#### STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT # 136322

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) INVOICE # \_\_\_\_\_

George McGreope **APPLICATION** 5-88006 PERMIT BY: TRANSFER OTHER: (IDENTIFY) CASH: \$ 230.00 TOTAL REC'D WRD MISC CASH ACCT TREASURY 4170 1083 \$ 0407 COPIES \$ (IDENTIFY) OTHER: 0244 Muni Water Mgmt. Plan \_\_\_\_\_ 0245 Cons. Water WRD OPERATING ACCT 4270 **MISCELLANEOUS** 46111 \$ 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES 0408 MISC REVENUE: (IDENTIFY) \$ DEPOSIT LIAB. (IDENTIFY) TC162 0240 **EXTENSION OF TIME** RECORD FEE WATER RIGHTS: **EXAM FEE** \$ 0202 SURFACE WATER \$ 0201 0204 **GROUND WATER** \$ 0203 TRANSFER 0205 LICENSE FEE **EXAM FEE** WELL CONSTRUCTION 0219 WELL DRILL CONSTRUCTOR 0218 0220 LANDOWNER'S PERMIT \$230.00 (IDENTIFY) COBU 0200 OTHER WELL CONST. START FEE 0536 **TREASURY** 0437 WELL CONST START FEE CARD# 0211 \$ CARD# MONITORING WELLS 0210 OTHER (IDENTIFY) LIC NUMBER TREASURY HYDRO ACTIVITY 0607 0467 \$ 0233 POWER LICENSE FEE (FW/WRD) \$ HYDRO LICENSE FEE (FW/WRD) 0231 \$ HYDRO APPLICATION TREASURY OTHER / RDX FUND \_ TITLE VENDOR # OBJ. CODE

RECEIPT: 136322 DATED 1-12021 BY: Much Car

# Checklist for Claims of Beneficial Use Received at CSG Counter

Application #	‡: S-88006	WRD Reviewer: Judy
Transfer #:		
Date Receive	ed: 09/01/2021	
	e: Nathan Reed	
	(s): 08/21/2014	
Thomas Bute	(6). 66/2 1/2014	
Fees Required:		
☑YES NO□	A fee of \$230 must accompany the 1987, or later.	his form for permits with priority dates of July 9,
□YES NO□	with a priority date of July 9, 198 Example – A transfer involves	
Map Review:		
☑ Application & pern ☑ Disclaimer (OAR 6 ☑ North arrow (OAR ☑ CWRE stamp and s ☑ Appropriate scale ( of the count		DATE: RECEIPT & APPLICATION
Report Review	•	1244   172   174   172   174   172   174   172   174
✓ On form provided by Application & perm ✓ Ownership informa ✓ Date of survey (OA ✓ Person interviewed ✓ County (OAR 690- CWRE stamp and s	by the Department (OAR 690-014-0100(1 nit #; or transfer # (OAR 690-014) tion (OAR 690-014) AR 690-014) (OAR 690-014) 014) signature (OAR 690-014-0100)	FOR THE ATTENTION OF THE PROPERTY OF THE ATTENTION OF THE
Groundwater I □Pump Test not requ	sired (Priority Date prior to December 20. I (Priority Date on or after December 20,	, 1988) *If no, include pump test flyer w/acknowledgment letter

□Pump Test not submitted

# **CLAIM OF** BENEFICIAL USE for Surface Water Permits claiming more than 0.1 cfs



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.

## 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 RECEIVED

Go to "Resources for Water Right Examiners (CWRE)" Page https://www.oregon.gov/OWRD/programs/WaterRights/COBU/Pages/default.aspx The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

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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#	PERMIT AMENDMENT #
S-88006	S-54905	NA

3	<b>Property Owner</b>	Courrent	OWINGE	information).
<b>Z</b> .	Proberty Owner	icurrent	OWITE	IIII OI III atioii).

APPLICANT/BUSINESS NAME		PHONE NO.	. Additional Contact No.
George McGregor		619-985-0	0898 619-481-5969
ADDRESS			
4025 Mehl Creek Road			
Сіту	STATE	ZIP	E-MAIL
Elkton	OR	97436	gmcgregor@mcgregorinc.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 or holder of record (this may, or may not, be the current property owner):

PERMIT HOLDER OF RECORD			
George McGregor			
ADDRESS			RECEIVEDRECEIVED
8885 San Diego Dr., Suite 30	00		TEOLIVED NEOLIVE
Сіту	STATE	ZIP	SEP 01 2021 AUG 1 3 2021
San Diego	CA	92108	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		***************************************	

			a a se
ADDITIONAL PERMIT HOLD	ER OF RECORD		
NA			
ADDRESS			
CITY	STATE	ZIP	

# 4. Date of Site Inspection:

4-29-21	
4-23-21	

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

NAME	DATE	ASSOCIATION WITH THE PROJECT	
Adam Corely	4-29-21	Caretaker	
	3		

## 6. County:

Doug	las	

# 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)):

racinary the owner of record for that property (ORS 337.230(5)).			
OWNER OF RECORD			
NA			
Address			
Сіту	STATE	ZIP	

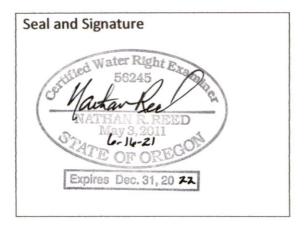
Add additional tables for owners of record as needed

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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.



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CWRE NAME		PHONE NO		ADDITIONAL CONTACT NO.
Nathan Reed	8	541-784-	7191	NA
ADDRESS				
<b>157 West Bodie Street</b>				
Сіту	STATE	ZIP	E-MAIL	
Roseburg	OR	97471	nreed68@l	hotmail.com

# Permit Holder 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	
Ayem Jyu	GEORGE MCGREGOR	CFO	6-16-21	

### **CLAIM DESCRIPTION**

1. Point of diversion name or number:

	POINT OF DIVERSION
	(POD) NAME OR NUMBER
	(CORRESPOND TO MAP)
POD 1	

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2. Point of diversion source and tributary:

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

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

POD NAME OR NUMBER	USES	IF IRRIGATION, LIST CROP TYPE	SEASON OR MONTHS WHEN WATER WAS USED	ACTUAL RATE OR VOLUME  USED  (CFS, GPM, OR AF)
POD 2	Irrigation		Mar. 1 – Oct. 31	106.95 AF
Total Quantity of	Water Used			106.95 AF

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

Stored Water from Galesville is Contracted to be re-diverted at POD 2; where a 7.5 Hp submersible pump draws water through a fish screen, out a 2-inch PVC line, through an electronic totalizing flow meter and pressure bladder, delivering to Pat's Pond (certificates 90995 and 90996) acting as a bulge in the system. Water is then drawn by a Honda GX 120 4.0 Hp trash pump to fill a 500 gallon tanker truck. The truck is then driven over POU applying the water from the 500 gallons via a Wajax Pacific pump and a 1 ½" vari-nozzle fire hose.

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).

#### 5. Variations:

was the use developed differently from what was authorized by the permit,	
or permit amendment final order? If yes, describe below.	NO
(e.g. "The permit allowed three points of diversion. The water user only developed one of the points." or	"The permit allowed
40.0 acres of irrigation. The water user only developed 10.0 acres.")	



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3.5

6. Claim Summary:

POD NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
POD 2	0.67 cfs	0.32 cfs	Not Measured	Irrigation	47.94	47.94

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### SYSTEM DESCRIPTION

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Are there multiple PODs?

NO

If "YES" you will need to copy and complete a separate Section 4 for each POD. OWRD

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

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# A. Place of Use

## 1. Is the right for municipal use?

NO

If "YES" the table below may be deleted.

TWP	RNG	Mer	SEC	QQ	GLOT	DLC	USE	If Irrigation, # Primary Acres	IF IRRIGATION, # SUPPLEMENTAL ACRES
235	8W	WM	11	NENE		40	Irrigation	15.69	
235	8W	WM	11	NWNE		40	Irrigation	13.33	
235	8W	WM	11	SWNE		40	Irrigation	1.00	
235	8W	WM	11	SENE		40	Irrigation	13.38	
235	8W	WM	12	SWNW		40	Irrigation	4.54	
Total A	otal Acres Irrigated						47.94		

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. Diversion and Delivery System Information**

Provide the following information concerning the diversion and delivery system. Information provided must describe the equipment used to transport <u>and</u> apply the water from the point of diversion to the place of use.

#### 1. Is a pump used?

YES

If "NO" items 2 through item 6 may be deleted.

### 2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	Type (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Grundfos	300752	28220193b	submersible	NA	2

#### 3. Motor Information:

MANUFACTURER	Horsepower
Grundfos	7.5

4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
7.5	52	-6 feet	40 feet	0.32

# 5. Provide pump calculations:

52 psi = 132.1 feet; Q = (HP x eff.)/(Sum Total Head) =  $(7.5 \times 7.04)/(132.1 - 6 + 40) = 0.32 \text{ cfs}$ 

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)
Not in operation at	Time of Inspection		

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

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7. Is the distribution system piped?

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If "NO" items 8 through item 13 may be deleted.

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8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
"	400 feet	PVC	Buried

#### 9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	Buried or Above Ground
1 ½"	50	Rubber fire hose	Above Ground
		3	

## 10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
NA					
					all-

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)
NA					

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
NA					

#### 13. Pivot Information:

Manufacturer	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NA				

C.	St	or	a	g	e
----	----	----	---	---	---

1. Does the distribution system include in-system storage (e.g. storage tank, bulge in system / reservoir)?

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YES

YES

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

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If "YES" is it a:

Storage Tank

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

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3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE
Pat's Pond (Certs: 90995 & 90996)	4 feet	18.32 AF

# D. Gravity Flow Pipe

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

Bulge in System / Reservoir

1. Does the system involve a gravity flow pipe?

NO

# E. Gravity Flow Canal or Ditch

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Is a gravity flow canal or ditch used to convey the water as part of the distribution system?

NO

F.	Additional notes or comments related to the system:

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## **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 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 of time:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE	12/16/14		
BEGIN CONSTRUCTION (A)		3/20/2015	Purchased Surplus fire truck
COMPLETE CONSTRUCTION (B)	1	12/31/2015	Certificate Pat's Pond issued
COMPLETE APPLICATION OF WATER (C)	12/16/19	7/1/2015	Benefically applying water to POU with truck.

<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)?

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?

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

Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion.

b. Has a meter been installed?

YES

#### c. Meter Information

POD NAME OR#	MANUFACTURER	SERIAL#	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POD 2	Seametrics	112013000366	Working	256.9 AF	4/12/2015

## 4. Recording and reporting conditions:

a. Is the water user required to report the water use to the Department?

YES

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

b. Have the reports been submitted?

YES

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

## 5. 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?

YES

c. When was the fish screening installed?

DATE	Ву Wном	
4/12/2015	Tinker's Pump Service	

Reminder: If the permit 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.

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- 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) and the permit was issued prior to February 1, 2011:
  - Has the self-certification form previously been submitted to the Department? NA

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> complete and attach a copy of the 'ODFW Small Pump Screen Self Certification' form to this claim, and send a copy of it to the Oregon Department of Fish and Wildlife (ODFW).

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination.

The ODFW self certification form needs to have been previously submitted or be attached to this form. RECEIVED

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:

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• Has the ODFW approval been previously submitted?

NA

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If not, contact and work with ODFW to ensure compliance. To demonstrate compliance, provide signed documentation from ODFW. A form is available at:

https://www.oregon.gov/OWRD/Forms/Pages/default.aspx

Reminder: Failure to submit evidence of a timely installed fish screen may result in an unfavorable determination. In order to receive a favorable approval, the ODFW/WRD "Fish Screen Inspection" form needs to have been previously submitted or be attached to this form.

## 6. By-pass Devices:

a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion?

NO

- 7. Other conditions required by permit, permit amendment final order, or extension final order:
  - a. Was the water user required to restore the riparian area if it was disturbed?

b. Was a fishway required?

NO

c. Was submittal of a water management and conservation plan required?

NO

d. 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):

- 7.a. Riparian restored where buried pipe was placed.
- 7.d. The use of water under this right is subject to the terms and conditions of the contract, I-2015-4, between Douglas County and the permittee, or a satisfactory replacement.

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#### **SECTION 6**

### **ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION	
ODFW Letter	Fish Screen Sign-off	
CBU Map	Final Proof Survey	

## **CLAIM OF BENEFICIAL USE MAP**

The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on poly film at a scale of 1'' = 1320 feet, 1'' = 400 feet, or the original full-size scale of the county assessor map for the location.

Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

A Garmin Rino 650, handheld GPS, was used to identify coordinates of pertinent features. Along with

Doug	las County GIS using 2019 aerials with ultra-high resolution.		
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Мар	Checklist	OWRD	AUG 1 3 2021
	be sure that the map you submit includes ALL the items listed below.  der: Incomplete maps and/or claims may be returned.)	OWND	OWRD
$\boxtimes$	Map on polyester film		
$\boxtimes$	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-sizemap)	e scale of the c	ounty assessor
$\boxtimes$	Township, Range, Section, Donation Land Claims, and Government Lo	ots	
$\boxtimes$	If irrigation, number of acres irrigated within each projected Donation Quarter-Quarters	n Land Claims, (	Sovernment Lots
$\boxtimes$	Locations of fish screens and/or fish by-pass devices in relationship to	point of divers	ion
$\boxtimes$	Locations of meters and/or measuring devices in relationship to point	t of diversion or	appropriation
	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditch	es, etc.)	
$\boxtimes$	Point(s) of diversion or appropriation (illustrated and coordinates)		
$\boxtimes$	Tax lot boundaries and numbers		
$\boxtimes$	Source illustrated if surface water		
$\boxtimes$	Disclaimer ("This map is not intended to provide legal dimensions or lines")	ocations of pro	perty ownership

North arrow

CWRE stamp and signature

Legend

 $\boxtimes$ 

X

 $\boxtimes$ 

X

Application and permit number or transfer number



June 15, 2021

George Mcgregor

4025 Mehl Creek Rd.

Elkton, Oregon 97436

Department of Fish and Wildlife

Rogue Watershed District Office 1495 E Gregory Rd

Central Point, OR 97502-9430 (541) 826-8774

Fax: (541) 826-8776 www.myodfw.com

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OREGON Fish & Wildlife

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Dear George,

Regarding Oregon Water Resources Department water right permit S-54905 (application # S-88006), Oregon Department of Fish Wildlife (ODFW) has determined the fish screen at the pump point-of-diversion meets current fish protection criteria. ODFW has determined that fish passage and fish bypass devices are not necessary at this diversion.

Please feel free to call with any questions.

Sincerely,

Josh Kelsey

Senior Fish Screen Technician

Fish Screening and Passage Program

Cc: Nathan Reed, CWRE

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# JAWO

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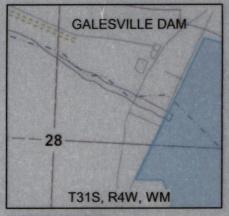
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SCALE: 1" = 400'

# **CLAIM OF BENEFICIAL USE MAP**

FOR: GEORGE B. MCGREGOR
BY: NATHAN REED, PE, CWRE
T23S, R8W, W.M. SECTION 11 DLC 40
APPLICATION NO. <u>S-88006</u>
PERMIT NO. <u>S-54905</u>

DATE SURVEYED: APRIL 24, 2021

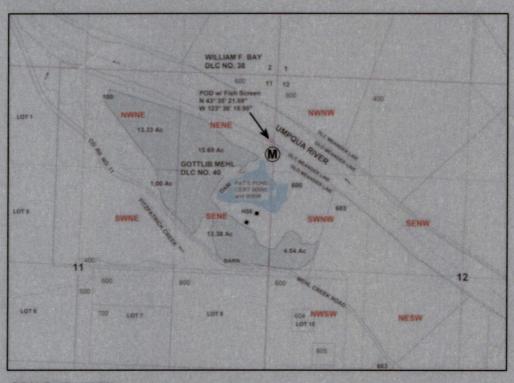


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SCALE: 1" = 1320'

POD IS LOCATED 900 FEET SOUTH AND 50 FEET WEST FROM THE NE CORNER, SECTION 11 AS PROJECTED IN DLC NO. 40.

MAP PREPARED FOR: Legend GEORGE B. MCGREGOR 1843 HOTEL CIRCLE SOUTH, SUITE 300 SANDIEGO, CA 92108 Stream Dam DLC Flow arrow Structures Section POD Irrigation Area Quarter **Pipeline** Meander Sixteenth Expires Dec. 31, 20 2% M Meter Gov Lot Parcels

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

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