## STATE OF OREGON

## WATER RESOURCES DEPARTMENT

RECEIPT # 95922

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

INVOICE # \_\_\_

ECCEIVED FROM: Silver Sage Ranch			rch	APPLICATION	6-17189
v: Joseph R. Buerman			nann	PERMIT	
ASH:	CHECK:#	OTHER: (IDENTIFY		TRANSFER	
	3965		,	TOTAL REC'D	\$ 1200. a
1083	<del></del>	4170 WPD	MISC CASH A	CCT	
		4170 WHD	WIISC CASH A		\$
0407	COPIES	(IDENTIE)			\$
	OTHER:	(IDENTIFY)			Ψ
0243 I/S	Lease 024				
		4270 WRD	OPERATING A	ACCT	
	MISCELLANEOU	JS	46111		
0407	COPY & TAPE FE	EES	70111		\$
0410	RESEARCH FEE	S			\$
0408	MISC REVENUE	: (IDENTIFY)		\$	
TC162	DEPOSIT LIAB.	(IDENTIFY)			\$
0240	EXTENSION OF	TIME			\$
	WATER RIGHTS:	:	EXAM FEE	$\neg$	RECORD FEE
0201	SURFACE WATE		\$	0202	\$
0203	GROUND WATER				\$
0205	TRANSFER		\$ 12 <i>00.0</i>		
	WELL CONSTRU	JCTION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CO		\$	0219	\$
0210	LANDOWNER'S			0220	\$
	OTHER	(IDENTIFY)			
		(102111111)			
0536	TREASURY	0437 WEL	L CONST. STAI	RT FEE	
0211	WELL CONST ST	TART FEE	\$	CARD #	
0210	MONITORING W	ELLS	\$	CARD #	
	_ OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYDI	RO ACTIVITY	LIC NUMBER	
0233		E FEE (FW/WRD)	<u> </u>		\$
			-		\$
0231	HYDRO LICENSI		L		
	HYDRO APPLICA	ATION			\$
	TREASURY	OTH	ER / RDX		
FUND _		TITLE			
OBJ. CC	DDE	VENDOR #			
DESCRI	PTION				\$

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

Application G 17189	County HARNEY Priority Date 3-17-2009
Township 26 S	Range 30 E Section 17 \$ 18
Amount 3.60 CF5Use	Range 30 E Section 17 & 18 PRIM 291.21 IRUG AGRES Watermaster Dist. # 10
1 -	n □ Joel Plahn ★Kerry Kavanagh □ Michele McAleer  Iailing Address, and Telephone Number.
Source of water. If stored water, agreement for stored water must be i	is the stored water component filed out, including a non-expired ncluded. (ORS 537.400) NOTE: A surface water application cannot our or Alt Reservoir if it will be for the use of the stored water under
ORS 538, then return application negative IR will be issued.	Ccircle one) withdrawn from further appropriation. If it is withdrawn under and fees. If it is withdrawn by other means, accept the application and a
Property ownership indicated.	TES.
O If applicant does not own	all the land, the affected landowner's name and mailing address must be listed.
	a all the land, a signed statement declaring the existence of either written ment permitting access to land crossed by the proposed ditch canal or other.
Groundwater development section	n (Page 3 and 4, Section B) or a well log report.
Proposed use of water. If supplen	nental, 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	701AZ 291,20 AeRo
Amount of water from each source	ce in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
Period of use	
Water management section (Plea	se estimate if the water system has not been designed).
Resource Protection Section (Page	ge 6, Section 5).
Project schedule (If system is alre	eady completed, indicate "existing").

0	For Standard reservoir applications proposing to store 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. In addition, the map must be prepared by a CWRE.
+	All applicants or the applicant's authorized agent (include title or authority if for an organization or corporation), must sign the application in ink. Signature must be an original "wet" signature. Copies cannot be accepted.
Þ	You must include a Legal description of all the properties involved where water is diverted, crossed, and used. The Legal description 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.  Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted.
<b>b</b>	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  Reference corner on map  Reference corner on map  Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture  Each point of diversion coordinate  Other  Other
Ð	Fees: Amount of water requested 3.6 CTS
	Base Fee \$ Sign Additional Use @ In a care 200
	1st CFS/AF 200 Total Exam Fees \$ 12 croi 1200
	3 Addtn' (CFS) AF @ 100 = 300 Total Paid \$ 1200  Amount Due \$ Rec Fee Due
	Reviewed by: HTM Date: 3-17-2009