## CLAIM OF **BENEFICIAL USE** for Reservoir Permits by CWRE's (not self-certified)



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

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A fee of \$200 must accompany this form for permits with priority dates of July 9, 1987, or later. Claims received without the correct fee of \$200 will be returned.

### 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 # | PERMIT # (IF APPLICABLE) | PERMIT AMENDMENT # (IF APPLICABLE) |
|---------------|--------------------------|------------------------------------|
| R-87496       | R14830                   | T-11435                            |

| 2. | <b>Property</b> | Owner | (current | owner | information | ١ |
|----|-----------------|-------|----------|-------|-------------|---|
|----|-----------------|-------|----------|-------|-------------|---|

| APPLICANT/BUSINESS NAME           |       | PHONE NO.  | 5.22       | Additional Contact No. |
|-----------------------------------|-------|------------|------------|------------------------|
| Steven M. and Rosalba M. Goffena  |       | 971-400-61 | .62        |                        |
| Address                           |       |            |            |                        |
| 22185 SW 106 <sup>th</sup> Avenue |       |            |            |                        |
| Сіту                              | STATE | ZIP        | E-MAIL     |                        |
| Tualatin                          | OR    | 97062      | steve@eola | hillfarms.com          |

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. <u>Each</u> 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    |          |           |             |
|----------------------------|----------|-----------|-------------|
| Steven M. and Rosalba Goff | ena      |           | RECEIVED    |
| Address                    |          |           | HEOLIVED    |
| 16005 DW Inverurie Road    |          |           | MAY 27 2021 |
| CITY Lake Oswego           | STATE OR | ZIP 97035 |             |
|                            |          |           | OWRD        |

| Additional Permit Holder of Reco | ORD   |     |  |
|----------------------------------|-------|-----|--|
| Address                          |       |     |  |
| Сіту                             | STATE | ZIP |  |

### 4. Date of Site Inspection:

July 17, 2020 and January 14, 2021

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

| Name          | DATE             | Association with the Project |
|---------------|------------------|------------------------------|
| Steve Goffena | July 17, 2020    | Co-owner                     |
| Steve Goffena | January 14, 2021 | Co-owner                     |

### 6. County

Yamhill

## 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 |       |     |
|-----------------|-------|-----|
| Address         |       |     |
| Сіту            | STATE | ZIP |

Add additional tables for owners of record as needed

# 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           |       | PHONE NO                   |         | ADDITIONAL CONTACT NO. |
|---------------------|-------|----------------------------|---------|------------------------|
| Leland A. Hardy     |       | O. 503-58                  | 31-9272 | C. 503-559-0551        |
| Address             |       |                            |         |                        |
| 690 Loring Drive NW |       |                            |         |                        |
| Сіту                | STATE | ZIP                        | E-MAIL  |                        |
| Salem               | OR    | 97304 hardyeng@comcast.net |         | Ocomcast.net           |

### Permit Holder's of Record Signature or Acknowledgement

**<u>Each</u>** permit or 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      |
|-------------------|--------------------|----------|-----------|
| Steven M. Deffere | Steven M. Goffena  | Co-owner | 5-26-2021 |
| Busalla Siffena   | Rosalba M. Goffena | Co-owner | 5-26-2021 |
|                   |                    | 3        |           |
| 8                 |                    |          |           |
|                   |                    |          |           |

### **SECTION 3**

### **CLAIM DESCRIPTION**

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

| Reservoir<br>Name or Number | Source             | Tributary                   |
|-----------------------------|--------------------|-----------------------------|
| Unnamed                     | Intermittent creek | Unnamed Tributary Ash Swale |
|                             |                    |                             |
|                             |                    |                             |

2. Developed use(s), period of use, and acre foot (af) for each use:

| RESERVOIR<br>NAME OR NUMBER  | USES          | SEASON OR MONTHS WHEN WATER WAS APPROPRIATED FOR STORAGE | VOLUME STORED (AF) |
|------------------------------|---------------|--|--------------------|
| Unnamed                      | Multi-purpose | October 1 thru April 30                                  | 13.1 AF            |
|                              |               |  |                    |
| Total Quantity of Water Stor | ed            |  | 13.1 AF            |

3. Provide a general narrative description of the distribution works. This description must trace the water system from each point of diversion to the reservoir:

3 Hp pump draws water from intermittent creek October 1 through April 30, to store in off-channel reservoir for multi-purpose use, including aesthetics, wildlife, nursery and irrigation.

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.

X YES NO

(e.g. "The permit allowed the development of three reservoirs. The permit holder only developed one of the reservoirs." or "The permit allowed for the storage of 9 acre feet of water. The reservoir was developed to hold 5.2 acre feet.")

Application R-877496 and T-11435 which increased potential reservoir storage to 27 AF. Only 13.1 AF were developed.

### 5. Claim Summary:

| RESERVOIR NAME OR # | MAXIMUM STORAGE AUTHORIZED BY PERMIT (AF) | MAXIMUM STORAGE DEVELOPED (AF) |  |
|---------------------|---|--------------------------------|--|
| Unnamed             | 27 AF                                     | 13.1 AF                        |  |
|                     |   |                                |  |

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### **SECTION 4**

### SYSTEM DESCRIPTION

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X NO

Are there multiple reservoirs?

If "YES" you will need to copy and complete Sections A through E for each reservoir.

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

### A. Reservoir Location

1. Is the reservoir on-channel?

YES X NO

2. Provide dam outlet location and/or point of diversion(s).

| TWP        | RNG | MER | SEC | QQ   | GLOT | DLC | MEASURED DISTANCES                                   |
|------------|-----|-----|-----|------|------|-----|--|
| <b>5</b> S | 4 W | WM  | 28  | NESE |      | 48  | POD 350' west & 50' South E 1/4 corner<br>Section 28 |
|            |     |     |     |      |      |     |  |

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (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 the water from the point(s) of diversion to the reservoir.

1. Is a pump used?

X YES NO

If "NO" items 2 through item 5 may be deleted.

#### 2. Pump Information

| MANUFACTURER               | Model       | SERIAL NUMBER | Type (Centrifugal, turbine or submersible) |
|----------------------------|-------------|---------------|--|
| POD – Unknown Manufacturer | ?           | ?             | Centrifugal                                |
| Sprinkler Berkley          | B 2 ½ - ZPL | M26986        | Centrifugal                                |

### 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) |
|-------------------|---------------|---|--------------------------------|----------------------------|
| POD 3 Hp          | 18 psi        | 5 feet  | 15 feet (reservoir)            | 0.43 cfs                   |
| Sprinkler - 30 HP | 85 psi        | 10 feet (ave. reservoir surface                                       | 44 feet                        | 0.92 cfs                   |

### 4. Provide pump calculations:

| 1800 rpm POD pump          | 3600 rpm Sprinkler pump |
|----------------------------|-------------------------|
| 3  Hp  (6.661) = 0.43  cfs | 30 Hp (6.61) = 0.92 cfs |
| 40 ft hd                   | 216 ft hd               |

5. Measured Pump Capacity (using meter if meter was present and system was operating)

| INITIAL METER READING | ENDING METER READING | DURATION OF TIME | TOTAL PUMP OUTPUT |
|-----------------------|----------------------|------------------|-------------------|
|                       |                      | OBSERVED         | (IN CFS)          |
|                       |                      |                  |                   |

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

6. Additional notes or comments related to the system:

Water is pumped from intermittent creek October 1 through April 30 to fill off channel reservoir. During growing season irrigation watered pumped from reservoir. Other uses are year around.

C. Gravity Flow Pipe

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

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1. Does the system involve a gravity flow pipe?

MAY 27 2021 YES X NO

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

2. Complete the table:

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| PIPE SIZE | PIPE TYPE | "C" FACTOR | AMOUNT OF<br>FALL | LENGTH OF PIPE | SLOPE | COMPUTED RATE OF WATER FLOW (IN CFS)    |
|-----------|-----------|------------|-------------------|----------------|-------|---|
|           |           |            |                   |                |       | , |

| 3. Provide calc | ulations: |  |
|-----------------|-----------|--|
|                 |           |  |
|                 |           |  |
|                 |           |  |
|                 |           |  |
|                 | *         |  |

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) |
|---------------------|--------------------------|--------------------|-------------------------------------|
|                     | IVILASORLIVILINI         |                    | (IIV CFS)                           |

Attach measurement notes.

### D. 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 X NO

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

Attach measurement notes.

### E. Reservoir

1. Does the reservoir require the submittal of as-built plans and specifications?

YES X NO

If "YES", answer item 2; items 3 through 8 relating to this section may be deleted. If "NO", skip items 2; answer items 3 through 8.

### 2. Complete the table:

| HAVE THE DOCUMENTS BEEN SUBMITTED? | WHEN WERE THE DOCUMENTS SUBMITTED? | HAVE THEY BEEN APPROVED BY THE DEPARTMENT? | NUMBER OF ACRE FEET<br>STORED |
|------------------------------------|------------------------------------|--|-------------------------------|
| YES OR NO                          |                                    |  |                               |
|                                    |                                    |  |                               |

3. If the reservoir stores less than 9.2 acre-feet of water or if the dam is less than 10 feet in height, and as-built plans and specifications are not required, complete the table and items 4 through 8.

| MAXIMUM DEPTH | AVERAGE DEPTH | Surface area | VOLUME         |
|---------------|---------------|--------------|----------------|
|               |               | (IN ACRES)   | (IN ACRE FEET) |
| efeet         | 9 feet        | 1.7 Acres    | 13.1 AF        |

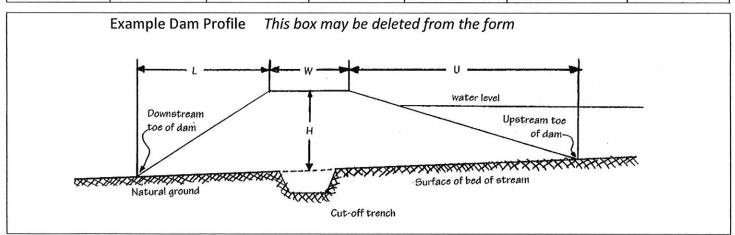
### 4. Provide reservoir volume calculations:

Surface 1.70 acres + Bottom 1.2 acres = 1.45 average acres/foot 1.45 acres (9.0 ft deep) = 13.a acre feet

2

5. Provide the following information concerning the physical characteristics of the dam:

| CREST<br>WIDTH (W) | DAM HEIGHT AT CENTERLINE | DISTANCE<br>FROM | DISTANCE<br>FROM | WATER LEVEL AT INSPECTION | DOWN-STREAM<br>SLOPE | UP-STREAM<br>SLOPE |
|--------------------|--------------------------|------------------|------------------|---------------------------|----------------------|--------------------|
|                    | (H)                      | DOWNSTREAM       | UPSTREAM         |                           |                      |                    |
|                    |                          | TOP OF DAM TO    | TOP OF DAM       |                           |                      |                    |
|                    |                          | DOWNSTREAM       | TO UPSTREAM      |                           |                      |                    |
|                    |                          | TOE (L)          | TOE (U)          |                           |                      |                    |
| 8 feet             | 9 feet                   | 18 feet          | 27 feet          | full                      | 2:1                  | 3:1                |



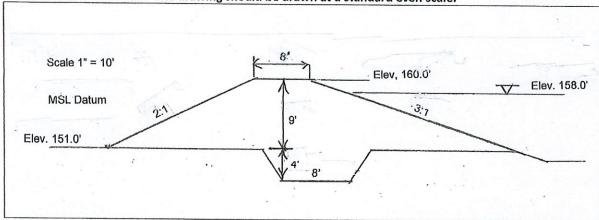


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5. Provide the following information concerning the physical characteristics of the dam:

| 8 feet    | 9 feet        | 18 feet       | 27 feet     | full          | 2:1         | 3:1       |
|-----------|---------------|---------------|-------------|---------------|-------------|-----------|
|           |               | TOE (L)       | TOE (U)     |               |             |           |
|           |               | DOWNSTREAM    | TO UPSTREAM |               |             |           |
|           | 4 4 4 5 5     | TOP OF DAM TO | TOP OF DAM  |               |             |           |
|           | (H)           | DOWNSTREAM    | UPSTREAM    |               |             |           |
| WIDTH (W) | AT CENTERLINE | FROM          | FROM        | AT INSPECTION | SLOPE       | SLOPE     |
| CREST     | DAM HEIGHT    | DISTANCE      | DISTANCE    | WATER LEVEL   | DOWN-STREAM | UP-STREAM |

6. Provide a drawing showing the cross section of the dam at the maximum section indicating details and dimensions. The drawing should be drawn at a standard even scale.



7. Describe the outlet works (size and type of the outlet conduit and location):

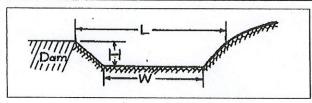
Primary -- 30 Hp Berkley B 2 ½ ZPL centrifugal pump for sprinkler system

Secondary -- 12" diameter CMP through embankment. CMP entrance invert elevation =

158 feet msl (normal full pool water surface elevation)

8. Describe the emergency spillway (dimensions and location):

| Воттом width (W)                            | TOP WIDTH (L)     | SPILLWAY DEPTH (H) |
|---|-------------------|--------------------|
| 3 HP POD PUMP TO FILL OFF CHANNEL RESERVOIR | NO EARTH SPILLWAY |                    |



#### **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 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                     | Dec. 2, 2016     |                           |   |
| BEGIN CONSTRUCTION (A)            | Dec. 2, 2021     | <b>September 15, 2018</b> | Construct reservoir   |
| COMPLETE CONSTRUCTION (B)         | Dec. 2, 2021     | February 1, 2019          | Purchase 2 pumps and sprinkler pipe                                       |
| COMPLETE APPLICATION OF WATER (C) | Dec. 2, 2021     | July 1, 2020              | Irrigate field area   |

<sup>\*</sup> 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 X 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?

X 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 or appropriation.

b. Has a meter been installed?

X YES NO

c. Meter Information

| POD/POA<br>Name or # | MANUFACTURER | SERIAL#        | CONDITION (WORKING OR NOT) | CURRENT METER READING | DATE INSTALLED |
|----------------------|--------------|----------------|----------------------------|-----------------------|----------------|
| Creek POD            | Seametrics   | WMP10<br>4-300 | Working                    | 7.31 AF               | Portable       |
| Sprinkler            | Seametrics   | AB3000-<br>600 | Working                    | 7.01 AF               | Portable       |

If a meter has been installed, items d through f relating to this section may be deleted.

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

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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 MAY 27 2021 measuring device, and the approximate date of the approval:

| Name | TITLE | APPROXIMATE DATE OWR |
|------|-------|----------------------|
|      |       |                      |

f. Measurement Device Description

| DEVICE DESCRIPTION | CONDITION        | DATE INSTALLED |
|--------------------|------------------|----------------|
|                    | (WORKING OR NOT) |                |
|                    |                  |                |

### 4. Recording and reporting conditions

a. Is the water user required to report the water use to the Department?
YES X NO

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

b. Have the reports been submitted?

YES NO

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

### 5. Outlet Pipe

a. Is the water user required to install a minimum 8"outlet pipe/conduit? X YES NO

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

b. Has the outlet pipe been installed? X YES NO

If "YES", items c relating to this section may be deleted.

c. Does the water user have other means to evacuate the reservoir? X YES NO

| DESCRIBE HOW THE WATER USER PLANS TO | HAS THIS PLAN BEEN APPROVED | Ву Wном?       |
|--------------------------------------|-----------------------------|----------------|
| EVACUATE THE RESERVOIR               | BY THE DEPARTMENT?          |                |
| 30 Hp Berkley centrifugal pump       | X YES NO                    | Timothy Wallin |

#### 6. Fish Screening

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion?

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? X YES NO

c. When was the fish screening installed?

| DATE                                    | Ву Wном       |
|---|---------------|
| Portable fish screen in bottom of creek | Steve Goffena |

Reminder: If the permit or transfer final order was issued <u>on or after February 1, 2011</u>, 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 <u>and</u>** 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 YES NO

If not, go to <a href="https://www.oregon.gov/OWRD/Forms/Pages/default.aspx">https://www.oregon.gov/OWRD/Forms/Pages/default.aspx</a> (search for ODFW Small Pump Screen Self Certification), complete and attach a copy of the 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** <u>or</u> 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 <a href="https://www.oregon.gov/OWRD/Forms/Pages/default.aspx">https://www.oregon.gov/OWRD/Forms/Pages/default.aspx</a>

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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.

MAY 27 2021

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### 7. 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.

b. Have by-pass device been installed?

YES NO

c. Describe the diversion works as related to whether a by-pass device is installed or unnecessary:

(Provide a letter from ODFW indicating the device is approved or is unnecessary. If there is no letter from ODFW, <u>explain</u> whether or not a by-pass device is necessary.)

| DESCRIPTION  | IF INSTALLED | IF INSTALLED, BY WHOM |
|--|--------------|-----------------------|
| (E.G. "ODFW HAS APPROVED THE BY-PASS DEVICE" OR "NO BY-PASS DEVICE     | (DATE)       |                       |
| IS NECESSARY BECAUSE THERE IS A DIRECT DIVERSION FROM THE STREAM VIA A |              |                       |
| PUMP ON RIVER LEFT STREAM BANK WITH FOOT VALVE DESCENDING DIRECTLY     |              |                       |
| INTO NATURAL POOL.") IN ADDITION, YOU MAY ATTACH PHOTOS TO THIS        |              |                       |
| CLAIM.   |              |                       |

### 8. 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 | NO |
|----|--|-----|----|
| b. | Was a fishway required?  | YES | NO |
| c. | Was submittal of a letter from an engineer required prior to storage of water? | YES | NO |
| d. | Was submittal of a water management and conservation plan required?            | YES | NO |
| e. | 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):

3 Hp pump on left creek bank with 2" diameter pipe, check valve and fish screen are installed in natural pool at the beginning of each fill reservoir cycle (October 1 or later). An ODF&W approved 6" diameter by 5' long fish screen, purchased from Ernst Irrigation in St. Paul. OR, is installed.

### **SECTION 6**

### **ATTACHMENTS**

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

| ATTACHMENT NAME    | DESCRIPTION |
|--------------------|-------------|
| Reservoir COBU map |             |
|                    |             |
|                    |             |

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### **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.

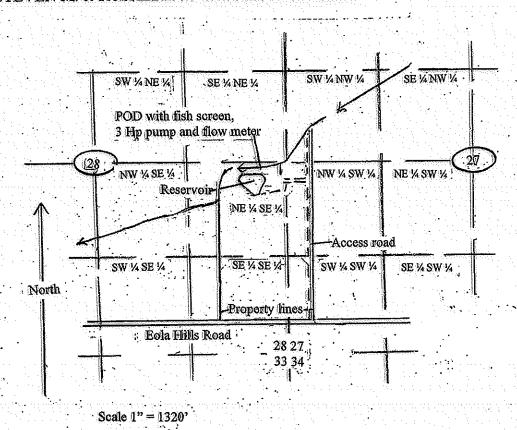
Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number. **Map Checklist** RECEIVED Please be sure that the map you submit includes ALL the items listed below. (Reminder: Incomplete maps and/or claims may be returned.) MAY 27 2021 Map on polyester film. OWRD 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

## CLAIM OF BEMEFICIAL USE MAP For

# RESERVOIR APPLICATION R-87496 & PERMIT R-14830 PERMIT AMMENDMENT T-11435 (Volume)

DONATHON LAND CLAIM 48
Sections 27 & 28, Township 5 South, Range 4 West of WM

### STEVEN M. & ROSALBA M. GOFFENA PROPERTY



POD 350' West and 50' South of East 1/4 Corner Section 28 (45° 06.5' North Latitude and 123° 10.6' West Longitude)

Gerufied Water Rights Examine,
#449WRE

#449WRE

| Leland A. Hardy
| June 11, 1898
| STATE OF OREGON
| RENEWAL DATE: 6/2/

The purpose of this map is to identify the location of an existing POD and water use. It is not intended to provide information relative to the location of property ownership boundary lines.



Water Resources Department

725 Summer St NE, Suite A Salem, OR 97301 (503) 986-0900 Fax (503) 986-0904

June 9, 2021

Steven M & Rosalba M Goffena 22185 SW 106<sup>th</sup> Ave Tualatin OR 97062

On May 27, 2021, the Water Resources Department received the Claim of Beneficial Use (COBU) for the following file(s):

Application R-87496 Permit R-14830 Application S-882100 Permit S-55011

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 R-87496 & S-882100 Leland A Hardy, CWRE