

well no. 1

Registration No. GR. 2064

Certificate No. GR. 1986

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Gil Frather
of Independence, R. 1 County of Polk
(Mailing address)

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 Source from which water is withdrawn is Well
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 5 1/2 mi. S.E. Independence
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 39.185 Chains N. 83° 35' W. from the NE corner of Sec. 11
(Give distance and bearing to corner of section or other legal subdivision)

being within S. 1/4 - SE 1/4 of Sec. 11, Twp. 9 S, Rge. 4 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 Polk
(If within city or town, give name)

3. Construction Work was begun on April 1946; was completed on April 1946
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on June 1946
(Date)

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

from June to Aug
(Date) (Date)

4. Quantity of water claimed and used is 500 gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used Supp. watering crops & berries
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 34 feet. Type Aug
(Dug or drilled)

diameter 10" inches. Elevation of ground at well site 1160 feet, mean sea level.
(As near as known)

Depth to water table 12' feet.

7. Capacity of Well: 500 g.p.m. with 1 1/2 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 Valve
(Cap, valve, etc.)

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

10 inch diameter steel casing from 0 to 31 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:

yes - Torch slots from 23 to 31
(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)
sand	0	19
gravel	19	34

If log of well is not available, give name and address of driller: *Bill Hamilton*

and are Albany Ore.

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:

Centrifugal

(a) Pump *Collis Chalmers* *3 1/2* Capacity *500* g.p.m.
(Make, type and size)

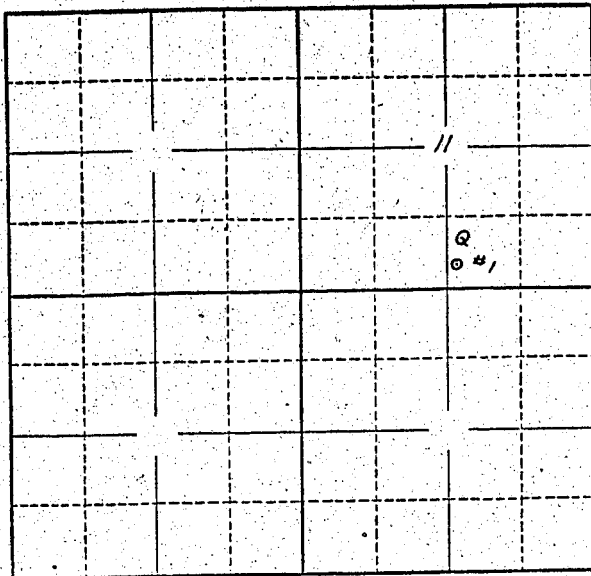
(b) Motor *Electric* *25 H.P.*
(Type and horsepower)

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
<i>T9S</i>	<i>R4W</i>	<i>11</i>	<i>SE 1/4 of SW 1/4</i>	<i>12.4</i>	<i>1946</i>
		<i>11</i>	<i>SW 1/4 of SE 1/4</i>	<i>24.0</i>	<i>"</i>
		<i>14</i>	<i>NE 1/4 of NW 1/4</i>	<i>4.3</i>	<i>"</i>
		<i>14</i>	<i>NW 1/4 of NE 1/4</i>	<i>8.0</i>	<i>"</i>
				<i>49.0</i>	<i>"</i>

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 9S Range 4W W.M.
North



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

STATE OF OREGON

County of Marion

ss.

I, Gail Prather, 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.

Gail Prather
(Signature of Registrant)

Subscribed and sworn to before me this 11th day of July, 1958

My commission expires 12th June 1961

Wm. S. Bartholomais
(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 11th day of July, 1958, at 10:30 o'clock A M. and has been duly recorded in said office in Book No. 9 of Registration Statements on page GR-1986

Witness my hand this 9th day of February, 1959

Robert A. Stanley
(State Engineer)

By _____

(Deputy)

\$ 17.85

GR - 1986