

FORM 690-10-140
A S S I G N M E N T

RECEIVED

SEP - 6 1986

WATER RESOURCES DEPT
SALEM, OREGON

I, Thomas - Bourgeois

(Name of Permittee)

P.O. Box 468

(Mailing Address)

Lakeview

(City)

ore

(State)

97630

(Zip)

do hereby assign all my interest in and to water right application No. 7694,
permit No. 5-57, as filed in the office of the Water Resources Director, to

Larry E. Susan Conn

(Name)

HC 60 Box 177

145 S.E. 57

(Mailing Address)

Lakeview

(City)

ore

(State)

97630

(Zip)

WITNESS my hand this 3 day of Sept., 19 86.

[Signature]
(Signature of Permittee)

STATE OF OREGON, } ss
County of Marion.

I certify that the within was received by me
on the 8th day of September, 19 86, at 8:00
o'clock A.m., and was recorded in Miscellaneous
Records, Vol. 6 Page 1610

Water Resources Director