

CLAIM OF BENEFICIAL USE for Transfer New or Additional POA Only



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.

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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.

YES

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

1. File Information

APPLICATION # T-13827

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Coastal Forest Products LLC		PHONE NO.	ADDITIONAL CONTACT NO.	
ADDRESS 6242 Portland Rd NE				
CITY Salem	STATE OR	ZIP 97305	E-MAIL	

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 Coastal Forest Products LLC				
ADDRESS 6242 Portland Rd NE				
CITY Salem	STATE OR	ZIP 97305		

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
Noah Jones	June 27, 2024	General Manager

6. County

Marion County

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)):

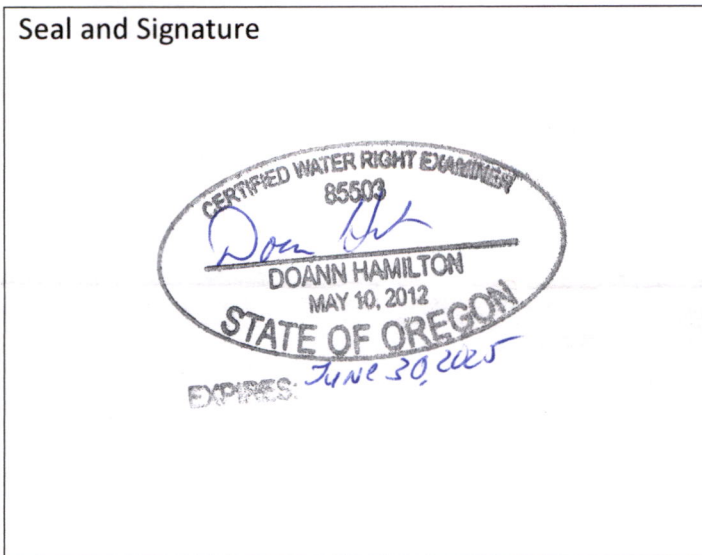
OWNER OF RECORD		
NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

**SECTION 2
SIGNATURES**

CWRE Statement, Seal and Signature

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



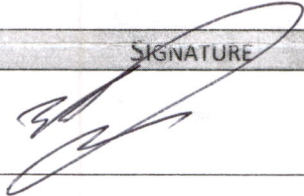
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CWRE NAME Doann Hamilton		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946
ADDRESS 18487 S. Valley Vista Road			
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.com

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
	Noah Jones	GM	17 Oct 2024

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SECTION 3

CLAIM DESCRIPTION

Note: The Claim only 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)
Well 3	MARI 56805	L-55072	Tributary of Labish Ditch

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

2. Variations:

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

YES

If yes, describe below.

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

1. The new authorized Well 3 (MARI 56805) was not used on 1.8 acres.

3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
Well 3	0.39 cfs	0.44 cfs	Not measured

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):

Well 3

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A. POA System Information

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

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Grundfos	230S20-6	Unknown	Submersible	6 inch	4 inch

2. Motor Information

MANUFACTURER	HORSEPOWER
Hitachi	20 Hp

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
20 Hp	78 psi	119 feet (from air test recorded on well log)	0 feet	0.44 cfs

4. Provide pump calculations:

$$Q \text{ Pump} = \frac{(20 \text{ Hp}) \times (7.04 \text{ ft}^4/\text{sec Hp})}{(119 \text{ ft lift} + 198.2 \text{ ft pressure head})} = 0.44 \text{ cfs}$$

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)
Not measured			

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)? NO

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

C. Additional notes or comments related to the system:

The place of use is divided in east and west fields. The east field is leased and metered for billing purpose to the leaser. The west field is for Coastal Forest Products field testing and is not metered. Water goes through two 81-gallon pressure tanks. The water also supplies non-metered, exempt commercial use for Coastal Forest Products shop and exempt commercial use to the property to the north which is metered for billing purpose to leaser.

**SECTION 5
CONDITIONS**

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

1. Time Limits:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE 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 4, 2022	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2024	June 2024

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* 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
If "NO", you may delete the following table.

3. Measurement Conditions:
 a. Does the transfer final order, or any extension final order require the installation of a meter or other approved measuring device? YES
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? 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? YES

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

c) Condition:
 Water shall be acquired from the same aquifer (water source) as the original point of appropriation.

Compliance:
 Certificate 33475 Well 2 (MARI 33475) develops within the depth intervals of 35 to 65 feet with sand and gravel.

Well 3 (MARI 56805) is cased to 118 feet and develops water in clay and gravel.

It appears this well obtains water from the alluvial aquifer; therefore, this condition has been met.

**SECTION 6
 ATTACHMENTS**

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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 for former Certificate 33475
State Water Well Report – MARI 56805	Well log and driller's notes for MARI 56805 – Well 3
BLM Cadastral Map	BLM Cadastral Map T. 6S. R. 2W. showing DLC and Government Lot locations

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 additional 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 06 2W 19C, 30, 31A and 31D, 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.)

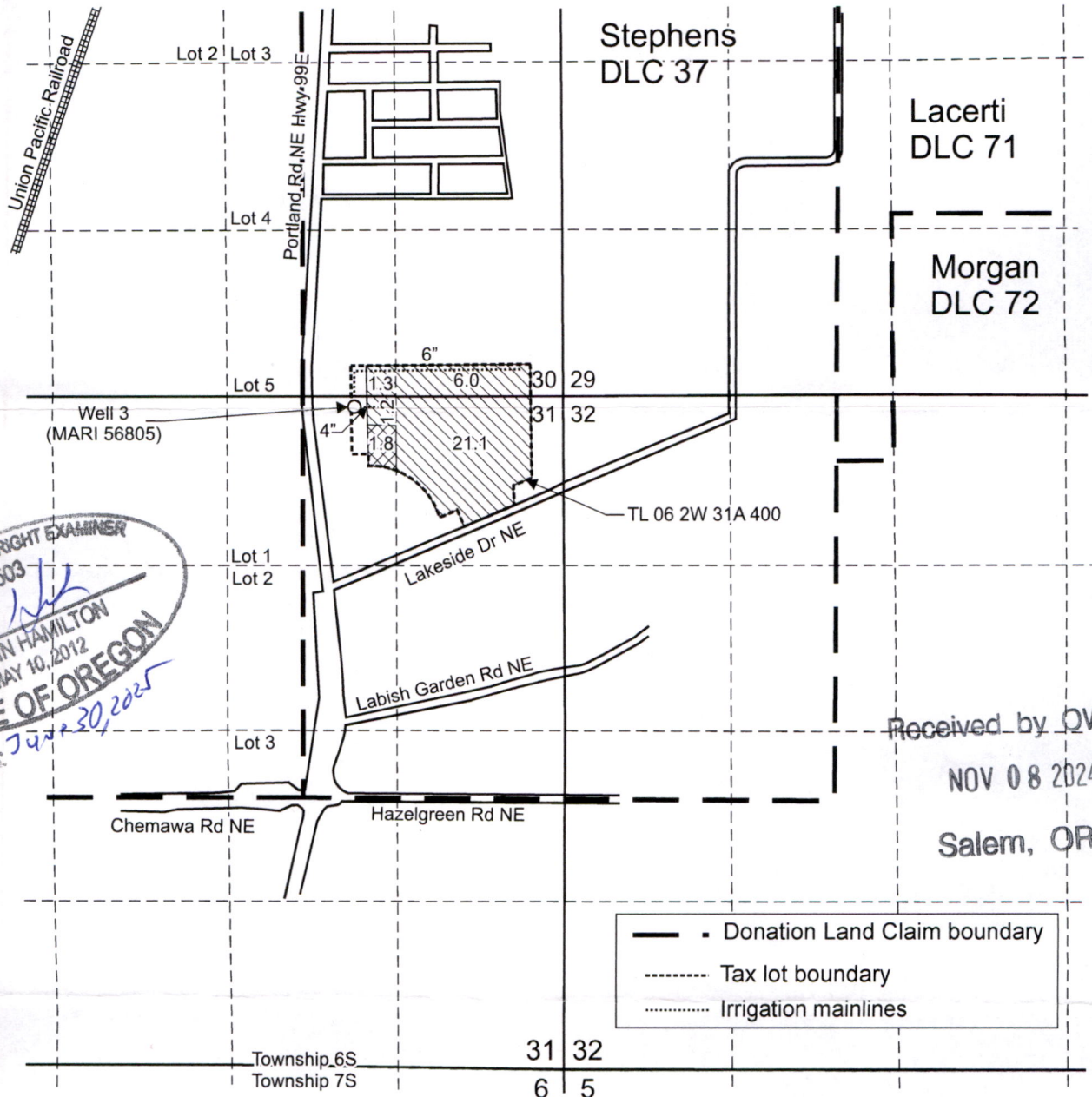
- Map on polyester film
- Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- Township, Range, Section, Donation Land Claims, and Government Lots
- If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- 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.) ***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

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Salem, OR

- 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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T.6S. R.2W. Sec. 29, 30 & 31, W.M.



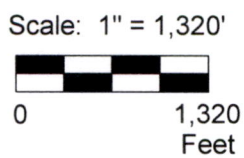
CERTIFIED WATER RIGHT EXAMINER
 85503
Doann Hamilton
DOANN HAMILTON
 MAY 10, 2012
STATE OF OREGON
 EXPIRES: 7/31/2025

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- Donation Land Claim boundary
- Tax lot boundary
- · - · - Irrigation mainlines

Well 3 (MARI 56805) is located 80 feet south and 1,655 feet west from the NE corner, Section 31.

- Area (29.6 Acres) irrigated under T-13827, formerly Certificate 33475, priority date: 5-3-1961.
- Area (1.8 Acres) not irrigated under T-13827, formerly Certificate 33475, priority date: 5-3-1961.



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



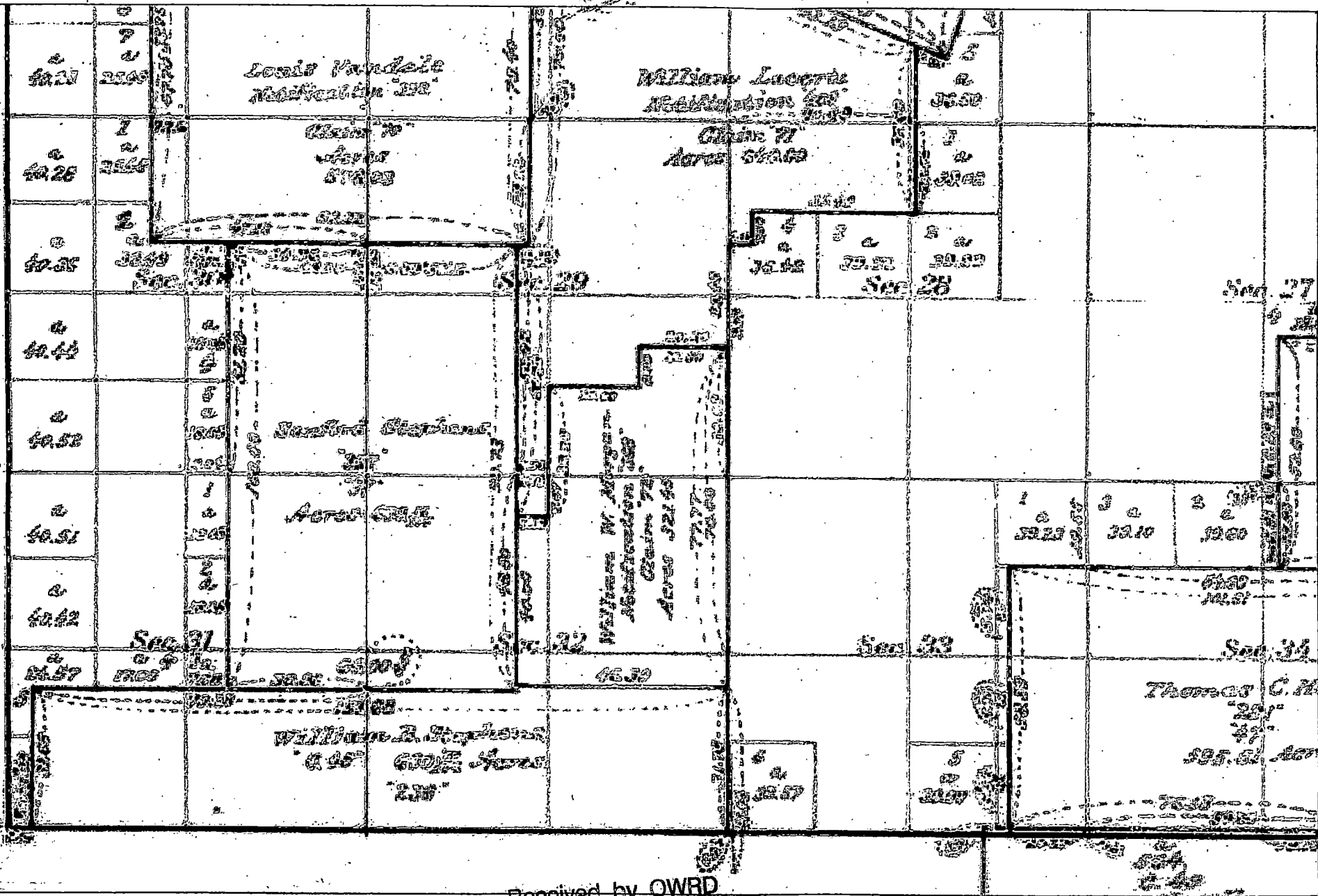
Claim of Beneficial Use Map
T-13827, formerly Certificate 33475

Coastal Forest Products
 T.6S. R.2W. Sec. 29, 30 & 31, W.M.

10/2024

Pacific Hydro-Geology Inc.

CoastalT-13827COBUMap.cdr



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STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765) WATER RESOURCES DEPT. SALEM, OREGON

AUG 28 2002

Mari 56805

WELL I.D. # L 55072 START CARD # 147723

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

(1) LAND OWNER Well Number Howe LLC 2057 Linwood St NW Salem OR 97304

(2) TYPE OF WORK New Well Deepening Alteration 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 119 ft. Explosives used Yes No Type Amount

Table with columns: Diameter, From, To, Material, From, To, Sack or pounds. Includes handwritten entries for 12 inch diameter, 0 to 36 feet, Cement, 0 to 36 feet, 29 sacks.

How was seal placed: Method A B C D E Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes handwritten entries for 8 inch casing, 1186.25 gauge, and 118 1/8 inch liner.

(7) PERFORATIONS/SCREENS: Perforations Method Screens Type Material. Includes a table for perforation details.

(8) WELL TESTS: Minimum testing time is 1 hour. Pump, Bailer, Air, Artesian. Yield gal/min, Drawdown, Drill stem at, Time.

Temperature of water, 5.5 Depth Artesian Flow Found. Was a water analysis done? Did any strata contain water not suitable for intended use? Salty, Muddy, Odor, Colored, Other. Depth of strata.

(9) LOCATION OF WELL by legal description: County Marion Latitude Longitude Township 6-S N or S Range 2-W E or W. WM. Section 31 SE 1/4 NE 1/4 Tax Lot 500 Lot Block Subdivision Street Address of Well (or nearest address) 6492 Portland Rd NE Salem OR 97305

(10) STATIC WATER LEVEL: 13.5 ft. below land surface. Date 8-12-02 Artesian pressure lb. per square inch Date

(11) WATER BEARING ZONES: Depth at which water was first found 25. Table with columns: From, To, Estimated Flow Rate, SWL. Includes handwritten entries for 25 to 119 feet depth, 200+ flow rate, 13.5 SWL.

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Includes handwritten entries for Top Soil, Silty brown Clay, Med Sand + gravel, Semi-loose black, Brown clay + gravel, etc.

Date started 7-23-02, Completed 8-12-02. (unbonded) Water Well Constructor Certification: 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.

(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.

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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Coastal Forest Products LLC
6242 Portland Rd NE, Salem OR 97305

Transaction Type: Claim

Fees Received: \$ N/A

Cash Check; Check No. _____

Name(s) on Check: _____

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: Cone Louren
(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.