

JAN 05 1993

STATE OF OREGON
SALEM, OREGON

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

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

1. Name of Registrant: Richard L. Heaney
Mailing Address: 325 Gunnell Dr., Coos Bay, Oregon 97420
Telephone No: 269-5909
2. Source of water: Unnamed springs and stream tributary to Catching Sl.
Tributary to: Catching Slough
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: Dec. 1894 for domestic and stockwater
 - b) Date water use development first initiated: Dec. 1894
 - c) Name of party who initiated development: Billy & Mary Blake
5. Amount of water claimed: 15.8 gpm, in CFS or GPM
(Water put to beneficial use)
6. Location of place of use:
5,6 Sections, Township 26 SN/S, Range 12 WE/W.
____ Sections, Township ____ N/S, Range ____ E/W.
(Attach additional pages if necessary)
7. Usual period of use: 12/31 / 1894 to 12/30 / 1992 year around
month day month day

8. Remarks: This water has been used continually for dairy and beef cattle since established as a farm, Bay View Dairy, by the Blakes and later the Gunnells. This water was also used for domestic water, see attached house photo-copy, from 1894 until 1976 when a well was drilled. Livestock watering from these sources continues from 1894 to the present day.

9. Total fees submitted with claim: \$ 200.00

Notarized Statement Signed by Claimant.

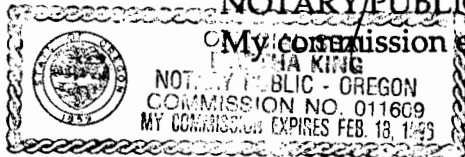
STATE OF OREGON)
County of Coos) : ss

I, _____, 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.

Richard J. Heaney
Signature of Claimant

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

Mark J. King
NOTARY PUBLIC for the State of Oregon
My commission expires: _____



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

Certified Water Right Examiner

Name: _____ CWRE#: _____

Address: _____

Telephone: _____