DocuSign

Envelope ID: 4719A9D8-A254-4B9C-997C-C6A0B96D92	The Authoritative Copy of this record is held at na2.dod O R E G O N Oregon Water Resources Department
Request for Assignment	T25 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 WWW.oregon.gov/owrd
the Department determines that the application re not acceptable, the application and all fees s	on is incomplete, fees have not been paid, or the required documents submitted will be returned to the applicant.
f for multiple rights, a separate form and fee for ea	
Echo Ridge Farms, Inc., Arrowhea	d Farms, Inc., and Westwood Farms, Inc.
Name of Current Holder of Record) 4494 Raybell Rd NE	St. Paul OR 97137 503-932-3457
Mailing Address)	(City) (State) (Zip) (Phone #)
hereby assign <u>all my interest</u> in and to <u>the en</u> statement; (example, sold all the l	ntire application/permit/transfer order/limited license/groundwater land authorized under the right)
license/groundwater statement; (You must	ertion of application/permit/transfer order/limited t include a map showing the portion of the icense/groundwater statement to be assigned. Example, sold a
portion of the land authorized under the rig	
hereby assign <u>a portion of my interest</u> in an license/groundwater statement; (example,	nd to <u>the entire</u> application/permit/transfer order/limited adding an additional person)
Application #; Perm	nit #; Transfer Order #_ <u>T-11388, GR</u> ~1104
Limited License #	; Groundwater Statement #;
filed in the office of the Water Resources Directo	or, to:
AgWest Farm Credit	
lame of New Owner)	Salem OR 97301 503-373-3000
380 Farm Credit Dr SE Mailing Address)	(City) (State) (Zip) (Phone #)
or groundwater statement, you must prov	described in the application, permit, transfer order, limited license, ride a list of all other owners' names and mailing addresses and st letters) of your first and last names at the spot indicated below
X I hereby certify that I have notified all other transfer order, limited license, or groundwater s	er owners of the property described in this application, permit, tatement of this Request of Assignment.
Witness my hand this day of	January 20_24
(Day)	(Month) (Year)
Signature of Current Holder of Recording the Signature	J. Coleman Echo Ridge Farms, Inc.
Failure to provide any of the require	ed information will result in the return of your application.
in a second s	Receive
This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon.	The completed "Request for Assignment" FEB 0 5 2 form <i>must</i> be submitted to the Department

Fee receipt # 142.361 B For Director by Mary F. Bjork. Program Analyst in Water Rights Division. BB:

along with the recording fee of \$120.

Last updated: July 20, 2021

**Request for Assignment** 

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OWRD

PS I

Signature of Current Holder of Reco	bre		
Page 2			
10802		•	· · ·
Witness my hand this 30th	day of	, <b>20</b>	
(Day)	(Month)	(Year)	
·	DocuSigned by:		
Signature of Current Holder of Reco	Anichael (. Coleman		-
	Mitchael Coleman Arro	whead Farms, Inc.	
			4
Witness my hand this 30th	day of	, 20 24	
(Day)	(Month)	(Year)	111
	DocuSigned by:		
Signature of Current Record Holder	BORE P. Coliman		
	-89555HF4PFC6leman We	estwood Farms, Inc.	
			1.
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		the second second	
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•••	•		Received
			FEB 0 5 2024
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			OWND
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DocuSign Envelope ID: 4719A9D8-A254-4B9C-997C-C6A0B96D92A5

New Owner(s) Page 2

as filed in the office of the Water Resources Director, to:

(Name of New Owner)					
PO Box 520	St. Paul	OR	97301	503-932-3457	
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)	
And					IN
Echo Ridge Farms, Inc.					
(Name of New Owner)					
4494 Raybell Rd NE	St. Paul	OR	97137	503-932-3457	
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)	-
And		1		11	
Champoeg Farms, Inc.	4			V	
(Name of New Owner)	-				
6498 Champoeg Rd	St. Paul	OR	97137	503-633-2473	
(Mailing Address)	(City)	(State)		(Phone #)	
And					 
011-m 11C					
2Hop, LLC					
(Name of New Owner)					
(Name of New Owner)	St. Paul	OR	97137	503-932-3454	
A COLORED AND A	St. Paul (City)		97137 e) (Zip)	503-932-3454 (Phone #)	
(Name of New Owner) 6498 Champoeg Rd					
(Name of New Owner) 6498 Champoeg Rd (Mailing Address)					
(Name of New Owner) 6498 Champoeg Rd (Mailing Address) And					
(Name of New Owner) 6498 Champoeg Rd (Mailing Address) And <u>M &amp; T Coleman, LLC</u> (Name of New Owner)	(City)				Received
(Name of New Owner) 6498 Champoeg Rd (Mailing Address) And M & T Coleman, LLC		(State	?) (Zip)	(Phone #)	Received FEB 0 5 2024

New Owner(s)

Page 3

as filed in the office of the Water Resources Director, to:

And

Thomas J. Coleman (Name of New Owner)

4494 Raybell Rd NE	St. Paul	OR	97137	503-932-3457
(Mailing address)	(City)	(State)	(Zip)	(Phone #)

Received FEB 0 5 2024 OWRD

## **Request for Assignment**



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

If the Department determines that the application is incomplete, fees have not been paid, or the required documents are not acceptable, the application and all fees submitted will be returned to the applicant.

If for multiple rights, a separate form and fee for each right will be required.

Name of Current Holder of Record) 4494 Raybell Rd NE	St. Paul OR 97137 503-932-3457
Mailing Address)	(City) (State) (Zip) (Phone #)
	to <u>the entire</u> application/permit/transfer order/limited license/groundwater all the land authorized under the right)
license/groundwater statement; (Y	d to <u>a portion</u> of application/permit/transfer order/limited <u>(ou must include a map</u> showing the portion af the (limited license/groundwater statement to be assigned. Example, sold a er the right)
	est in and to the entire application/permit/transfer order/limited example, adding an additional person)
Application #	_; Permit #; Transfer Order # <u>T-11388, GR</u> -1104
Limited License #	; Groundwater Statement #;
	Salem OR 97301 503-373-3000 (City) (State) (Zip) (Phone #)
or groundwater statement, you mu	(City) (State) (Zip) (Phone #)
Mailing Address) Note: If there are other owners of the pro- or groundwater statement, you mu attach it to this form. Write the init	(City) (State) (Zip) (Phone #)
Mailing Address) Note: If there are other owners of the pro- or groundwater statement, you mu attach it to this form. Write the init X I hereby certify that I have notified transfer order, limited license, or ground	(City) (State) (Zip) (Phone #) operty described in the application, permit, transfer order, limited license, ust provide a list of all other owners' names and mailing addresses and tials (first letters) of your first and last names at the spot indicated below d all other owners of the property described in this application, permit, iwater statement of this Request of Assignment.
Mailing Address) Note: If there are other owners of the pro- or groundwater statement, you mu- attach it to this form. Write the init X I hereby certify that I have notified transfer order, limited license, or ground Witness my hand thisd (Day) Signature of Current Holder of Record	(City)       (State)       (Zip)       (Phone #)         operty described in the application, permit, transfer order, limited license, ust provide a list of all other owners' names and mailing addresses and tials (first letters) of your first and last names at the spot indicated below       Image: City of the property described in this application, permit, iwater statement of this Request of Assignment.         day of, 20       (Month)       (Year)
Mailing Address) Note: If there are other owners of the pro- or groundwater statement, you mu- attach it to this form. Write the init X I hereby certify that I have notified transfer order, limited license, or ground Witness my hand this d (Day) Signature of Current Holder of RecordTh	(City) (State) (Zip) (Phone #) operty described in the application, permit, transfer order, limited license, ust provide a list of all other owners' names and mailing addresses and tials (first letters) of your first and last names at the spot indicated below d all other owners of the property described in this application, permit, iwater statement of this Request of Assignment.
Mailing Address) Note: If there are other owners of the pro- or groundwater statement, you mu- attach it to this form. Write the init X I hereby certify that I have notified transfer order, limited license, or ground Witness my hand this d (Day) Signature of Current Holder of RecordTh	(City)       (State)       (Zip)       (Phone #)         operty described in the application, permit, transfer order, limited license, ust provide a list of all other owners' names and mailing addresses and tials (first letters) of your first and last names at the spot indicated below.       Image: Color of the property described in this application, permit, liwater statement of this Request of Assignment.         iay of

Signature of Current Holder of Record Page 2

Witness my hand this	day of			, 20	<u> </u>	
(Day)		(Month)		(Year)	)	
Signature of Current Holder of	Record:	_				
	Michae	Michael Coleman		Arrowhead Farms, Inc.		
Witness my hand this	day of			20		
(Day)		(Month)		(Year)		
Signature of Current Record Ho	lder.					
Signature of current necord no	John P.	Coleman	Westwood	d Farms, Inc.		
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					L	

Received FEB 0 5 2024 OWRD New Owner(s) Page 2

as filed in the office of the Water Resources Director, to:

Coleman Agriculture, Inc.				
(Name of New Owner)				
PO Box 520	St. Paul	OR 97301	503-932-3457	
(Mailing Address)	(City)	(State) (Zip)	(Phone #)	
And				
Echo Ridge Farms, Inc. (Name of New Owner)				
4494 Raybell Rd NE	St. Paul	OR 97137	503-932-3457	
(Mailing Address)	(City)	(State) (Zip)	(Phone #)	
And				
Champoeg Farms, Inc.				
(Name of New Owner)				
6498 Champoeg Rd	St. Paul	OR 97137	503-633-2473	
(Mailing Address)	(City)	(State) (Zip)	(Phone #)	
And				
2Hop, LLC				
(Name of New Owner)				
6498 Champoeg Rd	St. Paul	OR 97137	503-932-3454	
(Mailing Address)	(City)	(State) (Zip)	(Phone #)	
And				
M & T Coleman, LLC				
(Name of New Owner)				
4494 Raybell Rd NE	St. Paul	OR 97137	503-932-3457	
(Mailing Address)	(City)	(State) (Zip)	(Phone #)	
New Owner(s)				
	14 1			

Received

FEB 0 5 2024

OWRD

New Owner(s)

Page 3

as filed in the office of the Water Resources Director, to:

And

Thomas J. Coleman (Name of New Owner)

4494 Raybell Rd NE	St. Paul	OR	97137	503-932-3457
(Mailing address)	(City)	(State)	(Zip)	(Phone #)

Received FEB 0 5 2024 OWRD