



# Oregon Water Resources Department

## FORM I FOR IRRIGATION WATER USE

1. Please indicate whether you are requesting a primary or supplemental irrigation water right.

**Primary**     **Supplemental**

If supplemental, please indicate the number of acres that will be irrigated for each type of use.

Primary:            N/A            Acres

Secondary:        N/A            Acres

List the permit or certificate number of the primary water right:    No. N/A

2. Please list the anticipated crops you will grow and whether you will be irrigating them for a full or partial season:

- |  |   |  |
|--|---|--|
| 1. <u>Wine grapes (long-term)</u>      | <input checked="" type="checkbox"/> Full season | <input type="checkbox"/> Partial season (from: _____ to _____) |
| 2. <u>Broadacre crops (short-term)</u> | <input checked="" type="checkbox"/> Full season | <input type="checkbox"/> Partial season (from: _____ to _____) |
| 3. _____                               | <input type="checkbox"/> Full season            | <input type="checkbox"/> Partial season (from: _____ to _____) |
| 4. _____                               | <input type="checkbox"/> Full season            | <input type="checkbox"/> Partial season (from: _____ to _____) |

3. Indicate the maximum total number of acre-feet you expect to use in an irrigation season:

314.7                            acre-feet

*(1 acre-foot equals 12 inches of water spread over 1 acre, or 43,560 cubic feet, or 325,851 gallons.)*

4. How will you schedule your applications of water? Will you be applying water in the evenings, twice a week, daily?

- |   |   |
|---|---|
| <input type="checkbox"/> Daily during daytime hours               | <input type="checkbox"/> Daily during nighttime hours               |
| <input type="checkbox"/> Two or three times weekly during daytime | <input type="checkbox"/> Two or three times weekly during nighttime |
| <input checked="" type="checkbox"/> Weekly, during daytime hours  | <input type="checkbox"/> Weekly, during nighttime hours             |
| <input type="checkbox"/> Other, explain: _____                    |   |

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Oregon Water Resources Department

FORM I

FOR IRRIGATION WATER USE

1. Please indicate whether you are requesting a primary or supplemental irrigation water right.

Primary  Supplemental

If supplemental, please indicate the number of acres that will be irrigated for each type of use.

Primary: N/A Acres

Secondary: N/A Acres

TOTAL: 104.9 A

List the permit or certificate number of the primary water right: No. N/A

2. Please list the anticipated crops you will grow and whether you will be irrigating them for a full or partial season:

1. Wine grapes (long-term)  Full season  Partial season (from: \_\_\_\_\_ to \_\_\_\_\_)

2. Broadacre crops (short-term)  Full season  Partial season (from: \_\_\_\_\_ to \_\_\_\_\_)

3. \_\_\_\_\_  Full season  Partial season (from: \_\_\_\_\_ to \_\_\_\_\_)

4. \_\_\_\_\_  Full season  Partial season (from: \_\_\_\_\_ to \_\_\_\_\_)

3. Indicate the maximum total number of acre-feet you expect to use in an irrigation season:

314.7 acre-feet

(1 acre-foot equals 12 inches of water spread over 1 acre, or 43,560 cubic feet, or 325,851 gallons.)

4. How will you schedule your applications of water? Will you be applying water in the evenings, twice a week, daily?

Daily during daytime hours

Daily during nighttime hours

Two or three times weekly during daytime

Two or three times weekly during nighttime

Weekly, during daytime hours

Weekly, during nighttime hours

Other, explain: \_\_\_\_\_

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