

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **99453** 725 Summer St. N.E. Ste. A INVOICE # _____
 SALEM, OR 97301-4172
 (503) 986-0900 / (503) 986-0904 (fax)

RECEIVED FROM: Roger N. Smith APPLICATION G-17325
 BY: Associates, Inc. PERMIT _____
 TRANSFER _____

CASH: CHECK:# 7537 OTHER: (IDENTIFY) _____
 TOTAL REC'D \$ 1250.00

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 PCA-46111

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	\$ <u>1250.00</u>	0204	\$ _____
0205 TRANSFER	\$ _____		

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: **99453** DATED: 3-22-10 BY: [Signature]

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

GEOTHERMAL

Application G 17325 County MULT. Priority Date 3-22-2010
Township 15 Range 1E Section 11 NW 1/4 NE 1/4
Amount 0.22 CFS Use LOW TEMP GEOTHERMAL 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) *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 under the PROPOSED Reservoir application (E2).*

The proposed source is (circle one) is not (circle one) GW withdrawn from further appropriation.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. STATES YES!

~~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 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. YES

Proposed use of water. If supplemental, list primary acreage.

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 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.

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.

The map must meet all the minimum requirements of OAR 690310-0050. SEVERAL MAPS -

- 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. 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, if for irrigation, nursery, or agriculture GEOTHERMAL
- Other _____

Fees: Amount of water requested 11.22 CFS

Base Fee \$ <u>1000</u>	Additional Use @ _____
1st CFS/AF <u>250</u>	Total Exam Fees \$ <u>1250</u>
Addn'l CFS/AF @ _____	Total Paid \$ <u>1250 CK #1</u>
Addn' POD @ _____	Amount Due \$ <u>REC FEE DUE</u>
	Amount Returned \$ _____

Reviewed by: HTM Date: 3-23-2010
Quinn Clark J. Sauter