

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Andrew DeConinck Route 1, Box 460
of Woodburn 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 Source from which water is withdrawn is Pump well
(Flowing well, pump well, infiltration trench, or tunnel)
2. Location is: 1/2 miles North of St. Louis Church
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 984 N.E. 1526 E of the SW cor. Gregoire DLC no. 79
(Give distance and bearing to corner of section or other legal subdivision)
being within SE 1/4 of SE 1/4 of Sec. 9, Twp. 55, Rge. 2W
(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 Marion
(If within city or town, give name)

3. Construction Work was begun on 3/20/51; was completed on 4/6/51
(Date) (Date)
and the ground water claimed was first used for the purposes set out below on 5/20/52
(Date)
since which time the water has been used intermittently
(Continuously or intermittently)
from May 29, 1952 to Oct 1, 1957
(Date) (Date)

4. Quantity of water claimed and used is 450 gallons per minute; _____ 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 97 feet. Type drilled
(Dug or drilled)
diameter 12 inches. Elevation of ground at well site 145 feet, mean sea level.
(As near as known)
Depth to water table 12 feet.

7. Capacity of Well: 900 g.p.m. with 52 feet drawdown.
_____ g.p.m. with _____ feet drawdown.

Date of test 4/51

If Flowing Well: Measured discharge No g.p.m. on _____
(Date)

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

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

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

12 inch diameter steel casing from 0 to 97 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:

(Number per foot and size of perforations, or describe screen)

from to
 from to
Unknown 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)
Surface	0	3
gray clay	5	8
sandy clay	8	16
Surface Sandwater	4	20
Yellow sand-clay	48	68
blue clay	5	73
gray clay	6	79
blue clay	9	88
black sand sand and gravel	9	97
Pipe Set		97
static water level		12

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

11. Infiltration Trench: Covered or open None
 Dimensions: Length _____ ft. Minimum depth _____ ft. Maximum depth _____ ft.
 Bottom width _____ ft. Discharge _____ g.p.m. Date of test _____

12. Tunnel: Type of lining None
 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.)

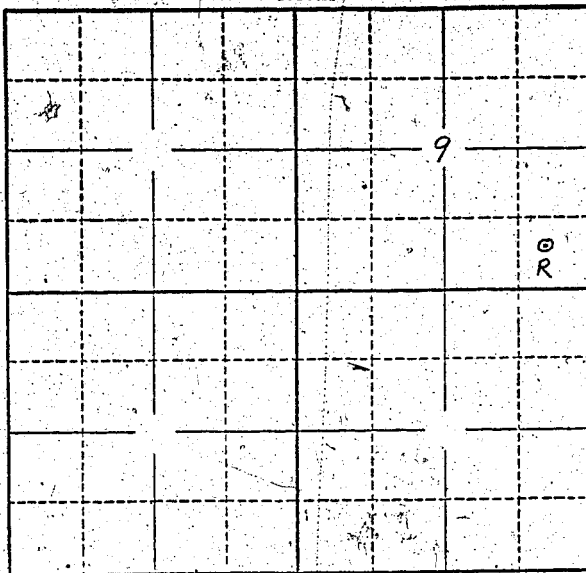
13. Pumping Equipment:
 (a) Pump PEELESS-Turbine Capacity 450 g.p.m.
(Make, type and size)
 (b) Motor 20 H.P. 3 phase
(Type and horsepower)

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 Wisconsin Meridian	Section	Forty-acre Tract	Number Acres To Be Irrigated	Date of Reclamation
T5S	2W	9	SW 1/4 of NE	20	April 1958
"	"	9	NW 1/4 of SE	25 ⁰⁰	May 1952
"	"	9	SW 1/4 of SE 1/4	30 ⁰⁰	" "
"	"	9	SE 1/4 of SE 1/4	40 ⁰⁰	" "
"	"	9	NE 1/4 of SE 1/4	20 ⁰⁰	" "
"	"	10	SW 1/4 of NW 1/4	10 10 ⁰⁰	" "
"	"	10	NW 1/4 of SW 1/4	15 23 ⁰⁰	" "
"	"	10	SW 1/4 of SW 1/4	15 ⁰⁰	" "
"	"	10	SE 1/4 of NW 1/4	8 ⁰⁰	" "
"	"	10	NE 1/4 of SW 1/4	2 ⁰⁰	" "
"	"	15	NW 1/4 of NW 1/4	1 ⁰⁰	" "
"	"	16	NE 1/4 of NE 1/4	5 ⁰⁰	" "
"	"	16	NW 1/4 of NE 1/4	3 ⁰⁰	" "
				<u>182⁰⁰</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 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 Andrew DeConinck, 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.

Andrew DeConinck
(Signature of Registrant)

Subscribed and sworn to before me this 25th day of July, 1958

My commission expires 12th June 1961 Wm. S. Bartholomew
(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 25th day of July, 1958, at 10:15 o'clock A. M. and has been duly recorded in said office in Book No. 11 of Registration Statements on page GR-2526

Witness my hand this 6th day of April, 1959

Lawrence A. Stanley
(State Engineer)

By _____ (Deputy)

#2960