

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, MARION W. WILSON

of Rt. 4, Box 597, ALBANY County of Linn

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 Source from which water is withdrawn is PUMP WELL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 1/2 MILES N.E. ALBANY, ORE.
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1.387' N. AND 40.91' E. OF S.W. CORNER 4 E. S. 31 T. 10 S. R. 3 E.
(Give distance and bearing to corner of section or other legal subdivision)

being within N.E. 1/4 S.E. 1/4 of Sec. 31, Twp. 10 S. Rge. 3 E.
(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 Linn
(If within city or town, give name)

3. Construction Work was begun on 1953; was completed on 1953
(Date) (Date)

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

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

from MAY 1955 to PRESENT TIME
(Date) (Date)

4. Quantity of water claimed and used is 3.0 gallons per minute; 12.0 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 37 feet. Type DRILLED
(Dug or drilled)

diameter 6 inches. Elevation of ground at well site 200 feet, mean sea level.
(As near as known)

Depth to water table 14 feet.

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

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

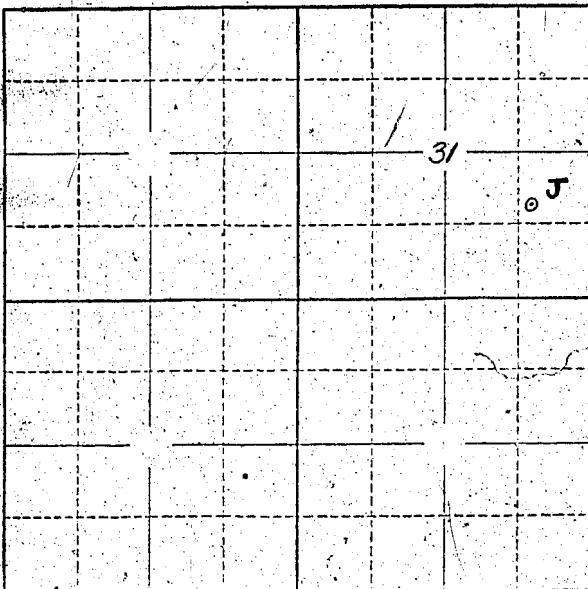
Date of test NOT TESTED

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 10 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 Lincoln

} ss.

I, MARION W. WILSON, 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.

Marion W. Wilson

(Signature of Registrant)

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

My commission expires MY COMMISSION EXPIRES MAY 22, 1962

Robert E. Phillips

(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 21st day of July, 1958, at 1:00 o'clock A. M. and has been duly recorded in said office in Book No. 13 of Registration Statements on page GR 3186

Witness my hand this 20th day of July, 1959

John A. Stanley

(State Engineer)

By

(Deputy)

\$1500

GR - 3186