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

A fee of \$230 must accompany this form for <u>permits</u> 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

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1. File Information:

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
S-88800	S-55286	

2.	Property Owner	(current c	owner i	information):
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APPLICANT/BUSINESS NAME		PHONE NO.		ADDITIONAL CONTACT NO.
Theresa and Eugene Kenned	у	808-264-2	851	
ADDRESS				
42 Kahoea Place				
CITY	STATE	ZIP	E-MAIL	
Kula	HI	96790		

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):

J. Terrine Holder of Tees	ra (cins may) or may m	se, se the current property crimery	
PERMIT HOLDER OF RECORD			
Theresa and Eugene Kenn	edy		
ADDRESS			
42 Kahoea Place			
CITY	STATE	ZIP	
Kula	HI	96790	

ADDITIONAL PERMIT HOLDER	R OF RECORD		
			Received
ADDRESS			JUL 1 8 2025
Сіту	STATE	ZIP	OWRD

4. Date of Site Inspection:

July 8, 2025

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Theresa Kennedy	7/8/2025	Landowner
Lantz Miller	7/10/2025	Water System Manager

6. County:

Wallowa

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		
ADDRESS		
ABBRESS		
CITY	STATE	ZIP
CITT	STATE	

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 Jeffrey S. Hsu		PHONE NO. 541-963-6		Additional Contact No.
Address				
2006 Adams Ave.				
CITY	STATE	ZIP	E-MAIL	
La Grande	OR	97850	jeff@bgbsu	irveyors.com

Permit Holder's of Record Signature or Acknowledgement

<u>Each</u> 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.

PRINT OR TYPE NAME	TITLE	DATE
Theresa Stennedy	Owner	July 15-25
		July 15, 202
		,
	Theresa Skennedy	

CLAIM DESCRIPTION

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

POD Name or Number	Source	TRIBUTARY
POD #1	Wallowa Lake	Wallowa 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	Domestic	n/a	Year Round	0.05 gpm
Total Quantity of	Water Used			0.05 gpm

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:

Pump is located approx. 50 feet out in Wallowa Lake. From there it is pumped to an 80 gallon pressure tank in a pump house on the South side of the highway. From there it is conveyed via a $1 \frac{1}{4}$ " pipe to house.

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).

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.

(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.")

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	n/a	n/a	0.05 gps	Domestic	0.5	0.5

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

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A. Place of Use

Attach Claim of Beneficial Use map.

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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 NO

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

2. Pump Information:

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)
Unknown	37	0	20	0.06

4. Provide pump calculations:

No information on pump could be ascertained. No pressure gauge indicating pressure from pump to pressure tank could be found. 37 PSI is pressure reading on pressure tank. Landowner believes pump to be a standard well pump, and for purposes of calculation I use a 1 horsepower pump. Lift to place of use is estimated lift from pump to pressure tank.

1 hp (6.61)/(20+(37/0.433)*1.1)=0.06 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)
941779	941784	1 min	5 gpm

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)

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)

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

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

YES

Bulge in System / Reservoir

YES NO

NO

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

2. Storage Tank:

MATERIAL (CONCRETE SUPERCLASS METAL ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
(CONCRETE, FIBERGLASS, METAL, ETC.) Metal Pressure Tank	80	Below ground, in pump
		house

3. Bulge in System / Reservoir:

APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN
	ACRE FEET)
*	

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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?

YES 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?

YES NO

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

F. Additional notes or comments related to the system:

Water is pumped from Wallowa Lake to a pressure tank located in a structure (designated as pump house on map). Flowmeter is in line between pressure tank and water line leading to house and is located in pump house.

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SECTION 5

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CONDITIONS

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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	Oct 9, 2020		
BEGIN CONSTRUCTION (A)			System in place at time of application. Fish Screen installed Summer of 2009.
COMPLETE CONSTRUCTION (B)			
COMPLETE APPLICATION OF WATER (C)	Oct 9, 2025	July 2023	Flowmeter installed and beneficial use made.

^{*} 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

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?

YES

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 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	DAE	20 011128	Working	941,784	July 2023

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?

YES NO

If "NO", item b relating to this section may be deleted.

5. Fish Screening:

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

NO

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 NO

c. When was the fish screening installed?

DATE		By Whom	
July 2009	Ed Powers		

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 YES NO

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** <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?
 NA YES NO
 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?

YES 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?

DESCRIPTION	IF INSTALLED	IF INSTALLED, BY WHOM
(E.G. "ODFW HAS APPROVED THE BY-PASS DEVICE" OR "NO BY-PASS	(DATE)	
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.		
POD in Wallowa Lake, no bypass necessary. Fish screen is	2009	Ed Powers
sufficient to prevent fish from accessing system.		

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.)

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7. Other conditions required by permit, permit amendment final order, or extension	final or	der:
a. Was the water user required to restore the rinarian area if it was disturbed?	YES	NO

b. Other conditions?	YES	NO
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If "YES" to any of the above, identify the condition and describe the water user's actions to comply
with the condition(s):

ATTACHMENTS

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

DESCRIPTION
Fish Screen Inspection Form
Map Waiver

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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.

Map based on locations obtained by RTK GPS. Location of POD falls in Wallowa Lake and is based on an estimated 50 foot distance from shore of Wallowa Lake. Could not be directly observed.

Map Checklist

	be sure that the map you submit includes ALL the items listed below. der: Incomplete maps and/or claims may be returned.)	
4	Map on polyester film.	
L	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale assessor map)	ale of the county
	Township, Range, Section, Donation Land Claims, and Government Lots	
	rrigation, number of acres irrigated within each projected Donation Land Claims, vernment Lots, Quarter-Quarters	
	Locations of fish screens and/or fish by-pass devices in relationship to poin	nt of diversion
L	Locations of meters and/or measuring devices in relationship to point of diversion	
-	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)	
L	Point(s) of diversion or appropriation (illustrated and coordinates)	
-	Tax lot boundaries and numbers	
L	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	Received
	North arrow	
~	Legend	JUL 18 2025
	CWRE stamp and signature	OWRD





Oregon Department of Fish and Wildlife Oregon Water Resources Department

tion Form
: 1-808-264-2851
l: Theresak880@gmail.com
Right Permit Number: S 55286
tary to: Wallowa River
ty Type (gravity or pump): Pump
Coordinates (UTM):42.6529, -117.7567
(2) 在10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
11.1 6:
Intake Size:
led By: Ed Powers
of Inspection: 07/24/2023
cy: Oregon Dept of Fish & Wildlife
screen owner
on protection vater use begins ed before water use begins

pab 7/12/2011 Fish Screen Inspection Form (ODFW-WRD).doc

Received JUL 18 2025

Jeff Hsu

From:

CLARK Gerald E * WRD < Gerald.E.CLARK@water.oregon.gov>

Sent:

Friday, July 11, 2025 6:31 AM

To:

Jeff Hsu

Subject:

RE: Map Waiver

Jeff,

Thank you for your work on these two permits:

Application

Permit

S-88800

S-55286

S-88910

S-55317

As requested, your waiver to use a scale of 1'' = 200' on both of the above referenced permits is approved. Please attach a copy of this approval message to the claims.

This waiver is only for the map scale. All other mapping standards remain in place.

Thanks again for digging further into the records to determine the location of the recognized government corners.

If you have any additional questions please let me know.

Have a great day!

Gerry

Gerry Clark

Oregon Water Resources Department

Program Analyst, Certificate Section, Water Right Services Division 725 Summer Street NE, Suite A Salem, OR 97301 | Phone 503-979-9103

From: Jeff Hsu <jeff@bgbsurveyors.com> Sent: Thursday, July 10, 2025 1:14 PM

To: CLARK Gerald E * WRD < Gerald.E.CLARK@water.oregon.gov>

Subject: RE: Map Waiver

Gerry,

Ok, mapped them out to what I think is an appropriate scale and they do look better at 1"=200'. At 1"=400' things look pretty small. I did two final proofs on properties adjacent to each other. Permits S-55317 and S-55286. Wondering if I can get map waivers on these.

Thanks,

Jeff Hsu Bagett, Griffith and Blackman 541 963 6092 Received

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