



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 88 involving Water Right Certificate(s) 68756, which was approved on ~~9 APR 2008~~ and terminated on ~~30 APR 2008~~ 30 SEPT 2013

The undersigned parties to the original lease hereby request that Lease Number 88 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 88 are hereby incorporated by reference in their entirety, with the following exception(s):

- The term of the lease shall commence on 1 APR 2014 (not before execution by the parties) and continue through 30 SEPT 2019 For multi-year leases:
 - I request to be able to terminate the early with written notice to the Department.
 - I request to be able to terminate the lease early with written consent by all lease parties.
 - I do not wish to include a Termination Provision.

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:

\$110.00 for an instream lease renewal application.

****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.**

Lessor Signature: [Signature] Date: 26 Feb 2014
 Print Name: HAROLD E WYMAN
 Complete Mailing Address: 65093 Smokey BUTTE RO BEND, OR 97701
 Telephone Number: (541) 420 4913
 E-mail address**:

Lessor Signature: [Signature] Date: _____
 Print Name: JANE C. WYMAN
 Complete Mailing Address: [Signature]
 Telephone Number: _____
 E-mail address**:

For additional Lessors, type in space for signature and date.

RECEIVED BY OWRD

Lessee Signature: _____ Date: FEB 27 2014
 Print Name: _____
 Complete Mailing Address: _____
 Telephone Number: _____ SALEM, OR
 E-mail address**: