STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 126474

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

INVOICE	#	

RECEIVED FROM: CIST WARY SOUTIONS	APPLICATION	K-XXSA
BY: INC.	PERMIT	, and the second
	TRANSFER	
CASH: CHECK:# OTHER: (IDENTIFY)	TOTAL REC'D	\$ 1,035.0
1083 TREASURY 4170 WRD MISC CASH A	CCT	
0407 COPIES		\$
OTHER: (IDENTIFY)		\$
0243 I/S Lease 0244 Muni Water Mgmt. Plan 024	45 Cons. Water <u>· </u>	
4270 WRD OPERATING	ACCT	P 6
MISCELLANEOUS 4011		
0407 · COPY & TAPE FEES		\$
0410 RESEARCH FEES		\$
0408 MISC REVENUE: (IDENTIFY)		\$
TC162 DEPOSIT LIAB. (IDENTIFY)		\$
0240 EXTENSION OF TIME		\$
WATER RIGHTS: EXAM FEE	\neg	RECORD FEE
0201 SURFACE WATER \$ 515.00	0202	\$ 5200
0203 GROUND.WATER \$	0204	\$
0205 TRANSFER \$		
WELL CONSTRUCTION EXAM FEE	-	LICENSE FEE
0218 WELL DRILL CONSTRUCTOR \$	0219	\$
LANDOWNER'S PERMIT	 0220	\$
· ·		
OTHER (IDENTIFY)		
0536 TREASURY 0437 WELL CONST. STAI	RT FEE	
0211 WELL CONST START FEE \$	CARD#	
0210 MONITORING WELLS \$	CARD#	
OTHER (IDENTIFY)	+,-,	
0607 TREASURY 0467 HYDRO ACTIVITY	LIC NUMBER	
0233 3' POWER LICENSE FEE (FW/WRD)	-	\$
0231 HYDRO LICENSE FEE (FW/WRD)		\$
HYDRO APPLICATION		\$
	5	
TREASURY OTHER / RDX		
FUND TITLE		
OBJ. CODE VENDOR #		- · · · · · · · · · · · · · · · · · · ·
DESCRIPTION		\$
		1
RECEIPT: 126474 DATED: 4-23-18 BY:	Photo	L .

Distribution - White Cony - Customer Vollay Cony - Fiscal Blue Cony - File Parti Cony - Fiscal

STATE OF OREGON

WATER RESOURCES DEPARTMENT

RECEIPT # 126479

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

INVOICE #	

RECEIVED FROM:	<u>6351</u>	Wat	ro	olutia	<mark>15</mark>	APPLI	CATION	K	-XX574
BY: **		INC.				PE	TIME		
CASH: CHE	CK·# 0	THER: (IDEN	UTIEV\			TRAN	ISFER		
· <u>· ^</u>	700392	THEN. (IDE)	VIII I)		Γ-	TOTAL	REC'D	\$	25.60
<u> </u>		;	1		<u> </u>			1 -	
1083 TI	REASURY	4170 V	VRD MI	SC CASH	AC(CT			
0407	COPIES							\$	
	OTHER: (II	DENTIFY)		·		. –		\$	· · · · · · · · · · · · · · · · · · ·
0243 I/S Lease	e 02441	Muni Water N	vigmt. Pla	n 02	245 C	Cons. W	ater	_	
		4270 V	VRD OI	PERATING	AC	СТ	4 . 4		a4.
N	/IISCELLANEOUS		4	1110					
0407	OPY & TAPE FEE	S	•					\$, · ,.
0410 F	RESEARCH FEES							\$	
0408 N	/ISC REVENUE: ((IDENTIFY)						\$	
TC162 [DEPOSIT LIAB. (ID	ENTIFY)		 				\$	
0240 . E	EXTENSION OF TIME	ИE						\$	· · ·
	VATER RIGHTS:			EXAM FEE		•		F	ECORD FEE
0201 8	SURFACE WATER			\$ 25.00	و	020	2	\$	
0203	ROUND WATER	Ť		\$		020	4	\$	
0205 · T	RANSFER			\$					
	VELL CONSTRUC	TION		EXAM FEE	. ,			L	ICENSE FEE
0218 V	VELL DRILL CONS	TRUCTOR		\$	·	021	9	\$	-
L	ANDOWNER'S PE	RMIT				022	0	\$	
	OTHER .	(IDENTIFY)) <u></u>						_
OFOC T	DE A OUDV	0407 14	VEL 1 0	ONOT OTA	. D.T				9
l	REASURY		VELL C	ONST. STA	XH I	TEE			a
	VELL CONST STAF			\$		_	CARD#		
0210 N	MONITORING WEL	LS		\$		J	CARD#	<u></u>	<u> </u>
	OTHER	(IDENTIFY)					· · ·		
0607 T.F	REASURY	0467 H	YDRO	ACTIVITY	L	IC NUM	BER		
0233 F	OWER LICENSE F	EE (FW/WR	D)	٠,				\$	
0231 F	IYDRO LICENSE F	EE (FW/WR	D)					\$,
·	IYDRO APPLICATI	ON						\$	
T	REASURY	C	THER	/ RDX	4 "			. r	e in the second
, , ,									
<i>;</i>					_		4		•
F A	 J				-			\$	•
DESCRIPTION					=	<u> </u>		_	

RECEIPT: 126479

DATED: 4-73-18 BY:

Alternate Reservoir Application Completeness Checklist
This is the checklist used by WRD staff
Application R-88576 County Uma tilla
Priority Date 4124772 Township 5N Range 29E Section 2/ Taxlot 100
Priority Date 4/24/18 From Township SN Range 29E Section 21 Taxlot 100 Use Multipurpose, wet had enhangement. Caseworker Scott Grew
Amount (AF) 3.05 Af. Watermaster Grey Silbernage/
Minimum Requirements (ORS 537.409)
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: 3.05 Afr
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 located OR that are crossed by the diversion works. This includes any roads or rights-of-way.)
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, even scale such as $1'' = 400'$, $1'' = 1000'$, or $1'' = 1320'$ **
Reference corner on map
North Directional Symbol **
1/41/4's clearly identified
Reservoir clearly identified **
Dam or POD (If off channel) Location coordinates referenced to a government landsurvey corner*
If no dam, use coordinates to center of reservoir.**
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? \Box YES \Box 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.
Provide a 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.
☐ Fees enclosed? Print page from fee calculator
Total Paid \$ 1,070.00 Completeness Check by: E.G. J.S. Date: 4/24/18 Revised 2017-8-4
Completeness Check by: E.G. J.S. Date: 4/24/18 Revised 2017-8-4