

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, WILLIAM W. FOLEY
of R. 1, Box 325 CENTRAL POINT 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 Source from which water is withdrawn is SWAMP
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 1 1/2 MILES SOUTH OF GOLD HILL GRE
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) SE 4 of NE 1/4
(Give distance and bearing to corner of section or other legal subdivision)

being within SE 4 of NE 1/4 of Sec. 27, Twp. 36S, Rge. 3W
(Smallest legal subdivision) or S. 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 Aug 10, 1953; was completed on Aug 12, 1953
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on Aug 20, 1953
(Date)

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

from Aug 20, 1953 to JUNE 1958
(Date) (Date)

4. Quantity of water claimed and used is 120 gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used IRRIGATION

~~DOMESTIC IRRIGATION~~
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 12 feet. Type Dug SWAMP
(Dug or drilled)

WIDTH diameter 16 X 18 inches. Elevation of ground at well site 1300 feet, mean sea level.
(As near as known)

Depth to water table 6 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 _____
(C&S, valve, etc.)

8. **Casing:** (Give diameter, commercial specifications and depth below ground surface of each casing size.)

..... inch diameter from to feet
..... inch diameter from to feet
..... inch diameter from to feet
..... inch diameter from to feet

Describe and show depth of shoe, plug, adapter, liner or other details:

.....
.....

9. **Perforated Casings or Screens:**

(Number per foot and size of perforations, or describe screen) from to
..... from to
..... from to
..... from to

10. **Log of Well:** (Describe each stratum or formation clearly, indicate if water bearing, and give thickness and depth as indicated.)

MATERIAL	Thickness (Feet)	Depth to Bottom (Feet)

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

11. Infiltration Trench: Covered or open CAPEN.....

Dimensions: Length 75 ft. Minimum depth 10 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 BERKELEY 6 H.P. CENT Capacity 100 GALS g.p.m.
(Make, type and size)

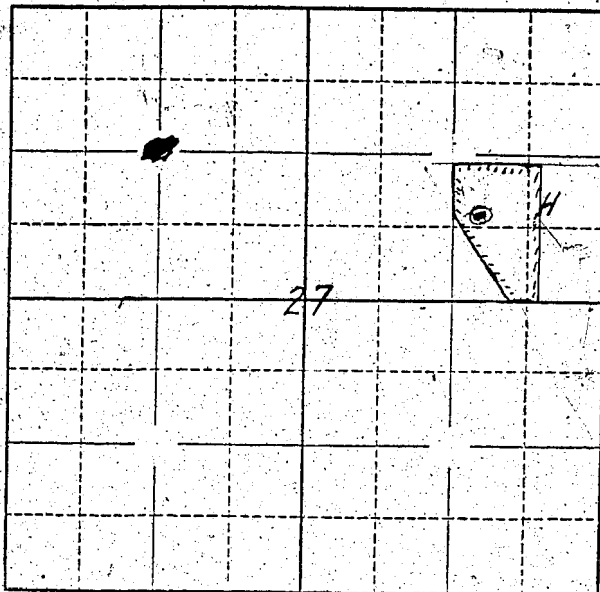
(b) Motor WISCONSIN AIR COOLED 6 H.P.
(Type and horsepower)

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
3LS	3W	27	004/104	16 ACRES	

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 36 S. Range 3 W., W.M.
North



Locate well and acreage of irrigated land on plat.

Scale: 2" = 1 Mile

STATE OF OREGON

County of Jackson

4' } ss.

I, William M. Foley, 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 M. Foley
(Signature of Registrant)

Subscribed and sworn to before me this 30th day of July, 1958

My commission expires July 16, 1959

L. Gale S. Cousins
(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, 1958, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 13 of Registration Statements on page GR-3128

Witness my hand this 16th day of June, 1959

Lewis A. Stanley
(State Engineer)

4/5.00

By _____ (Deputy)