

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **122838**

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

INVOICE # _____

RECEIVED FROM: **SHERYL DRUSHELLA**
BY: **DOI - BUREAU OF LAND MANAGEMENT**

APPLICATION	R-88375
PERMIT	
TRANSFER	

CASH: ☐ CHECK:# ☒ **1396** OTHER: (IDENTIFY) ☐

TOTAL REC'D \$ **1040⁰⁰**

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		
0407 COPY & TAPE FEES		\$
0410 RESEARCH FEES		\$
0408 MISC REVENUE: (IDENTIFY)		\$
TC162 DEPOSIT LIAB. (IDENTIFY)		\$
0240 EXTENSION OF TIME		\$
WATER RIGHTS:		
0201 SURFACE WATER (ALT RES)	EXAM FEE \$ 590⁰⁰	0202 RECORD FEE \$ 450⁰⁰
0203 GROUND WATER	\$	0204 \$
0205 TRANSFER	\$	
WELL CONSTRUCTION		
0218 WELL DRILL CONSTRUCTOR	EXAM FEE \$	0219 LICENSE FEE \$
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)		\$
0231 HYDRO LICENSE FEE (FW/WRD)		\$
HYDRO APPLICATION		\$

TREASURY OTHER / RDX

FUND _____	TITLE _____
OBJ. CODE _____	VENDOR # _____
DESCRIPTION _____	\$

RECEIPT: **122838**

DATED: **3-6-17** BY: **SNCRH**

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

Alternate Reservoir Application Completeness Checklist

This is the checklist used by WRD staff

Application R-88375 County HARNEY
 Priority Date 3.6.17 Township 21S Range 30E Section 4 Taxlot USA 100
 Use Livestock Caseworker Lisa G
 Amount (AF) 7.0 Watermaster JR JOHNSON

Minimum Requirements (ORS 537.409)

☒ **Completed Watermaster review sheet** signed and dated by Watermaster.

Will the reservoir injure an existing water right? ☐ YES ☒ NO

If YES, can conditions be applied to mitigate the injury? ☐ YES ☐ NO **If NO, return the application.**

Did the watermaster determine when water is available for the proposed use? ☐ YES ☐ NO

The Watermaster review sheet must have been completed within the last 6 months.

If the watermaster determined that water is NOT available, return the application.

☒ **Completed ODFW review sheet** signed and dated by ODFW representative.

Will the reservoir pose a significant detrimental impact to an existing fishery resource? ☐ YES ☒ NO

If YES, can conditions be applied to mitigate the impact? ☐ YES ☐ NO **If NO, return the application.**

The ODFW review sheet must have been completed within the last 6 months.

☒ **Completed Land-Use Form** or receipt signed by the appropriate planning department official enclosed?

Does the use on land-use form match the proposed use on the application? Must be an original "wet" signature within the last 12 months.

☒ **Landowner Name, Mailing Address and Telephone Number.**

☒ **Source and tributary listed. NO WELLS-MUST HAVE GW APP TO USE A WELL AS A SOURCE !!**

☒ **Reservoir Location-** Township, Range, Section, Quarter Quarter, Taxlot

☒ **Dam height**, if applicable

☒ **Total Quantity of Storage Requested:** 7.0 AF

☐ **Proposed Use of the water....** Cannot accept application for use of this stored water at the same time (E2)

☒ **Property ownership indicated?** If applicant does not own all the land is the affected landowner's name and mailing address listed? (Including: lands not owned by applicant, upon which the source is locatedor..... that are crossed by the diversion works. This includes any roads or rights-of-way.)

☒ **Provide the legal description** of all the property involved with this application. You may include a copy of your deed land sales contract or title insurance to meet this requirement OK-USA

☒ **Environmental Impact** section completed?

☒ **Application signed by the landowner(s)?** All parties noted as applicants must sign the application.

Must be an original "wet" signature.

☒ **Acceptable map ** Indicates requirements of standards set forth by the Commission and causes fatal flaw if not provided by the applicant.**

☒ **Reservoir Location -** noting Township, Range, Section, 1/4 1/4 and Tax Lot number(s)*

☒ **Scale of the Map** (not less than 1" = 1320') **

☒ **Reference corner on map**

☒ **North Directional Symbol ****

☒ **1/4's clearly identified**

☒ **Reservoir clearly identified ****

☒ **Dam or POD (If off channel) Location coordinates** referenced to a government land survey corner* If no dam, use coordinates to center of reservoir.**

☒ **Fees enclosed**?** Examination: Base Fee\$ 350 Permit Recording Fee\$ 450

plus\$ 210
plus\$ _____

Total Paid \$ 1040-

Total Fees \$ 1040-

Completeness Check by: Jessica Joye Date: 3.8.16

Revised 2011-3-3

over \$30-

RECEIVED BY OWRD

MAR 06 2017

SALEM, OR