VATER RUSC SALEM, Formal

STATE OF OREGON WATER RESOURCES DEPARTMENT

SURFACE WATER REGISTRATION STATEMENT PRE-1909 VESTED WATER RIGHT CLAIM

1. Name of Registrant: GLAdys E. MATTOS Mailing Address: 635 ALGER ST. MYRTLE POINT, OR 97458 Telephone No: 572-5046	
2. Source of water: South Fork Coquille River & Surface Tributary to: South FORK Coquille River	E WATER
3. Purpose(s) for which water is used: STOCKWATER, DOMESTIC (Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.) If irrigation, total number of acres irrigated:	
4. Priority Date a) Date of first use: PRE 1909 b) Date water use development first initiated: PRE 1909 c) Name of party who initiated development: PETER WIES	
5. Amount of water claimed: , 0/5 , in CFS or GPM (Water put to beneficial use)	•
6. Location of place of use:	
Sections, Township 29 N(S)Range 12 E(W) (Attach additional pages if necessary)	
7. Usual period of use: / / / to /2 / 3/ month day month day	

8. Remarks: <u>HAUE</u> <u>MARCH 30</u> 1883	ORIGINAL ABSTRACT OF TITLE NO. 8113 DATED 2, FILED JUNE 21, 1900, BOOK 33 DEEDS, 30
9. Total fees submitted	d with claim: 400.
Notarized Statement	Signed by Claimant.
STATE OF OREGON	ı)
County of	305 : ss
county of	
are true and correct.	wledge all of the matters stated herein Hladys E. Mellos Signature of Claimant
NOTARY *	efore me this 30 th day of <u>December</u> , 19 <u>93</u> NOTARY PUBLIC for the State of Oregon My commission expires: 3-14-93
	BE ACCOMPANIED BY A MAP PREPARED BY A R RIGHT EXAMINER (CWRE).
	Certified Water Right Examiner
	Name:CWRE#:
	Address:
	Telephone:
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