STATE OF OREGON

WATER RESOURCES DEPARTMENT

725 Summer St. N.E. Ste. A

RECEIPT #	129601		97301-4172 503) 986-0904 (fax)	INVOICE #	
RECEIVED FRO	OM: K2	A Prope	HIESILI	APPLICATION	G-18818
BY:		1	00/100	PERMIT	- 00.0
				TRANSFER	
CASH: (CHECK:#	THER: (IDENTIFY)			1. 26115 0
	1287			TOTAL REC'D	s 2040.00
1083	TREASURY	4170 WRD I	MISC CASH A	ÇCŢ	
0407	COPIES	WO.	id 0	16	\$
	_ OTHER: (I	DENTIFY)	~~~		\$
0243 I/S L	_ease 0244	Muni Water Mgmt. P	lan 024	5 Cons. Water	
			OPERATING A		
	MISCELLANEOUS		40111		
0407		COPY & TAPE FEES			
0410	RESEARCH FEES				
0408	MISC REVENUE: (IDENTIFY)				\$
TC162	DEPOSIT LIAB. (IE	DENTIFY)			\$
0240	EXTENSION OF TI				\$
	WATER RIGHTS:		EXAM FEE		RECORD FEE
0201				0202	\$
0203	SURFACE WATER \$ 0202 GROUND WATER \$ 0204				\$
0205	TRANSFER		\$	0201	
	WELL CONSTRUC	TION	EXAM FEE		LICENSE FEE
0218	WELL DRILL CONS		\$	0219	\$
0210	LANDOWNER'S PE			0220	\$
	OTHER	(IDENTIFY)			
0536	TREASURY	0437 WELL	CONST. STAF	RT FEE	
0211	WELL CONST STA	RT FEE	\$	CARD#	The state of the state of
0210	MONITORING WEL	LS	\$	CARD#	
	OTHER	(IDENTIFY)			
0607	TREASURY	0467 HYDR	OACTIVITY	LIÇ NUMBER	
0233	POWER LICENSE	FEE (FW/WRD)			\$
0231	HYDRO LICENSE	FEE (FW/WRD)			\$
	HYDRO APPLICAT	ION			\$
	TREASURY	OTHE	R / RDX		
FUND		TITLE			
	DE				
	TION				\$
			7	4 1	
DECEIDT: 1	29601	DATED: 4	122/19 PV	Clubur	thrich

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



RECEIVED

APR 22 2019

OWRD

Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Instructions for OWRD staff:

- Complete this Submission Receipt, and make two (2) copies. Place one copy with the check/cash; and place the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- · Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Place the Submission Receipt with check/cash in the small top drawer (i.e., "Fiscal Pick Up Drawer"). Place the Submission Receipt with submission (application/other document) in the large bottom drawer.



RECEIVED

APR 22 2019

OWRD

Date Received (Date Stamp Here)

OWRD Over-the-Counter Submission Receipt

Applicant Name(s) & Address: Amy Doerfler for KaA Properties LLC						
12333 Silv	er Falls t	my SE Awasville OR 97325				
Transaction Type:		(surface or groundwater?)				
Fees Received: \$	2040-					
☐ Cash	Check:	Check No. 128 9				
BILHE CONVER	OVER	Name(s) on Check: K 2A Properties LLC				
BECEIVED		Address on Check: 12333 Silver Falls Hwy S				
Thank you for your review your submit		Address on Check: 12333 Stiver Falls Hwy 8 Aumsville OL 97325 regon Water Resources Department (Department) staff will ossible.				
		be complete, you will receive a receipt for the fees paid and your submittal is complete.				
		our submission and the accompanying fees will be returned with must be addressed in order for the submittal to be accepted.				
If you have any que at 503-986-0801 or		eel free to contact the Department's Customer Service staff				
Sincerely,		RECEIVED				
OWRD Customer Se	ervice Staff	APR 2 2 2019				
Submission receive	ed by: Jud	(Name of OWRD staff)				
Instructions for OM	IDD stoff.					

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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 9-18818 County LINN Priority Date 4-22-2019
Township 105 Range 2W Section 20
Amount 6505 Use IRRIGATION Ground Water WM Dist. # 2
Applicant Name Army Doerfler for KZA Properties LLC
Receipt No. 12960 Caseworker Assigned: A Barbe Kim Lisa Scott
Applicant/Organization Name and Mailing Address
8 Signature of <i>all</i> 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? $\not\square$ Y \square 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 <u>must</u> 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
For a GW Application: Well Development Tables completed and/or a well log report included (if existing)
Division 33, Public Interest Information (Sensitive, Threatened, Endangered, Fish Species)
Proposed Water Use
Amount of water from <i>each</i> 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
Project schedule (If system is already completed, indicate "existing.")

NHA	Supplemental data sheets enclosed (if needed)
' '	Form M (Municipal or Quasi-Municipal)
1	Spring Description Sheet (if source is a spring)
1	
* 🙊	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.
Ą	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.
180	The proposed source <u>IS / IS NOT</u> (circle one) restricted or withdrawn from further appropriation. <i>NOTE: If it is withdrawn under ORS 538, return application and fees.</i>
	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, 1/4-1/4'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 <i>each</i> 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 1/4 1/4 if for irrigation, nursery, or agriculture
$\sqrt{\Box}$	Fees: Print out from Fee Calculator
	Total Fees \$ <u>2,560</u> .∞
	Fee Paid \$ 2,040. **
	Amount Due \$ 520.
Re	viewed by: Cory Middleton Date: 4/23/2019