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STATE OF OREGON WATER RESOURCES DEPARTMENT

SURFACE WATER REGISTRATION STATEMENT PRE-1909 VESTED WATER RIGHT CLAIM

1. Name of Registrant: WILBUR L. JENSEN/ Mailing Address: 1650 N, 15 TH Coos Bry OR 97420 Telephone No: 503-269-146
2. Source of water: 6 UNNAMED STREAMS Tributary to: PALOUSE CREEK
3. Purpose(s) for which water is used:
4. Priority Date a) Date of first use: Oct. 19, 1893 : New 18, 1881 b) Date water use development first initiated: Same As news c) Name of party who initiated development: Toller (Water put to beneficial use)
6. Location of place of use: (2) 13 Sections, Township 24 N/S, Range 13 E/W (LOUT. LET 1)
(Attach additional pages if necessary)
7. Usual period of use: JAN / 1 to DEC / 31 month day month day

8. Remarks: ALL OF THE WATIER IS CLAIMED SINCE
SPRING SOURCES TO DRY UP. HISTORICAL RELORDS
AND TAX SMIRNENTS TO FOLLOW.
9. Total fees submitted with claim: #200 —
Notarized Statement Signed by Claimant.
STATE OF OREGON)
: ss County of
I, <u>Wilbur L. Jensen</u> , 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.
Signature of Claimant
Signature of Claimant Signed and attested before me this 29th day of Dec , 1992 Super Stuffe
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:
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