



FORM A

OSAGE NATION APPLICATION FOR A PERMIT TO USE, STORE, OR TRANSFER GROUNDWATER

Osage Nation Department of Natural Resources
100 W. Main, Suite 304
Pawhuska, OK 74056

OFFICE USE ONLY
Application No.
Type of Permit

1. APPLICANT INFORMATION

Applicant Name
Contact Name (if applicable)
Address Zip
Phone ( ) Email

APPLICATION FILING FEE
Annual Water
Requested: Fee:
0-320 acre-feet \$100
321-640 acre-feet \$200
641-1500 acre-feet \$300
Over 1500 acre-feet \$300\*
\*Plus \$100 for each 500 acre-feet over 1500 acre-feet (Maximum Fee \$2,500)

2. PURPOSE OF PERMIT

Check all that apply:

- Drill Domestic Use Beneficial Use Change Storage Transfer Sell

List the purpose(s) for which the water will be used and the number of acre-feet for each purpose. Note: one acre-foot of water will cover one acre of land one foot deep and is equal to 325,851 gallons.

acre-feet of water will be used annually for

acre-feet of water will be used annually for

\_\_\_\_\_ acre-feet of water will be used annually for \_\_\_\_\_

Anticipated Water Meter installation, check one:

5/8" x 1/2" "  5/8" x 3/4"  3/4" x 3/4"  1"  1 1/2"  2"

### 3. OWNERSHIP & LEGAL DESCRIPTION OF LAND DEDICATED

List the legal description of all the lands to be dedicated. Please do not use city lot and block numbers or metes and bounds. If additional space is needed, list on a separate sheet of paper.

**Dedicated land must also be drawn on attached plat.**

\_\_\_\_\_ acres in \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_  
N S EIM WIM ECM

\_\_\_\_\_ acres in \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_  
N S EIM WIM ECM

\_\_\_\_\_ acres in \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_  
N S EIM WIM ECM

\_\_\_\_\_ acres in \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_  
N S EIM WIM ECM

\_\_\_\_\_ acres in \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_  
N S EIM WIM ECM

Water will be used in \_\_\_\_\_ County, Oklahoma.

### 4. WELL INFORMATION

Please specify the number of wells requested and the legal description of the 10-acre tract of land where the well will be located. If the 10-acre tract is not known, please describe the potential well area where wells may be drilled. If additional space is needed, list on a separate sheet of paper. **Well locations must be drawn on attached plat.**

Water is to be withdrawn from \_\_\_\_\_ well(s) located in:

\_\_\_\_\_ acres in \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_ Existing Well? Yes No  
N S EIM WIM ECM

\_\_\_\_\_ acres in \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_ Existing Well? Yes No  
N S EIM WIM ECM

\_\_\_\_\_ acres in \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section \_\_\_\_\_ Twp. \_\_\_\_\_ Rng. \_\_\_\_\_ Existing Well? \_\_\_\_\_  
N EIM Yes  
S WIM No  
ECM

**SIGNATURES**

Upon my oath or affirmation, I swear or affirm (1) that all information submitted to the Osage Nation Department of Natural Resources in connection with this application is true and accurate to the best of my knowledge; and (2) that I or the person or entity I represent will comply with all applicable laws and regulations of the Osage Nation or its agencies or departments, and any lawful conditions imposed by the Osage Nation DNR Department, which apply or pertain to the use of groundwater.

\_\_\_\_\_  
 SIGNATURE OF APPLICANT

\_\_\_\_\_  
 PRINT NAME

\_\_\_\_\_  
 TITLE (IF APPLICABLE)

**NOTARY**

STATE OF \_\_\_\_\_)

COUNTY OF \_\_\_\_\_)

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
 Notary Public  
 My commission expires: \_\_\_\_\_  
 (SEAL)

**5. APPLICATION SUBMISSION AND PROCESSING**

**The submitted application must include:**

- a. The original application;
- b. Plat drawing;
- c. The appropriate filing fee;
- d. Deed(s), lease(s), and/or letter(s) of consent as required; and
- e. Other documentation that may be requested or provided as needed to complete the application review.

**PLEASE NOTE:** Any incomplete or unresponsive answers may cause a delay in the processing of your application. In addition, pursuant to Osage Nation Water Regulations Section 3(B)(5): “If the Application is defective as to form, the Notice of Additional Information or Deficiency shall advise the Applicant of the corrections, amendments, or changes required and sixty (60) days shall be allowed for the refilling thereof.” Furthermore, under Section 3(B)(6): “If the Application is not corrected, amended or changed within the time required, DNR may inactivate the Application. If an Applicant does not correct an Application as instructed by DNR, and no further proceedings are initiated by the Applicant for six (6) months after the Notice of Additional Information or Deficiency, the Application shall be deemed withdrawn.”

## OSAGE NATION APPLICATION PLAT

Applicant Name \_\_\_\_\_

Application No. \_\_\_\_\_

***Note: Drawings must match the legal descriptions provided in questions 3 and 4 of the Application and one copy of the plat must be filed with the application.***

NW NW NW	NE NW NW	NW NE NW	NE NE NW	NW NW NE	NE NW NE	NW NE NE	NE NE NE
SW NW NW	SE NW NW	SW NE NW	SE NE NW	SW NW NE	SE NW NE	SW NE NE	SE NE NE
NW SW NW	NE SW NW	NW SE NW	NE SE NW	NW SW NE	NE SW NE	NW SE NE	NE SE NE
SW SW NW	SE SW NW	SW SE NW	SE SE NW	SW SW NE	SE SW NE	SW SE NE	SE SE NE
NW NW SW	NE NW SW	NW NE SW	NE NE SW	NW NW SE	NE NW SE	NW NE SE	NE NE SE
SW NW SW	SE NW SE	SW NE SW	SE NE SW	SW NW SE	SE NW SE	SW NE SE	SE NE SE
NW SW SW	NE SW SW	NW SE SW	NE SE SW	NW SW SE	NE SW SE	NW SE SE	NE SE SE
SW SW SW	SE SW SW	SW SE SW	SE SE SW	SW SW SE	SE SW SE	SW SE SE	SE SE SE

\_\_\_\_\_

Section – Township – Range