

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **100410**

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

INVOICE # _____

RECEIVED FROM: HEARD FARMS,
BY: INC,

APPLICATION	<u>R 87633</u>
PERMIT	
TRANSFER	

CASH: CHECK:# 10248 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1800.00

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 46111

0407	COPY & TAPE FEES	\$
0410	RESEARCH FEES	\$
0408	MISC REVENUE: (IDENTIFY)	\$
TC-162	DEPOSIT LIAB. (IDENTIFY)	\$
0240	EXTENSION OF TIME	\$

WATER RIGHTS:

0201	SURFACE WATER <u>AIT/RES</u>	EXAM FEE	0202	RECORD FEE
		\$ <u>1400.00</u>		\$ <u>400.00</u>
0203	GROUND WATER	\$	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 _____ \$ _____

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DATED: 6-29-10 BY: RR

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

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87633 County Doug Priority Date 6-29-2010

Township 26 S Range 5 W Section 6

Amount (AF) 44 Use MULTI-P Watermaster DIST # 15

~~Brook Geffen~~ Jeana Eastman ~~Joel Plaha~~ Kerry Kavanagh Michele McAleer

*Minimum Requirements (ORS 537.409)

- Landowner Name, Mailing Address* and Telephone Number.
- Source* and tributary listed. **NO WELLS-MUST HAVE GW APP TO USE A WELL AS A SOURCE !!**
- Reservoir Location- Township, Range, Section, Quarter Quarter, Taxlot
- Dam height*, if applicable 9.9
- Total Quantity * of Storage Requested: 44
- Proposed Use of the water....Cannot accept application for use of this stored water at the same time (E2)
- Property ownership indicated? * If applicant does not own all the land, is the affected landowner's name and mailing address listed? (Including: lands not owned by applicant, upon which the source is locatedor..... that are crossed by the diversion works. This includes any roads or rights-of-way.)
- Environmental Impact section completed? Not fatal if omitted
- Application signed by the landowner(s)? All parties noted as applicants must sign the application. *Must be an original "wet" signature.*
- Completed Land-Use Form ^(AW-UG-6001 LP) or receipt signed by the appropriate planning department official enclosed? *Does the use on land-use form match the proposed use on the application? Must be an original "wet" signature within the last 12 months.*
- Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant.

- Reservoir Location - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)*
- Scale of the Map (not less than 1"-1320') **
- Reference corner on map North Directional Symbol **
- 1/4's clearly identified Reservoir clearly identified *
- Dam or POD (If off channel) Location coordinates referenced to a government land survey corner* If no dam, use coordinates to center of reservoir.**

Fees enclosed*?

Base Fee\$ 300

plus\$ 1100

Permit Recording Fee \$ 400

Total Paid \$ 1800

Total Fees \$ 1800

Completeness Check by: HJM

Date: 6-29-2010