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WATER RESOURCES DEPARTMENT
SALFORD, OREGON

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

**SURFACE WATER REGISTRATION STATEMENT
PRE-1909 VESTED WATER RIGHT CLAIM**

1. Name of Registrant: R. IMRIE CONN
Mailing Address: 885 FLOURNOY VALLEY RD.
ROSEBURG, OR. 97470 Telephone No: (503) 673-6999

Source of water: SPRING, POND, UNAMED CREEK TO DOERNER CREEK,
Tributary to: CALLAHAN CREEK TO DOERNER CR. TO SANTA VAMPANA RIVER
UMPOVA 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

4. Priority Date
a) Date of first use: FEB 18, 1909
b) Date water use development first initiated: _____
c) Name of party who initiated development: W. P. IMRIE, (CONTINUING)
USERS
ANDREW IMRIE, ROSCOE CONN, DUANE CONN, JAMES CONN,
ROSCOE CONN, R. IMRIE CONN
5. Amount of water claimed: 0.10 CFS - STOCK
0.50 A.F./A. IRR., in CFS or GPM
(Water put to beneficial use)

6. Location of place of use:
11 Sections, Township 27 N/S, Range 7 E/W.
14 Sections, Township 27 N/S, Range 7 E/W.
(Attach additional pages if necessary)

7. Usual period of use: APRIL 1 01 to OCT. 1 20 - IRRIGATION.
month day month day
YEAR AROUND - STOCK WATERING.

8. Remarks: ATTACHED:
a.) AIR PHOTO
b.) DIAGRAM MAP WITH ACRES STATED, TOTAL 317.06
57.50, 57.91, 78.40, 120, 3.25 AC = 317.06

9. Total fees submitted with claim: \$ 272.⁰⁰ (2.⁰⁰ X 36 AC = 72.⁰⁰ + 200.⁰⁰)

Notarized Statement Signed by Claimant.

STATE OF OREGON)
County of Douglas) : ss

I, R. Irvine Carr, 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.

R. Irvine Carr
Signature of Claimant

Signed and attested before me this 24 day of December, 1992

Sherry D. Brint
SHERRY D. BRINT
NOTARY PUBLIC-OREGON
My Commission Expires 11-1-93

Sherry D. Brint
NOTARY PUBLIC for the State of Oregon
My commission expires: 11-1-93

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

Certified Water Right Examiner

Name: Duane W. Kirby CWRE#: 214

Address: 8087 Lookingglass Rd
Roseburg Ore 97470

Telephone: 679-4692