

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Adella Daniels Paul
of Route 4, Box 354-A, Medford, 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 Source from which water is withdrawn is Sump and Biling
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 4 miles Southwest of Medford, Oregon
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 70 feet North and 1110 feet East from the SW corner of Section 35
(Give distance and bearing to corner of section or other legal subdivision)

being within S. 35 of Sec. 35, Twp. 27 S. Rge. 2 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 Jackson
(If within city or town, give name)

3. Construction Work was begun on 1918; was completed on 1918
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1918
(Date)

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

from 1918 to present
(Date) (Date)

4. Quantity of water claimed and used is 25 gallons per minute; 2 acre feet per year.

5. Purpose or Purposes for which water is used irrigation

Description of Well: Sump Depth _____ feet. Type _____
(Domestic, irrigation, municipal, manufacturing, industrial, etc.) (Dug or drilled)

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

Depth to water table _____ feet.

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

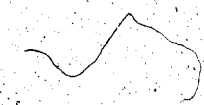
_____ g.p.m. with _____ feet drawdown.

Date of test no test

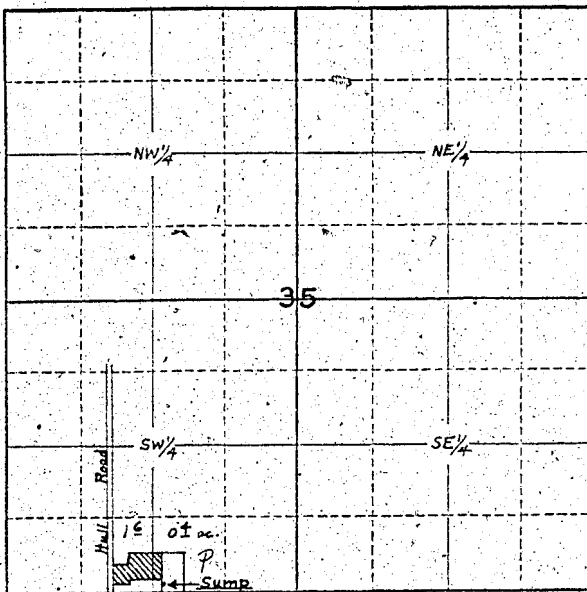
If Flowing Well: Measured discharge _____ g.p.m. on _____
(Date)

Shut-in pressure at ground surface _____ lbs. per sq. in. on _____
(Date)

Water is controlled by _____
(Cap, valve, etc.)



Township 37 S. Range 2 W. W.M.
North



Locate well and acreage of irrigated land on plat.

Scale: 4" = 1 Mile.

STATE OF OREGON

County of Jackson } ss.

I, Adelle Daniels Paul, 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.

(Signature of Registrant)

Subscribed and sworn to before me this 31st day of July, 1959.

My commission expires August 25, 1959.

(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 17th day of August, 1959, at 2 o'clock P.M. and has been duly recorded in said office in Book No. 14 of Registration Statements on page GR 3337

Witness my hand this 20th day of August, 1959

(State Engineer)

By

(Deputy)

GR - 3337

15.00