

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, CHESTER A. MYERS

of Jefferson County of Marion
(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 Source from which water is withdrawn is Pump well No. 2
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: ~~1/2 mile North of South 1/4 corner of Section 30~~
1/2 mile North of South 1/4 corner of Section 30
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 14.6 chains East and 14.1 chains North from South 1/4 corner of Section 30
(Give distance and bearing to corner of section or other legal subdivision)
being within SW 1/4 of SE 1/4 of Sec. 30, Twp. 9 S, Rge. 3 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 1946; was completed on 4-1-46
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 4-1-46
(Date)

since which time the water has been used Continuously
(Continuously or intermittently)
from 1946 to 1958
(Date) (Date)

4. Quantity of water claimed and used is 240 gallons per minute; 3 acre feet per year. per acre

5. Purpose or Purposes for which water is used Irrigation

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

6. Description of Well: Depth 29 feet. Type drilled
(Dug or drilled)

diameter 10 inches. Elevation of ground at well site 190 feet, mean sea level.
(As near as known)

Depth to water table 13 feet.

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

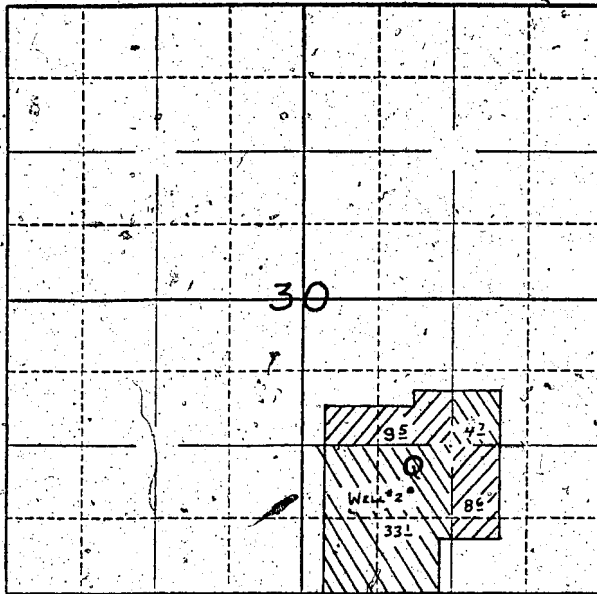
Date of test _____

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 9 S Range 3 W, W.M.
North



Locate well and acreage of irrigated land on plat.

Scale: $\frac{1}{4}$ " = 1 Mile

4"

STATE OF OREGON

County of Marion

ss.

I, Chester A. Myers, 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.

Chester A. Myers
(Signature of Registrant)

Subscribed and sworn to before me this 30 day of July, 19 58

My commission expires 12-19-58

[Signature]
(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 31 day of July, 19 58, at 10:30 o'clock A. M. and has been duly recorded in said office in Book No. 16 of Registration Statements on page GR 3795.

Witness my hand this 20th day of November, 19 59

Laura A. Stanley
(State Engineer)

By

(Deputy)

GR 3795

18/90