

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Ernest Kahle
of Rt #1 Box 362 Sherwood County of Clackamas
(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 Source from which water is withdrawn is Pump well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 mi. NORTH OF WILSONVILLE
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) S 41° E, 3155' FROM NW CORNER of SECTION 7,
SEK NW 4 (Give distance and bearing to corner of section or other legal subdivision)
being within Box 362 of Sec. 7, Twp. T3 S, Rge. R1 E
(Smallest legal subdivision) (N. or S.) (E. or W.)

or (b) within limits of recorded platted property, town or city: Wilsonville
in Lot Box 362, Block Turner Little Farms
(Name of plat or addition)
County of Clackamas
(If within city or town, give name)

3. Construction Work was begun on May, 1954; was completed on June 1954
(Date) (Date)
and the ground water claimed was first used for the purposes set out below on June 1954
(Date)
since which time the water has been used CONTINUOUSLY
(Continuously or intermittently)
from June 1954 to June 1958
(Date) (Date)

4. Quantity of water claimed and used is 245 gallons per minute; 35 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 259 feet. Type Drilled
(Dug or drilled)
diameter 6 inches. Elevation of ground at well site 230 feet, mean sea level.
(As near as known)
Depth to water table 53 feet.

7. Capacity of Well: 245 g.p.m. with 16 feet drawdown.
_____ g.p.m. with _____ feet drawdown.

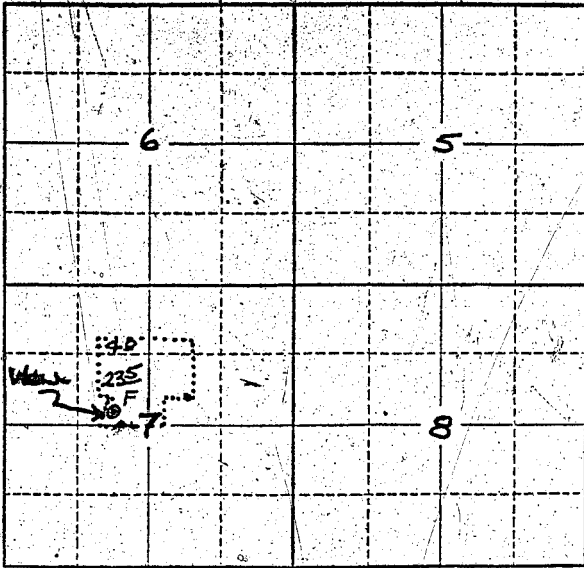
Date of test June 1954
(Date)

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 35 Range 1E, W.M.
North



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

STATE OF OREGON

County of Washington } ss.

I, Ernest Kable, 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.

Ernest Kable
(Signature of Registrant)

Subscribed and sworn to before me this 2nd day of July, 1958
M. LYNN JUDY

My commission expires NOTARY PUBLIC FOR OREGON
MY COMMISSION EXPIRES DEC. 13, 1960

M. Lynn Judy
(Notary Public)

(SEAL)

CERTIFICATE OF REGISTRATION

STATE OF OREGON } ss.
County of Marion

This is to certify that the foregoing Registration Statement was received in the office of the State Engineer on the 8th day of July, 1958, at 8:00 o'clock A.M. and has been duly recorded in said office in Book No. 11 of Registration Statements on page GR-2438

Witness my hand this 16th day of March, 1959.

Lewis A. Stanley
(State Engineer)

\$1,500

By _____ (Deputy)