E-2

Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

| Yes | No |
|-----|----|
| Yes | No |

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

| Application | 3-18152 | _ County W | SCD | Priority Date | 23-Oct-15 | |
|---|---|--|--|---|---|--|
| Township 4 | StS Rang | e 12E | Section <u>34</u> | 43 | | |
| Amount. 89 | lcfs Use | Sup. Irn | gation | | WM Dist. # <u>3</u> | |
| Applicant Na | me Sop. I | migation | - GORHAL | n Blains | | |
| Receipt No | ·· · · · | () | Assigned: XB | | ☐ Kerri | |
| Contact i | nfo: Applicant/Organ | ization Name and I | Mailing Address | | | |
| \ - | e (in ink) of <i>all</i> applic tion or corporation). | ants or the applicar | t's authorized age | ent (include title o | r authority if for an | |
| Property | ownership: Does the | applicant own all th | ne land for the pro | posed project? | (Y) N | |
| If No: | | | | | | |
| The affected landowner's name and mailing address must be listed | | | | | | |
| | signed statement dec ccess to land crossed b | • | | | n easement permitting nitted. | |
| For a SW | V Application: Source | of water must be i | ndicated. | | | |
| re <i>N</i> e | eservoir or include a n | on-expired agreeme application cannot | ent for stored wate be filed at the san | er? (ORS 537.400 ne time as a Reserv | s the applicant own the coir or Alt Reservoir if it ion, Exp. Secondary (E2). | |
| □ If | for stored water not u | nder contract, is th | e source authorize | ed under a permit, | certificate, or decree? | |
| Pe | ermit or Certificate iss | ued? <u>Y / N</u> | Perm | it or Certificate # | | |
| For a GV | W Application: Well 1 | Development Table | es completed and/ | or a well log repor | t included (if existing) | |
| Proposed | l water use | | | | | |
| | mount of water from | each source in GPI | M, CFS, or AF | | | |
| | for supplemental irrigerimary and Supplement | • | • | g permit or certific | cate number listed | |
| Water M | anagement Section (E | stimates if the wate | er system has not | been designed) | | |
| Resource | Protection Section (/ | l/A for Groundwat | er) | | | |
| | tandard reservoir app Ith and surface area fo | | ary plans and spe | cifications includi | ng dam height, width, | |
| Project schedule (If system is already completed, indicate "existing.") | | | | | | |

| | Supple | emental data sheets enclosed (if neede | (d) | | | | | | | |
|-----------------|---|---|---|---|----------------------------|--|--|--|--|--|
| | | Form M (Municipal or Quasi-Munic | • | | | | | | | |
| | | Spring Description Sheet (if source i | s a spring) | | | | | | | |
| Á | A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature me be within the past 12 months. | | | | | | | | | |
| s | lescri _l ales c | al Description of all the properties in ption includes a metes and bounds or contract or title insurance policy can peed by a title company. Copies of tax be | other governmen rovide this inforn | t survey description. A conation, or applicant may s | opy of the deed, land | | | | | |
| \setminus_{N} | The proposed source <u>IS / IS NOT</u> (circle one) restricted or withdrawn from further appropriation. NOTE: 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. | | | | | | | | | |
| П | ☐ The map must meet all the minimum requirements of OAR 690-310-0050. | | | | | | | | | |
| | Township, Range, Section Location of main canals, ditches, pipelines or flumes (if POA/POD 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 diversion point, well or dam 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 ¼-¼ if for irrigation, nursery, or agriculture For a standard reservoir application to store ≥ 9.2 acre feet AND having a dam height ≥ 10 feet, map must be prepared by a CWRE | | | | | | | | | |
| H 1 | a a a | Fee S @ \$300 dd'1 CFS @ \$300 ea AF up to 20 AF @ \$30 ea add'1 AF @ \$1 ea add'1 □pod/poa □use @ea add'1 res @ \$125 ea | \$ 1150 \$ 300 \$ \$ \$ \$ | Permit Recording Fees Mitigation Fee Rec Fee Total Rec Fee Paid | \$ 450 \$ 450 \$ 450 | | | | | |
| | | Fee Total Fee Paid | \$ 1450 \$ 1450 | Total Fees Paid Amount Due | \$ 1900 \$ 1900 \$ | | | | | |
| Revie | ewed | by: Section | Date: 2 | 26-Oct-15 | _ | | | | | |

STATE OF OREGON

WATER RESOURCES DEPARTMENT 725 Summer St. N.E. Ste. A RECEIPT # 117794 INVOICE #_ SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax) APPLICATION RECEIVED FROM: PERMIT BY: TRANSFER CHECK:# CASH: OTHER: (IDENTIFY) \$1,900.00 X9052 TOTAL REC'D 4170 WRD MISC CASH ACCT TREASURY \$ 0407 COPIES \$ _ OTHER: (IDENTIFY) 0244 Muni Water Mgmt. Plan____ 0245 Cons. Water 0243 I/S Lease _ 4270 WRD OPERATING ACCT **MISCELLANEOUS** \$ **COPY & TAPE FEES** 0407 \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ TC162 DEPOSIT LIAB. (IDENTIFY) \$ EXTENSION OF TIME 0240 RECORD FEE WATER RIGHTS: EXAM FEE 0201 SURFACE WATER 0202 \$ \$ 450.00 **GROUND WATER** 0203 0204 1450.00 0205 **TRANSFER** LICENSE FEE **EXAM FEE WELL CONSTRUCTION** 0219 \$ 0218 WELL DRILL CONSTRUCTOR \$ 0220 LANDOWNER'S PERMIT OTHER (IDENTIFY) 0437 WELL CONST. START FEE TREASURY 0536 WELL CONST START FEE CARD # 0211 CARD# 0210 MONITORING WELLS \$ OTHER (IDENTIFY) 0467 HYDRO ACTIVITY LIC NUMBER 0607 TREASURY \$ POWER LICENSE FEE (FW/WRD) 0233 \$ HYDRO LICENSE FEE (FW/WRD) 0231

\$ HYDRO APPLICATION

TREASURY OTHER / RDX TITLE FUND _____ VENDOR # _ OBJ. CODE

RECEIPT:

DESCRIPTION

DATED: 16-23-15 BY: 94

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