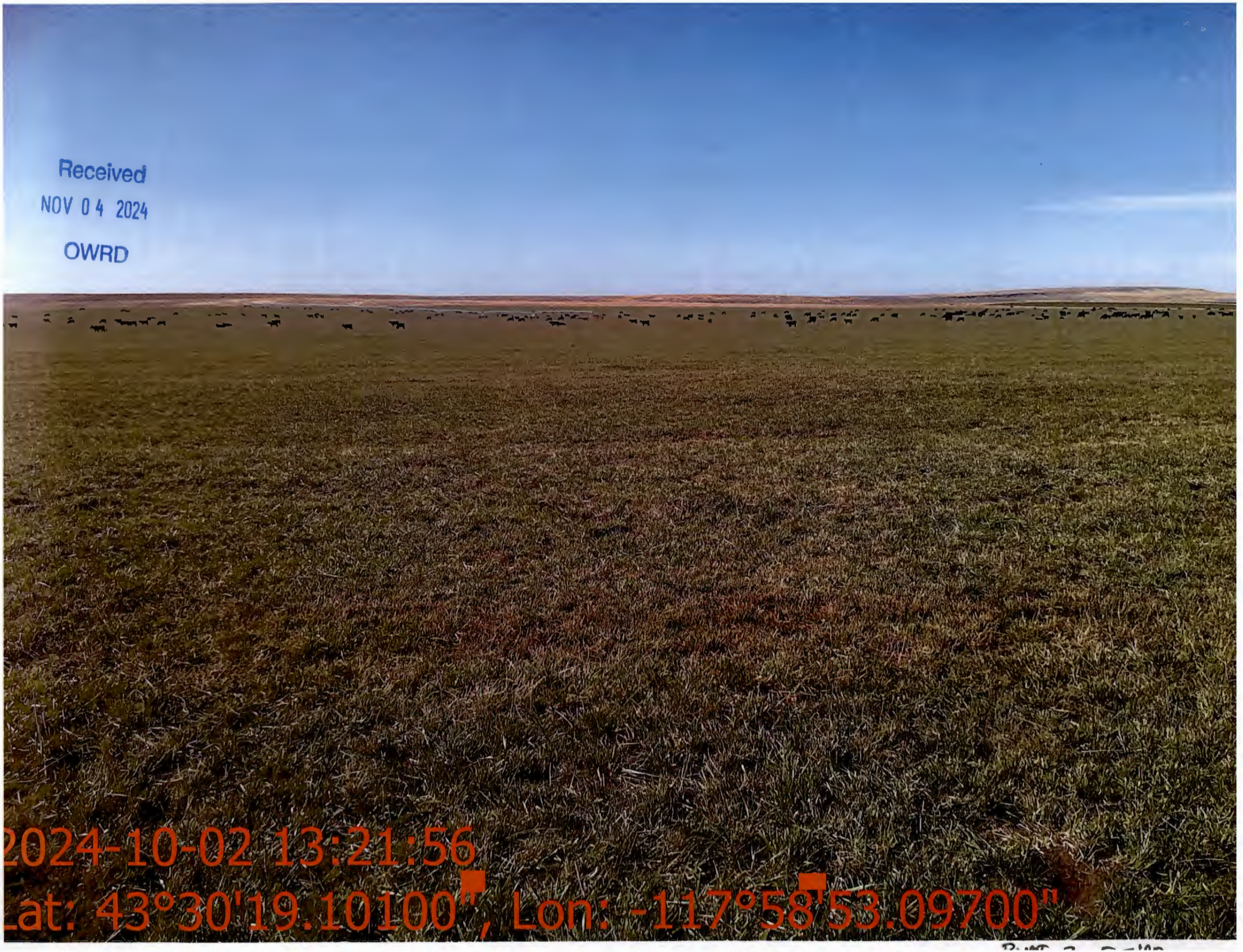
Available Data (Click to Expand...)

Other Documents/Images (Click to Expand...)

View Hydrograph


2024-10-02 12:41:32
Lat: 43°30'11.13307", Lon: -117°59'04.46129"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2024-10-02 13:21:56
Lat: 43°30'19.10100", Lon: -117°58'53.09700"


NOV 04 2024
2024-10-02 12:29:21
Lat: 43°30'10.38300", Lon: -117°59'04.31700"

T-11819

T24S, R39E, W.M.

0 0.25 0.5 1 1.5 Miles

Imagery shown from 2016 USDA/FSA data downloaded from NRCS Gateway website