#### STATE OF OREGON

#### WATER RESOURCES DEPARTMENT

RECEIPT # 104898

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

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		(503) 98	86-0900 / (50	3) 986-0904 (fa	x)	
RECEIVED FROM: David A Straus APPLICATIONS 87781						
BY:	Rober	ET.		29.Pt	PERMIT	5/101
	STOP	snen	Pot	win	TRANSFER	
CASH: C	CHECK:#	S NEXT	DENTIFY)			
	X2652	· 🗀			TOTAL REC'D	\$ 2600
1083	TREASURY	4170	WRD M	ISC CASH A	ACCT	
0407	COPIES		<u> </u>			\$
0407		(IDENTIFY)				\$
	_					
0243 I/S L	.ease 024				45 Cons. Water	
		4270		PERATING	ACCT	
	MISCELLANEOU	S	46	111		
0407	COPY & TAPE FE					\$
0410	RESEARCH FEE					\$
0408	MISC REVENUE:	,	()			\$
TC162	DEPOSIT LIAB. (					\$
0240	EXTENSION OF					RECORD FEE
	WATER RIGHTS:			EXAM FEE		\$40000
0201	SURFACE WATE			\$ ZZ00°	_	\$
0203	GROUND WATER	₹		\$	0204	Ψ
0205	TRANSFER			\$		LICENSE FEE
	WELL CONSTRU	CTION		EXAM FEE	0040	
0218	WELL DRILL CON		R	\$	0219	\$
	LANDOWNER'S	PERMIT			0220	Ψ
	OTHER	(IDENTIF	=Y)			
0536	TREASURY	0437	WELL	ONST. STA	RT FFE	
0211	WELL CONST ST			\$	CARD #	
0210	MONITORING WI			\$	CARD #	
0210			=	Ψ		
	OTHER	(IDENTIF				
0607	TREASURY	0467	HYD <u>RO</u>	ACTIVITY	LIC NUMBER	
0233	POWER LICENSE	E FEE (FWΛ	NRD)	Ļ		\$
0231	HYDRO LICENSE	FEE (FW/V	VRD)	L.		\$
	_ HYDRO APPLICA	TION				\$
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	DE	_ VENDOR	ጓ #			\$
DESCRIP*	TION					<u> </u>
		_	/			7
RECEIPT: 104898 DATED: 1/23/12 BY: 24						

DATED: 104898 DATED: 16512 BY: Distribution – White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

Standard Application Completeness Uneckinst
Minimum Requirements (OAR 690-310-0040)(ORS 537.400)  This is the checklist used by WRD staff-
Application 5-87781 County Jackson Priority Date 1/23/2012
Township 35 Range 35 Section 3
Amount 1.0 cfs Use Human Consumption WM Dist # 13
Caseworker Assigned Jeana Eastman O Kerry Kavanagh O Michele McAleer
O Applicant/Organization Name, Mailing Address, and Telephone Number.
O 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).
O The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees.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.
O Property ownership indicated.
O If applicant does not own all the land, the affected landowner's name and mailing address must be listed
O 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.
O Proposed use of water. If supplemental, list primary acreage.
O Enclosed Supplemental Form for each proposed use.
O Form I (Irrigation) O Form M (Municipal or Quasi-Municipal)
O Form R (Mining) O Form Q (Commercial or Industrial)
O Spring Description Sheet
O Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
O Period of use
Water management section (Please estimate if the water system has not been designed).
O Resource Protection Section
) Project reported of gratery is already completed indicate "existing"

O Preliminary plans and specifications including dam beight, width, crest width and surface area for each reservoir
for all standard reserve if 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 1.0 feet
O 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 comer on map  North Directional Symbol  North Directional Symbol
O Other
O Fees: Amount of water requested
Base Fee \$ 100 Additional Use @=
Total Exam Fees \$ 1200   Total Paid \$ 26000   Total Paid \$ 260000   Total Exam Fees \$ 2100000   Total Paid \$ 2600000   Total Paid \$ 26000000   Total Paid \$ 2600000   Total Paid \$ 26000000   Total Paid \$ 260000000   Total Paid \$ 260000000   Total Paid \$ 260000000   Total Paid \$ 2600000000   Total Paid \$ 26000000000   Total Paid \$ 26000000000000
Reviewed by: Herr Moscar Date: 6-21-2011
573 98C 0804.  Groups\wr\Customer Service Group\templates\standard app checklist 11-9-2010 jks
CICEPOINT CONCENTRAL DOLLION OF OUR RESERVANCE PROPERTY.

# Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

Ø	Applicant/Organization Name, Mailing Address <u>United States Government, U.S. Forest Service</u>	s, and Telephone Number. Should be in the name of the e, Rogue River-Siskiyou National Forest. — Social Parts	er V
ø	• • • • • • • • • • • • • • • • • • • •	signature must be an original "wet" signature. Copies 1-2 Service Representative also required.	bed 0-12
Ð	and used. The Legal description includes a met A copy of the deed, land sales contract or title is	properties involved where water is diverted, crossed, tes and bounds, or <u>other</u> government survey description. insurance policy can provide this information, or you e company. The Department will not accept a copy of is required.	
Ø	The map must meet all the minimum requireme	ents of OAR 690-310-0050.	
	Township, Range, Section  Location of main canals, ditches, pipelines  Place of use, 1/4, 1/4's and tax lot clearly i  Even map scale not less than 4" = 1 mile (  Location of each diversion point, well or o  survey corner. Multiple wells shall be uniquel existing.  Reference corner on map  North Directional Symbol  Number of acres per 1/4, 1/4, if for irrigati  O Other	identified  (example: 1" = 100 ft, 1" = 200 ft, etc.)  dam by reference to a recognized public land  ly labeled, and identified on well logs if	
9	Fees: Amount of water requested		
•	Base Fee \$ 700.00	Additional Use @	)
	Base Fee \$ 700.000 1st CFS/AF \$ 250.000	Total Exam Fees \$ 2200. The reco	-lin
	Addtn'l CFS/ AF @	Total Paid \$ 2600.5	<u> </u>
	5 Addtn' POD @ 250 = 1250	Amount Due \$	
	Stored Water @ _Stored Water @	Amount Returned \$	>
	Reviewed by: He Mosar	Date: June 21, 2011 1-23-12	
Gro	oups\wr\Customer Service Group templates\stan	dard app checklist 5-18-2010 jks	

## **Standard Application Completeness Checklist**

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)
This is the checklist used by WRD staff

О	Applicant/Organization Name, Mailing Address <u>United States Government</u> , U.S. Forest Service		
	METS WE (THE APPLICANTS) MUST A		
	All applicants or the applicant's authorized ager corporation), must sign the application in ink. cannot be accepted. Signature of U.S. Forest S.	nt (include title or authority if for an o Signature must be an original "wet".	rganization or
0	You must include a Legal description of all the and used. The Legal description includes a met A copy of the deed, land sales contract or title may submit a lot book report prepared by a title the tax bill. A copy of each special Use permit	es and bounds, or other government s insurance policy can provide this infor e company. The Department will not a	urvey description. mation, or you
O	The map must meet all the minimum requireme	nts of OAR 690-310-0050.	
	O Township, Range, Section O Location of main canals, ditches, pipelines O Place of use, 1/4, 1/4's and tax lot clearly i O Even map scale not less than 4" = 1 mile ( O Location of each diversion point, well or o survey corner. Multiple wells shall be uniquel existing. O Reference corner on map O North Directional Symbol O Number of acres per 1/4, 1/4, if for irrigati O Other	dentified example: 1" = 100 ft, 1" = 200 ft, etc. dam by reference to a recognized publy labeled, and identified on well logs on, nursery, or agriculture	) ic land
0	Fees: Amount of water requested		
	Base Fee \$	Additional Use @=	
	1st CFS/AF \$	Total Exam Fees \$	
	Addtn'l CFS/ AF @ = Addtn' POD @ = Stored Water @ = Stored Water @ =	Total Paid \$ Amount Due \$ Amount Returned \$	-
	Reviewed by: Herb Mosgar	Date : June 21, 2011	
Gro	oups\wr\Customer Service Group\templates\stan	dard app checklist	5-18-2010 jks

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JAN 2 3 2012 WATER RESOURCES DEPT SALEM, OREGON

5-8778

## **Minimum Requirements Checklist**

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Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.140)

### Include this checklist with the application

Check that each of the following items is included. The application will be returned if all required items are not included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900.

_/				
d D	SECTION 1: applicant information and signature			
	SECTION 2: property ownership	RECEIVED		
Ø	SECTION 3: source of water requested			
Ø	SECTION 4: water use	JAN 2 3 2012		
	SECTION 5: water management	WATEH RESOURCES DEPT		
	SECTION 6: resource protection	SALEM. OREGON		
	SECTION 7: project schedule			
Ø	SECTION 8: remarks			
	L. gunuu	we laws		
	NOT PO	FQUIRED FLAMER		
	Attachments:	16NOD/PLANNER		
	Land Use Information Form with approval and signature (must be an original)	,		
	Provide the legal description of: (1) the property from which the water is to be diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used as depicted on the map.			
<b>2</b>	Fees - Amount enclosed: \$ See the Department's Fee Schedule at <a href="www.oregon.gov/owrd">www.oregon.gov/owrd</a> or call (503) 986	5-0900.		
	Provide a map and check that each of the following items is inc			
4	Permanent quality and drawn in ink	RECEIVED		
	Even map scale not less than $4'' = 1$ mile (example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 400$ ft, $1'' = 1320$ ft, example: $1'' = 1320$ ft.	tc.) JUN 29 ZIII		
	North Directional Symbol	WATER RESOURCES DEPT		
	Township, Range, Section, Quarter/Quarter, Tax Lots	SALEM, OREGON		
Ø	Reference corner on map			
	Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west)			
	Indicate the area of use by Quarter/Quarter and tax lot clearly identified	Indicate the area of use by Quarter/Quarter and tax lot clearly identified		
	Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery			
	Location of main canals, ditches, pipelines or flumes (if well is outside of the a	rea of use)		
	Other:			