

Application for a Permit to Use Groundwater



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME David M. Pritchett and Cornell M. Hartford		PHONE (HM) (541) 878-4666	
PHONE (WK)	CELL	FAX	
ADDRESS 4875 Rogue River Drive			
CITY Eagle Point	STATE OR	ZIP 97524	E-MAIL* pritch45@embarqmail.com

Organization Information

NAME		PHONE	FAX
ADDRESS			CELL
CITY	STATE	ZIP	E-MAIL*

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT / BUSINESS NAME		PHONE	FAX
ADDRESS			CELL
CITY	STATE	ZIP	E-MAIL*

Note: Attach multiple copies as needed

* By providing an e-mail address, consent is given to receive all correspondence from the Department electronically. (Paper copies of the final order documents will also be mailed.)

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By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application.
- I cannot use water legally until the Water Resources Department issues a permit.
- Oregon law requires that a permit be issued before beginning construction of any proposed well, unless the use is exempt. Acceptance of this application does not guarantee a permit will be issued.
- If I get a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be cancelled.
- The water use must be compatible with local comprehensive land-use plans.
- Even if the Department issues a permit, I may have to stop using water to allow senior water-right holders to get water to which they are entitled.

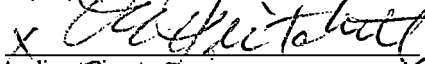
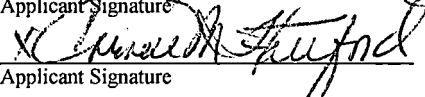
NOV 22 2017

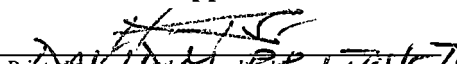
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I (we) affirm that the information contained in this application is true and accurate.


 Applicant Signature

 Applicant Signature


 Print Name and title if applicable
 CORNELL M. HARTFORD
 Print Name and title if applicable


 Date
 11-15-17
 Date

App. No. 6-18584		For Department Use	
Permit No.	Date		

SECTION 2: PROPERTY OWNERSHIP

Please indicate if you own all the lands associated with the project from which the water is to be diverted, conveyed, and used.

Yes

- There are no encumbrances.
- This land is encumbered by easements, rights of way, roads or other encumbrances.

No

- I have a recorded easement or written authorization permitting access.
- I do not currently have written authorization or easement permitting access.
- Written authorization or an easement is not necessary, because the only affected lands I do not own are state-owned submersible lands, and this application is for irrigation and/or domestic use only (ORS 274.040).
- Water is to be diverted, conveyed, and/or used only on federal lands.

List the names and mailing addresses of all affected landowners (*attach additional sheets if necessary*).

You must provide the legal description of: 1. The property from which the water is to be diverted, 2. Any property crossed by the proposed ditch, canal or other work, and 3. Any property on which the water is to be used as depicted on the map.

SECTION 3: WELL DEVELOPMENT

WELL NO.	NAME OF NEAREST SURFACE WATER	IF LESS THAN 1 MILE:	
		DISTANCE TO NEAREST SURFACE WATER	ELEVATION CHANGE BETWEEN NEAREST SURFACE WATER AND WELL HEAD
Well 1 (L-66399)	Rogue River	6361'	200'

Please provide any information for your existing or proposed well(s) that you believe may be helpful in evaluating your application. For existing wells, describe any previous alteration(s) or repair(s) not documented in the attached well log or other materials (*attach additional sheets if necessary*).

Well is 734 ft from seasonal creek.

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Ground Water/4

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SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: 30 gpm (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

The table below must be completed for each source to be evaluated or the application will be returned. If this is an existing well, the information may be found on the applicable well log. (If a well log is available, please submit it in addition to completing the table.) If this is a proposed well, or well-modification, consider consulting with a licensed well driller, geologist, or certified water right examiner to obtain the necessary information.

OWNER'S WELL NAME OR NO.	PROPOSED	EXISTING	WELL ID (WELL TAG) NO.* OR WELL LOG ID**	FLOWING ARTESIAN	CASING DIAMETER	CASING INTERVALS (IN FEET)	PERFORATED OR SCREENED INTERVALS (IN FEET)	SEAL INTERVALS (IN FEET)	MOST RECENT STATIC WATER LEVEL & DATE (IN FEET)	PROPOSED USE			
										SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL-SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FEET)
1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	66399	<input type="checkbox"/>	6"	+2-18	205-225	0-18	180 (from log)	Unknown	225	30	25
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									

* Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.
 ** A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.
 *** Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

Revised 8/1/2017

Ground Water/5

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SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Irrigation	Year Round	25

For irrigation use only:

Please indicate the number of primary and supplemental acres to be irrigated (*must match map*).

Primary: 10 Acres Supplemental: _____ Acres

If you listed supplemental acres, list the Permit or Certificate number of the underlying primary water right(s):

Indicate the maximum total number of acre-feet you expect to use in an irrigation season: _____

- If the use is **municipal or quasi-municipal**, attach **Form M**
- If the use is **domestic**, indicate the number of households: _____
Exempt Uses: Please note that 15,000 gallons per day for single or group **domestic** purposes and 5,000 gallons per day for a single **industrial or commercial** purpose are exempt from permitting requirements.
- If the use is **mining**, describe what is being mined and the method(s) of extraction (*attach additional sheets if necessary*): _____

SECTION 5: WATER MANAGEMENT

A. Diversion and Conveyance

What equipment will you use to pump water from your well(s)?

Pump (give horsepower and type): 3/4 HP submersible or similar

Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. low HP pump for drip/spray application of water

B. Application Method

What equipment and method of application will be used? (e.g., drip, wheel line, high-pressure sprinkler) (*attach additional sheets if necessary*) majority of water will be applied by drip system with small portions using efficient sprinkler.

C. Conservation

Please describe why the amount of water requested is needed and measures you propose to: prevent waste; measure the amount of water diverted; prevent damage to aquatic life and riparian habitat; prevent the discharge of contaminated water to a surface stream; prevent adverse impact to public uses of affected surface waters (*attach additional sheets if necessary*). **Water us to be metered, so as to control/eliminate waste.**

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SECTION 6: STORAGE OF GROUNDWATER IN A RESERVOIR

If you would like to store groundwater in a reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Reservoir name: _____ N/A _____ Acreage inundated by reservoir: _____

Use(s):

Volume of Reservoir (acre-feet): N/A Dam height (feet, if excavated, write "zero"): _____

Note: If the dam height is greater than or equal to 10.0' above land surface AND the reservoir will store 9.2 acre feet or more, engineered plans and specifications must be approved prior to storage of water.

SECTION 7: USE OF STORED GROUNDWATER FROM THE RESERVOIR

If you would like to use stored groundwater from the reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Annual volume (acre-feet): 25

USE OF STORED GROUNDWATER	PERIOD OF USE
Irrigation	year round

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SECTION 8: PROJECT SCHEDULE

Date construction will begin: _____ when permit is received _____

Date construction will be completed: within 5 years of receiving permit _____

Date beneficial water use will begin: _____ within 5 years of receiving permit _____

SECTION 9: WITHIN A DISTRICT

Check here if the point of diversion or place of use are located within or served by an irrigation or other water district.

Irrigation District Name	Address
--------------------------	---------

City	State	Zip
------	-------	-----

SECTION 10: REMARKS

Use this space to clarify any information you have provided in the application (*attach additional sheets if necessary*).

Land Use
Information Form



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form **must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed.** The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that **your application will not be approved without land use approval.**

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<p>This form is NOT required if:</p> <ol style="list-style-type: none"> 1) Water is to be diverted, conveyed, <u>and/or</u> used only on federal lands; OR 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, <u>and all</u> of the following apply: <ol style="list-style-type: none"> a) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district; b) The application involves a change in place of use only; c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; <u>and</u> d) The application involves irrigation water uses only. 	<p>NOV 27 2017</p> <p>OWRD</p> <p>RECEIVED BY OWRD</p>
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NOTE TO LOCAL GOVERNMENTS

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The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources

G-18584

Land Use Information Form



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

Applicant: DAVID M. PRITCHETT First Last

Mailing Address: 4875 ROGUE RIVER DR
TABLE POINT City OR State 97124 Zip Daytime Phone: 541 871 2507

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	1/4 1/4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
<u>37</u>	<u>1W</u>	<u>4</u>	<u>NW/4</u> <u>SW/4</u>	<u>300</u>	<u>EFU</u>	<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	<u>IRRIGATION WATERING</u>
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

TRAIL, JACKSON COUNTY, OREGON RECEIVED BY OWRD
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B. Description of Proposed Use

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Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water Water Right Transfer Permit Amendment or Ground Water Registration Modification
 Limited Water Use License Allocation of Conserved Water Exchange of Water

Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: 306 cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-Municipal Instream Other _____

Briefly describe:

VEGETATION REQUIRING WATERING = Marijuana production

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department. See bottom of Page 3. →

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For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): _____.
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
Type 1 LUI for marijuana production	JCLDO 3.13	<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input checked="" type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

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Name: _____ Title: Dawn Nail, Planner II 541-774-6922

Signature: [Signature] Phone: _____ Date: 06/22/17

Government Entity: Jackson County

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____ **RECEIVED**

City or County: _____ Staff contact: _____ **NOV 27 2017**

Signature: _____ Phone: _____ Date: _____ **OWRD**

6-18584

STATE OF OREGON
WATER SUPPLY WELL REPORT
 (as required by ORS 537.765)

*Ammend
M.P.*

WELL I.D. # L66399
 START CARD # 163430

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number _____
 Name Tommy Scott
 Address P.O. Box 296
 City Trail State Oregon Zip 97541

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 225 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
6	0	18	Bentonite	0	18	9 sacks
6	18	225				

How was seal placed: Method A B C D E
 Other Dry Poured

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6	+2	18	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4	0	225	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 18

(7) PERFORATIONS/SCREENS:
 Perforations Method Saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
205	225	1/4 x 6	100			<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing Time
30		215	1 hr.

Temperature of water 58 Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County Jackson Latitude _____ Longitude _____
 Township 34 N or S. Range 1W E or W. WM.
 Section 5 SE 1/4 NE 1/4
 Tax Lot 180 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 300 M.P. 1469 Madera

(10) STATIC WATER LEVEL:
180 ft. below land surface. Date 1/8/04
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 185

From	To	Estimated Flow Rate	SWL
185	190	2	180
215	220	28	180

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Brown Clay	0	5	
Consolidated Basalt	5	225	
Very Fractured			

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Date started 1/8/04 Completed 1/8/04

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
 Signed Michael Science WWC Number 1251 Date 1/12/04

(bonded) Water Well Constructor Certification:
 I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
 Signed Michael Science WWC Number 1251 Date 1/12/04

Date Postmarked _____
Date Hand-Delivered _____
Date Region Office Rec'd _____

W 163430
OWRD Receipt _____
Date Fee Received _____
Check No _____

START CARD

NOTICE OF BEGINNING OF WELL CONSTRUCTION (as required by ORS 537.762)

*Amended
M.P.*

This form must be completed and the original mailed or delivered to the Water Resources Department, 725 Summer Street NE Suite A, Salem OR 97301-1271 for all new construction, conversion, alteration, deepening and abandonments. This original must be mailed or delivered before work is commenced. A \$125 fee shall accompany the original for all new well construction, conversion, and deepenings (make checks payable to the Water Resources Department). In addition, the constructor shall provide a legible copy of this notice to the region office within which the well is being constructed, converted, altered, deepened, or abandoned using one of the following methods: (a) by regular mail no later than three (3) calendar days (72 hours) prior to commencement of work; (b) by hand delivery, during regular office hours before work is commenced; or (c) by FAX before work is commenced. If method (c) is used, a legible copy of the start card shall also be mailed or delivered to the region office no later than the day work is commenced. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$125 fee with the start card, for failure to submit the \$125 fee in a timely manner, and for failure to timely submit start cards.

Owner's name and mailing address: Tommy Scott
Home Phone: () _____
Work Phone: () _____
P.O. Box 296
Trail, OR 97541

Type of work: Fee New Construction No Fee Alteration (Repair/Recondition)
Required: Conversion Required: Abandonment Orig. Start
 Deepening Orig. Start

Proposed Commencement Date: 1-8-04 Card No. _____

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Existing or Proposed Well Depth: 150 Diameter: 6 Original Well I.D. Label Number: _____

Use: Domestic Community (Public System) Industrial Irrigation
 Thermal Injection Monitoring Other _____

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M.P.

Proposed Well Location:
County Jackson Township 34 Range 1W Section 5 Tax Lot 100 300

1/4 SE 1/4 NE Or Latitude _____ Longitude _____

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Street Address of well, if not assigned, nearest address:
1469 Madera
SALEM, OR

We have read the back of this form and the information provided is accurate to the best of our knowledge.
Owner/Agent Name _____ Bonded Water Supply/Monitor Well Constructor Name Michael Peice License No. 1251
Clear Water Company Date Signed 1-8-04

OWNER PLEASE NOTE: This is not a water right application. The owner is responsible for obtaining a water right through the Water Resources Department, if required. The Oregon Health Division requires plans to be submitted and approved prior to construction if the well is to be used as a public system.

ADDITIONAL IMPORTANT INFORMATION ON BACK.

LAWYERS TITLE INSURANCE CORPORATION

ALTA OWNER'S POLICY

SCHEDULE A

CASE NO.	DATE OF POLICY	AMOUNT OF INSURANCE	PREMIUM	POLICY NO.
124852	February 3, 2004 at 2:10 P.M.	\$140,000.00	\$453.00	124852

1. Name of Insured:

Cornell M. Hartford
David M. Pritchett

2. The estate or interest in the land covered by this policy is:

FEE SIMPLE

3. The estate or interest referred to herein is at Date of Policy vested in

Cornell M. Hartford, as to an undivided 1/2 interest and David M. Pritchett, Trustee, of the David Morris Pritchett Revocable Living Trust, dated July 9, 2003, as to an undivided 1/2 interest

4. The land referred to in this policy is described as follows:

SEE EXHIBIT "A" ATTACHED HERETO

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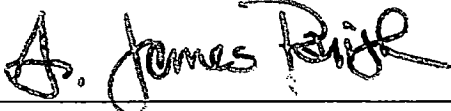
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LAWYERS TITLE INSURANCE CORPORATION

BY:



COUNTERSIGNED BY AUTHORIZED
OFFICER OR AGENT

ISSUED AT MEDFORD, OREGON

This policy is invalid unless
the cover sheet and Schedule B
are attached.

124852

EXHIBIT A

Lot Four (4) and the Southwest Quarter of the Northwest Quarter of Section 4 in Township 34 South, Range 1 West of the Willamette Meridian in Jackson County, Oregon.

(Code 9-02, Account #1-22163-7, Map #341W4, Tax Lot #300)

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SALEM, OR

6-18584



Oregon Water Resources Department
 Apply for a Permit to Appropriate Ground Water and/or Store Ground Water

[Main](#) [Help](#)
[Return](#) [Contact Us](#)

Today's Date: Monday, November 27, 2017

Base Application Fee for use of Ground, Surface and optionally Stored Water.		\$1,340.00
Number of proposed cubic feet per second (cfs) to be appropriated. (1 cfs = 448.83 gallons per minute)	1	\$350.00
Number of proposed Use's for the appropriated water. (i.e. Irrigation, Supplemental Irrigation, Pond Maintenance, Industrial, Commercial, etc) *	1	
Number of proposed Ground Water points of appropriation. (i.e. number of wells) (include all injection wells, if applicable) **	1	
Number of Acre Feet to be stored in a reservoir/pond from Ground Water.	0	
Number of Acre Feet to be appropriated from reservoir/pond (Only Applies to reservoir/pond constructed under Ground Water Application)	0	
Number of reservoirs.	0	
Permit Recording Fee. ***		\$520.00
* the 1st Water Use is included in the base cost. ** the 1st Ground Water point of appropriation is included in the base cost. *** the Permit Recording Fee is not required when the application is submitted but, must be paid before a permit will be issued. It is fully refundable if a permit is not issued. If the recording fee is not paid prior to issuance of the Final Order, permit issuance will be delayed.	<input type="button" value="Recalculate"/>	
Estimated cost of Permit Application		\$2,210.00



OWRD Fee Schedule

Fee Calculator Version B20170117

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