

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **118216**

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

INVOICE # _____

RECEIVED FROM: John E. Poynter
BY: _____

| | |
|-------------|---------|
| APPLICATION | R-88153 |
| PERMIT | |
| TRANSFER | |

CASH: CHECK:# 5080 OTHER: (IDENTIFY) _____

TOTAL REC'D \$ 920.00

1063 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

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

46111

WATER RIGHTS:

| | | | |
|--------------------|------------------|------|------------------|
| 0201 SURFACE WATER | EXAM FEE | 0202 | RECORD FEE |
| 0203 GROUND WATER | \$ <u>470.00</u> | 0204 | \$ <u>450.00</u> |
| 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: **118216**

DATED: 12-7-15 BY: Maria Anderson

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-88153 County Lane
Priority Date 7-Dec-15 Township 205R Range 45N Section 20 Taxlot 300
Use Multi use Caseworker Barbie
Amount (AF) 4af Watermaster 2

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:** 4 AF
- Proposed Use of the water....** Cannot accept application for use of this stored water at the same time (E2)
- 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 flow 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 \$ 120
plus \$ _____

Total Paid \$ 920 Total Fees \$ 920
Completeness Check by: Jeffery Date: 7-Dec-15 Revised 2011-3-3

Alternate Reservoir Application Completeness Checklist

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Priority Date _____ Township 20 Range 05 Section 20 Taxlot 300
Use _____ Caseworker _____
Amount (AF) _____ Watermaster _____

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plus\$ _____

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Completeness Check by: John Date: _____

Revised 2011-3-3

RECEIVED BY OWRD
DEC 07 2015

SALEM, OR