

Checklist for Claims of Beneficial Use Received at CSG Counter

Application #:	WRD Reviewer:
Transfer #:	
Date Received:	
CWRE Name:	
Priority Date (s):	

Fees Required:

- YES NO A fee of \$230 must accompany this form for permits with priority dates of July 9, 1987, or later.
- YES NO A fee of \$230 must accompany this form for any transfers including a water right with a priority date of July 9, 1987, or later.
 Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

Fill in App or Transfer Number

Map Review:

- Map on polyester film (OAR 690-014-0170(1) & 310-0050(1)(b))
- Application & permit #; or transfer # (OAR 690-014-0100(1))
- Disclaimer (OAR 690-014-0170(5))
- North arrow (OAR 690-310-0050(2)(c))
- CWRE stamp and signature (OAR 690-014 & 310-0050)
- Appropriate scale (1" = 1320', 1" = 400', or the original full-size scale of the county assessor map) (014 & 310)
- Township, range, section, and tax lot numbers (OAR 690-310-0050(4))

Report Review:

- On form provided by the Department (OAR 690-014-0100(1))
- Application & permit #; or transfer # (OAR 690-014)
- Ownership information (OAR 690-014)
- Date of survey (OAR 690-014)
- Person interviewed (OAR 690-014)
- County (OAR 690-014)
- CWRE stamp and signature (OAR 690-014-0100)
- Signature(s) of all permittee of transfer holder (OAR 690-014-0100)

MONEY SLIP

DATE: _____ RECEIPT #: _____

RECEIVED FROM: _____ APPLICATION PERMIT TRANSFER _____

CASH CHECK # _____ OTHER (IDENTIFY) _____ TOTAL RECD \$ _____

1083 TREASURY 4178 MISC CASH ACCT. _____

0407 COPIES _____ \$ _____
 OTHER: (IDENTIFY) _____ \$ _____

0243 Instream Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

1083 TREASURY 4270 WRD OPERATING ACCT. _____

MISCELLANEOUS

0407 COPY & TAPE FEES 4611 \$ _____

0410 RESEARCH FEES _____ \$ _____

0409 MISC REVENUE (IDENTIFY) _____ \$ _____

TC162 DEPOSIT LIAB. (IDENTIFY) _____ \$ _____

0240 EXTENSION OF TIME _____ \$ _____

WATER RIGHTS

0201 SURFACE WATER EXAM FEE _____ RECORD FEE _____

0203 GROUND WATER _____ 0202 _____ \$ _____

0205 TRANSFER _____ 0204 _____ \$ _____

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR EXAM FEE _____ RECORD FEE _____

LANDOWNER'S PERMIT _____ 0219 _____ \$ _____

OTHER (IDENTIFY) COBU _____ 0220 _____ \$ 230.00

0607 TREASURY 0487 HYDROELECTRIC _____

0233 POWER LICENSE FEE (FWWRD) _____ LIC NUMBER _____ \$ _____

0231 HYDRO LICENSE FEE (FWWRD) _____ \$ _____

HYDRO APPLICATION _____ \$ _____

SPECIAL INSTRUCTIONS:

RETURN TO APPLICANT -- LETTER ATTACHED

Groundwater File Review:

- Pump Test not required (Priority Date prior to December 20, 1988) *If no, include pump test flyer w/acknowledgment letter
- Pump Test required (Priority Date on or after December 20, 1988)
- Pump Test submitted
- Pump Test not submitted

CLAIM OF BENEFICIAL USE for 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

RECEIVED
OCT 06 2021
OWRD

A fee of \$230 must accompany this form for permits
with priority dates of July 9, 1987, or later.

SECTION 1 GENERAL INFORMATION

1. File Information:

APPLICATION # G-14830	PERMIT # (IF APPLICABLE) G-13650	PERMIT AMENDMENT # (IF APPLICABLE) T-
---------------------------------	--	---

2. Property Owner (current owner information):

APPLICANT/BUSINESS NAME Robert Nelson		PHONE NO. 541 231-0381	ADDITIONAL CONTACT NO.	
ADDRESS 48521 Hwy 101				
CITY Bandon	STATE OR	ZIP 97411	E-MAIL	

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 applicant		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

RECEIVED

OCT 06 2021

4. Date of Site Inspection:

6/17/2021

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

OWRD

NAME	DATE	ASSOCIATION WITH THE PROJECT
Robert Nelson	6/17/2021	Property owner / permit holder

6. County:

Coos

7. If any property described in the place of use of the permit is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

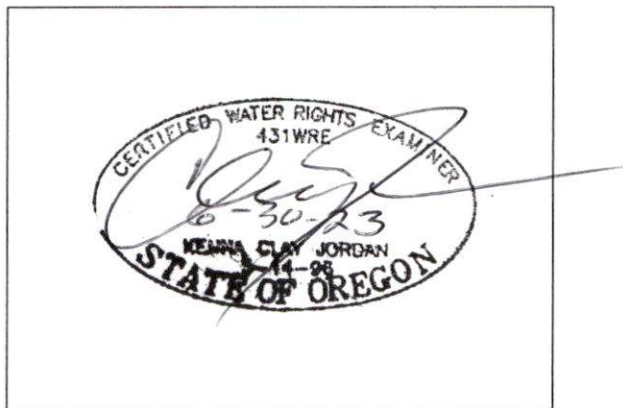
OWNER OF RECORD		
NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

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

RECEIVED

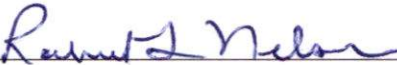
Permit Holder of Record Signature or Acknowledgement

OCT 06 2021

Each permit holder of record must sign this form in the space provided below.

OWRD

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
	Robert L. Nelson	Owner	10-1-2021

**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)
POA	NA	NA

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
POA	Two Mile Creek Basin	Pacific Ocean

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)
POA	Cranberry	Cranberry	Year round	0.122
Total Quantity of Water Used				0.122

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 from sump is pumped into a 3 inch buried PVC pipeline using a 1 HP AMT diaphragm pump to start gravity flow to reservoir #2. Three submersible pumps in the reservoir deliver water to bogs. Nelson R-2000 rotor sprinklers are used for irrigation and temperature control. Open pipeline flow for flooding bogs.

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, permit amendment final order, or extension final order? If yes, describe below. YES

(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.")

3.2 Acres of 5.5 primary cranberry use developed

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
POA	0.122 CFS	0.194		Cranberry	16	13.7

RECEIVED

OCT 06 2021

OWRD

**SECTION 4
SYSTEM DESCRIPTION**

Are there multiple POAs?

NO

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

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

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
29S	14W	WM	18	SW-SE			cranberry		5.4
29S	14W	WM	18	SE-SE			cranberry	2.5	
29S	14W	WM	19	NE-NE			cranberry	0.7	
29S	14W	WM	19	NW-NE			Cranberry		5.1
Total Acres Irrigated								3.2	10.5

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.

RECEIVED

OCT 06 2021

B. Groundwater Source Information (Well)

1. Is the appropriation from a well?

NO

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

OWRD

C. Groundwater Source Information (Sump)

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

YES

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

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

2. If the appropriation involves a SUMP, provide the following information for each SUMP:

LENGTH	WIDTH	AVERAGE DIAMETER	MAXIMUM DEPTH	SURFACE AREA (IN ACRES)	VOLUME IN CUBIC FEET OR ACRE FEET
456	54		12	0.57	2.8 AF

3. If the sump is curbed constructed with watertight surface curbing, describe the curbing:

CURBING MATERIAL (CONCRETE, CONCRETE TILES, OR STEEL)	IF CONCRETE, PROVIDE THE THICKNESS OF THE WALL
NA	

4. Provide sump volume calculations:

(Average length x average width x assumed average depth) 456 x 54 x 5 = 2.8 AF
--

D. Diversion and Delivery System Information

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.

RECEIVED

OCT 06 2021

YES

1. Is a pump used?

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

OWRD

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
#1 Sta-Rite			Submersible		6"
#2 Sta-Rite			Submersible		5"
#3 Sta-Rite			Submersible		6"

3. Motor Information:

MANUFACTURER	HORSEPOWER
#1 Franklin	25
#2 Franklin	15
#3 Franklin	20

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	60	0	19 ave	1.03
#2	60	0	19 ave	0.62
#3	60	0	19 ave	0.82

5. Provide pump calculations:

Delivery pumps from Res. #2. Gravity pipe from sump to Res. #2

$$\begin{aligned} \#1 Q &= \frac{(\text{HP})(\text{Pump Efficiency})}{(\text{Total Head in feet})} = \frac{(25)(7.04)}{(19 + 152.4)} = \frac{176}{171.4} = 1.03 \text{ CFS} \\ \#2 Q &= \frac{(\text{HP})(\text{Pump Efficiency})}{(\text{Total Head in feet})} = \frac{(15)(7.04)}{(19 + 152.4)} = \frac{105.6}{171.4} = 0.62 \text{ CFS} \\ \#3 Q &= \frac{(\text{HP})(\text{Pump Efficiency})}{(\text{Total Head in feet})} = \frac{(20)(7.04)}{(19 + 152.4)} = \frac{140.8}{171.4} = 0.82 \text{ CFS} \quad (2.47 \text{ CFS total}) \end{aligned}$$

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)

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

7. Is the distribution system piped?

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

OWRD

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6 inch	1920	PVC	buried
5 inch	370	PVC	buried
4 inch	540	PVC	buried
3 inch	2670	PVC	buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6 inch	600	PVC	buried
5 inch	300	PVC	buried
4 inch	240	PVC	buried
3 inch	250	PVC	buried
1 ¼ inch	15,920	PVC	buried

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
1/8	48	3.1	530	360	2.49 CFS

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

11. Drip Emmitter Information:

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

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

13. Pivot Information:

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

E. Storage

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

YES

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

RECEIVED

If "YES" is it a: Storage Tank
 Bulge in System / Reservoir

OCT 06 2021

NO

YES

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

OWRD

3. Bulge in System / Reservoir:

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
#2	Cert. 85129	6.5 AF

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?

YES

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

2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)
3 inch	PVC	150	22 feet (ave)	1210	1.8%	0.194

3. Provide calculations:

See attachment 1 (pipe capacity calculator)

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)

Attach measurement notes.

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

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

H. Additional notes or comments related to the system:

Water is pumped from sump into 3 inch pipe only to charge pipe for gravity flow

A pump test exemption is submitted with this COBU. Water is not pumped from the sump it is gravity flow

**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	5/25/1999		
BEGIN CONSTRUCTION (A)	4/16/2000	Prior to 4/16/2000	Begin digging sump
COMPLETE CONSTRUCTION (B)			
COMPLETE APPLICATION OF WATER (C)	10/1/2003	2007	Meter installed (2004) water used under terms & conditions of permit and extension

* 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

If "NO", items a and b relating to this section may be deleted.

a. Did the Extension Final Order require the submittal of Progress Reports? YES

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

b. Were the Progress Reports submitted? YES

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

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? YES

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

b. What month was the initial measurement to be taken in?

March

c. Was the measurement submitted to the Department? YES

d. If the initial measurement was not submitted, provide that measurement now, if available:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements? YES

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

b. Provide the month, or months, the static water level measurement(s) were to be made:

March

c. Were the static water level measurements taken in the month(s) required? YES

d. If "YES", were those measurements submitted to the Department? YES

e. If the annual measurements were not submitted, provide the measurements now:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

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>

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

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

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? YES

c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
POA	McCrometer	unreadable	working	638676 gal x 10	2004
		corroded			

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

RECEIVED

7. Recording and reporting conditions:

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

OCT 06 2021

NO

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

OWRD

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? YES
- 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
NA - sump	

e. Other conditions? NO

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

Monitoring plan submitted 7/24/2001

SECTION 6

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Attachment 1	Pipe flow calculator
Attachment 2	Request for unreasonable burden exemption from pump test
Attachment 3	Progress Report Form for 2016

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.

Coos County GiS tax lots with ORmap (6/7/2021) and Google overlay (5/9/19). Site visit performed using TruPulse 200 for distance and elevation

RECEIVED

OCT 06 2021

OWRD

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
- NA Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- 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

Pipe Capacity Calculator

Attachment 1 COBU for App G-14830

for pipes flowing full, using the Hazen-Williams Formula

Per G-13650

Data Entry (fill in underlined blanks)

Interior Diameter = 3 inches, or 0.25 feet
Roughness Coefficient (C) = 150
Fall = 22 feet per 1210 feet of distance
Grade = 0.01818182, or 1.8%

Results calculated

Area of cross-section = 0.049087 square feet
Wetted Perimeter = 0.785398 feet
Hydraulic Radius = 0.0625
Velocity = 3.959271 feet per second

Pipe Capacity = 0.194 cubic feet per second

RECEIVED

OCT 06 2021

OWRD



**OREGON
WATER
RESOURCES
DEPARTMENT**

**PUMP TEST UNREASONABLE BURDEN
EXEMPTION REQUEST FORM**

RECEIVED

OCT 06 2021

OWRD

OWNER NAME/BUSINESS NAME: Robert Nelson		PHONE NO.: (541) 231-0381	ADDITIONAL CONTACT No.:
ADDRESS: 48521 Highway 101			
CITY: Bandon	STATE: OR	ZIP: 97411	E-MAIL:

If there is a reason why a pump test cannot be performed on a well, the owner may request from the Director an exemption from the pump test requirement. Requests shall be in writing and include the reason why a pump test cannot be performed. Exemptions, or conditioned exemptions, shall be granted if the reasons are found to valid and eliminating the problem would place an unreasonable burden on the well owner. Exemptions shall be granted for public water supply wells if pump testing will cause interruption of service to customers. OAR 690-217-0015(3).

1. List each well and associated water right(s) for which you are requesting an exemption. If a well is listed on more than one water right, be sure to include them all here. If additional space is needed, please attach another form. If available, please attach all water well reports (i.e. well logs) and a map showing the locations of all wells listed on this form.

	WELL LOG # <small>(EX. MARI 99999)</small>	WELL TAG # <small>(EX. L-999999)</small>	WELL NAME OR #	APPLICATION	PERMIT	TRANSFER
a	NA	L- NA	Sump	G-14830	G-13650	T-
b		L- NA		G-	G-	T-
c		L- NA		G-	G-	T-
d		L- NA		G-	G-	T-
e		L- NA		G-	G-	T-

(CONTINUED)

	TWP <small>(EX. 25S)</small>	RNG <small>(EX. 31E)</small>	SEC <small>(EX. 12)</small>	QQ <small>(EX. SE/SW)</small>	SURVEYED LOCATION <small>(EX: 100 ft N & 735 ft E fr SE cor, sec 5)</small>	LATITUDE <small>(EX: 44.94473859)</small>	LONGITUDE <small>(EX: -123.02787000)</small>
a	29S	14W	19	NE-NE	450' South & 1290' ft. West from the NE Cor Sec 19		
b							
c							
d							
e							

2. Please explain why the test cannot be performed:

A gravity pipeline is used to deliver water from the sump to a reservoir for pumping onto cranberry bogs. A small 1 HP diaphragm pump is used only to charge the pipeline for gravity flow

I hereby certify that the well(s) requested for exemption(s) are under my ownership.

SIGNATURE: _____ **DATE:** _____



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

Attachment 3

Extension of Time
 Progress Report Form
 For Checkpoints

TO THE DIRECTOR OF THE OREGON WATER RESOURCES DEPARTMENT

Permit Holder: Robert Nelson

Application G-14830
 Permit G-13650

RECEIVED

Report Due no later than October 1, 2016
 DO NOT SUBMIT PRIOR TO 30 DAYS BEFORE DUE DATE

OCT 06 2021

Progress Report Form for 2016

OWRD

As authorized in ORS 690-315-0050(6), this progress report is required in order to ensure diligence is exercised in the development and
 perfections of Permit G-13650. FAILURE TO SUBMIT THIS REPORT WILL MOST LIKELY RESULT IN ANY FUTURE EXTENSION
 BEING DENIED.

INSERT DATES	LIST ALL WORK ACCOMPLISHED and FINANCIAL INVESTMENTS For the period of time between October 1, 2011 and October 1, 2016	FINANCIAL INVESTMENT
	There have been no work completed or financial investments during the time of this extension - decision was made not to expand to the fullest extent of my water right - total acres will remain at 13.7	

2. Compliance with terms and conditions of the permit and/or previous extension.

1. Meter installed 2004
2. Monitoring plan submitted 2001
3. Beginning of construction was prior to 4-16-2000

3. Total number of acres irrigated to date = 13.7 (if applicable)

4. Provide the maximum rate, or duty if applicable, of water diverted for beneficial use under this permit, if any, made to date.

Maximum rate used to date = 0.122 cfs (cubic feet per second), or
 Maximum rate used to date = 0.122 gpm (gallons per minute), or
 Acre Feet stored to date = _____ AF

Report the rate in the same units of measurement as specified in the permit, being cfs (cubic feet per second), gpm (gallons per minute) or AF (acre-feet). Do not provide daily, monthly or annual water volume totals.

INCOMPLETE REPORTS WILL BE RETURNED. AN ANSWER IS REQUIRED IN EACH ITEM. USE N/A FOR ITEM 3 IF THE USE IS NOT IRRIGATION.

Signature Robert Nelson

Date 8-20-2021

For OWRD use only

Diligence Shown Yes No

Reviewed by: _____ Date: _____

Date Public Noticed: _____

Jordan Engineering

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

RECEIVED

OCT 06 2021

OWRD

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

Claim Of Beneficial Use:
Application: G-14830
Permit: G-13650

October 3, 2021

Mr. Clark:

Inclosed are the Claim of Beneficial Use (COBU) form, Mylar map, Attachments 1 through 3 and a check #3714 in the sum of \$230 made out to the Department.

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

Respectfully,



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

cc: Mr. Robert Nelson

file: Robert Nelson Permit G-13650 WRD-cl.wpd

CLAIM OF BENEFICIAL USE

APPLICATION G-14830

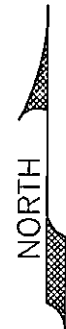
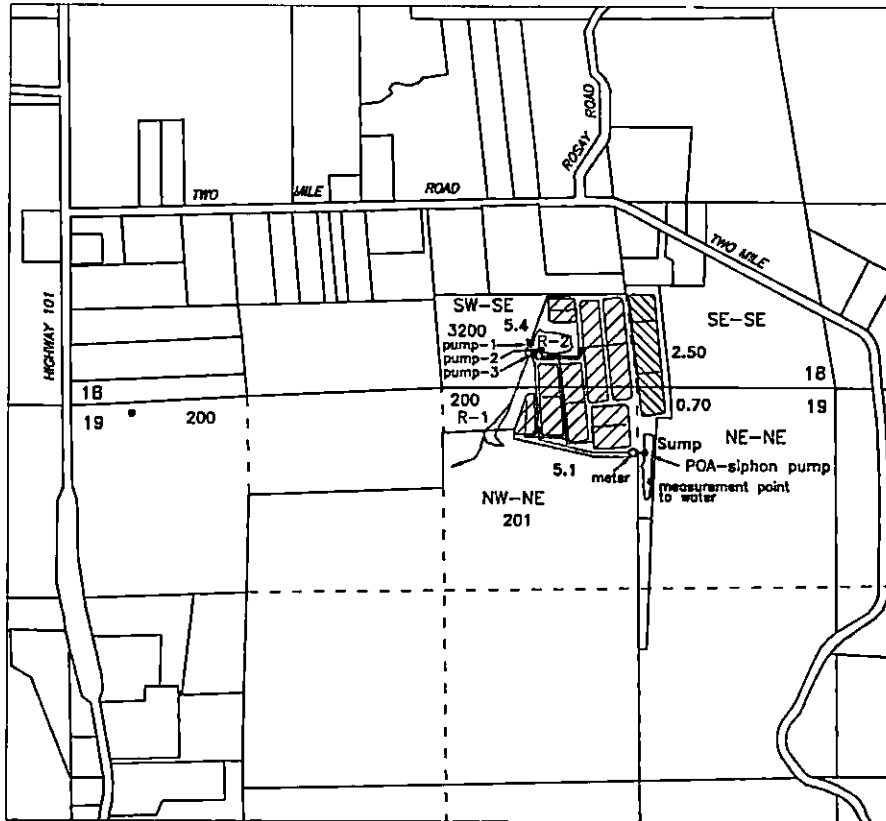
PERMIT G-13650

SECTIONS 18, 19, TOWNSHIP 29 SOUTH, RANGE 14 WEST, W.M.
COOS COUNTY OREGON

RECEIVED

OCT 06 2021

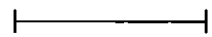
OWRD



Legend

POA - Sump - NE/NE Section 19, 450 feet South and 1290 feet West from the NE corner section 19

Scale
1 inch = 1320 feet



- Cranberry Use - 3.2 Acres



- Supplemental Cranberry Use - 10.5 Acres



PREPARED FOR:
Robert Nelson
48521 Highway 101
Bandon, OR 97411

Base map - Coos County GIS Tax Lots
over 6/7/2021 Oregon Map & 5/9/19
Google aerial photo for assumed best fit

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

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

8/18/2021 - ned