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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: Olivia C. KREUTZER ^{Roseville} Living Trust
Mailing Address: Box 292 Longlais, Ore. 97450
Torwell Kreuter Trust Telephone No: 348-2251

2. Source of water: Willow Creek
Tributary to: Elmer Creek

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

4. Priority Date
a) Date of first use: 1908
b) Date water use development first initiated: 1903
c) Name of party who initiated development: D. J. Kreuter

5. Amount of water claimed: .10 CFS, in CFS or GPM
(Water put to beneficial use)

6. Location of place of use:
Partial 9, 10, 15, 16 Sections, Township 31 N/S, Range 15 E/W.
_____ Sections, Township _____ N/S, Range _____ E/W.
(Attach additional pages if necessary)

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

8. Remarks: Certified Water Map also proof of water use

9. Total fees submitted with claim: \$200.00

Notarized Statement Signed by Claimant.

STATE OF OREGON)
County of Coos) : ss

I, Fowell Kreuter, 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.

Fowell Kreuter
Signature of Claimant

Signed and attested before me this 31st day of December, 19 92

Derna M. Glock
NOTARY PUBLIC for the State of Oregon
My commission expires: 9-11-93

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

Certified Water Right Examiner

Name: _____ CWRE#: _____

Address: _____

Telephone: _____

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MAR - 2 1994

WATER RESOURCES DEPT.
SALEM OREGON

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

**SURFACE WATER REGISTRATION STATEMENT
PRE-1909 VESTED WATER RIGHT CLAIM**

Lowell Joseph Kreutzer, successor trustee of the
Olive C. Kreutzer Revocable Living Trust.

1. Name of Registrant: _____
Mailing Address: P.O. Box 292 Langlois, Ore. 97450
Telephone No: 348-2251

2. Source of water: Willow Creek
Tributary to: Floras Creek

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

4. Priority Date 1908
a) Date of first use: _____
b) Date water use development first initiated: 1908
c) Name of party who initiated development: J.J. Kreutzer

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

6. Location of place of use: in Secs. 9, 10, 15 and
16 Sections, Township 31S N/S, Range 15W E/W.
_____ Sections, Township _____ N/S, Range _____ E/W.
(Attach additional pages if necessary)

7. Usual period of use: Jan. 1 to Dec. 31
month day month day

8. Remarks: Kreutzers pasture on an average 300 sheep,
300 lambs, 50 cattle.

9. Total fees submitted with claim: \$200

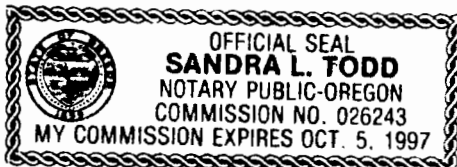
Notarized Statement Signed by Claimant.

STATE OF OREGON)
County of Curry) : ss

I, LOWELL J. KREUTZER, 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.

Lowell J. Kreutzer trustee
Signature of Claimant

Signed and attested before me this 28 day of February, 1994



Sandra L. Todd
NOTARY PUBLIC for the State of Oregon
My commission expires: Oct 5, 1997

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

Certified Water Right Examiner



Name: H. J. Newhouse CWRE#: 95

Address: P.O. Box 360, Wedderburn, Ore. 97491

Telephone: (503) 247-6923