



**Oregon**  
Kate Brown, Governor

**Water Resources Department**

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

Fax (503) 986-0904

January 29, 2021

Delvin & Nancy Sanders  
339 Bullock Road  
Oakland OR 97462

On January 25, 2021 the Water Resources Department received the Claim of Beneficial Use (COBU) for the following file(s):

Application S-87058 Permit S-54511

The COBU included a report and map. The Department hopes to review your submittal within approximately 2 - 4 years. At that time we will review these items and provide a final certificate, proposed certificate, or a request for additional information.

If you are interested in having your COBU reviewed sooner, you may pay to have your file processed immediately, using the Reimbursement Authority program, which is described at:

<https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/Certificate.aspx>

Customer Service phone: (503) 986-0900

Enclosed is your receipt for the \$200.00 COBU recording fee

If you sell the property, please contact the Department, or have the new owners contact the Department about the need to file an assignment.

Cc: file S-87058  
Nathan Reed, CWRE

# Checklist for Claims of Beneficial Use Received at CSG Counter

Application #:	WRD Reviewer:
Transfer #:	
Date Received:	
CWRE Name:	
Priority Date (s):	

## 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) )

## 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)

**MONEY SLIP**

DATE: \_\_\_\_\_ RECEIPT #: \_\_\_\_\_

RECEIVED FROM: \_\_\_\_\_ APPLICATION PERMIT TRANSFER

CASH  CHECK # \_\_\_\_\_ OTHER (IDENTIFY) \_\_\_\_\_ TOTAL RECD \$ \_\_\_\_\_

1083 TREASURY 4178 MISC CASH ACCT.

0407 COPIES \_\_\_\_\_ \$ \_\_\_\_\_  
 OTHER: (IDENTIFY) \_\_\_\_\_ \$ \_\_\_\_\_

0243 Instream Lease \_\_\_\_\_ 0244 Muni Water Mgmt. Plan \_\_\_\_\_ 0245 Cons. Water \_\_\_\_\_

1083 TREASURY 4270 WRD OPERATING ACCT.

MISCELLANEOUS

0407 COPY & TAPE FEES 4611 \$ \_\_\_\_\_

0410 RESEARCH FEES \$ \_\_\_\_\_

0409 MISC REVENUE (IDENTIFY) \$ \_\_\_\_\_

TC162 DEPOSIT LIAB. (IDENTIFY) \$ \_\_\_\_\_

0240 EXTENSION OF TIME \$ \_\_\_\_\_

WATER RIGHTS EXAM FEE RECORD FEE

0201 SURFACE WATER \$ \_\_\_\_\_ 0202 \$ \_\_\_\_\_

0203 GROUND WATER \$ \_\_\_\_\_ 0204 \$ \_\_\_\_\_

0205 TRANSFER \$ \_\_\_\_\_

WELL CONSTRUCTION EXAM FEE RECORD FEE

0218 WELL DRILL CONSTRUCTOR \$ \_\_\_\_\_ 0219 \$ \_\_\_\_\_

LANDOWNER'S PERMIT \$ \_\_\_\_\_ 0220 \$ \_\_\_\_\_

OTHER (IDENTIFY) COBU \$ 200.00

0607 TREASURY 0487 HYDROELECTRIC

0233 POWER LICENSE FEE (FWWRD) LIC NUMBER \_\_\_\_\_ \$ \_\_\_\_\_

0231 HYDRO LICENSE FEE (FWWRD) \_\_\_\_\_ \$ \_\_\_\_\_

HYDRO APPLICATION \$ \_\_\_\_\_

SPECIAL INSTRUCTIONS:

RETURN TO APPLICANT -- LETTER ATTACHED

## Groundwater File Review:

- Pump Test not required (Priority Date prior to December 20, 1988) \*If no, include pump test flyer w/acknowledgment letter
- Pump Test required (Priority Date on or after December 20, 1988)
- Pump Test submitted
- Pump Test not submitted

# 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](http://www.oregon.gov/OWRD)

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**A fee of \$200 must accompany this form for permits  
with priority dates of July 9, 1987, or later.**

**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 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

**1. File Information:**

APPLICATION # <b>S- 87058</b>	PERMIT # (IF APPLICABLE) <b>S-54511</b>	PERMIT AMENDMENT # (IF APPLICABLE)
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>Delvin &amp;/or Nancy Sanders</b>		PHONE NO. <b>541-459-3422</b>	ADDITIONAL CONTACT NO. <b>NA</b>
ADDRESS <b>339 Bullock Road</b>			
CITY <b>Oakland</b>	STATE <b>OR</b>	ZIP <b>97462</b>	E-MAIL <b>NA</b>

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 <b>Delvin Sanders</b>			
ADDRESS <b>339 Bullock Rd</b>			
CITY <b>Oakland</b>	STATE <b>OR</b>	ZIP <b>97462</b>	<b>RECEIVED RECEIVED JAN 25 2021</b>

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ADDITIONAL PERMIT HOLDER OF RECORD <b>NA</b>		
ADDRESS		
CITY	STATE	ZIP

**4. Date of Site Inspection:**

<b>12-10-2020</b>
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**5. Person(s) interviewed and description of their association with the project:**

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Nancy Sanders</b>	<b>12-10-20</b>	<b>Landowner</b>

**6. County:**

<b>Douglas</b>
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**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)):**

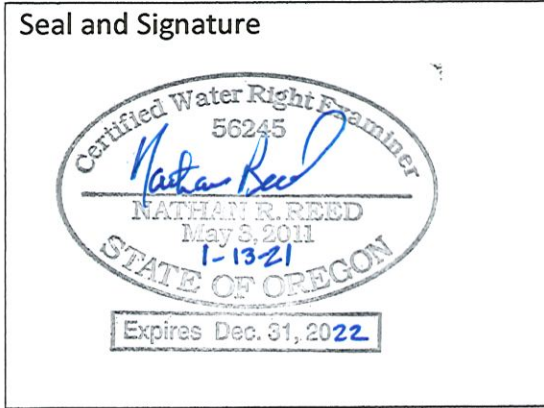
OWNER OF RECORD <b>NA</b>		
ADDRESS		
CITY	STATE	ZIP

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 <b>Nathan Reed</b>		PHONE NO. <b>541-784-7191</b>	ADDITIONAL CONTACT NO. <b>NA</b>
ADDRESS <b>157 West Bodie Street</b>			
CITY <b>Roseburg</b>	STATE <b>OR</b>	ZIP <b>97471</b>	E-MAIL <b>nreed68@hotmail.com</b>

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>Delvin Sanders</i>	Delvin Sanders		1-20-21

SECTION 3  
 CLAIM DESCRIPTION

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

POD NAME OR NUMBER	SOURCE	TRIBUTARY
POD 1	Galesville Reservoir (R-9964)	Umpqua River
POD 2	Umpqua River	Pacific Ocean

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 2	Dom. Exp. 1 hse	NA	Year Round	2.0 AF
<b>Total Quantity of Water Used</b>				<b>2.0 AF</b>

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:

Contracted water released from Galesville Dam is re-diverted at POD 2 on the Umpqua River via a submersible pump up to an above ground 1550 gallon ABS tank. The tanked water is drawn by a secondary centrifugal pump in a pump house containing a totalizing flow meter, pressure bladder, filtration and purification. The water is provided to the whole house domestic service.

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
POD 2	0.01 cfs	0.01 cfs	Not measured	Dom. Exp.	0.50	0.0

**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):

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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)
Grundfos	10S05-9K	NA	Submersible

**3. Theoretical Pump Capacity:**

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
0.50	60	-5 feet	89 feet	0.01

**4. Provide pump calculations:**

60 psi = 152.4 feet;  $Q = (Hp \times \text{eff.}) / (\text{Sum Total Head}) = (0.5 \times 7.04) / (152.4 - 5 + 89) = 0.01 \text{ cfs}$

**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)
Not operating at	time of survey		

**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)
5/32	50	5.0	1.0	1.0	0.01

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)?

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

If "YES" is it a:           Storage Tank  
  Bulge in System / Reservoir

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

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YES  
YES  
NO

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED
ABS	1550	Above



**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?

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**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

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

**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	11/7/2008		
BEGIN CONSTRUCTION (A)		11/2006	Home placed, started developing system
COMPLETE CONSTRUCTION (B)		11/25/2020	Meter installed
COMPLETE APPLICATION OF WATER (C)	10/1/2021	11/25/2020	Beneficially using water through whole home.

\* 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?

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**

*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
<b>POD 2</b>	<b>Zenner</b>	<b>00886904</b>	<b>Working</b>	<b>895.55 gallons</b>	<b>11/25/2020</b>

**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? **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
<b>11/2006</b>	<b>Tinker's Pump Service</b>

**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.**

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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**

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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**
- b. 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):

- a. Riparian disturbance minimized and has returned to natural state.
- b. Water right is subject to terms and conditions of contract No. D-2008-2 between Douglas County and the applicant, or a satisfactory replacement.

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**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Pump screen cert	Fish screen self certification
CBU Map	Final Proof Survey

## 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.

**A Garmin Rino 650 handheld GPS was used to locate coordinates of pertinent features. Use of the Douglas County GIS with aerial have 0.5 foot resolution.**

### 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
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- 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



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

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-54511 Amount of water diverted 0.1 cfs

Stream: Umpqua River Tributary to: Pacific Ocean

Location (GPS if available): N 43° 28' 50.59" W 123° 28' 46.80"

Screen Length: 38" Screen Diameter: 6"

Is pump screen self-cleaning: No

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

Certification:

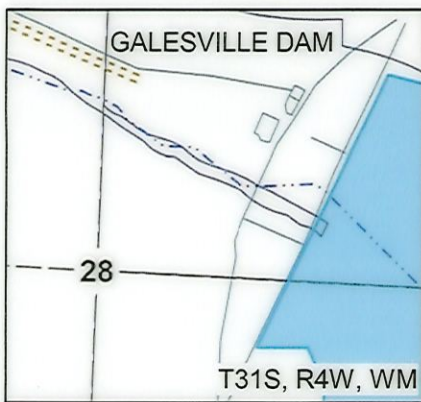
I certify that my permit or transfer final order was issued prior to February 1, 2011.

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: Delvin Sanders Date: 1/20/21 WRD File #: \_\_\_\_\_

Printed Name and Address: Delvin Sanders 339 Bullock Rd, Oakland, OR 97462

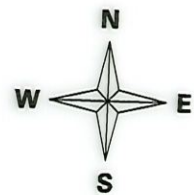
Phone: (541) 459-3422 Fax: ( ) NA



# CLAIM OF BENEFICIAL USE MAP

FOR: DELVIN SANDERS  
 BY: NATHAN REED, PE, CWRE  
 T24S, R7W, W.M. SECTION 13, GLOT 7  
 APPLICATION NO. S-87058  
 PERMIT NO. S-54511

DATE SURVEYED: DECEMBER 10, 2020

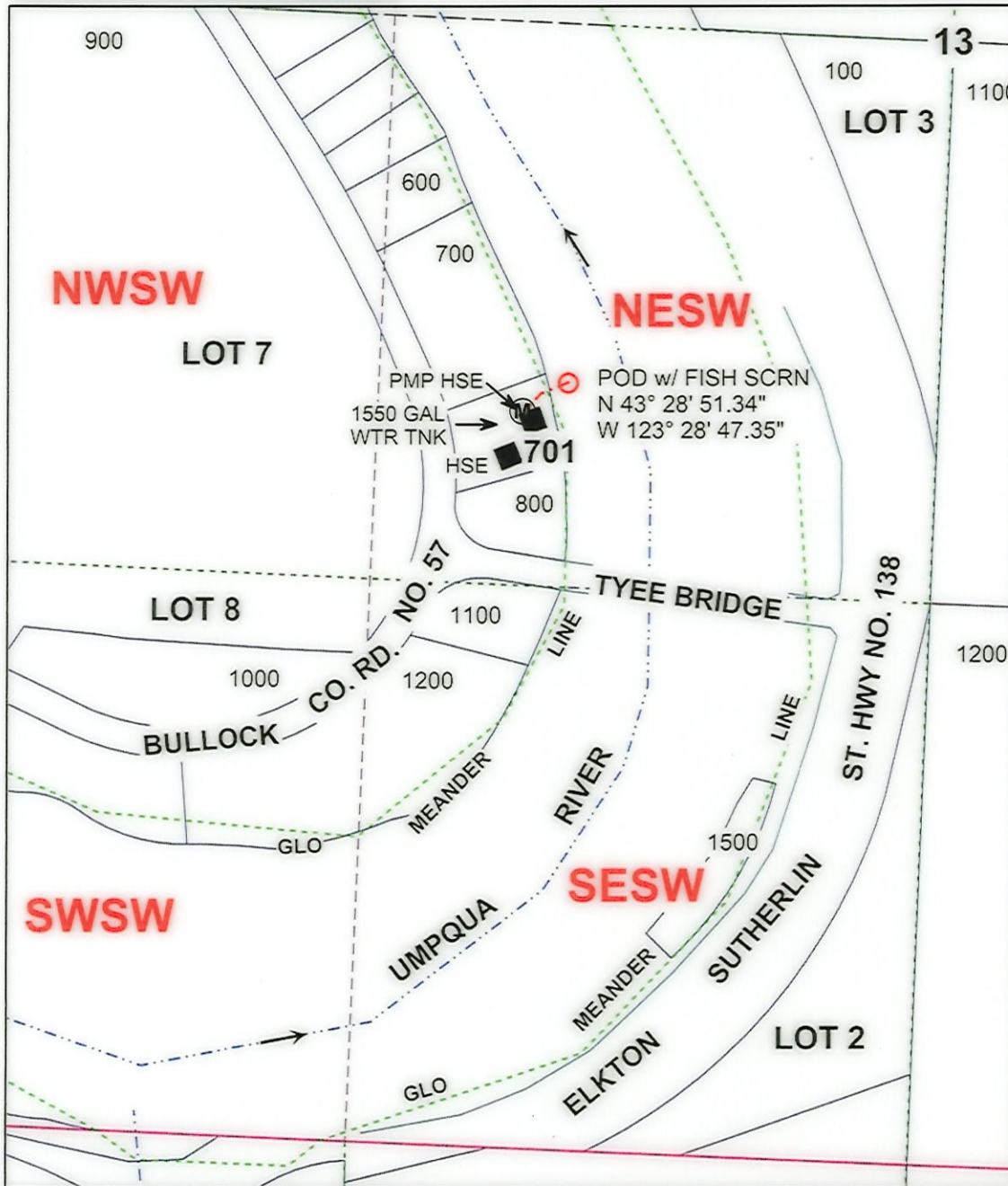


SCALE: 1" = 400'

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OWRD OWRD  
 Legend

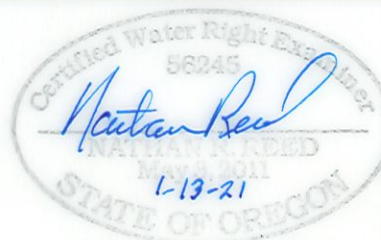


- Stream
- POD
- Pipeline
- Water Tank
- Meter
- Structures
- Flow arrow
- Gov Lot
- Meander
- Quarter
- Sixteenth
- Parcels

MAP PREPARED FOR:  
 DELVIN SANDERS  
 339 BULLOCK RD  
 OAKLAND, OR 97462

POD IS LOCATED 895 FEET SOUTH AND 940 FEET WEST FROM THE C1/4 CORNER, SECTION 13 AS PROJECTED IN GOVERNMENT LOT 7.

THE PURPOSE OF THIS MAP IS TO IDENTIFY THE LOCATION OF THE WATER RIGHT. IT IS NOT INTENDED TO PROVIDE INFORMATION RELATIVE TO THE LOCATION OF PROPERTY OWNERSHIP BOUNDARY LINES.



MAP PREPARED BY:  
 NATHAN R. REED, PE, CWRE  
 157 WEST BODIE STREET  
 ROSEBURG, OR 97471

Expires Dec. 31, 2022