

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, HENRY KROH BOEGEL

of RT 5 Box 469 SALEM County of MARION
(Mailing address)

State of ORE 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 Source from which water is withdrawn is PUMP WELL #1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 MILE WEST OF TOWN OF MCGLEAY
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 25 CH3N; 12 CH3E FROM SOUTHERLY SY COR WALDEN DAC 50
(Give distance and bearing to corner of section or other legal subdivision)

being within 1 SE 1/4 of Sec. 3, Twp. 8 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 8, Block CHURCHILL WALNUT GRAVES SODIK #1
(Name of plat or addition)

County of MARION
(If within city or town, give name)

3. Construction Work was begun on 1950; was completed on 1950
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1951
(Date)

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

from 1951 to Oct 1957
(Date) (Date)

4. Quantity of water claimed and used is 4.8 gallons per minute; _____ 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 118 feet. Type DRILLED
(Dug or drilled)

diameter 12 inches. Elevation of ground at well site _____ feet, mean sea level.

Depth to water table 35 feet.
(As near as known)

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

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

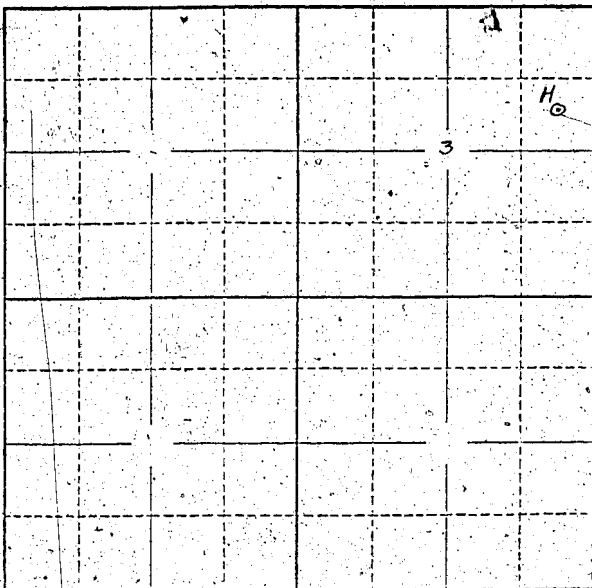
Date of test NO TEST

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 8S 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, Henry Krumbholz, 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.

Henry Krumbholz
(Signature of Registrant)

Subscribed and sworn to before me this 28th day of July, 1959

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 27th day of July, 1959, at 5.45 o'clock P. M. and has been duly recorded in said office in Book No. 13 of Registration Statements on page GR 3082

Witness my hand this 16th day of June, 1959

Lewis A. Stanley
(State Engineer)

By _____
(Deputy)

GR - 3082