Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

불발하다는 그 사람은 경험 등을 하는 것이 하는 것이 없는 것이 없는 것이다.
TO THE STATE ENGINEER OF OREGON:
1 tack of transfa & Slusarenko
of At 2 Box 364 Milton - Freewater Country of 4 ms tills
(Mailing address) State of Orcy ON, 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 Source from which water is withdrawn is Dut by Well, pump well, infiltration trench, or tunnel)
2. Location is: 2 1/d Miles N W of Milton - Free an ster
and is more particularly described as follows:
(a) 60 N + 650 F 64 Ciutu 0 + Stc 34 (Give distance and bearing to corner of section of other legal subdivision)
being within SW 4 of SW 4 of NE4 of Sec. 34, Twp. 6 N., Rge. 35 E. (Smallest legal subdivision). (R. or S.)
or (b) within limits of recorded platted property, town or city:
in Lot, Block of
County of (If within city or town, give name)
3. Construction Work was begun on Prior to 1920; was completed on Prior to 192 (Date)
and the ground water claimed was first used for the purposes set out below on
since which time the water has been used Co 4 + 1 h 4 o 4 s (Continuously or Intermittently)
from Prior 1910 to 1958 (Date)
4. Quantity of water claimed and used is 200 gallons per minute; 40 acre
5. Purpose or Purposes for which water is used What Attended Transport for the property of the
3. Impose of 1 imposes for which water is used
(Domestic, irrigation, municipal, manufacturing, industrial, etc.) 6. Description of Well: Depth 46 feet. Type 04 (Dug or defiled)
diameter 72 inches. Elevation of ground at well site 63 (As near as known) feet, mean sea level
Depth to water table 2.0 feet.
7. Capacity of Well: g.p.m. withfeet drawdown.
g.p.m. withfeet drawdown.
한다 마음 문화를 하는데 보다 사람이 많은 사람들을 하고 말하다 그 아래를 모든다면 했다.
Date of test
If Flowing Well: Measured discharge g.p.m. on (Date)
Shut-in pressure at ground surfacelbs. per sq. in. on
Water is controlled by

8. Casing: (Give diameter, commerce	ial specifications	and depth below	ground surface	of each casing
size.)				ـــ ـــ م
72 inch diameter Co	raevite	from	to	/5 feet
inch diameter		from	to	feet
inch diameter		from	to	feet
inch diameter		from	to .	feet
Describe and show depth of shoe, plug, adap	oter, liner or othe	r details:		
9. Perforated Casings or Screens:				
9. Periorated Casings or Screens:				
(Number per foot and size of perforation	ns, or describe screen)	fro	m	. to
		fro	m	. to
	•	fro	m	to
		fro	m	. to
10. Log of Well: (Describe each stra	itum or formatio	n clearly, indicate i	f water bearing	, and give thick-
ness and depth as indicated.)	tormsto	•		
MATERIAI			Thickness (Feet)	Depth to Bottom (Feet)
	•			
			1	
			N. A.	
			1 4 4	
			1 4 1 1 1 1 1	

Dime	ensions: Leng	gth	ft. Minimum depth	ft. Maximun	n depth f
Botte	om width	ft. 1	Discharge g	p.m. Date of test	
12. Tun ı	el: Type of	lining			
Dime	ensions:		(Length, course, an	nd cross sectional size)	·
Posi	ion of water	bearing stra	atum with reference to por		
	\	<u> </u>			
	of tunnel: (P		ble for log of well may be	e used, if desired. Give	footage from port
	ping Equipme				
and the second of the second			2 (15 tr)	day / Capacity	200 gp
(L)	Motor	5 H,	(Make, typ	e andAize)	
	,		(Type and h	10rsepower)	
14. Loca	tion of area	irrigated or	to be irrigated, or place o	of use if for purposes oth	ner than irrigation.
Township North or South	Range E. or W. of Willamette Meridian	Section	Forty-acre Tract	Number Acres To Be Irrigated	Data of Reclamation
6N	35-E	34	SW4 of NE 4	109	Prior 19
	1.				
•	,				
	73				
					<u> </u>
A;					
E .					
F .					
<i>F</i> .					
<i>F</i> .					
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	Township6	N Range	35 £ , W.M.	
		√ North		
<u> </u>				
		10%	6	well hoes
		740		60'N +650'E
		27		Centro- of Sec
	. !			
	Locate well and	acreage of irriga	ted land on plat.	
	*	Scale: 🎢 = 1 Mile	•	
071 mm on onnoor		4"		
STATE OF OREGON		ss.		
County of Itana)		
Ip sach	Cucarentes	, being fi	rst duly sworn, do h	ereby certify that I have
read the foregoing Registra my knowledge and belief.	tion Statement and	that all of the i	tems therein contain	ed are true to the best of
2		y)		
			(Signature of F	egistrant)
Subscribed and sworn	to before me this	S/ day of	Section 1	1055
				2 3 2 42
My commission expires	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	<u> </u>	(Notary Pr	iblie) The Grant of the control of t
(SEAL)				
	CERTIFIC	ATE OF REGIS	IRATION	
STATE OF OREGON				
County of Marion	ss.			
	4 41 - 6 70 -			
				n the office of the State
Engineer on the da	y of	, 19.22.,	ato'clo	k
duly recorded in said office				
Witness my hand this	15 th day of	September .	145 9 £	
Times my many many			Thins II	Attack Sec
\$ 15.00			(State Eng	ineer)
1/3. ⁶⁶		D .,		
		Ву	(Den	1992)

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