



Water Solutions, Inc.

April 23, 2026

Lisa Jaramillo
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301

RE: Application for Permit Amendment in the name of Carlton Nursery Co. LLC.

Dear Lisa:

GSI Water Solutions, Inc. is submitting the enclosed permit amendment application on behalf of Carlton Nursery Co. LLC. (Applicant) to add an additional point of appropriation, Unionvale Well 3, to Permit G-18322.

Please see the Secretary of State Assumed Business Name Amendment document in Attachment E showing that Bailey Nurseries, Inc. is the authorized representative for the permit holder, Carlton Nursery Co. LLC.

Also enclosed is a check for the permit amendment application fee in the amount of \$2,760.00.

If you have any questions or concerns, please contact me at mclarke@gsiws.com.

Sincerely,

A handwritten signature in black ink that reads "Mikaela Clarke".

Mikaela Clarke
Water Resources Analyst

Enclosures: Permit Amendment Application
Check for \$2,760.00

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Application for Permit Amendment

Part 1 of 4 – 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 permit amendment application will be returned if Parts 1 through 4 and all required attachments are not completed and included.
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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

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- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Completed Applicant Information and Signature.
- Part 4 – Information about Permits to be Amended: **Number of permits to be amended: 1**
List the Permits here: G-18322 (See Attachment A)
 Please include a separate Part 4 for each permit. (See instructions on page 6)
- Application Fee** - payable by check to the Oregon Water Resources Department, the online fee calculator is located:
https://apps.wrd.state.or.us/apps/wr/wr_transfer_calculator/permit_amendment.aspx
Fee included in amount of \$2,760.
- Attachments:**
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner). **See Attachment B**
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature 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. **See Attachment C**
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. **See Attachment D**
- 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 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(For Staff Use Only)

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

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

14854 -

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

Part 2 of 4 – Permit Amendment Map Checklist

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

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

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- N/A If **more than three** permits are involved, separate maps for each permit.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water use permit, 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 permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
- N/A If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, 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 use 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°).

Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Carlton Nursery Co. LLC.		PHONE NO. 503-457-6897	ADDITIONAL CONTACT NO.
ADDRESS PO Box 398			FAX NO.
CITY Dayton	STATE OR	ZIP 97114	E-MAIL jon.estes@baileynursery.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 GSI Water Solutions, Inc. Attn: Mikaela Clarke		PHONE NO. 971-200-8501	ADDITIONAL CONTACT NO.
ADDRESS 650 NE Holladay Street, Suite 900			FAX NO.
CITY Portland	STATE OR	ZIP 97232	E-MAIL mclarke@gsiws.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 permit amendment; and why:
The Applicant is requesting to add Unionvale Well 3 as an additional authorized point of appropriation for Permit G-18322.
 If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

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

Is the applicant the permit holder of record? Yes No - **If NO, include either:**

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

Has the Completion ("C") Date of the permit(s) in this application expired? Yes No

If YES, this application will not be accepted by the Department.

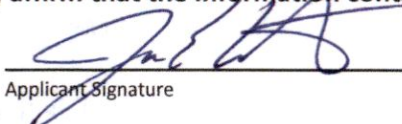
If NO, what are the completion dates of the permit(s)? **1/27/2028**

- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing of this Permit Amendment Application if the completion date of the permit expires within 6 months of the date of filing this application.

By my signature below, I confirm that I understand:

- Prior to Department approval of the permit amendment, 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 permit 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: News-Register

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


Applicant Signature

Jon Estes, Water Resources Manager, Bailey Nurseries*
Print Name (and Title if applicable)

4/21/2026
Date

***On behalf of Carlton Nursery Co. LLC. (See Attachment E)**



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Check one of the following:

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

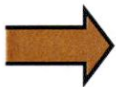
Check the appropriate box, if applicable:

- Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district. **The permit's authorized place of use is within the service area of PCWDIC but the groundwater is not served by PCWDIC.**

IRRIGATION DISTRICT NAME Palmer Creek Water District Improvement Company	ADDRESS 14395 SE Wallace Road	
CITY Dayton	STATE OR	ZIP 97114

- Check here if water for any of the permits 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 local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME Yamhill County Planning and Development	ADDRESS 400 NE Baker Street	
CITY McMinnville	STATE OR	ZIP 97128

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 4 of 4 – Water Use Permit Information

PERMIT # G-18322

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

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit 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	YAMH 557	5	S	3	W	16	NW	NW	1502	60 feet North and 60 feet East from NW corner, DLC 56
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	YAMH 6409	5	S	3	W	17	NE	NE	1801	210 feet North and 360 feet West from NW corner, DLC 56
Holbrook Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	YAMH 6439	5	S	3	W	9	NW	SW	402	2,120 feet North and 675 feet East from NW corner, DLC 56
Unionvale Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	YAMH 59179	5	S	3	W	9	SE	SW	1500	520 feet North and 1,275 feet East from the NW corner of DLC 56

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

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Surface water POD to Ground Water POA (SW/GW) |

Will all of the proposed changes affect the entire water use permit?

Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.

No Complete all of Table 2 to describe the portion of the permit to be changed.

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For a change in place of use: N/A

Does the permit holder of record own or control the land TO which the place of use is being moved? Yes No

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If NO, the landowner of the land TO which the place of use is being moved **must be assigned to the permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? Yes No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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

If YES, list the other certificate, permit, or ground water registration numbers: N/A – The Applicant is not requesting to change the place of use of permit G-18322.



If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

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

- 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)

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See well logs in Attachment D.

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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

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Attachment A

Permit G-18322

Application for Permit Amendment - Carlton Nursery Co. LLC.

STATE OF OREGON

COUNTY OF YAMHILL

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

CARLTON NURSERY CO. LLC
PO BOX 398
DAYTON OR 97114

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-18502

SOURCE OF WATER: WELL 1 (YAMH 557), WELL 2 (YAMH 6409) AND HOLBROOK WELL 2 (YAMH 6439)
IN WARNER CREEK BASIN

PURPOSE OR USE: NURSERY USE ON 106.5 ACRES

MAXIMUM RATE AND PERIOD OF USE: 1.0 CUBIC FOOT PER SECOND FROM NOVEMBER 1 THROUGH
JUNE 30, FURTHER LIMITED TO 0.58 CFS FROM HOLBROOK WELL 2 (YAMH 6439) FROM JUNE 1
THROUGH JUNE 30

DATE OF PRIORITY: MAY 5, 2017

AUTHORIZED POINT OF APPROPRIATION:

POD Name	Twp	Rng	Mer	Sec	Q-Q	Measured Distances
WELL 1 (YAMH 557)	5 S	3 W	WM	16	NW NW	60 FEET NORTH AND 60 FEET EAST FROM NW CORNER, DLC 56
WELL 2 (YAMH 6409)	5 S	3 W	WM	17	NE NE	210 FEET NORTH AND 360 FEET WEST FROM NW CORNER, DLC 56
HOLBROOK WELL 2 (YAMH 6439)	5 S	3 W	WM	9	NW SW	2120 FEET NORTH AND 675 FEET EAST FROM NW CORNER, DLC 56

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The amount of water used for nursery use under this right, together with the amount secured under any other right existing for the same lands, is limited to 0.15 cubic foot per second per acre and 5.0 acre feet per acre per year. For irrigation of containerized nursery plants, the amount of water diverted under this right, together with the amount secured under any other right existing for the same lands, is limited to ONE-FORTIETH of one cubic foot per second and 5.0 acre feet per acre per year. For irrigation of in-ground nursery plants, the amount of water diverted under this right, together with the amount secured under any other right existing for the same lands, is limited to ONE-EIGHTIETH of one cubic foot per second and 2.5 acre feet per acre per year. The use of water for nursery use may be made at any time, during the period of allowed use specified above, that the use is beneficial. For irrigation of any other crop, the amount of water diverted under this right, together with the amount secured under any other right existing for the same lands, is limited to ONE-EIGHTIETH of one cubic foot per second and 2.5 acre feet per acre during the irrigation season of each year.

AUTHORIZED PLACE OF USE:

Twp	Rng	Mer	Sec	Q-Q	Acres
5 S	3 W	WM	8	SW SE	21.4
5 S	3 W	WM	8	SE SE	27.6
5 S	3 W	WM	9	SW SW	12.8
5 S	3 W	WM	9	SE SW	16.5
5 S	3 W	WM	9	SW SE	9.9
5 S	3 W	WM	16	NW NE	2.8
5 S	3 W	WM	16	NE NW	4.6
5 S	3 W	WM	16	NW NW	1.3
5 S	3 W	WM	17	NE NE	5.3
5 S	3 W	WM	17	NW NE	4.3

PERMIT SPECIFIC CONDITIONS

1. Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.
2. **Water Use Measurement, Recording, and Reporting:**
 - A. Before water use may begin under this permit, the permittee shall install a totalizing flow meter at each point of appropriation. The permittee shall maintain the device in good working order.
 - B. The permittee shall allow the watermaster access to the device; provided however, where any device is located within a private structure, the watermaster shall request access upon reasonable notice.

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- C. The permittee shall keep a complete record of the volume of water used each month, and shall submit an annual 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 permittee to report general water-use information, including the place and nature of use of water under the permit.
- D. The Director may provide an opportunity for the permittee to submit alternative measuring and reporting procedures for review and approval.

3. Static Water Level Measurement:

The Department requires the water user to obtain, from a qualified individual (see below), and report annual static water levels for each well on the permit. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.

The permittee shall report an initial March static water-level measurement once well construction is complete and annual measurements thereafter. Annual measurements are required whether or not the well is used. The first annual measurement will establish a reference level against which future measurements will be compared. However, the Director may establish the reference level based on an analysis of other water-level data. The Director may require the user to obtain and report additional water levels each year if more data are needed to evaluate the aquifer system.

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. Measurements shall be submitted on forms provided by, or specified by, the Department. Measurements shall be made with equipment that is accurate to at least the standards specified in OAR 690-217-0045. The Department requires the individual performing the measurement to:

- A. Associate each measurement with an owner's well name or number and a Department well log ID; and
- B. Report water levels to at least the nearest tenth of a foot as depth-to-water below ground surface; and
- C. Specify the method of measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

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

- A. Annual water-level measurements reveal an average water-level decline of three or more feet per year for five consecutive years; or

- B. Annual water-level measurements reveal a water-level decline of 15 or more feet in fewer than five consecutive years; or
- C. Annual water-level measurements reveal a water-level decline of 25 or more feet; or
- D. Hydraulic interference leads to a decline of 25 or more feet in any neighboring well with senior priority.

The period of restricted use shall continue until the water level rises above the decline level which triggered the action or the Department determines, based on the permittee'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 causing substantial interference with senior water rights. The water user shall not allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit. 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.

4. Groundwater Condition:

Groundwater production shall be only from the alluvial groundwater reservoir.

5. Well Identification Tag:

Prior to using water from any well listed on this permit, the permittee shall ensure that the well has been assigned an OWRD Well Identification Number (Well ID tag), which shall be permanently attached to the well. The Well ID shall be used as a reference in any correspondence regarding the well, including any reports of water use, water level, or pump test data.

STANDARD CONDITIONS

1. If the number, location, source, or construction of any well deviates from that proposed in the permit application or required by permit conditions, this permit may be subject to cancellation, unless the Department authorizes the change in writing.
2. If substantial interference with surface water or a senior water right occurs due to withdrawal of water from any well listed on this permit, 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 interferences.
3. The well(s) shall be constructed and maintained in accordance with the General Standards for the Construction and Maintenance of Water Supply Wells in Oregon. The works shall be equipped with a usable access port adequate to determine water-level elevation in the well at all times.
4. Where two or more water users agree among themselves as to the manner of rotation in the use of water and such agreement is placed in writing and filed by such water users with the watermaster,

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and such rotation system does not infringe upon such prior rights of any water user not a party to such rotation plan, the watermaster shall distribute the water according to such agreement.

5. This permit 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.
6. 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.

DEVELOPMENT AND COMPLETION TIMELINE REQUIREMENTS

1. Prior to receiving a certificate of water right, the permit holder shall submit to the Water Resources Department the results of a pump test meeting the Department's standards for each point of appropriation (well), unless an exemption has been obtained in writing under OAR 690-217. The Director may require water-level or pump-test data every ten years thereafter.
2. Construction of the well shall begin within five years of the date of permit issuance. The deadline to begin construction may not be extended. This permit is subject to cancellation proceedings if the construction deadline to begin is missed.
3. Complete application of the water shall be made within five years of the date of permit issuance. If beneficial use of permitted water has not been made before this date, the permittee may submit an application for extension of time, which may be approved based upon the merit of the application.
4. Within one year after complete application of water to the proposed use, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner.

Issued **JAN 27 2023**

Katherine Ratcliffe

Katherine Ratcliffe
Water Rights Section Manager, for
Douglas E. Woodcock, Acting Director
Oregon Water Resources Department

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Attachment B

Permit Amendment Map

Application for Permit Amendment – Carlton Nursery Co. LLC.

Attachment C

Land Use Information Form

Application for Permit Amendment – Carlton Nursery Co. LLC.

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Land Use Information Form



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

NOTE TO APPLICANTS

In order for your application to be processed by the Oregon Water Resources Department (OWRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be diverted, conveyed, used, and developed. The planning official may choose to complete the form while you wait or return the “Receipt Acknowledging Request for Land Use Information” to you. Applications received by OWRD without the Land Use Information Form, or the signed receipt, will be returned to you. **IMPORTANT:** Please note that while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for OWRD’s acceptance of all other applications. Please be aware that your application cannot be approved without land use approval.

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and used on federal lands only; **OR**
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and **all** of the following apply:
 - a. The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b. The application involves a change in place of use only;
 - c. The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; **and**
 - d. The application involves irrigation water uses only.

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NOTE TO LOCAL GOVERNMENTS

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The person presenting the attached Land Use Information Form is applying for a new water right or modifying an existing water right. The Oregon Water Resources Department (OWRD) requires applicants to obtain land use information to ensure the water right does not result in land uses that are incompatible with your comprehensive plan. Please complete the form and return it to the applicant for inclusion in their application. **NOTE:** For new water right applications only, if you are unable to complete this form while the applicant waits, you may complete the “Receipt Acknowledging Request for Land Use Information” and return it to the applicant.

You will receive notice via OWRD’s weekly Public Notice once the applicant formally submits their request to OWRD. The notice will give more information about OWRD's water right process and provide additional comment opportunities. If you previously only completed the receipt for an application for a new permit to use or store water, you will have 30 days from the Public Notice date to complete the Land Use Information Form and return it to OWRD. Your attention to this request for information is greatly appreciated. If you have questions concerning this form, please contact OWRD's Customer Service Group at 503-986-0900 or WRD_DL_customerservice@water.oregon.gov.

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Received
MAY 04 2026
OWRD

Land Use Information Form



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

NAME Bailey Nurseries, Inc.			PHONE 503-457-6897		
MAILING ADDRESS PO Box 398					
CITY Dayton		STATE OR	ZIP 97114	EMAIL Jon.Estes@baileynursery.com	

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts, may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
5 S	3 W	9	SE SW	1500	EFU 80	<input checked="" type="checkbox"/> Diverted	<input checked="" type="checkbox"/> Conveyed	<input checked="" type="checkbox"/> Used	Nursery Use
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted	<input type="checkbox"/> Conveyed	<input type="checkbox"/> Used	

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

Yamhill

NOTE: A separate Land Use Information Form must be completed and submitted for each county and city, as applicable.

B. Description of Proposed Use

Type of application to be filed with the Oregon Water Resources Department:

- Permit to Use or Store Water
 Water Right Transfer
 Permit Amendment or Ground Water Registration Modification
 Limited Water Use License
 Exchange of Water
 Allocation of Conserved Water

Source of water:
 Reservoir/Pond
 Ground Water
 Surface Water (name) _____

Estimated quantity of water needed: 1.0
 cubic feet per second
 gallons per minute
 acre-feet

Intended use of water:
 Irrigation
 Commercial
 Industrial
 Domestic for _____ household(s)
 Municipal
 Quasi-Municipal
 Instream
 Other Nursery Use

Briefly describe:

The Applicant is requesting to add Unionvale Well 3 as an additional point of appropriation to water right Permit G-18322. The location of the well is listed above and shown on the attached map.
--

Note to applicant: For new water right applications only, if the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt on the bottom of page 4 and include it with the application filed with the Oregon Water Resources Department.

See Page 4 →

Received
 MAY 04 2026
 OWRD

For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

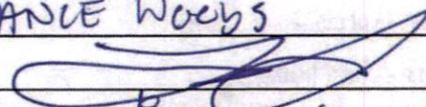
- Land uses to be served by the proposed water use(s), including proposed construction, are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): SECTION 402.02(A) of the YCZ
- Land uses to be served by the proposed water use(s), including proposed construction, involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being Pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

Local governments are invited to express special land use concerns or make recommendations to the Oregon Water Resources Department regarding this proposed use of water in the box below or on a separate sheet.

Received

MAY 04 2026

Name: LANCE Woods Title: SR. PLANNER OWRD
 Signature:  Date: 4/21/2026
 Governmental Entity: TAMMILL COUNTY PLANNING Phone: 503-434-7516

Receipt Acknowledging Request for Land Use Information

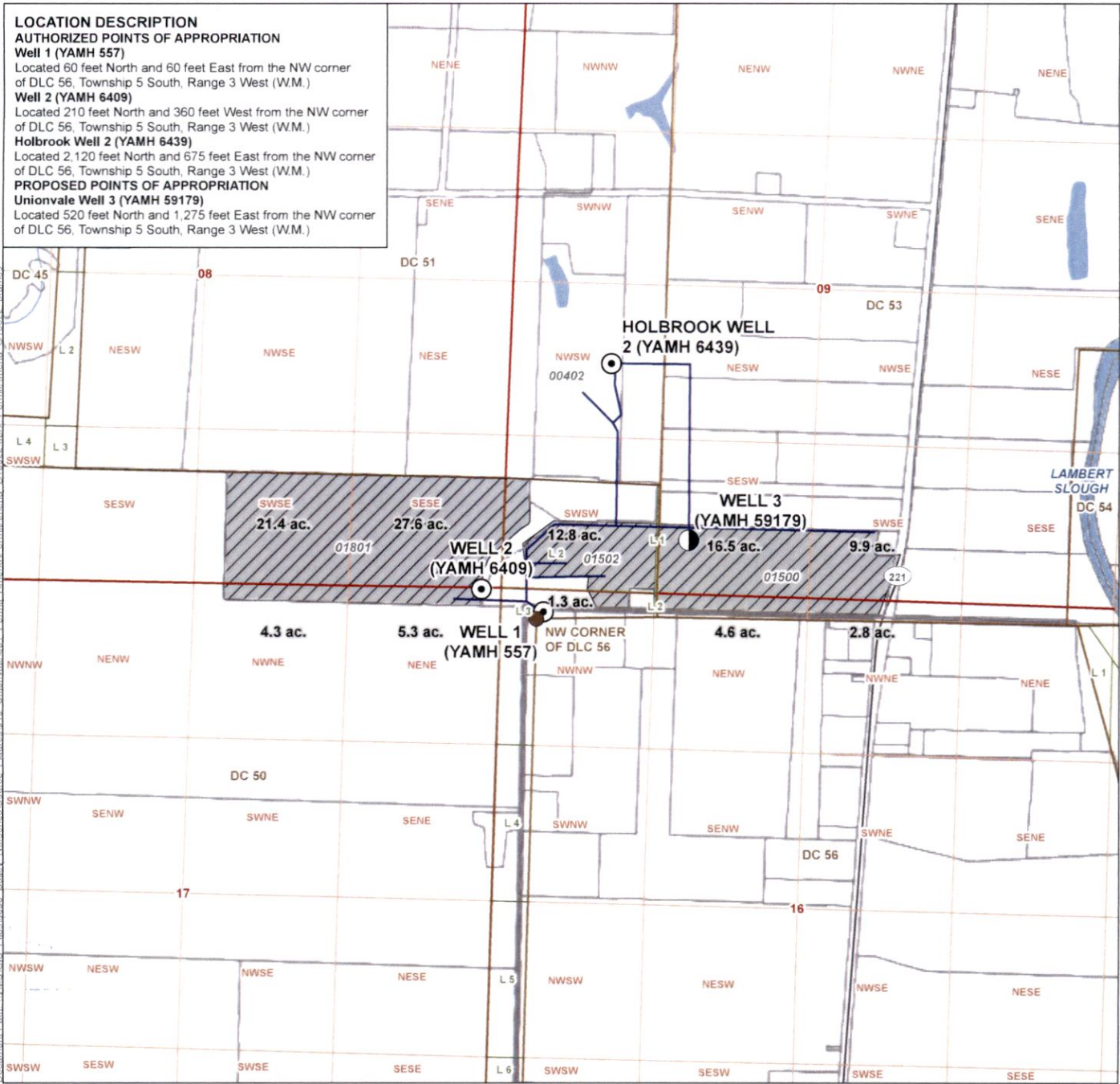
Note to Local Government Representative:
 Please complete this form and return it to the applicant. **For new water right applications only**, if you are unable to complete this form while the applicant waits, you may complete this receipt and return it to the applicant. If you sign the receipt, you will have 30 days from the date of OWRD's Public Notice of the application to submit the completed Land Use Information Form to Oregon Water Resources Department. Please note while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for all other applications.

Applicant Name: _____

Staff Name: _____ Title: _____

Staff Signature: _____ Date: _____

Governmental Entity: _____ Phone: _____



LEGEND

- ⊙ Authorized Point of Appropriation (POA)
- ◐ Proposed Point of Appropriation (POA)
- Conveyance Line
- ▨ Place of Use (POU) (106.5 ac)
- All Other Features**
- Tax Lot
- ▭ Donation Land Survey (DLC)
- Government Lot (GL)
- ↗ Major Road
- ~ Watercourse
- ☁ Waterbody

**Application for Permit Amendment
 in the Name of Carlton Nursery Co. LLC.
 Authorized Place of Use and Authorized/
 Proposed Points of Appropriation**

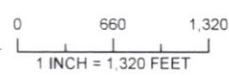
Permit G-18322

Township 5 South, Range 3 West (W.M.)

Received
 MAY 04 2026

DISCLAIMER
 This map was prepared for the purpose of identifying the location of a water right only and it is not intended to provide legal dimensions or location of property ownership lines.
 Date: March 12, 2026
 Data Sources: BLM, ESRI, OWRD, USGS

OWRD



14854 -

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MAY 04 2026

OWRD

Attachment D

Well Logs

YAMH 557 - Well 1

YAMH 6409 - Well 2

YAMH 6439 - Holbrook Well 2

YAMH 59179 - Unionvale Well 3 (Proposed)

Application for Permit Amendment - Carlton Nursery Co. LLC.

YAMH 6409

RECEIVED

SEP 15 1986

Carlton Plants Nursery
Well Log

**WATER RESOURCES DEPT
SALEM, OREGON**

0	2	Clay, sticky, dark green
2	8	Clay, greyish brown, firm
8	15	Clay, blue, sandy-silty
15	19	Clay, blue & dark brown, some sandy-silty
19	26	Clay, grey, blue & brown streaked, some sandy-silty
26	52	Clay, dark grey, soft
52	55	Sand, black, medium
55	61	Clay, blue-grey, sticky
61	67	Clay, dark grey, soft
62	71	Clay, brown, sticky
71	77	Clay, brown, medium, fine sandy
77	78	Clay, brown, sticky
78	79	Clay, light brown, yellow
79	83	Clay, blue, fine sandy
83	90	Sand, black, medium-fine w/wood
90	92	Clay, blue, soft, sandy w/wood
92	95	Sand, medium-coarse w/wood & some clay
95	100	Clay, blue w/wood & medium-coarse, sand
100	102	Clay, blue w/wood
102	104	Clay, blue, medium
104	107	Clay, dark grey, soft
107	118	Clay, blue-green, firm
118	128	Clay, green, firm
128	137	Clay, brown & grey streaked, fine sandy
137	143	Clay, greenish-brown, medium, sandy
143	150	Clay, grey & brown streaked, firm
150	153	Clay, green & brown steaked, firm
153	155	Clay, grey, firm
155	158	Clay, dark brown, medium
158	161	Clay, brown & grey, medium
161	163	Clay, light brown
163	170	Clay, light brown & grey, medium
170	183	Clay, grey & brown, medium
183	190	Clay, grey
190	194	Clay, blue-green, flakey
194	198	Clay, green, fine sandy, medium
198	201	Clay, brown & green, fine sandy, medium
201	217	Clay, blue-green, firm
217	222	Clay, brown & grey streaked
222	230	Clay, grey, firm
230	232	Clay, grey & brown streaked
232	239	Clay, grey
239	240	Clay, brown, medium-soft
240	244	Clay, grey, medium
244	248	Clay, grey & brown steaked
248	249	Clay, light brown
249	252	Gravel, cemented 1" minus, rusty
252	261	Gravel, 2" minus, cemented, hard

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MAY 04 2026

OWRD



YAMH 6409

Water, Food & Research Lab, Inc.

Laboratory: 13015 S.W. Pacific Hwy., Tigard, Oregon 97223
Mailing Address: P.O. Box 19700, Portland, Oregon 97219
Telephone (503) 639-9311

RECEIVED

SEP 15 1986

WATER RESOURCES DEPT
SALEN, OREGON

SCHNEIDER EQUIPMENT COMPANY, INC.
21881 RIVER ROAD N.E.
ST. PAUL, OR 97137

SAMPLE NO # 3509

LOCATION: DAYTON

CHEMICAL CONTAMINANTS LABORATORY REPORT
***** 23 MAY 1986 *****

SAMPLE: WATER SAMPLE FROM DAYTON

DATE COLLECTED: 05-07-86

DATE RECEIVED: 05-07-86 BY MSE

CONTAMINANT *****	METHOD *****	LIMIT *PPM*	RESULTS * ****PPM****	ANAL DATE *****	ANALYST *****
PH PH	SM-423	6 to 9	7.39	05-07-86	DSM
HARDNESS	SM-314	250	1,283.0	05-07-86	DSM
TOTAL SOLIDS	SM-209-A	500	4,145.0	05-08-86	DSM
CHLORIDE (Cl)	SM-407	250	1,850.0	05-07-86	DSM
ALKALINITY	SM-403		120.0	05-07-86	PBS
TOTAL DISSOLVED SOLIDS	205		3,850.0	05-07-86	PBS

< = LESS THAN OR NONE DETECTED PARTS PER MILLION = MILLIGRAM PER LITER

CERTIFIED BY:

REFERENCE LIMITS ABOVE FOR DRINKING WATER.

DONALD S. MAY
Analytical Chemist
CHEM LAB SUPV (EPA/OSHD #24)

Received
MAY 04 2026

OWRD

CERTIFIED

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 MAY 8 1969

YAMH 6439 State Well No. 5/3W-9cb State Permit No.

STATE ENGINEER

(1) OWNER:

Name Joe Hollbrook Address Rt 1 Bx 140 Dayton

(2) TYPE OF WORK (check):

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

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

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

(4) PROPOSED USE (check):

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

CASING INSTALLED:

10" Diam. from 0 ft. to 100 ft. Gage 14

PERFORATIONS:

Type of perforator used Torch Size of perforations 1/4 in. by 6 in. 480 perforations from 40 ft. to 80 ft.

(7) SCREENS:

Well screen installed? [] Yes [x] No

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

(8) WATER LEVEL: Completed well.

Static level 15 ft. below land surface Date 4-1-69

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? [x] Yes [] No If yes, by whom? Miller Yield: 250 gal./min. with 45 ft. drawdown after 8 hrs.

(10) CONSTRUCTION:

Well seal—Material used cement Depth of seal 20 ft. Diameter of well bore to bottom of seal 16 in. Were any loose strata cemented off? [] Yes [x] No Depth

(11) LOCATION OF WELL:

County Yamhill Driller's well number 123 1/4 Section 9 T. 55 R. 3 W W.M.

Bearing and distance from section or subdivision corner

(12) WELL LOG:

Diameter of well below casing 0

Depth drilled 140 ft. Depth of completed well 100 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 as drilling proceeds. Note drilling rates.

Table with columns: MATERIAL, From, To, SWL. Rows include: top soil (0-2), brown clay (2-25), blue clay (25-47), black sand (47-80), blue clay (80-140).

Received

MAY 04 2026

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Work started 3-16 1969 Completed 4-1 1969

Date well drilling machine moved off of well 4-1 1969

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] Robert S. Hubbard Date 5-7, 1969 (Drilling Machine Operator)

Drilling Machine Operator's License No. 337

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 Blue Water Drilling Co (Person, firm or corporation) (Type or print)

Address Rt 1 Bx 75 Dayton

[Signed] Robert S. Hubbard (Water Well Contractor)

Contractor's License No. 417 Date 5-7, 1969

STATE OF OREGON
WATER SUPPLY WELL REPORT

YAMH 59179

WELL I.D. LABEL# L 147396
START CARD # 1058241
ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

2/15/2023

(1) LAND OWNER

Owner Well I.D. UNIONVALE #3
First Name _____ Last Name _____
Company BAILEY NURSERY
Address 14301 SE WALLACE ROAD
City DAYTON State OR Zip 97114

(2) TYPE OF WORK

New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stil Plstc Wld Thrld
Material From To Amt sacks/lbs
Seal: _____

(3) DRILL METHOD

Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other

(4) PROPOSED USE

Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 135.80 ft. Special Standard (Attach copy)

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amt	sacks/lbs
12	0	239	Bentonite Chips	0	41	56	S
						Calculated	23.25
			Cement with 2% Bentn	41	71	35	S
						Calculated	8.62

How was seal placed: Method A B C D E
 Other BENT Poured-PROBED-HYL
Backfill placed from 195 ft. to 239 ft. Material CLAY SLOUGH
Filter pack from 71 ft. to 135.8 ft. Material SILICA SAND size 8/12
Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stil	Plstc	Wld	Thrld
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	X	2	112.8	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	8		127.8	135.8	.250	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia 12 From + 0 To 239

(7) PERFORATIONS/SCREENS

Perforations Method _____
Screens Type v-wire wrap Material stainless

Perf/Screen	Casing/Screen	Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/pipe size
Screen	Casing	8	112.8	127.8	.04			8

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
160	36	110	4

Temperature 53 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 249 ppm
From 203 To 219 Description salt water Amount 1700 Units ppm

(9) LOCATION OF WELL (legal description)

County YAMHILL Twp 5.00 S N/S Range 3.00 W E/W WM
Sec 9 SE 1/4 of the SW 1/4 Tax Lot 1500
Tax Map Number _____ Lot _____
Lat _____ " or 45.14458500 DMS or DD
Long _____ " or -123.06705800 DMS or DD
 Street address of well Nearest address
16040 SE UNIONVALE ROAD DAYTON, OR 97114

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	2/6/2023		38.4

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found 71.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
9/12/2022	71	113	10		58
9/12/2022	113	127	200		58
9/12/2022	203	219	100		58

(11) WELL LOG

Ground Elevation _____

Material	From	To
top soil	0	1
clay brwn silty	1	27
clay gray silty	27	35
clay gray some sandy	35	71
clay gray stiff occ sandy	71	113
sand blk fine to med w/few gravels and some silt	113	127
clay gray sandy	127	129
clay gray/green stiff occ sandy	129	203
clay gray sandy soft	203	205
sand fine silty	205	219
clay gray soft sandy	219	223
clay gray/green stiff	223	226
siltstone green soil	226	239

Received MAY 04 2026
OWRD

Date Started 8/30/2022 Completed 2/6/2023

(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. Materials used and information reported above are true to the best of my knowledge and belief.

License Number _____ Date _____
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. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1483 Date 2/15/2023
Signed JOHN STADELI (E-filed)
Contact Info (optional) Arrow Drilling 503-538-4422

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

YAMH 59179

2/15/2023

Received
MAY 04 2026

Map of Hole

OWRD

STATE OF OREGON
WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)988-0900



LOCATION OF WELL

Latitude: 45.14458500 Datum: WGS84

Longitude: -123.06705800

Township/Range/Section/Quarter-Quarter Section:

WM5.00S3.00W9SESW

Address of Well:

16040 SE UNIONVALE ROAD DAYTON, OR 97114

Well Label: 147396

Printed: February 15, 2023

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



Received
MAY 04 2026
OWRD

Attachment E

Secretary of State Assumed Business Name Amendment
Application for Permit Amendment - Carlton Nursery Co. LLC.



Assumed Business Name - Amendment

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200 Fax: (503) 376-4381

Complete only the sections that you are updating.

To review current information, please go to: sos.oregon.gov/bizsearch

REGISTRY NUMBER: 365972-84

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

1. CURRENT BUSINESS NAME: CARLTON NURSERY COMPANY

2. NEW BUSINESS NAME: (If changed, \$50 fee required)

3. DESCRIPTION OF BUSINESS:

4. PRINCIPAL PLACE OF BUSINESS: (Street Address, City, State, Zip)

1325 BAILEY ROAD, NEWPORT, MINNESOTA 55055

Received

MAY 04 2026

5. NAME OF AUTHORIZED REPRESENTATIVE: (One name only) CONTINUING () or NEW (x)

BAILEY NURSERIES, INC.

OWRD

6. MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE:

1325 BAILEY ROAD, NEWPORT, MINNESOTA 55055

7. REGISTRANTS/OWNERS: (List name and publicly available street address of new registrants)(Attach separate sheet if needed)

a. NEW REGISTRANTS/OWNERS:	Street Address	City	State	Zip
BAILEY NURSERIES, INC.,	1325 BAILEY ROAD,	NEWPORT,	MINNESOTA	55055

b. WITHDRAWING REGISTRANTS/OWNERS:

CARLTON NURSERY COMPANY, LLC, 14301 SE WALLACE RD, DAYTON, OREGON 97114

8. CURRENT REGISTRANTS/OWNERS ADDRESS CHANGE ONLY: (This section is only for registrant address changes)(Attach separate sheet if needed)

Registrant Name	Street Address	City	State	Zip
-----------------	----------------	------	-------	-----

9. COUNTIES:
- | | | | | | |
|--|------------------------------------|-------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> Baker | <input type="checkbox"/> Crook | <input type="checkbox"/> Harney | <input type="checkbox"/> Lake | <input type="checkbox"/> Morrow | <input type="checkbox"/> Union |
| <input type="checkbox"/> Benton | <input type="checkbox"/> Curry | <input type="checkbox"/> Hood River | <input type="checkbox"/> Lane | <input type="checkbox"/> Multnomah | <input type="checkbox"/> Wallowa |
| <input checked="" type="checkbox"/> ALL COUNTIES (Statewide) | <input type="checkbox"/> Clackamas | <input type="checkbox"/> Deschutes | <input type="checkbox"/> Jackson | <input type="checkbox"/> Lincoln | <input type="checkbox"/> Polk |
| | <input type="checkbox"/> Clatsop | <input type="checkbox"/> Douglas | <input type="checkbox"/> Jefferson | <input type="checkbox"/> Linn | <input type="checkbox"/> Sherman |
| | <input type="checkbox"/> Columbia | <input type="checkbox"/> Gilliam | <input type="checkbox"/> Josephine | <input type="checkbox"/> Malheur | <input type="checkbox"/> Tillamook |
| | <input type="checkbox"/> Coos | <input type="checkbox"/> Grant | <input type="checkbox"/> Klamath | <input type="checkbox"/> Marion | <input type="checkbox"/> Umatilla |
| | | | | <input type="checkbox"/> Yamhill | |

10. SIGNATURE(S): New Registrants must sign. If any Registrants are WITHDRAWING, withdrawing Registrants or Authorized Representative must sign. I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

Signature:

[Handwritten Signature]

Printed Name:

JONATHAN BARTCH, WITHDRAWING AUTH. REP.
JOHN BAILEY, AUTH. REP. OF NEW REGISTRANT

CONTACT NAME: (To resolve questions with this filing)

HEATHER WIGHT-AXLING

PHONE NUMBER: (Include area code)

206 757-8168

FEES

If Changing Business Name \$50
No Fee For Other Changes

Processing Fees are nonrefundable. Please make check payable to "Corporation Division". Free copies are available at sos.oregon.gov/business using the Business Name Search program.