

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, S. E. Victor

of Rt. 1, Box 312, Albany

(Mailing address)

County of Benton

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 Source from which water is withdrawn is pump well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: 2 1/2 N. of Albany, Oregon
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1683' S and 640' E. of NW corner S. 36, T. 10 S., R. 1 W.
(Give distance and bearing to corner of section or other legal subdivision)

being within SW 1/4 of NW 1/4 of Sec. 36, Twp. 10 S, Rge. 4 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)

(If within city or town, give name)

3. Construction Work was begun on 1947; was completed on 1947
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1947
(Date)

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

from 1947 to present time
(Date) (Date)

4. Quantity of water claimed and used is 20 gallons per minute; 37.5 acre feet per year.

5. Purpose or Purposes for which water is used Irrigation ~~and Domestic~~

(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 265 feet. Type Drilled
(Dug or drilled)

diameter 6" inches. Elevation of ground at well site 230 feet, mean sea level.
(As near as known)

Depth to water table unknown feet.

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

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

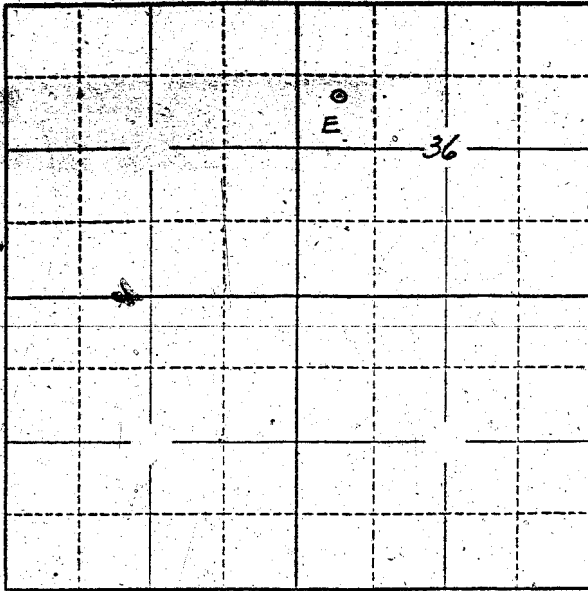
Date of test Not tested

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 1 W W.M.
North



Locate well and acreage of irrigated land on plat.
Scale: 2" = 1 Mile

STATE OF OREGON

County of LINN

} ss.

I, S. E. Victor, 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 31 day of July, 1958

My commission expires MY COMMISSION EXPIRES MAY 22, 1962

(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 1st day of August, 1958, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 14 of Registration Statements on page GR 3454

Witness my hand this 15th day of September, 1959

(State Engineer)

By _____ (Deputy)

\$15.00

GR 3454