STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 122674 725 Summer St. N.E. Ste. A SALEM, OR 97301-4172 (503) 986-0900 / (503) 986-0904 (fax)

INVOICE # ___

(503) 900-0900 / (503) 900-0904 (18X)	and the same of the same of				
RECEIVED FROM: LOSta Verde Partners, LLC	APPLICATION 5-88369				
BY:	PERMIT				
CASH: CHECK:# _ OTHER: (IDENTIFY)	TRANSFER				
	TOTAL REC'D \$ 1550 00				
1083 TREASURY 4170 WRD MISC CASH ACCT					
0407 COPIES	\$				
OTHER: (IDENTIFY)	\$				
0243 I/S Lease 0244 Muni Water Mgmt. Plan 0245 G	Cons. Water				
4270 WRD OPERATING AC	CT .				
MISCELLANEOUS 46///					
0407 COPY & TAPE FEES	\$				
0410 RESEARCH FEES	\$				
0408 MISC REVENUE: (IDENTIFY)	\$				
TC162 DEPOSIT LIAB. (IDENTIFY)	 \$				
0240 EXTENSION OF TIME					
WATER RIGHTS: EXAM FEE	RECORD FEE				
0201 SURFACE WATER \$ 1,100.00	0202 \$ 450.00				
0203 GROUND WATER \$	0204 \$				
0205 TRANSFER \$					
WELL CONSTRUCTION EXAM FEE	LICENSE FEE				
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)	IS NOWBER				
0231 HYDRO LICENSE FEE (FW/WRD)	\$				
	\$				
HYDRO APPLICATION	Ψ				
TREASURY OTHER / RDX					
FUND TITLE					
OBJ. CODE VENDOR #					
DESCRIPTION	\$				
Section from	f				
100674 1/1/17 /4	Billandi				
RECEIPT: 122674 DATED: 2/11/17 BY	INCOMOVE:				
Distribution White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Buff Copy - Fiscal					

Stanuaru Application Completeness Checkiist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff Application S-8836 Priority Date 2.17. 2017 County Range 5W Section \ WM Dist. # <u>6</u> Applicant Name Caseworker Assigned/. ☐ Kim ☐ Lisa Barbe 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? It 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 # Permit or Certificate issued? oya 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)

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

Project schedule (If system is already completed, indicate "existing.")

or all standard reservoir applications: Preliminary plans and specifications including dam height, width.

Resource Protection Section (N/A for Groundwater)

crest width and surface area for each reservoir.

	Supplemental data sheets enclosed (if no	eeded)		
19	🎙 🗆 Form M (Municipal or Quasi-M	unicipal)		
	☐ Spring Description Sheet (if some	ree is a spring)		
	A completed Land-Use Form or receip Please be certain that the Land-Use for be within the past 12 months.	-		•
<i>X</i>	A Legal Description of all the propertion description includes a metes and bound sales contract or title insurance policy or prepared by a title company. Copies of the company of the com	s or other government an provide this inforn	t survey description. A conation, or applicant may s	py of the deed, land
	The proposed source <u>IS / IS NOT</u> (cir NOTE: If it is withdrawn under ORS 53 accept the application and a negative L	38, then return applica		
X	The map must meet all the minimum re	equirements of OAR (590-310-0050.	· 3
	Township, Range, Section Location of main canals, ditches Place of use, 14-14's and tax lot of Even map scale not less than 4" Location of each diversion poin Multiple wells shall be uniquely Reference corner on map North Directional Symbol Number of acres per 14-14 if for For a standard reservoir application must be prepared by a CWRE	elearly identified = 1 mile (1"= 1320 ft t, well or dam by refe labeled, and identified irrigation, nursery, or	t.): examples: 1' = 100 ft. rence to a recognized pub ed on well logs if existing agriculture	. 1" = 200 ft. olic land survey corner.
Þ	Fees: (66) Base Fee 1 CFS @ \$300	\$ \$	Permit Recording Fees Mitigation Fee	S
	add'1 CFS @ <u>\$300 ea</u> AF up to 20 AF @ <u>\$30 ea</u> add'1 AF @ <u>\$1 ea</u> add'1pod/poause @ add'1 res @ <u>\$125 ea</u>	S S S ea S S	Rec Fee Total Rec Fee Paid	\$ \$
	Exam Fee Total Exam Fee Paid	S	Total Fees Paid Amount Due	5 990 5 1500 5 (510)
Re	viewed by:	Date:	02.17.17.	