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

Application <u>G-17663</u> County <u>Harrey</u> Priority Date <u>5-1-13</u>
Township 74 S Range 27 E Section 12
Amount 2.5 CFS Use 1R of 160.0ac WM Dist # 10
Applicant Name Phillip el Lonssa Singhose
Receipt No. 108 689 (41900) 108 692 (\$250)
Caseworker Assigned
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The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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. Well 17 proposed
Proposed use of water. If supplemental, list primary acreage. (Irrigation and Supp.l Irrigation together, is 2 uses)
(Mg of 160.0 a c Supplemental data sheets enclosed (if needed)
☐ Form M (Municipal or Quasi-Municipal)
☐ Spring Description Sheet (if source is a spring)

Land Use Info Form -+ 1120	gpm ~ 2,5 CF3
Amount of water from each source in gallons per	minute (GPM), cubic feet per second (CFS), or acre feet (AF)
Period of use May 1-0ct 3	
Water management section (Please estimate if the	he water system has not been designed).
Resource Protection Section (N/A for Groundwe	ater)
Project schedule (If system is already completed	
Preliminary plans and specifications including of for all standard reservoir applications	lam height, width, crest width and surface area for each reservoir
A map prepared by a CWRE for a standard reservation having a dam height of more than 10 feet	ervoir application proposing to store more than 9.2 acre feet and
The Legal description includes a metes and bou	roperties involved where water is diverted, crossed, and used. Inds, or other government survey description. A copy of the y can provide this information, or you may submit a lot book ment will not accept a copy of the tax bill.
be certain that the Land-Use form lists all land.	nd dated by the appropriate planning department officials. Please is involved and all uses proposed. Date of signature must be in original "wet" signature. Copies cannot be accepted.
The map must meet all the minimum requiremen	ts of OAR 690-310-0050.
Township, Range, Section Location of main canals, ditches, pipelines of Place of use, 1/4, 1/4=s and tax lot clearly in Even map scale not less than 4" = 1 mile (expression of each diversion point, well or daysurvey corner. Multiple wells shall be uniquely existing.	dentified xample: 1" = 100 ft, 1" = 200 ft, etc.) am by reference to a recognized public land
	on, nursery, or agriculture # ac in NWNE & NWSE?
Fees: Amount of water requested 2,5	gpm Pand 1900 > \$2150 CFS
Base Fee \$ 1000	Total Exam Fees \$ 1750 Permit Recording Fees \$ 400
1 st CFS/AF \$ 250 2 Addtnl CFS/ AF @ 1250 = 500 Addtnl POD/POA @ =	Permit Recording Fees \$ 400
$\frac{\partial}{\partial t} = \frac{\partial}{\partial t} = \frac{\partial}$	Mitigation Fee \$
Addtnl POD/POA @ = Addtnl Use @ =	Mitigation Fee \$
Reviewed by: XXX	Date: <u>5-3-13</u>
Groups\wr\Customer Service Group\templates\stan	dard app checklist 9/5/2012 jks

Minimum Requirements Checklist
Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.615)

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.

	SECTION 1: applicant information and signature		
	SECTION 2: property ownership		
V	SECTION 3: well development		
9	SECTION 4: water use		
V	SECTION 5: water management		
	SECTION 6: storage of groundwater in a reservoir		
	SECTION 7: use of stored groundwater from the reservoir		
	SECTION 8: project schedule	RECEIVED BY OWRD	
V	SECTION 9: within a district		
	SECTION 10: remarks	APR 0 3 2013	
		SALEM, OR	
_	Attachments:		
$ \overline{\mathcal{L}} $	Land Use Information Form with approval and signature (mu	st be an original) or signed receipt	1
<u>u</u>	Provide the legal description of: (1) the property from which crossed by the proposed ditch, canal or other work, and (3) at as depicted on the map.		
	See the Department's Fee Schedule at <a 1<="" =="" href="https://www.oregon.gov/owrden.g</td><td><u>1</u> or call (503) 986-0900.</td><td></td></tr><tr><th></th><th>Provide a map and check that each of the follo</th><th>owing items is included:</th><th></th></tr><tr><th>d/</th><th>Permanent quality and drawn in ink</th><th>RECEIVED</th><th>BY OWR</th></tr><tr><td>I</td><td>Even map scale not less than <math>4" math=""> mile (example: $1" = 400$	ft, 1" = 1320 ft, etc.)	
	North Directional Symbol	MAY 0	1 2013
	Township, Range, Section, Quarter/Quarter, Tax Lots	04.5	
V,	Reference corner on map	SALEM	A, OR
	Location of each well, and/or dam if applicable, by reference (distances north/south and east/west). Each well must be iden		
U/	Indicate the area of use by Quarter/Quarter and tax lot clearly	y identified	
	Number of acres per Quarter/Quarter and hatching to indicat supplemental irrigation, or nursery	e area of use if for primary irrigation,	
Image: Control of the con	Location of main canals, ditches, pipelines or flumes (if well	is outside of the area of use)	
	Other		
Revi	sed 3/4/2010 Ground Water/2	WR	

G-17663

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 108689

RECEIPT: 108689

725 Summer St. N.E. Ste. A

INVOICE #

11.	, LII ' " •	200000		,	97301-4172 03) 986- 0904 (f	ax)		
REC BY:	EIVED FRO	M: Philip Lons	W.S a L .:	anaha Tagar	8 <u>e</u> 105e	PI	ICATION RMIT NSFER	G17663
CAS	н: с]	MECK:# 5609	OTHER: (ID	DENTIFY)			REC'D	\$ 19000
-	1083	TREASURY	4170	WRD N	IISC CASH	ACCT		
	0407	COPIES						\$
			(IDENTIFY)					\$
	0243 I/S Le	ease 024	4 Muni Wate	er Mamt Pla	an ()245 Cons. \	Vater	
	Elifek ar an industria				PERATING			
	lin	MISCELLANEOU				**************************************		No. 2
	0407	COPY & TAPE FE	_	4	40111			\$
	0410	RESEARCH FEES			CIII			\$
	0408	MISC REVENUE:	(IDENTIFY	Y)				\$
	TC162	DEPOSIT LIAB. (DENTIFY)	•				\$
	0240	EXTENSION OF T	TIME					\$
		WATER RIGHTS:			EXAM FE	E		RECORD FEE
	0201	SURFACE WATER	3		\$:02	\$
	0203	GROUND WATER			\$ 1750	yoo 02	204	\$ 150.00
	0205	TRANSFER	*		\$			
	200	WELL CONSTRU	CTION		EXAM FE	E		LICENSE FEE
	0218	WELL DRILL CON	ISTRUCTO	R	\$	02	19	\$
		LANDOWNER'S F	PERMIT			02	220	\$
		OTHER	(IDENTI	FY)		_		
	0536	TREASURY	0437	WELL	CONST. ST	ART FEE	1 24	
	0211	WELL CONST ST	ART FEE		\$.		CARD (·
	0210	MONITORING WE	ELLS		\$		CARD	
		OTHER	(IDENTII	FY)				
	0607	TREASURY	0467	HYDRO	ACTIVITY	LIC NU	MBER	The same of the sa
	0233	POWER LICENSE	FEE (FW/	WRD)				\$
	0231	HYDRO LICENSE	FEE (FW/	WRD)				\$
		HYDRO APPLICA	TION					\$
		TREASURY		OTHER	/ RDX			***
	FUND		_ TITLE _			_		
		E				_		
	DESCRIPT	TION				_		\$

DATED 5-1-13 BX: BWilliamson

STATE	OF	ORE	GON

WATER RESOURCES DEPARTMENT

RECEIPT # 108692

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

INVOICE #

RECEIVED FROM: Phillip W. Singhose APPLICATION	- 17/1-X
	ATTICK!
BY: Lorssa L. Simphose PERMIT	
CASH: CHECK:# OTHER: (IDENTIFY)	·
TOTAL REC'D	\$25000
1083 TREASURY 4170 WRD MISC CASH ACCT	
0407 COPIES	\$
OTHER: (IDENTIFY)	<u> </u>
0243 I/S Lease 0244 Muni Water Mgmt. Plan 0245 Cons. Water	_
4270 WRD OPERATING ACCT	
MISCELLANEOUS	
0407 COPY & TAPE FEES	\$
	\$
	\$
TC162 DEPOSIT LIAB. (IDENTIFY)	\$
0240 EXTENSION OF TIME	\$
WATER RIGHTS: EXAM FEE	RECORD FEE
	\$
0203 GROUND WATER \$ 0204	\$25000
0205 TRANSFER \$	
WELL CONSTRUCTION EXAM FEE	LICENSE FEE
	\$
LANDOWNER'S PERMIT 0220	\$
·	
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	
1 OWEN EIGENOLT EL (1 W/WIID)	\$
OZOT TITOTO EIGENEE (E.W.M.D.)	
HYDRO APPLICATION	\$
TREASURY OTHER / RDX	
FUND TITLE	
OBJ. CODE VENDOR #	
	\$
DESCRIPTION	Ψ

RECEIPT: 108692

DATED: 51-13 BY: BUllianson