SURD OF OMEON

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

Request for Assignment

RECEIVED

NOV 1 8 2020

If the Department determines that the application is incomplete, fees have not been paid, or the required documents are not acceptable, the application and all fees submitted will be returned to the applicant.

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

OWRD

I, Great Western Farm & (Name of Current Holde	Ranches LLC, a Limited Liability Co	mpany		
12600 H I-I- D.I	V1	-41 F-11- OR 07/02	EA1 201 7000	
(Mailing Address)	(City)	ath Falls, OR 97603 (State) (Zip)	541-281-7909 (Phone #)	
hereby assign all	my interest in and to the entire applica sold all the land authorized under the ri	tion/permit/transfer/limite		ıt;
hereby assign all my interest in and to a portion of application/permit/transfer/limited license/groundwater statement; (You must include a map showing the portion of the application/permit/transfer/limited license/groundwater statement to be assigned. Example, sold a portion of the land authorized under the right)				
hereby assign a portion of my interest in and to the entire application/permit/transfer/limited license/groundwater statement; (example, adding an additional person)				
Application #; Permit # <u>G15134</u> ; Transfer #;				
Lim	ted License #	; Ground	water Statement #	;
as filed in the office of the	ne Water Resources Director, to:			
Northwest Farm Credit Services, FLCA 300 Klamath Ave, Ste 200, Klamath Falls, OR 97601-6308				
(Name of New Owner)	(Mailing Add	(City)	(State) (Zip)	
Great Western Farm & I (Name of New Own	Ranches LLC, a Limited Liability Comer)	pany		
6062 O'Connor Road	Klam	ath Falls, OR 97603	(541) 281-7909	
(Mailing Address)	(City)	(State) (Zip)	(Phone #)	
groundwater state this form. Write	owners of the property described in this ment, you must provide a list of all other initials (first letters) of your first and that I have notified all other owners of groundwater statement of this Reques	ner owners' names and ma d last names at the spot in the property described in	iling addresses and attach it to dicated below	20 made
	20th	Adalas		20
Witness my hand this	(Day) da	y of OCTOBER	, 20	(Year)
Signature of Current Holder of Record Failure to provide any of the required information will result in the return of your application.				
	nment and record change at			



8:00 a.m. on date of receipt at Salem, Oregon.

For Director by Mary F. Bjork. Program Analyst in Water Rights Division.

Fee receipt # 133959

The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of \$100.