# CLAIM OF BENEFICIAL USE for Surface 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 <u>permits</u> with priority dates of July 9, 1987, or later.

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#### 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

## SECTION 1 GENERAL INFORMATION

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#### 1. File Information:

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
S-88769	S-55229	NA

2.	Property	Owner	(current	owner	information	<b>)</b> :
-	LIOPCILY	CAALICI	(cui i ci i c	CAALICI	mormation	

APPLICANT/BUSINESS NAME		PHONE NO.		ADDITIONAL CONTACT NO.
GREGORY TIMM		541-580-2	628	541-817-3614
ADDRESS				
1224 NW RIVERFRONT DR				
Сіту	STATE	ZIP	E-MAIL	
ROSEBURG	97471	greggtimm	@gmail.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 holder of record (this may, or may not, be the current property owner):

PERMIT HOLDER OF RECORD		,	
GREGORY TIMM			
ADDRESS			
1224 NW RIVERFRONT DR			
CITY	STATE	ZIP	
ROSEBURG	OR	97471	

ADDITIONAL PERMIT HOLDER OF RECORD	~ .	
NA		
Address		
Сіту	STATE	ZIP

#### 4. Date of Site Inspection:

9-13-2024

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
JACK COOLEY	9-13/2024	HELPED APPLICANT

#### 6. County:

DOUGLAS

### 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			
NA			Received
ADDRESS			DEC 0 2 2024
Сіту	STATE	ZIP	OWRD

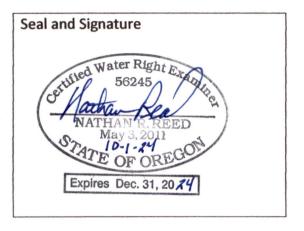
Add additional tables for owners of record as needed

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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.
NATHAN REED		541-784-7	7191	NA
ADDRESS				
157 WEST BODIE ST				
CITY	STATE	ZIP	E-MAIL	
ROSEBURG	OR	97471	nreed68@h	otmail.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
6	brossTimm		10/13/24
Stadranie Trujy	Stephanie Timm		10/13/24

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#### CLAIM DESCRIPTION

1. POD source and, if from surface water, the tributary:

POD NAME OR NUMBER	Source	TRIBUTARY
POD	GALESVILLE RESERVOIR (R-9964)	UMPQUA RIVER

2. 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	IRRIGATION	LAWN/GARDEN	MAR. 1 – OCT. 31	1.34 AF
Total Quantity of	Water Used			1.34 AF

3. 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:

Re-diversion of Galesville Reservoir is on the South Umpqua River through fish screen, pump by 3 Hp centrifugal pump, through meter out to buried pipe network of five zones of irrigation.

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). Received

4	Variations:	DEC 02	2024
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Was the use developed differently from what was authorized by the permit, OWRD permit amendment final order, or extension final order? If yes, describe below. (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.")

#### 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
POD	0.008 CFS	0.05 cfs	0.05 cfs	IRRIGATION	0.6	0.6

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#### SYSTEM DESCRIPTION

Are there multiple PODs?	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):	

#### 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. 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

If "NO" items 2 through item 5 may be deleted.

#### 2. Pump Information:

Manufacturer	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
GOULD	GT30	UNKNOWN	CENTRIFUGAL

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)
3.0	45	10 FEET	30 FEET	0.13

#### 4. Provide pump calculations:

Revised 7/1/2021

45 psi = 114.3 feet; Q = (Hp x eff.)/(Sum Total Head) = (3.0x6.61)/(114.3+10+30) = 0.13 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)
49499.3	49547.6	2 min	0.05

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

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6. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
RB	45	3.5	25	7	0.05
					26.6

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)
NA					

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
NA					
		i i			

C.	S	to	ra	g	e
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1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)?

NO

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?

NO

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?

NO

F. Additional notes or comments related to the system:

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#### **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	8-6-2019		
BEGIN CONSTRUCTION (A)		5-2019	In ground irrigation system previously installed by prior owner.
COMPLETE CONSTRUCTION (B)		5-2020	Completed conditions meter install and new fish screen
COMPLETE APPLICATION OF WATER (C)	8-6-2024	5-2020	Beneficially irrigating

<sup>\*</sup> 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)?

NO

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

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 diversion.

b. Has a meter been installed?

YES

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#### c. Meter Information

POD NAME OR#	MANUFACTURER	SERIAL#	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POD	GRYVOZE	NA	WORKING	49499.3	5-2020

#### 4. Recording and reporting conditions:

a. Is the water user required to report the water use to the Department?

NO

#### 5. Fish Screening:

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

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

Reminder: If fish screening devices were required, the COBU map must indicate their location in relation to the point of diversion.

b. Has the fish screening been installed?

YES

c. When was the fish screening installed?

DATE	Ву Wном		
5-2020	JACK COOLEY		

Reminder: If the permit or transfer final order was issued <u>on or after February 1, 2011</u>, the fish screen is required to be approved by the Oregon Department of Fish and Wildlife regardless of the rate of diversion.

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- d. If the diversion involves a pump  $\underline{and}$  the total diversion rate of all rights at the point of diversion is less than 225 gpm (0.5 cfs):
  - Has the self-certification form previously been submitted to the Department? NA

If not, go to <a href="https://www.oregon.gov/OWRD/Forms/Pages/default.aspx">https://www.oregon.gov/OWRD/Forms/Pages/default.aspx</a> complete and attach a copy of the 'ODFW Small Pump Screen Self Certification' form to this claim, and send a copy of it to the Oregon Department of Fish and Wildlife (ODFW).

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. The ODFW self certification form needs to have been previously submitted or be attached to this form.

- e. If the diversion does **not involve** a **pump** <u>or</u> the **total** diversion rate of all rights at the point of diversion is 225 gpm (0.5 cfs) or greater:
- Has the ODFW approval been previously submitted?
   If not, contact and work with ODFW to ensure compliance. To demonstrate compliance, provide signed documentation from ODFW. A form is available at

https://www.oregon.gov/OWRD/Forms/Pages/default.aspx

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. In order to receive a favorable approval, the ODFW/WRD "Fish Screen Inspection" form needs to have been previously submitted or be attached to this form.

#### 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?

NO

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#### 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?

NO

b. 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):

7.b. The use of water under this permit is subject to the terms and conditions of contract No. I-2019-4, or a satisfactory replacement, between Douglas County and the permittee.

#### **SECTION 6**

#### **ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION	
ODFW Letter	Fish Screen Satisfaction	
CBU Map	Final Proof Survey	

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#### 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.

A Garmin Rino 650, handheld GPS, was used to locate coordinates of pertinent features. Along with Douglas County GIS with ultra-high imagery, 2022.

#### **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)				
$\boxtimes$	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				
$\boxtimes$	Locations of fish screens and/or fish by-pass devices in relationship to point of diversion				
$\boxtimes$	Locations of meters and/or measuring devices in relationship to point of diversion				
$\boxtimes$	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)				
$\boxtimes$	Point(s) of diversion or appropriation (illustrated and coordinates)				
$\boxtimes$	Tax lot boundaries and numb	pers			
$\boxtimes$	Source illustrated if surface v	water			
$\boxtimes$	Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")				
$\boxtimes$	Application and permit numl	ber or transfer number	Received		
$\boxtimes$	North arrow		DEC 0 2 2024		
$\boxtimes$	Legend		OWRD		
$\boxtimes$	CWRE stamp and signature		Received		
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#### Department of Fish and Wildlife

Rogue Watershed District Office 1495 East Gregory Rd. Central Point, OR 97502

> Phone: 541-826-8774 Fax: 541-826-8776



August 27, 2024

Gregory Timm 1224 NW Riverfront Dr. Roseburg, OR 97471

Dear Gregory,

Regarding OWRD Permit #55229, ODFW has determined the fish screen at the point-of-diversion (POD #1) meets current fish protection criteria, and fish bypass devices are not necessary. This approval is contingent on the following: current conditions remain unchanged, screens are installed so effective screen area is submerged during operation, the screen is regularly inspected and maintained to ensure it remains in working order (including debris removal), and the screen is annually inspected when it is not in use. Thank you.

Sincerely,

Josh Kelsey

Screens and Passage Coordinator Fish Screening and Passage Program

(541) 857-2424

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