

**STATE OF OREGON  
WATER RESOURCES DEPARTMENT**

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

1. Name of Registrant: Joseph Albert Davenport  
Mailing Address: HC 84 Box OC92 (Catching Creek road)  
Myrtle Point, OR 97458 Telephone No: 572-2565
2. Source of water: 1) Catching Creek 2) Davenport Spring  
Tributary to: 1) Coquille River 2) Catching Creek
3. Purpose(s) for which water is used: 1) Stockwater 2) Domestic  
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)  
If irrigation, total number of acres irrigated: \_\_\_\_\_
4. Priority Date  
a) Date of first use: August 21, 1900  
b) Date water use development first initiated: August 21, 1900  
c) Name of party who initiated development: J.A. & Elizabeth E. Davenport
5. Amount of water claimed: 0.025 cfs, in CFS or GPM  
(Water put to beneficial use)
6. Location of place of use:  
19 Sections, Township 29 N (S) Range 12 E (W)  
20 Sections, Township 29 N (S) Range 12 E (W)  
(Attach additional pages if necessary)
7. Usual period of use: 1 / 1 to 12 / 31  
month day month day

8. Remarks: Entire reach of stream as shown on map is claimed  
for watering stock at stream and for water troughs  
and for spring as shown on map

9. Total fees submitted with claim: \$400

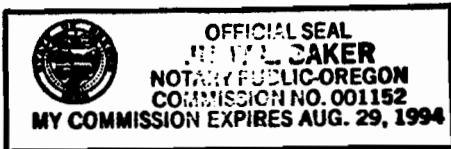
Notarized Statement Signed by Claimant.

STATE OF OREGON )  
 ) : ss  
County of Coos )

I, Joseph Albert Davenport, 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.

Joseph Albert Davenport  
Signature of Claimant

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



Judy L. Baker  
NOTARY PUBLIC for the State of Oregon  
My commission expires: 8-29-94

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

Certified Water Right Examiner

Name: \_\_\_\_\_ CWRE#: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_