

WATER RESOURCES DEPARTMENT

RECEIPT # 119944

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

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

RECEIVED FROM: <u>B &amp; D Farms</u>	APPLICATION <u>S-88235</u>
BY: _____	PERMIT _____
	TRANSFER _____

CASH:  CHECK.#  7542 OTHER: (IDENTIFY)  \_\_\_\_\_

TOTAL REC'D \$ 1,253.00

**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**

<b>MISCELLANEOUS</b>		<u>46111</u>	
0407 COPY & TAPE FEES		\$ _____	
0410 RESEARCH FEES		\$ _____	
0408 MISC REVENUE: (IDENTIFY) _____		\$ _____	
TC162 DEPOSIT LIAB. (IDENTIFY) _____		\$ _____	
0240 EXTENSION OF TIME		\$ _____	
<b>WATER RIGHTS:</b>		<b>EXAM FEE</b>	<b>RECORD FEE</b>
0201 SURFACE WATER		\$ <u>803.00</u>	0202 \$ <u>450.00</u>
0203 GROUND WATER		\$ _____	0204 \$ _____
0205 TRANSFER		\$ _____	
<b>WELL CONSTRUCTION</b>		<b>EXAM FEE</b>	<b>LICENSE FEE</b>
0218 WELL DRILL CONSTRUCTOR		\$ _____	0219 \$ _____
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 \_\_\_\_\_

**RECEIVED OVER THE COUNTER**

\$ \_\_\_\_\_

RECEIPT: **119944** DATED: 5/26/16 BY: Carlos O. Turner

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

RECEIPT # **119945**

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

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

RECEIVED FROM: <u>BAD Farms</u>	APPLICATION <u>S-88235</u>
BY: _____	PERMIT _____
	TRANSFER _____

CASH:  CHECK:#  7543 OTHER: (IDENTIFY)  \_\_\_\_\_

TOTAL REC'D \$1,000.00

**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	EXAM FEE \$ <u>1,000.00</u>	0202	RECORD FEE \$ _____
0203 GROUND WATER	\$ _____	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 (FWWRD) \$ \_\_\_\_\_  
 0231 HYDRO LICENSE FEE (FWWRD) \$ \_\_\_\_\_  
 \_\_\_\_\_ HYDRO APPLICATION \$ \_\_\_\_\_

**TREASURY OTHER / RDX**

**RECEIVED  
OVER THE COUNTER**

FUND \_\_\_\_\_ TITLE \_\_\_\_\_  
 OBJ. CODE \_\_\_\_\_ VENDOR \_\_\_\_\_  
 DESCRIPTION \_\_\_\_\_ \$ \_\_\_\_\_

RECEIPT: **119945** DATED: 5/26/16 BY: Carlos O. Turner

E-2

# Standard Application Completeness Checklist

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

This is the checklist used by WRD staff

Yes No

5-88235

Application 5-88235 County Wasco Priority Date 5-26-2016

Township 4S Range 2W Section 8.9/6

Amount 272.28 AF Use IRRIGATION WM Dist. # 16

Applicant Name JAMES N. SMITH

Receipt No. 119944 & 119945 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 # see app

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 (A)

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)

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 \$ \_\_\_\_\_

1<sup>st</sup> CFS @ \$300 \$ \_\_\_\_\_

\_\_\_ add'l CFS @ \$300 ea \$ \_\_\_\_\_

\_\_\_ AF up to 20 AF @ \$30 ea \$ \_\_\_\_\_

\_\_\_ add'l AF @ \$1 ea \$ \_\_\_\_\_

\_\_\_ add'l  pod/poa  use @ \_\_\_\_\_ ea \$ \_\_\_\_\_

\_\_\_ add'l res @ \$125 ea \$ \_\_\_\_\_

Exam Fee Total \$ \_\_\_\_\_

Exam Fee Paid \$ \_\_\_\_\_

Permit Recording Fees \$ \_\_\_\_\_

Mitigation Fee \$ \_\_\_\_\_

Rec Fee Total \$ \_\_\_\_\_

Rec Fee Paid \$ \_\_\_\_\_

Total Fees \$ \_\_\_\_\_

Paid \$ \_\_\_\_\_

Amount Due \$ \_\_\_\_\_

Reviewed by: 

Date: \_\_\_\_\_