

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Florence M. Cooper

of 540 W. 6th Ave., Albany County of Linn

(Mailing address)

State of _____, 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 Source from which water is withdrawn is Pump Well No. 4

(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 9 miles North of Albany, Oregon

(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) N. 81° 10' W. 78.0 chains from SE corner of NE 1/4 of S. 1, T. 10 S., R. 4 W

(Give distance and bearing to corner of section or other legal subdivision)

being within SW 1/4 of NW 1/4 of Sec. 1, Twp. 10 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 Linn

(If within city or town, give name)

3. Construction Work was begun on May 1940; was completed on May 1940

(Date)

(Date)

and the ground water claimed was first used for the purposes set out below on May 1940

(Date)

since which time the water has been used Continuously

(Continuously or Intermittently)

from May 1940 to present time

(Date)

(Date)

4. Quantity of water claimed and used is 500 gallons per minute; 85.25 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 or drilled)

diameter 10 inches. Elevation of ground at well site 175 feet, mean sea level.

(As near as known)

Depth to water table 10 feet.

7. Capacity of Well: 500 g.p.m. with 8 feet drawdown.

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

Date of test Estimated - Not tested

If Flowing Well: Measured discharge _____ g.p.m. on _____

(Date)

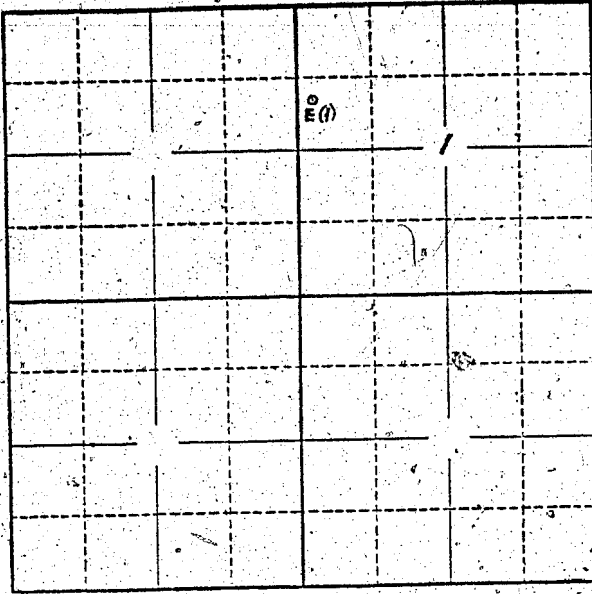
Shut-in pressure at ground surface _____ lbs. per sq. in. on _____

(Date)

Water is controlled by _____

(Cap, valve, etc.)

Township 10 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 Linn

ss.

I, Florence M. Cooper, 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.

Florence M. Cooper
(Signature of Registrant)

Subscribed and sworn to before me this 14th day of December, 1957.

My commission expires March 8, 1958

M. F. Wells
(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 23 day of December, 1957, at 8:00 o'clock A.M. and has been duly recorded in said office in Book No. 4 of Registration Statements on page 791.

Witness my hand this 21 day of February, 1958.

Lewis A. Stanley
(State Engineer)

By _____ (Deputy)

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