CLAIM OF BENEFICIAL USE for Transfer with Multiple Changes - Groundwater



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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A fee of \$230 must accompany this form for any <u>Transfer final orders</u> including a water right with a priority date of July 9, 1987, or later.

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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.

"Section 7" 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

GENERAL INFORMATION

Type of Authorized Change

Type of Additionized Change	
This Claim is being submitted for a transfer involving multiple changes.	YES
Mark all that apply:	11.5
 Change in POA(s) or Additional POA(s) Change in Place of Use 	^F Use
A separate section will be completed for each type of change authorized in the trans	sfer final order
1. File Information	-, -, -, -, -, -, -, -, -, -, -, -, -, -
APPLICATION #	
T-13359	

2.	Property Owner	(current owner information)	

APPLICANT/BUSINESS NAME Mike & Lori Chitwood		PHONE No. 503-812-85	69	Additional Contact No.
Address	•	000 012 00		
64595 Fort Rock Rd				
Сіту	STATE	ZIP	E-MAIL	
Fort Rock	OR	97735	Chitwood@	sagerat.com

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. <u>Each</u> 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	•	y so the darrent property owner)	
Same as above			
Address			
CITY	STATE	7.0	
	STATE	ZIP	
	1		

4. Date of Site Inspection:

7/7/2022

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

and the dissociation with the project.						
NAME	DATE	ASSOCIATION WITH THE PROJECT				
Mike Chitwood	7/7/2022	Owner/Permit Holder				

6. County:

LA	KE			

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)):

OWNER OF RECORD	a tot that property (O		
NA			
Address			
CITY	STATE	ZIP	
	JIAIL	ZIP	
Add additional tables for			

Add additional tables for owners of record as needed

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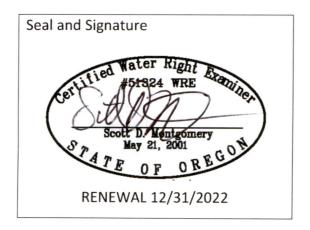
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SECTION 2 SIGNATURES

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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		PHONE NO.		Additional Contact No.
Scott D Montgomery		541-548-58	33	541-420-0401
Address				
PO Box 767				
Сіту	STATE	ZIP	E-MAIL	
Terrebonne	OR	97760	scott@apea	nds.com

Transfer Holder of Record Signature or Acknowledgement

<u>Each</u> 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.

PRINT OR TYPE NAME	TITLE	DATE
Mike Chitwood	Owner/Permit Holder	8-2-22
	, 33	
Lori Chitwood	Owner/Permit Holder	8-2-22
	Mike Chitwood	Mike Chitwood Owner/Permit Holder

SECTION 3

Changes Made

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

Change #1

Change in POA(s) or Additional POA(s)

Did the transfer order authorize a change in the points of appropriation or additional points of appropriation?

1. New or additional 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)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
Tuttle Well	LAKE 745		Fort Rock Valley Basin

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

If well logs are available, items A and B below can be deleted

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

CASING DIAMETER	CASING DEPTH	TOTAL DEPTH	COMPLETION DATE OF	COMPLETION DATES OF	WHO THE WELL WAS DRILLED FOR	WELL DRILLED BY
			ORIGINAL WELL	ALTERATIONS		
See well log						

B. In addition to the information requested in item "A" above, provide any other information when the information were also as a second contract of the information when the information requested in item "A" above, provide any other information when the information requested in item "A" above, provide any other information when the information requested in item "A" above, provide any other information when the information requested in item "A" above, provide any other information when the information requested in item "A" above, provide any other information when the information when the information is a second contract of the information when the information when the information when the information is a second contract of the information when the information when the information is a second contract of the information when the information is a second contract of the inform	hich
may help the Department locate any well logs associated with this appropriation.	

2.	a				

Was the use developed differently from what was authorized by the transfer final order, or extension final?

NO

If yes, describe below.

(e.g. "The order	allowed three new/additional	points of appropriation.	The water user	only developed one of the
points.")				the state of the

3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
Tuttle Well	0.375 cfs	0.92 cfs	Not available

System Description

Are there multiple new or additional Points of Appropriation (POA)?

NO

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

Tuttle Well (LAKE 745)

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A. POA System Information

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Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE
Welline	UNK	T81091	Turbine	6"	6"

2. Motor Information

MANUFACTURER	HORSEPOWER
US Electric	40

3. 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)
40	40	200'	5'	

4. Provide pump calculations:

Q = $\frac{7.04 \text{ ft}^{4/\text{s}}/\text{hp x hp}}{\text{Total head, ft}} = \frac{(7.04)(40)}{306.6} = 0.92 \text{ cfs}$ Total head = 101.6' + 200' + 5' = 306.6'

5. Measured Pump Capacity (using meter if meter was present and system was operating)

	The series of section	was operating/
INITIAL METER READING ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
	OBSERVED	(IN CFS)
Meter not available	The second secon	

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

6. Additional notes or comments related to the system:

The flow meter is a Lindsay Zimmatic Flownet system. Readings from the metering system are sent to the user's mobile phone using an app to view reported use.

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B. Groundwater Source Informati	on (Well and Sump)
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1. Is the appropriation from a dug well (sump)?

NO

Change #2

Change in Place of Use

Did the transfer order authorize a change in the place of use?

YES

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
Tuttle Well	30.0

If the new use(s) was not irrigation or nursery:

NEW USE(s)	WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER?
	(INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)
NA	obtain that)

~		,							
2.	1/	a	r	12	ŤΙ	0	n	C	

Was the use developed differently from what was authorized by the transfer final order? If yes, describe below.

NO

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

Change #3

Change in Character of Use

Did the transfer order authorize a change in character of use?

NO

SECTION 4

CONDITIONS

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All conditions contained in the transfer final order, 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	*This Date Must Fall Between The "Issuance Date" And The "Completeness Date"
ISSUANCE DATE	01/18/2022	
COMPLETENESS DATE FROM ORDER (C)	10/01/2023	7/7/2022

^{*} 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	ord	er	(s)	1
----	----	-------	----	-----------	-------	-----	----	-----	---

NO

- 3. Measurement Conditions:
- a. Does the transfer final order, or any extension final order require the installation yES of a meter or other approved measuring device?
- b. Has a meter been installed?

YES

c. Meter Information

POA NAME OR#	MANUFACTURER	SERIAL#	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
Tuttle Well	Lindsay Zimmatic	UNK	working	unk	2021

4.	Recording	and	reporting	conditions
----	-----------	-----	-----------	------------

a.	Is the water user require	I to report the water use to t	he Department?)
----	---------------------------	--------------------------------	----------------	---

5. Other conditions required by the transfer 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.	Other conditions?	NO

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

SECTION 5

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION
Well log	LAKE 745
Site photos	Location/time stamped pics of well and irrigation system
Aerial photo	USDA/FSA imagery from June 2020

SECTION 6

CLAIM OF BENEFICIAL USE MAP

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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.

The changes that were authorized under the transfer final order must be mapped based on the developed locations; new or additional points of appropriation and place of use.

In cases where the order involved additional points of appropriation, the additional points should be mapped based on their developed locations. The original points of appropriation should be mapped based on the original right of record at the time the transfer final order was issued.

In cases where the order involved changing the place of use for a portion of a water right, the portion of the place of use being changed should be mapped based on the developed location. If the transfer also included portions of the place of use that were not being modified, but were receiving a new or additional point of appropriation, the place of use for those lands should be mapped based on the original right of record at the time the transfer final order was issued.

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 irrigatin system & place of use were tied to approximate boundaries using a Trimble GeoXT 6000 GIS data collector. Point data was imported into Trimble Pathfinder software & converted to statewide Lambert Projection. Point data was overlaid & compared with recent aerial imagery for accuracy.

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.)

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\boxtimes	Map on polyester film
\boxtimes	Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
\boxtimes	Township, Range, Section, Donation Land Claims, and Government Lots
\boxtimes	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
\boxtimes	Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
\boxtimes	Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
\boxtimes	Point(s) of diversion or appropriation (illustrated and coordinates)
\boxtimes	Tax lot boundaries and numbers
	Source illustrated if surface water
\boxtimes	Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
\boxtimes	Application and permit number or transfer number
\boxtimes	North arrow
\times	Legend
\times	CWRE stamp and signature

NOTICE TO WATER WELL CONTRACTOR The original and first copy

of this report are to be filed with the

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

STATE OF OREGON JANS 1981 State Well No. 275 14E-16dd

Contractor's License No. 690 Date

(Do not write above MALER RESOURCES DEPT No. G-9137

	SALEM OREGON OTDOOLE 103
(1) OWNER;	(10) LOCATION OF WELL:
Name Robert E. Juttle	County Yoke Driller's well number 132
Address 41t Hands Onegon	SE % SE % Section /6 T. 275 R. 14E W.M.
97735	Bearing and distance from section or subdivision corner
(2) TYPE OF WORK (check):	Bearing and distance from section of subdivision corner
New Well	
If abandonment, describe material and procedure in Item 12.	(11) WADED LEVEL. Completed wall
(3) TYPE OF WELL: (4) PROPOSED USE (check):	(11) WATER LEVEL: Completed well.
Botomy M. Dwisson D	Depth at which water was first found 106 ft.
Cable Jetted I Domestic Industrial Industrial Industrial Industrial	Static level 42 ft. below land surface. Date DEC 20
Dug ☐ Bored ☐ Irrigation ☐ Test Well ☐ Other ☐	Artesian pressure lbs. per square inch. Date
CASING INSTALLED: Threaded Welded	(10) THEFF FOC
12 " Diam. from 0 ft. to 100 ft. Gage 1250	(12) WELL LOG: Diameter of well below casing
	Depth drilled 2 ft. Depth of completed well 2 ft.
	Formation: Describe color, texture, grain size and structure of materials;
	and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in
PERFORATIONS: Perforated? Yes No.	position of Static Water Level and indicate principal water-bearing strata.
Type of perforator used	MATERIAL From To SWL
Size of perforations in. by in.	Candy avous soil 10 5
perforations fromft, toft.	brown clay 5 32
perforations fromft. toft.	Ped appropriat a veen 29 15
perforations fromft. toft.	Clav innalomerate
/E/ CODERNO	Gray basalt -hard 94 110
(7) SCREENS: Well screen installed? Yes You	Brown day, 110 135
Manufacturer's Name	Brown sandstone 135 143
Type Model No	black peagravel and 1643 158
Diam. Slot size Set from ft. to ft. to ft.	plack sand conglomate
Dani See Holl It.	Green day 158 162
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Brown clay + Brown 186 212 42
Was a pump test made? ☐ Yes ☐ No If yes, by whom?	amy seams with
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Yield: gal./min. with ft. drawdown after hrs.	
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Tair 1667	MUU 2 x BURS
test ()() gal./min. with ft. drawdown after hrs.	
Artesian flow g.p.m.	OWRD
nperature of water Depth artesian flow encountered ft.	Work started Dec. 19 19 86 Completed Dec 20 19 80
(9) CONSTRUCTION:	Date well drilling machine moved off of well Dec 221980
Maria D	Drilling Machine Operator's Certification:
wen sear-waterial used	This well was constructed under my direct supervision.
Well sealed from land surface to	Materials used and information reported above are true to my best knowledge and belief.
Diameter of well bore below seal	[Signed] Ston I adams Date Dec 2019 80
Number of sacks of cement used in well seal sacks	(Drilling Machine Operator)
Number of sacks of bentonite used in well seal	Drilling Machine Operator's License No
Brand name of bentonite	WY A WY II CO. A A CO. A
Number of pounds of bentonite per 100 gallons	Water Well Contractor's Certification:
of water lbs./100 gals.	This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Was a drive shoe used? Yes No Plugs Size: location ft.	Name Lel Olsons
Did any strata contain unusable water? Yes No	(Person, firm or corporation) (Type or print)
Type of water? depth of strata	Address woh 467 Christing Velley One 1716
Method of sealing strata off	[Signed] Lele alarus
Was well gravel packed? ☐ Yes ☑ No Size of gravel:	[Signed] (Water Well Contractor)

Gravel placed from

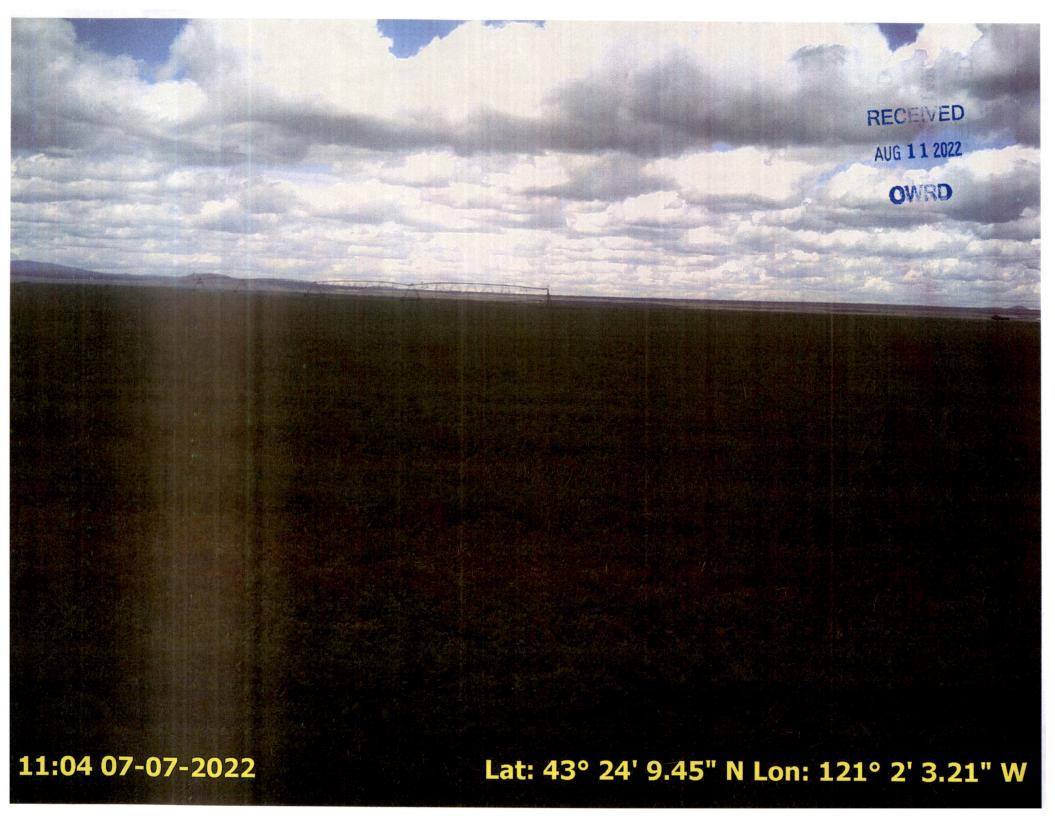


43°24'09.00" N 121° 02'03.15" W 4339.6'

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43° 24'09.42" N 121° 02'03.13" W

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4337.3

OWRD

4-1.0



43°24' 11,30"N 121°02' 11,60"W 4341.2'

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+1-1,1



43° 24'03.77" N 121002'03.03"W

4340.8

+1-1.01

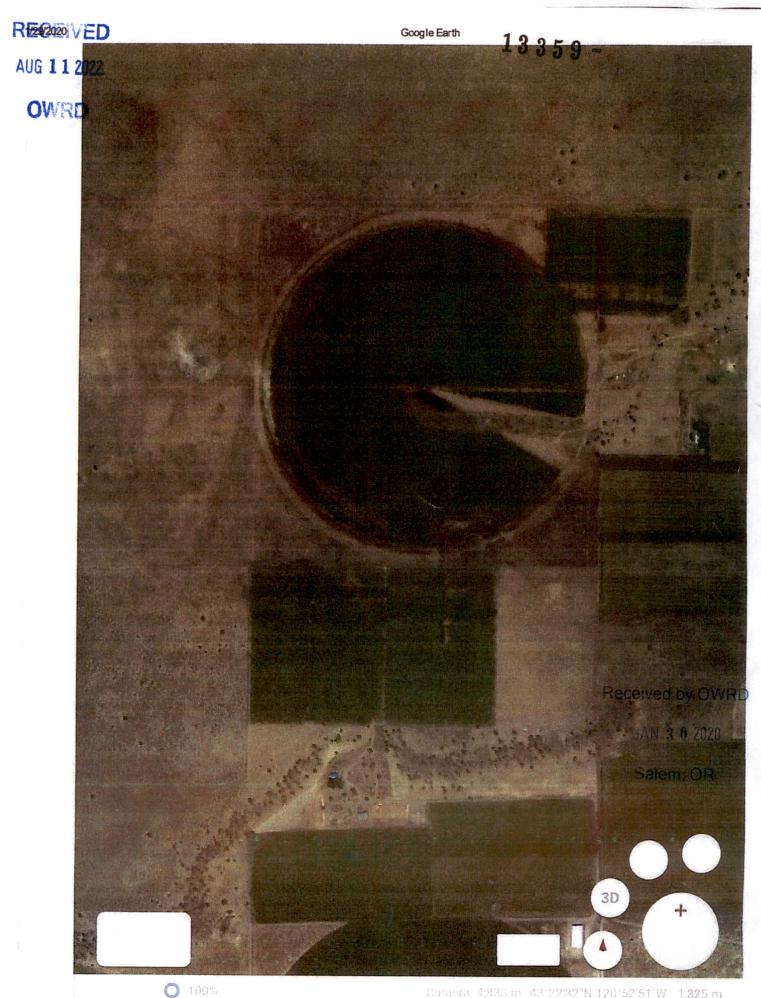
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43°24'04.97"N 121°02'03.01"W 4341.0' 4-1.3' AUG 11 2022

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Camera 4,833 m 43°22'32"N 120'52'51"W 1,825 m



ALL POINTS ENGINEERING & SURVEYING, INC.

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P.O. Box 767 Terrebonne, Oregon 97760

TRANSMITTAL

To:	
Oregon Water Resources Department	
725 Summer St. NE Suite A	
Salem, OR 97301-1266	

Date: 8/4/2022 Attention: Certificates

Re: COBU T-13359

[x] Prints [] Plans [x] Map/Plat [] Specifications [] Change order [] Other

Copies	No.	Description
1	1	COBU (10 sheets letter bond)
1	2	Final Proof Map (1 sheet mylar)
1	3	Well ID Reports (1sheet letter bond)
1	4	Site photos 95 sheets ltr bond)
1	5	Aerial imagery (1 sheet ltr bond)

These are transmitted as checked below:

[x] For OWRD approval [] Approved as submitted [] Approved as noted	
[] Copies for distribution [] Returned for corrections [] Returned corrected	prints
[] Review and comment [] For bids due [] Other	1

Remarks:

Thanks, and if you have questions please don't hesitate to call (541) 548-5833.

Signed: