

RECEIVED

REQUEST FOR ASSIGNMENT

NOV 13 1995

WATER RESOURCES DEPT.  
SALEM, OREGON

I, Kenneth D Cruickshank and Karen L. Cruickshank  
5545 Mill Creek Rd Sheridan Polk OR 97378 843-2696  
(Mailing address) (City) (County) (State) (Zip) (Phone)

do hereby assign all my interest in and to water right Application # 70413, Permit # 51386; OR GR Statement # \_\_\_\_\_, GR Certificate of Registration # \_\_\_\_\_ as filed in the office of the Water Resources Director, to:

Gordon E. Lucas and Dorothy M. Lucas  
(name)

4950 Mill Creek Rd. Sheridan OR 97378 843-3451  
(Mailing address) (City) (State) (Zip) (Phone)

( Note: If there are other owners of property described in Application, Permit or Certificate of Groundwater Registration you must attach a list of their names and addresses to this form. )

I hereby certify that I have notified all other owners of the property described in this Application, Permit or Certificate of Registration of this request for assignment.

Witness my hand this 6<sup>th</sup> day of Nov 1995.



Opal M. Hamilton

Kenneth D Cruickshank  
Karen L Cruickshank

The completed assignment must be submitted to the Water Resources Department, together with a recording fee of \$10.

STATE OF OREGON, )  
) ss

County of Marion. )

I certify that the within was  
received by me on the 13th day of  
November 1995, at 8 o'clock  
A. m., and was recorded in the  
Miscellaneous Records, Vol. 7  
Page 3113

Water Resources Director

WATER RESOURCES DEPARTMENT  
158 12TH ST. NE  
SALEM, OREGON 97310

OK  
DSM