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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: Robert D & Teresa A Morse
Mailing Address: 85912 Lost Prairie Road
Enterprise OR 97828 Telephone No: (503) 828-7775
2. Source of water: Spring in SE 1/4 of SW 1/4 of Section 31, T6N, R44E
Tributary to: Grande Ronde River via Squaw Creek
3. Purpose(s) for which water is used: Domestic, Stockwater
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: _____
4. Priority Date
 - a) Date of first use: prior to Sept 8, 1891
 - b) Date water use development first initiated: 1915
 - c) Name of party who initiated development: James Cole
5. Amount of water claimed: .016, in CFS or GPM
(Water put to beneficial use)
6. Location of place of use:
31 Sections, Township 6 N/S, Range 44 E/W.
____ Sections, Township ____ N/S, Range ____ E/W.
(Attach additional pages if necessary)
7. Usual period of use: 1 / 1 to 12 / 31 for domestic
month day month day and livestock

8. Remarks: ^① Spring History Document by SD Cole ^② Site report by CWRE #230. ^③ Certified copies of recorded deeds - USA to Fordway, Fordway to Cole, J. Cole to SD Cole, SD Cole to E Roberts, E Roberts to Max Roberts, M. Roberts to R+T Morse. ^④ Color photos of spring, 1911 house, homestead barn ^⑤ ASC aerial photos

9. Total fees submitted with claim: _____

Notarized Statement Signed by Claimant.

STATE OF OREGON)
) : ss
County of Wallowa)

I, Robert D Morse & Teresa A Morse, 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.

Robert D. Morse Teresa A Morse
Signature of Claimant

Signed and attested before me this 28th day of December, 19 92

Sharon Castilleja
NOTARY PUBLIC for the State of Oregon
My commission expires: 10-25-93

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

Certified Water Right Examiner

Name: Ralph W Swineland CWRE#: 230

Address: PO Box 266 Enterprise, OR 97828

Telephone: (503) 426-4085