



8019 West Quinault Avenue, Suite 201  
Kennewick, Washington 99336  
509.209-2846

October 22, 2021

Gerry Clark, Certificate Section  
Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem, OR 97301

RE: Claim of Beneficial Use Report and Final Proof Survey for Permit G-17442

Dear Gerry:

Enclosed please find a completed Claim of Beneficial Use Report and Final Proof Survey Map for Permit G-17442 on behalf of our client, SSD Lands (Steve and Sharon DeRuyter.) A check in the amount of \$230 for the submittal fee is also enclosed.

Should you have any questions regarding this report, please do not hesitate to contact me, or Jon Travis, CWRE. Thank you.

Sincerely,

A handwritten signature in blue ink that reads "Molly Reid".

Molly Reid  
Senior Planner

Cc: Sharon and Steve DeRuyter  
File

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**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](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>

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. **Every item must have a response.** If any requested information does not apply to the claim, insert "NA." **Do not delete or alter any section of this form unless directed by the form.** The Department may require the submittal of additional information from any water user or authorized agent.

"Section 8" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-979-9103.

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>

**SECTION 1**

**GENERAL INFORMATION**

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**1. File Information:**

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APPLICATION # <b>G-14850</b>	PERMIT # (IF APPLICABLE) <b>G-17442</b>	PERMIT AMENDMENT # (IF APPLICABLE) <b>T-12012</b>
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME <b>SSD Lands, LLC</b>		PHONE NO. <b>(509) 542-2255</b>	ADDITIONAL CONTACT No.
ADDRESS <b>2300 Kruse Road</b>			
CITY <b>Pasco</b>	STATE <b>WA</b>	ZIP <b>99301</b>	E-MAIL <b>ssderuyter@gmail.com</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 holder of record (this may, or may not, be the current property owner):**

PERMIT HOLDER OF RECORD <b>SSD Lands, LLC (Steve and Sharon DeRuyter)</b>		
ADDRESS <b>2300 Kruse Road</b>		
CITY <b>Pasco</b>	STATE <b>WA</b>	ZIP <b>99301</b>

ADDITIONAL PERMIT HOLDER OF RECORD <b>N/A</b>		
ADDRESS		
CITY	STATE	ZIP

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**4. Date of Site Inspection:**

<b>3/28/2019</b>
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**5. Person(s) interviewed and description of their association with the project:**

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Clint DeRuyter</b>	<b>3/28/2019</b>	<b>Operator</b>

**6. County:**

<b>Union</b>
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**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 <b>N/A</b>		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed

**SECTION 2  
SIGNATURES**

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CWRE Statement, Seal and Signature

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



CWRE NAME <b>Jonathon Travis</b>		PHONE No. <b>(509) 979-0332 Cell</b>	ADDITIONAL CONTACT No. <b>(509) 209-2839 Office</b>
ADDRESS <b>GeoEngineers Inc., 8019 W. Quinault Avenue, Suite 201</b>			
CITY <b>Kennewick</b>	STATE <b>WA</b>	ZIP <b>99336</b>	E-MAIL <b>jtravis@geoengineers.com</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
	<b>Steve DeRuyter</b>	<i>Member</i>	<i>10/15/21</i>
	<b>Sharon DeRuyter</b>	<i>Member</i>	<i>10/15/21</i>

**SECTION 3**  
**CLAIM DESCRIPTION**

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**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)
<b>Buerkel #3</b>	<b>UNIO 52490</b>	<b>L-96346</b>

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
<b>Buerkel #3</b>	<b>Basalt – Clover Creek Basin</b>	<b>Powder River</b>

**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)
<b>Buerkel #3</b>	<b>Irrigation</b>	<b>Alfalfa, Timothy Grass, barley</b>	<b>March 1-October 31</b>	<b>300 gpm</b>
<b>Total Quantity of Water Used</b>				<b>300 gpm</b>

**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:**

**Groundwater is pumped from well and delivered by 7920 feet of buried six-inch pvc pipeline to four center pivots.**

**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.")

**The permit allowed for three points of appropriation. Well 1 (UNIO 50700) and Well 2 (UNIO 52411) were not developed, are not in use, and will not be included in this claim. The applicant developed 279.3 of the 316.4 acres permitted.**

**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
<b>Buerkel #3</b>	<b>3.95 cfs</b>	<b>1.42 cfs</b>	<b>Not measured</b>	<b>Irrigation</b>	<b>316.4</b>	<b>279.3</b>

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

Are there multiple POAs?

**NO**

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

Buerkel #3

**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 TAX LOT	DLC	USE	IF IRRIGATION, # PRIMARY ACRES	IF IRRIGATION, # SUPPLEMENTAL ACRES
5S	39E	WM	20	NENE	2500		Irrigation	31.8	
5S	39E	WM	20	SENE	2500		Irrigation	31.0	
5S	39E	WM	20	NESE	2500		Irrigation	1.6	
5S	39E	WM	21	NENW	2500		Irrigation	0.2	
5S	39E	WM	21	NWNW	2500		Irrigation	15.6	
5S	39E	WM	21	SWNW	2500		Irrigation	40.0	
5S	39E	WM	21	SENW	2500		Irrigation	26.6	
5S	39E	WM	21	NESW	2500		Irrigation	36.0	
5S	39E	WM	21	NWSW	2500		Irrigation	35.8	
5S	39E	WM	21	SWSW	2500		Irrigation	32.7	
5S	39E	WM	21	SESW	2500		Irrigation	28.0	
<b>Total Acres Irrigated</b>								<b>279.3</b>	

**B. Groundwater Source Information (Well)**

1. Is the appropriation from a well?

**YES**

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

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

Pressure gage at top of well casing

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF ORIGINAL WELL	COMPLETION DATES OF ALTERATIONS	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
See	Well	Log	UNIO 52490			

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

See Well Log UNIO 52490

### C. Groundwater Source Information (Sump)

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

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.

### 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.

1. Is a pump used? YES

#### 2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Franklin	Not Available	Not Available	Submersible	6-inch	6-inch

#### 3. Motor Information:

MANUFACTURER	HORSEPOWER
Franklin	Hp 60

#### 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)
60 HP	55 psi	129 feet	10 feet	1.42 cfs

#### 5. Provide pump calculations:

<p>HP = <u>60</u></p> <p>Efficiency = <u>6.61</u></p> <p>Lift = <u>139</u></p> <p>PSI = <u>55</u></p> <hr/> <p><b>Results Calculated</b></p> <p>(hp)(efficiency) = 396.6</p> <p>Head based on psi = 139.7</p> <p>Total dynamic head = 278.7</p> <p>(head + lift)</p> <p><b>Pump Capacity = 1.42 cubic feet per second</b></p>	<p><b>RECEIVED</b></p> <p>OCT 27 2021</p> <p><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)
148.291 acft	N/A	Not observed	Not operating at visit

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.

**8. Mainline Information:**

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MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6-inch	7920 feet	PVC	Buried

**9. Lateral or Handline Information:**

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
N/A	N/A		

**10. Sprinkler Information:**

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

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

**11. Drip Emitter Information:**

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

**12. Drip Tape Information:**

DRIPPER SPACING IN INCHES	GPM PER 100 FEET	TOTAL LENGTH OF TAPE	MAXIMUM LENGTH OF TAPE USED	TOTAL TAPE OUTPUT (CFS)	ADDITIONAL INFORMATION
N/A					

**13. Pivot Information:**

MANUFACTURER	MAXIMUM WETTED RADIUS	OPERATING PSI	TOTAL PIVOT OUTPUT (GPM)	TOTAL PIVOT OUTPUT (CFS)
Valley	2220'	60	1000 gpm	2.23 cfs
Zimmatic	950'	60	300 gpm	0.67 cfs
Lockwood	1430'	60	500 gpm	1.12 cfs
Zimmatic	690'	60	200 gpm	0.45 cfs

**E. Storage**

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

NO



## F. Gravity Flow Pipe

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

1. Does the system involve a gravity flow pipe?

NO

## G. Gravity Flow Canal or Ditch

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

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

NO

## H. Additional notes or comments related to the system:

N/A

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**SECTION 5  
CONDITIONS**

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All conditions contained in the permit, permit amendment, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

**1. Time Limits:**

Permits and 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	June 18, 1999		
BEGIN CONSTRUCTION (A)	May 25, 2000	October 28, 1999	Original well started prior to A-date
COMPLETE CONSTRUCTION (B)	October 1, 2018	May 1, 2017	Well #3 completed 12-2013; pivots installed 2014-2015; use developed in 2014-2017
COMPLETE APPLICATION OF WATER (C)	October 1, 2018	October 1, 2017	Beneficial use completed prior to 10-2018. Conditions in permit and extension met.

\* 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
	On file with OWRD		

**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
	<b>On File with OWRD</b>		

**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.

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

b. Has the pump test been previously submitted to the Department? **YES**

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
<b>Buerkel #3</b>	<b>McCrometer</b>	<b>N/A</b>	<b>Working</b>	<b>148.291</b>	<b>March 2014</b>

**7. 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.*

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b. Have the reports been submitted? **YES**

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

**8. Other conditions required by permit, permit amendment final order, or extension final order:**

- a. Were there special well construction standards? **NO**
- b. Was submittal of a ground water monitoring plan required? **NO**
- c. Was submittal of a water management and conservation plan required? **NO**
- d. Was a Well Identification Number (Well ID tag) assigned and attached to the well? **YES**

WELL ID #	DATE ATTACHED TO WELL
L-96346	9-2013

e. Other conditions? **NO**

**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Attachment #1	Final Proof Survey Map

**SECTION 7  
CLAIM OF BENEFICIAL USE MAP**

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

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

The authorized point of appropriation and visible system components were visited during the site inspection. The location of the point of appropriation and the extent of the place of use were located in a field survey completed during the site inspection. The map was created using Geographic Information System (GIS) software and spatial datasets from ESRI and Oregon Water Resources Department, and Google Earth (aerial July 15, 2017). Additional data and information specific to the water right holder's use of water und the water right described in this Claim of Beneficial Use Report were obtained from the operator and water right holder.

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## 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 – N/A
- 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 – NON-APPLICABLE
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
- North arrow
- Legend
- CWRE stamp and signature

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**Attachment #1**  
Final Proof Survey Map  
Claim of Beneficial Use Report and Final Proof Survey Map for Permit G-17442

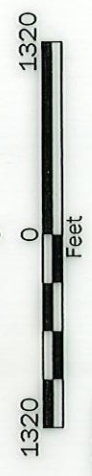
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**Final Proof Survey Map**  
 for Application G-14850, Permit G-17442  
 T5S, R39E, W.M.  
 Section 20 and 21  
 Union County, Oregon

- Legend**
- Authorized POA
  - Property Boundary Line
  - ▨ Irrigated Area

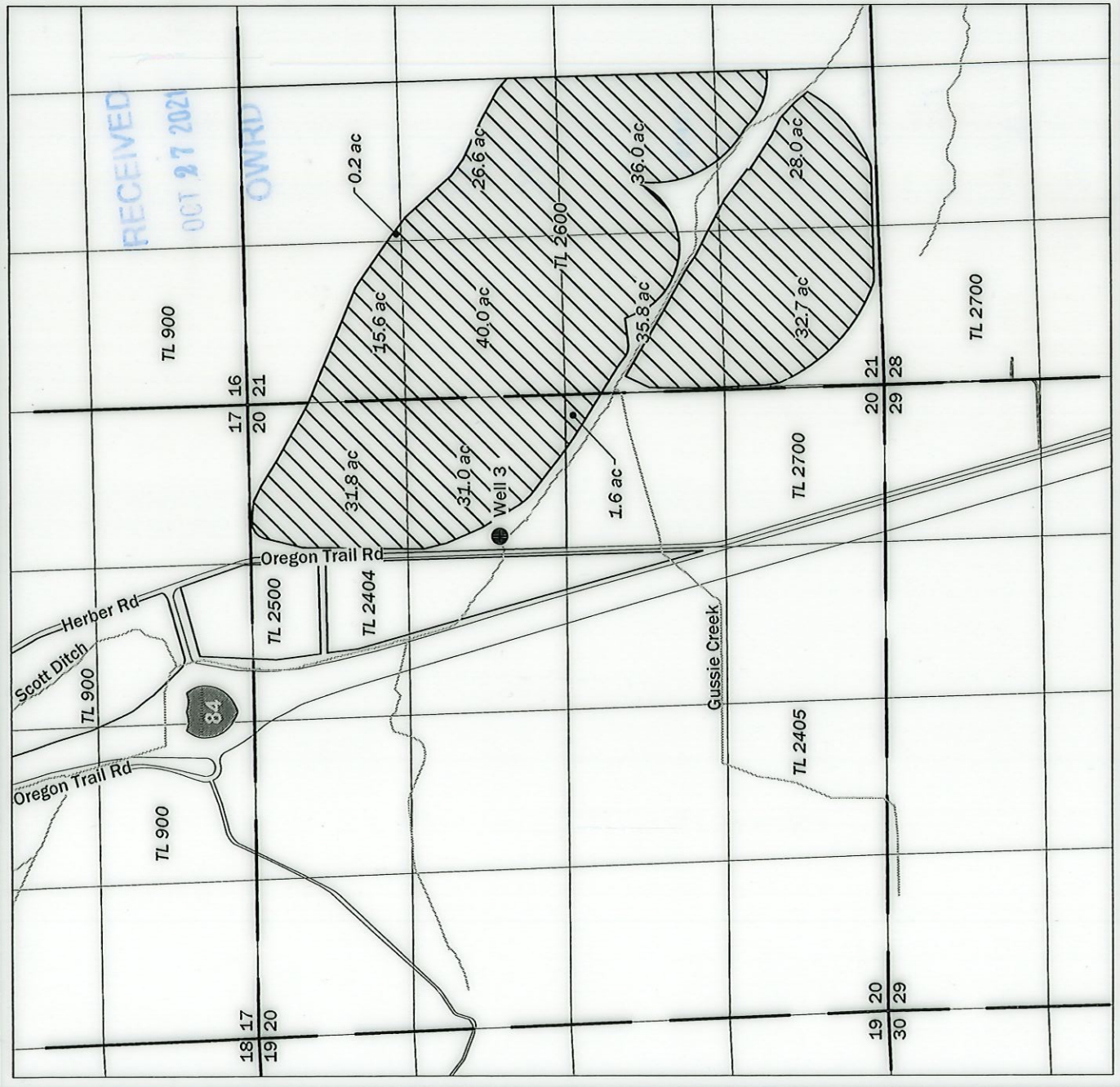
**Well Location**  
 Well 3  
 Located 2,100 feet South and 1,170 feet West from the NE corner of section 20, T5S R39E, W.M.

**Certified Water Rights Examiner Stamp**



**Disclaimer**  
 This map was prepared for the purpose of identifying the location of a water right only and it is not intended to provide legal dimensions or location of property ownership lines.

**Map Notes**  
 Date: 11/13/20  
 Data Sources: ESRI  
 Prepared By: GeoEngineers



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