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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: A.W. Sweet  
Mailing Address: 1381 Bayview, North Bend,  
Oregon 97459 Telephone No: 756-4250
2. Source of water: Elk River and its tributaries  
~~Tributary to:~~ Camp Creek and Bull Creek as  
marked in Orange on the attached map.
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: December 6, 1876
  - b) Date water use development first initiated: \_\_\_\_\_
  - c) Name of party who initiated development: Joseph Nay
5. Amount of water claimed: 0.10 CFS, in CFS or GPM  
(Water put to beneficial use)
6. Location of place of use:  
16, 17, 20, 21 Sections, Township 32 N/S, Range 15 E/W  
\_\_\_\_ Sections, Township \_\_\_\_ N/S, Range \_\_\_\_ E/W.  
(Attach additional pages if necessary)
7. Usual period of use: all year  
\_\_\_\_ month \_\_\_\_ day \_\_\_\_ month \_\_\_\_ day

8. Remarks: Proof of use will be presented at the  
Adjudication Hearing and will include  
deeds of record, personal property, tax records  
of Curry County, showing payments on livestock,  
and the like

9. Total fees submitted with claim: \$ 200.00

Notarized Statement Signed by Claimant.

STATE OF OREGON )  
County of Coos ) : ss

I, A. H. Sweet, 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.

A. H. Sweet  
Signature of Claimant

Signed and attested before me this 21st day of Dec., 19 92

Linda Pomesil  
NOTARY PUBLIC for the State of Oregon  
My commission expires: Dec 5, 1994



**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, Coquille, Or. 97423

Telephone: 396-2596