

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, H.T. SWODDY

of RFD 1 Box 89 Turner 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 Source from which water is withdrawn is PUMP WELL #1
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 1 MILE SOUTH & EAST OF MARION
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows: 440 feet west & 475 feet north from Center of Section 4

(a) 890' N & 683' W of SE property cor.
(Give distance and bearing to corner of section or other legal subdivision)

being within SE NW of Sec. 4, Twp. 10 S, Rge. 2 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 1953; was completed on 1953
(Date) (Date)

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

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

from 1953 to Aug. 1958
(Date) (Date)

4. Quantity of water claimed and used is 350 gallons per minute; _____ 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 27' 8" feet. Type drilled
(Dug or drilled)

diameter 10 inches. Elevation of ground at well site _____ 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.

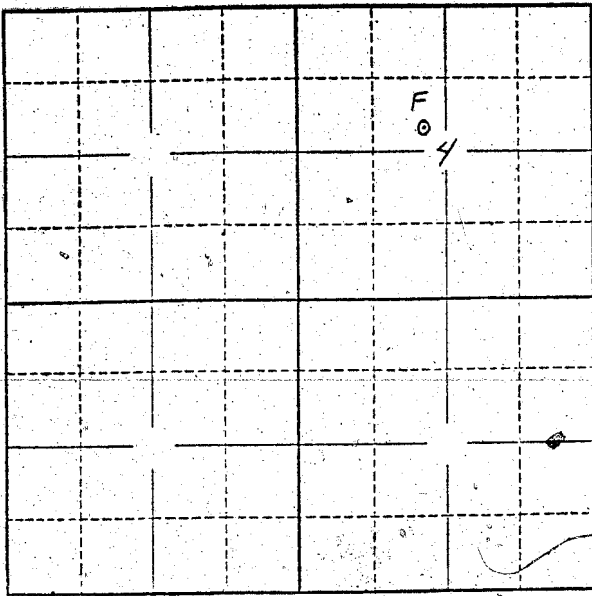
Date of test _____

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 10S Range 2W, W.M.
North



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

STATE OF OREGON }
County of Marion } ss.

I, H.T. Snoddy, 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.

H.T. Snoddy
(Signature of Registrant)

Subscribed and sworn to before me this 1st day of August, 1958

My commission expires 12th June 1961 Wm. S. Bartholomew
(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 4:30 o'clock P. M. and has been duly recorded in said office in Book No. 14 of Registration Statements on page GR-3477

Witness my hand this 15th day of September, 1959
Laura A. Stanley
(State Engineer)

\$15.00

By _____
(Deputy)