

# MONEY SLIP

**DATE:** 4-2-2020      **RECEIPT #:** 132226

**RECEIVED FROM:** Cory L. Turner  
Danielle C. Turner

|                    |                |
|--------------------|----------------|
| <b>APPLICATION</b> | <u>G-18953</u> |
| <b>PERMIT</b>      |                |
| <b>TRANSFER</b>    |                |

**CASH**     **CHECK #**  5604    **OTHER (IDENTIFY)**

**TOTAL REC'D** \$ 1,200.00

**1083 TREASURY**      **4170 MISC CASH ACCT.**

0407 COPIES \$ \_\_\_\_\_  
OTHER: (IDENTIFY) \_\_\_\_\_ \$ \_\_\_\_\_

0243 Instream Lease \_\_\_\_\_    0244 Muni Water Mgmt. Plan \_\_\_\_\_    0245 Cons. Water \_\_\_\_\_

**1083 TREASURY**      **4270 WRD OPERATING ACCT.**

**MISCELLANEOUS**

0407 COPY & TAPE FEES 46111 \$ \_\_\_\_\_  
0410 RESEARCH FEES \$ \_\_\_\_\_  
0408 MISC REVENUE (IDENTIFY) Drought \$ \_\_\_\_\_  
TC162 DEPOSIT LIAB. (IDENTIFY) \_\_\_\_\_ \$ \_\_\_\_\_  
0240 EXTENSION OF TIME \_\_\_\_\_ \$ \_\_\_\_\_

**WATER RIGHTS**

|                          |                  |      |                  |
|--------------------------|------------------|------|------------------|
| 0201 SURFACE WATER       | EXAM FEE         | 0202 | RECORD FEE       |
| <u>0203</u> GROUND WATER | \$ <u>200.00</u> | 0204 | \$ <u>100.00</u> |
| 0205 TRANSFER            | \$ _____         |      |                  |

**WELL CONSTRUCTION**

|                             |          |      |            |
|-----------------------------|----------|------|------------|
| 0218 WELL DRILL CONSTRUCTOR | EXAM FEE | 0219 | RECORD FEE |
| LANDOWNER'S PERMIT          | \$ _____ | 0220 | \$ _____   |
| OTHER (IDENTIFY) _____      |          |      |            |

**0607 TREASURY**      **0467 HYDROELECTRIC**

0233 POWER LICENSE FEE (FWWRD)      **LIC NUMBER** \_\_\_\_\_ \$ \_\_\_\_\_  
0231 HYDRO LICENSE FEE (FWWRD)      \_\_\_\_\_ \$ \_\_\_\_\_  
HYDRO APPLICATION \_\_\_\_\_ \$ \_\_\_\_\_

**SPECIAL INSTRUCTIONS:**

RETURN TO APPLICANT -- LETTER ATTACHED

# Emergency Drought Permit Application Completeness Checklist

Application G-18953 Applicant Name Comy Turner

County Klamath Declaration 20-02 Priority Date 4-2-2020 WM# 17

Township 40s, 41s Range 12E, 11E Section 1, 28, 33, 03, 05, 4, 6, 8

Requested Amount 6-45 cfs Use SU 1R

Caseworker Assigned:  Kim  Lisa

Contact info and signature (in ink)

Property ownership: Does the applicant own all the land for the proposed project?  Yes  No

If No:  The affected landowner's name and mailing address 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.

Well Development Tables completed and/or a well log report included (if existing)

Proposed water use  Use  
 Period of Use  
 Underlying permit or certificate number listed

Water Management Section (*Estimates if the water system has not been designed*)

The map must include:

- Township, Range, Section
- Location of main canals, ditches, pipelines or flumes (if well 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 *each* 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

Fees:

Receipt No. 138226

|              |   |                              |   |                                 |   |                           |      |                           |     |          |
|--------------|---|------------------------------|---|---------------------------------|---|---------------------------|------|---------------------------|-----|----------|
| <u>\$200</u> | + | <u>\$400</u>                 | + | <u>600.<sup>00</sup></u>        | = | <u>1200.<sup>00</sup></u> | Paid | <u>1200.<sup>00</sup></u> | Owe | <u>0</u> |
| base         |   | 1 <sup>st</sup> CFS/fraction |   | \$100 each add'1/4 fraction CFS |   | total due                 |      |                           |     |          |
| (exam)       |   | (recording)                  |   | (recording)                     |   |                           |      |                           |     |          |

Completed by: Comy M. dilleton Date: 4-8-2020

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_