

**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)

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**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>

**SECTION 1  
GENERAL INFORMATION**

**1. File Information:**

APPLICATION # <b>S- 88442</b>	PERMIT # <b>S- 55181</b>	PERMIT AMENDMENT # <b>T-</b>
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**2. Property Owner (current owner information):**

APPLICANT/BUSINESS NAME Dwain Beck		PHONE NO. 541-263-1297	ADDITIONAL CONTACT No.
ADDRESS 66389 Getting Rd			
CITY Enterprise	STATE Oregon	ZIP 97020	E-MAIL beckr@hotmail.com

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 same		
ADDRESS		
CITY	STATE	ZIP

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ADDITIONAL PERMIT HOLDER OF RECORD NA		
ADDRESS		
CITY	STATE	ZIP

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**4. Date of Site Inspection:**

8/19/20; 9/3/20

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

NAME	DATE	ASSOCIATION WITH THE PROJECT
Dwain Beck	8/19/20	owner

**6. County:**

Wallowa

**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 NA		
ADDRESS		
CITY	STATE	ZIP

Add additional tables for owners of record as needed



SECTION 2  
SIGNATURES

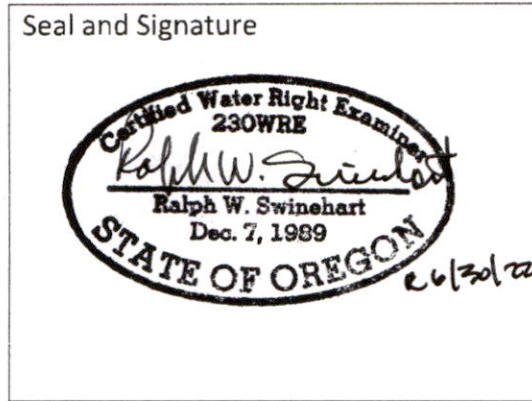
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CWRE Statement, Seal and Signature

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



CWRE NAME Ralph W. Swinehart		PHONE NO. 541-398-1550	ADDITIONAL CONTACT NO.
ADDRESS PO Box 266			
CITY Enterprise	STATE Oregon	ZIP 97828	E-MAIL ralphswinehart45@gmail.com

Permit Holder of Record Signature or Acknowledgement

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

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
<i>Dwain Beck</i>	Dwain Beck	owner	5-12-22

## SECTION 3

### CLAIM DESCRIPTION

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

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

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

POD NAME OR NUMBER	SOURCE	TRIBUTARY
#1	Wallowa Lake Dam / Reservoir	Wallowa River
#2	via Farmer Ditch	"

**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)
#1	irrig	wheat / grain	May - Oct.	295 gpm
#2	irrig	wheat / grain		261 gpm
<b>Total Quantity of Water Used</b>				130 af / year

**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 diverted into Farmers Ditch @ Wallowa Lake Dam, then rediverted into Prairie Ck Pipeline Project. Final diversions are from the N. Prairie Ck Pipeline into buried mainlines on the Beck Property

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 NO

(e.g. "The permit allowed three points of diversion. The water user only developed one of the points." or "The permit allowed 40.0 acres of irrigation. The water user only developed 10.0 acres.")

After permit was issued a district wide p. pipeline project was installed. 2 connection points were made to this pipeline to supply pressurized water to each side of the Beck Farm

**6. Claim Summary:**

POD NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED	# OF ACRES DEVELOPED
#1	not defined	-	295 gpm	irrig	58.6	58.6
#2	"	-	261 gpm	irrig	20.2	20.2



**SECTION 4  
SYSTEM DESCRIPTION**

Are there multiple PODs?

YES  NO

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

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

**MAY 16 2022**

#1 Elk mtn Rd Tap

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**A. Place of Use**

1. Is the right for municipal use?

YES  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
IS	4SE	WM	32	NENE			irrig		30.0
IS	4SE	WM	29	SESE			irrig	28.6	
<b>Total Acres Irrigated</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  NO

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

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE

3. Motor Information:

MANUFACTURER	HORSEPOWER

4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)

5. Provide pump calculations:

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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)

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

7. Is the distribution system piped?

YES  NO

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

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
8"	2200'	PVC	buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
2 wheel lines	1/4 mile each	aluminum	above grade

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
1/2"	80-35		66		

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)



**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
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**13. Pivot Information:**

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

**C. Storage**

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

YES  **NO**

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

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

YES   NO  
YES   NO

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED

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

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)

**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?

**YES**  **NO**

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)
18"	PVC					

distribution pipe is part of district pipeline project

**3. Provide calculations:**

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**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)
8/10/20	Ralph Swinford	meter	245 gpm 0.66 cfs

Attach measurement notes.

**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?**

YES  NO

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

**2. Complete the table:**

CANAL OR DITCH TYPE (MATERIAL)	TOP WIDTH OF CANAL OR DITCH	BOTTOM WIDTH OF CANAL OR DITCH	DEPTH	"N" FACTOR	AMOUNT OF FALL	LENGTH OF CANAL / DITCH	SLOPE	COMPUTED RATE (IN CFS)
<del> </del>								

**3. Provide calculations:**

<del> </del>
--------------

**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)
<del> </del>			

Attach measurement notes.

**F. Additional notes or comments related to the system:**

<del> </del>
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**SECTION 4  
SYSTEM DESCRIPTION**

Are there multiple PODs?

YES  NO

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

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

**MAY 16 2022**

#2 Getting Rd Tap

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**A. Place of Use**

1. Is the right for municipal use?

YES  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
15	45E	WM	29	SWSE			irrig	3.7	
15	45E	WM	32	NWNE			irrig		16.5
<b>Total Acres Irrigated</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  NO

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

2. Pump Information:

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE

3. Motor Information:

MANUFACTURER	HORSEPOWER

4. Theoretical Pump Capacity:

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)

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5. Provide pump calculations:

[Empty box for pump calculations]

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?

YES  NO

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

8. Mainline Information:

MAINLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
6"	800	pvc	buried

9. Lateral or Handline Information:

LATERAL OR HANDLINE SIZE	LENGTH	TYPE OF PIPE	BURIED OR ABOVE GROUND
wheel line	1/4 mile	alum.	above gnd
handline	4"/200'	alum	above gnd

10. Sprinkler Information:

SIZE	OPERATING PSI	SPRINKLER OUTPUT (GPM)	TOTAL NUMBER OF SPRINKLERS	MAXIMUM NUMBER USED	TOTAL SPRINKLER OUTPUT (CFS)
1/2"	80-35		38		

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)



**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
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**13. Pivot Information:**

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

**C. Storage**

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

YES  NO

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

*If "YES" is it a:*

Storage Tank

YES NO

Bulge in System / Reservoir

YES NO

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

**2. Storage Tank:**

MATERIAL (CONCRETE, FIBERGLASS, METAL, ETC.)	CAPACITY (IN GALLONS)	ABOVE GROUND OR BURIED

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

RESERVOIR NAME OR NUMBER (CORRESPOND TO MAP)	APPROXIMATE DAM HEIGHT	APPROXIMATE CAPACITY (IN ACRE FEET)

**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?**

YES NO

*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)
10"	PVC					

*distribution pipe is part of a distract pipeline project*

3. Provide calculations:

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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)
9/3/20	Ralph Swenhart	meter	261 gpm .58 cfs

Attach measurement notes.

**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? YES  NO

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

2. Complete the table:

CANAL OR DITCH TYPE (MATERIAL)	TOP WIDTH OF CANAL OR DITCH	BOTTOM WIDTH OF CANAL OR DITCH	DEPTH	"N" FACTOR	AMOUNT OF FALL	LENGTH OF CANAL / DITCH	SLOPE	COMPUTED RATE (IN CFS)
<i>(This table is crossed out with a diagonal line)</i>								

3. Provide calculations:

<i>(This section is crossed out with a diagonal line)</i>
---

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)
<i>(This table is crossed out with a diagonal line)</i>			

Attach measurement notes.

**F. Additional notes or comments related to the system:**

<i>(This section is crossed out with a diagonal line)</i>
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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 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	3/6/2019		
BEGIN CONSTRUCTION (A)	March 2020	May 2020	system installed & put into operation
COMPLETE CONSTRUCTION (B)		May 2020	
COMPLETE APPLICATION OF WATER (C)		May 2020	

\* 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  NO

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 NO

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

b. Were the Progress Reports submitted?

YES NO

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

**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 NO

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

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

b. Has a meter been installed?

YES NO

c. Meter Information

POD NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
#1	semanatics	042019001599	working	63.4 af	may 2020
#2	"	092018003112	working	.91 af	may 2020

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

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? YES NO

e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

NAME	TITLE	APPROXIMATE DATE

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f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED
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**4. Recording and reporting conditions:**

a. Is the water user required to report the water use to the Department?  YES  NO

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

b. Have the reports been submitted?  YES  NO

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

**5. Fish Screening:**

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion? YES  NO

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

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

b. Has the fish screening been installed? YES NO

c. When was the fish screening installed?

DATE	BY WHOM

**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 YES NO**

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 YES NO**

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>

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**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  NO**

*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? **YES NO**

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	IF INSTALLED (DATE)	IF INSTALLED, BY WHOM
(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.		

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

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**SECTION 6  
ATTACHMENTS**

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

ATTACHMENT NAME	DESCRIPTION
water use report	
final proof map	



# Water Use Report Based on Water Right



Permit: S 55181 \*

BECK, DWAIN 66389 GETTING RD ENTERPRISE, OR 97828

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Records per page: 10 [View All](#)

Acre-feet (AF) of Water Used

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Water Year*	Report ID	Facility	Acre-feet (AF) of Water Used												Total Water Used	Irrigated Acres
			Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
2021	<a href="#">67180</a>	UNNAMED STREAM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36.54	36.54	44.46	34.91	0.00	152.45	78.80
2020	<a href="#">67180</a>	UNNAMED STREAM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.65	20.65	41.31	41.31	6.13	130.05	78.80
2019	<a href="#">67180</a>	UNNAMED STREAM						0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2017	<a href="#">67180</a>	UNNAMED STREAM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

\*The water year is named for the calendar year in which it ends. Example: the 2018 water year begins Oct. 1, 2017 and ends Sep. 30, 2018.

- The Water Resources Department makes reasonable efforts to screen the data for quality control; however, the Department cannot accept responsibility for errors, omissions, or accuracy of the information. Notification of any errors is appreciated. Send notifications to [owrd.waterusereporting@water.oregon.gov](mailto:owrd.waterusereporting@water.oregon.gov) or call 971-345-7489.
- Water use is reported by point of diversion (POD), rather than by water right.
- If a POD is shared with multiple water rights, it is not feasible to separate out the amount used under the water right being queried from water used by other rights using this same POD.
- Monthly amounts indicate:
  - For diverted rights, the total amount diverted during the month;
  - For storage rights, the amount generally stored in the reservoir/pond during the month, as represented by the volume of water impounded on approximately the same day each month.
- Water use amounts have all been converted to "acre-feet" (AF), regardless of the original measurement unit reported. One AF is the volume of water that will cover an acre of ground one foot deep = 325,850 gallons.
- Zeroes indicate that a report was received stating that no water was used during those months; if a year is not listed, no report of water use was received for that year.

# WALLOWA MOUNTAIN ENGINEERING

RO. BOX 266

ENTERPRISE, OREGON 97828

541-426-4085

May 17, 2022

Oregon Water Resources Department  
725 Summer St NE, Suite A  
Salem, Oregon 97301

RECEIVED

MAY 23 2022

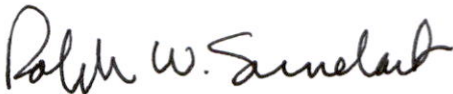
Re: Beck Water Right Permit # S-55181

OWRD

Gentlemen,

Dwain Beck recently sent in a COBU application and final proof map that I had prepared for his property in Wallowa County. I have realized that I had the wrong permit number on the map and am enclosing a new map with the proper number on it. Please replace the map that was sent in earlier.

Sincerely,



Done on  
5/25/22

Ralph W. Swinehart, CWRE

Cc: Dwain Beck