



State of Oregon
Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900

Application for Instream Lease Renewal

A summary of review criteria and procedures that are generally applicable to these applications is available at www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

The undersigned entered into Instream Lease Number IL- 920 involving Water Right Certificate(s) 39477 on _____, which terminated on Sept 30, 2012

The undersigned Lessor and Lessee, parties to the original lease, hereby request that Lease Number IL- 920 be renewed. Lessor and Lessee warrant that, to the best of their knowledge, circumstances have not changed and all matters involved with or affected by the instream lease and the subject water right(s) remain as they were when the lease was first entered into, including but not limited to water right holder interest, the acres from which the right is leased, and the public instream benefit provided as a result of this instream lease.

The terms and conditions of instream lease IL- 920 are hereby incorporated by reference in their entirety, with the following exception(s):

- The term of the lease shall commence on April 1 2013 ^{SRS} (not before execution by the parties) and continue through Sept 30 2014

CREP. Are some or all of the lands being leased part of a Conservation Reserve Enhancement Program?

Yes No or other Federal Program: _____

Fees. Pursuant to ORS 536.050, the following fee is included:

\$100 for an instream lease renewal application.

Lessor Signature: [Signature] Date: 09-25-12
 Print Name: Steven R Jones
 City, State, Zip: McMinnville Oregon 97128
 Telephone Number: 503 835 3548
 E-mail address**: selectseed@onlinemac.com

Lessor Signature: [Signature] Date: 9-25-12
 Print Name: Bretchen K Jones
 City, State, Zip: McMinnville OR 97128
 Telephone Number: 503 835-3548
 E-mail address**: selectseed@onlinemac.com

For additional Lessors, add additional page using the above format.

Lessee Signature: _____ Date: _____
 Lessee Organization: _____
 Phone Number: _____
 E-mail address**: _____

****BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.**