



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

Application for Groundwater Registration Modification

Part 1 of 5 – Minimum Requirements Checklist

This Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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Check all included with this application (N/A = Not Applicable)

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Completed Applicant Information and Signature.
- Part 4 – Completed Groundwater Registration Modification Application – Groundwater Registration Information. (Only one Groundwater registration per application, **unless** the Groundwater registrations to be modified are layered).
- Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- Groundwater registration modification fees – Amount enclosed: \$ 1450.00. (\$875.00 for a place of use change only; \$1,450 for any other change or combination).

Attachments:

- N/A Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is **not** the registration certificate holder of record. The Request for Assignment Form is available at <http://www.oregon.gov/owrd/pubs/docs/forms/assign.pdf>, or http://www.oregon.gov/owrd/pubs/docs/forms/assign_by_proof.pdf. Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) or the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.
- N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form not required if any of the following apply:
 - Water is to be diverted, conveyed, and/or used only on federal lands.
 - All of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Assignment Form and fee not enclosed/insufficient
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> Part _____ is incomplete

Other/Explanation _____

Staff: _____ 503-986-0 _____ Date: / /

Part 2 of 4 – Groundwater Registration Modification Map Checklist

Your Groundwater Registration Modification application will be returned if any of the map requirements listed below are not met.

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads and railroads.
- Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes hachuring, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.
- N/A If you are proposing a modification in place of use, show the proposed place of use with hachuring including priority date and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of appropriation with distance and bearing or coordinates from a recognized survey corner.
- N/A If you are proposing a modification in point(s) of appropriation, show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Ernest and Lola Zielinski Trust		PHONE NO. 503-390-1286	ADDITIONAL CONTACT NO.
ADDRESS 5050 Hazelgreen Road NE			FAX NO.
CITY Salem	STATE OR	ZIP 97305	E-MAIL doug@alphanursery.com
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.			

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application

APPLICANT/BUSINESS NAME JMS Engineering		PHONE NO. 503-559-1146	ADDITIONAL CONTACT NO.
ADDRESS 3000 Market St NE, Suite 426			FAX NO.
CITY Salem	STATE OR	ZIP 97301	E-MAIL jmsengineering@qwestoffice.net
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.			

Explain in your own words what you propose to accomplish with this modification; and why:

This application is for drilling a New Well(POA) to replace the original GR POA

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

(Check one box)

By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a);

OR

I (we) affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**

I (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

I understand that prior to Department approval of the groundwater registration modification, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the groundwater registration is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following paper: _____.

I (we) affirm that the information contained in this application is true and accurate.

[Handwritten Signature]
Applicant signature

[Handwritten Signature]
Print Name (and Title if applicable)

10-22-18
Date

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located? Yes No

If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has been conveyed.

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Check the appropriate box, if applicable:

- Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

- Check here if water for the Groundwater registration is supplied under a water service agreement or other contract with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME Marion County Planning	ADDRESS 5155 Silverton Road NE	
CITY Salem	STATE OR	ZIP 97305

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Part 4 of 4 – Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

Table 1. Location of Authorized and Proposed Point(s) of Appropriation (POA)

(Note: If the POA name is not specified in the registration, assign it a name or number here.)

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	OWRD Well Log ID# (or Well ID Tag # L-____)	Twp		Rng		Sec	1/4 1/4		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed		6	S	2	W	32	SW	SE	1000	1060' S & 2270' W from the NE corner of DLC 48.
Well #1 (New POA)	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		6	S	2	W	32	NW	SE	1000	660' S & 2400' W from the NE corner of DLC 48.

Check all type(s) of modifications(s) proposed below (modification "CODES" are provided in parentheses):

- | | |
|---|---|
| <input type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Point of Appropriation (well) (POA) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |

Will all of the proposed changes affect the entire Groundwater registration?

- Yes** Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No** Complete all of Table 2 to describe the portion of the registration to be changed.

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Please use and attach additional pages of Table 2 as needed.
See page 5 for instructions.

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer

Table 2. Description of Modifications to Registration GR-334 (Certificate # GR-319)

List only the part of the registration that will be modified. For the acreage in each 1/4 1/4, list the modification proposed. If more than one modification,

AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration that will be changed.													Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
Twp	Rng	Sec	1/4 1/4		Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POA(s) (name or number from Table 1)	Priority Date	Twp	Rng		Sec	1/4 1/4		Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
"	"	"	"	"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
6	S	2	W	32	NW	SE	1000	--	11.5	Irrigation	Well	1957	POA	6	S	2	W	32	NW	SE	1000	--	11.5	Irrigation	Well #1	1957
6	S	2	W	32	SW	SE	1000	--	8.5	Irrigation	Well	1957	POA	6	S	2	W	32	NW	SE	1000	--	8.5	Irrigation	Well #1	1957
TOTAL ACRES							20.0							TOTAL ACRES							20.0					

specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

Additional remarks: _____.

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Groundwater Registration # GR-334 (Certificate # GR-319)

For a modification in place of use or character of use:

Are there other water right certificates, water use permits, or Groundwater registrations associated with the "from" or "to" lands? Yes No

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:



Pursuant to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the "to" lands must be filed separately with a Groundwater registration modification.

For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:

- Well log(s) are attached for each well that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (Tip: You may search for well logs on the Department's web page at: http://apps.wrd.state.or.us/apps/gw/well_log/)

AND/OR

- Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide adequate information is likely to delay the processing of your modification application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L- _____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
Well (Original POA)	Yes		Est 95'	8"	Est. 0-95'	Est. 20'	8cuts/row 15 rows	Est. 35'	Sands/ gravels	Est. 250 gpm
Well #1 (New POA)	No		Est 175'	10"	Est. 0-140'	Est. 50'	Est. Screen 125'-160'	Est. 35'	Sands/ gravels	Est. 250 gpm

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REGISTRATION NO. OR-324

Registration Statement CERTIFICATE NO. GR-319

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

(Under Chapter 703, Oregon Laws 1955.)

TO THE STATE ENGINEER OF OREGON:

I, Peter Reitzenstein 5430 Hazel Green Rd.
of Salem County of Marian
State of Oregon, do hereby make application for a certificate of registration as evidence
of a right to appropriate ground water.

- 1. Source from which water is withdrawn is Pump well
(Flowing well, pump well, infiltration trench, or tunnel)
- 2. Location is: 6 miles North of Salem
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 2270' west & 1060' south of NE cor. of W.B. Stephens Dec 41
(Give distance and bearing to corner of section or other legal subdivision)
being within S10452'4 of Sec. 32, Twp. 6S Rge. 2W
(Smallest legal subdivision) (N, or S.) (E. or W.)
or (b) within limits of recorded platted property, town or city:
in Lot _____ Block _____ of _____
(Name of plat or addition)

County of _____
(If within city or town, give name)
3. Construction Work was begun on 10/30/53, was completed on 10/30/53
(Date) (Date)
and the ground water claimed was first used for the purposes set out below on 7/5/54
(Date)
since which time the water has been used Approx. 6 months each year
(Continuously or intermittently)
from 5/15/54 to 9/15/56
(Date) (Date)

4. Quantity of water claimed and used is 500 gallons per minute; _____ acre
feet per year.

5. Purpose or Purposes for which water is used Irrigation
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 95 feet. Type drilled
(Dug or drilled)
diameter 8 inches. Elevation of ground at well site 180 feet, mean sea level.
(As near as known)
Depth to water table 35 feet.

7. Capacity of Well: _____ g.p.m. with _____ feet drawdown;
_____ g.p.m. with _____ feet drawdown.

Date of test 10/30/53

If Flowing Well: Measured discharge _____ g.p.m. on _____
(Date)

Shut-in pressure at ground surface _____ lbs. per sq. in. on _____
(Date)

Water is controlled by _____
(Cap, valve, etc.)

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IF log of well is not available, give name and address of driller Wymore Well
Drillers & Contractors, Rt 2 Box 317 Salem

11. Infiltration Trench: Covered or open _____

Dimensions: Length _____ ft. Minimum depth _____ ft. Maximum depth _____ ft.

Bottom width _____ ft. Discharge _____ g.p.m. Date of test _____

12. Tunnel: Type of lining _____

Dimensions: _____
(Length, course, and cross-sectional size)

Position of water bearing stratum with reference to portal of tunnel _____

Log of tunnel: (Preceding table for log of well may be used, if desired. Give footage from portal and character of materials, as pertinent.)

13. Pumping Equipment:

(a) Pump Jacuzzi 5" Turbine Capacity 500 g.p.m.
(Make, type and size)

(b) Motor 15 HP Turbine
(Type and horsepower)

14. Location of area irrigated or to be irrigated, or place of use if for purposes other than irrigation.

Township North or South	Range E. or W. of Meridian or Subdiv.	Section	Four-acre Tract	Number Acres to be Irrigated	Date of Reclamation
6.5	2W	32	NW 1/4 SE 1/4	11.5	5/15/54
"	"	"	SW 1/4 SE 1/4	8.5 20.0	"

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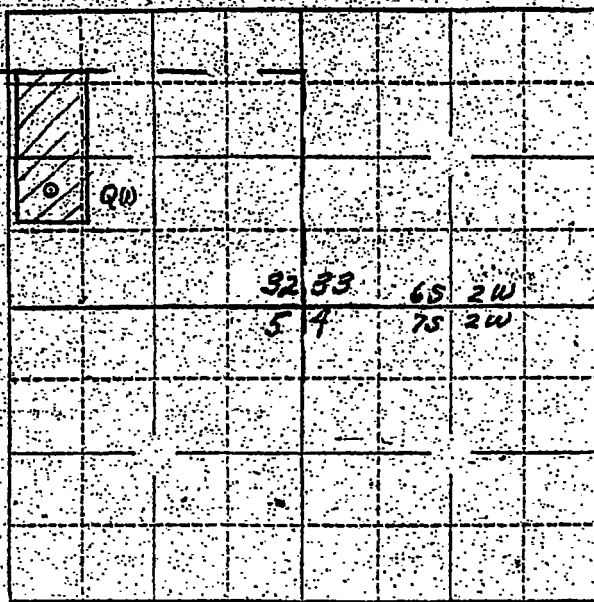
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15. If the ground water supply is supplemental to an existing water supply, identification of any application for a permit, permit, certificate or adjudicated right to appropriate water made or held by the registrant.

6/2W-32 (11)

Township 6S Range 2W W.M.
North



Locate well and acreage of irrigated land on plat.

Scale: 2" = 1 Mile
4"

STATE OF OREGON

County of Marion

ss.

I, Peter Reichenstein, being first duly sworn, do hereby certify that I have read the foregoing Registration Statement and that all of the items therein contained are true to the best of my knowledge and belief.

Peter Reichenstein
(Signature of Registrant)

Subscribed and sworn to before me this 11th day of January, 1957

My commission expires Sept. 9, 1960

Chas. J. Miller
(Notary Public)

(SEAL)

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CERTIFICATE OF REGISTRATION

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STATE OF OREGON

County of Marion

ss.

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This is to certify that the foregoing Registration Statement was received in the office of the State Engineer on the 11th day of January, 1957, at 2:15 o'clock P.M. and has been duly recorded in said office in Book No. 2 of Registration Statements on page GR-319 C

~~Construction shall be completed by x-x-x-x-x-x-x-x-x-x 19x-x and the water completely applied to beneficial use by x-x-x-x-x-x-x-x-x-x 19x-x~~

Witness my hand this 1st day of April, 1957

Harro A. Stanley
(State Engineer)

\$15.00

By _____ (Deputy)

GR-319 C

BARGAIN AND SALE DEED

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ - 0 -. However, the actual consideration consists of or includes other property or value given or promised which is the whole of the consideration.

Until a change is requested, all tax statements shall be sent to the following address:

Ernest L. and Lola R. Zielinski, Trustees
Ernest L. and Lola R. Zielinski Revocable Trust
5270 Hazelgreen Road N.E.
Salem, Oregon 97305

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After recording, return to:

Kenneth Sherman, Jr.
Sherman, Sherman, Murch, Johnnie & Hazel, LLP
PO Box 2247
Salem, Oregon 97308

QWRD

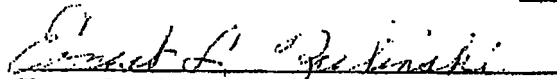
KNOW ALL MEN BY THESE PRESENTS, That **ERNEST L. ZIELINSKI and LOLA R. ZIELINSKI, tenants by the entirety**, hereinafter called Grantors, for the consideration hereinabove stated, do hereby GRANT, BARGAIN, SELL and CONVEY unto **ERNEST L. ZIELINSKI and LOLA R. ZIELINSKI, Trustees of the Ernest L. and Lola R. Zielinski Revocable Trust dated January 11, 2002**, hereinafter called Grantees, and unto Grantees' successors and assigns, all of that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, situated in the County of **MARION**, State of Oregon, described as follows, to-wit:

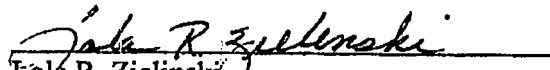
See Exhibits 1, 2, 3, 4, 5 and 6 attached hereto and by this reference incorporated herein.

TO HAVE and TO HOLD the same unto the said Grantees, and Grantees' successors and assigns forever.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930.

IN WITNESS WHEREOF, the Grantors have executed this instrument this 16 day of January, 2002.


Ernest L. Zielinski


Lola R. Zielinski

SHERMAN, SHERMAN, MURCH, JOHNNIE & HAZEL, LLP
475 Cottage Street NE, Suite 120 / Post Office Box 2247
Salem, Oregon 97308-2247
(503)354-2281 FAX: (503)370-4308

STATE OF OREGON)
) ss.:
County of Marion)

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EXHIBIT 1

TRACT 1: Beginning at a point 14 chains and 24 links East of the Southeast corner of the Donation Land Claim of Sanford Stephens and wife, in Township 6 South, Range 2 West of the Willamette Meridian, Marion County, Oregon, said point of beginning, being also the Southeast corner of lands formerly owned by Asahel Bush; thence North along the East line of lands formerly owned by said Asahel Bush, 56 chains and 20 links; thence West 7 chains and 12 links; thence South parallel with the East line of this tract, 56 chains and 20 links to the South line of the W. W. Morgan Donation Land Claim No. 72; thence East 7 chains and 12 links to the place of beginning, and being a part of the W. W. Morgan Donation Land Claim No. 72, in said Township and Range.

TRACT 2: Beginning at the Northeast corner of Lot 30, Labish Gardens, Marion County, Oregon; thence South 0°3' West along the East boundary of said Lot 30, a distance of 70.00 feet; thence West parallel with the North boundary of said Lot 30, a distance of 20.0 feet; thence North 0°3' East parallel with the East boundary of said Lot 30, a distance of 70.0 feet to the North line of said Lot 30; thence East along the North line of said Lot 30, a distance of 20.0 feet to the place of beginning.

Save and Except mineral and geothermal rights as reserved by State of Oregon, represented and acting by the Director of Veterans' Affairs in said Contract recorded June 18, 1988 in Reel 625, Page 110, Microfilm Records, Marion County, Oregon.

TOGETHER WITH the right to use (in common with others); an easement 20 feet in width and being 10 feet on each side of the following center line: The beginning point being 10 feet West and 70 feet South 0°3' West from the Northeast corner of Lot 30, Labish Gardens, as shown on the recorded plat in the office of the recorder for Marion County, Oregon; said plat is recorded in Volume 13, Page 9, Record of Town Plats; thence South 0°3' West parallel with the East line of said Lot 30, a distance of 343.0 feet.

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EXHIBIT 2

Beginning at a point on the North boundary of the William B. Stephens Donation Land Claim #48, Marion County, Oregon, which point is 38.84 chains West of the Northeast corner of said Donation Land Claim, and running thence South at right angles to said North line a distance of 1360.26 feet to a point; thence West parallel to the South line of said Donation Land Claim, 640.86 feet to a point on the West line of the property deeded to Marie and A. O. McCorkle in Volume 539, Page 507, Deed Records of Marion County, Oregon; thence North 1360.26 feet to the Northwest corner thereof; thence East 640.86 feet to the point of beginning, being a part of said Donation Land Claim and situated in Section 32, Township 6 South, Range 2 West, Willamette Meridian, Marion County, Oregon.

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EXHIBIT 3

PARCEL I:

Commencing at a point on the North boundary line of the Donation Land Claim of William B. Stephens and wife Notification 236 in Townships 6 and 7 South of Range 2 West of the Willamette Meridian, Marion County, Oregon, and 19.42 chains West of the Northeast corner of said Donation Land Claim and running thence South 41.22 chains to the South boundary line of said claim; thence West along the South boundary line of said claim 9.71 chains; thence North 42.22 chains to the North boundary line of said Donation Land Claim; thence East along the North boundary line of said claim 9.71 chains to the place of beginning containing 40 acres of land, more or less, situated in Marion County, Oregon.

PARCEL II:

Beginning at an iron pipe on the North line of the W. B. Stephens Donation Land Claim, Notification No. 236, in Township 6 and 7 South, Range 2 West of the Willamette Meridian in Marion County, Oregon, which iron pipe is 1922.58 feet South 89°06' West from the Northeast corner of said Stephens Claim; thence South 0°08' East, parallel with the East line of said Donation Land Claim, 1346.75 feet to an iron pipe; thence South 89°06' West 640.86 feet to an iron pipe; thence North 0°08' West 1346.75 feet to an iron pipe on the North line of said Donation Land Claim; thence North 89°06' East along the North line of said Donation Land Claim, 640.86 feet to the place of beginning.

SAVE AND EXCEPT: Beginning at a point on the North line of the W. B. Stephens Donation Land Claim, Notification No. 236, in Township 6 South, Range 2 West of the Willamette Meridian in Marion County, Oregon, said point being South 89°06' West, 2143.44 feet from the Northeast corner of said Stephens Claim; thence South 00°06 1/2' East, 290.40 feet to an iron pipe; thence South 89°06' West, 150.00 feet to an iron pipe; thence North 00°06 1/2' West, 290.40 feet to a point on the North line of said Stephens Claim; thence North 89°06' East, 150.00 feet along said Claim line to the point of beginning.

ALSO SAVE AND EXCEPT: Beginning at a point on the North line of the W. B. Stephens Donation Land Claim, Notification No. 236, in Township 6 South, Range 2 West of the Willamette Meridian in Marion County, Oregon, said point being South 89°06' West, 2143.44 feet from the Northeast Corner of said Stephens Claim; thence South 00°06 1/2' East, 290.40 feet to an iron pipe; thence North 89°06' East, 220.86 feet to an iron pipe; thence North parallel with the West line 290.40 feet to a point on the North line of the W. B. Stephens Donation Land Claim; thence South 89°06' West 220.86 feet to the point of beginning.

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EXHIBIT 4

Beginning at the center of Section 33 in Township 6 South, Range 2 West of the Willamette Meridian in Marion County, Oregon; thence South $0^{\circ}14'$ West along the line dividing said Section 33 into East and West halves 20.015 chains to an iron pipe; thence West 10.135 chains to an iron pipe; thence North 20.055 chains to an iron pipe on the line running East and West which divides said Section 33 into North and South halves; thence South $89^{\circ}36'$ East along said Section subdivision line 10.21 chains to the place of beginning.

SUBJECT TO the rights of the public in and to that portion included in public roads.

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EXHIBIT 5

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PARCEL I:

Beginning at the quarter section corner between Sections 5 and 6 in Township 6 South, Range 2 West of the Willamette Meridian in Marion County, Oregon, said point being a basalt stone scribed CS and 1/4S; thence South 0°09'30" East on the section line, 1918.42 feet to the center line of County Road No. 602, said point being 203.46 feet South 89°22' East from the Northwest corner of the Augustus Lambert Donation Land Claim No. 61; thence South 89°22' East, along said road center, 2241.57 feet to the West line of the Baldock Freeway (I-5); thence northeasterly, along the West line of said Baldock Freeway to the West line of the Michael Dougherty Donation Land Claim No. 52; thence North along said claim line to the Northwest corner of a tract of land conveyed to The State of Oregon, by deed recorded in Volume 458, page 418, Deed Records for Marion County, Oregon; thence South 89°50' West to the East line of the right of way of the Oregon Electric Railroad; thence South 32°38' West, along the East line of said railroad right of way to a point 176.22 feet South 89°37' West of the Northeast corner of the Southeast quarter of Section 6, Township 6 South, Range 2 West of the Willamette Meridian in Marion County, Oregon; thence North 89°37' East, a distance of 176.22 feet to the place of beginning.

EXCEPT that portion conveyed to State of Oregon, by and through its State Highway Commission, by deed recorded January 20, 1954, in Volume 459, page 261, Deed Records for Marion County, Oregon.

ALSO EXCEPT that portion conveyed to Marion County, a political subdivision of the State of Oregon, for road purposes, by deed recorded June 1, 1962, in Volume 559, page 127, Deed Records for Marion County, Oregon.

TOGETHER WITH a non-exclusive easement for road and roadway purposes from the West line of the Oregon Electric Railroad right of way to the Salem-St. Paul Road, more particularly described as follows: Beginning 235.752 feet South 89°37' West from the quarter section corner of the East line of Section 6, Township 6 South, Range 2 West of the Willamette Meridian in Marion County, Oregon, on the West line of the Oregon Electric Railroad right of way; thence South 89°37' West, along the North line of a tract of land conveyed to Homer Zielinski, by deed recorded in Volume 649, page 109, Deed Records for Marion County, Oregon, a distance of 1649.34 feet to the center of a County Road; thence North 1°44' West, a distance of 30 feet; thence North 89°37' East to the West line of said Oregon Electric Railroad right of way; thence South 32°38' West, along the Westerly line of said right of way, to the place of beginning.

PARCEL II:

A parcel of land lying in the Michael Dougherty D.L.C. No. 52, Township 6 South, Range 2 West, W.M. Marion County, Oregon and being a portion of that property described in that deed to the State of Oregon, by and through its State Highway Commission, recorded in Book 458, page 418, of Marion County Record of Deed; the said parcel being that portion of said property lying Westerly of a line parallel with and 174 feet Westerly of the center line of the Northbound lane of the Pacific Highway (formerly the Portland-Salem Expressway), which center line is described in said State of Oregon deed.

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EXHIBIT 6

Commencing at a point on the North boundary line of the Donation Land Claim of William B. Stephens and wife Notification 236 in Townships 6 and 7 South of Range 2 West of the Willamette Meridian, Marion County, Oregon, and 19.42 chains West of the northeast corner of said Donation Land Claim and running thence South 41.22 chains to the South boundary line of said claim; thence West along the South boundary line of said claim 9.71 chains; thence North 42.22 chains to the North boundary line of said Donation Land Claim; thence East along the North boundary line of said claim 9.71 chains to the place of beginning containing 40 acres of land, more or less, situated in Marion County, Oregon.

SAVE AND EXCEPT: Beginning at a point on the North boundary line of the W. B. Stephens Donation Land Claim No. 48 marking the Northeast corner of Parcel 1 as described in Deed recorded in Reel 339, Page 623, Deed Records which point bears South 89°09'46" West 1281.72 feet from the Northeast corner of said Stephens Claim and being situated in the Southeast quarter of Section 32, Township 6 South, Range 2 West, Willamette Meridian in Marion County, Oregon; thence South 00°11'57" East along the East line of said Parcel 1, a distance of 1346.75 feet to an iron rod marking the true point of beginning; thence South 00°11'57" East along the East line of said Parcel 1, a distance of 1354.61 feet to a point on the North line of the John Martin Donation Land Claim No. 71, said point also being in the center of Kale Street NE; thence South 89°21' 20" West along said Claim line, a distance of 640.84 feet to the Southwest corner of said Parcel 1; thence North 00°11'57" West along the West line of said parcel a distance of 1352.45 feet to an iron rod; thence North 89°09'46" East parallel with the North line of said Stephens Claim, a distance of 640.86 feet to the true point of beginning.

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REEL:1890

PAGE: 111

January 16, 2002, 03:51 pm.

CONTROL #: 49890

State of Oregon
County of Marion

I hereby certify that the attached instrument was received and duly recorded by me in Marion County records:

FEE: \$ 56.00

ALAN H DAVIDSON
COUNTY CLERK

THIS IS NOT AN INVOICE.

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CERTIFICATION OF TRUST

Trust Name: Ernest L. Zielinski Bypass Trust

Date of Execution of Trust: October 29, 2017

Settlor: Ernest L. Zielinski, Deceased (DOD: October 29, 2017)

Trustees: Lola R. Zielinski and Douglas L. Zielinski

Successor Trustees: Jacquelyn A. O'Malley; and then Nancy L. Zielinski

TRUSTEES' MAILING ADDRESS: 5270 HAZEL GREEN ROAD NE, SALEM, OR 97305

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If there are multiple currently acting Trustees, designate how many are required to sign in order to exercise trust power: All ___ One X A Majority ___ Other ___

Trust Taxpayer Identification No.: _____

The above trust is Revocable ___ Irrevocable X. The above trust Can ___ or Cannot X be modified or amended.

THE ABOVE TRUST IS IN EXISTENCE AT THIS TIME AND HAS NOT BEEN REVOKED, MODIFIED OR AMENDED IN ANY MANNER THAT WOULD CAUSE THE REPRESENTATIONS CONTAINED IN THIS CERTIFICATION TO BE INCORRECT. The trust powers include at least all of those trust powers contained in the Oregon Uniform Trust Code, and more specifically as set forth in ORS 130.720 to 130.725.

Title to Trust assets should be taken as follows: Lola R. Zielinski and Douglas L. Zielinski, Trustees of the Ernest L. Zielinski Bypass Trust.

Below are the signatures of the currently acting Trustees.

DATED: 10-29, 2018

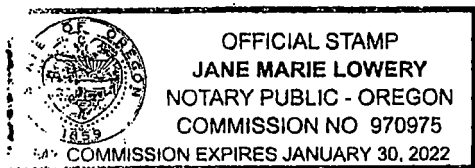
Lola R. Zielinski
Lola R. Zielinski, Trustee

DATED: 10-29, 2018

Douglas L. Zielinski
Douglas L. Zielinski, Trustee

STATE OF OREGON)
) ss.
COUNTY OF MARION)

Personally appeared the above named persons and acknowledged the Certification before me this 29 day of Oct, 2018.



Jane Marie Lowery
Notary Public for Oregon
My Commission Expires: 1-30-22

STATE OF OREGON

CERTIFICATION OF VITAL RECORD

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NOV 03 2018

OREGON HEALTH AUTHORITY CENTER FOR HEALTH STATISTICS CERTIFICATE OF DEATH

OWRD

783370

I.D. TAG NO.

STATE FILE NUMBER

6948201

1. Legal Name First: Ernest, Middle: Lloyd, Last: Zielinski, Suffix:			2. Death Date October 29, 2017	
3. Sex Male		4. Age 89 years		5. Social Security Number
7. Birthdate November 15, 1927		8. Birthplace Salem, Oregon		6. Codicity of Death Marion
10. Was Decedent of Hispanic Origin? No			11. Decedent's Race(s) White	12. Was Decedent Ever in U.S. Armed Forces? No
13. Residence, Number and Street 1125 McGee Court NE 137			14. City/Town/Keizer	15. Inside City Limits? Yes
15. Residence County Marion		16. State or Foreign Country Oregon	17. Zip Code + 4 97303	18. Inside City Limits? Yes
19. Marital Status at Time of Death Married		20. Spouse's Name Prior to First Marriage Lola Rose Travis		
21. Usual Occupation Farmer			22. Kind of Business/Industry Agriculture	
23. Father's Name Charles Anthony Zielinski		24. Mother's Name Prior to First Marriage Dorothy Belle Smith		
25. Informant's Name Lola Rose Zielinski		26. Telephone Number Not Available	27. Relationship to Decedent Spouse	28. Mailing Address 1125 McGee Court NE 137, Keizer, OR 97303
29. Place of Death Decedent's Residence				
31. Location of Death 1125 McGee Court NE 137		32. City/Town or Location of Death Keizer	33. State Oregon	34. Zip Code + 4 97303
35. Method of Disposition Entombment		36. Place of Disposition City View Cemetery		37. Locallion Salem, Oregon
38. Name and Complete Address of Funeral Facility Howell, Edwards, Doerksen With Rigdon-Ransom Funeral Directors, 1350 Commercial St SE, Salem, Oregon 97302				
39. Date of Disposition November 03, 2017		40. Funeral Director's Signature Grace E. Shewmake		41. OR License Number CO-3703
42. Registrar's Signature <i>L. Swartz</i>		43. Date Received NOV - 3 2017	44. Local File Number 172548	

46. Was case referred to Medical Examiner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		47. Autopsy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	48. Were autopsy findings available to complete the cause of death? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	49. Time of Death 2:00 am
60. Enter the chain of events, diseases, injuries, or complications - that directly caused the death. DO NOT ENTER TERMINAL EVENTS such as cardiac arrest, respiratory arrest or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.				Approximate Interval: Onset to Death
Final disease or condition resulting in death →		IMMEDIATE CAUSE ↓ <i>heart failure exact etiology unknown</i>		
Sequentially list conditions, if any, leading to the cause listed on line a.		Due to (or as a consequence of) ↓ <i>CHF</i>		
ENTER THE UNDERLYING CAUSE LAST (disease or injury that initiated the events resulting in death).		Due to (or as a consequence of) ↓		
61. Other significant conditions contributing to death, but not resulting in the underlying cause given above: <i>CHF, Aortic stenosis, sick sinus syndrome, p-hb renal insufficiency</i>				
52. Manner of Death		53. If Female		54. Did tobacco use contribute to death?
<input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Undetermined <input type="checkbox"/> Suicide <input type="checkbox"/> Pending		<input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days before death		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Probably <input type="checkbox"/> No <input type="checkbox"/> Unknown
55. Date of Injury (mm/dd/yyyy)	56. Time of Injury	57. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)		58. Injury at Work? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
59. Location of Injury (Number & Street of RFD No., City/Town, State, Zip + 4)				
60. Describe how injury occurred				
61. If transportation injury, specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other (Specify)				
62. Name and Address of Certifier (Number & Street of RFD No., City/Town, State, Zip + 4) <i>Lori Rumbach, 800 Stads Inland Shores Drive, W. N. Leazer OR</i>				
63. Name and Title of Attending Physician if Other than Certifier				
64. Title of Certifier <i>MD</i>		65. License Number <i>18460</i>	66. Date Signed (mm/dd/yyyy) <i>11/3/17</i>	
67. Medical Certifier - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.			68. Medical Examiner - On the basis of examination, autopsy investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.	
69. Amendment				

13054

45-2DP (01/06)

I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORDS FACTS ON FILE IN THE OREGON CENTER FOR HEALTH STATISTICS.

NOV - 3 2017

DATE ISSUED:

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER.

JENNIFER A. WOODWARD, PH.D.
STATE REGISTRAR