

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, WILLIAM H. JOHNSTON
of RT 1 Box 171 ROGUE RIVER County of JACKSON
(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 Source from which water is withdrawn is PUMPING WELL
(Flowing well, pump well, infiltration trench, or tunnel)
2. Location is: TEN MILE NORTH OF ROGUE RIVER
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 2493 feet North a 754 ft. West of the S.E. corner of Sect. 4
(Give distance and bearing to corner of section or other legal subdivision)
being within the NE 1/4 of the SE 1/4 of Sec. 4, Twp. 35 S., Rge. 4 W.
(Smallest legal subdivision) (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 Jackson
(If within city or town, give name)

3. Construction Work was begun on July 1947; was completed on not yet
(Date) (Date)
and the ground water claimed was first used for the purposes set out below on July 15 1949
(Date)
since which time the water has been used Intermittently
(Continuously or intermittently)
from 1949 to 1958
(Date) (Date)

4. Quantity of water claimed and used is 150 gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used Irrigation of field crops, orchard & yard
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 10 feet. Type Dug
(Dug or drilled)
diameter 60 inches. Elevation of ground at well site 1220 feet, mean sea level.
(As near as known)
Depth to water table 8 feet.

7. Capacity of Well: _____ g.p.m. with _____ feet drawdown.
not finished yet
_____ g.p.m. with _____ feet drawdown.

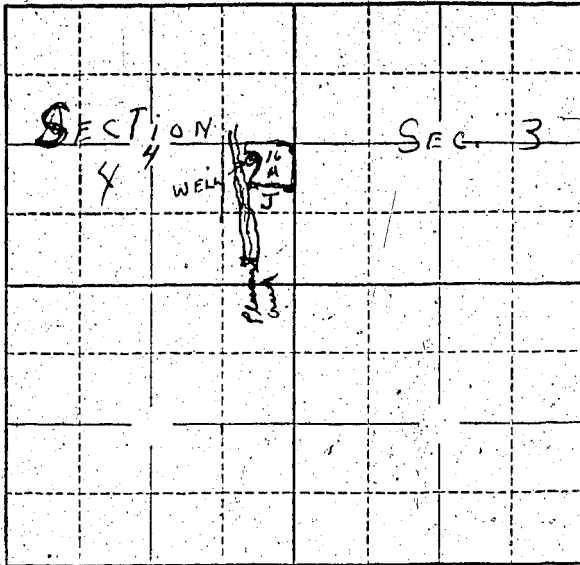
Date of test _____

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.)

Township 35 S Range 4 W W.M.
North



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

STATE OF OREGON

County of Washington } ss.

I, WILLIAM H. JOHNSTON, 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.

William H. Johnston
(Signature of Registrant)

Subscribed and sworn to before me this 26th day of July, 1957

My commission expires My Commission Expires Oct. 23, 1961
(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 23 day of July, 1957, at 8:00 o'clock PM and has been duly recorded in said office in Book No. 11 of Registration Statements on page GR-2591

Witness my hand this 6th day of April, 1959

By _____
(Deputy)

#1500

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