

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

Application for Water Right Temporary or Drought Temporary Transfer

Part 1 of 5 – Minimum Requirements Checklist

This temporary transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.
 For questions, please call (503) 986-0900, and ask for Transfer Section.

RECEIVED
MAR 11 2019
OWRD

FOR ALL TEMPORARY TRANSFER APPLICATIONS

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Temporary Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Transferred Water Rights: **How many water rights are to be transferred? 2 List them here: 46880, 91249**
 Please include a separate Part 5 for each water right. (See instructions on page 6)
- N/A For standard Temporary Transfer (one to five years) **Begin Year 2019 End Year 2023.**
- N/A Temporary Drought Transfer (Only in counties where the Governor has declared drought)

Attachments:

- Completed Temporary Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- Current recorded deed for the land **from** which the authorized place of use is temporarily being moved.
- N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of a district. Complete when the temporary transfer applicant is not the district.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **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 (if necessary to convey water to the proposed place of use).

Revised 2/11/2019

(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"/> Additional signature(s) required
<input type="checkbox"/> Other/Explanation _____	<input type="checkbox"/> Part _____ is incomplete

13146

Staff: _____ Date: / /

503-986-0

Date: / /

RECEIVED
MAR 11 2019
OWRD

Part 2 of 5 – Temporary Transfer Application Map Checklist

Your temporary transfer application will be returned if any of the map requirements listed below are not met.

Please be sure that the temporary transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- XN/A If **more than three** water rights are involved, separate maps are needed for each water right.
- X Permanent quality printed with dark ink on good quality paper.
- X 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.
- X A north arrow, a legend, and scale.
- X The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), 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.
- X Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- X Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- X Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- X Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- X Existing place of use that includes separate hachuring for each water right, 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 water right is being changed, a separate hachuring is needed for lands left unchanged.
- X N/A Proposed temporary place of use that includes separate hachuring for each water right, 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.
- X Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- XN/A If you are proposing a change in point(s) of diversion or well(s) to convey water to the new temporary place of use, 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°).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

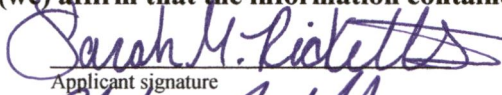
APPLICANT/BUSINESS NAME Nickolas Ricketts/Ricketts Family Farm		PHONE NO. 541-280-5773	ADDITIONAL CONTACT NO. 541-316-8842
ADDRESS PO Box 130			FAX NO.
CITY Silver Lake	STATE OR	ZIP 97638	E-MAIL rickettsfamilyfarm@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			


Explain in your own words what you propose to accomplish with this transfer application; and why:
Change Place of Use for crop rotation irrigation

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

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

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


 Applicant signature


 Applicant signature

Sarah M Ricketts
 Print Name (and Title if applicable)

Nickolas C Ricketts
 Print Name (and Title if applicable)

3-7-19
 Date

3-7-19
 Date

RECEIVED
 MAR 11 2019
 OWRD

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No


If NO, include signatures of all 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 water right(s) has been conveyed.

Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

DISTRICT NAME N/A	ADDRESS	
CITY	STATE	ZIP

Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME N/A	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 Lake County Planning	ADDRESS 513 Center Street	
CITY Lakeview	STATE OR	ZIP 97630

Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

Certificate # 46880

RECEIVED

Description of Water Delivery System

MAR 11 2019

System capacity: .24 cubic feet per second (cfs) **OR**
 _____ gallons per minute (gpm)

OWRD

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. Mainline from Well #1 feeding risers used to wheel line irrigate

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

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 1385	28	S	16	E	10	SW	SE	2100	1010' S and 20' West from NE corner, SW SE Section 10
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										

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

- Place of Use (POU) Appropriation/Well (POA)
- Point of Diversion (POD) Additional Point of Appropriation (APOA)
- Additional Point of Diversion (APOD)

Check all type(s) of temporary change(s) due to drought proposed below (change "CODES" are provided in parentheses):

- Place of Use (POU) Point of Appropriation/Well (POA)
- Character of Use (USE) Additional Point of Appropriation (APOA)
- Point of Diversion (POD) Additional Point of Diversion (APOD)

Will all of the proposed changes affect the entire water right?

- 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 water right to be changed.

Please use and attach additional pages of Table 2 as needed.
See page 6 for instructions.

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

Table 2. Description of Temporary Changes to Water Right Certificate # 46880

List only the part of the right that will be changed. For the acreage in each 1/4 1/4, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right 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	POD(s) or 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	POD(s)/ POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9		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
													POU	28	S	16	E	10	SW	SE	2000		19		Well #1	1972
TOTAL ACRES											TOTAL ACRES											19				

Additional remarks: _____.

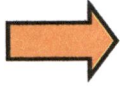
RECEIVED
MAR 11 2019
OWRD

13146

For Place of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: _____



Pursuant to ORS 540.525, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for temporary transfer can be included in the transfer or remain unused on the authorized place of use. If the primary water right does not revert soon enough to allow use of the supplemental right within five years, the supplemental right shall become subject to cancellation for nonuse under ORS 540-610.

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation if necessary to convey the water to the new temporary place of use:

- Well log(s) are attached for each authorized and proposed well(s) 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/Default.aspx)

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 the information will delay the processing of your transfer 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). <u>If</u> less than full rate of water right

RECEIVED

MAR 11 2019

OWRD

13146

Description of Water Delivery System

System capacity: 33 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Mainline from Well #1 feeding pivot irrigation and also supply to Cert 46880**

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

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LAKE 1385	28	S	16	E	10	SW	SE	2100	1010' S and 20' West from NE corner, SW SE Section 10
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										

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

- Place of Use (POU) Appropriation/Well (POA)
- Point of Diversion (POD) Additional Point of Appropriation (APOA)
- Additional Point of Diversion (APOD)

Check all type(s) of temporary change(s) due to drought proposed below (change "CODES" are provided in parentheses):

- Place of Use (POU) Point of Appropriation/Well (POA)
- Character of Use (USE) Additional Point of Appropriation (APOA)
- Point of Diversion (POD) Additional Point of Diversion (APOD)

Will all of the proposed changes affect the entire water right?

- 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 water right to be changed.

Please use and attach additional pages of Table 2 as needed.
See page 6 for instructions.

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

Table 2. Description of Temporary Changes to Water Right Certificate # 91249

List only the part of the right that will be changed. For the acreage in each 1/4 1/4, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right 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	POD(s) or 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	POD(s)/ POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9		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
28	S	16	E	15	NW	NE	400		5	IRR	Well #1	1983	POU	28	S	16	E	10	SE	SW	1900		5		Well #1	1983
TOTAL ACRES												5	TOTAL ACRES										5			

Additional remarks: Moving End Gun Coverage.

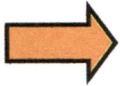
RECEIVED
MAR 11 2019
OWRD

13146

For Place of Use Changes

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

If YES, list the certificate, water use permit, or ground water registration numbers: _____



Pursuant to ORS 540.525, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for temporary transfer can be included in the transfer or remain unused on the authorized place of use. If the primary water right does not revert soon enough to allow use of the supplemental right within five years, the supplemental right shall become subject to cancellation for nonuse under ORS 540-610.

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation if necessary to convey the water to the new temporary place of use:

- Well log(s) are attached for each authorized and proposed well(s) 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/Default.aspx)

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 the information will delay the processing of your transfer 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

RECEIVED

MAR 11 2019

OWRD

13146

Application for Water Right Transfer

Evidence of Use Affidavit



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

RECEIVED
 MAR 11 2019
 OWRD

State of Oregon)
) ss
 County of Lake)

I, Nickolas Ricketts, Ricketts Family Farm, in my capacity as General Manager,
 mailing address PO Box 130, Silver Lake, OR 97638

telephone number (541) 280-5773, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the **entire** place of use for Certificate # 46880, 91249 **OR**

My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # _____ has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____ (For Historic POD/POA Transfers)

(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): Crops

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

[Signature]
Signature of Affiant

3-4-19
Date

Signed and sworn to (or affirmed) before me this 04 day of March, 2019.



Rachel Cooper
Notary Public for Oregon

My Commission Expires: 08/03/2020

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input checked="" type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added. Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terra-server.com
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

RECEIVED

MAR 11 2019

OWRD

NUTRIEN AG SOLUTIONS
CORNELIUS OR (117)
PO BOX 544
HILLSBORO, OR 97123
503-640-2371



Order #: 12998031
Delivery Date: 10/8/2018
Order Date: 9/14/2018
PO #:
Ship Via: Company Vehicle

Customer Order / Delivery Ticket

No Recommendation Made

NICKOLAS CLIFTON RICKETTS(1727581)

Customer/
Bill To: RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE, OR 97638
541/815-4096 cell: 541/280-5773

Ship
To: PHYSICAL
55050 OLD LAKE RD
SILVERLAKE, OR 97638
541-280-5773

Applicator: Customer Applied

Crop: Job Acres: 0.00 Warehouse: CORNELIUS OR Sales Rep: Tilden-Browning, Jake PCA#: 04

Product#	Product/Service Description Common Name	Manufacturer / EPA# Rst/REI	Price Reason Code	Total Qty Amt/100 Gal	Qty x Pkg Size
1000010724	METRIBUZIN 75 8X5LB	LOVELAND PRODUCTS INC/34704-876		35.00 LB	7.00 X 5.00LB
1000354254	METRIBUZIN INFUSE 2X2.5GA	No 12		25.00 GA	10.00 X 2.50GA
1000413118	HI-LIGHT BLUE L1 4X1GA	No		2.00 GA	2.00 X 1.00GA
		No			

Safety Data Sheets are available upon request for applicable products. Contact your local Nutrien Ag Solutions branch for details.

For a medical emergency involving this product, call 1-866-944-8565.

No Recommendation has been made or provided by seller concerning the use of any pesticide covered by this invoice.

For help with any spill, leak, fire or exposure, call Chemtrec at 1-800-424-9300.

Information regarding heavy metal levels in Oregon can be found at www.aafco.org/metals.htm
For EPA Worker Protection Standard (WPS) information please go to www.agrian.com - Label look up tab

Printed By and date
Hiden 09/14/18

Thank you for your order!
Nutrien Ag Solutions, Inc. Staff

Checked by and date:
Shane 10-8-18

RECEIVED
MAR 11 2019
OWRD

Salesman / Driver (delivered by) *Hiden* 10/9/18 (Date)

Applicator/Grower Signature (received by) *[Signature]* (Date)

13146

CROP PRODUCTION SERVICES, INC.
 CORNELIUS OR (117)
 PO BOX 544
 HILLSBORO, OR 97123
 503-640-2371



Order #: 10991280
 Delivery Date: 2/15/2018
 Order Date: 1/22/2018
 PO #:
 Ship Via: Company Vehicle

Customer Order / Delivery Ticket

No Recommendation Made

NICKOLAS CLIFTON RICKETTS(1727581)

Customer/
 Bill To: RICKETTS FAMILY FARM
 PO BOX 130
 SILVER LAKE, OR 97638
 541/815-4096 cell: 541/280-5773

Ship
 To: PHYSICAL
 55050 OLD LAKE RD
 SILVERLAKE, OR 97638
 541-280-5773

Applicator: Customer Applied

Crop: Job Acres: 0.00 Warehouse: CORNELIUS OR Sales Rep: Tilden-Browning, Jake PCA#:

Product#	Product/Service Description Common Name	Manufacturer / EPA# Rst/REI	Price Reason Code	Total Qty Amt/100 Gal	Qty x Pkg Size
1000010724	METRIBUZIN 75 8X5LB	LOVELAND PRODUCTS INC/34704-876		25.00 LB	5.00 X 5.00LB
	METRIBUZIN	No 12			
1000413118	HI-LIGHT BLUE L1 4X1GA	No		1.00 GA	1.00 X 1.00GA
1000354254	INFUSE 2X2.5GA	No		25.00 GA	10.00 X 2.50GA

Safety Data Sheets are available upon request for applicable products. Contact your local CPS branch for details.
 For a medical emergency involving this product, call 1-866-944-8565.
 No Recommendation has been made or provided by seller concerning the use of any pesticide covered by this invoice.
 For help with any spill, leak, fire or exposure, call Chemtrec at 1-800-424-9300.

Information regarding heavy metal levels in Oregon can be found at www.aafco.org/metals.htm
 For EPA Worker Protection Standard (WPS) information please go to www.agrian.com - Label look up tab

Printed By and date
 Thank you for your order!
 CPS Staff

Checked by and date:

RECEIVED
 MAR 11 2019
 OWRD

[Signature] 02/27/18
 Salesman / Driver (delivered by) (Date)

[Signature]
 Applicator/Grower Signature (received by) (Date)

13146



16755 Finley Butte Rd
PO Box 127
LaPine OR 97739-0127

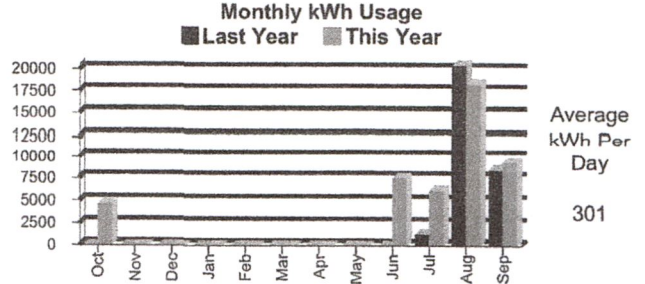
IMPORTANT INFORMATION

Co-Op News

Midstate Electric is on Facebook! To receive notifications about your Co-op, find us and like us.

46 1 AV 0.375
SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0130

5 46
C-1 P-1



Account Number: 732513 Service Location: 40 HP
Billing Date: 09/18/2018 Billing Cycle: 3 Rate: Irr-Seasonal Bill Type: Regular

Account Detail	
Previous Balance	1,036.34
Payments Received 09/10/2018	1,036.34 Credit
Balance Forward	\$0.00
Energy Charge (kWh) 9,320 @ \$0.0449	418.47
Demand Charge (kW) 29.680 @ \$5.20	154.34
Facilities Charge	64.00
Current Charges	\$636.81
Total Amount Due	\$636.81

Electric Service Detail	
Meter Number: 68072	Multiplier: 40.0
Reading Dates: 07/31/2018 - 08/31/2018	
Number of Days: 31	
Current Reading: 6299	
Last Reading: 6066	
kWh: 233 x 40 Multiplier =	9,320
kW: 0.742 x 40 Multiplier =	29.680

RECEIVED
MAR 11 2019
OWRD

Prompt Payment Discount - 1.5% will be credited to your next electric bill if your current bill is paid in full and received within 10 days of billing date.
Late Charge - \$5 or 1.5%, whichever is greater, for outstanding balances not received in our office by 5:30 PM the day prior to your next billing.

Account Number: 732513 Billing Cycle: 3

Current Charges Due Date: 10/08/2018

Total Amount Due: \$636.81
Relief Fund Contribution: (optional)
Total Amount Paid:



A Touchstone Energy® Cooperative

SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0000

MIDSTATE ELECTRIC COOPERATIVE INC
PO BOX 24625
SEATTLE WA 98124-0625



13146

0390390918180000732513006368100636810



16755 Finley Butte Rd
PO Box 127
LaPine OR 97739-0127

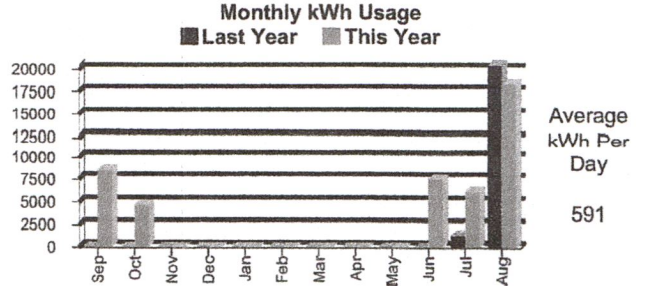
IMPORTANT INFORMATION

Co-Op News

OUR OFFICE WILL BE CLOSED ON MONDAY, SEPTEMBER 3, 2018 FOR LABOR DAY. OUR AFTER-HOURS OUTAGE LINE, 541-536-2165, IS AVAILABLE 24 HOURS A DAY TO ASSIST YOU. Please update your contact information at www.midstateelectric.coop or call 541-536-2126, option 3.

29 1 AV 0.375
SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0130

5 29
C-1 P-1



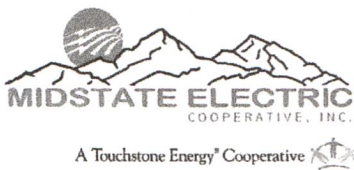
Account Number: 732513

Service Location: 40 HP

Billing Date: 08/21/2018 Billing Cycle: 3

Rate: Irr-Seasonal Bill Type: Regular

Account Detail		Electric Service Detail	
Previous Balance	490.04	Meter Number: 68072	Multiplier: 40.0
Payments Received 07/17/2018	490.04 Credit	Reading Dates: 06/30/2018 - 07/31/2018	
Balance Forward	\$0.00	Number of Days: 31	
Energy Charge (kWh) 18,320 @ \$0.0449	822.57	Current Reading: 6066	
Demand Charge (kW) 30.240 @ \$5.20	157.25	Last Reading: 5608	
Facilities Charge	64.00	kWh: 458 x 40 Multiplier =	18,320
Prompt Pay Discount	7.48 Credit	kW: 0.756 x 40 Multiplier =	30.240
Current Charges	\$1,036.34		
Total Amount Due \$1,036.34			
<p><i>PD 8-30 check # 3933</i></p>		<p>RECEIVED MAR 11 2019 OWRD</p>	



16755 Finley Butte Rd
PO Box 127
LaPine OR 97739-0127

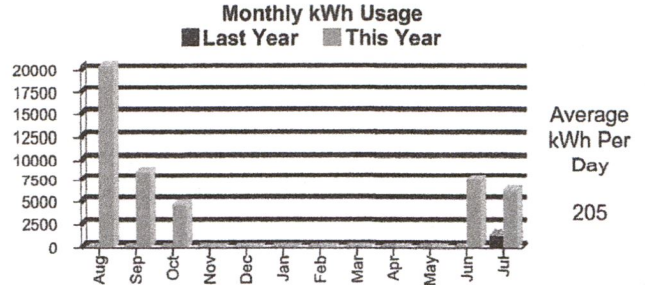
IMPORTANT INFORMATION

Co-Op News

THE LAST DAY TO SUBMIT A PHOTOGRAPH FOR THE 2019 CALENDAR CONTEST IS MONDAY, AUGUST 13, 2018. CALL 541-536-2126, OPTION 5, FOR ADDITIONAL INFORMATION. Please update your contact information at www.midstateelectric.coop or call 541-536-2126, option 3.

29 1 AV 0.375
SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0130

5 29
C-1 P-1



Account Number: 732513 Service Location: 40 HP
Billing Date: 07/17/2018 Billing Cycle: 3 Rate: Irr-Seasonal Bill Type: Regular

Account Detail		Electric Service Detail	
Previous Balance	559.94	Meter Number: 68072	Multiplier: 40.0
Payments Received 06/21/2018	559.94 Credit	Reading Dates: 05/31/2018 - 06/30/2018	
Balance Forward	\$0.00	Number of Days: 30	
Energy Charge (kWh) 6,160 @ \$0.0449	276.58	Current Reading: 5608	
Demand Charge (kW) 30.360 @ \$5.20	157.87	Last Reading: 5454	
Facilities Charge	64.00	kWh: 154 x 40 Multiplier =	6,160
Prompt Pay Discount	8.41 Credit	kW: 0.759 x 40 Multiplier =	30.360
Current Charges	\$490.04		
Total Amount Due \$490.04			

RECEIVED
MAR 11 2019
OWRD

Prompt Payment Discount - 1.5% will be credited to your next electric bill if your current bill is paid in full and received within 10 days of billing date.
Late Charge - \$5 or 1.5%, whichever is greater, for outstanding balances not received in our office by 5:30 PM the day prior to your next billing.

Account Number: 732513 Billing Cycle: 3

Current Charges Due Date: 08/06/2018

Total Amount Due: \$490.04
Relief Fund Contribution: (optional) _____
Total Amount Paid: _____



MIDSTATE ELECTRIC COOPERATIVE INC
PO BOX 24625
SEATTLE WA 98124-0625



SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0000

0390390717180000732513004900400490049

13146





16755 Finley Butte Rd
PO Box 127
LaPine OR 97739-0127

A Touchstone Energy® Cooperative

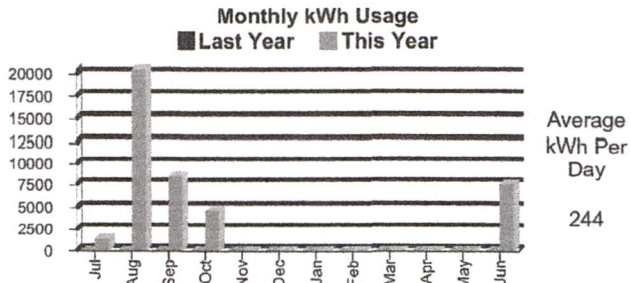
IMPORTANT INFORMATION

Co-Op News

Our office will be closed Wednesday July 4, 2018 for Independence Day. Our after-hours outage line, 541-536-2165, is available 24 hours a day to assist you.
PLEASE UPDATE YOUR CONTACT INFORMATION AT WWW.MIDSTATEELECTRIC.COOP OR CALL 541-536-2126 OPTIONS 3

30 1 AV 0.375
SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0130

5 30
C-1 P-1



Account Number: 732513 **Service Location: 40 HP**
Billing Date: 06/19/2018 **Billing Cycle: 3** **Rate: Irr-Seasonal** **Bill Type: Regular**

Account Detail		Electric Service Detail	
Previous Balance	57.78	Meter Number: 68072	Multiplier: 40.0
Payments Received 05/15/2018	57.78 Credit	Reading Dates: 04/30/2018 - 05/31/2018	
Balance Forward	\$0.00	Number of Days: 31	
Energy Charge (kWh) 7,560 @ \$0.0449	339.44	Current Reading: 5454	
Demand Charge (kW) 30.280 @ \$5.20	157.46	Last Reading: 5265	
Facilities Charge	64.00	kWh: 189 x 40 Multiplier =	7,560
Prompt Pay Discount	0.96 Credit	kW: 0.757 x 40 Multiplier =	30.280
Current Charges	\$559.94		
Total Amount Due \$559.94			

RECEIVED
MAR 11 2019
OWRD

Prompt Payment Discount - 1.5% will be credited to your next electric bill if your current bill is paid in full and received within 10 days of billing date.
Late Charge - \$5 or 1.5%, whichever is greater, for outstanding balances not received in our office by 5:30 PM the day prior to your next billing.

Account Number: 732513 **Billing Cycle: 3**

Current Charges Due Date: 07/09/2018

Total Amount Due: \$559.94
Relief Fund Contribution: (optional) _____
Total Amount Paid: _____



A Touchstone Energy® Cooperative

SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0000

MIDSTATE ELECTRIC COOPERATIVE INC
PO BOX 24625
SEATTLE WA 98124-0625



13146

0390390619180000732513005599400559949





16755 Finley Butte Rd
PO Box 127
LaPine OR 97739-0127

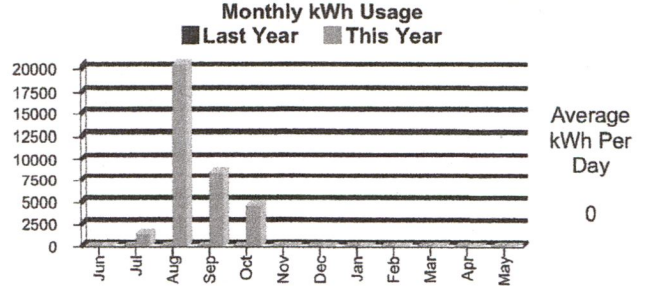
IMPORTANT INFORMATION

Co-Op News

Our office will be closed on Monday, May 28th for Memorial Day. Our after-hours outage line, 541-536-2165 is available 24 hours a day to assist you.

48 1 AV 0.375
SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0130

5 48
C-1 P-1



Average kWh Per Day
0

Account Number: 732513 Service Location: 40 HP
Billing Date: 05/15/2018 Billing Cycle: 3 Rate: Irr-Seasonal Bill Type: Regular

Account Detail		Electric Service Detail	
Previous Balance	6.22 Credit	Meter Number: 68072	Multiplier: 40.0
Payments Received	0.00	Reading Dates: 09/30/2017 - 04/30/2018	
Balance Forward	\$6.22 Credit	Number of Days: 212	
Facilities Charge	64.00	Current Reading: 5265	
Current Charges	\$64.00	Last Reading: 5265	
Total Amount Due \$57.78		kWh: 0 x 40 Multiplier = 0	
		kW: 0.000 x 40 Multiplier = 0.000	

RECEIVED
MAR 11 2019
OWRD

Prompt Payment Discount - 1.5% will be credited to your next electric bill if your current bill is paid in full and received within 10 days of billing date. Late Charge - \$5 or 1.5%, whichever is greater, for outstanding balances not received in our office by 5:30 PM the day prior to your next billing.

Account Number: 732513 Billing Cycle: 3
Balance Forward: \$6.22 Credit
Current Charges Due Date: 06/04/2018 \$64.00
Total Amount Due: \$57.78
Relief Fund Contribution: (optional)
Total Amount Paid: _____



A Touchstone Energy® Cooperative

SARAH M RICKETTS
NICKOLAS C RICKETTS
C/O RICKETTS FAMILY FARM
PO BOX 130
SILVER LAKE OR 97638-0000

MIDSTATE ELECTRIC COOPERATIVE INC
PO BOX 24625
SEATTLE WA 98124-0625



0390390515180000732513000577800057784

13146





THIS SPACE RESERVED FOR RECORDER'S USE

After recording return to:

Nickolas Clifton Ricketts and Sarah M Ricketts
55050 Old Lake Road, PO Box 130
Silver Lake, OR 97641 Silver Lake 971638

Read & Approved

Date: 6-26-17

X NR

X SMP

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

Nickolas Clifton Ricketts and Sarah M Ricketts
55050 Old Lake Road,
Silver Lake, OR 97641 11
File No. 167231AM

STATUTORY WARRANTY DEED

Donald J. Ramage and Connie V. Ramage, as tenants by the entirety,

Grantor(s), hereby convey and warrant to

Nickolas Clifton Ricketts and Sarah M Ricketts, as Tenants by the Entirety,

Grantee(s), the following described real property in the County of Lake and State of Oregon free of encumbrances except as specifically set forth herein:

In the County of Lake, State of Oregon:

Parcel 1

Township 28 South, Range 16 East of the Willamette Meridian,
Section 10: The E½ of the SW¼ of the SE¼.

Parcel 2

Township 28 South, Range 16 East of the Willamette Meridian,
Section 15: The NW¼ of the NE¼.

FOR INFORMATION PURPOSES ONLY, THE MAP/TAX ACCT #(S) ARE REFERENCED HERE:

281610-2100
281615-400

The true and actual consideration for this conveyance is \$330,000.00.

The above-described property is free of encumbrances except all those items of record, if any, as of the date of this deed and those shown below, if any:

RECEIVED

MAR 11 2019

OWRD

13146



Ricketts Family Farm

P.O. Box 130
Silver Lake, OR 97638
541-815-4096

TRANSMITTAL

To:

Oregon Water Resources Department
725 Summer St. NE Suite A
Salem, OR 97301-1266

Date: 3-7-19

RE: Temporary Transfer Application

Copies	No.	Description
1	1	Application (10 Sheets)
1	2	Temporary Transfer Application Map (1 Sheet)
1	3	Evidence of Use Affidavit (9 Sheets)
1	4	Current Recorded Deed from authorized place of use (1 sheet)
1	5	LUCS (2 Sheets)
1	6	Check for OWRD fee

Comment:

This application is transmitted for OWRD approval of Temporary Transfer of Water Rights

Signed: _____

RECEIVED

MAR 11 2019

OWRD

= 13146 =