RECEIVED

DEC 2 4 1992

WATER RESOUR LO DEPT. SALEM, OREGON

STATE OF OREGON WATER RESOURCES DEPARTMENT

SURFACE WATER REGISTRATION STATEMENT PRE-1909 VESTED WATER RIGHT CLAIM

1.	Name of Registrant: James I and Charlotte M. Pearce
	Mailing Address: HC 84 Box 10223 Broadbent, Oregon 97414-970
	Telephone No: <u>(503) 572-56</u> 97
2.	Source of water:South Fork of the Coquille Tributary to:Coquille River
	Purpose(s) for which water is used: <u>Domestic and stock watering</u> (Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.) If irrigation, total number of acres irrigated:
4.	Priority Date a) Date of first use:
5.	Amount of water claimed:, in CFS or GPM (Water put to beneficial use)
6.	Location of place of use: Sections, Township N/S, Range E/W.
	Sections, Township N/S, Range E/W. (Attach additional pages if necessary)
7.	Usual period of use: April / 1 to Nov. / 30 month day month day

8. Remarks: we are submitting documents as evidence; abstract of deed to land dating from 1859; notarized letters from individuals who personally knew people living, here since 1910; exerts from historical recollections; county tax records 9. Total fees submitted with claim: \$400.00 (Four-hundred dollars) Notarized Statement Signed by Claimant. STATE OF OREGON. ; ss County of Makion ; ss County of Makion ; ss County of Makion ; ss County of 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 24th day of December 19 92 Amaga Jaunafau NOTARY PUBLIC for the State of Oregon My commission expires: 11-19 43 Commission expires: 11-19 43 Certified Water Right Examiner Name: Boyd W. Peterson CWRE#: 328 Address: Coquille, Oregon 97423 Telephone: (503) 396-3766	
of deed to land dating from 1959; notarized letters from individuals who personally knew people living here since 1910; exerts from historical recollections; county tax records. 9. Total fees submitted with claim: \$400,00 (Four-hundred dollars) Notarized Statement Signed by Claimant. STATE OF OREGON.) County of Marion Secondary Sec	
Notarized Statement Signed by Claimant. STATE OF OREGON County of Malon Land Heterscord Linder Unality M. 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. Clause M. Parce Signature of Claimant Signed and attested before me this 24th day of Allember, 19 92 Amag Saundau NOTARY PUBLIC for the State of Oregon My commission expires: //-19 12 THIS FORM MUST BE ACCOMPANIED BY A MAP PREPARED BY A CERTIFIED WATER RIGHT EXAMINER (CWRE). Certified Water Right Examiner Name: Boyd W. Peterson CWRE#: 328 Address: Coquille, Oregon 97423	of deed to land dating from 1859; notarized letters from individuals who personally knew people living here since 1910;
STATE OF OREGON. Secontry of Marion Lond Determined I, James I. Raws + Charlotte M. 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 24th day of December, 19 92 Signature of Claimant NOTARY PUBLIC for the State of Oregon My commission expires: 11-19-13 THIS FORM MUST BE ACCOMPANIED BY A MAP PREPARED BY A CERTIFIED WATER RIGHT EXAMINER (CWRE). Certified Water Right Examiner Name: Boyd W. Peterson CWRE#: 328 Address: Coquille, Oregon 97423	9. Total fees submitted with claim: \$400,00 (Four-hundred dollars)
County of Marion: I, James I. Pares I. Charlette M. 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. Linda Games I. Consider the contents of this claim and to the best of my knowledge all of the matters stated herein are true and correct. Linda Gawes Low Signature of Claimant Signed and attested before me this 24th day of December 19 92 Amda Jawrylow NOTARY PUBLIC for the State of Oregon My commission expires: 11-19-33 THIS FORM MUST BE ACCOMPANIED BY A MAP PREPARED BY A GERTIFIED WATER RIGHT EXAMINER (CWRE). Certified Water Right Examiner Name: Boyd W. Peterson CWRE#: 328 Address: Coguille, Oregon 97423	Notarized Statement Signed by Claimant.
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. Linda Gamerican Signature of Claimant Signed and attested before me this 24th day of December, 19 92 Signature of Claimant Signed and attested before me this 24th day of December, 19 92 MOTARY PUBLIC for the State of Oregon My commission expires: 11-19-92 THIS FORM MUST BE ACCOMPANIED BY A MAP PREPARED BY A CERTIFIED WATER RIGHT EXAMINER (CWRE). Certified Water Right Examiner Name: Boyd W. Peterson CWRE#: 328 Address: Coquille, Oregon 97423	
Signed and attested before me this 24th day of Olember, 19 92 Amage Lawrylow NOTARY PUBLIC OREGON NOTARY PUBLIC for the State of Oregon My commission expires: 1/-19-93 THIS FORM MUST BE ACCOMPANIED BY A MAP PREPARED BY A CERTIFIED WATER RIGHT EXAMINER (CWRE). Certified Water Right Examiner Name: Boyd W. Peterson CWRE#: 328 Address: Coquille, Oregon 97423	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. Charlotte M. Pearre
CERTIFIED WATER RIGHT EXAMINER (CWRE). Certified Water Right Examiner Name: Boyd W. Peterson CWRE#: 328 Address: Coquille, Oregon 97423	Signed and attested before me this 24th day of <u>Olcember</u> , 19 <u>92</u> OFFICIAL SEAL NOTARY PUBLIC for the State of Oregon My commission expires:
Name: Boyd W. Peterson CWRE#: 328 Address: Coquille, Oregon 97423	
Address: Coquille, Oregon 97423	Certified Water Right Examiner
	Name: Boyd W. Peterson CWRE#: 328
Telephone:(503)396=3766	Address: Coquille, Oregon 97423
	Telephone: <u>(503)</u> 396=3766