

# MONEY SLIP

DATE: <u>2-18-2021</u>	RECEIPT #: <u>134563</u>
------------------------	--------------------------

RECEIVED FROM: Blanco Boggs Inc

APPLICATION	
PERMIT	
TRANSFER	

CASH ☐ CHECK # 9206 OTHER (IDENTIFY) ☐

TOTAL REC'D \$ 200.00

**1083 TREASURY** **4170 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	\$
0410 RESEARCH FEES	\$
0408 MISC REVENUE (IDENTIFY) _____	\$
TC162 DEPOSIT LIAB. (IDENTIFY) _____	\$
0240 EXTENSION OF TIME _____	\$

## WATER RIGHTS

0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
0203 GROUND WATER	\$	0204	\$
0205 TRANSFER	\$		\$

## WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	RECORD FEE
LANDOWNER'S PERMIT	\$	0220	\$
OTHER (IDENTIFY) _____			\$

**0607 TREASURY** **0467 HYDROELECTRIC**

0233 POWER LICENSE FEE (FW/WRD)	LIC NUMBER
0231 HYDRO LICENSE FEE (FW/WRD)	\$
HYDRO APPLICATION	\$

## SPECIAL INSTRUCTIONS:

☐ RETURN TO APPLICANT -- LETTER ATTACHED

single  
mylar included



**Oregon**  
Kate Brown, Governor

**Water Resources Department**

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

Fax (503) 986-0904

February 26, 2021

Blanco Bogs  
Attn: Alex Ells  
PO Box 41  
Port Orford OR 97465

On February 18, 2021, the Water Resources Department received the Claim of Beneficial Use (COBU) for the following Transfer(s):

T-12924

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>

For all other questions please call our Customer Service phone: (503) 986-0900.

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 T-12924  
Kenna Clay Jordan, 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 REC'D \$ \_\_\_\_\_

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

0201 SURFACE WATER EXAM FEE \$ \_\_\_\_\_ RECORD FEE \$ \_\_\_\_\_  
0203 GROUND WATER \$ \_\_\_\_\_ 0202 \$ \_\_\_\_\_  
0205 TRANSFER \$ \_\_\_\_\_ 0204 \$ \_\_\_\_\_

WELL CONSTRUCTION

0218 EXAM FEE \$ \_\_\_\_\_ RECORD FEE \$ \_\_\_\_\_  
WELL DRILL CONSTRUCTOR \$ \_\_\_\_\_ 0219 \$ \_\_\_\_\_  
LANDOWNER'S PERMIT \$ \_\_\_\_\_ 0220 \$ \_\_\_\_\_  
OTHER (IDENTIFY) \$ \_\_\_\_\_

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 Transfer New or Additional  
POA Only**



**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 any Transfer final orders 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.**

**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 point(s) of appropriation or additional point(s) of appropriation, or a combination of both. **YES NO**  
*If additional changes were authorized, you will need to select a different form.*

**1. File Information**

APPLICATION # <b>T-12924</b>
---------------------------------

**2. Property Owner (current owner information)**

APPLICANT/BUSINESS NAME <b>Blanco Bogs (Alex Ells)</b>		PHONE NO. <b>541 332-7805</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>P.O. Box 41</b>			
CITY <b>Port Orford</b>	STATE <b>OR</b>	ZIP <b>97465</b>	E-MAIL

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 <b>Same</b>			
ADDRESS			
CITY	STATE	ZIP	

**4. Date of Site Inspection:**

<b>10/21/2020</b>
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5. Person(s) interviewed and description of their association with the project:

NAME	DATE	ASSOCIATION WITH THE PROJECT
Alex Ells	10//21/2020	Owner, President
Drew Ells	10/21/2020	Lives on site

6. County:

Curry

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)):

OWNER OF RECORD		
NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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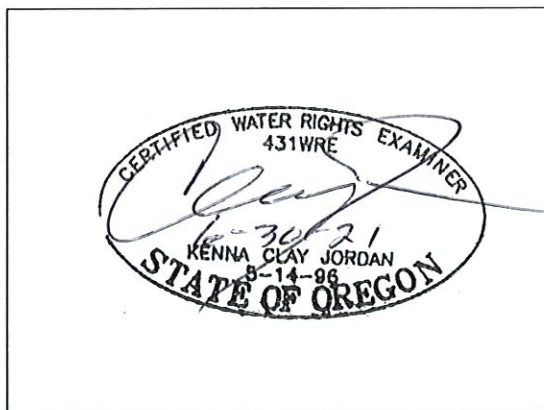
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SECTION 2  
SIGNATURES

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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 Kenna Clay Jordan		PHONE NO. 541 673-1931	ADDITIONAL CONTACT NO.
ADDRESS 460 Jordan Lane			
CITY Roseburg	STATE OR	ZIP 97471	E-MAIL


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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
	Alex Ells	President	2/10/21

## SECTION 3

## CLAIM DESCRIPTION

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

## 1. New or additional point of appropriation name or number:

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
Well 2	CURR 52713	L-122732	Well #2

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

*If well logs are available, items A and B below can be deleted*

**2. Variations:**

Was the use developed differently from what was authorized by the transfer final order, or extension final? **NO**

If yes, describe below.

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

**3. Claim Summary:**

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
Well 2	0.41	0.22	0.20

**SECTION 4****SYSTEM DESCRIPTION****RECEIVED****FEB 18 2021**

Are there multiple new or additional Points of Appropriation (POA)?

If "YES" you will need to copy and complete a separate Section 4.

POA Name or Number this section describes (only needed if there is more than one):

**NO****OWRD**

**A. POA System Information**

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

**1. Pump Information**

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Berkeley	Unknown	Unknown	Submersible	Unknown	Unknown

**2. Motor Information**

MANUFACTURER	HORSEPOWER
Franklin?	3 HP

**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)
3	20±	40±	5	0.22



4. Provide pump calculations:

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$$Q \text{ CFS} = \frac{(\text{hp}) (\text{Pump efficiency})}{\text{Total head in feet}} \quad \text{Well \#2} \quad Q = \frac{(3) (7.04)}{50.8+40+5} = \frac{21.12}{95.8} = 0.22$$

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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)
		As well being used	91 GPM = 0.20

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

**B. Groundwater Source Information (Well and Sump)**

3. Is the appropriation from a dug well (sump)?

NO

If "NO", items 4 through 6 relating to this section may be deleted.

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

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

**SECTION 5  
CONDITIONS**

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 POA(S) WERE READY FOR USE *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	11/4/2019	
COMPLETENESS DATE FROM ORDER (C)	10/1/2021	Well drilled 9/14/2016. Pump/Meter installed in 2020 Well used for cranberry operations & supp'l cranberry @ Agricultural use



\* MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

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2. Is there an extension final order(s)?

NO

If "NO", you may delete the following table.

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

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 appropriation.

b. Has a meter been installed? YES

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well 2	Assured Automation	8932-6	working	209987 Gal	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? NO

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

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

a. Were there special well construction standards? NO

b. Was submittal of a ground water monitoring plan required? NO

c. 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):

Meters are installed at all POA's

**SECTION 6**  
**ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION

**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 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.

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 appropriation, 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.

Used Curry Co. GIS for base map. 5/1/15 Google aerial and 2005 FSA aerial photo scaled and overlaid For assumed best fit. Adjusted to previous COBU and FPS maps. Orientation adjusted to recorded Survey 31-73

## Map Checklist

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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
- ☐ NA 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
- ☐ NA 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



# CLAIM OF BENEFICIAL USE

TRANSFER T-12924

IN THE NAME OF BLANCO BOGS

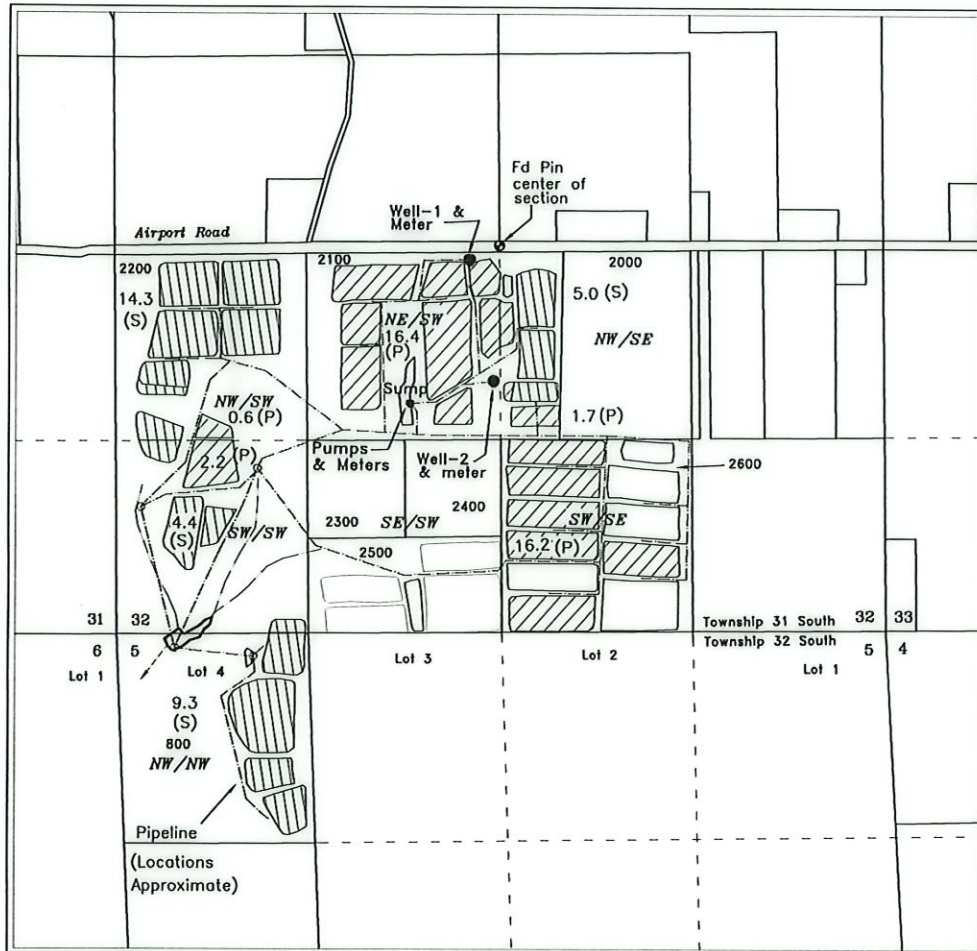
SECTION 32, TOWNSHIP 31 SOUTH, RANGE 15 WEST, W.M. **OWRD**  
AND

SECTION 5, TOWNSHIP 32 SOUTH, RANGE 15 WEST, W.M.

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NORTH

Scale  
1 inch = 1320 feet

Legend

WELL-1 - NE/SW, SECTION 32, 2560 FEET NORTH & 2430 FEET EAST  
SUMP (Pump & Meter) - NE/SW, SECTION 32, 1600 FEET NORTH & 2015 FEET EAST  
BOTH FROM THE SW CORNER OF SECTION 32

#### Additional POA

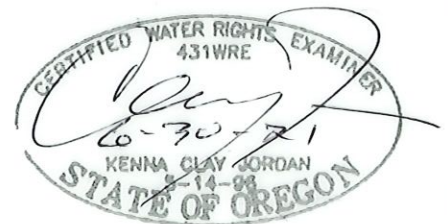
WELL-2 - NE/SW, SECTION 32, 1735 FEET NORTH & 2570 FEET EAST  
FROM THE SW CORNER OF SECTION 32



(P) Primary Cranberry Operations - 37.1 Acres



(S) Supplemental Cranberry Operations - 33.0 Acres



This map is not intended to provide legal dimensions or locations of property ownership lines

Base map from Curry County GIS over 5/1/15  
Google aerial photo and 2005 FSA  
aerial photo for assumed best fit and adjusted to  
closely fit previous COBU and Final Proof Survey maps.  
Orientation adjusted to recorded survey 31-73

JORDAN ENGINEERING  
460 JORDAN LANE  
ROSEBURG, OR 97471  
(541) 673-1931

2/2/2021 - ned

# Jordan Engineering

Structural-Civil-Geotech  
460 Jordan Lane  
Roseburg, OR 97471  
541-673-1931

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Water Resources Department  
Mr. Gerry Clark  
725 Summer St. NE, Suite A  
Salem, OR 97301

Claim Of Beneficial Use:  
Transfer T-12924

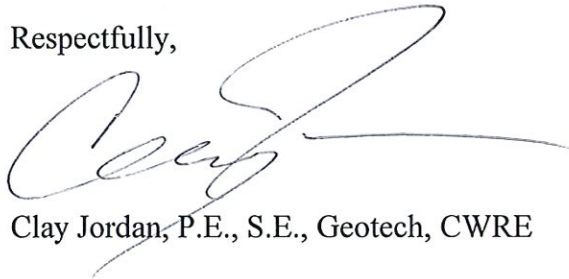
February 16, 2021

Mr. Clark:

Inclosed are the Claim of Beneficial Use (COBU) form, Mylar map and a check #9206 in the sum of \$200 made out to the Department.

If there are any questions please officially contact the applicant with a copy to me.

Respectfully,



Clay Jordan, P.E., S.E., Geotech, CWRE

cc: Mr. Alex Ells

file: Ells- Blanco Bogs T-12924 COBU WRDcl.wpd