

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Edna A. Comerford
of Rt. 1, Box 112, Turner County of Marion
(Mailing address)

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 Source from which water is withdrawn is Pump Well
(Flowing well, pump well, infiltration trench, or tunnel)
2. Location is: 7/10 mile east of Marion
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) South 1716 feet and East 594 ft from NW corner
(Give distance and bearing to corner of section or other legal subdivision)
being within SW 1/4 NW 1/4 of Sec. 34, Twp. T. 9 S., Rge. 2 W
(Smallest legal subdivision) (N. or S.) (E. or W.)

or (b) within limits of recorded platted property, town or city:
in Lot _____, Block _____ of _____
(Name of plat or addition)

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

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

and the ground water claimed was first used for the purposes set out below on 1953
(Date)

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

from March to October
(Date) (Date)

4. Quantity of water claimed and used is 28 26 gallons per minute; 10 acre feet per year.

5. Purpose or Purposes for which water is used Irrigation
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 50 feet. Type Drilled
(Dug or drilled)
diameter 6 inches. Elevation of ground at well site 315 feet, mean sea level.
(As near as known)
Depth to water table 10 feet.

7. Capacity of Well: _____ g.p.m. with _____ feet drawdown.
Not available
_____ g.p.m. with _____ feet drawdown.

Date of test _____

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.)

8. Casing: (Give diameter, commercial specifications and depth below ground surface of each casing size.)

6 inch diameter from 0 to 49 feet
..... inch diameter from to feet
..... inch diameter from to feet
..... inch diameter from to feet

Describe and show depth of shoe, plug, adapter, liner or other details:

9. Perforated Casings or Screens:

(Number per foot and size of perforations, or describe screen) from to
..... from to
..... from to
..... from to

10. Log of Well: (Describe each stratum or formation clearly, indicate if water bearing, and give thickness and depth as indicated.)

Information not available

MATERIAL	Thickness (Feet)	Depth to Bottom (Feet)

If log of well is not available, give name and address of driller. Not Available

11. Infiltration Trench: Covered or open
Dimensions: Length ft. Minimum depth ft. Maximum depth ft.
Bottom width ft. Discharge g.p.m. Date of test

12. Tunnel: Type of lining
Dimensions:
(Length, course, and cross sectional size)
Position of water bearing stratum with reference to portal of tunnel

Log of tunnel: (Preceding table for log of well may be used, if desired. Give footage from portal and character of materials, as pertinent.)

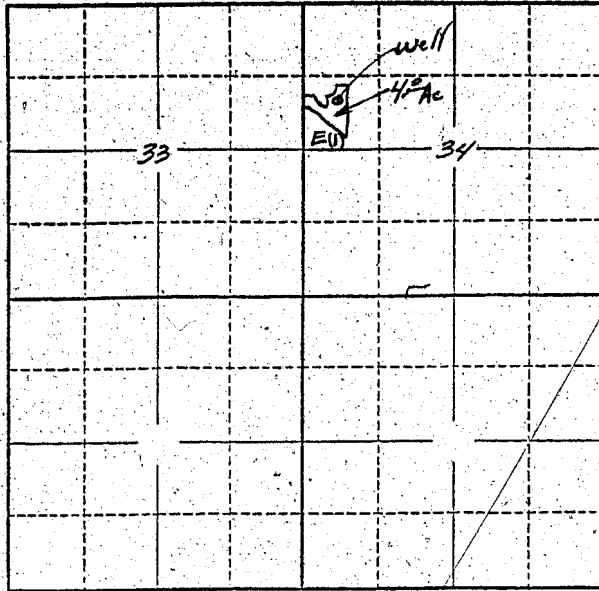
13. Pumping Equipment:
(a) Pump Jacuzzi Jet 3phase Capacity 18 g.p.m.
(Make, type and size)
(b) Motor 2 H.P. - 3phase electric
(Type and horsepower)

14. Location of area irrigated or to be irrigated, or place of use if for purposes other than irrigation.

Township North or South	Range E. or W. of Willamette Meridian	Section	Forty-acre Tract	Number Acres To Be Irrigated	Date of Reclamation
<u>9S</u>	<u>2W</u>	<u>34</u>	<u>SW 1/4 N.W 1/4</u>	<u>4 acres</u>	<u>1953</u>

15. If the ground water supply is supplemental to an existing water supply, identification of any application for a permit, permit, certificate or adjudicated right to appropriate water made or held by the registrant.

Township 9S Range 2W W.M.
North



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

STATE OF OREGON

County of Marion } ss.

I, Eidna A. Conover, 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.

Eidna A. Conover
(Signature of Registrant)

Subscribed and sworn to before me this 17 day of March, 1958.

My commission expires 9/27/58
Jennie Baxter
(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 17th day of March, 1958, at 11:30 o'clock A. M. and has been duly recorded in said office in Book No. 6 of Registration Statements on page GR-1158

Witness my hand this 17 day of September, 1958.

Lewis A. Stanley
(State Engineer)

By _____
(Deputy)

GR - 1158

15.00