

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **103330** 725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax) INVOICE # _____

RECEIVED FROM: Ron & Bonnie Atkinson	APPLICATION S-87736
BY: John Atkinson	PERMIT
	TRANSFER
CASH: ☐ CHECK # 11621 OTHER: (IDENTIFY) ☐	TOTAL REC'D \$ 800.00

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
0407 COPY & TAPE FEES \$ **46111/46111**
0410 RESEARCH FEES \$
0408 MISC REVENUE: (IDENTIFY) \$
TC162 DEPOSIT LIAB. (IDENTIFY) \$
0240 EXTENSION OF TIME \$

WATER RIGHTS:		EXAM FEE	RECORD FEE
0201	SURFACE WATER	\$ 400.00	\$ 400.00
0203	GROUND WATER	\$	\$
0205	TRANSFER	\$	

WELL CONSTRUCTION		EXAM FEE	LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	\$	\$
	LANDOWNER'S PERMIT		\$

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 \$

RECEIPT: **103330** DATED: **7.7.11** BY: **LAB**

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

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **103331** 725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax) INVOICE # _____

RECEIVED FROM: Doris Cooper	APPLICATION S-87736
BY: DOI - BLM	PERMIT
	TRANSFER
CASH: ☐ CHECK # 11605 OTHER: (IDENTIFY) ☐	TOTAL REC'D \$ 800.00

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
0407 COPY & TAPE FEES \$ **46111**
0410 RESEARCH FEES \$
0408 MISC REVENUE: (IDENTIFY) \$
TC162 DEPOSIT LIAB. (IDENTIFY) \$
0240 EXTENSION OF TIME \$

WATER RIGHTS:		EXAM FEE	RECORD FEE
0201	SURFACE WATER	\$ 800.00	\$
0203	GROUND WATER	\$	\$
0205	TRANSFER	\$	

WELL CONSTRUCTION		EXAM FEE	LICENSE FEE
0218	WELL DRILL CONSTRUCTOR	\$	\$
	LANDOWNER'S PERMIT		\$

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 \$

RECEIPT: **103331** DATED: **7.7.11** BY: **LAB**

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Standard Application Completeness Checklist

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

This is the checklist used by WRD staff.

RETAIN
OF A

RETURN

Application 5-87736

County HARNEY

Priority Date 7-7-2011

Township 31 S

Range 35 E

Section 16 & 30

Amount

Use LIVESTOCK

WM Dist # 10

Caseworker Assigned

☐ Jeana Eastman

☒ Kerry Kavanagh

☐ Michele McAleer

☒ (2) 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 or 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.

STATES BOTH YES & NO!

☒ If applicant does not own all the land, the affected landowner's name and mailing address must be listed.

☒ 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.

☐ ~~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.~~

N/R ☐ ~~Form I (Irrigation)~~

☐ ~~Form M (Municipal or Quasi-Municipal)~~

☐ ~~Form R (Mining)~~

☐ ~~Form Q (Commercial or Industrial)~~

☒ 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").

- ☐ Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir for all standard reservoir applications
- ☐ A map prepared by a CWRE for a standard reservoir application proposing to store more than 9.2 acre feet and having a dam height of more than 10 feet

☒ All applicants or the applicant's authorized agent (include title or authority if for an organization or corporation), must sign the application in ink. *Signature must be an original "wet" signature. Copies cannot be accepted.*

☒ You must include a Legal description of all the properties involved where water is diverted, crossed, and used. The Legal description includes a metes and bounds, or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or you may submit a lot book report prepared by a title company. The Department will not accept a copy of the tax bill.

☒ A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. *Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted.*

☒ The map must meet all the minimum requirements of OAR 690-310-0050.

- ☒ Township, Range, Section
- ☒ Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)
- ☒ Place of use, 1/4, 1/4's and tax lot clearly identified
- ☒ Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)
- ☒ Location of each diversion point, well or dam by reference to a recognized public land survey corner. Multiple wells shall be uniquely labeled, and identified on well logs if existing.
- ☒ Reference corner on map
- ☒ North Directional Symbol
- ☒ Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture
- ☐ Other _____

☒ 2 STRINGS
Fees: Amount of water requested _____

2 SEPARATE CHECKS
EACH \$800
TOTAL \$1600

Base Fee \$ 700
1st CFS/AF 250
Addn'l CFS/AF @ _____ = _____
1 Addn' POD/ROA @ 250 = 250

~~Additional Use @ _____~~
Total Exam Fees \$ 1200
Total Paid \$ 1600
Amount Due \$ ALL FEES PAID
Amount Returned \$ _____

Reviewed by: HTM

Date: 7-7-2011

TOTAL
ORIGINAL
REQUEST
0.0184
gpm