## **CLAIM OF BENEFICIAL USE** for Surface Water Permits claiming more than 0.1 cfs



OREGON 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 permits with priority dates of July 9, 1987, or later.

#### A separate form shall be completed for each permit.

In cases where a permit has been amended through the permit amendment process, a separate claim for the permit amendment is not required. Incorporate the permit amendment into the claim for the permit.

This form is subject to revision. Begin each new claim by checking for a new version of this form at: https://www.oregon.gov/OWRD/Forms/Pages/default.aspx

Go to "Resources for Water Right Examiners (CWRE)" Page https://www.oregon.gov/OWRD/programs/WaterRights/COBU/Pages/default.aspx The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. Every item must have a response. If any requested information does not apply to the claim, insert "NA." Do not delete or alter any section of this form unless directed by the form. The Department may require the submittal of additional information from any water user or authorized agent.

"Section 8" of this form is intended to aid in the completion of this form and should not be submitted.

If you have questions regarding the completion of this form, please call 503-979-9103.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see

https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx

RECEIVED

#### **SECTION 1**

#### **GENERAL INFORMATION**

NOV 15 2024

OWRD

#### 1. File Information:

APPLICATION #	PERMIT#	PERMIT AMENDMENT #
S-86311	S-54236	T-

2. Property Owner (current owner in	formation):
-------------------------------------	-------------

APPLICANT/BUSINESS NAME		PHONE NO	. ADDITIONAL CONTACT NO.
Daniel B. Loshbaugh		541-241-	4726
ADDRESS	18.00		
PO Box 343			
Сіту	STATE	ZIP	E-MAIL
Sixes	OR	97476	loshbogs@msn.com

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. <u>Each</u> permit holder of record must sign this form.

3. Permit or holder of record (this may, or may not, be the current property owner):

PERMIT HOLDER OF RECORD		
SAME		
ADDRESS		
Сіту	STATE	ZIP

ADDITIONAL PERMIT HOLDER	OF RECORD	
ADDRESS		
Сіту	STATE	ZIP

#### 4. Date of Site Inspection:

6-7-2024

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

Name	DATE	Association with the Project
Daniel B. Loshbaugh	6-7-2024	Owner/Permit Holder of Record
Daniel B. Loshbaugh	0-7-2024	Owner/Permit Holder of Reco

#### 6. County:

Curry

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)):

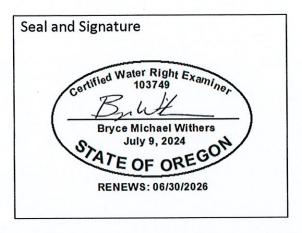
OWNER OF RECORD			
N/A			RECEIVED
ADDRESS			NOV 1 5 2024
Сіту	STATE	ZIP	OWRD

Add additional tables for owners of record as needed

# 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 Bryce Michael Withers		PHONE NO 541-408-		Additional Contact No.  John Short 541-389-2837	
ADDRESS PO Box 1830					
CITY BEND	STATE OR	ZIP 97709	E-MAIL brycewrs@	Pgmail.com	

## Permit Holder of Record Signature or Acknowledgement

**<u>Each</u>** 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
Doubloshow	Daniel B. Loshbaugh	Owner/Permit Holder	11-10-24

RECEIVED NOV 1 5 2024 OWRD

#### CLAIM DESCRIPTION

1. Point of diversion name or number:

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

2. Point of diversion source and tributary:

POD	Source	TRIBUTARY
NAME OR NUMBER		
POD	RESERVOIR	PRICE CREEK

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

POD NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME USED (CFS, GPM, OR AF)
POD	CRANBERRY USE	CRANBERRIES	MAR 1 – OCT 31	8.0 AF
Total Quantity of	Water Used	·	•	8.0 AF

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

WATER IS PUMPED FROM THE POD THROUGH A MAINLINE TO SPRINKLERS AND FLOODED ONTO BOGS. THE 3/18/2024 EXTENSION APPLICATION STATED THAT 4.0 ACRES OF CRANBERRY BOGS WERE DEVELOPED UNDER THIS PERMIT AND 72 AF (4 AF/YR.), THE PERMIT HOLDER CLARIFIED THAT THE FULL VOLUME OF THE RESERVOIR (8.0 AF PERMITTED) WAS USED BENEFICIALLY ON THE 4.0 ACRES OF BOGS, NOT THAT 4.0 ACRE-FEET OF WATER PER YEAR WAS USED BEFENFICIALLY AS SHOWN IN THE EXTENSION FINAL ORDER.

Reminder: The map associated with this claim must identify the location of the point(s) of diversion, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

#### 5. Variations:

Was the use developed differently from what was authorized by the permit,		
or permit amendment final order? If yes, describe below.	YES	NO
(e.g. "The permit allowed three points of diversion. The water user only developed one of the points."	or "The p	ermit
allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")		

RECEIVED

NOV 15 2024

6. Claim Summary:

POD NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
POD	N/A	1.54 CFS	N/A	CRANBERRY USE	4.0	4.0

RECEIVED NOV 15 2024 OWRD

#### SYSTEM DESCRIPTION

Are there multiple PODs?	YES	NO
If "YES" you will need to copy and complete a separate Section 4 for each POD.		
POD Name or Number this section describes (only needed if there is more than one):		
POD		

#### A. Place of Use

#### 1. Is the right for municipal use?

YES NO

If "YES" the table below may be deleted.

TWP	RNG	Mer	SEC	QQ	GLOT	DL C	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
<b>32S</b>	15W	W.M.	4	NWNE			CRANBERRY USE	N/A	N/A
Total A	cres Irri	gated						N/A	N/A

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (GLot), Quarter Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, GLot, and QQ.

## **B. Diversion and Delivery System Information**

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport <u>and</u> apply the water from the point of diversion to the place of use.

1. Is a pump used?

YES NO

If "NO" items 2 through item 6 may be deleted.

2. Pump Information:

MANUFACTURER	Model	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
UNKNOWN			CENTRIFUGAL		

#### 3. Motor Information:

RECEIVED NOV 15 2024

4. Theoretical Pump Capacity:

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
25	40	2'	4'	1.54 CFS

5. Provide pump calculations:

SEE ATTACHED OWRD PUMP CALCULATIONS.

6. Measured Pump Capacity (using meter if meter was present and system was operating):

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
		OBSERVED	(IN CFS)
N/A			

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

#### 7. Is the distribution system piped?

YES NO

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

#### 8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6"	350'	PVC	BURIED

#### 9. Lateral or Handline Information:

LATERAL OR HANDLINE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
SIZE			
	A M. Charles S. Charle		

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
9/64"	40	3.4 GPM	85	85	0.64 CFS

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

11. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
------	---------------	----------------------	--------------------------	------------------------	-------------------------------

12. Drip Tape Information:

DRIPPER	GPM PER	TOTAL	MAXIMUM	TOTAL TAPE	Additional Information
SPACING IN INCHES	100 FEET	LENGTH OF TAPE	LENGTH OF TAPE USED	OUTPUT (CFS)	

Revised 7/1/2021

COBU Form Large Surface Water - Page 7 of 11

WR

NOV 15 2024

RECEIVED

#### 13. Pivot Information:

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

#### C. Storage

1. Does the distribution system include in-system storage (e.g. storage tank,

bulge in system / reservoir)?

YES NO

If "NO", item 2 and 3 relating to this section may be deleted.

If "YES" is it a:

Storage Tank

YES

Bulge in System / Reservoir

NO YES NO

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

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE	
(CORRESPOND TO MAP)		FEET)	
RESERVOIR	N/A - EXCAVATED	11.2 AF	

#### D. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the system involve a gravity flow pipe?

YES NO

NO

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

## E. Gravity Flow Canal or Ditch

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system? YES

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

F.	Additional notes or comments related to the system:

RECEIVED NOV 15 2024 OWRD

#### **CONDITIONS**

All conditions contained in the permit, permit amendment, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

#### 1. Time Limits:

Permits and any extension final orders contain any or all of the following dates: the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use was to be completed. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or permit extension of time:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	12-1-2005		
BEGIN CONSTRUCTION (A)			
COMPLETE CONSTRUCTION (B)			
COMPLETE APPLICATION OF WATER (C)	10-1-2015	October 31, 2005	Complete application of water to beneficial use.

<sup>\*</sup> MUST BE WITHIN PERIOD BETWEEN PERMIT OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETELY APPLY WATER

<ol><li>Is there an extension final order(s</li></ol>	r(s)?	ord	final	extension	an	nere	Is	2.
---	-------	-----	-------	-----------	----	------	----	----

YES NO

a. Did the Extension Final Order require the submittal of Progress Reports?

YES NO

If "NO", item b relating to this section may be deleted.

#### 3. Measurement Conditions:

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device?

YES

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. Fish Screening:

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

YES NO

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

#### 6. By-pass Devices:

a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion?

YES NO

If "NO", items b and c relating to this section may be deleted.

Revised 7/1/2021 COBU Form Large Surface Water – Page 9 of 11

WR

RECEIVED NOV 15 2024

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

a. Was the water user required to restore the riparian area if it was disturbed?

b. Was a fishway required?

c. Was submittal of a water management and conservation plan required?

d. Other conditions?

YES NO

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):

The riparian area was not disturbed.

### **SECTION 6**

#### **ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION		
CBU MAP	CLAIM OF BENEFICIAL USE MAP		
PUMP CALCS	OWRD PUMP CAPACITY CALCULATIONS		

RECEIVED

NOV 15 2024

OWAD

#### **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.

#### **ON-SITE DIRECT MEASUREMENT AND NAIP IMAGERY.**

#### **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	
	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the assessor map)	county
$\boxtimes$	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	
N/A	Locations of fish screens and/or fish by-pass devices in relationship to point of diver	rsion
N/A	Locations of meters and/or measuring devices in relationship to point of diversion of appropriation	or
$\boxtimes$	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)	
$\boxtimes$	Point(s) of diversion or appropriation (illustrated and coordinates)	
$\boxtimes$	Tax lot boundaries and numbers	
$\boxtimes$	Source illustrated if surface water	
$\boxtimes$	Disclaimer ("This map is not intended to provide legal dimensions or locations of provide legal dimensions or locations or	operty
$\boxtimes$	Application and permit number or transfer number	
$\boxtimes$	North arrow	RECEIVED
$\boxtimes$	Legend	NOV 15 2024
$\boxtimes$	CWRE stamp and signature	NOV 19 2024
		OWRD

		ulation She	eet	<b>LOSHBAUGH</b>		
using Departm	ent designe	ed formula:				
(hp)(efficiency	) / (lift + psi	head) = capad	city in cfs			
Efficiency:						
Centrifugal = 6	5.61				-	
Turbine = 7.04						
Data Entry (fil	ll in underli	ned blanks)				
HP=	25					
Efficiency =	6.61					
Lift =	6					
PSI =	40					
Results Calcu	ılated					
(hp)(efficiency)	) =	165.25				
Head based on psi =		101.6				
Total dynamic head =		107.6				
(head + lift)						
Pump Capacit	ty =	1.54	cubic	feet per second		

RECEIVED NOV 1 5 2024 OWRD