# Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

Kerry

Application $4-17439$ County	CLAC	Priority Date 11-24-	10
Township 35 Range 1	E	Section 2/	<u>.                                    </u>
Amount SOO GOW Use As	Trus	WM Dist #	
Caseworker Assigned O Jeana Eastman	Kerry Kavanagh	O Michele McAleer	-
Applicant/Organization Name, Mailing Addr	ess, and Telephone N	lumber.	
Source of water. If stored water, is the stored agreement for stored water must be included. (O be filed at the same time as a Reservoir or Alt Retthe PROPOSED Reservoir application (E2).	RS 537.400) <i>NOTE:</i>	A surface water application co	innot
ORS 538, then return application and fees. I negative IR will be issued.		1 1 1	
Property ownership indicated.			
O If applicant does not own all the land	, the affected landow	ner's name and mailing address	must be listed.
<ul> <li>If applicant does not own all the land authorization or an easement permit work must be submitted.</li> </ul>		•	
Well Development (Section 3) or a well log re	eport.		
Proposed use of water. If supplemental, list p	rimary acreage.		
O Enclosed Supplemental Form for each propos	sed use.		
O Form I (Irrigation) Q. Fo	orm M (Municipal or	Quasi-Municipal)	M
O Form R (Mining)	Not Requires - Yevan orm Q (Commercial o	Recons (RE-ALL Q & ANSTHEADS)	ou App ///24/2010
O Spring Description Sheet			
Amount of water from each source in gallons	per minute (GPM), o	cubic feet per second (CFS), or	acre feet (AF)
Period of use			4 - 4 t
Water management section (Please estimate	if the water system ha	as not been designed).	
Resource Protection Section			
Project schedule (If system is already comple	eted, indicate "existin	g").	

# 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.

$\boxtimes$	SECTION 1: applicant information and signature						
$\boxtimes$	SECTION 2: property ownership	TON 2: property ownership					
$\boxtimes$	SECTION 3: well development						
$\boxtimes$	SECTION 4: water use						
$\boxtimes$	SECTION 5: water management	RECEIVED NOV 2 4 2010					
$\boxtimes$	SECTION 6: storage of groundwater in a reservoir						
$\boxtimes$	SECTION 7: use of stored groundwater from the reservoir	WATER RESOURCES DEPT					
$\boxtimes$	SECTION 8: project schedule	SALEM, OREGON					
$\boxtimes$							
	Attachments:						
$\boxtimes$	Land Use Information Form with approval and signature (must be a	n original) or signed receipt					
$\boxtimes$	Provide the legal description of: (1) the property from which the wa	vide the legal description of: (1) the property from which the water is to be diverted, (2) any property sed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used					
$\boxtimes$	Fees - Amount enclosed: \$1750.00 See the Department's Fee Schedule at <a href="https://www.oregon.gov/owrd">www.oregon.gov/owrd</a> or call (503) 986-0900.						
	Provide a map and check that each of the following	tems is included:					
$\boxtimes$	Permanent quality and drawn in ink						
$\boxtimes$	Even map scale not less than $4" = 1$ mile (example: $1" = 400$ ft, $1" = 400$ ft.	= 1320 ft, etc.)					
$\boxtimes$	North Directional Symbol						
$\boxtimes$	Township, Range, Section, Quarter/Quarter, Tax Lots						
$\boxtimes$	Reference corner on map						
$\boxtimes$	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.						
$\boxtimes$	Indicate the area of use by Quarter/Quarter and tax lot clearly identi	Indicate the area of use by Quarter/Quarter and tax lot clearly identified					
$\boxtimes$	Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery						
$\boxtimes$	Location of main canals, ditches, pipelines or flumes (if well is outs	ide of the area of use)					
	Other						

Revised 3/4/2010 G-17439 Ground Water/2 WR

#### STATE OF OREGON

### WATER RESOURCES DEPARTMENT

RECEIPT # 101711

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

INVOICE # \_\_\_\_\_

			0900 / (503) 986-0904 (fa 						
RECEIVED FRO	M: Mon	HECU	CO Tark	S APPLICATION	6/7439				
BY:				PERMIT					
CASH: C	HECK:#	OTHER: (IDE	NTIFY)	TRANSFER					
	7194			TOTAL REC'D	\$175000				
1083 TREASURY 4170 WRD MISC CASH ACCT									
0407	COPIES		RECEIVED		\$				
	OTHER:	(IDENOVE		NTFR.	\$				
OTHER: (IDENOVER THE COUNTER  0243 I/S Lease 0245 Cons. Water									
			VRD OPERATING						
	MISCELLANEO	US							
0407	COPY & TAPE F	EES	46111		\$				
0410	RESEARCH FE	ES	74/111		\$				
0408	MISC REVENUE	: (IDENTIFY)		<del></del>	\$				
TC162	DEPOSIT LIAB.	(IDENTIFY)			\$				
0240	EXTENSION OF	TIME			\$				
	WATER RIGHTS	<b>:</b> :	EXAM FEE		RECORD FEE				
0201	SURFACE WATE	ER	\$	0202	\$				
0203	GROUND WATE	R	\$ / 750	0204	\$				
0205	TRANSFER		\$						
	WELL CONSTR	UCTION	EXAM FEE		LICENSE FEE				
0218	WELL DRILL CO	NSTRUCTOR	\$	0219	\$				
	LANDOWNER'S	PERMIT		0220	\$				
	OTHER	(IDENTIFY)							
0536	TREASURY	0437 V	ELL CONST. STA	RT FFF	t				
0211	WELL CONST S								
0210	MONITORING W		\$ \$	CARD#					
0210				CAND #					
OTHER (IDENTIFY)									
0607	TREASURY	0467 H	YDRO ACTIVITY	LIC NUMBER	<u></u>				
0233	POWER LICENS	E FEE (FW/WR	D)		\$				
0231	HYDRO LICENS	E FEE (FW/WR	D) _		\$				
	HYDRO APPLIC	ATION			\$				
	TREASURY	0	THER / RDX						
FUND		TITLE							
DESCRIPT					\$				
DESCRIPT									
			11 2/1 1/2	5					
ECEIPT: 1	01711	DATED	: 11 - XT-1 BY:						
Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal									