

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

RECEIPT # **104537** 725 Summer St. N.E. Ste. A  
SALEM, OR 97301-4172  
(503) 986-0900 / (503) 986-0904 (fax)

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

RECEIVED FROM: X-NOVOLLC  
BY: \_\_\_\_\_

APPLICATION	R-87769
PERMIT	
TRANSFER	

CASH:  CHECK:# 1213 OTHER: (IDENTIFY)

TOTAL REC'D \$ 525.00

**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 \$ \_\_\_\_\_  
0410 RESEARCH FEES \$ \_\_\_\_\_  
0408 MISC REVENUE: (IDENTIFY) \$ \_\_\_\_\_  
TC162 DEPOSIT LIAB. (IDENTIFY) \$ \_\_\_\_\_  
0240 EXTENSION OF TIME \$ \_\_\_\_\_

**WATER RIGHTS:**

0201 SURFACE WATER AH Res \$ \_\_\_\_\_ 0202 \$ \_\_\_\_\_  
0203 GROUND WATER \$ \_\_\_\_\_ 0204 \$ \_\_\_\_\_  
0205 TRANSFER \$ \_\_\_\_\_

**WELL CONSTRUCTION**

0218 WELL DRILL CONSTRUCTOR \$ \_\_\_\_\_ 0219 \$ \_\_\_\_\_  
LANDOWNER'S PERMIT 0220 \$ \_\_\_\_\_  
OTHER (IDENTIFY) \_\_\_\_\_

**RECEIVED  
OVER THE COUNTER**

EXAM FEE
\$ <u>525.00</u>
EXAM FEE
\$ _____

RECORD FEE
\$ _____
\$ _____
LICENSE FEE
\$ _____
\$ _____

**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: **104537** DATED: 11-28-11 BY: AR

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# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Alt Res

Application R-87769 County Polk  
 Priority Date 11-28-11 Township 75 Range 30 Section 7 Taxlot 208  
 Use multi-purpose storage sewerworker Kerry  
 Amount (AF) 9.0 Watermaster Wes Mike McCard

## 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** - 14.8 ft

**Total Quantity of Storage Requested:** 9.0 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 located

.....or..... 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 \$ 0  
 plus \$ 250.-  
 plus \$ 0

**Total Paid \$** \$525.- **Total Fees \$** \$525.00  
 Completeness Check by: Michelle Date: 11-28-11  
 Revised 2011-3-3

Runoff \$ 4 app for tile

Drain tile App - G-17494  
Well App - G-17495  
multi-purp/irr, aesthetics, agr.

Agent - letter w/ orig signature present designating the agent.

\* GW app rec'd for drain tile mentioned in description, Section 7.

RECEIVED

NOV 28 2011

WATER RESOURCES DEPT SALEM, OREGON

DW PT

Record Mgr Date

runoff, part exa,