

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

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

RECEIPT # **118554**

INVOICE # \_\_\_\_\_

RECEIVED FROM: Organic Investments, LLC  
BY: \_\_\_\_\_

|             |         |
|-------------|---------|
| APPLICATION | R-88166 |
| PERMIT      |         |
| TRANSFER    |         |

CASH:  CHECK:#  241 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1,040.00

**1083 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         | 46111     | \$             |
| 0410              | RESEARCH FEES            |           | \$             |
| 0408              | MISC REVENUE: (IDENTIFY) |           | \$             |
| TC162             | DEPOSIT LIAB. (IDENTIFY) |           | \$             |
| 0240              | EXTENSION OF TIME        |           | \$             |
| WATER RIGHTS:     |                          | EXAM FEE  | RECORD FEE     |
| 0201              | SURFACE WATER            | \$ 590.00 | 0202 \$ 450.00 |
| 0203              | GROUND WATER             | \$        | 0204 \$        |
| 0205              | TRANSFER                 | \$        |                |
| WELL CONSTRUCTION |                          | EXAM FEE  | LICENSE FEE    |
| 0218              | WELL DRILL CONSTRUCTOR   | \$        | 0219 \$        |
|                   | 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 \_\_\_\_\_

**RECEIVED  
OVER THE COUNTER**

RECEIPT: **118554** DATED: 11/1/16 BY: Manuel

# Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88166 County Polk  
Priority Date 11-Jan-16 Township 105 Range 5W Section 11 Taxlot 400  
Use molt Caseworker Kim  
Amount (AF) 4af @ Watermaster 16

## 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: 8af
- 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 located .....or..... 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 flaw 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\*\*?

Total Paid \$ 1040

Total Fees \$

Completeness Check by: Jeffrey

Date: 11-Jan-16

Revised 2011-3-3

RECEIVED

JAN 11 2016

OWRD

Examination: Base Fee\$ 340 Permit Recording Fee\$ 450  
plus\$ 240  
plus\$ \_\_\_\_\_