

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRD staff

REMARK of A RETURN

Application G 16981 Township 6 N
Priority Date 12-13-2007 Range 37 E
Use(s) IRRIG Section 19
Rate 1.65 CFS POA Loc SE NW
County UMAT POU Loc SEE MAP
W.M. _____ Caseworker JEANA E

Applicant/Organization Name, Mailing Address and Telephone Number.

Source of water. If stored water, is the stored water component filed out, including a non-expired agreement for stored water must be included. (ORS 537.400)

Property ownership indicated.

If applicant does not own all the land, the affected landowner's name and mailing address must be listed.

If applicant does not own all the land, a 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.

Groundwater development section (Page 3 and 4, Section B) or a well log report. *Completed*

Proposed use of water. If supplemental, list primary water right acreage if applicable.

Enclosed Supplemental Form for each proposed use.

Form I (Irrigation)

Form M (Municipal or Quasi-Municipal)

Form R (Mining)

Form Q (Commercial or Industrial)

Spring Description Sheet

Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)

Period of use

Water management section (Please estimate if the water system has not been designed).

Resource Protection Section (Page 6, Section 5).

Project schedule (If system is already completed, indicate "existing").

For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.

If the above is statement is checked, the map must be prepared by a CWRE.

All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink. *Signature must be an original "wet" signature.*

You must include a Legal description of the property involved that 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 you may submit a lot book report prepared by a title company. The Department will not accept a copy of the tax bill.

A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. *Date of signature must be within the past 12 months. Signature must be an original "wet" signature.*

The map must meet all the minimum requirements of OAR 690-310-0050.

- Township, Range, Section
- Location of main canals, ditches, pipelines or flumes
- Place of use, 1/4, 1/4's and tax lot clearly identified
- Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)
- Location of each diversion point well or dam by reference to a recognized public land survey corner
- North Directional Symbol
- Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture
- Other CWRE # 358
JOHN WARINNER
- Reference corner on map
- Each point of diversion coordinate

Fees: Amount of water requested 1.65 CFS

Base Fee \$ 500
 1st CFS/AF 200
1 Addtn'l CFS/ AF @ 100 = _____
 _____ Addtn' POD @ _____ = _____

Total Exam Fee \$ 800
 Total Paid \$ 800
 Amount Due \$ Rec Fee Due

Reviewed by: HJM

Date: 12-14-2007

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # **90935**

INVOICE # _____

RECEIVED FROM: Lynch Ranch

APPLICATION	G-16981
PERMIT	
TRANSFER	

BY: _____

CASH: CHECK.# 1410 OTHER: (IDENTIFY) _____

TOTAL REC'D \$ 800.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES PLA 46111 \$ _____
 OTHER: (IDENTIFY) \$ _____

0243 I/S Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

4270 WRD OPERATING ACCT

MISCELLANEOUS

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

WATER RIGHTS:

0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
0203 GROUND WATER	\$ <u>800.00</u>	0204	\$ _____
0205 TRANSFER	\$ _____		

WELL CONSTRUCTION

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

0536 TREASURY 0437 WELL CONST. START FEE

0211 WELL CONST START FEE \$ _____ CARD # _____
 0210 MONITORING WELLS \$ _____ CARD # _____
 OTHER (IDENTIFY) _____

0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER

0233 POWER LICENSE FEE (FW/WRD) _____ \$ _____
 0231 HYDRO LICENSE FEE (FW/WRD) _____ \$ _____
 HYDRO APPLICATION _____ \$ _____

TREASURY OTHER / RDX

FUND _____ TITLE _____
 OBJ. CODE _____ VENDOR # _____
 DESCRIPTION _____ \$ _____

RECEIPT: **90935**

DATED: 12/13/07 BY: [Signature]

Mailing List for IR Copies

Application #G-16981

IR Date: May 16, 2008

Original mailed to applicant:

~~1~~ MICHAEL LYNCH , 2600 COTTONWOOD RD, WALLA WALLA, WA 99362

Copies sent to:

- ~~1~~ WRD - File # G-16981
- ~~2~~ WRD - Water Availability: Ken Stahr

Copies Mailed By: <u>TCB</u> (SUPPORT STAFF) on: <u>5/13/08</u> (DATE)
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IR, Map, and Fact Sheet Copies sent to:

- ~~3~~ WRD - Regional Manager (not SCR): NC
- ~~4~~ WRD - Watermaster # 5
— Well ~~driller~~ draper: NCR

Copies sent to Other Interested Persons (CWRE, Agent, Well Driller, Commenter, etc.)

- ~~5~~ Warinner, John S, CWRE #358
~~1~~ Fountainhead Irrigation Inc., PO Box 2197, Walla Walla, WA, 99362

IR CHECKLIST

App g-16481
L 01327

- MU or QM** NA will complete construction within 20 years
 Fujii reviewed recommendations _____
- Land use** approved not approved being pursued county notified NA
- Storage contract** NA BOR Doug Co Corp of Eng needed obtained _____
- Authorized agent specified** NA needed Yes _____
- Requested Use/Rate/Season** ir - 132.1 ac, 1.165 cfs 3/15-10/31
- Allowed Use/Rate/Season** 1.165 cfs **Limit** 150 **Duty** 3.0
- DIV 9** NA will likely be available... will **not** likely be available... will, if properly conditioned...
 classify as surface water well _____ has PSI with _____
(include basin map if true) well _____ is within 1N 3E 20, 21, 28, 29 GWLA CGWA _____
GW conditions In basalt
- Conditions** _____
- Small** ≤ 0.1 CFS, ≤ 9.2 AF **Medium** > 0.1 CFS but < 1.5 CFS, > 9.2 AF but < 100 AF **Large** ≥ 1.5 CFS, ≥ 100 AF
use **at least** Medium for: Siltcoos Lake, stored water contract, or Sandy Basin ground water
use Large for: Tenmile Lake, NU or other temp control, gov. entities, and HC above SWW; Large-7g, Large-7i for 7g/7i
use Large and totalizing flow meter for IR from GW in: South Salem Hills, and 10+ acres in Stage Gulch CGWA
- ORS 538 prohibits use** No Yes (stop processing and return app and fees)
- Use is** allowed not allowed limited OAR Compact 690 507.0030
- Stream is withdrawn** NA No Yes, allows use/season _____
- SW availability** NA 80% 50% _____ **WID:** _____
- Use DWF's 6/21/05 non-standard W/A memo if the source is: trib to Drews Res, Snake R, Columbia R, North Umpqua R below Rock Cr, or within drainages of Lost R, Chehalem Cr, or Champoeg Cr (including Mission Cr and Case Cr)
- DIV 33** NA No above Bonneville, and not allowed 4/15 - 9/30
 below Bonneville
 statewide
- SWW** NA above within _____ (If above or within, notify Parks.)
- Use is within a high priority area for streamflow restoration** NA No Yes
- Basin Maps** have been checked NA Yes limits _____
- POU conflict** NA No No, different sources No, make up a deficiency in rate No, existing not at max. rate
 Yes no irrigation in g/g's - ditch print it
- Use is supplemental**, checked for primary rights NA Yes limits _____
- Prior to permit**, applicant must submit NA storage contract easement plans/specs evidence of well repair

Point of Diversion Characteristics

Right:	App:G 16981 *
Name:	MICHAEL LYNCH

TRSQQ: 06.00N-37.00E-19-SENW

POD(s): POD 01 - A WELL > UNN STR

County: Umatilla

Basin: Umatilla

WM District: 5

WM Region: NC

Withdrawn Area:

WAB: COTTONWOOD CR > YELLOWHAWK CR - AT MOUTH (30710207)

Priority WAB:

Rule 4D: Rules apply

Groundwater Restricted Area:

Scenic Water Way:

Division 33: UPPER COLUMBIA

Water Quality Limited:

WATER RESOURCES DEPARTMENT

DIVISION 507

UMATILLA BASIN PROGRAM

690-507-0030 Walla Walla River Subbasin

(3) Ground Water: Appropriation and use of ground water in the Walla Walla River subbasin shall comply with the following provisions:

(a) Classification: Permits to use ground water may be issued only for the following classified uses:

(A) The ground water resources of the Walla Walla River subbasin are classified for statutorily exempt ground water uses (see definition), **irrigation**, municipal, industrial, power development, low temperature geothermal, mining, fish life, wildlife, recreation, pollution abatement, and artificial ground water recharge; and

(B) Ground water from the basalt reservoir in a five-mile radius around any municipal well of the cities of Athena, Helix, Milton-Freewater, and Weston is classified for municipal, group domestic and statutorily exempt ground water uses (see definition) only. Other uses may be permitted if it is documented that a barrier to ground water movement separates a proposed well from municipal wells and there will be no interference with municipal wells. Applications for other uses of ground water within a five-mile radius of a municipal well shall automatically be referred to the Commission for review and consideration of public interest unless the affected city affirms that is in favor of the proposed appropriation. This classification applies only when the affected city(ies) have a full-time conservation program in effect.

(b) Permits issued to appropriate ground waters that may be hydraulically connected with surface water shall be specially conditioned. The condition shall specify that when exercise of the permit unduly interferes with surface water, the permit will be regulated in favor of the surface water source.

NEW APPLICATIONS (GROUND WATER, RESERVOIR, & SURFACE) ROUTE SLIP

RECEIPTING 12/13/07
POST CARD SENT *DRIVE # X/T/M 12-17-2007*
DATA CENTER *MFR 12-21-07*

GEOLOGY REVIEW YES NO
ENFORCEMENT YES NO

<u>Caseworker:</u>		
Alyssa Mucken	986-0853	<input type="checkbox"/>
Brook Geffen	986-0808	<input type="checkbox"/>
Jean Eastman	986-0859	<input checked="" type="checkbox"/>
Joel Plahn	986-0815	<input type="checkbox"/>
Kerry Kavanagh	986-0816	<input type="checkbox"/>

WATER RIGHTS SUPPORT *MS*

A "Standard Reservoir" storing 9.2 acre-feet or more of Water & has a dam height of 10.0 feet or greater needs to have a copy of the application & supplemental forms routed to "DAM SAFETY"



ATTN: WATER RIGHTS SUPPORT....>>>> Mark contents of file with application number; Update the WRIS Database with caseworkers name. Route file to Caseworker.



ACCEPTED
A.H.S.

Water Right Conditions
Tracking Slip

Groundwater/Hydrology Section

FILE ## G-16981

ROUTED TO: Water Rights

TOWNSHIP/

RANGE-SECTION: 6N/37E-19 6d

CONDITIONS ATTACHED? Yes No

REMARKS OR FURTHER INSTRUCTIONS:

Reviewer: Mike Zwant