

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, HELEN BELL LARSON

of 555 Buena Vista Ave., San Francisco 17, Calif County of Lane
(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 Source from which water is withdrawn is Pump Well #3
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 1110 River Road, Eugene, Oregon
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 312 ft East & 1116 ft North of SW cor. of Jas. Watson D.C. #17
(Give distance and bearing to corner of section or other legal subdivision)

being within NE 1/4, NE 1/4 of Sec. 3, Twp. 17 S., Rge. 1 W.
(Smallest legal subdivision) (E. or S.) (N. 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)

3. Construction Work was begun on 1952; was completed on 1952
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1952
(Date)

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

from April 1952 to Oct 1952 up to & including Oct 1958
(Date) (Date)

4. Quantity of water claimed and used is 400 gpm at 230' head gallons per minute; 2.3 acre feet per year.

5. Purpose or Purposes for which water is used Irrig. & ~~other~~

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

6. Description of Well: Depth 30 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 15 feet.

7. Capacity of Well: 100 g.p.m. with 80 feet drawdown.

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

Date of test _____

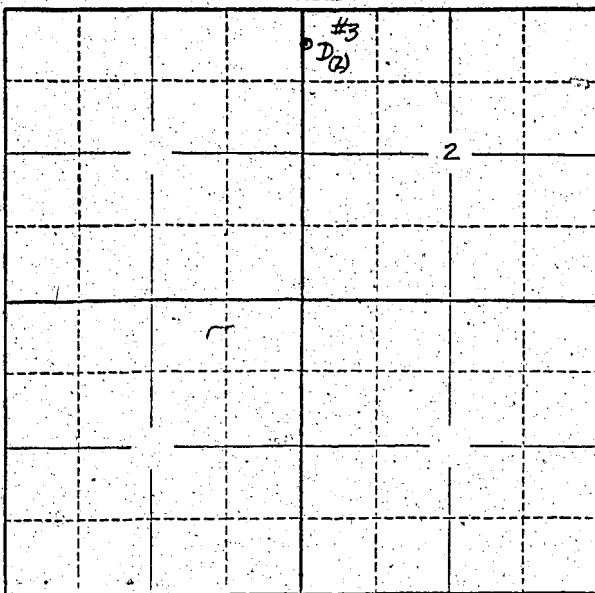
If Flowing Well: Measured discharge _____ g.p.m. on _____
(Date)

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

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

Attached map shows location of 3 wells
Township 17S Range 4W, W.M.

North



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

STATE OF OREGON }
County of _____ } ss.

I, _____, 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 7 day of May, 1959

My commission expires _____ My Commission Expires June 30, 1961
John D. Freeman
(Notary Public)

(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 25th day of July, 1958, at 1:00 o'clock P. M. and has been duly recorded in said office in Book No. 12 of Registration Statements on page GR 2858

Witness my hand this 25th day of May, 1959

Lewis A. Stanley
(State Engineer)

By _____ (Deputy)

~~4.00~~
15.00

GR-2858