

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **125647**

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

INVOICE # _____

RECEIVED FROM: <u>Seibert EXCAVATORS, INC.</u>	APPLICATION <u>R-88447</u>
BY: _____	PERMIT _____
CASH: <input type="checkbox"/>	TRANSFER _____
CHECK# <u>88167</u> <input checked="" type="checkbox"/>	TOTAL REC'D <u>\$ 1520.00</u>
OTHER: (IDENTIFY) _____	

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 4/6/11		
0407	COPY & TAPE FEES	\$ _____
0410	RESEARCH FEES	\$ _____
0408	MISC REVENUE: (IDENTIFY) _____	\$ _____
TC162	DEPOSIT LIAB. (IDENTIFY) _____	\$ _____
0240	EXTENSION OF TIME	\$ _____
WATER RIGHTS:		
0201	SURFACE WATER	\$ <u>1,000.00</u>
0203	GROUND WATER	\$ _____
0205	TRANSFER	\$ _____
WELL CONSTRUCTION		
0218	WELL DRILL CONSTRUCTOR	\$ _____
_____	LANDOWNER'S PERMIT	\$ _____
_____	OTHER (IDENTIFY) _____	\$ _____

0536 TREASURY 0437 WELL CONST. START FEE		
0211	WELL CONST START FEE	\$ _____
0210	MONITORING WELLS	\$ _____
_____	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: **125647** DATED: 1/11/18 BY: [Signature]

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

Application Number: R-88497

Standard Reservoir Application Completeness Checklist

Minimum Requirements

This is the checklist used by WRD staff

County: Malheur Township: 175 Range: 476 Section: 19 19' H
 Amount: 8.2 AF Use: mining WM Dist # 9 8.2 AF
 Applicant Name: Seibert Excavators
 Receipt Number: 125647 Case Worker: Scott

- Applicant/Organization Name, Mailing Address, and Telephone Number.
- All applicants or the applicant's authorized agent (include title or authority if for an organization or corporation), must sign the application in ink. *Signature must be an original "wet" signature. Copies cannot be accepted.*
- Source of water.

TBD

 The proposed source is or is not (circle one) withdrawn from further appropriation. If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.
- Property ownership indicated.
- If applicant does not own all the land, the affected landowner's name and mailing address must be listed.
- If applicant does not own all the land, 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.
- Proposed use of stored water:
- Amount of water from each source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF)
- Project schedule (If system is already completed, indicate "existing").
- Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir for all standard reservoir applications

11/12/2018
You must include 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 you may submit a lot book report prepared by a title company. The Department will not accept a copy of the tax bill.

A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. *Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months. Signature must be an original "wet" signature. Copies cannot be accepted.*

A map prepared by a CWRE for a standard reservoir application proposing to store more than 9.2 acre feet and having a dam height of more than 10 feet

The map must meet all the minimum requirements of OAR 690-310-0050.

- Township, Range, Section
- Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU) *1/4 1/4*
- Place of use, 1/4, 1/4=§ and tax lot clearly identified
- Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)
- Location of **each** diversion point, well or dam by reference to a recognized public land survey corner. Multiple wells shall be uniquely labeled, and identified on well logs if existing.
- Reference corner on map
- North Directional Symbol
- Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture
- Other _____

see print out
Fees: Amount of water requested *1765*

Base Fee \$ _____	Total Exam Fees \$ _____
1st CFS/AF _____	Permit Recording Fees \$ _____
Addnl CFS/ AF @ _____ = _____	Total Paid \$ _____
Addnl POD/POA @ _____ = _____	Amount Due \$ _____
Addnl Use @ _____ = _____	Amount Returned \$ _____

Reviewed by: B/EG Date: 11/11/18

*pd: 1520
actual amount: 1765 bal due: 245*