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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: Frances White
Mailing Address: 93358 Elk. River Rd
Port Orford OR 97465 Telephone No: 332-4824

2. Source of water: UNNAMED SPRING
Tributary to: ELK RIVER

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

4. Priority Date
a) Date of first use: JUNE, 1907
b) Date water use development first initiated: 1904
c) Name of party who initiated development: George Curry

5. Amount of water claimed: .01 CFS, in CFS or GPM
(Water put to beneficial use)

6. Location of place of use:
28 Sections, Township 32 N (S) Range 15 E (W)
____ Sections, Township ____ N/S, Range ____ E/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: \$200⁰⁰ Rec. # 82013

Notarized Statement Signed by Claimant.

STATE OF OREGON)
) : ss
County of Curry)

I, James White, 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.

James White
Signature of Claimant

Signed and attested before me this 4th day of MARCH, 19 92

Donald E. [Signature]
NOTARY PUBLIC for the State of Oregon
My commission expires: 3-17-92

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

Certified Water Right Examiner

Name: Prahar Surveying CWRE#: 107

Address: 1045 Baltimore #1
BANDON, OR 97411

Telephone: 347-9517