

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

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Well #2

TO THE STATE ENGINEER OF OREGON:

I, Scotty LaFore

of Rt. 1 Box 234 Hillsboro County of Washington

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 Source from which water is withdrawn is Pump Well #2
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 3.9 mi. NE of Hillsboro on Evergreen Rd.
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 2720' East and 550' North of NW. Corner of Lot 40 of James H. Sewell Acreage
(Give distance and bearing to corner of section or other legal subdivision)

being within NE 1/4 of SW 1/4 of Sec. 21, Twp. 1N, Rge. 2W
(Smallest legal subdivision) (N. or S.) (E. or W.)

or (b) within limits of recorded platted property, town or city:

in Lot 13, Block _____ of Five Oaks Subdivision
(Name of plat or addition)
Hillsboro County of Washington
(If within city or town, give name)

3. Construction Work was begun on 1916; was completed on 1916
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1916
(Date)

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

from 1916 to 1957
(Date) (Date)

4. Quantity of water claimed and used is 35 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 50 feet; Type Drilled
(Dug or drilled)

diameter 8 inches. Elevation of ground at well site 198 feet, mean sea level.
(As near as known)

Depth to water table 35 feet.

7. Capacity of Well: 35 g.p.m. with 25 feet drawdown.

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

Date of test 1916

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.)

3 inch diameter from 0 to 50 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)
Soil	28	
Sand and Clay layers	28	50

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 Berkley Jet Pump Capacity 50 g.p.m.
(Make, type and size)

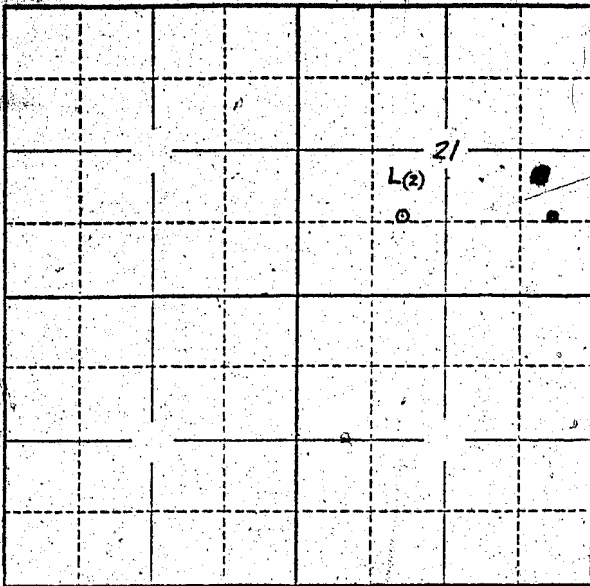
(b) Motor 2 HP. 1phase Electric
(Type and horsepower)

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 Meridian	Section	Forty-acre Tract	Number Acres To Be Irrigated	Date of Reclamation
IN	2W	21	NW 1/4 of SE 1/4	2 1/2 total for 3 well	1946
"	"	"	NW 1/4 of SE 1/4	0.2	"
"	"	"	SW 1/4 of SE 1/4	0.5	"
"	"	"	NW 1/4 of SW 1/4	1.3	"
"	"	"	NE 1/4 of SW 1/4	1.0	"
"	"	"	SW 1/4 of SW 1/4	8.0	"
"	"	"	SE 1/4 of SW 1/4	13.0	"
				24.0 Total	

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 1N Range 2W W.M.
North



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

STATE OF OREGON

County of Washington } ss.

I, Scotty L. Fore, 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.

Scotty L. Fore
(Signature of Registrant)

Subscribed and sworn to before me this 29th day of Nov, 1957

MY COMMISSION EXPIRES MARCH 21, 1959
My commission expires

E. H. Smith
(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 5th day of December, 1957, at 5:00 o'clock PM and has been duly recorded in said office in Book No. 4 of Registration Statements on page GR-737 C

Witness my hand this 21st day of January

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Leura A. Stanley
(State Engineer)

#1500

By _____
(Deputy)