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STATE ENGINEER
SALEM, OREGON

Registration Statement

Registration No. GR - 1415

Certificate No. GR - 1369

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, NELLIE M SCOTT

of Rt. 1, Box 37 Springfield Ore County of LANE

State of ORE 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 Source from which water is withdrawn is Bump Well # 2
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 2 mile NE of Springfield
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1300'S & 10'E of NW COR of FELIX SCOTT D.L.C. #52
(Give distance and bearing to corner of section or other legal subdivision)

being within NE/SE of Sec. 24, Twp. 17S, Rge. 3W
(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 1948, was completed on June 1948
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on June 1948
(Date)

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

from MAY to Oct
(Date) (Date)

4. Quantity of water claimed and used is 125 gallons per minute; 12 1/2 acre feet per year.

5. Purpose or Purposes for which water is used

IRRIG

(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 21 feet. Type DRIVE
(Dug or drilled)

diameter 3 inches. Elevation of ground at well site _____ feet, mean sea level.
(As near as known)

Depth to water table 16 feet.

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

_____ 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.)

3 inch diameter Steel from 0 to 21 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:

Blow from 16 to 21
(Number per foot and size of perforations, or describe screen)
..... 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.)

MATERIAL	Thickness (Feet)	Depth to Bottom (Feet)
None		

If log of well is not available, give name and address of driller. P. D. Dickenson

1280 River Road

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 2" Pacific Centrifugal Capacity 150 g.p.m.
(Make, type and size)

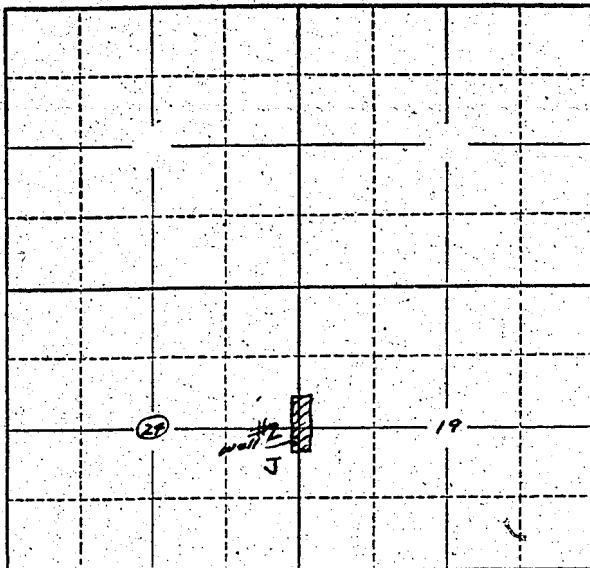
(b) Motor 5 H.P. Elec 3 phase S.E. Motors
(Type and horsepower)

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
195	3W	27	SE/NE	1.4	1948
			NE/SE	.8	"
195	2W	19	SW/NW	1.9	"
"	"	19	NW/SW	.9	"
				<u>5.0</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 17S Range 2E3W, W.M.
North



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

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.

Nellie M. Scott
(Signature of Registrant)

Subscribed and sworn to before me this 1st day of April, 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 16th day of April, 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-1369

Witness my hand this 20th day of October, 1958

Lewis A. Stanley
(State Engineer)

By _____

(Deputy)

GR-1369