



Oregon
Kate Brown, Governor

Water Resources Department

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

Fax (503) 986-0904

June 9, 2021

Edward M Ginocchio
13265 Marsh Creek Rd
Clayton CA 94517

RE: Transfer T-12526

Dear Transfer Holder,

On May 28, 2021, the Department received the Claim of Beneficial Use that you submitted for the above referenced file.

Enclosed, you will find a refund check in the amount of \$200.00. You are receiving this check because the right involved in the transfer has a priority date prior to July 9, 1987. Due to the priority date of the right, there was no fee required to submit the Claim.

If you have any additional questions, please feel free to contact me at 503-986-0810.

Sincerely,

Judy Ferrell
Customer Service Representative
Water Right Services Division

cc: file T-12526

enclosures

Checklist for Claims of Beneficial Use Received at CSG Counter

Application #:	WRD Reviewer: Judy
Transfer #: T-12526	
Date Received: 05/28/2021	
CWRE Name: Joseph L Strahl {Expiration date 06/30/2022}	
Priority Date (s): 06/23/1969	

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.

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)

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

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 _____ \$ _____

0205 TRANSFER _____ \$ _____

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR EXAM FEE _____ RECORD FEE _____

LANDOWNER'S PERMIT _____ \$ _____

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

Fill in App
or Transfer
Number

**CLAIM OF
BENEFICIAL USE
for Transfers
Place of Use Only**



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

YES

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

1. File Information

APPLICATION # T-12526

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Edward M. Ginocchio		PHONE NO. 530-640-8372	ADDITIONAL CONTACT NO.
ADDRESS 13265 Marsh Creek Rd			
CITY Clayton	STATE CA	ZIP 94517	E-MAIL kd4st5@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 Same		
ADDRESS		
CITY	STATE	ZIP

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4. Date of Site Inspection:

October 1, 2020

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Edward Ginochio	10/01/2020	Landowner

6. County:

Lake

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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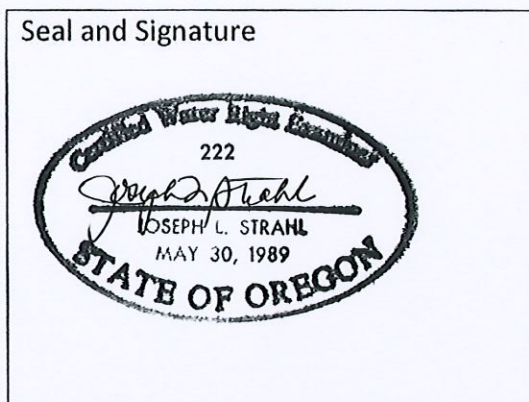
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SECTION 2 SIGNATURES

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 Joseph L. Strahl		PHONE NO. 541-301-2946	ADDITIONAL CONTACT NO.
ADDRESS 9300 John Day Drive			
CITY Gold Hill	STATE OR	ZIP 97525	E-MAIL joe4548@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
	Edward M. Ginochio	Owner	5-25-2021

SECTION 3

EXTENT OF CHANGE COMPLETED

1. Claim Summary:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
97.39	97.39

If the use(s) was not irrigation or nursery:

WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER? (INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)
YES

2. Variations:

Was the use developed differently from what was authorized by the transfer final order? NO

If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

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SECTION 4

CONDITIONS

All conditions contained in the transfer, 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 AUTHORIZED CHANGE WAS COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	Sept. 1, 2017	
COMPLETENESS DATE FROM ORDER (C)	Oct. 1, 2018	September 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

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

VOLUME	PAGE	DATE EXTENDED TO
112	3	October 1, 2021

3. Measurement Conditions:

a. Does the transfer final order require the installation of a meter or approved measuring device?

YES

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 or appropriation.

b. Has a meter been installed?

YES

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Well #1	McCrometer	NA	Working	943.393	Pre-existing

4. Other conditions required by the transfer final order:

a. 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):

NA

SECTION 5 ATTACHMENTS

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

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ATTACHMENT NAME	DESCRIPTION
Water meter photo	Photo of the water meter. Cap that has the serial number is broken off.
Claim Map	

SECTION 6

CLAIM OF BENEFICIAL USE MAP

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A 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 must identify the developed new place of use. The existing point(s) of diversion or point(s) of appropriation are required to be included on the Claim map, based on the locations described in the transfer final order.

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.

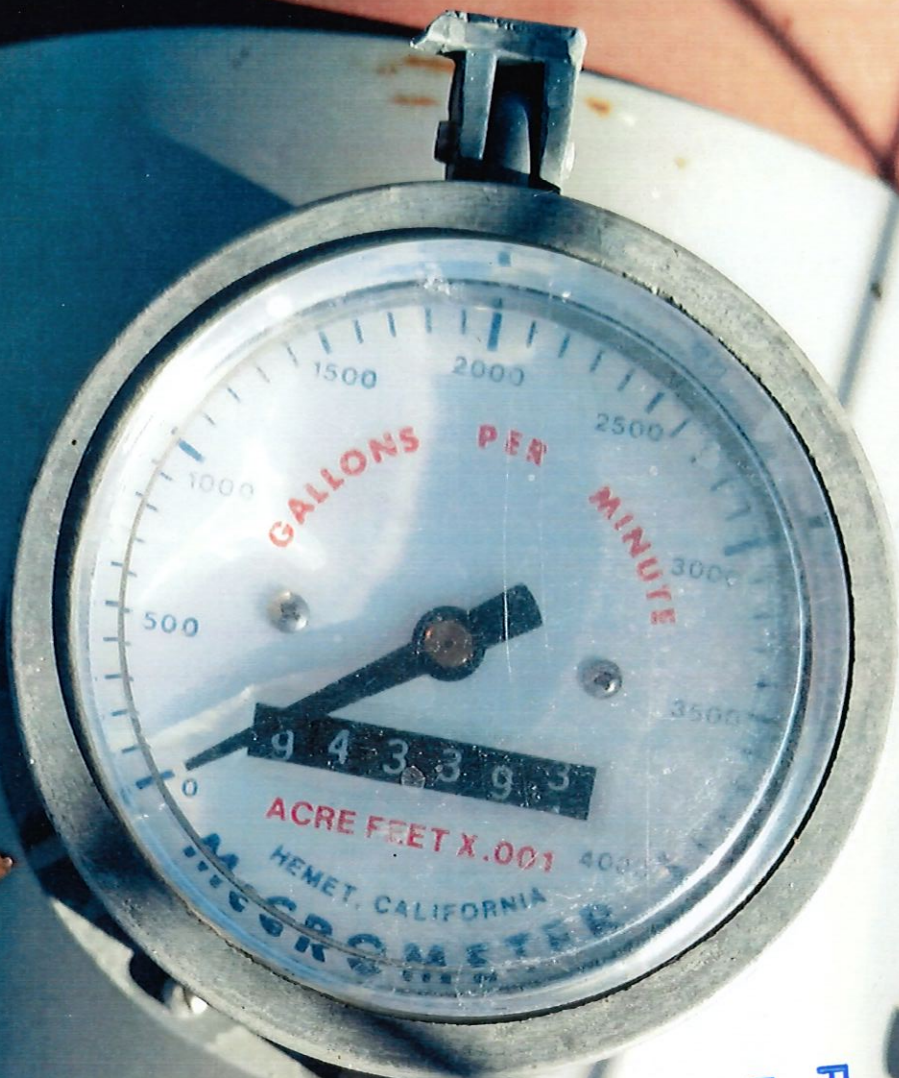
We use ArcView 10.8.1 mapping. The Lake County tax lot GIS layer is used for property lines. The Oregon Geospatial Library data is used for the PLSS section and quarter quarter GIS data. Measurements were made on the ESRI aerial World Imagery layer dated 7/20/2020. Accuracy of the aerial imagery was verified using the OnX Hunt GPS function on a smart phone.

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
- N/A 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
- N/A 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
- N/A Source illustrated if surface water
- ☒ Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- ☒ Transfer application number
- ☒ North arrow
- ☒ Legend
- ☒ CWRE stamp and signature



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Claim of Beneficial Use Map

Application T-12526

for

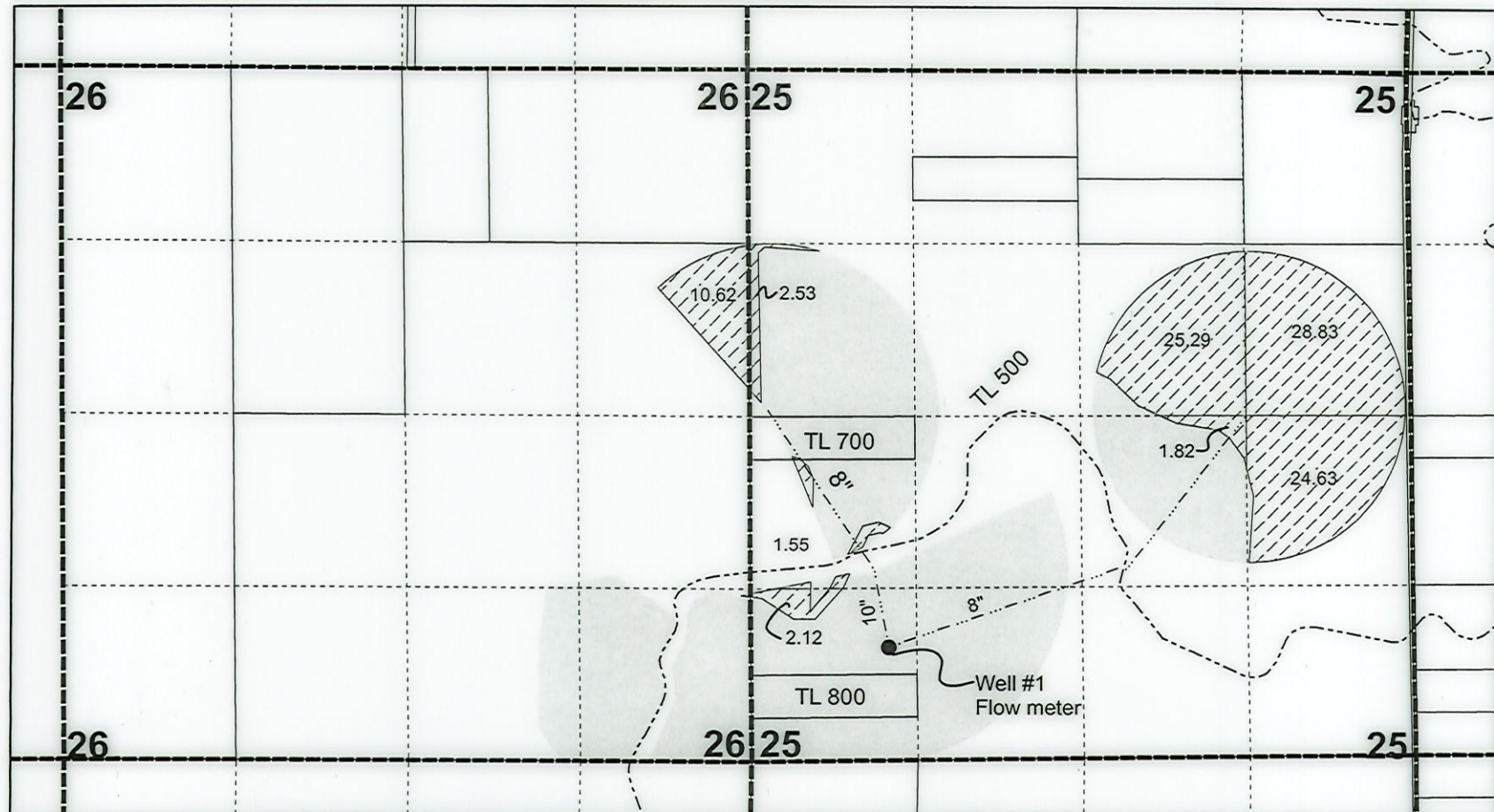
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T 39 S, R 18 W
Sec 25 & 26

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Legend

- T-12526 area irrig 97.39 ac
- Well #1 & Flow meter
- Buried Pipeline
- Existing Cert 93338
- LWU Canal

POA is Well #1
LAKE 2141
940 ft N & 890 ft E
Fm SW Cor Sec 25

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



1 inch = 1,320 feet