

STATE OF OREGON
WATER RESOURCES DEPARTMENT

RECEIPT # **125858**

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

INVOICE # _____

RECEIVED FROM: Donn Brumfield

BY: _____

CASH: ☐

CHECK: # 027799104

OTHER: (IDENTIFY) _____

APPLICATION G-18610

PERMIT

TRANSFER

TOTAL REC'D \$ 1,610.00

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

EXAM FEE
\$
\$ <u>1,610.00</u>
\$
EXAM FEE
\$

0202

\$

0203 GROUND WATER

0204

\$ 210.00

0205 TRANSFER

\$

WELL CONSTRUCTION

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)

\$

0231 HYDRO LICENSE FEE (FW/WRD)

\$

HYDRO APPLICATION

\$

TREASURY OTHER / RDX

FUND _____ TITLE _____

OBJ. CODE _____ VENDOR # _____

DESCRIPTION _____

\$

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DATED: 2-12-18 BY: Donn Brumfield

E-2**Standard Application Completeness Checklist**

Yes No

*For use with Groundwater and Surface Water Applications Only***Minimum Requirements (OAR 690-310-0040)(ORS 537.400)**

For use by WRD staff only

Application G-18610 County Josephine Priority Date 2/15/18Township 40S Range 8W Section 14Amount 50 gpm Use Irrigation WM Dist. # 14Applicant Name Cole BrumfieldReceipt No. 125858 Caseworker Assigned: ☐ Barbe ☐ Kim ☐ Lisa ☒ Scott☒ Applicant/Organization Name and Mailing Address☒ Signature of *all* applicants (include title or authority of representative if applicant is an organization or corporation). *Applicant's agent may NOT sign application.☒ Property ownership: Does the applicant own all the land for the proposed project? ☒ Y ☐ N*If No:*☐ The affected landowner's name(s) and mailing address(s) 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)(ORS 537.147).*☐ If for stored water not under contract, is the source authorized under a permit, certificate, or decree?Permit or Certificate issued ☐ Y ☐ N Permit or Certificate # _____☐ For a 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*)☐ Resource Protection Section (*N/A for Groundwater*)☒ Project schedule (If system is already completed, indicate "existing.")

N/A

☐ Supplemental data sheets enclosed (if needed)

☐ Form M (Municipal or Quasi-Municipal)

☐ Spring Description Sheet (if source is a spring)

☒ 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.

☒ 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 applicant may submit a lot book report prepared by a title company. Copies of tax bills are not acceptable.

☒ The proposed source **IS / IS NOT** (circle one) restricted or withdrawn from further appropriation.

NOTE: If it is withdrawn under ORS 538, return application and fees.

☒ 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)

☐ Place of use, ¼-¼'s and tax lot clearly identified

☐ Even map scale not less than 4" = 1 mile (1" = 1320 ft.); examples: 1" = 100 ft., 1" = 200 ft.

☐ Location of *each* diversion point or well 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 ¼ ¼ if for irrigation, nursery, or agriculture

☐ **Fees: Print out from Fee Calculator**

Total Fees \$ _____

Fee Paid \$ _____

Amount Due \$ _____

Reviewed by: _____

Date: _____