STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 119650

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

INVOICE # ____

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H: C	CHECK:#	OTHER: (II	DENTIFY)		TR	ANSFER	1	
	X 1006				TOTA	L REC'D	\$410	১.
1083	TREASURY	4170	WRD M	ISC CASH A	ACCT	,		
0407	COPIES						\$	
	_ OTHER:	(IDENTIFY)		-			\$	
0243 I/S L	ease 024	4 Muni Wat	er Mgmt. Pla	an 02	245 Cons.	Water		
		4270	WRD O	PERATING	ACCT			
	MISCELLANEOU	S		461	1			
0407	COPY & TAPE FE	ES		,0,	• •		\$	
0410	RESEARCH FEE	S					\$	
0408	MISC REVENUE:	(IDENTIF	Y)				\$	_
TC162	DEPOSIT LIAB. (IDENTIFY)					\$	
0240	EXTENSION OF	ГІМЕ					\$	
	WATER RIGHTS:			EXAM FEE			RECOR	D
0201	SURFACE WATER	R		\$ 410.0	γ o:	202	\$	
0203	GROUND WATER	1		\$		204	\$	
0205	TRANSFER			\$	\neg			
	WELL CONSTRU	CTION		EXAM FEE			LICENS	E
0218	WELL DRILL CON	ISTRUCTO	R	\$	O:	219	\$	
	LANDOWNER'S F	PERMIT			02	220	\$	
	OTHER	(IDENTI	FY)					
0536	TREASURY	0437	WELL (CONST. STA	RT FEE			
0211	WELL CONST ST	ART FEE		\$		CARD#		
0210	MONITORING WE	ELLS		\$		CARD#		
	OTHER	(IDENTI	FY)					
0607	TREASURY	0467	HYDRO	ACTIVITY	LIC NU	MBER		-
0233	POWER LICENSE		WRD)				\$	
0231	HYDRO LICENSE						\$	
	HYDRO APPLICA	TION					\$	
	TREASURY		OTHER	/ RDX				
FUND		TITLE						
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	TION		- "				\$	
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Alternate Reservoir Application Completeness Checklist This is the checklist used by WRD staff

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Application R=86219 County BAKER	
Application County 1712C P 1155 0 11 34 m 1 NEVE	
Priority Date 4-29-16 Township 7 S Range 45 E Section 36 Taxlot NENE Use MULTIPULZPOSE Caseworker BARB PARK	
Use MULTIPULZPOSE Caseworker BARBE PARK	
Amount (AF) 2.0 Watermaster RICHARD LUSK RECEIVED BY OWR	D
Minimum Requirements (ORS 537.409)	
Completed Watermaster review sheet signed and dated by Watermaster. SALEM, OR	
Will the reservoir injure an existing water right? □ YES □ NO	
If YES, can conditions be applied to mitigate the injury? \square YES \square 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? X YES DO NO If YES, can conditions be applied to mitigate the impact? XYES DO 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: 2.0	
Proposed Use of the waterCannot 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 locatedor 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 **	
> \\\'/4's clearly identified Recomposite 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**? Examination: Base Fee\$ 350 Permit Recording Fee\$	
plus\$ 40	
plus\$	
Total Paid \$ 4/0 Completeness Check by: CSG Date: 5-2-16 Revised 2011-3-3	
Total Paid \$ 4/0 Completeness Check by: Total Fees \$ 4/0 Date: 5-2-16 Revised 2011-3-3	

Oregon Water Resources Department Permit to Appropriate Surface Water for Storage - Alternate Reservoir Application	Main G Return A Return	7 Help S Con	
For impoundments less than 10 feet in height or storing less than 9.2 acre feet of water.			
oday's Date: Wednesday, March 23, 2016			
Base Application Fee for Storage of Surface Water.			9350.00
Proposed Dam Height in feet.			5
Proposed Reservoir volume in Acre Feet.			2.0 \$60.00
Permit Recording Fee. ***			\$450.00
** the Permit Recording Fee is not required when the application is submitted but, must be paid before a permit will be issued. It is far a permit is not issued. If the recording fee is not paid prior to issuance of the Final Order, permit issuance will be delayed.	ully refundable	Recalcula	ate
Stimated cost of Permit Application			\$860.00
OWRD Fee Schedule			

Fee Calculator Version: B20130709

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APR 2 9 2016

SALEM, OR