Received

JAN 27

OWRD



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.

Request for Assignment

I, J. C. Watson Company					
(Name of Current Holder of R	ecord)				
PO Box 300	Parma	ID	83660	(208)722-5141	
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)	
hereby assign <u>all my interest</u> in and to <u>the entire</u> application/permit/transfer order/limited license/groundwater statement; (example, sold all the land authorized under the right)					
statement; (You must	include a map showing	on of application/permit/ the portion of the applica Example, sold a portion	ation/permit/transfer or	der/limited	
		to the entire application/pling an additional person		nited	
Application #	9-17923	; Permit # <u>G-18546</u> ;	;	Fransfer order #	
Limited License	2 #	; Groundwater St	atement #	:	
as filed in the office of the Wa AgWest Farm Credit, FLCA (Name of New Owner)	ter Resources Director, t	to:			
16034 Equine Dr	Nampa	ID	83687-8490	(208)468-1600	
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)	
And					
J. C. Watson Company					
(Name of New Owner)					
PO Box 300	Parma	ID ·	83660	(208)722-5141	
(Mailing Address)		(State)	(Zip)	(Phone #)	
	A Carrent				

Note: If there are other owners of the property described in this application, permit, transfer order, limited license, or groundwater statement, you must provide a list of all other owners' names and mailing addresses and attach it to this form. Write the initials (first letters) of your first and last names at the spot indicated below I hereby certify that I have notified all other owners of the property described in this application, permit, transfer order, limited license, or groundwater statement of this Request for Assignment				
Witness my hand this 16	day of January	, 2025		
(Day)	(Mo	nth) // (Year)		
Signature of Current Holder of Record	Internation	MILLER		
Failure to provide any of the required information will result in the return of your application.				

The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of \$120.

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