| STATE OF OREGON | | | | | | | | | | |
|-----------------|-------------|----------|-------------------------|--------------|----------|---|---------------------|---------------|-------------|-------------|
| | | | | | | ES DEPART | MEN | T | | |
| RECEIP | т# 1 | .182 | 15 | SALE | A, OR 9 | t. N.E. Ste. A 17301-4172 13) 986-0904 (fax | K) | INVOICE # | ! | |
| RECEIVE | D FROM | 1: B | rad | Wait | nel | | A | PPLICATION | R-8 | 8155 |
| BY: | | | Nie | Mai | he | | | PERMIT | · • = | |
| 51. | | | | | <u> </u> | | | TRANSFER | | |
| CASH: | | IECK:# | | THER: (IDENT | IFY) | | 50633 2707223098 | | | |
| |) | X 193 | <u>56</u> | | | | TO | TAL REC'D | 1\$ 130 | 08.00 |
| 1 | 083 1 | | AY | 4170 WI | 10 1. | BECASHA | | | | |
| 040 | 7 | COPIES | | | | | | | \$ | |
| | | OTHER: | (1 | DENTIFY) | | | | | \$ | |
| 024 | 3 I/S Lea | 1se | 0244 | | | n 024 | | | | |
| | | | | | | PERATING | 1 A. 24 | Γ | | |
| | _ | MISCELL | | | | 46111 | | | \$ | |
| 040 | | COPY & T | | S | | | | | \$ | |
| 041 | - | | | (IDENTIFY) | | | | | \$ | |
| TC1 | - | DEPOSIT | | ` ' | | | | | \$ | |
| 024 | | EXTENSI | • | | | | | | \$ | |
| 024 | • | WATER R | | | | | | | BECT | AD FEE |
| 020 | | SURFACE | | | | EXAN FEE | | 0202 | \$ | |
| 020 | | GROUND | | | | \$ | - | 0202 | \$ | |
| 020 | - | TRANSFE | | | | \$1,368 ** | | 0204 | | |
| 020 | | WELL CO | | | | EXAM PEE | | | LICE | ISE FEE |
| 021 | 9 | | | STRUCTOR | | \$ | | 0219 | \$ | |
| 021 | 0 | | | | | • | | 0220 | \$ | |
| | | OTHER | | (IDENTIFY) | | | | | | |
| | | | res shakato she antique | | | | | | | |
| | S. S. S. S. | | | 0437 W | 18 M | Maria Articles Artic | <u>i</u> thi | | | e |
| 021 | | WELL CO | | | | \$ | | CARD | | |
| 021 | 0 | MONITOR | ING WE | LS | | \$ | | CARD | | |
| | | OTHER | | (IDENTIFY) | | | | | | |
| 0 | 207 | TREASI | MY . | 0467 HY | DRO | ACTIVITY | LIC | NUMBER | 1 | Augusta and |
| 023 | 3 | POWER L | ICENSE | FEE (FW/WRD |) | | | | \$ | |
| 023 | 81 | HYDRO L | ICENSE | FEE (FW/WRD) |) | L | | | \$ | |
| | | HYDRO A | PPLICAT | ION | | | | | \$ | |
| | | | RY · | Ő | | / RDX | | | | |
| FUI | | | | | | | | | | |
| OB | J. CODE | : | | VENDOR #_ | | | | | | |
| DES | SCRIPTI | ON | | | | | | | \$ | |
| | . 1 | 1821 | 5 | | 12 | - 7 -11- 8Y: | 1 | lai | 1. | |
| RECEIPT | | | | | | py - Fiscal, Blue | | File, Buff Co | py - Fiscal | |

•

i,

,

| STATE OF OREGON WATER RESOURCES DEPARTMENT RECEIPT # 118214 725 Summer St. N.E. Sto. A SALEM, OR 97301-4172 INVOICE # (503) 985-0900 / (503) 986-0904 (fax) | | | | | |
|---|-------------------------------|---|---|---|------|
| REC BY: | EIVED FF | nom: Brad Warbel Julie Warb | el | | |
| CAS | н:] | |) | \$304 | 5,00 |
| | 0407 | COPIES | and a second second Second second | \$ | |
| | | OTHER: (IDENTIFY) | Plan 024 | 5 Cops Water | |
| | | | | | |
| | 0407 0410 0408 TC162 | MISC REVENUE: (IDENTIFY) DEPOSIT LIAB. (IDENTIFY) | 6 - 120.00 | 60 46 <u>111 \$</u> \$ \$ \$ | |
| | 0240 0201 0203 0205 | EXTENSION OF TIME WATER RIGHTS: SURFACE WATER GROUND WATER TRANSFER | \$ \$2,520. | 0202 \$ 0204 \$ 540 | ,oc |
| | 0218 | WELL CONSTRUCTION WELL DRILL CONSTRUCTOR LANDOWNER'S PERMIT OTHER (IDENTIFY) | \$ | 0219 \$ 0220 \$ | |
| | | | | | |
| | 0211 0210 | WELL CONST START FEE MONITORING WELLS OTHER (IDENTIFY) | \$ \$ | janger kannengen In zuer () in einder het gester vorsitierte | |
| | 0233 0231 | POWER LICENSE FEE (FW/WRD) HYDRO LICENSE FEE (FW/WRD) | | | |
| , | | HYDRO APPLICATION | | \$ | |
| REC | | DDE VENDOR # | 2- 7- (5 ⁻ BY: 2 Copy - Fiscal, Blue C | | |

•

Standard Reservoir Application Completeness Checklist

Minimum Requirements This is the checklist used by WRD staff

| County: Crook Township: 175 Range: 21E Section: 9 |
|---|
| Amount: 108 af Use: Starage WM Dist # |
| Applicant Name: Warbel Ranches, LLC |
| Receipt Number: 1182154118214 Case Worker: Bowbie |
| |
| Applicant/Organization Name, Mailing Address, and Telephone Number. |
| 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. |
| 1 Source of water. |
| The proposed source is or is not (circle one) withdrawn from further appropriation. 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. |
| Property ownership indicated. |
| If applicant does not own all the land, the affected landowner=s name and mailing address must be listed. |
| If applicant does not own all the land, 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. |
| Proposed use of stored water. |
| Amount of water from <i>each</i> source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF) |
| Project schedule (If system is already completed, indicate "existing"). |
| Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir for all standard reservoir applications |
| |

| | the properties involved where water is diverted, |
|---|--|
| survey description. A copy of the deed, lan | cludes a metes and bounds, or other government d sales contract or title insurance policy can provide ook report prepared by a title company. <u>The</u> |
| Department will not accept a copy of the ta | |
| officials. Please be certain that the Land-U | ned and dated by the appropriate planning department se form lists all lands involved and all uses proposed. 2 months. Signature must be an original "wet" |
| A map prepared by a CWRE for a standard acre feet and having a dam height of more | reservoir application proposing to store more than 9.2 than 10 feet |
| The map must meet all the minimum requir | rements of OAR 690-310-0050. |
| POU) Place of use, 1/4, 1/4=s and tax lot of Even map scale not less than 4" = 1 Location of each diversion point, we land survey corner. Multiple wells s logs if existing. Reference corner on map North Directional Symbol | mile (example: 1" = 100 ft, 1" = 200 ft, etc.) ell or dam by reference to a recognized public hall be uniquely labeled, and identified on well |
| ✓ Number of acres per 1/4, 1/4, if for i Other | rrigation, nursery, or agriculture |
| · | |
| Fees: Amount of water requested | |
| Base Fee \$_ 600 | Total Exam Fees \$ 1468 |
| JUST CFSTAF 600 | Permit Recording Fees \$ _ 450 |
| 85 Addtnl CFS/ AF @ = Addtnl POD/POA @ = Addtnl Use @ = | Total Paid \$ 1578 Amount Due \$ 300 Amount Returned \$ |
| Reviewed by: Jeffrey | Date: 18-Dec-15 |
| | |

S:\groups\wr\Customer Service Group\Checklists\Standard Reservoir Application Completeness Checklist.docx



Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.140)

Include this checklist with the application

Check that each of the following items is included. The application <u>will</u> 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.

| \boxtimes | SECTION 1: applicant information | <u>ا</u> کا | SECTION 7: the amount | of water to be stored | | | |
|---|---|-------------|-------------------------------|-----------------------|--|--|--|
| X | SECTION 2: source of water | \boxtimes | SECTION 8: project sche | dule | | | |
| X | SECTION 3: dam height and composition | K | SECTION 9: property ow | nership | | | |
| XI. | SECTION 4: primary outlet works | ПNА | SECTION 10: within a dis | strict | | | |
| Ŕ | SECTION 5: emergency spillway | \bowtie | SECTION 11: map requir | ements | | | |
| | SECTION 6: the use of the impounded water | X | SECTION 12: signature | | | | |
| | Attachments: | | | | | | |
| Ø | Land Use Information Form with approval and | signature | e (must be an original) or si | gned receipt | | | |
| × × | Provide the legal description of: (1) the property on which the water is to stored, and (2) any property crossed by the proposed ditch, canal or other work | | | | | | |
| R | Fees - Amount enclosed: \$ 1368 ^{og} See the Department's Fee Schedule at <u>www.oregon.gov/owrd</u> or call (503) 986-0900. | | | | | | |
| Ø | Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir | | | | | | |
| Provide a map and check that each of the following items is included: | | | | | | | |
| T | Map must be prepared by Certified Water Righ | ts Exami | ner | | | | |
| 2 | Permanent quality and drawn in ink | | | RECEIVED BY OWRD | | | |
| Y | Even map scale not less than 4" = 1 mile (exam | nples: 1" = | = 400 ft, 1" = 1320 ft,) | | | | |
| Y | North Directional Symbol | | | DEC 07 2015 | | | |

- Township, Range, Section, Quarter/Quarter, Tax Lots
- Reference public-land survey corner on map
- Location of each dam if applicable, by reference to a recognized public-land survey corner (distances north/south and east/west)
- Indicate the area of use by Quarter/Quarter and tax lot identified clearly
- □ ₩A Number of acres per Quarter/Quarter and hachuring to indicate area of use if for primary irrigation, supplemental irrigation, or nursery

MALocation of main canals, ditches, pipelines or flumes (if well is outside of the area of use)

Other

I

*Please note a secondary application is necessary if there will be out-of-reservoir uses associated with this application. To be filed later

SALEM, OR