E-2

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

Yes No

Application <u>g-17699</u> County <u>Baker</u> Priority Date <u>Jucy 3, 2013</u>
Township 8 South Range 39 East Section 14, 15, 22,23
Amount 7.24 cfs Use 1R \$ 1S WM Dist # 08
Applicant Name Tom + Fawn Kerns
Receipt No. 109243 (\$3750) & 109263 (\$650)
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 MA List Permit or Certificate number
The proposed source is of is not circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.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 (if source is a spring)

Amount of water from each source in gallons per r	ninute (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 Groundwate	er
Project schedule (If system is already completed,	indicate "existing").
Preliminary plans and specifications including da for all standard reservoir applications	m height, width, crest width and surface area for each reservoir
A map prepared by a CWRE for a standard reserve having a dam height of more than 10 feet	voir application proposing to store more than 9.2 acre feet and
The Legal description includes a metes and boun	operties involved where water is diverted, crossed, and used. ds, or other government survey description. A copy of the can provide this information, or you may submit a lot book ent will not accept a copy of the tax bill.
be certain that the Land-Use form lists all lands	I dated by the appropriate planning department officials. Please involved and all uses proposed. Date of signature must be 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 of Place of use, 1/4, 1/4=s and tax lot clearly ide. Even map scale not less than 4" = 1 mile (example) and the survey corner. Multiple wells shall be uniquely existing. Reference corner on map North Directional Symbol Number of acres per 1/4, 1/4, if for irrigation Other	entified ample: 1" = 100 ft, 1" = 200 ft, etc.) n by reference to a recognized public land labeled, and identified on well logs if , nursery, or agriculture
1st CFS/AF \$ 250 Addtnl CFS/ AF @ 7 × 250 = 1750 Addtnl POD/POA @ 3 × 250 = 750	C f S Total Exam Fees \$ 4000 Permit Recording Fees \$ 406 Mitigation Fee \$ 7/3/3 Total Paid \$ 3750 Amount Due \$ 250 + 400
^	Amount Returned \$ Date: 1-5-2013
Reviewed by:	•

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.

X	SECTION 1: applicant information and signature												
X	SECTION 2: property ownership												
X	SECTION 3: well development												
X	SECTION 4: water use												
X	SECTION 5: water management												
X	SECTION 6: storage of groundwater in a reservoir												
X	SECTION 7: use of stored groundwater from the reservoir												
X	SECTION 8: project schedule												
X	SECTION 9: within a district												
S	SECTION 10: remarks												
	Attachments:												
X	Land Use Information Form with approval and signature (must be an original) or signed receipt												
X	Provide the legal description of: (1) the property from which the water is to be diver crossed by the proposed ditch, canal or other work, and (3) any property on which the as depicted on the map. Example: A copy of the deed, land sales contract or title instance.	ne water is to be used											
X	Fees - Amount enclosed: \$3750 See the Department's Fee Schedule at www.oregon.gov/owrd or call (503) 986-0900	0.											
	Provide a map and check that each of the following items is included												
X	Permanent quality and drawn in ink	RECEIVED BY OWRE											
X	Even map scale not less than $4" = 1$ mile (example: $1" = 400$ ft, $1" = 1320$ ft, etc.)	uu A.9 2012											
<u>X</u>	North Directional Symbol	JUL 0 3 2013											
<u>X</u>	Township, Range, Section, Quarter/Quarter, Tax Lots	SALEM, OR											
X	Reference corner on map	<u>-</u>											
\mathbf{X}	Location of each well, and/or dam if applicable, by reference to a recognized public land survey corn (distances north/south and east/west). Each well must be identified by a unique name and/or number.												
X	Indicate the area of use by Quarter/Quarter and tax lot clearly identified												
X	Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery												
X	Location of main canals, ditches, pipelines or flumes (if well is outside of the area o	f use)											
X	Other												

WATER RESOURCES DEPARTMENT STATE OF OREGON

SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) 725 Summer St. N.E. Ste. A **ВЕСЕГРТ # 109263**

INVOICE #

WATER RESOURCES DEPARTMENT RECEIPT #

STATE OF OREGON

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725 Summer St. N.E. Ste. A	SALEM, OR 97301-4172	(202) 000 000 (1202)
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(503) 986-0900 / (503) 986-0904 (fax)	RECEIVED FROM: THEY INC.	SH: CHECK:# OTHER: (IDENTIFY)	1083 TREASURY 4170 WRD MISC CASH ACCT	0407 COPIES	OTHER: (IDENTIFY)	0243 I/S Lease 0244 Muni Water Mgmt. Plan 0	4270 WRD OPERATING ACCT	MISCELLANEOUS	0407 COPY & TAPE FEES 4	0410 RESEARCH FEES	0408 MISC REVENUE: (IDENTIFY)	TC162 DEPOSIT LIAB. (IDENTIFY)	0240 EXTENSION OF TIME	WATER RIGHTS:	0201 SURFACE WATER \$	GROUND WATER	0205 TRANSFER \$		0218 WELL DRILL CONSTRUCTOR \$	LANDOWNER'S PERMIT	OTHER (IDENTIFY)	0536 TREASURY 0437 WELL CONST. START FEE	0211 WELL CONST START FEE	0210 MONITORING WELLS	OTHER (IDENTIFY)	0607 TREASURY 0467 HYDRO ACTIVITY	0233 POWER LICENSE FEE (FW/WRD)	0231 HYDRO LICENSE FEE (FW/WRD)	HYDRO APPLICATION	TREASURY OTHER / RDX
	17699	800	0 %											CORD FEE		20%		KINSE FEE												

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MISC REVENUE: (IDENTIFY)

COPY & TAPE FEES MISCELLANEOUS

RESEARCH FEES

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0407

DEPOSIT LIAB. (IDENTIFY)

TC162

0240

EXTENSION OF TIME

SURFACE WATER **GROUND WATER**

WATER RIGHTS:

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EXAM FEE

0220

0204

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0245 Cons. Water

4270 WRD OPERATING ACCT

0244 Muni Water Mgmt. Plan_

0243 I/S Lease

(IDENTIFY)

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TOTAL REC'D

4170 WRD MISC CASH ACCT

TREASURY

1083

COPIES OTHER:

0407

TRANSFER

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RECEIVED FROM:

OTHER: (IDENTIFY)

CASH

DATED: 78-13

RECEIPT: 109263

DESCRIPTION

OBJ. CODE

FUND

109243 RECEIPT:

DESCRIPTION OBJ. CODE

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LIC NUMBER

0467 HYDRO ACTIVITY

TREASURY

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0233

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(IDENTIFY)

OTHER

POWER LICENSE FEE (FW/WRD) HYDRO LICENSE FEE (FW/WRD)

HYDRO APPLICATION

TREASURY

OTHER / RDX

VENDOR #

TITLE

CARD#

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WELL CONST START FEE

0211 0210

TREASURY

0536

MONITORING WELLS

0437 WELL CONST. START FEE

(IDENTIFY)

OTHER

WELL DRILL CONSTRUCTOR

0218

WELL CONSTRUCTION

TRANSFER

0203 0205

0201

LANDOWNER'S PERMIT

DATED:

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VENDOR # TILE