

Application for a Permit to Use Ground Water



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

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SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME <u>Jay D. MYERS</u>		PHONE (HOME) <u>541-210-3175</u>	
PHONE (WK) <u>SAME</u>	CELL <u>SAME</u>	FAX <u>541 878 7311</u>	
ADDRESS <u>1624 LENORA DR</u>			
CITY <u>MEDFORD</u>	STATE <u>OR</u>	ZIP <u>97504</u>	E-MAIL <u>AAUMYER@YAHOO.COM</u>

WATER RESOURCES DEPT
Salem, Oregon

Organization Information

NAME <u>ORCHARD GLADE WATER DIST.</u>		PHONE		FAX
ADDRESS <u>PO BOX 223</u>			CELL	
CITY <u>SHADY COVE</u>	STATE <u>OR</u>	ZIP <u>97539</u>	E-MAIL <u>M.MICHELE 112@EMBARQMAIL.COM</u>	

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

AGENT / BUSINESS NAME		PHONE		FAX
ADDRESS			CELL	
CITY	STATE	ZIP	E-MAIL	

Note: Attach multiple copies as needed

By my signature below I confirm that I understand:

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- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application.
- I cannot use water legally until the Water Resources Department issues a permit.
- Oregon law requires that a permit be issued before beginning construction of any proposed well, unless the use is exempt. Acceptance of this application does not guarantee a permit will be issued.
- If I get a permit, I must not waste water.
- If development of the water use is not according to the terms of the permit, the permit can be cancelled.
- The water use must be compatible with local comprehensive land-use plans.
- Even if the Department issues a permit, I may have to stop using water to allow senior water-right holders to get water to which they are entitled.

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

Jay D. Myers
Applicant Signature
Jay D. Myers
Applicant Signature

Jay D. Myers
Print Name and title if applicable
Jay D. Myers
Print Name and title if applicable

5/10/10
Date
5/10/10
Date

For Department Use		
App. No. <u>G-17430</u>	Permit No. _____	Date _____

SECTION 2: PROPERTY OWNERSHIP

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

Yes

There are no encumbrances.

This land is encumbered by easements, rights of way, roads or other encumbrances.

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No

I have a recorded easement or written authorization permitting access.

I do not currently have written authorization or easement permitting access.

Written authorization or an easement is not necessary, because the only affected lands I do not own are state-owned submersible lands, and this application is for irrigation and/or domestic use only (ORS 274.040).

Water is to be diverted, conveyed, and/or used only on federal lands.

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SALEM, OREGON

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

SEE ATTACHED SHEET "ORCHARD BLADE SUBDIVISION"

SECTION 3: WELL DEVELOPMENT

WELL NO.	NAME OF NEAREST SURFACE WATER	IF LESS THAN 1 MILE:	
		DISTANCE TO NEAREST SURFACE WATER	ELEVATION CHANGE BETWEEN NEAREST SURFACE WATER AND WELL HEAD
	ROGUE RIVER	1/4 mile	135'

Please provide any information for your existing or proposed well(s) that you believe may be helpful in evaluating your application. For existing wells, describe any previous alteration(s) or repair(s) not documented in the attached well log or other materials (attach additional sheets if necessary).

4400 GAL HOLDING TANKS ADDED TO THE ORIGINAL 3700 GAL HOLDING TANK

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SECTION 3: WELL DEVELOPMENT, CONTINUED

Source (aquifer), if known: Low YIELD BEDROCK

Total maximum rate requested: 45 Gpm (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

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

OWNER'S WELL NAME OR NO.	PROPOSED	EXISTING	WELL ID (WELL TAG) NO.* OR WELL LOG ID**	FLOWING ARTESIAN	CASING DIAMETER	CASING INTERVALS (IN FEET)	PERFORATED OR SCREENED INTERVALS (IN FEET)	SEAL INTERVALS (IN FEET)	MOST RECENT STATIC WATER LEVEL & DATE (IN FEET)	PROPOSED USE			
										SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL-SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FEET)
	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	6" 4"	40'	40'→123' 83'	38'	29' 9/27/89	Low YIELD BEDROCK	123' 83'	45	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>									

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* Licensed drillers are required to attach a Department-supplied Well Tag, with a unique Well ID or Well Tag Number to all new or newly altered wells. Landowners can request a Well ID for existing wells that do not have one. The Well ID is intended to serve as a unique identification number for each well.
 ** A well log ID (e.g. MARI 1234) is assigned by the Department to each log in the agency's well log database. A separate well log is required for each subsequent alteration of the well.
 *** Source aquifer examples: Troutdale Formation, gravel and sand, alluvium, basalt, bedrock, etc.

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SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Expanded Domestic	YEAR ROUND	

Exempt Uses: Please note that 15,000 gallons per day for single or group **domestic** purposes and 5,000 gallons per day for a single **industrial or commercial** purpose are exempt from permitting requirements.

For irrigation use only:

Please indicate the number of primary and supplemental acres to be irrigated (*must match map*).

Primary: 6.5 Acres Supplemental: _____ Acres

List the Permit or Certificate number of the underlying primary water right(s): _____

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

- If the use is **municipal or quasi-municipal**, attach **Form M**
- If the use is **domestic**, indicate the number of households: 13
- If the use is **mining**, describe what is being mined and the method(s) of extraction: _____

SECTION 5: WATER MANAGEMENT

A. Diversion and Conveyance

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

Pump (give horsepower and type): GRUNDFOSS / 2 Horsepower

Other means (describe): _____

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

B. Application Method

What equipment and method of application will be used? (e.g., drip, wheel line, high-pressure sprinkler)

Drip & Sprinkler

C. Conservation

Please describe why the amount of water requested is needed and measures you propose to: prevent waste; measure the amount of water diverted; prevent damage to aquatic life and riparian habitat; prevent the discharge of contaminated water to a surface stream; prevent adverse impact to public uses of affected surface waters.

Meters, WATER ODDS & EVENTS, OAD ADDRESS M/W/F
Even TO/TH/SAT.

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SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR

If you would like to store ground water in a reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Reservoir name: _____ Acreage inundated by reservoir: _____

Use(s): _____

Volume of Reservoir (acre-feet): _____ Dam height (feet, if excavated, write "zero"): _____

Note: If the dam height is greater than or equal to 10.0' above land surface AND the reservoir will store 9.2 acre feet or more, engineered plans and specifications must be approved prior to storage of water.

SECTION 7: USE OF STORED GROUND WATER FROM THE RESERVOIR

If you would like to use stored ground water from the reservoir, complete this section (*if more than one reservoir, reproduce this section for each reservoir*).

Annual volume (acre-feet): _____

USE OF STORED GROUND WATER	PERIOD OF USE

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SECTION 8: PROJECT SCHEDULE

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Date construction will begin: Currently Exists

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Date construction will be completed: _____

Date beneficial water use will begin: _____

SECTION 9: REMARKS

Use this space to clarify any information you have provided in the application (*attach additional sheets if necessary*).

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SALEM, OREGON

ORCHARD GLADE SUBDIVISION

CONTACT LIST

Ralph Fucci 6779 Rogue River Drive Shady Cove, OR 97539	Rodney & Ann Stiver 6783 Rogue River Drive PO Box 905 Shady Cove, OR 97539
Jeffrey & Sheila Smith 106 Orchard Lane Shady Cove, OR 97539	Michael & Linda Ward 109 Orchard Lane Shady Cove, OR 97539
Michele Burdette (fka Myers) 112 Orchard Lane Shady Cove, OR 97539 Jay D. Myers 511 Mary Street Medford, OR 97504	Jim & Arlene Langer 118 Orchard Lane Shady Cove, OR 97539
Dale & Kim Miller 121 Orchard Lane Shady Cove, OR 97539	Daniel Bogdanoff & Charlene Patterson 124 Orchard Lane Shady Cove, OR 97539
CCV Ventures LLC c/o Ray & Fay Chezik PO Box 807 Eagle Point, OR 97524 (re: 132 Orchard Lane, Shady Cove, OR)	Joel & Barbara Gilchrist 138 Orchard Lane Shady Cove, OR 97539
Andrew (Jay) & Melinda Spolski 146 Orchard Lane Shady Cove, OR 97539	Craig Brewster & Susan Jensen 149 Orchard Lane PO Box 156 Shady Cove, OR 97539
Paul & Carolyn Gentry 977 St Andrews Way Eagle Point, OR 97524 (re: 152 Orchard Lane, Shady Cove, OR)	

SEP 14 2010

G-17430

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 807.900)

(START CARD) # 12837

(1) OWNER: **JIM MARTINSON**
Address: **P.O. BOX 1004**
City: **SEASIDE COVE, OR 97139**

(2) TYPE OF WORK:
 New Well Repair Modification Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Casing
 Other

(4) PROPOSED USE:
 Domestic Commercial Industrial Irrigation
 Flood Injection Other

(5) BORE HOLE CONSTRUCTION:
Depth of casing: **123 ft**
Depth of well: **25 ft**

Table with columns: Material, From, To, Amount, Remarks. Includes rows for GROUT and 10SACKS.

Remarks: A B C D E

Table with columns: Material, From, To, Weight, Unit, Remarks. Includes rows for 6" and 4" materials.

(7) PERFORATION/SCREENS:
 Perforation Method: **SAN**

Table with columns: From, To, Material, Remarks. Includes rows for 60 and 120 materials.

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Inlet Outlet Rising

Table with columns: Discharge, Duration, Inflow, Time. Includes row for 300PM, 94, 123, 15.

(9) LOCATION OF WELL by legal description:
County: **JACKSON**
Township: **34N** Range: **1W** Section: **16SE**
Tract: **1700**
Address: **6475 ROCK RIVER DRIVE, SEASIDE COVE**

(10) STATOWATER LEVEL:
29 ft above/below ground. Date: **9-27-89**

Table with columns: From, To, Estimated Flow Rate, SWL. Includes row for 54, 103, 300PM, 29.

(11) WELL LOG: Table with columns: Material, From, To, SWL. Lists various soil and rock layers like SOIL, BROWN CLAY, CONGLOMERATE, etc.

Installed: **9-27-89** Completed: **9-27-89**

Contractor: **WEDDER FILL WELLS INC**
Address: **6206 15th St NW**
Phone: **703-441-0760**
Fax: **(615) 684-6535**

Contractor Signature: **James Malin** WWC Number: **1207**
Date: **9-27-89**

STATE OF OREGON WATER WELL REPORT (As required by ORS 897.900)

(START CARD) # 12637

(1) OWNER: Name JIM MARTINSON Address P.O. BOX 1004 City SHADY COVE, OR Zip 97539

(2) TYPE OF WORK: [X] New Well [] Repair [] Modification [] Abandon

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Other

(4) PROPOSED USE: [X] Domestic [] Commercial [] Industrial [] Irrigation [] Flood [] Other

(5) BORE HOLE CONSTRUCTION: Depth of Completed Well 123 ft

Table with columns: Material, From, To, Amount. Row 1: CEMENT, 0, 38, 10 SACKS

Seal Material: [X] A [] B [] C [] D [] E

Table with columns: Casing/Liner, Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Row 1: 6" 2 38 25 [X] [] [X] []

(7) PERFORATIONS/SCREENS: Method SAM

Table with columns: From, To, Size, Number, Diameter, Spacing, Casing, Liner. Row 1: 40, 123, 1/2 X 1/2, 80, [] [] [] [] [] []

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

Table with columns: Yield, Duration, Definition, Time. Row 1: 50 GPM, 93, 123, 1 hr

Temperature of water: _____ Depth: _____

(9) LOCATION OF WELL by legal description: County JACOBSON Township 34N Range 14W Section 16DC The Lot 1200 Next to 6675 ROGUE RIVER DRIVE, SHADY COVE

(10) STATIC WATER LEVEL: 29 ft below land surface Date 9-27-89

(11) WATER BEARING ZONES: Depth at which water was first found 54

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 54, 103, 50 GPM, 29

(12) WELL LOG: Groundwater

Table with columns: Depth, Soil Description, From, To, SWL. Rows include SOIL, BROWN; CLAY, BROWN; CONGLOMERATE, BROWN; CLAYSTONE, BROWN, SOFT; CLAYSTONE, BLUE, SOFT; CLAYSTONE, BROWN; CLAYSTONE, BLUE; CLAYSTONE, GREY, SOFT.

Contracted Water Well Constructor Certification: I certify that the work performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards.

Contracted Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above.

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

OCT 02 1989
 WATER RESOURCES DEPT.
 SALEM, OREGON

JMK
128
34S/1W/16dc
 (START CARD) # 12857

(1) OWNER: Jim Martinson Well Number: _____
 Name JIM MARTINSON
 Address P.O. BOX 1004
 City SHADY COVE, State OR Zip 97539

(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 123 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
10"	0 38	CEMENT	0 38	10SACKS	
6"	38 123				

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: 6"	+2	38	.250	<input checked="" type="checkbox"/> X	<input type="checkbox"/>	<input checked="" type="checkbox"/> Y	<input type="checkbox"/>
Liner: 4"	0	123	160	<input type="checkbox"/> S	<input checked="" type="checkbox"/> K	<input checked="" type="checkbox"/> Y	<input type="checkbox"/>

Final location of shoe(s) 38

(7) PERFORATIONS/SCREENS:

Perforations Method SAW
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tela/pipe size	Casing	Liner
40	123	1X8X8	80			<input type="checkbox"/>	<input checked="" type="checkbox"/> X

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
50GPM	94	123	1 hr.

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

(9) LOCATION OF WELL by legal description:
 County JACKSON Latitude _____ Longitude _____
 Township 34N N or S, Range 1W E or W, WM.
 Section 16DC 1/4 1/4
 Tax Lot 1700 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) NEXT TO 6675 ROGUE RIVER DRIVE, SHADY COVE

(10) STATIC WATER LEVEL:
29 ft. below land surface. Date 9-27-89
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 54

From	To	Estimated Flow Rate	SWL
54	103	50GPM	29

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
SOIL, BROWN	0	2	
CLAY, BROWN	2	14	
CONGLOMERATE, BROWN	14	34	
CLAYSTONE, BROWN, SOFT	34	44	
CLAYSTONE, BLUE, SOFT	44	46	
CLAYSTONE, BROWN	46	48	
CLAYSTONE, BLUE	48	103	
CLAYSTONE, GREY, SOFT	103	123	29

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 WATER RESOURCES DEPT
 SALEM, OREGON
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Date started 9-27-89 Completed 9-27-89

(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 MEDINA WELL DRILLING WWC Number _____
3285 Hanley Road

(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 Josquin Medina WWC Number 1207
 Date 9-27-89

G-17430

Cascade Pump

Sales



WELL TESTS
PUMPS • WATER CONDITIONING
 P.O. Box 881
 Rogue River, OR 97537
 Lic.# 40886
 Phone 582-3662

Service

WATER RESOURCES DEPT
 SALEM, OREGON

Date 9-20-01

Customer Ray Johnson
 Address lot 8 Orchard Glade Subdivision
 City Chady Cave State OR
 Well Location Same

Well Size 6" Depth 120' Static Water Level _____
 Depth of Pump _____ Pump Size 2 HP Pipe Size 2"

Start Test	Time	PSI Water Level	Meter Reading - Gals.	Time	PSI Water Level	Meter Reading - Gals.
		9:55	18	406760	12:10	11
	10:10	12	407500	12:25	11	413880
	10:25	12	408180	12:40	11	414610
	10:40	12	408900	12:55	11	415320
	10:55	12	409640	1:10	11	416030
	11:10	12	410320	1:25	11	416730
	11:25	11	411020	1:40	11	417440
	11:40	11	411720	1:55	11	418100
	11:55	11	412420			
	!					

Total Hours Pumped 4 HRS Total Galonage 11340

Average G.P.M. 47 GPM

Signed [Signature]

647430

OCT 14 2001



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: ORCHARD LAKE WATER DISTRICT — Jay Myers
First Last

Mailing Address: 11024 LENORA DR

MISTYFORD OR 97504 Daytime Phone: 541-210-3175
City State Zip

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:
<u>ORCHARD LN</u>		<u>SUB-DIVISION</u>				<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>IRRIGATION</u>
						<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:

Jackson Co., SHADY CREEK

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 of Ground Water Registration Modification

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

Estimated quantity of water needed: _____ 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:

TO BE ABLE TO IRRIGATE 1/2 ACRE PER LOT. 13 LOTS IN SUBDIVISION

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

G-17430

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

SIGNED @ PLANNING DEPT. COUNTY

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): CK

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.

OCT 14 2010

Name: Gretchen Meloth Title: Administrative Assistant
 Signature: Gretchen Meloth Phone: 541-878-8204 Date: 10/4/10
 Government Entity: _____

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: _____

G1-17430

35

Jackson County Official Records 2007-028006
R-WD
Cnt=1 Stn=4 SHAWBJ 06/14/2007 08:00:00 AM
\$10.00 \$5.00 \$5.00 \$11.00 Total:\$31.00



01269166200700280060020025

After recording return to:
Sheila R. Smith
106 Orchard Lane
Shady Cove, OR 97539

I, Kathleen S. Beckett, County Clerk for Jackson County, Oregon,
certify that the instrument identified herein was recorded in the Clerk
records.
Kathleen S. Beckett - County Clerk

Until a change is requested, all tax statements shall be sent
to the following address:
Sheila R. Smith
106 Orchard Lane
Shady Cove, OR 97539

STATUTORY WARRANTY DEED

Woodrow V. Smith and Shirley R. Smith, Grantor, conveys and warrants to Sheila R. Smith and Jeffrey D. Smith, as tenants by the entirety, Grantee, the following described real property free of encumbrances except as specifically set forth herein:

Lot Twelve (12) in ORCHARD GLADE SUBDIVISION in the City of Shady Cove, in Jackson County, Oregon, according to the official plat thereof, recorded in Volume 24, Page 36, Plat Records.

Account 10916440, Levy Code 9-15, Map 341W16 DC 1717

Tax Account No. 10916440

This property is free of encumbrances, EXCEPT:
SEE EXHIBIT "A" WITH EXCEPTIONS
The true consideration for this conveyance is \$550,000.00

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 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 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352.

Dated 12 day of June, 2007

Woodrow V. Smith
Woodrow V. Smith

Shirley R. Smith
Shirley R. Smith

STATE OF OREGON
COUNTY OF Jackson

The foregoing instrument was acknowledged before me this 12 day of June, 2007 by Woodrow V. Smith and Shirley R. Smith.

OCT 14 2010

Jog
Notary Public State of Oregon
My commission expires: 11-19-10



Order No. 42g0422458

677430

Exhibit "A" with Exceptions

Subject to:

1. **The premises herein described are within the Sams Valley Irrigation District, notice of which appears in Instrument recorded May 29, 1980 as No. 80-10053, Official Records, and are subject to the statutory powers thereof, including the power of assessment. As of the date of this report/policy, said district is inactive.**
2. **Permission to use water from well as granted in Instrument recorded June 29, 1946 in Volume 271 page 19 of the Deed Records of Jackson County, Oregon. (Location of well not specified)**
3. **Easements, subject to the terms and provisions thereof, as delineated and set forth on the recorded plat,
For : Public utility easement**
4. **Terms, conditions and provisions contained in the water use declaration recorded May 4, 2001 as No. 01-20265 of the Official Records of Jackson County, Oregon.**
5. **Covenants, conditions, restrictions, easements, and/or setbacks, imposed by Instrument, including the terms and provisions thereof,
Recorded : May 4, 2001
As : 01-20266**

NOTE: This exception omits from said instrument any covenant, condition or restriction based on race, color, religion, sex, handicap, familial status or national origin as provided in 42 USC 3604, unless and only to the extent that the covenant (a) is not in violation of state or federal law, (b) is exempt under 42 USC 3607, or (c) relates to a handicap, but does not discriminate against handicapped people.

OCT 14 2011

G-17430

After recording return to:
Jackson County Title
Division of Lawyers Title Insurance Corporation
1555 E. McAndrews Road, Suite 100
Medford OR 97504
Until a change is requested, all tax statements
shall be sent to Grantee at the following address:
PO Box 129
Rogue River OR 97537-0129

STATUTORY WARRANTY DEED

Leonhard Taumann

, Grantor, conveys and warrants to
~~Deputy~~ Bogdanoff Construction Co. an Oregon Corporation

, Grantee, the following described real property free of encumbrances except as specifically set forth herein:
See Exhibit "A" attached hereto and made a part hereof

This property is free of encumbrances, EXCEPT:
See Exhibit "A" attached hereto and made a part hereof

The true consideration for this conveyance is \$ 54,000.00.

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.

Dated this 14 day of Aug, 2002

Leonhard Taumann by Ray M. Johnson, F.O.A.
Leonhard Taumann

STATE OF OREGON, COUNTY OF Jackson

The foregoing instrument was acknowledged before me this 14th day of August, 2002, by
Leonhard Taumann, by Ray M. Johnson, his attorney if fact

Lori A. Billings
Notary Public for Oregon
My commission expires 1/20/06



OCT 14 2002

EXHIBIT A

Lot Nine (9) in ORCHARD GLADE SUBDIVISION in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, now of record.

(Code 9-15, Account #1-091641-5, Map #341W16DC, Tax Lot #1714)

SUBJECT TO:

- 1. 2002-03 taxes, a lien in an amount to be determined, but not yet payable.
- 2. The premises herein described are within the Sams Valley Irrigation District, notice of which is given by instrument recorded May 29, 1980 as No. 80-10053 of the Official Records of Jackson County, Oregon, and are subject to statutory powers, including the power of assessment.
- 3. Permission to use water from well as granted in instrument recorded June 29, 1946 in Volume 271 page 19 of the Deed Records of Jackson County, Oregon. (Location of well not specified)
- 4. A public utility easement, adjacent to Orchard Lane, as set forth on the recorded plat and declaration.
- 5. Terms, conditions and provisions contained in the water use declaration, recorded May 4, 2001 as No. 01-20265, of the Official Records of Jackson County, Oregon.
- 6. Covenants, conditions, restrictions, easements, and/or setbacks imposed by instrument, subject to the terms and provisions thereof, recorded May 4, 2001 as No. 01-20266, of the Official Records of Jackson County, Oregon.

NOTE: This exception omits any covenant, condition or restriction based on race, color, religion, sex, handicap, familial status or national origin as provided in 42 U.S.C. Sec.3604, unless and only to the extent that the covenant (a) is not in violation of state or federal law, (b) is exempt under 42 U.S.C. Sec.3607, or (c) relates to a handicap, but does not discriminate against handicapped people.

Jackson County, Oregon
Recorded
OFFICIAL RECORDS

AUG 16 2002

2:10 PM
[Signature]
COUNTY CLERK

①



After recording return to:
Merridy Dale Miller and Kim I. Miller
1809 Siskiyou Boulevard
Medford, OR 97504

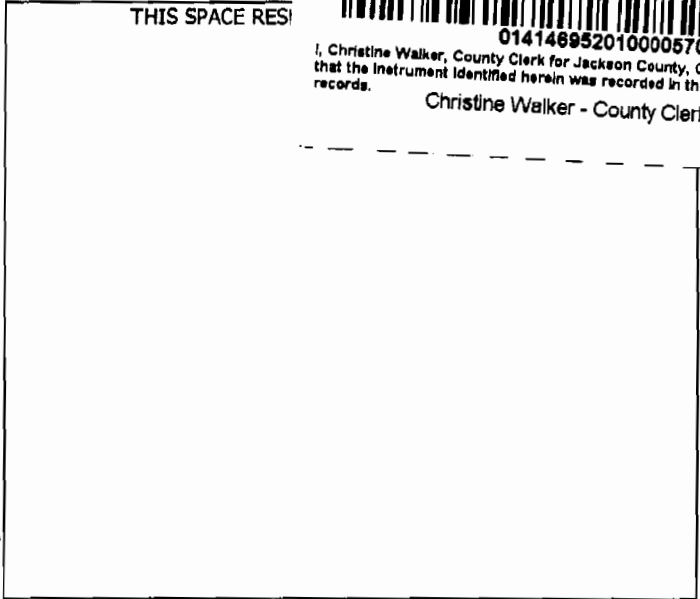
Until a change is requested all tax statements
shall be sent to the following address:
Merridy Dale Miller and Kim I. Miller
1809 Siskiyou Boulevard
Medford, OR 97504

File No.: 7161-1522396 (pkw)
Date: February 12, 2010

Jackson County Official Records 2010-005700
R-WD
Cnt=1 HELMANCD 02/19/2010 01:11:40 PM
\$15.00 \$10.00 \$5.00 \$11.00 \$15.00 Total:\$58.00



I, Christine Walker, County Clerk for Jackson County, Oregon, certify
that the instrument identified herein was recorded in the Clerk
records.
Christine Walker - County Clerk



15
26
15

STATUTORY WARRANTY DEED

Ronald D. Taylor and Nancy R. Taylor a protected person, by and through Clare Anne Bruch, Managing Member of Advocate and Consultants for Elders, LLC her conservator, Grantor, conveys and warrants to Merridy Dale Miller and Kim I. Miller, husband and wife as tenants by the entirety, Grantee, the following described real property free of liens and encumbrances, except as specifically set forth herein:

LEGAL DESCRIPTION: Real property in the County of Jackson, State of Oregon, described as follows:

LOT 3 IN ORCHARD GLADE SUBDIVISION IN THE CITY OF SHADY COVE, JACKSON COUNTY, OREGON, ACCORDING TO THE OFFICIAL PLAT THEREOF, RECORDED IN VOLUME 24, PAGE 36, PLAT RECORDS.

Subject to:

- 1. Covenants, conditions, restrictions and/or easements, if any, affecting title, which may appear in the public record, including those shown on any recorded plat or survey.

The true consideration for this conveyance is **\$255,000.00**. (Here comply with requirements of ORS 93.030)

G-77430

OCT 14 2010

1

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2009. 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, 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 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009.

Dated this 17 day of February, 2010.

Ronald D. Taylor by Clare Anne Bruch,
Pursuant to Circuit Court Order filed January
10, 2010, in Case No. 07-4152-D4

Clare Anne Bruch
Clare Anne Bruch

Clare Anne Bruch, Conservator for Nancy R.
Taylor, a Protected Person

Clare Anne Bruch, Conservator
Clare Anne Bruch, Conservator

STATE OF Oregon)
County of Jackson) ss.



This instrument was acknowledged before me on this 17 day February, 2010
by Clare Anne Bruch for Ronald D. Taylor Pursuant to Circuit Court filed January 10, 2010, in Case No.
07-4152-D4.

Patty White
Notary Public for Oregon
My Commission Expires: 2-27-12

APN: 1-091635-1

Statutory Warranty Deed
- continued

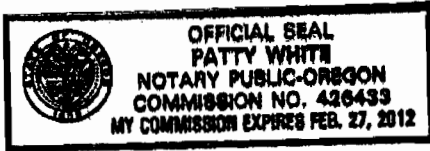
File No.: 7161-1522396 (pkw)
Date: 02/12/2010

STATE OF Oregon)
)ss.
County of Jackson)

On this 17 day February, 2010 personally appeared **Clare Anne Bruch**, who being duly sworn (or affirmed), did say that she is the conservator for **Nancy R. Taylor, a protected person**, and that she executed the foregoing instrument by authority of and in behalf of said protected person and she acknowledge said instrument to be the act and deed of said protected person.

Patty White

Notary Public for Oregon
My commission expires: 2-27-12



After recording return to:
Lawyers Title Insurance Corporation
1555 E. McAndrews Road, Suite 100
Medford OR 97504

Until a change is requested, all tax statements shall be sent to Grantee at the following address:

*4976 Richborough Court
W. Las Vegas NV 89031*

STATUTORY WARRANTY DEED

Leonhard Taumann

, Grantor, conveys and warrants to
Michael L. Ward and Linda S. Ward, husband and wife, as tenants by the entirety

, Grantee, the following described real property free of encumbrances except as specifically set forth herein:
See Exhibit "A" attached hereto and made a part hereof

This property is free of encumbrances, EXCEPT:
See Exhibit "A" attached hereto and made a part hereof

The true consideration for this conveyance is \$ 51,900.00.

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.

Dated this 29 day of Jan, 2003.

Leonhard Taumann by Ray M. Johnson POA
Leonhard Taumann

STATE OF OREGON, COUNTY OF Jackson

The foregoing instrument was acknowledged before me this 29 day of Jan, 2003, by
Leonhard Taumann by Ray M. Johnson, his attorney in fact

Carol Sartain
Notary Public for Oregon
My commission expires 9/22/04



EXHIBIT A

Lot Two (2) in ORCHARD GLADE SUBDIVISION in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, now of record.

(Code 9-15, Account #1-091634-4, Map #341W16DC, Tax Lot #1707)

SUBJECT TO:

1. The premises herein described are within the Sams Valley Irrigation District, notice of which is given by instrument recorded May 29, 1980 as No. 80-10053 of the Official Records of Jackson County, Oregon, and are subject to statutory powers, including the power of assessment.

2. Permission to use water from well as granted in instrument recorded June 29, 1946 in Volume 271 page 19 of the Deed Records of Jackson County, Oregon. (Location of well not specified)

3. A public utility easement, adjacent to Rogue River Drive and Orchard Lane, as set forth on the recorded plat and declaration.

4. A sewer service line easement, 5.0 feet in width, along the southeasterly portion, as set forth on the recorded plat and declaration.

11. Terms, conditions and provisions contained in the water use declaration, recorded May 4, 2001 as No. 01-20265, of the Official Records of Jackson County, Oregon.

12. Covenants, conditions, restrictions, easements, and/or setbacks imposed by instrument, subject to the terms and provisions thereof, recorded May 4, 2001 as No. 01-20266, of the Official Records of Jackson County, Oregon.

NOTE: This exception omits any covenant, condition or restriction based on race, color, religion, sex, handicap, familial status or national origin as provided in 42 U.S.C. Sec.3604, unless and only to the extent that the covenant (a) is not in violation of state or federal law, (b) is exempt under 42 U.S.C. Sec.3607, or (c) relates to a handicap, but does not discriminate against handicapped people.

Jackson County, Oregon
Recorded
OFFICIAL RECORDS
JAN 29 2003
2:10 PM
[Signature]
COUNTY CLERK

[Handwritten mark]

OCT 14 2003

G-17430

6



Jackson County Official Records 2006-027919
R-WD
Cnt=1 Str=4 SHAWBJ 06/31/2006 09:00:00 AM
\$10.00 \$5.00 \$11.00 Total: \$26.00



01198828200600279190020028

I, Kathleen S. Beckett, County Clerk for Jackson County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.
Kathleen S. Beckett - County Clerk

After recording return to:
Rodney E. Stiver
Ann E. Stiver
6783 Rogue River Dr.
Shady Cove, OR 97539

11

Until a change is requested, all tax statements shall be sent to the following address:
Rodney E. Stiver
Ann E. Stiver
6783 Rogue River Dr.
Shady Cove, OR 97539

46g0467451 v4

STATUTORY WARRANTY DEED

Michael Menefee and Marsha Menefee, Grantor, conveys and warrants to Rodney E. Stiver and Ann E. Stiver, husband and wife, Grantee, the following described real property free of encumbrances except as specifically set forth herein:

Lot One (1), ORCHARD GLADE SUBDIVISION in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, recorded in Volume 24, Page 36, Plat Records.

Account 10916336, Levy Code 9-15, Map 341W16 DC 1706

Tax Account No. 10916336

This property is free of encumbrances, EXCEPT:
SEE EXHIBIT "A" WITH EXCEPTIONS
The true consideration for this conveyance is \$340,000.00

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 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 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352.

Dated 25 day of May, 2006

Michael Menefee

Marsha Menefee

STATE OF OREGON
COUNTY OF Jackson

The foregoing instrument was acknowledged before me this 25th day of May, 2006 by Michael Menefee and Marsha Menefee.

Notary Public State of Oregon
My commission expires: 2-28-10

Order No. 46g0467451



G-17430

OCT 16 2006

Exhibit "A" with Exceptions

Subject to:

1. Municipal liens, if any, imposed by the City of Shady Cove.
 2. Regulations, levies, liens assessments, rights of way and easements for ditches and canals of the Sams Valley Irrigation District.
 3. An easement created by instrument, including the terms and provisions thereof,
Recorded : June 29, 1946
As : Volume 271 page 19
For : Permission to use water from well
 4. Easements as delineated on the recorded plat,
For : Public utility
 5. Easements as delineated on the recorded plat,
For : Sewer service line
 6. Terms, conditions and provisions contained in the water use declaration,
Recorded : May 4, 2001
As : 01-20265
 7. Covenants, conditions, restrictions, easements, and/or setbacks, imposed by instrument, including the terms and provisions thereof,
Recorded : May 4, 2001
As : 01-20265
- NOTE: This exception omits from said instrument any covenant, condition or restriction based on race, color, religion, sex, handicap, familial status or national origin as provided in 42 USC 3604, unless and only to the extent that the covenant (a) is not in violation of state or federal law, (b) is exempt under 42 USC 3607, or (c) relates to a handicap, but does not discriminate against handicapped people.

2

G-17430

OCT 14 2001

14
2:20

Jackson County Official Records 2005-060045
R-WD
Cnt=1 Stn=6 HELMANCO 09/30/2006 02:20:00 PM
\$10.00 \$5.00 \$11.00 Total:\$28.00



I, Kathleen S. Beckett, County Clerk for Jackson County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.
Kathleen S. Beckett - County Clerk



After Recording Return To:
Ticor Title
1459 E. McAndrews Road
Medford OR 97504-6107

Send Tax Statements To:
Ralph Fucci
6779 Rogue River Dr
Shady Cove OR 97539

Title Order No. 03-68460
Escrow No. 03-68460
Tax Account No. 341W16DC 1700
A# 1-027297-8

WARRANTY DEED
(ORS 93.850)

Gregory A. Warren and Cynthia A. Warren, as tenants by the entirety, Grantor, conveys and warrants to Ralph Fucci, an estate in fee simple, Grantee, the following described real property:

See Exhibit 'A' attached hereto and by reference made a part hereof.

The said property is free from encumbrances except: COVENANTS, CONDITIONS, RESTRICTIONS, RESERVATIONS, SET BACK LINES, POWERS OF SPECIAL DISTRICTS AND EASEMENTS OF RECORD, IF ANY.

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.

The true consideration for this conveyance is \$410,000.00.

Dated this 28 day of September, 2005

Gregory A. Warren
Gregory A. Warren

Cynthia A. Warren
Cynthia A. Warren

State of OR, County of Jackson)ss.

This instrument was acknowledged before me on Sept 28, 2005
by Gregory A. Warren and Cynthia A. Warren.

Tracy Beck
Notary Public

My commission expires: 9-21-06



10
5
11

OCT 14 2005

EXHIBIT 'A'

Legal Description:

Commencing at the quarter corner common to Sections 16 and 21 in Township 34 South, Range 1 West of the Willamette Meridian in Jackson county, Oregon; thence North 0° 07' 50" East 75.00 feet to a 5/8" rebar with plastic cap; thence North 89° 55' 35" East 160.00 feet to a 5/8" rebar with plastic cap for the true point of beginning; thence South 0° 07' 50" West 231.743 feet to a point within the right-of-way of Rogue River Drive (a County Road); thence North 59° 20' East 212.50 feet to a point within the right-of-way of said Drive; thence North 33° 40' West 148.373 feet; thence South 89° 55' 35" West 100.00 feet to the true point of beginning.

G47430

2

791232-EM



After recording return to:

Arlene L. Langer

140 Rose Mayer Loop

La Grange, TX 78945

Until a change is requested all tax statements shall be sent to the following address:

Arlene L. Langer

140 Rose Mayer Loop

La Grange, TX 78945

Escrow No. AS0791232

Title No. 0791232

SWD

Jackson County Official Records 2009-039357
R-WD
THIS SPACE RESERVED Cnt=1 Stn=7 AVGERICN 10/19/2009 08:31:00 AM
\$5.00 \$10.00 \$5.00 \$11.00 \$15.00 Total: \$46.00



I, Christine Walker, County Clerk for Jackson County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.
Christine Walker - County Clerk

STATUTORY WARRANTY DEED

Amarjit S. Sidhu and Helen A. Sidhu, husband and wife, Grantor(s) hereby convey and warrant to Arlene L. Langer and James A. Langer, as tenants by the entirety, Grantee(s) the following described real property in the County of Jackson and State of Oregon free of encumbrances except as specifically set forth herein:

Lot Ten (10), Orchard Glade Subdivision, in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, recorded September 9, 1998 in Volume 24, Page 36, Plat Records.

For Informational purposes only, the following is included:
(Map No. 341W16DC, Tax Lot 1715, Account No. 1-091642-3, Code 9-15)

The above-described property is free of encumbrances except all those items of record, if any, as of the date of this deed and those shown below, if any:

The true and actual consideration for this conveyance is **\$250,000.00**.

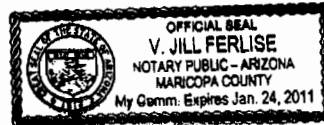
BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, 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 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007.

Dated this 14th day of Oct., 2009.

A. S. Sidhu
Amarjit S. Sidhu

Helen A. Sidhu
Helen A. Sidhu

State of Arizona
County of Maricopa



This instrument was acknowledged before me on October 14, 2009 by Amarjit S. Sidhu and Helen A. Sidhu.

V. Jill Ferlise
(Notary Public)

My commission expires Jan. 24, 2011

G-17430

OCT 14 2009

7

Jackson County Official Records 2010-022725
R-WD
Cnt=1 ALONZOKM 07/19/2010 02:31:00 PM
\$10.00 \$10.00 \$5.00 \$11.00 \$15.00 Total:\$51.00



01435031201000227250020021

I, Christine Walker, County Clerk for Jackson County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.
Christine Walker - County Clerk

470310006790
RECORDING REQUESTED BY:

Ticor Title Company of Oregon
1555 E. McAndrews, Suite 100
Medford, OR 97504

GRANTOR'S NAME:
Jay Dee Myers and Michele Burdette

GRANTEE'S NAME:
Thomas E. Ellis and Jane Marie Ellis, Trustees
of the Tom and Jane Ellis Family Trust, dated
October 21, 2008

SEND TAX STATEMENTS TO:
Thomas E. Ellis and Jane Marie Ellis, Trustees
of the Tom and Jane Ellis Family Trust, dated
October 21, 2008
112 Orchard Lane
Shady Cove, OR 97539

AFTER RECORDING RETURN TO:
Thomas E. Ellis and Jane Marie Ellis, Trustees
of the Tom and Jane Ellis Family Trust, dated
October 21, 2008
112 Orchard Lane
Shady Cove, OR 97539
Escrow No: 470310006790-TTJA37
341W16DC 1716 / 10916431

112 Orchard Lane
Shady Cove, OR 97539

SPACE ABOVE THIS LINE FOR RECORDER'S USE

TICOR TITLE

STATUTORY WARRANTY DEED

Jay Dee Myers and Michele Burdette, who acquired title as Jay D Myers and Michele Myers, as tenants in common, Grantor, conveys and warrants to Thomas E. Ellis and Jane Marie Ellis, Trustees of the Tom and Jane Ellis Family Trust, dated October 21, 2008, Grantee, the following described real property, free and clear of encumbrances except as specifically set forth below, situated in the County of Jackson, State of Oregon:

Lot Eleven (11) in ORCHARD GLADE SUBDIVISION in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, now of record

Subject to and excepting: Covenants, Conditions, Restrictions, Reservations, set back lines, Power of Special Districts, and easements of Record, if any.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009. 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, 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 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009.

THE TRUE AND ACTUAL CONSIDERATION FOR THIS CONVEYANCE IS \$310,000.00. (See ORS 93.030)

DATED: 7/19/10

G-17430

OCT 14 2010

K

Jay De Myers
Jay De Myers
Michele Burdette
Michele Burdette

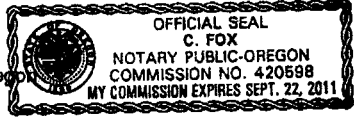
State of OREGON

COUNTY of Jackson

This instrument was acknowledged before me on July 19, 2010

Jay De Myers and
Michele Burdette

[Signature], Notary Public - State of Oregon
My commission expires: 9/22/2011



OCT 14 2010

G-17430

2-

03-77084-TD

3

Jackson County Official Records 2009-006544

R-WD

Cnt=1 Str=4 SHAWBJ 02/24/2009 02:36:02 PM

\$10.00 \$5.00 \$5.00 \$11.00 Total:\$31.00



0136200820090006544002023

I, Christine Walker, County Clerk for Jackson County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.
Christine Walker - County Clerk



After Recording Return To:
Ticor Title
744 NE 7th Street
Grants Pass OR 97526

Send Tax Statements To:
Joel D. Gilchrist
138 Orchard Lane
Shady Cove OR 97539

Title Order No.
Escrow No. 26-64413
Tax Account No.

SPECIAL WARRANTY DEED
(ORS 93.855)

US Bank National Association as Trustee for JPALT 2006-SI, a corporation, Grantor,
conveys and specially warrants to Joel D. Gilchrist and Barbara L. Gilchrist, as tenants by
the entirety, Grantees, the following described real property free of encumbrances created or
suffered by the Grantor except as specifically set forth herein:

*Joel D.

See Exhibit 'A' attached hereto and by reference made a part hereof.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE
TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301
AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007. 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR
PARCEL AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE
LOT OR PARCEL, 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 195.300, 195.301 AND 195.305 TO
195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007.

The true consideration for this conveyance is \$332,000.00.

Dated this 19 day of February, 2009

US BANK NATIONAL ASSOCIATION AS TRUSTEE FOR JPALT 2006-SI for Suntrust Mortgage, FKA
its Assignor IN FACT

By: Rebecca W. Shaie as
V.P. for US Bank National
Association as Trustee for JPALT 2006-SI.

State of VIRGINIA, County of RICHMOND)ss.

This instrument was acknowledged before me on February 19, 2009
by Rebecca W. Shaie as V.P. for US Bank National
Association as Trustee for JPALT 2006-SI, as V.P. of US
Bank National Association as Trustee for JPALT 2006-SI.

Aubrey S. Desportes Jr.
Notary Public

My commission expires: July 31, 2012

AUBREY S. DESPORTES JR.
Notary Public
Commonwealth of Virginia
327765
My Commission Expires Jul 31, 2012



OCT 14 2009

G-77430

EXHIBIT 'A'

Legal Description:

Lot 7, ORCHARD GLADE SUBDIVISION, in the City of Shady Cove, Jackson County, Oregon.

Subject to:

The said property is free from encumbrances except:
COVENANTS, CONDITIONS, RESTRICTIONS, RESERVATIONS, SET BACK LINES,
POWERS OF SPECIAL DISTRICTS AND EASEMENTS OF RECORD, IF ANY.

2

OCT 14 2010

G-17430

65

46g04624631b

After recording return to:

Lawyers Title Insurance Corporation
1555 E. McAndrews Road, Suite 100
Medford OR 97504

Until a change is requested, all tax statements shall be sent to Grantee at the following address:

PO Box 807
Eagle Point, OR 97524

Jackson County Official Records 2005-017934
R-WD
Cnt=1 Str=4 SHAWBJ 03/31/2005 02:10:00 PM
\$10.00 \$5.00 \$11.00 Total:\$26.00



01100654200500170340020029

I, Kathleen S. Beckett, County Clerk for Jackson County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.
Kathleen S. Beckett - County Clerk

STATUTORY WARRANTY DEED

Leonhard Taumann

, Grantor, conveys and warrants to Ray E. Chezik, Jr. and Fay E. Chezik, Trustees of the Ray E Chezik Jr. and Fay E. Chezik Revocable Living Trust, dated 1/27/96 as to an undivided 50% interest and Jon Kane Van Valkenburg, as tenants by the entirety, as to an undivided 50% interest

, Grantee, the following described real property free of encumbrances except as specifically set forth herein: See Exhibit "A" attached hereto and made a part hereof

This property is free of encumbrances, EXCEPT: See Exhibit "A" attached hereto and made a part hereof

The true consideration for this conveyance is \$ 109,900.00.

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.

Dated this 31 day of Mar, 2005.

Leonhard Taumann by Ray M. Johnson

JMA

STATE OF OREGON, COUNTY OF Jackson

The foregoing instrument was acknowledged before me this 31 day of March, 2005, by Leonhard Taumann by Ray M. Johnson as his attorney in fact

Carol Sartain
Notary Public for Oregon
My commission expires 9/22/2008



OCT 14 2005

Q-17430

EXHIBIT A

Lot Eight (8) in ORCHARD GLADE SUBDIVISION in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, recorded in Volume 24, Page 36 Plat Records.

(Code 9-15, Account #1-091640-7, Map #341W16DC, Portion Tax Lot #1713)

SUBJECT TO:

1. The premises herein described are within the Sams Valley Irrigation District, notice of which is given by instrument recorded May 29, 1980 as No. 80-10053 of the Official Records of Jackson County, Oregon, and are subject to statutory powers, including the power of assessment. (Not active - not assessed)

2. An easement created by instrument, including the terms and provisions thereof,
Recorded : June 29, 1946
Record No. : Volume 271, Page 19
For : Permission to use water from well
Affects : Not locatable of record

3. An easement as shown on the recorded plat and dedication/declaration
For : Public utilities.
Affects : 10.0-foot width, adjacent to public street(s)

4. An easement as shown on the recorded plat and dedication/declaration
For : Domestic water facilities
Affects : Variable width in the easterly portion.

5. Water Use Declaration, Agreement and Easement, subject to the terms and provisions thereof,
Recorded : May 4, 2001
Record No. : 01-20265

NOTE: Said easement instrument contains a covenant to bear a share of the costs of construction, maintenance, and/or repair of said easement.

6. Covenants, conditions, restrictions, easements, and/or setbacks imposed by instrument, including the terms and provisions thereof,
Recorded : May 4, 2001
Record No. : 01-20266

NOTE: This exception omits any covenant, condition or restriction based on race, color, religion, sex, handicap, familial status or national origin as provided in 42 U.S.C. Sec.3604, unless and only to the extent that the covenant (a) is not in violation of state or federal law, (b) is exempt under 42 U.S.C. Sec.3607, or (c) relates to a handicap, but does not discriminate against handicapped people.

OCT 14 2001

G-17430

2

44g0444679 pw



After recording return to:
Lawyers Title Insurance Corporation
502 West Main Street, Suite 103
Medford, OR 97501

Jackson County Official Records 2007-022205

R-WD
Cnt=1 Stn=10 ALONZORW 05/10/2007 08:00:00 AM
\$10.00 \$5.00 \$5.00 \$11.00 Total:\$31.00



01262711200700222050020024

I, Kathleen S. Beckett, County Clerk for Jackson County, Oregon,
certify that the instrument identified herein was recorded in the Clerk
records.
Kathleen S. Beckett - County Clerk

Until a change is requested, all tax statements shall be sent
to the following address:
Melinda J. Spolski and Andrew J. Spolski

146 Orchard Lane
Shady Cove, OR 97539

STATUTORY WARRANTY DEED

James E. Lively and Lori L. Lively, Grantor, conveys and warrants to Melinda J. Spolski and Andrew J. Spolski, as tenants by the entirety, Grantee, the following described real property free of encumbrances except as specifically set forth herein:

Lot Six (6), in ORCHARD GLADE SUBDIVISION in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, recorded in Volume 24, Page 36, Plat Records.

Account 10916385, Levy Code 9-15, Map 341W16 DC 1711

Tax Account No. 10916385

This property is free of encumbrances, EXCEPT:
SEE EXHIBIT "A" WITH EXCEPTIONS
The true consideration for this conveyance is \$500,000.00

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 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 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352.

Dated 7 day of May, 2007

James E. Lively
James E. Lively

Lori L. Lively
Lori L. Lively

STATE OF OREGON
COUNTY OF Jackson
The foregoing instrument was acknowledged before me this 7 day of May, 2007 by James E. Lively and Lori L. Lively.

Channin Culley
Notary Public State of Oregon
My commission expires: 6/2/07

Order No. 44g0444679



OCT 14 2010

Warranty Deed
ORRQ 6/2005; Rev. 1/2006

67-17430

Exhibit "A" with Exceptions

Subject to:

1. The premises herein described are within the Sams Valley Irrigation District, notice of which appears in instrument recorded May 29, 1980 as No. 80-10053, Official Records, and are subject to the statutory powers thereof, including the power of assessment. As of the date of this report/policy, said district is inactive
2. Permission to use water from well as granted in instrument recorded June 29, 1946 in Volume 271 page 19 of the Deed Records of Jackson County, Oregon. (Location of well not specified)
3. Easements, subject to the terms and provisions thereof, as delineated and set forth on the recorded plat,
For : Public utility
4. Covenants, conditions, restrictions, easements, and/or setbacks, imposed by instrument, including the terms and provisions thereof,
Recorded : May 4, 2001
As : 01-20266

NOTE: This exception omits from said instrument any covenant, condition or restriction based on race, color, religion, sex, handicap, familial status or national origin as provided in 42 USC 3604, unless and only to the extent that the covenant (a) is not in violation of state or federal law, (b) is exempt under 42 USC 3607, or (c) relates to a handicap, but does not discriminate against handicapped people.

G17430

2

OCT 14 2019

10

42g0420397cs

After recording return to:

Lawyers Title Insurance Corporation
1555 E. McAndrews Road, Suite 100
Medford OR 97504

Until a change is requested, all tax statements shall be sent to Grantee at the following address:

977 St Andrews Way
Caple Point, OR 97524

Jackson County Official Records 2005-017668

R-WD

Cnt=1 Sin=6 HELMANCD

03/31/2005 08:30:00 AM

\$10.00 \$5.00 \$11.00

Total: \$26.00



I, Kathleen S. Beckett, County Clerk for Jackson County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.
Kathleen S. Beckett - County Clerk

STATUTORY WARRANTY DEED

Ray Johnson and Dola Johnson, Trustees of the EM Design 401(k) Profit Sharing Plan & Trust

, Grantor, conveys and warrants to Paul D. Gentry and Carolyn D. Gentry, Trustees of the Gentry Trust dated July 31, 1991

, Grantee, the following described real property free of encumbrances except as specifically set forth herein: See Exhibit "A" attached hereto and made a part hereof

This property is free of encumbrances, EXCEPT: See Exhibit "A" attached hereto and made a part hereof

The true consideration for this conveyance is \$ 110,500.00.

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.

Dated this 11th day of March, 2005.

Dola Johnson, Trustee

Ray Johnson, Trustee

STATE OF OREGON, COUNTY OF Jackson

The foregoing instrument was acknowledged before me this 11 day of March, 2005, by Ray Johnson and Dola Johnson, Trustees of the EM Design 401(k) Profit Sharing Plan & Trust

[Signature]
Notary Public for Oregon
My commission expires 9/22/2005



1

OCT 14 2005

G-7430

EXHIBIT A

Lot Five (5) in ORCHARD GLADE SUBDIVISION in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, recorded in Volume 24, Page 36 Plat Records.

(Code 9-15, Account #1-091637-7, Map #341W16DC, Tax Lot #1710)

SUBJECT TO:

7. The premises herein described are within the Sams Valley Irrigation District, notice of which is given by instrument recorded May 29, 1980 as No. 80-10053 of the Official Records of Jackson County, Oregon, and are subject to statutory powers, including the power of assessment.

8. Permission to use water from well as granted in instrument recorded June 29, 1946 in Volume 271 page 19 of the Deed Records of Jackson County, Oregon. (Location of well not specified)

9. A public utility easement, adjacent to Orchard Lane, as set forth on the recorded plat and declaration.

10. Terms, conditions and provisions contained in the water use declaration, recorded May 4, 2001, as No. 01-20265 of the Official Records of Jackson County, Oregon.

11. Covenants, conditions, restrictions, easements, and/or setbacks imposed by instrument, subject to the terms and provisions thereof, recorded May 4, 2001, as No. 01-20266, Official Records.

NOTE: This exception omits any covenant, condition or restriction based on race, color, religion, sex, handicap, familial status or national origin as provided in 42 U.S.C. Sec.3604, unless and only to the extent that the covenant (a) is not in violation of state or federal law, (b) is exempt under 42 U.S.C. Sec.3607, or (c) relates to a handicap, but does not discriminate against handicapped people.

2

DOT 148

G-17430

Water System Info

OHD Drinking Water Program

41
PWS ID

System: Orchard Glade Water Improvement District

New System
Fill out at least Inv. & Srce Chg.
 Built Pre '81

Contact with: Michelle Myers (541) 878-2973

County: Jackson

Staff Member: John MANNING
 State County Dept. of Agriculture Other

Date: 9-18-03

Change system name

New Name: _____
(If the business changed owners, show them under Contact or Alternate Contact.)

SEP 14 2003

Change system statistics

Type	Size	Season
<input type="checkbox"/> Community (C)	Population: <input type="text"/>	<input type="checkbox"/> All year <input type="checkbox"/> Seasonal
<input type="checkbox"/> Non-transient non-community (P)	Connections: <input type="text"/>	Begins: <input type="text"/> / <input type="text"/> Ends: <input type="text"/> / <input type="text"/> mm dd mm dd
<input type="checkbox"/> Transient non-community (N)	Service Chrs: <input type="text"/> <input type="text"/>	Coliform Sampling
<input type="checkbox"/> State-regulated (S)	Ownership: <input type="text"/>	Period: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly
<input type="checkbox"/> ≥ 25 Same Daily Users	County: <input type="text"/>	Samples required: <input type="text"/>
<input type="checkbox"/> ≥ 25 Year Round Residents	Licensed By	Responsible Agency
	<input type="checkbox"/> Ag <input type="checkbox"/> HD <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Dept. of Agriculture	

Contact change

Also Owner Also Supply/Operator Also Cross Conn. Contact

Name & Title: _____

PO Box/Street: _____

City _____ State _____ Zip _____ Phone: () _____

Alternate contact changes Owner Supply/Operator Cross Conn. Contact

Name & Title: _____

PO Box/Street: _____

City _____ State _____ Zip _____ Phone: () _____

Activate/Deactivate

Date of activation/deactivation: _____

Activate System

Deactivate System

Reason

<input type="checkbox"/> OOB/Temp. Closed (N) (not seasonal closure)	<input type="checkbox"/> Merged (M) PWS id: 41	<input type="checkbox"/> No Longer Qualifies (S) (Pop Drop, Split, Etc.)
<input type="checkbox"/> Duplicate (D) (has another ID)	<input type="checkbox"/> Abandoned (A) (Burned Down)	<input type="checkbox"/> Never Qualified (U) (Incorrectly Given ID)

Notes Surveyed 9-15-03

OCT 14 2003

Sign: John Manning

Date: 9-18-03

Sanitary Survey Deficiency Summary

OHD Drinking Water Program Sanitary Survey

System: Oregon GAD Water System

PWS ID: 41

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			New		

Operator/Contact: Micelle Myers

County: Jackson

Yes	No		Date to be Corrected	Date Corrected
<input type="checkbox"/>	<input type="checkbox"/>	Surface Source Deficiencies		
<input type="checkbox"/>	<input type="checkbox"/>	Well Construction Deficiencies		
<input type="checkbox"/>	<input type="checkbox"/>	Spring / Other Deficiencies		
<input type="checkbox"/>	<input type="checkbox"/>	Disinfection Deficiencies		
<input type="checkbox"/>	<input type="checkbox"/>	Treatment Deficiencies		
<input type="checkbox"/>	<input type="checkbox"/>	Storage / Pressure Tank Deficiencies		
<input type="checkbox"/>	<input type="checkbox"/>	Distribution Deficiencies		
<input type="checkbox"/>	<input type="checkbox"/>	Monitoring Deficiencies		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Management Deficiencies		

SEP 14 2003
*WATER RESOURCES DEPT
SALM, OREGON*
OCT 14 2003

Need to develop coliform sampling plan - example included in report.

Comments: _____

Surveyor: John May

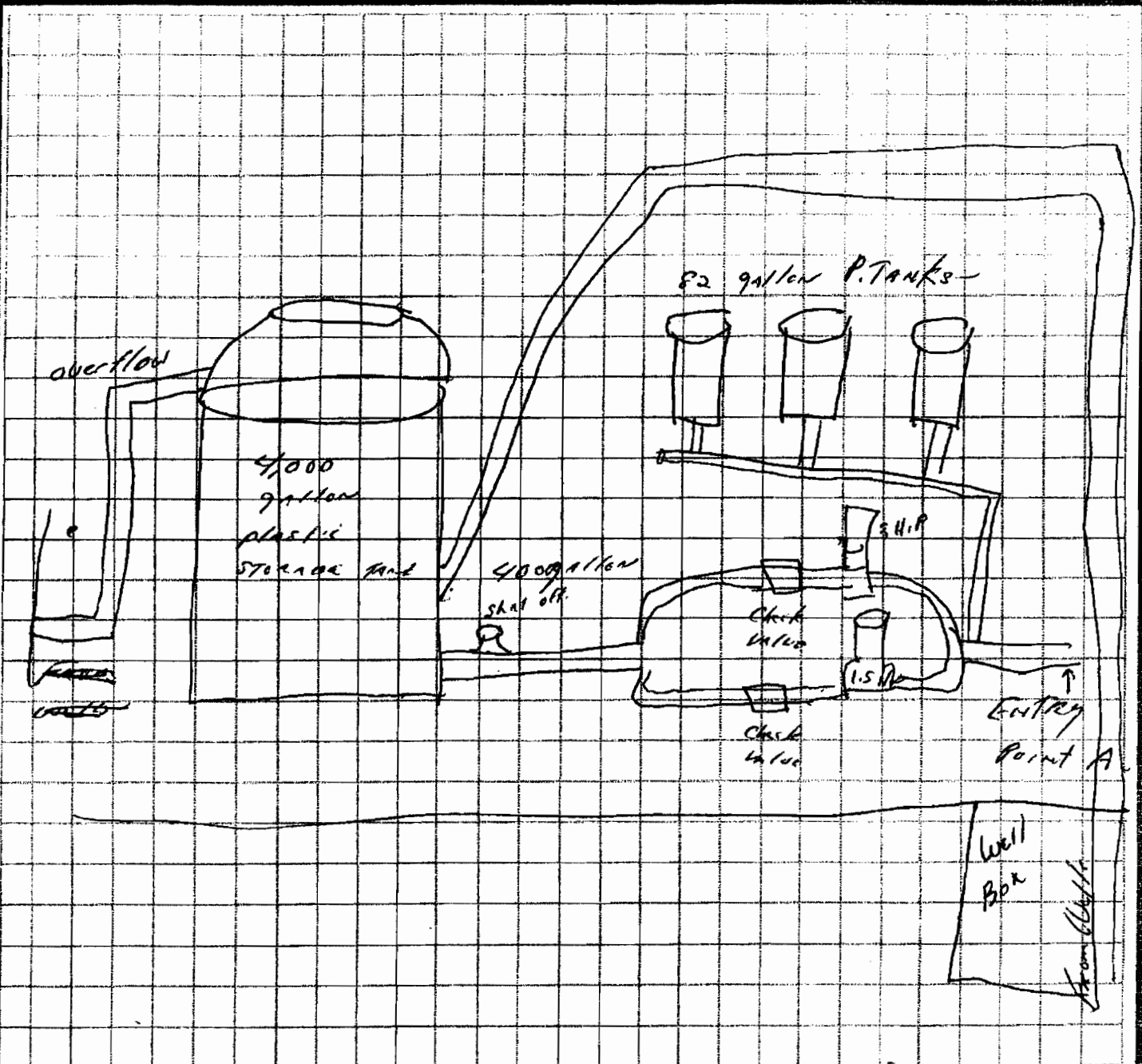
Date of Survey: 9-25-03

G-17430

System: _____

PWS ID: 41

--	--	--	--	--



Include:

- All Sources (show entry point configuration)
- All Reservoirs (show inlet/outlet configuration and baffling)
- Points of Treatment & Disinfection
- Distribution
- Interties With Other Systems
- Other Pertinent Information

RECEIVED
SEP 14 2010

OCT 14 2010

WATER TREATMENT
MUNICIPALITY

SS3A699

G-17430

Source Information
OHD Drinking Water Program Sanitary Survey

System: Cascade Blvd Water Improvement District

PWS ID: 41

Entry Points: (Location where water enters distribution and is sampled)

ID	Name	Source Type						Availability		Treatment Codes		
		Ground Surface	GWUDI	Pur. Ground	Pur. Surface	Permanent	Seasonal	Begins	Ends	Emergency	None	
A	<u>well Home</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	/	/	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	/	/	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	/	/	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	/	/	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	/	/	<input type="checkbox"/>	<input type="checkbox"/>

Individual Sources contributing at Entry Point:

ID	Name	Land Use*	Capacity (GPM)	Source Type						Availability		Treatment Codes
				Ground Surface	GWUDI	Pur. Ground	Pur. Surface	Permanent	Seasonal	Begins	Ends	
A A	<u>well</u>	<u>H</u>	<u>50</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Land Use Codes: (A) Pristine Forest (B) Irrigated Crops (C) Non-Irrigated Crops (D) Pasture (E) Light Industry (F) Heavy Industry (G) Urban-Sewered Area (H) Rural On-Site Sewage Disposal (I) Urban On-Site Sewage Disposal (J) Rangeland (K) Managed Forest (L) Commercial (M) Recreational Use

Comments: (How and when sources are used, etc.) _____

Yes No
 ? Does the water system have water rights for all sources? (Not required) checking OH IRRIGATION RIGHTS
 USGS Location Map (name and number) attached? SHAON Cole Wednesday
 Has a Source Water Assessment been completed by OHD or DEQ? _____

Yes No
 Delineation attached/on file? _____
 Hydrogeologic/sensitivity analysis on file? _____
 • Highly sensitive characteristics? Explain: _____

Have there been any changes since the original Source Water Assessment? Explain: _____

Comments on Source Water Assessment: _____

Source: Well Information
OHD Drinking Water Program Sanitary Survey

System: Richard Street Water Improvement District PWS ID: 41

Source ID:

A	A								
---	---	--	--	--	--	--	--	--	--

		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Well Log on File		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wellhead Construction	Depth of Well (ft.)	123'									
	Depth of Grout Seal (ft.)	38'									
	Year of Installation (yr.)	1989									
	Casing Diameter (in.)	6"									
	• Sanitary Seal & Casing Watertight	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Screened Vent	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Wellhead Protected from Flooding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Well Meets Setbacks from Hazards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Water Level Device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Wellhead Terminates Above Grade	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Concrete Slab Around Casing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Casing Height Above Slab (in.)	1"									
Pitless Adapter	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• Protective Housing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Control Building	Flowmeter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Pressure Gauge	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Pump to Waste Piping	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Raw Sample Tap	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Treated Sample Tap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Heated/Lighted	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Floor Drain	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Pump Removal Provision	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Check Valve	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Air/Vacuum Relief	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pumping Equipment	Pump Type*	S4									
	Pump Setting (ft.)	24P									
	Discharge Pressure (psi)	40PSI									
	Horsepower (hp)	2HP									
	Bearing Lubrication (FG oil/water)	W									
	Pumping Capacity (gpm)	50									
	Static Water Level (ft.)	29-									

*Pump Types: (VT) Vertical Turbine (SU) Submersible (CE) Centrifugal (SJ) Shallow Jet (DJ) Deep Jet (OT) Other

Comments:

OCT 4 2010
SEP 14 2010

617430

Transient and State-Regulated Water Systems

OHD Drinking Water Program Sanitary Survey

Page 4 of 6

System: Orchard Lake Water Treatment Plant

PWS ID: 41

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		new		

*This form must be accompanied by the Deficiency Summary, Inventory, Source Info. and other pages as appropriate.

N/A **Surface Source Information**

- Yes No
- Cartridge Filter used (if not, use "SW" page)
 - Turbidity requirements met
 - Is system under SWTR order

N/A **Treatment**

- Yes No
- NSF approval
 - Equipment maintained properly
 - Dosage recorded

N/A **Well Construction & Protection**

- Yes No
- Sanitary seal and casing watertight
 - Screened Vent
 - Sample Tap
 - Protective Housing
 - Pitless Adapter
 - Wellhead terminates above grade
 - Wellhead protected from flooding
 - Well meets setbacks from hazards
 - Concrete slab around casing
 - Well logs from each source
 - Pump to waste piping
 - Nearest hazard: 7100'

N/A **Pressure Tanks***

- Yes No
- Used for contact time
 - Above ground installation
 - Separate inlet/outlet
 - Bypass Piping
 - Drain
 - Pressure relief device with gauge
 - Air Bladder/Diaphragm
 - Valve for adding air
 - If >1000 gallons:
 - Access Port
 - Water Level Sight Glass

*Attach "Storage & Pressure Tank" page for finished water storage tank.

N/A **Spring/Other Source Construction & Protection**

- Yes No
- Impervious/durable material
 - Screened Overflow
 - Bottom Drain and Shutoff Valve
 - Watertight Access Hatch/Entry
 - Intercepting Ditch
 - Meets setbacks from hazards
 - Nearest hazard: _____

Monitoring

- Yes No *New Activation*
- Previous 12 month routine bacti sampling in compliance
 - Annual nitrate testing in compliance
 - Initial inorganics tests done
 - Coliform sampling plan
 - Any violations in past two years

N/A **Disinfection to Inactivate Bacteria/Viruses**

- Yes No
- Free chlorine residual maintained
 - 0.2 mg/l for 30 minutes or CT of 6 (GW only)
 - CT requirement met at all times
 - DPD type test kit used
 - Chlorine measured and recorded daily

Management

- Yes No
- PWS constructed before 8/21/81
 - Plan review approval on modifications

Surveyor: John Marquardt

Date of Survey: 9-15-03

G-17430

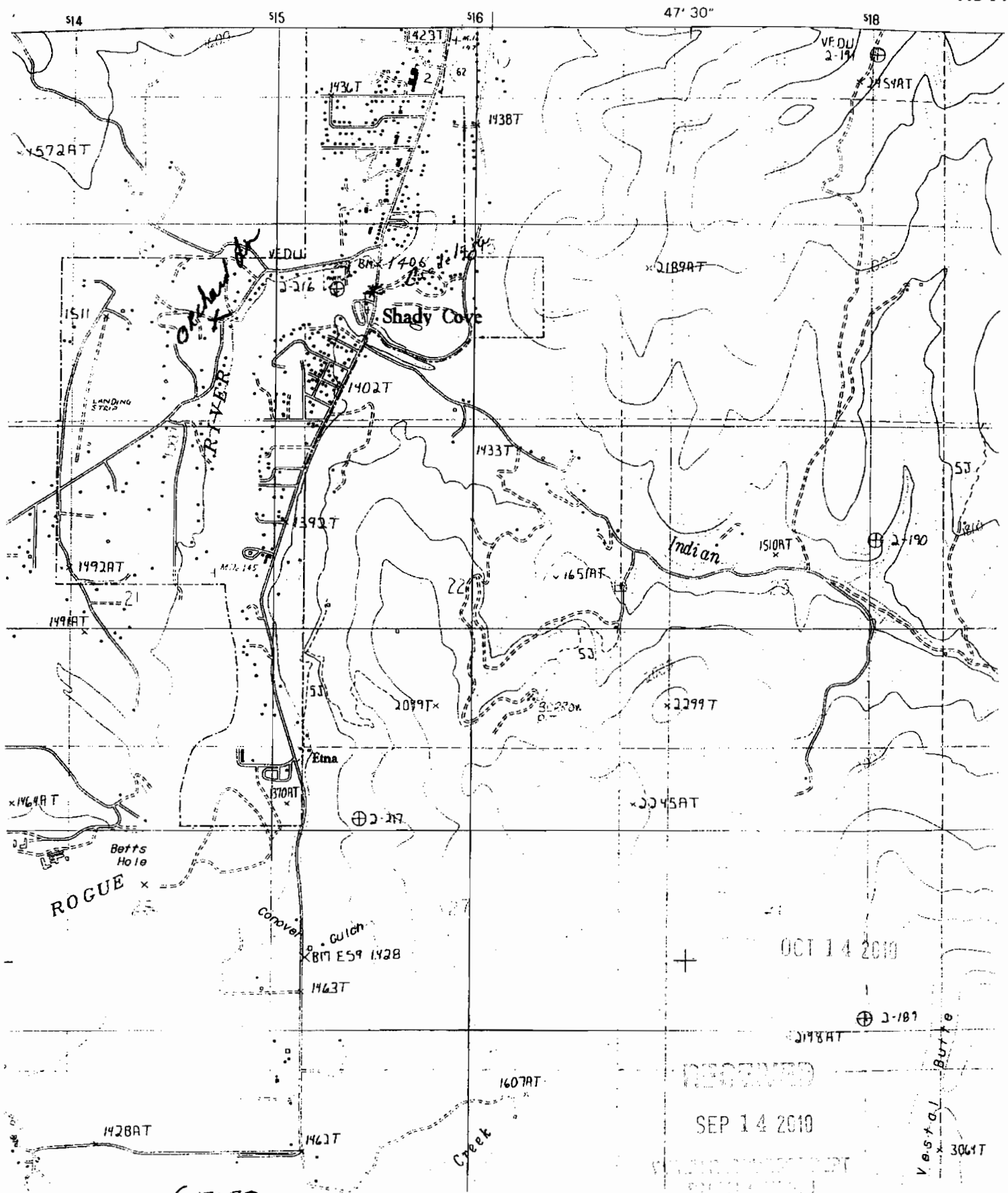
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WATER TREATMENT DEPT
SALMON, OREGON

00101000



G-77430

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FEDERAL BUREAU OF INVESTIGATION

Vegetal Butte 3061T

Coliform Sampling Plan Example

This example is a simple narrative for a small non-community water system. All public water systems are different, and this example does not attempt to cover all situations, water system configurations, or complexities. It is offered merely as a simple guide to illustrate the requirements for the narrative, and no map is included.

HEAVENLY RESTAURANT WATER SYSTEM

PWS 4101999

Heavenly Restaurant's water system is a non-community water system serving approximately 317 people per day. Heavenly Restaurant's water system has two drilled wells that serve as the source of water supply. Both wells are continuously chlorinated at the well head and pump directly into a 5,000 gallon concrete reservoir which serves as the chlorine contact chamber. Water is pumped into the distribution system from the reservoir by a booster pump.

Heavenly Restaurant's water system is required to collect one routine coliform sample per quarter, and four (4) locations in the distribution system have been identified and selected as routine sampling sites. These routine sampling sites are rotated each quarter so that each site is selected for sampling one time per year. Repeat sampling sites have also been identified and selected, each within five connections upstream and downstream of the routine sampling site. Repeat sampling is also conducted at each well head from a sample tap prior to chlorination and at the routine sampling site which tested positive for coliforms. Sampling for the five routine coliform samples required the following quarter after a coliform positive result is spread out over the following month at routine and repeat sampling sites representative of the whole distribution system.

Coliform sample collection consists of flushing the sample tap for five minutes and measuring and recording the free chlorine residual on the laboratory form prior to filling the sample bottle.

The distribution system mains are flushed twice each year, once in the spring and once in the fall. The majority of the distribution system is looped and all dead end lines have blow offs.

The sampling sites are listed below. See the distribution system map for the location of these sites as well as other water system appurtenances which are important to this coliform sampling plan.

The laboratory we use is Jackson laboratory, located at 2562 Merriman Way. Their phone number is (548) 775-5555.

JM/hac
71999coliformplanexample.vpd

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OCT 14 2

WATER RESOURCES DEPT
SULLY, WISCONSIN

647430

EA

NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCED IN A

Jackson County Official Records 2005-070080

R-QCD

Cnt=1 Stn=3 MORGANS \$11/16/2005 10:47:19 AM
ST \$5.00 \$5.00 \$11.00 Total:\$21.00

The Brewster Family Trust
P.O. Box 1141
Shady Cove, Oregon 97539

The Libby Luck Trust
149 Orchard Lane
Shady Cove, Oregon 97539

After recording, return to (Name, Address, Zip):
Susan Jensen, Trustor, Libby Luck Trust
P.O. Box 156
Shady Cove, Oregon 97539

Until requested otherwise, send all tax statements to (Name, Address, Zip):
Susan Jensen, Trustor
The Libby Luck Trust
P.O. Box 156
Shady Cove, Oregon 97539

SPACE RESERVED FOR RECORDER'S USE

rec
at
bo
an
Nc



I, Kathleen S. Beckett, County Clerk for Jackson County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.
Kathleen S. Beckett - County Clerk

Witness my hand and seal of County affixed.

NAME TITLE
By _____, Deputy.

QUITCLAIM DEED - STATUTORY FORM (INDIVIDUAL GRANTOR)

The Brewster Family Trust, Grantor,
releases and quitclaims to The Libby Luck Trust, Grantee,
all right, title and interest in and to the following described real property situated in Jackson County, Oregon, to-wit:

98983cs

01 23835

EXHIBIT A

Lot Four (4) in ORCHARD GLADE SUBDIVISION in the City of Shady Cove, Jackson County, Oregon, according to the official plat thereof, now of record.

(Code 9-15, Account #1-091636-9, Map #341W16DC, Lot #1709)

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE.)

The true consideration for this conveyance is \$258,000.00 (Here, comply with the requirements of ORS 93.030.)

DATED 11-16-05

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.

Victor Claire Brewster
Victor Claire Brewster, Trustee
Betsy Lou Brewster
Betsy Lou Brewster, Trustee

STATE OF OREGON, County of Jackson, ss.
This instrument was acknowledged before me on November 16, 2005
by Victor Claire Brewster & Betsy Lou Brewster



Valerie Harr
Notary Public for Oregon
My commission expires March 14, 2008

OCT 14 2010

G-17430

John L. Scott

REAL ESTATE
SOUTHERN OREGON

406 S. Riverside
Medford, OR 97501
Phone: (541) 779-3611
Toll Free: (800) 888-5706
Fax: (541) 772-2010
www.johnlscott.com

FAX COVER SHEET

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WATER RESOURCES DEPT
SALEM, OREGON

SEND TO Company name Windlimer	From Ron Galbreath
Attention Gary Johnson	Date June 15, 02
Office location	Office location Medford
Fax number 878-2699	Phone number 734-8284 desk

- Urgent
 Reply ASAP
 Please comment
 Please review
 For your information

Total pages, including cover: 11 10

COMMENTS

~~Orchard Estate CC #1's~~
~~Orchard Estate Water Use Declaration~~
 WATER APPENDIX



22661 Highway 62 • Shady Cove, Oregon 97539 • USA
Phone: 541-878-3927 • Fax: 541-878-3937
email: emdesign@jeffnet.org • www.em-design.com

Fax Transmittal Form

TO: *Don Caldwell*

DATE: *29 Sept 01*

COMPANY: *JOHN L. SCOTT*

RECEIVED

FAX NUMBER: *772-2010*

SEP 14 2010

SUBJECT: *Tony's Well Test*

WATER RESOURCES DEPT
SALEM, OREGON

PAGES (Including cover): *2*

Don, at Cascade Pump, ran the enclosed test. The well yielded a total of 11,340 gallons in 9.0 hrs. The average flow was 47.25 gallons per minute. The flow was consistent throughout & was close to the initial air pump tests (but limited by the performance of the 2 HP submersible pump). The static water level was initially at 41.5 ft (above the monitor at the pump) & dropped to 25.5 ft (w/1 PSI air pressure) at the end.

NOTE: WE HAVE WATER, BEAUTIFUL TRAILS, & REALLY LARGE, NICE LOTS! WHAT MORE IS NEEDED!

Don J

OCT 14 2010

G-17430

BVY ASSOCIATE, INC.

ENVIRONMENTAL CONSULTANTS
Lab Cert#: ORO46

APR 23 1997

Sample #: 97.099
System ID: To Be Determined **Date Recvd:** 02-03-97
System Name: Orchard Glade Subdivision **Recvd By:** Ak
Address: 6783 Rogue River Drive
City, State, Zip: Shady Cove, OR 97539 **Analyzed By:** J. Anderson (see * below)/D. Vain
Date: 02-03-97

Collected By: Ray Johnson
Date: 02-03-97
Time: 10:00 am
Sample Point: Well Head
Sample Type: Routine

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HEALTH SERVICES DEPT
SALEM, OREGON

ANALYSIS RESULTS

Total Coliform Fecal Coliform (E.coli)	MMO-MUG	Absent Absent	Absent Absent
Antimony	SM3113B	0.006	ND @ 0.005
Arsenic	SM3113B	0.05	ND @ 0.010
Barium	SM3113B	1.0	0.22
Beryllium	SM 3111B	0.004	ND @ 0.001
Cadmium	SM 3111B	0.005	ND @ 0.001
Chromium	SM 3111B	0.1	ND @ 0.005
Lead	SM 3111B	0.015	ND @ 0.005
Mercury	EPA 245.2	0.002	ND @ 0.0005
Nickel	SM 3111B	0.1	ND @ 0.05
Cyanide	EPA 335.2	0.2	ND @ 0.01
Flouride	SM4500 FC	2.0 & 4.0	0.2
Nitrite	SM4500 NO2E	1.0	ND @ 0.1

MCL: Maximum Contaminant Level

* Samples analyzed by EMC OR914

Reviewed By:

[Signature]
Anna Kabush

OCT 14 2010

Policy
No. B 22800



**2 and 3 HP
Submersible Pump
Protection Application**

Dear Grundfos Dealer:

To make certain your customer's Grundfos submersible pump is fully covered under the supplemental Performance PLUS protection program, READ AND FOLLOW THESE INSTRUCTIONS CAREFULLY. Please type or print clearly.

Complete this policy application in full. Then sign and date the application.

Your customer should keep the top white copy of the application. Keep the yellow copy for your records and send the two remaining copies (pink and goldenrod) to your Grundfos distributor.

Should the pump fail due to any of the conditions specified under Performance PLUS prior to the expiration of the 5-year term of the policy, your customer should contact you. You then pull the pump and determine if the cause of failure is within the terms of the Performance PLUS policy. If it is, Grundfos will repair or replace the pump at no charge through your distributor.

Performance PLUS does not cover the labor charges involved in pulling and reinstalling the pump.

The Performance PLUS protection policy covers all Grundfos domestic submersible pumps 2 and 3 HP. It is limited to the original owner of the pump and is non-transferable.

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WATER CONTROL DEPT
SANTA CRUZ

G-77430

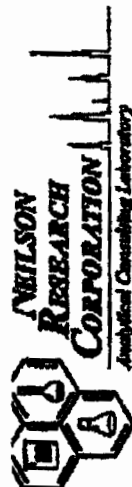
Customer Name Ray Johnson / E.M. Design
 Address 6783 Rogue River Dr.
 City Shady Cove State OR Zip _____
 Grundfos Dealer Name Cascade Pump
 Address P.O. Box 881
 City Rogue River State OR Zip 97537

Pump Model: <u>40520-7</u>	Serial Number: <u>9521</u>
Phase & Volts: <u>1 Ø 230V</u>	Horsepower: <u>2 HP</u>
Date Installed: <u>7-15-98</u>	Application: <u>Community Water System</u>
Pumping Water Level:	Pump Setting: <u>115'</u>
Well Inside Diameter: <u>6"</u>	Depth: <u>120'</u>
Flow (GPM): <u>50 GPM</u>	Lightning Arrestor Type: <u>Franklin</u>
<input checked="" type="checkbox"/> New Installation or Replacement:	Brand of Pump Replaced:

OCT 14 2010

I certify that a proper lightning arrestor has been installed with this Grundfos submersible, and that the unit has been installed in accordance with the Grundfos Installation and Operating Instructions.

Dealer Signature: D. J. Bergmann Date: 7-23-98



NEILSON RESEARCH CORPORATION
 Analytical Consulting Laboratory
 245 South Grove Street, 3rd Floor, Oregon 97501
 Telephone (541) 776-5678 • Fax (541) 776-2501

Lab Card # 25 Sample # 97-12512
 Bottle # 19940
 Date & Time Received 12-5-97 14:05 P
 Date & Time Analyzed 12-5-97 17:00

Comments: _____
 ANALYST: D. Dunning DATE: 12/6/97
 REVIEWED BY: _____ DATE: _____



MICROBIOLOGICAL ANALYTICAL SERVICES
 PUBLIC WATER SUPPLIES
 DRINKING WATER PROGRAMS

LABORATORY RESULTS

Total coliforms: Present* Absent
 Fecal coliforms: Present* Absent
 E. coli: Present* Absent

*See back of photo copy for interpretation

Test Methods:
 MPN MF P-A MEMO-MEM
 ISO ISO-MSU Memmert Agit. + ISO

Sample Inhibit:
 Leaked Over 30 hr old
 Heavy non-coliform growth (see details by method)

COPY DISTRIBUTION

White Lab
 Yellow Health Division
 Pink Water System

Enter Public Water System ID # in boxes below.

4 1 1 1 1 1 1 1

Name of Water System
CLATSOP COUNTY WATER SUPERVISION

Address FOCUS DRIVE, DE.
 City JACKSON County JACKSON
 Call Number (Date and Time) 12/4/97 Phone 744-7478

MONTH DAY YEAR HOUR MIN
12 4 1997 3 49 AM

Type of Sample: Routine Special
 Collected By: CLAYTON B. HANSEN

Sample From: END OF 4" AT WELL

Chlorinator? Yes No Free Chlorine (mg/L) _____
 Return address for report: _____

Name BLANKENSHIP CONSTRUCTION
 Address PO. BOX 4267
 City, State, Zip WEDFORD, OR 97501

Send results to: Oregon State Health Division PO Box 14360 Portland, OR 97244-0360 Phone (503) 751-4361

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 WATER REVENUE DEPT
 SALEM, OREGON

G-17430

001 14 2010

A-1 WELL TESTING AND CLEANING SERVICE

SAND, SILT, RUST, ETC. REMOVED - CLEANED TO ITS ORIGINAL DEPTH
PURITY TEST STATE LICENSED LABORATORY - FREE WATER ANALYSIS - COMPLETE FILTER SERVICE
Radio Dispatched - Fast Service Reasonable - Same Day if Required

5548 Riverbanks Rd. Grants Pass, OR 97527

474-1777 DATE:

PARTY
Newly
made

TEST ORDERED BY: Ray Johnson DATE 2-3-97

ADDRESS: 6723 Rogue River Dr. SC PHONE: 816-3927

WELL LOCATION: _____

BUYER: _____ SELLER: _____

BILL TO: _____

WATER SOURCE WELL X POND _____ SUMP _____

METER START: _____ METER END: _____

TIME	METER READING	STATIC READING	FLOW (GPM)
10:45		52' 0"	52 1/2
11:00		57' 3"	52 1/2
:15		64' 5 1/2"	52
:30		69' 3"	51 1/4
:45		73'	" "
12:00		75' 2 1/2"	" "
:15		76' 3"	" "
:30		78'	" "
:45		78' 6 1/2"	51
1:00		78' 9"	" "
:15		79'	" "
:30		}	}
:45			
2:00			
:15		}	}
:30			
:45			
		79'	51

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COLOR Clear ODOR NONE TASTE NONE SMELL NONE
KIR VENT PRESSURE RELIEF SEAL WATER RESOURCES DEPT SALEM, OREGON

COMMENTS: 2:45 was 79' at 3 gm 372" Recovery -

EQUIPMENT USED FOR TEST: A-1 JET PUMP SUR PUMP _____

H.P. 105 CFM STATIC LEVEL 52.6" WELL DEPTH 125'

TEST CERTIFIED BY: J. D. R. Puller LIC. NUMBER 2600 C.P.T.

G1743E

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WATER CONTACT SHEET

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STATE OF MISSISSIPPI DEPT OF HEALTH

Sample #: 97.069

Date: 2-3-97

System Name: OLIVE BLADE SUBDIVISION

Site Address: 6223 OLIVE BLADE DR
SLATY SPRING, MS 39253

2/2/97 4:30

Client: Raj Johnson Fed Leasing
Address: 72661 RAJ RD
SLATY SPRING, MS 39253

Coliform E.Coli
Abduct Abduct

Contact: Raj Johnson Phone: 878-3927
Fax: 878-3937

Date Collected: 2-3-97 Time Collected: 10 AM

Analysis: Bacteria & Turbidity

A-1 well cleaning & testing
Raj Johnson

Sample Type: Routine/Repeat/Special (circle one)

Bacteria Results
= None Detected

Alkabush
2-4-97

01 20265

4:00
30
11
NP 5

WATER USE DECLARATION, AGREEMENT AND EASEMENT

THIS DECLARATION is made this 2nd day of May, 2001 by Leonhard Taumann, Ray M. & Dola J. Johnson.

RECITALS

1. Taumann is the owner of Tax Lot 6800 (Map 341W21A) and the Orchard Glade Subdivision, Lots 1, 2, 4, 6, 7, 8, 9, 10, 11 and 12, the EMD 401(k) PR Shrg Pl & Trust (Ray M. & Dola J. Johnson, Trustees) owns Lot 5 and Ray M. & Dola J. Johnson are the owners of Lot 3, (Map 341W21) (plat recorded by Jackson County Clerk and Recorder), property located in the city of Shady Cove, Oregon.

2. Until a municipal water system is installed by the City of Shady Cove, the thirteen lots of the subdivision will be serviced by a well and water system located on Lot 6. The plat showing the subdivision and location of the well and water system house is attached hereto as Exhibit I and by this reference incorporated herein.

3. The terms and conditions upon which future owners of the lot will share in the benefits and responsibilities of the water system are as follows:

A. Taumann, hereby grants a non-exclusive perpetual easement to the well and storage facility for the benefit of all lots of the subdivision. This easement shall be for the purpose of operating, maintaining and repairing the water system located on Lot 6, which includes but is not limited to well, pumps, tanks, underground pipelines, electrical hookup, pressure tanks and pump house. The owners of each of the lots in the subdivision shall

1 - WATER USE DECLARATION, AGREEMENT AND EASEMENT

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WATER FLOOD CONTROL DIST
SHADY COVE, OREGON

OCT 14 2010

G-17430

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have the right to come upon Lot 8, as is reasonably necessary, for the purpose of operating, maintaining and repairing the water system.

B. The owner of each lot shall be responsible for one-thirteenth of the cost of maintaining and repairing the water system. In addition, each owner shall be responsible to pay the prorated share of monthly costs necessary to operate the water system. Each owner's prorated share shall be established by a water meter and each owner shall be responsible for reading their own water meter on a monthly basis and informing the owner of Lot 8 (or his designated agent) of the reading. The owner of Lot 8 is hereby granted an easement over and across the real property of the owners of all other lots for the purpose of reading the water meters located on those respective lots. The owner of Lot 8 (or his designated agent) shall be the person who determines the monthly payment for water service to be paid by the owners of each lot. This monthly payment shall include the prorated share of ⁽¹⁾ electricity and ⁽²⁾ a set aside for tests, maintenance, repair costs and insurance premiums. However, a two-thirds majority of the owners of the lots (8 or more owners) will have the right to override the owner of Lot 8 and determine the monthly payment to be paid by each lot owner.

C. The monthly payment shall be paid into an account at Western Bank in Shady Cove, Oregon. In the event Western Bank is no longer available then the funds shall be deposited in such bank as may be agreed upon by a simple majority of the lot owners.

D. The owners shall agree to comply with all federal, state, and local rules, statutes, ordinances and regulations pertaining to the water system.

2 - WATER USE DECLARATION, AGREEMENT AND EASEMENT

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WATER RESOURCE DEPT
SHELBY, OREGON

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E. The lot owners shall comply with the present State of Oregon requirements that a water sample be taken to an approved lab for analysis on a quarterly basis. The lab shall report the results to the Oregon Health Division. The lot owners acknowledge that the water system is subject to the rules and regulations of the Oregon Health Division for "non-community" water systems. The lot owners shall be responsible for taking whatever action is necessary to make sure that the quality of the water and the water system comply with the regulations of the Oregon Health Division.

F. The lot owners will be the sole parties responsible for all costs and expenses associated with the water system including but not limited to any claims, demands, causes of action or other liability arise out of their use and operation of the water system. These costs include but are not limited to electricity, repairs, maintenance, replacement, insurance premiums and the cost of drilling a new well if the present well should go dry or become inoperable.

G. Any decision (not limited by Item B) regarding the system may be made by a majority of the owners of the lots in the subdivision (where each lot has one vote). Those decisions may be reached without a formal meeting by having a majority of the lot owners sign a petition or other document agreeing to a certain course of action. Normal meetings of the owners may be held by notifying the lot owners, in writing, of the time and place of such a meeting. The meeting shall be held within 15 to 30 days after the date of the meeting notice. Written notice shall be mailed to each owner at the address as disclosed

3 - WATER USE DECLARATION, AGREEMENT AND EASEMENT

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WATER RESOURCE DEPT
SAND CREEK

G-17430

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In the Jackson County Assessor's Office. Notices shall be sent, by both first class and certified mail, return receipt requested.

H. In the event an owner does not pay a monthly billing within 30 days of the date of the billing then the other owners shall have the right to cut off the water service to the non-paying lot owner until such time as the billing has been paid in full. Furthermore, any payments not made within 30 days of the billing date shall accrue interest at the rate of 12% per annum.

I. The easements granted by the terms of this Agreement shall terminate at such time as water is available to all thirteen lots in the subdivision from the City of Shady Cove Municipal Water System or other comparable community water system. All owners shall be deemed to own the water system until such time as this easement terminates. However, upon termination of the easement, the ownership of the pump house, the well itself (including casings), and underground pipes located on Lot 8 shall revert to the owner of Lot 8, free and clear of all claims of the other lot owners. Upon termination of the water system other assets of the water system including but not limited to the pressure tanks, pumps, water tank and any funds left in the operating account shall be sold with the money divided equally amongst the lot owners. At such time as an alternative water system is available then the owners may agree (by majority vote) to hook into such water system and to pay their share of the costs for hooking into that system.

J. This easement shall run with the land and shall be binding upon the parties hereto, their heirs, assigns and successors in interest.

4 - WATER USE DECLARATION, AGREEMENT AND EASEMENT

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WATER UTILITY DEPT
CITY OF SHADY COVE

G-47430

OCT 14 2010

01 20265

K. By accepting a deed from Taumann all future lot owners hereby agree to the provisions of this document and agree to be bound thereby, as though an original signatory.

L. Notwithstanding anything in this Agreement to the contrary, so long as Taumann is the owner of Lot 8 and at least three other lots in the subdivision then all decisions regarding the water system shall be made solely by Taumann including the initial setting of water rates.

M. In the event a suit of action is filed concerning this Agreement, including the collection of any past due water bills, then the prevailing party shall be entitled to their reasonable costs in appellate court.

IN WITNESS WHEREOF, the parties have executed this declaration the day and year first above written.

Ray M. Johnson, R.O.A. 99-22105
Leonhard Taumann *5/10/01*
Leonhard Taumann Date

EM Design, Ray M. Johnson Trust *5/10/01*
EM Design 401(k) Pro Group Pl & Trust Date

EM Design, Ray M. Johnson Trust *5/10/01*
EM Design 401(k) Pro Group Pl & Trust Date

Ray M. Johnson *5/10/01*
Ray M. Johnson Date
Dora J. Johnson *5/10/01*
Dora J. Johnson Date

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LAND DIVISIONS DEPT
SALT LAKE, UTAH

5 - WATER USE DECLARATION, AGREEMENT AND EASEMENT

G17430

OCT 14 2010

01 80265

INDIVIDUAL ACKNOWLEDGMENT

State/ Commonwealth of OREGON
County of TJACKSON

On this the 4th day of May, 2001
before me, PAULET L. REEVES
Name of Notary Public

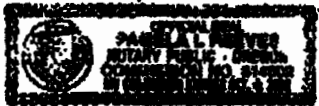
the undersigned Notary Public, personally appeared
Dana J. Johnson
Name of Signer

personally known to me
 proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged that he/she/they executed it.

WITNESS my hand and official seal.

Paulet L. Reeves
Signature of Notary Public



RECORDED
SEP 18 2001
WATER RESOURCES DEPT
SALEM, OREGON

OPTIONAL

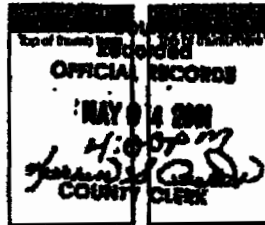
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Description of Attached Document:

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

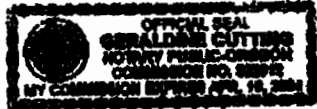


STATE OF OREGON,
County of Tackson

BE IT REMEMBERED, That on this 04 day of MAY, 2001
before me, the undersigned, a Notary Public in and for the State of Oregon, personally appeared the within named Ray A. Johnson

known to me to be the identical individual... described in and who executed the within instrument and acknowledged to me that... executed the same freely and voluntarily.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal the day and year last above written.



Geraldine Cutler
Notary Public for Oregon
My commission expires 4-18-2004

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OCT 14 2010

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