

**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](http://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>

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>

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**SECTION 1  
GENERAL INFORMATION**

**1. File Information:**

APPLICATION # <b>S-87157</b>	PERMIT # (IF APPLICABLE) <b>S-54486</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>T-10860</b>
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>Crowfoot Road Water Improvement District</b>		PHONE NO. <b>541-944-1285</b>	ADDITIONAL CONTACT NO. <b>541-210-3334</b>
ADDRESS <b>PO Box 4428</b>			
CITY <b>Medford</b>	STATE <b>OR</b>	ZIP <b>97501</b>	E-MAIL <b>dan@pactrend.com</b>

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. ***Each*** 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 <b>Crowfoot Road Water Improvement District</b>		
ADDRESS <b>PO Box 4428</b>		
CITY <b>Medford</b>	STATE <b>OR</b>	ZIP <b>97501</b>

ADDITIONAL PERMIT HOLDER OF RECORD <b>None</b>		
ADDRESS		
CITY	STATE	ZIP

**4. Date of Site Inspection:**

**May 28, 2024**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Dan Mahar</b>	<b>4/28/24</b>	<b>Property Owner for POD 1</b>
<b>Mark Vollmer</b>	<b>4/28/24</b>	<b>Property Owner for POD 2</b>
<b>Brad Hicks</b>	<b>4/28/24</b>	<b>Property Owner for POD 3</b>

**6. County:**

**Jackson County**

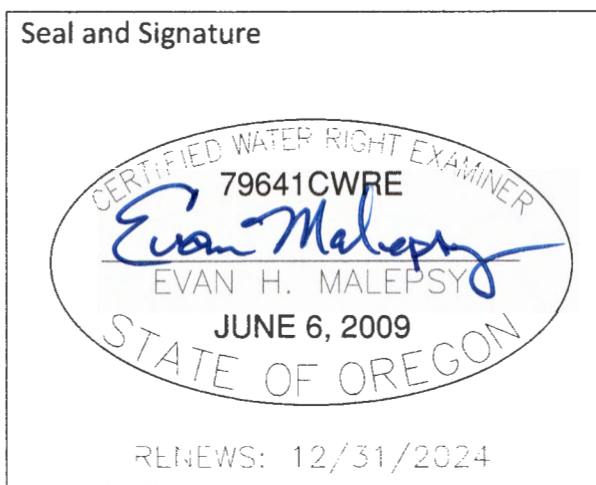
**7. If any property described in the place of use of the permit final order is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):**

OWNER OF RECORD <b>James Root</b>		
ADDRESS <b>PO Box 430</b>		
CITY <b>Medford</b>	STATE <b>OR</b>	ZIP <b>97501</b>

## 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 <b>Evan Malepsy</b>	PHONE NO. <b>541-621-2868</b>	ADDITIONAL CONTACT NO. <b>None</b>
ADDRESS <b>52 Pineridge Lane</b>		
CITY <b>Eagle Point</b>	STATE <b>OR</b>	ZIP <b>97524</b>
E-MAIL <b>emalepsy@roguecivil.com</b>		


### 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.

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SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	Daniel Maher	Manager	12-10-2024

### SECTION 3 CLAIM DESCRIPTION

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

POD NAME OR NUMBER	SOURCE	TRIBUTARY
POD 1	Lost Creek Reservoir	Rogue River
POD 2	Lost Creek Reservoir	Rogue River
POD 3	Lost Creek Reservoir	Rogue 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 1	Quasi-Municipal	NA	Year Round	0.23 AF (2023)
POD 2	Quasi-Municipal	NA	Year Round	1.15 AF (2023)
POD 3	Quasi-Municipal	NA	Year Round	0.20 AF (2023)
Total Quantity of Water Used				1.58 AF (2023)

#### 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:

There are three developed points of diversion. Each of them includes a 1HP submersible pump placed in the river with screened intake pipe. 2" pipes deliver the water from the pumps at the river to the storage tanks at each place of use. Each of the three places of use is a residential home.

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).

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#### 4. Variations:

Was the use developed differently from what was authorized by the permit, permit amendment final order, or extension final order? If yes, describe below.

YES

(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.")

The permit was amended to include an additional point of diversion on tax lot 331E33-700. That point of diversion was never developed.

#### 5. 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 1	None listed	0.08 CFS	None	Quasi-Municipal	NA	NA
POD 2	None listed	0.10 CFS	None	Quasi-Municipal	NA	NA
POD 3	None listed	0.09 CFS	None	Quasi-Municipal	NA	NA

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## SECTION 4

### SYSTEM DESCRIPTION

Are there multiple PODs?

YES

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 1

#### 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 and 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: (the pump was in the river at time of inspection, unable to access it to identify manufacturer, model, serial number)

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
Unknown	Unknown	Unknown	Submersible

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)
1	20	0	35	0.08

4. Provide pump calculations:

Pump calculations are attached.

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 operating at time			



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

#### 6. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
NA					

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					

### C. Storage

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

YES

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

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

#### 2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Plastic	2,000	Above

#### 3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
NA		

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#### 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

*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?

NO

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

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

None

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## SECTION 4

### SYSTEM DESCRIPTION

Are there multiple PODs?

YES

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 2

#### 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 and 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: (the pump was in the river at time of inspection, unable to access it to identify manufacturer, model, serial number)

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
Unknown	Unknown	Unknown	Submersible

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)
1	20	0	15	0.10

4. Provide pump calculations:

Pump calculations are attached.

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**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 operating			

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

**6. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
NA					

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					

**C. Storage**

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

YES

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

If "YES" is it a:      Storage Tank  
                                 Bulge in System / Reservoir

YES

NO

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Plastic	2,000	Above

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**3. Bulge in System / Reservoir:**

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
NA		

**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**

*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?****NO**

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

**F. Additional notes or comments related to the system:**

None

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## SECTION 4 SYSTEM DESCRIPTION

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Are there multiple PODs?

YES

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 3

### 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 and 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: (the pump was in the river at time of inspection, unable to access it to identify manufacturer, model, serial number)

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
Unknown	Unknown	Unknown	Submersible

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)
1	20	0	20	0.09

4. Provide pump calculations:

Pump calculations are attached.

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 operating			

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

**6. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
NA					

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					

**C. Storage**

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

YES

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

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Plastic	2,000	Above

**3. Bulge in System / Reservoir:**

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
NA		

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#### 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

*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?

NO

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

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

None

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## SECTION 5

### 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	Jan. 29, 2009		
BEGIN CONSTRUCTION (A)	None listed	NA	NA
COMPLETE CONSTRUCTION (B)	Jan. 29, 2014	*July 10, 2023 (*Extension was granted)	Final POD developed and placed in use
COMPLETE APPLICATION OF WATER (C)	Jan. 29, 2014	*July 10, 2023 (*Extension was granted)	Final POD developed and placed in use

\* 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)?

YES

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

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

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

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

c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POD 1	DLJ Meter	22-06969	Working	75,820 Gallons	July 2023
POD 2	EKM Meter	00000567	Working	250,800 CF	May 2010
POD 3	Sensus	70920929	Working	503,070 Gallons	Nov 2009

*If a meter has been installed, items d 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**

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	BY WHOM
July 2023 (POD 1)	Dan Mahar
May 2010 (POD 2)	Richard Halpin
November 2009 (POD 3)	Brad Hicks

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

d. If the diversion involves a pump 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 <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

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** or 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? **NA**

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**

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

**Reminder: If by-pass devices were required, the COBU map must indicate their location in relation to the point of diversion.**

b. Have by-pass devices been installed?

**YES NO**

DESCRIPTION (E.G. "ODFW HAS APPROVED THE BY-PASS DEVICE" OR "NO BY-PASS DEVICE IS NECESSARY BECAUSE THERE IS A DIRECT DIVERSION FROM THE STREAM VIA A PUMP ON RIVER LEFT STREAM BANK WITH FOOT VALVE DESCENDING DIRECTLY INTO NATURAL POOL.") IN ADDITION, YOU MAY ATTACH PHOTOS TO THIS CLAIM.	IF INSTALLED (DATE)	IF INSTALLED, BY WHOM
<b>ODFW has determined that by-passes are not necessary for any of the points of diversion. See attached letters.</b>		

c. Describe the diversion works as related to whether a by-pass device is installed or unnecessary:  
(Provide a letter from ODFW indicating the device is approved or is unnecessary.)

## 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? **YES**

b. 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):

**Riparian areas have been restored at each POD.**



**SECTION 6**  
**ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
COBU Map	Claim of Beneficial Use Map
Pump Calc	Theoretical pump calculations for each POD
ODFW Letters	ODFW documents regarding fish screen and by-pass for each POD

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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 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.

**Survey methods included a site inspection in conjunction with the use of aerial photos. The aerial photo source is Google Earth, it is dated April 4, 2024.**

### 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
- ☒ Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- ☒ 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")
- ☒ Application and permit number or transfer number
- ☒ North arrow
- ☒ Legend
- ☒ CWRE stamp and signature

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# Oregon

Tina Kotek, Governor

## 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

[www.odfw.com](http://www.odfw.com)



April 8, 2024

Daniel Mahar  
7153 Crowfoot Rd.  
Trail, OR 97541

Dear Daniel,

Regarding OWRD permit S-54486, ODFW has determined the fish screen at the point-of-diversion located at 42.65469, -122.71883 meets current fish protection criteria, and fish bypass devices are not necessary. This approval is contingent on the following: current conditions remain unchanged, screen is 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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# Oregon

Tina Kotek, Governor

## 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

[www.odfw.com](http://www.odfw.com)



May 28, 2024

Mark Vollmer  
7159 Crowfoot Rd.  
Trail, OR 97541

Dear Mark,

Regarding OWRD permit S-54486, ODFW has determined the fish screen at the point-of-diversion located at 42.656526, -122.726782 meets current fish protection criteria, and fish bypass devices are not necessary. This approval is contingent on the following: current conditions remain unchanged, screen is 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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*Our mission is to protect and enhance Oregon's fish and wildlife and their habitats for use and enjoyment by present and future generations.*



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ND WILDLIFE  
PARTMENT

Brad Hreks approval  
letter for OWRD  
if needed.

### FISH SCREEN INSPECTION FORM

Applicant Crowfoot Rd Wild -

Name: Terre Hewitt Water Right Number: 7-10860 Water Right Amount (cfs): 5.0 ac Q

Address: 560 Grove St, Jacksonville, OR 97530 Phone (541): 899-5599

Diversion

Stream: Rogue River Tributary to: Pacific Ocean

\* Address (if different than applicants): 7159 Crowfoot Rd.

Diversion Type: Pump Location: T, R, Sec.

GPS Coordinates: 42.65549 - 122.72712 SATS: 6

Pump Information

Brand: Submersible Horsepower: 1/2 hp Intake Size: 1 1/2"

Screen Information

Type: Passive Installed by: Desert Pump Date Installed: 11-10-09

Date of Inspection: 11-12-09 Inspected by: Rich Kellum Agency: OWRD

Comments: Screen is more than adequate for amount

☒ Screen meets current state criteria for fish protection.

☐ Screen does not meet current state criteria for fish protection.

☐ Another screen inspection should be done before water use begins.

of water being pumped.  
Also, fish bypass and  
fish passage are  
not needed at  
this site. (NE)

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## Pump Capacity Calculation Sheet - POD 1

using Department designed formula:

$(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

---

### Data Entry (fill in underlined blanks)

---

HP = 1  
Efficiency = 6.61  
Lift = 35  
PSI = 20

### Results Calculated

---

(hp)(efficiency) = 6.61  
Head based on psi = 50.8  
Total dynamic head = 85.8  
(head + lift)

**Pump Capacity = 0.08 feet per second**

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**Pump Capacity Calculation Sheet - POD 2**

using Department designed formula:

$(hp)(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

**Data Entry (fill in underlined blanks)**

HP = 1  
Efficiency = 6.61  
Lift = 15  
PSI = 20

**Results Calculated**

(hp)(efficiency) = 6.61  
Head based on psi = 50.8  
Total dynamic head = 65.8  
(head + lift)

**Pump Capacity = 0.10 feet per second**

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