

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Kirk Bros.

of Star Rt. Box 63 County of Wasco
(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 Source from which water is withdrawn is pump well #1
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 1/2 mile north of St. Paul
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 910 feet west & 2050 feet North from S.E. corner Section 18
(Give distance and bearing to corner of section or other legal subdivision)

being within NE 1/4 of SE 1/4 of Sec. 18, Twp. 4 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 _____
(If within city or town, give name)

3. Construction Work was begun on Oct 15 1954, was completed on Nov 20 1954
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on April 12 1955
(Date)

since which time the water has been used for growing of crops continuously
(Continuously or intermittently)
from 1955 to Oct 1957
(Date) (Date)

4. Quantity of water claimed and used is 400 gallons per minute; 200 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 130 feet. Type drilled
(Dug or drilled)

diameter 10 inches. Elevation of ground at well site 150 feet, mean sea level.
(As near as known)

Depth to water table 18 feet.

7. Capacity of Well: 450 g.p.m. with 60 feet drawdown.

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

Date of test Nov 20 1954

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.)

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

*J. T. Miller
Astoria Oregon*

11. Infiltration Trench: Covered or open

Dimensions: Length ft. Minimum depth ft. Maximum depth ft.

Bottom width ft. Discharge g.p.m. Date of test

12. Tunnel: Type of lining

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 *Jacuzzi Turbine* Capacity *400* g.p.m.
(Make, type and size)

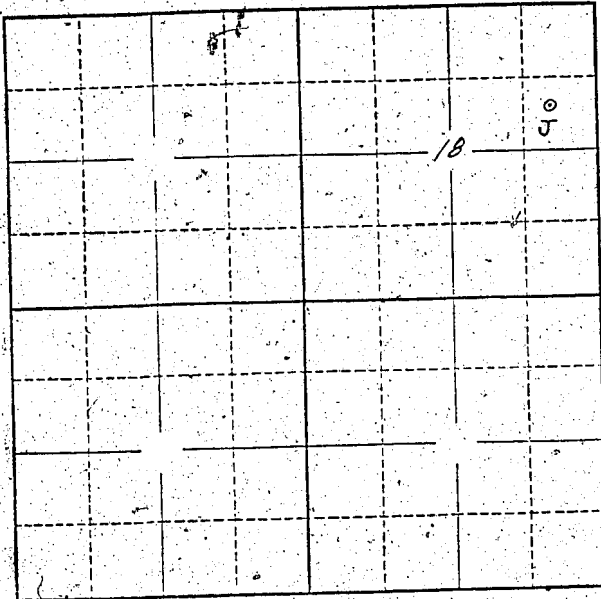
(b) Motor *20 H.P. Electric*
(Type and horsepower)

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 Willamette Meridian | Section | Forty-acre Tract | Number Acres To Be Irrigated | Date of Reclamation |
|-------------------------|---------------------------------------|-----------|-------------------------|------------------------------|---------------------|
| <i>T4S</i> | <i>W2W</i> | <i>18</i> | <i>SE 1/4 of NE 1/4</i> | <i>10</i> | <i>1954</i> |
| " | " | " | <i>SW 1/4 of NE 1/4</i> | <i>13</i> | " |
| " | " | " | <i>NE 1/4 of SW 1/4</i> | <i>6</i> | " |
| " | " | " | <i>SE 1/4 of SW 1/4</i> | <i>13</i> | " |
| " | " | " | <i>NW 1/4 of SE 1/4</i> | <i>38</i> | " |
| " | " | " | <i>NE 1/4 of SE 1/4</i> | <i>38</i> | " |
| " | " | " | <i>SW 1/4 of SE 1/4</i> | <i>37</i> | " |
| " | " | " | <i>SE 1/4 of SE 1/4</i> | <i>40</i> | " |
| " | W2W | <i>19</i> | <i>NE 1/4 of NE 1/4</i> | <i>4</i> | " |
| " | " | " | <i>NE 1/4 of NE 1/4</i> | <i>2</i> | " |
| " | W2W | <i>17</i> | <i>NW 1/4 of SW 1/4</i> | <i>23</i> | " |
| " | " | " | <i>NE 1/4 of SW 1/4</i> | <i>21</i> | " |
| " | " | <i>16</i> | <i>SW 1/4 of SW 1/4</i> | <i>16</i> | " |
| " | " | " | <i>SE 1/4 of SW 1/4</i> | <i>11</i> | " |
| " | " | | | <i>252</i> | |

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 45 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, Peter M. Kirk, 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.

Peter M. Kirk
(Signature of Registrant)

Subscribed and sworn to before me this 31st day of July, 1958

My commission expires 12th June 1961

Wm S. Bartholomew
(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 31st day of July, 1958, at 9⁰⁰ o'clock A. M. and has been duly recorded in said office in Book No. 13 of Registration Statements on page GR-3061

Witness my hand this 8th day of June, 1959

Henry A. Stanley
(State Engineer)

By _____ (Deputy)

\$ 33.00