

# Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

REPAIR OF A RETURN

Application C 16907 Township 24 S

Priority Date 12 Range 33 E

Use(s) PRIM IRRIG Section 12

Rate 2.2125 CFS POA Loc \_\_\_\_\_

County HARNEY POU Loc NW 1/4 & NW NE

W.M. \_\_\_\_\_ Caseworker J. [unclear]

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.

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

Enclosed Supplemental Form for each proposed use.

REPAIR

177 ACRES

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) 2.2125

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. **RECEIVED**  
**BOTH APPLICANTS NOW SIGNED**

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. **RECEIVED**

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 ONE WELL  
ONE POU

Reference corner on map

Each point of diversion coordinate

Fees: Amount of water requested 2.2125 **478**

Base Fee \$ 500

Total Exam Fee \$ 900

1st CFS/AF 200

Total Paid \$ 1200

2 Addtn'l CFS/ AF @ 100 = 200

Amount Due \$ All Fees Paid

     Addtn' POD @      =     

Reviewed by: HLM

Date: 12-26-2007

# IR CHECKLIST

App g-16987  
hann 51408

**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** 177.0 ac, 2.25 cfs 3/1-10/31

**Allowed Use/Rate/Season** 177 2.21 cfs 3/1-10/31 **Limit** 1/500 **Duty** 30

**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 7m \_\_\_\_\_

**Conditions** \_\_\_\_\_

**Small**  $\leq 0.1$  CFS,  $\leq 9.2$  AF  **Medium**  $> 0.1$  CFS but  $< 1.5$  CFS,  $> 9.2$  AF but  $< 100$  AF  **Large**  $\geq 1.5$  CFS,  $\geq 100$  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 490-512

**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 Champog 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 none in 7/8 - didn't print

**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

POD is within North Umpqua settlement reach and the spreadsheet was updated  NA  Yes

Forms  NA  DIV 33  basin map  HC except  spring description other \_\_\_\_\_

Copy to  NWR  WM # 10  ODFW  CRIFC  
 NCR  agent  DEQ  US Fish & Wildlife  
 ER  CWRE  DOA  NW Planning Council  
 SWR  State Parks  CTUIR  
 DOA Food Safety Division  city \_\_\_\_\_  
(bottled water) (w/in 5-mile muni wells)

<input checked="" type="checkbox"/> Fees <u>2.25</u> CFS _____ AF	Base _____ <u>500</u> Up to 1 CFS _____ <u>200</u> <u>2</u> Add'l CFS @ <u>100</u> _____ <u>200</u> Up to 20 AF _____ _____ Add'l AF @ _____ _____ Add'l <input type="checkbox"/> POD/POA <input type="checkbox"/> use + _____ Exam Fee Required = _____ <u>900</u> Exam Fee Paid _____ <u>900</u> Still Owed _____
--	---

App and map meet min. requirements  Yes  No \_\_\_\_\_  
(If not, send IR certified)

Letter format  good  limited  bad  bad w/ rate reduction opportunity  bad w/ HC opportunity

E-mail Tim, including note if negative

Name: Jeana Eastman Date: 5/15/08 Peer Reviewer: J. East

The purpose of this checklist is to be used as a working document by Department staff to aid in the production of the related Initial Review, Proposed Final Order, or Final Order. It is not intended to be a complete record of all factors which were considered to produce the document, nor is it intended to serve any purpose other than that stated above. The related Initial Review, Proposed Final Order, or Final Order is intended to stand alone as the record of factors considered in its production.

# Point of Diversion Characteristics

Right:	App:G 16987 *
Name:	LAURANCE ROWLEY

**TRSQQ: 24.00S-33.00E-12-NENW**

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

County: Harney

Basin: Malheur Lake

WM District: 10

WM Region: E

Withdrawn Area:

WAB: HOT SPRINGS SL > MALHEUR SL - AT MOUTH (31200102)

Priority WAB:

Rule 4D:

Groundwater Restricted Area:

Scenic Water Way:

Division 33:

Water Quality Limited:

WATER RESOURCES DEPARTMENT

DIVISION 512

MALHEUR LAKE BASIN PROGRAM PROVISION

690-512-0040 Water Availability

(1) Except as provided in section (3) of this rule, the Department shall not accept an application for permit, or issue a permit, for any use of surface water, or of groundwater the use of which has the potential to substantially interfere with surface water, in the Malheur Lake Basin unless the applicant shows, by a preponderance of evidence, that unappropriated water is available to supply the proposed use at the times and in the amounts requested. The evidence provided shall be prepared by a qualified hydrologist or other water resources specialist and shall include:

(a) Streamflow measurements of gage records from the source or, for use of groundwater, the stream in hydraulic connection with the source; or

(b) An estimate of water availability from the source or, for use of groundwater, the stream in hydraulic connection with the source which includes correlations with streamflow measurements or gage records on other, similar streams and considers current demands for water affecting the streamflows.

(2) The criteria used in determining if the use of groundwater has the potential to substantially interfere with surface water shall be those established in OAR Chapter 690, Division 9.

(3) This rule shall not apply to issuance of:

(a) Instream water rights;

(b) Permits for storage of water between March 1 and May 31 if the application is not required to be referred to the Commission under OAR 690-011-0080(2)(a)(C); or

(c) Permits for use of water legally stored.

# Water Right Conditions Tracking Slip

Groundwater/Hydrology Section

FILE # G-16987

ROUTED TO: Water Rights

TOWNSHIP/

RANGE-SECTION: 24S/33E-12 ba

CONDITIONS ATTACHED?  Yes  No

REMARKS OR FURTHER INSTRUCTIONS:

Reviewer: Mike Zwart

**PUBLIC INTEREST REVIEW FOR GROUND WATER APPLICATIONS**

TO: Water Rights Section Date May 14, 2008

FROM: Ground Water/Hydrology Section Michael Zwart

Reviewer's Name

SUBJECT: Application G- 16987 Supersedes review of N/A

Date of Review(s)

**PUBLIC INTEREST PRESUMPTION; GROUNDWATER**

**OAR 690-310-130 (1)** *The Department shall presume that a proposed groundwater use will ensure the preservation of the public welfare, safety and health as described in ORS 537.525.* Department staff review ground water applications under OAR 690-310-140 to determine whether the presumption is established. OAR 690-310-140 allows the proposed use be modified or conditioned to meet the presumption criteria. **This review is based upon available information and agency policies in place at the time of evaluation.**

**A. GENERAL INFORMATION:** Applicant's Name: Laurance and Marilee Rowley County: Harney

A1. Applicant(s) seek(s) 2.2125 cfs from one well(s) in the Malheur Lake Basin,  
Harney Valley subbasin Quad Map: Mahon Creek

A2. Proposed use: Irrigation, 177 acres Seasonality: March 1 to October 31

A3. Well and aquifer data (attach and number logs for existing wells; mark proposed wells as such under logid):

Well	Logid	Applicant's Well #	Proposed Aquifer*	Proposed Rate(cfs)	Location (T/R-S QQ-Q)	Location, metes and bounds, e.g. 2250' N, 1200' E fr NW cor S 36
1	<b>HARN 51408</b>	<b>1</b>	<b>Basin fill</b>	<b>2.2125</b>	<b>24S/33E-12 NE-NW</b>	<b>2570' N, 75' W fr Ctr S 12</b>
2						
3						
4						
5						

\* Alluvium, CRB, Bedrock

Well	Well Elev ft msl	First Water ft bls	SWL ft bls	SWL Date	Well Depth (ft)	Seal Interval (ft)	Casing Intervals (ft)	Liner Intervals (ft)	Perforations Or Screens (ft)	Well Yield (gpm)	Draw Down (ft)	Test Type
1	4124	30	20	10/17/07	400	0-20	0-199	None	None	400	90	P

Use data from application for proposed wells.

A4. **Comments: Well cases but does not seal off the shallower water-bearing zones. The targeted aquifer is near the bottom of the well, which may limit the potential interference with other nearby irrigation and domestic wells.**

A5.  **Provisions of the Malheur Lake** Basin rules relative to the development, classification and/or management of ground water hydraulically connected to surface water  are, or  are not, activated by this application. (Not all basin rules contain such provisions.)  
Comments: \_\_\_\_\_

A6.  **Well(s) # \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, tap(s) an aquifer limited by an administrative restriction.**  
Name of administrative area: \_\_\_\_\_  
Comments: \_\_\_\_\_



**B. GROUND WATER AVAILABILITY CONSIDERATIONS, OAR 690-310-130, 400-010, 410-0070**

B1. Based upon available data, I have determined that ground water\* for the proposed use:

- a.  is over appropriated,  is not over appropriated, or  cannot be determined to be over appropriated during any period of the proposed use. \* This finding is limited to the ground water portion of the over-appropriation determination as prescribed in OAR 690-310-130;
- b.  will not or  will likely be available in the amounts requested without injury to prior water rights. \* This finding is limited to the ground water portion of the injury determination as prescribed in OAR 690-310-130;
- c.  will not or  will likely to be available within the capacity of the ground water resource; or
- d.  will, if properly conditioned, avoid injury to existing ground water rights or to the ground water resource:
  - i.  The permit should contain condition #(s) 7N \_\_\_\_\_;
  - ii.  The permit should be conditioned as indicated in item 2 below.
  - iii.  The permit should contain special condition(s) as indicated in item 3 below;

- B2. a.  Condition to allow ground water production from no deeper than \_\_\_\_\_ ft. below land surface;
- b.  Condition to allow ground water production from no shallower than \_\_\_\_\_ ft. below land surface;
- c.  Condition to allow ground water production only from the \_\_\_\_\_ ground water reservoir between approximately \_\_\_\_\_ ft. and \_\_\_\_\_ ft. below land surface;
- d.  Well reconstruction is necessary to accomplish one or more of the above conditions. The problems that are likely to occur with this use and without reconstructing are cited below. Without reconstruction, I recommend withholding issuance of the permit until evidence of well reconstruction is filed with the Department and approved by the Ground Water Section.

**Describe injury** –as related to water availability– that is likely to occur without well reconstruction (interference w/ senior water rights, not within the capacity of the resource, etc): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

B3. Ground water availability remarks: This well is about 3.5 miles north of an area where local well owners have expressed some concern about well interference and ground-water availability. Currently, a water-level recorder has been monitoring water levels at one well and several other wells have been selected for quarterly monitoring. Insufficient data have yet been collected to conclude that the ground-water resource is over appropriated or that additional appropriations would cause substantial interference with existing users of ground water. However, there are valid permits in that area that have not yet been developed. It could be expected that one or more of the concerned ground-water users will file a protest against this and any other proposed new uses of ground water in this area based on their concerns.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**C. GROUND WATER/SURFACE WATER CONSIDERATIONS, OAR 690-09-040**

C1. **690-09-040 (1):** Evaluation of aquifer confinement:

Well	Aquifer or Proposed Aquifer	Confined	Unconfined
1	Basin-fill sediments: sand, clay and sandstone	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Qal and possibly Tvs of Leonard, 1970	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

**Basis for aquifer confinement evaluation:** Regionally, the basin-fill aquifer is unconfined and discharges to Malheur Lake, but there may be local confining layers such as the clay described at a depth of 103-195 feet here.

C2. **690-09-040 (2) (3):** Evaluation of distance to, and hydraulic connection with, surface water sources. All wells located a horizontal distance less than ¼ mile from a surface water source that produce water from an unconfined aquifer shall be assumed to be hydraulically connected to the surface water source. Include in this table any streams located beyond one mile that are evaluated for PSI.

Well	SW #	Surface Water Name	GW Elev ft msl	SW Elev ft msl	Distance (ft)	Hydraulically Connected?			Potential for Subst. Interfer. Assumed?	
						YES	NO	ASSUMED	YES	NO
1	1	Crowcamp Creek, trib to Hot Springs Slough	4104	4119	3800	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Basis for aquifer hydraulic connection evaluation:** Malheur Slough is dry in most years and therefore is not considered for Division 9 reviews, per memo by Ivan Gall, January 15, 2008.

**Water Availability Basin the well(s) are located within:** HOT SPRINGS SL > MALHEUR SL - AT MOUTH (31200202).

C3a. **690-09-040 (4):** Evaluation of stream impacts for each well that has been determined or assumed to be hydraulically connected and less than 1 mile from a surface water source. Limit evaluation to instream rights and minimum stream flows that are pertinent to that surface water source, and not lower SW sources to which the stream under evaluation is tributary. Compare the requested rate against the 1% of 80% natural flow for the pertinent Water Availability Basin (WAB). If Q is not distributed by well, use full rate for each well. Any checked  box indicates the well is assumed to have the potential to cause PSI.

Well	SW #	Well < ¼ mile?	Qw > 5 cfs?	Instream Water Right ID	Instream Water Right Q (cfs)	Qw > 1% ISWR?	80% Natural Flow (cfs)	Qw > 1% of 80% Natural Flow?	Interference @ 30 days (%)	Potential for Subst. Interfer. Assumed?
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

C3b. **690-09-040 (4):** Evaluation of stream impacts by total appropriation for all wells determined or assumed to be hydraulically connected and less than 1 mile from a surface water source. Complete only if Q is distributed among wells. Otherwise same evaluation and limitations apply as in C3a above.

SW #	Qw > 5 cfs?	Instream Water Right ID	Instream Water Right Q (cfs)	Qw > 1% ISWR?	80% Natural Flow (cfs)	Qw > 1% of 80% Natural Flow?	Interference @ 30 days (%)	Potential for Subst. Interfer. Assumed?
	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

Comments: This section does not apply.

C4a. **690-09-040 (5):** Estimated impacts on hydraulically connected surface water sources greater than one mile as a percentage of the proposed pumping rate. Limit evaluation to the effects that will occur up to one year after pumping begins. This table encompasses the considerations required by 09-040 (5)(a), (b), (c) and (d), which are not included on this form. Use additional sheets if calculated flows from more than one WAB are required.

Non-Distributed Wells													
Well	SW#	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
Distributed Wells													
Well	SW#	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
(A) = Total Interf.													
(B) = 80 % Nat. Q													
(C) = 1 % Nat. Q													
(D) = (A) > (C)													
(E) = (A / B) x 100		%	%	%	%	%	%	%	%	%	%	%	%

(A) = total interference as CFS; (B) = WAB calculated natural flow at 80% exceed. as CFS; (C) = 1% of calculated natural flow at 80% exceed. as CFS; (D) = highlight the checkmark for each month where (A) is greater than (C); (E) = total interference divided by 80% flow as percentage.

**Basis for impact evaluation:**

Lined area for writing the basis for impact evaluation.

C4b. **690-09-040 (5) (b)** The potential to impair or detrimentally affect the public interest is to be determined by the Water Rights Section.

- C5.  **If properly conditioned**, the surface water source(s) can be adequately protected from interference, and/or ground water use under this permit can be regulated if it is found to substantially interfere with surface water:
  - i.  The permit should contain condition #(s) \_\_\_\_\_;
  - ii.  The permit should contain special condition(s) as indicated in "Remarks" below;

**C6. SW / GW Remarks and Conditions**

Lined area for writing SW / GW Remarks and Conditions.

**References Used:** Local well logs; local recent reviews; GW Report 16, by Leonard, 1970; Greene, Walker, and Corcoran, 1972, Geologic Map of the Burns Quadrangle, Oregon, USGS Miscellaneous Geologic Investigations Map I-680; Memo by Ivan Gall, 1/15, 2008, Stream Assessment for Division 9 Review in the Malheur Lakes Basin.

Lined area for additional references or notes.

**D. WELL CONSTRUCTION, OAR 690-200**

D1. Well #: 1 Logid: HARN 51408

D2. **THE WELL does not meet current well construction standards based upon:**

- a.  review of the well log;
- b.  field inspection by \_\_\_\_\_;
- c.  report of CWRE \_\_\_\_\_;
- d.  other: (specify) \_\_\_\_\_

D3. **THE WELL construction deficiency:**

- a.  constitutes a health threat under Division 200 rules;
- b.  commingles water from more than one ground water reservoir;
- c.  permits the loss of artesian head;
- d.  permits the de-watering of one or more ground water reservoirs;
- e.  other: (specify) \_\_\_\_\_

D4. **THE WELL construction deficiency is described as follows:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D5. **THE WELL** a.  was, or  was not constructed according to the standards in effect at the time of original construction or most recent modification.

b.  I don't know if it met standards at the time of construction.

D6.  **Route to the Enforcement Section.** I recommend withholding issuance of the permit until evidence of well reconstruction is filed with the Department and approved by the Enforcement Section and the Ground Water Section.

**THIS SECTION TO BE COMPLETED BY ENFORCEMENT PERSONNEL**

D7.  Well construction deficiency has been corrected by the following actions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_, 200\_\_\_\_.  
(Enforcement Section Signature)

D8.  **Route to Water Rights Section (attach well reconstruction logs to this page).**



# Mailing List for IR Copies

Application #G-16987

IR Date: May 23, 2008

## Original mailed to applicant:

~~LAURANCE ROWLEY AND MARILEE ROWLEY, 67724 CRANE BUCHANAN RD, BURNS,  
OR 97720~~

## Copies sent to:

1. WRD - File # G-16987
2. WRD - Water Availability: Ken Stahr

Copies Mailed
By: <u>[Signature]</u>
(SUPPORT STAFF)
on: <u>5/23/08</u>
(DATE)

## IR, Map, and Fact Sheet Copies sent to:

3. WRD - Regional Manager (not SCR): E
4. WRD - Watermaster # 10

Caseworker: Jeana Eastman

COPYSHIT.IR

3-16987

FILED FOR MAP INITIALS

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

RECEIPTING  12/24/07  
POST CARD SENT  HTM 12-26-2007  
DATA CENTER  1-4-08 MFR

GEOLOGY REVIEW YES  NO   
ENFORCEMENT YES  NO

WATER RIGHTS SUPPORT  MS

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

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 RESOURCES DEPARTMENT

725 Summer St. N.E. Ste. A  
SALEM, OR 97301-4172

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

RECEIPT # 91041

INVOICE # \_\_\_\_\_

RECEIVED FROM: LAWRENCE W + MARILEE E ROWLEY APPLICATION 17-16987

BY: \_\_\_\_\_ PERMIT \_\_\_\_\_

TRANSFER \_\_\_\_\_

CASH:  CHECK:# 1004 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1200.12

**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:**

EXAM FEE		RECORD FEE
0201 SURFACE WATER	\$ _____	\$ _____
0203 GROUND WATER	\$ <u>900.00</u>	\$ <u>300.00</u>
0205 TRANSFER	\$ _____	

**WELL CONSTRUCTION**

EXAM FEE		LICENSE FEE
0218 WELL DRILL CONSTRUCTOR	\$ _____	\$ _____
LANDOWNER'S PERMIT		\$ _____
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: 91041

DATED: 12/24/07 BY: [Signature]