Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537,400)						
This is the checklist used by WRD staff						
II ECONDARY						
Application 5-87723 County Marrow Priority Date 5-18-2011						
Township Coare Range Review Section MAC						
Amount 3736 AF Use INDUSTRIAL WM Dist # 21						
Caseworker Assigned O Jeana Eastman O Kerry Kavanagh O 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 under the PROPOSED Reservoir application (E2).						
The proposed source is a is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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. 574725 No.						
If applicant does not own all the land, the affected landowner's name and mailing address must be liste						
If applicant does not own all the land, a signed 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 Well Development (Section 3) or a well log report.						
Proposed use of water. If supplemental, list primary acreage.						
Enclosed Supplemental Form for each proposed use.						
O Form I (Irrigation) O Form M (Municipal or Quasi-Municipal)						
O Form R (Mining) 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						
Project schedule (If system is already completed indicate "existing")						

	dam delent, which, crest which and sur	ace area for cach reservon				
for all standard reservoit applications						
O A	d reservoir application proposing to store m	ore than 0.7 acres fort and				
having a dam height of more than 10 feet	d reservoir apprecation proposing to store in	Ole man 2.2 mile 1000 and				
liaming a dain neight dranoic dian 10 1001						
All applicants or the applicant's authorized	l agent (include title or authority if for an or	panization of corporation).				
	e must be an original "wet" signature: Cop					
	4					
You must include a Legal description of al	I the properties involved where water is dive	erted, crossed, and used.				
	d bounds, or other government survey descr					
deed, land sales contract or title insurance policy can provide this information, or you may submit a lot book						
	<u>epartment will not accept a copy of the tax b</u>					
NOT REQUIRED	EFSC Through Dot Averes oned and dated by the appropriate planning of	JU OK				
A completed Land-Use Form or receipt sig	med and dated by the appropriate planning of	lepartment officials.				
	lists all lands involved and all uses propose sust be an original "wet" signature. Copies					
be within the past 12 months, signature in	usi de un original wei signalure. Copies	curriot de accepteu.				
The map must meet all the minimum require	rements of OAR 690-310-0050					
4 LARGE	OVERSIZE MAS					
Township, Range, Section						
	elines or flumes (if POA/POD is outside of F	,OU) · · · · · ·				
Place of use, 1/4, 1/4's and tax lot clea	· ·	17-1				
	nile (example: 1" = 100 ft, 1" = 200 ft, etc.)					
	l or dam by reference to a recognized public iquely labeled, and identified on well logs if					
existing.	iquely labeled, and identified on well logs it					
Reference comer on map						
North Directional Symbol						
- O Number of acres per 1/4, 1/4, if for III	igation, nursery, or agriculture INDUSTRIA	74 -				
O Other						
		3736				
		37/6				
/ (E-2)		3716				
Fees: Amount of water requested 37	36 AT	• • • • •				
Correct		0.4				
Base Fee \$ 400	Additional Use-@ =	900				
20 0 15/AF@ 25 = 500	Total Exam Fees \$	7716 4616				
	10m Dami 1005 \$	4616				
3716 Addm'1 CPS/ AF @ 4/ = 3716						
Addtn' POD/POA 😂=	Amount Due \$	+ 400				
	Amount Returned \$	REC FEE				
Reviewed by: 7711	Date: 5-18-2011	#5016				
J. SAUTER						
Froups\wr\Customer Service Group\templates\s	tandard app checklist	I-9-2010 jks				

Minimum Requirements Checklist
Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.140)

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	RECEIVED				
\boxtimes	SECTION 3: source of water requested	MAY 1 8 2011				
\boxtimes	SECTION 4: water use	WATER RESCURCES DEPT				
\boxtimes	SECTION 5: water management	SALEM, OREGON				
\boxtimes	SECTION 6: resource protection					
\boxtimes	SECTION 7: project schedule					
\boxtimes	SECTION 8: remarks					
	Attachm					
\boxtimes	Land Use Information Form with approval and sign This form is not required. Determination will be m ORS 469.378.	ature (must be an original) or signed receipt NOTE: ade by Energy Facility Siting Council, pursuant to				
\boxtimes	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. See Attachment 1 (1975 Bargain and Sale Deed) and Attachment 2 (Place of Use Legal Description).					
\boxtimes	Fees - Amount enclosed: \$ 5,016 See the Department's Fee Schedule at <u>www.oregon</u>	.gov/owrd or call (503) 986-0900.				
	Provide a map and check that each o	f the following items is included:				
\boxtimes	Permanent quality and drawn in ink					
\boxtimes	Even map scale not less than $4" = 1$ mile (example: $1" = 400$ ft, $1" = 1320$ ft, etc.)					
\boxtimes	North Directional Symbol					
\boxtimes	Township, Range, Section, Quarter/Quarter, Tax Lo	ots				
\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)					
\boxtimes	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 Not Applicable					
\boxtimes	Location of main canals, ditches, pipelines or flume	es (if well is outside of the area of use)				
	Other:					

S-87723 Revised 2/23/2010 Surface Water/2 WR

STATE OF OREGON

RECEIPT#	102920		St. N.E. Ste. A 97301-4172	INVOICE #	
RECEIVED FRO	Elect	General Co	al	APPLICATION PERMIT TRANSFER	S 87723
CASH: C	70832	OTHER: (IDENTIFY)		TOTAL REC'D	\$501000
1083	TREASURY	4170 WRD	MISC CASH A	ACCT	_
		DENTIFY)	RECEI	VED-	\$
0243 I/S L	ease 0244	Muni Water Mg	ER THE	COUNTER	<u>—</u>
		4270 WRD	OPERATING	ACCT	
0407 0410 0408 TC162 0240 0201 0203 0205	MISCELLANEOUS COPY & TAPE FEE RESEARCH FEES MISC REVENUE: DEPOSIT LIAB. (IE EXTENSION OF TI WATER RIGHTS: SURFACE WATER GROUND WATER TRANSFER WELL CONSTRUCT WELL DRILL CONS LANDOWNER'S PE OTHER	(IDENTIFY) DENTIFY) ME TION STRUCTOR	EXAM FEE \$ 4016 \$ \$ EXAM FEE \$	0204	\$ \$ \$ \$ \$ RECORD FEE \$ \$ LICENSE FEE \$ \$
0536	TREASURY	0437 WELL	CONST. STA	RT FEE	_
0211 0210	WELL CONST STA MONITORING WEI		\$	CARD #	
0607	TREASURY	0467 HYDR	O ACTIVITY	LIC NUMBER	
0233 0231	POWER LICENSE HYDRO LICENSE HYDRO APPLICAT	FEE (FW/WRD) FEE (FW/WRD)			\$ \$
	TREASURY	OTHE	R / RDX		
OBJ. COD	E	TITLE		_	\$

RECEIPT:

102920 DATED: 5 · 18 · 11 BY: 4 A BY: 4 BY