

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **103646**

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

INVOICE # _____

RECEIVED FROM: Jonathan F Gray APPLICATION R-87745
 BY: Laurel-Anne Gray PERMIT _____
 TRANSFER _____

CASH: CHECK: # 4307 OTHER: (IDENTIFY) _____
 TOTAL REC'D \$ 750⁰⁰

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 46111

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

WATER RIGHTS:

| | | | |
|-----------------------------------|----------------------------|------|----------------------------|
| 0201 SURFACE WATER <u>Alt/Res</u> | EXAM FEE | 0202 | RECORD FEE |
| | \$ <u>350⁰⁰</u> | | \$ <u>400⁰⁰</u> |
| 0203 GROUND WATER | \$ _____ | 0204 | \$ _____ |
| 0205 TRANSFER | \$ _____ | | |

WELL CONSTRUCTION

| | | | |
|-----------------------------|----------|------|-------------|
| 0218 WELL DRILL CONSTRUCTOR | EXAM FEE | 0219 | LICENSE FEE |
| LANDOWNER'S PERMIT | \$ _____ | 0220 | \$ _____ |
| 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 (FWWRD) \$ _____
 0231 HYDRO LICENSE FEE (FWWRD) \$ _____
 HYDRO APPLICATION \$ _____

TREASURY OTHER / RDX

FUND _____ TITLE _____
 OBJ. CODE _____ VENDOR # _____
 DESCRIPTION _____ \$ _____

RECEIPT: **103646** DATED: 8/7/11 BY: [Signature]

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

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R 87745 County JACKSON
Priority Date 8-17-2011 Township 34 S Range 2 W Section 9 Taxlot 402
Use MULTI-P Caseworker MICHELLE M
Amount (AF) 2 Watermaster DIST # 13

Minimum Requirements (ORS 537.409)

- Completed Watermaster review sheet signed and dated by Watermaster.
 - Will the reservoir injure an existing water right? YES NO
 - ~~If YES, can conditions be applied to mitigate the injury? YES NO If NO, return the application.~~
 - Did the watermaster determine when water is available for the proposed use? YES NO
 - The Watermaster review sheet must have been completed within the last 6 months.*
 - If the watermaster determined that water is NOT available, return the application.
- Completed ODFW review sheet signed and dated by ODFW representative.
 - Will the reservoir pose a significant detrimental impact to an existing fishery resource? YES NO
 - If YES, can conditions be applied to mitigate the impact? YES NO ~~If NO, return the application.~~
 - The ODFW review sheet must have been completed within the last 6 months.*
- Completed Land-Use Form or receipt signed by the appropriate planning department official enclosed?
 - Does the use on land-use form match the proposed use on the application? Must be an original "wet" signature within the last 12 months.*
- Landowner Name, Mailing Address and Telephone Number.
- Source and tributary listed. **NO WELLS-MUST HAVE GW APP TO USE A WELL AS A SOURCE !!**
- Reservoir Location- Township, Range, Section, Quarter Quarter, Taxlot
- Dam height, if applicable
- Total Quantity of Storage Requested: 2 AF
- Proposed Use of the water....Cannot accept application for use of this stored water at the same time (E2)
- Property ownership indicated? If applicant does not own all the land is the affected landowner's name and mailing address listed? (Including: lands not owned by applicant, upon which the source is locatedor..... that are crossed by the diversion works. This includes any roads or rights-of-way.)
- Environmental Impact section completed?
- Application signed by the landowner(s)? All parties noted as applicants must sign the application.
Must be an original "wet" signature.
- Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant.
 - Reservoir Location - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)*
 - Scale of the Map (not less than 1" = 1320') **
 - Reference corner on map
 - North Directional Symbol **
 - 1/4's clearly identified
 - Reservoir clearly identified **
 - Dam or POD (If off channel) Location coordinates referenced to a government land survey corner* If no dam, use coordinates to center of reservoir.**
- Fees enclosed**? Examination: Base Fee\$ 300 Permit Recording Fee\$ 400
plus\$ 50
plus\$ _____

Total Paid \$ 750

Total Fees \$ 750

Completeness Check by: HJM

Date: 8-18-2011

Revised 2011-3-3