G-17395

SEVEN HILL AUDORATIOS

CHATTLEA B. SE.47 Ac/AT.

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Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.615)

Include this checklist with the application

Check that each of the following items is included. The application will be returned if all required items are not included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900.

K)	SECTION 1: applicant information and signature	
X	SECTION 2: property ownership	STORAGE GW
	SECTION 3: well development	100000 BACE
翔,	SECTION 4: water use	500 10AFX25
$ ot \!\!\!/ $	SECTION 5: water management	39 3844×1
	SECTION 6: storage of groundwater in a reservoir	400 ADDL STORAGE AREAS. 750 SANDL-WELLS
\boxtimes	SECTION 7: use of stored groundwater from the reservoir	Name of the Control o
\boxtimes	SECTION 8: project schedule	2689 GYAN
\boxtimes	SECTION 9: remarks	400 RECORDING
	SECTION FILE	3089 TOTAL
		4250 RETURNIN

Attachments:

Land Use Information Form with approval and signature (must be an original) or signed receipt

Provide the legal description of: (1) the property from which the water is to be diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used as depicted on the map.

Fees - Amount enclosed: \$7,339

See the Department's Fee Schedule at www.oregon.gov/owrd or call (503) 986-0900.

	Provide a map and check that each of the following items is include	d:			
$ ot\!\! egin{array}{c} $	Permanent quality and drawn in ink	RECEIVED			
\mathbf{z}	Even map scale not less than $4" = 1$ mile (example: $1" = 400$ ft, $1" = 1320$ ft, etc.)	JUN 0 3 2010			
\boxtimes	North Directional Symbol				
	Township, Range, Section, Quarter/Quarter, Tax Lots	WATER RESOURCES DEPT			
囟	Reference corner on map	, 550,,			
	Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west). Each well must be identified by a unique name and/or number.				
X	Indicate the area of use by Quarter/Quarter and tax lot clearly identified				
Ø	Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery				
Ø	Location of main canals, ditches, pipelines or flumes (if well is outside of the area of	of use)			
	Other				

STATE OF OREGON

RECEIPT # 100143

WATER RESOURCES DEPARTMENT
725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172 INV

INVOICE # __

	(503) 98	86-0900 / (503)) 986-0904 (fa:	x)		
ECEIVED FROM: /:	North Slope Managemen			PERMIT TRANSFER		G17395
ASH: CHĘCI	K:# 19270	DENTIFY)		DE 4.0048.88	HEC'D	\$73399
1083 TR	EASURY 4170	WRD MIS	SC CASH /	ACCT		
	OPIES THER: (IDENTIFY)) _				\$
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	4270	WRD OP	ERATING	ACCT	. Ant.A	
0407 CC	SCELLANEOUS DPY & TAPE FEES ESEARCH FEES	46111				\$
0408 MI	ISC REVENUE: (IDENTIF EPOSIT LIAB. (IDENTIFY)	,				\$
0240 EX	KTENSION OF TIME ATER RIGHTS:	- T	EXAM FEE			\$ REGORD FEE
0203 GF	JRFACE WATER ROUND WATER RANSFER	9	6939,9 5	02		\$40000
0218 WI	ELL CONSTRUCTION ELL DRILL CONSTRUCTO ANDOWNER'S PERMIT	DR S	EXAM FEE	02 02		\$ \$
	THER (IDENTI	IFY)				
0536 TR	EASURY 0437	WELL CO	DNST. STA	RT FEE		
0210 MC	ELL CONST START FEE ONITORING WELLS THER (IDENTI	5	\$		CARD#	
0607 TR	EASURY 0467	HYDRO /	ACTIVITY	LIC NUM	/BER	
0233 PC 0231 HY	OWER LICENSE FEE (FW/ YDRO LICENSE FEE (FW/ YDRO APPLICATION	(WRD)				\$ \$
TR	EASURY	OTHER/	RDX	1 1	Source Services	
FUNDOBJ. CODE	TITLE					\$