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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 Posistrante Contra Black
1. Name of Registrant: Georg Black Mailing Address: 9882 Lek Smith RV RD
Re-deport Or. 97467 Telephone No: 271-3540
2. Source of water: Spring Tributary to: Falick Creek
1 12 1/2 acre Triga
3. Purpose(s) for which water is used: (a) omlake) tockwill
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.) If irrigation, total number of acres irrigated:
I migation, total named of actes migated.
4:10
4. Priority Date a) Date of first use: Detaler 1872
b) Date water use development first initiated: 1672
c) Name of party who initiated development: The 158 beech
0.01 CFS domestiz
5. Amount of water claimed: 120 ogul/day 578cl, in CFS or GPM (Water put to beneficial use)
(water put to beneficial use)
6. Location of place of use:
35 Sections, Township 20 N/S, Range 1/ E/W.
2 6 Sections, Township 20 N/S, Range // E/W.
(Attach additional pages if necessary)
777 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7. Usual period of use: / / / to 12 / 3/ month day month day
month day month day

8. Remarks:	
9. Total fees submitted with cl	laim:
Notarized Statement Signed 1	by Claimant.
STATE OF OREGON)
County of	: ss)
water right described herein,	, having been duly sworn, eing the claimant of the existing surface have read the contents of this claim and all of the matters stated herein
	Signature of Claimant
Signed and attested before me	e this 29 day of Dec, 19 92
OFFICIAL SEAL JOYGE E STUNTZNER NOTARY PUBLIC - OREGON COMMISSION NO. 010731 MY COMMISSION EXPIRES 11/24/95	NOTARY PUBLIC for the State of Oregon My commission expires: ///24/95
THIS FORM MUST BE AC	COMPANIED BY A MAP PREPARED BY A
CERTIFIED WATER RIGH	T EXAMINER (CWRE).
Ce	rtified Water Right Examiner
Na	me: Harvey Wilcox CWRE#: 142
Ad	Inne: Harvey Wilcox CWRE#: 142 Idress: P.O. Box 118 Coos Bay, OR Ilephone: 267-2872
Tel	lephone: 267-2872