

E-2 App☒ Yes☐ No**Standard Application Completeness Checklist****Groundwater and Surface Water Applications Only**

Minimum Application Requirements (OAR 690-310-0040 &-0050)

For use by WRD staff only

Application #:	S- 90032	Receipt #:	148047
Applicant Name:	Rodger & Shelly Winkelman	Amount Requested:	7 af
Priority Date:	8/31/26 *legal received 9-2-26	Proposed Use:	IS
County:	Douglas	POD's TRS &TL:	32S 5W 19/20; 600
WM #:	15	Caseworker:	Nick
Reviewed by:	Corie	Reviewed Date:	9/1/26

☒ Forms accurate as of April 1, 2026☒ Applicant/Organization Name and Mailing Address☒ Signature of **all** applicants (include title or authority of representative if applicant is an organization or corporation). Note: Applicant's agent may NOT sign the application on behalf of the applicant.Property Ownership: Does the applicant own all the land for the proposed project? ☒ Yes ☐ No

If No:

☐ The affected landowner's name(s) and mailing address(s) must be listed.☐ A signed statement declaring the existence of either written authorization or an easement permitting access to land crossed by the proposed ditch canal or other work must be submitted.☒ **For a SW Application:** Source of water must be indicated.☒ If the source is stored water, is the stored water component filled out and does the applicant own the reservoir or include a non-expired agreement for stored water? (ORS 537.400)☐ If for stored water, is the source authorized under a permit, certificate, or decree?Permit or Certificate issued: Y ☐ N ☐ Permit or Certificate #: **NOTE:** An expedited secondary (E2) application and a reservoir application cannot be filed at the same time. The reservoir must be legally authorized first, under an existing water right, in order to accept and process an E2 application.☐ **For a GW Application:** Well development table completed and a well log report included (if existing)☒ Division 33 (Sensitive, Threatened, Endangered, Fish Species)☒ Proposed Water Use:☒ Amount of water from *each* source in GPM, CFS, or AF☒ Period of use indicated☒ If for supplemental irrigation, primary acreage or underlying permit or certificate number listed.
(Note: Primary and Supplemental Irrigation counts as 2 uses)☒ Water Management Section☒ Resource Protection Section

- ☒ Project schedule. (Note: If system is already completed, indicates "existing." (Note: Estimates are okay if the water system has not been designed))
- ☐ Supplemental data sheets enclosed (if needed)
☐ Form M (Municipal or Quasi-Municipal)
- ☒ A completed **Land-Use Form** or receipt signed and dated by the appropriate planning department. Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months.
- ☒ A **Legal Description** of all the properties involved where water is diverted, conveyed, and used. The legal description includes a metes and bounds or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or applicant may submit a lot book report prepared by a title company.
Copies of tax bills are not acceptable
- ☒ The proposed source ☐ IS ☒ IS NOT withdrawn from further appropriation. **NOTE:** If it is withdrawn under ORS 538, reject/return application and fees.
- ☒ The proposed source ☐ IS ☒ IS NOT restricted (ORS 536.415):
 Allowed uses: ☐ Domestic ☐ Storage ☐ Irrigation ☐ Wildlife ☐ Recreation
- ☒ The map must meet all the minimum requirements of OAR 690-310-0050:
- ☒ Latitude and Longitude of POAs/PODs
 - ☒ Township, Range, Section
 - ☒ Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)
 - ☒ Place of use, ¼-¾'s and tax lot clearly identified.
 - ☒ Even map scale not less than 4" = 1 mile (1" = 1320 ft.); examples: 1" = 100 ft., 1" = 200 ft.
 - ☒ Location of each diversion point or well by reference to a recognized public land survey corner.
 - ☐ Multiple wells shall be uniquely labeled, and identified on well logs, if existing.
 - ☒ Reference corner on map
 - ☒ North directional symbol
 - ☒ Number of acres per ¼ ¼ if for irrigation, supplemental irrigation, or nursery use
 - ☒ If SW: location and flow direction of all water ways

☐ **Fees:** Amount of Water Requested: 7 af Name on Check: _____

Exam Fee Subtotal:	\$
60% Due:	\$
Amount Received:	\$

☒ **E2 Only Fees:** Amount of Water Requested: 7 af Name on Check: Same as applicant

Exam Fee Due:	\$ 1349
Exam Fee Submitted:	\$ 1349
Difference:	\$ 0
Recording Fee Paid?	☒ Yes ☐ No \$ 915
Total:	\$ 2264

Oregon Water Resources Department
Stored Water Only Applications - Expedited Secondary

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Today's Date: Wednesday, September 2, 2026

Base Application Fee.		\$915.00
Acre feet of Stored Water to be diverted.	7	\$434.00
Subtotal:		\$1,349.00
Permit Recording Fee. ***		\$915.00
*** the Permit Recording Fee is not required when the application is submitted but, must be paid before a permit will be issued. It is fully refundable if a permit is not issued. If the recording fee is not paid prior to issuance of the Final Order, permit issuance will be delayed.	Recalculate	
Estimated cost of Permit Application		\$2,264.00

MONEY SLIP

DATE: <u>8-31-2026</u>	RECEIPT #: <u>148047</u>
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RECEIVED FROM: Rodger Winkelmann
Shelly Winkelmann

APPLICATION	\$-90032
PERMIT	
TRANSFER	

CASH ☐ CHECK # ☒ 13234 OTHER (IDENTIFY) ☐

TOTAL REC'D	\$ <u>2,264.⁰⁰</u>
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1083 TREASURY	4170 MISC CASH ACCT.
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0407 COPIES \$
 OTHER: (IDENTIFY) \$

0243 Instream Lease 0244 Muni Water Mgmt. Plan 0245 Cons. Water

1083 TREASURY	4270 WRD OPERATING ACCT.
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MISCELLANEOUS

0407 COPY & TAPE FEES \$
 0410 RESEARCH FEES \$
 0408 MISC REVENUE (IDENTIFY) \$
 TC162 DEPOSIT LIAB. (IDENTIFY) \$
 0240 EXTENSION OF TIME \$

WATER RIGHTS

EXAM FEE		RECORD FEE	
0201 SURFACE WATER	\$1349.00	0202	\$915.00
0203 GROUND WATER	\$	0204	\$
0205 TRANSFER	\$		

WELL CONSTRUCTION

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

0607 TREASURY	0467 HYDROELECTRIC
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0233 POWER LICENSE FEE (FW/WRD)
 0231 HYDRO LICENSE FEE (FW/WRD)

LIC NUMBER	\$
	\$

HYDRO APPLICATION \$

SPECIAL INSTRUCTIONS:

☐ RETURN TO APPLICANT -- LETTER ATTACHED