

BURT SWINGLE
P.O. Box 589
LAKEVIEW, OR 97630
(541) 947-4151
Cell: (541) 219-0764

Dennis Glender
8664 SW Sand Ridge Road
Terrebonne, OR 97760

September 10, 2008

Dear Dennis,

Per our telephone conversation this date, I would like for you to represent Reba and me as our agent in the Oregon water right application process. This letter hereby authorizes you to do so.

Enclosed you will find a map of the property and a copy of the deed.

The property is located at:

93757 Leehmann Lane
Lakeview, OR 97630

Our mailing address is:

PO Box 589
Lakeview, OR 97630

Phone: Burt 541-947-4151 or Reba 541-947-3596

Cell: 541-219-0764

We propose to irrigate 80 acres from a well on the property.

Sincerely,


Burt Swingle


Reba Swingle

RECEIVED
OCT 17 2008
WATER RESOURCES DEPT
SALEM, OREGON



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: BURT and REBA SWINGLE
First Last

Mailing Address: PO Box 589

Lakeview OR 97630
City State Zip

Phone: (541) 947-4151 (541) 219-0764
Home Work Other

*Fax: _____ *Email Address: _____

B. Organizations

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

Name of Organization: _____

Name and Title of Person Applying: _____

Mailing Address or Organization: _____

City State Zip

Phone : _____
Day Evening

*Fax: _____ *Email Address: _____

*Optional

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

Last Updated: 6/26/2008

Ground Water/1

WR

RECEIVED
 OCT 17 2008
 WATER RESOURCES DEPT
 SALEM OREGON

Completion Date: _____

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	10"	¼ STEEL	350	130-350'	125'	25'	130'	PORT PIPE	350'

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)

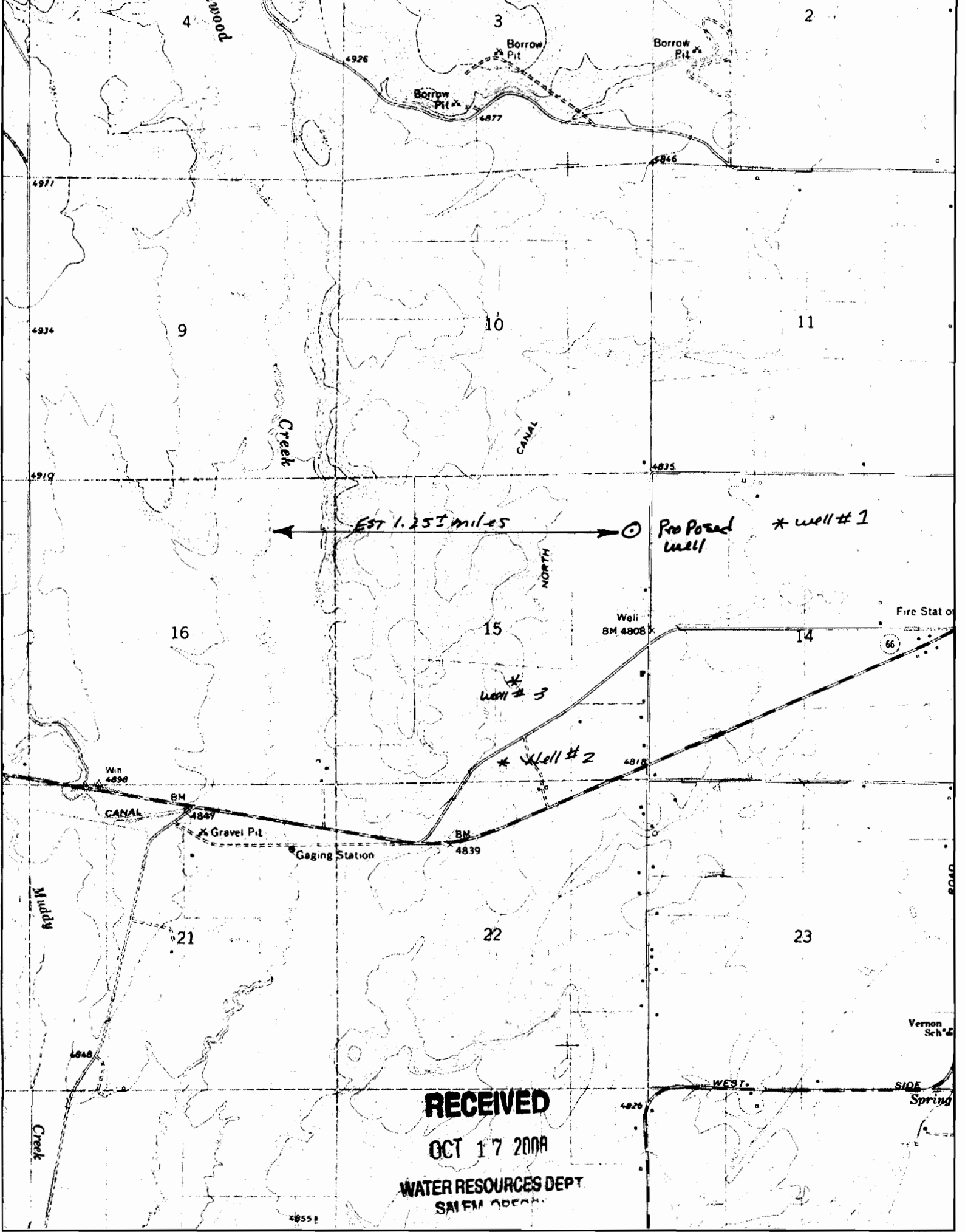
See list of beneficial uses provided in the instructions.

- 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**
- 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

10.1 17 2008

**WATER RESOURCES DEPT
SALEM, OREGON**



RECEIVED

OCT 17 2008

WATER RESOURCES DEPT
SAIFM OPERATIONS

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

WATER RESOURCES DEPT.
 SALEM, OREGON

well #1 JUN 29 1990

LAKE 4012 39S/19E/14bd
 (START CARD) # 4483

(1) OWNER: Well Number: 4483
 Name Loren & Kathryn Lucore
 Address HC 10 Box 463
 City Lakeview State OR Zip 97630

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

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

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 110 ft.
 Yes No
 Explosives used Type _____ Amount _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
16"	0 20	Cement	0 20	9 Sacks
10"	20 110			

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10 3/4"	0	108	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method torch
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60'	108'	1/8X6	390			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
120	21	Suction 35'	1 hr.
120	21.9'		8 hrs.

Temperature of water 50° Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom No
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: 28 to 52'

(9) LOCATION OF WELL by legal description:
 County Lake Latitude _____ Longitude _____
 Township 39S N or S, Range 19E E or W, WM.
 Section 14 SE 1/4 NW 1/4
 Tax Lot 301 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) None

(10) STATIC WATER LEVEL:
4 ft. below land surface. Date 6/1/90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 28'

From	To	Estimated Flow Rate	SWL
28	52	30	4
90	110	130	4

(12) WELL LOG: Ground elevation 4860

Material	From	To	SWL
Top soil (loam)	0	4	
Brown clay	4	28	
Fine brown sand	28	52	4
Sticky blue clay	52	90	4
Black coarse sand w/medium gravel	90	110	4

RECEIVED

OCT 17 2008

WATER RESOURCES DEPT
 SALEM OREGON

Date started 8/1/89 Completed June 1, 1990

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed _____ Date _____ WWC Number _____

(bonded) Water Well Constructor Certification:
 I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed [Signature] Date 6/1/90 WWC Number 766

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

Lake 2220

WATER WELL REPORT

Well #2

STATE OF OREGON

(Please type or print)
(Do not write above this line)

State Well No.

State Permit No.

RECEIVED
395/19E-75cl

JUL 20 1976

(1) OWNER:

Name Choc SheltonAddress Lakeview, Oregon 97630

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 13.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
8" Diam. from 0 ft. to 316 ft. Gage .250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Perforated? Yes No.Type of perforator used RAW cut

Size of perforations 1/8 in. by 3 in.
3456 perforations from 260 ft. to 316 ft.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? driller
Yield: 150 gal./min. with 20 ft. drawdown after 5 hrs.

Baller test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m.
Temperature of water 58° Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

chute

Well seal—Material used cementw/adductor pipe forgrave
Well sealed from land surface to 18 ft.
Diameter of well bore to bottom of seal 22 in.
Diameter of well bore below seal 16 in.
Number of sacks of cement used in well seal 14 sacks
Number of sacks of bentonite used in well seal _____ sacks
Brand name of bentonite _____
Number of pounds of bentonite per 100 gallons
of water _____ lbs./100 gals.

Was a drive shoe used? Yes No Flugs _____ Size: location _____ ft.Did any strata contain unusable water? Yes No

Type of water? _____ depth of strata _____

Method of sealing strata off _____

Was well gravel packed? Yes No Size of gravel: 1/4 to 3/4Gravel placed from 18 ft. to 316 ft.

(10) LOCATION OF WELL:

County Lake Driller's well number _____SW $\frac{1}{4}$ SE $\frac{1}{4}$ Section 15 T. 39S R. 19E W.M.

Bearing and distance from section or subdivision corner

7 miles west of Lakeview, OR

(11) WATER LEVEL: Completed well.

Depth at which water was first found 40 ft.Static level 20 ft. below land surface. Date 7/16/76

Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____

Depth drilled 316 ft. Depth of completed well 316 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
soil zone, sandy, brn.	0	5	
claystone, brn.	5	30	
clay, blue	30	40	
sand, fine, blue	40	42	20
clay, blue	42	59	
sand, fine, blue	59	63	
sandy clay, blue	63	78	
clay, blue	78	112	
gravel, fine, blue	112	116	
clay, blue	116	138	
gravel, fine, blue	138	141	
clay, blue	141	168	
high pressure gravel, med., blue	168	190	
clay, blue	190	194	
gravel, fine, blue	194	240	
clay & gravel, blue	240	316	

Work started 7/1 19 76 Completed 7/16 1976Date well drilling machine moved off of well 7/16 1976

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Ray Stooksberry Date 7/16, 1976Drilling Machine Operator's License No. 801

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name Jack Stooksberry, Jr.

(Person, firm or corporation)

(Type or print)

Address Rte. 2, Box 47, Lakeview, OR 97630[Signed] Jack Stooksberry, Jr.

(Water Well Contractor)

Contractor's License No. 211 Date 7/16, 1976

RECEIVED

(USE ADDITIONAL SHEETS IF NECESSARY)

SP-4058-119

OCT 17 2008

WATER RESOURCES DEPT
SALEM OREGON

well #3 LAKE 52007 52007

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

WELL I.D. # L 90680
START CARD # 193423

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

(1) LAND OWNER Well Number _____
Name Leo Filippi
Address P.O. Box 994
City Preston State WA Zip 98050

(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 175 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE		SEAL	
Diameter	From To	Material	From To (feet) Pounds
10"	0' 18'	benzoinite	0 18' 13
6"	18' 175'		

How was seal placed: Method A B C D E
 Other forced dry
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Diameter	From To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	0' 175'	0.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 175'

(7) PERFORATIONS/SCREENS Method torch
 Perforations Method downhole perforator
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
50'	75'	150µ	1 row			<input checked="" type="checkbox"/>	<input type="checkbox"/>
75'	140'	2 rows	2 rows			<input checked="" type="checkbox"/>	<input type="checkbox"/>
torch 140'	175'	3 rows	3 rows			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem nt	Time
360		173	1 hr.

Temperature of water 53°F Depth Artesian _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Yes No title
 Salty Muddy Other FEB 0 P 2008
Depth of strata: _____

(9) LOCATION OF WELL (legal description)
County Lake
Tax Lot Partition Plat 2045-B-71 parcel 2
Township 39 N of S Range 19 or W WM
Section 15 SE 1/4 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL
24.5' ft. below land surface. Date _____
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 138'

From	To	Estimated Flow Rate	SWL
138'	150'	360 gpm	24.5'

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Top soil	0'	10'	
brown sandy clay	10'	30'	
gray "	30'	125'	
green "	125'	150'	24.5'
gray "	150'	173'	
green clay	173'	175'	

Date Started 10/19/07 Completed 10/22/07

(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.

WWC Number _____ Date RECEIVED

Signed _____ OCT 17 2008

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the time period 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 1716 Date 11/20/07

Signed Linda Jandau

APR 17 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	WATER DEVELOPED BELOW 130'	IRRIGATION	448.8	78,000,000	EST 800 GPM

C. Maximum Rate of Use Requested

What is the maximum, instantaneous rate of water that will be used? 1.0 CFS
 (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 1 - OCTOBER 31
 (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: 80 ACRES
 (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): 15HP SUBMERCIBLE PUMP
- other means (describe): _____

B. Transport

How will you transport water to your place of use?

- Ditch or canal (give average width and depth):

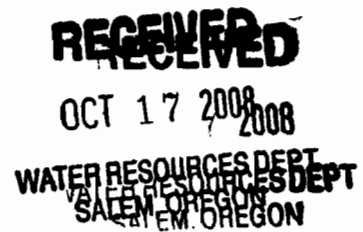
Width _____ Depth _____

Is the ditch or canal to be lined? Yes No

- Pipe (give diameter and total length):

Diameter 6" Length 2640'

- other, describe: _____



C. Application/Distribution Method

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

WATER WILL BE PUMPED INTO A LINED INTERMEDIATE POND. WATER WILL BE PUMPED FROM THE POND TO CHARGE THE MAIN LINES. MAIN LINES WILL RUN EAST TO WEST 1320' BY WELL PUMP, SOUTH TO NORTH WEST EDGE NE¼ NE¼ SEC 15.

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.

SPRINKLE IRRIGATION IS MOST EFFICIENT MEANS OF IRRIGATION

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: AFTER ISSUANCE OF PERMIT

Proposed date construction will be completed: 3 YEARS AFTER ISSUANCE OF PERMIT

Proposed date beneficial water use will begin: 5 YEARS AFTER ISSUANCE OF PERMIT

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.

CONFINING WATER ZONE DETERMINED FROM THE ENCLOSED WELL LOGS. ALL OF THESE WELLS ARE WITHIN A MILE OF THE PROPOSED WELL.

RECEIVED

OCT 17 2008

**WATER RESOURCES DEPT
SALEM, OREGON**

8. MAP REQUIREMENTS

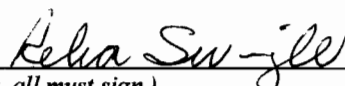
The Department cannot process your application without accurate information showing the source of water and location of water use. You must include a map with this application form that clearly indicates the township, range, section, and quarter/quarter section of the proposed well location and place 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, 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:

  10-15-08
Signature of Applicant (If more than one applicant, all must sign.) 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

Ground Water/6

RECEIVED

OCT 17 2008

**WATER RESOURCES DEPT
SALEM, OREGON**



Oregon Water Resources Department

FORM I
FOR IRRIGATION WATER USE

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

[X] Primary [] Supplemental

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

Primary: 80.0 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. ALFALFA HAY [X] 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:

240 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?

- [X] Daily during daytime hours [X] 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

Last revision: October 31, 1996

OCT 17 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: Burt and Reba Swingle
Mailing Address: P.O. Box 581
City: Lakeview State: Oregon Zip: 97630 Day Phone: 541-947-4151

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	¼ ¼	Tax Lot #	Plan Designation (e.g. Rural Residential/RR-5)	Water to be:	Proposed Land Use:
39	19	15	NE	100	A-1, Exclusive Farm Use	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	Irrigated Farm Land
39	19	15	NE	200	A1, Exclusive Farm Use	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	Irrigated Farm Land
						<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. Lake County

B. Description of Proposed Use

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

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

Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: 1.0 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: Applicants are applying to irrigate new lands located West of Lakeview in a Exclusive Farm Use zone.

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

OCT 17 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): LCLDO Article 2, EFU Zone

- 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 (c.g. plan amendments, rezoncs, 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
		<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.

The subject properties are 39 19 15, Tax Lots 100,200(Lake County Assessment Accounts 11619 and 11622) and are zoned A-1, Exclusive Farm Use. The Lake County Comprehensive Plan and Zone Ordinance intend for the subject property to be utilized for farm and agricultural use. The provision of water rights to the subject properties will enhance farming opportunities for the applicants.
Lake County is in support of the applicants obtaining the water rights.

Name: Ken Gerschler Title: County Planner
 Signature: [Signature] Phone: 541.947.6032 Date: September 25, 2008
 Government Entity: Lake 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

OCT 17 2008

**WATER RESOURCES DEPT
SALEM, OREGON**

M0640404

STATE OF OREGON, Lake } ss.
County of _____

I certify that the within instrument was received for record on the 30 day of November, ~~2007~~, at 3:19 o'clock P. M., and recorded in book/reel/volume No. 271 on page 127 and/or as fee/file/instrument/microfilm/reception No. 64-404, Records of said County.

Witness my hand and seal of County affixed.

Stacie Deaney Clerk
NAME TITLE

By Monica Weidner, Deputy.

SPACE RESERVED FOR RECORDER'S USE

123894

Reba Swingle
20 Box 589
Lakeview, OR 97630
Grantor's Name and Address

Reba & Burt Swingle
20 Box 589
Lakeview, OR 97630
Grantee's Name and Address

After recording, return to (Name, Address, Zip):
Reba & Burt Swingle
20 Box 589
Lakeview, OR 97630

Until requested otherwise, send all tax statements to (Name, Address, Zip):
Same as above

WARRANTY DEED - STATUTORY FORM (INDIVIDUAL GRANTOR)

conveys and warrants to Burt Swingle & Reba Swingle as tenants by the entirety, Grantor, Reba Swingle, Grantee, the following described real property free of encumbrances, except as specifically set forth herein, situated in _____ County, Oregon, to-wit:

TOWNSHIP 39 SOUTH, RANGE 19 EAST OF THE WILLAMETTE MERIDIAN, SECTION 15: THE N1/2 S1/2 NE1/4 NE1/4.

11619

39 19 15-100

RECEIVED

OCT 17 2008

WATER RESOURCES DEPT
SALEM, OREGON

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

The property is free from encumbrances, except (if none, so state):

The true consideration for this conveyance is \$ _____ (Here, comply with the requirements of ORS 93.030.)

Dated this 30 day of November, ~~2007~~

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.

Reba Swingle

STATE OF OREGON, County of Lake) ss.
This instrument was acknowledged before me on November 30, 2007



Monica Weidner
Notary Public for Oregon
My commission expires June 12, 2010

TRAK

859

M0611950

~~M0601716~~

EXHIBIT "A"

In the County of Lake, State of Oregon, as follows:

Parcel 1

Township 39 South, Range 19 East of the Willamette Meridian,
Section 15: The S1/2 N1/2 SW1/4 NE1/4.

Parcel 2

Township 39 South, Range 19 East of the Willamette Meridian,
Section 15: The N1/2 N1/2 SW1/4 NE1/4.

Parcel 3

Township 39 South, Range 19 East of the Willamette Meridian,
Section 15: The N1/2 NE1/4 NE1/4;
The S1/2 S1/2 NE1/4 NE1/4;
The NW1/4 NE1/4;
The N1/2 SE1/4 NE1/4.

RECEIVED

OCT 17 2008

WATER RESOURCES DEPT
SALEM, OREGON

State of Oregon } Reel 60
County of Lake } ss. File 1715

State of Oregon } Reel 61
County of Lake } ss. File 1949

I hereby certify that the within instrument
was received and filed for record on the
9 day of April 20 07
9:20 o'clock AM and recorded
on page 858 in book 2169 record
of Woods of said County
Glenn Blaney
County Clerk

By Monica Mednes Deputy

I hereby certify that the within instrument
was received and filed for record on the
18 day of Dec 20 06
11:00 o'clock AM and recorded
on page 1221 in book 268 record
of Woods of said County
Glenn Blaney
County Clerk

By Monica Mednes Deputy

859

1224

M0611949

~~M-601715~~

858

After recording, mail to:
Melvin D. Ferguson
Attorney at Law
514 Walnut Avenue
Klamath Falls, OR 97601

After Recording:
Send tax statements to:
Burt Swingle and Reba W. Swingle, h/w
P. O. Box 589
Lakeview, OR 97630

121820

Being Re-recorded to correct legal description

STATUTORY BARGAIN AND SALE DEED

~~120894~~

Reba Swingle, Grantor, conveys to Burt Swingle and Reba W. Swingle, husband and wife as tenants by the entirety, Grantees, the following described real property located in Lake County Oregon:

See Exhibit A which is made part of this conveyance.

The true consideration for this conveyance is \$0.00.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 197.352. THIS INSTRUMENT DOES 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 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352.

Dated this 18 day of Dec, 2006

GRANTOR

Reba Swingle
Reba Swingle

STATE OF OREGON)
)ss.
County of Lake)

This instrument was acknowledged before me on this 18 day of Dec 2006 by Reba Swingle.

Stacie Geaney
Notary Public for Oregon
My Commission Expires: 8-24-08



RECEIVED
OCT 17 2008
WATER RESOURCES DEPT
SALEM, OREGON

858