For Lyle A. and Lisa A. Henricks 10612 E. Evans Creek Road Rogue River, OR 97537

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WATER RESOURCES DEPT SALEM, OREGON

The completion of this form is required by OAR 690-014-010(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 numbered item must have a response. If any requested information does not apply to the Claim, insert "n/a." Do not delete 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. A separate form shall be completed for each permit or transfer final order.

I. General Information

1. File Information

| Application Number (G, R, S or T) | Permit Number (if applicable) |
|-----------------------------------|-------------------------------------|
| T - 7267 | Special Order Volume 50, Page 62-64 |

2. Property owner (current owner information)

a. Individuals

| Name | Lyle A. Henricks | Lisa A. Henricks |
|-----------------|----------------------------|----------------------------|
| Mailing Address | 10612 East Evans Creek Rd. | 10612 East Evans Creek Rd. |
| City/State/Zip | Rogue River, OR 97537 | Rogue River, OR 97537 |
| Phone # | 541-582-2186 | 541-582-2186 |
| Fax # | @ L | |
| e-mail address | 31 | |

b. Businesses/Organizations

| Name | |
|--------------------------|--|
| Contact Person and Title | |
| Mailing Address | |
| City/State/Zip | |
| Phone | |
| Fax | V 1 6 8 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| e-mail | |

If the current property owner is not the permittee or transfer holder of record, it is recommended that an assignment be filed with the Department.

- 3. Permittee / Transferee of record (this may not be the current property owner)
 - c. Individuals

| | Individual 1 | Individual 2 |
|-----------------|----------------------------|----------------------------|
| Name | Robert S. Cronhardt | Diana M. Cronhardt |
| Mailing Address | P.O. Box 2074 | P.O. Box 2074 |
| City/State/Zip | Rogue River, OR 97537-2074 | Rogue River, OR 97537-2074 |

d. Businesses/Organizations N/A

| Name | |
|--------------------------|--|
| Contact Person and Title | |
| Mailing Address | |
| City/State/Zip | |

- 4. Date of Site Inspection: October 20, 2005
- 5. Person(s) interviewed and description of their association with the project:

| Name | Date | Association with the project | |
|------|------|------------------------------|--|
| | | | |
| | | | |

| 0 . | | |
|---------|---------|-----------------|
| County: | Jackson | * |
| | County: | County: Jackson |

7. Tax Lot Information:

| Tax map number | Tax lot number | |
|---|----------------|------|
| 35 4W 15 | 3404 | |
| 100000000000000000000000000000000000000 | | 1 |
| | | 1.00 |

8. If any property described in the place of use of the permit or transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(3)): N/A

**Mark "NA" if there are no owners of property not included in this claim

| Name | Damerow, Len O. & Karen I. |
|--------------------------|----------------------------|
| Contact Person and Title | |
| Mailing Address | 7101 East Evans Creek Road |
| City/State/Zip | Rogue River, OR 97537 |
| Phone # | RECEIVED |

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| Name | Miller Family Trust | E |
|--------------------------|----------------------------|-----|
| Contact Person and Title | Jack M. Miller, Trustee | |
| Mailing Address | 6955 East Evans Creek Road | |
| City/State/Zip | Rogue River, OR 97537 | . 6 |
| Phone # | | 1 |

I. Points of Diversion/Appropriation and Place of Use

For each point of diversion or appropriation, provide the following information. If the claim is for more than one point of diversion/appropriation, copy and complete this section for each point of diversion or appropriation.

1. Provide a general narrative description of the distribution works. This description must trace the water system from the point of diversion or appropriation to and include the place of use:

Pump from creek using centrifugal pump – Buried pipeline with risers along edge of field, portable lateral pipelines and sprinkle irrigation.

2. Point of diversion/appropriation name or number (correspond to map):

| Point of diversion/appropriation name or number (correspond to map) | Well log ID # for all work performed on the well (if applicable) | Well tag # (if applicable) |
|---|---|-------------------------------|
| Point of Diversion No. 1 | - 1 | - |
| Au 1 1 11 11 11 1 1 1 1 1 1 1 1 1 1 1 1 | | |

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, and deepenings)

3. Point of diversion/appropriation source and, if from surface water, the tributary:

| Source | Tributary to | |
|-------------|--------------|--|
| Evans Creek | Rogue River | |

Point of diversion/appropriation location:

| (DLC, Government Lot, ¼ ¼, Section, Township, Range) | Reference to a recognized public land survey corner by distance and bearing or by coordinates |
|---|--|
| SW ¹ / ₄ SW ¹ / ₄ Section 15,T.35S., R.4W | 1140 ft North and 810 ft East from Southwest Corner Section 15 |

5. Actual use(s), period of use, and rate for each use:

| Uses | If irrigation, list crop type | When water is used | Rate for use | |
|------------|-------------------------------|--------------------|--------------|----|
| Irrigation | Pasture – Hay | Apr. 1 to Oct. 31 | 0.161 | 77 |

Total Quantity of Water

0.161

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6. Place of use for the point of diversion or appropriation:

| - | - | SW1/4SW1/4 | 15 | 35S | 4W | IRR. | 7.15 | |
|-----|---------|------------|---------|----------|-------|------|--------------------|-------------------------|
| - | - | SE1/4SW1/4 | 15 | 35S | 4W | IRR. | 2.54 | |
| DLC | Gov lot | 1/4 1/4 | Section | Township | Range | Use | # of primary acres | # of supplemental acres |

Total Acres Irrigated

9.69

Ø

System Information:

Provide the following information concerning the diversion and delivery system. Trace the flow of water from the point of diversion/appropriation to the place of use.

1. Pump information

| Brand | Model | Serial Number | Type (centrifugal, turbine or submersible) | Intake size | Discharge size |
|-------|-------|---------------|--|-------------|----------------|
| Gould | 3656 | G5BF1M2B0 | Centrifugal | 2" | 11/2" |

2. Motor information

| Brand | Model | Horsepower | Max RPM | Voltage | |
|--------|-----------|------------|---------|---------|--|
| Baldor | Illegible | 15 | 3450 | 230V | |

3. Meter information (if required in permit or transfer final order) N/A

| Make | Serial # | Condition (working or not) | Current meter reading | Notes |
|------|----------|----------------------------|-----------------------|-------|
| | E | | | |

4. Measurement device description: N/A

| Device description | Condition (working or not) | Notes |
|--------------------|----------------------------|-------|
| | | |

5. Measured pump capacity (using meter if meter was present and system was operating)

| Initial meter reading N/A | Ending meter reading N/A | Duration of time observed | Total pump output |
|---------------------------|--------------------------|---------------------------|-------------------|
| System Not Operating | | | |

6 Theoretical pump capacity

| Horsepower | Operating psi | Lift from source to pump *If a well, the water level during pumping (see pump test results) | Lift from pump to place of use | Total pump output |
|------------|---------------|---|-----------------------------------|-------------------|
| 15 | 70 | 15 | 15 | 0.477CFS |

7. Provide pump calculations in the box below:

$$Q = 15 \times 6.61 = 99.15 = 0.477 \text{CFS}$$

 $30 + 177.8 = 207.80 = (214.14 \text{ gpm})$

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8. Mainline information

| Mainline size | Length | Type of pipe | Buried or above ground | OCT 3 1 2005 |
|---------------|--------|--------------|------------------------|----------------------|
| 4" DIA | 600° | PVC | Buried | |
| | | | | WATER RESOURCES DEPT |

SALEM, OREGON

9. Lateral or handline information

| Lateral or handline size | Length | Type of pipe | Buried or above ground |
|--------------------------|--------|--------------|------------------------|
| 3" | 1040 | ALU. | Above Ground |

10. Sprinkler information Make and model:

| Make | Model | Size | Operating psi | Sprinkler output | Maximum number used | Total sprinkler output |
|----------|-------|-------|---------------|------------------|---------------------|------------------------|
| Rainbird | 30 | 11/64 | 55 | 6.3 | 27 | 170.10 |
| | | | | | | |
| | | | | | Etc. 1 - Z | |

Refer to the chart of sprinkler output at various pressures for most nozzle sizes attached to this document.

11. Additional notes or comments related to the system:

Transfer No. T-7267, submitted by Robert S. and Diana M. Cronhardt comprised of three tax lots (Refer to Attached Assessors Tax Lot Map 3401, 3404 and 3403). The original transfer map does not segregate the transfer area by Tax Lot. The apparent intent of the additional point of diversion was to provide each tax lot with a diversion point. Cronhardts eventually sold all three parcels and did not assign the transfer (or portion thereof) to the new owners. The new owners were not aware of the need for a Claim of Beneficial Use Report

Lyle A. and Lisa A. Henricks purchased Tax: Lot 3404 35 4W 15 from Robert S. and Diana M. Cronhardt in October, 1995. Henricks shared a pump with Cronhardt 1996-1999 when Cronhardt sold Tax Lot 3401 to Mason, Henricks shared the pump with Mason until Mason refused to share the pump. In 2004-2005 Henricks installed a new pump (See System Information) and mainline, water was applied during 2005 irrigation season.

III. CONDITIONS

Please pay special attention to this section. All conditions contained in the permit or transfer final order shall be addressed. Reports that do not address all performance related conditions will be returned.

1. Time Limits:

a. Permits or transfer 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 is to be completed by. 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 transfer final order:

| | Dates from permit or transfer final order | Date accomplished | Description of actions taken by water user to comply with the time limits | | |
|-------------------------------|--|----------------------|---|----------------------------|--|
| Begin construction | Feb. 1, 1996 | April, 1996 | *See notes in No.11. above. | RECEIVED | |
| Complete construction | Oct. 1, 1997 | _ | - | OCT 9.1 2005 | |
| Complete application of water | Apr. 1, 1996 | April, 1996 | *See notes in No.11. above. | WATER RESOURCES DE | |
| of water | | 1 | 500 Hotes III 110.11, above. | WATER RESOURCE SALEM, ORFO | |

2. Initial Water Level Measurements:

**If the Claim is for surface water or a reservoir, or if the water user was not required to submit static water level measurements, items b through e relating to this section can be deleted.

a. Was the water user required to submit an initial static water level measurement? YES NO NA
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| 3 | Annual | Static | Water | evel M | leasurements: |
|----|----------|-----------|-----------|-----------|---------------|
| Э. | AIIIIIII | 71.211.11 | VV 24 LC. | LICVED IV | easin ements. |

**If the Claim is for surface water or a reservoir, or if the water user was not required to submit static water level measurements, items b through e relating to this section can be deleted.

a. Was the water user required to submit annual static water level measurements?

YES <u>NO</u> NA

4. Measurement, recording, and reporting conditions:

- a. Does the permit or transfer final order require the installation of a meter or approved measuring device?

 YES NO **If "NO", items b through g relating to this section can be deleted.
- b. Has a meter been installed?

YES NO

c. Provide the date the meter was installed: N/A

- d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? YES NO See 4.b above.
- e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

Name Title Approximate date

- f. Is the water user required to report the water use to the Department? YES NO
- g. Have the reports been submitted? YES <u>NO</u>

If the reports have not been submitted, attach a copy of the reports if available.

5. Fish Screening and/or By-pass Devices

a. Are any points of diversion required to be screened and/or have a by-pass device to prevent fish from entering the point of diversion? YES NO NA

**If "NO", items b through i relating to this section can be deleted

7. Other Permit Conditions (examples: special well construct standards, water conservation plans, no obstructions to fish without a fishway, etc.; number as appropriate.) All Conditions Have Been Met.

IV. Attachments, Conclusions, Map and Signatures

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Attachments

If you are attaching any documents to this report, provide a list below:

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Attachment name Description SALEM, OREGON

Assessors Map Tax Lot Map Section 15 T.35S, R.4W.

Permit and Transfer Final Order Rates and System Rates Comparisons:

| POD or POA name or # | Maximum rate allowed by permit or transfer final order | Calculated theoretical rate of water based on system | Actual amount of water measured (if measured) | Developed use | # of acres allowed by permit or transfer final order | # of acres developed |
|----------------------------|--|---|---|------------------|--|-------------------------|
| No. 1 | 0.161CFS | 0.477CFS | 0.379CFS | IRR. | 9.69 | 9.69 |

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, 1" = 400, or the original full-size scale of the county assessor map for the location.

In the following box, 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.

Point of Diversion Coordinate position verified/determined by GPS using Garmin Plus 111 or V handheld unit, Conus Datum/UTM Coordinate system. Jackson County Assessor Aerial Photograph, scale 1"= 400' dated 1991. Jackson County GIS Smartmap dated 2001

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CWRE Statement, Seal and Signature

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

Seal and Signature Seal and Signature Water Right 152 ARB HAROLD L. CENTER MAY 17, 1988 TATE OF OREGOT

CERTIFIED WATER RIGHT EXAMINER

HAROLD L. CENTER 2604 David Lane Medford, OR 97504 Phone: 541-535-6108

Oregon Certificate No. 152

Certificate Renewal Date: 12/31/05

Permit or Transfer Holders Signature or Acknowledgement

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

Lyle A. Henricks

10-25-05 Date
Oct 25 2005

Signature

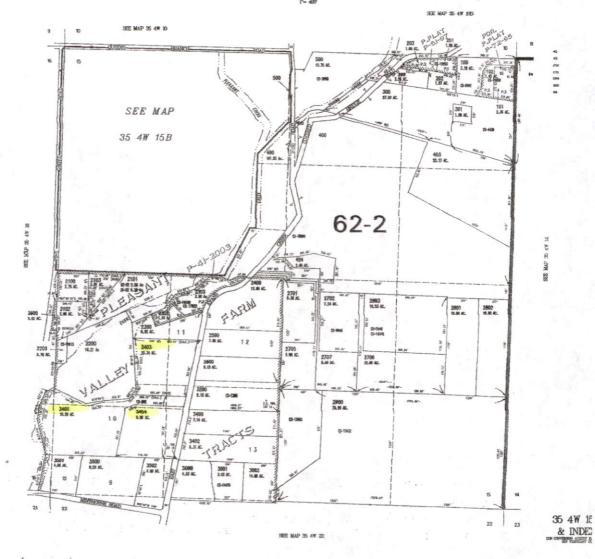
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