

**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 \$345 must accompany this form for permits
with priority dates of July 9, 1987, or later.**

Enter the date the priority date of the permit:

5/21/2004

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 503-986-0900.

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**

1. File Information:

APPLICATION #	PERMIT # (IF APPLICABLE)	PERMIT AMENDMENT # (IF APPLICABLE)
S-86013	S-54150	

2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Silke Tower Properties, LLC		PHONE NO. (925) 648-2808	ADDITIONAL CONTACT NO.
ADDRESS 3 Crow Canyon Ct., Suite 100			
CITY San Ramon	STATE CA	ZIP 94583	E-MAIL jim@silkecom.com

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

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

PERMIT HOLDER OF RECORD Silke Tower Properties, LLC		
ADDRESS 3 Crow Canyon Ct., Suite 100		
CITY San Ramon	STATE CA	ZIP 94583

ADDITIONAL PERMIT HOLDER OF RECORD			Received by OWRD FEB 04 2026 Salem, OR
ADDRESS			
CITY	STATE	ZIP	

4. Date of Site Inspection:

11/18/2025

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Tina Knutson	11/18/2025	Property Manager

6. County:

Lane

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		
CITY	STATE	ZIP

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 William E. McGill		PHONE NO. (503) 510-3026	ADDITIONAL CONTACT NO. (503) 931-0210
ADDRESS 15333 Pletzer Rd. SE			
CITY Turner	STATE OR	ZIP 97392	E-MAIL willmcgill.surveying@gmail.com

Permit Holder(s) of Record Signature or Acknowledgement

Each 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.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
<i>K Ballowe</i>	Kate Ballowe	Property Manager	01/26/2026

**SECTION 3
CLAIM DESCRIPTION**

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

POD NAME OR NUMBER	SOURCE	TRIBUTARY
POD	Siltcoos Lake	Siltcoos 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	Domestic	N/A	Year Round	0.005 cfs
Total Quantity of Water Used				0.005 cfs

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:

The water system consists of two ¾ HP submersible pumps equipped with fish screens in Siltcoos Lake on the North side of the boat dock. One pump is a backup if the other fails. Water is pumped to the house for domestic use through black polyethylene and PVC pipe.

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.

YES NO

(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	0.005	0.024	*	Domestic	N/A	N/A

*System not running at time of site inspection. House was not currently occupied.

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SECTION 4 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):

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POD

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A. Place of Use

Attach Claim of Beneficial Use map.

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 and 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)
Franklin Electric	2801074915	Not available	Submersible

3. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
3/4	70	0'	45'	0.024

4. Provide pump calculations:

$$Q = (0.75 * 7.04) / (177.8 + 45) = 0.024 \text{ cfs}$$

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)
System not running at time of site inspection.			

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)
N/A					

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)
N/A					

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
N/A					

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
 Bulge in System / Reservoir

YES NO
 YES NO

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

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
Metal Pressure Tank	60	Above Ground

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

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

F. Additional notes or comments related to the system:

Silke Tower Properties, LLC acquired this property in 2015 and has no knowledge of this water supply system during the permit period of 12/30/2004 to 10/1/2009 other than what existed at the point they purchased. From the Lane County records, it appears that the new home occupancy occurred in 2005, putting the assumed water system development within the authorized permit period.

SECTION 5

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CONDITIONS

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.

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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:

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	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	12/30/2004		
BEGIN CONSTRUCTION (A)	N/A	N/A	N/A
COMPLETE CONSTRUCTION (B)	N/A	N/A	N/A
COMPLETE APPLICATION OF WATER (C)	10/1/2009	2005	House occupancy began.

* 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

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	Master Meter	9931189	Working	34363	Not available

4. Recording and reporting conditions:

a. Is the water user required to report the water use to the Department?

YES NO

5. Fish Screening:

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

YES 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
*	Fred Knutson (Property Manager)

*The original water system was upgraded in July 2016 and the current screens were installed then. No info on the original screen installation date.

Reminder: If the permit or transfer final order was issued on or after February 1, 2011, the fish screen is required to be approved by the Oregon Department of Fish and Wildlife regardless of the rate of diversion.

d. If the diversion involves a pump 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 or 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

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7. Other conditions required by permit, permit amendment final order, or extension final order:

- a. Was the water user required to restore the riparian area if it was disturbed? YES NO
- b. Other conditions? YES NO

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

Restore disturbed riparian areas: *None disturbed.*

**SECTION 6
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Photos (x6)	Taken at site inspection.
ODFW Form	Small pump screen self-certification

**SECTION 7
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.

Survey method used was aerial photo provided by Vantor Technologies.
Source Date: 5/27/2024

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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
- N/A 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
- 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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Silke COBU - Dock For Accessing Pumps

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Silke COBU - Pump 1 (3/4 HP Submersible w/ Fish Screen)

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Silke COBU - Pump 2 (3/4 HP Submersible w/ Fish Screen)

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QD Control Box

MODEL: 2801074915 HP: 3/4 VOLTS: 230 S.F. MAX AMP: 8.0



Franklin Electric

ASSEMBLED IN USA

INDOOR/OUTDOOR USE (ENCL. 3)



WARNING

ELECTRIC SHOCK HAZARD
DISCONNECT POWER
BEFORE SERVICING.

AVERTISSEMENT
RISQUE D'ELECTROCUTION
DEBRANCHER AVANT
TOUTE MANIPULATION.



ADVERTENCIA

PELIGRO CHOCQUE ELECTRICO
DESCONECTAR ENERGIA
PREVIO A MANTENIMIENTO.

5:11KE COBU - Pump 1 Control Box

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QD Control Box

MODEL: 2801074915 HP: 3/4 VOLTS: 230 S.F. MAX AMP: 8.0



Franklin Electric

MADE IN USA

INDOOR/OUTDOOR USE (ENCL. 3)

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⚠ WARNING

ELECTRIC SHOCK HAZARD
DISCONNECT POWER
BEFORE SERVICING.

⚠ AVERTISSEMENT

RISQUE D'ELECTROCUTION
DEBRANCHER AVANT
TOUTE MANIPULATION.

⚠ ADVERTENCIA

PELIGRO CHOCQUE ELECTRICO
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Sike COBU - Pump 2 Control Box

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Siike CR11 - System Central Tank and Meter



OREGON DEPARTMENT of FISH and WILDLIFE

FISH SCREENING PROGRAM

SMALL PUMP SCREEN SELF CERTIFICATION

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FOR PERMITS OR TRANSFERS ISSUED PRIOR TO FEBRUARY 1, 2011

If the permit or transfer final order was issued on or after February 1, 2011, you are required to have your fish screen inspected and approved by Oregon Department of Fish and Wildlife staff.

The Oregon Water Resources Department in coordination and cooperation with the Oregon Department of Fish and Wildlife includes screen requirements on pumps to protect fish as a condition of many surface water and/or reservoir water right permits. This is done in accordance with ORS 537.153.

The Oregon Department of Fish and Wildlife does not usually inspect small pump screens at **pumped diversions less than 225 gpm** (gallons per minute), but furnishes the following general fish screening criteria information to the water right permit holder:

- **Screen material open area** must be at least 27% of the total wetted screen area.
- **Perforated plate:** Circular screen face openings must not exceed 3/32 or 0.0938 inch (2.38 mm) in diameter.
- **Mesh/Woven wire screen:** Square screen face openings must not exceed 3/32 or 0.0938 inch (2.38 mm) on a diagonal.
- **Profile bar screen/Wedge wire:** Slotted screen face openings must not exceed 0.0689 inch (1.75 mm) in the narrow direction.
- **Screen area** must be large enough not to cause fish impact. The wetted screen area required depends on the water approach velocity.
- **Approach velocity** is the water velocity perpendicular to and upstream of the vertical projection of the screen face.
- **An Active pump screen** is a self-cleaning screen that has a proven automatic cleaning system. The **screen approach velocity for active pump screens** must not exceed 0.4 ft/s (feet per second) or 0.12 m/s (meters per second). The minimum wetted screen area needed in square feet is calculated by dividing the maximum water flow rate in cubic feet per second (1 cfs = 449 gpm) by 0.4 ft/s.
- **A Passive pump screen** is a screen that has no automated cleaning system. **Screen approach velocity for passive pump screens** must not exceed 0.2 ft/s or 0.06 m/s. The minimum wetted screen area needed in square feet is calculated by dividing the maximum water flow rate in cubic feet per second by 0.2 ft/s.
- **Pump screen depth:** The screen must be submerged at least one screen radius below the minimum water surface with a minimum of one screen radius between the screen bottom and the water bottom or constructed surface.

For further information on fish screening please contact:

Pete Baki: 503-947-6217
pete.baki@state.or.us



OREGON DEPARTMENT of FISH and WILDLIFE

FISH SCREENING PROGRAM

SMALL PUMP SCREEN SELF CERTIFICATION

FOR PERMITS OR TRANSFERS ISSUED PRIOR TO FEBRUARY 1, 2011

As evidence of having met fish screen installation requirements, please provide the information requested below, sign the certification, and send copies to:

Oregon Water Resources Department, and
Water Rights Section,
725 Summer Street NE, Suite A,
Salem, OR 97301-1271

Pete Baki
Oregon Dept. Fish and Wildlife
4034 Fairview Industrial Drive SE
Salem, OR 97302

Water right permit/certificate number: S-54150 Amount of water diverted 0.005 cfs

Stream: Siltcoos Lake Tributary to: Siltcoos River

Location (GPS if available):

Screen Length: 30" Screen Diameter: 4"

Is pump screen self-cleaning: No

If screen is not a cylinder shape, please provide a diagram and measurements.

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Certification:

I certify that my permit or transfer final order was issued prior to February 1, 2011.

I certify that my small pumped diversion of less than 225 gpm meets fish screening criteria, and that I will maintain it to comply with regulatory criteria. I also understand that should fish screening standards change, I may be required to modify my installation to meet applicable standards.

Applicant Signature: [Handwritten Signature] Date: 01/26/26 WRD File #: _____

Printed Name and Address: Kate Ballowe, 3 Crow Canyon Ct., Suite 100
San Ramon, CA 94583

Phone: (925) 448-2808 Fax: () _____



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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Silko Tower Properties LLC 3 Crow Canyon Ct. Suite 100 San Ramon, CA 94583

Transaction Type: COBE

Fees Received: \$ 345.00

Cash

Check:

Check No. 2522

Name(s) on Check: Will McGill Surveying LLC

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,

OWRD Customer Service Staff

Submission received by: Sarah Benham
(Name of OWRD staff)

Instructions for OWRD staff:

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Fold and put one copy of the Submission Receipt with check/cash into the Safe slot. Place the other copy of the Submission Receipt with submission (application/other document) in the top drawer of filing cabinet.