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WATER RESOURCES DIVISION

STATE OF OREGON SALEM, OREGON
WATER RESOURCES DEPARTMENT

**SURFACE WATER REGISTRATION STATEMENT
PRE-1909 VESTED WATER RIGHT CLAIM**

1. Name of Registrant: SCOTT RIDLE
Mailing Address: P. O. Box 176
Bandon, Oregon 97411 Telephone No: 503/347-4181

2. Source of water: Cut Creek
Tributary to: Pacific Ocean

3. Purpose(s) for which water is used: Mining
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: _____

4. Priority Date
a) Date of first use: July 29, 1867
b) Date water use development first initiated: pre-7/29/1867
c) Name of party who initiated development: Eagle Mining Company

5. Amount of water claimed: 300 GPM
(Water put to beneficial use)

6. Location of place of use:
18 & 33 Sections, Township 27 S, Range 14 W.
____ Sections, Township ____ N/S, Range ____ E/W.
(Attach additional pages if necessary)

7. Usual period of use: Jan / 1 to Dec / 31
month day month day

8. Remarks: Scott Riddle can provide proof
of usage since before 1909 to the present.
Documents will be provided on request
Scott Riddle, P.O. Box 176, Bandon, Ore. 97411

9. Total fees submitted with claim: \$200

Notarized Statement Signed by Claimant.

STATE OF OREGON)
) : ss
County of Coos)

I, Scott W. Riddle, having been duly sworn,
depose and say that I, and being the claimant of the existing surface
water right described herein, have read the contents of this claim and
to the best of my knowledge all of the matters stated herein
are true and correct.

Scott W. Riddle
Signature of Claimant

Signed and attested before me this 10th day of December, 1992

Jamela Evans
NOTARY PUBLIC for the State of Oregon
My commission expires: 3/19/94

**THIS FORM MUST BE ACCOMPANIED BY A MAP PREPARED BY A
CERTIFIED WATER RIGHT EXAMINER (CWRE).**

Certified Water Right Examiner

Name: JAMES F. GOSSON CWRE#: 54

Address: 580 S. State St., Sutherlin, Oregon 97479

Telephone: 503/459-2243