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DEC 29 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: ARNOLD OR MILDRED RANKIN
Mailing Address: 1400 N.W. HARLAN ST.
ROSEBURG OREGON 97470 Telephone No: (503) 672-2187

2. Source of water: SOUTH UMPQUA RIVER
Tributary to: ~~ROSEBURG~~ MAIN UMPQUA

3. Purpose(s) for which water is used: IRRIGATION
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: 6.910

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

5. Amount of water claimed: 0.067 CFS
30 GPM. in CFS or GPM
(Water put to beneficial use)

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

7. Usual period of use: APR / 15 to OCT / 15
month day month day

A MAP AND A CWRE EXAMINER WILL HAVE HIS REPORT COMPLETED DEC 28-92 AND WILL FORWARD

8. Remarks: BECAUSE WE HAVE HAD A GREAT DEAL OF ILLNES IN THE FAMILY I AM SENDING IN THIS FORM NOT FULLY COMPLETED IN ORDER TO HAVE IT ARRIVE BY DUE DATE WILL HAVE THE REQUIRED INFO TO FOLLOW IN A NOT TO LATER PERIOD

9. Total fees submitted with claim: 30⁰⁰

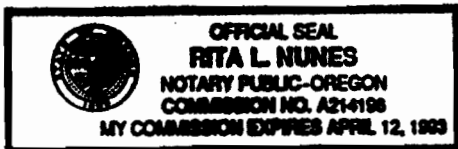
Notarized Statement Signed by Claimant.

STATE OF OREGON)
: ss
County of DOUGLAS)

I, ARNOLD & MILDRED RANKIN, 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.

Arnold or Mildred Rankin
Signature of Claimant

Signed and attested before me this 24 day of DEC., 19 92



Rita L. Nunes
NOTARY PUBLIC for the State of Oregon
My commission expires: 4-12-93

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

Certified Water Right Examiner

Name: MAURICE E. FARR CWRE#: 046

Address: 1960 S.W BURDETTE DRIVE 97470

Telephone: (503) 679 4692