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STATE ENGINEER
SALEM OREGON

Registration No. GR 2490

Certificate No. GR 4005

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, JOHN MITSCH
of R 2 BOX 34 AURORA County of CLACKAMAS
(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 Source from which water is withdrawn is PUMP WELL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: 1/4 MILE EAST OF AURORA
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) APPROXIMATELY 192 1/2 FT East and 93 1/2 FT South of NW CORNER OF 10 A TRACT
(Give distance and bearing to corner of section or other legal subdivision)

being within NW 1/4 NE 1/4 of Sec. 18, Twp. 4 S, Rge. 1 E
(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)

WELL DRILLED BEFORE PURCHASED PLACE - UNDERSTAND HOUSE

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

WAS CONSTRUCTED IN 1927

and the ground water claimed was first used for the purposes set out below on SPRING 1947 WHEN
(Date)

WE MOVED ON PLACE

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

from SPRING 1947 to MAR 1 - 1960
(Date) (Date)

4. Quantity of water claimed and used is 1.2 gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used NURSERY STOCK, GARDEN

& YARD
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 62 feet. Type DRILLED
(Dug or drilled)

CASING diameter 40 inches. Elevation of ground at well site _____ feet, mean sea level.
(As near as known)

Depth to water table _____ feet.

7. Capacity of Well: ~~14~~ 14 g.p.m. with 72 feet drawdown.

_____ g.p.m. with _____ feet drawdown.

Date of test NOT TESTED MEASURED WITH EQUIPMENT IN USE

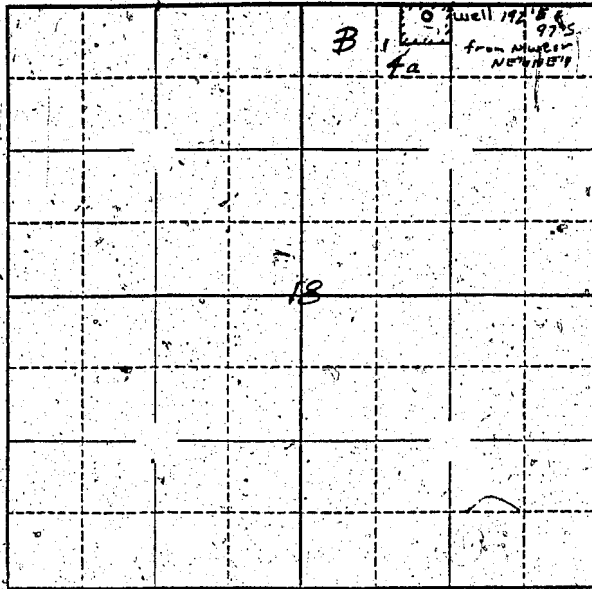
If Flowing Well: Measured discharge _____ g.p.m. on _____
(Date)

Shut-in pressure at ground surface _____ lbs. per sq. in. on _____
(Date)

Water is controlled by _____
(Cap, valve, etc.)

Township 4S Range 1E W.M.

North



Locate well and acreage of irrigated land on plat.

Scale: $\frac{1}{4}$ " = 1 Mile

STATE OF OREGON

County of Marion } ss.

I, John Mitch, 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.

John Mitch
(Signature of Registrant)

Subscribed and sworn to before me this 22nd day of July, 1958.

My commission expires 9/27/58

Jeanie B. Bester
(Notary Public)

(SEAL)

CERTIFICATE OF REGISTRATION

STATE OF OREGON } ss.
County of Marion

This is to certify that the foregoing Registration Statement was received in the office of the State Engineer on the 22nd day of July, 1958, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 16 of Registration Statements on page 61-4005.

Witness my hand this 15th day of March, 1960

Lawrence A. Dittler
(State Engineer)

By _____ (Deputy)

GR. 4005

#15.00