

# CLAIM OF BENEFICIAL USE for Transfer with Multiple Changes - Groundwater



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 \$345 must accompany this form for transfers where the application was submitted on July 9, 1987, or later.

Enter the date the transfer application was submitted:

October 16, 2017

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 7" 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>

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## SECTION 1 GENERAL INFORMATION Type of Authorized Change

This Claim is being submitted for a transfer involving multiple changes.

YES

Mark all that apply:

- |  |   |
|--|---|
| 1. <input checked="" type="checkbox"/> Change in POA(s) or Additional POA(s) | 2. <input checked="" type="checkbox"/> Change in Place of Use |
| 3. <input type="checkbox"/> Change in Character of Use                       |   |

*A separate section will be completed for each type of change authorized in the transfer final order.*

### 1. File Information

APPLICATION #

T-12762

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME <b>AMARAL CHAPMAN RANCH LLC</b>		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS <b>4160 SUISUN VALLEY RD STE E-751</b>			
CITY <b>FAIRFIELD</b>	STATE <b>CA</b>	ZIP <b>94534</b>	E-MAIL

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 RECORD <b>VALE RANCHES, LLC</b>		
ADDRESS <b>1606 AMARAL CR</b>		
CITY <b>FAIRFIELD</b>	STATE <b>CA</b>	ZIP <b>94534</b>

4. Date of Site Inspection:

<b>AUGUST 17, 2021</b>
------------------------

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Nick Moxley</b>	<b>8/17/2021</b>	<b>Lessee</b>

6. County:

<b>Klamath</b>
----------------

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		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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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 <b>Scott N. King</b>		PHONE No. <b>208 872-9527</b>	ADDITIONAL CONTACT No.
ADDRESS <b>412 E Parkcenter Blvd, Suite 100</b>			
CITY <b>Boise</b>	STATE <b>ID</b>	ZIP <b>83706</b>	E-MAIL <b>Scott.king@hdrinc.com</b>

### Transfer Holder of Record Signature or Acknowledgement

**Each** 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
	Gregory S. Amara	Manager Amara Chapman Ranch LLC	October 25 2025

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### SECTION 3

#### Changes Made

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

#### Change #1

##### Change in POA(s) or Additional POA(s)

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

**YES**

**CLARIFICATION: The change in POAs appears to be an undescribed clarification to the POAs for certificate 87990. All three POAs are listed as sources for both certificate 87990 and 87991. There is no physical change to the POAs, no new POA, and no additional POA added to either certificate.**

*If "NO", this Section can be deleted.*

#### 1. New or additional point of appropriation name or number:

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
<b>Well 1</b>	<b>KLAM 2368</b>		<b>Ground Water</b>
<b>Well 2</b>			<b>Ground Water</b>
<b>Well 3</b>	<b>KLAM 10080</b>		<b>Ground Water</b>

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

If well logs are available, items A and B below can be deleted

#### A. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
<b>10 inch</b>		<b>408 ft</b>				

B. In addition to the information requested in item "A" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

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2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final? **NO**

If yes, describe below.

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

--

3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
none			

System Description

Are there multiple new or additional Points of Appropriation (POA)? **NO**

**All POAs are existing and are listed on both original certificates 87990 and 87991.**

If "YES" you will need to copy and complete either Section A or B in this Section for each POA.

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

--

A. POA System Information

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

1. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE

2. Motor Information:

MANUFACTURER	HORSEPOWER

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**3. Theoretical Pump Capacity – Pump at Well:**

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO GROUND SURFACE (THE DEPTH TO WATER FROM THE GROUND SURFACE MEASURED AT THE WELL DURING PUMPING)	LIFT TO PLACE OF USE (THE LIFT FROM THE GROUND SURFACE AT THE WELL TO THE PLACE OF USE)	TOTAL PUMP OUTPUT (IN CFS)

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

**4. Provide pump calculations:****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)

**6. Theoretical Pump Capacity – Pump at Sump:**

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO GROUND SURFACE (THE LIFT FROM THE WATER SURFACE TO THE PUMP)	LIFT TO PLACE OF USE (THE LIFT FROM THE PUMP TO THE PLACE OF USE)	TOTAL PUMP OUTPUT (IN CFS)

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

**7. Provide pump calculations:****8. 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)

**9. Additional notes or comments related to the system:****B. Groundwater Source Information (Well and Sump)****1. Is the appropriation from a dug well (sump)?**

Revised 7/1/2025

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

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## 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
<b>206.6 (#87990)</b>	<b>206.6</b>
<b>199.4 (#87991)</b>	<b>199.4</b>

If the new use(s) was not irrigation or nursery:

NEW USE(S)	WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER? (INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)
	<b>NA</b>
	<b>NA</b>

#### 2. Variations:

Was the use developed differently from what was authorized by the transfer final order? **YES**

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.")*

**Very slight acreage per quarter-quarter differences between application and examination in six quarter-quarters. See claim of beneficial use map and attached comparison tables for acres per quarter-quarter differences.**

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**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.*

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SECTION 4  
CONDITIONS

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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	DATE THE AUTHORIZED CHANGES WERE COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	<b>April 30, 202</b>	
COMPLETENESS DATE FROM ORDER (C)	<b>October 1, 2021</b>	<b>August 17, 2021</b>

\* 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.

## 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? **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 appropriation.

## b. Has a meter been installed?

YES

## c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
<b>Well 2</b>	<b>Seametrics AG90-0800</b>	<b>0420077 0</b>	<b>Working</b>	<b>18.032667 af, 755 gpm</b>	<b>unknown</b>
<b>Well 2 8in</b>	<b>Seametrics AG90-0800</b>	<b>0420076 5</b>	<b>Working</b>		<b>unknown</b>
<b>Well 2 10in</b>	<b>Seametrics AG90-1000</b>	<b>0620190 00044</b>	<b>Working</b>		<b>unknown</b>
<b>Well 1</b>	<b>Seametrics AG3000-1200</b>	<b>0620181 9</b>	<b>Working</b>		<b>unknown</b>

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

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



5. Other conditions required by the transfer final order or extension final order:

- a. Were there special well construction standards? **NO**
- b. Was submittal of a ground water monitoring plan required? **NO**
- c. Other conditions? **YES**

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

**6. Water shall be acquired from the same aquifer (water source) as the original points of appropriation.**

**No change in original points of appropriation.**

**7. The former places of use of the transferred rights shall no longer receive water under the right. Condition accomplished.**

**8. Full beneficial use on or before October 1, 2021. Condition accomplished.**

## SECTION 5 ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Map	Claim of Beneficial Use Map
Well Driller Reports	Well Driller Reports for Well 1 and Well 3. A driller report could not be located for Well 2.
Place of Use Tables	Place of Use Tables from Transfer Final Order with hand-written comparisons to COBU acreage findings.
COBU Exam Photos	Photos from the COBU field examination.

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## 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 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.

The changes that were authorized under the transfer final order must be mapped based on the developed locations; new or additional points of appropriation and place of use.

In cases where the order involved additional points of appropriation, the additional points should be mapped based on their developed locations. The original points of appropriation should be mapped based on the original right of record at the time the transfer final order was issued.

In cases where the order involved changing the place of use for a portion of a water right, the portion of the place of use being changed should be mapped based on the developed location. If the transfer also included portions of the place of use that were not being modified, but were receiving a new or additional point of appropriation, the place of use for those lands should be mapped 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.

**Survey method based on aerial images. Source is USDA NAIP, date 7/15/2020.**

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## 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 or appropriation
- ☒ Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- ☒ Point(s) of diversion or appropriation (illustrated and coordinates)
- ☒ Tax lot boundaries and numbers
- ☒ Quarter-Quarters illustrated and named (NE NE, NW NE, etc.)
- ☐ 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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# Attachment A Map

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# **Attachment B**

## **Well Driller Reports**

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WATER WELL REPORT  
Form No. 0370 KLAWA 23/68  
STATE OF OREGON G1948  
(11) WELL TESTS

State Well No. 37/4 E-15 N/D

State Permit No. \_\_\_\_\_

**(11) WELL TESTS:**

**Drawdown** is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☐ No If yes, by whom? \_\_\_\_\_

Bailer test	gal./min. with	ft. drawdown after	hrs.
-------------	----------------	--------------------	------

Artesian flow	g.p.m.	Date
---------------	--------	------

Temperature of water      Was a chemical analysis made? ☐ Yes   ☐ No

**(12) WELL LOG:**

Diameter of well ..... inches.

Depth drilled	ft.	Depth of completed well	ft.
---------------	-----	-------------------------	-----

**Formation:** Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Top Soil	0	2
Sandstone	2	45
Rock	45	245
Sandstone	245	285
Rock	285	458

Water in bl. kn lvs at  
bottom 16' of well

**(5) TYPE OF WELL:**

Domestic	<input type="checkbox"/>	Industrial	<input type="checkbox"/>	Municipal	<input type="checkbox"/>	Rotary	<input type="checkbox"/>	Driven	<input type="checkbox"/>
						Cable	<input type="checkbox"/>	Jetted	<input type="checkbox"/>
Irrigation	<input type="checkbox"/>	Test Well	<input type="checkbox"/>	Other	<input type="checkbox"/>	Dug	<input type="checkbox"/>	Bored	<input type="checkbox"/>

Threaded ☐ Welded ☐

17 " Diam. from 0 ft. to 32 ft. Gage .....  
" Diam. from ..... ft. to ..... ft. Gage .....  
" Diam. from ..... ft. to ..... ft. Gage .....

Perforated? ☐ Yes ☐ No

Type of perforator used

SIZE of perforations		in. by	in.
perforations from	ft. to		ft.
perforations from	ft. to		ft.
perforations from	ft. to		ft.
perforations from	ft. to		ft.
perforations from	ft. to		ft.

Well screen installed ☐ Yes ☐ No

Manufacturer's Name .....

Type ..... Model No. ....

..... Slot size ..... Set from ..... ft. to ..... ft.

..... Slot size ..... Set from ..... ft. to ..... ft.

**(13) PUMP:**

Was well gravel packed? ☐ Yes ☐ No Size of gravel: .....  
Gravel placed from ..... ft. to ..... ft.  
Was a surface seal provided? ☐ Yes ☐ No To what depth? ..... ft.  
Material used in seal—

Manufacturer's Name \_\_\_\_\_  
Type: Thurbin H.P. 125

Did any strata contain unusable water? ☐ Yes ☐ No

Type of water?	Depth of strata
Method of sealing strata off	

**(10) WATER LEVELS:**

Static level	124	ft. below land surface	Date
Artesian pressure		lbs. per square inch	Date

Log Accepted by:

[Signed] \_\_\_\_\_ Date \_\_\_\_\_, 19\_\_\_\_  
(Owner)

**Well Driller's Statement:**

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME W L - Hartley & Son  
(Person, firm, or corporation) (Type or print)

**Address** .....

Driller's well number .....

[Signed] \_\_\_\_\_  
(Well Driller)

License No. 164 Date ..... 19.....

(USE ADDITIONAL SHEETS IF NECESSARY)



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KLAM 10080

SEP - 4 1990

Well 3

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STATE OF OREGON

WATER WELL REPORT  
(as required by ORS 537.765)WATER RESOURCES DEPT  
SALEM, OREGON

(START CARD) # 15290

## (1) OWNER: Well Number: \_\_\_\_\_

Name Jeld Wen Inc.Address P.O. Box 1883City Klamath Falls State Ore. Zip 97601

## (2) TYPE OF WORK:

☒ New Well ☐ Deepen ☐ Recondition ☐ Abandon

## (3) DRILL METHOD

☐ Rotary Air ☐ Rotary Mud ☒ Cable☐ Other \_\_\_\_\_

## (4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation☐ Thermal ☐ Injection ☐ Other \_\_\_\_\_

## (5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes ☐ No ☒ Depth of Completed Well 577 ft.Explosives used ☐ ☒ Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
20"	0	19' Cement	0' 19'	30 sks	
15 1/2"	19	205			
10"	205	577			

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E☐ Other \_\_\_\_\_

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

## (6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	16"	± 1'	19'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 19'

## (7) PERFORATIONS/SCREENS:

☐ Perforations Method \_\_\_\_\_☐ Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

## (8) WELL TESTS: Minimum testing time is 1 hour

☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min \_\_\_\_\_ Drawdown \_\_\_\_\_ Drill stem at \_\_\_\_\_ Time \_\_\_\_\_

2100	45'		1 hr.
			2 hr.

Temperature of water 48° Depth Artesian Flow Found \_\_\_\_\_Was a water analysis done? ☐ Yes By whom \_\_\_\_\_Did any strata contain water not suitable for intended use? ☒ Too little☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other \_\_\_\_\_Depth of strata: 162'

## (9) LOCATION OF WELL by legal description:

County Klamath Latitude \_\_\_\_\_ Longitude \_\_\_\_\_Township 37 S N or S. Range 11 1/2 E E or W, WM.Section 22 SE 1/4 NW 1/4

Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Street Address of Well (or nearest address)

End of Egert Rd. Yonna Valley

## (10) STATIC WATER LEVEL:

119 ft. below land surface. Date 3/5/90

Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

## (11) WATER BEARING ZONES:

Depth at which water was first found 162'

From	To	Estimated Flow Rate	SWL
22.6	24.6		119
34.5	41.2		119
46.0	49.0	900 Gals	119
55.8	57.6	1200 "	119

## (12) WELL LOG:

Ground elevation 4200 ±'

Material	From	To	SWL
Top Soil	0	1	
Sand stone	1	5	
Clay-br.	5	9	
Clay - drk. grey	9	42	
Sandy clay-br.	42	46	
Sand stone	46	62	
Rock hard-grey	62	90	
Cinder rock - red	90	103	
Rock hard-grey	103	128	
Rock lava-br.	128	135	
Sand stone-hard	135	145	
Rock hard grey	145	156	
Alternate layers of Rock/5st	156	205	119'
layers of rock/sand stone/clay	205	260	
Sandy clay-br./sandstone	260	320	
Sand stone-dark	320	429	119'
Sandy hard clay	429	450	
Rock-lava	450	485	119'
Sand hard clay	485	501	
Sand stone black	501	524	
Rock crevassed	524	577	119'

Date started 12/18/89 Completed 8/10/90

## (unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

WWC Number \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

## (bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. all work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 807Signed Clayde E. Hill Date 8/25/90



IF IT'S A PUMP, PHONE 884-9776

ARTHUR E. FARR, OWNER

# VALLEY PUMP & EQUIPMENT CO.

7364 SOUTH SIXTH ST.

KLAMATH FALLS, OREGON 97601

CUSTOMER

Thomas Lumber

South Well #2 Chapman

DATE: Dec. 3 1986 19

ADDRESS

P O Box 1883

Klamath Falls Oregon 97601

Brenda Ranch

Test pump 6" column 10" bowls 10" hole

Setting 180' 170' airline

TIME

PUMPING LEVEL

GPM

TEMPERATURE

9:15 Started pumping - water a little brown

9:15 160 1100 48

9:25 156 1400 Increased speed - water colored

9:30 156 1500 Water clear

9:40 151 1500 Water clear

9:50 151 1500 Water clear

9:55 147 1300 Slowed

10:05 144 1100 Slowed

10:15 Surged well - water little grey and clearing

10:20 Stopped pumping

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## Chapman Ranch Well Record Findings:

- Well 1: This well was found correctly documented and recorded in the SWSW, Section 15, T37S, R11.5E.
- Well 2: This well is located as authorized in the SWSE, Section 22, T37S, R11.5E. A well report was not found, however attached is a pump test conducted on Well 2 by Valley Pump & Equipment Co. in 1986. On September 20, 2017, JW Kerns conducted another pump test on Well 2 and verified a 10" diameter well, 408' deep as described in the water right records. JW Kerns test pumped the well for 3 hours and had results that closely paralleled those found by Valley Pump in 1986.
- Well 3: The well report correctly documents the SENW, Section 22, T37S, R11.5E as the well location, however the well report was found in R11E in the Department's well records database.

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# **Attachment C**

## **Place of Use Tables**

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7. Transfer Application T-12762 also proposes to change the place of use of the right to:

IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
37 S	11.5 E	WM	16	SW NE	14.9
37 S	11.5 E	WM	16	SE NE	0.6
37 S	11.5 E	WM	16	SE NW	1.0
37 S	11.5 E	WM	16	NE SW	8.6
37 S	11.5 E	WM	16	SE SW	0.2
37 S	11.5 E	WM	16	NE SE	10.8
37 S	11.5 E	WM	16	NW SE	40.0
37 S	11.5 E	WM	16	SW SE	6.0
37 S	11.5 E	WM	22	SW NE	3.0
37 S	11.5 E	WM	22	NE NW	0.5
37 S	11.5 E	WM	22	SW NW	0.5
37 S	11.5 E	WM	22	SE NW	22.3
37 S	11.5 E	WM	22	NE SW	4.5
37 S	11.5 E	WM	22	NW SW	5.5
37 S	11.5 E	WM	22	NW SE	18.5
37 S	11.5 E	WM	22	SW SE	10.6
37 S	11.5 E	WM	22	SE SE	9.0
37 S	11.5 E	WM	26	NW NW	1.5
37 S	11.5 E	WM	26	SW NW	17.3
37 S	11.5 E	WM	26	NW SW	9.5
37 S	11.5 E	WM	27	NE NE	6.4
37 S	11.5 E	WM	27	NW NE	6.5
37 S	11.5 E	WM	27	SE NE	8.9
Total					206.6

8. The second right to be transferred is as follows:

**Certificate:** 87991 in the name of RLF KLAMATH PROPERTIES, LLC (perfected under Permit G-1790)

**Use:** IRRIGATION of 199.4 ACRES

**Priority Date:** MARCH 8, 1961

**Rate:** 2.49 CUBIC FEET PER SECOND

**Limit/Duty:** The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second, or its equivalent for each acre irrigated, and shall be further limited to a diversion of not to exceed 3.0 acre-feet per acre for each acre irrigated during the irrigation season of each year.

**Source:** THREE WELLS, tributary to BUCK CREEK BASIN (LOST RIVER BASIN)

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**Authorized Points of Appropriation:**

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
37 S	11.5 E	WM	15	SW SW	WELL NO.1 (ORIGINAL) - 450 FEET NORTH AND 390 FEET EAST FROM THE SW CORNER OF SECTION 15
37 S	11.5 E	WM	22	SE NW	WELL NO.2 - 850 FEET NORTH AND 530 FEET EAST FROM THE S1/4 CORNER OF SECTION 22
37 S	11.5 E	WM	22	SW SE	WELL NO.3 - 2000 FEET SOUTH AND 1710 FEET EAST FROM THE NW CORNER OF SECTION 22

**Authorized Place of Use:**

IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
37 S	11.5 E	WM	15	SW SW	17.4
37 S	11.5 E	WM	15	SE SW	0.1
37 S	11.5 E	WM	16	NE SE	0.3
37 S	11.5 E	WM	16	SE SE	3.6
37 S	11.5 E	WM	22	SW NE	13.6
37 S	11.5 E	WM	22	NE NW	17.2
37 S	11.5 E	WM	22	NW NW	22.8
37 S	11.5 E	WM	22	SW NW	1.1
37 S	11.5 E	WM	22	SE NW	28.4
37 S	11.5 E	WM	22	NE SW	40.0
37 S	11.5 E	WM	22	NW SW	7.6
37 S	11.5 E	WM	22	SE SW	13.2
37 S	11.5 E	WM	22	NE SE	0.3
37 S	11.5 E	WM	22	NW SE	32.8
37 S	11.5 E	WM	22	SW SE	1.0
Total					199.4

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9. Transfer Application T-12762 proposes to change the place of use of the right to:

IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
37 S	11.5 E	WM	15	NW SW	0.2
37 S	11.5 E	WM	15	SW SW	17.8
37 S	11.5 E	WM	16	NE SE	1.2
37 S	11.5 E	WM	16	SE SE	33.8
37 S	11.5 E	WM	21	NE NE	11.7
37 S	11.5 E	WM	21	SE NE	0.3
37 S	11.5 E	WM	22	NE NW	10.9
37 S	11.5 E	WM	22	NW NW	40.0
37 S	11.5 E	WM	22	SW NW	13.4
37 S	11.5 E	WM	22	SE NW	1.8
37 S	11.5 E	WM	22	NE SW	33.1
37 S	11.5 E	WM	22	NW SW	3.7
37 S	11.5 E	WM	22	SW SW	1.8
37 S	11.5 E	WM	22	SE SW	18.4
37 S	11.5 E	WM	22	NW SE	2.7
37 S	11.5 E	WM	22	SW SE	7.6
37 S	11.5 E	WM	27	NW NE	0.5
37 S	11.5 E	WM	27	NE NW	0.5
Total					199.4

0.0  
17.7

-0.2  
-0.1

0.03

18.6

7.7

+1.2  
+1.1

+0.03

**Attachment D**  
**COBU Exam Photos**

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Figure 1: Well 1 (North Well).

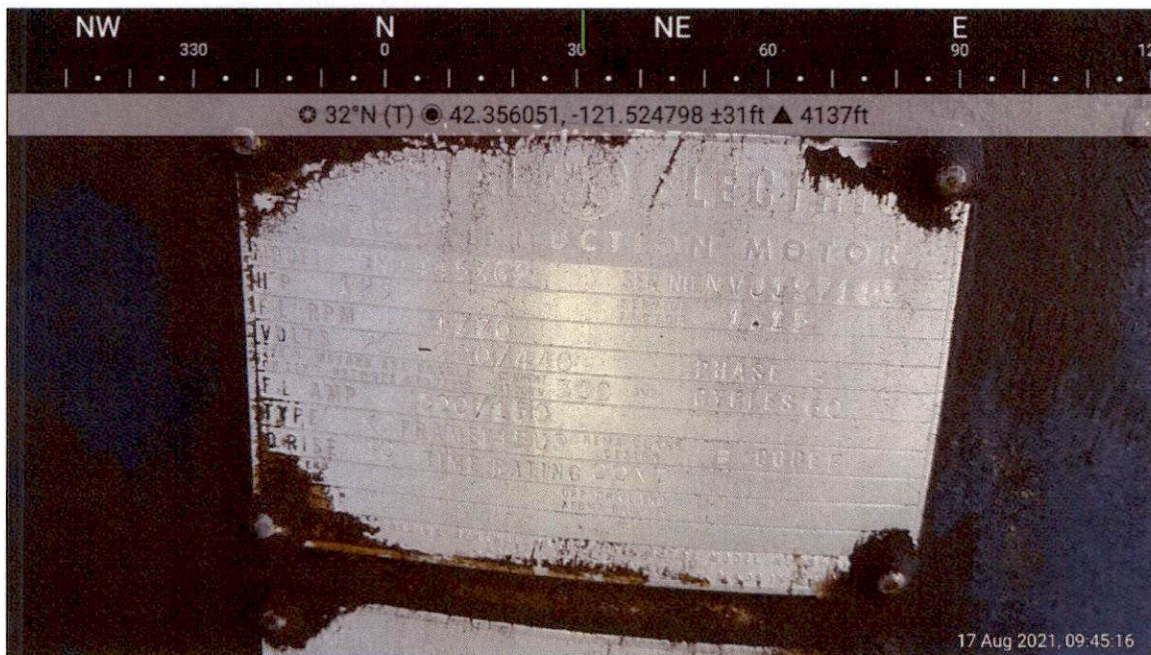


Figure 2: Well 1 Motor Nameplate (125-hp).



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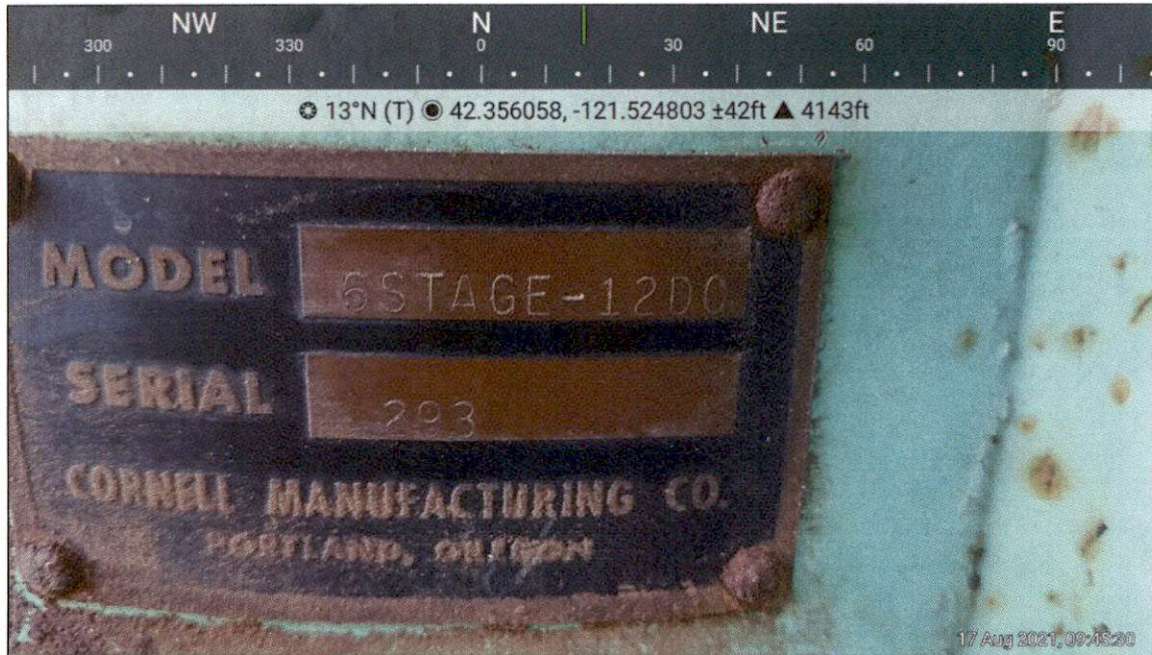


Figure 3: Well 1 Pump Nameplate.

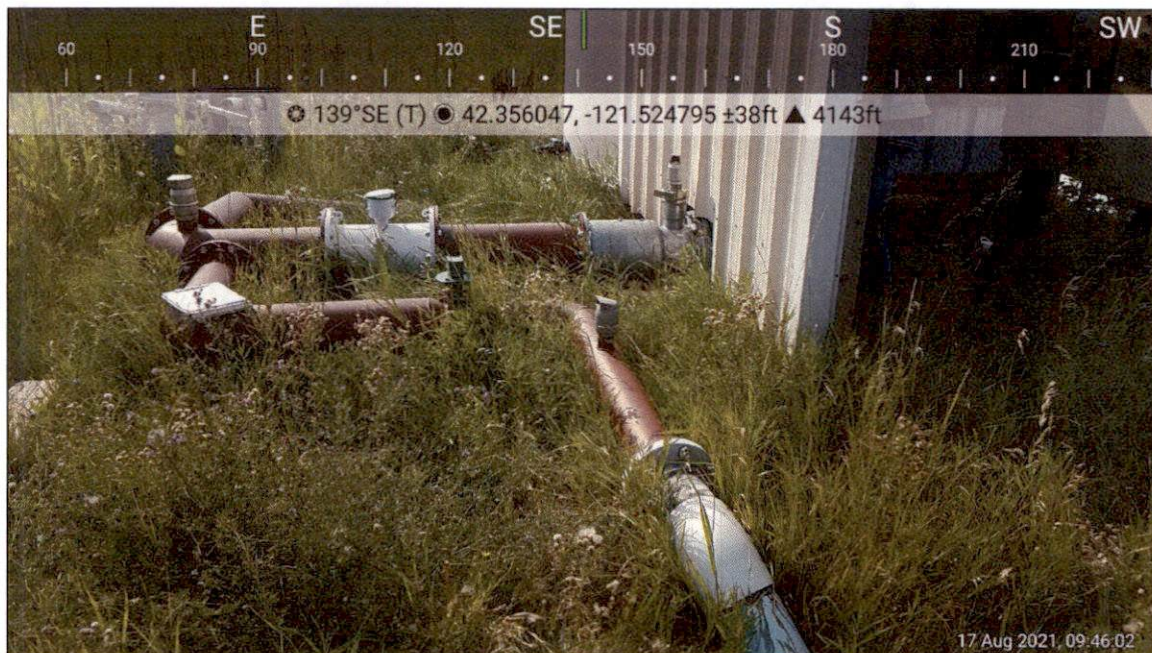


Figure 4: Well 1 discharge piping network and flowmeter.



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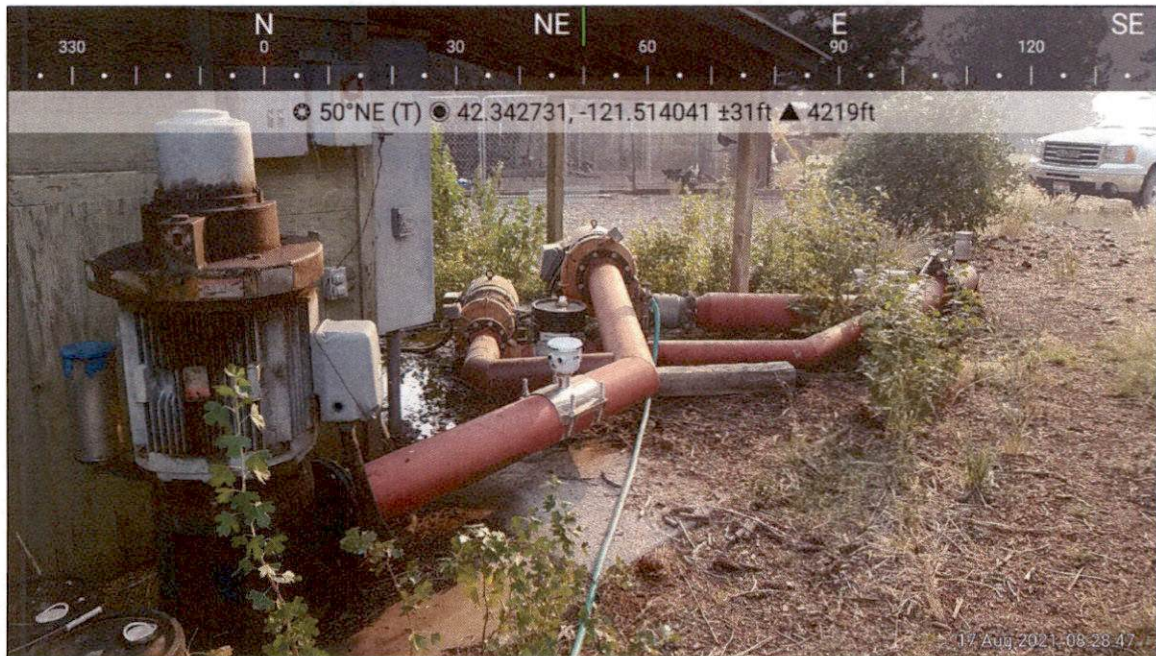


Figure 5: Well 2 (South by Home). Flowmeter in discharge pipeline. Two booster pumps.



Figure 6: Well 2 motor nameplate (60-hp).



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Figure 7: 25-hp booster nameplate at Well 2.

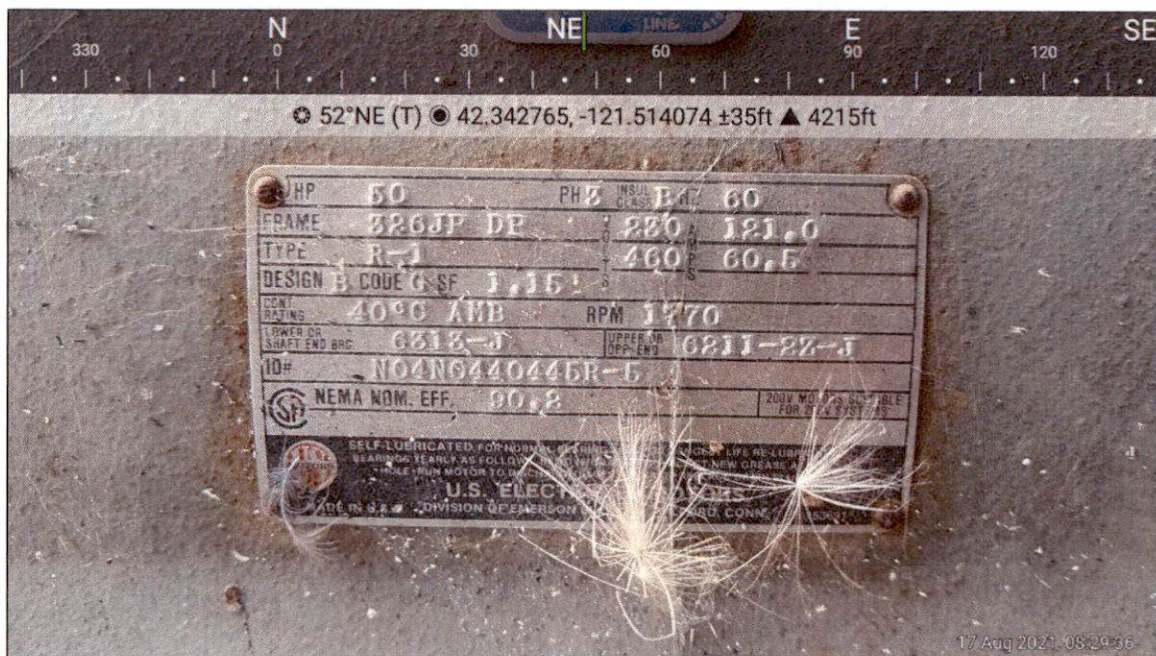


Figure 8: 50-hp booster nameplate at Well 2.



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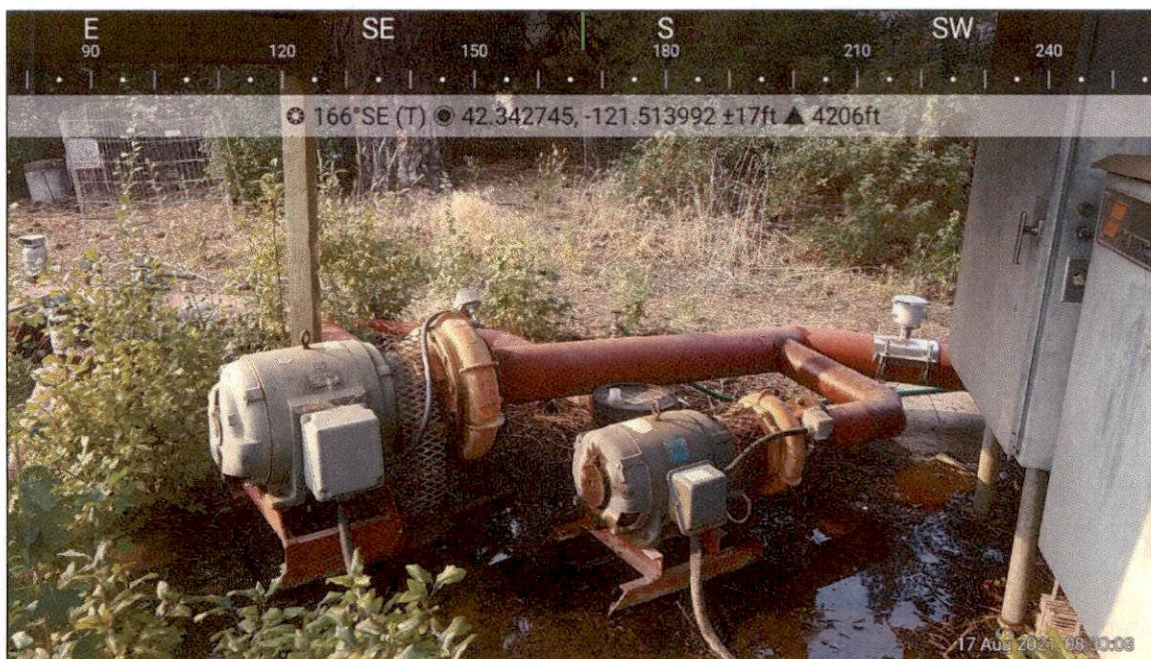


Figure 9: Boosters at Well 2.



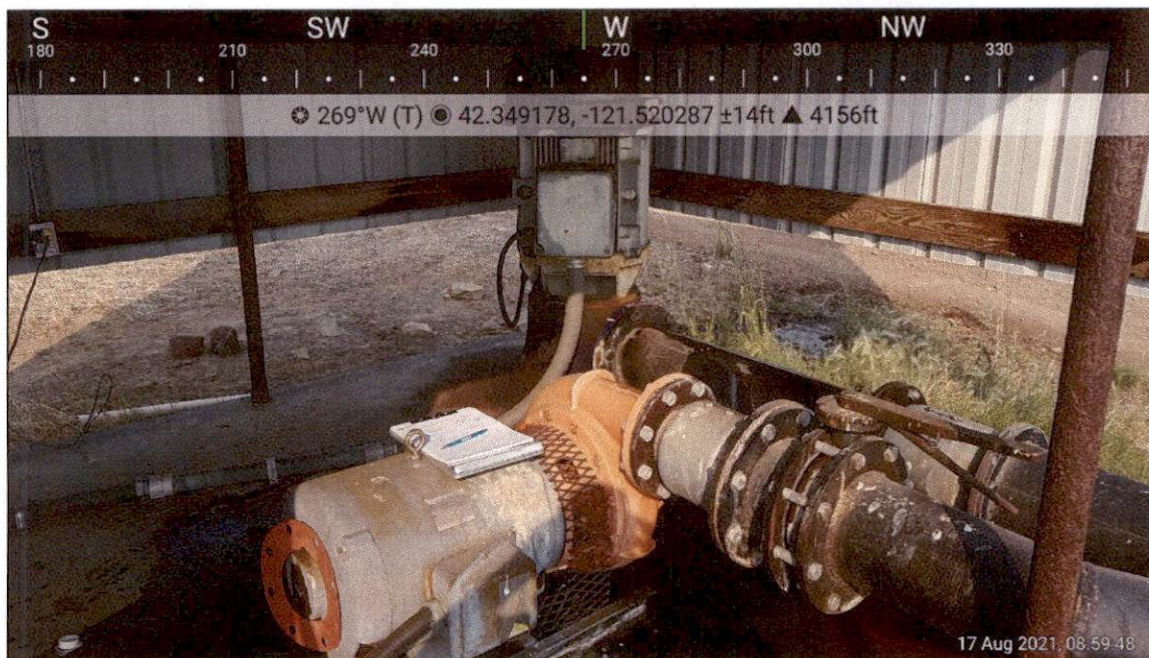


Figure 10: Well 3 (middle well). Vertical turbine well pump in back and centrifugal booster in front.

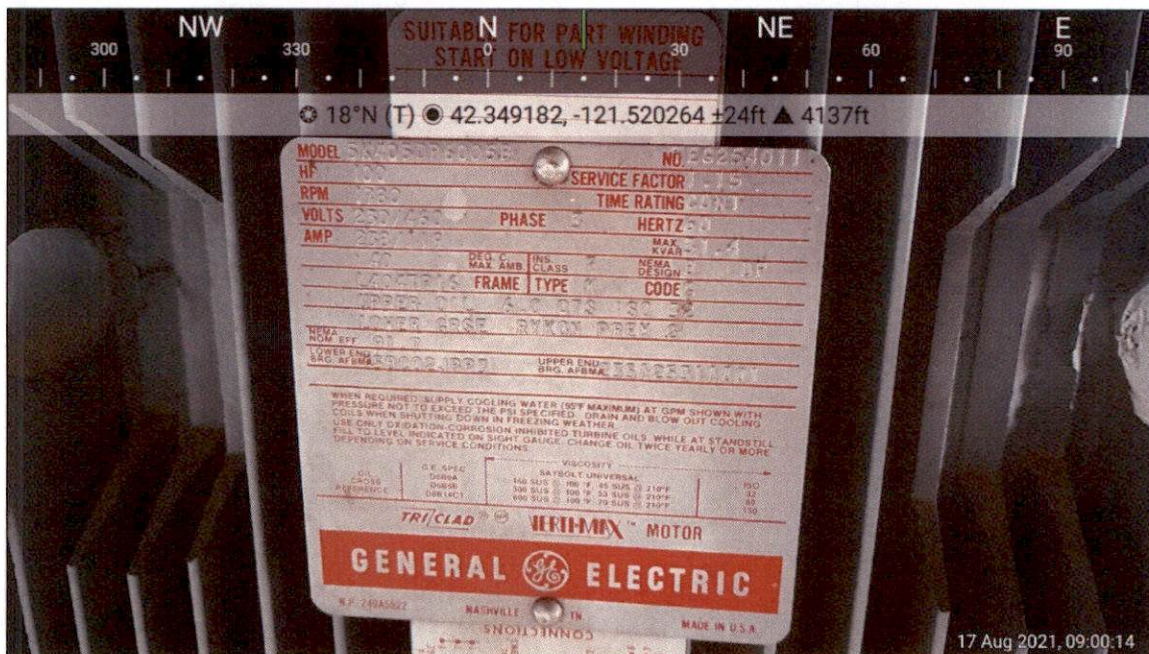


Figure 11: Well 3 motor nameplate (100-hp).



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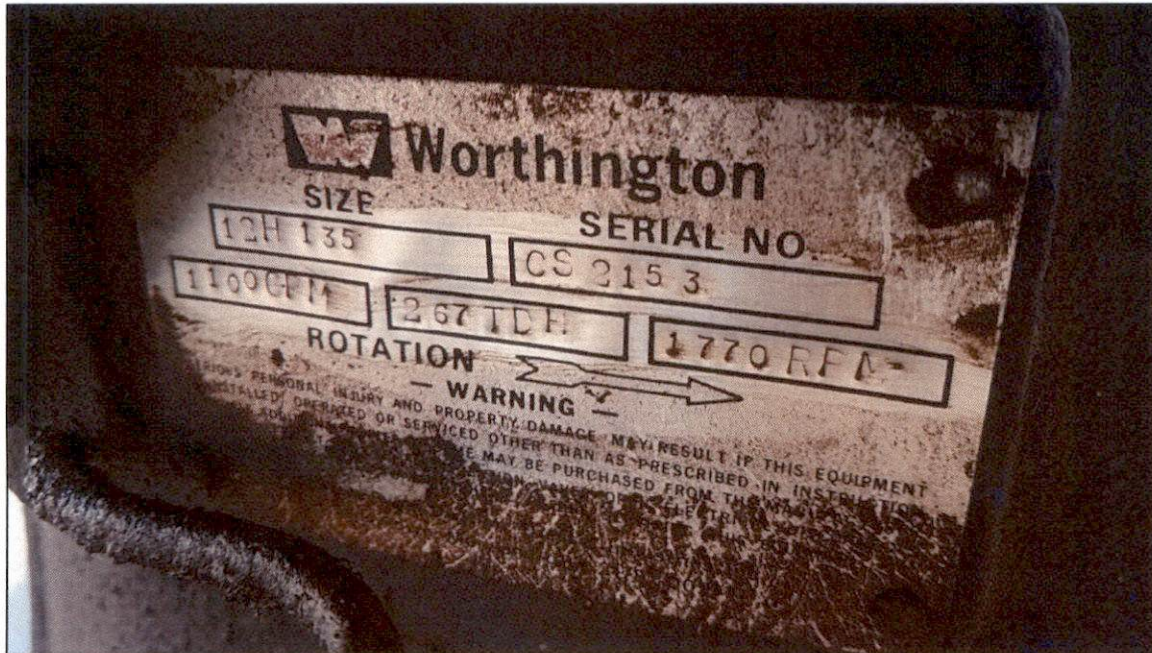


Figure 12: Worthington vertical turbine pump nameplate at Well 3.



Figure 13: 50-hp booster motor nameplate at Well 3.



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Figure 14: Booster pump nameplate at Well 3.

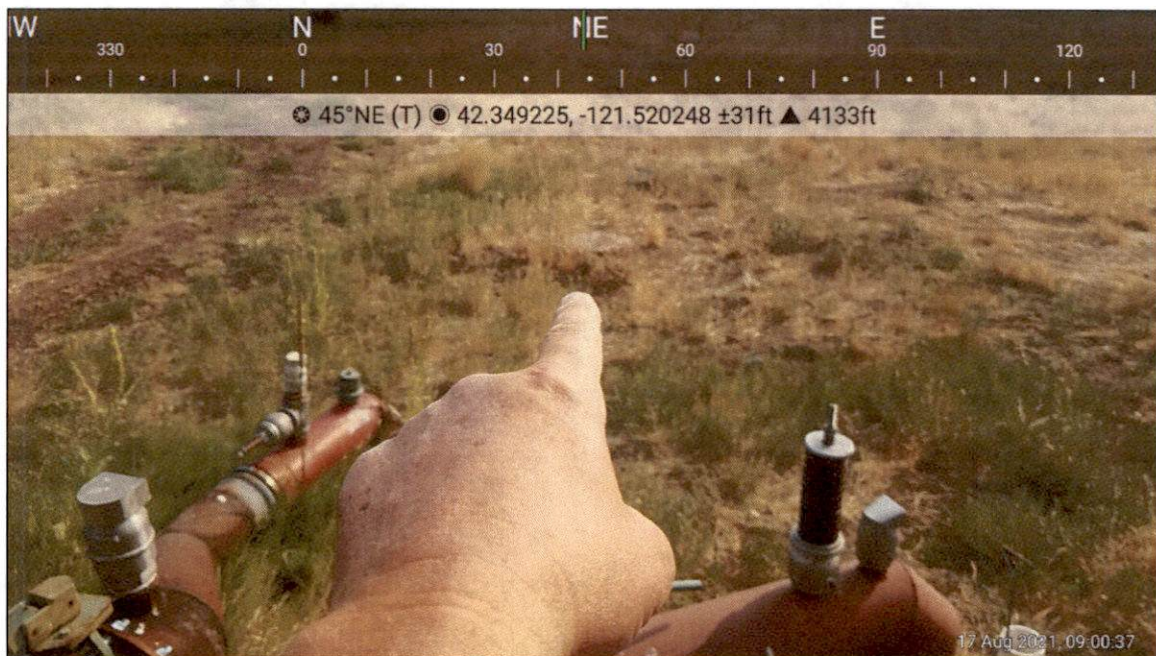


Figure 15: Well 3 north flowmeter located in CMP vault.

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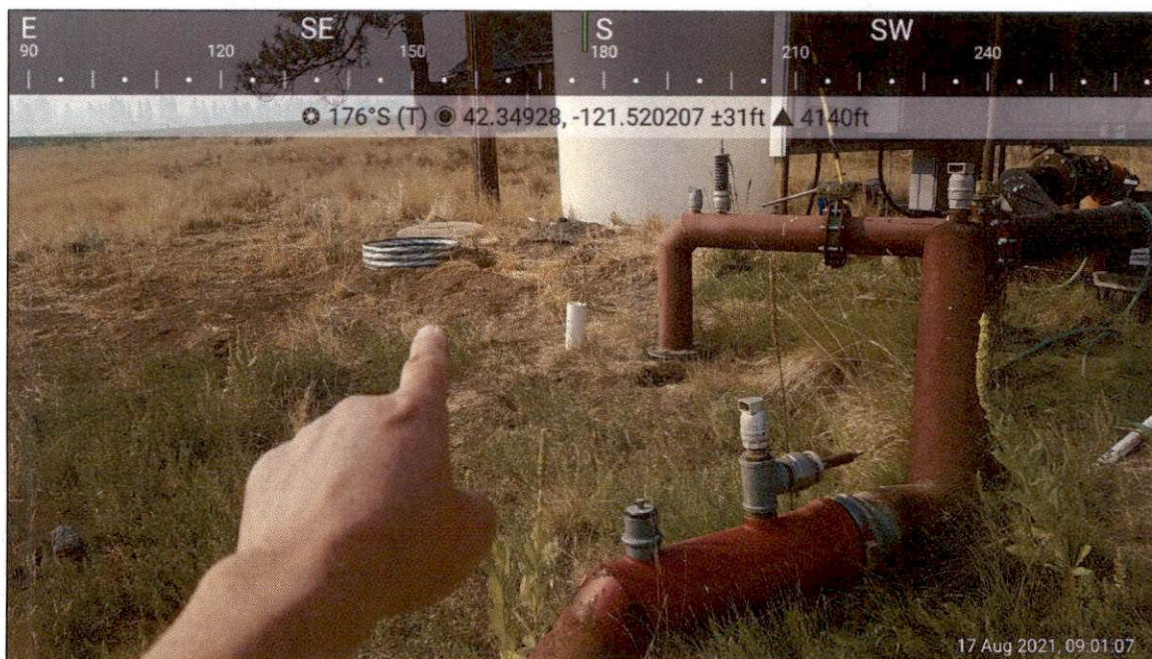


Figure 16: Well 3 south flowmeter located in CMP vault.





October 22, 2025

Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem, OR 97301

**Subject: Claim of Beneficial Use Report for Transfer T-12762**

Enclosed please find a claim of beneficial use report for the above-referenced transfer and check no. 1116 in the amount of \$345 for the claim fee. If you have questions or need additional information, please let me know.

Subsequent to this submittal, I will no longer be available at HDR Engineering. Please reach me by email at [snking@mindspring.com](mailto:snking@mindspring.com), by phone at 208-859-1306, or by post at:

IDWR Western Regional Office  
2735 W Airport Way  
Boise, Idaho 83705-5082

Sincerely,

HDR Engineering, Inc.

  
Scott N. King, P.E.  
Project Manager

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Cc: Amaral Chapman Ranch

Project: 10339441