

**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 # **119751**

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

RECEIVED FROM: **Louis P. Scaparo**  
BY: **Paul H. Bellis**

APPLICATION	<b>5-88225</b>
PERMIT	
TRANSFER	

CASH:  CHECK:#  **1012** OTHER: (IDENTIFY)

TOTAL REC'D \$ **1,100.00**

**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** **4611**

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	\$ <b>1,100.00</b>	0204	\$ _____
0205 TRANSFER	\$ _____		

**WELL CONSTRUCTION**

0218 WELL DRILL CONSTRUCTOR	EXAM FEE	0219	LICENSE FEE
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 \_\_\_\_\_ \$ \_\_\_\_\_

RECEIPT: **119751** DATED: **5/9/16** BY: **Carlos O. Turner**

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

WATER RESOURCES DEPARTMENT

RECEIPT # 119753

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

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

RECEIVED FROM: Mark M Robinson  
BY: Ginger (Helen A) Robinson

APPLICATION (S-88225)  
PERMIT  
TRANSFER

CASH:  CHECK:# OTHER: (IDENTIFY)

2457

TOTAL REC'D \$ 450.00

**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

46111

0407 COPY & TAPE FEES \$  
0410 RESEARCH FEES \$  
0408 MISC REVENUE: (IDENTIFY) \$  
TC162 DEPOSIT LIAB. (IDENTIFY) \$  
0240 EXTENSION OF TIME \$

WATER RIGHTS:

0201 SURFACE WATER \$ 450.00 0202 RECORD FEE \$  
0203 GROUND WATER \$ 0204 \$  
0205 TRANSFER \$

WELL CONSTRUCTION

0218 WELL DRILL CONSTRUCTOR \$ 0219 LICENSE FEE \$  
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 \_\_\_\_\_ \$

RECEIPT: 119753

DATED: 5/9/16 BY: Carlos O. Turner

E-2

Standard Application Completeness Checklist

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

Yes No

This is the checklist used by WRD staff

Application P-88225  
G-18295 County Josephine Priority Date 5-9-16

Township 36S Range 7W Section 2

Amount 4.5 AF Use IR Domestic WM Dist. # 14

Applicant Name Mark & Helen Robinson

Receipt No. 119753/119751 Caseworker Assigned:  Barbe  Kim  Lisa

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.

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)

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.")

P-88225

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 / 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  $\geq 9.2$  acre feet AND having a dam height  $\geq 10$  feet, map must be prepared by a CWRE

**Fees:**

Base Fee	\$ <u>800</u>	Permit Recording Fees	\$ <u>450</u>
1 <sup>st</sup> CFS @ \$300	\$ <u>300</u>	Mitigation Fee	\$ _____
___ add'l CFS @ \$300 ea	\$ _____	Rec Fee Total	\$ <u>450</u>
<u>5</u> AF up to 20 AF @ \$30 ea	\$ <u>150</u>	Rec Fee Paid	\$ <u>—</u>
___ add'l AF @ \$1 ea	\$ _____		
<u>1</u> add'l <input type="checkbox"/> pod/poa <input checked="" type="checkbox"/> use @ _____ ea	\$ <u>300</u>		
___ add'l res @ \$125 ea	\$ _____		
Exam Fee Total	\$ <u>1550</u>	Total Fees	\$ <u>2000</u>
Exam Fee Paid	\$ <u>1550</u>	Paid	\$ <u>1550</u>
		Amount Due	\$ <u>450</u>

Reviewed by: Scott CSG

Date: 5/10/16

# 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.

- |                                     |  |                  |                  |
|-------------------------------------|--|------------------|------------------|
| <input checked="" type="checkbox"/> | SECTION 1: applicant information and signature |                  | RECEIVED BY OWRD |
| <input checked="" type="checkbox"/> | SECTION 2: property ownership                  |                  | MAY 09 2016      |
| <input checked="" type="checkbox"/> | SECTION 3: source of water requested           |                  |                  |
| <input checked="" type="checkbox"/> | SECTION 4: water use                           |                  | SALEM, OR        |
| <input checked="" type="checkbox"/> | SECTION 5: water management                    | RECEIVED BY OWRD |                  |
| <input checked="" type="checkbox"/> | SECTION 6: resource protection                 |                  | RECEIVED BY OWRD |
| <input checked="" type="checkbox"/> | SECTION 7: project schedule                    | MAR 21 2016      |                  |
| <input checked="" type="checkbox"/> | SECTION 8: within a district                   | SALEM, OR        | MAR 04 2016      |
| <input checked="" type="checkbox"/> | SECTION 9: remarks                             |                  | SALEM, OR        |

### Attachments:

- 
- Land Use Information Form with approval and signature (*must be an original*) or signed receipt
  - 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.
  - Fees - Amount enclosed: **\$ 1550.00**  
See the Department's Fee Schedule at [www.oregon.gov/owrd](http://www.oregon.gov/owrd) or call (503) 986-0900.

### Provide a map and check that each of the following items is included:

- 
- 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, Range, Section, Quarter/Quarter, Tax Lots
  - Reference corner on map
  - NA Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west)
  - Indicate the area of use by Quarter/Quarter and tax lot clearly identified
  - Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery
  - Location of main canals, ditches, pipelines or flumes (if well is outside of the area of use)
  - Other: **None**

ROBINSON: TL 104

For a SW Application: Source of water must be indicated. (See Sec. 3 and Sec. 4 Table)

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)

Photocopy of BOR Contract Data Sheet is attached.

Fees:

Base Fee	\$ <u>\$800</u> ✓	Permit Recording Fees	\$ <u>\$450</u>
1 <sup>st</sup> CFS @ \$300	\$ <u>\$300</u> ✓	Mitigation Fee	\$ _____
_____ add'l CFS @ \$300 ea	\$ _____		
<u>5</u> AF up to 20 AF @ \$30 ea	\$ <u>\$150</u> ✓	Rec Fee Total	\$ <u>\$450</u>
_____ add'l AF @ \$1 ea	\$ _____	Rec Fee Paid	\$ _____
<u>1</u> <input checked="" type="checkbox"/> use @ _____ ea	\$ <u>\$300</u> ✓		
_____ add'l res @ \$125 ea	\$ _____		

Exam Fee Total	\$ <u>\$1550</u>	Total Fees	\$ <u>\$2000</u>
Exam Fee Paid	\$ <u>\$1550</u>	Paid	\$ <u>\$2225</u> ?
See Check # 1009 attached		Amount Due	\$ <u>-\$225</u>

Permit Recording Fee not included at this time.

RECEIVED BY OWRD

MAY 09 2016

SALEM, OR