

CLAIM OF BENEFICIAL USE for Ground Water Permits claiming 0.1 cfs or less



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

**A fee of \$150 must accompany this form to be accepted for permits
with a priority date of July 9, 1987, or later. (ORS 536.050(1))**

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:
http://www.wrd.state.or.us/OWRD/WR/cwre_info.shtml#.

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.

If you have questions regarding the completion of this form, please call 503-986-0900 and ask for the Certificate Section.

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 http://www.wrd.state.or.us/OWRD/mgmt_reimbursement_authority.shtml.

SECTION 1

GENERAL INFORMATION

1. File Information

APPLICATION # G-	PERMIT # (IF APPLICABLE) G-	PERMIT AMENDMENT # (IF APPLICABLE)
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2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.	
ADDRESS				
CITY	STATE	ZIP	E-MAIL	

If the current property owner is not the permit holder of record, it is recommended that an assignment be filed with the Department. **The COBU must be signed by each permit holder of record.**

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

PERMIT HOLDER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL PERMIT HOLDER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

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

NAME	DATE	ASSOCIATION WITH THE PROJECT

6. County:

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(4)):

**Mark "NA" if there are no owners of property not included in this claim

OWNER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

ADDITIONAL OWNER OF RECORD		
ADDRESS		
CITY	STATE	ZIP

SECTION 2 SYSTEM DESCRIPTION

A. Points of Appropriation

1. Point(s) of Appropriation (POA):

POA NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)

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

2. 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	RATE OR VOLUME FOR USE (CFS, GPM, OR AF)
Total Quantity of Water Used				

3. 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:**

Reminder: The map associated with this claim must identify the location of the point(s) of appropriation, Donation Land Claims (DLC), Government Lots (GLot), and Quarter-Quarters (QQ).

SECTION 2

SYSTEM DESCRIPTION (B through G)

Are there multiple POAs?

YES NO

If "YES" you will need to copy and complete Sections 2B through 2G for each POA.

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

B. Place of Use

Attach Claim of Beneficial Use map.

Reminder: The map associated with this claim must identify Donation Land Claims (DLC), Government Lots (Gov Lot), Quarter-Quarters (QQ), and if for irrigation, the number of acres irrigated within each projected DLC, Gov Lot, and QQ.

C. Appropriation and Delivery System Information

Provide the following information concerning the appropriation 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 NO

If "NO" items 2 through item 5 may be deleted.

2. Pump Information

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

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)

4. Provide pump calculations:

5. 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.

6. Sprinkler Information

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

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

7. Additional notes or comments related to the system:

D. Groundwater Source Information (Well and Sump)

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

2. 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

3. In addition to the information requested in item “2” above, provide any other information which may help the Department locate any well logs associated with this appropriation.

4. Is the appropriation from a dug well (sump)?

YES NO

If “NO”, items 5 through 7 relating to this section may be deleted.

Reminder: Construction standards for sumps can be found in OAR 690-210-0400.

5. If the appropriation involves a **SUMP**, provide the following information for each **SUMP**:

LENGTH	WIDTH	AVERAGE DIAMETER	MAXIMUM DEPTH	SURFACE AREA (IN ACRES)	VOLUME IN CUBIC FEET OR ACRE FEET

6. If the sump is curbed constructed with watertight surface curbing, describe the curbing:

CURBING MATERIAL (CONCRETE, CONCRETE TILES, OR STEEL)	IF CONCRETE, PROVIDE THE THICKNESS OF THE WALL

7. Provide sump volume calculations:

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E. Storage

1. Does the distribution system include in-system storage (i.e. 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)

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?

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)

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)

Attach measurement notes.

G. Gravity Flow Canal or Ditch

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

1. Provide description and calculations if necessary:

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SECTION 3 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 extension final order:

	DATE FROM PERMIT	DATE ACCOMPLISHED*	DESCRIPTION OF ACTIONS TAKEN BY WATER USER TO COMPLY WITH THE TIME LIMITS
ISSUANCE DATE			
BEGIN CONSTRUCTION (A)			
COMPLETE CONSTRUCTION (B)			
COMPLETE APPLICATION OF WATER (C)			

* 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

3. Initial Water Level Measurements:

a. Was the water user required to submit an initial static water level measurement? YES NO

If "NO", items 3b through 3d relating to this section may be deleted.

b. What month was the initial measurement to be taken in?

c. Was the measurement submitted to the Department? YES NO

d. If the initial measurement was not submitted, provide that measurement now, if available:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

4. Annual Static Water Level Measurements:

a. Was the water user required to submit annual static water level measurements? YES NO

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

b. Provide the month, or months, in which the static water level measurement(s) were to be made:

c. Were the static water level measurements taken in the month(s) required? YES NO

d. If "YES", were those measurements submitted to the Department? YES NO

e. If the annual measurements were not submitted, provide the measurements now:

DATE OF MEASUREMENT	MEASUREMENT MADE BY	METHOD	MEASUREMENT

5. Pump Test (Required for most ground water permits prior to issuance of a certificate)

a. Did the permit require the submittal of a pump test? YES NO

If "NO", items 5b through 5e relating to this section may be deleted.

b. Has the pump test been previously submitted to the Department? YES NO

c. Is the pump test attached to this claim? YES NO

d. Has the pump test been approved by the Department? YES NO

e. Has a pump test exemption been approved by the Department? YES NO

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 NO

If "NO", items 6b through 6f 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 appropriation.

b. Has a meter been installed? YES NO

c. Meter Information

POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED

If a meter has been installed, items 6d through 6f 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

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED

7. Recording and reporting conditions

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

If "NO", item 7b relating to this section may be deleted.

b. Have the reports been submitted?

YES NO

METHOD OF SUBMITTING REPORT (PAPER OR ELECTRONIC)	WATER USER REPORTING ID

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?

YES NO

b. Was submittal of a ground water monitoring plan required?

YES NO

c. 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 4

VARIATIONS

Include a description of variations from the permit, permit amendment final order, or extension final order. (i.e. "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.")

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SECTION 5

ATTACHMENTS

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

ATTACHMENT NAME	DESCRIPTION

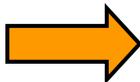
SECTION 6
CLAIM SUMMARY

POA NAME OR #	MAXIMUM RATE AUTHORIZED BY PERMIT	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED	USE	# OF ACRES ALLOWED BY PERMIT	# OF ACRES DEVELOPED

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.



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 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

SECTION 8 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.

Seal and Signature

CWRE NAME	PHONE NO.	ADDITIONAL CONTACT NO.	
ADDRESS			
CITY	STATE	ZIP	E-MAIL

Permit Holder's of Record Signature or Acknowledgement

This Claim of Beneficial Use must be signed by each permit or transfer holder of record.

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.

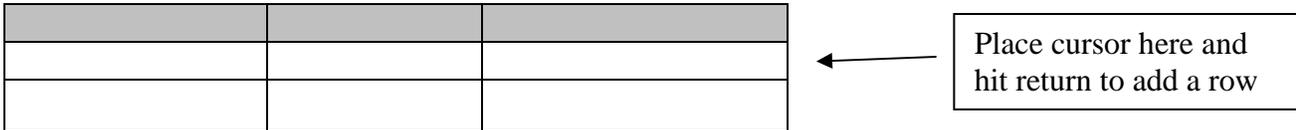
SIGNATURE	PRINT OR TYPE NAME	DATE

SECTION 9
REFERENCE INFORMATION FOR CWRE USE
(Please DO NOT submit these pages.)

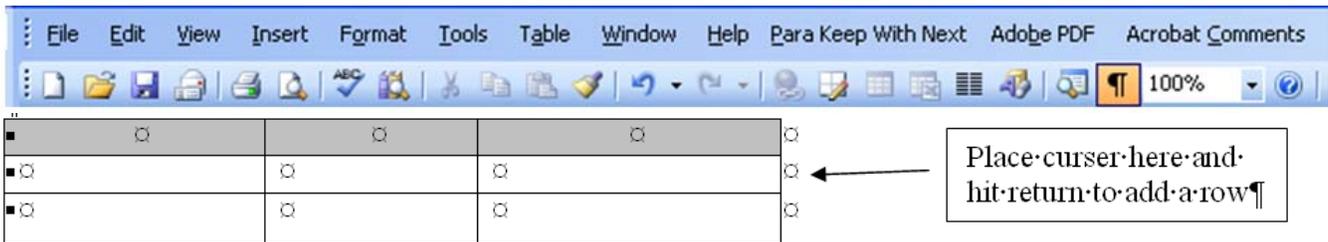
Additional information is available at: http://www.wrd.state.or.us/OWRD/WR/cwre_info.shtml

MS Word Hints

To add rows to a table, click outside the table on the far right and hit enter.



If you are having difficulty placing the cursor outside the table, click on the Show/Hide (Paragraph) icon . This is found on the Standard toolbar (View => Toolbars => Standard) of some versions of Word.



To resolve page numbering issues, go to print preview. Page through the entire document (while in print preview), then print from print preview.

Common Calculations

The Department typically uses the following calculations to determine system capacities; many of which are available to download from the Department's Web Site.

Pumps:

$$Q \text{ Pump} = \frac{(\text{horsepower})(\text{pump efficiency})}{(\text{total head in feet})} = Q \text{ in cfs}$$

Efficiency factors:

NOTE: Pump efficiency factor for centrifugal pump (75%) = 6.61
 Pump efficiency factor for turbine pump (80%) = 7.04

$$\text{Centrifugal Pump, 75\% eff. } \frac{(550 \text{ ft lb/sec/Hp})(.75)}{(62.4 \text{ lb/cu ft})} = 6.61 \text{ ft}^4/\text{sec/Hp}$$

$$\text{Turbine \& Submersible Pumps, 80\% eff. } \frac{(550 \text{ ft lb/sec/Hp})(.80)}{(62.4 \text{ lb/cu ft})} = 7.04 \text{ ft}^4/\text{sec/Hp}$$

Total head is the sum of suction lift, pressure head, and discharge lift.

If the operating pressure is not measured, varying the assumed operational pressure in the above formulas until the calculated outputs are equal, or nearly so, will generally give the most correct theoretical capacity of the system.

Efficiencies have been assumed to be 75% for centrifugal pump installations and 80% for turbine or submersible pumps. See the list below of converted psi's to feet of head. These figures account for minor friction losses. If the system involves unusually long pipelines friction losses should be accounted for by using standard charts and formulas.

Refer to the conversion table below to compute PSI to head for pump pressure in feet.

$$[(\text{psi}/.433)(1.1) = \text{head (in feet/psi)} = 2.54 \text{ feet head/psi}]$$

PSI	HEAD	PSI	HEAD
25	63.5	55	139.7
30	76.2	60	152.4
35	88.9	65	165.1
40	101.6	70	177.8
45	114.3	75	190.5
50	127.0	80	203.2

Ditches/Canals:

Manning's Formula:

$$v = \frac{1.486}{n} r^{2/3} s^{1/2}$$

v = mean velocity of flow in feet per second

r = hydraulic radius in feet

s = slope of the energy gradient

n = coefficient of roughness

Type of Conduit and Description Pipe	Coefficient of Roughness	
	Minimum	Maximum
Cast Iron, Coated	0.01	0.014
Cast Iron, Uncoated	0.011	0.015
Wrought Iron, Galvanized	0.013	0.017
Wrought Iron, Black	0.012	0.015
Steel, Riveted and Spiral	0.013	0.017
Corrugated	0.021	0.0255
Wood Stave	0.01	0.014
Neat Cement Surface	0.01	0.013
Concrete	0.01	0.017
Vitrified Sewer Pipe	0.01	0.017
Clay, Common Drainage Tile	0.011	0.017
Lined Channels		
Metal, Smooth Semicircular	0.011	0.015
Metal, Corrugated	0.0228	0.0244
Wood, Planed	0.01	0.015
Wood, Unplaned	0.011	0.015
Neat Cement-Lined	0.01	0.013
Concrete	0.012	0.018
Cement Rubble	0.017	0.03
Vegetated, Small Channels, Shallow Depths		
Bermuda Grass; Long - 13", Green	0.042	
Bermuda Grass; Long - 13", Dormant	0.035	
Bermuda Grass; Short - 3", Green	0.034	
Bermuda Grass; Short - 3", Dormant	0.034	
Unlined Channels		
Earth; Straight and Uniform	0.017	0.025
Dredged	0.025	0.033
Winding and Sluggish	0.0225	0.03
Stoney Bed, Weeds on Bank	0.025	0.04
Earth Bottom, Rubble Sides	0.028	0.035
Rock Cuts; Smooth and Uniform	0.025	0.035
Rock Cuts; Jagged and Irregular	0.035	0.045

Gravity flow pipe systems

Hazen-William's Formula:

$$v = 1.31(c)(r^{0.63})(s^{0.54})$$

v = mean velocity of flow in feet per second

c = coefficient of roughness

r = hydraulic radius in feet

s = slope of energy gradient

Material	Coefficient of Roughness
Asbestos Cement	140
Brass	135
Brick sewer	100
Cast-Iron - new unlined (CIP)	130
Cast-Iron 10 years old	110
Cast-Iron 20 years old	95
Cast-Iron 30 years old	82
Cast-Iron 40 years old	74
Concrete	130
Copper	135
Ductile Iron Pipe (DIP)	140
Galvanized iron	120
Glass	140
Lead	135
Plastic	145
PVC, CPVC	150
Smooth Pipes	140
Steel new unlined	145
Steel	130
Steel riveted	110
Tin	130
Wood Stave	120

SPRINKLER CAPACITIES BY NOZZLE SIZE IN GALLONS PER MINUTE

This chart is comprised of information gathered from a number of sources and may differ slightly from the manufacturer's specifications.

$$Q \text{ Sprinklers} = \frac{(\text{number of heads})(\text{rate in gallons per minute})}{(448.8 \text{ gpm per cfs})} = Q \text{ in cfs}$$

		P.S.I. ("*" designates computed capacity)																	
		5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90
NOZZLE SIZE	3/32				1.1	1.3	1.4	1.5	1.6	1.7	1.8								
	7/64				1.5	1.7	1.9	2	2.2										
	1/8				1.9	2.2	2.4	2.7	2.9	3	3.2								
	9/64				2.3	2.6	2.9	3.1	3.4	3.7	4								
	5/32				3	3.4	3.8	4.1	4.4	4.7	5								
	11/64	1.9	2.7	3.3	3.7	4.2	4.6	5	5.4	5.7	6	6.3	6.6						
	3/16	2.2	3.2	3.9	4.3	5	5.5	6	6.4	6.8	7.2	7.5	7.8						
	13/64	2.9	3.6	4.5	5.1	5.9	6.5	7.1	7.6	8.1	8.5	8.9	9.2						
	7/32		4.1	5.1	5.8	6.8	7.6	8.3	8.9	9.4	9.9	10.3	10.6						
	15/64							8.8		10		11.2		12.4					
	1/4		5.2	6.4	7.4	8.9	9.8	10.6	11.4	12.1	12.8	13.4	13.9	14.8*	15.3*	15.9*	16.4*	16.9*	17.4*
	17/64								12.5		14		15.6		17.1				
	9/32					11.2	12.3	13.3	14.3	15.2	16	16.8	17.5	18.1	18.9	19.7	20.7*	21.4*	22*
	19/64									16.6		18.3		19.9		21.4			
	5/16					13.1	15.2	16.5	17.7	18.9	20	21	22	23	23.9	24.8	25.7	26.4*	27.1*
	21/64										20.8		22.7		24.6		26.4		
	11/32					16.5	18	19.7	21.1	22.5	23.8	25	26.2	27.4	28.5	29.6	30.6	31.9*	32.8*
	23/64										24.5		26.8		29.1		31.4		
	3/8					19	21	22.8	24.4	26	27.5	29.1	30.6	32	33.2	34.5	35.7	38*	39*
	13/32								29*	30.9*	32.7*	34.5*	36.2*	37.4*	38.9*	40.4*	41.9*	43.3*	44.7*
7/16								33.5*	35.6*	37.7*	39.7*	41.7*	43.6*	45.3*	46.9*	48.4*	50.1*	51.6*	
1/2								42.5*	45.2*	47.7*	50.2*	52.5*	54.7*	56.8*	58.6*	60.6*	63.6*	66.7*	

NOTE: Use the maximum number heads operating at any one time.

Rate per head in gpm comes from either manufacturer's specifications using orifice size and operating pressure or from OWRD chart.