

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, WAYNE L. WEEKS (WEEKS BERRY NURSERY)

of 3495 N. River Road 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 Source from which water is withdrawn is Pump Well #1
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 1/2 mile North of Salem City Limits
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) About 2870 Ft. North and 480 ft. west of SE Corner of Section 10
(Give distance and bearing to corner of section or other legal subdivision)

being within SE 1/4 of NE 1/4 of Sec. 10, Twp. 7S., 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 _____
(If within city or town, give name)

3. Construction Work was begun on April 22, 1945; was completed on April 1945
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on May 1945
(Date)

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

from May 1945 to April 1958
(Date) (Date)

4. Quantity of water claimed and used is 175 gallons per minute; _____ acre feet per year while irrigating

5. Purpose or Purposes for which water is used Irrigation and Domestic

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

6. Description of Well: Depth 51 feet. Type Drilled
(Dug or drilled)

diameter 8 inches. Elevation of ground at well site 145 feet, mean sea level.
(As near as known)

Depth to water table 17 feet.

7. Capacity of Well: 180 g.p.m. with 8 feet drawdown.

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

Date of test April 1945

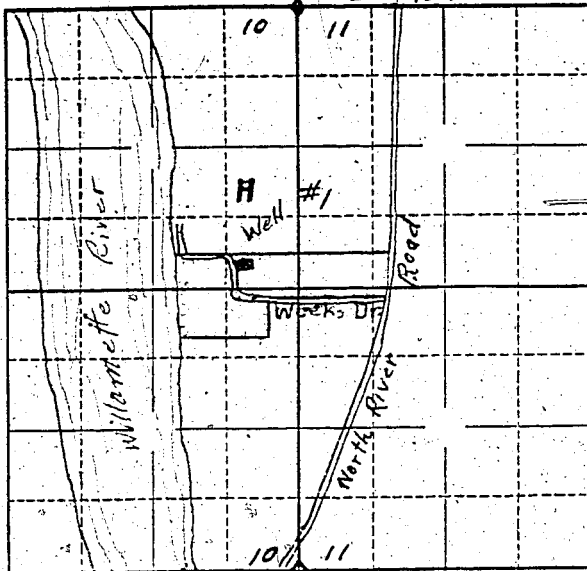
If Flowing Well: Measured discharge _____ g.p.m. on _____
(Date)

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

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

Township 7 S. Range 3 W. W.M.

3 North 2 To Keizer



Locate well and acreage of irrigated land on plat.

Scale: 2" = 1 Mile

STATE OF OREGON

County of Marion

ss.

I, Wayne L. Weeks 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.

Wayne L. Weeks
(Signature of Registrant)

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

My commission expires 12th June 1961

Wm. S. Washburn
(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 13th day of May, 1958, at 4:30 o'clock P. M. and has been duly recorded in said office in Book No. 7 of Registration Statements on page GR-1507

Witness my hand this 1st day of December, 1958

Henry A. Little
(State Engineer)

By

(Deputy)

GR-1507

4,500