STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 101551

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

INVOICE # ___

EIVED FRO	Sorce	the	ar	1/02		RMIT NSFER	
H: C	1 8053	OTHER: (ID	DENTIFY)		TOTAL	REC'D	\$950°
1083	TREASURY	4170	WRD M	ISC CASH A	ACCT		
0407	COPIES						\$
	_ OTHER:	(IDENTIFY)					\$
0243 I/S Le	ease 024	4 Muni Wate	er Mgmt. Pla	n 02	45 Cons. W	/ater	
				PERATING			
	MISCELLANEOU	s	461	1			
0407	COPY & TAPE FE	ES	101	` (\$
0410	RESEARCH FEES	3					\$
0408	MISC REVENUE:	(IDENTIFY	()				\$
TC162	DEPOSIT LIAB. (IDENTIFY)					\$
0240	EXTENSION OF T	IME					\$
	WATER RIGHTS:			EXAM FEE			RECORD FEE
0201	SURFACE WATER	3		\$ 0 = 0	020	02	\$
0203	GROUND WATER			\$	020		\$
0205	TRANSFER			\$			
	WELL CONSTRU	CTION		EXAM FEE			LICENSE FEE
0218	WELL DRILL CON		3	\$	02	19	\$
02.0	LANDOWNER'S F		•		02:	20	\$
	OTHER	(IDENTII	=V)				
	OTTLER	(IDENTII			_		-
0536	TREASURY	0437	WELL C	ONST. STA	RT FEE		
0211	WELL CONST ST	ART FEE		\$		CARD#	
0210	MONITORING WE	ELLS		\$		CARD#	
	OTHER	(IDENTII	=Y)				
0007				AOTIVITY	LIC NUN	4DED	
0607	TREASURY			ACTIVITY	LIC NON	MDE-U	\$
0233	POWER LICENSE	•		-			\$
0231	HYDRO LICENSE	. FEE (FVV/V	VHD)	L			
	HYDRO APPLICA	TION		_			\$
	TREASURY		OTHER	/ RDX			
FUND		_ TITLE _					
OBJ. COD	E	_ VENDO	R #				
							\$
DESCRIP	IIOI						

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

This is the checklist used by WRDstaff

			. /					,		
Application	2	8766	53 0	ounty _	LA	1€	Priority I	Date 16	V 3 2	010
Township		175	Ra	inge	10 /		_Section	2	<u></u>	<u>.</u>
Amount <u>a.</u>	015	CFEU	se D	mo	EXMAN	<u>P</u> € N Wa	termaster D	ist. # <u>2</u>		
Caseworker A	Assign	ed	•							
A STATE OF THE PARTY OF THE PAR		Jeana Ea	astman	D.Jor	Plaber	□ Kerr	y Kavanagh	□ Mio	chele McAl	eer
Applicant/	Organ	nization Na	me, Maili	ng Addre	ss, and Tel	ephone N	lumber.			
Source of agreement for be filed at the the PROPOSI	store same	d water mu time as a R	st be inch <i>leservoir</i>	uded. (Ol or Alt Re	RS 537.400)) <i>NOTE:</i>	A surface w	ater appli	cation can	
ORS 538, negative I	then in	return appli l be issued.	cation an	cle one) v d fees. If	withdrawn : it is withd	from furtl rawn by o	her appropriation	ition. If it		
Property o	wners	hip indicate	ed.	5774	787	YES	. /		• •	
- bif	applic	ant does no	t o wn all	the land,	the affects	ed landow	vners name ar	nd mailing	g address m	ust be listed
∫ au	ıthoriz		easemen				declaring the cossed by the			
O Groundwat	ter dev	elopment s	ection (P	age 3 and	4, Section	B) or a w	ell log repor	t.		
Proposed u	ise of	water. If su	pplement	al, list pr	imaryacrea	ıge.				
O Enclosed S	Supple	mental For	m for eac	h propos	ed use.					
V/R 10 F0	rm I (Irrigation)		O For	m M (Mun	icipal or	QuasiMunic	ipal)		
O Fo	rm R	(Mining)		O For	m Q (Com	mercial o	r Industrial)	,		
O Sp	ring D	escription	Sheet							
Amount of	water	r from each	source in	gallons _l	per minute	(GPM),	cubic feet per	r second (CFS), or ac	re feet (AF)
Period of	use									
Water man	nagem	ent section	(Please e	estimate i	f the water	system h	as not been	designe)d		
Resource 1	Protec	tion Section	n (Page 6	Section	5).	£ .				
Project scl	hedule	(If system	is alread	y comple	ted, indica	te "existir	ng").			

0		o storemore than 9.2 acre feet, and adam beight of more than 10 am and impoundment are required In addition, the map must be
4	11	nt (include title or authority if for an organization or corporation, st be an original "wet" signature. Copies cannot be accepted.
+	The Legal description includes a metes and boudeed, land sales contract or title insurance polireport prepared by a title company. The Depart	properties involved where water is diverted, crossed and used. ands, or other government survey description. A copy of the cy can provide this information, or you may submit a lot book ment will not accept a copy of the tax birl.
4	Please be certain that the Land-Use form lists	and dated by the appropriate planning department officials. all lands involved and all uses proposed Date of signature must e an original "wet" signature. Copies cannot be accepted.
4	The map must meet all the minimum requirement	ents of OAR 690310-0050.
	Reference corner on map O North Directional Symbol	dentified example: 1" = 100 ft, 1" = 200 ft, etc.) damby reference to a recognized public land by labeled, and identified on well logs if
/	Number of acres per 1/4, 1/4, iffor irrigation Other	
	O Other E. D	M, WORBE
D	Fees: Amount of water requested 0,01	5 CF5" 10 10 10 10 10 10 10 10 10 10 10 10 10
	Base Fee \$ 700	Additional Use @
	1st CFS/AF 250	Total Exam Fees \$ 950
`-	Addtn'l CFS/AF @= Addtn' POD @=	Total Paid \$ 950 Amount Due \$ New Fee Due Amount Returned \$
,	Reviewed by: $\sqrt{7}$	Date: Nov 3, 2010

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