

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, LESLIE EPPERS
of AURORA Rte 1 Box 273 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 Source from which water is withdrawn is Pump - WELL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: Three miles southwest of Aurora
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 450' N. & 100' W from SE Corner John Grim D.L.C. 49
(Give distance and bearing to corner of section or other legal subdivision)
being within NW 1/4 SE 1/4 of Sec. 22, Twp. 4, Rge. 1 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 Marion
(If within city or town, give name)

- 3. Construction Work was begun on Feb. 1952; was completed on March 1952
(Date) (Date)
and the ground water claimed was first used for the purposes set out below on May 1952
(Date)
since which time the water has been used intermittently
(Continuously or Intermittently)
from May 1952 to 1958
(Date) (Date)

4. Quantity of water claimed and used is 400 gallons per minute; _____ 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 145 feet. Type Dug
(Dug or drilled)
meter 12 inches. Elevation of ground at well site _____ feet, mean sea level.
(As near as known)
Depth to water table 60 feet. in Spring

7. Capacity of Well: 700 g.p.m. with 1.10 feet drawdown.
_____ g.p.m. with _____ feet drawdown.

Date of test March 1952

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. Casings: (Give diameter, commercial specifications and depth below ground surface of each casing size.)

12 inch diameter from 0 to 130 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:

..... from to
 (Number per foot and size of perforations, or describe screen)
 zig zag mill knife 24 holes from 115 ft to 117 ft
 22 holes from 118 ft to 123 ft
 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)
surface	0	5
yellow sandy clay	5	21
surface sand (water)	21	23
yellow sandy clay	23	47
blue clay	47	59
gray clay	59	88
black sand (water)	88	108
broken sand and gravel (water)	108	123
blue clay	123	140
coarse gravel some sand (water)	140	145

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

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 Peerless Turbine Capacity 475 g.p.m.
(Make, type and size)

(b) Motor U.S. Three Phase Electric 30 H.P.
(Type and horsepower)

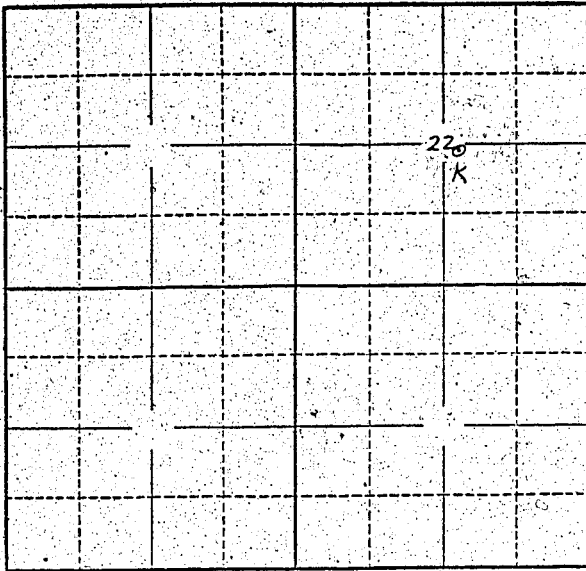
14. Location of area irrigated or to be irrigated, or place of use if for purposes other than irrigation.

Township North or South	Range E. or W. of Willamette Meridian	Section	Forty-acre Tract	Number Acres To Be Irrigated	Date of Reclamation
T. 4 S.	1 W.	22	NE 1/4 SW 1/4	9.5	1952
"	"	"	NW 1/4 SE 1/4	14.6	"
"	"	"	NE 1/4 SE 1/4	2.1	"
"	"	"	SE 1/4 NW 1/4	4.8	"
"	"	"	SW 1/4 NE 1/4	31.2	"
"	"	"	SE 1/4 NE 1/4	7.0	"
"	"	"	NW 1/4 NE 1/4	1.0	"
				Total 70.2	

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.

None

Township 45 Range 1W W.M.
North



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

STATE OF OREGON }
County of Marion } ss.

I, Leslie Eppus, 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.

Leslie Eppus
(Signature of Registrant)

Subscribed and sworn to before me this 9th day of July, 19 58

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 9th day of July, 19 58, at 11:00 o'clock A. M. and has been duly recorded in said office in Book No. 9 of Registration Statements on page GR-1919

Witness my hand this 9th day of February, 19 59

Alvin A. Ottens
(State Engineer)

By _____
(Deputy)

\$ 21.15