

DFC 2-1992

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: Russell N. Heller  
Mailing Address: P. O. Box 855  
Coquille, OR 97423 Telephone No: (503) 572-3730

2. Source of water: Cherry Creek  
Tributary to: Coquille River

3. Purpose(s) for which water is used: Irrigation, Stockwater, Domestic  
*(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)*  
If irrigation, total number of acres irrigated: 30 total acres

4. Priority Date  
a) Date of first use: October 1869  
b) Date water use development first initiated: October 1869  
c) Name of party who initiated development: Louis Heller

5. Amount of water claimed: listed below, in CFS or GPM  
*(Water put to beneficial use)*  
Domestic 0.01 CFS Stockwater 0.002 CFS Field Irrigation 0.0125 CFS

6. Location of place of use:  
27 Sections, Township 27 N/S, Range 11 E/W.  
Lot Numbers 8, 9, 15, 16  
       Sections, Township        N/S, Range        E/W.  
*(Attach additional pages if necessary)*

7. Usual period of use: 1 / 1 to 12 / 31 Domestic Use  
month day month day  
1 / 1 to 12 / 31 Stockwater Use  
4 / 15 to 10 / 15 Field Irrigation Use

8. Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Total fees submitted with claim: \$ 460.00 Breakdown below \_\_\_\_\_

\$ 200.00 Domestic Use \$ 200.00 Stockwater Use \$ 60.00 30 Acres Irrigation Use

Notarized Statement Signed by Claimant.

STATE OF OREGON )  
 ) : ss  
County of Coos )

I, Russell W. Heller, 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.

Russell W. Heller  
Signature of Claimant

Signed and attested before me this 27th day of November, 19 92

Betty L. Penklay  
NOTARY PUBLIC for the State of Oregon  
My commission expires: 2-05-93

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

Certified Water Right Examiner

Name: Forrest J. Hales CWRE#: 059

Address: 1490 N. Ivy Str. Coquille, OR 97423

Telephone: (503) 396-2596