STATE OF OREGON

WATER RESOURCES DEPARTMENT

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

EIVED FRO	OM: Chris	tina	. Aro	polu	PE	RMIT	G-183
H: (CHECK:#	OTHER: (II	DENTIFY)			NSFER	0100
<u> </u>	⊠5515					REC'D	\$1,930
1083	TREASURY	4170	WRD	MISC CASH A	ССТ		
0407	COPIES						\$
	_ OTHER: (IDENTIFY)	1				Ф
0243 I/S L	.ease 0244					Vater	
			WRD (OPERATING A	ACCT		
0.407	MISCELLANEOUS			4611	l		\$
0407 0410	COPY & TAPE FE						\$
0410	MISC REVENUE:		V)				\$
TC162	DEPOSIT LIAB. (I	,	',				\$
0240	EXTENSION OF T	•					\$
02.10	WATER RIGHTS:			EVAM FEE			RECORD F
0201	SURFACE WATER	,		S EXAM FEE		02	\$
0203	GROUND WATER					04	\$450.
0205	TRANSFER			\$ 1,480,9		04	
0200	WELL CONSTRUC	CTION		EXAM FEE			LICENSE FI
0218	WELL DRILL CON		R	\$	- 02	19	\$
0210	LANDOWNER'S P				02	20	\$
			EVI				
	OTHER	(IDENTI	「'' <u> </u>				
0536	TREASURY	0437	WELL	CONST. STA	RT FEE		
0211	WELL CONST STA	ARTFEE		\$		CARD#	
0210	MONITORING WE	LLS		\$		CARD#	
	OTHER	(IDENTI	FY)				
0607	TREASURY	0467	HYDR	O ACTIVITY	LIC NU	MBER	
0233	POWER LICENSE	FEE (FW/	WRD)				\$
0231	HYDRO LICENSE	FEE (FW/	WRD)	L			\$
	_ HYDRO APPLICA	TION					\$
	TREASURY		OTHE	R / RDX			
FUND	A CONTRACTOR OF THE CONTRACTOR	TITLE					
	DE						
		_ +214001					\$
DESCHIP	TION		****				<u> </u>

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E-2	
Yes	Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff
•	plication $G = 18311$ County JACKSON Priority Date $6/3/16$ which $G = 18311$ Range $G = 18311$ Section $G = 18311$ Range $G = 18311$ Section $G = 18311$ Range $G = 18311$ Section $G = 18311$ Priority Date $G = 18311$ Range $G = 18311$ Section $G = 183111$ Section $G = 1831111$ Section $G = 1831111$ Section $G = 1831111$ Section $G = 1831111111$ Section $G = 18311$
	nount 67 gram Use NUVSery WM Dist. # 13
Apj	plicant Name Christina Arapolu John & Simb Thorne, Easy Finily Form
Rec	ceipt No. 120026 Caseworker Assigned: Barbe Kim Lisa
	Contact info: Applicant/Organization Name and Mailing Address
A	Signature (in ink) of <i>all</i> applicants or the applicant's authorized agent (include title or authority if for an organization or corporation).
X	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.
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 #
M	For a GW Application: Well Development Tables completed and/or a well log report included (if existing)
À	Proposed water use
	Amount of water from each source in GPM, CFS, or AF
	Period of use indicated [May If for supplemental irrigation, primary acreage or underlying permit or certificate number listed
	(Primary and Supplemental Irrigation counts as 2 uses)
A	Water Management Section (Estimates if the water system has not been designed)
May	Resource Protection Section (N/A for Groundwater)
Ma	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.")

10	Suppl	emental data sheets enclosed (if neede	d)		
		Form M (Municipal or Quasi-Munic	ipal)		
		Spring Description Sheet (if source i	•		
\	,		•		
X	Pleas	npleted Land-Use Form or receipt sig e be certain that the Land-Use form lis thin the past 12 months.	ned and dated b	y the appropriate planning olved and all uses propose	g department officials. ed. Date of signature must
X	descri sales	gal Description of all the properties in ption includes a metes and bounds or contract or title insurance policy can pred by a title company. Copies of tax be	other governme rovide this infor	nt survey description. A commation, or applicant may	opy of the deed, land
F	NOTE	roposed source IS / IS NOT circle of E: If it is withdrawn under ORS 538, the the application and a negative IR with	nen return appli	withdrawn from further a cation and fees. If it is wi	appropriation. thdrawn by other means,
*	The n	nap must meet all the minimum requir	ements of OAR	690-310-0050.	
/	\ d	Township, Range, Section			
	` K	Location of main canals, ditches, pip	elines or flumes	(if POA/POD is outside o	of POU)
		Place of use, ¼-¼'s and tax lot clear	ly identified		,
,	D	Even map scale not less than $4'' = 1$		ft.): examples: 1" = 100 ft	1" = 200 ft
	1	Location of <i>each</i> diversion point, we			
		Multiple wells shall be uniquely labe	•		•
	P	Reference corner on map	,	on won logali emaning	,
	1/	North Directional Symbol			
	7	•	otion numerous o	m a ami a vitovna	
	44	Number of acres per 1/4-1/4 if for irriga			1 1 1 1 2 10 6
	14	For a standard reservoir application t	to store ≥ 9.2 ac	ere feet AND having a dan	n height ≥ 10 feet, map
	1	must be prepared by a CWRE			
	Fees:				
	Base		\$	Permit Recording Fees	\$
		FS @ \$300	\$	Mitigation Fee	\$
		add'l CFS @ \$300 ea	5	Des Cas Tatal	· UC
		AF up to 20 AF @ \$30 ea	5	Rec Fee Total	\$ 750
		add'l AF @ <u>\$1 ea</u>	\$	Rec Fee Paid	\$ 130
		add'l pod/poa use @ ea	\$		
		add'l res @ \$125 ea	\$		
	Evam	Fee Total	\$ 1480	Total Fees	\$ 1930 \$ 1930
		Fee Paid	\$ 1480	Paid	\$ 1930
	DAGIII	1 ce 1 aid	Ψ <u>, , , , , , , , , , , , , , , , , , ,</u>	Amount Due	\$
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Re	viewed	by: rolt CSG	Date:	6/6/14	-
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