| WATER RESOURCES DEPARTMENT RECEIPT # 111783 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) | | | | |
|---|-------------------------------|--------------|-------------|-------------|
| RECEIVED FROM: Domik C. Hitti | | · i | APPLICATION | 6-17842 |
| BY: | Jan's Hitt | | PERMIT | |
| 0.00 | | | TRANSFER | |
| CASH: | CHECK:# OTHER: (IDENTIFY) | | TOTAL REC'D | \$700.00 |
| 1083 | TREASURY 4170 WRD | MISC CASH AC | CT . | |
| 0407 | COPIES | | | \$ |
| | OTHER: (IDENTIFY) | | | \$ |
| 0243 I/S | Lease 0244 Muni Water Mgmt. F | Plan 0245 | Cons. Water | |
| 17.73 | 4270 WRD | | | |
| <u> </u> | HICATI I ANTONIO | | | |
| 0407 | COPY & TAPE FEES | 0112 | | \$ |
| 0410 | RESEARCH FEES | | | \$ |
| 0408 | MISC REVENUE: (IDENTIFY) | | | \$ |
| TC162 | DEPOSIT LIAB. (IDENTIFY) | | | \$ |
| 0240 | EXTENSION OF TIME | | | \$ |
| | WATER RIGHTS: | EXAM FEE | 1 | RECORD FEE |
| 0201 | SURFACE WATER | \$ | 0202 | \$ |
| 0203 | GROUND WATER | \$200.00 | 0204 | \$500.00 |
| 0205 | TRANSFER | \$ | 1 | |
| | WELL CONSTRUCTION | EXAM FEE | 3 | LICENSE FEE |
| 0218 | WELL DRILL CONSTRUCTOR | \$ | 0219 | \$ |
| 0210 | LANDOWNER'S PERMIT | <u> </u> | J 0220 | \$ |
| | | | | |
| | OTHER (IDENTIFY) | | | |
| 0536 | TREASURY 0437 WELL | CONST. STAR | TFEE | |
| 0211 | WELL CONST START FEE | \$ | CARD# | |
| 0210 | MONITORING WELLS | \$ | CARD # | |
| | OTHER (IDENTIFY) | | | |
| 0607 | TREASURY 0467 HYDR | OACTIVITY | LIC NUMBER | |
| 0233 | POWER LICENSE FEE (FW/WRD) | | | \$ |
| 0233 | HYDRO LICENSE FEE (FW/WRD) | | | \$ |
| 0E01 | , | | | \$ |
| | HYDRO APPLICATION | | | Ψ |
| | _ TREASURY OTHE | R / RDX | | |

FUND _____ TITLE ____ OBJ. CODE ______ VENDOR # ____

RECEIPT: 111783 DATED: 4-18-14 BY:

DESCRIPTION _____

Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal

| Drought Application Completeness Checklist |
|---|
| Application G-17842 County KLAMATH Priority Date 418 14 Township HS Range 14E Section 7, 8 Amount 2.0 Cf5 Use R WM Dist. # 17 Applicant Name DENNIS HITT Receipt No. 11783 Caseworker Assigned: Mary Kim KJeana |
| Contact info and signature (in ink) 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. |
| Well Development Tables completed and/or a well log report included (if existing) Proposed water use Use Period of Use Underlying permit or certificate number listed Water Management Section (Estimates if the water system has not been designed) |
| ✓ Township, Range, Section ✓ Location of main canals, ditches, pipelines or flumes (if well is outside of POU) ✓ Place of use, ¼-¼'s and tax lot clearly identified ✓ Even map scale not less than 4" = 1 mile (1"= 1320 ft.); examples: 1" = 100 ft., 1" = 200 ft. ☐ Location of each well by reference to a recognized public land survey corner. Multiple wells shall be unique labeled, and identified on well logs if existing. ☐ Reference corner on map ☐ North Directional Symbol ☐ Number of acres per ¼-¼ if for irrigation, nursery, or agriculture |
| Fees: $\frac{\$200}{\text{base}} + \frac{\$400}{1^{\text{st}} \text{ CFS/fraction}} + \frac{100}{\$100 \text{ each add/l/fraction CFS}} = \frac{900}{\text{total due}} $ Paid $\frac{700}{\text{Owe}} = \frac{6}{100}$ Reviewed by: Date: |

Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050, ORS 537.615 & OAR 690-019-0040)

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. П SECTION 1: applicant information and signature SECTION 2: property ownership SECTION 3: well development SECTION 4: water use SECTION 5: water management SECTION 6: drought information Attachments: Fees - Amount enclosed: \$ 700.00 X \$200 Examination fee \$400 Recording fee for the first Cubic Foot per Second (CFS) or fraction thereof, and \$100 for each additional CFS or fraction thereof * one CFS equals 448.831 gallons per minute Provide a map and check that each of the following items is included: Permanent quality and drawn in ink Even map scale not less than 4'' = 1 mile (example: 1'' = 400 ft, 1'' = 1320 ft, etc.) North Directional Symbol Township, Range, Section, Quarter/Quarter, Tax Lots Reference corner on map Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west). Each well must be identified by a unique name and/or number. Indicate the area of use by Quarter/Quarter and tax lot clearly identified Number of acres per Quarter/Quarter and hatching to indicate area of use if for supplemental irrigation or nursery Location of main canals, ditches, pipelines or flumes Other: