STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 118322

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

INVOICE # _____

| | 1835003 | DILZER OTHER: (IDENTIFY |) | PERMIT TRANSFER TOTAL REC'D | 6-18175 |
|------------|------------------|------------------------------------|-------------|-----------------------------------|-------------|
| 1083 | TREASURY | 4170 WRD | MISC CASH | ACCT | |
| 0407 | COPIES OTHER: | (IDENTIEV) | | | \$ |
| 0243 I/S I | _ | (IDENTIFY) 244 Muni Water Mgmt. | Plan | 0245 Cons. Water | Li. |
| 1 | | 4270 WRD | | | |
| | MISCELLANEO | | 46111 | | *** |
| 0407 | COPY & TAPE I | | יייסר | | \$ |
| 0410 | RESEARCH FE | | | | \$ |
| 0408 | MISC REVENU | | | | \$ |
| TC162 | DEPOSIT LIAB. | , | | | \$ |
| 0240 | EXTENSION OF | | | | \$ |
| | WATER RIGHT | e. | EXAM PE | - 1 | RECORD FEE |
| 0201 | SURFACE WAT | | \$ | 0202 | \$ |
| 0203 | GROUND WATI | | | | \$ 450,00 |
| 0205 | TRANSFER | -n | \$1,750 | 0204 | |
| 0205 | | | EXAM FE | | LICENSE FEE |
| | WELL CONSTR | | | 0219 | \$ |
| 0218 | WELL DRILL CO | | \$ | 0220 | \$ |
| | LANDOWNER'S | S PERMIT | | 0220 | <u> </u> |
| | OTHER | (IDENTIFY) | | | |
| 0536 | TREASURY | 0437 WEL | L CONST. ST | ART FEE | |
| 0211 | WELL CONST | START FEE | \$ | CARD | i i |
| 0210 | MONITORING \ | WELLS | \$ | CARD | |
| | OTHER | (IDENTIFY) | | | |
| 0607 | TREASURY | 0467 HYD | RO ACTIVITY | LIC NUMBER | |
| 0233 | | SE FEE (FW/WRD) | | | \$ |
| 0231 | | SE FEE (FW/WRD) | | | \$ |
| | HYDRO APPLIC | , | | | \$ |
| | TREASURY | ОТН | ER /-RDX | | |
| FLIND | | TITLE | | | |
| | | | | - | _ |
| | DE | VENDOR # | | | |
| DECCDIE | PTION | | | | 7. |

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

Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff Township _ Range 14E Section 23 Receipt No. 118 52 Caseworker Assigned: ☐ Barbe □ Kerri Contact info: Applicant/Organization Name and Mailing Address Signature (in ink) of all applicants or the applicant's authorized agent (include title or authority if for an organization or corporation). Property ownership: Does the applicant own all the land for the proposed project? 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. For a SW Application: Source of water must be indicated. ☐ If the source is stored water, is the stored water component filled out and does the applicant own the reservoir or include a non-expired agreement for stored water? (ORS 537.400) NOTE: A surface water application cannot be filed at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application, Exp. Secondary (E2). ☐ If for stored water not under contract, is the source authorized under a permit, certificate, or decree? Permit or Certificate # _ Permit or Certificate issued? Y / N For a GW Application: Well Development Tables completed and/or a well log report included (if existing) Proposed water use Amount of water from each source in GPM, CFS, or AF Period of use indicated

If for supplemental irrigation, primary acreage or underlying permit or certificate number listed

(Primary and Supplemental Irrigation counts as 2 uses)

Water Management Section (Estimates if the water system has not been designed)

Resource Protection Section (N/A for Groundwater)

For all standard reservoir applications: Preliminary plans and specifications including dam height, width, / crest width and surface area for each reservoir.

Project schedule (If system is already completed, indicate "existing.")

| $ \swarrow $ | Supplemental data sheets enclosed (if neede | d) | | |
|--------------|--|---|---|--|
| \ | Form M (Municipal or Quasi-Munic | ipal) | | |
| | ☐ Spring Description Sheet (if source is | s a spring) | | |
| Q' | A completed Land-Use Form or receipt sig Please be certain that the Land-Use form list be within the past 12 months. | | | |
| ωλ | A Legal Description of all the properties in description includes a metes and bounds or sales contract or title insurance policy can prepared by a title company. Copies of tax be | other government rovide this inforn | t survey description. A conation, or applicant may s | ppy of the deed, land |
| ø | The proposed source IS / IS NOT circle of NOTE: If it is withdrawn under ORS 538, the accept the application and a negative IR with | hen return applic | | |
| d | The map must meet all the minimum requir | rements of OAR | 690-310-0050. | |
| | Location of main canals, ditches, pip Location of main canals, ditches, pip Place of use, ¼-¼'s and tax lot clear Even map scale not less than 4" = 1 Location of each diversion point, we Multiple wells shall be uniquely labe Reference corner on map North Directional Symbol Number of acres per ¼-¼ if for irrig For a standard reservoir application must be prepared by a CWRE | ly identified mile (1"= 1320 ft ell or dam by refe eled, and identifie ation, nursery, or | a.); examples: 1" = 100 ft. rence to a recognized pubed on well logs if existing | , I" = 200 ft. olic land survey corner. |
| | Fees: Base Fee 1 st CFS @ \$300add'1 CFS @ \$300 eaAF up to 20 AF @ \$30 eaadd'1 AF @ \$1 ea1 add'1 □ pod/poa ☑use @ 300 ea _add'1 res @ \$125 ea | \$ 1150 \$ 300 \$ \$ \$ 300 \$ | Permit Recording Fees Mitigation Fee Rec Fee Total Rec Fee Paid | \$ <u>450</u> \$ \$ <u>450</u> |
| | Exam Fee Total Exam Fee Paid | \$ <u>1750</u> \$ <u>1750</u> | Total Fees Paid Amount Due | \$ 2200 \$ 2200 \$ _ Q |
| Re | viewed by: Tesca | Date: | Ne-Dec-15 | |

Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.615)

Include this checklist with the application

Check that each of the following items is included. The application will 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 and signature | RECEIVED |
|-----------------|--|--|
| \boxtimes | SECTION 2: property ownership | NEULIVED |
| \boxtimes | SECTION 3: well development | DEC 14 2015 |
| \boxtimes | SECTION 4: water use | OWRD |
| \boxtimes | SECTION 5: water management | |
| \boxtimes | SECTION 6: storage of groundwater in a reservoir | |
| \boxtimes | SECTION 7: use of stored groundwater from the reservoir | |
| \boxtimes | SECTION 8: project schedule | |
| \boxtimes | SECTION 9: within a district | |
| \boxtimes | SECTION 10: remarks | |
| | | |
| | | |
| | Attachments: | |
| \boxtimes | Land Use Information Form with approval and signature (must be an original) or | signed receipt |
| \boxtimes | Provide the legal description of: (1) the property from which the water is to be di | |
| | crossed by the proposed ditch, canal or other work, and (3) any property on which as depicted on the map. Example: A copy of the deed, land sales contract or title | |
| | | insurance policy. |
| | as depicted on the map. Example: A copy of the deed, land sales contract or title Fees - Amount enclosed: \$2200.00 | 900. |
| ⊠ | as depicted on the map. Example: A copy of the deed, land sales contract or title Fees - Amount enclosed: \$2200.00 See the Department's Fee Schedule at www.oregon.gov/owrd or call (503) 986-0 | 900. |
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