Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

Application G 17016 Township 3 S

Priority Date 3-3-2008 Range 36 E

Use(s) IRRIG Section 14 15 22 23

Rate 2.5 CFS POA Loc (3) SEE MAP

County UNION POU Loc SEE MAP

W.M. 6 Caseworker JEANA EASTMAN

WHOLE NAME

✓ 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)

✓ The proposed source **is** or **is not** (circle one) withdrawn from further appropriation, or Division 538. If it is, return application and fees. GW

✓ Property ownership indicated. STATES NO!

✓ If applicant does not own all the land, the affected landowner's name and mailing address must be listed. WILL BE SENT IN MAIL

○ 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.

✓ 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) 2.5 CFS.

✓ 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
- Place of use, 1/4, 1/4's and tax lot clearly identified
- Location of each diversion point well or dam by reference to a recognized public land survey corner
- Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture
- Reference corner on map
- Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)
- Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)
- North Directional Symbol
- ○ Other MAP REQUIRED & SENT IN MAIL

Each point of diversion coordinate 3 WELLS

Fees: Amount of water requested 2.5 CFS

Base Fee $ 500

1st CFS/AF 200

2 Addtn'l CFS/ AF @ 100 = 200

2 Addtn' POD @ 200 = 400

~~Additional Use~~ @ ____ = ____

Total Exam Fees $ 1300 ✓

900
400
1300

Total Paid $ 1300

Amount Due $ REF DUE

#2 CHECK SENT IN MAIL

Reviewed by: JTM

Date : MAR 6 2008

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # **91720**

725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE # _____

RECEIVED FROM: BEAR CREEK QUARTER HORSE RANCH LLC

BY:

APPLICATION	G-17016
PERMIT	
TRANSFER	

CASH: ☐ CHECK:# ☒ 1042 OTHER: (IDENTIFY) ☐ _____

TOTAL REC'D $ 400.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407	COPIES		$
_____	OTHER: (IDENTIFY)	_____	$

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

4270 WRD OPERATING ACCT

MISCELLANEOUS PLA 46111

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

		EXAM FEE		RECORD FEE
	WATER RIGHTS:			
0201	SURFACE WATER	$	0202	$
0203	GROUND WATER	$ 400.00	0204	$
0205	TRANSFER	$		
	WELL CONSTRUCTION	**EXAM FEE**		**LICENSE FEE**
0218	WELL DRILL CONSTRUCTOR	$	0219	$
	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: **91720** DATED: 3/12/08 BY: _____

Distribution – White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # **91619**

725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE # _____

RECEIVED FROM: Bear Creek Quarter Horse Ranch, LLC

BY:

APPLICATION	G 17016
PERMIT	
TRANSFER	

CASH: ☐ CHECK:# ☒ 1038 OTHER: (IDENTIFY) ☐ _____

TOTAL REC'D $ 900.00

1083 TREASURY 4170 WRD MISC CASH ACCT

0407	COPIES	$
_____	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	$	0202	$
0203	GROUND WATER	$900.00	0204	$
0205	TRANSFER	$		
	WELL CONSTRUCTION	**EXAM FEE**		**LICENSE FEE**
0218	WELL DRILL CONSTRUCTOR	$	0219	$
	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: **91619** DATED: 3/3/08 BY: L. Pasalle

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