

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **114242** 725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE # _____

RECEIVED FROM: **Thornton Family Ranch;**
BY: **Melvin & Deborah Thornton**

APPLICATION	R-88036
PERMIT	
TRANSFER	

CASH: ☐ CHECK: # **1475** OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ **830.00**

1003 TREASURY 4170 WRD MISC CASH ACCT

0407 COPIES \$
OTHER: (IDENTIFY) \$

0243 I/S Lease _____ 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water _____

4270 WRD OPERATING ACCT

MISCELLANEOUS

46111

0407 COPY & TAPE FEES \$
0410 RESEARCH FEES \$
0408 MISC REVENUE: (IDENTIFY) \$
TC162 DEPOSIT LIAB. (IDENTIFY) \$
0240 EXTENSION OF TIME \$

WATER RIGHTS:

0201 SURFACE WATER (Alt Res) **EXAM FEE** \$ **380.00** 0202 **RECORD FEE** \$ **450.00**
0203 GROUND WATER \$ 0204 \$
0205 TRANSFER \$

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR **EXAM FEE** \$ 0219 **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

0233 POWER LICENSE FEE (FW/WRD) \$
0231 HYDRO LICENSE FEE (FW/WRD) \$
HYDRO APPLICATION \$

TREASURY OTHER / RDX

FUND _____ TITLE _____
OBJ. CODE _____ VENDOR # _____
DESCRIPTION \$

RECEIPT: **114242** DATED: **12/8/14** BY: **Engelke Kopp**

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

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88036 County DOUGLAS
Priority Date 12-5-14 Township 24S Range 6W Section 26 Taxlot 102
Use MULTIPURPOSE Caseworker KERRI COPE
Amount (AF) 1.0 AF Watermaster DAVID WILLIAMS

Minimum Requirements (ORS 537.409)

☒ **Completed Watermaster review sheet** signed and dated by Watermaster.

Will the reservoir injure an existing water right? ☐ YES ☒ NO

If YES, can conditions be applied to mitigate the injury? ☐ YES ☒ NO **If NO, return the application.**

Did the watermaster determine when water is available for the proposed use? ☐ YES ☐ NO

The Watermaster review sheet must have been completed within the last 6 months.

If the watermaster determined that water is NOT available, return the application.

☒ **Completed ODFW review sheet** signed and dated by ODFW representative.

Will the reservoir pose a significant detrimental impact to an existing fishery resource? ☐ YES ☒ NO

If YES, can conditions be applied to mitigate the impact? ☐ YES ☒ NO **If NO, return the application.**

The ODFW review sheet must have been completed within the last 6 months.

☒ **Completed Land-Use Form** or receipt signed by the appropriate planning department official enclosed?

Does the use on land-use form match the proposed use on the application? Must be an original "wet" signature within the last 12 months.

☒ **Landowner Name, Mailing Address** and Telephone Number.

☒ **Source and tributary** listed. **NO WELLS-MUST HAVE GW APP TO USE A WELL AS A SOURCE !!**

☒ **Reservoir Location-** Township, Range, Section, Quarter Quarter, Taxlot

☒ **Dam height**, if applicable

☒ **Total Quantity of Storage Requested:** 1.0 AF

☒ **Proposed Use of the water....** Cannot accept application for use of this stored water at the same time (E2) multiple purpose

☒ **Property ownership indicated?** If applicant does not own all the land is the affected landowner's name and mailing address listed? (Including: lands not owned by applicant, upon which the source is locatedor..... that are crossed by the diversion works. This includes any roads or rights-of-way.)

☒ Provide the **legal description** of all the property involved with this application. You may include a copy of your deed land sales contract or title insurance to meet this requirement

☒ **Environmental Impact** section completed?

☒ **Application signed by the landowner(s)?** All parties noted as applicants must sign the application.

Must be an original "wet" signature.

☒ **Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant.**

☒ Reservoir Location - noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)*

☒ Scale of the Map (not less than 1" = 1320') **

☒ Reference corner on map

☒ North Directional Symbol **

☒ 1/4's clearly identified

☒ Reservoir clearly identified **

☒ Dam or POD (If off channel) Location coordinates referenced to a government land survey corner* If no dam, use coordinates to center of reservoir.**

☐ Fees enclosed**? Examination: Base Fee\$ 350 Permit Recording Fee\$ 450

plus\$ 30

plus\$

Total Paid \$ 830

Total Fees \$ 830

Completeness Check by: Scott - CSG Date: 12-8-14

Revised 2011-3-3