

# Registration Statement

## OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Hilda Schumacher

of Sublimity County of Marion

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 Source from which water is withdrawn is Tiled drainage system

2. Location is: 3/4 Mile N.E. of Sublimity

and is more particularly described as follows: 2040' feet 58°43'E to SE corner of Sec 27

(a) Tiled area embraces the greater part of Sec. 25 & 25 R. 1 W. N. and the North 1/2 of Sec. 27. 5 SR. 1 W. N.  
being within NE 1/4 of SE 1/4 of Sec. 27, Twp. 8 S, Rge. 1 W

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

in Lot \_\_\_\_\_, Block \_\_\_\_\_ of \_\_\_\_\_

County of \_\_\_\_\_ at various times prior to 1953.

3. Construction Work was begun on \_\_\_\_\_; was completed on 1953

and the ground water claimed was first used for the purposes set out below on Aug. 1953

since which time the water has been used Intermittently

from 1953 to 1958

4. Quantity of water claimed and used is 60 to 100 Measured June-July 1958 gallons per minute; \_\_\_\_\_ acre feet per year.

5. Purpose or Purposes for which water is used Irrigation

6. Description of Well: Depth Clay tile underground drainage system. feet. Type \_\_\_\_\_

diameter \_\_\_\_\_ inches. Elevation of ground at well site 500 feet, mean-sea level.

Depth to water table \_\_\_\_\_ feet.

7. Capacity of Well: Variable Minimum 300 GPM g.p.m. with \_\_\_\_\_ feet drawdown.

\_\_\_\_\_ g.p.m. with \_\_\_\_\_ feet drawdown.

Date of test \_\_\_\_\_

If Flowing Well: Measured discharge \_\_\_\_\_ g.p.m. on \_\_\_\_\_

Shut-in pressure at ground surface \_\_\_\_\_ lbs. per sq. in. on \_\_\_\_\_

Water is controlled by \_\_\_\_\_

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

..... inch diameter ..... from ..... to ..... 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)  
 ..... 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)

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

11. Infiltration Trench: Covered or open *See sketch accompanying.*  
Dimensions: Length ..... ft. Minimum depth ..... ft. Maximum depth ..... ft.  
Bottom width ..... ft. Discharge ..... g.p.m. Date of test .....

12. Tunnel: Type of lining *Tile (Clay)*  
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:

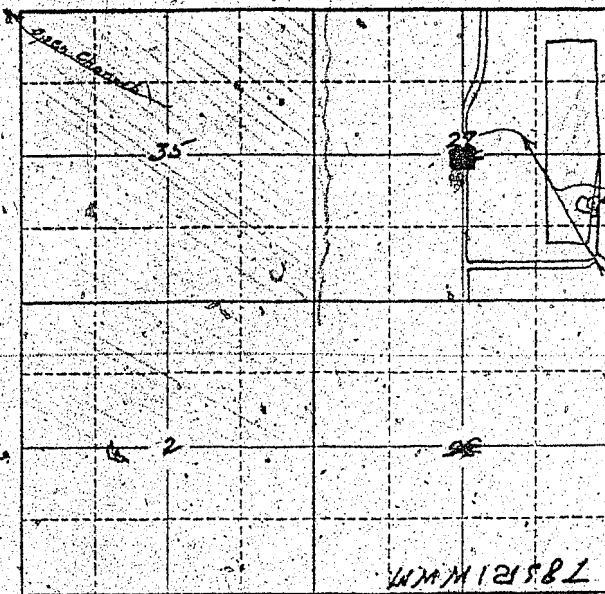
(a) Pump *Total 3", discharge 3" Centrifugal* Capacity *150* g.p.m.  
(Make, size and size)  
(b) Motor *15 H.P. Electric*  
(Type and horsepower)

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

Township North or South	Range E. or W. of Willamette Meridian	Section	Forty-acre Tract	Number Acres To Be Irrigated	Date of Reclamation
8 S	1 W	27	NE <sup>4</sup> /NE <sup>4</sup>	14	1953
"	"	"	SE <sup>4</sup> "	25	"
"	"	"	NE <sup>4</sup> SE <sup>4</sup>	27	"
"	"	"	SE <sup>4</sup> SE <sup>4</sup>	9	"
				<u>70.0</u>	

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 85 Range 1W, W.M.  
& North



Locate well and acreage of irrigated land on plat.

Scale: 2" = 1 Mile

**LEGEND**

Approximate area that is  
to be drained



STATE OF OREGON

County of Marion

I, [Signature], 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.

(Signature of Registrant)

Subscribed and sworn to before me this 16 day of February, 1959.

My commission expires 12-16-64

(Notary Public)

(SEAL)

**CERTIFICATE OF REGISTRATION**

STATE OF OREGON

County of Marion

This is to certify that the foregoing Registration Statement was received in the office of the State Engineer on the 21st day of July, 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 OR-3939

Witness my hand this 15th day of February, 1960

(State Engineer)

By

(Revisor)

OR-3939