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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: Roger E. and Roberta E. Neff
Mailing Address: 11238 Five Mile Rd
Westlake Cr. 97493 Telephone No: (503) 997-1301
2. Source of water: Silver Creek
Tributary to: Fiddle Creek Arm of Siltcoos Lake
3. Purpose(s) for which water is used: Domestic, Stock, and Irrigation
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: Nil
4. Priority Date
a) Date of first use: 1890
b) Date water use development first initiated: Between 1890 + 1900
c) Name of party who initiated development: Benjamin F. Wilkes
5. Amount of water claimed: 50.0 GPM, in CFS or GPM
(Water put to beneficial use)
6. Location of place of use:
5 Sections, Township 20 N/S, Range 11 E/W.
____ Sections, Township ____ N/S, Range ____ E/W.
(Attach additional pages if necessary)
7. Usual period of use: 1 / 11 to 12 / 31
month day month day

8. Remarks: All water presently used for domestic and smoking purposes is obtained through a catch basin on Silver Creek via a cistern and gravity flow to our property (See copy of easement attached.)

9. Total fees submitted with claim \$25.00

Notarized Statement Signed by Claimant.

STATE OF OREGON)
) : ss
County of Lane)

I, Roberta E. Neff, 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.

Roberta E. Neff
Signature of Claimant

Signed and attested before me this 30th day of December, 1992



Linda Stewart
NOTARY PUBLIC for the State of Oregon
My commission expires: 5-9-95

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

Certified Water Right Examiner

Name: _____ CWRE#: _____

Address: _____

Telephone: _____