STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 122167 725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172 INV
(503) 986-0900 / (503) 986-0904 (fax)

INVOICE # ___

EIVED FR	om: Blake Spotten	APPLICATION	6-18417
		PERMIT	
SH:	CHECK:# OTHER: (IDENTIFY)	TRANSFER	
]	X 3198 -	TOTAL REC'D	\$ 1,450.00
1083	TREASURY 4170 WRD MISC	CASH ACCT	
0407	COPIES		\$
	OTHER: (IDENTIFY)		\$
0243 I/S I	Lease 0244 Muni Water Mgmt. Plan	0245 Cons. Water	
	4270 WRD OPERA		
	MISCELLANEOUS 4611	1	
0407	COPY & TAPE FEES 7 W 11		\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)		\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$
	WATER RIGHTS:	(AM FEE	RECORD FEE
0201	SURFACE WATER \$	0202	\$
0203	GROUND WATER \$ 1	450.00 0204	\$
0205	TRANSFER \$	150.00	
	WELL CONSTRUCTION EX	KAM FEE	LICENSE FEE
0218	WELL DRILL CONSTRUCTOR \$	0219	\$
02.10	LANDOWNER'S PERMIT	0220	\$
	OTHER (IDENTIFY)		
	- OTTEN		
0536	TREASURY 0437 LL CONS	ST. START FEE	
0211	WELL CONST START FEE \$	CARD #	
0210	MONITORING WELLS	CARD #	
	OTHER (IDENTIFY)	Elve	
0607		LIC MUNICIPED	
0607	TREASURY 0467 HYDRO ACT	LIC NOWBER	\$
0233	POWER LICENSE FEE (FW/WRD)	·/EA	\$
0231	HYDRO LICENSE FEE (FW/WRD)		
	HYDRO APPLICATION		\$
	TREASURY OTHER / RD	X	
	TITLE	. · ·	
FUND	DE VENDOR #		
	DE VENDOR #		\$

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

Application	on G-18417	County C	nck	Priority Date	12/20/2016
Township	S R	ange 26	Section 6		
Amount _	6.56 U	se Nursory			WM Dist. # 20
Applicant	Name CLAKE G	OTTEN TRUCT			
Receipt N	0.	_ Caseworker A	Assigned: 🗆 Barl	be □ Kim	Lisa
Conta	ct info: Applicant/Org	ranization Name and N	lailing Address		
	ture (in ink) of <i>all</i> app ization or corporation)	licants or the applicant.	t's authorized agent	(include title or	authority if for an
Prope	rty ownership: Does th	ne applicant own all th	e land for the propo	sed project? _	Y / N
If I	No:				
	The affected landow	ner's name and mailin	g address must be l	isted	
	_	leclaring the existence d by the proposed dite			-
MA For a	SW Application: Sou	rce of water must be in	ndicated.		
	reservoir or include a NOTE: A surface wa	d water, is the stored water, is the stored water application cannot the stored water under	nt for stored water? he filed at the same i	(ORS 537.400) time as a Reserve	
	If for stored water no	of under contract, is the	e source authorized	under a permit, o	certificate, or decree?
	Permit or Certificate	issued? Y/N	Permit	or Certificate#_	
□ For a	GW Application: We	ll Development Table	s completed and/or	a well log report	included (if existing)
Propo	sed water use		(502)		
	Period of use indicat	m <i>each</i> source in GPN ed rrigation, primary acre		armit or cartifics	ata numbar listad
1-1		emental Irrigation cou		erint of certifica	ne number ii wed
Water	Management Section	(Estimates if the wate	er system has not be	en designed)	
Resou	irce Protection Section	n (N/A for Groundwate	?r)		
	ll standard reservoir a width and surface area	applications: Prelimination for each reservoir.	ary plans and specif	ications includir	g dam height, width,
Projec	ct schedule (If system	is already completed.	indicate "existing.")	ı	

7/1	∽Supplemental data sheets enclosed (if needed	1)						
	☐ Form M (Municipal or Quasi-Munici	pal)						
	☐ Spring Description Sheet (if source is	•						
/	A completed Land-Use Form or receipt sign Please be certain that the Land-Use form list 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. <u>Copies of tax bills are not acceptable.</u>							
<i>P</i>	The proposed source <u>IS / IS NOT</u> (circle o NOTE: If it is withdrawn under ORS 538, the accept the application and a negative IR will	en return applic	withdrawn from further a ation and fees. If it is wi	ppropriation. Hidrawn by other means,				
*	The map must meet all the minimum require	ements of OAR (690-310-0050.					
	 □ Township, Range, Section □ Location of main canals, ditches, pipe □ Place of use, ¼-¼'s and tax lot clearl □ Even map scale not less than 4" = 1 r □ Location of each diversion point, we Multiple wells shall be uniquely labe □ Reference corner on map □ North Directional Symbol □ Number of acres per ¼-¼ if for irrigation to the prepared by a CWRE 	y identified mile (1"= 1320 fi If or dam by refe led, and identified	t.): examples: 1" = 100 ft rence to a recognized pub ed on well logs if existing agriculture	1" = 200 ft. olic land survey corner.				
	Fees: Base Fee 1' CFS @ \$300 add'1 CFS @ \$300 ea _AF up to 20 AF @ \$30 ea _add'1 AF @ \$1 ea _add'1 pod/poa use @ _ea _add'1 res @ \$125 ea Exam Fee Total Exam Fee Paid	S S S S S S S S S	Permit Recording Fees Mitigation Fee Rec Fee Total Rec Fee Paid Total Fees Paid Amount Due	S S S S S S				