### Application for a Permit to Use

## Groundwater



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

### **SECTION 1: APPLICANT INFORMATION AND SIGNATURE**

Applicant				
NAME				PHONE (HM)
S.U.E. MANAGEMENT, LLC				
PHONE (WK)	CEL	L		FAX
	(54	1) 990-178	9	
ADDRESS				
PO Box 34				
CITY	STATE	ZIP	E-MAIL*	
LEBANON	OR	97355		
Organization				
NAME			PHONE	FAX
ADDRESS				CELL
CITY	STATE	ZIP	E-MAIL*	
Agent – The agent is authorized to represent the	ne annli	cant in all r	natters relating to this and	dication
AGENT / BUSINESS NAME	те арри	carre iii aii i	PHONE	FAX
WILL MCGILL SURVEYING, LLC			(503) 931-0210	1700
ADDRESS			(000)0010110	CELL
15333 PLETZER RD. SE				(503) 510-3026
CITY	STATE	ZIP	E-MAIL*	(300) 310 3020
TURNER	OR	97392	WILLMCGILL.SURVEYING@GM	IAIL.COM
Note: Attach multiple copies as needed				
* By providing an e-mail address, consent is give	en to re	ceive all co	rrespondence from the De	epartment electronically, (Paper
copies of the proposed and final order documen				Alle arm on an arm
			,	RECEIVED
By my signature below I confirm that I und	lerstan	d:		20T a W
<ul> <li>I am asking to use water specifically as</li> </ul>	describ	ed in this a	pplication.	OCT 2 7 2022
<ul> <li>Evaluation of this application will be ba</li> </ul>	ased on	informatio	n provided in the applicati	on.
<ul> <li>I cannot use water legally until the Water</li> </ul>	ter Reso	urces Depa	artment issues a permit.	OWRD
<ul> <li>Oregon law requires that a permit be is</li> </ul>	ssued be	efore begin	ning construction of any p	roposed well, unless the use is
exempt. Acceptance of this application	does no	ot guarante	ee a permit will be issued.	
<ul> <li>If I get a permit, I must not waste wate</li> </ul>	r.			
<ul> <li>If development of the water use is not</li> </ul>	accordi	ng to the te	erms of the permit, the pe	rmit can be cancelled.
<ul> <li>The water use must be compatible with</li> </ul>	n local c	omprehen	sive land-use plans.	
<ul> <li>Even if the Department issues a permit</li> </ul>	, I may l	have to sto	p using water to allow sen	ior water-right holders to get
water to which they are entitled.				
I (we) affirm that the information conta	ained in	this appl	ication is true and accu	rate.
	U	drew L	enis Owner	10-25-22
Applicant Signature			Title if applicable	
Applicant signature	FIIII	ivanie and	пие п аррпсавте	Date
Applicant Signature	Print	Name and	Title if applicable	Date

### **SECTION 2: PROPERTY OWNERSHIP**

conveyed, and used.
YES, there are no encumbrances.  YES, the land is encumbered by easements, rights of way, roads or other encumbrances.
NO, I have a recorded easement or written authorization permitting access.  NO, I do not currently have written authorization or easement permitting access.  NO, written authorization or an easement is not necessary, because the only affected lands I do not own are state-owned submersible lands, and this application is for irrigation and/or domestic use only (ORS 274.040)  NO, because water is to be diverted, conveyed, and/or used only on federal lands.
<b>Affected Landowners:</b> List the names and mailing addresses of all owners of any lands that are not owned by the applicant and that are crossed by the proposed ditch, canal or other work, even if the applicant has obtained written authorization or an easement from the owner. (Attach additional sheets if necessary).

**Legal Description:** You must provide the legal description of: 1. The property from which the water is to be diverted, 2. Any property crossed by the proposed ditch, canal or other work, and 3. Any property on which the water is to be used as depicted on the map.

### **SECTION 3: WELL DEVELOPMENT**

		IF LESS THAN 1 MILE:					
WELL NO.	NAME OF NEAREST SURFACE WATER	그 하다 나는 내는 것이 그렇게 되었다고 있는 사람들이 있는 사람들이 되었다고 하는 사람들이 되는 것이 되었다. 살아 하는 이번 바람들은 경우를 하게 되었다고 했다.					
WELL 1	SOUTH SANTIAM RIVER	2350′	12'				
WELL 2	SOUTH SANTIAM RIVER	3770′	16'				
			-				

Please provide any information for your existing or proposed well(s) that you believe may be helpful in evaluating your application. For existing wells, describe any previous alteration(s) or repair(s) not documented in the attached well log or other materials (attach additional sheets if necessary).

If a sufficient yield is found, likely only one well will be drilled.

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For Department Use: App. Number:

### **SECTION 3: WELL DEVELOPMENT, continued**

Total maximum rate requested: 1.17 CFS (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

The table below must be completed for each source to be evaluated or the application will be returned. If this is an existing well, the information may be found on the applicable well log. (<u>If a well log is available, please submit it in addition to completing the table</u>.) If this is a proposed well, or well-modification, consider consulting with a licensed well driller, geologist, or certified water right examiner to obtain the necessary information.

										P	ROPOSED	JSE	
OWNER'S WELL NAME OR NO.	PROPOSED	EXISTING	WELL ID (WELL TAG) NO.* OR WELL LOG ID**	FLOWING	CASING DIAMETER	CASING INTERVALS (IN FEET)	PERFORATED OR SCREENED INTERVALS (IN FEET)	SEAL INTERVALS (IN FEET)	MOST RECENT STATIC WATER LEVEL & DATE (IN FEET)	SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL- SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FEET)
WELL 1					10"			MIN. 18'		SAND & GRAVEL	50′ +/-		
WELL 2	$\boxtimes$				10"			MIN. 18'		SAND & GRAVEL	50'+/-		

<sup>\*</sup> Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.

<sup>\*\*\*</sup> Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.



<sup>\*\*</sup> A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.

### SECTION 4: SENSITIVE, THREATENED OR ENDANGERED FISH SPECIES PUBLIC INTEREST INFORMATION

This information must be provided for your application to be accepted as complete. The Water Resources Department will determine whether the proposed use will impair or be detrimental to the public interest with regard to sensitive, threatened or endangered fish species if your proposed groundwater use is determined to have the potential for substantial interference with nearby surface waters.

To answer the following questions, use the map provided in Attachment 3 or the link below to determine whether the proposed point of appropriation (POA) is located in an area where the Upper Columbia, the Lower Columbia, and/or the Statewide public interest rules apply.

For more detailed information, click on the following link and enter the TRSQQ or the Lat/Long of a POA and click on "Submit" to retrieve a report that will show which section, if any, of the rules apply: https://apps.wrd.state.or.us/apps/misc/lkp\_trsqq\_features/

If you need help to determine in which area the proposed POA is located, please call the customer service desk

at (503) 986-0801.
<u>Upper Columbia - OAR 690-033-0115 thru -0130</u> Is the well or proposed well located in an area where the Upper Columbia Rules apply?
☐ Yes ⊠ No
If yes, you are notified that the Water Resources Department will consult with numerous federal, state, local and tribal governmental entities so it may determine whether the proposed use is consistent with the "Columbia River Basin Fish and Wildlife Program" adopted by the Northwest Power Planning Council in 1994 for the protection and recovery of listed fish species. The application may be denied, heavily conditioned, or if appropriate, mitigation for impacts may be needed to obtain approval for the proposed use.
If yes, and if the Department determines that proposed groundwater use has the potential for substantial interference with nearby surface waters:
<ul> <li>I understand that the permit, if issued, will not allow use during the time period April 15 to September 30, except as provided in OAR 690-033-0140.</li> </ul>
<ul> <li>I understand that the Department of Environmental Quality will review my application to determine if the proposed use complies with existing state and federal water quality standards.</li> </ul>
<ul> <li>I understand that I will install and maintain water use measurement and recording devices as required by the Water Resources Department, and comply with recording and reporting permit condition</li> </ul>

### Lower Columbia - OAR 690-033-0220 thru -0230

Is the well or proposed well located in an area where the Lower Columbia rules apply?

OWRD

X Yes No

requirements.

If yes, and the proposed groundwater use is determined to have the potential for substantial interference with nearby surface waters you are notified that the Water Resources Department will determine, by reviewing

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recovery plans, the Columbia River Basin Fish and Wildlife Program, and regional restoration programs applicable to threatened or endangered fish species, in coordination with state and federal agencies, as appropriate, whether the proposed use is detrimental to the protection or recovery of a threatened or endangered fish species and whether the use can be conditioned or mitigated to avoid the detriment.

If a permit is issued, it will likely contain conditions to ensure the water use complies with existing state and federal water quality standards; and water use measurement, recording and reporting required by the Water Resources Department. The application may be denied, or if appropriate, mitigation for impacts may be needed to obtain approval of the proposed use.

to obtain approval of the proposed use.	
If yes, you will be required to provide the following information, if applicable.	
Yes No The proposed use is for more than <b>one</b> cubic foot per second (448.8 gpm) at the requirements of OAR 690, Division 86 (Water Management and Conservation Plans).	nd is not subject to
If yes, provide a description of the measures to be taken to assure reasonably efficience:	ent water
A water use measuring device will be installed and equipment will be kept in good o	perating
condition to eliminate waste.	
Statewide - OAR 690-033-0330 thru -0340	HECEIVED
Is the well or proposed well located in an area where the Statewide rules apply?	OCT 2 7 2022
∑ Yes ☐ No	RECEIVED OCT 2 7 2022 OWRD
If yes, and the proposed groundwater use is determined to have the potential for substant	tial interference
with nearby surface waters you are notified that the Water Resources Department will dete	ermine whether the
proposed use will occur in an area where endangered, threatened or sensitive fish species a	
Water Resources Department, Department of Fish and Wildlife, Department of Environment	
Department of Agriculture will recommend conditions required to achieve "no loss of essential by the state of essential by the essential by the state of essential by the stat	
threatened and endangered (T&E) fish species," or "no net loss of essential habitat of sensit	
If conditions cannot be identified that meet the standards of no loss of essential T E fish hab	
essential S fish habitat, the agencies will recommend denial of the application unless they co	Juctude that the

### **SECTION 5: WATER USE**

proposed use would not harm the species.

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Irrigation	Apr. 1 – Sep. 30	233.75

For irrigation use only: Please indicate the number of	orimary, supplement	al and/or nurse	ry acres to be irrigate	ed ( <i>must match map</i> ).
Primary: <u>93.5</u> Acres	Supplemental:	Acres	Nursery Use:	Acres
If you listed supplemental acres	s, list the Permit or C	ertificate numb	er of the underlying	primary water right(s):
Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 233.75 af				

- If the use is municipal or quasi-municipal, attach Form M
- If the use is **domestic**, indicate the number of households: (Exempt Uses: Please note that 15,000 gallons per day for single or group domestic purposes and 5,000 gallons per day for a single industrial or commercial purpose are exempt from permitting requirements.)
- If the use is mining, describe what is being mined and the method(s) of extraction (attach additional sheets if necessary):

SE	CTION 6: WATER MANAGEMENT	
Α.	Diversion and Conveyance What equipment will you use to pump water from your well(s)?	RECEIVE
	Pump (give horsepower and type): 20 HP Submersible  Other means (describe):	OCT 2 7 2022 OWRD
	Provide a description of the proposed means of diversion, construction, and operation of the works and conveyance of water. A 20 HP submersible pump would deliver water through b mainline to a big gun or linear.	
В.	Application Method What equipment and method of application will be used? (e.g., drip, wheel line, high-pressed (attach additional sheets if necessary) Big gun, Linear	ure sprinkler)
c.	Conservation  Please describe why the amount of water requested is needed and measures you propose to waste; measure the amount of water diverted; prevent damage to aquatic life and riparian	

the discharge of contaminated water to a surface stream; prevent adverse impact to public uses of affected surface waters (attach additional sheets if necessary).

The amount of water requested is standard for irrigation. The system will be equipped with a measuring device and care will be taken to keep the system in good operating condition to avoid any adverse impacts.

### **SECTION 7: PROJECT SCHEDULE**

- a) Date construction will begin: Upon permit issuance
- b) Date construction will be completed: Request standard 5-year completion time
- c) Date beneficial water use will begin: Upon permit issuance

### **SECTION 8: RESOURCE PROTECTION**

acti per	ranting permission to use water the state encourages, and in some instances requires, careful control of vities that may affect adjacent waterway or streamside area. See instruction guide for a list of possible mit requirements from other agencies. Please indicate any of the practices you plan to undertake to prote er resources.
$\boxtimes$	Water quality will be protected by preventing erosion and run-off of waste or chemical products. Describe: Care will be taken in operating the system and it will be kept in good operating condition with proper maintenance.
$\boxtimes$	Excavation or clearing of banks will be kept to a minimum to protect riparian or streamside areas.  Note: If disturbed area is greater than one acre, applicant should contact the Oregon Department of Environmental Quality to determine if a 1200C permit is required.
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For Department Use: App. Number:

Describe planned actions and additional permits required clearing will be necessary for this project.	juired for project implement	ation: <u>No excavation or</u>						
Other state and federal permits or contracts require List:	ed and to be obtained, if a wa	ater right permit is granted:						
SECTION 9: WITHIN A DISTRICT								
Check here if the point of appropriation (POA) or pla irrigation or other water district.	ce of use (POU) are located v	within or served by an						
Irrigation District Name Address								
City State Zip								
		A						

### **SECTION 10: REMARKS**

Use this space to clarify any information you have provided in the application (attach additional sheets if necessary).



### **Minimum Requirements Checklist**

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.140)

### Include this checklist with the application

Check that each of the following items is included. The application will be returned if all required items are not included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900.

Please submit the original application and signatures to the Water Resources Department. Applicants are encouraged to keep a copy of the completed application.

$\boxtimes$	SECTION	1: Applicant Ir	nformation and Signatu	re		
	SECTION	12: Property O	wnership			
$\boxtimes$	SECTION	13: Well Development	opment			
$\boxtimes$	SECTION	4: Sensitive, T	hreatened or Endanger	ed Fish Species Public	Interest Infor	mation
$\boxtimes$	SECTION	15: Water Use				
$\boxtimes$	SECTION	l 6: Water Man	agement			
$\boxtimes$	SECTION	7: Project Sch	edule			
$\boxtimes$	SECTION	8: Resource P	rotection			
$\boxtimes$	SECTION	19: Within a Dis	strict			
$\boxtimes$	SECTION	I 10: Remarks				
Incl	ude the fo	ollowing additional	items:			
$\boxtimes$	Land Use or signed		with approval and signa	ture of local planning	department (	must be an original)
$\boxtimes$	crossed b		of: (1) the property fro			
X	Fees - Am	nount enclosed: \$ 3	,410.00			
			chedule at www.oregor	.gov/owrd or call (503	3) 986-0900.	
$\boxtimes$		includes the follow		,		_
	wap that	merades the ronow	ang reems.			RECEIVED
	$\boxtimes$	Permanent quality				
	$\boxtimes$	Even map scale no	t less than 4" = 1 mile (	example: 1" = 400 ft, 1	L" = 1320 ft, et	c.OCT 2 7 2022
	$\boxtimes$	North Directional S	Symbol			OWRD
	$\boxtimes$	Township, Range,	Section, Quarter/Quart	er, Tax Lots		W MORP
	$\boxtimes$	Reference corner	on map			
	$\boxtimes$	Location of each d north/south and e	iversion, by reference t ast/west)	o a recognized public	land survey co	orner (distances
	$\boxtimes$	Indicate the area	of use by Quarter/Quar	ter and tax lot identifie	ed clearly.	
	$\boxtimes$	Number of acres p supplemental irrig	er Quarter/Quarter and ation, or nursery	d hatching to indicate	area of use if t	for primary irrigation,
	$\boxtimes$	Location of main c	anals, ditches, pipeline	s or flumes (if well is o	utside of the a	area of use)

### Business Registry Business Name Search

### **New Search**

## **Business Entity Data**

10-24-2022 08:39

Registry Nbr	Entity Type	Entity Status	Jurisdiction	Registry Date	Next Renewal Date	Renewal Due?
1157705-96	DLLC	ACT	OREGON	10-29-2015	10-29-2022	YES
Entity Name	S.U.E. MA	NAGEME	NT, LLC			
Foreign Name						

### Online Renewal:

Renew Online

Click here to generate and print an annual report.

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### **New Search**

### **Associated Names**

Туре	PPB PRINCIPAL BUSINESS		ACE OF					
Addr 1	35401 BREWSTI	ER R	D					
Addr 2								
CSZ	LEBANON	OR	97355	Country	UNITED STA	TES OF AN	MERICA	

Please click here for general information about registered agents and service of process.

Туре	AGT	REGISTE	RED	AGENT		Start Da	ate	10-29- 2015	Resign Date	
Name	F			JAMES HEA	LY					
Addr 1	201 1	ST AVE W	V							
Addr 2										
CSZ	ALB	ANY	OR	97321		Count	try U	INITED STA	TES OF AMERICA	1

Туре	MAL MAILING	ADI	PRESS								
Addr 1	C/O F JAMES H	C/O F JAMES HEALY									
Addr 2	201 1ST AVE W	7									
CSZ	ALBANY	OR	97321		Country	UNITED STA	TES OF AMERICA				

Туре	MGR MANAG	ER						Resign	Date	
Name	ANDREW		J LE	WIS						
Addr 1	PO BOX 34									
Addr 2										
CSZ	LEBANON	OR	97355	T	Cou	ntry	UNITED STA	TES OF A	MERICA	

### **New Search**

## Name History



### THIS SPACE RESERVED FOR RECORDER'S USE

After reco	ording return to:
S.U.E. N	Management, LLC, an Oreogn Limited Liability
Compan	
PO Box	34
Lebanor	, OR 97355
S.U.E. N Compan	
PO Box	34
Lebanor	OR 97355

LINN COUNTY, OREGON 2020-27237 D-WD 12/29/2020 01:49:01 PM 540.00 \$11.00 \$10.00 \$60.00 \$19.00 \$140.00

I, Steve Druckenmiller, County Clerk for Linn County, Oregon, certify that the instrument identified herein was recorded in the Clerk

Steve Druckenmiller - County Clerk

#### STATUTORY WARRANTY DEED

### Duncan & Moore Logging Company, an inactive corporation,

Grantor(s), hereby convey and warrant to

#### S.U.E. Management, LLC, an Oregon Limited Liability Company,

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

#### See Attached Exhibit 'A'

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

11S-02W-11 01300

The true and actual consideration for this conveyance is \$715,000.00.

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



392949 AM

Page 2 Statutory Warranty Deed Escrow No. 392949AM

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 DESCRIBEDIN 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 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

LAWS 2009, AND SECTIONS 2 TO 7, CHAPTE	TER 8, OREGON LAWS 2010.
Dated this 23 day of Dec.	2020
Duncan & Moore Logging Company, an inactive co	orporation
BY:	
Albert Wayne Duncan and Eileen Frances Duncan I	de de la companya de la companya de de la companya
Albert and Eileen Duncan Family "B" Trust, Owner  Believe Trustee Eileen Frances Duncan, Trustee Con Conce by Albert Trustee  Frances Duncan, Trustee  Frances Duncan, Trustee  Frances Duncan, Trustee  Joan A. Moore, Owner  by Diane C. Peterson, her attorney in fact	e:_12/28/2020 RECEIVE
See attached Exhibit "B"	
Sharon L. Greer, Owner Date:	128-20 128-20
State of <u>U1^2</u> } ss. County of <u>L1nn</u> }  On this <u>28</u> day of December, <u>2020</u> , be said state, personally appeared Eileen Frances Dunc Revocable Trust, and acknowledged to me that he/st	efore me, Cassie Nichole Ke charta Notary Public in and for can, Trustee of the Albert Wayne Duncan and Eileen Frances Duncan Joint she/they executed the same.
IN WITNESS WHEREOF, I have hereunto set my labove written.  Cassic Vielle Cu  Notary Public for the State of OR  Residing at: Lebanon OR  Commission Expires: Ole 30 2024	hand and affixed my official seal the day and year in this certificate first  OFFICIAL SEAL  CASSIE NICHOLE KEPHART  NOTARY PUBLIC - OREGON  COMMISSION NO. 1001414  MY COMMISSION EXPIRES JUNE 30, 2024

Escrow No. 392949AM
State of OR ss. County of Linn
On this 28 day of December, 2020 , before me, Cassie Nichole Kephar's Notary Public in and for said state, personally appeared Eileen Frances Duncan, Trustee of the Albert and Eileen Duncan Family "B" Trust, and acknowledged to me that he/she/they executed the 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.
Casue Vielnik Vii  Notary Public for the State of OR  Residing at: Lebanon, OR  Commission Expires: 06/30/2024  OFFICIAL SEAL  CASSIE NICHOLE KEPHART  NOTARY PUBLIC - OREGON  COMMISSION NO. 1001414  MY COMMISSION EXPIRES JUNE 30, 2024
State of Arizona ss. County of Maritona
On this
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.
Notary Public for the State of Arizona Residing at: Morio Qa Courty Commission Expires: O71141 2024  State of DR ss. County of Linn  On this ZB day of December, 2020 before me, Cass C Nichole Rephart a Notary Public in and for said state, personally appeared Sharon L. Greer known or identified to me to be the person whose name is subscribed to the
State of DR ss.  County of Linn
On this <u>28</u> day of December, <u>2020</u> , before me, <u>Cassic Nichole Kephart</u> a Notary Public in and for said state, personally appeared Sharon L. Greer known or identified to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she/they executed the 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.  Casse Vielle Collins of OR  Residing at: Lebanon OR  Commission Expires: Old 12014
OFFICIAL SEAL  CASSIE NICHOLE KEPHART  NOTARY PUBLIC - OREGON  COMMISSION NO. 1001414  MY COMMISSION EXPIRES JUNE 30, 2024



#### EXHIBIT 'A'

File No. 392949AM

The following described real property situated in the County of Linn and State of Oregon, to-wit:

TRACT I: Beginning on the Eastern line of the right of way of the Oregonian Railway Company limited, now the Southern Pacific Railroad Company, at a stone 10x10x16 inches, which is North 89°56′ East and 5.80 chains distant from the Southeast corner of the Northeast quarter of the Southwest quarter of Section 11 in Township 11 South of Range 2 West of the Willamette Meridian, Oregon, and running thence North 89°56′ East 7.32 chains, thence North 20 chains, to the North line of the Southeast quarter of said Section 11, thence West 12.68 chains to the said line of said right of way, thence South 15° East along said line of said right of way 20.64 chains to the place of beginning.

TRACT II: Beginning at a point which is North 20 chains distant and North 89°56' East 13.14 chains distant from the quarter section corner between Sections 11 and 14, in Township 11 South of Range 2 West of the Willamette Meridian, Oregon, and from thence running North 89°56' East 26.92 chains; thence North 89°49' East 10.23 chains; thence North 20.21 chains; thence South 89°49' West 10.23 chains; thence South 89°56' West 26.92 chains; thence South 20.21 chains to the place of beginning.

OCT 27 2022 OWRD

#### DURABLE POWER OF ATTORNEY

#### EFFECTIVE IMMEDIATELY

JOAN A. MOORE, the undersigned individual, domiciled and residing in the State of Washington, designates the following named person as Attorney In Fact to act for the undersigned as the principal. All previous General Powers of Attorney executed by the undersigned are hereby revoked.

1. Designation. **DIANE C. PETERSON** is designated as Attorney in Fact for the principal. If she is unwilling or unable to act, then **JAMES E. MCFARLAND**, **III** is appointed to act as Alternate Attorney in Fact. If he is unwilling or unable to act, then **SHEREE A. CORRIGAN** is appointed to act as Alternate Attorney in Fact. If she is unwilling or unable to act, then **JOAN A. TOMLINSON** is appointed to act as Alternate Attorney in Fact.

#### 2. Powers.

- (a) General Powers. The Attorney in Fact, as fiduciary, shall have all powers of an absolute owner over the assets and liabilities of the principal, whether located within or without the State of Washington. Without limiting the powers herein, the Attorney in Fact shall have full power, right and authority to sell, lease, rent, exchange, mortgage and otherwise deal in and with any and all property, real or personal, belonging to the principal the same as if he or she were the absolute owner thereof. In addition, the Attorney in Fact shall have specific powers including, but not limited to the following:
- (i) Real Property. The Attorney in Fact shall have authority to purchase, take possession of, lease, sell, convey, exchange release and encumber real property or any interest in real property.
- (ii) Personal Property. The Attorney in Fact shall have authority to purchase, receive, take possession of, lease, sell, assign, endorse, exchange, release, mortgage and pledge personal property or any interest in personal property.
- (iii) Claims Against Principal. The Attorney in Fact shall have authority to pay, settle, compromise or otherwise discharge any and all claims of liability or indebtedness against the Principal and, in so doing, may use any of the assets of the Attorney in Fact and obtain reimbursement out of the Principal's funds or other assets.
- (iv) Financial Accounts and Safe Deposit Box. The Attorney in Fact shall have the authority to deal with accounts and any safe deposit box maintained by or on behalf of the Principal with institutions (including, without limitation, banks, savings and loan associations, credit unions and securities dealers). This shall include the authority to maintain and close existing accounts, to open, maintain and close any safe deposit box, to open, maintain and close other accounts and to make deposits and withdrawals with respect to all such accounts.
- (v) Community Property Agreements. The Attorney in Fact shall have the authority to make, amend, alter or revoke any community property agreement, agreement as to status of property, or other document of similar import entered into by the principal and the principal's spouse.

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- [vi] Beneficiary Designations. The Attorney in Fact shall have authority to make, amend, alter or revoke any of the principal's life insurance beneficiary designations and retirement plan beneficiary designations so long as in the sole discretion of the Attorney in Fact such action would be in the best interests of the principal and those interested in the principal's estate.
- (vii) Transfers to Trust. The Attorney in Fact shall have the authority to make transfers of the principal's property, both real and personal, to any trust created by the principal of which the principal is the primary beneficiary during the principal's lifetime.
- (viii) Legal Proceedings. The Attorney in Fact shall have authority to participate in any legal action in the name of the Principal or otherwise. This shall include (1) actions for attachment, execution, eviction, foreclosure, indemnity and any other proceeding for equitable or injunctive relief; and (2) legal proceedings in connection with the authority granted in this instrument.
- (ix) Disclaimer. The Attorney in Fact shall have the authority to disclaim any interest, as defined in RCW 11.86.010, in any property to which the Principal would otherwise succeed, by Will, community property agreement or otherwise and to decline to act or resign if appointed or serving as an officer, director, executor trustee or other fiduciary.
- (b) Gifting Power. The Attorney in Fact shall have the power to make any gifts, whether outright or in trust, during the principal's lifetime which are consistent with the most current Will executed by or on behalf of the principal or testamentary provisions of the most current intervivos trust executed by or on behalf of the principal.
- 3. Intent to Obviate Need for Guardianship. It is the principal's intent that the power given to the Attorney in Fact designated herein be interpreted to be so broad as to obviate the need for the appointment of a guardian for the person or estate of the principal. If the appointment of a guardian or limited guardian of the person or estate of the principal is sought, however, the principal nominates the then acting Attorney in Fact designated above, if any, as the principal's guardian or limited guardian, or if no one is then acting as Attorney in Fact, the principal nominates the persons designated above as Attorney in Fact and successor attorneys-in-fact as guardian or limited guardian, in the same order of priority.
- 4. Effectiveness. This Power of Attorney shall become effective immediately, shall not be affected by the disability or incompetence of principal, and shall continue until revoked or terminated under Sections 6 or 7, notwithstanding any uncertainty as to whether principal is dead or alive.
- 5. Duration. This Power of Attorney becomes effective as provided in Section 4 and shall remain in effect to the extent permitted by the laws of the State of Washington or until revoked or terminated under Sections 6 or 7, notwithstanding any uncertainty as to whether the principal is dead or alive.
- 6. Revocation. This Power of Attorney may be revoked, suspended or terminated in writing by the principal with written notice to the designated Attorney in Fact, and if the same has been recorded, then by recording the written instrument of revocation with the Auditor of the county where the Power of Attorney is recorded.

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#### 7. Termination.

- (a) By Appointment of Guardian. The appointment of a guardian of the estate of the principal vests in the guardian, the power to revoke, suspend or terminate this Power of Attorney as to the powers enumerated in subsections (a) and (b) of Section 2 herein.
- (b) By Death of Principal. The death of the principal shall be deemed to revoke this Power of Attorney upon actual knowledge or actual notice being received by the Attorney in Fact.
- 8. Accounting. The Attorney in Fact shall be required to account to any subsequently appointed Personal Representative.
- 9. Reliance. The designated and acting Attorney in Fact and all persons dealing with the Attorney in Fact shall be entitled to rely upon this Power of Attorney so long as neither the Attorney in Fact nor any person with whom he or she was dealing at the time of any act taken pursuant to this Power of Attorney had received actual knowledge or actual notice of any revocation, suspension or termination of the Power of Attorney by death or otherwise. Any action so taken, unless otherwise invalid or unenforceable, shall be binding on the heirs, devisees, legatees or Personal Representatives of the principal. In addition, third parties shall be entitled to rely upon a photocopy of the signed original hereof, as opposed to a certified copy of the same.
- 10. Indemnity. The estate of the principal shall hold harmless and indemnify the Attorney in Fact from all liability for acts done in good faith and not in fraud of the principal.
- Applicable Law. The laws of the State of Washington shall govern this Power of 11. Attorney.
- Execution. This Power of Attorney is signed on the 11th day of October, 2016, to become effective as provided in Section 4.

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STATE OF WASHINGTON )
) s
County of KING

I certify that I know or have satisfactory evidence that **JOAN A. MOORE** is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

NOTARY PUBLIC in and for the State of Washington, residing at Kent.

My Commission Expires: 01-10-19



4 0 4

## 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 Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

### This form is NOT required if:

- 1) Water is to be diverted, conveyed, <a href="mailto:and/or">and/or</a> used only on federal lands; OR
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or groundwater registration modification, <u>and all</u> 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.

### NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land use form and return it to the WRD. If no land use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0900.

# 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

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NAME S.U.E. MANAGEMENT, LLC		PHONE (HM)	
		5.17	
PHONE (WK) CELL (F.41) 000 1780		FAX	
(541) 990-1789 ADDRESS			
PO Box 34			
CITY STATE ZIP E-MAI	IL*		
LEBANON OR 97355			
A. Land and Location  Please include the following information for all tax lots where water wi (transported), and/or used or developed. Applicants for municipal use, substitute existing and proposed service-area boundaries for the tax-lo	or irrigation uses with	in irrigation dist	
Township Range Section ¼¼ Tax Lot # Plan Designation (e.g. Rural Residential/RR-5	Water	to be:	Proposed Land Use:
11S 2W 11 NWSE 1300 EFU NESE	☑ Diverted ☐ Con	nveyed 🛛 Used	Farming
11S 2W 12 NWSW 1300 EFU	☐ Diverted ☐ Con	nveyed 🛭 Used	Farming
	☐ Diverted ☐ Con	oveyed Used	
	☐ Diverted ☐ Cor	oveyed Used	
List all counties and cities where water is proposed to be diverted, conv Linn  B. Description of Proposed Use	veyed, and/or used or	developed: NECEN	
	ermit Amendment or Gro xchange of Water	OWF oundwater Registr	-
Source of water: Reservoir/Pond Groundwater Surface	e Water (name)		
Estimated quantity of water needed: 233.75  cubic feet per second	gallons per minute	acre-feet	
Intended use of water: Irrigation Commercial Indu	ream Domes Other	tic for hous	sehold(s)
Briefly describe:			
It is proposed to irrigate crops in tax lot 1300 with proposed wells 1 and	2.		
			20
Note to applicant: If the Land Use Information Form cannot be complete	ted while you wait alo	asa haya a local	government

**Note to applicant:** If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

## 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	on					
Land uses to be served by the proposed water regulated by your comprehensive plan. Cite ap	uses (including proposed construction oplicable ordinance section(s):	n) are allowe	ed outright or are not 310 (1)				
Land uses to be served by the proposed water approvals as listed in the table below. (Please already been obtained. Record of Action/land have been obtained but all appeal periods have	attach documentation of applicable la use decision and accompanying findin	nd use appr gs are suffic	ovals which have				
Type of Land Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Lan	Land Use Approval:				
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued				
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued				
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued				
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued				
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued				
Local governments are invited to express special la Department regarding this proposed use of water		dations to th	ne Water Resources				
NAME Kate Bentz	TITLE: A	TITLE: Assistant Planner					
SIGNATURE 4 30/25/27 SY1-967-3816 DATE: 10/25/22							
GOVERNMENT ENTITY LINN COUNT	4						
Note to local government representative: Please If you sign the receipt, you will have 30 days from Land Use Information Form or WRD may presume local comprehensive plans.	the Water Resources Department's no the land use associated with the prop	otice date to osed use of	return the completed				
	equest for Land Use Informatio		- Charles				
Applicant name:							
City or County:	Staff contact:						
Signature:	Phone CEIVED	Date:					

OCT 2 7 2022 OWRD



### RECEIVED

OCT 2 7 2022

OWRD

Date Received (Date Stamp Here)

# OWRD Over-the-Counter Submission Receipt

11.

Cilr

Applicant Name(s) &	Address:	». N. F. 1	lunguenen	The			
PO Bo	3.41	Lebano	en, OR	97.35	5 .		
Transaction Type:	Ground 1	Water	App				
Fees Received: \$	34/0:00	)	1.1				
☐ Cash	Check:		2066		*	ĸ	2
		Name(s) o	n Check:	Will M	cfill	Surveyi	ny LLC
Thank you for your si review your submitte	ubmission. Ore al as soon as po	egon Water l ossible.	Resources D	epartmen	t (Depar	tment) sta	aff will
If your submission is an acknowledgemen	determined to t letter stating	be complete your submit	e, you will re tal is comple	eceive a re	ceipt for	the fees p	paid and
If determined to be in an explanation of def	ncomplete, you ficiencies that r	ar submission nust be add	n and the acressed in ord	companyi der for the	ng fees v submitt	will be retu al to be a	urned with
If you have any quest at 503-986-0801 or 5	tions, please fe 03-986-0810.	el free to co	ntact the De	partment	's Custor		STATE OF THE PERSON
Sincerely, OWRD Customer Ser	vice Staff	, N				OCT 27	12022 RD
Submission received	by:	OW PE (Name of OW	NON (10)	· · · · · · · · · · · · · · · · · · ·	_	a ,	
Instructions for OWR	RD staff:			*	TO CHICAGO LINGOLOGIC		MC New Collection College Coll

- Complete this Submission Receipt and make two (2) copies. Place one copy with the check/cash; and place
  the other copy with the submission (i.e., the application or other document).
- Date-stamp all pages. (NOTE: Do not stamp check.)
- Give this original Submission Receipt to the applicant.
- Record Submission Receipt information on the "RECEIVED OVER THE COUNTER" log sheet.
- Fold and put one copy of the Submission Receipt with check/cash into the Safe slot. Place the other copy of the Submission Receipt with submission (application/other document) in the top drawer of filing cabinet.