



Oregon
Kate Brown, Governor

Water Resources Department
725 Summer St NE, Suite A
Salem, OR 97301
(503) 986-0900
Fax (503) 986-0904

June 29, 2022

Carolyn Shaw
12952 Crystal Springs RD
Klamath Falls, OR 97603

Re: Application for a Permit to use Groundwater

Dear Applicant:

The Water Resources Department has received your application for a permit to use groundwater. At this time, however, we are unable to accept your application because the minimum filing requirements have not been met according to the Oregon Administrative Rules 690-310-0040 and 690-310-0050.

We are therefore returning the incomplete application and fees. You may resubmit the application with the additional required information and fees noted on the reverse side of this letter.

Should you have any questions, please contact Water Right Customer Service at 503-986-0801 or 503-986-0810.

Sincerely,

Corie Lovrien
Water Rights Customer Service Representative

cc: OWRD Fiscal (Check # 13204)
Danette Watson, WM District #15

RECEIVED

JUL 11 2022

OWRD

Enclosures: Application and Check

This review is based only on the completeness of your application(s). Any determination of water availability, compliance with basin program rules, or any other water-related issues has not been made. Fees are subject to change.

Groundwater Application Completeness Checklist | Summary of Needed Items:

Application:

- Section 8 – Resource Protection.** I marked this section with a blue arrow for you.
- An application map.** The map must include following elements:
 - Place of use, ¼-¼'s clearly identified.

ED
JUL 11 2025
O'D

E-2 App

- Yes
 No

Standard Application Completeness Checklist**Groundwater and Surface Water Applications Only**

Minimum Application Requirements (OAR 690-310-0040 &-0050)

For use by WRD staff only

Application #:		Receipt #:	138629
Applicant Name:	Carolyn Shaw	Amount Requested:	55 gpm
Priority Date:	7-11-2022	Proposed Use:	Irrigation
County:	Klamath	POD's TRS &TL:	39S 10E 27
WM #:	17	Caseworker:	<input checked="" type="checkbox"/> KF <input type="checkbox"/> LG
Reviewed by:	Dante Luongo	Reviewed Date:	7-13-2022

- Applicant/Organization Name and Mailing Address
- Signature of **all** applicants (include title or authority of representative if applicant is an organization or corporation). Note: Applicant's agent may NOT sign the application on behalf of the applicant.
- Property Ownership: Does the applicant own all the land for the proposed project? Yes No
- 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)
- If for stored water, is the source authorized under a permit, certificate, or decree?
- Permit or Certificate issued: Y N Permit or Certificate #:
- NOTE:** An expedited secondary (E2) application and a reservoir application cannot be filed at the same time. The reservoir must be legally authorized first, under an existing water right, in order to accept and process an E2 application.
- For a GW Application:** Well development table completed and a well log report included (if existing)
- Division 33 (Sensitive, Threatened, Endangered, Fish Species)
- 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.
 (Note: Primary and Supplemental Irrigation counts as 2 uses)
- Water Management Section
- Resource Protection Section

- Project schedule. (Note: If system is already completed, indicates "existing.", (Note: Estimates are okay if the water system has not been designed))
- Supplemental data sheets enclosed (if needed)
 - Form M (Municipal or Quasi-Municipal)
- A completed **Land-Use Form** or receipt signed and dated by the appropriate planning department. 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, conveyed, 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** restricted or withdrawn from further appropriation. **NOTE:** If it is withdrawn under ORS 538, reject/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, 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** 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, supplemental irrigation, or nursery use
- Fees:** Amount of Water Requested: 55 gpm Name on Check: Randy L Shaw

Exam Fee Due:	\$1980
Exam Fee Submitted:	\$1980
Difference:	\$0
Recording Fee Paid?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No \$ 610
Total:	\$1980

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

725 Summer St. N.E. Ste. A

SALEM, OR 97301-4172

(503) 986-0900 / (503) 986-0904 (fax)

RECEIPT # **138629**

INVOICE # _____

RECEIVED FROM: Randy L. Shaw
BY: Carolyn Joy Shaw

APPLICATION	679311
PERMIT	
TRANSFER	

CASH: CHECK:# 13204 OTHER: (IDENTIFY)

TOTAL REC'D \$ 1,980.00

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	<u>46111</u>	\$
0410	RESEARCH FEES		\$
0408	MISC REVENUE: (IDENTIFY)		\$
TC162	DEPOSIT LIAB. (IDENTIFY)		\$
0240	EXTENSION OF TIME		\$
WATER RIGHTS:		EXAM FEE	RECORD FEE
0201	SURFACE WATER	\$	0202 \$
0203	GROUND WATER	\$ <u>1,980</u>	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. 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 _____ \$ _____

RECEIPT: **138629**

DATED: 07/11/22

BY: 