Drought Permit Application Completeness Checklist							
Application G-18085 County Cloud Priority Date 18-May-15							
Township 405 Range 36 Section							
Amount 100 gpm Use Irrigation WM Dist. # 7- Applicant Name Henry C. G. Cheyne							
Applicant Name Henry C. G. Cheyne							
Receipt No. 115895 Caseworker Assigned: Kim Barbe Kerri							
Contact info and signature (in ink)							
Property ownership: Does the applicant own all the land for the proposed project? Yes No							
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 Deriod of Use							
Underlying permit or certificate number listed							
Water Management Section (Estimates if the water system has not been designed)							
☐ The map must include:							
Township, Range, Section							
Location of main canals, ditches, pipelines or flumes (if well is outside of POU) Place of use, 1/4-1/4'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 uniquely labeled, and identified on well logs if existing.							
Reference corner on map							
North Directional Symbol							
Number of acres per 1/4-1/4 if for irrigation, nursery, or agriculture							
Fees:							
\$\frac{\$200}{base} + \frac{\$400}{1^{st}} + \frac{\$200}{\$100} each add'l/fraction CFS} = Paid Owe (exam) (recording) (recording)							

Reviewed by: _____ Date: _____

STATE OF OREGON

WATER RESOURCES DEPARTMENT

песеірт # 115895

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax)

INVOICE # _

	EIVED FROM		cheyne		APPLICATION PERMIT	G-18085	
					TRANSFER		
CAS	:H: CH	7950	OTHER: (IDENTIFY)) 	TOTAL REC'D	\$ 800,00	
	1083	TREASURY	4170 WRD	MISC CASH AC	CCT		
	0407	COPIES				\$	
		OTHER: (I	DENTIFY)			\$	
	0243 I/S Lea	ise 0244		Plan 0245			
		4270 WRD OPERATING ACCT					
		MISCELLANEOUS	•	4611	2		
	0407	COPY & TAPE FEE	S	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$	
	0410	RESEARCH FEES		0.00	1.4	\$	
	0408	MISC REVENUE:	(IDENTIFY)	Drock	in	\$	
	TC162	DEPOSIT LIAB. (II	DENTIFY)		J	\$	
	0240	EXTENSION OF TI	ME			\$	
		WATER RIGHTS:		EXAM FEE		RECORD FEE	
	0201	SURFACE WATER		\$	0202	\$	
	0203	GROUND WATER		\$ 200.00	0204	\$ 600.00	
	0205	TRANSFER		\$	4		
	WELL CONSTRUCTION		EXAM FEE	1	LICENSE FEE		
	0218 WELL DRILL CONSTRUCTOR			\$	0219	\$	
	02.10	LANDOWNER'S PI		<u> </u>	.J 0220	\$	
		OTHER	(IDENTIFY)				
	0536	TREASURY	0437 WELI	L CONST. STAR	T FEE		
	0211	WELL CONST STA	RT FEE	\$	CARD#		
	0210 MONITORING WELLS			\$	CARD#		
		OTHER	(IDENTIEV)		,	a	
						Name of the Control o	
				RO ACTIVITY	LIC NUMBER		
	0233	POWER LICENSE	FEE (FW/WRD)			\$	
	0231	HYDRO LICENSE	FEE (FW/WRD)	L		\$	
		HYDRO APPLICAT	ION			\$	
		TREASURY	OTHE	R/RDX			
	FUND		TITLE				
	OBJ. CODE		VENDOR #				
	DESCRIPTI					\$	
_				, , ,			
	11	15895	5,175	18/15	Maria	Ada	

DATED: 3/0/10 BY: // (aux No. Distribution - White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal