

JAN 04 1993

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: Elmo Shepherd & Donna Shepherd
Mailing Address: HC 84 Box 4060
Myrtle Point, ORE 97458 Telephone No: 503-592-5252

2. Source of water: Catching Creek
Tributary to: South Fork of Coquille River

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

4. Priority Date
a) Date of first use: 1846
b) Date water use development first initiated: _____
c) Name of party who initiated development: _____

5. Amount of water claimed: 0.01, in CFS or GPM
(Water put to beneficial use)

6. Location of place of use:
25 Sections, Township 29.5 N/S, Range 13W E/W.
26 Sections, Township 29.5 N/S, Range 13W E/W.
(Attach additional pages if necessary)

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

8. Remarks: HISTORICAL SOCIETY PLACES A
TRADING POST FOUNDED BY EPHRAIM CATCHING
IN 1846 ON THIS PROPERTY

9. Total fees submitted with claim: \$200

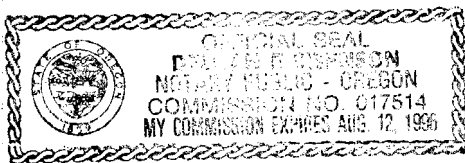
Notarized Statement Signed by Claimant.

STATE OF OREGON)
) : ss
County of Coos)

Donna Shepherd
I, Elmo Shepherd, Donna Shepherd
Elmo Shepherd, 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.

Elmo Shepherd - Donna Shepherd
Signature of Claimant

Signed and attested before me this 30 day of Dec, 1992



David E. Swenson
NOTARY PUBLIC for the State of Oregon
My commission expires: 8-12-96

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

Certified Water Right Examiner

Name: _____ CWRE#: _____

Address: _____

Telephone: _____