

**CLAIM OF
BENEFICIAL USE
for Groundwater Permits
claiming more than 0.1 cfs**



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

**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.

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

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1. File Information:

APPLICATION # G-14463	PERMIT # (IF APPLICABLE) G-13288	PERMIT AMENDMENT # (IF APPLICABLE) N/A
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2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Vicki Bauer	PHONE NO. 541-660-6284	ADDITIONAL CONTACT NO.	
ADDRESS 13640 Water Gap Rd.			
CITY Williams	STATE OR	ZIP 97544	E-MAIL vickibauer@gmail.com

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 Same as above		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

1/6/2021

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Vicki Bauer	1/6/2021	Owner

6. County:

Josephine

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 N/A		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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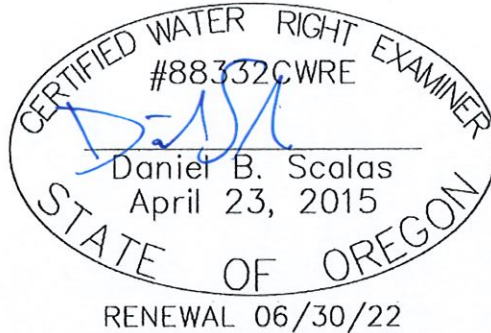
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**SECTION 2
SIGNATURES**

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 Daniel B. Scalas		PHONE NO. 541-884-4666	ADDITIONAL CONTACT No.
ADDRESS 1435 Esplanade Ave.			
CITY Klamath Falls	STATE OR	ZIP 97601	E-MAIL dscalas@adkinsengineering.com

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>Vicki L. Bauer</i>	Vicki Bauer	Owner	<i>5/8/21</i>

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SECTION 3
CLAIM DESCRIPTION

1. 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)
Well 1	N/A	N/A

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

2. Point of appropriation source, if indicated on permit:

POA NAME OR NUMBER	SOURCE BASIN LOCATED WITHIN	TRIBUTARY
Well 1	Williams Creek Basin	N/A

3. Developed use(s), period of use, and rate for each use:

POA 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)
Well 1	Primary Irrigation	Grass/pasture	March 1 – October 31	0.07 CFS
Total Quantity of Water Used				0.07 CFS

4. Provide a general narrative description of the distribution works. This description must trace the water system from each point of appropriation to the place of use:

Water is diverted from Well 1 by a 1.5 HP submersible pump. From Well 1, water is distributed to the west, south, and east through 2" buried PVC pipe. These pipes are equipped with risers that tie into 2" aluminum laterals with 3/16" sprinklers, and big guns with 1/2" sprinklers. The authorized places of use includes a covered horse arena in the southern portion of the land equipped with 3/16" sprinklers.

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).

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5. 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.

(e.g. "The permit allowed three points of appropriation. 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.")

6. Claim Summary:

POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
Well 1	0.134 CFS	0.07 CFS	N/A	Primary Irrigation	18.8	18.8

**SECTION 4
SYSTEM DESCRIPTION**

Are there multiple POAs? **NO**

A. Place of Use

1. Is the right for municipal use? **NO**

TWP	RNG	MER	SEC	QQ	GLOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
38S	5W	WM	11	SW NW			Primary Irrigation	0.8	
38S	5W	WM	11	SE NW			Primary Irrigation	18.0	
Total Acres Irrigated								18.8	

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (GLOT), Quarter Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, GLOT, and QQ.

B. Groundwater Source Information (Well)

1. Is the appropriation from a well? **YES**

2. Describe the access port (type and location) or other means to measure the water level in the well:

0.5" port on well seal

3. If well logs are not available, provide as much of the following information as possible:

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
6"	N/A	N/A	N/A	N/A	N/A	N/A

4. In addition to the information requested in item "3" above, provide any other information which may help the Department locate any well logs associated with this appropriation.

C. Groundwater Source Information (Sump)

1. Is the appropriation from a dug well (sump)? **NO**

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D. Diversion and Delivery System Information

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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 appropriation to the place of use.

1. Is a pump used? **YES**

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Grundfos	25S15-9	Unknown	Submersible	6"	2"

3. Motor Information:

MANUFACTURER	HORSEPOWER
Grundfos	1.5

4. 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)
1.5	40	42.5'	0.0'	0.07 CFS

5. Provide pump calculations:

See Attachment E for Theoretical Pump Capacity Calculations.

6. 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)
N/A			

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

7. Is the distribution system piped?

YES

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2"	3,560'	PVC	Buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2" Laterals	1,500'	Aluminum	Above Ground

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
1/2"	40	42.5	4	4	0.38 CFS
3/16"	40	6.4	50	50	0.71 CFS

Reminder: For sprinkler output determination use the reference information at the end of this document.

11. Drip Emitter Information:

SIZE	OPERATING PSI	EMITTER OUTPUT (GPM)	TOTAL NUMBER OF EMITTERS	MAXIMUM NUMBER USED	TOTAL EMITTER OUTPUT (CFS)
N/A					

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12. 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
N/A					

13. Pivot Information:

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
N/A				

E. Storage

1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)? NO

F. 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? NO

G. 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

H. Additional notes or comments related to the system:

See Attachment E for Sprinkler Calculations.

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**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 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 permit extension order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	1/21/1998		
BEGIN CONSTRUCTION (A)	1/21/1999	7/29/1972	Well 3 began being drilled.
COMPLETE CONSTRUCTION (B)	N/A	N/A	N/A
COMPLETE APPLICATION OF WATER (C)	10/30/2019	11/1/2014	Flow meter installed and full beneficial use of water applied to the authorized lands.

* 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

a. Did the Extension Final Order require the submittal of Progress Reports? NO

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? NO

4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements? NO

5. Pump Test:

a. Did the permit require the submittal of a pump test? YES

Ground water permits with priority dates on or after **December 20, 1988**, require the submittal of a pump test prior to issuance of a certificate. In some cases, the permit holder may qualify for a multiple well exemption or an unreasonable burden exemption.

For additional information regarding pump tests see:

<https://www.oregon.gov/OWRD/programs/GWWL/GW/Pages/PumpTestProgram.aspx>

b. Has the pump test been previously submitted to the Department? NO

c. Is the pump test attached to this claim? NO

d. Has the pump test been approved by the Department? NO

e. Has a pump test exemption been approved by the Department? NO

**** Claims will not be reviewed until a pump test or exemption has been approved by the Department**

6. Measurement Conditions:

- a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? **YES**
- 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 1	Master Meter	8420942	Working	23663.7 gallons	November 2014

7. Recording and reporting conditions:

- a. Is the water user required to report the water use to the Department? **NO**

8. Other conditions required by permit, permit amendment 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. Was submittal of a water management and conservation plan required? **NO**
- d. Was a Well Identification Number (Well ID tag) assigned and attached to the well? **NO**

WELL ID #	DATE ATTACHED TO WELL

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NO

- e. Other conditions?

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

N/A

SECTION 6

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Attachment A	Copy of Permit G-13288
Attachment B	Copy of Time Extension Final Order
Attachment C	Claim of Beneficial Use Map (on mylar)
Attachment D	Claim of Beneficial Use Map (paper copy)
Attachment E	Theoretical Pump Capacity and Sprinkler Calculations
Attachment F	Pump Test for Well 1
Attachment G	Josephine County Tax Map 38-5-11

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.

The Claim of Beneficial Use Map was prepared from field measurements, NAIP 2020 aerial photography, Josephine County tax maps, and Oregon GLO maps.

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
- 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 or appropriation
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- 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")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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ATTACHMENT A
Copy of Permit G-13288

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STATE OF OREGON

COUNTY OF JOSEPHINE

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

VICKI L BAUER
13640 WATER GAP RD
WILLIAMS, OREGON 97544

(541)846-6484

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-14463

SOURCE OF WATER: WELL THREE IN WILLIAMS CREEK BASIN

PURPOSE OR USE: IRRIGATION OF 18.8 ACRES

MAXIMUM RATE: 0.134 CUBIC FOOT PER SECOND

PERIOD OF USE: MARCH 1 THROUGH OCTOBER 31

DATE OF PRIORITY: FEBRUARY 19, 1997

POINT OF DIVERSION LOCATION: SE 1/4 NW 1/4, SECTION 11, T38S, R5W, W.M.;
660 FEET NORTH & 960 FEET EAST FROM CW1/16 CORNER, SECTION 11

The amount of water used for irrigation under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 2 1/2 acre-feet for each acre irrigated during the irrigation season of each year.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

SW 1/4 NW 1/4 0.8 ACRE
SE 1/4 NW 1/4 18.0 ACRES
SECTION 11
TOWNSHIP 38 SOUTH, RANGE 5 WEST, W.M.

Measurement, recording and reporting conditions:

- A. Before water use may begin under this permit, the permittee shall install a meter or other suitable measuring device as approved by the Director. The permittee shall maintain the meter or measuring device in good working order.
- B. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

Application G-14463 Water Resources Department

PERMIT G-13288

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- C. The Director may require the permittee to keep and maintain a record of the amount (volume) of water used and may require the permittee to report water use on a periodic schedule as established by the Director. In addition, the Director may require the permittee to report general water use information, the periods of water use and the place and nature of use of water under the permit. The Director may provide an opportunity for the permittee to submit alternative reporting procedures for review and approval.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

Use of water under authority of this permit may be regulated if analysis of data available after the permit is issued discloses that the appropriation will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway in quantities necessary for recreation, fish and wildlife in effect as of the priority date of the right or as those quantities may be subsequently reduced.

STANDARD CONDITIONS

The wells shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

The use shall conform to such reasonable rotation system as may be ordered by the proper state officer.

Prior to receiving a certificate of water right, the permit holder shall submit the results of a pump test meeting the department's standards, to the Water Resources Department. The Director may require water level or pump test results every ten years thereafter.

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

Application G-14463 Water Resources Department

PERMIT G-13288

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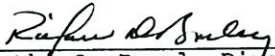
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The use of water shall be limited when it interferes with any prior surface or ground water rights.

The Director finds that the proposed use(s) of water described by this permit, as conditioned, will not impair or be detrimental to the public interest.

Actual construction of the well shall begin within one year from permit issuance. Complete application of the water to the use shall be made on or before October 1, 2002.

Issued January 21, 1998


Martha O. Pagel, Director
Water Resources Department

Application G-14463
Basin 15
RWK- WEEK 118

Water Resources Department
Volume 6A WILLIAMS CR MISC
MGMT.CODES 7JG 7JR

PERMIT G-13288
District 14

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GROUND WATER RIGHT APPLICATION MAP

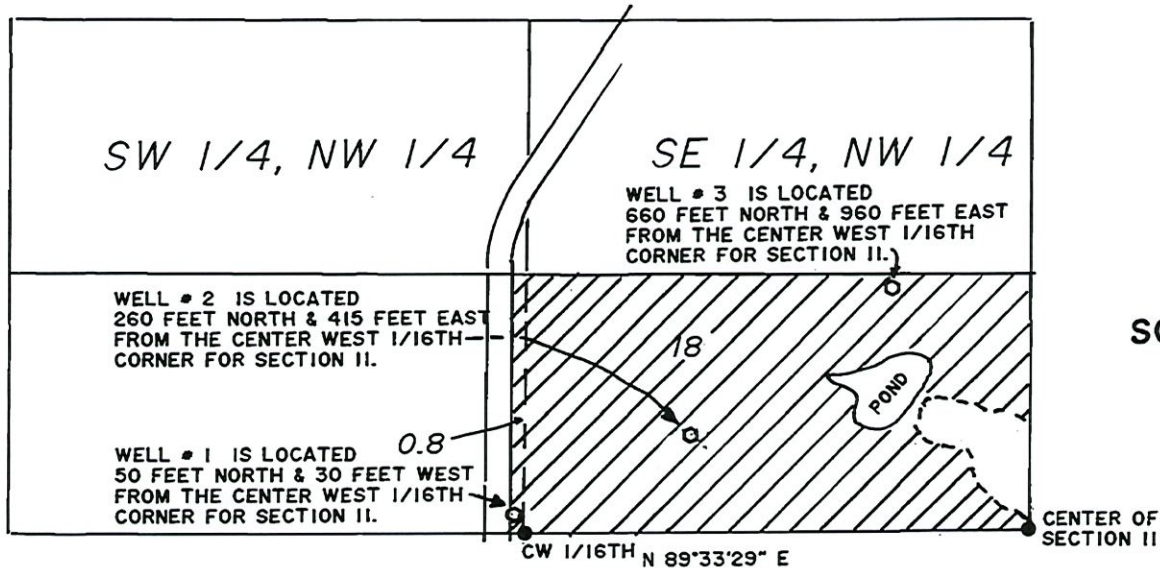
T. 38 S. R. 05 W. SEC. II W.M.

APPLICANT:
VICKI L. BAUER
13640 WATER GAP ROAD
WILLIAMS, OREGON 97544
PH. (541) 846-6484

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FEB 19 1997

WATER RESOURCES DEPT.
SALEM, OREGON



SCALE: 1" = 400'

PREPARED BY:
JONATHAN C. SPERO C.W.R.E. 123
1002 KINCAID RD./P.O. BOX 16
WILLIAMS, OREGON 97544
PH. (541) 846-6845

THIS MAP IS FOR THE PURPOSE OF
IDENTIFYING THE LOCATION OF THE
WATER RIGHT ONLY, AND IS NOT IN-
TENDED TO PROVIDE LEGAL DIMEN-
SIONS OR LOCATIONS OF PROPERTY
OWNERSHIP LINES.

APPLICATION No.

G 14463

PERMIT No.

G13288

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ATTACHMENT B
Copy of Time Extension Final Order

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Oregon Water Resources Department
Water Right Services Division

Water Rights Application
Number G-14463

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FINAL ORDER

Extension of Time for Permit Number G-13288
Permit Holder: Vicki L Bauer

Permit Information

Application:	G-14463
Permit:	G-13288
Basin:	15 – Rogue / Watermaster District 14
Date of Priority:	February 19, 1997
Source of Water:	Well 3 in Williams Creek Basin
Purpose of Use:	Irrigation use on 18.8 acres
Maximum Rate:	0.134 cubic feet per second (cfs)

This Extension of Time request is being processed in accordance with Oregon Revised Statute 537.630 and 539.010(5), and Oregon Administrative Rule Chapter 690, Division 315

Appeal Rights

This is a final order in other than a contested case. This order is subject to judicial review under ORS 183.484. A request for judicial review must be filed within the 60 day time period specified by ORS 183.484(2). Pursuant to ORS 536.075 and OAR 137-004-0080 you may either file for judicial review, or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

Application History

Permit G-13288 was issued by the Department on January 21, 1998. The permit called for actual construction of the well to begin by January 21, 1999 and complete application of water to beneficial use by October 1, 2014. On November 12, 2014, Vicki L Bauer submitted to the Department an Application for Extension of Time for Permit G-13288. In accordance with OAR 690-315-0050(2), on December 23, 2014, the Department issued a Proposed Final Order proposing to extend the time to fully apply water to beneficial use to October 30, 2019. The protest period closed February 2, 2015, in accordance with OAR 690-315-0060(1). No protest was filed.

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FINDINGS OF FACT

The Department adopts and incorporates by reference the findings of fact in the Proposed Final Order dated December 23, 2014.

At time of issuance of the Proposed Final Order the Department concluded that, based on the factors demonstrated by the applicant, any comments received, and information within the file, the permit may be extended subject to no additional conditions.

CONCLUSION OF LAW

The applicant has demonstrated good cause for the permit extension pursuant to ORS 537.630, 539.010(5) and OAR 690-315-0040(2).

ORDER

The extension of time for Application G-14463, Permit G-13288, therefore, is approved. The deadline for applying water to full beneficial use within the terms and conditions of the permit is extended from October 1, 2014 to October 30, 2019.

DATED: February 13, 2015



Dwight French
Water Right Services Division Administrator, for
Thomas M. Byler, Director
Oregon Water Resources Department

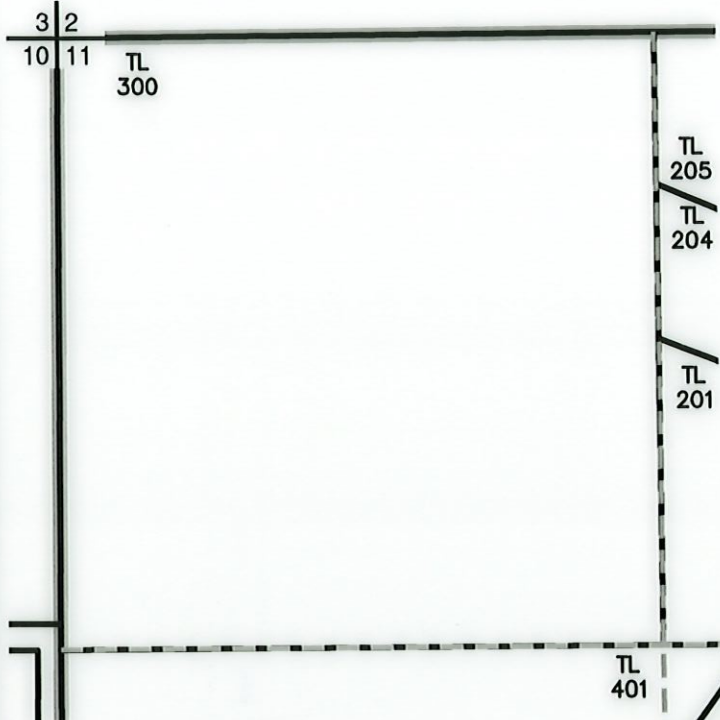
-
- If you have any questions about statements contained in this document, please contact the Permit Extension Specialist at (503) 986-0802.
 - If you have other questions about the Department or any of its programs, please contact our Water Resources Customer Service Group at (503) 986-0900
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ATTACHMENT C
Claim of Beneficial Use Map (on mylar)

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NOTES:

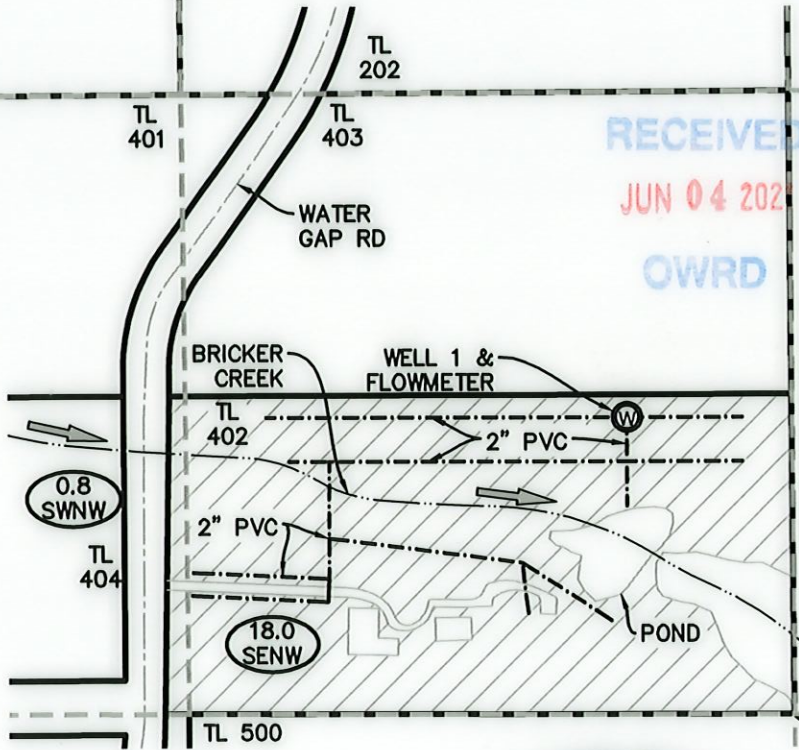
1. THIS MAP WAS PREPARED FROM FIELD MEASUREMENTS, NAIP 2020 AERIAL PHOTOGRAPH, JOSEPHINE COUNTY TAX MAP 38-5-11 AND OREGON GLO MAPS.
2. THE PURPOSE OF THIS MAP IS TO IDENTIFY THE LOCATION OF THE WATER RIGHT ONLY, AND IS NOT INTENDED TO PROVIDE DIMENSIONS OR LOCATION OF PROPERTY LINES.
3. DATE OF PRIORITY FOR THIS WATER RIGHT IS FEBRUARY 19, 1997.

WELL TIES:

WELL 1: SE1/4 NW1/4, SECTION 11, T38S, R5W, W.M.; 660' NORTH & 960' EAST FROM CW1/16 CORNER OF SECTION 11.

LEGEND

- SECTION LINE
- 1/4 1/4 LINE
- TAX LOT LINE
- CREEK
- BURIED PIPE
- ♁ ROAD
- FLOW DIRECTION
- SECTION CORNER
- TAX LOT NUMBER
- POA (WELL)
- IRRIGATED UNDER PERMIT G-13288
- IRRIGATED ACRES
- 1/4 1/4 SECTION



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CERTIFIED WATER RIGHT EXAMINER
#88332CWRE
Daniel B. Scalas
April 23, 2015
STATE OF OREGON
RENEWAL 08/30/22

AL ADKINS
ENGINEERING & SURVEYING
o / 541.884.4666
w / AdkinsEngineering.com
1435 ESPLANADE AVENUE, KLAMATH FALLS, OR 97601
SERVING S. OREGON & N. CALIFORNIA

**CLAIM OF BENEFICIAL USE
AND FINAL PROOF MAP**
FOR
VICKI L BAUER
T38S, R5W, SEC. 11, WM
JOSEPHINE COUNTY, OREGON
PERMIT G-13288
APPLICATION G-14463

ATTACHMENT D
Claim of Beneficial Use (paper copy)

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3 | 2
10 | 11

TL
300

TL
205
TL
204

TL
201

NOTES:

1. THIS MAP WAS PREPARED FROM FIELD MEASUREMENTS, NAIP 2020 AERIAL PHOTOGRAPH, JOSEPHINE COUNTY TAX MAP 38-5-11 AND OREGON GLO MAPS.

2. THE PURPOSE OF THIS MAP IS TO IDENTIFY THE LOCATION OF THE WATER RIGHT ONLY, AND IS NOT INTENDED TO PROVIDE DIMENSIONS OR LOCATION OF PROPERTY LINES.














3. DATE OF PRIORITY FOR THIS WATER RIGHT IS FEBRUARY 19, 1997.

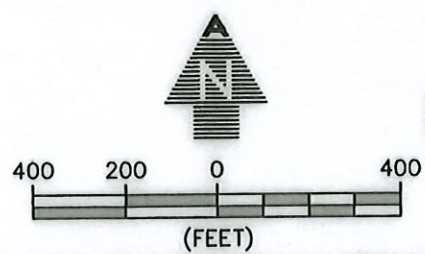
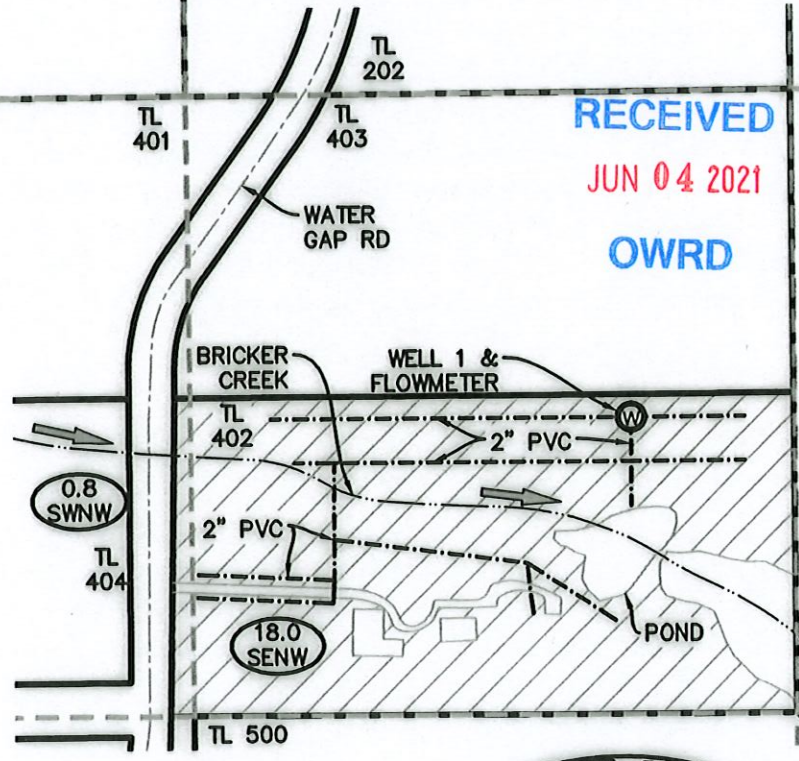
WELL TIES:

WELL 1: SE1/4 NW1/4, SECTION 11, T38S, R5W, W.M.; 660' NORTH & 960' EAST FROM CW1/16 CORNER OF SECTION 11.

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LEGEND

-  SECTION LINE
-  1/4 1/4 LINE
-  TAX LOT LINE
-  CREEK
-  BURIED PIPE
-  C ROAD
-  FLOW DIRECTION
-  SECTION CORNER
-  TAX LOT NUMBER
-  POA (WELL)
-  IRRIGATED UNDER PERMIT G-13288
-  IRRIGATED ACRES
-  1/4 1/4 SECTION



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ENGINEERING • SURVEYING • PLANNING • TESTING

**CLAIM OF BENEFICIAL USE
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ATTACHMENT E
Theoretical Pump Capacity and Sprinkler
Calculations

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Pump Capacity Calculation Sheet

using Department designed formula:

$$(\text{hp})(\text{efficiency}) / (\text{lift} + \text{psi head}) = \text{capacity in cfs}$$

Efficiency:

Centrifugal = 6.61

Turbine = 7.04

Data Entry (fill in underlined blanks)

HP = 1.5
Efficiency = 7.04
Lift = 42.5
PSI = 40

Results Calculated

(hp)(efficiency) = 10.56
Head based on psi = 101.6
Total dynamic head = 144.1
(head + lift)

Pump Capacity = 0.07 cubic feet per second

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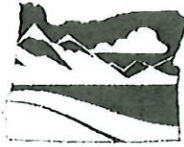
ATTACHMENT F

Pump Test for Well 1

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Owner Information:

OWNER NAME/BUSINESS NAME: Vickie Bauer / ~~Ronald Hill / Lehi Pump Service~~ PHONE No.: 660-6284 / ~~541-846-6662~~ ADDITIONAL CONTACT No.:

ADDRESS: ~~4998 Hwy 238~~ 13640 Water Gap rd

CITY: ~~Grants Pass~~ Willamette STATE: OR ZIP: 97527 E-MAIL: ~~lehipump@gmail.com~~

Pump Test Conducted By (If Different From Owner):

TEST CONDUCTED BY NAME: Ronald Hill QUALIFICATION: (SELECT) Pump Installer LICENSE #: CPI 100

COMPANY: Lehi Pump Service PHONE No.: 541-8466662 ADDITIONAL CONTACT No.:

ADDRESS: 14998 Hwy 238

CITY: Grants Pass STATE: OR ZIP: 97527 E-MAIL: lehipump@gmail.com

Tested Well Information (please attach well log(s) if available):

WELL LOG # (EX: MARI 99999)	WELL TAG # (EX: L-999999)	WELL NAME OR #	WELL DEPTH	ORIGINAL OWNER	DATE DRILLED	TEST DATE
	L-					2/16/21

(CONTINUED)

TWP (EX: 25S)	RNG (EX: 31E)	SEC (EX: 12)	QQ (EX: SE/SW)	SURVEYED LOCATION (EX: 100 ft N & 735 ft E fr SE cor, sec 5)	LATITUDE (EX: 44.94473859)	LONGITUDE (EX: -123.02787000)

List all water rights for which you are submitting this test. Please indicate if the tested well is listed as an authorized source of water on each water right. If not, you may also need to fill out a multiple well exemption (MWE) request form.

APPLICATION	PERMIT	TRANSFER	CERTIFICATE	IS THE TESTED WELL AN AUTHORIZED POA ON THIS RIGHT?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RECEIVED	<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	JUN 04 2021	<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="radio"/> Yes <input checked="" type="radio"/> No (Need MWE Form)

Nearby Wells and Streams: Please check yes or no. Do not leave blank.

Are there any wells, other than domestic or stock wells, within 1000 feet of the tested well?

If yes, identify the well by OWRD log number or attach a copy of the well log. Note the approximate distance to each well from the tested well and the approximate pumping rate of each.

If possible, indicate if they were turned on or off during the test or within 24 hours prior to the test (Indicate Not Pumped, if applicable).

WELL LOG # (EX: MARI 99999)	BEARING & DISTANCE FROM PUMPED WELL (FT)	DATE & TIME PUMP ON	DATE & TIME PUMP OFF	PUMPING RATE (GPM)
/	/	/	/	/

Is there a lake, stream or other surface water body within 1/4 mile of the tested well?

If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head.

Well elevation is above the surface water body. Approximate distance: 140 ft.

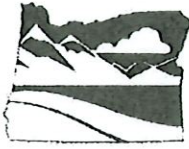
Approximate elevation difference: -15 ft.

Was the test conducted during normal use of the well?

Please indicate where pumped water was discharged: Into nearby pond (140')

How far from the pumped well was water discharged? 140 ft.

Additional forms can be found at: <https://www.oregon.gov/owrd/Forms/Pages/3-4-11.aspx>.



Water-Level Measurement Method: E-Tape
Length of air line (if used):
*Airline measurements must be verified by an E-Tape measurement
Pressure transducer (if used):
Manufacturer: Serial #:
Date Last Calibrated: Units:

Airline: psi
E-Tape: feet

Discharge Measurement Method: Flow Meter
Flowmeter (if used):
Manufacturer: Serial #:
Date Last Calibrated: Units:

Pump Type: Submersible
HP: 1.5 Pump set at: 147 feet
Pump idle time: 72+ hours

Note: Well must be idle for at least 16 hours prior to the test. Additional forms can be obtained from our web site at:
http://www.oregon.gov/OWRD/Forms/Pages/default.aspx

Measuring Point (MP): Measuring point distance above land surface feet.
Description (e.g., top port of 1 inch port pipe, west side) 1/2" port on well seal

Time pump turned on: Date 2/16/21 Time 0800
Time pump turned off: Date 2/16/21 Time 1200
Total pumping time: 4 hours 0 minutes

Remember, your pump test may not be approved unless it meets the following criteria*:

- Checked boxes: The discharge rate was held constant for the entire pumping phase.
The pump was on during the entire pumping phase (≥ 4 hours).
The discharge was measured at the start of pumping and at least once every hour during the test.
Water levels were measured to an accuracy of 0.1 feet or 0.5 percent.
Pre-test static water levels were measured at least three times in the hour before pumping began at no less than 20 minutes apart.
Water levels were measured at the specified intervals during the pumping phase of the test for at least four hours (≤2 min for the first 10 minutes, ≤5 min for 10 – 30 minutes, and ≤15 min for the remainder of the test)
Water levels were measured at the specified intervals (see above) during the recovery phase of the test for four hours or until 90 percent of the maximum drawdown has recovered.
If using an airline, measurements were calibrated with an E-Tape and the depth to water was ≥ 300 feet.
The pump test cover sheet was completely filled out and signed.
The pumping rate was as close as reasonably possible to the (anticipated) pumping rate during normal use of the well.
The well was idle for at least 16 hours prior to the test.
The pump test was completed by an acceptably qualified person (Oregon licensed water well constructors; Oregon registered professional geologists or certified engineering geologists; certified water rights examiners; Oregon registered professional engineers; and individuals whose primary occupation involves, wholly or in significant part, pump installation, service, or testing).

*This checklist is intended for information purposes only and does not guarantee a pump test approval. The Department reserves all authority pertaining to the implementation of the rules under OAR 690-217.

Pump tests are intended to provide aquifer and well information for ground water resource characterization and to help solve well problems (OAR 690-217-0015(9)).

Pump test requirements for OAR 690-217 can be found online at:

https://securs.sos.state.or.us/oard/displayDivisionRules.action?JSESSIONID=OARD=1BdwLvnYAFNSQW3307SEZUMscp4Hil-1fsDAAEsMC2_RCSsl-2772785327selectedDivision=3186

Submit forms to: Attn: Certificates Section, Oregon Water Resources Department
725 Summer St NE Suite A, Salem, OR 97301

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Forms may additionally be sent to WRD, 211, own.ols@oregon.gov

I hereby certify that this test has been conducted in accordance with OAR 690-217:

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OPERATOR SIGNATURE: Ronald W Hill DATE: 2/16/21

OWNER SIGNATURE: Ronald W Hill DATE: 2/16/21

ATTACHMENT G
Josephine County Tax Map 38-5-11

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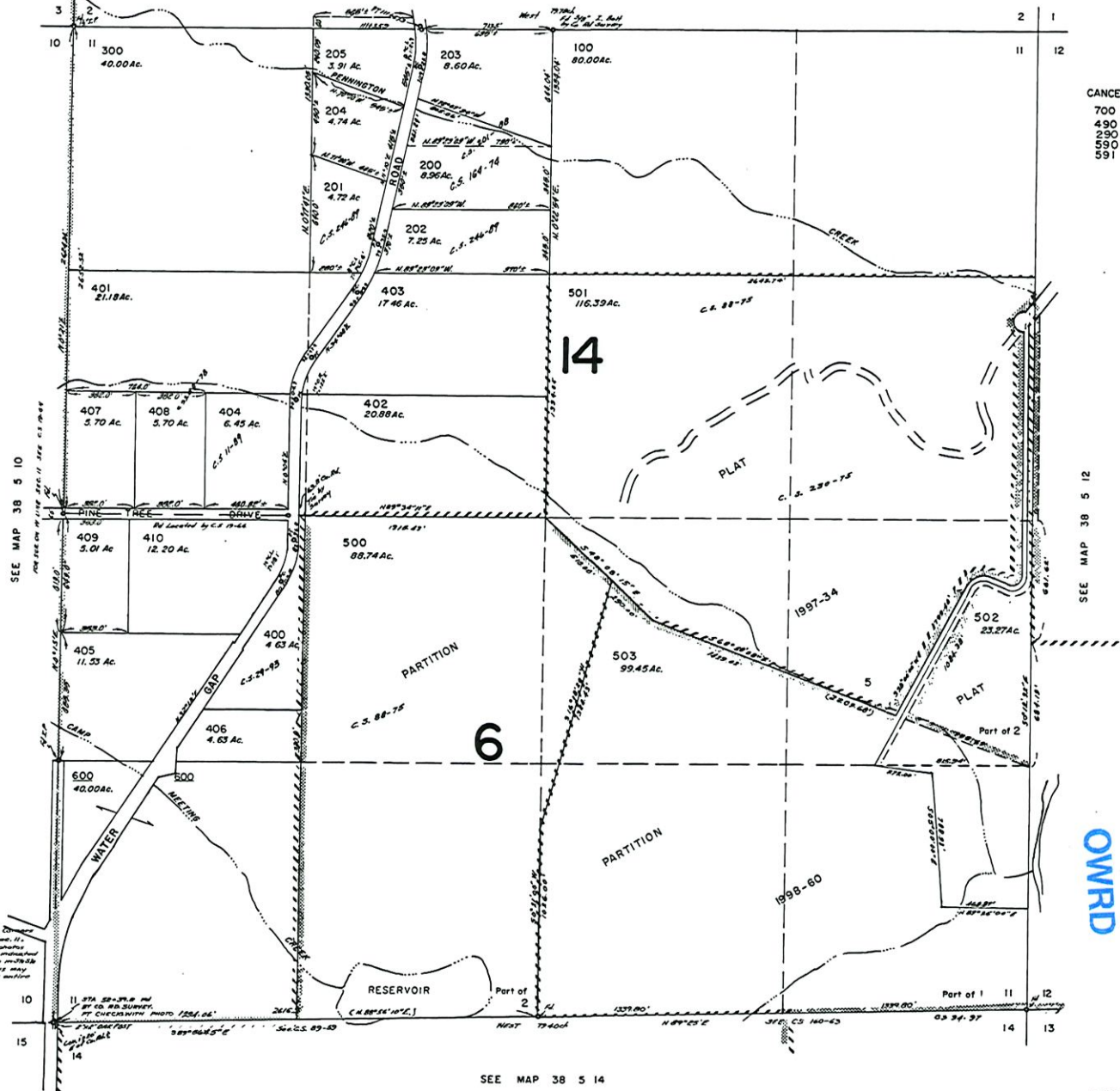
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1" = 400'

This map was prepared for
assessment purpose only.

SEE MAP 38 5 2



CANCELLED T.L.
700
490
290
590
591

SEE MAP 38 5 12

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Notes:
C.S. 89-88 should be located
on north of west line of map 11.
On the survey and parcel
numbers the 11 under shall indicate
by C.S. 89-88. Every other number
from 10 to 11 shall indicate
Distribute the areas with
the

SEE MAP 38 5 14



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Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Vicki & Bob Bauer

13640 Watergap Rd. Williams, OR 97544

Transaction Type: COBU

Fees Received: \$ 200.00

Cash Check: Check No. 7201

Name(s) on Check: SAME

Address on Check: _____

Thank you for your submission. Oregon Water Resources Department (Department) staff will review your submittal as soon as possible.

If your submission is determined to be complete, you will receive a receipt for the fees paid and an acknowledgement letter stating your submittal is complete.

If determined to be incomplete, your submission and the accompanying fees will be returned with an explanation of deficiencies that must be addressed in order for the submittal to be accepted.

If you have any questions, please feel free to contact the Department's Customer Service staff at 503-986-0801 or 503-986-0810.

Sincerely,
OWRD Customer Service Staff

Submission received by: C. Middleton
(Name of OWRD staff)

Instructions for OWRD staff:

- Complete this Submission Receipt, and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Place the Submission Receipt with check/cash in the small top drawer (i.e., "Fiscal Pick Up Drawer"). Place the Submission Receipt with submission (application/other document) in the large bottom drawer.