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STATE ENGINEER
SALEM, OREGON

Registration No. GR 1394

Certificate No. GR 1350

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Worren Gray

of Rt. 1 Box 63 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 Source from which water is withdrawn is Pump Well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: 3/4 mile N.E. of Marion
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1917 ft. North E 1518 ft. West from SE corner Sec. 18, T 9 S, R 2 W
(Give distance and bearing to corner of section or other legal subdivision)

being within NW 1/4 of SE 1/4 of Sec. 27, Twp. 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)

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

3. Construction Work was begun on June 1941; was completed on June 1941
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on June 1941
(Date)

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

from June 1941 to present
(Date) (Date)

4. Quantity of water claimed and used is 150 gallons per minute; 28.3 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 63 feet. Type Drilled
(Dug or drilled)

diameter 10 inches. Elevation of ground at well site _____ feet, mean sea level.
(As near as known)

Depth to water table 4 feet.

7. Capacity of Well: 150 g.p.m. with 8 feet drawdown.

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

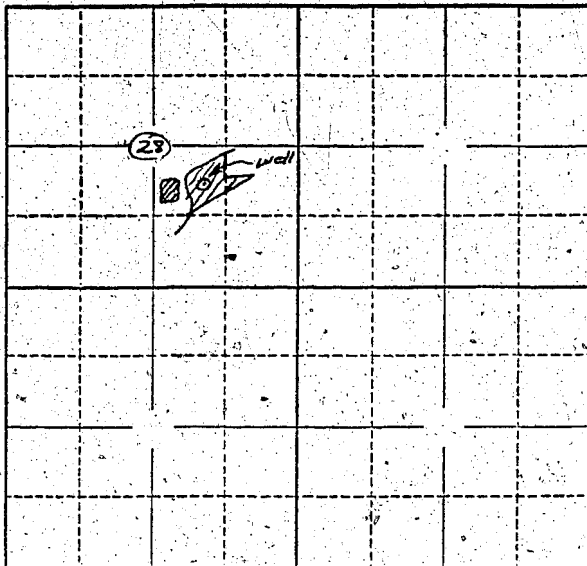
Date of test June 1941

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 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, Walter Gray, 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.

Walter Gray
(Signature of Registrant)

Subscribed and sworn to before me this 13 day of March, 1958

My commission expires MY COMMISSION EXPIRES JAN. 19, 1962

J. H. Smith
(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 13 day of March, 1958, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 7 of Registration Statements on page GR-1350

Witness my hand this 20th day of October, 1958

Lewis A. Stanley
(State Engineer)

By _____ (Deputy)