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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: MABEL I. MILLER
Mailing Address: 97839 N. Bank Chetco Rd.
Brookings, Cr. 97415 Telephone No: (503) 419-3258

2. Source of water: Unnamed spring
Tributary to: Ferry Creek

3. Purpose(s) for which water is used: Domestic
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: 0

4. Priority Date
 - a) Date of first use: 1870
 - b) Date water use development first initiated: 1870
 - c) Name of party who initiated development: see #8. Remarks

5. Amount of water claimed: 005CFS, in CFS or GPM
(Water put to beneficial use)

6. Location of place of use:
Section 32 Sections, Township 40S N/S, Range 13 E/W. W.M.
See attached copy of deed.
 Sections, Township N/S, Range E/W.
(Attach additional pages if necessary)

7. Usual period of use: Jan / 1 st. to Jan / 1 st.
 month day month day

8. Remarks: When the old house was removed the bedroom walls had been papered with news print some of which were dated 1870. This together with the original patent date of 4/20/1883 to Franklin Johnson from the United States of America, may help establish the use of water from this spring. This patent is part of a 125 page abstract of title.

9. Total fees submitted with claim: Two Hundred Dollars

Notarized Statement Signed by Claimant.

STATE OF OREGON)
) : ss
County of CURRY)

I, Mabel L. Miller, 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.

Mabel L. Miller
Signature of Claimant

Signed and attested before me this 28th day of Dec, 1992



Karrie Bradford
NOTARY PUBLIC for the State of Oregon
My commission expires: 5-3-96

The map enclosed is temporary and
A map from the examiner will follow at a later date.

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

Certified Water Right Examiner

Name: Donald F. Cormac CWRE#: 29

Address: P.O. Box 1280
Brookings, Or 97415

Telephone: 469-3349