

RETURN of APPLICATION for  
SECOND ATTEMPT

## Standard Application Completeness Checklist

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

Application _____	Township _____
Priority Date _____	Range _____
Use(s) _____	Section _____
Rate _____	POD Loc. _____
County _____	POU Loc. _____

- Applicant/Organization Name, Mailing Address and Telephone Number, application signed in ink.
- 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)
- 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 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.
- Groundwater development section (Page 2, Section 3 and/or Page 3, Section 2) or a well log report.
- Proposed use of water. If supplemental, list primary water right acreage if applicable.
- Enclosed Supplemental Form for each proposed use.
  - Form I (Irrigation)
  - Form M (Municipal or Quasi-Municipal)
  - Form R (Mining)
  - Form Q (Commercial or Industrial)
  - 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

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- Water management section (Please estimate if the water system has not been designed).
- Resource Protection Section (Page 6, Section 5).
- Project schedule (If system is already completed, indicate "existing").
- For reservoir applications ~~storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.~~
- ~~If the above is statement is checked, the map must be prepared by a CWRE.~~
- All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink.

You must include a Legal description of the property involved that 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. *Date of signature must be within the past 6 months.*

CORRECTED \$ IN GOOD ORDER

The map must meet all the minimum requirements of OAR 690-310-0050.

- ~~DOES NOT MEET MINIMUMS~~
- Township, Range, Section
  - Location of main canals, ditches, pipelines or flumes
  - 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
  - North Directional Symbol
  - Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture
  - Other \_\_\_\_\_
  - Reference corner on map
  - Each point of diversion coordinate

Fees: Amount of water requested 1.78 CFS

Base Fee \$ _____	Total Exam Fee \$ <u>600</u>
1st CFS/AF _____	Total Paid \$ <u>500</u>
_____ Addtn'l @ _____ = _____	Amount Due \$ <u>NEED EXAM FEE</u>
Reviewed by <u>HERB MASGAR</u>	Date <u>1-24-2007</u>

#600 MINIMUM

503-986-0804

800 GPM = 1.78 CFS

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FILED FEE  
 \$ 500  
 + 100  
 -----  
 \$ 600



# Oregon

Theodore R. Kulongoski, Governor

**Water Resources Department**  
North Mall Office Building  
725 Summer Street NE, Suite A  
Salem, OR 97301-1271  
503-986-0900  
FAX 503-986-0904

December 28, 2006

JIM WATTS  
249 SO. H ST.  
LAKEVIEW, OR 97630

Dear Mr. Watts:

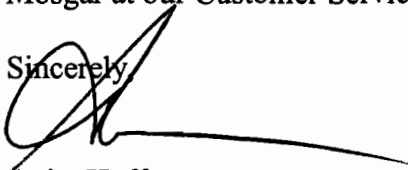
The Department has received your application for a permit to use ground water, however at this time your application materials are being returned for additional information. The Department cannot accept an application if it does not meet the minimum requirements of Oregon Administrative Rules (OAR) 690-310-040 and 050.

Please provide the following information:

- ✍ The legal description of the property(ies) involved with the application. This may be a copy of your deed, land sales contract, or other similar document that shows the metes and bounds or government lot description. Please do not include a copy of the tax bill.
- ✍ The land use form you submitted was not completed and signed by a local planning department official. Please correct this.
- ✍ The map submitted did not meet the requirements of OAR 690-310-050. Specifically the map does not provide:
  - A. the location of the well(s) referenced to a public land survey corner
  - B. the number of acres to be irrigated within each quarter-quarter
  - C. the actual scale of the map is not correctly identified. The scale must be a standard, even scale of not less than 1"-1320'. The map you provided was reduced from the original scale of 1"-400' and is no longer of a recognizable scale.
  - D. the map must include a North directional symbol.

Please include the information noted above when you resubmit your application. If the application is determined to be incomplete, it will again be returned. Please contact Mr. Herb Mosgar at our Customer Service Center for assistance. He can be reached at 503-986-0801.

Sincerely,

  
Anita Huffman  
Water Rights Caseworker

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Water management section (Please estimate if the water system has not been designed).

Resource Protection Section (Page 6, Section 5).

Project schedule (If system is already completed, indicate "existing").

N/A  For reservoir applications storing more than 9.2 acre feet, and a dam height of more than 10 feet, preliminary plans and specifications for dam and impoundment are required.

If the above is statement is checked, the map must be prepared by a CWRE.

All applicants (or the authorized agent with title or authority if for an organization or corporation), must sign the application in ink.

NOT INCLUDED

You must include a Legal description of the property involved that 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.

NOT SIGNED OR COMPLETED

A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. *Date of signature must be within the past 6 months.*

The map must meet all the minimum requirements of OAR 690-310-0050.

Township, Range, Section

Location of main canals, ditches, pipelines or flumes

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.)

NO SCALE IS NOT 1"=400 AS INDICATED

Location of each diversion point well or dam by reference to a recognized public land survey corner

North Directional Symbol

NO

Number of acres per 1/4, 1/4, if irrigation, nursery, or agriculture

Other \_\_\_\_\_

NO

Reference corner on map

Each point of diversion coordinate

Fees: Amount of water requested \_\_\_\_\_

Base Fee \$ \_\_\_\_\_

Total Exam Fee \$ \_\_\_\_\_

1st CFS/AF \_\_\_\_\_

Total Paid \$ 500 \_\_\_\_\_

\_\_\_\_\_ Addn'l @ \_\_\_\_\_ = \_\_\_\_\_

Amount Due \$ \_\_\_\_\_

Reviewed by A. H. CHMAN

Date \_\_\_\_\_

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Groundwater development section (Page 2, Section 3 and/or Page 3, Section 2) or a well log report. *ALL BOXES ON PAGES 3 & 4 MUST BE FILLED IN. THANK YOU.*

- Proposed use of water. If supplemental, list primary water right acreage if applicable.
- Enclosed Supplemental Form for each proposed use.
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  - Form M (Municipal or Quasi-Municipal)
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Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF) *ON PAGE 4 - C. MAX RATE*

Period of use *PLEASE STATE ONLY HIGHEST FLOW RATE YOU EXPECT TO PUMP*

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*ONE CFS — 1 — 450 gpm = \$500*  
*2 CFS — (450) — APPROX 900 GPM = \$600*

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→ You must include a ~~map~~ of the property involved that includes a metes and bounds, or other government survey description. A copy of the ~~land title insurance policy~~ 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.

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→ The map must meet all the minimum requirements of OAR 690-310-0050.

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Fees: Amount of water requested \_\_\_\_\_

Base Fee \$ \_\_\_\_\_

Total Exam Fee \$ \_\_\_\_\_

1st CFS/AF \_\_\_\_\_

Total Paid \$ \_\_\_\_\_

\_\_\_\_\_ Addn'l @ \_\_\_\_\_ = \_\_\_\_\_

Amount Due \$ \_\_\_\_\_

Reviewed by HERB MOSGAR

Date 12-28-2006

Anita Huffman  
503-986-0815

**Oregon**

WATER RESOURCES

DEPARTMENT

Water Rights/Adjud. Division  
725 Summer St. NE, Suite A  
Salem, Oregon 97301-1271  
503.986.0804  
FAX: 503.986.0901  
www.wrd.state.or.us

Herbert.L.Mosgar@wrds.state.or.us

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