STATE OF OREGON

RECEIPT #	119037	725 Summer SALEM, OF	CES DEPARTN St. N.E. Ste. A 3 97301-4172 503) 986-0904 (fax)	INVOICE #	R-88185
RECEIVED	BOM: BC-	- 41.	1.450.	APPLICATION	5-88184
BY:	Sales	SOM NO	4 sery	PERMIT	2 00100
ы.	_505			TRANSFER	
CASH:	CHECK:# O	THER: (IDENTIFY)	0.5		
	1888 X			TOTAL REC'D	\$ 4,013.90
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0407		DENTIFY)			\$
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		4270 WHD	OPERATING A	<u> </u>	
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0407	COPY & TAPE FEE	° 4 R-88	185 = 114	13,00	\$
0410 0408	RESEARCH FEES MISC REVENUE:	(IDENTIEV)	`	150.00	\$
TC162		S_S	raial - 1"	00.00	\$
0240	EXTENSION OF TI			150.00	\$
02.0					RECORD FEE
0201	WATER RIGHTS: SURFACE WATER		S Z WZ O	(D) 0202	\$ 900.00
0201	GROUND WATER		\$ 3.113.0	0204	\$
0205	TRANSFER		\$	-	
	WELL CONSTRUC	TION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CONS		\$	0219	\$
0210	LANDOWNER'S PE			0220	\$
	OTHER	(IDENTIFY)			
		(
053	6 TREASURY	0437 WELL	CONST. STAR	TFEE	
0211	WELL CONST STAI	RTFEE	\$	CARD#	
0210	MONITORING WEL	LS	\$	CARD #	
	OTHER	(IDENTIFY)			
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0231	HYDRO LICENSE F				\$
	HYDRO APPLICAT	, ,			\$
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FUND		TITLEA	RECE	IVED	
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DESC	RIPTION		JAEV IUC	COUNTE	**
				A 1	$\Delta A A$

RECEIPT: 119037 DATED: 2.2616 BY: 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 5-88/86 County Clackandes Priority Date Du-Feb-16
Township 25 Range 4E Section 31
Amount 2.48 cfs Use Mursery WM Dist. #20
Applicant Name Patterson Nursery Sales, LLC
Receipt No. 119037 Caseworker Assigned: Barbe
Contact info: Applicant/Organization Name and Mailing Address
Signature (in ink) of <i>all</i> 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 issued? Y / N Permit or Certificate #
For a GW Application: Well Development Tables completed and/or a well log report included (if existing)
Proposed water use
Amount of water from <i>each</i> 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.")

	Supplemental data sheets enclosed (if needed	d)		
	☐ Form M (Municipal or Quasi-Munici			
	☐ Spring Description Sheet (if source is	s a spring)		
	A completed Land-Use Form or receipt sign Please be certain that the Land-Use form lis be within the past 12 months.			
<u>d</u>	A Legal Description of all the properties in description includes a metes and bounds or calles contract or title insurance policy can prepared by a title company. Copies of tax b	other government ovide this inform	survey description. A conation, or applicant may s	py of the deed, land
	The proposed source IS IS NOT circle o NOTE: If it is withdrawn under ORS 538, th accept the application and a negative IR wil	ien return applice		
0	The map must meet all the minimum require	ements of OAR 6	590-310-0050.	
	Township, Range, Section			
	☐ Location of main canals, ditches, pipe	elines or flumes ((if POA/POD is outside o	of POU
	Place of use, 14-14's and tax lot clearly		(ii I Offil OD is duiside c	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Even map scale not less than $4'' = 1$ r	-	.): examples: 1" = 100 ft.	. 1" = 200 ft.
	Location of <i>each</i> diversion point, we		•	
	Multiple wells shall be uniquely labe	•		•
	Keference corner on map		c c	
	☑ Xorth Directional Symbol			
	Number of acres per 1/4-1/4 if for irriga	ation, nursery, or	agriculture	
	For a standard reservoir application t	•	-	1 height > 10 feet, map
	must be prepared by a CWRE			į
	Fees:	900		
	Base Fee	5 800	Permit Recording Fees	s 450
	1 st CFS @ <u>\$300</u>	s 900	Mitigation Fee	\$
	add'l CFS @ \$300 ea	\$	D C 75 75 1	· NO
	AF up to 20 AF @ \$30 ea	\$	Rec Fee Total	5 450 5 450
	add'l AF @ <u>\$1 ea</u> add'l	\$ \$	Rec Fee Paid	3_130
	add 1 res @ \$125 ea	\$		
	add 1103 @ 3123/Cd			
	Exam Fee Total	5 1700	Total Fees	52150
	Exam Fee Paid	5	Paid	52150
			Amount Due	5
	+ 00		_	
Re	viewed by: Jethree	Date:	26-Feb	
			Abraham - Abraha	-

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
\boxtimes	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: \$ 2,150.00 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:
5 21	Democrate and the and democrate to the
	Permanent quality and drawn in ink
	Even map scale not less than 4" = 1 mile (example: 1" = 400 ft, 1" = 1320 ft, etc.)
	North Directional Symbol Township Pages Section Operator/Operator Town Late
	Township, Range, Section, Quarter/Quarter, Tax Lots
	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 the area)
	Other:
	FEB 26 2016

WATER RESOURCES DEPT SALEM, OREGON