GROUNDWATER INDEX

Page ____of___

County <u>Harfield</u> Twp. 1971 Rge. 366.

Sec.	Name of Appropriator	Type of Form	County File No.	Remarks
2	Treeding learn lo	£ 34 4	125090	
3	Baker Frank	4944	124989	-
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8	Edward Lacine	224	123917	
15	Querner arthur L.	442	123000	-
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19	Lehner Cornin	242	122837 -	
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20	Quener arthur L.	494	125434-	
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28	Quener arthur R.	484	125433	-
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		ous the use has been October 1, 1963 Continuous
s	4.	The amount of groundwater claimed (in miner's inches or gallons per minute) 15 gallons per minute
98	5.	If used for irrigation, give the acreage and description of the lands to which water has been applied and name of the owner thereof None
SW 1/4 Sec. 2 T 19 R 36		
Indicate point of appropriation and place of use, if possible. Each small square represents 10 acres.	6.	The means of withdrawing such water from the ground and the location of each well or other means of withdrawal Electric motor and Pump Jack
7. The date of commencement and commencement of groundwater	pleti eme	on of the construction of the well, wells, or other works for with- ent - September 20, 1963 - Completion -
8. The depth of water table APPROX	ime	ately 300 feet
		size and depth of each well or the general specifications of any other 4" casing 350 feet deep
	••••••••••••••••••••••••••••••••••••••	

Date Daz 27, 1963

Three copies to be filed by the owner with the County Clerk and Recorder of the county in which the well is located.

Do not have a log

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

11. The log of formations encountered in the drilling of each well if available..

Original to the County Clerk and Recorder; Duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

Signature of Owner.

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STATE OF MONTANA County of Garfield

Filed in the office of the Corder of Gartield County.

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	STATE OF MONTANA	
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	er Chapter 237, Montana Session Law	
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FRANK BAKE	R , of (Addre	SS) (TOWN)
	State of	ONTANA
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		ter claimed (in miner's inches or go
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	5. If used for irrigation, give	e the acreage and description of the
S	to which water has been	applied and name of the owner th
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317-340 Shale	e, 340-344 Rock	, 344-38054Nd
2. Such other information of a sir	nilar nature as may be useful in earny county record	rying out the policy of this act, inc
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	Signature of O	wner Trank Baker
	Signature of O	, , , , , , , , , , , , , , , , , , , ,
	Signature of O	Date Dec 27-1963

Original to the County Clerk and Recorder; Duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

STATE OF MONTANA (County of Carfield)

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File No	********************			т. 49. г. 56
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	: 		8	STATE OF MONTANA
				ATOR OF GROUNDWATER CODE DECEIVE
	•			CE OF STATE ENGINEER LIL MAR 25 1963
		Decla	ration of	Vested Groundwater RightsTATE ENGINE
			(Under Chapte	er 237, Montana Session Laws, 1961)
1E	cvin Leb	ie of Ann	ropriator)	of Jordan (Address) (Town)
	y of G	rfield		State of Montana
nave	appropriate	a groundy	water according	g to the Montana laws in effect prior to January 1, 1962, as follows
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8. The				size and depth of each well or the general specifications of any other
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Three copies to be filed by the owner with the County Clerk and Recorder of the county in which the well is located.

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

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File No	NE		Т
DUPLICATE	A COLOR		CountyGarfield
	7	STATE OF MONTANA	DECEIVED.
		STRATOR OF GROUNDWATER FFICE OF STATE ENGINEER	CODE MAR 15 100

	The same of the sa	Jordan
	(Name of Appropriator)	of Jordan (Town)
1	County of Garfield	State of Montana to the Montana laws in effect prior to January 1, 1962, äs follows:
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	The estimated amount of groundwater w	ithdrawn each yearunknown
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		o druing of each well it available1.25
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	The log of formations encountered in the 35-50 shale, 50-65 gravel, 65-	-196 ahale, 196-202 rock; 202-247ft, send
11.	35-50 shale, 50-65 gravel, 65-	-196 ahale, 196-202 rook, 202-247ft, sand
11,	Such other information of a similar natur	e as may be useful in carrying out the policy of this act, including
11.	Such other information of a similar natur	e as may be useful in carrying out the policy of this act, including
11.	Such other information of a similar natur	e as may be useful in carrying out the policy of this act, including record.
11.	Such other information of a similar natur	e as may be useful in carrying out the policy of this act, includin record. Signature of Owner. /s/ Ervin Lehner
11.	Such other information of a similar natur	e as may be useful in carrying out the policy of this act, includin record. Signature of Owner. /s/ Ervin Lehner
11.	Such other information of a similar nature reference to book and page of any county	e as may be useful in carrying out the policy of this act, including record.

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STATE OF MONTANA County of Garileld

Filed in the office of the County Clerk and Recorder of Garifeld County, State of Mentana,

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File No	т <i>/9N</i> r3 6E
DUPLICATE Top of Ground	County
(Elev. above sea level)	Notice of Completion of Groundwate ENGINEER Appropriation by Means of Well
	(Under Chapter 237, Montana Session Laws, 1961)
	Owner arthur B. The Jordan Mont Driller Carl Jerrel Address 114 Surland 34, 19
	Date of Notice of Appropriation of Groundwater
	Date well started Novib, 1922 Date Completed Novi 1962 Type of well drilled Equipment Used Brill (Churn, drill, rotary or other)
	Water Use: Domestic ☑ Municipal □ Stock ☑ Irrigation □ Industrial □ Drainage □ Other □
	Indicate on the diagram the character and thickness of the different strata met with in drilling, such as soil, clay, shale, gravel, rock or sand, etc. Show depth at which water is encountered, thickness and character of water-bearing strata and height to which the water rises in the well.
Dr	Size and Weight of Casing From (Feet) To (Feet) Kind From To (Feet) Size From To (Feet) Size From To (Feet) Size From To (Feet) Size From To (Feet)
N	Static Water Level for non-flowing Well
	Shut-in Pressure for Flowing Well
	Discharge in gal, per min. of flowing well How Tested Balls Length of Test 3.5 min.
	Remarks: (Gravel packing, cementing, packers, type of shutoff, location of place of use of groundwater if not at well, and any other similar pertinent information, including number of
Indicate location of well an place of use, if possible. Eac small square represents 10 acre	nd ch
Show exact depth of bottom.	3 5 Driller's License Nymber
	Driller's Signature
corder in the county in which the well	nd three copies to be filed by the owner with the County Clerk and Relis located.
•	plicable, so state, otherwise the form will be returned.
Original to the County Clerk and Re and Quadruplicate for the Appropriate	corder; duplicate to the State Engineer; Triplicate to the School of Mines or.

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Three copies to be filed by the owner with the County Clerk and Recorder of the county in which the well is located.

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

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This form to be prepared by driller, and three copies to be filed by the owner with the County Clerk and Recorder in the county in which the well is located.

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology and Quadruplicate for the Appropriator.

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RECEIVED County Garfield

STATE OF MONTANA

ADMINISTRATOR OF GROUNDWATER CODE

ADMINISTRATOR OF GROUNDWATER CODE

MONTANA WATER RESOURCES BOARD

NOTICE OF COMPLETION OF GROUNDWATER DEPARTMENT OF DEVAMENABLE, sandstone, etc. Show APPROPRIATION BY MEANS OF WELL

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oy the own which the v Please answ	his form to be prepared by driller, and three copies to be filed by the owner with the County Clerk and Recorder in the county in hich the well is located, last copy to be retained by driller. lease answer all questions. If not applicable, so state, otherwise the orm may be returned.						From (Feet)	To (Feet)				
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JUL 5 1973

MONTANIA DEPARTMENT OF MATURAL RESOURCES AND CONSERVATION

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Thomas for Stanton

Subscribed and sworn to before me this 290 day of June 1973.

JOUNT CLERK AND RECORDER

Charles E. Panglund Ly Go Marie Stanton Deputy

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N. C.

V.St.

|                                                  | Approved Stock Form—State Publishing Co., Helena, Montana—38687                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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|                                                  | d Groundwater Rights ENGINEER ontana Session Laws, 1961)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
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| dwater according to the                          | Montana laws in effect prior to January 1, 1962, as follows:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                  | eficial use on which the claim is based                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| tinuous                                          | approximate date of earliest beneficial use; and how con<br>the use has been a surface of the con-<br>cry year three surfaces as much                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 4. The amper min                                 | ount of groundwater claimed (in miner's inches or gallon                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 5. If used to whice                              | for irrigation, give the acreage and description of the land<br>h water has been applied and name of the owner thereo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| location                                         | eans of withdrawing such water from the ground and the of each well or other means of withdrawal. It is the state of the such for with the ground and the construction of the well, wells, or other works for with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| GEN.10 195                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| railable, the type, size and yal of groundwater. | depth of each well or the general appoint cations of any other cases of the cases o |
| of groundwater withdrawn                         | 1 each year 200/000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| encountered in the drilling                      | g of each well if available. 7204 availab                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| of a similar nature as may                       | y be useful in carrying out the policy of this act inglithin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| gas y                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                  | ADMINISTRATOR OF OFFICE OF ST  laration of Veste (Under Chapter 237, Mo ppropriator)  adwater according to the large min  2. The bender of the large min  5. If used to whice  ation sible to the location of groundwater of groundwater of groundwater of a similar nature as may of a similar nature as may lof a similar nature as may  |

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

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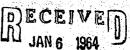
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DUPLICATE

County......Garfield

## STATE OF MONTANA ADMINISTRATOR OF GROUNDWATER CODE OFFICE OF STATE ENGINEER



#### Declaration of Vested Groundwater RightTATE ENGINEER

| JOLA D. HECOLIE                                                                                                                                                                                                                                                 | Jordan Jordan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| (Name of Appropriator)                                                                                                                                                                                                                                          | (Address) (Town)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                         |
| County of Garrield                                                                                                                                                                                                                                              | State of <b>Montana</b> rding to the Montana laws in effect prior to January 1, 1962, as                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | follow                  |
|                                                                                                                                                                                                                                                                 | rding to the Montana laws in effect prior to Sandary 1, 1502, as                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | , rono                  |
| N                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |
|                                                                                                                                                                                                                                                                 | 2. The beneficial use on which the claim is basedStock.w                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                         |
|                                                                                                                                                                                                                                                                 | and water system for farmstead                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | •••••                   |
|                                                                                                                                                                                                                                                                 | 3. Date or approximate date of earliest beneficial use; and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ham aa                  |
|                                                                                                                                                                                                                                                                 | tinuous the use has been November 20, 1959                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | LUW CO.                 |
| _                                                                                                                                                                                                                                                               | continuous                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                         |
| B.                                                                                                                                                                                                                                                              | ***************************************                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ····                    |
|                                                                                                                                                                                                                                                                 | 4. The amount of groundwater claimed (in miner's inches of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | r callo                 |
|                                                                                                                                                                                                                                                                 | per minute) 15 gallons per minute                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                         |
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| 8                                                                                                                                                                                                                                                               | 5. If used for irrigation, give the acreage and description of to which water has been applied and name of the owne                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | r there                 |
| 1/4 Sec. 24 T 19 R 36                                                                                                                                                                                                                                           | None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                         |
| licate point of appropriation                                                                                                                                                                                                                                   | ***************************************                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |
| d place of use, if possible.                                                                                                                                                                                                                                    | C Mile was a C with down in and was to come to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                         |
| ch small square represents 10                                                                                                                                                                                                                                   | <ol> <li>The means of withdrawing such water from the ground<br/>location of each well or other means of withdrawal</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                         |
| CB.                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ***********             |
| drawal of groundwitter. Commence                                                                                                                                                                                                                                | Submersible Electric Pump  pletion of the construction of the well, wells, or other works ment. November 15, 1959 - completion, November                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | for wit<br><b>20, 1</b> |
| drawal of groundwater. Commence                                                                                                                                                                                                                                 | pletion of the construction of the well, wells, or other works ment, November 15, 1959 - completion, November                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | for wit<br><b>20, 1</b> |
| The depth of water table 400 fs.  So far as it may be available, the tworks for the withdrawal of ground                                                                                                                                                        | pletion of the construction of the well, wells, or other works ment. November 15, 1959 - completion, November et.  The size and depth of each well or the general specifications of water.  4 casing 470 feet deep                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | for wit 20, 1           |
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Original to the County Clerk and Recorder; duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

#### 125091

STATE OF MONTANA County of Garfield

Filed in the office of the County Clerk and Recorder of Garfield County, State of Maria, this \_\_\_\_\_\_\_ And of \_\_\_\_\_\_ day of \_\_\_\_\_\_\_

A. D. 19

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| rm No. 18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | T - 10M R - 36P                         |
| 60                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | County Corfield                         |
| MONTANA BUREAU OF Butte, M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | MINES AND GEOLOGY DECEIVE D             |
| Water We                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | STATE ENGINEER                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Address Wolf Point Wontana              |
| Owner Arthur Turner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Address Wolf Point, Wontains            |
| Driller Ded Brillin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Date Completed 5/28/58                  |
| Date Started 5/28/58                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Date Completed 5/28/58                  |
| Location: Sec. 27                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | T. 1911 R. 365 1 sec. 571               |
| Type of well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Equipment used Rotary sther)            |
| Type of well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Churn, drill, rotall,                   |
| Water use: Domestic Municipa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 1 Scock L                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Size                                    |
| casing:ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | TypeSize                                |
| Casing:ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | TypeSizeto ft                           |
| Casing:ft. to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | o ft. 156 . Ft. to ft.                  |
| Perforated or screened.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | lots                                    |
| Type of screen or perforations 8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | lots  well:                             |
| Static water level, for non-flowing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | lb./sq. in. on:                         |
| as the pressure, for flowing well.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                         |
| Pursing water levelfe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | et atgal. per min                       |
| How tested:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         |
| ;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | hour                                    |
| Remarks: (Gravel packing, cementing shut-off)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ng, packers, type of shut-off, depth of |
| snut-orr)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         |
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| <b>3</b> 25                            | 11:3                                             | HEREK Rock       |      |
| 143                                    | 156                                              | Fendstone        |      |
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| GV     | Approved Stock Form-State Publishing Co., Helena, Montana-38687                                                                                               |
|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| File l | T 19 R 36 E  County Larfield                                                                                                                                  |
| DUP    | County Larfield                                                                                                                                               |
|        | STATE OF MONTANA                                                                                                                                              |
|        | ADMINISTRATOR OF GROUNDWATER CODE OFFICE OF STATE ENGINEER  OFFICE OF STATE ENGINEER                                                                          |
|        | 10N a sace (V)                                                                                                                                                |
|        | Declaration of Vested Groundwater Rights 1204                                                                                                                 |
|        | (Under Chapter 237, Montana Session Laws, 1961) STAIL ENGINEER                                                                                                |
| 1      | arthur R. Turner of Jordan                                                                                                                                    |
|        | (Name of Appropriator) (Address)                                                                                                                              |
| 1      | County of State of State of Lave appropriated groundwater according to the Montana laws in effect prior to January 1, 1962, as follows:                       |
| _      | Stal 200 to                                                                                                                                                   |
| _      | 2. The beneficial use on which the claim is based. Stock Water                                                                                                |
| _      |                                                                                                                                                               |
| ]      | 3. Date or approximate date of earliest beneficial use; and how continuous the use has been fully 1958 and                                                    |
| w  -   | each year The Rendred media                                                                                                                                   |
| -      | 4. The amount of groundwater claimed (in miner's inches or gallons                                                                                            |
| -      | per minute) per minute)                                                                                                                                       |
| -      |                                                                                                                                                               |
| Ţ      | 5. If used for irrigation, give the acreage and description of the lands to which water has been applied and name of the owner thereof                        |
| A# La  |                                                                                                                                                               |
|        | 4 SW Sec 27 T. 17 R.36  sate point of appropriation                                                                                                           |
| and    | place of use, if possible.  small square represents 10  6. The means of withdrawing such water from the ground and the                                        |
| acres  | 74.4/                                                                                                                                                         |
|        | by gods engine and Windmill                                                                                                                                   |
| 7.     | The date of commencement and completion of the construction of the well, wells, or other works for with drawal of groundwater.                                |
|        | drawal of groundwater that drilles on may 28, 1938 and water                                                                                                  |
|        | The depth of water table. One Hundred                                                                                                                         |
|        | The depth of water table                                                                                                                                      |
|        | So far as it may be available, the type, size and depth of each well or the general specifications of any other works for the withdrawal of groundwater.      |
|        | 160 for and Cased with 156 ft. of Henry lasing shirt                                                                                                          |
|        | 3 foints of perforated lasting and following well                                                                                                             |
|        |                                                                                                                                                               |
| 10.    | The estimated amount of groundwater withdrawn each year                                                                                                       |
| 11.    | The log of formations encountered in the frilling of each well if available 43 fr 2016                                                                        |
|        | 143-16 ge Sanason                                                                                                                                             |
| 10     | Such asher information of a similar nature of may be proful in correction out the policy of this act in Julius                                                |
| 14.    | Such other information of a similar nature as may be useful in carrying out the policy of this act, including reference to book and page of any county record |
|        |                                                                                                                                                               |
|        | nother R. Trans                                                                                                                                               |
|        | Signature of Owner WWW 19 WWW 18 7 7 7 7 7 19 4 7                                                                                                             |
|        | Date 12-30-1763                                                                                                                                               |
|        | ee copies to be filed by the owner with the County Clerk and Recorder of the county in which the well is ted.                                                 |

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

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STATE OF MONTANA County of Carfield

Filed in the offibe of the County Clerk and Recorder of Garfield County, State of Montana, this.

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|---------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Form No. 18<br>8-60 |                              | r                                                                                                               | 19N                | R                | 36B                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           |
|                     |                              |                                                                                                                 | ounty(             | lerfield         | The second secon | en en entre de la company |
|                     | MONTANA                      | BUREAU OF MINES<br>Butte, Montar                                                                                |                    | OGY DEC          | EIVE<br>V 2 1962                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                           |
|                     | 7                            | Water Well I                                                                                                    | -og                | STATE            | ENGIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | EER                       |
|                     | OwnerArth                    | ur Turnor                                                                                                       | Add                | ress             | ordar, Mon                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | tana                      |
|                     | Driller                      | Carl Jerrel                                                                                                     | Add                | ress_Kile        | City, No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ntena                     |
| <b> + +-</b>        | Date Started                 | 11/6/61                                                                                                         | Dat                | e Complete       | d_11/8/                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 61                        |
|                     | Location: S                  | Sec. 28 T, 19                                                                                                   | N_R36E             | <del>1</del> sec | NE3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           |
| Type of well        | TRILLED                      | Equip                                                                                                           | ment used_         | ROT/             | NY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | her)                      |
| Water use: 1        | Domestic                     |                                                                                                                 |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
|                     | lustrial                     |                                                                                                                 |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
|                     | ft. to13                     | <del></del>                                                                                                     |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
|                     | ft. to                       |                                                                                                                 |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
|                     | ft. to                       |                                                                                                                 |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
|                     | screened: Ft.                |                                                                                                                 |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
|                     | n or perforation             |                                                                                                                 |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
|                     | level, for non-              |                                                                                                                 | -                  | 30 feet from     | ı top                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | feet.                     |
| Shut-in press       | ure, for flowin              | g well:                                                                                                         | 1b./sq.            | in. on:          | (date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                           |
| Pumping water       | level                        | feet at                                                                                                         |                    | gal. per m       | in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                           |
| How tested:         |                              | bailer                                                                                                          | ·                  |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
| Length of tes       | t                            | 2 hours                                                                                                         |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
| Remarks: (Gr        | avel packing, c<br>shut-off) | ementing, packe                                                                                                 | rs, type           | of shut-of       | f, depth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | of                        |
|                     |                              | 1                                                                                                               | <b>套祖 基础</b> 机器 都用 |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |
|                     |                              | (over)                                                                                                          |                    |                  | <u>~</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |

| Depth       | feet          | Description of Mat | terial Drilled                        |
|-------------|---------------|--------------------|---------------------------------------|
| From        | To            |                    |                                       |
| _0          | 30            | sandy soil         |                                       |
| 30          | 100           | shale              | ,                                     |
| 100         | 115           | sand               |                                       |
| 115         | 130           | shale              |                                       |
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| gw                                                | 1                     | Approved Stock Form-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | State Publishing Co., Helena, Montana—38687                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
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|                                                   | <b>D</b>              | ATE OF MONTANA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                   |                       | FOR OF GROUNDWATE<br>E OF STATE ENGINEE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | R CODED ECEIVE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| ₩ De                                              |                       | Vested Groundy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| have appropriated gro                             | padwater according    | to the Montana laws in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | effect prior to January 1, 1962, as follows:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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|                                                   | 5.                    | If used for irrigation, giv                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | e the acreage and description of the lands                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>S</b>                                          | · ·                   | to which water has beer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | applied and name of the owner thereof                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
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| 7. The date of commence drawn of groundwate       | ement and completion  | n of the construction of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | the well, wells, or other works for with-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
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| 8. The depth of water t                           | able 35 5 6           | 2 ft                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 9. So far as it may be a works for the withdra    |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ll or the general specifications of any other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
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| GA Wollo                                          | 74.1                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| 10. The estimated amount                          |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | m # a '0 ( )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 11. The log of formations                         | encountered in the    | drilling of each well if                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | available                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
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| 12 Such other information                         | n of a similar nature | e as may be neeful in ee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rrying out the policy of this act, including                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| reference to book and                             | page of any county    | record with p                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ing 5 Jall Jet mini                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
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| Three copies to be filed h                        | y the owner with th   | ne County Clerk and Rec                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | corder of the county in which the well is                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| located.                                          |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | THE PARTY OF THE P |
| Please answer all question                        | s. If not applicable, | so state, otherwise the f                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | orm will be returned.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Original to the County C of Mines and Geology, an |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ngineer; Triplicate to the Montana Bureau                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

125422

STATE OF MONTANA County of Garfield

Filed in the office of the County Clerk and Recorder of Garfield County, State of Montane, this 3/ day of De L. V. C. Mark Land Comments to seek with

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County Clerk and Reporter

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IN WESTING

19N-36E



3 GW 3 Revised 1969 191-1500-10/69

## STATE OF MONTANA ABMINISTRATOR OF GROUNDWATER CODE MONTANA WATER RESOURCES BOARD

MOTITATIA DEPARTAZENT CE NATURAL RESOURCES AND CONSERVATION

## NOTICE OF COMPLETION OF GROUNDWATER APPROPRIATION WITHOUT WELL Developed After January 1, 1962

(Under Chapter 237, Montana Session Laws, 1961, as amended)

This form to be prepared by **contact** (if any); otherwise by the owner.

Three copies of this notice are to be filled with the County Clerk and Recorder of the county in which the works are located.

Please answer all questions, if not applicable, so state, otherwise the form may be returned.

| For Administrator's Use                 |                                                                                |  |  |  |
|-----------------------------------------|--------------------------------------------------------------------------------|--|--|--|
|                                         | Address Brusett. Montana 59318                                                 |  |  |  |
| 139551                                  | Contractor (if any)                                                            |  |  |  |
| 6-29-73                                 | Address of Contractor                                                          |  |  |  |
| 1 10:00 H.M.                            | Date Started Date Completed                                                    |  |  |  |
|                                         | 1. Describe means of obtaining groundwater (as by sub-irrigation;              |  |  |  |
|                                         | developed spring, drains, etc.)                                                |  |  |  |
|                                         | undeveloped natural spring                                                     |  |  |  |
|                                         |                                                                                |  |  |  |
| N                                       |                                                                                |  |  |  |
|                                         | Means of withdrawing water (gravity, pump, canal, etc.)                        |  |  |  |
| <u>z</u>                                | gravity                                                                        |  |  |  |
|                                         | 3. Depth of water table                                                        |  |  |  |
|                                         | 4. Use of the water                                                            |  |  |  |
|                                         |                                                                                |  |  |  |
|                                         |                                                                                |  |  |  |
|                                         | 5. Amount of groundwater claimed (in miner's inches or gallons                 |  |  |  |
| S                                       | per minute)gallon_minute                                                       |  |  |  |
|                                         |                                                                                |  |  |  |
| 19 R 36 @                               | <ol><li>If used for irrigation, give number of acres and description</li></ol> |  |  |  |
| s w                                     | of land                                                                        |  |  |  |
| CATE POINT OF APPROPRIATION             |                                                                                |  |  |  |
| PLACE OF USE, IF POSSIBLE.              |                                                                                |  |  |  |
| d                                       | 7. Estimate amount of water used each year                                     |  |  |  |
| <u> </u>                                | don*t know                                                                     |  |  |  |
| *************************************** | 8. Months of year spring flows                                                 |  |  |  |
|                                         |                                                                                |  |  |  |

Date ... June 26, 1973

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Call Service Control C

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#### STATE OF MONTANA ADMINISTRATOR OF GROUNDWATER CODE MONTANA WATER RESOURCES BOARD

RECEIV adjuste the character, color, thick-hess of strata such as soil, clay, sand,

DRILLER'S LOG

NOTICE OF COMPLETION OF GROUNDWATER JUL 5 197 gravel, shale, sandstone, etc. Show depth at which water is found and APPROPRIATION BY MEANS OF WELL MONTAWA DEPARTMENT OF NATURAL Developed after January 1, 1962 RESOURCES AND CONSERVATION Top of Ground (Under Chapter 237 Montana Session Laws, 1961, as amended) This form to be prepared by driller, and three copies to be filed by the **owner** with the County Clerk and Recorder in the county in which the well is located last copy to be retained by driller. NOT AVAILABLE Please answer all questions. If not applicable, so state, otherwise the form may be returned. 6 M Ranch. Inc. For Administrator's Use Address Brusett. Mont File 139550, 922 Date well started \_\_\_\_\_1967. completed ... 1967 Type of well ..... drilled Equipment used ...... POTATY. Stock 🔁 Water Use: Domestic [ Municipal [ Irrigation 🔲 Industrial ☐ Drainage ☐ Other ☐\* \*Describe ..... **USE:** If used for irrigation, industrial, drainage or other. Explain, state number of acres and location or other data (i.e. Lot, Block and Addition), ..... ESTIMATED ANNUAL WITHDRAWAL PERFORATIONS Kind Size From (Feet) (Feet) 5 in. 4 in C 200? slots at \_\_\_\_\_\_ gallons per minute, measured 60 \_\_minutes after pumping began. \*Measured from ground level. Well developed by Dalling for 5 hours. Power...elec. Pump...one ... HP Remarks: (Gravel packing, cementing, packers, type of shutoff) .... NE / Sec 29 INDICATE LOCATION OF WELL AND PLACE OF USE, IF POSSIBLE. EACH SMALL SQUARE REPRESENTS 40 ACRES. Driller's Signature Carl Jerrel Driller's Address Miles City, Montana

HEENSE NO ..

200 feet Show exact depth of bottom

A39550

WA39550

WA39550

WA39550

WA39550

WASHINGTON MONTANA

County of Garfield

Filed in the office of the County Clerk and
Resorder of Garfield County. Store of Montand.

WASHINGTON COUNTY.

Charles Town Montand.

County Clerk and M

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JUL 5 1973

MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION

TO WHOM IT MAY CONCERN:

We OM Ranch Son Druget Mont: . . have used water

"from a well located in NW. . 3 NF. . Sec. . 29 T 19N

R 36 F. for the purpose of waterry levestack.

For a period of time beginning <u>September</u>, 1967 and is now in use.

Claudes a. Stanton

Subscribed and sworn to before me this 29 Liday of June 1973.

COUNTY CLERK AND BECORDER

Charles & Pangluers ty Go Dow Starton Liputy

INDICATE LOCATION OF WELL AND PLACE OF USE, IF POSSIBLE.

Driller's Signature Prana Drilling Service

Driller's Address Jordan, Montana

.....LICENSE NO......

EACH SMALL SQUARE REPRESENTS 40 ACRES.

ATE OF MONTANA

country of Gardield

Filed in the office of the Country Clerk and

marcae of Country Stope of Bourance

12 11 600 of the Country

Country Clerk and Regarder

Country Clerk and Regarder

To Day January

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Committee of the said seed assets

Market C. Deserte Co.

TANK THE COUNTY WAS

\$254\$ (f) 1658450

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JUL 5 19/1

TO WHOM IT MAY CONCERN:

We & M. Rayell, Lee Bresett Best have used water " from a well located in SW. . & SF. . Sec. 29. T. 19 N R 36. for the purpose of watering livestock.

For a period of time beginning June, 1957 and is now in use.

Clauder R. Stanton See See.

Subscribed and sworn to before me this 2968 day of June 1973.

Charles & Fungluenal

TIMIZ CHERE AND SOURCES

ARFIELD COURSE MONTANA

GROUNDWATER INDEX

County Marfield Twp. 1971 Rge. 376.

County Gounty

| Sec.     | Name of Appropriator | Type of Form | County<br>File No. | Remarks                                          |          |
|----------|----------------------|--------------|--------------------|--------------------------------------------------|----------|
| 2        | 5 time house lay to. | 443          | 125013             |                                                  |          |
| 3        | 5 tinebaugh lay b.   | 1814         | 125012             |                                                  |          |
| 3        | Stine bauch Poule.   | 49/4         | 125010             |                                                  |          |
| 4        | 5 tine bayak Royle.  | 484          | 125011             |                                                  |          |
| 13       | Hare arthur          | 18/2         | 133811             |                                                  |          |
| 14       |                      | 4944         | 125009             |                                                  |          |
|          |                      | 1984         | 125092             |                                                  |          |
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| 6.2 10   |                      |              |                    |                                                  | _        |

File No County GARFICE DUPLICATE STATE OF MONTANA ADMINISTRATOR OF GROUNDWATER CODE OFFICE OF STATE ENGINEER Notice of Completion of Groundwater Appropriation
Without Wall (Under Chapter 237 Montana Session Laws, 1961) Date of Appropriation of Groundwhter. 1916

Roy E. Sline 12 Jordan, Month. Address of Contractor Date Started. .. Date Completed. Describe means of obtaining groundwater without a well "as by sub-irrigation and other natural processes". Include depth to hen applicable.. LOWINA Quantity of water developed and used with explanation of method used to measure or estimate such amount. If use is intermittent CENTER estimate approximate lengths of periods of use 350 hd. Cattle The Indicate point of appropriation 2 TOURS and place of use, if possible. Signature of Owner

This form to be prepared by contractor (if any), otherwise by the owner.

Three copies of this notice are to be filed with the County Clerk and Recorder of the county in which the works are located.

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology and Quadruplicate for the Appropriator.

125013

STATE OF MONTANA County of Garfield

Plied in the office of the Creanty Clerk and Recorder of Garfield County, State of Montana,

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County Clerk and Bacodes

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County of Geneld

Recorder of Gartield County, Gart Montana,

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| A                                                                      | Approved Stock Miltin-Shalls Painting Cir. 11 100 Manager 42234 and 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
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| ile No                                                                 | * 19th 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| UPLICATE                                                               | Comy Bis Kield                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                        | STATE OF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                        | ADMINISTRATOR OF THE PROPERTY  |
|                                                                        | OFFICE OF STATE OF CHARGE 1964                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Declara                                                                | ation of Vested Groundwater 1964                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                        | Inder Chapter 237, Montana Session Laws, 1961) STAIL LINGINEER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| 1 Koy E. Stini                                                         | baugh of Jordan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| (Name of Appr                                                          | opriator) (Address) (Town)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| have appropriated groundwater                                          | opriator) of (Address) (Town)  A State of 700 N/2 N a  r according to the Montana laws in effect prior to January 1, 1962, as follows:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| N                                                                      | 2. The beneficial use on which the claim is trued. Stack                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| X                                                                      | 2. The beneficial use on which the claim is traced.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| X                                                                      | No. 27 HOUSE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                                        | 3. Date or approximate date of earliest beneficial the; and how continu-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                        | ous the use has been 15.7.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                        | 4. The amount of groundwater claimed (in miner's inches or gallms                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                                        | per minute) BOIL 6 gal Den Missa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
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| s                                                                      | 5. If used for irrigation, give the acreage and description of the lards to which water has been applied and name of the owner thereof                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 101 . NC 10 - 7                                                        | Nove                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| W4NESec. 3. T. 19 R. J.                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| and place of use, if possible. Eacl                                    | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| small square represents 10 acres                                       | tion of each well or other means of withdrawal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| •                                                                      | Stock Pumpou both                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 7 Mha Bata at assumencement                                            | and any lating of the any deposition of the well mally an other works for with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <ol> <li>The date of commencement<br/>drawal of groundwater</li> </ol> | and completion of the construction of the well, wells, or other works for with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| 8. The depth of water table,                                           | NO. 1 16 FEET NO. 2, 18 PT.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 9. So far as it may be availal                                         | ole, the type, size and depth of each well or the general specifications of any other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| works for the withdrawal of                                            | groundwater No / Hand dua 3 17 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 6 fles Des MeT.                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| 10 The entire test                                                     | oundwater withdraws each year 8014 735,000 324.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| 11. The log of formations encou                                        | ntered in the drilling of each well if available                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| ***************************************                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| ***************************************                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                        | a similar nature as may be useful in carrying out the policy of this act, including of any county record                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| resperence to book and page                                            | Nany county record Nan E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                        | A CONTRACTOR OF THE PROPERTY O |
|                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                        | Simon of Art 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                        | Signature of Owner Con Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                        | Signature of Owner Date. Ja 130/63                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

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| File No.     | {                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         | T /7 R 3/                                                                 |
| DUPLIC       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TATE OF MONTANA                         | County Burjul                                                             |
|              | and the second of the second o | ATOR OF GROUNDWATER CO                  | DE                                                                        |
|              | OFFI(                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | DE OF STATE ENGINEER                    | DECELLA E                                                                 |
|              | Declaration of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Vested Groundwater                      | Rights JAN 6 1964                                                         |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | er 237, Montana Session Laws, 196       | • • • • • • • • • • • • • • • • • • • •                                   |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | STAIL ENGINEER                                                            |
| 1 7          | oy tinebar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | gh, of Jord                             | (Marra)                                                                   |
| Coun         | ity of Gulleld                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State of Montana laws in effect pri     | Tane (10WII)                                                              |
|              | appropried groundwater according                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | to the Montana laws in effect pri       | or to January 1, 1962, as follows:                                        |
| <del>,</del> | N N N N N N N N N N N N N N N N N N N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | The beneficial useon which the o        | laim is based                                                             |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Y-2                                     |                                                                           |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | liest beneficial use; and how continu-                                    |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ous the use has been 1944               | T - Steady                                                                |
| w Jak        | E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | *************************************** |                                                                           |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | . The amount of groundwater cla         | aimed (in miner's inches or gallons                                       |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | man william 5 gal                       | aimed (in miner's inches or gallons                                       |
| ļ            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |                                                                           |
| <b>i</b>     | s                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | to which water has been appli           | acreage and description of the lands<br>ied and name of the owner thereof |
| NEW          | SEsec. 3 T. 19 R.37                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | none                                    | ***************************************                                   |
| Indicat      | te point of appropriation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | *************************************** | ***************************************                                   |
| small s      | ace of use, if possible. Each square represents 10 acres.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         | water from the ground and the loca-                                       |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | of withdrawal                                                             |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | alock                                   | Pump                                                                      |
| 7. ?<br>dr   | The date of commencement and complete wal of groundwater                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | tion of the construction of the w       | ell, wells, or other works for with-                                      |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |                                                                           |
| 8. Ti        | he depth of water table 40                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | eet .                                   |                                                                           |
| 9. Sc        | n far as it may be available, the type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | size and denth of each well or the      | he general specifications of any other                                    |
| W(           | orks for the withdrawal of groundwater                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Drilled - 2                             | 10 feet deign -                                                           |
|              | 6 inch) deaml                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ev.                                     |                                                                           |
|              | ***************************************                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         | ***************************************                                   |
| 10. T        | he estimated amount of groundwater v                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | vithdrawn each year                     | 000 gallons                                                               |
|              | he log of formations encountered in th                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         | ٠, ١                                                                      |
| ***          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |                                                                           |
|              | •••••••••••••••••••••••••••••••••••••••                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | *************************************** |                                                                           |
|              | uch other information of a similar nateference to book and page of any count                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                         | out the policy of this act, including                                     |
| •••          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1000                                    |                                                                           |
| •••          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | · · · · · · · · · · · · · · · · · · ·   | 0 0.11                                                                    |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Signature of Owns                       | Toy & Stinetony                                                           |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1                                       | Onte 12-30-63                                                             |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | _                                       |                                                                           |

Three copies to be filed by the owner with the County and Recorder of the county in which the well is located.

Please answer all questions. If not applicable, so state, give the form will be returned.

Original to the County Clerk and Recorder; Duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

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STATE OF MONTANA
County of Garfield

Piled in the office of the County Clerk and Recorder of Garfield County, State of Montana, this day of Du.

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County Clerk and Recorder

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| Re No                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | and the second of the second o |                                         |
| DUPLICATE                                                         | City a service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | A11 3FAVE 437 4                         | County Barfa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | _ رو ا                                  |
|                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | OF MONTANA OF GROUNDWATER CO            | THE THE THE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | T Ta                                    |
| •                                                                 | The second secon | STATE ENGINEER                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 44                                      |
| <b></b>                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1 200                                   | UL JAN 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                         |
| Declar                                                            | ation of <b>Vas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ied Oromndwate                          | or Rights                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | JINE ER                                 |
| •                                                                 | (Under Whapter 237,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Montalia Carlon Laws, 19                | 961)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 7 <b>7 7 8 9</b>                        |
| · Rose & Stan                                                     | have he                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         | Carl                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | المسد م                                 |
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| Indicate point of appropriation and place of use, if possible. Ea | on<br>ab                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |
| small square represents 10 acre                                   | es. 6. The                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | means of withdrawing suc                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |
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| 7. The date of commencemen                                        | nt and completion of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | the construction of the                 | well, wells, or other wor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | cks for with-                           |
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| 8. The depth of water table                                       | a feel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | · · · · · · · · · · · · · · · · · · ·   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |
| 9. So far as it may be available for the mithdened                | able, the type, size a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         | specifications                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | of any other                            |
| works for the withdrawal o                                        | i groundwater                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | and any                                 | wa feel de                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | p-                                      |
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| 10. The estimated amount of g                                     | roundwater withdress                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | m anah wan 700                          | oco galla                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | n d                                     |
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| 11. The log of formations enco                                    | untered in the drillin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | g of each well if available             | Mones                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | *****************                       |
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| 12. Such other information of                                     | a similar nature as                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | may be useful in carrying               | g out the policy o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | act, including                          |
| reference to book and page                                        | e of any county record                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         | ***************************************                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |
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| Three conies to be filed by the                                   | owner with the Countr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                         | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         |

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; Duplicate to the State Engineer; Triplicate to the Montana Burcau of Mines and Geology, and Quadruplicate for the Appropriator.

## 125011

STATE OF MONTANA County of Garfield

Filed in the office of the County Clerk and order of Garfield County, State of Montana, day of

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| File No.                                  | MONTANA WATER RESOURCES BOARD  RECEIVED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>т 19N <sub>R</sub> 37E</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
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| Top of Ground                             | <ul> <li>The state of the s</li></ul> | E WATER CONSERVATION BOARD  Completion of Groundwater                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 10 (Blev. above 8) 15 - 36 April 140 21   | Approint DEV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | oriation by Means of Well<br>ELOPED AFTER JANUARY 1, 1962:<br>237 Montana Session Laws, 1961, as amended)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 140-145 C                                 | Date of Notice of appr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | CF WAKEAddress JOKS HN MONT<br>DFBNE Address JOKS HN MINT<br>opriation of groundwater                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 233 - 270 A<br>270 - 275 C<br>273 - 310 A | Date well started.  Type of well. St. 1. (Dug, driven, Water use: Doi Indicate on the di met with in drilling, s depth at which water                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Equipment used F P P P Date completed S S S S S S S S S S S S S S S S S S S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
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| This form to be prepared                  | by driller, and three copies to be filed by the owner in the county in which the well is located, tissue                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | er with the copy to be Driller's License Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

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Please answer ail questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; Duplicate to the State Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

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STATE OF MONTANA County of Carfield

Filed in the office of the County Clerk and

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File No.....

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STATE OF MONTANA
ADMINISTRATOR OF GROUNDWATER CODE
OFFICE OF STATE ENGINEER

RECEIVED

## Declaration of Vested Groundwater Right ATE ENGINEER

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| y of                    | Garfi                                                                              | leld                                                                                                                          |                                    |                                                                                                                  | State of Montana 1962 as follows                                                                                                                                                        |
| appropria               | ted g                                                                              | roundw                                                                                                                        | ater acc                           | orang                                                                                                            | to the Montana laws in effect prior to January 1, 1962, as follows:                                                                                                                     |
| 1                       | N .                                                                                |                                                                                                                               |                                    |                                                                                                                  |                                                                                                                                                                                         |
|                         | 1 1                                                                                | ļ                                                                                                                             |                                    | ·2.                                                                                                              | The beneficial use on which the claim is based                                                                                                                                          |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  | Stock Water                                                                                                                                                                             |
|                         |                                                                                    |                                                                                                                               |                                    | 3.                                                                                                               | Date or approximate date of earliest beneficial use; and how con-                                                                                                                       |
| <b></b>                 | -                                                                                  |                                                                                                                               | .                                  | •                                                                                                                | tinuous the use has been November. 1957.                                                                                                                                                |
| <u> </u>                |                                                                                    |                                                                                                                               |                                    |                                                                                                                  | continuous                                                                                                                                                                              |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  |                                                                                                                                                                                         |
| <del></del>             | 1-1                                                                                |                                                                                                                               |                                    | 4.                                                                                                               | The amount of groundwater claimed (in miner's inches or gallons                                                                                                                         |
| -                       | ·  -                                                                               |                                                                                                                               | -}                                 |                                                                                                                  | per minute) 7 gallons                                                                                                                                                                   |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  |                                                                                                                                                                                         |
|                         |                                                                                    |                                                                                                                               |                                    | 5                                                                                                                | If used for irrigation, give the acreage and description of the lands                                                                                                                   |
|                         | 4                                                                                  |                                                                                                                               |                                    | ٠.                                                                                                               | to which water has been applied and name of the owner thereof                                                                                                                           |
|                         |                                                                                    |                                                                                                                               | _                                  |                                                                                                                  | None                                                                                                                                                                                    |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  |                                                                                                                                                                                         |
| point of                | appro                                                                              | priatio                                                                                                                       | n                                  |                                                                                                                  | · · · · · · · · · · · · · · · · · · ·                                                                                                                                                   |
| e of use.               | . II                                                                               | possible                                                                                                                      | e.                                 | <b>5</b> .                                                                                                       | The means of standawing such water from the ground and the                                                                                                                              |
| n square                | repre                                                                              | 30400 2                                                                                                                       |                                    |                                                                                                                  | location of each well or other means of withdrawal                                                                                                                                      |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  | Blectrie Base and Pump Jack                                                                                                                                                             |
| ras it m                | ay be<br>withd                                                                     | availa<br>rawal                                                                                                               | ble, the                           | type,                                                                                                            | size and depth of each well or the general specifications of any other 141 feet deep                                                                                                    |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  | 141 Leaf deab                                                                                                                                                                           |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  | ***************************************                                                                                                                                                 |
|                         | **********                                                                         |                                                                                                                               |                                    |                                                                                                                  | ***************************************                                                                                                                                                 |
| estimated               | amou                                                                               | int of                                                                                                                        | groundw                            | ater w                                                                                                           | ithdrawn each year 600,000 gallons                                                                                                                                                      |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  | e drilling of each well if available                                                                                                                                                    |
| tog or ror              |                                                                                    |                                                                                                                               | not ha                             |                                                                                                                  | TAR                                                                                                                                                                                     |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  | ± <b>~5</b>                                                                                                                                                                             |
|                         |                                                                                    |                                                                                                                               |                                    |                                                                                                                  |                                                                                                                                                                                         |
|                         | ormat                                                                              | ion of                                                                                                                        | a simila<br>of any                 | r natui                                                                                                          | e as may be useful in carrying out the policy of this act, including                                                                                                                    |
| other inf               | ormat                                                                              | ion of                                                                                                                        | a simila<br>of any                 | r natui                                                                                                          | e as may be useful in carrying out the policy of this act, including                                                                                                                    |
| other inf               | ormat                                                                              | ion of                                                                                                                        | a similar                          | r natui                                                                                                          | re as may be useful in carrying out the policy of this act, including record.                                                                                                           |
| other inf               | ormat                                                                              | ion of<br>id page                                                                                                             | a simila<br>of any                 | r natui                                                                                                          | re as may be useful in carrying out the policy of this act, including record.                                                                                                           |
| other inf               | ook an                                                                             | nd page                                                                                                                       | of any                             | r natur                                                                                                          | Signature of Owner Date 27, 1963                                                                                                                                                        |
| other inf<br>ence to be | ook an                                                                             | d page                                                                                                                        | e owner                            | r nature county                                                                                                  | e as may be useful in carrying out the policy of this act, including                                                                                                                    |
|                         | oint of use of use all square late of coal of groundlepth of ras it may be for the | oint of appropriate of use, if a square representations of groundward and the state of the water as it may be a for the withd | ate of commencement of groundwater | point of appropriation of use, if possible. Il square represents 10 late of commencement and coal of groundwater | ate of commencement and completical of groundwater. Sevenber. 13  lepth of water table. 126 feet.  r as it may be available, the type, as for the withdrawal of groundwater. 4 casing - |

## 125092

STATE OF MONTANA County of Garfield

Filed in the align of the Centry Clerk and Records: \$\frac{1}{2}\$ County \$\frac{1}{2}\$ to of Montana, this \qquad \text{day of } \frac{1}{2}\$

A D. 1963 Dolock H. &

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GROUNDWATER INDEX

Page \_\_\_\_/of\_\_\_/

County <u>Garfield</u> Twp. 1991 Rge. 386.

|          | V                          | Type of Form | County<br>File No. | Remarks  |
|----------|----------------------------|--------------|--------------------|----------|
| Sec.     | Name of Appropriator       | Type of Torm | 1110 1101          |          |
| le       | Murrian Phelip Fatack      | 4914         | 125423             | <u> </u> |
| 9        | Schrillreff Kaymond & Flan | 4943         | 125399             |          |
| 10       | Delson Ocamay mas          | 1984         | 125407             |          |
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|                                                                      | Approved 5                                               | Stock Form—State Publishing Co., Helena, Montana—42234  T                                               |
|----------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| No                                                                   |                                                          |                                                                                                         |
| PLICATE                                                              | en e                 | County GARFIELD                                                                                         |
|                                                                      | STATE OF MONTA                                           |                                                                                                         |
| •                                                                    | ADMINISTRATOR OF GROUN                                   | DWATER CODE DECEMBE                                                                                     |
|                                                                      | OFFICE OF STATE EN                                       |                                                                                                         |
| Declara                                                              | ition of Vested Gro                                      | undarater Rights 6 1964                                                                                 |
| τ)                                                                   | Under Chapter 237, Montana Se                            | MAN EANS, 1961) STATE ENGINEER                                                                          |
|                                                                      | -                                                        |                                                                                                         |
| PHILIP PATRICK 1                                                     | Margarion of B                                           | (Address)                                                                                               |
|                                                                      |                                                          |                                                                                                         |
| ave appropriated groundwater                                         | r according to the Montana lav                           | vs in effect prior to January 1, 1962 as follows:                                                       |
| N                                                                    |                                                          |                                                                                                         |
|                                                                      |                                                          | on which the claim is based LULES TOCK                                                                  |
|                                                                      |                                                          | <u> </u>                                                                                                |
|                                                                      | 3. Date or approxim                                      | ate date of earliest beneficial use; and how continu-                                                   |
|                                                                      | ous the use has b                                        | een /75.8                                                                                               |
|                                                                      | E                                                        |                                                                                                         |
|                                                                      | 4. The amount of                                         | groundwater claimed (in miner's inches or gallons                                                       |
|                                                                      | 16.3 per minute)                                         | GALLANS PER MINUTE                                                                                      |
| K No.E.                                                              |                                                          |                                                                                                         |
| X                                                                    | 5. If used for irriga                                    | ation, give the acreage and description of the lands has been applied and name of the comparate thereof |
|                                                                      | NOT 1                                                    | has been applied and name of the office thereof                                                         |
| 4 Sec 6 T/9 R 38                                                     |                                                          | transferrations ( )                                                                                     |
| dicate point of appropriation                                        | <b>1</b>                                                 |                                                                                                         |
| d place of use, if possible. Each<br>all square represents 10 acres. | 6. The means of wit                                      | thdrawing such water from the ground and the loca-                                                      |
|                                                                      | tion of each well                                        | or other means of withdrawal Pumps.                                                                     |
|                                                                      | #\##\#################################                   | <u> </u>                                                                                                |
| . The date of commencement                                           | and completion of the construc                           | tion of the well, wells, or other works for with-                                                       |
| drawal of groundwater!                                               | UNS ON LAND                                              | WHEN PURCHASED                                                                                          |
|                                                                      |                                                          |                                                                                                         |
| The depth of water table                                             | 13 FT.                                                   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                                                                 |
| ). So far as it may be availab                                       | ale, the type, size and denth of                         | each well or the general specifications of any other                                                    |
| works for the withdrawal of                                          | groundwater WELLS                                        | NO.2. + NO. 3. SHALLOW                                                                                  |
| 1111 V 406 4                                                         | <u> </u>                                                 | DRILLED, 4 INCH. CASING.                                                                                |
| \\\\\\\\\\\                                                          |                                                          |                                                                                                         |
|                                                                      | ,,                                                       | //                                                                                                      |
| ,.,,,.,,.,.,.,.,,,,,,,,,,,,,,,,,,,,,,,                               | oundwater withdrawn each year.                           | HAVE NOT USED.                                                                                          |
| . The estimated amount of gre                                        |                                                          |                                                                                                         |
|                                                                      | ntered in the drilling of each we                        | il if available NOT AUAILABLE.                                                                          |
|                                                                      | ntered in the drilling of each we                        | ll if available NOT AVAILABLE,                                                                          |
|                                                                      | ntered in the drilling of each we                        | il if available NOT AVAILIBLE.                                                                          |
| . The log of formations encour                                       |                                                          |                                                                                                         |
| The log of formations encour                                         | a similar nature as may be usef                          | ul in carrying out the policy of this met, including                                                    |
| The log of formations encour                                         | a similar nature as may be useft<br>of any county record |                                                                                                         |
| The log of formations encour                                         | a similar nature as may be useft<br>of any county record | ul in carrying out the policy of this set, including                                                    |
| . The log of formations encour                                       | a similar nature as may be usef<br>of any county record  | ul in carrying out the policy of this set, including                                                    |
| . The log of formations encour                                       | a similar nature as may be usef<br>of any county record  | ul in carrying out the policy of this set, including                                                    |

Three copies to be filed by the owner with the County Clerk and Description which the well is located.

Please answer all questions. If not applicable, so state, otherwise form will be meturued.

Original to the County Clerk and Recorder; Duplicate to the Shanto Engineer; Triplicate to the Montana Bureau of Mines and Geology, and Quadruplicate for the Appropriator.

STATE OF MONTANA County of Garfield

Filed in the office of an

File No. County Garfield DÜPLICATE STATE OF MONTANA
ADMINISTRATOR OF GROUNDWATER CODE

JAN 6 1964 Notice of Completion of Groundwater Appropriation Without Well NEER (Under Chapter 237 Montana Session Laws, 1961) Date of Appropriation of Groundwater No. / scool Raymands and Forn State States Contractor (if any) Address of Contract Mate Started Date Completed. Before means of obtaining groundwater without a wateh when applicable.... of which weloped and used with explanation of mether estimate such amount. If use is intermittent estimate approximate lengths of periods of use ..

This form to be wellered by contractor (if any), otherwise by the owner.

Indicate point of and and place of use, if m

Three copies of this notion are to be filed with the County Clerk and Recorder of the county in which the works are located.

Signature of Owner Fern E.

Yearly for Stock water.

Please answer all questions. If not applicable, so state, otherwise the form will be returned.

Original to the County Clerk and Recorder; duplicate to the State Engineer; Triplicate to the School of Mines and Quadruplicate for the Appropriator.

125399

STATE OF MONTANA
County of Garrield

Filed in the office of the County Clerk and Recorder of Gattle of County. State of Montano.

A. D. 19. 6.7 of [O] o'clock 0 \_\_\_\_\_

County Clerk and Recorder

7.0 Paid # 2

MONTH CELL