

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Albert L. Gregory
of Rt 4, Box 333, Connellys County of Linn
(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 Source from which water is withdrawn is Pump Well #2
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 2 1/2 East of Connellys
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) S 40° 75' E 595.1 feet from SE Corner DLC #87
(Give distance and bearing to corner of section or other legal subdivision)

being within SW 1/4 of SE 1/4 of Sec. 31, Twp. 11 S, Rge. 4 W WM
(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 Prior 1955; was completed on Prior to 1955
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1955
(Date)

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

from June 1955 to Oct 1957
(Date) (Date)

4. Quantity of water claimed and used is _____ gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used Irrigation

6. Description of Well: Depth 33 feet. Type drilled
(Domestic, irrigation, municipal, manufacturing, industrial, etc.) (Dug or drilled)

diameter 10 inches. Elevation of ground at well site 222 feet, mean sea level.
(As near as known)

Depth to water table 18 feet. Summer

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

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

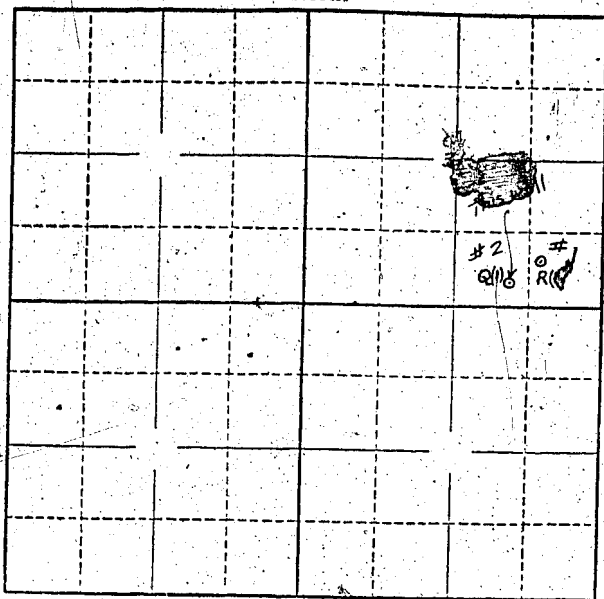
Date of test _____

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.)

Township 11S Range 4W W.M.
North



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

STATE OF OREGON

County of Marion Co. } ss.

I, _____, 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.

Albert L. Gregory
(Signature of Registrant)

Subscribed and sworn to before me this 14th day of January, 1958

My commission expires June 12th, 1961 Wm. S. Bartholomew
(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 14 day of January, 1958, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 5 of Registration Statements on page 856

Witness my hand this 24 day of April, 1958

Lewis A. Blumley
(State Engineer)

By _____
(Deputy)