

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

**2/24/2015**

**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>

**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 type="checkbox"/> Change in POD(s) or Additional POD(s)            | 4. <input type="checkbox"/> Change in Character of Use             |
| 2. <input checked="" type="checkbox"/> Change in POA(s) or Additional POA(s) | 5. <input type="checkbox"/> Change in Character of Use – Reservoir |
| 3. <input checked="" type="checkbox"/> Change in Place of Use                |  |

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

**1. File Information**

APPLICATION #

**T-11988**

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**2. Property Owner (current owner information)**

APPLICANT/BUSINESS NAME <b>Double J Ranch, LLC</b>		PHONE NO. <b>208-821-4378</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>PO Box 766</b>			
CITY <b>Christmas Valley</b>	STATE <b>OR</b>	ZIP <b>97641</b>	E-MAIL <b>AvaJarman@mac.com</b>

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>Becky Miles</b>		
ADDRESS <b>38181 Gilkey Rd</b>		
CITY <b>Scio</b>	STATE <b>OR</b>	ZIP <b>97374</b>

**4. Date of Site Inspection:**

<b>9/4/2025</b>
-----------------

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Ava Jarmin</b>	<b>9/4/2025</b>	<b>Property Owner</b>

**6. County:**

<b>Lake</b>
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**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

**SECTION 2  
SIGNATURES**

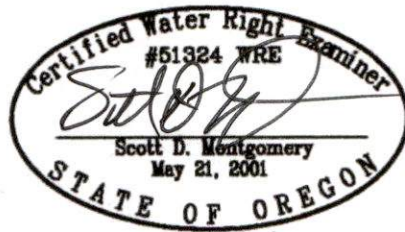
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## CWRE Statement, Seal and Signature

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

Seal and Signature



RENEWAL 12/31/2026

CWRE NAME <b>Scott D Montgomery</b>		PHONE NO. <b>541-548-5833</b>	ADDITIONAL CONTACT NO. <b>541-420-0401</b>
ADDRESS <b>PO Box 767</b>			
CITY <b>Terrebonne</b>	STATE <b>OR</b>	ZIP <b>97760</b>	E-MAIL <b>scott@apeands.com</b>

## Transfer Holder(s) 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
	Becky Miles	Applicant	12/12/2
	Ava Jarman	Member/Owner	12/1/25

### SECTION 3

#### 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

##### 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?

**NO**

##### Change #2

##### 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**

##### 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)
#2	LAKE 50565	L16068	Ft. Rock Basin

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

##### 2. Variations:

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

**YES**

If yes, describe below.

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

**The well is located within the same farm pivot field & approximately 600 feet southwest from where the transfer order describes the well.**

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### 3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
#2	1/80 cfs per acre	0.97 cfs	Not on

### System Description

Are there multiple new or additional Points of Appropriation (POA)?

NO

#2 (LAKE 50565)

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### 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
National	UNK	UNK	Turbine	14"	8"

#### 2. Motor Information:

MANUFACTURER	HORSEPOWER
GE	60

#### 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)
60	40	435'	5'	0.97

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

#### 4. Provide pump calculations:

$$Q = 7.04 \text{ ft}^4/\text{s}/\text{hp} \times \text{hp} = (7.04)(60) = 0.97 \text{ cfs}$$

Total head, ft 541.6

$$\text{Total head} = 101.6' + 435' + 5' = 541.6'$$

#### 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)
Not running			

**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)
NA				

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

**7. Provide pump calculations:**

NA

**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)
NA			

**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)?

NO

**C. Additional notes or comments related to the system:**

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### Change #3

#### Change in Place of Use

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

YES

#### 1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
29.6	28.0

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)
	NA

#### 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.")

**The final order allowed 29.6 acres. The water user only developed 28.0 acres. The area pattern differs slightly, but is all within the same ¼ ¼ section.**

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**Change #4**

**Change in Character of Use**

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

**NO**

**Change #5**

**Change in Character of Use – Reservoir**

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

**NO**

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## SECTION 4

### 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	DATE THE AUTHORIZED CHANGES WERE COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	6/22/2017	
COMPLETENESS DATE FROM ORDER (C)	10/1/2018	10/1/2018

\* 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

#### 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

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.

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- b. Has a meter been installed?

YES

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#### c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
#2	Aquamaster 900	30304	Not running	0783.893	2/9/2016

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

#### 5. Fish Screening

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

NO

#### 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?

NO

7. 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? **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 5**  
**ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Well log	LAKE 50565
Site photos	Time/location stamped pics of irrigation system & POU.
Aerial imagery	USDA/FSA imagery from June 2018

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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 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.

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.

**The irrigation system was tied to approx. boundaries using a Topcon FC-6000 data collector. Point data was imported into Statewide Lambert Projection & compared with aerial imagery for accuracy.**

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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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STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765)

lake  
505605

JUN - 2 1998

WATER RESOURCES DEPT. (START CARD) # 93472  
SALEM, OREGON

Instructions for completing this report are on the last page of this form.

(1) OWNER:

Name H+E Farms Well Number L16068  
Address PO BOX 266  
City CHRISTMAS VALLEY State OR Zip 97641

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger  
☐ Other

(4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation  
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 915 ft.  
Explosives used ☐ Yes ☒ No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
18"	0	158	Cement	0	150	130
12"	158	520				
8"	520	915				

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: 14"	0	158	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 12"	0	337		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
240	260	3x3/4"	250	12"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
1500		915	10

Temperature of water 56 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: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:

County Lane Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 27 N or S Range 16 E or W. WM.  
Section 37 SE 1/4 16E 1/4  
Tax Lot 400-309 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Street Address of Well (or nearest address) 904-55 OUT CH 151  
VALLEY TO GIL DIN RD TRAIL LEFT 4 mi 17m

(10) STATIC WATER LEVEL:

26 ft. below land surface. Date 5-15-98  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
143	443 1/2	300 gal	26
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(12) WELL LOG:

Ground Elevation OWRD

WATER RESOURCES DEPT.  
SALEM, OREGON

Material	From	To	SWL
Brown Sand	0	2	
Brown Clay Stone	2	18	
Gray Clay Stone	18	120	
Green Stone	120	440	
Clay and Pumice	440	443 1/2	WB
Green Stone	443	570	
Green Stone Pumice	570	693	
Sand	693	696	
Rock	693	696	
gray stone	696	781	
Rock Lava	781	784	
gray stone	784	837	
Rock	837	876	
Brown Rock	876	881	WB
Black cinder and sand	881	915	WB

Date started 5-3-98 Completed 5-15-98

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.


Signed \_\_\_\_\_ WWC Number \_\_\_\_\_ 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Thomas Lind WWC Number 1654 Date 5-29-98





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2025-09-04 12:12:56

Lat: 43°12'10.88400", Lon: -120°48'17.94960"



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2025-09-04 12:14:48

Lat: 43°12'10.98180", Lon: -120°48'17.82900"



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2025-09-04 12:15:37

Lat: 43°12'10.84560", Lon: -120°48'17.77680"



T 27 S, R 16 E, W.M.



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2018 aerial imagery downloaded from NRCS Gateway website and imported into ESRI ArcMap GIS software with Oregon Statewide Lambert Projection