

Application for Permanent Water Right Transfer

Part 1 of 5 – Minimum Requirements Checklist



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
www.oregon.gov/OWRD

This 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.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed 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 Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: 91588**
 Please include a separate Part 5 for each water right. (See instructions on page 6)

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- 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 an irrigation district. Complete when the transfer applicant is not the irrigation 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.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(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"/> Evidence of Use Form not enclosed or incomplete |
| <input type="checkbox"/> Additional signature(s) required | <input type="checkbox"/> Part _____ is incomplete |

Other/Explanation _____

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

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Part 2 of 5 – Transfer Application Map

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

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

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- 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 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.
- 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 diversion/appropriation such as main pipelines, canals, and ditches.
- 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.
- N/A Proposed 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.
- 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.
- N/A If you are proposing a change in point(s) of diversion or well(s), 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 5 – Fee Worksheet

FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)			
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,160
2	Types of change proposed: <input checked="" type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » »	2	930
3	Number of water rights included in transfer <u>1 (3a)</u> Subtract 1 from the number in line 3a above: <u>0 (3b)</u> <i>If only one water right this will be 0</i> Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » »	3	0
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input checked="" type="checkbox"/> Yes: enter \$410 »	4	410
5	Do you propose to change the place of use or character of use? <input type="checkbox"/> No: enter 0 on line 5 » <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see example below*): <u>1.35 (5a)</u> Subtract 1.0 from the number in 5a above: <u>0.35 (5b)</u> If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: <u>1 (5c)</u> and multiply 5c by \$350, then enter on line 5 » » » » » » » » » »	5	350
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$2,850
7	Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 »	7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » Transfer Fee:	8	\$2,850

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***Example for Line 5a calculation** to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

1. For irrigation calculate cfs for each water right involved as follows:
 - a. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs ÷ 100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac = 0.56 cfs).
 - b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
2. Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land.** The fee should be assessed only once for each “on the ground” acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

FEE WORKSHEET for SUBSTITUTION			
1	Base Fee (includes change to one well)	1	\$840.00
2	Number of wells included in substitution _____ (2a) Subtract 1 from the number in 2a above: _____ (2b) <i>If only one well this will be 0</i> Multiply line 2b by \$410 and enter » » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » » Fee for Substitution: 13496		

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Deborah Ann Wallace		PHONE NO. 541-891-3609	ADDITIONAL CONTACT NO.
ADDRESS 9480 Buesing Rd.		FAX NO.	
CITY Klamath Falls	STATE OR	ZIP 97603	E-MAIL dwallace@isler-kf.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.

AGENT/BUSINESS NAME Hollie Cannon / Water Right Solutions, LLC		PHONE NO. 541-821-5848	ADDITIONAL CONTACT NO.
ADDRESS 3246 Hammer St.		FAX NO.	
CITY Klamath Falls	STATE OR	ZIP 97603	E-MAIL hcannon@waterightsolutions.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:
See "Attachment 1"

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

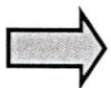
Check One Box

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I 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 affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

By my signature below, I confirm that I understand:

- Prior to Department approval of the transfer application, 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 water right 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 newspaper: Herald and News.
- Amendments to the application may only be made in response to the Department's Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).

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



Deborah Wallace
Applicant signature

Deborah Wallace
Print Name (and Title if applicable)

7/6/2020
Date

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Applicant signature

Print Name (and Title if applicable)

Date

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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 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 water right(s) were conveyed.*

Check the following boxes that apply:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.
- Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see: https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

RECEIVING LANDOWNER NAME Aguila G-Boys LK 300 LLC		PHONE NO. 928-920-9125	ADDITIONAL CONTACT NO.	
ADDRESS 18969 W. McDowell Rd			FAX NO.	
CITY Buckeye	STATE AZ	ZIP 85396	E-MAIL mark@duncanfamilyfarms.net	

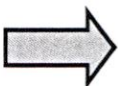
Describe any special ownership circumstances here: _____

- 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.)

IRRIGATION DISTRICT NAME Sunnyside Irrigation District	ADDRESS 10601 Lower Klamath Lake Rd.		
CITY Merrill	STATE OR	ZIP 97633	

- 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	ADDRESS		
CITY	STATE	ZIP	



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

ENTITY NAME Klamath County	ADDRESS 305 Main Street		
CITY Klamath Falls	STATE OR	ZIP 97601	

ENTITY NAME	ADDRESS		
CITY	STATE	ZIP	

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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 # 91588

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Description of Water Delivery System

System capacity: **1.35** 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. **There is a turbine pump in Well #1 powered by a 100 hp motor. There is about 9,500 feet of buried PVC (10”), 1,000 feet of 8” PVC and 1320 feet of 6” and 5” PVC. There are 10 wheel lines and some misc. hand lines used to irrigate the corner where the wheel lines do not reach.**

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	KLAM 14690	41 S	10 E	5	NE NW	300	784 ft North & 30 ft West of the Center North 1/16 th Cor. Sec 5
Well #2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	KLAM 51848	41 S	10 E	5	NW SE	300	2694.6 ft. South & 460 ft. East from the North ¼ Cor. Sec 5
Well #3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	KLAM 14946	41 S	10 E	9	SW NW	700	N 0°42'E – 1287.9 ft from W ¼ Cor Sec 9
Well #4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	KLAM 14941	41 S	10 E	9	NW NW	700	1270 ft South & 1000 ft East from the NW Cor Sec 9
Well #5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	KLAM 57323	41 S	10 E	9	NE SW	900	N 22°48'W 2606.2 ft from S ¼ Cor Sec 9
Well #6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		41 S	10 E	9	NW SE	900	2586.6 ft North & 1284.5 ft East from S ¼ Cor Sec 9

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

- | | |
|---|---|
| <input checked="" type="checkbox"/> Place of Use (POU)
<input type="checkbox"/> Character of Use (USE)
<input type="checkbox"/> Point of Diversion (POD)
<input type="checkbox"/> Additional Point of Diversion (APOD)
<input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P)
<input checked="" type="checkbox"/> Point of Appropriation/Well (POA)
<input checked="" type="checkbox"/> Additional Point of Appropriation (APOA)
<input type="checkbox"/> Substitution (SUB)
<input type="checkbox"/> Government Action POD (GOV) |
|---|---|

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

- Yes Complete only the Proposed ("to" or "on" 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.

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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 Changes to Water Right Certificate # 91588

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands)										PROPOSED (the "to" or "on" 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.										The listing as it would appear AFTER PROPOSED CHANGES are made.										
Twp	Rng	Sec	¼ ¼	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	Proposed Changes (see "CODES" from previous page)	Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
40	S	10	E	32	SE	SW	600	Well #1	10/22/1993	POU/APOA	41	S	10	E	5	NE	SE	302	Well #1 and Well #2	10/22/1993
41	S	10	E	5	NE	NW	300	Well #1	10/22/1993	POU/APOA	41	S	10	E	5	SE	SE	302	Well #1 and Well #2	10/22/1993
41	S	10	E	5	SE	NW	300	Well #1	10/22/1993	POU/POA/DIMINISH	41	S	10	E	9	NE	SW	900	Wells #3,4,5,&6	10/22/1993
41	S	10	E	5	NE	SW	300	Well #1	10/22/1993	POU/POA/DIMINISH	41	S	10	E	9	NW	SW	900	Wells #3,4,5,&6	10/22/1993
41	S	10	E	5	SE	SW	300	Well #1	10/22/1993	POU/POA/DIMINISH	41	S	10	E	9	SW	SW	900	Wells #3,4,5,&6	10/22/1993
41	S	10	E	5	NW	SE	300	Well #1	10/22/1993	POU/POA/DIMINISH	41	S	10	E	9	SE	SW	900	Wells #3,4,5,&6	10/22/1993
41	S	10	E	5	SW	SE	300	Well #1	10/22/1993	POU/POA/DIMINISH	41	S	10	E	9	SW	SE	900	Wells #3,4,5,&6	10/22/1993
41	S	10	E	8	NW	NE	200	Well #1	10/22/1993	APOA	41	S	10	E	5	NE	SW	300	Well #1 & #2	10/22/1993
41	S	10	E	8	SW	NE	200	Well #1	10/22/1993	APOA	41	S	10	E	5	SE	SW	300	Well #1 & #2	10/22/1993
										APOA	41	S	10	E	5	NW	SE	300	Well #1 & #2	10/22/1993
										APOA	41	S	10	E	5	SW	SE	300	Well #1 & #2	10/22/1993
										APOA	41	S	10	E	8	NW	NE	200	Well #1 & #2	10/22/1993
										APOA	41	S	10	E	8	SW	NE	200	Well #1 & #2	10/22/1993
TOTAL ACRES: 311.5										TOTAL ACRES: 311.5										

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Additional remarks: Wells #1 & #2 pertain to Map 1 and Wells #3, #4, #5 & #6 pertain to Map 2.

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For Place of Use or Character 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: KA 1000. (on part of the "to" lands)



Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

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

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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
Well #1	Yes	KLAM 14690	See well log							
Well #2	Yes	KLAM 51848	See well log							
Well #3	Yes	KLAM 14946	See well log							

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Well #4	Yes	KLAM 14941	See well log							
Well #5	Yes	KLAM 57323	See well log							
Well #6	No	Proposed	820	16"	0 to 250	0 to 250				
				12"	250 to 820		400 to 820	140	Broken Rock, gravel	1.00 CFS

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Explanation of the purpose of this transfer

The portion of the transfer that pertains to the property of Deborah Wallace.

The water right will be used on the most productive soil. Part of the TO land is already irrigated (because of the better soil) and this transfer will correct to location of the water right to the place of actual use. The additional POA (Well #2) is to allow the use of a well that is closer to the actual place of use. Well #1 will remain as a POA but will be a backup well in case of failure of Well #2.

The portion of the transfer that pertains to the property of AGB LK300, LLC

This portion of this property subject to this transfer has a primary water right by KA-1000 through Sunnyside Irrigation District. SID is B Land in the Klamath Reclamation Project and therefore not a dependable supply. Because of the nature of the business of AGB LK300, LLC and contracts for leafy green vegetables it is necessary to have a secure source of water. This transfer will move this groundwater right to be supplemental to the KA-1000 Project primary water right. The groundwater right will be diminished to supplemental. AGB LK300, LLC already has three wells (on this transfer they are identified for this transfer as Wells #3, #4 and #5) that are the POA for Certificates 29724, 29725 and 49130. The water right by this transfer will utilize Wells #3, #4 & #5, but the combined production of these wells is marginal to provide the needed flow for all the water rights attached to the wells, it is requested to add a new Well #6 to ensure pumping capacity to meet the Rate of all the water rights.

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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.

State of Oregon)
) ss
 County of KLAMATH)

I, DEBORAH ANN WALLACE, in my capacity as OWNER,
 mailing address 9480 BUESING RD., KLAMATH FALLS, OR 97603
 telephone number (541)891-3609, being first duly sworn depose and say:

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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 # 91588; **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 # 91588 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)

13496

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

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.

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Subotah Wallace

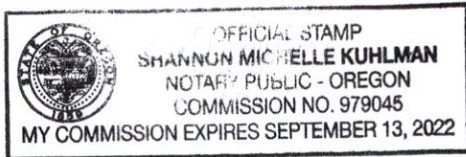
7/6/2020

Signature of Affiant

Date

OWRD

Signed and sworn to (or affirmed) before me this 6TH day of JULY, 2020.



Skuhlman

Notary Public for Oregon

My Commission Expires: 09-13-2022

Supporting Documents	Examples
<input checked="" 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 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	<p>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.</p> <p>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</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

13496

STATE OF OREGON
COUNTY OF KLAMATH
CERTIFICATE OF WATER RIGHT

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JUL 23 2020

OWRD

THIS CERTIFICATE ISSUED TO

RANDOLPH WALLACE
DEBORAH WALLACE
9480 BUESING RD
KLAMATH FALLS OR 97603

confirms the right to the use of water perfected under the terms of Permit G-12979. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the point of diversion from the source. The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-13535

SOURCE OF WATER: A WELL IN THE LOST RIVER BASIN

PURPOSE or USE: IRRIGATION OF 311.5 ACRES

MAXIMUM RATE: 2.48 CUBIC FEET PER SECOND

PERIOD OF ALLOWED USE: MARCH 1 THROUGH SEPTEMBER 30

DATE OF PRIORITY: OCTOBER 22, 1993

The well is located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
41 S	10 E	WM	5	NE NW	784 FEET NORTH AND 30 FEET WEST OF THE C-N 1/16 CORNER OF SECTION 5

The amount of water used for irrigation under this right, together with the amount secured under any other right existing for the same lands, is limited to a diversion of ONE-EIGHTIETH of one cubic foot per second (or its equivalent) and 3.0 acre-feet for each acre irrigated during the irrigation season of each year.

A description of the place of use is as follows:

Twp	Rng	Mer	Sec	Q-Q	Acres
40 S	10 E	WM	32	SE SW	36.3
41 S	10 E	WM	5	NE NW	36.5
41 S	10 E	WM	5	SE NW	9.9

NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484 and ORS 536.075. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 183.484, ORS 536.075 and OAR 137-004-0080, you may petition for judicial review and petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied. In addition, under ORS 537.260 any person with an application, permit or water right certificate subsequent in priority may jointly or severally contest the issuance of the certificate within three months after issuance of the certificate.

Twp	Rng	Mer	Sec	Q-Q	Acres
41 S	10 E	WM	5	NE SW	40.0
41 S	10 E	WM	5	SE SW	40.0
41 S	10 E	WM	5	NW SE	28.8
41 S	10 E	WM	5	SW SE	40.0
41 S	10 E	WM	8	NW NE	40.0
41 S	10 E	WM	8	SW NE	40.0

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Measurement, recording and reporting conditions:

- A. The water user shall maintain the meter or other suitable measuring device approved by the Director in good working order, shall keep a complete record of the amount of water used each month, and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the water user to report general water-use information, including the place and nature of use of water under the right.
- B. The water user shall allow the watermaster access to the meter or measuring device; provided however, where the meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this right, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interference.

Use of water under authority of this right may be regulated if analysis of data available after the right is issued discloses that the appropriation will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway in quantities necessary for recreation, fish and wildlife in effect as of the priority date of the right or as those quantities may be subsequently reduced.

To monitor the effect of water use from the well(s) authorized under this right, the Department requires the water user to make and report annual static water level measurements. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.

Measurements must be made according to the following schedule:

Following the first year of water use, the user shall submit seven consecutive annual reports of static water level measurements. The first of these seven annual measurements will establish the reference level against which future annual measurements will be compared. Based on an analysis of the data collected, the Director may require that the user obtain and report additional annual static water level measurements beyond the seven year minimum reporting period. The additional measurements may be required in a different month. If the measurement requirement is stopped, the Director may restart it at any time.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board and be submitted to the Department on forms provided by the Department. The Department requires the individual performing the measurement to:

- (A) Identify each well with its associated measurement; and
- (B) Measure and report water levels to the nearest tenth of a foot as depth-to-water below ground surface; and
- (C) Specify the method used to obtain each well measurement; and
- (D) Certify the accuracy of all measurements and calculations submitted to the Department.

The reference level against which any future measurements will be compared is 210.75 feet below land surface.

The water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s) if annual water level measurements reveal any of the following events:

- (A) An average water level decline of three or more feet per year for five consecutive years; or
- (B) A water level decline of 15 or more feet in fewer than five consecutive years; or
- (C) A water level decline of 25 or more feet; or
- (D) Hydraulic interference leading to a decline of 25 or more feet in any neighboring well with senior priority.

The period of non-use or restricted use shall continue until the water level rises above the decline level which triggered the action or until the Department determines, based on the water user's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this right. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

The well(s) shall be maintained in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine the water level elevation in the well at all times.

The Director may require water level or pump test results every ten years.

Failure to comply with any of the provisions of this right may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the right.

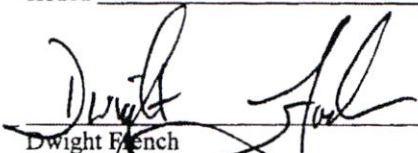
This right is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The right to the use of the water for the above purpose is restricted to beneficial use on the place of use described.

Issued AUG 1 2 2016



Dwight French
Water Right Services Division Administrator, for
Thomas M. Byler, Director
Oregon Water Resources Department

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Application for Water Right Transfer Consent by Deeded Landowner



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

State of Oregon)
)ss
County of Klamath)

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JUL 23 2020

OWRD

I Frank H. and Peggy L. Wallace in my/our capacity as Owners,
mailing address 9450 Buesing Rd, Klamath Falls, OR 97603,
telephone number _____, duly sworn depose and say that I
consent to the proposed change(s) to Water Right Certificate Number 91588
described in a Transfer Application (T-_____) submitted by Deborah Ann Wallace,
(transfer number, if known)
on the property in tax lot number(s) 600, Section 32, Township 40
South, Range 10 East, W.M., located at 9450 Buesing Rd, Klamath Falls, OR 97603.
(site address)

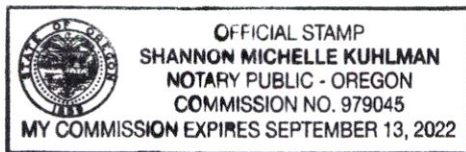
Frank H. Wallace
Signature of Affiant

Date

Peggy L. Wallace
Signature of Affiant

7-5-2020
Date

Subscribed and Sworn to before me this 5th day of JULY, 2020.



Skullman
Notary Public for Oregon

My commission expires 09-13-2022

Application for Water Right Transfer Consent by Deeded Landowner



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

State of Oregon)
)ss
County of Klamath)

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JUL 23 2020
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I AGUILA G-BOYS LK300, LLC in my/our capacity as Owner,
mailing address 18969 W. McDowell Rd., Buckeye, AZ 85396,
telephone number 928-920-9125, duly sworn depose and say that I
consent to the proposed change(s) to Water Right Certificate Number 91588
described in a Transfer Application (T-_____) submitted by Deborah Ann Wallace,
(transfer number, if known)
on the property in tax lot number(s) 900, Section 9, Township 41
South, Range 10 East, W.M., located at 11835 Lower Klamath Lake Rd., Merrill, OR 97633.
(site address)

Anthony K. Ruaner
Signature of Affiant

7/14/20
Date

Stephan A. Duncan
Signature of Affiant

7/14/20
Date

Subscribed and Sworn to before me this 14 day of July, 2020.



Micaiah E.L. Caldwell
Notary Public for Oregon

My commission expires 3-16-2024

13496

**AFFIDAVIT FOR THE VOLUNTARY PARTIAL DIMINUTION OF
A WATER RIGHT CERTIFICATE**

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State of Oregon)
) ss
County of Klamath)

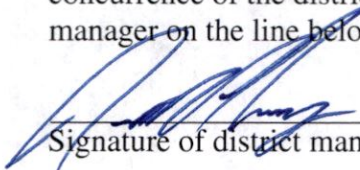
I, Aguila G-Boys LK 300 LLC,
residing at 18969 W McDowell Rd., Buckeye, AZ 85396,
telephone number 928-920-9125, being first duly sworn depose and say:

1. I am the legal owner(s) of the property described as tax lot number 4110-00900-00900, within the NE¹/₄SW¹/₄, NW¹/₄SW¹/₄, SW¹/₄SW¹/₄, SE¹/₄SW¹/₄, and the SW¹/₄SE¹/₄, Section 9, Township 41 S, Range 10 E, of the Willamette Meridian, in Klamath County, Oregon, as shown on the attached map and described in the attached deed and legal description and made part of this affidavit;

2. A portion of water right certificate number 91588 issued to Randolph and Deborah Wallace, 9480 Buesing Rd., Klamath Falls, OR 97603, with a date of priority of October 22, 1993 for use of 2.48 cubic foot per second of water from A well (sources) for the purpose of Irrigation (uses) is appurtenant to our property;

3. The appurtenant water right is located within the boundaries of an irrigation, drainage, water improvement, or water control district, or federal reclamation project (if the right is located within a district or reclamation project, name it here: Sunnyside Irrigation District);

4. If the water right is issued in the name of an irrigation district, then the affiant must have the concurrence of the district to the diminishment of the portion of the water right. (Signature of district manager on the line below documents concurrence of the district.)


Signature of district manager

Jesse Hickney
Printed Name

7/10/2020
Date

5. We have obtained a transfer of this right to land served by a primary water right held by Sunnyside Irrigation District. This water right needs to be supplemental to KA-1000 (e.g., better, more economical) source of water for the primary irrigation of the portion of this water right shown on the attached map and described as follows: The right to the use of 1 cubic foot per second for the irrigation of 125 acres located:

<u>NE</u> ¹ / ₄ <u>SW</u> ¹ / ₄	<u>5.7</u> Acres
<u>NW</u> ¹ / ₄ <u>SW</u> ¹ / ₄	<u>10.9</u> Acres
<u>SW</u> ¹ / ₄ <u>SW</u> ¹ / ₄	<u>31.9</u> Acres
<u>SE</u> ¹ / ₄ <u>SW</u> ¹ / ₄	<u>39.5</u> Acres
<u>SW</u> ¹ / ₄ <u>SE</u> ¹ / ₄	<u>37.0</u> Acres

Section 9
Township 41S, Range 10E, WM:

6. We request the water right be diminished from a right for primary irrigation to a right for supplemental irrigation of the lands described above in item #5;

**AFFIDAVIT FOR THE PARTIAL DIMINUTION OF A
WATER RIGHT CERTIFICATE
(CONTINUED)**

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7. We agree that if this change is approved, it is permanent and the right to the use of water from Well#3, #4, #5, #6 (KLAM 14946, KLAM 14941, KLAM 57323, proposed #6) (source) cannot be changed back to the primary source unless otherwise provided by law. We also agree that so long as there is sufficient water available from the new primary source, we are not entitled to use any water from Well#3, #4, #5, #6 (KLAM 14946, KLAM 14941, KLAM 57323, proposed #6) (source) for primary irrigation of these lands.

[Signature]
Signature of legal owner as listed on deed, or authorized agent

7/14/20
Date

[Signature]
Signature of legal co-owner as listed on deed
(if applicable)

7/14/20
Date

Subscribed and Sworn to Before Me this 14 day of July, 2020.

Micaiah E. L. Caldwell
Notary Public for Oregon

My Commission Expires 3-16-2024



PLEASE ATTACH A LEGIBLE COPY OF :

- 1) A DEED WHICH LISTS LAND OWNERS AND INCLUDES A LEGAL DESCRIPTION OF AFFECTED LANDS, AND 2) AN ADJUDICATION MAP,
- 2) WATER RIGHT FINAL PROOF MAP, OR A TAX LOT MAP WITH THE PORTION OF THE WATER RIGHT AND/OR LANDS TO BE DIMINISHED CLEARLY DRAWN AND IDENTIFIED.
- 3) IF ACTING AS AN AUTHORIZED AGENT, INCLUDE COPY OF POWER OF ATTORNEY OR OTHER DOCUMENTS GRANTING AUTHORITY TO ACT ON BEHALF OF LEGAL OWNER(S) AS LISTED ON THE DEED.

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

RECEIVED JUN 21 1976

JUN 21 1976

State Well No.

WATER RESOURCES DEPT.

State Permit No.

SALEM, OREGON

405/101-32

(1) OWNER:

Name Carrier Catherine Weiser
Address 203 High St. Hlamath Falls, Ore.

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
12" Diam. from +1 ft. to 241 ft. Gage 250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? Yes No.
Type of perforator used Factory Perforated casing
Size of perforations 1/8 in. by 3 in.
960 perforations from 201 ft. to 341 ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name
Type Model No.
Diam. Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? Interstate pump
Yield: 700 gal./min. with 69 ft. drawdown after 2 1/2 hrs.
" " " " " "
" " " " " "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water 55 Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Portland Cement
Well sealed from land surface to 310 ft.
Diameter of well bore to bottom of seal 16 in.
Diameter of well bore below seal 12 in.
Number of sacks of cement used in well seal 20 sacks
Number of sacks of bentonite used in well seal _____ sacks
Brand name of bentonite _____
Number of pounds of bentonite per 100 gallons
of water _____ lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Wamath Driller's well number 7
E 1/2 SW 1/4 Section 32 T. 40S R. 10 E W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 323 ft.
Static level 185 ft. below land surface. Date April 27
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 12"
Depth drilled 370 ft. Depth of completed well 370 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
0-2 Boulders & Brown Clay	0	2	
2 Yellow Clay	2	65	
Grey Clay	65	75	
Yellow Clay	75	160	
Grey Sticky Clay	160	323	
Black Broken Lava (Water Bearing)	323	370	185

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Work started April 14 19 76 Completed MAY 18 19 76
Date well drilling machine moved off of well MAY 19 19 76

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Gerard O'Hara Date MAY 19, 19 76
(Drilling Machine Operator)
Drilling Machine Operator's License No. 958

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name Denny McClave Well Drilling
(Person firm or corporation) (Type or print)
Address 1607 Austin, Hlamath Falls, Ore
[Signed] Denny m. McClave
(Water Well Contractor)
Contractor's License No. 18498 Date MAY 19, 19 76

(1) OWNER

FRANK WALLACE
 9450 BUESING RD.
 MERRILL OR 97633

(2) TYPE OF WORK : NEW WELL

(3) DRILL METHOD : ROTARY AIR

(4) PROPOSED USE: Irrigation

(5) BORE HOLE CONSTRUCTION:

Special Construction Approval NO..... Depth of Completed Well 581..... ft.
 Explosives used NO Type Amount

HOLE		SEAL		AMOUNT	
Diameter	From To	Material	From To	Sacks	
17.1/2"	0 52	CEMENT	0 52	43	
12"	52 310				
10"	310 581				

How was seal Placed C.....
 Backfill placed from ft. to ft. Material

(6) CASING / LINER:

Dia.	From To	Gage	Material
CASING 12"	+1 52	250	STEEL / WELDED

Final location of shoe (s) OWRD

(7) PERFORATIONS / SCREENS:

METHOD	TYPE	MATERIAL
--------	------	----------

From To Slot size Number Dia. Tele / pipe size

(8) WELL TESTS: Minimum testing time is 1 hour

TESTING METHOD	AIR
Yield GPM	Drawdown
800	500'
	Time
	1 HOUR

Temperature of Water 76 F° Depth Artesian Flow Found

Was a water analysis done? NO By whom

Did any strata contain water not suitable for intended use? No.....

(9) LOCATION OF WELL by legal description :

County KLAMATH..... Latitude Longitude
 Township 40..... S..... Range 10..... E.....
 Section 5..... NE 1/4 NW 1/4
 Tax Lot 200..... Lot..... Block..... Subdivision
 Street Address of Well (or nearest address)
9450 BUESING RD.....

(10) STATIC WATER LEVEL:

.....153 ft. below land surface Date May 7, 1999.....
 Artesian pressure Date

(11) WATER BEARING ZONES :

Depth at which water was first found	370'	Estimated Flow Rate	SWL
From To	370' 581'	1000 GPM	153'

(12) WELL LOG:

	Ground Elevation		
	FROM	TO	SWL
SOIL	0	1	
YELLOW CLAYSTONE	1	30	
GREY BASALT	30	31	
YELLOW CLAYSTONE	31	44	
GREY BASALT	44	62	
BROWN & GREY BASALT	62	78	
YELLOW CLAYSTONE	78	138	
BLUE CLAY	138	370	
GREY BASALT	370	434	153
BLUE SANDSTONE	434	441	153
GREY BASALT	441	442	153
GREY SANDSTONE	442	480	153
GREY BASALT	480	522	153
BLACK SANDSTONE	522	524	153
GREY BASALT	524	528	153
BLACK SANDSTONE	528	531	153
GREY BASALT	531	581	153

Date started March 4, 1998 Completed May 7, 1999

(Unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Mark W. J. [Signature] DATE 5-31-99 WWC # 1452

(Bonded) Water Well Constructor Certification: I accept responsibility for the construction alteration or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.

[Signature] DATE 5-31-99 WWC # 693
 13496

KLAM 14946

RECEIVED KLAM 14946 APR 29 1960

41/10-9E(1)

File Original and First Copy with the STATE ENGINEER, SALEM, OREGON

WATER WELL REPORT

State Well No.

STATE OF OREGON G1704

State Permit No.

(1) OWNER:

Name Wendel Moore

Address Merrill, Oregon

(2) LOCATION OF WELL:

County Klamath Owner's number, if any--

1/4 1/4 Section T. R. W.M.

Bearing and distance from section or subdivision corner

3 miles west of Merrill

(3) TYPE OF WORK (check):

New Well [x] Deepening [] Reconditioning [] Abandon []

PROPOSED USE (check):

Domestic [] Industrial [] Municipal [] Irrigation [x] Test Well [] Other []

(5) TYPE OF WELL:

Rotary [] Driven [] Cable [x] Jetted [] Dug [] Bored []

(6) CASING INSTALLED:

12" Diam. from 12 ft. to 12 ft. Gage

(7) PERFORATIONS:

Perforated? [] Yes [] No Type of perforator used SIZE of perforations in. by in.

(8) SCREENS:

Well screen installed [] Yes [x] No Manufacturer's Name Model No. Slot size Set from ft. to ft.

(9) CONSTRUCTION:

Was well gravel packed? [] Yes [x] No Size of gravel: Gravel placed from ft. to ft. Was a surface seal provided? [] Yes [x] No To what depth? ft. Material used in seal-- Did any strata contain unusable water? [] Yes [x] No Type of water? WET Depth of strata Method of sealing strata off

(10) WATER LEVELS:

Static level 45 ft. below land surface Date Artesian pressure lbs. per square inch Date

Log Accepted by:

[Signed] Wendell Moore Date April 20, 1960 (Owner)

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level Was a pump test made? [x] Yes [] No If yes, by whom? Yield: 200 gal./min. with 25 ft. drawdown after 4 hrs. 500 " 50 " " 4 " 500 " 50 " " 4 " Baller test gal./min. with ft. drawdown after hrs. Artesian flow g.p.m. Date Temperature of water 72 Was a chemical analysis made? [] Yes [x] No

(12) WELL LOG:

Diameter of well inches. Depth drilled ft. Depth of completed well ft. Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

Table with columns MATERIAL, FROM, TO. Rows include Top soil, Hard Pan, Yellow shalk, Sticky blue chalk, Chalk, Chalk mixed with sand, Sandy chalk with thin rock shells, Chalk mixed with sand, Sandy chalk, Thin rock shells, Rock, Cemented gravel, Sand rock, Chalky sand rock, Rockshells and clay, Rock shells with clay, Gritty clay, etc.

(13) PUMP:

Manufacturer's Name Type: RECEIVED H.P.

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. JUL 23 2020

NAME (Person, firm, or corporation) (Type or print) OWRD

Address

Driller's well number

[Signed] Owen Storey (Well Driller)

License No. 194 Date 1955, 19

KLAM 14946

APR 29 1960 KLAM 14946

41/10-9E(1)

File Original and First Copy with the STATE ENGINEER, SALEM, OREGON

WATER WELL REPORT STATE OF OREGON

State Well No. 41/10-9E(1)

State Permit No.

(1) OWNER:

Name Wendell Moore continued Address

(2) LOCATION OF WELL:

County Owner's number, if any-- 1/4 1/4 Section T. R. W.M. Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check):

New Well [] Deepening [] Reconditioning [] Abandon [] ** abandonment, describe material and procedure in Item 11.

PROPOSED USE (check):

Domestic [] Industrial [] Municipal [] Irrigation [] Test Well [] Other []

(5) TYPE OF WELL:

Rotary [] Driven [] Cable [] Jetted [] Dug [] Bored []

(6) CASING INSTALLED:

Threaded [] Welded []

" Diam. from ft. to ft. Gage " Diam. from ft. to ft. Gage " Diam. from ft. to ft. Gage

(7) PERFORATIONS:

Perforated? [] Yes [] No

Type of perforator used

SIZE of perforations in. by in. perforations from ft. to ft. perforations from ft. to ft. perforations from ft. to ft. perforations from ft. to ft. perforations from ft. to ft.

(8) SCREENS:

Well screen installed [] Yes [] No

Manufacturer's Name Model No. Slot size Set from ft. to ft. Slot size Set from ft. to ft.

(9) CONSTRUCTION:

Was well gravel packed? [] Yes [] No Size of gravel: Gravel placed from ft. to ft. Was a surface seal provided? [] Yes [] No To what depth? ft. Material used in seal-- Did any strata contain unusable water? [] Yes [] No Type of water? Depth of strata Method of sealing strata off

(10) WATER LEVELS:

Static level ft. below land surface Date Artesian pressure lbs. per square inch Date

Log Accepted by: [Signed] Wendell Moore Date April 20, 1960 (Owner)

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? [X] Yes [] No If yes, by whom? Yield: 700 gal./min. with 95 ft. drawdown after 4 hrs. " 500 " 70 " 4 " " 500 " 70 " 4 " Baller test gal./min. with ft. drawdown after hrs. Artesian flow g.p.m. Date Temperature of water 72 Was a chemical analysis made? [] Yes [X] No

(12) WELL LOG:

Diameter of well inches.

Depth drilled ft. Depth of completed well ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

Table with columns MATERIAL, FROM, TO. Rows include Blue clay, Clay with rock shells, Rock shells, Clay with rock shells, Blue clay with rock shells and streaks of black sand, Rock, Sand rock, Blue clay, Blue chalk with thin rock shells, Green clay, Blue shale (Sticky with occasional rock shell), Hard rock shell, Hard blue shale, Reduced 16" hole to 12" hole, Hard blue shale, Hard Rock, Sticky blue shale, Rock, Hard, Sticky blue shale, Rock, Clay, Rock, Clay.

Work started 19 Completed 19

(13) PUMP:

RECEIVED

Manufacturer's Name Type: JUL 23 2020 H.P.

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME (Person, firm, or corporation) (Type or print)

Address

Driller's well number

[Signed] Owen Steacy (Well Driller)

License No. 194 13496/955 Date 19

KLAM 14946

RECEIVED KLAM 14946 APR 29 1960

41/10-9E(1)

File Original and First Copy with the STATE ENGINEER, SALEM, OREGON

WATER WELL REPORT STATE OF OREGON

State Well No. State Permit No.

(1) OWNER:

Name Wendel Moore Continued Address

(2) LOCATION OF WELL:

County Owner's number, if any-- 1/4 1/4 Section T. R. W.M. Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandonment abandonment, describe material and procedure in Item 11.

PROPOSED USE (check):

Domestic Industrial Municipal Irrigation Test Well Other

(5) TYPE OF WELL:

Rotary Cable Dug Driven Jetted Bored

(6) CASING INSTALLED:

Threaded Welded

Diam. from ft. to ft. Gage Diam. from ft. to ft. Gage Diam. from ft. to ft. Gage

(7) PERFORATIONS:

Perforated? Yes No

Type of perforator used

SIZE of perforations in. by in. perforations from ft. to ft. perforations from ft. to ft. perforations from ft. to ft. perforations from ft. to ft.

(8) SCREENS:

Well screen installed Yes No

Manufacturer's Name Model No. Slot size Set from ft. to ft. Slot size Set from ft. to ft.

(9) CONSTRUCTION:

Was well gravel packed? Yes No Size of gravel: Gravel placed from ft. to ft. Was a surface seal provided? Yes No To what depth? Material used in seal-- Did any strata contain unusable water? Yes No Type of water? Depth of strata Method of sealing strata off

(10) WATER LEVELS:

Static level ft. below land surface Date Artesian pressure lbs. per square inch Date

Log Accepted by:

[Signed] Wendell Moore Date April 20, 1960 (Owner)

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?

Yield: gal./min. with ft. drawdown after hrs. Baller test gal./min. with ft. drawdown after hrs.

Artesian flow g.p.m. Date Temperature of water Was a chemical analysis made? Yes No

(12) WELL LOG:

Diameter of well inches.

Depth drilled ft. Depth of completed well ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

Table with columns MATERIAL, FROM, TO. Rows include Rock, Shale, Conglomerate Hard, Red lava rock, Grey rock, Loose lava rock, Brown rock, Loose lava rock, Grey rock, Small seep of water at 70', Another seep of water at 150', At 200' enough water to drill with. First sign of grit at 285'. Baled at 415'. Lowered water 14' in 5 Baler fulls. At 477 water level raised from 50' to 45'. At 1280' some show of water. At 1297 Layer of water bearing gravel. Water level before pumping 47'. Water level after pumping 47 1/2'. 100'---500 Gal. per minute 135'---780 Gal. per minute 150'---900 Gal. per minute Elevator chain in bottom of well Work started 19 Completed 19

(13) PUMP:

Manufacturer's Name Type: RECEIVED H.P.

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME (Person, firm, or corporation) (Type or print)

Address

Driller's well number

[Signed] Owen Storey (Well Driller)

License No. 194 Date 12/5/55, 1960

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the

RECEIVED KLAM 14941
STATE ENGINEER
SALEM, OREGON
JUN 8 - 1971
STATE ENGINEER
SALEM, OREGON
Do not write above this line)

KLAM 14941

State Well No. 41/10-9 bb

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

State Permit No. _____
G 5626 Sheet # 1

(1) OWNER: **RECEIVED**
Name Mr Wendell Moore
Address Lower Klamath Road
Merrill, Oregon 97633

(2) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):
Rotary Driven Domestic Industrial Municipal
Cable Jetted Irrigation Test Well Other
Dug Bored

CASING INSTALLED: Threaded Welded
12 3/4 Diam. from 1 ft. to 20 ft. Gage 250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS: Perforated? Yes No.
Type of perforator used _____
Size of perforations _____ in. by _____ in. →
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS: Well screen installed? Yes No
Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS: Drawdown is amount water level is lowered below static level Pump Center
Was a pump test made? Yes No If yes, by whom? _____ inc.
Yield: 500 gal./min. with 41 ft. drawdown after 2 hrs.
700 " " 60 " " 2 "
" 975 " " 70 " " 2 "
Baller test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. _____
Temperature of water 90 Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:
Well seal—Material used cement, sand, and Bentonite
Well sealed from land surface to 19 ft.
Diameter of well bore to bottom of seal 18 in.
Diameter of well bore below seal 12 in.
Number of sacks of cement used in well seal 2 sacks
Number of sacks of bentonite used in well seal 1 sacks
Brand name of bentonite Wyoming Bentonite
Number of pounds of bentonite per 100 gallons
of water 50 lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:
County Klamath Driller's well number _____
NW 1/4 NW 1/4 Section 9 T. 41S R. 10E W.M.
Bearing and distance from section or subdivision corner
Approx 1056 feet South of the North section
line and 1056 feet East of the west section 1

(11) WATER LEVEL: Completed well.
Depth at which water was first found 95 ft.
Static level 81 ft. below land surface. Date 5/31/71
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG: Diameter of well below casing 12 inch
Depth drilled 695 ft. Depth of completed well 695 ft.
Formation: Describe color, texture, grain size and structure of materials;
and show thickness and nature of each stratum and aquifer penetrated,
with at least one entry for each change of formation. Report each change in
position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Brown top soil	0	4	
Brown clay or chalk	4	7	
Yellow chalk	7	30	
Semi Hard sand & Gravel	30	70	
Brown shale	70	80	
Brown Clay (water)	80	95	81
Black Clay	95	115	
Sandy shale Dark Brown Clay	115	305	
Sandy Shale (water)	305	310	81
Dark Brown Clay	305	347	
Black Lava Rock	347	360	
xxxxxx			
xxxxxx Blue grey lava	360	405	
Brown Lava w/pockets of mud	405	420	
Black Lava	420	430	
Brown Clay	430	445	
Brown clay w/ pockets of sand	445	490	
Brown Clay	490	520	

Work started Feb 22 1971 Completed May 11 1971
Date well drilling machine moved off of well May 28 1971

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision.
Materials used and information reported above are true to my
best knowledge and belief.
[Signed] Walter J. Wilson Date 5/20, 1971
(Drilling Machine Operator)
Drilling Machine Operator's License No. 169

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is
true to the best of my knowledge and belief.
Name Wilson Drilling Contractor
(Person, firm or corporation) (Type or print)
Address P.O. Box 136, Merrill, Oregon 97633
[Signed] Walter J. Wilson
(Water Well Contractor)
Contractor's License No. 201 Date 5/20, 1971

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the STATE ENGINEER, SALEM, OREGON within 30 days from the date of well completion.

RECEIVED
KLAMATH WATER WELL REPORT
JUN 8 - 1971
STATE ENGINEER OF OREGON
SALEM, OREGON (Please type or print)
(Do not write above this line)

KLAM 1494
RECEIVED
JUL 23 2020
State Well No. 4110-966
State Permit No. _____
Sheet # 2

(1) OWNER:

Name Mr Wendell Moore
Address Lower Klamath Road
Merrill, Oregon

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

(4) PROPOSED USE (check):

Rotary Driven Domestic Industrial Municipal
Cable Jetted Irrigation Test Well Other
Dug Bored

CASING INSTALLED:

Threaded Welded

5" Diam. from Other ft. to 109 ft. Gage _____
5" Diam. from Other ft. to 109 ft. Gage _____
5" Diam. from Other ft. to 109 ft. Gage _____

PERFORATIONS:

Perforated? Yes No.

Type of perforator used _____
Size of perforations in. by _____ in.
see perforations from _____ ft. to 109 ft.
_____ perforations from _____ ft. to 109 ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size 1/2 in Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? _____
Yield: see gal./min. with 109 ft. drawdown after _____ hrs.
" " " " " "
" " " " " "
Baller test see gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m.
Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used _____
Well sealed from land surface to _____ ft.
Diameter of well bore to bottom of seal _____ in.
Diameter of well bore below seal _____ in.
Number of sacks of cement used in well seal _____ sacks
Number of sacks of bentonite used in well seal _____ sacks
Brand name of bentonite _____
Number of pounds of bentonite per 100 gallons of water see other lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County _____ Driller's well number _____
_____ 1/4 Section T. R. W.M.
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found _____ ft.
Static level _____ ft. below land surface. Date _____
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____
Depth drilled _____ ft. Depth of completed well _____ ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
XXXXXXXXXXXXXXXXXXXXXXXXXXXX			
Continued from page No 1			
Black Lava rock	520	532	81
Black lava w/white water crystals & black shale	532	570	81
Blue shale & Grey sand stone	570	585	
Black lava rock w/water crystals	575	585	
Blue lava (some cuttings washed away)	585	595	81
Black lava w/water crystals	595	608	
Black lava w/ pockets of mud	608	630	
Brown mud very soft	630	637	
Brown & black lava	637	641	
Black lava very hard	641	645	
Black lava & white rock	645	655	
Black & grey lava. all cuttings washed away	655	695	
Work started	Feb 22	1970	Completed May 11 1970
Date well drilling machine moved off of well	May 20		19 71

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Walter L. Wilson Date 5/20, 1971.
(Drilling Machine Operator)
Drilling Machine Operator's License No. 201

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name Wilson Drilling Contractor
(Person, firm or corporation) (Type or print)
Address P.O. Box 136, Merrill, Oregon 97633
[Signed] Walter L. Wilson
(Water Well Contractor)
Contractor's License No. 169 Date 5/20, 1971

RECEIVED

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

03-30-2010

WELL LABEL # L 92060

JUL 23 2020

START CARD # 1009535

(1) LAND OWNER Owner Well I.D.
First Name BILL Last Name MOORE
Company B & W MOORE FARMS, LLC
Address P.O. BOX 1009
City MERRILL State OR Zip 97633

(2) TYPE OF WORK
New Well [] Deepening [X] Conversion [X]
Alteration (repair/recondition) [] Abandonment []

(3) DRILL METHOD
Rotary Air [] Rotary Mud [X] Cable [] Auger [] Cable Mud []
Reverse Rotary [] Other []

(4) PROPOSED USE
Domestic [] Irrigation [X] Community []
Industrial/ Commercial [] Livestock [] Dewatering []
Thermal [] Injection [] Other []

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well 1,475.00 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, sacks/lbs. Rows include Cement, Bentonite Chips, Cement.

How was seal placed: Method [] A [] B [] C [] D [] E []

[X] Other POURED DRY, PUMPED

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stil, Plstc, Wld, Thrd. Includes a diagram of casing/liner connections.

Shoe [] Inside [X] Outside [] Other Location of shoe(s) 283

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type Material

Per/S Casing/ Screen green Liner Dia From To Serp/slot width Slot length # of slots Tele/ pipe size

Table with columns: Per/S, Casing/ Screen, green, Liner, Dia, From, To, Serp/slot width, Slot length, # of slots, Tele/ pipe size. Includes 'RECEIVED' stamp.

WATER RESOURCES DEPT SALEM, OREGON
Minimum testing time is 1 hour
Flowing Artesian

Table with columns: Field gpm/hr, Drawdown, Drill stem Pump depth, Duration (hr). Values: 1,000, 200, 1.

Temperature 100 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below)

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)
County Klamath Twp 41.00 S N/S Range 10.00 E E/W WM
Sec 9 NE 1/4 of the SW 1/4 Tax Lot 900
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
Street address of well [] Nearest address [X]

11835 LOWER KLAMATH LAKE RD.

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Predeepening 02-23-2010 85
Completed Well 03-22-2010 79
Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row: 03-19-2010, 1,389, 1,475, 1,000, 79.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Lists geological layers like EXISTING HOLE, BLUE & BROWN CLAYSTONE, etc.

Date Started 02-23-2010 Completed 03-22-2010

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards.

License Number Date

Electronically Filed

Signed

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above.

License Number 1844 Date 03-30-2010

Electronically Filed

Signed COLTER CHANCELLOR (E-filed)

Contact Info (optional)

13496



2015-003860
 Klamath County, Oregon
 04/24/2015 03:01:29 PM
 Fee: \$52.00

THIS SPACE RESERVED FOR RECORDER'S USE

After recording return to:

Randolph F. Wallace and Deborah Ann Wallace
 9480 Buesing Road
 Klamath Falls, OR 97603

RECEIVED

JUL 23 2020

OWRD

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

Randolph F. Wallace and Deborah Ann Wallace
 9480 Buesing Road
 Klamath Falls, OR 97603

File No. 33288AM

STATUTORY WARRANTY DEED

Frank H. Wallace and Peggy L. Wallace, co-trustees of under the Wallace Family Living Trust dated June 10, 2011,

Grantor(s), hereby convey and warrant to

Randolph F. Wallace and Deborah Ann Wallace, as Tenants by the Entirety,

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

See attached Exhibit "A"

The true and actual consideration for this conveyance is **\$153,675.00.**

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:

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. THIS INSTRUMENT DOES 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

580amt

13496

Dated this 24th day of April, 2015

Frank H. Wallace and Peggy L. Wallace,
co-trustees of under the Wallace Family Living Trust
dated June 10, 2011

By: Frank H Wallace, trustee
Frank H Wallace, co-trustee

By: Peggy L. Wallace, trustee
Peggy L. Wallace, co-trustee

RECEIVED

JUL 23 2020

OWRD

State of Oregon } ss
County of Klamath }

On this 24th day of April, 2015, before me,
Twila Pellegrino a Notary Public in and for said state, personally
appeared Frank H. Wallace and Peggy L. Wallace, co-trustees of under the Wallace Family Living Trust dated June 10, 2011,
known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me
that he/she/they executed same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above
written.

Twila Pellegrino
Notary Public for the State of Oregon
Residing at: Klamath County
Commission Expires: 12-3-2018



RECEIVED

JUL 23 2020

OWRD

Exhibit "A"

Parcel 2 of Land Partition 30-94 situated in the E1/2 SW1/4 of Section 32 Township 40 South Range 10, East of the Willamette Meridian, the E1/2 W1/2 and SE1/4 of Section 5 and the E1/2 NW1/4 and the W1/2 NE1/4 of Section 8. Township 41 South Range 10 East of the Willamette Meridian, Klamath County Oregon.

EXCEPTING THEREFROM a Portion of the N1/2 NW1/4 SE1/4 of said Section 5, being more particularly described as follows:

Part of TL 400

Beginning at the C-E 1/16 corner of said Section 5, being the Northerly corner common to Parcels 2 and 3 of said "Land Partition 30-94"; thence S89°59'00" W along the boundary of said Parcel 2, 732.55 feet; thence S45°01'00" E 660.44 feet; thence N89°59'00" E 271.15 feet to a point on the East line of said Parcel 2; thence N00°42'15" W, along the said East line 467.03 feet to the point of beginning, with bearings based on "Land Partition 30-94" (R.O.S. 5709) on File at the office of the Klamath County Surveyor.

ALSO EXCEPTING THEREFROM; a portion of the SE1/4 NW1/4 of said Section 5, being more particularly described as follows:

Part of TL 400

Beginning at the C1/4 corner of said Section 5; thence N00°37'30" W, along the East line of said Parcel 2, 365.57 feet to a point on the Northeasterly line of a 40 foot wide non-exclusive easement (as shown on "Land Partition 30-94"); thence along the said Northeasterly line, N53°20'46": W119.95 feet and N48°07'32" W 917.13 feet; thence leaving said Northeasterly line S41°56'20" W 42.78 feet; thence S06°53'37"E 477.98 feet; thence S25°31'12"E 90.13 feet; thence S03°37'57" E 117.99 feet; thence S02°17'46" E 235.32 feet; thence S13°53'16"E 112.24 feet to a point on the East West centerline of said Section 5: Thence N89°59'00" E 671.67 feet to the point of beginning with bearings based on "Land Partition 30-94" (R.O.S. 5709) on file at the office of the Klamath County Surveyor.

Parcel 2 is

- 1) E1/2 NW1/4 SPC 5 (BOAC)
- 2) E1/2 SW1/4 " (BOAC)
- 3) W1/2 SE1/4 " (BOAC)
- 4) W1/2 NE1/4 SPC B (BOAC)
- 5) E1/2 NW1/4 SPC B (BOAC)

2012-002850

Klamath County, Oregon



00115440201200028500020023

03/16/2012 11:54:37 AM

Fee: \$42.00

Grantors: Frank H. Wallace and Peggy L. Wallace
9450 Buesing Road, Klamath Falls, OR 97603

Grantees: Frank H. Wallace, and Peggy L. Wallace
co-Trustees of The Wallace Family Living Trust
9450 Buesing Road

Klamath Falls, OR 97603

**AFTER RECORDING RETURN TO
AND SEND TAX STATEMENTS TO:**

Frank H. Wallace and Peggy L. Wallace, co-Trustees
9450 Buesing Road
Klamath Falls, OR 97603

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Space above for recorder's use

WARRANTY DEED

Frank H. Wallace and Peggy L. Wallace, husband and wife and tenants by the entirety, **Grantors** convey and warrant to Frank H. Wallace and Peggy L. Wallace, co- Trustees, or their successors in Trust, under the Wallace Family Living Trust dated June 10, 2011, **Grantee**, the following described real property situated in Klamath County, Oregon, commonly known as 9450 Buesing Road, Klamath Falls OR 97603 and further legally described:

Legally described as set out in Exhibit "One" which is attached hereto and incorporated herein.

Exceptions: Any exceptions of record, as of the date of this deed.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2007 AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009. THIS INSTRUMENT DOES 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 OF THE LOT OR PARCEL AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930. AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 to 195.336 AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2007, AND SECTIONS TO 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009.

The true consideration for this conveyance is \$0. This transfer is being made for estate planning purposes.

Dated this 16 day of March, 2012.

Frank H. Wallace
FRANK H. WALLACE

Peggy L. Wallace
PEGGY L. WALLACE

STATE OF OREGON, County of Klamath) ss

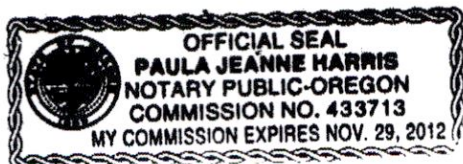
The foregoing instrument was acknowledged before me this 16th day of March, 2012, by Frank H. Wallace and Peggy L. Wallace.

AKA Margaret

Paula Jeanne Harris

Notary Public for the State of Oregon

My commission expires: Nov 29, 2012



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EXHIBIT "ONE"

PARCEL 1 OF LAND PARTITION 30-94 SITUATED IN THE E1/2 SW 1/4
SECTION 32, TOWNSHIP 40 SOUTH RANGE 10 EAST OF THE WILLAMETTE
MERIDIAN, KLAMATH COUNTY, OREGON THE E1/2W1/2 AND SE 1/4 OF
SECTION 5, AND THE E1/2NW1/4 AND W1/2 NE1/4 OF SECTION 8,
TOWNSHIP 41 SOUTH, RANGE 10 EAST OF THE WILLAMETTE MERIDIAN,
KLAMATH COUNTY, OREGON.

TL 600

Conveyed to
Randolph & Deborah
by 2015-003860

WHEN RECORDED RETURN TO:

Tax Statements
Fennemore Craig, P.C.
Attn: William G. Ridenour
2394 E. Camelback Road
Suite 600
Phoenix, Arizona 85016

2020-005592
Klamath County, Oregon



00258692202000055920020021

05/05/2020 08:57:10 AM

Fee: \$87.00

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SPECIAL WARRANTY DEED

This transfer is exempt pursuant to Oregon Revenue and Taxation Code 11925

ARNOTT DUNCAN and KATHLEEN DUNCAN, as Tenants in the entirety ("Grantor"), for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, does hereby convey to AGUILA G-BOYS LK 300 LLC, an Arizona limited liability company, all of Grantor's right, title and interest in that certain real property, together with all of Grantor's interest, if any, in any improvements and fixtures located thereon, and all rights and appurtenances pertaining thereto, situated in Klamath County, Oregon, and legally described as follows:

TL 900 The SW 1/4 and the West 1/2 of the SE 1/4 of Section 9, Township 41 South, Range 10 East of the Willamette Meridian, Klamath County, Oregon, Except the SW 1/4 SW 1/4 SW 1/4, *TL 1000 out* ALSO EXCEPTING THEREFROM, any portion lying within the limits of the County Road.

TL 500 All of the SE 1/4 of the NE 1/4 of Section 8, Township 41 South, Range 10 East of the Willamette Meridian, except approximately one acre in the Southwest corner; more particularly described as follows:

Commencing at the Southwest corner of said SE 1/4 of NE 1/4 of said Section 8; thence *TL 501 out* North on forty line 135 feet to a point; thence East 100 feet to a point; thence Southeasterly to a point on the South line of said forty which point is 396 feet East of the point of beginning; thence West on forty line 396 feet to the point of beginning.

TL 100 NE 1/4 NE 1/4 of Section 8; NW 1/4 NW 1/4 of Section 9 all being in Township 41 South, Range 10 East of the Willamette Meridian.

TL 700 All of the SW 1/4 of the NW 1/4 of Section 9, Township 41 South, of Range 10 East of the Willamette Meridian.

SUBJECT to all taxes and other assessments, reservations in patents and all easements, rights of way, encumbrances, liens, covenants, conditions, restrictions, obligations and liabilities as may appear of record, and all matters which an accurate survey of the property or a physical

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inspection of the property would disclose, Grantor warrants the title against the acts of Grantor and none other.

DATED as of the 20 day of January, 2020.

Arnott K. Duncan
Arnott K. Duncan

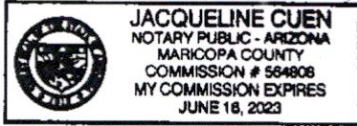
Kathleen Duncan
Kathleen Duncan

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JUL 23 2020

STATE OF ARIZONA)
) ss.
County of Maricopa)

The foregoing instrument was acknowledged before me this 20 day of January 2020, by Arnott K. Duncan.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

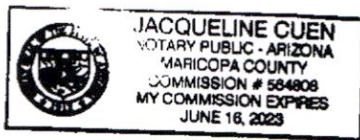


Jacqueline Cuen
Notary Public

STATE OF ARIZONA)
) ss.
County of Maricopa)

The foregoing instrument was acknowledged before me this 20 day of January 2020, by Kathleen Duncan.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.



Jacqueline Cuen
Notary Public

Description of document this notarial certificate is being attached to:	
Type/Title	Special Warranty Deed
Date of Document	<u>1/20</u> , 2020
Number of Pages	2
Add'l. Signers (other than those named in the notarial certificate)	None

STATE OF OREGON

CERTIFICATION OF VITAL RECORD

862543

I.D. TAG NO.

OREGON HEALTH AUTHORITY
CENTER FOR HEALTH STATISTICS

CERTIFICATE OF DEATH

136-2019-018829

STATE FILE NUMBER

TO BE COMPLETED BY FUNERAL FACILITY

Legal Name First: <u>Randolph</u> Middle: <u>Francis</u> Last: <u>Wallace</u> Suffix: _____	Death Date <u>Found July 11, 2019</u>
Sex: <u>Male</u> Age: <u>55 years</u> Social Security Number: _____ County of Death: <u>Klamath</u>	Was Decedent Ever in U.S. Armed Forces? <u>No</u>
Birthdate: <u>June 27, 1964</u> Birthplace: <u>Grants Pass, Oregon</u>	Residence <u>9480 Buesing Road</u> City/Town: <u>Klamath Falls</u>
Residence County: <u>Klamath</u> State or Foreign Country: <u>Oregon</u> Zip Code + 4: <u>97603-9747</u> Inside City Limits? <u>No</u>	Marital Status at Time of Death: <u>Married</u> Spouse's Name Prior to First Marriage: <u>Deborah Ann Larrick</u>
Father's Name: <u>Francis Wallace</u> Mother's Name Prior to First Marriage: <u>Margaret Ashway</u>	Informant's Name: <u>Deborah Ann Wallace</u> Telephone Number: <u>Not Available</u> Relationship to Decedent: <u>Spouse</u> Mailing Address: <u>9480 Buesing Road, Klamath Falls, OR 97603-9747</u>
Place of Death: <u>Other - Decedent's Property</u> Facility Name: _____	Location of Death: <u>9480 Buesing Road</u> City/Town or Location of Death: <u>Klamath Falls</u> State: <u>Oregon</u> Zip Code + 4: <u>97603-9747</u>
Method of Disposition: <u>Burial</u> Place of Disposition: <u>Mt. Calvary Catholic Cemetery Association Inc</u> Location (City/Town and State): <u>Klamath Falls, Oregon</u>	Name and Complete Address of Funeral Facility: <u>O'Hair - Wards Funeral Chapel</u> <u>515 Pine Street, Klamath Falls, Oregon 97601</u>
Date of Disposition: <u>TBD</u> Funeral Director's Signature: <u>Gregory S. Dinton</u> Electronically Signed OR License Number: <u>CO-3607</u>	Registrar's Signature: <u>Jennifer A. Woodward</u> Date Received: <u>July 15, 2019</u> Local File Number: _____
Amendment: _____	

TO BE COMPLETED BY MEDICAL CERTIFIER

Was case referred to Medical Examiner? <u>Yes</u> Autopsy? <u>No</u> Were autopsy findings available to complete the cause of death? _____	Time of Death <u>Found 0739</u> Approximate Interval Onset to Death _____ minutes
CAUSE OF DEATH IMMEDIATE CAUSE ↓ a. <u>Blunt neck trauma and compressive asphyxiation</u>	_____ minutes
b. <u>Due to (or as a consequence of) ↓ ATV rollover accident, partially pinned under the vehicle</u>	_____ minutes
c. _____	_____ minutes
d. _____	_____ minutes
Other significant conditions contributing to death: _____	
Manner of Death: <u>Accident</u> If Female: <u>Not Applicable</u> Did tobacco use contribute to death? <u>No</u>	
Date of Injury: <u>July 11, 2019</u> Time of Injury: <u>07:39 AM</u> Place of Injury: <u>Farm</u> Injury at Work? <u>No</u>	
Location of Injury: <u>9840 Buesing Road, Klamath Falls, Oregon 97603</u> Describe how injury occurred: <u>ATV rollover accident. Partially pinned beneath vehicle.</u> If transportation injury, specify: <u>Driver/Operator</u>	
Name and Address of Certifier: <u>James N Olson</u> <u>13309 SE 84th Avenue 100, Clackamas, Oregon 97015</u>	
Name and Title of Attending Physician If Other than Certifier: _____ Date Signed: <u>July 12, 2019</u>	
Medical Certifier: <u>James N Olson</u> Electronically Signed Title of Certifier: <u>M.D., M.E.</u> License Number: <u>MD10050</u>	
Amendment: _____	



45-2GC (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.

DATE ISSUED: July 16, 2019

Jennifer A. Woodward
JENNIFER A. WOODWARD, PH.D.
STATE REGISTRAR

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



~~XXXXXXXXXX~~



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