

# 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 EXAM FEE RECORD FEE

0201 SURFACE WATER \$ \_\_\_\_\_ 0202 \$ \_\_\_\_\_

0203 GROUND WATER \$ \_\_\_\_\_ 0204 \$ \_\_\_\_\_

0205 TRANSFER \$ \_\_\_\_\_

WELL CONSTRUCTION EXAM FEE RECORD FEE

0218 WELL DRILL CONSTRUCTOR \$ \_\_\_\_\_ 0219 \$ \_\_\_\_\_

LANDOWNER'S PERMIT \$ \_\_\_\_\_ 0220 \$ \_\_\_\_\_

OTHER (IDENTIFY) COBU \$ 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 Surface Water 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](http://www.oregon.gov/OWRD)

**A fee of \$230 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>

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).

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 503-979-9103.

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>

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## SECTION 1 GENERAL INFORMATION

**1. File Information:**

APPLICATION # <b>S-71160</b>	PERMIT # <b>S-51736</b>	PERMIT AMENDMENT # <b>T-</b>
---------------------------------	----------------------------	---------------------------------

**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>James Butsch</b>		PHONE NO. <b>503.845.2485</b>	ADDITIONAL CONTACT NO.	
ADDRESS <b>15234 Butsch Lane</b>				
CITY <b>Mt. Angel</b>	STATE <b>Oregon</b>	ZIP <b>97362</b>	E-MAIL <b>4Bfarms@mtangel.ner</b>	

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 or holder of record (this may, or may not, be the current property owner):**

PERMIT HOLDER OF RECORD <b>James Butsch</b>				
ADDRESS <b>15234 Butsch Lane</b>				
CITY <b>Mt. Angel</b>	STATE <b>Oregon</b>	ZIP <b>97362</b>		

ADDITIONAL PERMIT HOLDER OF RECORD <b>None</b>				
ADDRESS				
CITY	STATE	ZIP		

**4. Date of Site Inspection:**

**October 12, 2021**

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Norm Wiesner</b>	<b>October 12, 2021</b>	<b>Farm Manager</b>
<b>Fred Beyer</b>	<b>October 12, 2021</b>	<b>Irrigation Manager</b>

**6. County:**

**Marion**

**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 <b>NA</b>				
ADDRESS				
CITY	STATE	ZIP	<b>RECEIVED</b>	
			<b>OCT 14 2021</b>	

Add additional tables for owners of record as needed

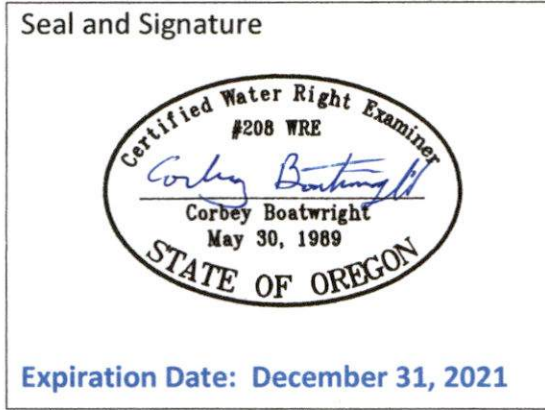
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**SECTION 2  
SIGNATURES**

CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.



CWRE NAME <b>Corbey Boatwright</b>		PHONE NO. <b>503.363.9225</b>	ADDITIONAL CONTACT NO.	
ADDRESS <b>Boatwright Engineering, Inc. 2613 12<sup>th</sup> Street SE</b>				
CITY <b>Salem</b>	STATE <b>OREGON</b>	ZIP <b>97302</b>	CITY <b>Salem</b>	

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
<i>James F Butsch</i>	<b>James Butsch</b>	<b>Permit Holder</b>	<i>10/14/2021</i>

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## SECTION 3

### CLAIM DESCRIPTION

**1. Point of diversion name or number:**

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POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)
POD 1
POD 2

**2. Point of diversion source and tributary:**

POD NAME OR NUMBER	SOURCE	TRIBUTARY
POD 1	Butte Creek	Pudding River
POD 2	Butte Creek	Pudding River

**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 1	IR & IS	Hops Wheat Squash	Mar-Apr	1.05 cfs
POD 2		Gras Seed Green Beans Corn Garlic		1.09 cfs
<b>Total Quantity of Water Used</b>				<b>2.14 cfs</b>

**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:

Water is withdrawn from the western POD 1 with a 60 hp pump. The 6-inch intake line has an attached ODFW approved fish screen. The discharge is to an 8-inch pipeline. The lift from the creek to the pump is 12-feet. The elevation increases another 40-feet to the Meridian Road right-of-way.

Water is withdrawn from the eastern POD 2 with a 25 hp pump. The 6-inch intake line has an attached ODFW approved fish screen. The discharge is to a 6-inch pipeline. The lift from the creek to the pump is 11-feet. The water is pumped up another 14' to the East Butsch Reservoir as a bulge in the system. The water is removed from the reservoir with a 50 hp pump and a 100 hp pump and placed into the 8-inch transmission line.

Water is distributed through a network of 8-inch and 6-inch buried transmission lines. Application is by drip tape on hops and handlines with impact sprinklers on seed and row crops.

**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.

**YES**

(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.")

**The permit authorized 30.0 acres of primary irrigation. 29.6 acres were developed.**

**6. Claim Summary:**

POD NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM		AMOUNT OF WATER MEASURED	USE	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
POD 1	4.88 cfs*	1.05 cfs	2.14 cfs	----	IR & IS†	IR	30.0	29.6
POD 2		1.09 cfs		----		IS	360.7	360.7

\*Total combined rate, no specific rate for each POD

†Both uses allowed from both POD's

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**SECTION 4**  
**SYSTEM DESCRIPTION**

Are there multiple PODs?

**YES**

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

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

**POD 1 (Northwest POD)**

**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
5S	1W	WM	36	SW-SW	4	----	IR & IS	4.6	1.5
5S	1W	WM	36	SE-SW	3	----	IS	0	18.3
6S	1W	WM	1	NE-NE	1	----	IS	0	38.6
6S	1W	WM	1	NW-NE	2	----	IS	0	39.3
6S	1W	WM	1	SW-NE	----	----	IS	0	35.4
6S	1W	WM	1	SE-NE	----	----	IS	0	36.3
6S	1W	WM	1	NE-NW	3	----	IS	0	30.3
6S	1W	WM	1	NW-NW	4	----	IS	0	13.5
6S	1W	WM	1	NE-SW	----	----	IS	0	30.0
6S	1W	WM	1	NW-SW	----	----	IS	0	28.0
6S	1W	WM	1	NE-SE	----	----	IS	0	17.6
6S	1W	WM	1	NW-SE	----	----	IS	0	34.9
6S	1W	WM	1	SW-SE	----	----	IS	0	37.0
6S	1E	WM	6	NE-NW	3	----	IR	5.0	0
6S	1E	WM	6	SE-NW	----	----	IR	20.0	0
<b>Total Acres Irrigated</b>								<b>29.6</b>	<b>360.7</b>

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 and apply the water from the point of diversion to the place of use.

**1. Is a pump used?**

**YES**  
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**2. Pump Information:**

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Berkeley	RD 356-00-271	7169 384	Centrifugal	6"	8"

**3. Motor Information:**

MANUFACTURER	HORSEPOWER
US MOTORS	60

**4. Theoretical Pump Capacity:**

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
60	120	12'	60'	1.05

**5. Provide pump calculations:**

<p>60 HP 120 psi Centrifugal  psi to head: <math>\frac{120 \text{ psi} (1.1)}{(.433)} = 304.9</math></p> <p><math>Q = \frac{60 (6.61)}{12+60+304.9} = 1.05 \text{ cfs} = 471 \text{ gpm}</math></p>	<p><b>RECEIVED</b>  OCT 14 2021  <b>OWRD</b></p>
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**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)
56714 gpmX10	Same	0	Pump Not Operating – No Flow

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
8"	8,275'	PVC	Buried
6"	17,525'	PVC	Buried

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
3"	40,440	AL	Above Ground
4"	3,040	AI	Above Ground

**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)	NOTES
5/32	≈70 psi	6 gpm	1010	48	0.64 cfs (285 gpm)	w/ drip IR in use
5/32	≈70 psi	6 gpm	1010	78	1.05 cfs (468 gpm)	w/out drip IR in use

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)
NONE					

**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
36	0.29	64,000	64,000	0.41 cfs (186 gpm)	-----

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NONE				

**C. Storage**

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

NO

**D. 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

**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:**

The irrigation rates above are based on using only POD 1.

The irrigation calculations reflect the option of 2 blocks (1 block = 32,000 LF) of drip tape being used and the balance of the water available being applied with impact sprinklers.

OR

All of the water being applied with impact sprinklers.

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**SECTION 4**  
**SYSTEM DESCRIPTION**

Are there multiple PODs?

**YES**

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

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

**POD 2 (Southeast POD)**

**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
5S	1W	WM	36	SW-SW	4	----	IR & IS	4.6	1.5
5S	1W	WM	36	SE-SW	3	----	IS	0	18.3
6S	1W	WM	1	NE-NE	1	----	IS	0	38.6
6S	1W	WM	1	NW-NE	2	----	IS	0	39.3
6S	1W	WM	1	SW-NE	----	----	IS	0	35.4
6S	1W	WM	1	SE-NE	----	----	IS	0	36.3
6S	1W	WM	1	NE-NW	3	----	IS	0	30.3
6S	1W	WM	1	NW-NW	4	----	IS	0	13.5
6S	1W	WM	1	NE-SW	----	----	IS	0	30.0
6S	1W	WM	1	NW-SW	----	----	IS	0	28.0
6S	1W	WM	1	NE-SE	----	----	IS	0	17.6
6S	1W	WM	1	NW-SE	----	----	IS	0	34.9
6S	1W	WM	1	SW-SE	----	----	IS	0	37.0
6S	1E	WM	6	NE-NW	3	----	IR	5.0	0
6S	1E	WM	6	SE-NW	----	----	IR	20.0	0
<b>Total Acres Irrigated</b>								<b>29.6</b>	<b>360.7</b>

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 and apply the water from the point of diversion to the place of use.

**1. Is a pump used?**

**YES**

**Diversion at Butte Creek to East Butsch Reservoir and Re-diversion at East Butsch Reservoir to irrigated fields.**

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**2A. Butte Creek Pump Information:**

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
BERKELEY	JPM2516T	39KO61x103	Centrifugal	6"	6"

**3A. Butte Creek Motor Information:**

MANUFACTURER	HORSEPOWER
MARATHON	25

**4A. Butte Creek Theoretical Pump Capacity:**

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
25	50	11'	14' (to East Butsch Res)	1.09

**5A. Butte Creek Provide pump calculations:**

25 HP 50 psi Centrifugal  
 psi to head:  $50 \text{ psi} (1.1) = 127.0$   
 (.433)

$Q = \frac{25 (6.61)}{11+14+127} = 1.09 \text{ cfs} = 488 \text{ gpm}$

**6A. Butte Creek 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)
304492Ac-Ft x .001	Same	0	Pump Not Operating – No Flow

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

**2B. East Butsch Reservoir Re-Diversion Pump Information:**

PUMP	MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
A	Gould Pump	DWT	FR492250	TURBINE	10"	10"
B	Jacuzzi Bros	500M4BWQE101	-----	CENTRIFUGAL	5"	4"

**3B. East Butsch Reservoir Re-Diversion Motor Information:**

PUMP	MANUFACTURER	HORSEPOWER
A	US ELECTRICAL MOTOR	100 HP
B	US ELECTRICAL MOTOR	50 HP

**4B. East Butsch Reservoir Re-Diversion Theoretical Pump Capacity:**

PUMP	HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
A	100	80	7'	25'	2.99
B	50	100	7'	25'	1.16

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**5B. East Butsch Reservoir Re-Diversion Provide pump calculations:**

100 HP 80 psi Turbine  
 psi to head:  $\frac{80 \text{ psi} (1.1)}{(.433)} = 203.2'$

$Q = \frac{100 (7.04)}{7+25+203.2} = 2.99 \text{ cfs} = 1342 \text{ gpm}$

50 HP 100 psi Centrifugal  
 psi to head:  $\frac{100 \text{ psi} (1.1)}{(.433)} = 254.0'$

$Q = \frac{50 (6.61)}{7+25+254} = 1.16 \text{ cfs} = 519 \text{ gpm}$

TOTAL = 1,861 gpm = 4.15 CFS

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**6B. East Butsch Reservoir Measured Pump Capacity (using meter if meter was present and system was operating):**

PUMP	INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
A	37947196 Gal	Same	0	Pump Not Operating – No Flow
B	0026961 Ac-Ft	Same	0	Pump Not Operating – No Flow

7. Is the distribution system piped?

YES

**8. Mainline Information:**

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
8"	7,885'	PVC	Buried
6"	17,525'	PVC	Buried

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
3"	40,440	AL	Above Ground
4"	3,040	AI	Above Ground

**10. Sprinkler Information:**

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)	NOTES
5/32	≈70 psi	6 gpm	1010	279	3.74 cfs (1675 gpm)	w/ drip IR in use
5/32	≈70 psi	6 gpm	1010	310	4.15 cfs (1861 gpm)	w/out drip IR in use

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)
NONE					

**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
36	0.29	64,000	64,000	0.41 cfs (186 gpm)	-----

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
NONE				

**C. 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.

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

NO  
YES

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

**3. Bulge in System / Reservoir:**

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)
East Butsch Reservoir	17'	120.2

**D. 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

**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:**

The irrigation rates above are based on using only POD 2 and utilizing the East Butsch Reservoir as a bulge in the system to pump to irrigation at a higher rate.

The irrigation calculations reflect the option of 2 blocks (1 block = 32,000 LF) of drip tape being used and the balance of the water available being applied with impact sprinklers.

OR

All of the water being applied with impact sprinklers.

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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 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	November 6, 1995		
BEGIN CONSTRUCTION (A)	November 1, 1996		
COMPLETE CONSTRUCTION (B)	October 1, 1997 P October 1, 2013 EFO	October 1, 2013	All construction of intake, piping, & application equipment complete
COMPLETE APPLICATION OF WATER (C)	October 1, 1998 P October 1, 2012 EFO	October 1, 2013	All conditions met and water applied to authorized places of use

\* 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. Measurement Conditions:

a. Does the permit, permit amendment, or any extension final order require the installation of a meter or approved measuring device? YES

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

b. Has a meter been installed? YES

#### c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
1	SeaMetrics FT520-86	510-51FP	Working	37947196 Gal	2004
2	Aquamaster 900-0305	30200	Working	0026961 Ac-Ft	2004

### 4. Recording and reporting conditions:

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

b. Have the reports been submitted?

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

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**5. Fish Screening:**

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

**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?

POD	DATE	BY WHOM
1	1992	Owner
2	1992 & replaced in 2005	Owner

**Reminder: If the permit was issued on or after February 1, 2011, the fish screen is required to be approved by the Oregon Department of Fish and Wildlife regardless of the rate of diversion.**

d. If the diversion **involves a pump** *and* 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 <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx> 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.**

e. If the diversion does **not involve a pump** *or* the **total** diversion rate of all rights at the point of diversion is 225 gpm (0.5 cfs) or greater:

- Has the ODFW approval been previously submitted? **NA**

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? **YES**

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

**Reminder: If by-pass devices were required, the COBU map must indicate their location in relation to the point of diversion.**

b. Have by-pass devices been installed?

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

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

DESCRIPTION (E.G. "ODFW HAS APPROVED THE BY-PASS DEVICE" OR "NO BY-PASS DEVICE IS NECESSARY BECAUSE THERE IS A DIRECT DIVERSION FROM THE STREAM VIA A PUMP ON RIVER LEFT STREAM BANK WITH FOOT VALVE DESCENDING DIRECTLY INTO NATURAL POOL.") IN ADDITION, YOU MAY ATTACH PHOTOS TO THIS CLAIM.	IF INSTALLED (DATE)	IF INSTALLED, BY WHOM
ODFW has determined that the fish screen conditions have been met. Letter from Martin Olson, ODFW Fish Screens Field Coordinator, dated December 17, 2012	NA	NA

**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? **NO**
- b. Was a fishway required? **NO**
- c. Was submittal of a water management and conservation plan required? **NO**
- d. 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):

**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Claim of Beneficial	Map
Department of Fish & Wildlife	Letter dated December 17, 2012, Fish Screen Inspection Forms dated October 9, 2006 and November 7, 2012

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## SECTION 7

### CLAIM OF BENEFICIAL USE MAP

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

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

**Marion County Survey Records: MCSR 38774, MCSR 38614, MCSR 36501, MCSR 35947, MCSR 32419, MCSR 32352, MCSR 31671. Google Earth photos dated Jul-9-2012 and Aug-12-2020. Diversion point locations were established for previous Certificates for older water rights and those location coordinates are continued here.**

#### 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
- 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

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# Oregon

John A. Kitzhaber, MD, Governor

## Department of Fish and Wildlife

The Dalles Screen Shop  
3561 Klindt Drive  
The Dalles OR 97058  
(541) 296-8026  
(541) 296-7889  
dfw.state.or.us

December 17, 2012

Jim Butsch  
4-B Farms  
15234 Butsch Lane  
Mt. Angel Or. 97362

RE: Water Rights Permit # S-51736

To Whom It May Concern:


On July 19<sup>th</sup>, 2012 Oregon Department of Fish and Wildlife Fish Screens Field Coordinator, Martin Olson, inspected the point of diversion located at the address listed above. The point of diversion is affected by water right Permit # S-51736. The fish screen conditions listed in Permit # S-51736, and referenced below, have been met.

Water Rights Permit # S-51736

The permittee shall install, maintain, and operate fish screening and by-pass devices as required by the Oregon Department of Fish and Wildlife to prevent fish from entering the proposed diversion. The required screens and by-pass devices are to be in place, functional and approved by an ODFW representative prior to diversion of any water.

Please contact me if you have any questions regarding this letter.

Sincerely,

  
Martin Olson  
Fish Screens Field Coordinator  
The Dalles Screens Shop

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**Martin P. Olson**  
Screens Coordinator  
Fish Screening & Passage



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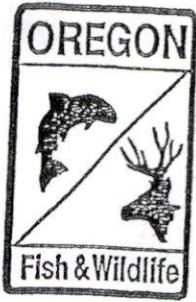
# Oregon

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DEPARTMENT OF  
FISH AND WILDLIFE

---

The Dalles Screen Shop  
3561 Klindt Drive  
The Dalles, OR 97058  
(541) 296-8026  
Fax: (541) 296-7889  
Cell: (541) 705-5021  
Martin.P.Olson@state.or.us



OREGON DEPARTMENT OF FISH AND WILDLIFE  
OREGON WATER RESOURCES DEPARTMENT

FISH SCREEN INSPECTION FORM

APPLICANT

Name: 4-B Farms Inc.  
Address: 15234 Butsch Lane, Mt Angel 97362 Phone 503-845-2485

Application Number: 71160 Permit Number: 51736  
Water Right Amount (cfs) \_\_\_\_\_  
Water Use 750 to 800 gpm

DIVERSION

Stream: Butte Creek Tributary to: Pudding River

Address (if different than applicants): Same as above

Diversion Type: Pump Location: T \_\_\_\_\_, R \_\_\_\_\_, Sec. \_\_\_\_\_

GPS Coordinates: N 45.09615 W 122.74343 SATS: \_\_\_\_\_

PUMP INFORMATION

Brand: \_\_\_\_\_ Horsepower: 60hp Intake Size: 6"

SCREEN INFORMATION

Type: Passive Screen Installed by: LANDOWNER Date Installed: 1992?

Date of Inspection: 11/7/2012 Inspected by: Mary Olson Agency: ODFW

Comments: Screen Dimensions, 16" x 94", Screen meets Criteria to 936 gpm.

- Screen meets current state criteria for fish protection.
- Screen does not meet current state criteria for fish protection.
- Another screen inspection should be done before water use begins.

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Return this form to: Brendalee S. Wilson, Water Rights Division, OR Water Resources Dept., 158 12<sup>th</sup> Street NE, Salem, OR 97310 / 1-800-624-3199 ext: 276 / Fax: 503-378-6203 / e-mail: [brendalee.s.wilson@wrdd.state.or.us](mailto:brendalee.s.wilson@wrdd.state.or.us)





OREGON DEPARTMENT OF FISH AND WILDLIFE  
OREGON WATER RESOURCES DEPARTMENT

FISH SCREEN INSPECTION FORM

APPLICANT

Name: JAMES BUTCH / 4B FARMS  
Address: 15234 BUTSCH LN N.E. Phone 503-845-2485  
MT. ANGEL, OR. 97362  
Application Number: R86054 Permit Number: R14357  
Water Right Amount (cfs) 500 GPM

DIVERSION

Stream: BUTTE CR. Tributary to: PUDDING RIVER

Address (if different than applicants): \_\_\_\_\_

Diversion Type: \_\_\_\_\_ Location: T \_\_\_\_\_, R \_\_\_\_\_, Sec. \_\_\_\_\_

GPS Coordinates: 45.09389°N 122.73941°W SATS: \_\_\_\_\_

PUMP INFORMATION

Brand: CORNELL Horsepower: 25 Intake Size: 8"

SCREEN INFORMATION



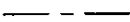
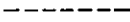


Type: PASSAGE Installed by: LANDOWNER Date Installed: 4-15-05

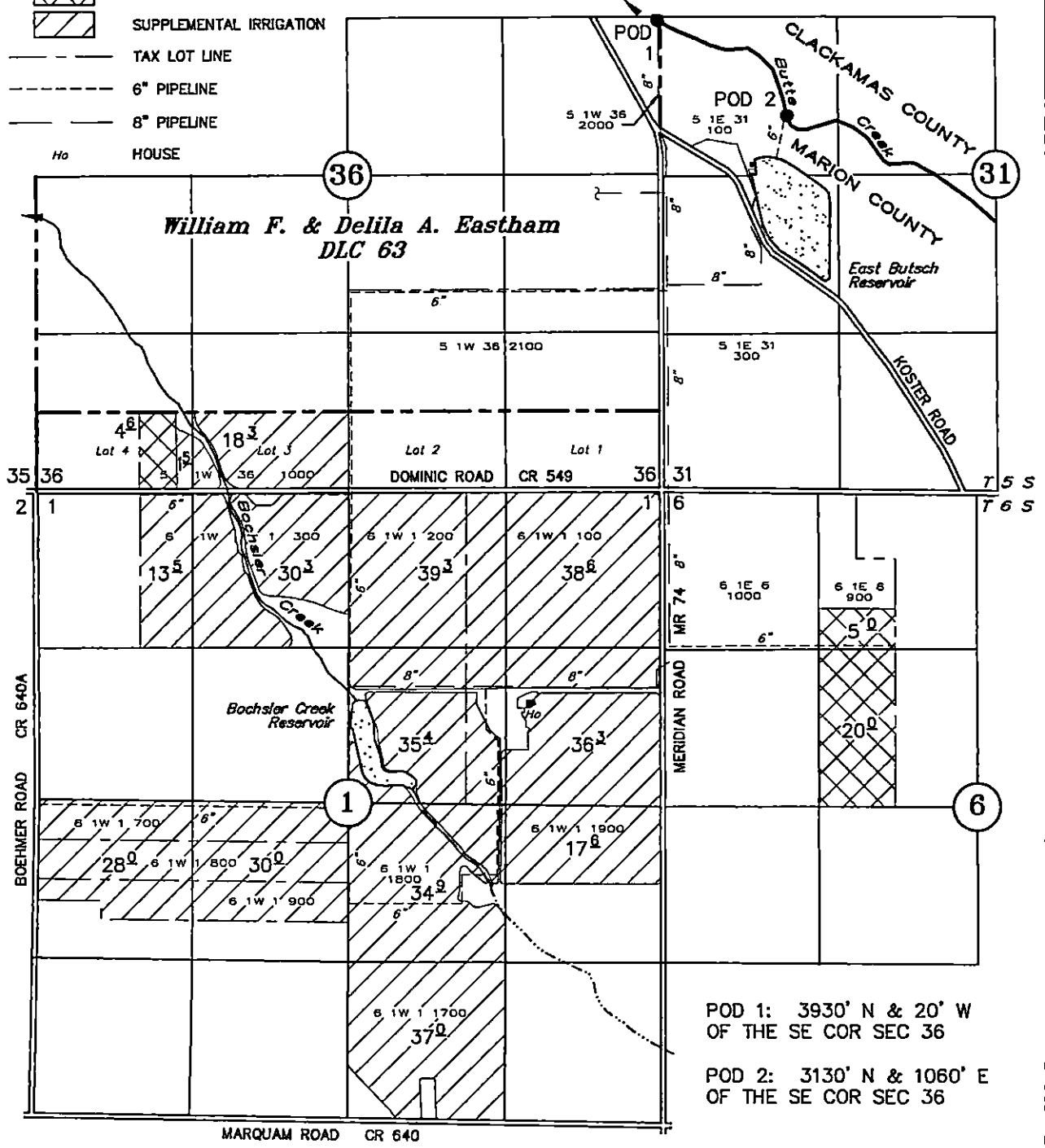
Date of Inspection: 10-9-06 Inspected by: BOB HAIR Agency: ODFW

Comments: 8 SQ FT SCREEN SURFACE WITH 3/32 OPENINGS

- Screen meets current state criteria for fish protection.
- Screen does not meet current state criteria for fish protection.
- Another screen inspection should be done before water use begins.

T5S-R1W, T6S-R1W, T6S-R1E, WM  
MARION COUNTY

-  PRIMARY IRRIGATION
-  SUPPLEMENTAL IRRIGATION
-  TAX LOT LINE
-  6" PIPELINE
-  8" PIPELINE
-  HOUSE



- TAX LOTS:
- 5 1W 36  
1000  
2000  
2100
  - 5 1E 31  
100  
300
  - 6 1W 01  
100  
200  
300  
700  
800  
900  
1700  
1800  
1900
  - 6 1E 06  
900  
1000

POD 1: 3930' N & 20' W  
OF THE SE COR SEC 36

POD 2: 3130' N & 1060' E  
OF THE SE COR SEC 36

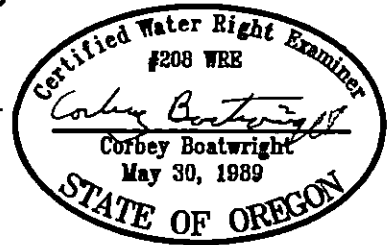
**Claim of Beneficial Use**

UNDER

Application No. S-71160 Permit No. S-51736

IN THE NAME OF

**James Butsch**



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

October 8, 2021  
SCALE: 1" = 1320'

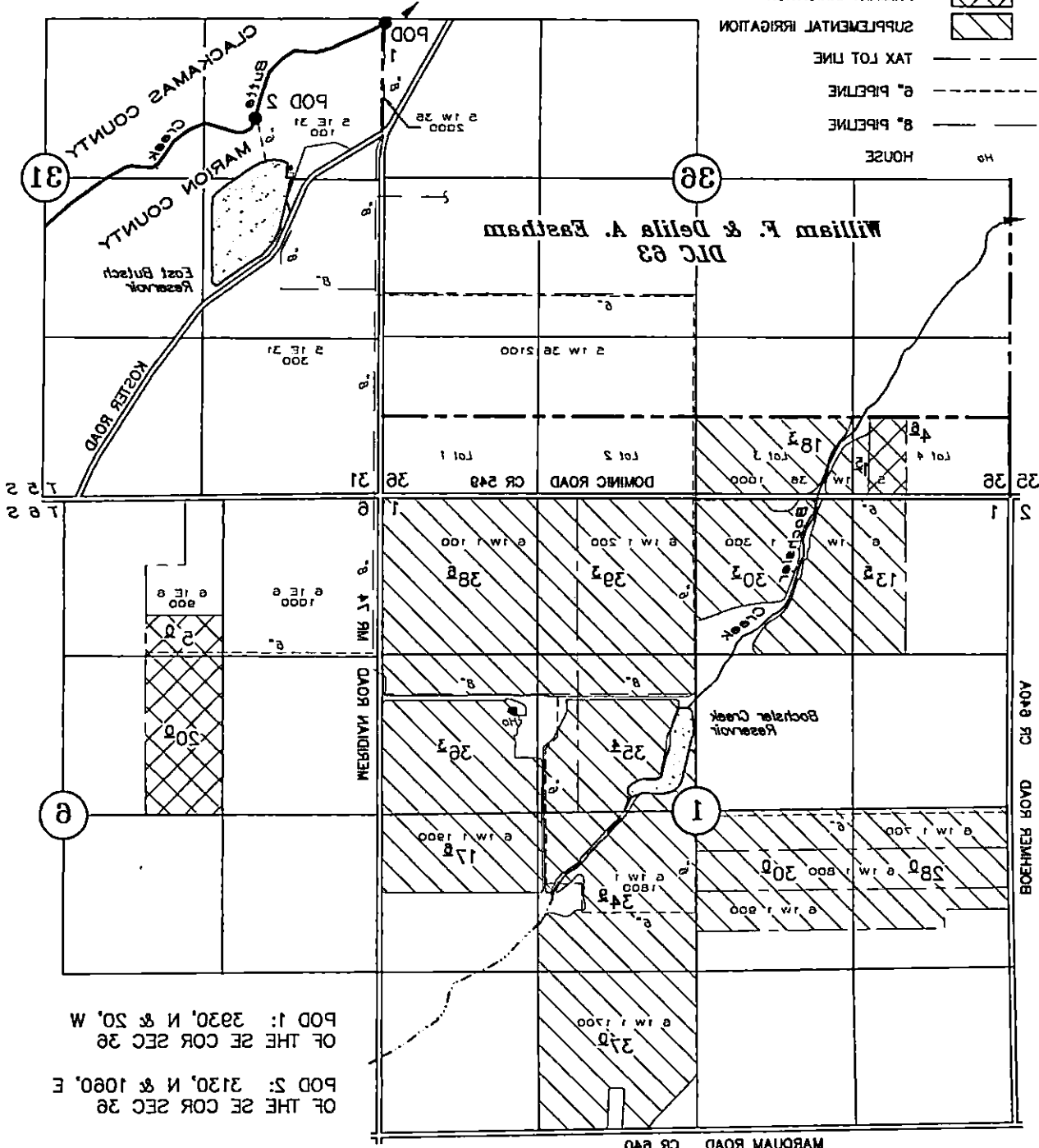
Renewal Date: December 31, 2021



# T2S-R1W, T6S-R1E, WM

MARION COUNTY

PRIMARY IRRIGATION  
 SUPPLEMENTAL IRRIGATION  
 TAX LOT LINE  
 a PIPELINE  
 b PIPELINE  
 HOUSE



TAX LOTS:

2 1W 38	1000
1000	2000
2100	2100
2 1E 31	100
100	200
a 1W 01	100
100	200
200	300
300	700
700	800
800	900
900	1700
1700	1800
1800	1900
a 1E 08	900
900	1000

POD 1: 2930' N & 20' W  
 OF THE SE COR SEC 36

POD 2: 3130' N & 1060' E  
 OF THE SE COR SEC 36

## Claim of Beneficial Use

UNDER

Application No. 2-71160 Permit No. 2-21738

IN THE NAME OF

### James Butsch

October 8, 2021

SCALE: 1" = 1250'

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



Renewal Date: December 31, 2021





## Jeanne Boatwright

---

**From:** Jeanne Boatwright  
**Sent:** Tuesday, October 12, 2021 1:48 PM  
**To:** codi.n.holmes@oregon.gov  
**Cc:** Gerry Clark (gerald.e.clark@state.or.us)  
**Subject:** James Butsch

Hi Codi,

I called you a week or two ago and haven't heard back. Want to let you know that we are working on the CBU's for Permits G-12327 and S-51736 which are due today.

We are wrapping up the last calculations, need to get the maps on mylar, and then review them with Jim and get his signature on the reports. We expect to have them in by the end of the week.

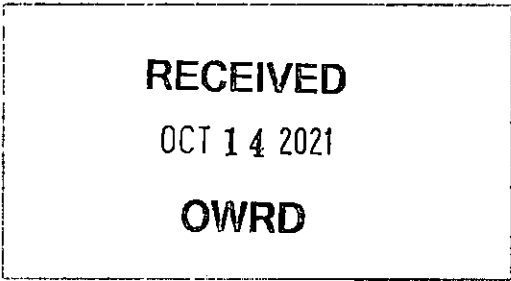
Jeanne Boatwright  
***Boatwright Engineering, Inc.***  
2613 12th Street SE  
Salem, Oregon 97302  
ph: 503-363-9225

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APP S-71160



Date Received (Date Stamp Here)

### OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: James Butsch, 15234 Butsch Lane,  
mt Angel, OR 97362

Transaction Type: COBU

Fees Received: \$ 230.00

Cash  Check: Check No. 45700

Name(s) on Check: 4 B Farms Inc

Address on Check: 15234 Butsch Lane, Mt Angel, OR  
97362

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: J Skaug  
(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.