STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 118935

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # _____

| 1083 0407 | COPIES OTHER: (IDENTIFY) ase 0244 Muni Water Mg | RD MISC CASH A | 45 Cons. Water | \$ 1780.00 |
|------------------------------|-----------------------------------------------------------------------------------------------------------|----------------|-----------------------------------|-------------|
| 1083 0407 0243 I/S Le | TREASURY 4170 W COPIES OTHER: (IDENTIFY) ase 0244 Muni Water M 4270 W MISCELLANEOUS COPY & TAPE FEES | RD MISC CASH A | TOTAL REC'D ACCT 45 Cons. Water | \$ |
| 1083 0407 0243 I/S Le | TREASURY 4170 W COPIES OTHER: (IDENTIFY) ase 0244 Muni Water M 4270 W MISCELLANEOUS COPY & TAPE FEES | RD MISC CASH A | ACCT | \$ |
| 0407 0243 I/S Le: 0407 | COPIES OTHER: (IDENTIFY) ase 0244 Muni Water Mg 4270 W MISCELLANEOUS COPY & TAPE FEES | gmt. Plan 024 | 45 Cons. Water | |
| 0243 I/S Le | OTHER: (IDENTIFY) ase 0244 Muni Water Mg 4270 WI MISCELLANEOUS COPY & TAPE FEES | RD OPERATING A | ACCT | |
| 0243 I/S Le | ase 0244 Muni Water Mg 4270 W MISCELLANEOUS COPY & TAPE FEES | RD OPERATING A | ACCT | \$ |
| 0407 | 4270 W MISCELLANEOUS COPY & TAPE FEES | RD OPERATING A | ACCT | |
| | MISCELLANEOUS COPY & TAPE FEES | _ | | |
| | COPY & TAPE FEES | 46111 | | |
| | | 70 | | |
| 0410 | RESEARCH FEES | | • | \$ |
| • | | | | \$ |
| 0408 | MISC REVENUE: (IDENTIFY) | | | \$ |
| TC162 | DEPOSIT LIAB. (IDENTIFY) | | | \$ |
| 0240 | EXTENSION OF TIME | | | \$ |
| | WATER RIGHTS: | EXAM FEE | | RECORD FEE |
| 0201 | SURFACE WATER | \$1,530. | 0202 | \$ 450.0 |
| 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 W | ELL CONST. STA | RT FEE | |
| 0211 | WELL CONST START FEE | \$ | CARD# | |
| 0210 | MONITORING WELLS | \$ | CARD# | |
| | OTHER (IDENTIFY) | | | |
| 0607 | TREASURY 0467 HY | YDRO ACTIVITY | LIC NUMBER | |
| 0233 | POWER LICENSE FEE (FW/WRD |)) | | \$ |
| 0231 | HYDRO LICENSE FEE (FW/WRD |) | | \$ |
| | HYDRO APPLICATION | | | \$ |
| | TREASURY 0 | THER / RDX | | |
| FUND | TITLE | | | |
| OBJ. CODE | VENDOR # _ | | | |
| DESCRIPT | ION | | | \$ |
| | | 2/16/16 BY: | | - A |

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

| Application 5-88179 County Douglas | Priority Date 16- Feb 16 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| Township 285 Range 6W Section 29 E | 30 |
| Amount 300 af. Use Irrigation | WM Dist. # <u>15</u> |
| Applicant Name Kennerly Ranches, LLC | |
| Receipt No. 118935 Caseworker Assigned: Barbe | Kim |
| Contact info: Applicant/Organization Name and Mailing Address | |
| Signature (in ink) of <i>all</i> applicants or the applicant's authorized agent (in organization or corporation). | aclude title or authority if for an |
| Property ownership: Does the applicant own all the land for the proposed | d project? Y N |
| If No: | |
| The affected landowner's name and mailing address must be liste | od . |
| A signed statement declaring the existence of either written author access to land crossed by the proposed ditch canal or other work to | · |
| For a SW Application: Source of water must be indicated. | |
| If the source is stored water, is the stored water component filled reservoir or include a non-expired agreement for stored water? (C NOTE: A surface water application cannot be filed at the same time will be for the use of the stored water under the PROPOSED Reservo | ORS 537.400) e as a Reservoir or Alt Reservoir if it |
| If for stored water not under contract, is the source authorized und | der a permit, certificate, or decree? |
| Permit or Certificate issued?Y / N Permit or C | Certificate # R-9964 |
| For a GW Application: Well Development Tables completed and/or a w | vell log report included (if existing) |
| roposed 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 perm | nit 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 specifical crest width and surface area for each reservoir. | tions including dam height, width, |
| Project schedule (If system is already completed, indicate "existing.") | |

| | Supplemental data sneets enclosed (if neede | | | |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------------------|----------------------------------------------------|
| | ☐ Form M (Municipal or Quasi-Municipal or Quasi-Mu | • | | |
| | , | | ÷ | |
| | A completed Land-Use Form or receipt sig <i>Please be certain that the Land-Use form liste within the past 12 months.</i> | ned and dated b sts all lands invo | y the appropriate planning plved and all uses propose | g department officials. ed. Date of signature must |
| 9 | A Legal Description of all the properties in description includes a metes and bounds or esales contract or title insurance policy can prepared by a title company. Copies of tax before prepared by a title company. | other governmer rovide this infor | nt survey description. A commation, or applicant may s | opy of the deed, land |
| 1 | The proposed source IS/IS NOT (rircle of NOTE: If it is withdrawn under ORS 538, that accept the application and a negative IR with | ien return appli | | |
| | The map must meet all the minimum requir | ements of OAR | 690-310-0050. | |
| | Township, Range, Section | | | |
| | Location of main canals, ditches, pip | elines or flumes | (if POA/POD is outside of | of POU) |
| | Place of use, 1/4-1/4's and tax lot clearl | • | | |
| | Even map scale not less than 4" = 1 i | nile (1"= 1320 f | (t.); examples: $1'' = 100 ft.$ | 1'' = 200 ft. |
| | Location of <i>each</i> diversion point, we | • | | - |
| | Multiple wells shall be uniquely labe | led, and identifi | ed on well logs if existing | ζ. |
| | Reference corner on map | | | |
| | North Directional Symbol | | | |
| | Number of acres per 1/4-1/4 if for irrigation | | | |
| | For a standard reservoir application t | o store ≥ 9.2 ac | re feet AND having a dan | n height ≥ 10 feet, map |
| | must be prepared by a CWRE | | | |
| | Fees: | | | |
| | Base Fee | \$ <u>450</u> | Permit Recording Fees | s 450 |
| | 1 st CFS @ <u>\$300</u> | \$ | Mitigation Fee | \$ |
| | add'l CFS @ \$300 ea | \$ | | |
| • | 20 AF up to 20 AF @ <u>\$30 ea</u> | \$ 400 | Rec Fee Total | s <u>450</u> |
| _ | 2 8 O add'l AF @ <u>\$1 ea</u> | \$280 | Rec Fee Paid | \$ <u>450</u> |
| | add'l □pod/poa □use @ea | \$ | | |
| | add`l res @ <u>\$125 ea</u> | \$ | | |
| | Exam Fee Total | s <i>133</i> 0 | Total Fees | s_1780 |
| | Exam Fee Paid | s <u>1330</u> s <u>1330</u> | Paid | 5 1780 |
| | | | Amount Due | S_ p |
| | — (C | | | |
| Rev | iewed by: <u>Jetfrey</u> | Date: | 16- Feb-16 | |

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 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 |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| \boxtimes | SECTION 2: property ownership |
| \boxtimes | SECTION 3: source of water requested |
| \boxtimes | SECTION 4: water use |
| \boxtimes | SECTION 5: water management |
| \boxtimes | SECTION 6: resource protection |
| \boxtimes | SECTION 7: project schedule |
| | SECTION 8: within a district |
| \boxtimes | SECTION 9: 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 diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used as depicted on the map. |
| \boxtimes | Fees - Amount enclosed: \$1,780.00 See the Department's Fee Schedule at www.oregon.gov/owrd or call (503) 986-0900. |
| | Provide a map and check that each of the following items is included: |
| | |
| \boxtimes | Permanent quality and drawn in ink |
| \boxtimes | Even map scale not less than $4'' = 1$ mile (example: $1'' = 400$ ft, $1'' = 1320$ ft, etc.) |
| \boxtimes | North Directional Symbol |
| \boxtimes | Township, Range, Section, Quarter/Quarter, Tax Lots |
| \boxtimes | Reference corner on map |
| \boxtimes | Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west) |
| \boxtimes | Indicate the area of use by Quarter/Quarter and tax lot clearly identified |
| \boxtimes | Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery |
| \boxtimes | Location of main canals, ditches, pipelines or flumes (if well is outside of the area of use) |
| | Other: RECEIVED BY OWRD |
| | |

FEB 16 2016