

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



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>

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**SECTION 1
GENERAL INFORMATION**

1. File Information:

APPLICATION # S-88750	PERMIT # S-55265	PERMIT AMENDMENT # T-
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME NW Urban Holdings, LLC		PHONE NO. (503) 302-5445	ADDITIONAL CONTACT NO. (503) 910-5546
ADDRESS PO Box 99			
CITY Lyons	STATE OR	ZIP 97358	E-MAIL WilsonPropInv@outlook.com

APPLICANT/BUSINESS NAME Jeremy Bircher		PHONE NO. (920) 366-5313	ADDITIONAL CONTACT NO.
ADDRESS 8750 Oak Grove Rd.			
CITY Rickreall	STATE OR	ZIP 97371	E-MAIL jeremy.bircher@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. ***Each 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 NW Urban Holdings, LLC		
ADDRESS PO Box 99		
CITY Lyons	STATE OR	ZIP 97358

ADDITIONAL PERMIT HOLDER OF RECORD Jeremy Bircher		
ADDRESS 8750 Oak Grove Rd.		
CITY Rickreall	STATE OR	ZIP 97371

4. Date of Site Inspection:

8/20/2024

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
David Brinker	8/20/2024	Manager

6. County:

Polk

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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 Firs Holdings LLC		
ADDRESS PO Box 99		
CITY Lyons	STATE OR	ZIP 97358

OWNER OF RECORD Jonathan David & Katie Dawn Johnson		
ADDRESS 8710 North Oak Grove Rd.		
CITY Rickreall	STATE OR	ZIP 97371

OWNER OF RECORD Glen Thomas & Beret Ann Andreassen		
ADDRESS PO Box 422		
CITY Amity	STATE OR	ZIP 97101

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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 William E. McGill	PHONE NO. (503) 510-3026	ADDITIONAL CONTACT NO. (503) 931-0210
ADDRESS 15333 Pletzer Rd. SE		
CITY Turner	STATE OR	ZIP 97392
E-MAIL willmcgill.surveying@gmail.com		

Permit Holder 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
	Tasha Mack	Manager	1/15/2025
	Jeremy Bircher	Owner	1/16/2025
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SECTION 3
CLAIM DESCRIPTION

1. Point of diversion name or number:

POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)
POD 1

2. Point of diversion source and tributary:

POD NAME OR NUMBER	SOURCE	TRIBUTARY
POD 1	Mark Olson Reservoir	Ash Swale

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 1	Irrigation	Oats, fescue, grapes	Mar. 1 – Oct. 31	45.5 AF
Total Quantity of Water Used				45.5 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 delivered through a buried 6" PVC gravity flow pipe from the bottom of the reservoir to a 14' deep 18" diameter vertical pipe (pump can). The pump can contains a 50 HP submersible pump. From the pump can, water is delivered to the POU through 6" mainline and applied to the POU by a hard hose traveler with big gun.

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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 YES NO

5. Variations:

Was the use developed differently from what was authorized by the permit, or permit amendment 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.")

The permit authorized 617.7 acres of irrigation and only 98.1 acres were developed.

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 1	*	1.04 cfs	**	Irrigation	617.7	98.1

*Maximum volume authorized is 45.5 AF. No rate specified.

**System was not running at time of site inspection.

SECTION 4
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 1

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	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
6S	4W	WM	9	NWNE	2		Irrigation	15.4	
6S	4W	WM	9	SWNE	2		Irrigation	1.9	
6S	4W	WM	9	SWNE		42	Irrigation	8.1	
6S	4W	WM	9	NENW	1		Irrigation	19.8	
6S	4W	WM	9	SENW	1		Irrigation	5.2	
6S	4W	WM	9	SENW		42	Irrigation	14.2	
6S	4W	WM	9	NESW		42	Irrigation	14.2	
6S	4W	WM	9	SESW		42	Irrigation	4.2	
6S	4W	WM	9	NWSE		42	Irrigation	10.6	
6S	4W	WM	9	SWSE		42	Irrigation	4.5	
Total Acres Irrigated								98.1	

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.

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B. Diversion and Delivery System Information

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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 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
Wolf			Submersible		6"

3. Motor Information:

MANUFACTURER	HORSEPOWER
Hitachi	50

4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
50	100	0'	83'	1.04

5. Provide pump calculations:

$$Q = (50 * 7.04) / (254 + 83) = 1.04 \text{ cfs}$$

6. 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)
System not running at time of site inspection.			

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"	80'	HDPE	Buried
6"	2,933'	PVC	Buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
N/A			

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
Hose reel w/ big gun (1.1" nozzle)	100	500	1	1	1.11

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

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11. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
N/A					

12. 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
N/A					

13. Pivot Information:

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

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
 Bulge in System / Reservoir

YES NO
 YES NO

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

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Mark Olson Reservoir	26'	45.5

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

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

2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)
6"	PVC	150	20.9'	580'	0.036 ft./ft.	1.728

3. Provide calculations:

6" PVC

$$V = (1.31)(150)((0.125)^{0.63})((0.036)^{0.54}) = 8.8059 \text{ ft./sec.}$$

$$Q = (0.19625)(8.8059) = 1.728 \text{ cfs}$$

4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)
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System not running at time of site inspection.

Attach measurement notes.

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

NO

F. Additional notes or comments related to the system:

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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 permit extension of time:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	3/10/2020		
BEGIN CONSTRUCTION (A)	3/10/2025	September 2023	Installed pump can, new pump, mainline.
COMPLETE CONSTRUCTION (B)	N/A	N/A	N/A
COMPLETE APPLICATION OF WATER (C)	3/10/2025	July 2024	Irrigated claimed POU with big gun.

* 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 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?

YES NO

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 NO

c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POD 1	Netafim	220912310	Working	004754862	Oct. 2023

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4. Recording and reporting conditions:

a. Is the water user required to report the water use to the Department? YES NO

5. Fish Screening:

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion? YES NO*

*See attached ODFW exemption letter.

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

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 NO
- b. Was a fishway required? YES NO
- c. Was submittal of a water management and conservation plan required? YES NO
- d. Other conditions? 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):

**SECTION 6
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Pictures (x13)	Taken at 8/20/2024 site inspection.
ODFW exemption letter	Letter approving exemption from fish screen requirement.

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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 method used was aerial photo provided by Maxar Technologies and survey-grade GPS.
Source Date: 5/23/2023

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
- N/A 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.)
- 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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NW Urban Holdings

COBU

8/20/24

Reservoir from crest of dam



MW Urban
Holdings
LOBU
8/20/24

Top of
overflow

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Nw Urban Holdings COBU 8/20/24

brushy drainage below
overflow



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NW Urban Holdings COBU 8/20/24 Oat Crop



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New Urban
Buildings

Cobu

8/20/24

overflow
drainage
below
dam, near
pump
station



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NW Urban Holdings

COBU

8/20/24

overflow drainage in relation to pump station showing no connection between channel and div. pipe.



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New Urban
Holdings

COBU

8/20/24

pump
station

YASKAWA

DIGITAL OPERATOR JVOP-183 ALM

Auto Setpoint
15-99= 100.0PSI
01-02= 0.00Hz
01-91= 0.0PSI

<-MONITOR-

F1 F2

ESC M M HAND

RESET V ENTER

AUTO OFF

NW Urban
Holdings
COBU

8/20/24

Pump
Controller

100 psi

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PREFERRED PUMP
CANBY, OR.
MOD#: CIMR-PW4A0103FAA
SER#: 1W2383931610023
480/277 VAC 4-WIRE WITH GND
68FLA 3PH 50/60 HZ
SCCR: 35 KA RMS
REF. DWG A0989

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NW Urban
Holdings
Coble
8/20/24
pump into



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COBU
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Flow meter



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Nw Urban Holdings

COBU

8/20/24

Reel and Traveler



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New Urban Holdings Cobu 8/20/24 Nelson Big Gun



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NW Urban Holdings

COBU

8/29/24

Big Gun
NO 2216
1.1



Oregon

Tina Kotek, Governor

Department of Fish and Wildlife
The Dalles Screen Shop
3561 Klindt Drive
The Dalles, OR 97058
(541) 296-8026
Fax (541) 296-7889
odfw.com

November 11, 2024

Attn. David Brinker
NW Urban Holdings LLC
PO Box 99
Lyons, Or 97358

RE: Permit S-55265

To whom it may concern,

The Oregon Department of Fish and Wildlife (ODFW) is submitting this letter regarding the fish screening condition contained in permit S-55265. The permit allows the water user to submit evidence in writing that ODFW has determined screens and bypass devices are not necessary.

After inspecting the reservoir location using aerial maps, ODFW district fish biologist determined that the point of diversion is outside of fish distribution and therefore fish screening and passage devices are not necessary for S-55265, which allows withdrawal of water from an off-channel reservoir (Mark Olson Reservoir), constructed under permit R-10812.

Although ODFW has determined that fish screening and passage devices are not necessary for S-55265, the permittee shall not stock fish in the associated reservoir without a fish transport permit approved by ODFW. Per ORS 498.222 and OAR 635-007-0600, all persons transporting fish transport permit issued by the Oregon Department of Fish and Wildlife (ODFW). As Part of the permitting process, the permittee may need to screen the outlet of the reservoir to ensure that fish cannot escape into public waters.

If you have any questions regarding this letter, please contact me at 541-296-8026

Sincerely,

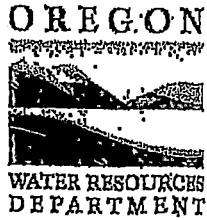

Toby Schuyler

11/13/2024

NW Region Fish Screen and Passage Coordinator

CC: Katherine Nordholm, ODFW Fish Screen and Passage Coordinator
Danette Faucera, ODFW Water Policy Coordinator

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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: NW Urban Holdings LLC
PO Box 99, Lyons OR 97358

Transaction Type: Claim

Fees Received: \$ 230.00

Cash, Check: Check No. 2356
Name(s) on Check: Will McMill Sweeney

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: Corie Larsen
(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.