

RECEIVED

DEC 18 1992

WATER RESOURCES DEPT.  
SALEM, OREGON

STATE OF OREGON  
WATER RESOURCES DEPARTMENT

SURFACE WATER REGISTRATION STATEMENT  
PRE-1909 VESTED WATER RIGHT CLAIM

1. Name of Registrant: Milton P. Smith  
Mailing Address: P.O. Box 6, Langlois, Or 97450  
Telephone No: 348-2219

2. Source of water: Butte Creek and unnamed stream  
Tributary to: Butte Creek

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

4. Priority Date  
a) Date of first use: July 3, 1902  
b) Date water use development first initiated: up to 5 years prior to (a)  
c) Name of party who initiated development: Wallace F. Pomeroy

5. Amount of water claimed: 0.005 CFS, in CFS or GPM  
(Water put to beneficial use)

6. Location of place of use:  
23, 26 Sections, Township 30s N/S, Range 15E E/W.  
\_\_\_\_ Sections, Township \_\_\_\_ N/S, Range \_\_\_\_ E/W.  
(Attach additional pages if necessary)

7. Usual period of use: Jan / 01 to Dec / 31  
month day month day

8. Remarks: Use of 0.005 cfs on both sources

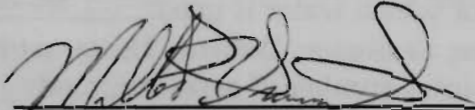
Documents inclosed: Statement by Dorothy Brown Doane, Lois B Smith, Milton P. Smith, Steve Anderson, copies deeds, tax assessments from County Clerk records.

9. Total fees submitted with claim: \$200.00

Notarized Statement Signed by Claimant.

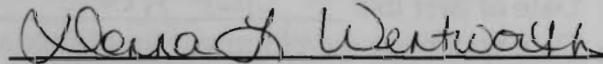
STATE OF OREGON )  
 )  
County of Curry ) : ss

I, Milton P. Smith, 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.



Signature of Claimant

Signed and attested before me this 9th day of December, 1992



NOTARY PUBLIC for the State of Oregon

My commission expires: 1/21/94

**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#: 054

Address: 580 So. State St. Sutherlin, OR 97479

Telephone: (503) 459-2243