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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: MICHAEL J. FLURY & JENNIFER YOUNGBERG
Mailing Address: 14531 S. CLACKAMAS RIVER DRIVE
OREGON CITY, OR 97045 Telephone No: (503) 655-7547

2. Source of water: CLACKAMAS RIVER
Tributary to: WILLAMETTE RIVER

3. Purpose(s) for which water is used: RESIDENTIAL- LAWN & GARDEN IRRIGATION
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: 0.30

4. Priority Date
 - a) Date of first use: 1895
 - b) Date water use development first initiated: SUMMER 1895
 - c) Name of party who initiated development: Alexander Baile

5. Amount of water claimed: 1.68 GPM, in CFS or GPM
(Water put to beneficial use)

6. Location of place of use:
16 Sections, Township 2S N/S, Range 2E E/W.
 Sections, Township N/S, Range E/W.
(Attach additional pages if necessary)

7. Usual period of use: JUNE / 1 to OCT / 1
 month day month day

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8. Remarks: THE HOUSE WAS CONSTRUCTED IN THE SUMMER OF 1895, AND
WAS USED AS A SUMMER CABIN FOR SEVERAL YEARS. THE ORIGINAL
HAS BEEN ADDED ON TO OVER THE YEARS AND REMAINS INTACT AS THE
CORE OF THE EXISTING HOUSE. THE HOUSE HAS BEEN OCCUPIED CON-
TINUOUSLY SINCE 1895. PUMPS HAS BEEN REPLACED AS REQUIRED.

9. Total fees submitted with claim: \$30

Notarized Statement Signed by Claimant.

STATE OF OREGON)
: ss
County of MULTNOMAH)

MICHAEL J. FLURY AND
I, JENNIFER YOUNG BERG, 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.

x [Signature]
Signature of Claimant

Signed and attested before me this 30 day of DECEMBER, 19 92

[Signature]
DAVID A. CHRISTENSEN
NOTARY PUBLIC OREGON
My Commission Expires 8/20/93

[Signature]
NOTARY PUBLIC for the State of Oregon
My commission expires: 8/20/93

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

Certified Water Right Examiner
Name: EDWARD A. CRANE CWRE#: 156
Address: 12042 SE SUNNYSIDE ROAD, SUITE #604
CLACKAMAS, OR 97015
Telephone: (503) 698-4851