

# Registration Statement

## OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Martha Jane Percy (H.L. Percy Nursery Co.)  
of Route 2 Box 97 - Salem 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 Source from which water is withdrawn is Pump well #1  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: 7 miles northwest of Salem  
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows: 2100' W & 2000' N from SE Corner Section 21

(a) 730 Ft. southeast of center of Sec. 21  
(Give distance and bearing to corner of section or other legal subdivision)

being within NW 1/4 of SE 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 \_\_\_\_\_  
(If within city or town, give name)

3. Construction Work was begun on 1948; was completed on 1948  
(Date) (Date)

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

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

from June 1 to Sept 1  
(Date) (Date)

4. Quantity of water claimed and used is 384 gallons per minute; 23 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 27 feet. Type Drilled  
(Dug or drilled)

diameter 10.8 inches. Elevation of ground at well site 160 feet, mean sea level.  
(As near as known)

Depth to water table 10 feet.

7. Capacity of Well: 400 g.p.m. with 2 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.)

10 inch diameter Cast iron 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: 18' suction pipe

9. Perforated Casings or Screens:

Perforation Torch - 10 ft. from to  
(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)
Soil	10'	
Coarse gravel - water bearing	2'	
Top soil	2'	
Silt	10'	
Gravel formation	15'	

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:

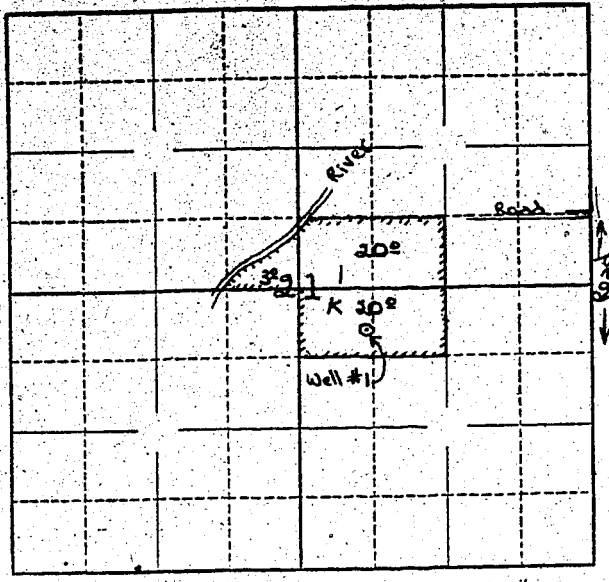
(a) Pump Gould centrifugal 15 h.p. 3x4 Capacity 400 g.p.m.  
(Make, type and size)  
(b) Motor Closed 15 h.p.  
(Type and horsepower)

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
6S	3W	21	SE 1/4 of NW 1/4	3 <sup>0</sup>	1948
..	..	..	SW 1/4 of NE 1/4	20 <sup>0</sup>	1948
..	..	..	NW 1/4 of SE 1/4	20 <sup>0</sup>	1948
				43 <sup>0</sup> Total	

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 6S Range 36 W.M.  
North



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

STATE OF OREGON }  
County of Marion } ss.

I, Martha Jane Percy, 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.

Martha Jane Percy  
(Signature of Registrant)

Subscribed and sworn to before me this 20 day of July, 1958

My commission expires Oct. 16, 1959

Walter H. Givens  
(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 27th day of July, 1958, at 11:00 o'clock A. M. and has been duly recorded in said office in Book No. 8 of Registration Statements on page GR 1846

Witness my hand this 26th day of January, 1959

Lewis A. Stanley  
(State Engineer)

1/16-95

By \_\_\_\_\_ (Deputy)