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Registration No. GR - 4049

Certificate No. GR - 3650

Registration Statement

STATE ENGINEER
BALDWIN OREGON

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Mrs. Galina Wynn
of Rt 1 Box 95 Jefferson 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 Source from which water is withdrawn is Pumped well
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 9 mi. N.W. Jefferson
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 3500 N x 100 E from SW Corner Section 18
(Give distance and bearing to corner of section or other legal subdivision)

being within SW 1/4 NW 1/4 of Sec. 18, Twp. 9S, Rge. 3W
(Smallest legal subdivision) (N. or S.) (E. or W.)

or within limits of recorded platted property, town or city:

in Lot _____, Block _____ of _____
(Name of plat or addition)

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

3. Construction Work was begun on 1945; was completed on 1945
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1945
(Date)

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

from May to August
(Date) (Date)

4. Quantity of water claimed and used is 400 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: Drilled & Dug
(Dug or drilled)

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

Depth to water table 10 feet.

7. Capacity of Well: 460 g.p.m. with 6 in. 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.)

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

_____ inch diameter _____ 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:**

_____ 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)

If log of well is not available, give name and address of driller.

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 *Allis Chalmers* Capacity *460* g.p.m.
(Make, type and size)

(b) Motor *20 HP*
(Type and horsepower)

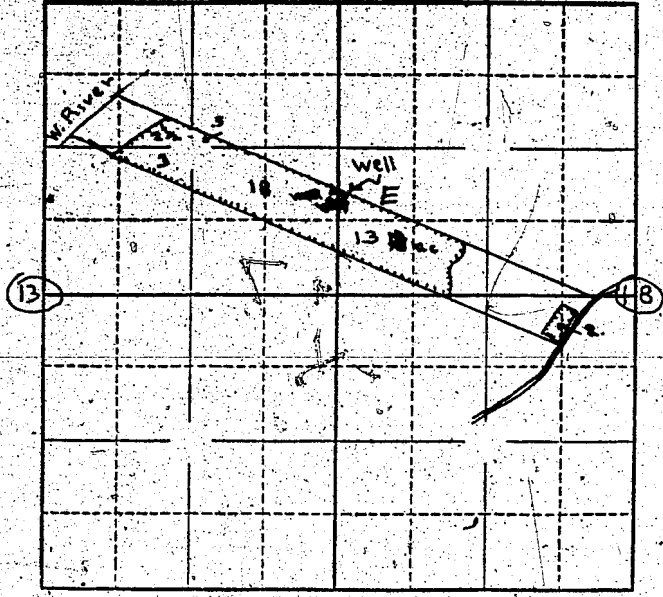
14. Location of area irrigated or to be irrigated, or place of use if for purposes other than irrigation.

Township North or South	Range E. or W. of Williams's Meridian	Section	Forty-acre Tract	Number Acres To Be Irrigated	Date of Reclamation
9S	4W	13	NE $\frac{1}{4}$ NE $\frac{1}{4}$.5	1945
"	"	"	NW $\frac{1}{4}$ NE $\frac{1}{4}$	2.5	"
"	"	"	SW $\frac{1}{4}$ NE $\frac{1}{4}$	3	"
"	"	"	SE $\frac{1}{4}$ NE $\frac{1}{4}$	18	"
9S	3W	18	SW $\frac{1}{4}$ NW $\frac{1}{4}$	13	"
"	"	"	NE $\frac{1}{4}$ SW $\frac{1}{4}$	2	"
				Total 39.0	

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.

W $\frac{1}{2}$ Section 14, T 9 S R 3 W, and E $\frac{1}{2}$ Section 13, T 9 S R 4 W.

Township 9S Range 3W W.M. North



Locate well and acreage of irrigated land on plat.
Scale: $\frac{1}{4}$ " = 1 Mile

STATE OF OREGON }
County of Marion } ss.

I, Mrs. Salva Wynn, 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.

Mrs. Salva Wynn
(Signature of Registrant)

Subscribed and sworn to before me this 25th day of July, 1958

My commission expires July 25, 1960
Clayton A. Shields
(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 8.00 o'clock A. M. and has been duly recorded in said office in Book No. 15 of Registration Statements on page 62-3650

Witness my hand this 20th day of October, 1959

Lewis A. Stanley
(State Engineer)

By _____
(Deputy)

16.35

GR 3650