

January 12, 2016

Ten Mile Farm
Joseph Schwartz
1570 E Nevada St
Ashland, OR 97520

Attn: Jeffrey D. Pierceall

RE: Updated New Water-Use Application

Hello, Jeffrey,

Thank you for the initial review of Ten Mile Farm's New Water-Use Application materials. The Jackson County Watermaster prepared the included, updated map and verified that it should now meet OWRD's requirements.

Thanks for your assistance and don't hesitate to contact me directly if you have any immediate questions.

Best,



Joseph Schwartz
541.944.0780

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SALEM, OR

G-18234

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

Water-Use Permit Application Processing

1. Completeness Determination

The Department evaluates whether the application and accompanying map contain all of the information required under OAR 690-310-0040 and OAR 690-310-0050 (www.oregon.gov/owrd/law). The Department also determines whether the proposed use is prohibited by statute. If the Department determines that the application is incomplete, all fees have not been paid, or the use is prohibited by statute, the application and all fees submitted are returned to the applicant.

2. Initial Review

The Department reviews the application to determine whether water is available during the period requested, whether the proposed use is restricted or limited by rule or statute, and whether other issues may preclude approval of or restrict the proposed use. An Initial Review (IR) containing preliminary determinations is mailed to the applicant. The applicant has 14 days from the mailing date to withdraw the application from further processing and receive a refund of all fees paid minus \$200. The applicant may put the application on hold for up to 180 days and may request additional time if necessary.

3. Public Notice

Within 7 days of the mailing of the initial review, the Department gives public notice of the application in the weekly notice published by the Department at www.oregon.gov/owrd. The public comment period is 30 days from publication in the weekly notice.

4. Proposed Final Order Issued

The Department reviews any comments received, including comments from other state agencies related to the protection of sensitive, threatened or endangered fish species. Within 60 days of completion of the IR, the Department issues a Proposed Final Order (PFO) explaining the proposed decision to deny or approve the application. A PFO proposing approval of an application will include a draft permit, and may request additional information or outstanding fees required prior to permit issuance.

5. Public Notice

Within 7 days of issuing the PFO, the Department gives public notice in the weekly notice. Notice includes information about the application and the PFO. Protest must be received by the Department within 45 days after publication of the PFO in the weekly notice. Anyone may file a protest. The protest filing fee is \$350.00 for the applicant and \$700.00 for non-applicants. Protests are filed on approximately 10% of Proposed Final Orders. If a protest is filed, the Department will attempt to settle the protest but will schedule a contested case hearing if necessary.

6. Final Order Issued

If no protests are filed, the Department issues a Final Order consistent with the PFO. If the application is approved, a permit is issued that specifies the details of the authorized use and any terms, limitations or conditions that the Department deems appropriate.

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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

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: \$1,900
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 _____

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

SECTION 1: APPLICANT INFORMATION AND SIGNATURE

Applicant Information

NAME JOSEPH SCHWARTZ		PHONE (HM) 541-944-0780	
PHONE (WK) 541-944-0780	CELL 541-944-0780	FAX	
ADDRESS 1570 E NEVADA ST			
CITY ASHLAND	STATE OR	ZIP 97520	E-MAIL* JOESCHWARTZ42@GMAIL.COM

Organization Information

NAME TEN MILE FARM		PHONE 541-944-0790		FAX
ADDRESS 11698 DEAD INDIAN MEMORIAL RD (PHYSICAL) PO BOX 1285 (MAILING)				CELL
CITY ASHLAND	STATE OR	ZIP 97520	E-MAIL* JOESCHWARTZ@GMAIL.COM	

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 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.)

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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.

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

Joseph Schwartz

12/28/15

Applicant Signature

Print Name and title if applicable

Date RECEIVED BY OWRD

Applicant Signature

Print Name and title if applicable

Date JAN 15 2016

For Department Use		
App. No. G-10234	Permit No.	Date

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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.
- 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*).

You must provide the legal description of: 1. The property from which the water is to be diverted, 2. Any property crossed by the proposed ditch, canal or other work, and 3. Any property on which the water is to be used as depicted on the map.

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
67133	Ice House Creek (intermittent)	408'	<40'
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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*).

Good yielding well (42 gpm, 53' static) drilled in 2003. New high-efficiency solar-powered 1hp 240Vac submersible pump installed in 2015. Pump sized to supply efficient, no waste, low-flow drip and micro-sprinkler water application. Off-grid (stand-alone) pump system. Solar availability limits pumping to peak-sun daylight hours (10am-4pm).

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SECTION 3: WELL DEVELOPMENT, CONTINUED

Total maximum rate requested: 16 gpm (each well will be evaluated at the maximum rate unless you indicate well-specific rates and annual volumes in the table below).

The table below must be completed for each source to be evaluated or the application will be returned. If this is an existing well, the 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 to obtain the necessary information.

											PROPOSED USE			
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)	SOURCE AQUIFER***	TOTAL WELL DEPTH	WELL-SPECIFIC RATE (GPM)	ANNUAL VOLUME (ACRE-FEET)	
Schwartz, JACK 56377	<input type="checkbox"/>	<input checked="" type="checkbox"/>	67133	<input type="checkbox"/>	6" casing, 4" liner	Steel to 59', PVC to 214'	180'-200'	Seal to 59'	53	Volcanic Sandstone (see well report)	214 ft	Requesting 16 gpm max. rate of 42 gpm total well yield	3.5 AF	
	<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"/>										

Revised 2/1/2012

Ground Water/5

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SECTION 4: WATER USE

USE	PERIOD OF USE	ANNUAL VOLUME (ACRE-FEET)
Nursery Operations	Year round	3.5 AF

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: _____ 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: _____

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- If the use is **municipal or quasi-municipal**, attach **Form M**

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- If the use is **domestic**, indicate the number of households: _____

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

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SECTION 5: WATER MANAGEMENT

A. Diversion and Conveyance

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

Pump (give horsepower and type): 1hp 240Vac Grundfos submersible

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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. _____

B. Application Method

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

Low-flow drip and micro-sprinkler irrigation

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.

Nursery design is small-scale, high-efficiency and ecosystem-friendly. Low-flow drip and micro-sprinkler application method with no waste or runoff. All electricity for water pumping provided by on-site 240Vac solar-electric system. Only organic/non-toxic agricultural products used onsite. Efficient resource use (energy and water) is fundamental to our project planning.

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*).

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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

SECTION 8: PROJECT SCHEDULE

Date construction will begin: 02/01/2016

Date construction will be completed: 06/2019

Date beneficial water use will begin: 06/01/2016

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SECTION 9: WITHIN A DISTRICT

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).

G-10284

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

WELL I.D. # L 67133
 START CARD # 158672

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

(1) LAND OWNER Well Number _____
 Name JOE SCHWARTZ
 Address PO Box 84
 City PHOENIX State OR Zip 97535

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

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

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

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 214 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	59	BENTONITE	0	59	28 SACKS
6"	59	222				

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

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	+1	59	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	-14	214	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 59 FT

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

From	To	Slot size	Number	Diameter	Casing	Liner
					<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
42		222	1 hr.

Pump Bailer Air Artesian

Temperature of water 53° Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County JACKSON Latitude _____ Longitude _____
 Township 38S N or S Range 3E E or W. WM.
 Section 30 SW 1/4 SW 1/4
 Tax Lot 3807 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 11698 DEAD INDIAN MEM. RD

(10) STATIC WATER LEVEL:
53 ft. below land surface. Date 10-4-03
 Artesian pressure _____ lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWL
62	102	2 1/8	53
117	122	2 1/2 - 5 1/2	53
142	162	6	53
162	182	5 1/2	53
182	202	11	53
202	222		
		12	53

(12) WELL LOG: Ground Elevation _____

Material	From	To	SWL
CLAY DARK BRN w/ BLDER	0	3	
CLAY BRN HARD w/ ROCK	3	11	
ROCK BRN w/ BRN CLAY	11	41	
CLAY TAN & CHOCOLAT	41	46	
CLAYSTONE BROWN	46	54	
VOLC. SANDST. WHITE/GRY	54	84	
GRY	84	96	
DARK GRAY	96	109	
GRY	109	182	
LIGHT GRAY	132		
BROKEN, CREVICE AT			
163-164 LOSING CIRC		222	
CAVING			

PUMPING LEVEL TEST RECEIVED BY OWRD
 DEPTH YIELD
 142 FT 42 GPM
 102 28 1/4
 87 17 1/2
 82 16
 SALEM, OR

Date started 10-2-03 Completed 10-4-03
 (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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
 WWC Number _____
 Signed _____ Date _____

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.
 SALEM, OR
 Signed PLUMBER DRILLING WWC Number 796
 Date 10-4-03

Date Hand-Delivered _____
Date Region Office Rec'd _____

OWRD Receipt _____
Date Fee Received _____
Check No. _____

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

This form must be completed and the original mailed or delivered to the Water Resources Department, 158 12th St, NE, Salem OR 97301-4172 for all new construction, conversion, alteration, deepening and abandonments. This original must be mailed or delivered before work is commenced. A \$75 fee shall accompany the original for all new well construction and conversion (make checks payable to the Water Resources Department). In addition, the constructor shall provide a legible copy of this notice to the region office within which the well is being constructed, converted, altered, deepened, or abandoned using one of the following methods: (a) by regular mail no later than three (3) calendar days (72 hours) prior to commencement of work; (b) by hand delivery, during regular office hours before work is commenced; or (c) by FAX before work is commenced. If method (c) is used, a legible copy of the start card shall also be mailed or delivered to the region office no later than the day work is commenced. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$75 fee with the start card, for failure to submit the \$75 fee in a timely manner, and for failure to timely submit start cards.

Owner's name and mailing address: JOE SCHWARTZ
Home Phone: 944-0780 PO Box 24
Work Phone: _____ PHOENIX, OR 97535

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

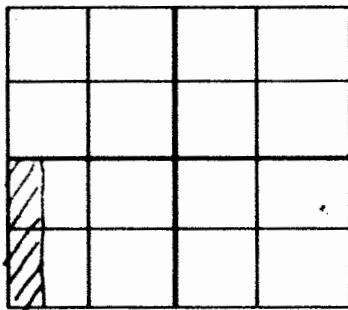
Proposed Commencement Date: 1-2-03

Existing or Proposed Well Depth: 260 Diameter: 6" Original Well I.D. Label Number: _____

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

Proposed Well Location: County JACKSON Township 38S Range 3E Section 30
North or South East or West

1/4 SW 1/4 SW Tax Lot 3807



Street Address of well (or directions if no street address):
11678 OLD INDIAN MEM. RD

Show well location within 1/4, 1/4 of section grid at left.
Attach map with location identified. (See reverse for recommended maps.)

We have read the back of this form and the information provided is accurate to the best of our knowledge.

Owner/Agent Name _____ Date Signed _____
Bonded Water Supply/Monitor Well Constructor Name PIONEER DRILLING Company _____
License No. 796 Date Signed 10-1-03

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

ADDITIONAL IMPORTANT INFORMATION ON BACK.

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Oregon Water Resources Department
Well Log Query Report

- # Main
- Return
- Contact Us
- Help

Well Log Query Results *gps points, where available are at the far right of the table. Click link to view on map*

Owner Last Name: Schwartz, Taxlot: 3807

Well Log	T-R-# D-Q-Q	Taxlot	Street of Well	Owner	Company	Special Standards	Well Type	First Water	Completed Depth	Static Water Level	Yield	Completed Date	Received Date	Bonded Constructor	Starcard	Well Id #	New	Abandon	Deepen	Alteration	Conversion	Domestic	Irrigation	Community	Livestock	Industrial	Infection	Thermal	Dewatering	Placer/soil	Latitude/ Longitude		
JACK 563ZI	38.008-3.00E-30 SW-SW	3807	11698 DEAD INDIAN MEMORIAL RD	SCHWARTZ, JOE PO BOX 84 PHOENIX OR 97535			W	62.00	214.00	53.0	42.0	10/04/2003	10/14/2003	KRASNER, FRIER PIONEER DRILLING	158672 67133	Y					Y												

Download Data

Current mailing address:
Joe Schwartz
1570 E Nevada St
Ashland, OR 97520

Classification to change
from Domestic to Irrigation

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First American Title Insurance Company of Oregon

CRATER TITLE DIVISION

Ashland Branch
366 Linton Way
Ashland, Oregon 97120
(541) 488-6868 • FAX (541) 488-6842

38-3E
3807

10
10
11

Order # 200117468H

WARRANTY DEED

KNOW ALL MEN BY THESE PRESENTS, That MIKE ALBERS, Grantor, conveys and warrants to JOSEPH E. SCHWARTZ, Grantee, the following described real property, together with appurtenances, free of encumbrances except as specifically set forth herein, situated in Jackson County, Oregon, described as follows, to-wit:
See Exhibit A attached hereto and made a part hereof.

SUBJECT TO:

For tax purposes, the herein described property has been classified as farm land and assessed at a lower valuation by the County Assessor pursuant to ORS 308.345 to 308.407. If the land becomes disqualified for the special assessment under the statute, an additional tax and interest thereon may be levied, which the grantor herein agree to assume and pay, within and subject to the Talent Irrigation District, rights of the public, reservations and encumbrances now of record.

The true consideration paid for this conveyance is Thirty-Five Thousand And 00/100 DOLLARS \$35,000.00.

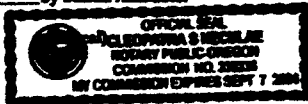
This instrument will not allow use of the property described in this instrument in violation of applicable land use laws and regulations. Before signing or accepting this instrument, the person acquiring fee title to the property should check with the appropriate City or County Planning Department to verify approved uses and to determine any limits on lawsuits against farming or forest practices as defined in ORS 30.938.

Dated this 22ND day of APRIL, 2002.

MIKE ALBERS

STATE OF OREGON)
County of LANE) ss.

This instrument was acknowledged before me on the 22ND day of APRIL, 2002, by MIKE ALBERS.



Cleopatra S. Neulan
Notary Public for Oregon
My commission expires Sept. 7, 2004

Until a change is requested,
send all tax statements to:
Grantee at:
PO Box 84
PHOENIX OR 97535
Return document to:
First American Title Insurance Co.
300 W. Main Street, P.O. Box 250
Medford, OR 97504

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SUBMITTED BY APPLICANT

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02 23844

Exhibit A

The West half of the West half of the Southwest Quarter of Section 36, Township 36 South, Range 3 East, Willamette Meridian in Jackson County, Oregon. EXCEPTING THEREFROM an undivided 1/2 interest in all gas, oil and mineral rights, as excepted and reserved by Document No. 66-07343, Official Records of Jackson County, Oregon.

Jackson County, Oregon
Recorded
OFFICIAL RECORDS
APR 30 2002
8:40 AM
[Signature]
COUNTY CLERK

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SUBMITTED BY APPLICANT

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Oregon

Kate Brown, Governor

Water Resources Department

North Mall Office Building

725 Summer St NE, Suite A

Salem, OR 97301

Phone (503) 986-0900

Fax (503) 986-0904

www.wrd.state.or.us

January 6, 2016

Joseph Schwartz
c/o Ten Mile Farm
1570 E. Nevada St
Ashland, OR 97520

Dear Joseph:

The Water Resources Department has received your application to use or store water. At this time however, we are unable to accept your application, because the minimum filing requirements are not met according to the Oregon Administrative Rules (OAR 690-310-0040 and 0050).

We are hereby returning the incomplete application and the fees submitted. Please return the application, the required information, and this checklist (on back), so the Department may begin processing your application in a timely manner.

This review is based only on the completeness of your application. Any determination of water availability, compliance with basin plan rules, or any other water related issues has not been made.

Should you have any questions, please do not hesitate to contact Customer Service at the address above or by telephone at 503-986-0801.

Sincerely,

Jeffrey D. Pierceall
Customer Service

Cc: OWRD Fiscal

RECEIVED BY OWRD

JAN 15 2016

SALEM, OR



R-18234

The map must meet all the minimum requirements of OAR 690-310-0050.

Township, Range, Section

Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)

Place of use, 1/4, 1/4=s and tax lot clearly identified

Even map scale not less than 4" = 1 mile (example: 1" = 100 ft, 1" = 200 ft, etc.)

Location of **each** diversion point, well or dam by reference to a recognized public land survey corner. Multiple wells shall be uniquely labeled, and identified on well logs if existing.

Reference corner on map

North Directional Symbol

Number of acres per 1/4, 1/4, if for irrigation, nursery, or agriculture