

# Registration Statement

## OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Joe Novian  
of Brooks Rd 1, Boyse 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 Source from which water is withdrawn is pump well  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: 3 miles southeast of Seaside  
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1950 feet south & 1160 feet west from NE corner Section 2  
(Give distance and bearing to corner of section or other legal subdivision)

being within SE 1/4 of NE 1/4 of Sec. 2, Twp. 5S, Rge. 2  
(Smallest legal subdivision) (S. or N.) (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 1947 June; was completed on July 1947  
(Date) (Date)  
and the ground water claimed was first used for the purposes set out below on August 1947  
(Date)  
since which time the water has been used intermittently during season  
(Continuously or intermittently)  
from Aug 1947 to July 1958  
(Date) (Date)

4. Quantity of water claimed and used is 150 gallons per minute; \_\_\_\_\_ acre feet per year.

5. Purpose or Purposes for which water is used

Agriculture & Irrigation  
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 119 feet. Type Drilled  
(Dug or drilled)  
diameter 8 inches. Elevation of ground at well site \_\_\_\_\_ feet, mean sea level.  
(As near as known)

Depth to water table 25 feet.

7. Capacity of Well: 150 g.p.m. with 60 feet drawdown. bailey test  
257 g.p.m. with 90 feet drawdown.

Date of test August 1947

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.)



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

*Mr. Kymore  
Brooks Oregon*

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 *Turbine* *J-OHNSON* *J-3671* *3"* Capacity *150* g.p.m.  
(Make, type and size)  
(b) Motor *7 1/2 HP. Electric*  
(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>Total</i> <i>105</i>	
<i>TBS</i>	<i>R2W</i>	<i>2</i>	<i>NE 1/4 of NE 1/4</i>	<i>20</i>	<i>1948</i>
<i>"</i>	<i>"</i>	<i>2</i>	<i>NW 1/4 of NE 1/4</i>	<i>6</i>	<i>"</i>
<i>"</i>	<i>"</i>	<i>2</i>	<i>SW 1/4 of NE 1/4</i>	<i>28</i>	<i>"</i>
<i>"</i>	<i>"</i>	<i>2</i>	<i>SE 1/4 of NE 1/4</i>	<i>23</i>	<i>"</i>
<i>"</i>	<i>"</i>	<i>2</i>	<i>NW 1/4 of SE 1/4</i>	<i>17</i>	<i>"</i>
<i>"</i>	<i>"</i>	<i>2</i>	<i>NE 1/4 of SE 1/4</i>	<i>11</i>	<i>"</i>
				<i>105</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 5S Range 2W W.M.  
North


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

STATE OF OREGON

County of Marion } ss.

I, Joe Larson, 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.

Joe Larson  
(Signature of Registrant)

Subscribed and sworn to before me this 15<sup>th</sup> day of July, 1958

My commission expires 8-22-61

W. B. Wabersmith  
(Notary Public for Oregon)

(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 15<sup>th</sup> day of July, 1958, at 2:30 o'clock P. M. and has been duly recorded in said office in Book No. 9 of Registration Statements on page GR 2080

Witness my hand this 16<sup>th</sup> day of February, 1959

Laura A. Stoney  
(State Engineer)

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

\$ 25.25