

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **99430**

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

INVOICE # _____

RECEIVED FROM: ADKINS	APPLICATION G1739
BY: Consulting Engineers, Inc.	PERMIT
	TRANSFER
CASH: <input type="checkbox"/> CHECK:# 42426 OTHER: (IDENTIFY) <input type="checkbox"/>	TOTAL REC'D \$1750⁰⁰

1083 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES	\$
OTHER: (IDENTIFY)	\$
0243 I/S Lease	
0244 Muni Water Right	

**RECEIVED
OVER THE COUNTER**

4270 WRD OPERATING ACCT

MISCELLANEOUS			
0407 COPY & TAPE FEES	46111		\$
0410 RESEARCH FEES			\$
0408 MISC REVENUE: (IDENTIFY)			\$
TC162 DEPOSIT LIAB. (IDENTIFY)			\$
0240 EXTENSION OF TIME			\$
WATER RIGHTS:		EXAM FEE	RECORD FEE
0201 SURFACE WATER		\$	0202 \$
0203 GROUND WATER		\$1750⁰⁰	0204 \$
0205 TRANSFER		\$	
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)		

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: **99430** DATED: **3.22.10** BY: **LTG**

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

STANDARD SUBMITTED WITH DROUGHT ALSO.

Application G-17319 County KLAM Priority Date 3-22-2010

Township 39 S Range 10 E Section 33

Amount 1.62 CFS Use Suppl. IR Watermaster Dist. # 17

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- The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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.
 - 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, assigned 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. *ENCLOSED WITH NEW APPLIC DESIGN*
 - 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} 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} 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.

- 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
- Other MAP BY ADKINS CONSULT/ENGRS

○ Fees: Amount of water requested 1.62 CFS

CIC # 1750 For

Base Fee \$ <u>1000</u>	Additional Use @ <u> </u>	<u>1500</u>
1st CFS/AF <u>250</u>	Total Exam Fees \$ <u>1750</u>	<u>250</u>
1 Addtn' CFS/AF @ <u>250 = 250</u>	Total Paid \$ <u>1750</u>	<u>1750</u>
1 Addtn' POA @ <u>250 = 250</u>	Amount Due \$ <u>Rec Fee 400</u>	
	Amount Returned \$ <u> </u>	

Reviewed by: ATM

Date: 3-22-2010