CLAIM OF BENEFICIAL USE for Transfer with Multiple Changes – Surface Water



Oregon Water Resources Department

725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900

www.oregon.gov/OWRD

A fee of \$345 must accompany this form for transfers where the <u>application</u> was submitted on July 9, 1987, or later.

Enter the date the transfer application was submitted:

29 JAN 2021				
JULIAN JULI	20	IAP	11 7	031
	74	1441	v	11/1

A separate form shall be completed for each transfer.
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.
A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.
If you have questions regarding the completion of this form, please call 503-986-0900.
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
Type of Authorized Change
This Claim is being submitted for a transfer involving multiple changes. Mark all that apply: 1. Change in POD(s) or Additional POD(s) 2. Change in Place of Use 3. Change in Character of Use 4. Change in Character of Use – Reservoir
A separate section will be completed for each type of change authorized in the transfer final order.
1. File Information APPLICATION # CW-122 Received
OWRD

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAMI Willamette Valley Lanc		PHONE NO 503.864.4	
ADDRESS			
PO Box 99			
CITY	STATE	ZIP	E-MAIL
Lafayette	OR	97127	paul@creeksidevalleyfarms.com

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. **Each** transfer holder of record must sign this form.

3. Transfer holder of record (this may, or may not, be the current property owner)

TRANSFER HOLDER OF REC	CORD		
Same as above			
Address			
CITY	STATE	ZIP	

4. Date of Site Inspection:

9 SEP 2025

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

Name	DATE	Association with the Project	
Paul Kuehne	Early Sep 2025	Landowner	

6. County:

Washington	
vvasiiiiigtuii	

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

OWNER OF RECORD N/A			
ADDRESS			
CITY	STATE	ZIP	

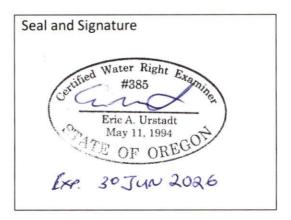
Add additional tables for owners of record as needed

Received

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.
Eric Urstadt, PE, PLS, CWRE		971.250.1	L 520	N/A
ADDRESS				
39290 NW Murtaugh Road				
CITY	STATE	ZIP	E-MAIL	
North Plains	OR	97133	ericurstadt	@hotmail.com

Transfer Holder of Record Signature or Acknowledgement

<u>Each</u> transfer 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
Paul Kelme	Paul Keuhne	Landowner	10-10-2025
,			

Received

OCT 2 4 2025

OWRD

Changes Made

Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

Change #1

New or Additional Point of Diversion

OCT 2 4 2025

Change in POD(s) or Additional POD(s)

Did the transfer order authorize a change in the points of diversion or additional points of diversion?

If "NO", this Section can be deleted.

1. New or additional point of diversion name or number:

POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)	SOURCE
POD	Tualatin River

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final?

If yes, describe below.

(e.g. "The order allowed three new/additional points of diversion. The water user only developed one of the points.")

3. Claim Summary:

NEW OR ADDITIONAL POD NAME OR #	MAXIMUM RATE AUTHORIZED IN ORDER	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
POD	0.054 CFS	1.69 CFS	N/A

System Description

Are there multiple new or additional Points of Diversion (POD)?

NO

If "YES" you will need to copy and complete Sections A, B, or C in this Section for each POD.

POD Name or Number this section describes (only needed if there is more than one):

N/A

A. POD System Information

Provide the following information concerning the point of diversion. Information provided must describe the equipment used to appropriate water from the point of diversion.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Berkely	B2-1/22PL	127538	Centrifugal	4 inch	4 inch

2. Motor Information

MANUFACTURER	HORSEPOWER
aldor	30
aldor	30

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
30	40 (estimate)	6 feet	10 feet	1.69

Provide pump calcula	ations	5
--	--------	---

See At	ttachme	nt "B: -	Pump	Calcu	lations.
--------	---------	----------	------	-------	----------

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)
N/A			

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

6. Additional notes or comments related to the system:

The pump and conveyance system is designed to water a much bigger area than the "Conservation Area" because it also delivers the applicant's portion of the conserved water.

B. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the diversion involve a gravity flow pipe?

NO

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

2

Revised 7/1/2025

C. Gravity Flow Canal or Ditch

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Does the diversion involve a gravity flow ditch or canal?

NO

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

Received

Transfer SW Multiple - Page 5 of 11

DCT 2 4 2025

WR

Change #2

Change in Place of Use

Did the transfer order authorize a change in the place of use?

YES

If "NO", this Section can be deleted.

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED	
25.6	25.6	

2. Variations:

Was the use developed differently from what was authorized by the transfer final order? NO If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

R I	1	Λ
IV	/	H

Received



Change #3

Change in Character of Use

Did the transfer order authorize a change in character of use?

NO

If "NO", this Section can be deleted. Item(s) deleted.

Change #4

Change in Character of Use - Reservoir

Did the transfer order authorize a change in character of use for a reservoir?

NO

If "NO", this Section can be deleted. Item(s) deleted.

Received
OCT 2 4 2025
OWRD

CONDITIONS

All conditions contained in the transfer final order, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

1. Time Limits:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	*THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	31 AUG 2021	
COMPLETENESS DATE FROM ORDER (C)	1 OCT 2022	1 SEP 2021

^{*} MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

2. Is there an extension final order(s)?

NO

If "NO", you may delete the following table.

If for a transfer extension order, provide the following information:

VOLUME	PAGE	DATE EXTENDED TO
N/A		

- 3. Measurement Conditions:
- a. Does the transfer final order, or any extension final order require the installation of a meter or other 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

c. Meter Information

Revised 7/1/2025

POD NAME OR#	MANUFACTURER	SERIAL#	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POD	Netafim	16- 100021869	working	1622083 gallons	Summer of 2016 for original meter, the current meter may be a replacement.

If a meter has been installed, items d through f relating to this section may be deleted.

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department?

N/A

Received

Transfer SW Multiple - Page 8 of 11

DCT 2 4 2025

WR

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
N/A		

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION	DATE INSTALLED
	(WORKING OR NOT)	
N/A		

- 4. Recording and reporting conditions
- a. Is the water user required to report the water use to the Department?

NO

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

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

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

- 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?

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

- 7. Other conditions required by the transfer final order or extension final order:
 - a. Was the water user required to restore the riparian area if it was disturbed?
 - b. Was a fishway required?

NO

c. 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):

N/A			

ATTACHMENTS

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

_

SECTION 6

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 polyester 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.

For the purpose of this Claim, the map identifying the location of the place of use does not require a new survey. The location of the place of use identified on the Claim map should be based on the original right of record at the time the transfer final order was issued. In transfers approved for additional points of diversion, the original points must be identified the map based on the original right of record at the time the transfer final order was issued.

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.

THE SECTION, DLC, AND PROPERTY LINES ARE FROM A SCALED TAX ASSESSOR MAP. GOVERNMENT LOTS (GLot) ARE FROM GENERAL LAND OFFICE RECORDS.	

Received

OCT 2 4 2025

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 <mark>polyester</mark> 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
\boxtimes	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 or appropriation
\boxtimes	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
\boxtimes	Point(s) of diversion or appropriation (illustrated and coordinates)
\boxtimes	Tax lot boundaries and numbers
\boxtimes	Quarter-Quarters illustrated and named (NE NE, NW NE, etc.)
\boxtimes	Source illustrated if surface water
\boxtimes	Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
\boxtimes	Application and permit number or transfer number
\boxtimes	North arrow
\boxtimes	Legend
\boxtimes	CWRE stamp and signature

Received

mr 2 4 2025

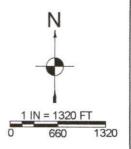


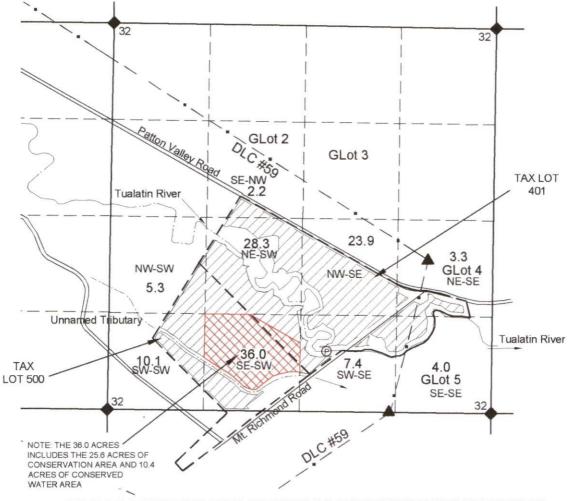
CWRE stamp and signature

MAP FOR

Claim of Beneficial Use

S32, T1S, R4W, WASHINGTON COUNTY CW-122 (Allocation of Conserved Water)





THE POD IS A MOBILE POD AND IS 850' NORTH AND 2660 'WEST FROM THE SE CORNER S32. THE METER IS 65 FEET S40°E FROM THE POD AND IS ON THE EAST SIDE OF A SHED.

NOTES

- THIS MAP IS NOT INTENDED TO PROVIDE LEGAL DIMENSIONS OR LOCATIONS OF PROPERTY OWNERSHIP LINES.
- THE SECTION, DLC, AND PROPERTY LINES ARE FROM A SCALED TAX ASSESSOR MAP.
- GOVERNMENT LOTS (GLot) ARE FROM GENERAL LAND OFFICE RECORDS.
- WATER CONVEYANCE PIPELINES ARE NOT SHOWN; ALL ARE WITHIN THE PROPERTY OWNERSHIP.
- THERE ARE TWO FARM SHEDS IN THE VICINTY OF THE POD, THE POD IS NORTHERLY OF THE WEST SHED, AND THE METER IS ON THE EAST SIDE OF THE EAST SHED. THE PUMP AND FISH SCREEN ARE MOBILE; AND THEREFORE THEIR POSITION WILL CHANGE.

LEGEND



DONATION LAND CLAIM (DLC) CORNER SECTION OR QUARTER CORNER PROPOSED POINT OF DIVERSION (POD)

— — — QUARTER-QUARTER LINE
— — DLC LINE
— TAX LOT LINE
— SECTION LINE



CONSERVED WATER AREA

CONSERVATION AREA - 25.6 ACRES

Received

OWAD



EXPIRES 06/30/2026

ASPEN RURAL LAND CONSULTING

> ERIC URSTADT, PE, PLS 971-250-1520 SEP 2025 WVL-Patton6D

Pump Capacity Calculation Sheet

POD

using Department designed formula:

(hp)(efficiency) / (lift + psi head) = capacity in cfs

Efficiency:

Centrifugal = 6.61 Turbine = 7.04

Data Entry (fill in underlined blanks)

$$\begin{array}{ccc} \text{HP} = & 30 \\ \text{Efficiency} = & 6.61 \\ \text{Lift} = & 16 \\ \text{PSI} = & 40 \\ \end{array}$$

6 ft to pump + 10 ft to fields estimated

Results Calculated

(hp)(efficiency) = 198.3 Head based on psi = 101.6 Total dynamic head = 117.6

(head + lift)

Pump Capacity = 1.69 feet per second

nct 2 4 2025 OWRD



Water Resources, Water Rights, Land Surveying, Engineering, Land Use Planning

ERICURSTADT@HOTMAIL.COM 971-250-1520 (MOBILE)

Rural Land Consulting

Water Resources Department Attn: Certificate Section 725 Summer Street NE, Ste. A Salem, OR, 97301

12 SEP 2025

Subject: Claim of Beneficial Use for CW-122

To Whom It May Concern,

Enclosed is a Claim of Beneficial Use (COBU) for CW-122 together with the following attachments:

- A. COBU Map
- B. Pump Calculation
- C. A check made out to "Oregon Water Resources Department" for \$345.00.

Please let me know if there are any concerns or you need any more information.

Respectfully,
Aspen Rural Land Consulting

Eric Urstadt, PE, PLS

Received

OCT 2 4 2025

OWAD