Oregon Water Resources Department

Municipal Reclaimed Water Registration Form

A water use permit may not be required if the water being used is reclaimed water as defined in ORS 537.131 and the reclaimed water use is both authorized by the Oregon Department of Environmental Quality (DEQ) and registered with Oregon Water Resources Department (WRD)(ORS 537.132). Currently there is no fee for registering.

Complete and send this Registration Form to the DEO permit writer managing the wastewater treatment facility discharge permit. DEQ will review and sign this Registration Form prior to sending it on to WRD in Salem. A response letter will be sent by WRD to all parties within 60 days of receipt.

Instructions are available to guide you. If you need assistance, please call 503-986-0900 and ask for the "Water Reuse Coordinator" or contact the local watermaster in your county. Insert "N/A" if the requested information does not apply to your situation.

| Name of Reclaimed Water User: City | y of Prairie City | | <u> </u> |
|--|---|--|-------------|
| County where reclaimed water use w | vill occur: Grant | | · |
| | Prairie City | OR | 97869 |
| Mail Address: PO Box 870 Street/P.O. Box | City | State | Zip |
| Daytime Telephone: (541) 820-3636 | E-mail: | pworks@ortelco.ne | t . |
| | provide the landowner's | name and contact in | |
| YES NO If no, | provide the landowner's | name and contact in | |
| YES NO If no, Landowner Name: Mail Address: Street/P.O. Box | provide the landowner's | name and contact in | nformation. |
| YES NO If no, | provide the landowner's | name and contact in | nformation. |
| YES NO If no, Landowner Name: Mail Address: Street/P.O. Box | city E-mail: | name and contact in | nformation. |
| YES NO If no, Landowner Name: Mail Address: Street/P.O. Box Daytime Telephone: 3. Are there existing water righ | City E-mail: nts on the same land with the below NO | name and contact in State Where the use wi | Il occur? |

| 4. Has DEQ issued a Municipal Wast authorizing the use of reclaimed v | | <u>=</u> | ge Permit |
|--|---------------------------|--|------------------|
| YES NPDES Permit No | or <i>WPC</i> . | F Permit No. ¹⁰¹⁹³ | 0 |
| | | | |
| Permit Effective Date: July 30, 2020 DEQ Region: (Check one) Northwest R | egion Eastern Re | gion Western | Region |
| NO Permit application w | | | |
| NO Permit application h | as not been submitted | to DEQ. | |
| 5. Who is treating and supplying the | reclaimed water t | o the user? | • |
| Name of Supplier: City of Prairie City | • | | |
| Treatment Facility Name: The Prairie City | | | |
| | | OR | 97869 |
| Mail Address: PO Box 870 Street/P.O. Box | City | State | Zip |
| Municipal Water Provider: City of Prairie Consumer Source(s) of Municipal Water: Infiltration Consumer (street) 7. Will the use of reclaimed water of | City Te | elephone No. (541) water Wells ad/or reservoir name) | |
| boundaries of the potable munici Question 6? | pal water provider | identified above | in . |
| INSIDE INSIDE | | | |
| 8. What is the length in years of the water user and the reclaimed wat | | ct between the r | eclaimed |
| Describe any conditions in the agreeme | ent that limit use of th | e reclaimed water. | |
| | | | |
| 9. Please describe the transmission the wastewater treatment facility Wastewater flows by gravity from the I pumped to the Center Pivots. | to the place of rec | laimed water us | e. |
| (Include type of construction of diversion works/pun | np capacity, length and d | imensions of supply dit | ches/ pipelines) |

10. What is the Intended Use(s) of Reclaimed Water?

| Pasture/spring Grazing |
|--|
| (irrigation, aquifer recharge, wetlands, industrial, cooling, aquifer storage & recovery, etc.) |
| Irrigation Total Acres: 51 What type of crop? grasses/legumes |
| (hay, pasture, golf course, wood fiber, etc.) |
| What is the irrigation application system? center pivots (identified as 'A' & 'B') |
| (Jiood, center pivol, wheel line, drip, micro-sprinkiers) |
| How much Reclaimed Water will be used? 250 gpm |
| (cubic feet per second, OR gallons per minute) |
| Date use began or will begin: April Period of use (month/day): from 4/15 to 10/15 |
| 11. What are the water user's motivations to use reclaimed water? |
| My existing water rights are "junior" and not always reliable. |
| Another water source is available, but reclaimed water is less expensive. |
| Reclaimed water is the only source available and enables the use listed in Question 10. |
| Reclaimed water allows a WRD transfer of existing water rights to a different location. |
| Reclaimed water use reduces demand on the local municipal water supply. |
| To assist the treatment facility in meeting DEQ regulatory permit requirements. |
| To recharge the aquifer or store water in the aquifer for future recovery. |
| Other (describe): |
| |
| 12. Describe the historic reclaimed water disposal method. |
| A) Into which stream was the reclaimed water discharged? none |
| B) Has the reclaimed water been discharged into the stream for 5 or more years? |
| YES NO |
| C) Where did the treated wastewater historically enter the stream? |
| n/a |
| (Township, Range and Section, or distance from landmark, or river mile, or Lat/Long) |
| D) Does the amount (rate in gpm or cfs) of reclaimed water proposed for use under this |
| registration represent more than 50% of the total average annual flow of the stream? |
| YES INO UNKNOWN |
| Source of information used to answer this? never discharged into stream for this facility |
| 13. Is the required map attached showing the reclaimed water transmission system and place of use? YES NO (If No, please prepare and attach map) |
| The Registration Form is not complete without an adequate map. See map requirement explanation on page 4. |
| |

14. MAP REQUIREMENTS:

This registration must be accompanied by a map, or maps, to show the location of the wastewater treatment facility, location of reclaimed water transmission system (pipelines, canals, etc.) and the place of reclaimed water use. Features of the map(s) should include the following:

- · A north arrow.
- Drawn to scale at not less than 4" = 1 mile, with the scale identified.
- Township, Range, Section, Quarter-Quarters, and tax lot number(s).
- Place of use shown by Quarter-Quarter section with shading or diagonal lines.
- Acres, if land application, per Quarter-Quarter section (approximate if not certain).
- Location of main canals or pipelines to and within the reclaimed water use area.
- · Streams and roads identified if they cross through the map.
- Other obvious features that would help someone in the field locate the place of use.
- A legend.

*A map showing the wastewater treatment facility, transmission system, and place of use at a scale of 4" = >1 mile is fine only if a second map is provided showing the place of use at not less than 4" = 1 mile.

15. ADDITIONAL COMMENTS: Provide additional information here or attach additional pages.

16. Signatures of Registrant and Reclaimed Water Supplier:

I/We certify that the information provided in this Registration Form is an accurate representation of the proposed reclaimed water use to the best of my knowledge;

| Registrant Printed Name: CHATS CANANENA | Title: OTHER OF PUBLIC WORKS |
|---|---------------------------------|
| Registrant Signature: | Date: 102722 |
| Supplier Printed Name: CHAIL CAWAREA | Tille: DIRECTOR of PUBLIC works |
| Supplier Signature: | Date: 102722 |

NOTE: Once completed and signed, keep a copy and send this form to the DEO permit writer responsible for the wastewater treatment facility permit. DEQ will sign and forward the form to WRD in Salem. A response letter will be sent by WRD to all parties within 60 days.

This section is to be completed by DEO

17. Signature of DEQ Water Quality Manager:

| Date registration form received at DEQ: 10 13 2022 |
|---|
| Pursuant to ORS 537.132 DEQ has: |
| a) Authorized the use of reclaimed water (referred to by DEQ regulations as "recycled water") as evidenced by the NPDES or WPCF permit issued and described below. |
| Permit Number: 101930 DEQ File Number: 71909 |
| Printed DEQ Permit Writer's Name: Tust . Sterser |
| Mail Address: 475 NE Belle vue Dr Bond OR 97701 Street/P.O. Box City State Zip |
| Telephone: 5711-633-2016 E-mail: justin, storger o deg, oreson gov |
| b) Consulted with State Department of Fish and Wildlife and determined this use of reclaimed water shall not have a significant negative impact on fish or wildlife. |
| ODFW contact name: Brent Smith |
| ODFW contact phone number: 541-575-1167 |
| c) Determined the use of reclaimed water is intended to improve the water quality of the receiving stream. A fr. The reclaimed water is (e.g. too warm for salmonids): |
| I certify the provisions of ORS 537.132(1)(a)(b) and (c) for this application are satisfied. Date 11/28/2022 |
| DEQ Water Quality Manager Signature |
| Mike Hiatt |
| DEQ Water Quality Manager's printed name |
| Once signed by DEQ, this completed form is to be sent to: |
| Oregon Water Resources Department C/O Water Reuse Coordinator 725 Summer St. NE, Suite A Salem, OR 97301-1266 |

Oregon Department of Environmental Quality RECYCLED WATER USE PLAN SUMMARY



Directions: Check (\checkmark) appropriate boxes for tables and provide brief narrative where necessary. Submit with Recycled Water Use Plan to DEQ.

| | APP | PLICANT INFORMATION | | | | | |
|-------------------------------------|---|---|--------|--------------------------------------|---|-------|--|
| Facility Name: Prairie City Lagoons | | | | | | | |
| | Address: The site does not have an physical address, site access road is at MP 172.2 on Highway 26, 3 miles west or Prairie City. The mailing address is PO Box 870, Prairie City, OR 97869 | | | | | st of | |
| | Con | tact Name/Phone Number: Chris Camarena, 541- | 820-36 | 636 or 541-620-3100 | - | | |
| TYPE OF WASTEWATER TREATMENT PLANT | | | | | | | |
| | | Activated Sludge | | Re-circulating Gravel/Sand Filter | | | |
| | | Mechanically Aerated Lagoon | | Rotating Biological Filter | | | |
| | | Aerated Lagoon | 7 | Other (Specify): Anaerobic & Aerobic | | | |
| | Ave | rage Dry Weather Flow, million gallons per da | y (MC | GD): 0.23 MGD | | | |
| | TRE | ATMENT CLASS IN ACCORDANCE WITH (| DAR | 340-055-0012 | | | |
| | | Class A | | Class C | | | |
| | | Class B | | Class D | | | |
| | 4 | Non-Disinfected water | | | | | |
| | | | | | | | |
| | TRE | ATMENT EFFICIENCY CAPABILITY DURIN | G RE | | | | |
| i | | Tertiary Treatment | | 85% or more BOD/TSS removal | | ·· | |
| | | 95% or more BOD/TSS removal | | Rotating Biological Filter | | | |
| į | 7 | 90% or more BOD/TSS removal | | Other (Specify): | | | |
| | DIS | NFECTION METHOD | | · | | | |
| | | Chlorine injection just prior to irrigation | | | | | |
| | | Chlorine injection with storage of recycled water | | | | | |
| | | Chlorine injection after storage just prior to irrigat | ion | | | | |
| | | UV exposure just prior to irrigation | | | | | |
| | | UV exposure with storage of recycled water | | | | | |
| | | UV exposure after storage just prior to irrigation | | | | | |
| | | Other (specify): None | | | | | |
| | | | | | | | |
| | STC | RAGE IMPOUNDMENT | | | Υ | N | |
| | Is there a storage facility proposed for this project? | | | | | | |
| If yes, at the WWTP | | | | | 7 | | |
| | If yes, located at a location other than the WWTP | | | | | | |
| | | s to either of the above, specify the location and le | | | | | |
| | City o | f Prairie City Lagoon Site, Wastewater is stored approx | imatel | y 6 months average. | | • | |
| | | | | | | | |
| | | | | | | | |
| | | | | . | | | |

| ARE THERE ALARMS FOR VARIOUS UNIT PROCESSES? | Υ | N | | | |
|---|---|-----------|--|--|--|
| Are alarms independent of the normal power supply of the plant? | | 7 | | | |
| Failure of a disinfection treatment process? | | 7 | | | |
| Failure of a clarification process? | | Ø | | | |
| Failure of a coagulation process? | | 1 | | | |
| Failure of a filtration process? | | 7 | | | |
| Are the alarms on separate circuit breakers from the reuse pumps? | | Z | | | |
| Is the Recycled Water back-up generator tested regularly? | | 7 | | | |
| | | , | | | |
| IN THE EVENT OF POWER LOSS: | Υ | N | | | |
| Can the plant continue to discharge? | | 7 | | | |
| Can there be any irrigation of non-disinfected water? | | ✓ | | | |
| If no to either of the above, specify control measures that will be in place to stop the irrigation as soon as possible. | | | | | |
| The City's System has backup power for the booster stations moving wastewater to the lagoons. There is no backup power source that allows the operator to irrigate when there is a power outage. If irrigation is needed during an extended power outage a portable unit must be moved to the site. | | | | | |

RECYCLED WATER WILL BE BENEFICIALLY USED FOR THE FOLLOWING (CHECK ALL THAT APPLY):

| | ✓ Beneficial Purpose | | Class | | | | |
|----------|---|---|-------|-----|-------|----|--|
| V | | | В | С | D | ND | |
| | Irrigation | | | | | | |
| [5] | Fodder, fiber, seed crops not intended for human ingestion, commercial timber | Y | Υ | Y | Y | Y | |
| | Firewood, ornamental nursery stock, Christmas trees | Υ | Υ | Υ | Υ | N | |
| | Sod | Y | Y | Υ | Y | N | |
| | Pasture for animals | Υ | Υ | Υ | Υ | Ν | |
| | Processed food crops | Υ | Y | Υ | ·N | Ŋ | |
| | Orchards or vineyards if an irrigation method is used to apply recycled water directly to the soil | Y | Υ | Y | Ņ | 2 | |
| | Golf courses, cemeteries, highway medians, industrial or business campuses | | Y· | Y | Ν | Ŋ | |
| | Any agricultural or horticultural use | Υ | N. | . N | - N - | N | |
| | Parks, playgrounds, school yards, residential landscapes, other landscapes accessible to the public | Y | N | Ζ | N. | Ν | |
| | Industrial, Commercial, or Construction | | | | | | |
| | Industrial cooling | Y | Y | Y | , N | N | |
| | Rock crushing, aggregate washing, mixing concrete | Υ | Υ | Υ | : 'N' | Ν | |
| | Dust control | Υ | Υ | Υ | N | Ν | |
| | Nonstructural fire fighting using aircraft | Y | Υ | Υ | N | N | |
| | Street sweeping or sanitary sewer flushing | Y | Y | Υ | N | N | |
| | Stand alone fire suppression systems in commercial and residential buildings | Y | Υ | N | N | Ν | |
| | Non-residential toilet or urinal flushing, floor drain trap priming | Υ | Υ | N | N | N | |
| | Commercial car washing | Y | N | N · | · N | N | |
| | Fountains when the water is not intended for human consumption | Υ | N | N | Ν | N | |

| 1 | Panaficial Durmose | Class | | | | | |
|---|--|-------|-------|---|----|------|--|
| • | Beneficial Purpose | | В | С | D | ND | |
| | Impoundments or Artificial Groundwater Recharge | | | | | | |
| | Water supply for landscape impoundments including, but not limited to, golf course water ponds and non-residential landscape ponds | Υ | Υ | Υ | N. | Z | |
| | Restricted recreational impoundments | Y | Y | N | N. | Ż | |
| | Nonrestricted recreational impoundments including, but not limited to, recreational lakes, water features accessible to the public, and public fishing ponds | Υ | N | N | N | Z | |
| | Artificial groundwater recharge | Y | ° N ` | N | N | , N: | |
| | Other (describe): | | | , | | | |

PAGES 4 & 5 REQUIRED FOR IRRIGATION ONLY

| THE IRRIGATION AREA WILL BE USED FOR T | HE F | FOLLOWING (CHECK ALL THAT A | PPL | /): | | |
|--|---------|---|--------|-------------|--|--|
| ☐ Crops (specify types): | | | | | | |
| ☐ Pasture | | | | | | |
| ☐ Forest | | | | | | |
| ☐ Public access areas (specify types): | | 1 | | | | |
| ✓ Natural areas (specify species or mix): Tall Fescue | e, Orci | hard Grass, Reed Canary, Triticale, Clover, | & Bras | sicas | | |
| Other (specify): fodder (listed above) | | | | | | |
| | | | | | | |
| APPLICATION RATE Y N | | | | | | |
| Will irrigation be controlled not to exceed the water consumption rate of the crop being grown? | | | | | | |
| Will irrigation be controlled not to exceed the nutrient r | equir | ements of the crop being grown? | Ø | | | |
| What is the proposed application rate of the recyc | led v | vater? ^{0.27 in/day} | | | | |
| Acreage of irrigation site 51 acres | | | | | | |
| The months that irrigation will be permitted April - | Octol | per | | | | |
| If irrigation occurs with Class C recycled water at | | | ted to | | | |
| allow for sunlight contact on irrigated water? ☐ Ye | ~ | • | | | | |
| If so, specify length of time | | | | | | |
| | | | | | | |
| TRANSMISSION & DISTRIBUTION LINES/PIPE | | | Υ | N | | |
| At the end of the irrigation day, will the transport lines/ | pipes | be drained back to the wastewater | | Z | | |
| treatment facility? | | | | | | |
| Is there a gate/ball shut off valve at the irrigation pump | | | | | | |
| Is there an in line pressure relief valve to by-pass reus | se wa | ter back into the source basin if there | | Ø | | |
| is a line transmission plug? | | man hair an ha fluidh ad and alla an ad a | | | | |
| At the cessation of the irrigation season, will the transp | | | | | | |
| Is there a gate/ball shut off valve at the irrigation field, | or at | each imgalion zone? | 1 | | | |
| ZONED LAND USE OF IRRIGATION SITE (CHE | | | | | | |
| Exclusive Farm Use (EFU) | | Industrial | | | | |
| ☐ Forestry | | State/Federal lands | | | | |
| Rural Residential | | Other (Specify): | | | | |
| ZONED LAND USE OF AREA AROUND IRRIGA | ATIO | N SITE (CHECK ALL THAT APPLY |) | | | |
| ☑ Exclusive Farm Use (EFU) | | | | | | |
| Forestry | | State/Federal lands | | | | |
| Rural Residential | | Other (Specify): | | | | |
| Prevailing wind direction during irrigation season (| (cno | sifu). West | | | | |
| | | ااد | | | | |
| Will irrigation be restricted when winds exceed 10 MPH?: Yes | | | | | | |
| THE NEAREST DEVELOPED PROPERTY FROM IRRIGATION SITE (ft): | | | | | | |
| North boundary: none (no development north of the site - | range | land and USFS) | | | | |
| South boundary: 3600 ft (+/-) to highway 26 | | | | | | |
| East boundary: 13000 ft (+/-) to residents in Prairie City West boundary: 500 ft (+/-) to County Rd. / Keeney Forks | Bd | | | | | |
| | | ion site (specify type and distance): | | | | |
| What is the nearest developed property downwind of irrigation site (specify type and distance): 13000 ft (+/-) Residential/City limits of Prairie City | | | | | | |
| Are there any playgrounds, schools, or public parks within ½ mile of irrigation site? (specify): | | | | | | |
| No | | | | | | |

| DOMESTIC WELLS | | | Υ | N | | | | |
|---|---|---------------------------------------|-----------|-------------|--|--|--|--|
| Are there any domestic wells or other domestic water sources located within the irrigation site? | | | | | | | | |
| Are there any domestic wells or other domestic water sources located within 150', 100, or 50' of the irrigation site? | | | | | | | | |
| If yes to either of the above, identify the number of wells or sources and identify their location on the | | | | | | | | |
| attached site plan. | | , | | | | | | |
| | ARE LOCATED AT THE (CHECK | (ALL THAT APPLY): | | | | | | |
| ☐ North boundary (specify): | | | | | | | | |
| South boundary (specify): Natura | al Drainage Swale through the site drains | south | | | | | | |
| East boundary (specify): | | | | | | | | |
| ✓ West boundary (specify): Small | portion Pivot A area slopes to the West / | Cut off ditch is installed to di | vert to I | ag o | | | | |
| PUBLIC ACCESS WILL BE COM | TROLLED BY THE FOLLOWING | G (CHECK ALL THAT A | APPLY | ′): | | | | |
| No trespassing or warning signs | s (specify spacing): 150 ft avg. | | | | | | | |
| Fencing (specify type): Barbed | | | | | | | | |
| Other (specify): | | | | | | | | |
| BARRIERS ON BOUNDARIES TAPPLY) | THAT MAY MITIGATE AEROSOL | DRIFT (CHECK ALL T | HAT | . , | | | | |
| ■ Natural vegetation (specify height) | ht and width): | | | | | | | |
| □ Natural topography (specify): | | | | | | | | |
| ☐ Tree or fence row (specify height | ht): | | | | | | | |
| Other (specify): | | , | , | | | | | |
| ☑ None: | · . | • | | | | | | |
| IRRIGATION METHOD (CHECK | ALL THAT APPLY) | | | | | | | |
| Set sprinkler heads with spray h | neight of and spray diameter o | f | | | | | | |
| ☐ Wheel irrigation line with spray | height of and spray diameter o | of | | | | | | |
| Big gun irrigation with spray hei | ght of and spray diameter of _ | | | | | | | |
| Other (specify): Center Pivot | | | | | | | | |
| IRRIGATION EQUIPMENT SPEC | CIFICATIONS (insert more rows a | s needed) | | | | | | |
| Sprinkler head types (brand and model) | Irrigation zones/cells | PSI operating ran | nges | | | | | |
| Nelson Trashbuster | Pivot A | 25 | | • | | | | |
| Nelson Trashbuster | Pivot B | 25 | | | | | | |
| | | | | | | | | |
| | • | | | | | | | |
| | | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | | | |

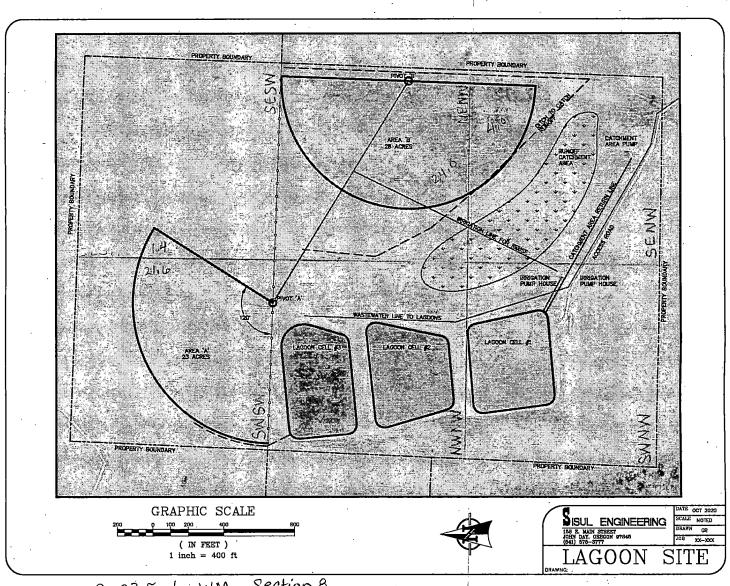
REQUIRED ATTACHEMENTS:

- 1. Overhead scale diagram/plan view of the wastewater treatment plant that identifies the treatment and disinfection components of the plant.
- 2. Overhead scale diagram/plan view of the transport line from wastewater treatment plant to the reuse area.
- 3. Overhead scale diagram/plan of the irrigation site showing surrounding properties and irrigation system layout.
- 4. A full copy of the Recycled Water Use Plan.

| HEALTH DIVISION REVIEW COMMENTS: | |
|----------------------------------|-------------|
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24 August 2009

Print Form



T-13 South R-33 East WM Section 8

| | | | | | | | EGISTRATIC | | | | |
|-------------|-----------------|-----------------|------------|------------------|-------------|---------------|--|-------------------|--|--|--|
| RM (assi | gned by | Kerri): | 737 | County: (| SVOW | t R | egistrant (User o | f Water): | City of Prairie | | |
| Place of | | | | - / - | - | | | | | | |
| Twp | Rng | Mer | Sec | Q-,Q | GLot | Acres | Location D | escription | Contract Years in Length | | |
| | | WM | | - : | | | | | 2020-2030 | | |
| | | WM | | | | | | | 10 years | | |
| Amount: | 250 | GPM | Use: _\f | nigation | # of Ac | res (if for I | r): <u>51 </u> wm | Dist #: <u>ゲ</u> | 4/15-10/15 | | |
| Supplier | of the R | eclaim | ed Wate | r: <u>Cita</u> 8 | Prairi | ecity | DEQ Muni W | /W Permit #: _ | WPCF-101930 | | |
| | | | | | | | Prairie City | | | | |
| Point of | Diversio | n: | | | | | Ŭ | . 0 | | | |
| Twp | Rr | ng | Mer S | ec Q-C | | | | | 4 | | |
| | | | | | · | | | 1 | | | |
| Agent (if | any): _ | $\leq VS $ | 1n St | eral | | · . | | / | | | |
| ☑ Prop | erty Ow | nership | o: Does I | Registrant | òwn all l | and for the | e proposed proje | ect? 🗹 Yes | □ No | | |
| If No | : □ Th | e affec | ted land | owner's n | ame and | mailing ac | ldress is listed. I | Notes: | | | |
| [☑ The i | map mu | st mee | t the fol | lowing mir | nimum re | quiremen | ts | | | | |
| Ø 7 | Townshi | p, Rang | ge, Sectio | on n | | | • | | | | |
| e s | streams | and ro | ads iden | tified as th | ey cross | through t | ne map | T. | | | |
| , ∠ F | Place of | use, Q- | Qs, and | tax lot cle | arly iden | tified | | 1055 | 7 CFS | | |
| . 🛛 E | ven ma | p scale | of not le | ess than 44 | 1" = 1 mi | le (1" = 13 | 20 ft.) | 0,00 | 10.0 | | |
| · . 🗸 []/ i | ocation | of eac | h diversi | on point (| WW Trea | itment Pla | nt) | | | | |
| Ø I | North Di | rection | ial Symb | oi | | | | | | | |
| , | Number | of acre | s per Q- | Q if for irr | igation, r | nursery, or | agriculture | | , | | |
| □ ι | .egend | | • | | | | | | | | |
| | | | | | | | system and place on the system and place of the system and the system and place of the system and place of the system and t | of use at a scale | of 4" = 1 mile is fine, only if | | |
| | Signatur | e of <i>all</i> | Registra | ints and Re | eclaimed | Water Su | oplier | | | | |
| | DEQ sec | tion (17 | 7) is com | pletely fill | ed out ar | nd signed | - | | | | |
| E | xisting | Water | Rights: _ | Ø | <u>. :</u> | | <i>(</i> | | ÷ | | |
| DO NOT | send re | gistrati | on back | to applica | nt if it is | not comp | lete. <u>ALL</u> registr | ations go to K | erri Cope. | | |
| | | • | | • | | | | , | | | |
| Reviewe | d by: \subset | San | Smi | th | | | Date: 3/1 | 4/23 | | | |
| , | , | | | | , | | | | | | |
| *Remem | ber the | re is <u>no</u> | fee for | Reclaimed | Water R | egistratio | ns : | | | | |

| TWP | Rng | Mer | Sec. | QQ | 6101 | 1 Pictor | | | + |
|-----|------|-----|------|---------|------|----------|--------|------|---|
| 135 | 33E | WM | 5 | SWSW | | 1,4 | Lagoon | 10,0 | 1 |
| 135 | 33 E | MM | 5 | SESU) | | 21.6 | site | 10.0 | |
| 135 | 133E | MW | 8 | NENW | - | 124.0 | | 10.0 | · |
| 135 | 33E | WM | 8 | SENW | | 4.0 | | 10.0 | |
| 1 | | 5 | + | otal Ac | ires | 50.1 | | | |
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