

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **122096**

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

INVOICE # _____

RECEIVED FROM: <u>Jackass Mountain Ranch</u>	APPLICATION: <u>6-18416</u>
BY: _____	PERMIT: _____
	TRANSFER: _____
CASH: <input type="checkbox"/> CHECK: # <u>29038</u> OTHER: (IDENTIFY) <input type="checkbox"/>	TOTAL REC'D: <u>\$2800.00</u>

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	\$
0203	GROUND WATER	\$
0205	TRANSFER	\$
WELL CONSTRUCTION		
0218	WELL DRILL CONSTRUCTOR	\$
	LANDOWNER'S PERMIT	\$
	OTHER (IDENTIFY) _____	\$

EXAM FEE	RECORD FEE
\$	\$
\$ <u>2,350.00</u>	\$ <u>450.00</u>
\$	\$
EXAM FEE	LICENSE FEE
\$	\$
\$	\$

0536 TREASURY 0437 WELL CONST. START FEE		
0211	WELL CONST START FEE	\$
0210	MONITORING WELLS	\$
	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: **122096** DATED: 12-12-10 BY: Kjilwale

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

Yes No

Application G-18416 County Linn Priority Date Dec 12, 2016

Township 10S Range 3W Section 19 420

Amount 810 gpm Use Irrigation WM Dist. # 2

Applicant Name Cliff Machugh / Jackass Mountain Holdings LLC

Receipt No. 122096 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)

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Water Management Section (Estimates if the water system has not been designed)

DEC 12 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 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

NA 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

Fees:

Base Fee	\$ <u>1150</u>	Permit Recording Fees	\$ <u>450⁰⁰</u>
1 st CFS @ \$300	\$ _____	Mitigation Fee	\$ _____
<u>2</u> add'l CFS @ \$300 ea	\$ <u>600</u>	Rec Fee Total	\$ _____
____ AF up to 20 AF @ \$30 ea	\$ _____	Rec Fee Paid	\$ _____
____ add'l AF @ \$1 ea	\$ _____		
<u>2</u> add'l <input checked="" type="checkbox"/> pod/pod <input type="checkbox"/> use @ <u>300</u> ea	\$ <u>600</u>		
____ add'l res @ \$125 ea	\$ _____		
Exam Fee Total	\$ <u>2350⁰⁰</u>	Total Fees	\$ <u>2800⁰⁰</u>
Exam Fee Paid	\$ _____	Paid	\$ _____
		Amount Due	\$ _____

Reviewed by: Jeffrey

Date: _____

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