### STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 105101 725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172 INV
(503) 986-0900 / (503) 986-0904 (fax)

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

| ECEIVED FRO | M: JIW        | LEdi            | Nards          | APPLICATION     | S-8718      |
|-------------|---------------|-----------------|----------------|-----------------|-------------|
| Υ:          |               |                 |                | PERMIT          |             |
| 1011. c     | NIFOK#        | OTHER AREN      | TIENO          | TRANSFER        |             |
| ASH: C      | 100 l         | OTHER: (IDEN    |                | TOTAL REC'D     | \$47500     |
| 1083        | TREASURY      | 4170 W          | RD MISC CASH   | ACCT            |             |
| 0407        | COPIES        |                 |                |                 | \$          |
|             | _ OTHER:      | (IDENTIFY)      |                |                 | \$          |
| 0243 I/S L  | ease 02       | 44 Muni Water M | Igmt. Plan 02  | 245 Cons. Water | _           |
|             |               | 4270 W          | RD OPERATING   | ACCT            |             |
|             | MISCELLANEOU  | JS              | 46111          |                 |             |
| 0407        | COPY & TAPE F | EES             | 100111         |                 | \$          |
| 0410        | RESEARCH FEE  | S               |                |                 | \$          |
| 0408        | MISC REVENUE  | : (IDENTIFY)    |                |                 | \$          |
| TC162       | DEPOSIT LIAB. | (IDENTIFY)      |                |                 | \$          |
| 0240        | EXTENSION OF  |                 |                |                 | \$          |
|             | WATER RIGHTS  |                 | EVANCEE        |                 | RECORD FEE  |
| 0201        | SURFACE WATE  |                 | EXAM FEE       | 0202            | \$          |
|             |               |                 | \$ 7.12 E      | 0202            | \$          |
| 0203        | GROUND WATE   | н               | \$             | 0204            | <u> </u>    |
| 0205        | TRANSFER      |                 | \$             |                 | LICENSE FEE |
|             | WELL CONSTRU  | JCTION          | EXAM FEE       |                 |             |
| 0218        | WELL DRILL CO | NSTRUCTOR       | \$             | 0219            | \$          |
|             | LANDOWNER'S   | PERMIT          |                | 0220            | Φ           |
|             | OTHER         | (IDENTIFY)      |                |                 |             |
| 0536        | TREASURY      | 0437 W          | ELL CONST. STA | RT FEE          |             |
| 0211        | WELL CONST S  | TART FEE        | \$             | CARD#           |             |
| 0210        | MONITORING W  | ELLS            | \$             | CARD #          |             |
|             | OTHER         | (IDENTIFY)      |                |                 |             |
| 0607        | TREASURY      | 0467 H          | YDRO ACTIVITY  | LIC NUMBER      |             |
| 0233        | POWER LICENS  | E FEE (FW/WRI   | 0)             |                 | \$          |
| 0231        | HYDRO LICENS  | ,               | ·              |                 | \$          |
|             | HYDRO APPLICA | ATION           |                |                 | \$          |
|             | TREASURY      |                 | THER / RDX     |                 |             |
|             |               |                 |                |                 |             |
|             |               |                 |                |                 |             |
| OBJ. COD    | E             | VENDOR #        |                |                 |             |
| DESCRIPT    | TION          |                 |                |                 | \$          |

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

| 5-87702   |
|---|
| Application County Och Priority Date $\frac{23/2}{2}$   |
| Township $335$ Range $1/E$ Section $35$   |
| Amount /. 0 Use IR WM Dist # 13   |
| Applicant Name John W + Patricia P. Edwards   |
| Receipt No  |
| Caseworker Assigned Jeana Eastman   Kerry Kavanagh  |
| 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  |
| 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.   |
| 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.  |
| Proposed use of water. If supplemental, list primary acreage. (Irrigation and Supp.l Irrigation together, is 2 uses)  Supplemental data sheets enclosed if needed?  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)  |
| Period of use   |

| Water management section (Please estimate if the water system has not been designed).   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| Resource Protection Section (N/A for Groundwater)   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| 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   |  |  |  |  |  |  |
| 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 of 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  Continuous Control 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   |  |  |  |  |  |  |
| <del></del>   |  |  |  |  |  |  |
| Fees: Amount of water requested $2.5 HF$  |  |  |  |  |  |  |
| Base Fee \$ 400 Total Exam Fees \$ 475  |  |  |  |  |  |  |
| 1st CFS AF 35 75 Permit Recording Fees \$   |  |  |  |  |  |  |
| $\frac{2}{2}$ Addtnl CFS/AF@ $\frac{25}{25} = \frac{50}{25}$ Mitigation Fee \$  |  |  |  |  |  |  |
| Addtnl POD/POA @ = Total Paid \$  |  |  |  |  |  |  |
| Amount Returned \$  |  |  |  |  |  |  |
| Reviewed by: $\int Date : \frac{2}{23/12} $   |  |  |  |  |  |  |
| Groups\wr\Customer Service Group\templates\standard app checklist 1/25/2012 jks   |  |  |  |  |  |  |

## **Minimum Requirements Checklist**

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.

| $\boxtimes$ | SECTION 1: applicant information and signature  |                       |  |  |  |  |
|-------------|---|-----------------------|--|--|--|--|
| $\boxtimes$ | SECTION 2: property ownership   |                       |  |  |  |  |
| $\boxtimes$ | SECTION 3: source of water requested  |                       |  |  |  |  |
| $\boxtimes$ | SECTION 4: water use  |                       |  |  |  |  |
| $\boxtimes$ | SECTION 5: water management   |                       |  |  |  |  |
| $\boxtimes$ | SECTION 6: resource protection  | 220                   |  |  |  |  |
| $\boxtimes$ | SECTION 7: project schedule   | RECEIVED              |  |  |  |  |
| $\boxtimes$ | SECTION 8: within a district  | FEB 2 3 2012          |  |  |  |  |
| $\boxtimes$ | SECTION 9: remarks  | WATER RESOURCES DEPT  |  |  |  |  |
|             | Attachments:  | SALEM, OREGON         |  |  |  |  |
|             |   |                       |  |  |  |  |
| $\boxtimes$ | Land Use Information Form with approval and signature (must be an original  | ) or signed receipt   |  |  |  |  |
| $\boxtimes$ | 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. |                       |  |  |  |  |
| $\boxtimes$ | Fees - Amount enclosed: \$ 475.00<br>See the Department's Fee Schedule at <a href="www.oregon.gov/owrd">www.oregon.gov/owrd</a> or call (503) 986-0900.   |                       |  |  |  |  |
|             | Provide a map and check that each of the following items is in  | cluded:               |  |  |  |  |
| $\boxtimes$ | Permanent quality and drawn in ink  |                       |  |  |  |  |
| $\boxtimes$ | Even map scale not less than $4" = 1$ mile (example: $1" = 400$ ft, $1" = 1320$ ft,   | etc.)                 |  |  |  |  |
| $\boxtimes$ | North Directional Symbol  | ,                     |  |  |  |  |
| $\boxtimes$ | Township, Range, Section, Quarter/Quarter, Tax Lots   |                       |  |  |  |  |
| $\boxtimes$ | 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)   |                       |  |  |  |  |
| $\boxtimes$ | Indicate the area of use by Quarter/Quarter and tax lot clearly identified  |                       |  |  |  |  |
| $\boxtimes$ | Number of acres per Quarter/Quarter and hatching to indicate area of use if fo supplemental irrigation, or nursery  | r primary irrigation, |  |  |  |  |
| $\boxtimes$ | Location of main canals, ditches, pipelines or flumes (if well is outside of the  | area of use)          |  |  |  |  |
|             | Other:  |                       |  |  |  |  |