



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

RECEIVED

SEP 2 - 2010

Request for Assignment

WATER RESOURCES DEPT
 SALEM, OREGON

If for multiple rights, a separate form and fee for each right will be required.

I, Jack P. Konyon, Trustee of the Jack P. Konyon and Marion Konyon Joint Revocable Living Trust and Northwest Farm Credit Services FLCA
 (Name of Applicant / Permit / Transfer Holder / License Holder/GR Certificate of Registration)

2911 Tennyson Avenue, Suite 301, PO Box 72300 Eugene OR 97401 541-685-6140
 (Mailing Address) (City) (State) (Zip) (Phone #)

- hereby assign all my interest in and to application/permit/transfer/license/GR Certificate of Registration;
- hereby assign all my interest in and to a portion of application/permit/transfer/license/GR Certificate of Registration; (You must include a map showing the portion of the application/permit/transfer/license/GR Certificate of Registration to be assigned.)
- hereby assign a portion of my interest in and to the entire application/permit/transfer/license/GR Certificate of Registration:

Application # S-73410 ; Permit # S53605 ; Transfer # _____
 -OR-
 License # _____ ; GR Statement # _____ ; GR Certificate of Registration # _____

As filed in the office of the Water Resources Director, to:

Jack P. Konyon, Trustee of the Jack P. Konyon and Marion Konyon Joint Revocable Living Trust and Northwest Farm Credit Services FLCA and Northwest Farm Credit Services, PCA
 (Name of New Owner)

2911 Tennyson Avenue, Suite 301, PO Box 72300 Eugene OR 97401 (541) 685-6140
 (Mailing Address) (City) (State) (Zip) (Phone #)

Note: If there are other owners of the property described in the Application, Permit, Transfer, License, or GR Certificate of Registration, you must provide a list of all other owners' names and mailing addresses and attach it to this form.

I hereby certify that I have notified all other owners of the property described in this Application, Permit, Transfer, License, or GR Certificate of Registration of this Request for Assignment

Witness my hand this 23 day of Oct, 2009
 Applicant/Permit Holder [Signature]
 Applicant/Permit Holder _____

02/23/2
 [Signature]

DO NOT WRITE IN THIS BOX

- This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem, Oregon.
 - Fee receipt # 10092
 - For Director by Jerry Sauter, Program Analyst in Water Rights Division [Signature]

The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of \$75.

RECEIVED

SEP 18 2010

WATER RESOURCES DEPT
 SALEM, OREGON