J/ H @ 5 1003

STATE OF OREGON WATER RESOURCES DEPARTMENT

SURFACE WATER REGISTRATION STATEMENT PRE-1909 VESTED WATER RIGHT CLAIM

Table Tatal
1. Name of Registrant: JosePh w. FeTch Mailing Address: RTM BOY 3432
Mailing Address: RT41 BOY 343 Z- CoRUILLE, Chegon 97423 Telephone No: 503-396-3594
2. Source of water: Unknown Stream Tributary to: Coquille River
3. Purpose(s) for which water is used: Stack water
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.) If irrigation, total number of acres irrigated:
 4. Priority Date a) Date of first use: 1906 b) Date water use development first initiated: 1906 c) Name of party who initiated development: Richardson
5. Amount of water claimed:, in CFS or GPM (Water put to beneficial use)
6. Location of place of use:
Sections, TownshipN/S, RangeE/W. (Attach additional pages if necessary)
7. Usual period of use: fant / to Rec. / 3/ month day month day

8. Remarks:		
o. Remarks.		
9. Total fees submitted v	vith claim:#	2000
Notarized Statement Sig	gned by Claimant.	
STATE OF OREGON)	
County of Cook	: ss	
I, Fose M M F depose and say that I, a water right described he to the best of my knowl are true and correct. Signed and attested before	erein, have read the coredge all of the matters Signature of C	ntents of this claim and
	NOTARYPU	BLIC for the State of Oregon
	My commissi	on expires: 2-20-94
THIS FORM MUST BI CERTIFIED WATER R		Y A MAP PREPARED BY A CWRE).
	Certified Water Righ	nt Examiner
	Name:	CWRE#:
	Address:	