

# Registration Statement

## OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, ELMER H. Busby

of R. B. Co. to Independence  
(Mailing address)

County of Polk

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 Source from which water is withdrawn is PUMP WELL  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: 1/2 MILES SE of Independence  
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 9.80 CHAINS NORTH QUARTER SEC CORNER E 600 N 120 H  
(Give distance and bearing to corner of section or other legal subdivision)

being within SW 1/4 of NW 1/4 of Sec. 13, Twp. 9 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)

County of \_\_\_\_\_  
(If within city or town, give name)

3. Construction Work was begun on MAY 16 1944; was completed on MAY 11 1944  
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on MAY 13 1944  
(Date)

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

from MAY to SEPT  
(Date) (Date)

4. Quantity of water claimed and used is 25 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 32 feet. Type DRIVEN  
(Dug or drilled)

diameter 2 inches. Elevation of ground at well site \_\_\_\_\_ feet, mean sea level.  
(As near as known)

Depth to water table 20 feet.

7. Capacity of Well: 25 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 VALVE  
(Cap, valve, etc.)

8. Casing: (Give diameter, commercial specifications and depth below ground surface of each casing size.)

2 inch diameter 32 ft To Bottom of Well from to feet  
inch diameter from to feet  
inch diameter from to feet  
inch diameter from to feet

Describe and show depth of shoe, plug, adapter, liner or other details:

9. Perforated Casings or Screens:

PER FT 10 - 3/8 HOLES 4' UP FROM BOTTOM from to  
(Number per foot and size of perforations, or describe screen)  
from to  
from to  
from to

10. Log of Well: (Describe each stratum or formation clearly, indicate if water bearing, and give thickness and depth as indicated.)

MATERIAL	Thickness (Feet)	Depth to Bottom (Feet)
ALLUVIAL SOIL		
GRAVEL	10	32

If log of well is not available, give name and address of driller. *DRILLER BY M. J. [unclear]*

11. **Infiltration Trench:** Covered or open \_\_\_\_\_  
Dimensions: Length \_\_\_\_\_ ft. Minimum depth \_\_\_\_\_ ft. Maximum depth \_\_\_\_\_ ft.  
Bottom width \_\_\_\_\_ ft. Discharge \_\_\_\_\_ g.p.m. Date of test \_\_\_\_\_

12. **Tunnel:** Type of lining \_\_\_\_\_  
Dimensions: \_\_\_\_\_  
(Length, course, and cross sectional size)  
Position of water bearing stratum with reference to portal of tunnel \_\_\_\_\_

Log of tunnel: (Preceding table for log of well may be used, if desired. Give footage from portal and character of materials, as pertinent.)

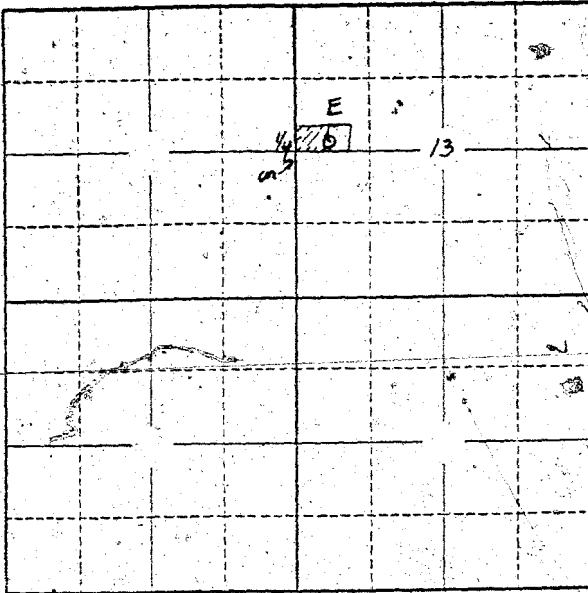
13. **Pumping Equipment:**  
(a) Pump *Gravity Ward* *1 1/2 / 4 1/2" 1/4" Discharge* Capacity *50* g.p.m.  
(Make, type and size)  
(b) Motor *ELECTRIC 2 HP*  
(Type and horsepower)

14. Location of area irrigated or to be irrigated, or place of use if for purposes other than irrigation.

Township North or South	Range E. or W. of Willamette Meridian	Section	Forty-acre Tract	Number Acres To Be Irrigated	Date of Reclamation
<i>T9 S</i>	<i>R4 W</i>	<i>13</i>	<i>SW 1/4 NW 1/4</i>	<i>4 1/2</i>	<i>1944</i>

15. If the ground water supply is supplemental to an existing water supply, identification of any application for a permit, permit, certificate or adjudicated right to appropriate water made or held by the registrant.

Township 9 S Range 4 W W.M.  
North



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

STATE OF OREGON

County of Polk

ss.

I, Alma H. Bessy, 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.

Alma H. Bessy  
(Signature of Registrant)

Subscribed and sworn to before me this 2<sup>nd</sup> day of August, 1958

My commission expires Jan 23 1960  
(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 4 day of August, 1958, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 15 of Registration Statements on page GR-3559

Witness my hand this 15<sup>th</sup> day of September, 1959

Lewis A. Stanley  
(State Engineer)

By \_\_\_\_\_  
(Deputy)

\$15.00

GR 3559