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STATE ENGINEER
SALEM, OREGON

Registration No. GR. 1863

Certificate No. GR. 3845

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Wm. Alfred O'gard and Frances M. Ekstrom
of Box 109, Durham County of Multnomah
(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 Source from which water is withdrawn is Pump Well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: 1/2 mile west of Durham, Oregon
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows: 2000 feet west and 1000 feet north from SE Corner S&S

(a) Lot 10 About center next to 195th Street
(Give distance and bearing to corner of section or other legal subdivision)

being within SW 1/4 of SE 1/4 of Sec. 5, Twp. 15, Rge. 3 E
(Smallest legal subdivision) (N. or S.) (E. or W.)

or (b) within limits of recorded platted property, town or city:

in Lot 10, Block 1 of Dance
(Name of plat or addition)

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

3. Construction Work was begun on 8/53; was completed on 8/53
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 8/53
(Date)

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

from 8/53 to Present
(Date) (Date)

4. Quantity of water claimed and used is 150-300 gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used _____

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

6. Description of Well: Depth 190 feet. Type Drilled
(Dug or drilled)

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

Depth to water table 50 feet.

7. Capacity of Well: 750 g.p.m. with 100 feet drawdown.

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

Date of test 8/53

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.)

10 inch diameter from 0 to 490 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
	from	to

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

[illegible]

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

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 4" Johnson Deep Well Pump Capacity 750 g.p.m.
(Make, type and size)

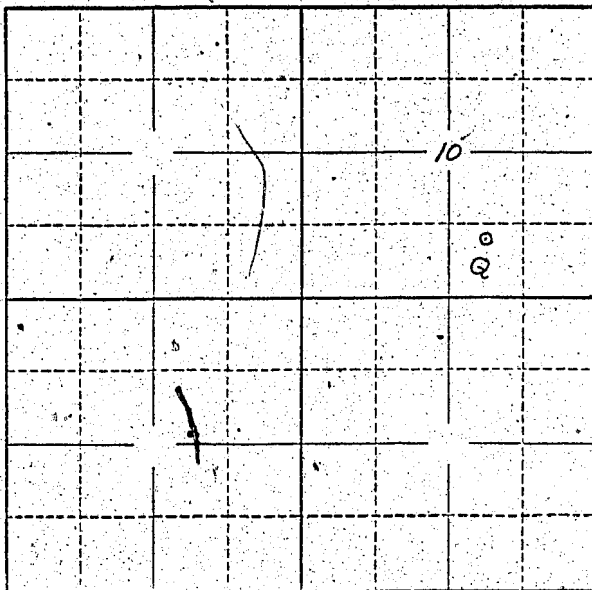
(b) Motor 25 HP Electric
(Type and horsepower)

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

[illegible]

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 1S Range 3E W.M.
North



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

STATE OF OREGON

County of Multnomah 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.

X R O Ekstrom
(Signature of Registrant)

Subscribed and sworn to before me this 27 day of June, 1959

My commission expires Oct 27 1959 [Signature]
(Notary Public)

(SEAL)

CERTIFICATE OF REGISTRATION

STATE OF OREGON } ss.
County of Marion

This is to certify that the foregoing Registration Statement was received in the office of the State Engineer on the 30th day of June, 1959, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 16 of Registration Statements on page GR-3845

Witness my hand this 28th day of December, 19 59

[Signature]
(State Engineer)

By _____
(Deputy)

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