

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:

JUNE 21, 2013

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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 Reimbursement Authority program that allows it to enter into a voluntary agreement with an applicant for expedited services. Applicants interested in an estimate of the cost and timeline for expedited processing must submit a Reimbursement Authority Estimate Application and required fee. The form and additional information on this program see: <https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx>

SECTION 1 GENERAL INFORMATION

1. File Information:

APPLICATION # S-87911	PERMIT # (IF APPLICABLE) S-54865	PERMIT AMENDMENT # (IF APPLICABLE) NA
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME KEVIN BATES		PHONE NO. 503.917.8756	ADDITIONAL CONTACT NO.
ADDRESS 16419 SW WILDLIFE HAVEN CT			
CITY SHERWOOD	STATE OR	ZIP 97140	E-MAIL KEVIN@SYMPOSIUMCOFFEE.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 ASSIGNMENT TO KEVIN BATES PENDING WITH OWRD		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

APRIL 23, 2026

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
KEVIN BATES	4/23/2026	PROPERTY OWNER, PERSONAL REPRESENTATIVE OF POWELL ESTATE

6. County:

JOSEPHINE

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 GREGORY POWELL (DECEASED)		
ADDRESS 11020 NORTH APPLGATE ROAD		
CITY GRANTS PASS	STATE OR	ZIP 97527

Add additional tables for owners of record as needed

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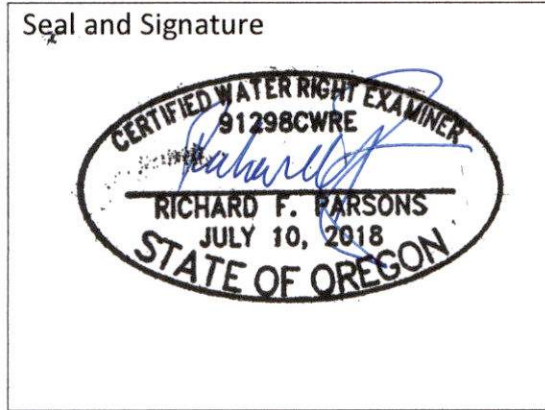
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**SECTION 2
SIGNATURES**

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 RICK PARSONS		PHONE NO. 303.667.5067	ADDITIONAL CONTACT NO.	
ADDRESS 1619 MINEAR ROAD				
CITY MEDFORD	STATE OR	ZIP 97501	E-MAIL RICK.PARSONS@PARSONSWATER.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
	KEVIN BATES	PERMIT HOLDER	4/23/2026

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**SECTION 3
CLAIM DESCRIPTION**

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

POD NAME OR NUMBER	SOURCE	TRIBUTARY
APPLEGATE RESERVOIR	APPLEGATE RIVER	ROGUE 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)
BATES POD	IRRIGATION	LAWN AND GARDEN	APR - OCT	40 GPM
Total Quantity of Water Used				40 GPM

3. Provide a general narrative description of the distribution works. This description must trace the water system from **each** point of diversion to the place of use:

STORAGE WATER RE-DIVERTED AT NORTHSIDE APPLEGATE DITCH. WATER PUMPED FROM DITCH AT SUBJECT PROPERTY TO DISTRIBUTION SYSTEM TO SPRINKLER IRRIGATED AREAS.

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.

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
BATES POD	NO LIMIT	40 GPM	DITCH DRY	IRRIGATION	2	1.25

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**SECTION 4
SYSTEM DESCRIPTION**

Are there multiple PODs?

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):

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

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

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)
MUNRO	LM33344A P	SRD2S2TZJN18 66MB6TP2	CENTRIFUGAL

3. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
2	60	4	0	0.09

4. Provide pump calculations:

$Q = (HP)(EFFICIENCY) / TOTAL DYNAMIC HEAD = (2 * 6.92) / [LIFT (4) + HEAD ((60/0.433) * 1.1)] = 0.09 CFS / 39.7 GPM$
6.92 EFFICIENCY BASED ON NEMA NOM. EFF. = 78.5

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 MEASURED BECAUSE DITCH IS DRY			

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

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6. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
RAIN BIRD 5000		5	60	6	0.07

Reminder: For sprinkler output determination use the reference information at the end of this document.

7. Drip Emmitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
NA					

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
NA					

C. Storage

1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)?

NO

If "NO", item 2 and 3 relating to this section may be deleted.

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?

NO

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

E. Gravity Flow Canal or Ditch

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

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

NO

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

F. Additional notes or comments related to the system:

NA

SECTION 5 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.

1. Time Limits:

Permits and any extension final orders contain any or all of the following dates: the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use was to be completed. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or extension final order:

	DATE FROM PERMIT	DATE ACCOMPLISHED *	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	4/24/2014		
BEGIN CONSTRUCTION (A)	4/24/2019	5/2024 – 10/2024	PUMP, PIPES, SPRINKLERS PURCHASED AND INSTALLED
COMPLETE CONSTRUCTION (B)	10/1/2025	5/2025 – 10/2025	REVISIONS TO ABOVE; METER PURCHASED AND INSTALLED
COMPLETE APPLICATION OF WATER (C)	10/1/2025	5/2025	TESTING AND USE OF ENTIRE SYSTEM, INCLUDING REPLACEMENT METER INSTALL

* 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

If "NO", items a and b relating to this section may be deleted.

a. Did the Extension Final Order require the submittal of Progress Reports? YES

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

b. Were the Progress Reports submitted? NO

If the reports have not been submitted, attach a copy of the reports if available.

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

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

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
BATES POD	NETAFIM	18-50073613	WORKING	0	MAY 2025

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

4. Recording and reporting conditions:

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

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

5. Fish Screening:

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

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**

c. When was the fish screening installed?

DATE	BY WHOM
FALL 2025	KEVIN BATES

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**

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**

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? **NO**

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

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? **NO**
b. 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 6
ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
PROGRESS REPORT	EXTENSION PROGRESS REPORT
ODFW SELF CERT REPORT	SMALL PUMP SCREEN SELF CERTIFICATION
DEATH CERTIFICATE	PERMIT HOLDER DEATH CERTIFICATE
LETTERS TESTAMENTARY	ASSIGNMENT OF KEVIN BATES AS REPRESENTATIVE OF ESTATE

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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-54865 Amount of water diverted 40 GPM

Stream: PUMP IN NORTHSIDE APPLGATE DITCH Tributary to:

Location (GPS if available): 42.320278, -123.268333

Screen Length: 10 IN. Screen Diameter: 7 IN.

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: [Signature] Date: 4/23/2026 WRD File #: _____

Printed Name and Address: KEVIN BATES 16419 SW WILDLIFE HAVEN CT SHERWOOD, OR 97140
Phone: (503) 917-8756

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF WASHINGTON
150 N First Avenue Hillsboro Oregon 97124

In the Matter of the Estate of:

Case No: 25PB09130

Gregory William Powell

Deceased


LETTERS TESTAMENTARY

THIS CERTIFIES THAT the will of Gregory William Powell, deceased, has been proved and Kevin Tyler Bates has been appointed and is at the date hereof the duly appointed, qualified and acting Personal Representative of the will and estate of the decedent.

IN WITNESS WHEREOF, I, as a Clerk of the Circuit Court of the State of Oregon for the County of Washington, in which proceedings for administration upon the estate are pending, do hereby subscribe my name and affix the seal of the court on this the 17th day of November, 2025.



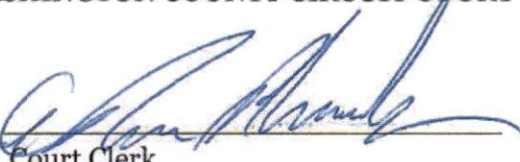
WASHINGTON COUNTY CIRCUIT COURT

By: 
Circuit Court Clerk, Ryan Rhoades

I certify that this copy of the Letters is a true, complete, and accurate copy of the original Letters filed with this court. I certify that the Letters are still in full effect and have not been revoked or set aside.

11/17/2025
Date

WASHINGTON COUNTY CIRCUIT COURT

By: 
Court Clerk
Ryan Rhoades





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

Extension of Time
 Progress Reporting Form
 For Checkpoints

TO THE DIRECTOR OF THE OREGON WATER RESOURCES DEPARTMENT

Permit Holder: KEVIN BATES
 Permit S-54865

Application S-87911

Progress Report Form for 2024

Report Due no later than October 1, 2024

DO NOT SUBMIT PRIOR TO 30 DAYS BEFORE DUE DATE

As authorized in ORS 690-315-0050(6), this progress report is required in order to ensure diligence is exercised in the development and perfection of Permit S-54865. **FAILURE TO SUBMIT THIS REPORT WILL MOST LIKELY RESULT IN ANY FUTURE EXTENSION BEING DENIED.**

INCOMPLETE REPORTS WILL BE RETURNED. AN ANSWER IS REQUIRED IN EACH ITEM.

FAILURE TO SUBMIT THIS REPORT WILL MOST LIKELY RESULT IN ANY FUTURE EXTENSION BEING DENIED.

DATES	LIST ALL WORK ACCOMPLISHED and FINANCIAL INVESTMENTS For the period of time between April 24, 2020 and October 1, 2024	FINANCIAL INVESTMENT
2024	PUMP, PIPES, SPRINKLERS PURCHASED AND INSTALLED	\$ 8,000
2025	TESTING AND USE OF ENTIRE SYSTEM, INCLUDING REPLACEMENT	\$ 600
	METER INSTALL	

2. Describe actions taken to comply with terms/conditions of the permit and/or previous extension. (Examples: installed a meter, submitted water usage reports, installed a fish screen, etc.)

3. Total number of acres irrigated to date: 1.25

4. Provide the maximum rate, or duty if applicable, of water diverted for beneficial use under this permit, if any, made to date.

Report the rate in the same units of measurement as specified in the permit, being cfs (cubic feet per second), gpm (gallons per minute) or AF (acre-feet). Do not provide daily, monthly or annual water volume totals.

Maximum annual volume used to date = 7 AF

Signature [Signature]

Date 4/27/26

Printed Name/Title Kevin Bates

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MAY 04 2026

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<i>For OWRD use only</i>	
Diligence Shown <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Public Noticed: _____
Reviewed by: _____	Date: _____