Return to:  Collins Products LLC  Attn.: Ted DeVore  P.O. Box 16  Klamath Falls, Oregon 97601	Vol. <u>MO1 Page 630</u> 21
	State of Oregon, County of Klamath Recorded 12/10/01
'01 DEC 10 PM1:53	
(FILE WITH Pursuant to ORS 537.788, owners of property on wand/or alteration of a new well or upon property tracerords at the appropriate County Clerks Office property may be used to identify the property.	ELL OWNERSHIP INFORMATION FORM I COUNTY CLERK'S OFFICE) Thich a well is located shall, within 60 days following the construction ansfer, record the following information in the property deed E. Either the deed recording number or legal description of the
Property Owner Name(s): COLLINS TEM	SER CO. LLC - COLLOWS PRODUCTS LLC
Mailing Address: P.O. Box 16 - 6410 1	Awy 66 KLAMMATON FAUS, OREGIN 97601
Deed Recording Number (or legal description):_	AWY 66 KLAMMEN FAUS, OREGIN 97601 39.005 9.00 E 18 KLAMMEN COUNTY FAX LET 1000
Well Identification Number(s): L43900	1
by the Water Resources Department. Most uses of water require a w of ground water without benefit of a water right. Contact the Depart of water in the desired amount on a specific property.  In addition to the above, owners of properties on which a well is loc are listed below:  1. All wells shall be maintained in a condition where they are water resource.  2. All wells shall be securely covered to prevent any foreign and the well shall be equipped with an access port or airline shall wells may only be permanently abandoned by a licensed at must be carried out in accordance with state rules.  If you would like further information about water rights, maintaining concerning well construction, please contact the Oregon Water Reson 197301-4172.  I have read the above describing my basic rights and the content of the water require a water require a water require a water require a water resource.	o that static water level information can be determined at any time. imum extension requirements.  und bonded well constructor or a landowner with a valid permit and bond. Well abandonmer g, and/or abandoning your well, or wish to receive a copy of the administrative rules surces Department by phone at (503) 378-8455, or by mail at 158 12th Street NE, Salem, OR
Signature of Property Owner(s):	. date
State of OPEGOW, County of KLAW This instrument was acknowledged before me on _C	OT 20, 201 (date) by DACE A. SCATE.  of authority - if applicable) of COLINS TIMBER 6 (name of
(name of person(s)) as \( \subseteq \text{LES/DEN/}\) type party on behalf of whom instrument was executed - if applicable Before Me: \( \text{ASSUL LUNG}\)  Notary Public for \( \text{ORTSON}\)  My commission expires: \( \text{CCT 15, 100}\)	
Re	cording Office Use Only