

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, JANET B. WIED

of Jefferson County of Marion

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 Source from which water is withdrawn is Pump well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: One mile south of Talbot
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1475 ft. West and 700 feet South of north east corner of Govt. lot 1 (NE/NE)
(Give distance and bearing to corner of section or other legal subdivision)
being within Govt. lot two (NW/NE) of Sec. 31, 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 1944; was completed on 1944
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1944
(Date)

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

from 1944 to 1958 inclusive.
(Date) (Date)

4. Quantity of water claimed and used is 450 gallons per minute; 3 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 20 feet. Type Drilled
(Dug or drilled)

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

44 inches 5-30-58
Depth to water table 53 inches feet. 7-20-58
49 inches 7-29-58

7. Capacity of Well: 490 g.p.m. with 7 feet drawdown.

g.p.m. with _____ feet drawdown.

Date of test 7-20-58

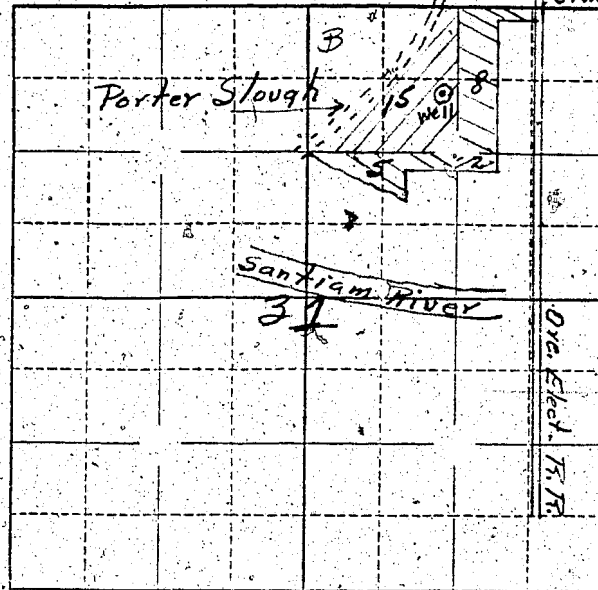
If Flowing Well: Measured discharge _____ g.p.m. on _____
(Date)

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: 2" = 1 Mile
20 ch - 1 inch

STATE OF OREGON

County of Marion

ss.

I, Janet E. Wied, 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.

Janet E. Wied
(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 14 day of July, 19 58, at 1:00 o'clock P.M. and has been duly recorded in said office in Book No. 14 of Registration Statements on page GR-3312

Witness my hand this 20 day of July, 19 58

[Signature]
(State Engineer)

By

(Deputy)

GR 3312

15.00