Standard Application Completeness Checklist
Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRDstaff CESTURE
II) ECONDAN
Application S 87598 County Donc Priority Date MY 3 2010
Township 3/8 Range 4 W Section 33
Amount 7.5 At Use IRIG ARRES Watermaster Dist. # 15
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 nder 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The proposed source is or is not circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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. 574785
O If applicant does not own all the land, the affected landowners name and mailing address must be listed.
O 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 other work must be submitted.
O. 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 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").

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.
6	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.
6f 1	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.
of	The map must meet all the minimum requirements of OAR 699310-0050.
	O Location of main canals, ditches pipelines or flumes (if POA/POD is outside of POU) O Place of use, 1/4, 1/4's and tax lot clearly identified O Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.) O 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. O Reference corner on map O North Directional Symbol O Number of acres per 1/4, 1/4, iffor irrigation, nursery, or agriculture O Other
b	Fees: Amount of water requested 7-5
	Base Fee \$ 400 Additional Use @
රි	1st (F) 200 200 25 Total Exam Fees \$ 600
. ,	Addin'l CFS/AF @ Total Paid \$ 1000 1006 Amount Due \$ Acc See S (A-1) 1006 Amount Returned \$
,	Reviewed by: \(\frac{1}{1} \text{Date} : \(\frac{5-03-2010}{1} \)

STATE OF OREGON

WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # INVOICE # _____ SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) Marc E. Eastman **APPLICATION** RECEIVED FROM: PERMIT BY: **TRANSFER** OTHER: (IDENTIFY) CASH: CHECK:# TOTAL REC'D 4170 WRD MISC CASH ACCT 1083 **TREASURY** \$ 0407 COPIES \$ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan____ 0243 I/S Lease _ 0245 Cons. Water **4270 WRD OPERATING ACCT MISCELLANEOUS** \$ 0407 COPY & TAPE FEES \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ TC162 DEPOSIT LIAB. (IDENTIFY) 0240 EXTENSION OF TIME RECORD FEE WATER RIGHTS: **EXAM FEE** 0201 SURFACE WATER 0202 0203 **GROUND WATER** 0204 0205 TRANSFER LICENSE FEE WELL CONSTRUCTION **EXAM FEE** 0219 0218 WELL DRILL CONSTRUCTOR \$ 0220 LANDOWNER'S PERMIT OTHER 0437 WELL CONST. START FEE TREASURY 0536 0211 WELL CONST START FEE CARD# 0210 MONITORING WELLS \$ CARD# OTHER (IDENTIFY) 0607 **TREASURY** 0467 HYDRO ACTIVITY LIC NUMBER \$ POWER LICENSE FEE (FW/WRD) 0233 \$ 0231 HYDRO LICENSE FEE (FW/WRD) \$ HYDRO APPLICATION TREASURY OTHER / RDX ____ TITLE **FUND**

RECEIPT:

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DATED: 5 -3-10 BY

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