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WATER RESOURCES DEPT.
SALEM, OREGON

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SALEM, OREGON

STATE OF OREGON
WATER RESOURCES DEPARTMENT

SURFACE WATER REGISTRATION STATEMENT
PRE-1909 VESTED WATER RIGHT CLAIM

1. Name of Registrant: ~~ANN KEEPER~~ JAMES MALLOY
Mailing Address: 1455 Hwy 95 N. Jordan Valley ORE. 97910
Telephone No: (503) 586-2697

2. Source of water: SUCCOR CREEK
Tributary to: SNAKE RIVER

3. Purpose(s) for which water is used: IRRIGATION, STOCKWATER
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: 36.7 ACRES.

1921 = 74
572 = 243
274

4. Priority Date
a) Date of first use: 1885
b) Date water use development first initiated: 1885
c) Name of party who initiated development: JAMES MALLOY

5. Amount of water claimed: 412 GPM, in CFS or GPM
(Water put to beneficial use)

GPM 11.22 x # of ac
C.F.S. 1/40 x # of ac

6. Location of place of use:
13, 12, 11 Sections, Township 27 N/S, Range 47 E/W.
Sections, Township N/S, Range E/W.
(Attach additional pages if necessary)

7. Usual period of use: 4 / 1 / 1 to 9 / 1 / 1 IRRIGATION
month day month day
12 / 1 To 12 / 1 - STOCKWATER.

8. Remarks: _____

9. Total fees submitted with claim: \$ 35.⁰⁰

Notarized Statement Signed by Claimant.

STATE OF ~~OREGON~~ IDAHO)
County of Canyon) : ss

I, Aaron Kasper, 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.

Aaron Kasper
Signature of Claimant



Signed and attested before me this 23rd day of DECEMBER, 19 92

Kitty Gillogly
NOTARY PUBLIC for the State of ~~Oregon~~ IDAHO
My commission expires: 5-98

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

Certified Water Right Examiner
Name: Tom Hanley ^{HANLEY ENGINEERING} CWRE#: 168
Address: 2043 MAIN ST
PO Box 701 BAKER OREGON 97814
Telephone: (503) 523-3803