

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **119475**

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

INVOICE # _____

RECEIVED FROM: <u>Vic Rolfe</u>	APPLICATION <u>G-18281</u>
BY: _____	PERMIT _____
	TRANSFER _____

CASH: CHECK:# 1157 OTHER: (IDENTIFY) _____

TOTAL REC'D \$ 300.00

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 <u>46111</u>		
0407 COPY & TAPE FEES	\$ _____	
0410 RESEARCH FEES	\$ _____	
0408 MISC REVENUE: (IDENTIFY) _____	\$ _____	
TC162 DEPOSIT LIAB. (IDENTIFY) _____	\$ _____	
0240 EXTENSION OF TIME	\$ _____	
WATER RIGHTS:		
0201 SURFACE WATER	EXAM FEE \$ _____	0202 RECORD FEE \$ _____
0203 GROUND WATER	EXAM FEE \$ <u>300.00</u>	0204 RECORD FEE \$ _____
0205 TRANSFER	EXAM FEE \$ _____	
WELL CONSTRUCTION		
0218 WELL DRILL CONSTRUCTOR	EXAM FEE \$ _____	0219 LICENSE FEE \$ _____
LANDOWNER'S PERMIT		0220 LICENSE FEE \$ _____
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: **119475** DATED: 4-14-16 BY: Carlos O. Turner

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

WATER RESOURCES DEPARTMENT

RECEIPT # 119293

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

INVOICE # _____

RECEIVED FROM: Vic Rolfe
BY: _____

APPLICATION	<u>G-18281</u>
PERMIT	
TRANSFER	

CASH: CHECK:# X 1154 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1,750.00

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	<u>46111</u>	\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)		\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$
WATER RIGHTS:			
0201	SURFACE WATER		\$
0203	GROUND WATER		\$
0205	TRANSFER		\$
WELL CONSTRUCTION			
0218	WELL DRILL CONSTRUCTOR		\$
	LANDOWNER'S PERMIT		\$
	OTHER (IDENTIFY)		\$

EXAM FEE
\$
\$ <u>1,750.00</u>
\$
EXAM FEE
\$

RECORD FEE
\$
\$
LICENSE FEE
\$
\$

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: 119293 DATED 3/25/16 BY Carlos Turner

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRD staff

Yes No

Application G-18281
~~G-18272~~ County Gilliam Priority Date 3/25/2016
~~3/25/2016~~

Township 13 Range 21E Section 10

Amount 1.89 cfs Use irrigation & sup. irrigation WM Dist. # 21

Applicant Name Robert Victor Rolfe

Receipt No. 119293
119475 Caseworker Assigned: Barbe Kim CSA

- 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? (Y) / N

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.

~~NA~~ 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 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)

~~NA~~ Resource Protection Section (NA for Groundwater)

~~NA~~ 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)
 - Form M (Municipal or Quasi-Municipal)
 - Spring Description Sheet (if source is a spring)
- A completed **Land-Use Form** or receipt signed and dated by the appropriate planning department officials. *Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months.*
- A **Legal Description** of all the properties involved where water is diverted, crossed, and used. The Legal description includes a metes and bounds or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or applicant may submit a lot book report prepared by a title company. Copies of tax bills are not acceptable.
- The proposed source **IS NOT** (circle one) restricted or withdrawn from further appropriation. *NOTE: If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.*
- The **map** must meet all the minimum requirements of OAR 690-310-0050.

- Township, Range, Section
- Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)
- Place of use, 1/4-1/4's and tax lot clearly identified
- Even map scale not less than 4" = 1 mile (1" = 1320 ft.); examples: 1" = 100 ft., 1" = 200 ft.
- Location of *each* diversion point, well or dam by reference to a recognized public land survey corner. Multiple wells shall be uniquely labeled, and identified on well logs if existing.
- Reference corner on map
- North Directional Symbol
- Number of acres per 1/4-1/4 if for irrigation, nursery, or agriculture
- For a standard reservoir application to store ≥ 9.2 acre feet AND having a dam height ≥ 10 feet, map must be prepared by a CWRE

<input type="checkbox"/> Fees:			
Base Fee	\$ <u>1150</u>	Permit Recording Fees	\$ <u>450</u>
1 st CFS @ \$300	\$ <u>300</u>	Mitigation Fee	\$ _____
<u>1</u> add'l CFS @ \$300 ea	\$ <u>300</u>	Rec Fee Total	\$ <u>450</u>
_____ AF up to 20 AF @ \$30 ea	\$ _____	Rec Fee Paid	\$ _____
_____ add'l AF @ \$1 ea	\$ _____		
<u>1</u> add'l pod/poa use @ <u>300</u> ea	\$ <u>300</u>		
_____ add'l res @ \$125 ea	\$ _____		
Exam Fee Total	\$ <u>2050</u>	Total Fees	\$ <u>2500</u>
Exam Fee Paid	\$ _____	Paid	\$ <u>1750</u>
		Amount Due	\$ <u>750</u>

450 perm rec +
300 add use

Reviewed by: _____ Date: _____