

STATE OF OREGON
WATER RESOURCES DEPARTMENT

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

(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # **104621**

INVOICE # _____

RECEIVED FROM: CRYSTAL CLEAR ENERGY, LLC

APPLICATION G17512
PERMIT _____
TRANSFER _____

CASH: CHECK # 1010 OTHER: (IDENTIFY)

TOTAL REC'D \$ 2900⁰⁰

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:

0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
\$ _____	\$ _____	\$ _____	\$ _____
0203 GROUND WATER	EXAM FEE	0204	RECORD FEE
\$ <u>2900⁰⁰</u>	\$ _____	\$ _____	\$ _____
0205 TRANSFER	EXAM FEE		
\$ _____			

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	LICENSE FEE
\$ _____	\$ _____	\$ _____	\$ _____
LANDOWNER'S PERMIT		0220	LICENSE FEE
		\$ _____	\$ _____

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 _____ \$ _____

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WATER RESOURCES DEPARTMENT

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SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # **104656**

INVOICE # _____

RECEIVED FROM: CRYSTAL CLEAR ENERGY LLC

APPLICATION G17512
PERMIT _____
TRANSFER _____

CASH: CHECK # 1011 OTHER: (IDENTIFY)

TOTAL REC'D \$ 100⁰⁰

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:

0201 SURFACE WATER	EXAM FEE	0202	RECORD FEE
\$ _____	\$ _____	\$ _____	\$ _____
0203 GROUND WATER	EXAM FEE	0204	RECORD FEE
\$ <u>100⁰⁰</u>	\$ _____	\$ _____	\$ _____
0205 TRANSFER	EXAM FEE		
\$ _____			

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	LICENSE FEE
\$ _____	\$ _____	\$ _____	\$ _____
LANDOWNER'S PERMIT		0220	LICENSE FEE
		\$ _____	\$ _____

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: **104621**

DATED: 12-7-11 BY: RR

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

RECEIPT: **104656**

DATED: 12-12-11 BY: RR

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

Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

Application G 17512 County LAKE Priority Date Dec 7, 2011
Township 39 S Range 20 E Section 3, 4, 9, 10, 15, 16, 17, 21, 22
Amount 1500 gpm / 3.342 CFS Use HEATING / POWER / COOLING / GEOTHERMAL WM Dist # 12
Applicant Name CRYSTAL CLEAR ENERGY, LLC
Receipt No. 104621

Caseworker Assigned Jeana Eastman Kerry Kavanagh Michele McAleer

- Applicant/Organization Name, Mailing Address, and Telephone Number.
- 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.*
- 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, Expedited Secondary(E2).*

If for stored water not under contract, is the source valid / Permit or Certificate issued Y / N List Permit or Certificate number N/A

The proposed source is 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 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 (pg. 4 & 5) or a well log report. YES! CLARIFIED WITH EMAIL.

Proposed use of water. If supplemental, list primary acreage.

Supplemental data sheets enclosed if needed ?

- N/A Form M (Municipal or Quasi-Municipal)
 Spring Description Sheet

Amount of water from *each* source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)

- 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

LEGAL DESCRIPTION

- 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.

LAND-USE FORM

- 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 _____

Fees: Amount of water requested

1500 gpm / 3,342 CFS

Base Fee \$ 1000

1st CFS/AF 250

3 Addtl CFS/AF @ 250 = 750

3 Addtl POD/POA @ 250 = 750

1 Addtl Use @ 250 = 250

Total Exam Fees \$ 3000

Permit Recording Fees \$ _____

Total Paid \$ 2900 + \$100

Amount Due \$ _____

Amount Returned \$ _____

\$2250 CFS + 750 = 3000

CHK # 1 2900

*SENDING CHK for \$100
RECD CHK 2 - 100
12-12-2011 EXAM*