

ASR Permit No. \_\_\_\_\_  
(ASSIGNED AFTER FILING)



**APPLICATION FOR  
AQUIFER STORAGE AND RECOVERY (ASR) PERMIT**

**Applicant:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone and Email:** \_\_\_\_\_

**Authorized Agent:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone and email:** \_\_\_\_\_

1. **DATE(S) OF PRE-APPLICATION CONFERENCE(S):** \_\_\_\_\_

2. **SOURCE OF INJECTION WATER for ASR:** \_\_\_\_\_  
a tributary of \_\_\_\_\_

3. **MAXIMUM DIVERSION RATE:** \_\_\_\_\_

4. **MAXIMUM INJECTION RATE AT EACH WELL(S):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Table 1. ASR WELLS (attach additional pages as needed)**

| <b>ASR Well Name</b> | <b>ASR Well Log ID<br/>(e.g. UMAT 12345,<br/>if not yet drilled=<br/>"proposed")</b> | <b>ASR Well Tag<br/>Number<br/>(e.g. L 123456)</b> | <b>ASR Well Location<br/>(metes and bounds from public land survey<br/>corner)</b> |
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5. MAXIMUM STORAGE VOLUME: \_\_\_\_\_
6. MAXIMUM STORAGE DURATION: \_\_\_\_\_
7. MAXIMUM WITHDRAWAL RATE AT EACH WELL(S): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
8. WATER RIGHT FOR INJECTION SOURCE WATER: \_\_\_\_\_
9. ASR LIMITED LICENSE USED FOR TESTING: \_\_\_\_\_

**NOTE:** An ASR Permit can only be obtained after testing under an ASR Limited License. The materials required by rule for an ASR permit are extensive. The items on this sheet consist of those outlined in OAR 690-350-030(4)(a)(A-C, E). Please consult the rule and provide as attachments to this form the other requirements in OAR 690-350-030, including:

- ASR Operational Program (4)(b)(A)
- Proposed System Design (4)(b)(B)
- Test Report, resulting from ASR LL testing (4)(b)(C) to include:
  - Groundwater Information
  - Quality of source, aquifer and recovered water
- Water Right or Water Right Holder Agreement (2)
- Legal Land Use Form (4)(a)(F)
- Site Map (4)(a)(G)
- OHA DWS Plan Review Acknowledgement (public supply systems only) (4)(a)(H)
- ASR Permit Application Fee. Consult current fee schedule at:  
<http://www.oregon.gov/owrd/pages/pubs/forms.aspx#fees>
- Submit one hard copy in person or by mail to: Oregon Water Resources Department, 725 Summer St NE, Suite A, Salem, OR 97301
- Submit a digital copy to: [Jennifer.L.Woody@oregon.gov](mailto:Jennifer.L.Woody@oregon.gov)
- Questions? Contact Jen Woody, OWRD Hydrogeologist, at 503-986-0855

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Title of Applicant \_\_\_\_\_