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

Application C 1731Z County BAKER Priority Date 2-19-2010	,
Township 75 Range 38 E Section 13/14/23 1500 / 3.342 PRIM 159 Amount G-M	
Gaseworker 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) NOTE: 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 uder the PROPOSED Reservoir application (E2).	
The proposed source is or is not (carcle one) withdrawn from further appropriation. If it is withdrawn used ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and negative IR will be issued.	
Property ownership indicated. 5774755 (Constitution of the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land, the affected landowners name and mailing address must be a supplicant does not own all the land	be listed
If applicant does not own all the land, asigned statement declaring the existence of either written authorization or an easement permitting access to land crossed by the proposed ditch canal or work must be submitted.	ster Dist. #
Groundwater development section (Page 3 and 4, Section B) or a well log report.	
Proposed use of water. If supplemental, list primaryacreage. 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 for	eet (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").	

0	For Standard reservoir applications proposing to store more than 9.2 acre feet, and adam 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	The map must meet all the minimum requirements of OAR 690310-0050.
	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 damby reference to arecognized public land survey corner. Multiple wells shall be uniquely labeled, and identified on well logs if existing. Reference corner on map North Directional Symbol Number of acres per 1/4, 1/4, iffor irrigation, nursery, or agriculture Other Other
*	Fees: Amount of water requested 3.342 CF5 = ±2 4 CF5
	Base Fee \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	1st CFS/AF 250 Total Exam Fees \$ 2 and 2000
•:	3 Addtn'l CFS/AR @250 = 750 Total Paid \$ 2400 Amount Due \$ Aze Fees PAD 400 Amount Returned \$ Returned \$
	Reviewed by: 17-2010 Date: 2-19-2010

STATE OF OREGON

WATER RESOURCES DEPARTMENT

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

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