

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Mrs. M. A. Richmond

of Rt. 3, Box 189, DeMoines County of Polk

(Mailing address)

State of Iowa, 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 Source from which water is withdrawn is pump well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: 2 miles SE of Lebanon, Oregon

(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1188' S. and 1152' E. of NW corner S. 24, T. 12 S., R. 2 W.

(Give distance and bearing to corner of section or other legal subdivision)

being within NE $\frac{1}{4}$ of NW $\frac{1}{4}$ of Sec. 24, Twp. 12 S, Rge. 2 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 Linn

(If within city or town, give name)

3. Construction Work was begun on April 1952; was completed on April 1952

(Date)

(Date)

and the ground water claimed was first used for the purposes set out below on June 1952

(Date)

since which time the water has been used continuously

(Continuously or Intermittently)

from June 1952 to present time

(Date)

(Date)

4. Quantity of water claimed and used is 120 gallons per minute; 33.0 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 19 feet. Type Drilled

(Dug or drilled)

diameter 10 inches. Elevation of ground at well site 350 feet, mean sea level.

(As near as known)

Depth to water table 9 feet.

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

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

Date of test Not tested

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

(Date)

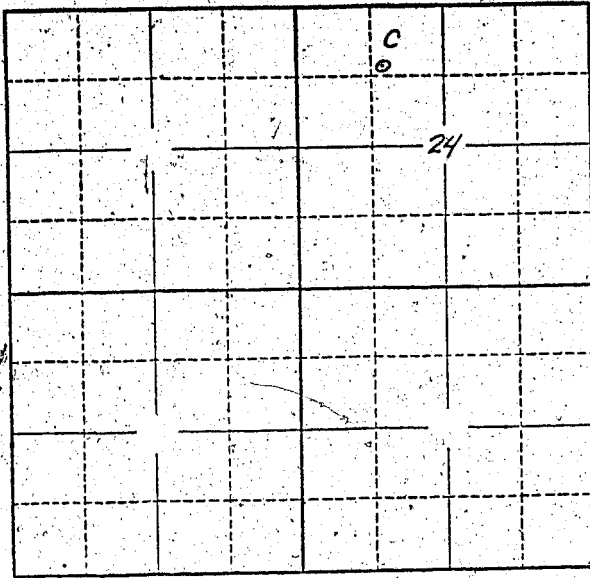
Shut-in pressure at ground surface _____ lbs. per sq. in. on _____

(Date)

Water is controlled by _____

(Cap, valve, etc.)

Township 12 S Range 2 W, W.M.
North



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

IOWA
STATE OF ~~OREGON~~ } ss.
County of Polk

I, Mrs. M. A. Richmond, 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.

Mrs. M. A. Richmond
(Signature of Registrant)

Subscribed and sworn to before me this 21 day of July, 1958

My commission expires July 4, 1960
(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 24 day of July, 1958, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 11 of Registration Statements on page GR 2481

Witness my hand this 6th day of April, 1959
Henry A. Stanley
(State Engineer)

\$15.00

By _____ (Deputy)

GR - 2481