

**CLAIM OF
BENEFICIAL USE
for Surface Water Permits
claiming more than 0.1 cfs**



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:

8/3/2009

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>

Go to "Resources for Water Right Examiners (CWRE)" Page

<https://www.oregon.gov/OWRD/programs/WaterRights/COBU/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>

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**SECTION 1
GENERAL INFORMATION**

1. File Information:

APPLICATION # S-87508	PERMIT # S-54806	PERMIT AMENDMENT # T-
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Stephen E Olson		PHONE NO. 41-408-7136	ADDITIONAL CONTACT NO.
ADDRESS PO Box 428			
CITY Hines	STATE OR	ZIP 97738	E-MAIL

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

PERMIT HOLDER OF RECORD Same as above		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

7/30/2024

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Steve Olson	7/30/2024	Owner/Permit Holder

6. County:

Harney

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 NA		
ADDRESS		
CITY	STATE	ZIP

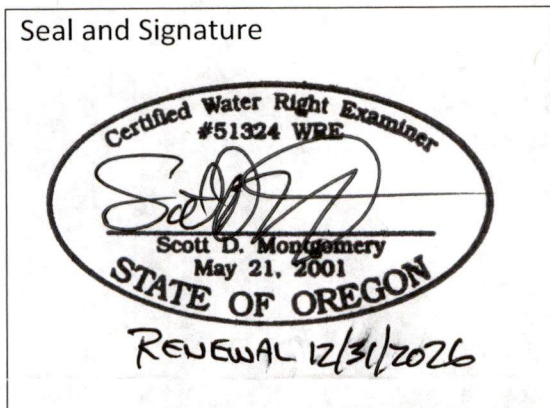
Add additional tables for owners of record as needed

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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 Scott D Montgomery		PHONE No. 541-548-5833	ADDITIONAL CONTACT No. 541-420-0401
ADDRESS PO Box 767			
CITY Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apeands.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
	Stephen E. Olson	Owner/Permit Holder	7/28 2026

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SECTION 3

CLAIM DESCRIPTION

1. Point of diversion name or number:

POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)
Johnson Spring

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2. Point of diversion source and tributary:

POD NAME OR NUMBER	SOURCE	TRIBUTARY
POD	Johnson Springs	South Warm Springs Creek

3. 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	IR	Hay	Mar 1 – Oct 31	3.4 cfs
Total Quantity of Water Used				3.4 cfs

4. 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:

Water from the authorized diversion point is conveyed through a flume and canals into a flood irrigation system that irrigates the place of use.

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).

5. Variations:

Was the use developed differently from what was authorized by the permit, or permit amendment 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.")

6. Claim Summary:

POD NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Johnson Sp	3.4 cfs	44.24 cfs	NA	IR	273.9	273.9

SECTION 4

SYSTEM DESCRIPTION

Are there multiple PODs?

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NO

A. Place of Use

1. Is the right for municipal use?

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NO

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
27S	29E	WM	5	NE NE	1		IR	36.4	
27S	29E	WM	5	NW NE	2		IR	36.4	
27S	29E	WM	5	NE NW	3		IR	36.5	
27S	29E	WM	5	NW NW	4		IR	36.3	
27S	29E	WM	5	SW NW			IR	37.1	
27S	29E	WM	5	SE NW			IR	40.0	
27S	29E	WM	6	NE NE	1		IR	34.2	
27S	29E	WM	6	SE NE			IR	17.0	
Total Acres Irrigated								273.9	

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (GLOT), Quarter Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, GLOT, 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? **NO**

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

7. Is the distribution system piped? **NO**

C. Storage

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

If "YES" is it a: **NO**
 Storage Tank
 Bulge in System / Reservoir **YES**

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

2. Storage Tank:

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
NA		

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
Pond A	0 ft	7.0
Pond B	0 ft	3.7

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

2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)
24'	CMP	100	0.25'	25'	0.01	44.24

3. Provide calculations:

$$Q! = A \times 1.31 \times C \times R^{0.63} \times S^{0.54} = (3.14)(1.31)(100)(0.5)(6.01)^{0.54} = 22.12 \text{ cfs} \times 2 \text{ culverts} = 44.24 \text{ cfs}$$

$$A = \frac{\pi}{4} D^2 = \pi = 3.14 \text{ SF} \quad R = A/P = (3.14)/6.28 = 0.5'$$

4

$$P = \pi D = 2\pi = 6.28'$$

4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)
Not measured			

Attach measurement notes.

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

2. Complete the table:

CANAL OR DITCH TYPE (MATERIAL)	TOP WIDTH OF CANAL OR DITCH	BOTTOM WIDTH OF CANAL OR DITCH	DEPTH	"N" FACTOR	AMOUNT OF FALL	LENGTH OF CANAL / DITCH	SLOPE	COMPUTED RATE (IN CFS)
Grass	20'	5'	4'	0.035	0.25	25'	.001'/'	116 cfs

3. Provide calculations:

$$Q = \frac{1.486 \times A \times R^{2/3} \times S^{1/2}}{n} = \frac{(1.486)(50)(2.27)^{2/3}(0.001)^{1/2}}{0.035} = 116 \text{ cfs}$$

n

0.035

$$A = \frac{20 + 5}{2} \times 4 = 50 \text{ sf}$$

$$R = A/P = \frac{50}{22'} = 2.27'$$

$$P = 5 + (2)(8.5) = 22'$$

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4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)
Not measured			

Attach measurement notes.

F. Additional notes or comments related to the system:

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SECTION 5
CONDITIONS

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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 permit extension of time:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	3/21/2013		
BEGIN CONSTRUCTION (A)	NA		
COMPLETE CONSTRUCTION (B)	3/21/2018		
COMPLETE APPLICATION OF WATER (C)	3/21/2018		

* 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)?

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

b. Has a meter been installed?

NO

c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED

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

YES

e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

NAME	TITLE	APPROXIMATE DATE
Dally Swindloehurst	Water Master	

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED
Flume* See below	Working	

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.

b. Have the reports been submitted? YES

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

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 some permits, permit amendment final orders, or extension final orders:

a. Was the water user required to restore the riparian area if it was disturbed? YES

b. Was a fishway required? YES

c. Was submittal of a water management and conservation plan required? NO

d. 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) in the box below. If the condition required the approval of a plan, submit documentation that the plan was approved.

Low grade culverts and ditches installed. Riparian area restored. Flume is 8' x 4x2' with a maximum flowrate capacity of 50 cfs & minimum flowrate of 0.3 cfs

SECTION 6

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Measuring device	Approval letter
Site photos	Time/location stamped pics of POD & meters, etc
Aerial imagery	2020 USA/FSA imagery

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Tina Kotek, Governor

Oregon Water Resources Department
Field Services Division
725 Summer St NE Ste A
Salem, Oregon 97301
(503) 986-0900
www.Oregon.gov/owrd

10-24-23

Stephen E Olson,

This letter is approving your measuring device on Johnson Spring for permit S-54806.

Dally Swindlehurst
Watermaster District 10
donald.s.swindlehurst@water.oregon.gov
541-573-2591

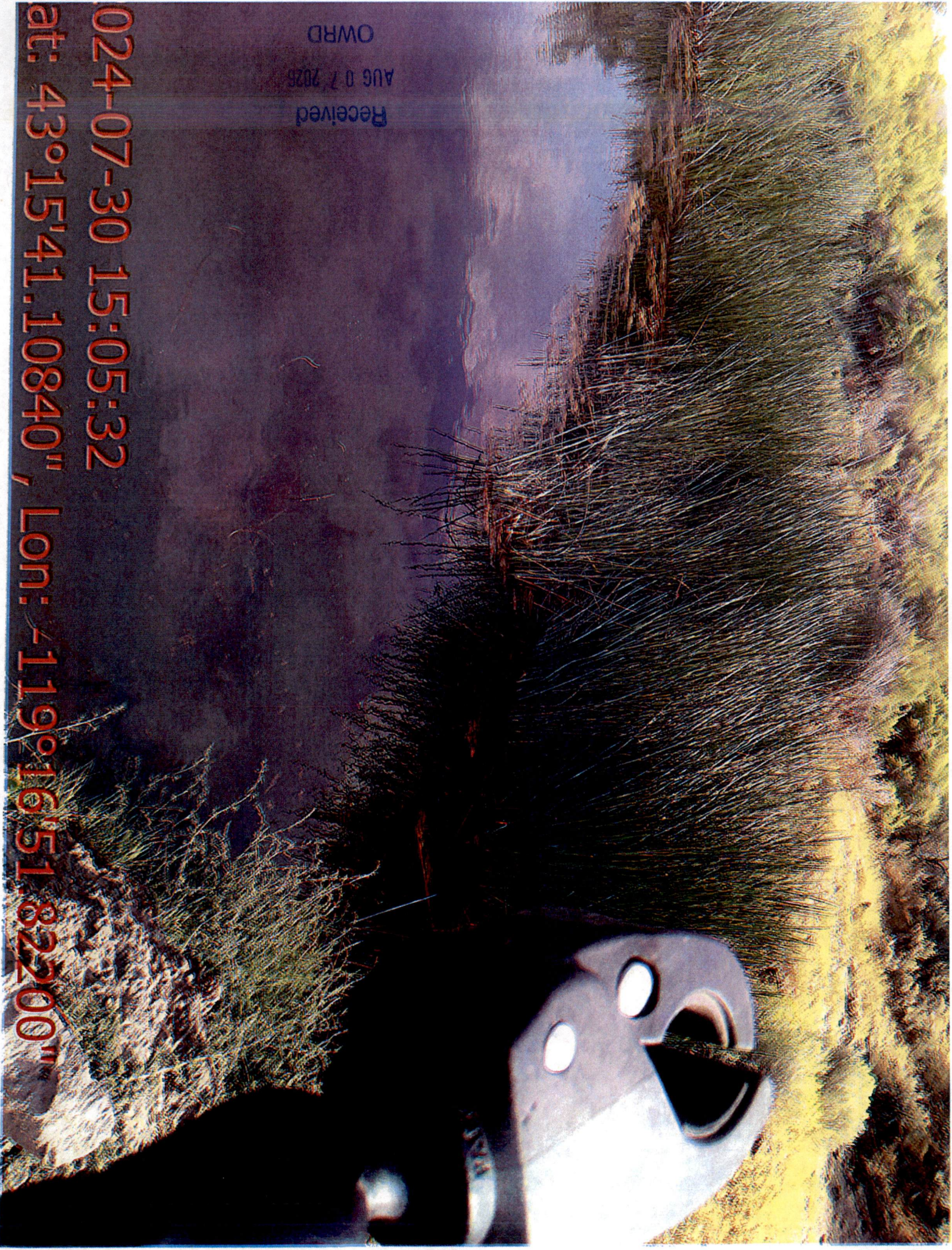
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024-07-30 15:05:32
at: 43°15'41.10840", Lon: -119°16'51.82200"



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024-07-30 15:11:57
at: 43°15'42.66206", Lon: -119°16'54.14821"

exit - Con 1 in water



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CIVIL

2024-07-30 15:13:09
at: 43°15'42.83681", Lon: -119°16'54.17203"

Water Pot



2024-07-30 15:42:56
Lat: 43°15'31.94284", Lon: -119°16'21.43120"

meter 7

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024-07-30 15:49:04
at: 43°15'31.95464", Lon: -119°16'20.47520"

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2024-07-30 15:54:33

Lat: 43°15'45.10554", Lon: -119°16'26.35662"

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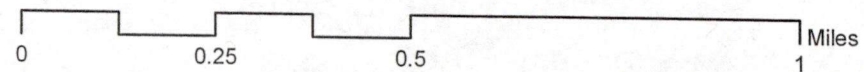
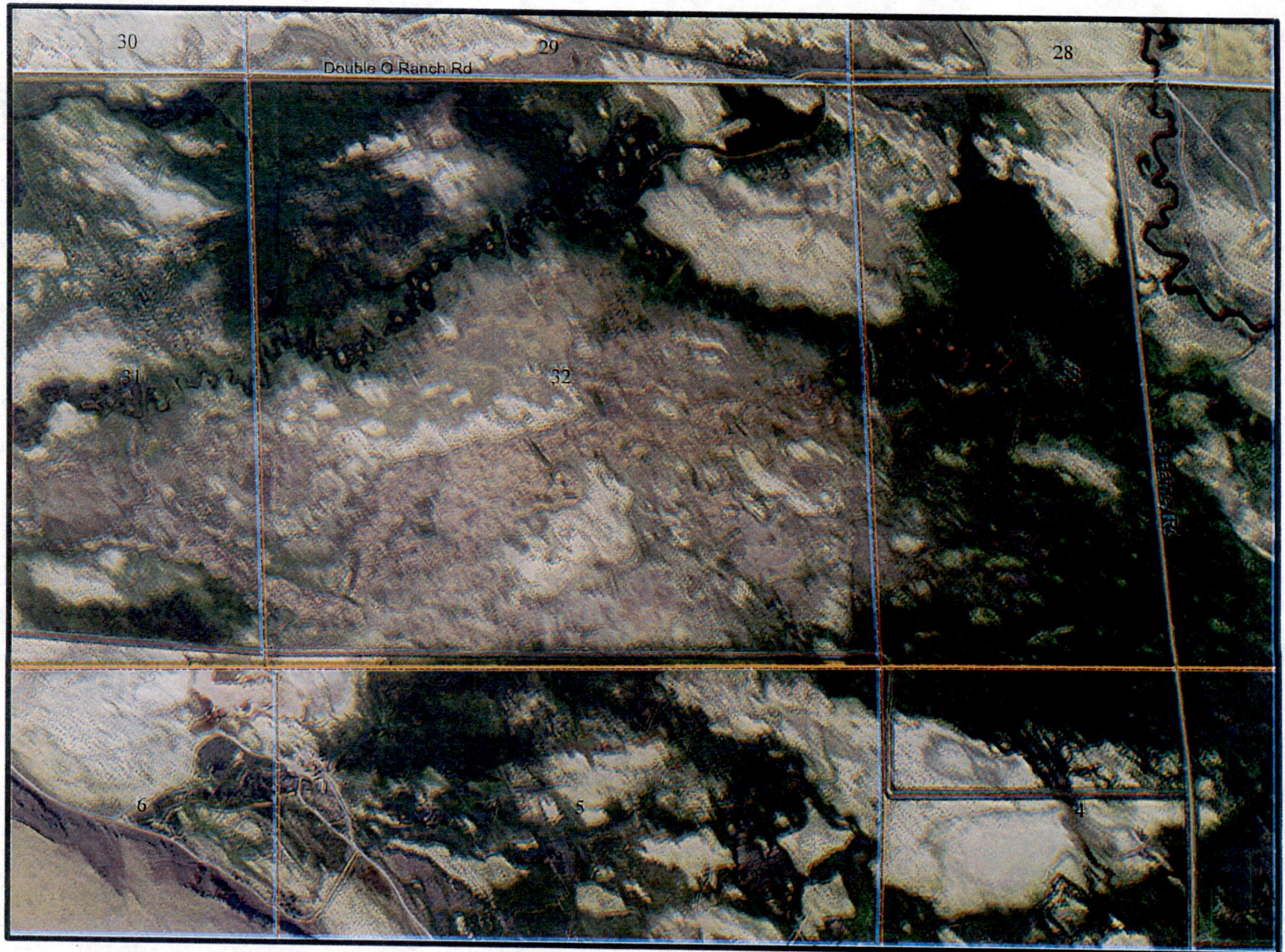
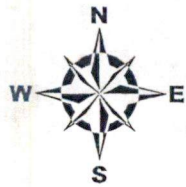
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2024-07-30 15:54:33

Lat: 43°15'45.10554", Lon: -119°16'26.35662"

T27S R 29E, W.M.

2020 aerial imagery from NRCS Gateway website imported into ArcMap GIS software in statewide Lambert projection.





ALL POINTS
ENGINEERING & SURVEYING, INC.
P.O. Box 767
Terrebonne, Oregon 97760
541-548-5833

TRANSMITTAL

To: Oregon Water Resources Dept
725 Summer St NE, Suite A
Salem, OR 97301-1266

Date: 8/3/26
Attention: Certificates
COBU for S-54806

[X] Prints ☐ Plans ☐ Plat ☐ Specifications.

Attached is a Claim of Beneficial Use for S-54806 for Stephen Olson.

Copies	No.	Description
1	1	COBU (9 pages letter bond)
1	2	COBU map (1 page mylar)
1	3	Letter approving Meas Device (1 page letter bond).
1	4	Site photos (7 pages letter bond)
1	5	Aerial imagery (1 page letter bond)
1	6	Check for \$345

Signed: _____

Dennis Mordgaj

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