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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: SAMUEL E. CLARK
Mailing Address: H.C. 86 Box 36A Myrtle Point
OREGON 97458 Telephone No: 503-572-2549

2. Source of water: North Fork Coquille River
Tributary to: Coquille River

3. Purpose(s) for which water is used: Domestic; ~~Stock~~ Stockwater ^{Irrigation lawn + garden}
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: _____

4. Priority Date
a) Date of first use: 1907
b) Date water use development first initiated: 1907
c) Name of party who initiated development: Robert Parrish

5. Amount of water claimed: 0.015 cfs, in CFS or GPM
(Water put to beneficial use)

6. Location of place of use:
2 Sections, Township 29 N/S, Range 12 E/W.
____ Sections, Township ____ N/S, Range ____ E/W.
(Attach additional pages if necessary)

7. Usual period of use: year AROUND
month / day to month / day

Said property was used for Domestic & livestock both, Dairying uses a lot of water. For these people to pack water for animals and their families to great effort as does any farming and livelihood it would be impossible without water.

8. Remarks: Wishing to grand father rights to said property
this water was never filed on before, because most of farmers
never thought it to be a problem. Proving water use there will
be more info later. Not very many people to help that
are still alive or can ~~remember~~ remember

9. Total fees submitted with claim: \$ 400⁰⁰

Notarized Statement Signed by Claimant.

STATE OF OREGON)
County of Coos) : ss

I, Samuel E. Clark, 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.

Samuel E. Clark
Signature of Claimant

Signed and attested before me this 28 day of Dec, 19 92

Diane Romines
DIANE ROMINES
NOTARY PUBLIC — OREGON
MY COMMISSION EXPIRES 5-8-94

Diane Romines
NOTARY PUBLIC for the State of Oregon
My commission expires: 5-8-94

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

Certified Water Right Examiner

Name: Harvey Wilcox CWRE#: 142

Address: P.O. Box 118 Coos Bay Or 97420

Telephone: 503-267-2872