

Checklist for Claims of Beneficial Use Received at CSG Counter

Application #	WRD Reviewer <i>Coy M.</i>
Transfer # <i>9260</i>	
Date Received <i>11-4-2020</i>	
CWRE Name <i>Harold Center.</i>	

Priority Date: *May 1987*
 Fees Required:

YES NO A fee of \$200 must accompany this form for permits with priority dates of July 9, 1987, or later.

YES **NO** A fee of \$200 must accompany this form for any transfers including a water right with a priority date of July 9, 1987, or later.
 Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

Fill in App or Transfer Number

Map Review:

- Map on polyester film (OAR 690-014-0170(1) & 310-0050(1)(b))
- Application & permit #; or transfer # (OAR 690-014-0100(1))
- Disclaimer (OAR 690-014-0170(5))
- North arrow (OAR 690-310-0050(2)(c))
- CWRE stamp and signature (OAR 690-014 & 310-0050)
- Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map) (014 & 310)
- Township, range, section, and tax lot numbers (OAR 690-310-0050(4))

MONEY SLIP

DATE: _____ RECEIPT #: _____

RECEIVED FROM: _____ APPLICANT FROM: _____
 COUNTY: _____ COUNTY: _____
 TRANSFER: _____

CASH CHECK # OTHER (IDENTIFY) TOTAL DUE \$ _____

0201 TREASURY (FIS BUREAU CONTACT) _____

0407 OTHER IDENTIFY: _____

0203 Repurchase License _____ 0204 Min. Water Right Fee _____ 0205 Cont. Water _____

0209 TREASURY (FIS BUREAU CONTACT) _____

MISCELLANEOUS

0407 COPY & SAMP FEES *4611* _____

0408 RESEARCH FEES _____

0409 MISC REVENUE (IDENTIFY) _____

TC102 DEPOSIT LNS. (IDENTIFY) _____

0206 EXTENSION OF TIME _____

WATER RIGHTS

0301 SURFACE WATER _____ 0302 _____

0303 GROUND WATER _____ 0304 _____

0305 TRANSFER _____

WELL CONSTRUCTION

0216 WELL DRILL CONSTRUCTION _____ 0218 _____

LINCHMENS POINT _____ 0219 _____

0202 OTHER (IDENTIFY) *COBU* _____ *222.00*

0207 TREASURY (FIS BUREAU CONTACT) _____

0213 POWER LICENSE FEE (TRANSFER) _____

0221 HYDRO LICENSE FEE (TRANSFER) _____

HYDRO APPLICATION _____

SPECIAL INSTRUCTIONS:

Report Review:

- On form provided by the Department (OAR 690-014-0100(1))
- Application & permit #; or transfer # (OAR 690-014)
- Ownership information (OAR 690-014)
- Date of survey (OAR 690-014)
- Person interviewed (OAR 690-014)
- County (OAR 690-014)
- CWRE stamp and signature (OAR 690-014-0100)
- Signature(s) of all permittee of transfer holder (OAR 690-014-0100)

Groundwater File Review: *N/A*

Pump Test Required? YES NO Pump Test Submitted? YES NO*

*If no, include pump test flyer w/acknowledgment letter

RETURN TO APPLICANT - LETTER ATTACHED

**CLAIM OF
BENEFICIAL USE
for Transfer New or Additional
POD Only**



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.oregon.gov/OWRD

RECEIVED

A fee of \$200 must accompany this form for any Transfer final orders including a water right with a priority date of July 9, 1987, or later. NOV 04 2020

Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

OWRD

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 8" 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 and ask for the Certificate Section.

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 where the only authorized change was a change in either point(s) of diversion or additional point(s) of diversion, or a combination of both. YES NO

If additional changes were authorized, you will need to select a different form.

1. File Information

APPLICATION # T-9260

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Amy Woodruff		PHONE NO. 808-346-3253	ADDITIONAL CONTACT NO.
ADDRESS P.O. Box 309			
CITY Cave Junction	STATE OR	ZIP 97523	daughterofthesunaw@gmail.com

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 Amy Woodruff			
ADDRESS P.O. Box 309			
CITY Cave Junction	STATE OR	ZIP 97523	

4. Date of Site Inspection:

9/22/2020

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Justin Woodruff	9/22/2020	Husband of Amy Woodruff

6. County:

Josephine

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)): N/A

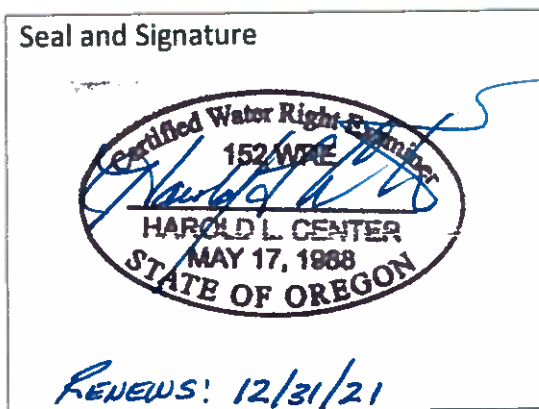
OWNER OF RECORD			
ADDRESS			
CITY	STATE	ZIP	

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.



CWRE NAME Harold L. Center		541-535-6108	ADDITIONAL CONTACT NO. --
ADDRESS 2604 David Lane			
CITY Medford	STATE OR	ZIP 97504	E-MAIL centerl07l@gmail.com

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
	Amy Woodruff	Landowner	9/1/20

SECTION 3
CLAIM DESCRIPTION

Note: The Claim only needs to describe the new or additional point(s) of diversion. This Claim does not need to provide information for the original point(s) of diversion unless the original point of diversion is either a new or additional point of diversion on another right involved in this transfer.

1. New or additional point of diversion name or number:

POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)	SOURCE
POD 1	East Fork Illinois River

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, YES NO or extension final? If yes, describe below.

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

Proposed point of diversion identified in 2002 Application could not be utilized due to low stream flow. Access and difficulty in getting electric power to site. POD was relocated to Tax Lot 104, Map 39 8 20 in NW ¼ NE ¼ Section 20 – Property owned by permit holder.

3. Claim Summary:

NEW OR ADDITIONAL POD NAME OR #	MAXIMUM RATE AUTHORIZED IN ORDER	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
1	0.094 CFS	0.32 CFS	0.238 CFS

SECTION 4
SYSTEM DESCRIPTION

Are there multiple new or additional Points of Diversion (POD)s? 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):

RECEIVED
NOV 04 2020

A. POD System Information

OWRD

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

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Berkley	B1-1/2 TPM	B58146M	Centrifugal	1 1/2"	1 1/2"

2. Motor Information

MANUFACTURER	HORSEPOWER
Baldor	5 (Motor and Pump Tag Pictures Attached)

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
5	41	8'	70	0.32

4. Provide pump calculations:

$$\frac{5 \times 6.61}{70 + 30.48} = \frac{33.05}{100.48} = 0.32 \text{ cfs} = 143.62 \text{ Lift} = 70'$$

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)
00046454	00046554	55.9 "	0.24 cfs

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

B. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the diversion involve a gravity flow pipe? YES NO

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

C. Gravity Flow Canal or Ditch

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

1. Does the diversion involve a gravity flow ditch or canal? YES NO

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

D. Additional notes or comments related to the system: N/A

RECEIVED

NOV 04 2020

**SECTION 5
CONDITIONS**

OWRD

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 NEW AND/OR ADDITIONAL POD(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE “ISSUANCE DATE” AND THE “COMPLETENESS DATE”
ISSUANCE DATE	8/9/2004	
COMPLETENESS DATE FROM ORDER (C)	10/1/2020	9/15/2020

* 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)? YES NO

If “NO”, you may delete the following table.

If for a transfer extension order, provide the following information:

VOLUME	PAGE	DATE EXTENDED TO
100	426	10/1/2020

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 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
1	DLJ	18-048001	Working	00046574	8/4/2020

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 NO

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 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
8/4/2020	Rogue Valley Pump Service

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) and the permit was issued prior to February 1, 2011:

- 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>

RECEIVED

NOV 04 2020

OWRD

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

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

Reminder: If by-pass devices were required, the COBU map must indicate their location in relation to the point of diversion.

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

- a. Was the water user required to restore the riparian area if it was disturbed? YES NO
- b. Was a fishway required? YES NO
- c. 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):

**SECTION 6
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
ODFW	Small Pump Screen Self Certification
Motor/Pump Tags	Photos of Motor and Pump Tags

**SECTION 7
CLAIM OF BENEFICIAL USE MAP (DOCUMENT ATTACHED)**

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.

RECEIVED
NOV 04 2020
OWRD

For the purpose of this Claim, the map identifying the location of the place of use does not require a new survey. The location of the place of use identified on the Claim map should be based on the original right of record at the time the transfer final order was issued. In transfers approved for additional points of diversion, the original points must be identified the map 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.

Trimble GED 7 X GPS, Google Aerial Photo, OR-Map ARLGIS Photos, Terrain Navigator Mapping

RECEIVED

NOV 04 2020

OWRD

Map Checklist

RECEIVED

NOV 04 2020

OWRD

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.) ***Not required for this type of Claim of Beneficial Use**
- Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- 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

RECEIVED

NOV 04 2020

OWRD



OREGON DEPARTMENT of FISH and WILDLIFE

RECEIVED

FISH SCREENING PROGRAM

NOV 04 2020

SMALL PUMP SCREEN SELF CERTIFICATION

OWRD

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: T-9260 Amount of water diverted 42 gpm / 0.094 CFS

Stream: EAST FORK ILLINOIS RIVER Tributary to: ILLINOIS RIVER

Location (GPS if available): 42°10'05.6558 123°40'12.1946"

Screen Length: 14" Screen Diameter: 9.25"

Is pump screen self-cleaning: No

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

SURE-FLO
SFV4FPX14

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: 9/1/20 WRD File #: T-9260

Printed Name and Address: Amy [Signature] PO Box 309 CAVE JUNCTION OR

Phone: () Fax: () 97523

RECEIVED

NOV 04 2020

OWRD

BALDOR

INDUSTRIAL MOTOR

CAT. NO.	JPL1409T		
SPEC.	36E774-190		
FRAME	184JP	SER.	F695
H.P.	5		DP
VOLTS	208-230		
AMPS	24-33		
R.P.M.	3480		
HZ	60	PH	1
SER. F.	Y.15	DES	L
	73	% P.F.	88
	90C AMB-DONT		

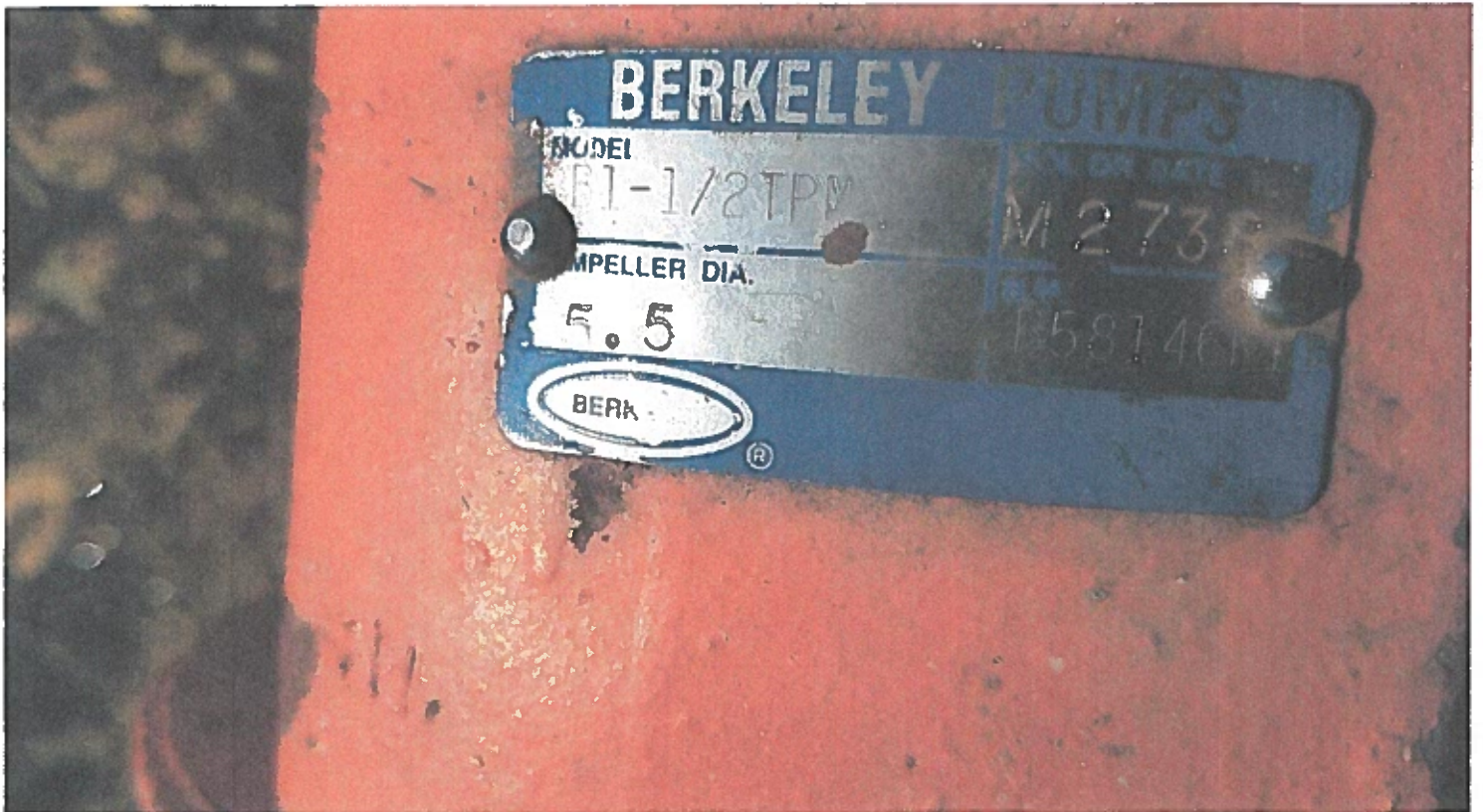
T-9260
Woodruff, My

RECEIVED

NOV 04 2020

OWRD

T-9260
WOODRUFF, Amy

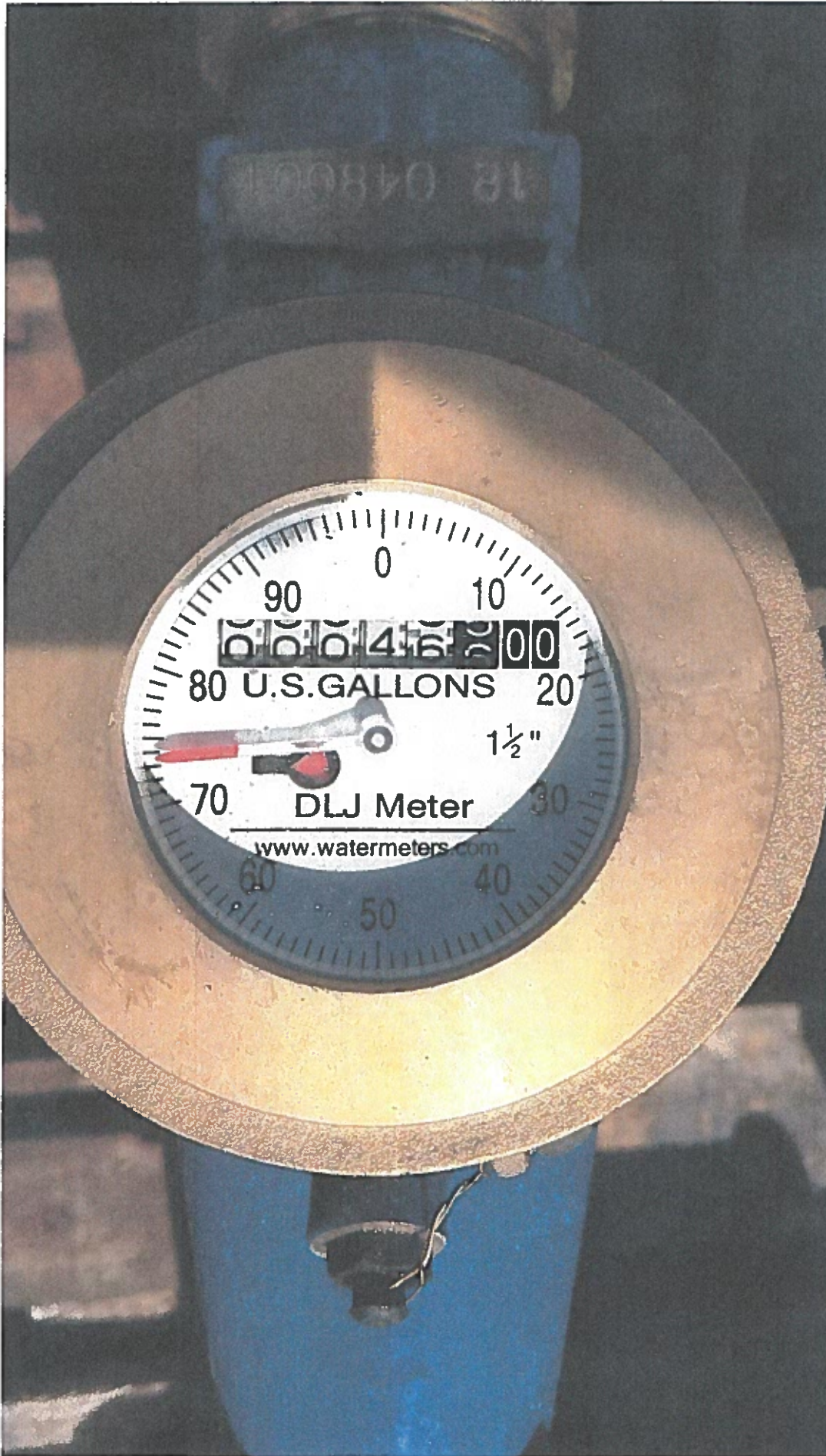


↑ Flow

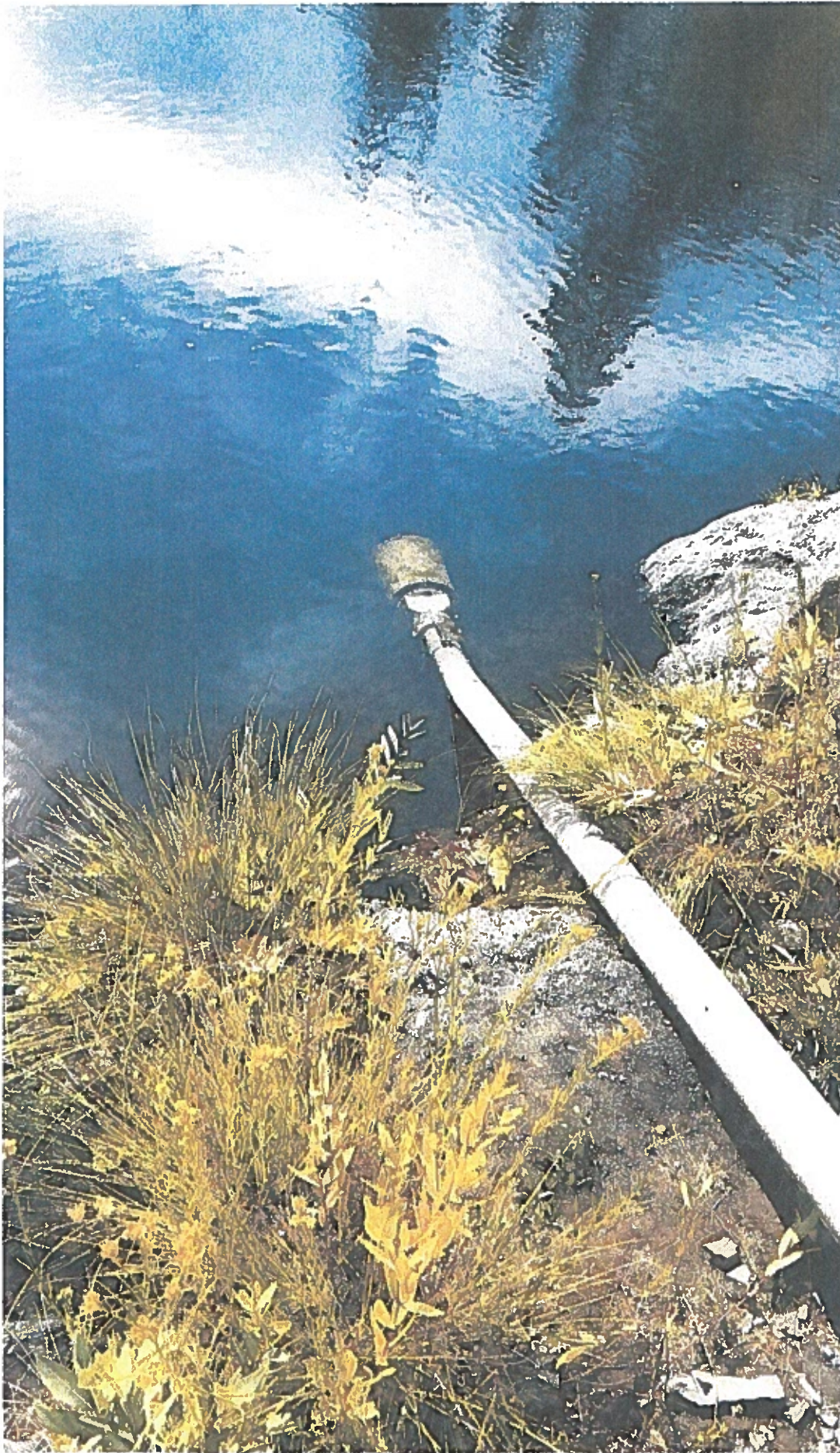
RECEIVED

NOV 04 2020

OWRD



T-9260
 Woodruff,
 Amy



RECEIVED

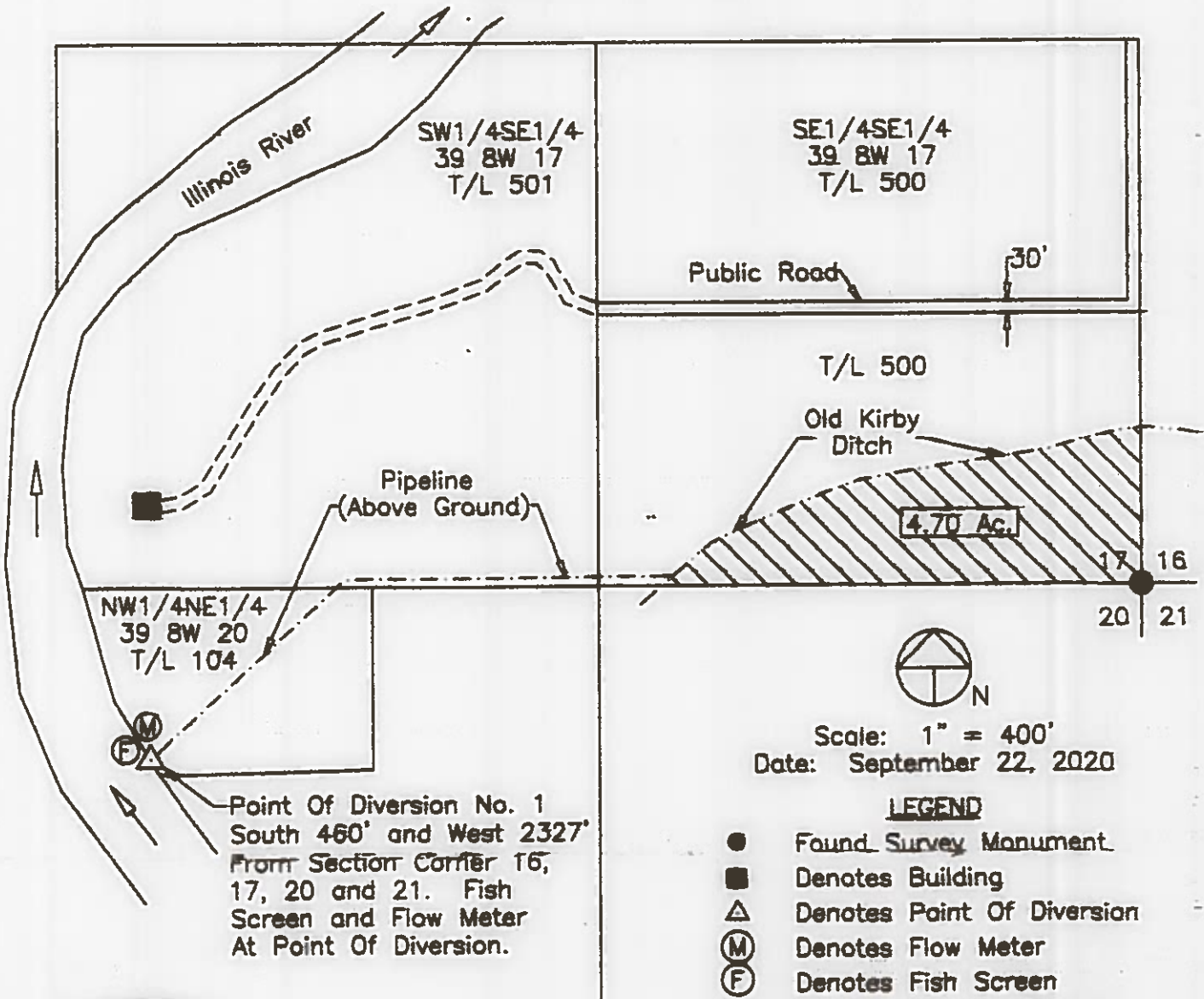
NOV 04 2020

OWRD

T-9260
Woodruff, Amy

CLAIM OF BENEFICIAL USE MAP
 TRANSFER T-9260
 SITUATED IN
 SW1/4SE1/4, SE1/4SE1/4 SECTION 17, T.39S., R.8W.
 NW1/4NE1/4 SECTION 20 T.39S., R.8W.
 JOSEPHINE COUNTY, OREGON
 FOR
 AMY WOODRUFF
 P.O. BOX 309
 CAVE JUNCTION, OR 97523
 SEPTEMBER 22, 2020

RECEIVED
 NOV 04 2020
 OWRD



Point Of Diversion No. 1
 South 460° and West 2327'
 From Section Corner 16,
 17, 20 and 21. Fish
 Screen and Flow Meter
 At Point Of Diversion.

Scale: 1" = 400'
 Date: September 22, 2020

LEGEND

- Found Survey Monument
- Denotes Building
- △ Denotes Point Of Diversion
- (M) Denotes Flow Meter
- (F) Denotes Fish Screen
- ==== Denotes Driveway/Street
- Denotes Above Ground Pipeline Location Approximate



HAROLD L. CENTER
 2604 David Lane
 Medford, OR 97504
 Phone (541) 535-6108
 Oregon Certificate No. 152

This map was prepared for the purpose of identifying the location of a water right only and is not intended to provide legal dimensions or location of property ownership.

Renews: 12/31/21

Project: WOODRUFF-20-6