

Registration No. GR - 1091

Certificate No. GR - 1052

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Ben W. Upper
of route 1 box 265 Turner County of Wagon
State of Oregon, do hereby make application for a certificate of registration as evidence of a right to appropriate ground water.

1. Source from which water is withdrawn is Infiltration Trench #1
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: _____
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows: 800 feet South & 250 feet east from NW corner Section 32,

(a) in Western Addition City of Turner
(Give distance and bearing to corner of section or other legal subdivision)

being within NW 1/4 of NE 1/4 of Sec. 32, Twp. 8S, Rge. 2W
(Smallest legal subdivision) (N. or S.) (E. or W.)

or (b) within limits of recorded platted property, town or city: 200' S of Corner 6th and 1st

in Lot _____ Block _____ of Western Addition City of Turner
(Name of plat or addition)

Turner County of Wagon
(If within city or town, give name)

3. Construction Work was begun on Aug 1946; was completed on 1946
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1947
(Date)

since which time the water has been used each year
(Continuously or intermittently)

from June to Oct
(Date) (Date)

4. Quantity of water claimed and used is 150 gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used General Farm

Irrigation Diversified Farming
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 13 feet. Type Dug
(Dug or drilled)

diameter 40 X 36 feet inches. Elevation of ground at well site 295 feet, mean sea level.
(As near as known)

Depth to water table 2 feet.

7. Capacity of Well: 150 g.p.m. with 11 feet drawdown.

_____ g.p.m. with _____ feet drawdown.

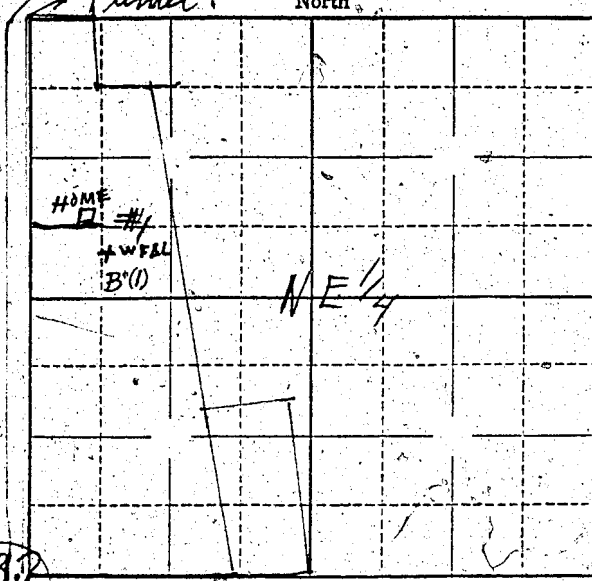
Date of test summertime

If Flowing Well: Measured discharge _____ g.p.m. on _____
(Date)

Shut-in pressure at ground surface _____ lbs. per sq. in. on _____
(Date)

Water is controlled by _____
(Cap, valve, etc.)

Township 8 S Range 2 W, W.M.
Turner North



Locate well and acreage of irrigated land on plat.
Scale: 2" = 1 Mile

Carter Jackson
32
32

STATE OF OREGON

County of Marion

ss.

I, _____, being first duly sworn, do hereby certify that I have read the foregoing Registration Statement and that all of the items therein contained are true to the best of my knowledge and belief.

[Signature]
(Signature of Registrant)

Subscribed and sworn to before me this 26th day of February, 1958.

My commission expires 12th June 1961

Wm. S. Bartholomew
(Notary Public)

(SEAL)

CERTIFICATE OF REGISTRATION

STATE OF OREGON

County of Marion

ss.

This is to certify that the foregoing Registration Statement was received in the office of the State Engineer on the 26th day of February, 1958, at 10:00 o'clock A.M. and has been duly recorded in said office in Book No. 5 of Registration Statements on page 68-1052.

Witness my hand this 30th day of June, 1958

Lewis A. Stanley
(State Engineer)

By _____

(Deputy)

GR 1052