



State of Oregon  
 Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem, Oregon 97301-1266  
 (503) 986-0900

# Application for Groundwater Registration Modification

## Part 1 of 5 – Minimum Requirements Checklist

**This Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.**  
 For questions, please call (503) 986-0900, and ask for Transfer Section.

**Check all included with this application (N/A = Not Applicable)**

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Part 1 – Completed Minimum Requirements Checklist.

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Part 2 – Completed Application Map Checklist.

Part 3 – Completed Applicant Information and Signature.

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Part 4 – Completed Groundwater Registration Modification Application – Groundwater Registration Information. (Only one Groundwater registration per application, unless the Groundwater registrations to be modified are layered).

Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).

Groundwater registration modification fees – Amount enclosed: \$ 1,250. (\$875.00 for a place of use change only; \$1,250.00 for any other change or combination).

**Attachments:**

N/A Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is **not** the registration certificate holder of record. The Request for Assignment Form is available at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>.

Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) **or** the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.

N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.

N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

**(For Staff Use Only)**

**WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):**

___ Application fee not enclosed/insufficient	___ Map not included or incomplete
___ Land Use Form not enclosed or incomplete	___ Assignment Form and fee not enclosed/insufficient
___ Additional signature(s) required	___ Part ___ is incomplete

Other/Explanation \_\_\_\_\_

Staff: \_\_\_\_\_ 503-986-0 Date: / /

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## Part 2 of 4 – Groundwater Registration Modification Map Checklist

**Your Groundwater Registration Modification application will be returned if any of the map requirements listed below are not met.**

**Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.**

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- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads and railroads.
- Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes hachuring, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.
- N/A If you are proposing a modification in place of use, show the proposed place of use with hachuring including priority date and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of appropriation with distance and bearing or coordinates from a recognized survey corner.
- N/A If you are proposing a modification in point(s) of appropriation, show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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## Part 3 of 4 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>Will E. McGill Living Trust, dated March 20, 2014</b>		PHONE NO. <b>(503) 510-3026</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>15333 Pletzer Rd. SE</b>		FAX NO.	
CITY <b>Turner</b>	STATE <b>OR</b>	ZIP <b>97392</b>	E-MAIL <b>willmcgill.surveying@gmail.com</b>
<b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b>			

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**Agent Information** – The agent is authorized to represent the applicant in all matters relating to this application

APPLICANT/BUSINESS NAME <b>Will McGill Surveying LLC</b>		PHONE NO. <b>(503) 510-3026</b>	ADDITIONAL CONTACT NO. <b>(503) 931-0210</b>
ADDRESS <b>15333 Pletzer Rd. SE</b>		FAX NO.	
CITY <b>Turner</b>	STATE <b>OR</b>	ZIP <b>97392</b>	E-MAIL <b>willmcgill.surveying@gmail.com</b>
<b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b>			

Explain in your own words what you propose to accomplish with this modification; and why:  
*It is proposed to authorize existing Well No. 1 as an additional POA for GR 1055.*

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

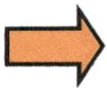
Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

(Check one box)

- By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a); **OR**
- I (we) affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

I understand that prior to Department approval of the groundwater registration modification, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the groundwater registration is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following paper: Scio Tribune.

**I (we) affirm that the information contained in this application is true and accurate.**



Will E. McGill, Trustee      Will E. McGill, Owner      Nov. 10, 2020  
Applicant Signature      Print Name (and Title if applicable)      Date

\_\_\_\_\_  
Applicant Signature      Print Name (and Title if applicable)      Date

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located?  Yes  No *If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has been conveyed.*

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**Check the appropriate box, if applicable:**

Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district.

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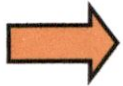
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IRRIGATION DISTRICT NAME <b>Santiam Water Control District</b>	ADDRESS <b>284 E Water St. #1763</b>	
CITY <b>Stayton</b>	STATE <b>OR</b>	ZIP <b>97383</b>

Check here if water for the Groundwater registration is supplied under a water service agreement or other contract with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME <b>Marion County</b>	ADDRESS <b>5155 Silverton Rd. NE</b>	
CITY <b>Salem</b>	STATE <b>OR</b>	ZIP <b>97305</b>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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**Part 4 of 4 – Groundwater Registration Information**

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**CERTIFICATE OF REGISTRATION # GR 1055**

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**Table 1. Location of Authorized and Proposed Point(s) of Appropriation (POA)**

(Note: If the POA name is not specified in the registration, assign it a name or number here.)

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well No. 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 16030	10	S	2	W	5	NE	SE	55	1800' S & 1201' E of NW cor. of the Wm. McKinney DLC.
Well No. 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 16029	10	S	2	W	4	NW	SW	55	1650' S & 2020' E of NW cor. of the Wm. McKinney DLC. *
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										

**Check all type(s) of modifications(s) proposed below (modification "CODES" are provided in parentheses):**

- |   |  |
|---|--|
| <input type="checkbox"/> Place of Use (POU)     | <input type="checkbox"/> Point of Appropriation (well) (POA)                 |
| <input type="checkbox"/> Character of Use (USE) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |

**Will all of the proposed changes affect the entire Groundwater registration?**

- Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the registration to be changed.

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**Table 2. Description of Modifications to Registration GR-1055 (Certificate # GR-1017)**

List only the part of the registration that will be modified. For the acreage in each 1/4 1/4, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

AUTHORIZED (the "from" or "off" lands)										PROPOSED (the "to" or "on" lands)														
The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration that will be changed.										The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	Rng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POA(s) (name or number from Table 1)	Priority Date	Proposed Changes (see "CODES" from previous page)	Twp	Rng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POA(s) to be used (from Table 1)	Priority Date		
											APOA	10	S	2	W	5	SE	NE	1000	55	5.2	Irrigation	Well No. 1 & 2	1946
											APOA	10	S	2	W	5	NE	SE	1000	55	32.0	Irrigation	Well No. 1 & 2	1946
											APOA	10	S	2	W	5	SE	SE	1000	55	15.0	Irrigation	Well No. 1 & 2	1946
TOTAL ACRES										TOTAL ACRES														
										52.2														

Additional remarks: \* Well No. 1 (MARI 16029) was described inaccurately in GR 1054 and has been redescribed at its actual location in Section 4.

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**Groundwater Registration # GR-1055 (Certificate # GR-1017)**

**For a modification in place of use or character of use:**

**Are there other water right certificates, water use permits, or Groundwater registrations associated with the “from” or “to” lands?**  Yes  No

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:

**CERT. 41875 IS**



Pursuant to OAR 690-382-0200, any “layered” water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the “to” lands must be filed separately with a Groundwater registration modification.

**For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:**

- Well log(s) are attached for each well that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.  
(Tip: You may search for well logs on the Department’s web page at:  
[http://apps.wrd.state.or.us/apps/gw/well\\_log/](http://apps.wrd.state.or.us/apps/gw/well_log/))

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**AND/OR**

- Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

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**Table 3. Construction of Point(s) of Appropriation**

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide adequate information is likely to delay the processing of your modification application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right

**CERTIFICATION OF TRUST**  
(Oregon Uniform Trust Code)

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We, **Will E. McGill**, also known as William E. McGill, and **Lucy J. McGill**, also known as Lucille J. McGill, Trustees of the **Will E. McGill Living Trust, dated March 20, 2014**, hereby certify as follows:

1. The Trust is presently in existence. It was executed on March 20, 2014. The Trust was established under the laws of the State of Oregon.
2. The Trustmaker of the Trust is: **Will E. McGill**. The currently acting Trustees of the Trust are: **Will E. McGill** and **Lucy J. McGill**.
3. Under the terms of the trust agreement, the Trustees are given those duties and powers granted a trustee under the Oregon Uniform Trust Code set forth in ORS 130.650 to 130.730.
4. The names and mailing address of the currently acting Trustees are: **Will E. McGill** and **Lucy J. McGill residing at 15333 Pletzer Road SE, Turner, Oregon, 97392**.
5. The Trust is revocable and amendable by the Trustmaker during his lifetime.
6. The Trustmaker designated as Trustee in Item (2) above may act alone and has authority to exercise trust powers alone.
7. The trust Taxpayer Identification Number is the Trustmaker's Social Security Number.
8. Trust property shall be titled as follows:

**Will E. McGill and Lucy J. McGill, Trustees, or their successors in trust, under the Will E. McGill Living Trust, dated March 20, 2014, and any amendments thereto.**

9. The Trust has not been revoked, modified or amended in any manner that would cause the representations contained in this Certificate to be incorrect.

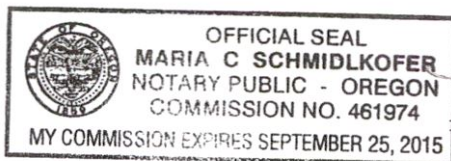
I hereby certify the above to be true as of March 20, 2014.

*Will E. McGill*  
**Will E. McGill, Trustee**

*Lucy J. McGill*  
**Lucy J. McGill, Trustee**

State of OREGON  
County of Marion

This instrument was signed before me on March 20, 2014, by **Will E. McGill** and **Lucy J. McGill**, as Trustees.



*Maria C. Schmidlkofer*  
Notary Public for Oregon



STATE ENGINEER  
Salem, Oregon

16029  
M19

# Well Record

STATE WELL NO. 10/2W-5J(1)  
COUNTY Marion  
APPLICATION NO. GR-1054

GR- 1016

OWNER: Leroy & Deroy McGill

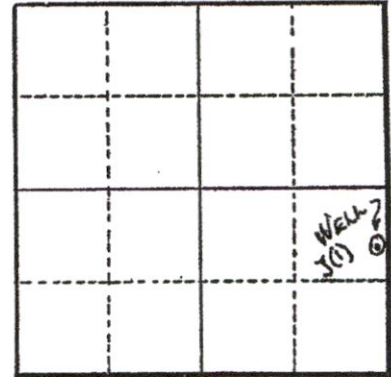
MAILING ADDRESS:

LOCATION OF WELL: Owner's No. #1

CITY AND STATE: Marion, Oregon

NE ¼ SE ¼ Sec. 5 T. 10 S., R. 2 W., W.M.

Bearing and distance from section or subdivision corner 1770' S. & 1679' E. of NW cor. of the Wm. McKinney D.C.



Altitude at well

TYPE OF WELL: Drilled Date Constructed 1941

Depth drilled 30 ft. Depth cased 30 ft.

Section 5

CASING RECORD:

8 inch

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FINISH:

Perforated - ½" x 6" ( 3 per ft.) from 15 to 30 ft.

AQUIFERS:

Water bearing gravel at 10 ft.

WATER LEVEL:

10 ft.

PUMPING EQUIPMENT: Type F. M. 4" Cent. H.P. 25

Capacity 500 G.P.M.

WELL TESTS:

Drawdown 15 ft. after 600 hours G.P.M.

Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F., 19

SOURCE OF INFORMATION G.R. Record

DRILLER or DIGGER West Well Drilling

ADDITIONAL DATA:

Log N.A. Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

Irrigation of 32.5 acres.

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STATE ENGINEER  
Salem, Oregon

MAR. 10 2020

# Well Record

STATE WELL NO. 10/2W-5J(2)  
COUNTY Marion  
APPLICATION NO. GR-1055

GR- 1017

OWNER: Leroy & Deroy McGill

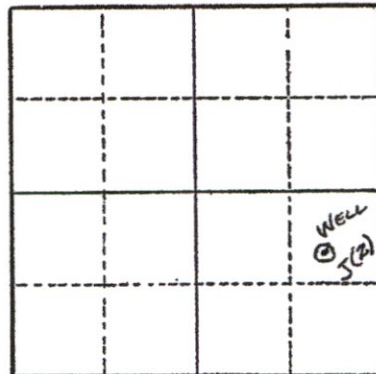
MAILING ADDRESS:

LOCATION OF WELL: Owner's No. #2

CITY AND STATE: Marion, Oregon

NE 1/4 SE 1/4 Sec. 5 T. 10 S., R. 2 W., W.M.

Bearing and distance from section or subdivision corner 1900' S. & 1201' E. of NW cor. of the Wm. McKinney DLC.



Altitude at well 277 ft.

Section 5

TYPE OF WELL: Drilled Date Constructed 1946

Depth drilled 40 ft. Depth cased 40 ft.

### CASING RECORD:

8 inch

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### FINISH:

Perforated- 1/2" x 6" (3 per ft.) from 25 to 40 ft.

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### AQUIFERS:

### WATER LEVEL:

10 ft.

PUMPING EQUIPMENT: Type Pacific 3" Cent. H.P. 15  
Capacity 350 G.P.M.

### WELL TESTS:

Drawdown 18 ft. after 400 hours G.P.M.  
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F. 19

SOURCE OF INFORMATION G.R. Record

DRILLER or DIGGER West Well Drilling

### ADDITIONAL DATA:

Log N.A. Water Level Measurements Chemical Analysis Aquifer Test

### REMARKS:

Irrigation of 52.2 acres.

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Case worker copy

Registration No. GR - 1055

Certificate No. GR - 1017

# Registration Statement

## OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Leroy McGill and Deroy McGill DBA McGill Bros.

of Marion County of Marion

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

2. Location is: 1 1/2 miles south of Marion

and is more particularly described as follows:

(a) Well No. (2) 1800' S. and 1201' East of N.W. cor. of Wm. McKinney D.L.C.

being within N.E. 1/4 of S.E. 1/4 of Sec. 5 Twp. 10 S Rge. 2 W

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

In Lot \_\_\_\_\_ Block \_\_\_\_\_ of \_\_\_\_\_ County of \_\_\_\_\_

3. Construction Work was begun on December 5, 1946 was completed on Feb. 6, 1947

and the ground water claimed was first used for the purposes set out below on May 1, 1947

since which time the water has been used intermittently

from May 1 to Oct. 1957

4. Quantity of water claimed and used is 350 gallons per minute; 210 acre feet per year.

5. Purpose or Purposes for which water is used Irrigation

6. Description of Well: Depth 40 feet Type Drilled

diameter 8 inches. Elevation of ground at well site 277 feet, mean sea level.

Depth to water table 10 feet.

7. Capacity of Well: 400 g.p.m. with 18 feet drawdown.

\_\_\_\_\_ g.p.m. with \_\_\_\_\_ feet drawdown.

Date of test Feb. 1947

If Flowing Well: Measured discharge \_\_\_\_\_ g.p.m. on \_\_\_\_\_

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

Water is controlled by \_\_\_\_\_

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

8 inch diameter Steel casing from 0 to 40 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:

3 per ft. 1x6" from 25 ft. to 40 ft.  
(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. West Well Drilling

4120 Market St. Salem, Oregon

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 Pacific Centrifugal 3" Capacity 350 g.p.m.

(Make, type and size)

(b) Motor 15 H.P. 3 Phase Electric

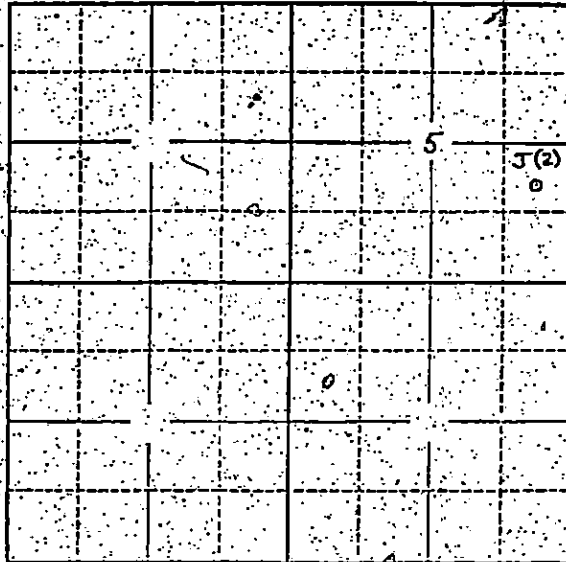
(Type and horsepower)

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 WILLAMETTE Meridian	Section	Part-acre Tract	Number Acres To Be Irrigated	Date of Reclamation
10 S.	2 W.	5	S.E. 1/4 of S.E. 1/4	<del>15.00</del> 15.00	1951
10 S.	2 W.	5	N.E. 1/4 of S.E. 1/4	<del>32.00</del> 32.00	1945
10 S.	2 W.	5	S.E. 1/4 of N.E. 1/4	<del>5.20</del> 5.20	1941
				52.20	

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 10.S Range 2W W.M.  
North



for Map Sec file  
# 52140

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

STATE OF OREGON

County of Marion } ss.

I, William S. Bartholomew 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.

Subscribed and sworn to before me this 21st day of February, 1958

My commission expires 12th June 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 21st day of February, 1958 at 9:00 o'clock A. M. and has been duly recorded in said office in Book No. 5 of Registration Statements on page GR-1017 C.

Witness my hand this 30th day of June, 1958.

Erwin A. Stanley  
(State Engineer)

By \_\_\_\_\_  
(Deputy)

GR-1017 C