#### STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT # 95857

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

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

					TRAN	ISFER	
sн: С ]	HECK:#   103	OTHER: (IDI	ENTIFY) 	[	TOTAL	REC'D	\$200 oc
1083	TREASURY	4170	WRD M	ISC CASH A	CCT		
0407	COPIES			RECEI	VED		\$
	OTHER:	(IDENTIFY)	OV	ER THE	COUN	MEF	\$
0243 I/S Le	ease 024	4 Muni Wate	r Mgmt. Pla	n 024	5 Cons. W	ater	_
		4270	WRD O	PERATING A	CCT_		
	MISCELLANEOU	s	.0711	)			
0407	COPY & TAPE FE	ES	4611	•			\$
0410	RESEARCH FEES	6					\$
0408	MISC REVENUE:	(IDENTIFY	)			_	\$
TC162	DEPOSIT LIAB. (	IDENTIFY)				_	\$
0240	EXTENSION OF 1	IME					\$
	WATER RIGHTS:			EXAM FEE			RECORD FEE
0201	SURFACE WATER	3		\$	020	2	\$
0203	GROUND WATER			\$ 200.00	020	4	\$
0205	TRANSFER			\$			
	WELL CONSTRU	CTION		EXAM FEE			LICENSE FEE
0218	WELL DRILL CON		}	\$	021	9	\$
0210	LANDOWNER'S F				 022	0	\$
			2.0				
	OTHER	(IDENTIF	Υ)				
0536	TREASURY	0437	WELL C	ONST. STAI	RT FEE		
0211	WELL CONST ST	ART FEE		\$		CARD#	
0210	MONITORING WE	LLS		\$		CARD#	
	OTHER	(IDENTIF	Y)			_	
0607	TREASURY	0467	HYDRO	ACTIVITY	LIC NUM	BER	
0233	POWER LICENSE	FEE (FW/V	VRD)				\$
0231	HYDRO LICENSE	FEE (FW/M	(RD)				\$
	HYDRO APPLICA	TION	·				\$
	TREASURY		OTHER	/ RDX	_		
FUND		TITLE				_	
	 E						
	TION	,,,,,					\$

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#### STATE OF OREGON

### WATER RESOURCES DEPARTMENT

RECEIPT# 95759

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

INVOICE # \_\_\_\_

CEIVED FRO	m: Ramsac I and l	-LC	APPLICATION	617184
/:			PERMIT	
			TRANSFER	T-10788
ASH: C	OTHER: (IDENTIFY)		OTAL REC'D	\$1100,00
1000	TOTAQUIDY 4470 WOOA	#00 040U 400	-	
1083	TREASURY 4170 WRD N	ISC CASH ACC RECEIV		
0407	COPIES	ER THE CO		\$
	OTHER: (IDENTIFY)	CIT TITE CO	<u> JOINI</u> LI	Ψ
0243 I/S L	ease 0244 Muni Water Mgmt. Pi	lan 0245 C	ons. Water	
	4270 WRD 0	PERATING AC	ST	
	MISCELLANEOUS 6 17/89	1-4700	50	
0407	0000/ 0 7405 5550		<b>.</b>	\$
0410	RESEARCH FEES 7 1070	8-# 4000		\$
0408	MISC REVENUE: (IDENTIFY)			\$
TC162	DEPOSIT LIAB. (IDENTIFY)			\$
0240	EXTENSION OF TIME			\$
	WATER RIGHTS: 4 11 /4 /6	EXAM FEE		RECORD FEE
0201	SURFACE WATER	\$	0202	\$
0203	GROUND WATER	\$ 70000	0204	\$
0205	TRANSFER	\$40000		
	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)			
			0.11.11.12.5	
0607	, , , , , , , , , , , , , , , , , , , ,	O ACTIVITY II		
0607	TREASURY 0467 HYDRO	O ACTIVITY LI	C NUMBER	\$
0233	POWER LICENSE FEE (FW/WRD)	O ACTIVITY LI	C NOWBER	\$
7. 7. 7. 7.	TREASURY 0467 HYDRO	O ACTIVITY LI	CNUMBER	\$
0233	POWER LICENSE FEE (FW/WRD)	O ACTIVITY L	CNUMBER	
0233	POWER LICENSE FEE (FW/WRD) HYDRO LICENSE FEE (FW/WRD) HYDRO APPLICATION	O ACTIVITY	CNUMBER	\$
0233	TREASURY 0467 HYDRO POWER LICENSE FEE (FW/WRD) HYDRO LICENSE FEE (FW/WRD) HYDRO APPLICATION TREASURY OTHER	R / RDX	CNUMBER	\$
0233 0231 FUND	TREASURY 0467 HYDRO POWER LICENSE FEE (FW/WRD) HYDRO LICENSE FEE (FW/WRD) HYDRO APPLICATION TREASURY OTHER	R / RDX	CNUMBER	\$
0233 0231  FUND OBJ. COD	TREASURY 0467 HYDRO POWER LICENSE FEE (FW/WRD) HYDRO LICENSE FEE (FW/WRD) HYDRO APPLICATION  TREASURY OTHER  TITLE  VENDOR #	R / RDX	CNUMBER	\$
0233 0231  FUND OBJ. COD	TREASURY 0467 HYDRO POWER LICENSE FEE (FW/WRD) HYDRO LICENSE FEE (FW/WRD) HYDRO APPLICATION TREASURY OTHER	R / RDX	CNUMBER	\$
0233 0231  FUND OBJ. COD DESCRIP	TREASURY 0467 HYDRO POWER LICENSE FEE (FW/WRD) HYDRO LICENSE FEE (FW/WRD) HYDRO APPLICATION  TREASURY  TITLE  E VENDOR #	R / RDX		\$

# Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

Application G 17184 County CLAC Priority Date 2-27- 2009
Township 35 Range 1W Section 26 NW 9W 0.446 / 200 PR IM 22,50 Amount CF9 GPM Use 1 RRIG Acres Watermaster Dist. # 20
Caseworker Assigned □ Brook Geffen □ Jeana Eastman □ Joel Plahn □ Kerry Kavanagh ★Michele McAleer
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) <i>NOTE:</i> A surface water application cannot be filed 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. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.
Property ownership indicated.
O 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 signed 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 acreage.
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 5).
Project schedule (If system is already completed, indicate "existing").

	For Standard reservoir applications proposing to s feet, preliminary plans and specifications for dam prepared by a CWRE.	and the state of t	
b	All applicants or the applicant's authorized agent (must sign the application in ink. Signature must it		
\$	You must include a Legal description of all the pro The Legal description includes a metes and bound deed, land sales contract or title insurance policy of report prepared by a title company. The Department	ds, or other government survey description can provide this information, or you may s	i. A copy of the
4	A completed Land-Use Form or receipt signed and Please be certain that the Land-Use form lists all be within the past 12 months. Signature must be a	l lands involved and all uses proposed. Da	te of signature must
1	The map must meet all the minimum requirements	s of OAR 690-310-0050.	
<b>b</b>	Township, Range, Section  Location of main canals, ditches, pipelines or Place of use, 1/4, 1/4's and tax lot clearly identification of each diversion point, well or dam survey corner  Reference corner on map  North Directional Symbol  Number of acres per 1/4, 1/4, if for irrigation  Each point of diversion coordinate  Other  Other	entified ample: 1" = 100 ft, 1" = 200 ft, etc.) In by reference to a recognized public land I, nursery, or agriculture  Schue 1 / E	Cerei # 6157ED p. 38505
	Base Fee \$ 500 A	Addi <del>tional Use @ =</del>	
	1st CFS/AF 200	Total Exam Fees \$ 900	
	Addtn'l CFS/AF @ =	Total Paid \$ 700 + 200  Amount Due \$ Rec Fee Due	
	~ <i>1-a</i>	Date: 3-10-09	