

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Chauncy W. Lee Vee
of 3290 N. River Rd. Salem County of Mason
(Mailing address)

State of Oregon, do hereby make application for a certificate of registration as evidence of a right to appropriate ground water.

- Source from which water is withdrawn is Pump well
(Flowing well, pump well, infiltration trench, or tunnel)
- Location is: 6 miles North West Salem
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1.5 Chains N. & 13.5 Chains W. of the S.E. Corner of W 1/2 of the W 1/2 of Sec 21
(Give distance and bearing to corner of section or other legal subdivision)
being within SW 1/4 SW 1/4 of Sec. 21, Twp. 6 S., Rge. 3 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 Mason
(If within city or town, give name)

3. Construction Work was begun on June 1950, was completed on June 1950
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on June 1950
(Date)

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

from June 1950 to March 1958
(Date) (Date)

4. Quantity of water claimed and used is 120 gallons per minute; _____ 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 28 feet. Type drilled
(Dug or drilled)

diameter 8 inches. Elevation of ground at well site 150 feet, mean sea level;
(As near as known)

Depth to water table 17 feet.

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

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

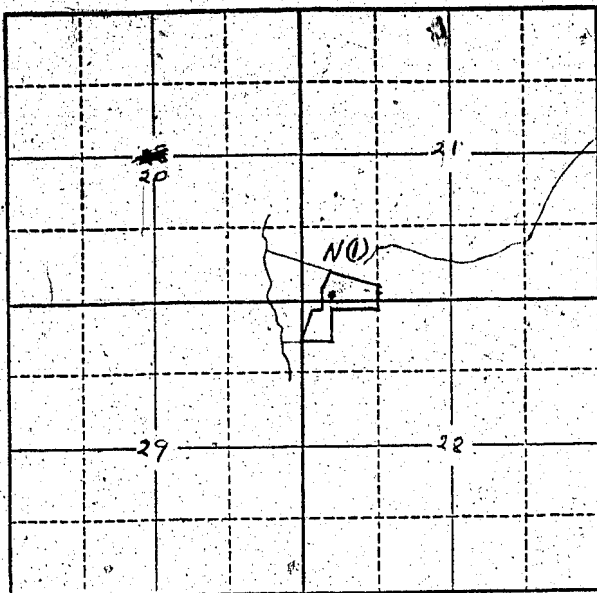
Date of test No test

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.)

Township 6 South Range 3 West, W.M.
North



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

STATE OF OREGON

County of Marion } ss.

I, Chauncy W. LeVee, 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.

Chauncy W. LeVee
(Signature of Registrant)

Subscribed and sworn to before me this 24th day of March, 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 24 day of March, 1958, at 1:30 o'clock P. M. and has been duly recorded in said office in Book No. 6 of Registration Statements on page GR-1202

Witness my hand this 17 day of September, 1958

Lewis A. Stanley
(State Engineer)

By _____ (Deputy)

GR - 1202

\$15.00