



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301-1271
 (503) 986-0900
 www.wrd.state.or.us

Application for a Permit to Use Ground Water

Please type or print in dark ink. If your application is found to be incomplete or inaccurate, we will return it to you. If any requested information does not apply to your application, insert "n/a." Please read and refer to the instructions when completing your application. A summary of review criteria and procedures that are generally applicable to these applications is available at www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

RECEIVED

SEP 23 2008

WATER RESOURCES DEPT
SALEM, OREGON

1. APPLICANT INFORMATION

A. Individuals

Applicant: _____
First Last

Mailing address: _____

City State Zip

Phone: _____
Home Work Other

*Fax: _____ *E-Mail address: _____

B. Organizations

(Corporations, associations, firms, partnerships, joint stock companies, cooperatives, public and municipal corporations)

Name of organization: IWASAKI BROTHERS, INC.

Name and title of person applying: JIM IWASAKI, VICE PRESIDENT

Mailing address of organization: 2555 SE MINTER BRIDGE ROAD

HILLSBORO OR 97123-5299
 City State Zip

Phone: 503-640-2734
Day Evening

*Fax: 503-640-9626 *E-Mail address: _____

* Optional information

For Department Use		
App. No. _____	Permit No. _____	Date _____

RECEIVED

SEP 04 2008

WATER RESOURCES DEPT
SALEM, OREGON

2. PROPERTY OWNERSHIP

Do you own all the land where you propose to divert, transport, and use water?

- Yes (Skip to section 3 "Ground water Development.")
- No (Please check the appropriate box below.)
 - 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 irrigated and/or domestic use only (ORS 274.040).

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.

List the names and mailing addresses of all affected landowners.

MINTER BRIDGE PROPERTIES, LLC

17914 MAGNOLIA BLVD., #302

ENCINO, CA 91316

3. GROUND WATER DEVELOPMENT

A. Well Information

Number of well(s): TWO

Name of nearest surface water body: A) UNNAMED INTERMITTENT TRIB. B) TUALATIN RIVER

Distance from well(s) to nearest stream or lake: 1) A) 2800', B) 3900'

2) A) 2800', B) 3800' 3) _____ 4) _____

If distance from surface water is less than one mile, indicate elevation difference between nearest surface water and well head. 1) WELLS 1 & 2 ELEV 150 MSL

2) A) ELEV 120' MSL 3) B) ELEV 120' MSL 4) _____

B. Well Characteristics

Wells must be constructed according to standards set by the Department for the construction and maintenance of water wells. If the well is already constructed, please enclose a copy of the well constructor's log and the well ID number, if available, for each well with this application. Identify each well with a number corresponding to the wells designated on the map and proceed to section 4 of the form. If the well has not been constructed, or if you do not have a well log, please complete the following:

Well(s) will be constructed by: A.M. JANNSEN WELL DRILLING CO., INC.

Address: 21075 SW T.V. HIGHWAY, ALOHA, OR 97006

Completion date: WELL 1, 6-1-06; WELL 2, AFTER PERMIT IS ISSUED

Please provide a description of your well development. (Attach additional sheets if needed.)

Well No.	Diameter	Type and size of casing	No. of feet of casing	Intervals casing is perforated (in feet)	Seal depth	Est. depth to water	Est. depth to water bearing stratum	Type of access port or measuring device	Total well depth
1	***	WELL LOG	ATTACHED	***					
2	10"	6" PLASTIC	200	60'	70'	10'	80'	PORT	200'

Note: Well numbers in this listing must correspond to well locations(s) shown on accompanying map.

If well log is not available, or well is not yet constructed, you must provide: proposed total depth, depth of casing and seal, and the anticipated perforation and open intervals.

C. Artesian Flows

If your water well is flowing artesian, describe your water control and conservation works:

N/A

4. WATER USE

Please read the instruction booklet for more details on "type of use" definitions, how to express how much water you need and how to identify the water source you propose to use. You must fill out a supplemental form for some uses as they require specific information for that type of use.

A. Type(s) of Use(s)

See list of beneficial uses provided in the instructions.

- If your proposed use is **domestic**, indicate the number of households to be supplied with water: _____
- If your proposed use is **irrigation**, please attach **Form I** *IRRIGATION & AGRICULTURAL USE FOR NURSERY CROPS*
- If your proposed use is **mining**, attach **Form R**
- If your proposed use is **municipal or quasi-municipal**, attach **Form M**
- If your proposed use is **commercial/industrial**, attach **Form Q**

RECEIVED

SEP 23 2008

WATER RESOURCES DEPT
SALEM, OREGON

Ground Water/3

RECEIVED

SEP 04 2008

WATER RESOURCES DEPT
SALEM, OREGON

B. Amount of Water

Provide the production rate in gallons per minute (gpm) and the total annual amount of water you need from each well, from each source or aquifer, for each use. You do not need to provide source information if you are submitting a well log with your application.

Well No.	Source or aquifer	Type of use	Total rate of water requested (in gpm)	Total annual quantity (in gallons)	Production rate of well (in gpm)
1	ALLUVIUM	Irrigation & Agricultural	75	--	75
2	ALLUVIUM	Irrigation & Agricultural	75	--	75
			Total	110 AF	

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 150 gpm
(The fees for your application will be based on this amount.)

D. Period of Use

Indicate the time of year you propose to use the water: ALL YEAR
(For seasonal uses like irrigation give dates when water use would begin and end, e.g. March 1–October 31.)

E. Acreage

If you will be applying water to land, please give the total number of acres where water will be applied or used: 22.2 ACRES
(This number should be consistent with your application map.)

5. WATER MANAGEMENT**A. Diversion**

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

Pump (give horsepower and pump type): 5 HP ELECTRIC SUBMERSIBLE TURBINE

Other means (describe): _____

B. Transport

How will you transport water to your place of use?

Ditch or canal (give average width and depth):

Width _____ Depth _____

Is the ditch or canal to be lined? Yes No

Pipe (give diameter and total length):

Diameter 4" Length EXISTING SYSTEM

Other (describe) _____

WASH 64048

STATE OF OREGON
WATER SUPPLY WELL REPORT
 (as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 04433
 START CARD # 187474

(1) LAND OWNER Owner Well I.D. _____

First Name _____ Last Name _____
 Company WASAKI BROTHERS INC.
 Address 2555 SE MINTER BRIDGE RD
 City HILLSBORO State OR Zip 97123

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(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 Special Standard Attach copy
 Depth of Completed Well 163 ft.

BORE HOLE			SEAL				sacks/	
Dia	From	To	Material	From	To	Amt	lbs	
10	0	163	Bentonite	0	25	13	S	
			Cement	25	65	15	S	

How was seal placed: Method A B C D E

Other Prd. into Annular

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from 65 ft. to 163 ft. Material Sand Size 1C

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Pstc	Wid	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6		1	80	SDR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6		90	100	SDR	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6		110	123	SDR	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6		133	148	SDR	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6		158	163	SDR	<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 _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type Slotted Material PVC

Perf/	Casing/	Screen	Dia	From	To	Scrn/slot	Slot	# of	Tele/
Screen	Liner					width	length	slots	pipe size
Screen	Casing		6	80	90	.020			pipe
Screen	Casing		6	100	110	.020			pipe
Screen	Casing		6	123	133	.020			pipe
Screen	Casing		6	148	158	.020			pipe

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
36		40	1 HR
45		50	1 HR
52		60	1 HR

Temperature 57 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below) No

From	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County WASHINGTON Twp 1 S N/S Range 2 W E/W WM
 Sec 8 SW 1/4 of the NW 1/4 Tax Lot 200
 Tax Map Number _____ Lot _____
 Lat _____ or _____ DMS or DD
 Long _____ or _____ DMS or DD
 Street address of well Nearest address

2555 SE MINTER BRIDGE RD

(10) STATIC WATER LEVEL

Existing Well / Prodeepening	Date	SWL (psi)	+ SWL (ft)
Completed Well	06/01/2006		0

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found 80

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
06/01/2006	80	90	52		0
06/01/2006	100	110	52		0
06/01/2006	123	133	52		0
06/01/2006	148	158	52		0

(11) WELL LOG

Ground Elevation _____

Material	From	To
Fill	0	1
Brown Clay	1	5
Dark Gray Clay	5	28
Fine Black Silty Sand	28	59
Soft Gray Clay	59	78
Fine to Coarse Black Sand	78	90
Soft Gray Clay	90	100
Fine to Medium Black Sand	100	110
Soft Gray Clay	110	124
Fine to Medium Black Sand	124	131
Sticky Gray Clay	131	149
Fine to Medium Gray-Brown Sand	149	158
Soft Gray Clay	158	163

RECEIVED

SEP 23 2008

WATER RESOURCES DEPT

SALEM, OREGON

Date Started 05/24/2006 Completed 06/01/2006

(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 _____
 Password: (if filing electronically) _____
 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 1266 Date 6/5/06
 Password: (if filing electronically) _____
 Signed _____
 Contact Info (optional) _____

WASH 64048
Amended

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # I 84433

START CARD # 187474

(1) LAND OWNER Owner Well I.D. _____

First Name _____ Last Name _____
Company IWASAKI BROTHERS INC.
Address 2555 SE MINTER BRIDGE RD
City HILLSBORO State OR Zip 97123

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(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 Special Standard Attach copy
Depth of Completed Well 163 ft.

BORE HOLE			SEAL		sacks/		
Dia	From	To	Material	From	To	Amt	lbs
10	0	163	Bentonite	0	25	13	S
			Cement	25	65	15	S

How was seal placed: Method A B C D E
 Other Prd. into Annular
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from 65 ft. to 163 ft. Material Sand Size IC#8
Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Std	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6		1	80	SDR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6		90	100	SDR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6		110	123	SDR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6		133	148	SDR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6		158	163	SDR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS

Perforations Method _____
Screens Type Slotted Material PVC

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Casing	6	80	90	.020			pipe
Screen	Casing	6	100	110	.020			pipe
Screen	Casing	6	123	133	.020			pipe
Screen	Casing	6	148	158	.020			pipe

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
36		40	1 HR
45		50	1 HR
52		60	1 HR

Temperature 57 °F Lab analysis Yes By _____
Water quality code _____ (describe below)
From _____ Description _____ Amount _____ Units _____
SEP 04 2008 JUN 09 2006

(9) LOCATION OF WELL (legal description)

County WASHINGT Twp 1 S N/S Range 2 W E/W WM
Sec 8 SW 1/4 of the NW 1/4 Tax Lot 200
Tax Map Number _____ Lot _____
Lat _____ ° 0 ' _____ " or _____ DMS or DD
Long _____ ° 0 ' _____ " or _____ DMS or DD
 Street address of well Nearest address
2555 SE MINTER BRIDGE RD

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL (psi)	+ SWL (ft)
Completed Well	06/01/2006		0

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
06/01/2006	80	90	52		0
06/01/2006	100	110	52		0
06/01/2006	123	133	52		0
06/01/2006	148	158	52		0

(11) WELL LOG

Material	From	To	Ground Elevation
Fill	0	1	
Brown Clay	1	5	
Dark Gray Clay	5	28	
Fine Black Silty Sand	28	59	
Soft Gray Clay	59	78	
Fine to Coarse Black Sand	78	90	
Soft Gray Clay	90	100	
Fine to Medium Black Sand	100	110	
Soft Gray Clay	110	124	
Fine to Medium Black Sand	124	131	
Sticky Gray Clay	131	149	
Fine to Medium Gray-Brown Sand	149	158	
Soft Gray Clay	158	163	

RECEIVED
SEP 23 2008
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 05/24/2006 Completed 06/01/2006

(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 _____
Password: (if filing electronically) _____
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 1266 Date 6/8/06
Password: (if filing electronically) _____
Signed _____
Contact Info (optional) _____



Oregon Water Resources Department

FORM I
FOR IRRIGATION WATER USE

1. Please indicate whether you are requesting a primary or supplemental irrigation water right.

Primary Supplemental

If supplemental, please indicate the number of acres that will be irrigated for each type of use.

Primary: 22.2 Acres

Secondary: _____ Acres

List the permit or certificate number of the primary water right: No. _____

2. Please list the anticipated crops you will grow and whether you will be irrigating them for a full or partial season:

- 1. Nursery Crops Full season Partial season (from: _____ to _____)
- 2. _____ Full season Partial season (from: _____ to _____)
- 3. _____ Full season Partial season (from: _____ to _____)
- 4. _____ Full season Partial season (from: _____ to _____)

3. Indicate the maximum total number of acre-feet you expect to use in an irrigation season:

_____ 110 _____ acre-feet

(1 acre-foot equals 12 inches of water spread over 1 acre, or 43,560 cubic feet, or 325,851 gallons.)

4. How will you schedule your applications of water? Will you be applying water in the evenings, twice a week, daily?

- Daily during daytime hours Daily during nighttime hours
- Two or three times weekly during daytime Two or three times weekly during nighttime
- Weekly, during daytime hours Weekly, during nighttime hours
- Other, explain: _____

RECEIVED
SEP 04 2008
WATER RESOURCES DEPT
SALEM, OREGON

C. Application/Distribution Method

What equipment will you use to apply water to your place of use? _____

Irrigation or land application method (check all that apply):

- Flood
- High-pressure sprinkler
- Low pressure sprinkler
- Drip
- Water cannons
- Center pivot system
- Hand lines
- Wheel lines
- Siphon tubes or gated pipe with furrows
- Other, describe PRIMARILY HAND WATERING IN GREENHOUSES.

Distribution method

- Direct pipe from source
- In-line storage (tank or pond)
- Open canal

D. Conservation

What methods will you use to conserve water? Why did you choose this distribution or application method? For example, if you are using sprinkler irrigation rather than drip irrigation, explain. If you need additional space, attach a separate sheet.

HAND WATERING WORKS BEST FOR TYPE OF GREENHOUSE PLANTS GROWN.

6. PROJECT SCHEDULE

Indicate the anticipated dates that the following construction tasks should begin. If construction has already begun, or is completed, please indicate that date.

Proposed date construction will begin: WELL 1 IS IN; WELL 2 CONST. AFTER PERMIT ISSUED.

Proposed date construction will be completed: 1 MONTH AFTER PERMIT ISSUED.

Proposed date beneficial water use will begin: AS SOON AS PERMIT IS ISSUED.

7. REMARKS

If you would like to clarify any information you have provided in the application, please do so here and reference the specific application question you are addressing.

GENERAL: EXISTING NURSERY IS IRRIGATED FROM CITY WATER. OWNER WISHES TO PROVIDE AS MUCH WATER AS HE CAN FROM HIS OWN SOURCES. 5-C, OWNER MAY CONSTRUCT A LARGE IN-LINE STORAGE TANK FOR OVERNIGHT STORAGE.

RECEIVED

SEP 23 2008

WATER RESOURCES DEPT
SALEM, OREGON

Ground Water/5

RECEIVED

SEP 04 2008

WATER RESOURCES DEPT
SALEM, OREGON

8. MAP REQUIREMENTS

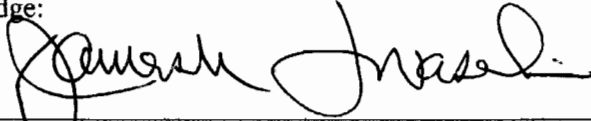
The Department cannot process your application without accurate information showing the source of water and location of water use. You must include a map with this application form that clearly indicates the township, range, section, and quarter/quarter section of the proposed well location and place of use. The map must provide tax lot numbers. See the map guidelines sheet for detailed map specifications.

9. SIGNATURE

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 packet.
- I cannot legally use water until the Water Resources Department issues a permit to me.
- 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 canceled.
- The water use must be compatible with local comprehensive land use plans.
- Even if the Department issues a permit to me, I may have to stop using water to allow senior water right holders to get water they are entitled to, and

I swear that all information provided in this application is true and correct to the best of my knowledge:



9/3/08

Signature of Applicant (If more than one applicant, all must sign.)

Date

VICE - PRES / GEN. MGR

Before you submit your application be sure you have:

- Answered each question completely.
- Attached a legible map which includes township, range, section, quarter/quarter and tax lot number.
- Included a Land Use Information Form or receipt stub signed by a local official.
- Included the legal description of all the property involved with this application. You may supply a copy of the deed, land sales contract, or title insurance policy, to meet this requirement.
- Included a check payable to the Oregon Water Resources Department for the appropriate amount. The Department's fee schedule can be found at www.wrd.state.or.us or call (503) 986-0900.

DETAILED REPORT ON THE WATER AVAILABILITY CALCULATION

Water Availability as of 8/ 5/2004 for

TUALATIN R > WILLAMETTE R - AT GAGE 14206500

1- APR 11 10:10 AM

Watershed ID #: 30201013 Basin: WILLAMETTE Exceedance Level: 80
 Time: 14:16 Date: 08/05/2004

Month	Natural Stream Flow cfs	CU + Stor Prior to 1/1/93	CU + Stor After 1/1/93	Expected Stream Flow	Reserved Stream Flow	Instream Water Rights	Net Water Available
J 1	1090.00	131.00	28.60	930.00	0.00	100.00	830.00
F 2	1420.00	201.00	29.40	1190.00	0.00	100.00	1090.00
M 3	1140.00	101.00	27.90	1010.00	0.00	100.00	911.00
A 4	676.00	70.00	27.50	579.00	0.00	100.00	479.00
M 5	332.00	73.30	13.40	245.00	0.00	100.00	145.00
J 6	179.00	108.00	13.30	57.40	0.00	100.00	-42.60
J 7	80.90	140.00	13.70	-72.70	0.00	100.00	-173.00
A 8	44.30	124.00	13.20	-92.70	0.00	100.00	-193.00
S 9	54.20	78.70	12.80	-37.30	0.00	94.50	-132.00
O 10	69.40	15.10	11.60	42.70	0.00	100.00	-57.30
N 11	160.00	57.40	13.70	88.90	0.00	100.00	-11.10
D 12	758.00	135.00	28.50	594.00	0.00	100.00	494.00
Stor	751000	74300	14100	669000	0	72100	616000

199
9PM

10/0

4249PM

DETAILED REPORT OF CONSUMPTIVE USES AND STORAGES

Water Availability as of 8/ 5/2004 for

TUALATIN R > WILLAMETTE R - AT GAGE 14206500

Watershed ID #: 30201013 Basin: WILLAMETTE Exceedance Level: 80
 Time: 14:16 Date: 08/05/2004

Mo	Storage	Irrig	Munic	Ind/Man	Commer	Domest	Agricul	Other	Total
1	121.00	0.00	9.60	2.28	0.10	1.97	13.70	11.90	161.00
2	191.00	0.00	9.60	2.28	0.10	1.97	13.70	11.90	231.00
3	89.30	0.04	9.60	2.28	0.10	1.97	13.90	11.90	129.00
4	56.70	1.00	9.60	2.28	0.10	1.97	13.90	11.90	97.40
5	0.22	59.40	9.60	2.28	0.10	1.97	2.14	11.00	86.70
6	0.00	75.30	28.80	2.28	0.10	1.97	2.14	11.00	122.00
7	0.00	107.00	28.80	2.28	0.10	1.97	2.14	11.00	153.00
8	0.00	90.70	28.80	2.28	0.10	1.97	2.14	11.00	137.00
9	0.00	45.20	28.80	2.28	0.10	1.97	2.14	11.00	91.50
10	0.49	0.02	9.60	2.28	0.10	1.97	1.24	11.00	26.70
11	43.10	0.00	9.60	2.28	0.10	1.97	3.06	11.00	71.10
12	124.00	0.00	9.60	2.28	0.10	1.97	13.70	11.90	164.00

DETAILED REPORT OF RESERVATIONS FOR CONSUMPTIVE USE

Water Availability as of 8/ 5/2004 for

TUALATIN R > WILLAMETTE R - AT GAGE 14206500

Watershed ID #: 30201013 Basin: WILLAMETTE Exceedance Level: 80
 Time: 14:16 Date: 08/05/2004

APP #	0	0	0	0	0	0	0	0	TOTAL
Status									

RECEIVED RECEIVED

SEP 04 2008 SEP 23 2008 8/10/2004
 WATER RESOURCES DEPT SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON

RECEIVED

SEP 04 2008

SOURCES DEPT
SALEM OREGON

Customer/Note No: 35318 - 441

After Recording Return to: Farm Credit Services - Hillsboro
1050 SW Baseline Road, Suite A-8
PO Box 1628
Hillsboro, OR 97123

RECEIVED

SEP 23 2008

WATER RESOURCES DEPT
SALEM, OREGON

Deed of Trust

On November 28, 1994, Iwasaki Bros., Inc., a corporation, hereinafter called Grantors, whose address is

255 SE Minter Bridge Rd
Hillsboro, OR 97123

grant, convey, warrant, transfer and assign to Chicago Title Insurance Company, a corporation, hereinafter called Trustee, whose address is 10001 SE Sunnyside Road, Clackamas, OR 97015, in trust with power of sale for the benefit of Northwest Farm Credit Services, ACA, a corporation organized under the Farm Credit Act of 1971, as amended, hereinafter called Beneficiary, whose address is West 601 First Avenue, P.O. Box TAF-C5, Spokane, Washington 99220-4005, property in Washington County(ies), State of Oregon, more particularly described as follows:

A portion of that tract of land conveyed to Iwasaki Bros. Inc. by Deed recorded February 4, 1955, in Book 365, Page 345, said portion being more particularly described as follows:

Being a part of the Henry Noland Jr. D.L.C. No. 68 in Township 1 South, Range 2 West of the Willamette Meridian, Washington County, Oregon, and beginning in the center of the County Road at the Northeast corner of F.M. Kelsey's land as described in Book 6, Page 128, Deed Records, and running thence North 70°42' West 29.21 chains to the West line of Noland D.L.C. at a point 8.27 chains North 38°30' East from angular corner on West line of said claim; thence North 38°30' East 20.25 chains; thence South 70°42' East 23.14 chains to the center of the County Road; thence South 21°12' West 18.94 chains to the place of beginning.

EXCEPTING THEREFROM that portion conveyed to Arthur and Teruko Iwasaki by Deed recorded August 6, 1957 in Book 396, Page 569, Deed Records.

Tax Account Nos.: R332134 and R332125;

and including all rents, issues, profits, buildings and improvements thereon and in all tenements, hereditaments, rights, privileges, easements, rights of way and appurtenances, (including without limitation private roads, grazing privileges, water rights, ditches and conduits and rights of way therefor, all plumbing, lighting, heating, cooling, ventilating, elevating, and irrigating apparatus and other equipment and fixtures, now or hereafter belonging to or used in connection therewith), all of which is hereinafter called the "Property."

The following described Note(s), Membership Agreements, security documents and any other documents or instruments signed in connection with the note(s) and security documents and any amendments thereto are collectively called the "Loan Documents." "Advances" shall include any amounts provided to Grantors under the terms of the Loan Documents and any amounts expended by Beneficiary to protect the Property or enforce its rights under the Loan Documents. This conveyance is intended to secure performance of the covenants and agreements contained herein, and in any Loan Documents, and payment of the indebtedness under the terms of the Note(s) made by Grantors to the order of Beneficiary, with interest and charges as provided therein and in the Loan Documents, and any extensions, modifications or renewals thereof:

DATE OF NOTE	PRINCIPAL AMOUNT	FINAL INSTALLMENT DATE
November 28, 1994	\$ 378,500.00	December 1, 2009

The terms of the Note(s) and Loan Documents, described above, provide that the interest rate, payment terms or amounts due may be indexed, adjusted, renewed or renegotiated.

Grantors and each of them REPRESENT, WARRANT, COVENANT and AGREE:

1. That they have title to the Property free from encumbrances, except as described above, they have good right and lawful authority to convey and encumber the same; they will warrant and defend the same forever against the lawful claims and demands of all persons whomsoever; and they agree this covenant shall not be extinguished by foreclosure or other transfers.
2. That this deed of trust also constitutes a Security Agreement granting Beneficiary a security interest in any and all personal property described above.



Oregon

Theodore R. Kulongoski, Governor

Water Resources Department

North Mall Office Building
725 Summer Street NE, Suite A
Salem, OR 97301-1266
503-986-0900
FAX 503-986-0904

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 jurisdictions 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.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for 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 503-986-0801.

RECEIVED

SEP 23 2008

**WATER RESOURCES DEPT
SALEM, OREGON**



Oregon Water Resources Department
Land Use Information Form

THIS FORM IS NOT REQUIRED IF: 1) water is to be diverted, conveyed, and/or used only on federal lands; 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) only the place of use is proposed for change, b) there are no structural changes, c) the use of water is for irrigation, and d) the use is located in an irrigation district or exclusive farm-use zone.

Applicant Name: IWASAKI BROTHERS INC
Mailing Address: 2555 NE MINTER BRIDGE RD.
City: HILLSBORO State: OR Zip: 97123 Day Phone: 503-640-2737
640-2734

This application is related to a Measure 37 claim. [] Yes [X] No

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), or used. 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.

Table with 8 columns: Township, Range, Section, 1/4, Tax Lot #, Plan Designation (e.g. Rural Residential/RR-5), Water to be: (Diverted, Conveyed, Used), Proposed Land Use: (Nursery). Includes handwritten entries for tax lots 1528-200 and 1528-400.

15208B000200/400

List all counties and cities where water is proposed to be diverted, conveyed, or used. WASHINGTON COUNTY

B. Description of Proposed Use

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

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

Source of water: [] Reservoir/Pond [X] Ground Water [] Surface Water (name)

Estimated quantity of water needed: 150 [] cubic feet per second [X] gallons per minute [] acre-feet

Intended use of water: [] Irrigation [] Commercial [] Industrial [] Domestic for household(s)
[] Municipal [] Quasi-municipal [] Instream [X] Other NURSERY

Briefly describe: IRRIGATION AND AGRICULTURAL USE FOR NURSERY CROPS.

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

Receipt for Request for Land Use Information

State of Oregon
Water Resources Department
725 Summer Street NE, Suite A
Salem, OR 97301-1266

RECEIVED

SEP 23 2008

WATER RESOURCES DEPT
SALEM, OREGON

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 proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): CV 201-2.4

Land uses to be served by proposed water uses (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
		<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 Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Any storage facilities and ground disturbing
conveyance may require permits and land use
approvals for development in the flood plain.

Name: Dyani Valentine Title: Associate Planner
 Signature: [Signature] Phone: 503-846-3821 Date: 9-18-08
 Government Entity: Washington County

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.

Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

RECEIVED

SEP 23 2008

**WATER RESOURCES DEPT
SALEM, OREGON**