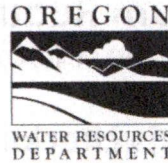


Application for an Emergency Use Permit for Groundwater (Drought)



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

Received
APR 22 2026
OWRD

Emergency Use Permit Application Processing

Oregon Revised Statute (ORS) 536.700-780 and Oregon Administrative Rule (OAR) 690-019-0040(1) authorize the Director, after the Governor declares that a severe, continuing drought exists, to issue emergency-use permits to replace water not available under an existing right because of the drought. Each application must be for use in a designated drought area.

PLEASE NOTE: Due to widespread drought and decreasing groundwater levels, if a drought emergency is declared in Klamath County, it is unlikely that the Oregon Water Resources Department (Department) will issue Drought Emergency Use Permits for groundwater.

A portion of the application fees for Drought Emergency Use Permits is non-refundable. If the Department evaluates a drought permit application and determines that a permit cannot be issued, the recording fee is refunded, and the Department will retain the exam fee.

1. Completeness Determination

The Department evaluates whether the application and accompanying map contain all of the information required under OAR 690-019-0040, OAR 690-019-0050, and OAR 690-019-0100 (www.oregon.gov/owrd/law). When an application does not contain all the information and supporting material required by the application form and these rules, the application will be declared incomplete, and the applicant notified. Additionally, the application may be returned with a request for additional information, and the applicant will have 30 days to complete the application. If the applicant fails to complete the application within 30 days, it will be rejected.

2. Public Notice

Public notice of receipt of emergency use applications and approval of such applications will be included in the Department's regular public notice of applications.

3. Final Order Issued

The Director shall approve an application for emergency water use upon findings that the proposed use will not cause injury to existing water rights and will not impair or be detrimental to the public interest. In evaluating whether the proposed use will impair or be detrimental to the public interest, the Director shall consider the factors described in OAR 690-310-0120 and OAR 690-310-0130.

Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050, ORS 537.615 & OAR 690-019-0040)

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.

- SECTION 1: APPLICANT INFORMATION AND SIGNATURE
- SECTION 2: PROPERTY OWNERSHIP
- SECTION 3: WELL DEVELOPMENT
- SECTION 4: WATER USE
- SECTION 5: WATER MANAGEMENT
- SECTION 6: WITHIN A DISTRICT
- SECTION 7: DROUGHT INFORMATION
- SECTION 8: KLAMATH BASIN WELL INFORMATION

Received
APR 22 2026

OWRD

Attachments:

- Fees - Amount enclosed: \$ 600.00
\$200 - Examination fee
\$400 - Recording fee for the first cubic foot per second (CFS) or fraction thereof, and \$100 for each additional CFS or fraction thereof
** one CFS equals 448.831 gallons per minute*

Provide a map and check that each of the following items is included:

- Permanent quality and drawn in ink
- Even map scale not less than 4" = 1 mile (example: 1" = 400 ft, 1" = 1320 ft, etc.)
- North Directional Symbol
- Township, Range, Section, Quarter/Quarter, Tax Lots
- Reference corner on map
- Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west). Each well must be identified by a unique name and/or number.
- Indicate the area of use by Quarter/Quarter and tax lot clearly identified
- Number of acres per Quarter/Quarter and hatching to indicate area of use if for supplemental irrigation or nursery
- Location of main canals, ditches, pipelines or flumes
- Other: _____

Application for an Emergency Use Permit for Groundwater (Drought)



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

Received
APR 22 2026

OWRD

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

| | | | |
|--|----------------------|--------------|--|
| NAME Rainshadow Organics, LLC; Contact: Sarahlee Lawrence, farm manager | | | PHONE (HM) |
| PHONE (WK) 541-977-6746 | CELL 541-279-0841 | FAX | |
| ADDRESS 71290 Holmes Road | | | |
| CITY Sisters | STATE OR | ZIP 97759 | E-MAIL* info@rainshadoworganics.com |

Organization Information

| | | | | |
|---|-------------|--------------|--|-----|
| NAME Lawrence Farms, LLC; dba Rainshadow Organics, LLC | | | PHONE 541-977-6746 | FAX |
| ADDRESS 71290 Holmes Road | | | CELL | |
| CITY Sisters | STATE OR | ZIP 97759 | E-MAIL* info@rainshadoworganics.com | |

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

| | | | | |
|---|-------------|--------------|----------------------------------|-----|
| AGENT / BUSINESS NAME Jim Newton/Cascade Geoengineering, LLC | | | PHONE 360-907-4162 | FAX |
| ADDRESS 21145 Scottsdale Drive | | | CELL | |
| CITY Bend | STATE OR | ZIP 97701 | E-MAIL* newtonjim@hotmail.com | |

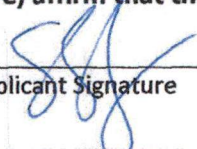
Note: Attach multiple copies as needed

* By providing an e-mail address, consent is given to receive all correspondence from the Department electronically.
(A paper copy of the final order will also be mailed.)

By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application.
- I cannot use water legally until the Water Resources Department issues a permit.
- Oregon law requires that a permit be issued before beginning construction of any proposed well. Acceptance of this application neither guarantees an emergency use permit will be issued nor indicates that a permanent water right may be obtained.
- If I get a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be cancelled.
- The water use must be compatible with local comprehensive land-use plans.
- Even if the Department issues a permit, I may have to stop using water to allow senior water-right holders to get water to which they are entitled.

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

| | | |
|---|---|-----------------|
|  | <i>Sarahlee Lawrence, owner member manager.</i> | <i>4/21/26.</i> |
| Applicant Signature | Print Name and title if applicable | Date |
| | | |
| Applicant Signature | Print Name and title if applicable | Date |

SECTION 2: PROPERTY OWNERSHIP

Please indicate if you own all the lands associated with the project from which the water is to be diverted, conveyed, and used.

Received
APR 22 2026
OWRD

- Yes
 - There are no encumbrances.
 - This land is encumbered by easements, rights of way, roads or other encumbrances.
- No
 - I have a recorded easement or written authorization permitting access.
 - I do not currently have written authorization or easement permitting access.
 - 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).
 - Water is to be diverted, conveyed, and/or used only on federal lands.

List the names and mailing addresses of all affected landowners (*attach additional sheets if necessary*).

Same as Applicant and Landowner listed above.

SECTION 3: WELL DEVELOPMENT

| WELL NO. | NAME OF NEAREST SURFACE WATER | IF LESS THAN 1 MILE: | |
|----------|-------------------------------|-----------------------------------|--|
| | | DISTANCE TO NEAREST SURFACE WATER | ELEVATION CHANGE BETWEEN NEAREST SURFACE WATER AND WELL HEAD |
| Well #1 | Deschutes River (~2.3 miles) | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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*).

The proposed Well #1 is intended to be installed as a well to be used for emergency drought use under this and any future emergency drought permit application to provide supplemental water for deficient surface water irrigation delivered by Three Sisters Irrigation District.

SECTION 3: WELL DEVELOPMENT, CONTINUED

Received
 APR 22 2026
 OWRD

Source (aquifer), if known: Deschutes Formation

Total maximum rate requested: 152 gpm

(each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below)

Complete the table below. If this is an existing well, the following information may be found on the applicable well log. (If a well log is available, please submit it in addition to completing the table.) If this is a proposed well, or well-modification, consider consulting with a licensed well driller, geologist, or certified water right examiner.

| OWNER'S WELL NAME OR NO. | PROPOSED | EXISTING | WELL ID (WELL TAG) NO.* OR WELL LOG ID** | FLOWING ARTESIAN | CASING DIAMETER | CASING INTERVALS (IN FEET) | PERFORATED OR SCREENED INTERVALS (IN FEET) | SEAL INTERVALS (IN FEET) | MOST RECENT STATIC WATER LEVEL & DATE (IN FEET) | PROPOSED USE | | | |
|--------------------------|-------------------------------------|--------------------------|--|--------------------------|-----------------|----------------------------|--|--------------------------|---|-------------------|------------------|--------------------------|---------------------------|
| | | | | | | | | | | SOURCE AQUIFER*** | TOTAL WELL DEPTH | WELL-SPECIFIC RATE (GPM) | ANNUAL VOLUME (ACRE-FEET) |
| Well #1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | N/A | <input type="checkbox"/> | 8" Steel | +2' to 500' | 400'-500' | 0-150' | N/A | Deschutes Fm. | ~500' | 152 GPM | up to 81 Ac-Ft |
| | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | | | | | | | | | |

* 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.
 ** 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.
 *** Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

SECTION 4: WATER USE

| USE | PERIOD OF USE | ANNUAL VOLUME (ACRE-FEET) |
|------------|--------------------|-----------------------------------|
| Irrigation | April 1-October 31 | Up to 81 Ac-Ft (up to 3'/Ac duty) |
| | | |
| | | |
| | | |

Received
APR 22 2026

OWRD

Rights affected by drought:

County in which use will occur: Deschutes

(if the right is located in Klamath Basin/County you must complete Section 8)

Please indicate the total number of acres to be irrigated (*must match map*): 27 acres

List the Permit or Certificate number(s) of the water right(s) affected by drought: 95971(Pr), 95972 (Su), 97771(Su)

Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 81 Acre-Feet

SECTION 5: WATER MANAGEMENT

A. Diversion and Conveyance

What equipment will you use to pump water from your well(s)?

Pump (give horsepower and type): 30 Hp Submersible

Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water.

The proposed new Well #1 would be installed upon approval of this emergency drought permit in the immediate vicinity of the TSID pressurized irrigation delivery pipe, so that once surface water is regulated off, the well can pump directly into the 6" HDPE pipeline and delivery pressurized irrigation directly to existing on-farm sprinkler & drip irrigation.

B. Conservation

Please describe why the amount of water requested is needed and measures you propose to: prevent waste; measure the amount of water diverted; and prevent the discharge of contaminated water to a surface stream.

The proposed emergency drought water is only intended to be used when insufficient surface water delivery from TSID is not available. Well water would be pumped under pressure through an installed totalizing flow meter and used using the existing pressurized 6" HDPE pipelines for delivery to on-farm sprinkler and drip irrigation to be used without waste. This emergency drought permit water is intended to allow the Applicant to cultivate human consumption crops to full ripe for harvest, whereas, without full season irrigation crops would not mature to a harvest condition.

SECTION 6: WITHIN A DISTRICT

Check here if any of the water rights affected by drought are located within or served by an irrigation or other water district.

Received
APR 22 2026
OWRD

| | | |
|---|------------------------|--------------|
| Irrigation District Name Three Sisters Irrigatoin District | Address 68000 US-20 | |
| City Sisters | State OR | Zip 97759 |

Yes No Has the irrigation district transferred the primary irrigation water right to another place of use for this irrigation season?

Projected irrigation season allotment, if known: approx. 30% of normal, 1.62 Ac-ft/Ac (43.74)

SECTION 7: DROUGHT INFORMATION

Explain how drought conditions have created an inability to obtain water under your existing right(s), and any other remarks to clarify any other information (*attach additional sheets as necessary*).

Based on meetings with Three Sisters Irrigation District (TSID), [surface] water deliveries from TSID will be deficient this season, and since TSID is essentially a live flow district from surface water diversions, with exceptionally low snowpack, it is likely that water delivery from TSID may stop mid-summer based on indications from TSID. Since the Applicant grows human consumption food crops, a partial irrigation season does not allow crops to develop to a point of harvest to produce a consumable crop.

Since very low winter and springtime precipitation is extremely low and has produced low residual soil moisture going into the start of irrigation season, it is anticipated that water use will be significantly curtailed as a result of low soil moisture content and low snowpack that will reduce the lenght of the delivery of irrigation water from TSID.

These drought conditions combine to create a significant hardship for the Applicant, who is a local farm to table farm that carries employee payroll of \$250,000.00 during the irrigation/harvest season contributing directly to the Central Oregon food market.

SECTION 8: KLAMATH BASIN/COUNTY WELL INFORMATION

PLEASE NOTE: Due to the pervasive drought and rapidly declining groundwater levels in the Klamath Basin, the Oregon Water Resources Department is unlikely to issue Drought Emergency Use Permits for groundwater in the Klamath Basin.

A functioning, totalizing flowmeter will be required for any drought permits issued. Is there currently a flowmeter installed on each of the PODs listed in the table in Section 3 of this application? Yes No*

*Please note that watermaster staff will visit the well to confirm flowmeter presence prior to issuance of an emergency drought groundwater permit. Where possible, watermaster staff will take a static water level measurement. Alterations to the well head may be required in order to make the water level measurements and these may be conditions of the permit.

For each well, please provide a description of the flowmeter location, the serial number, the current flowmeter reading and the date the reading was taken in the table below.

| OWNER'S WELL NAME OR NUMBER. | WELL TAG NUMBER (IF AVAILABLE) | WELL LOG ID (E.G., KLAM 1234) | FLOWMETER SERIAL NUMBER | FLOWMETER READING | FLOWMETER DATE | FLOWMETER LOCATION |
|------------------------------|--------------------------------|-------------------------------|-------------------------|-------------------|-------------------------|--|
| Well #1 | Not yet drilled | Not yet drilled | Not yet installed | Not yet installed | Upon completion of well | To be located at the proposed Well #1 location |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Received
APR 22 2026

Received
APR 22 2026

OWRD

OWRD

Date _____

(For staff use only)



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

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

- SECTION 1: _____
- SECTION 2: _____
- SECTION 3: _____
- SECTION 4: _____
- SECTION 5: _____
- SECTION 6: _____
- SECTION 7: _____
- SECTION 8: _____
- Fees _____

MAP

- Permanent quality and drawn in ink
- Even map scale not less than 4" = 1 mile (example: 1" = 400 ft, 1" = 1320 ft, etc.)
- North Directional Symbol
- Township, Range, Section, Quarter/Quarter, Tax Lots
- Reference corner on map
- Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west). Each well must be identified by a unique name and/or number.
- Indicate the area of use by Quarter/Quarter and tax lot clearly identified
- Number of acres per Quarter/Quarter and hatching to indicate area of use if for supplemental irrigation or nursery
- Location of main canals, ditches, pipelines or flumes
- Other _____

Received
APR 22 2026
OWRD

PERSONAL PROPERTY TAX STATEMENT

JULY 1, 2025 TO JUNE 30, 2026
 DESCHUTES COUNTY, OREGON
 1300 NW WALL ST STE 203, BEND, OR 97703

TAX ACCOUNT: 276485

Received
APR 22 2026

OWRD

RAINSHADOW ORGANICS LLC
 71290 HOLMES RD
 SISTERS OR 97759

PROPERTY DESCRIPTION

CODE: 2003 PP#: 19477
 SITUS ADDRESS: 71290 HOLMES RD SISTERS

| VALUES: | LAST YEAR | THIS YEAR |
|----------------------|-----------|-----------|
| REAL MARKET (RMV) | | |
| | | |
| TOTAL RMV | 27,060 | 32,930 |
| | | |
| TOTAL ASSESSED VALUE | 27,060 | 32,930 |
| ASSESSED VALUE | 27,060 | 32,930 |
| | | |
| TOTAL PROPERTY TAX: | 380.84 | 449.99 |

If your net taxable value has grown by more than 3% from last year and you have any questions, please contact the Assessor's office at +1 (541) 388-6508.

| TAX BY DISTRICT | |
|-------------------------------------|---------------|
| SCHOOL DISTRICT #2J | 144.10 |
| C O C C | 17.79 |
| HIGH DESERT ESD | 2.76 |
| EDUCATION TOTAL: | 164.65 |
| DESCHUTES COUNTY | 42.09 |
| DESCHUTES PUBLIC LIBRARY | 18.11 |
| COUNTYWIDE LAW ENFORCEMENT | 41.16 |
| RURAL LAW ENFORCEMENT | 51.04 |
| COUNTY EXTENSION/4H | 0.74 |
| 9-1-1 | 11.91 |
| DESCHUTES SOIL & WATER CONSERVATION | 1.98 |
| REDMOND AREA PARK & REC DISTRICT | 12.24 |
| GENERAL GOVT TOTAL: | 179.27 |
| DESCHUTES PUBLIC LIBRARY BOND | 10.39 |
| REDMOND AREA PARK & REC DIST BOND | 17.95 |
| SCHOOL #2J BOND 2008 | 47.75 |
| SCHOOL #2J BOND 2021 | 6.86 |
| SCHOOL #2J BOND 2025 | 20.55 |
| C O C C BOND | 2.57 |
| BONDS - OTHER TOTAL: | 106.07 |

TAX QUESTIONS (541) 388-6540
 ASSESSMENT QUESTIONS (541) 388-6508
 For Property Information: dial.deschutes.org

Full Payment with 3% Discount \$436.49
 Discount is lost after due date and interest may apply
PAYMENT OPTIONS:
 * Online www.deschutes.org/tax
 * By Mail Deschutes County Tax, PO Box 7559
 Bend OR 97708-7559
 * Drop Box 1300 NW Wall St, Bend
 411 SW 9th St, Redmond
 51340 Highway 97, La Pine
 * In Person 1300 NW Wall St, Ste 203, Bend (2nd Floor)

Please include this coupon with payment. Please do not staple, paper clip or tape your payment.

Payment Due November 17, 2025

- Please select payment option**
- Full Payment (3% Discount) \$436.49
 No Additional Payment Due
 - Two-Thirds Payment (2% Discount) \$293.99
 Next Payment Due 05/15/26
 - One-Third Payment (No Discount) \$150.00
 Next Payment Due 02/17/26

TAX ACCOUNT: 276485

RAINSHADOW ORGANICS LLC
 71290 HOLMES RD
 SISTERS OR 97759

Change my Mailing Address
 (Mailing address change form on reverse)

AMOUNT ENCLOSED

\$

Please make checks payable to Deschutes County Tax Collector

Deschutes County Tax Collector
 PO Box 7559
 Bend OR 97708-7559

REAL PROPERTY TAX STATEMENT

JULY 1, 2025 TO JUNE 30, 2026

DESCHUTES COUNTY, OREGON

1300 NW WALL ST STE 203, BEND, OR 97703

TAX ACCOUNT: 124854

LAWRENCE FARM LLC
71290 HOLMES RD
SISTERS OR 97759

Received
APR 22 2026

OWRD

PROPERTY DESCRIPTION

CODE: 2003 MAP: 141207-00-00600 CLASS: 551

SITUS ADDRESS: 71290 HOLMES RD SISTERS

LEGAL:

Table with 3 columns: VALUES, LAST YEAR, THIS YEAR. Rows include REAL MARKET (RMV), LAND, STRUCTURES, and TOTAL RMV.

TOTAL ASSESSED VALUE 485,585 499,755

ASSESSED VALUE 485,585 499,755

TOTAL PROPERTY TAX: 6,868.98 7,199.98

TAX BY DISTRICT

Table listing various tax districts and their amounts, including SCHOOL DISTRICT #2J, EDUCATION TOTAL, GENERAL GOVT TOTAL, and BONDS - OTHER TOTAL.

EXCLUSIVE FARM USE POTENTIAL ADDITIONAL TAX LIABILITY

TAX QUESTIONS (541) 388-6540
ASSESSMENT QUESTIONS (541) 388-6508
For Property Information: dial.deschutes.org

Full Payment with 3% Discount \$6,983.98

Discount is lost after due date and interest may apply

PAYMENT OPTIONS:

- * Online www.deschutes.org/tax
* By Mail Deschutes County Tax, PO Box 7559 Bend OR 97708-7559
* Drop Box 1300 NW Wall St, Bend 411 SW 9th St, Redmond 51340 Highway 97, La Pine
* In Person 1300 NW Wall St, Ste 203, Bend (2nd Floor)

Please include this coupon with payment. Please do not staple, paper clip or tape your payment.

Payment Due November 17, 2025

Please select payment option

TAX ACCOUNT: 124854

- Full Payment (3% Discount) \$6,983.98
Two-Thirds Payment (2% Discount) \$4,703.99
One-Third Payment (No Discount) \$2,400.00

LAWRENCE FARM LLC
71290 HOLMES RD
SISTERS OR 97759

Change my Mailing Address
(Mailing address change form on reverse)

AMOUNT ENCLOSED

\$

Please make checks payable
to Deschutes County Tax Collector

Deschutes County Tax Collector
PO Box 7559
Bend OR 97708-7559

09100001248540000240000000047039900006983982

DESCHUTES COUNTY ASSESSOR
REAL PROPERTY ACCOUNT NAMES

Account # 124854
Map 14120700 00600
Owner LAWRENCE FARM LLC
71290 HOLMES RD
SISTERS OR 97759

Received
APR 22 2026
OWRD

| Name Type | Name | Ownership Type | Own Pct |
|--------------|-------------------|-------------------|------------|
| OWNER | LAWRENCE FARM LLC | OWNER | 100.00 |