Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff REPAIR OF Application G 17105 Township 195 Priority Date 9-16-2008 Range 46 E Use(s) IRRIG ARRES Section 5 CI.1114 50 Rate CFS GPM POMLOC ONE WELL NEWE County MACHEUR POULOC E 1/2 NE 1/4 W.M. #9 Caseworker KERRY K 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) NOTE: A surface water application cannot be filled at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application (E2). The proposed source is or is not circle one) withdrawn from further appropriation, or Division 538. If it is, return application and fees. Property ownership indicated. A If applicant does not own all the land, the affected landowner's name and mailing address must be listed. O 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) O Form M (Municipal or Quasi-Municipal) O Form R (Mining) O Form Q (Commercial or Industrial) O 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	n 5).				
Project schedule (If system is already comple	eted, indicate "existing").				
O For reservoir applications storing more than preliminary plans and specifications for dam	9.2 acre feet, and a dam height of more than 10 feet, and impoundment are required.				
O If the above is statement is cheeked, the	map must be prepared by a CWRE.				
All applicants (or the authorized agent with the sign the application in ink. Signature must be	itle or authority if for an organization or corporation), must be an original "wet" signature.				
other government survey description. A copy	or operty involved that includes a metes and bounds, or y of the deed, land sales contract or title insurance policy omit a lot book report prepared by a title company. The bill.				
, .	ed and dated by the appropriate planning department are past 12 months. Signature must be an original "wet"				
The map must meet all the minimum requirer	ments of OAR 690-310-0050.				
Township, Range, Section	Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)				
O 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.)				
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	- MAC NEEDS AMENAL				
Reference corner on map	- anct 10" WEZE (NEW) WILL BE USED TO IMPLIBATE				
Each point of diversion coordinate	a.1114 EMPL RESPONSE				
Fees: Amount of water requested Gran	CFS				
Base Fee \$ 500	Additional Use @				
1st CFS/AF 200	Total Exam Fees \$ 700				
Addtn'l CFS/AF@	Total Paid \$ 1000 Amount Due \$ ALL TEES PAID				
Reviewed by:	Date: 9-17-2008				
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STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 94164

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

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