STATE OF OREGON WATER RESOURCES DEPARTMENT

RECEIPT # 120531

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # _

(503) 986-0900 / (503) 986-0904 (fax) APPLICATION ← RECEIVED FROM: PERMIT Back BY: TRANSFER CASH: CHECK:# OTHER: (IDENTIFY) TOTAL REC'D **TREASURY** 4170 WRD MISC CASH ACCT \$ 0407 COPIES \$ (IDENTIFY) OTHER: 0244 Muni Water Mgmt. Plan _____ 0245 Cons. Water 0243 I/S Lease 4270 WRD OPERATING ACCT **MISCELLANEOUS** \$ 0407 **COPY & TAPE FEES** \$ 0410 RESEARCH FEES \$ 0408 MISC REVENUE: (IDENTIFY) \$ TC162 DEPOSIT LIAB. (IDENTIFY) \$ 0240 EXTENSION OF TIME RECORD FEE WATER RIGHTS: **EXAM FEE** 0201 SURFACE WATER 0202 0204 0203 **GROUND WATER** 0205 TRANSFER LICENSE FEE **EXAM FEE** WELL CONSTRUCTION 0219 \$ 0218 WELL DRILL CONSTRUCTOR \$ 0220 LANDOWNER'S PERMIT OTHER (IDENTIFY) **WELL CONST. START FEE** 0536 **TREASURY** 0437 0211 WELL CONST START FEE \$ CARD# CARD # MONITORING WELLS \$ 0210 OTHER (iDENTIFY) 0607 TREASURY 0467 HYDRO ACTIVITY LIC NUMBER \$ POWER LICENSE FEE (FW/WRD) 0233 \$ 0231 HYDRO LICENSE FEE (FW/WRD) \$ HYDRO APPLICATION **TREASURY** OTHER / RDX TITLE **FUND** OBJ. CODE _____ VENDOR # \$ DESCRIPTION

120531 RECEIPT:

DATED: 7

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

Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRD staff

Application 3-88265 County Mallowa Priority Date 7-22-16					
Application County Phoney Bate					
Township Range 45E Section 32					
Amount Use Trace - WM Dist. #	-				
Applicant Name Duscrain Section					
Receipt No. 120631 Caseworker Assigned: Barbe Kim Lisa					
Contact info: Applicant/Organization Name and Mailing Address					
Signature (in ink) of <i>all</i> 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?					
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? YNN Permit or Certificate # Free Line 1					
☐ For a GW Application: Well Development Tables completed and/or a well log report included (if existing)					
Proposed water use	-				
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\) (Y OWRD				
Water Management Section (Estimates if the water system has not been designed) JUL 22	2016				
Resource Protection Section (N/A for Groundwater) SALEM,	OR				
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 neede	d)	_			
	☐ Form M (Municipal or Quasi-Munici	ipal)) ^ / {			
	☐ Spring Description Sheet (if source is	s a spring) / \checkmark	(A			
/B	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.					
	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.					
1	The proposed source IS/ IS NOT circle of NOTE: If it is withdrawn under ORS 538, the accept the application and a negative IR with	ien return applic				
X	The map must meet all the minimum require	ements of OAR (690-310-0050			
~		oments of ortic	370 310 0020.			
	Township, Range, Section					
	☐ Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU) ☐ Place of use, ⅓-⅓'s and tax lot clearly identified					
	Even map scale not less than $4'' = 1$	-	a.); examples: 1" = 100 ft.	1'' = 200 ft.		
	Location of <i>each</i> diversion point, we		-			
	Multiple wells shall be uniquely labe	•		_		
	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 NA						
	Fees:	1				
Ц	Base Fee	s 450	Permit Recording Fees	s 450		
	1 st CFS @ <u>\$300</u>	\$	Mitigation Fee	\$		
	add'l CFS @ \$300 ea	\$ 600		· U55		
	20 AF up to 20 AF @ \$30 ea 255 add'l AF @ \$1 ea	\$ 255	Rec Fee Total Rec Fee Paid	\$ 450		
	add'l \[\text{pod/poa} \[\text{use} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$\$	Rec ree raid	4		
	add'1 res @ \$125 ea	\$				
		2 1 5		1000		
	Exam Fee Total	\$ 1305 \$ 1305	Total Fees	s 1755 s 1755		
	Exam Fee Paid	\$ 1505	Paid Amount Due	\$ (1) 3		
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Re	viewed by: Laure W) Date: _	7-12-16			
	0 11 051		7 12-11			