



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.

1. APPLICANT INFORMATION

A. Individuals

Applicant: MARK & VOLONDA BROWN
First Last

Mailing Address: P.O. Box 1166

TUALATIN OR 97062
City State Zip

Phone: 541-620-2327 541-620-2327
Home Work Other

*Fax: N/A *Email Address: N/A

B. Organizations

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

Name of Organization: N/A

Name and Title of Person Applying: N/A

Mailing Address or Organization: N/A

N/A N/A N/A
City State Zip

Phone: N/A N/A
Day Evening

*Fax: N/A *Email Address: N/A

*Optional

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 SALEM OREGON

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

2. PROPERTY OWNERSHIP

Yes (Please check appropriate box below then skip to section 3 'Ground Water Development')

- There are no encumbrances
- This land is encumbered by easements, rights of way, roads or other encumbrances (please provide a copy of the recorded deed(s))

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.

N/A

3. GROUND WATER DEVELOPMENT

A. Well Information

Number of well(s): 1

Name of nearest surface water body: JOHN DAY RIVER

Distance from well(s) to nearest stream or lake:

1) 2000 FT 2) _____ 3) _____ 4) _____

If distance from surface water is less than one mile, indicate elevation difference between nearest surface water and well head:

1) APPROX 60 FT 2) _____ 3) _____ 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: MARCIEL WELL DRILLING & PUMPS, INC

Mailing Address: P.O. BOX 367

JOHN DAY City OR State 97845 Zip

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Completion Date: 4/3/07 Well ID# L-87507

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	8"	steel 4" .250 gauge	+1.6 to 179' BLS	N/A Liner perforated	0-12' Bent 12-60' cem	1st H ₂ O @ 142'	550±0 565	Std well cap w/ air line	620 FT
				530-580 1/4" x 4"	60-179' cem	sealed off 550' 2nd			
						H ₂ O 20' sealed off			

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:

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**
- 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**

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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	gray fractured Ashy clay	Irrigation	84.1 gpm	29,670,480	Approx 65 gpm air test.

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 84.1 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: March 1st thru Oct. 31st
 (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, indicate the total number of acres where water will be applied or used: 14.99 AC.
 (This number should be consistent with your application map.)

5. WATER MANAGEMENT

A. Diversion

What method will you use to divert water from the source?

- Pump (give horsepower and pump type): not yet determined
- 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 3-4"? Length not yet determined
not yet determined

- other, describe: BURIED MAINLINE TO PIVOT

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C. Application/Distribution Method

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

CENTER PIVOT

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: _____

Distribution method

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

E. Conservation

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

pivot will be operated at most efficient times for crop grown to maximize production.

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: Summer 2008

Proposed date construction will be completed: Spring 2009

Proposed date beneficial water use will begin: Spring 2009

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.

Well has already been drilled & wired. Now searching for a pivot system and seeking a water right permit to legally use the well to irrigate my property.

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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, I may have to stop using water to allow senior water right holders to get water to which they are entitled.

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



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

10-20-2008

Date

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.

WRD on the web:
www.wrd.state.or.us

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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: MARK BROWN
Mailing Address: P.O. Box 1166
City: TUALATIN State: OR Zip: 97062 Day Phone: 501-620-2327

This application is related to a Measure 37 claim. Yes 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.

Township	Range	Section	1/4	Tax Lot #	Plan Designation (e.g. Rural Residential/RR-5)	Water to be:	Proposed Land Use:
12S	26E	34	SENE	3400	EFU	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	
						<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	
						<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	

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

B. Description of Proposed Use

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

- 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 Ground Water Surface Water (name) _____

Estimated quantity of water needed: 84.1 cubic feet per second gallons per minute acre-feet

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

Briefly describe: HAY - PASTURE

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

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SALEM, OREGON

For Local Government Use Only

Mark & Yolanda Brown
T125 R-20E Sec. 34 T.L. 3400

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): Art 64 GCLDC

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.

irrigation is a permitted use in farm zones

Name: Shannon Springer Title: Assistant Planner
 Signature: Shannon Springer Phone: 541-575-1519 Date: 10/17/08
 Government Entity: Grant County Planning Department

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: _____

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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: 14.99 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. Hay PASTURE March 1st thru Oct 31st 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:

45 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: Time of water application will be dependant on crop requirements

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Date Postmarked _____ W
Date Hand Delivered _____ OWRD Receipt
Date Region Office Rec'd _____ Date Fee Received _____
Check No. _____

START CARD

NOTICE OF BEGINNING OF WELL CONSTRUCTION (as required by ORS 537.762)

This form must be completed and the original mailed or delivered to the Water Resources Department, 725 Summer Street NE Suite A, Salem OR 97301-1271 for all new construction, conversion, alteration, deepening and abandonments. This original must be mailed or delivered before work is commenced. A \$125 fee shall accompany the original for all new well construction, conversion, and deepenings (make checks payable to the Water Resources Department). In addition, the constructor shall provide a legible copy of this notice to the region office within which the well is being constructed, converted, altered, deepened, or abandoned using one of the following methods: (a) by regular mail no later than three (3) calendar days (72 hours) prior to commencement of work; (b) by hand delivery, during regular office hours before work is commenced; or (c) by FAX before work is commenced. If method (c) is used, a legible copy of the start card shall also be mailed or delivered to the region office no later than the day work is commenced. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$125 fee with the start card, for failure to submit the \$125 fee in a timely manner, and for failure to timely submit start cards.

Owner's name and mailing address: Mark Brown
Home Phone: 800)321-2660 PO Box 1166 Tualatin Or
Work Phone: () 97062-1166

Type of work: Fee New Construction No Fee Alteration (Repair/Recondition)
Required: Conversion Required: Abandonment Orig. Start
 Deepening Orig. Start Card No. _____
Card No. _____

Proposed Commencement Date: 3-30-07

Existing or Proposed Well Depth: 400 Diameter: 8" Original Well I.D. Label Number: _____

Use: Domestic Community (Public System) Industrial Irrigation
 Thermal Injection Monitoring Other _____

Proposed Well Location:
County Grant Township 12 Range 28 Section 34 Tax Lot 3400
SE NE Or Latitude _____ Longitude _____

Street Address of well, if not assigned, nearest address: 43364 Hwy 26

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We have read the back of this form and the information provided is accurate to the best of our knowledge. WATER RESOURCES DEPT SALEM OREGON

Mark Brown Owner/Agent Name John Marriell Bonded Water Supply/Monitor Well Constructor Name 1606 License No.
2-6-07 Date Signed Marriell Well Drilling + Pumps Company 2-6-07 Date Signed
7-6-07 MB

OWNER PLEASE NOTE: This is not a water right application. The owner is responsible for obtaining a water right through the Water Resources Department, if required. The Oregon Health Division requires plans to be submitted and approved prior to construction if the well is to be used as a public system.

ADDITIONAL IMPORTANT INFORMATION ON BACK.

STATE OF OREGON
 WATER SUPPLY WELL REPORT
 (as required by ORS 537.765)

WELL I.D. # L 87507

START CARD # 177711

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number _____
 Name Mark Brown
 Address PO Box 1166
 City TUALATIN State OR Zip 97062

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

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other _____

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
 Depth of Completed Well 620' ft.
 Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
12"	0	12	Bentonite	0	12	8
12"	12	60	Cement	12	60	25
10"	60	179	Cement	60	179	35

How was seal placed: Method A B C D E
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Casing/Liner	Diameter	From	To	Gauge	Steel				Plastic				
					Welded	Threaded	Welded	Threaded	Welded	Threaded			
Casing:	3"	11.6	179	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	6"	160	620	182	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS
 Perforations Method Roller Perforator
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
530	590	1/4 x 1/4	350	6"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour.
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
65	550	600	2

Temperature of water 63 Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? yes Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: 142

(9) LOCATION OF WELL (legal description)
 County Grant
 Tax Lot 3400 Lot _____
 Township 12 N or S Range 28 26 E or W WM
 Section 34 SE 1/4 NE 1/4
 Lat _____ " or _____ (degrees or decimal)
 Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 43364 Hwy 26

(10) STATIC WATER LEVEL
64' ft. below land surface. Date 3-16-07
 _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found 142

From	To	Estimated Flow Rate	SWL
142	150	30	81'
550	565	65	64'

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Tan gravel med Hard - Small	0	18	
gray Hard clay with ash	18	142	
Fractured ash/clay water	142	150	81'
gray Hard clay	150	550	
gray Fractured clay water	550	565	64'
gray Hard clay	565	620	

Date Started 3-30-07 Completed 4-3-07

(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.

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WWC Number _____ Date _____

OCT 22 2008

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.

WWC Number 1606 Date 4-3-07

Signed John Maxwell

After recording, return to:
Brian J. MacRitchle
Merrill O'Sullivan, LLP
1070 NW Bond Street, Ste. 303
Bend, OR 97701

Until a change is requested,
send tax statements to:

Mark Alan Brown
9690 SW Pinehurst Dr.
Beaverton, OR 97005

STATUTORY WARRANTY DEED

STATE OF OREGON

County of _____ ss

I certify that this instrument has been received
and acknowledged by the parties of
said instrument.

Notary Public
by _____ Deputy,

DOC# _____ RCPT# _____ 33.58
9/28/2004



The consideration for this transfer is \$85,000.

Michael M. Breen, as Trustee U/D/T dated April 24, 2001, F/B/O the Michael M. Breen Trust, Grantor, conveys and warrants to Mark A. Brown and Yolanda R. Brown, husband and wife, Grantee, the real property described in the attached Exhibit A, free of encumbrances, except as specifically set forth herein:

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN 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 APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930.

18258

SUBJECT TO:

1. Rights of the public in and to any portion of the herein described premises lying within the boundaries of streets, roads or highways;
2. Any and all matters, including easements and assessments, if any, pertaining to irrigation ditches that may traverse the herein described property;
3. Agreement, including the terms and provisions thereof regarding Ditch and Water Rights between H. Ringsmyer and John Highland, Recorded February 12, 1911 in Book "D" of Leases and Agreements at Page 331; and
4. Easement, including the terms and provisions thereof for the construction and maintenance of transmission lines and poles, together with all appurtenances hereto as more particularly described therein granted to California Pacific & Utilities Company, Recorded December 17, 1946 in Book 49 at Page 251.

DATED this 27 day of September, 2004.

Michael M Breen TTB E
Michael M. Breen, as Trustee
U/D/T dated April 24, 2001, F/B/O the Michael M. Breen Trust

STATE OF OREGON; County of Deschutes ss.

On 9/27, 2004, personally appeared before me the above named Michael M. Breen, as Trustee U/D/T dated April 24, 2001, F/B/O the Michael M. Breen Trust and acknowledged the foregoing instrument to be his voluntary act.



Cheryl J. Scott
Notary Public for Oregon

MERRILL O'SULLIVAN, LLP
ATTORNEYS AT LAW
1070 NW BOND ST., SUITE 303
BEND, OR 97701

Statutory Warranty Deed

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042672

EXHIBIT "A"

Township 12 South, Range 26 East of the Willamette Meridian, Grant County, Oregon:

Section 34: A tract of land in the SE1/4NE1/4 described as follows:

Beginning at the East quarter corner of said Section 34;

thence N89°22'W, along the South line of the SE1/4NE1/4 of said Section 34, 839.0 feet to the TRUE POINT OF BEGINNING;

thence N29°25'E, 712.9 feet to the Southerly right of way line of John Day Highway;

thence, along said Southerly right of way line, as follows:

on a spiral curve right (the long chord of which spiral curve bears N57°59'W, 204.9 feet) 205.1 feet;

N55°56'W, 790.9 feet to the West line of said SE1/4NE1/4;

thence S1°54'W, along the West line of said SE1/4NE1/4, 1167.5 feet to the Southwest corner of said SE1/4NE1/4;

thence S89°22'E, along the South line of said SE1/4NE1/4, 517.4 feet to the TRUE POINT OF BEGINNING.

(Tax Acct. 16 12-26 3400; 5882)

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