



Oregon Water Resources Department

**RECEIVED**

MAY 31 2007

WATER RESOURCES DEPT  
SALEM, OREGON

**FORM I**

**FOR IRRIGATION WATER USE**

1. Please indicate whether you are requesting a primary or supplemental irrigation water right.

**Primary**     **Supplemental**

If supplemental, please indicate the number of acres that will be irrigated for each type of use.

Primary:                      19.5                      Acres

Secondary:                  \_\_\_\_\_                    Acres

List the permit or certificate number of the primary water right:                    No. \_\_\_\_\_

2. Please list the anticipated crops you will grow and whether you will be irrigating them for a full or partial season:

- |                         |                                      |  |
|-------------------------|--------------------------------------|--|
| 1. <u>Pasture</u> _____ | <input type="checkbox"/> Full season | <input checked="" type="checkbox"/> Partial season (from: <u>3/1</u> to <u>10/31</u> ) |
| 2. <u>Hay</u> _____     | <input type="checkbox"/> Full season | <input checked="" type="checkbox"/> Partial season (from: <u>3/1</u> to <u>10/31</u> ) |
| 3. <u>Trees</u> _____   | <input type="checkbox"/> Full season | <input checked="" type="checkbox"/> Partial season (from: <u>3/1</u> to <u>10/31</u> ) |
| 4. <u>Grapes</u> _____  | <input type="checkbox"/> Full season | <input checked="" type="checkbox"/> Partial season (from: <u>3/1</u> to <u>10/31</u> ) |

3. Indicate the maximum total number of acre-feet you expect to use in an irrigation season:

\_\_\_\_\_   48.75   \_\_\_\_\_ acre-feet

(1 acre-foot equals 12 inches of water spread over 1 acre, or 43,560 cubic feet, or 325,851 gallons.)

4. How will you schedule your applications of water? Will you be applying water in the evenings, twice a week, daily?

- |   |  |
|---|--|
| <input type="checkbox"/> Daily during daytime hours               | <input type="checkbox"/> Daily during nighttime hours                          |
| <input type="checkbox"/> Two or three times weekly during daytime | <input checked="" type="checkbox"/> Two or three times weekly during nighttime |
| <input type="checkbox"/> Weekly, during daytime hours             | <input type="checkbox"/> Weekly, during nighttime hours                        |

**Other, explain:** Schedule may vary depending on weather. Nighttime irrigation will be utilized most often.