

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Geo P. Bielemeier
of mt Angel OR 1.3 of 180 County of Marion
(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 Source from which water is withdrawn is Pump Well
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 3/4 mi. W.W. of mt Angel
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) about 1460 feet North & 410 feet West from SE corner Section 4
(Give distance and bearing to corner of section or other legal subdivision)

being within NE 1/4 of the SE 1/4 of Sec. 4, Twp. 6 S, Rge. R. 1 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 fall 1948; was completed on 1948
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on Spring 1949
(Date)

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

from Spring 1949 to Oct 1957
(Date) (Date)

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

5. Purpose or Purposes for which water is used Irrigation ~~and~~ ~~water~~ (Exempt)

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

6. Description of Well: Depth 175 feet. Type Drilled
(Dug or drilled)

diameter 4 inches. Elevation of ground at well site _____ feet, mean sea level.
(As near as known)

Depth to water table 40 feet.

7. Capacity of Well: 66 g.p.m. with 150 feet drawdown.

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

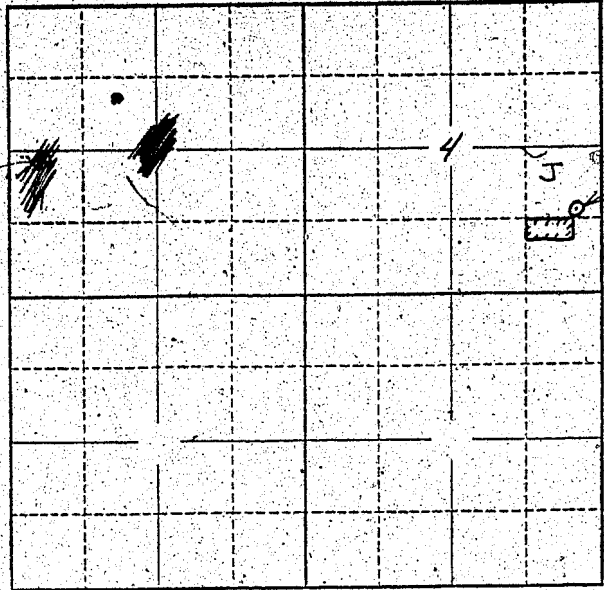
Date of test: 10th, 26th, 29th, 1954

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 6 S Range 1 W W. 1
North



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

STATE OF OREGON }
County of Marion } ss.

I, George P. Biskemier, 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.

George P. Biskemier
(Signature of Registrant)

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

My commission expires June 4 1962 Arthur C. Hancock
(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 4th day of August, 1958, at 9:00 o'clock A. M. and has been duly recorded in said office in Book No. 17 of Registration Statements on page GR 4060.

Witness my hand this 16th day of May, 1960

Leora H. Standley
(State Engineer)

By _____
(Deputy)

\$ 15.00