## STATE OF OREGON

RECEIPT # 125558

WATER RESOURCES DEPARTMENT
725 Summer St. N.E. Ste. A
SALEM, OR 97301-4172 INVOICE #\_\_\_\_\_
(503) 986-0900 / (503) 986-0904 (fax)

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020	05	TRANSFER			\$		· · · · · · · · · · · · · · · · · · ·		<u> </u>
Ī., .	*	WELL CONSTRU	JCTION		EXAM FE			LICEN	ISE FEE
02	18	WELL DRILL CO	NSTRUCTO	1 00 .05	0201-\$1110.0			\$	
	4 (4)	LANDOWNER'S	PERMIT	<b>!</b>	0201-\$760.00			\$	
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	0536 T	REASURY	0437	WELL C	ONST ST	ART F	EE * 1	<u> </u>	
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02		POWER LICENS				1		\$	
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RECEIPT: 125558 DATED: 12-21-184. LANGE MAN

Alternate Ro	eservoir Application Completenes	ss Checklist
Application <b><i>R-88490</i></b> Cou	This is the checklist used by WRD staff	
Priority Data 27 - Dec - 17 Tox	wnship 95 Range / E Section //	Taylot 400 \$ 800
TIONLY DATE / / DEC - / / 100	Whiship $\frac{7}{2}$ Range $\frac{7}{2}$ Section $\frac{7}{2}$	_ 1 ax10t//
Use Mult	Caseworker Lis.	<u>**</u>
Amount (AF) <u>(0.0</u> Wa	itermaster Sool Plaha	
Minir	num Requirements (ORS 537.	.409)
<b>√</b> Landowner Name, Mailing Addr	ess and Telephone Number.	
Source and tributary listed. NO WI	<u>ELLS-MUST HAVE GW APP TO USE A V</u>	<u>VELL AS A SOURCE</u>
Reservoir Location- Township, Ra	ange, Section, Quarter Quarter, Taxlot	
Dam height, if applicable	_	
▼Total Quantity of Storage Request	ted: <u>  10. D</u>	
Proposed Use of the water. Canno	ot accept application for use of this stored wa	ter at the same time (E2)
✓ Property ownership indicated? If	applicant does not own all the land is the aff	fected landowner's name and
mailing address listed? (Including: lan	nds not owned by applicant, upon which the	source is located OR that are
crossed by the diversion works. This	includes any roads or rights-of-way.)	
Environmental Impact section co	mpleted?	
Application signed by the landow	vner(s)? All parties noted as applicants must	sign the application.
Mux be an original "wet" signature.		
Acceptable map ** Indicates requ	uirements of standards set forth by the Co	ommission and causes fatal
flaw if not provided by the applican	ıt.	
Reservoir Location - noting	Township, Range, Section, 1/4 1/4 and Tax	Lot number(s)*
	e such as $1'' = 400'$ , $1'' = 1000'$ , or $1'' = 13$	
Reference corner on map	,	_
□ North Directional Symbol *	*	
1/41/4's clearly identified		
Reservoir clearly identified	**	
	el) Location coordinates referenced to a gove	rnment landsurvey corner*
	ates to center of reservoir.**	
	heet signed and dated by Watermaster.	
Will the reservoir injure an existi		
	d to mitigate the injury?   YES   NO If N	O. return the application.
	then water is available for the proposed use?	
	ust have been completed within the last 6 mo	
	that water is NOT available, return the ap	
/ ————	signed and dated by ODFW representative.	
	ant detrimental impact to an existing fishery	resource? □ YES № NO
	d to mitigate the impact? □YES □NO If No	
	we been completed within the last 6 months.	<u> </u>
	ceipt signed by the appropriate planning depa	artment official enclosed?
	match the proposed use on the application?	
signature within the last 12 mo.		
	I the property involved with this application.	You may include a copy of
your deed land sales contract or title i		and the second of the second o
-	page from fee calculator	,
Total Paid \$	Total Fees \$ (()	-
Completeness Check by:	Date:	Revised 2017-8-4