

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Sigurd Nielsen, 1596 Oaklea Dr
of Junction City 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 Source from which water is withdrawn is Pump Well
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 1 MILE West - 1 mile north of Junction City
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 2420 ft west, thence 1630 ft south from N.E. cor Sec 30
(Give distance and bearing to corner of section or other legal subdivision)

being within West 1/4 of NE 1/4 of Sec. 30, Twp. 15 S, Rge. 4 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 _____
(If within city or town, give name)

3. Construction Work was begun on 1945; was completed on 1945
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on May 1945
(Date)

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

from May or June to Oct
(Date) (Date)

4. Quantity of water claimed and used is 400 gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used Irrigating Crops.

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

6. Description of Well: Depth 21 feet. Type Drive 21
(Dug or drilled)

diameter 4 inches. Elevation of ground at well site _____ feet, mean sea level.
(As near as known)

Depth to water table 7 feet.

7. Capacity of Well: 400 g.p.m. with _____ feet drawdown.

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

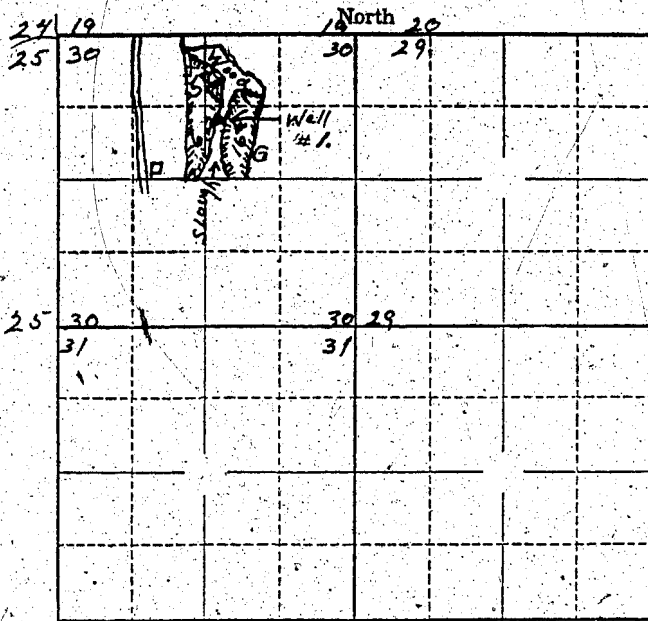
Date of test _____

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.)

Township 15 S Range 4 W, W.M.



Locate well and acreage of irrigated land on plat.

Scale: 2" = 1 Mile

STATE OF OREGON

County of L.A.N.E

ss.

I, Sigurd Nielsen, 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.

Sigurd Nielsen
(Signature of Registrant)

Subscribed and sworn to before me this 28th day of July, 1958

My commission expires COMMISSION EXPIRES NOVEMBER 18, 1958

Christen S. Helle
(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 29th day of July, 1958, at 8:00 o'clock A.M. and has been duly recorded in said office in Book No. 12 of Registration Statements on page GR-2840

Witness my hand this 25th day of May, 1959

Lawrence A. Stanley
(State Engineer)

By _____
(Deputy)

#16-25