Revised 7/1/2021.

# **CLAIM OF BENEFICIAL USE** for Transfer New or Additional **POA Only**

O R E G O N 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.

WATER RESOURCES DEPARTMENT

# **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 point(s) of appropriation or additional point(s) of appropriation, or a combination of both.

If additional changes were authorized, you will need to select a different form.

**1.** File Information

**APPLICATION #** T-13487

**2a.** Property Owner (current owner information)

# TL 06 1W 22 2500 convey and use,

# TL 06 1W 23 800 divert, convey and use

APPLICANT/BUSINESS NAME Blue Line Farms, Inc.		PHONE NO	).	Additional Contact No.
ADDRESS 4741 Brush Creek Drive	NE	I ,	····	L
Сіту	STATE	ZIP	E-MAIL	
Silverton	OR	97381		

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YES

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#### 2b. Property Owner (current owner information)

# TL 06 1W 23 700 use

APPLICANT/BUSINESS NAME Sharon Burnett and Lavena M Parks		PHONE NO	D. ADDITIONAL CONTACT NO.
Address 4019 Bigelow Dr			
Сіту	STATE	ZIP	E-MAIL
Carson City	NV	89701	

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. <u>Each</u> 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 RECO	ORD		
Blue Line Farms, Inc. c,	o Robert Dettwyler and	Karl H. Dettwyler	
Address			
4741 Brush Creek Drive	e NE		
Сітү	STATE	ZIP	· · · · · · · · · · · · · · · · · · ·
Silverton	OR	97381	

#### 4. Date of Site Inspection:

June 27, 2024

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

NAME	DATE	Association with the Project
Karl Dettwyler	June 27, 2024	Owner / operator

#### 6. County

Marion

**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			
Сіту	STATE	Zip	

Add additional tables for owners of record as needed

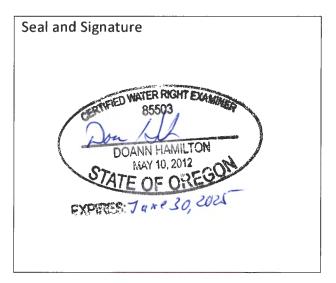
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### **SECTION 2**

#### **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.



CWRE NAME		PHONE NO	).	ADDITIONAL CONTACT NO.
Doann Hamilton		(503) 632	2-5016	(503) 349-6946
Address				
18487 S. Valley Vista R	oad			
Сіту	STATE	ZIP	E-MAIL	
Mulino	OR	97042	phgdmh	@gmail.com

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#### **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
Kal Hattingto	Karl H. Dettwyler	Blue Line Forms Inc President	10-28-2024
Robert Dettuger	Robert DetturyLer	Director	10-28-24

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# **SECTION 3**

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# CLAIM DESCRIPTION

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Note: The Claim <u>only</u> needs to describe the new or additional point(s) of appropriation. This Claim does not need to provide information for the original point(s) of appropriation unless the original point of appropriation is either a new or additional point of appropriation on another right involved in this transfer.

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)
POA Pond Sump	NA	NA	Sump, tributary to Abiqua Creek

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
See System	description	Part B for s	ump			

**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.

See System description Part B for sump

#### 2. Variations:

# Was the use developed differently from what was authorized by the transfer final order, or extension final?

If yes, describe below.

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

None			
		_	

#### 3. Claim Summary:

NEW OR ADDITIONAL POA	MAXIMUM RATE	CALCULATED THEORETICAL	AMOUNT OF WATER MEASURED
NAME OR #	AUTHORIZED	RATE BASED ON SYSTEM	
POA Pond Sump	0.74 cfs	0.78 cfs	0.78 cfs

# **SECTION 4**

#### SYSTEM DESCRIPTION

Are there multiple new or additional Points of Appropriation (POA)?

NO

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

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

POA Pond Sump

# 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.

. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE
Berkley	B2.5 ZPL	7837059	Centrifugal	5 inch pipe reduced to	
				3 inch in to pump	

#### 2. Motor Information

MANUFACTURER	HORSEPOWER		
Marathon Electric	25 Hp		

#### 3. Theoretical Pump Capacity

Horsepower	R 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)
25 Hp	80 psi	10 feet	0 feet	0.78 cfs

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#### 4. Provide pump calculations:

# Q Pump = $(25 \text{ Hp}) \times (6.61 \text{ ft}^4/\text{sec Hp})$ = 0.78 cfs (10 ft lift + 203.2 ft pressure head)

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)
21,787,889 gallons	21,789,289 gallons	4 mins	0.78 cfs (350 gpm)

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

#### **B. Groundwater Source Information (Well and Sump)**

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

YES

If "NO", items 4 through 6 relating to this section may be deleted.

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

4. If the appropriation involves a SUMP, provide the following information for each SUMP:

LENGTH	WIDTH	AVERAGE DIAMETER	MAXIMUM DEPTH	SURFACE AREA (IN ACRES)	VOLUME IN CUBIC FEET OR ACRE FEET
1,260 feet	300 feet	NA	40 feet	10.7 acres	171.2 AF

5. If the sump is curbed constructed with watertight surface curbing, describe the curbing:

CURBING MATERIAL	IF CONCRETE,
(CONCRETE, CONCRETE TILES, OR STEEL)	PROVIDE THE THICKNESS OF THE WALL
NA	

6. Provide sump volume calculations:

Volume = (surface area in acres) x (maximum depth) x 0.4

Volume = (10.7 Acres) x ( 40 feet) x 0.4 = 171.2 AF

#### C. Additional notes or comments related to the system:

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**SECTION 5** 

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#### CONDITIONS

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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:

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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 NEW AND/OR ADDITIONAL POA(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	October 24, 2023	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2025	June 27, 2024

\* MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

<ol> <li>Is there an extension final order(s)?</li> <li>If "NO", you may delete the following table.</li> </ol>	NO
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? If "NO", items b through f relating to this section may be deleted.	NO
4. Recording and reporting conditions	
a. Is the water user required to report the water use to the Department?	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?	NO
b. Was submittal of a ground water monitoring plan required?	NO
c. Other conditions?	NO
If "YES" to any of the above, identify the condition and describe the water user's act comply with the condition(s):	tions to

None

# **SECTION 6**

# ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial Use Map	Claim of Beneficial Use Map
BLM Cadastral Map	BLM Cadastral Map T. 6S. R. 1W. showing DLC and Government Lot locations

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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 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 identifying the location of the place of use does not require a new survey. The location of the place of use identified on the Claim map should be based on the original right of record at the time the transfer final order was issued. In transfers approved for <u>additional</u> points of appropriation, the original points must be identified the map 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.

The COBU map was prepared using tax assessor's maps 6 1W 22, 23, 26B, and 27, overlain by a 2014 aerial photo titled USDA-FSA-APFO NAIP County Mosaic and obtained on line from the Natural Resources Conservation Service, Image Metadata: http://datagateway.nrcs.usda.gov/Catalog/ProductDescription/NAIPM.html

# **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.)

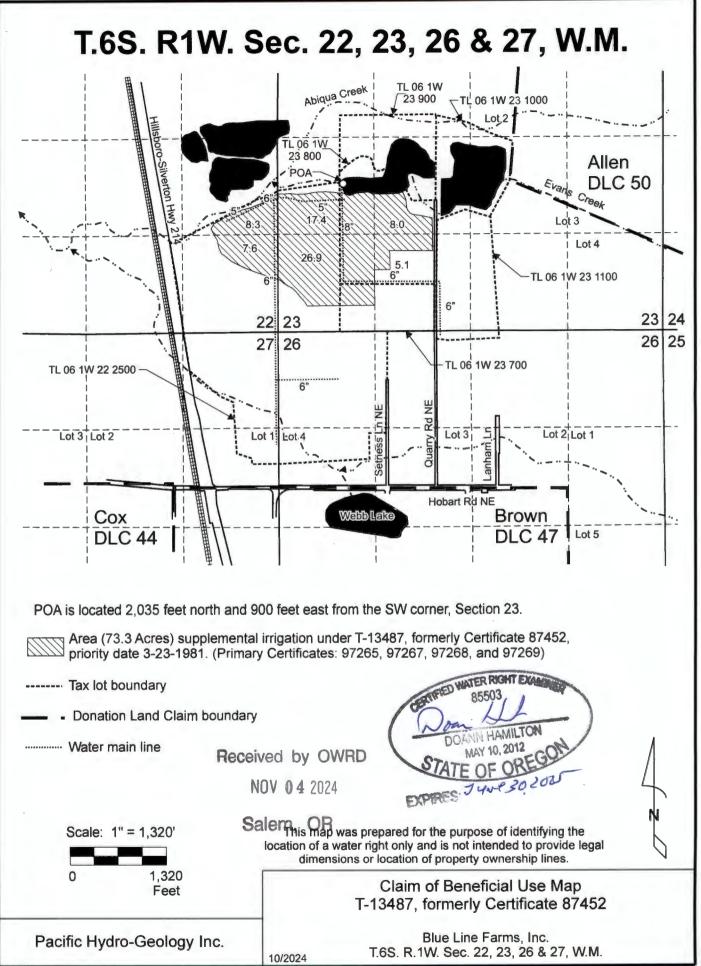
$\boxtimes$	Map on polyester film						
$\boxtimes$	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)						
$\square$	Township, Range, Section, Donation Land Claims, and Government Lots						
$\boxtimes$	If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters						
	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, ditche for this type of Claim of Beneficial Use	es, etc.) <b>*Not required</b>					
$\boxtimes$	Point(s) of diversion or appropriation (illustrated and coordinates)	Received by OWRD					
$\boxtimes$	Tax lot boundaries and numbers	NOV 04 2024					
	Source illustrated if surface water	NUA 04 2024					

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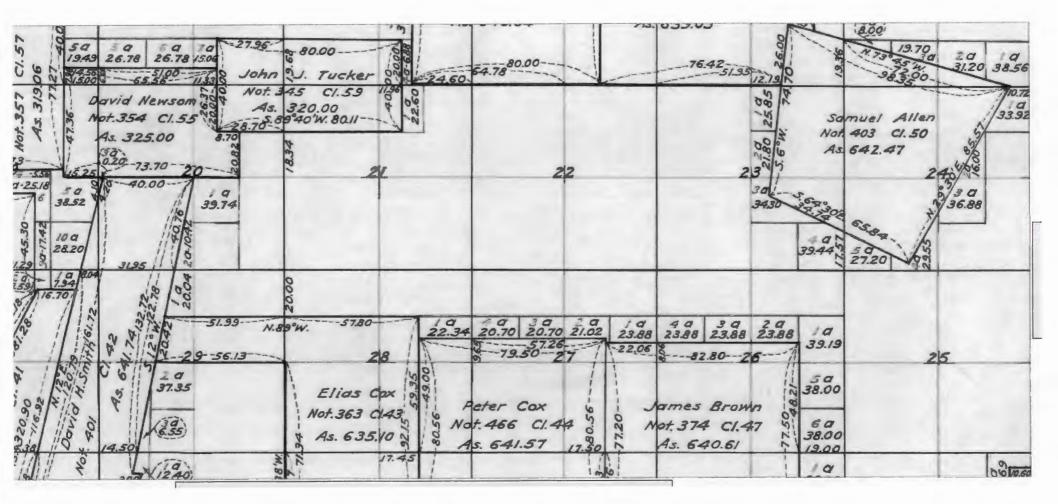
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- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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BlueLineT\_13487COBUMap.cdr



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