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DEC 31 1992 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: MARTIN & MARCELLA DAILEY FAMILY TRUST
Mailing Address: <u>22/0/Lower Smith River Road</u> <u>REEDS PORT; ORE GON 97467</u> Telephone No: (503) 271-2534
2. Source of water: UNNAMED STREAM Tributary to: SMITH RIVER
3. Purpose(s) for which water is used: <u>Dom F.STIC INCLUDING YO ACRE LAW PI GARDEN</u> (Irrigation Stockwater Domestic Hydroelectric power Industrial Ftc.) 9 5700KWATERIN
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.) If irrigation, total number of acres irrigated:
4. Priority Date a) Date of first use: 1850's
b) Date water use development first initiated:
c) Name of party who initiated development:
5. Amount of water claimed: O. O / Domestin CFS or GPM
(Water put to beneficial use)
6. Location of place of use:
<u> ろく</u> Sections, Township <u>20</u> 和/S, Range <u>10</u> 多/W. (Attach additional pages if necessary)
7. Usual period of use: / / / to /2 / 3/ month day month day

8. Remarks: Wester	land by print the last River
you as it be	come available.
60.00 fail on Ru	mit H 47917 (A-G5294)
9. Total fees submitted with	
Notarized Statement Signe	ed by Claimant.
STATE OF OREGON)
	: ss
County of Doug LE	15)
are true and correct. Signed and attested before	Signature of Claimant me this 19 day of December, 19 9 1
OT A CL	(promo
NEW COLUMN	NOT ARY PUBLIC for the State of Oregon My commission expires: 1-10-93
	ACCOMPANIED BY A MAP PREPARED BY A
CERTIFIED WATER RIG	GHT EXAMINER (CWRE).
	Certified Water Right Examiner
la i	Name: Harvey Wilcox CWRE#: 142
THE PARTY OF	Name: Harvey Wilcox CWRE#: 142 Address: 3190 N-Lake Rd Lakeside, C
	Telephone: 759-4467