Alternate Reservoir Application Completeness Checklist This is the checklist used by WRD staff

Application R-87847 County Jacks	
Priority Date 10/25/2002 Township 765 Range 2 W Section ZZ Taxlot	1
Use HOUTI PRODUCE Caseworker KERRY 12.	$-\lambda$
Amount (AF) 30 Watermaster 13	/-()
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(\.\.)	<u> </u>
Minimum Requirements (ORS 537.409)	\ \ /
) /
Completed Watermaster review sheet signed and dated by Watermaster.	
Will the reservoir injure an existing water right? VES the NO	
Will the reservoir injure an existing water right? YES TONO If YES, can conditions be applied to mitigate the injury? WES INO If NO, return the application. Did the watermaster determine when water is available for the proposed use? YES NO - Question with the Watermaster review sheet must have been completed within the last 6 months.	
Did the watermaster determine when water is available for the proposed use? \(\text{VES}\) \(\text{VES}\) \(\text{VES}\)	not
The Watermaster review sheet must have been completed within the last 6 months.	Q~~
If the watermaster determined that water is NOT available, return the application.	FOV 1
Completed ODFW review sheet signed and dated by ODFW representative.	
Will the reservoir pose a significant detrimental impact to an existing fishery resource? YES PNO	
If YES, can conditions be applied to mitigate the impact? TYES 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:	
Proposed Use of the waterCannot 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.)	L
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 but 1.0 authorized - see letter	
□ Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal	
flaw if not provided by the applicant.	<u>ن</u>
Reservoir Location - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)*	
\square /Scale of the Map (not less than 1" = 1320') **	∑ ∑
Reference corner on map	. a É
North Directional Symbol **	5 25
N/4/4's clearly identified	\$ 2 S
Reservoir clearly identified **	Submitted By MATT ROPP E CONSULTING IN
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\$ \$\iftarrow\$ Permit Recording Fee\$ \$\forall \tag{20}\$	S M AND USE
	E.
plus\$ <u>750 = 30 ac/</u> FT	A
Total Paid \$ /450 O Total Fees \$ /450	اسد <u>محاه</u> ون
Completeness Check by: Scelan Date: With Revised Revis	
Completeness Check by: Scel and Date: Ofer Ten Revised BY ON	٧RD

OCT 25 2012

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 107185

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

INVOICE # _

RECEIVED FRO	OM: HAT H	Ranch	Jilton 10	APPLICATIO	* R-87847
от.				TRANSPER	
CASH: 0	± 2057	OTHER: (IDENTIFY)		TOTAL REC'D	\$105000
1083	TREASURY	4170 WRD	MISC CASH A	CCT	
0407	COPIES				\$
-	_ OTHER: (IDENTIFY)			\$
0243 I/S L	.ease 0244	Muni Water Mgmt. F	Plan 024	5 Cons. Water _	
		4270 WRD	OPERATING A	CCT	
	MISCELLANEOUS	4611	[]		
0407	COPY & TAPE FEE	≣S .	•		\$
0410	RESEARCH FEES				\$
0408	MISC REVENUE:	(IDENTIFY)	_		\$
TC162	DEPOSIT LIAB. (II	DENTIFY)			\$
0240	EXTENSION OF T	IME			\$
	WATER RIGHTS:		EXAM FEE		RECORD FEE
0201	SURFACE WATER		\$ 105000	0202	\$
0203	GROUND WATER		\$	0204	\$
0205	TRANSFER		\$	╡	
	WELL CONSTRUC	CTION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CON	_	\$	0219	\$
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0536	TREASURY	0437 WELL	CONST. STAT	T FEE	
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0233	POWER LICENSE	FEE (FW/WRD)			\$
0231	HYDRO LICENSE	FEE (FW/WRD)			_ \$
	HYDRO APPLICAT	ION			\$
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RECEIPT:	07185	DATED: [[]	25-12 BY:	A	4

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 107187

725 Summer St. N.E. Ste. A

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INVOICE # _

(503) 986-0900 / (503) 986-0904 (fax)						
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1083 T	REASURY 4170 WRD M	ISC CASH AC	CT			
0407 (COPIES			\$		
	OTHER: (IDENTIFY)			\$		
0243 I/S Leas	e 0244 Muni Water Mgmt. Pla	n 0245 (Cons. Water			
	4270 WRD O					
	. /	1	<u> </u>			
	MISCELLANEOUS COPY & TAPE FEES			\$		
0410 I	RESEARCH FEES			\$		
0408	MISC REVENUE: (IDENTIFY)			\$		
TC162 I	DEPOSIT LIAB. (IDENTIFY)			\$		
0240 I	EXTENSION OF TIME			\$		
,	WATER RIGHTS:	EXAM FEE		RECORD FEE		
0201	SURFACE WATER	\$	0202	\$40000		
0203	GROUND WATER	\$	0204	\$		
0205	TRANSFER	\$				
,	WELL CONSTRUCTION	EXAM FEE		LICENSE FEE		
0218	WELL DRILL CONSTRUCTOR	\$	0219	\$		
1	LANDOWNER'S PERMIT		0220	\$		
	OTHER (IDENTIFY)					
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0211	WELL CONST START FEE	\$	CARD#			
0210	MONITORING WELLS	\$	CARD #			
	OTHER (IDENTIFY)					
0607 T	REASURY 0467 HYDRO	ACTIVITY	IC NUMBER			
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0231	HYDRO LICENSE FEE (FW/WRD)			\$		
	HYDRO APPLICATION			\$		
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RECEIPT: 107187

DATED: 10-25-12 BY:

