STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 111242

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

INVOICE # ____

CEIVED FRO	m: Ronal	d We	de		APPLICATION	G-177
r. Donna Wedel				PERMIT		
	UEOK #	OTHER #	` >=\IT(E\A)		TRANSFER	
вн: с]	HECK:# 1002	OTHER: (II	JENTIFY)		TOTAL REC'D	\$ 2800.0
1083	TREASURY	4170	WRD	MISC CASH	ACCT	
0407	COPIES					\$
	OTHER:	(IDENTIFY)	+			\$
0243 I/S Le	ease 024	44 Muni Wat	er Mgmt. P	lan 02	245 Cons. Water	
		4270		PERATING	ACCT	
	MISCELLANEOU		PC A	46111		•
0407	COPY & TAPE F					\$
0410	RESEARCH FEE					\$
0408	MISC REVENUE	•	Y)			\$
TC162	DEPOSIT LIAB.	,				\$
0240	EXTENSION OF	TIME				
	WATER RIGHTS	:		EXAM FEE		RECORD FE
0201	SURFACE WATE	R		\$	0202	\$
0203	GROUND WATE	R		\$ 2350.	0204	\$450.00
0205	TRANSFER			\$		
	WELL CONSTRU	JCTION		EXAM FEE		LICENSE FE
0218	WELL DRILL CO	NSTRUCTO	R	\$	0219	\$
	LANDOWNER'S	PERMIT			0220	\$
	OTHER	(IDENTI	FY)			
0536	TREASURY	0437	WELL	CONST. STA	AT FEE	· · · · · · · · · · · · · · · · · · ·
0211	WELL CONST ST	TART FEE		\$	CARD#	T
0210	MONITORING W	ELLS		\$	CARD#	
	OTHER	(IDENTI	FY)			
0607	TREASURY	0467	HYDR	ACTIVITY	LIC NUMBER	
0233	POWER LICENS	E FEE (FW/	WRD)			\$
0231	HYDRO LICENS	E FEE (FW/	WRD)			\$
	HYDRO APPLICA	ATION				\$
	TREASURY		OTHE	R / RDX		
OBJ. COD	E	VENDO	R#			
DESCRIPT	10N					\$

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

Application G-17776 County Harney Priority Date 2/27/14
Townshir 23 S Range 32.5 E Section 21
Application $G - 17776$ County Haven Priority Date $2/27/14$ Township 235 Range $32.5 \in$ Section 21 Amount 3.33 cfs Use Relaxion WM Dist. # 10
Applicant Name RONALD & DONNA WEDET
Applicant Name RONALD & DONNA WEDET Receipt No. 11242 Caseworker Assigned: Mary Kim Jeana
Contact info: Applicant/Organization Name and Mailing Address
Signature (in ink) of <i>all</i> applicants or the applicant's authorized agent (include title or authority if for an organization or corporation).
Property ownership: Does the applicant own all the land for the proposed project? If No:
☐ The affected landowner's name and mailing address must be listed
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.
For a SW Application: Source of water must be indicated.
☐ If the source is stored water, is the stored water component filled out and does the applicant own the reservoir or include a non-expired agreement for stored water? (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, Exp. Secondary (E2)
☐ If for stored water not under contract, is the source authorized under a permit, certificate, or decree?
Permit or Certificate issued? Y / N Permit or Certificate #
For a GW Application: Well Development Tables completed and/or a well log report included (if existing)
Proposed water use
Amount of water from <i>each</i> source in GPM, CFS, or AF Period of use indicated
☐ If for supplemental irrigation, primary acreage or underlying permit or certificate number listed (<i>Primary and Supplemental Irrigation counts as 2 uses</i>)
Water Management Section (Estimates if the water system has not been designed)
Resource Protection Section (N/A for Groundwater)

NA	For all standard reservoir applications: Preliminar crest width and surface area for each reservoir.	y plans and specifications	including dam height, width,
Ø	Project schedule (If system is already completed, in	dicate "existing.")	
VA	Supplemental data sheets enclosed (if needed)		
	☐ Form M (Municipal or Quasi-Municipal)☐ Spring Description Sheet (if source is a spring Description Sheet)	ng)	
Ø	A completed Land-Use Form or receipt signed and <i>Please be certain that the Land-Use form lists all labe within the past 12 months.</i>		
K	A Legal Description of all the properties involved description includes a metes and bounds or other go sales contract or title insurance policy can provide t prepared by a title company. Copies of tax bills are	overnment survey descript his information, or applica	ion. A copy of the deed, land
Þ	The proposed source <u>IS / IS NOT</u> (circle one) rest NOTE: If it is withdrawn under ORS 538, then retu accept the application and a negative IR will be iss	rn application and fees. I	
	The map must meet all the minimum requirements	of OAR 690-310-0050.	
	Township, Range, Section	,	
	Location of main canals, ditches, pipelines of	or flumes (if POA/POD is	outside of POU)
	Place of use, 1/4-1/4's and tax lot clearly ident	ified	
	Even map scale not less than 4" = 1 mile (1'	'= 1320 ft.); examples: 1"	= 100 ft., 1" = 200 ft.
	Location of <i>each</i> diversion point, well or da Multiple wells shall be uniquely labeled, and		
	Reference corner on map		
	North Directional Symbol		
	Number of acres per 1/4-1/4 if for irrigation, n For a standard reservoir application to store		ing a dam haight > 10 faat man
	must be prepared by a CWRE	≥ 9.2 acre reet AND have	ing a dam neight ≥ 10 feet, map
d	Foods		
בע	Fees: Base Fee \$ 1st CFS or AF \$	Permit Recording Fees	\$ <u>450</u>
	Addtnl CFS/AF= \$	Mitigation Fee	\$
	Addtnl Use/POD/POA = \$	A D-1-I	¢251A
	Addtnl Reservoir $_$ = \$ $_$ Other $_$ = \$ $_$ Exam Fee Total \$ $\boxed{2350}$	Amount Paid Total Due Amount Returned	\$ 2 8 60 \$
		,	
D.	vigured by COS	Data: 2/28/14	<i>(</i>

Standard Application Completeness Checklist

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

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.

See Attached Fee calculator sheet. Amount of Permit application is \$2,800.00.

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FEB **27** 2014

SALEM, OR

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.

a	SECTION 1: applicant information	and signature			
0	SECTION 2: property ownership				
X	SECTION 3: well development				
4	SECTION 4: water use				
X	SECTION 5: water management				
K	SECTION 6: storage of groundwate	er in a reservoir			
ત્ર	SECTION 7: use of stored groundy	vater from the reservoir	RECEIVED BY OWRD		
Ø	SECTION 8: project schedule		CCD 0.77 2014		
প	SECTION 9: within a district		FEB 27 2014		
X	SECTION 10: remarks		SALEM, OR		
	3.5	Attachments:	144		
a	Land Use Information Form with a	pproval and signature (must be an original) or s	signed receipt		
M	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. Example: A copy of the deed, land sales contract or title insurance policy.				
ř.	Fees - Amount enclosed: \$ See the Department's Fee Schedule	e at <u>www.oregon.gov/owrd</u> or call (503) 986-09	00.		
	Provide a map and ch	eck that each of the following items is includ	ed:		
X	Permanent quality and drawn in inle	S.			
K	Even map scale not less than 4" = 1	mile (example: $1'' = 400$ ft, $1'' = 1320$ ft, etc.)	RECEIVED BY OWR		
X	North Directional Symbol		FEB 1 4 2014		
A	Township, Range, Section, Quarter	/Quarter, Tax Lots	; LD 14 2014		
Ø	Reference corner on map		SALEM, OR		
K		if applicable, by reference to a recognized publit). Each well must be identified by a unique nar			
d	Indicate the area of use by Quarter/	Quarter and tax lot clearly identified			
a	Number of acres per Quarter/Quart supplemental irrigation, or nursery	er and hatching to indicate area of use if for prin	mary irrigation,		
	Location of main canals, ditches, p	ipelines or flumes (if well is outside of the area	of use)		
	Other				
Rev	vised 2/1/2012	G-(7776 Ground Water/2	WR		



Edventica

Go

Water Resources Department

Apply for a Permit to Appropriate Ground Water and/or Store Ground Water

Today's Date: Friday, February 14, 2014

	\$1,150.00
3.33	\$1,200.00
1	
1	
0	
0	
0	
:	\$450.00
Recalculate	
	\$2,800.00
	1 1 0 0

Return t	o Fee	Calculator	Options	page
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OWRD Fee Schedule

Fee Calculator Version B20130709

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FEB 27 2014

SALEM, OR