STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 103362 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # _____

		(,		03) 986-0904 (fax	·,		-	
Dance + C, J.						APPLICATION S-8773		
						RMIT		
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1083	TREASURY	4170	WRD M	IISC CASH A	CCT			
0407	COPIES						\$	
	OTHER: (IDENTIFY)					\$	
0243 I/S Le	ease 0244					Vater		
_		4270	WRD 0	PERATING A	ACCT			
	MISCELLANEOUS		461	l (Φ.	
0407	COPY & TAPE FE		ושו				\$	
0410	RESEARCH FEES						\$	
0408 TC160	MISC REVENUE:				\$			
TC162 0240	DEPOSIT LIAB. (I EXTENSION OF T	•		-			\$	
0240		IIVIE			_		RECORD FE	
0004	WATER RIGHTS:			EXAM FEE		00	\$	
0201 0203	SURFACE WATER			\$ 9509	02		\$	
0203	GROUND WATER TRANSFER			\$	02	04	<u> </u>	
0205		DT1011		\$ EXAM FEE			LICENSE FEI	
0010	WELL CONSTRUCT WELL DRILL CON		n	\$	— ₀₂	19	\$	
0218	LANDOWNER'S P		n	Ψ	02		\$	
	OTHER	(IDENTII	-Y)					
0536	TREASURY	0437	WELL (CONST. STA	RT FEE	ı		
0211	WELL CONST STA	ART FEE		\$		CARD#		
0210	MONITORING WE	LLS		\$		CARD#		
	OTHER	(IDENTII	=Y)					
0607	TREASURY	0467	HYDRO	ACTIVITY	LIC NUM	/BER		
0233	POWER LICENSE			AGIIIII			\$	
0231	HYDRO LICENSE	,					\$	
	HYDRO APPLICA	•	- /	_			\$	
	'	11014	OTHER	(DDV				
	TREASURY		OTHER	/ KDX				
FUND		_ TITLE _						
OBJ. COD	E	_ VENDO	ጓ #					
	ION						\$	

Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff Application S 87737 County Carry Priority Date 7-11-11 38 S Range 14 W Section PRIM Amount (, 10 CFS Use May Michele McAleer Caseworker Assigned O Jeana Eastman O Kerry Kavanagh 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the use of the stored water under the PROPOSED Reservoir application (E2): The proposed source is or is not circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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. O 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 rep Proposed use of water. If supplemental, list primary acreage. Enclosed Supplemental Form for each proposed use. Form I (Irrigation) O Form M (Municipal or Quasi-Municipal) O Form R (Mining) O 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").

\circ	Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir
:	for all standard reservoir applications
\bigcirc	1 and by COVID for a standard accounting any lighter was a last any of them 22 area foot and
O	A map prepared by a CWRE for a standard reservoir application proposing to store more than 2.2 acre feet and having a dam height of more than 10 feet
	hayang a dam norght of taoto man 10 foot
w	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.
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4	You must include a Legal description of all the properties involved where water is diverted, crossed, and used. The Legal description includes a matter and bounds, or other government guarant description. A conventition
	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.
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W	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.
b	The map must meet all the minimum requirements of OAR 690-310-0050.
	Township, Range, Section Township, Range, Section Township, Range, Section
٠.	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.)
	Docation 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 comer on map North Directional Symbol
	Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture
4. 1.	O Other Reparted, INITACED
	CO-OP - 3 Started SCANARD
·.	
(5)	Fees: Amount of water requested 0.10 CC5
	Base Fee \$ 700 Additional Use @ =
	1st CFS/AF 250 Total Exam Fees \$ 950
٠.	Addtn'l CFS/ AF @ = Total Paid \$ 9500
	Addtn' POD/POA @ = Amount Due \$ Rec Fee Due
	Amount Returned \$
	Reviewed by: 27M. Date: July 12 2011