## Limited License "Completeness" Checklist Minimum Requirements (OAR 690-340-030) (ORS 537.143)

Rece	ived Date: 6.20.2000	Township: 395						
Publi	c Notice Date: <u> 7 හ - 2ගරි</u>	Range:3 W						
Earlie	est Issue Date: <u>7:23 -200</u> 78	Section: 4						
Sour	ce: Appleant Releavour	POD Loc: <u>NETYNE 14</u>						
Amou	unt: 15 Acres FORT STORED HO	-						
Durat	tion: <u>5-1-2008 -&gt; 10-31-<b>20</b>10 - Luut</u>	Watermaster: 13						
Coun	ty: JACKSON	ODFW:						
Basin	n:	DEQ:						
<u>6</u>	Applicant/Organization Name, Mail Signature in ink. Original "wet" signat Source listed?	ling Address ,Telephone Number, and Contact Person. ture required.						
nta	If source is groundwaterare well log(s) or sufficient information for the Department to determine aquifer, well depth, well seal, open interval, etc. included? Was the intended aquifer identified?. If for multiple wells, each map location shall be clearly tied to a well log.							
<b>o</b>	Proposed Use of the wateris each	ch proposed use identified?						
9	If source is stored water Is there	a contract for delivery of stored water. Must have a copy						
Mo	If use is supplementalis the primary water right listed?							
Ø ,	Amount of water from each source listed in GPM, CFS or AF?							
8	Acreage being proposed, if applicab	le. <b>3</b> 3						
8	Duration of Limited License being	requested by applicant. Liver TO LYGAR						
<b>o</b>	Project schedule Date when wate	r use will start and date when water use will be completed						
	Is the application signed in ink by the applicant(s) or by the authorized agent with title or authority if an organization or corporation?							
arab	Water Master Report Is the local V	Water Masters report on water availability included?						
		orm completed by local planning officials included?						

**CONTINUED ON BACK** 

O <b>Fees</b> en	<u>Base</u> \$150		which sion	Location of each diversion point, well or dam  Each POD coordinate by reference to a recognized public land survey corner
FEE PAID STILL OWEI		- <u>16500</u>		

## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT # 92949

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

INVOICE #

	.040		,	503) 986-0904 (fa	x)	0.02 "		
RECEIVED FROM:	FBN	MAN	46E	MENT			4-115	3
3Y:					military hards	RMIT		
CASH: CHECI	K:# (	OTHER: (ID	ENTIFY)		· · · · · · · ·	NSFER		_
		$\square$ $\underline{}$			TOTAL	REC'D	\$ 165.9	<u> </u>
1083 TR	EASURY	4170	WPDA	IISC CASH	ACCT"	garage and the same and the sam		,,,,,
L	all a surface as	THE	All all Proposition of	RECEIV			<b>c</b>	_
	OPIES		$\Omega V$	ER THE		TED	\$	
01	THER: (I	IDENTIFY)		- <u>11 1116 (</u>	<b>JOOIA</b>	1 511	Ψ	_
0243 I/S Lease	0244	Muni Wate	r Mgmt. Pl	an02	245 Cons. V	Vater	_	
	,	4270	WRD C	PERATING	ACCT		· · ·	,,,
MI	SCELLANEOUS	<b>S</b>						
0407 CC	OPY & TAPE FEE	ES					\$	
0410 RE	SEARCH FEES			1	).		\$	
0408 MI	SC REVENUE:	(IDENTIFY	)	Limited	Lice	nse	\$165,0	Ø
TC162 DE	EPOSIT LIAB. (II	DENTIFY)					\$	
0240 EX	CTENSION OF T	IME					\$	
W	ATER RIGHTS:			EXAM FEE			RECORD FI	EE
0201 SL	JRFACE WATER			\$	02	02	\$	
0203 GF	ROUND WATER			\$	02	04	\$	
0205 TR	RANSFER			\$				
WI	ELL CONSTRUC	CTION		EXAM FEE	B F		LICENSE FI	EE
0218 WE	ELL DRILL CON	STRUCTOR	₹	\$	02	19	\$	
LA	NDOWNER'S P	ERMIT			02	20	\$	
OT	THER	(IDENTIF	Y)					
					40 PA 20	,		
0536 TR	EASURY	0437	WELL	CONST. STA	RT FEE		At the state in the Execution	
0211 WE	ELL CONST STA	RT FEE		\$		CARD#		
0210 MC	ONITORING WE	LLS		\$		CARD#		
07	THER	(IDENTIF	Y)					
0607 TR	EASURY	0467	HYDRO	ACTIVITY	LIC NUM	ABER .		
	OWER LICENSE	FEE (FW/V			. "		\$	
	/DRO LICENSE	,					\$	
ну	ORO APPLICAT	ION .	,				\$	
			OT11E5	1 I DDV				
TR	EASURY		OTHER	R/RDX				
FUND		_ TITLE _						
OBJ. CODE		VENDOF	R #					
DESCRIPTION							\$	
					1)	$\Lambda$	١.	_
RECEIPT: 929	949	DATE	ED: /_	120/08BY	. <i>X</i> :	1	di -	
			- "	ppy - Fiscal, Blue	_	Buff Copy	- Fiscal	