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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: JOSEPH ASH ~~XXXXXXXXXXXX~~
Mailing Address: 412 N. HIGHLAND 90036
LOS ANGELES, CALIF. Telephone No: (213) 623-1215

2. Source of water: SOUTH UMPQUA RIVER
Tributary to: UMPQUA RIVER

3. Purpose(s) for which water is used: IRRIGATION - ~~XXXXXXXXXX~~
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: 4.4 ACRES UNDER PERMIT
NO 37353 0.6 CUBIC
FT. PER SECOND

4. Priority Date PRIOR TO
a) Date of first use: 1909 - INVESTIGATING
b) Date water use development first initiated: 1909 PRIOR - INVESTIGATING
c) Name of party who initiated development: BEING CHECKED

5. Amount of water claimed: 0.06, in CFS or GPM
(Water put to beneficial use)
AS LISTED
ON PERMIT
NO 37353

6. Location of place of use:
27 Sections, Township 30 N/S, Range 3 E/W.
____ Sections, Township ____ N/S, Range ____ E/W.
(Attach additional pages if necessary)
COPY ENCLOSED

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

8. Remarks: SIE A COPY OF ENCLOSED
PERMIT NO 37353 FOR ALL INFORMATION
(ADDITIONAL INFORMATION LATER IF
NECESSARY & OPEN CLAIM. ADDITIONAL
INFORMATION & MAP WILL BE SENT LATER.
9. Total fees submitted with claim: \$ 30.00

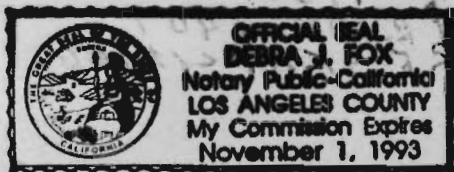
Notarized Statement Signed by Claimant.

STATE OF CALIF)
) : ss
 County of LOS ANGELES)

I, JOSEPH ASH, 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 C. Ash
 Signature of Claimant

Signed and attested before me this 30th day of December, 19 92



Debra J. Fox
 NOTARY PUBLIC for the State of Oregon-California
 My commission expires: November 1, 1993

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

~~JOSEPH ASH~~
~~ENCLOSED PERMIT~~
~~NO 37353~~
 WILL BE FURNISHED LATER

Certified Water Right Examiner
 Name: ~~JOSEPH ASH~~ CWRE#: _____
 Address: _____
 Telephone: _____