

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 SCHOFIELD FAMILY LIMITED PARTNERSHIP (DUANE SCHOFIELD, GENERAL PARTNER)				PHONE (HM) 510-589-0795
PHONE (WK)	CELL		FAX	
ADDRESS P.O. BOX 262				
CITY HAYWARD	STATE CA	ZIP 94543	E-MAIL*	

Organization Information

NAME			PHONE	FAX
ADDRESS			CELL	
CITY	STATE	ZIP	E-MAIL*	

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

AGENT / BUSINESS NAME JUSTIN FERRELL			PHONE 541-947-2598	FAX
ADDRESS 29261 ABERT RIM RD			CELL 541-219-2698	
CITY LAKEVIEW	STATE OR	ZIP 97630	E-MAIL* LAKECOUNTYSWCD@HOTMAIL.COM	

Note: Attach multiple copies as needed

* By providing an e-mail address, consent is given to receive all correspondence from the department electronically. (paper copies of the final order documents will also be mailed.)

By my signature below I confirm that I understand:

- I am asking to use water specifically as described in this application.
- Evaluation of this application will be based on information provided in the application.
- 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.

Duane C. Schofield, GP

Duane Schofield (General Partner)

3-13-12

Date

Applicant Signature

Applicant Signature

Print Name and title if applicable

Date

For Department Use

App. No. G-17548

Permit No. _____

Date _____

Revised 7/1/2013

Ground Water

WR

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 *See attached copy of Tax statements as proof of ownership.

☒ There are no encumbrances.

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

☐ 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.

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

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
1	Crooked Creek	5652ft	+ 6ft
2	Crooked Creek	6000ft	+4ft

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*).

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SECTION 3: WELL DEVELOPMENT, CONTINUED

Source (aquifer), if known: TO BE DETERMANED

Total maximum rate requested: 780 acre feet (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.

04571-2

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)
1	☒	☐		☐	24 inch well	Case to minimum standards	To Be Determined	Seal to minimum standards		Basin fill/ or basalt		2 cfs	390 acre feet
2	☒	☐		☐	24 inch well	Case to minimum standards	To Be Determined	Seal to minimum standards		Basin fill or basalt		2 cfs	390 acre feet
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
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SECTION 3: WELL DEVELOPMENT, CONTINUED

Source (aquifer), if known: TO BE DETERMANED

Total maximum rate requested: 780 acre feet (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.

6-17540

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)
1	☒	☐		☐	To Be Determined	To Be Determined	To Be Determined	To Be Determined		To Be Determined	2-	To Be Determined 1.7	780 acre feet 780
2	☒	☐		☐	To Be Determined	To Be Determined	To Be Determined	To Be Determined		To Be Determined	2.	To Be Determined	780 acre feet 780
	☐	☐		☐	2 1/2 in well	CASE TO MINIMUM CONST. STR.	?	MINIMUM 100 FT.		Basin Fill Sediment or Basalt			
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									
	☐	☐		☐									

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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.

SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Primary Irrigation	3/1-10/31	780 acre feet

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: 260 Acres

Supplemental: 0 Acres

List the Permit or Certificate number of the underlying primary water right(s): N/A

Indicate the maximum total number of acre-feet you expect to use in an irrigation season: 780

- If the use is **municipal or quasi-municipal**, attach **Form M**
- If the use is **domestic**, indicate the number of households: N/A

If the use is **mining**, describe what is being mined and the method(s) of extraction: N/A

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): 125hp + with deep set bulls

☐ Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. Irrigation well with water sent to pivot via buried mainline.

B. Application Method

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

Two (2) low pressure Center Pivot Systems.

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.

Low pressure drop head pivot systems. Incorporate flow meter to monitor annual usage.

SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR N/A

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: N/A Acreage inundated by reservoir: N/A

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SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Irrigation	3/1-10/31	780 acre feet

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- If the use is **domestic**, indicate the number of households: N/A

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SECTION 5: WATER MANAGEMENT

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A. Diversion and Conveyance

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

☒ Pump (give horsepower and type): TO BE DETERMANED

*125+60 with
deep bullet*

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☐ Other means (describe): _____

Provide a description of the proposed means of diversion, construction, and operation of the diversion works and conveyance of water. Irrigation well with water sent to pivot via buried mainline.

B. Application Method

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

Two (2) low pressure Center Pivot Systems.

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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.

Low pressure drop head pivot systems. Incorporate flow meter to monitor annual usage.

SECTION 6: STORAGE OF GROUND WATER IN A RESERVOIR N/A

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: N/A Acreage inundated by reservoir: N/A

Use(s): N/A

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

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): N/A

USE OF STORED GROUND WATER	PERIOD OF USE

SECTION 8: PROJECT SCHEDULE

Date construction will begin: Upon permit being issued/ granted 9/2012

Date construction will be completed: Prior to starting beneficial use. 8/2017

Date beneficial water use will begin: Within five years of getting permit. 9/2017

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SECTION 9: WITHIN A DISTRICT N/A

☐ Check here if the point of diversion or place of use are located within or served by an irrigation or other water district.

Irrigation District Name	Address	
City	State	Zip

SECTION 10: REMARKS

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

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Use(s): N/A

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

***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): N/A

USE OF STORED GROUND WATER	PERIOD OF USE

SECTION 8: PROJECT SCHEDULE

Date construction will begin: Upon permit being issued/ granted

Date construction will be completed: Prior to starting beneficial use.

Date beneficial water use will begin: Within five years of getting permit.

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☐ Check here if the point of diversion or place of use are located within or served by an irrigation or other water district.

Irrigation District Name	Address	
City	State	Zip

SECTION 10: REMARKS

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

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WR

Land Use

Information Form



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

NOTE TO APPLICANTS

In order for your application to be processed by the Water Resources Department (WRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be used and developed. The planning official may choose to complete the form while you wait, or return the receipt stub to you. Applications received by WRD without the Land Use Form or the receipt stub will be returned to you. Please be aware that your application will not be approved without land use approval.

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) The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b) The application involves a change in place of use only;
 - c) The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; and
 - d) The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for or modifying a water right. The Water Resources Department (WRD) requires its applicants to obtain land-use information to be sure the water rights do not result in land uses that are incompatible with your comprehensive plan. Please complete the form or detach the receipt stub and return it to the applicant for inclusion in their water right application. You will receive notice once the applicant formally submits his or her request to the WRD. The notice will give more information about WRD's water rights process and provide additional comment opportunities. You will have 30 days from the date of the notice to complete the land-use form and return it to the WRD. If no land-use information is received from you within that 30-day period, the WRD may presume the land use associated with the proposed water right is compatible with your comprehensive plan. Your attention to this request for information is greatly appreciated by the Water Resources Department. If you have any questions concerning this form, please contact the WRD's Customer Service Group at 503-986-0801.

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WR

Land Use Information Form



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

Applicant: Schofield Family Limited Partnership
First Last

Mailing Address: P.O. Box 262

Hayward

City

CA

State

94543

Zip

Daytime Phone: 510-589-0795

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A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:			Proposed Land Use:
35s	21e	0	South Half	2100	A-1	☒ Diverted	☒ Conveyed	☒ Used	Farm
35s	21e	33	All	300		☐ Diverted	☐ Conveyed	☒ Used	Farm
35s	21e	33	All	800		☐ Diverted	☐ Conveyed	☒ Used	Farm
						☐ Diverted	☐ Conveyed	☐ Used	

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

Lake County. 1 mile east of Valley Falls junction.

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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
 ☐ Permit Amendment or Ground Water Registration Modification
☐ Limited Water Use License
 ☐ Allocation of Conserved Water
 ☐ Exchange of Water

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

Estimated quantity of water needed: 780 acre feet annually ☐ 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:

Drill well, install center pivot systems (2), irrigate hay crop.



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

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 the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): AC 20 Article 2 (A-1 zone)
- ☐ Land uses to be served by the 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:	
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ 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.

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Name: Dan Burgen Title: Planning Director Phone: (541) 947-6036

Signature: [Signature] Date: 7 March 2012

Government Entity: Lake County

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

Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

35S 21E 32

SENW 0.4

NESW 39.1

NWSW 19

SWSW 18

SESW 38

NESE 39.5

NWSE 26.3

SWSE 24.8

SESE 38.5

SENE 0.5

35S 21E 33

NWSW 8.5

SWSW 7.5

260.1

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Minimum Requirements Checklist

Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.615)

Include this checklist with the application

Check that each of the following items is included. The application will be returned if all required items are not included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900.

- ☒ SECTION 1: applicant information and signature
- ☒ SECTION 2: property ownership
- ☒ SECTION 3: well development
- ☒ SECTION 4: water use
- ☒ SECTION 5: water management
- ☒ SECTION 6: storage of groundwater in a reservoir
- ☒ SECTION 7: use of stored groundwater from the reservoir
- ☒ SECTION 8: project schedule
- ☒ SECTION 9: within a district
- ☐ SECTION 10: remarks

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Attachments:

- ☒ Land Use Information Form with approval and signature (*must be an original*) or signed receipt
- ☒ Provide the legal description of: (1) the property from which the water is to be diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used as depicted on the map. Example: A copy of the deed, land sales contract or title insurance policy.
- ☐ Fees - Amount enclosed: \$2,650.00
See the Department's Fee Schedule at www.oregon.gov/owrd or call (503) 986-0900.

Provide a map and check that each of the following items is included:

- ☒ Permanent quality and drawn in ink
- ☒ Even map scale not less than 4" = 1 mile (example: 1" = 400 ft, 1" = 1320 ft, etc.)
- ☒ North Directional Symbol
- ☒ Township, Range, Section, Quarter/Quarter, Tax Lots
- ☒ Reference corner on map
- ☒ Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west). Each well must be identified by a unique name and/or number.
- ☒ Indicate the area of use by Quarter/Quarter and tax lot clearly identified
- ☒ Number of acres per Quarter/Quarter and hatching to indicate area of use if for primary irrigation, supplemental irrigation, or nursery
- ☒ Location of main canals, ditches, pipelines or flumes (if well is outside of the area of use)
- ☐ Other _____

G-17540

082749

192
AND WHEN RECORDED MAIL THIS DEED AND, UNLESS
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS
TO:

DUANE C. SCHOFIELD
20885 LOCUST STREET
HAYWARD, CA 94541

M0212142

M0220014

ESCROW NO. _____

TITLE ORDER NO. _____

SPACE ABOVE THIS LINE FOR RECORDER'S USE

GRANT DEED

The undersigned grantor(s) declare(s):

Documentary transfer tax is \$ _____

A.P.N. _____

- () computed on full value of property conveyed, or
 () computed on full value less value of liens and encumbrances remaining at time of sale.
 () Unincorporated area: () City of _____, and

By this instrument dated November 30, 1994
 BEATRICE BROCK, JOAN PERDUE, & DUANE C. SCHOFIELD, AS TENANTS IN COMMON WITH THE
 RIGHT OF SURVIVORSHIP

hereby GRANTS to

SCHOFIELD FAMILY LIMITED PARTNERSHIP

the following described real property in the
 County of LAKE, State of OREGON

All of Blocks 1, 2, 3, 4, 5, and 6 in the Townsite of Valley Falls which lies in
 the W $\frac{1}{4}$ W $\frac{1}{4}$ of Section 33, Township 35 South, Range 21 East of the Willamette
 Meridian.

SUBJECT TO those certain easements, reservations, restrictions, and rights of way
 of record or apparent on the ground.

STATE OF ~~CALIFORNIA~~ OREGON } SS.
 COUNTY OF KLAMATH

On DECEMBER 8, 1994 before me _____
 GUDRUN STROUD, A NOTARY PUBLIC

personally appeared JOAN PERDUE

personally known to me (or 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 to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature _____



OFFICIAL SEAL
 GUDRUN STROUD
 NOTARY PUBLIC - OREGON
 COMMISSION NO. 513008
 MY COMMISSION EXPIRES 04-04-1998

Beatrice Brock
 BEATRICE BROCK

Joan Perdue
 JOAN PERDUE

Duane C. Schofield
 DUANE C. SCHOFIELD

STEWART TITLE of MODESTO

MAIL TAX STATEMENTS TO PARTY SHOWN ON FOLLOWING LINE; IF NO PARTY IS SHOWN, MAIL AS DIRECTED ABOVE.

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→ < BACK SIDE OF 082749 > ←

STATE OF CALIFORNIA

COUNTY OF ALAMEDA

ss.

M0220015

~~M0212143~~

793

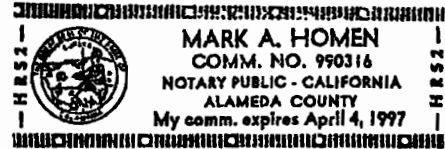
On December 2, 1994, before me, Mark A. Homen, a Notary Public, personally appeared Duane C. Schofield personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature

Mark A. Homen

(seal)



STATE OF OREGON.]

] ss.

County of Lake.]

Dec 14 19 94

Personally appeared Beatrice Brock

and acknowledged the foregoing instrument to be her voluntary act and deed.

(OFFICIAL SEAL)



Before me:

Karen O'Connor
Notary Public for Oregon
My Commission expires 1-9-98



State of Oregon

County of Lake

} ss.

Reel 22

File 0014

I hereby certify that the within instrument was received and filed for record on the 14 day of December 1994 at 3:26 o'clock P. M. and recorded on Page 792 in book 227 Record of Deeds of said County

Karen O'Connor
County Clerk

RECEIVED

APR 09 2012

G-17540

WATER RESOURCES DEPT
SALEM, OREGON

RECORDING REQUESTED BY

082748

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO:

DUANE C. SCHOFIELD
20885 LOCUST STREET
HAYWARD, CA 94541

~~MO212140~~

MO220012

BEING RECORDED TO CORRECT GRANT DEED PREVIOUSLY
RECORDED IN BOOK 227, PAGE 790, OR AS FEE #82748.

ESCROW NO. _____
TITLE ORDER NO. _____

SPACE ABOVE THIS LINE FOR RECORDER'S USE

GRANT DEED

The undersigned grantor(s) declare(s):

Documentary transfer tax is \$

A.P.N. _____

- () computed on full value of property conveyed, or
() computed on full value less value of liens and encumbrances remaining at time of sale.
() Unincorporated area: () City of _____, and

By this instrument dated November 30, -1994, for a valuable consideration
BEATRICE BROCK, JOAN PERDUE, & DUANE C. SCHOFIELD, AS TENANTS IN COMMON WITH THE
RIGHT OF SURVIVORSHIP
hereby GRANTS to

SCHOFIELD FAMILY LIMITED PARTNERSHIP

the following described real property in the

County of LAKE, State of OREGON

Township 35 South, Range 21 East of the Willamette Meridian,

Section 31: That part of the S $\frac{1}{2}$ SE $\frac{1}{4}$ SE $\frac{1}{4}$ lying SOUTHEASTERLY of U.S. Highway No. 395,
EXCEPTING THEREFROM the following described parcel: Beginning at a point in the
Easterly right of way line of the Lakeview Burns Highway, which point is opposite and
40 feet distant from Engineer's center line Station 8+25.6, which point is also 331.6
feet North and 939.5 feet West of the Southeast corner of Section 31, Township 35

Continued on attached Exhibit A.

STATE OF ~~OREGON~~ OREGON

SS.

COUNTY OF KLAMATH

On DECEMBER 8, 1994, before me _____

GUDRUN STROUD, A NOTARY PUBLIC

personally appeared JOAN PERDUE

personally known to me (or 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 to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

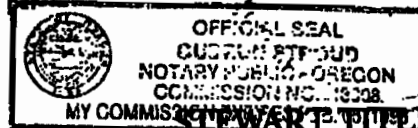
WITNESS my hand and official seal.

Signature Gudrun Stroud

Beatrice Brock
BEATRICE BROCK

Joan Perdue
JOAN PERDUE

Duane C. Schofield
DUANE C. SCHOFIELD



STEWART TITLE of MODESTO

MAIL TAX STATEMENTS TO PARTY SHOWN ON FOLLOWING LINE; IF NO PARTY IS SHOWN, MAIL TAX STATEMENTS TO PARTY SHOWN ABOVE.

G-17548

APR 9 2012

WATER RESOURCES DEPT
SALEM, OREGON

STATE OF CALIFORNIA

COUNTY OF ALAMEDA

ss.

~~M0212141~~ M0220013 791

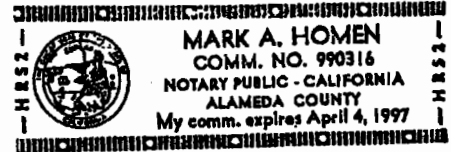
On December 2, 1994, before me, Mark A. Homen, a Notary Public, personally appeared Diane C. Schofield personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature

Mark A. Homen

(seal)



STATE OF OREGON, }

County of Lake. }

ss.
}

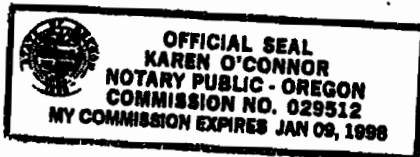
Personally appeared

Beatrice Brock

Dec 14 1994

and acknowledged the foregoing instrument to be her voluntary act and deed.

(OFFICIAL SEAL)



Before me,

Karen O'Connor

Notary Public for Oregon

My Commission expires

1-9-98

State of Oregon }

County of Lake }

ss.

Rec 22

File 0012

I hereby certify that the within instrument was received and filed for record on the 14 day of December 1994 at 3:25 o'clock P M. and recorded on Page 790 in book 227 Record of Deeds of said County.

Karen O'Connor
County Clerk

By _____ Deputy

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WATER RESOURCES DEPT
SALEM, OREGON

G-17548

←
back side of 082748
←

EXHIBIT A

South, Range 21 E.W.M., thence North 41°59' East along said Easterly right of way line a distance of 444.6 feet; thence South 0°10' East a distance of 330 feet; thence South 89°45' West a distance of 298.4 feet to the point of beginning.

Section 32: That part of the S½N½ and that part of the S½ of said Section 32, lying Southeasterly of U.S. Highway 395.

Section 33: W½W½.

SUBJECT TO those certain easements, reservations, restrictions, and rights of way of record or apparent on the ground.

↓
✓
ATTACHMENT TO 082748 ✓
←

G-17548

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WATER RESOURCES DEPT
SALEM, OREGON

Standard Application Completeness Checklist

Minimum Requirements (OAR 690-310-0040)(ORS 537.400)

This is the checklist used by WRD staff

- ☒ Source of water. *An aquifer needs to be listed on the well development page*
- ☒ Well Development (pg. 4 & 5) or a well log report. Must be completed. You may need to consult with a well driller to determine the construction of the wells
- ☒ Amount of water from *each* source in gallons per minute (GPM), cubic feet per second (CFS), or acre feet (AF) *The Department will need to know the instantaneous rate (flow rate) that water will be pumped from each well.*
- ☒ Project schedule (If system is already completed, indicate "existing"). *Please supply approximate dates.*
- ☒ You must include a Legal description of all the properties involved where water is diverted, crossed, and used. The Legal description includes a metes and bounds, or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or you may submit a lot book report prepared by a title company. *The Department will not accept a copy of the tax bill.*
- ☒ Fees: Amount of water requested ?

Base Fee \$ 1000

1st CFS/AF \$ 250

? Addtnl CFS/ AF @ _____ = _____

1 Addtnl POD/POA @ \$250 = \$250

____ Addtnl Use @ _____ = _____

Total Exam Fees \$ 2250 (assumed)

Permit Recording Fees \$ 400

Total Paid \$ 2650

Amount Due \$ _____

Amount Returned \$ 2650

Reviewed by: Dorothy Pedersen

Date : March 16, 2012

Groups\wr\Customer Service Group\templates\standard app checklist

8/8/2011 jks

G-17548

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APR 09 2012

**WATER RESOURCES DEPT
SALEM, OREGON**

FERRELL RANCHES

29261 Albert Rim RD. Lakeview, OR 97630

Cell: 541-219-2698 House: 541-947-2598

Jerry Sauter

725 Summer St. NE, Suite A

Salem, OR 97301

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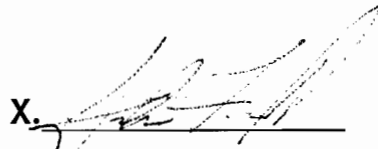
APR 09 2012

WATER RESOURCES DEPT
SALEM, OREGON

Dear Jerry, April 5, 2012

Thank you for your time yesterday, you were allot of help. I have returned the original application, check, and a separate attachment with all the requested information (I think). Please review and contact me personally at the numbers and address listed above in the future, as I'm acting as the agent for Schofield Family Partnership.

Sincerely,

X. 

Justin Ferrell

G-17548