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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**

Cetaldine L. Mercer &

1. Name of Registrant: Thomas H. Mercer
Mailing Address: 495 SHUTTER CREEK RD.
NORTH BEND, OREGON Telephone No: 756-1425

2. Source of water: SPRINGS + Man Made Ditches
Tributary to: Ten Mile Lake

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

4. Priority Date
a) Date of first use: 3/29/1890 + 2/8/1893
b) Date water use development first initiated: 1890
c) Name of party who initiated development: Peter Robertson

5. Amount of water claimed: 0.5, in CFS or GPM
(Water put to beneficial use)

6. Location of place of use:
32 Sections, Township 23 N/S, Range 12 W.
33 Sections, Township 23 N/S, Range 12 W.
(Attach additional pages if necessary)

7. Usual period of use: 1 / 1 / to 12 / 31 /
month day month day

8. Remarks: _____

9. Total fees submitted with claim: \$400.⁰⁰

Notarized Statement Signed by Claimant.

STATE OF OREGON)
County of Coos) : ss

Geraldine L. Mercer
I, Thomas H. Mercer 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.

Geraldine L. Mercer
Thomas H. Mercer
Signature of Claimant

Signed and attested before me this 29 day of December, 19 92

Antonia Hankins
NOTARY PUBLIC for the State of Oregon
My commission expires: 2/14/93

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

Certified Water Right Examiner
Name: _____ CWRE#: _____
Address: _____
Telephone: _____