

# Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

Application G 17142 Township 15  
Priority Date 11-14-2008 Range 32 E  
Use(s) PRIM IRRIG 15 A. Section 15  
Rate 0.19 CFS POA Loc SE SE  
County UNMAY POU Loc SE SE  
W.M. DIST #5 Caseworker MICHELE M

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☒ The proposed source is is not (circle one) withdrawn from further appropriation, or Division 538.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

☒ Property ownership indicated.

NO ENCUMBRANCES!

☐ 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.

☒ 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.

SENT BY FAX 11-17-08

☒ 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 (if POA/POD is outside of POU)

☒ 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 \_\_\_\_\_

☒ Reference corner on map

☒ Each point of diversion coordinate

☒ Fees: Amount of water requested 0.19 CFS

Base Fee \$ 52.00

Additional Use @       

1st CFS/AF 200

Total Exam Fees \$ 70.00

Addn' CFS/AF @        =       

Total Paid \$ 70.00

Addn' POD @        =       

Amount Due \$ RET FEE DUE

Reviewed by: H/TW

Date: 11-17-2008

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

RECEIPT # **94916**

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

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

RECEIVED FROM: RUGG RANCHES LLC  
BY: TOM + MAUREEN RUGG

|             |         |
|-------------|---------|
| APPLICATION | 6-17142 |
| PERMIT      |         |
| TRANSFER    |         |

CASH: ☐ CHECK:# 3038 OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ 700.00

**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:**

|                    |                  |      |            |
|--------------------|------------------|------|------------|
| 0201 SURFACE WATER | EXAM FEE         | 0202 | RECORD FEE |
| 0203 GROUND WATER  | \$               | 0204 | \$         |
| 0205 TRANSFER      | \$ <u>700.00</u> |      |            |

**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: **94916**

DATED: 11/14/08 BY: L Bell

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