

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

MONEY SLIP

DATE: 11-4-2021

RECEIPT #: 136768

RECEIVED FROM: Platt's Oak Hill Dairy LLC

APPLICATION	
PERMIT	
TRANSFER	

CASH CHECK # 19106 OTHER (IDENTIFY)

TOTAL REC'D \$ 230.00

1083 TREASURY 4170 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		\$
0410 RESEARCH FEES		\$
0408 MISC REVENUE (IDENTIFY) _____		\$
TC162 DEPOSIT LIAB. (IDENTIFY) _____		\$
0240 EXTENSION OF TIME _____		\$

WATER RIGHTS

0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
0203 GROUND WATER	\$	0204	\$
0205 TRANSFER	\$		

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	RECORD FEE
LANDOWNER'S PERMIT	\$	0220	\$
OTHER (IDENTIFY) _____			

0607 TREASURY 0467 HYDROELECTRIC

0233 POWER LICENSE FEE (FW/WRD)	LIC NUMBER	\$
0231 HYDRO LICENSE FEE (FW/WRD)		\$
HYDRO APPLICATION		\$

SPECIAL INSTRUCTIONS:

RETURN TO APPLICANT -- LETTER ATTACHED

CLAIM OF BENEFICIAL USE for Transfers changing Character of Use Only



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

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NOV 04 2021

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A fee of \$230 must accompany this form for any transfer final orders
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.

A separate form shall be completed for each transfer.

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.

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.

"Section 6" 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

Type of Authorized Change

This Claim is being submitted for a transfer where the only authorized change was a change in character of use.

YES NO

If additional changes were authorized, you will need to select a different form.

NOV 04 2021

OWRD

1. File Information

APPLICATION #

T-8256

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Jack and Marilyn Platt		PHONE NO. 503.838.6586	ADDITIONAL CONTACT NO. Cell-503.559.5848
ADDRESS 11070 Oak Hill Road			
CITY Independence	STATE OREGON	ZIP 97351	E-MAIL plattdairy@gmail.com

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. ***Each transfer holder of record must sign this form.***

3. Transfer holder of record (this may, or may not, be the current property owner)

TRANSFER HOLDER OF RECORD Rabo Agrifinance Inc.		
ADDRESS PO Box 411995		
CITY St. Louis	STATE Mo	ZIP 63141

4. Date of Site Inspection:

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Jack Platt		Water Right User and Property Owner

6. County:

Polk

7. If any property described in the place of use of the transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(5)): **N/A**

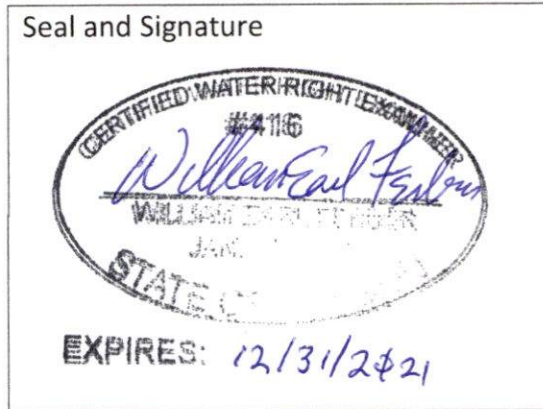
OWNER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

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 William Ferber/BK Water Right Consulting LLC		PHONE No. 503.910.9212	ADDITIONAL CONTACT No.
ADDRESS PO Box 13434			
CITY Brush Prairie	STATE WA	ZIP 98606	E-MAIL bill@bkwrc.com

Transfer Holder of Record Signature or Acknowledgement

Each transfer 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>Jack Platt</i>	JACK PLATT	Water Right User and Property Owner	10/26/21
<i>M. Platt</i>	MARILYN PLATT	Water Right User and Property Owner	10/26/21

SECTION 3
EXTENT OF CHANGE COMPLETED

Note: The Claim only needs to describe the changes that were authorized in the transfer final order.

Change in Character of Use

1. Claim Summary – Authorized Use(s):

Provide the new use(s) authorized by the transfer final order:

NEW USE(S) AUTHORIZED
Primary Irrigation

2. Variations:

Were all the uses developed from what was authorized by the transfer final order?

YES NO

If no, describe below.

(e.g. "The order authorized changes in character of use to industrial, commercial, and livestock. The water user did not develop the commercial use.")

**SECTION 4
CONDITIONS**

OWRD

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

1. Time Limits:

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE AUTHORIZED CHANGE WAS COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	May 26, 2005	
COMPLETENESS DATE FROM ORDER (C)	October 1, 2006	June 1, 2005 Irrigation as primary occurred on the POU involved in this transfer

* MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

2. Is there an extension final order(s)?

YES NO

If "NO", you may delete the following table.

If for a transfer extension order, provide the following information:

VOLUME	PAGE	DATE EXTENDED TO

3. Measurement Conditions:

a. Does the transfer final order require the installation of a meter or approved measuring device?

YES NO

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

e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available

4. Other conditions required by the transfer final order:

a. Other conditions?

YES 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 5
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
Final Proof Map	Map of POU changed from supplemental to primary irrigation

SECTION 6

CLAIM OF BENEFICIAL USE MAP

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A 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 polyester 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.

For the purpose of this Claim, the map identifying the location of the use does not require a new survey. The location identified on the Claim map should be based on the original right of record at the time the transfer final order was issued.

If the transfer final order did not require the installation of a meter/measuring device or fish protection devices, it may be possible to obtain a waiver, under OAR 690-014-0170(7), from providing a new map with the Claim. Any request for a mapping waiver must be in writing in the form of an e-mail or a letter.

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
- N/A** 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
- N/A** Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.) ***Not required for this type of Claim of Beneficial Use**
- 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")
- Transfer application number
- North arrow
- Legend
- CWRE stamp and signature

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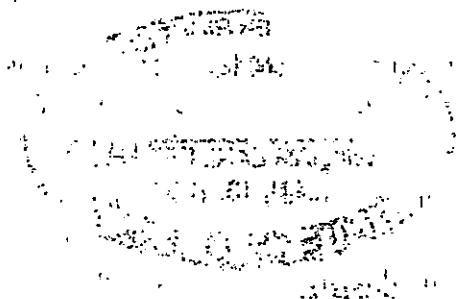
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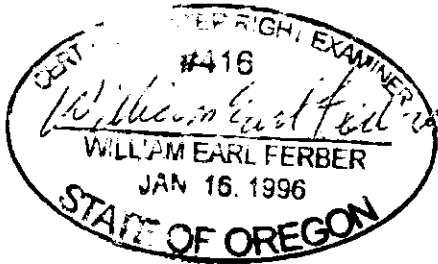
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Final Proof Map

T. 9S. R4W., W.M.



Jack and Marilyn Platt
 SECTIONS 20 AND 21
 POLK COUNTY
 11070 OAK HILL ROAD
 INDEPENDENCE, OR. 97351

PREPARATION OF THIS MAP IS FOR THE PURPOSE OF IDENTIFYING THE LOCATION OF THE WATER RIGHT ONLY. THERE IS NO INTENT TO PROVIDE DIMENSIONS OR LOCATION OF PROPERTY OWNERSHIP LINES.

RECEIVED

NOV 04 2021

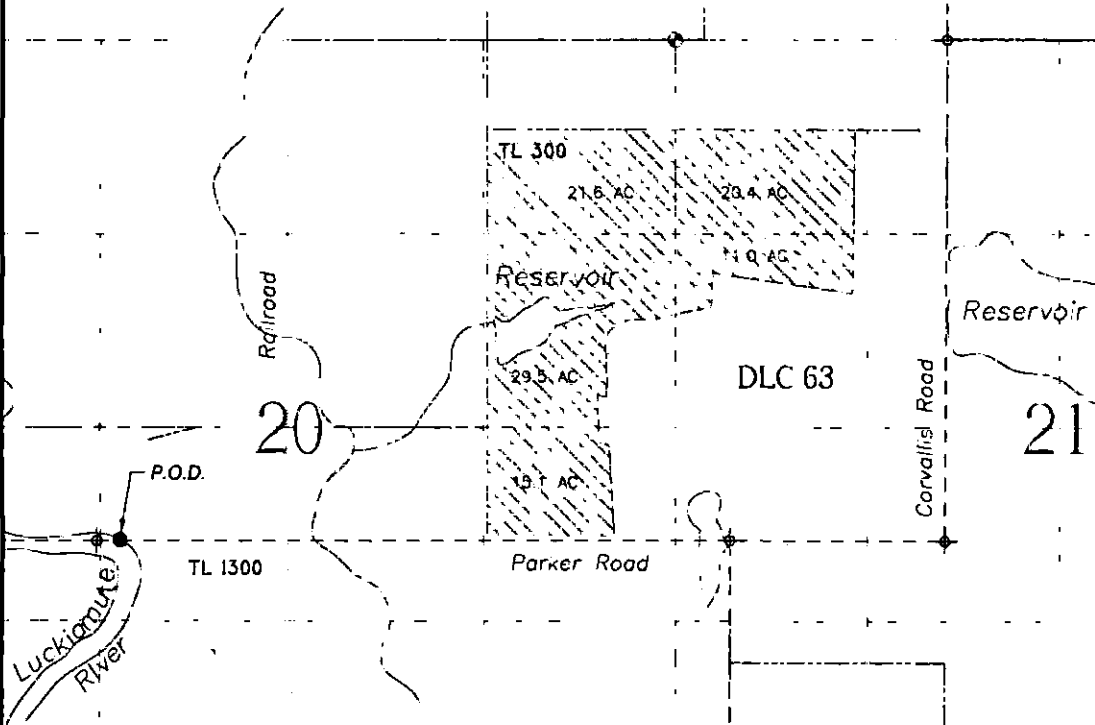
OWRL



SCALE
 1" = 1320'

LEGEND

- PROPERTY LINE
- USGS GRID
- DLC BOUNDARY
- ROADWAY
- WATER
- SECTION CORNER
- DLC CORNER
- P.O.D.
- PRIMARY IRRIGATION (P.O.U.)



NOTES:

POINT OF DIVERSION (P.O.D.) IS LOCATED 10 FT NORTH AND 5680 FT WEST FROM THE SE CORNER OF DLC 63

Survey
 AND CLAIM OF BENEFICIAL USE
 IN THE NAME OF JACK AND MARILYN PLATT

Place of Irrigation Use by Acres				
Section	DLC	1/4-1/4	Tax Lot	Acres
20	63	NENE	300	21.6
20	63	SENE	300	29.5
20	63	NESE	300	15.1
Section 20 Total				66.2
21	63	NWNW	300	20.4
21	63	SWNW	300	11.0
Section 21 Total				31.4
Total Irrigation Acres				97.6

FILE PATH & NAME: C:\Users\cwatkins\Google Drive\PLATT 2021\PLATT COBU 102821.dwg

BK WATER RIGHT CONSULTING
 PO Box 13434 Salem, Oregon 97309

Platt CoBU Map for T8256

APPLICATION#: PERMIT#: AMENDMENT#: SHEET 1 OF 2