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WATER RESOURCES DOUGLAS COUNTY, OR

STATE OF OREGON WATER RESOURCES DEPARTMENT

SURFACE WATER REGISTRATION STATEMENT PRE-1909 VESTED WATER RIGHT CLAIM

JAN 0 5 1993

| 1 Name of Projections: Love Rock Timber Co SALEM, OREGON |
|--|
| 1. Name of Registrant: Lone Rock Timber Co Mailing Address: PO Box 1127 Roseburg OR 97470 Telephone No: 673-0141 |
| Mailing Address: 100 180x 1127 |
| Roseburg OR 97970 Telephone No: 673-0171 |
| and the state of t |
| 2. Source of water: North Umpqua River Tributary to: Umpqua River |
| Indutary to: umpqua Kiver |
| |
| 3. Purpose(s) for which water is used: |
| (Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.) |
| If irrigation, total number of acres irrigated: |
| |
| |
| 4. Priority Date |
| a) Date of first use: 1895 |
| Di Dale Waler use developinent mist intrated. |
| c) Name of party who initiated development: R STory Sheridan |
| 5. Amount of water claimed: 18 galling, in CFS or GPM |
| (Water put to beneficial use) |
| (Water partie beneficial step |
| 6. Location of place of use: |
| 18 Sections, Township 26 X/S, Range 3 X/W. |
| |
| Sections, Township N/S, Range E/W. |
| (Attach additional pages if necessary) |
| 777 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 7. Usual period of use: 1 / 1 to 12 / 31 month day month day |
| month day month day |

| 3. Remarks: STock | Cultiving To water Troughs and barns from |
|--|--|
| a diversion o | oint now approach to a 2 hp pump on The |
| North Umpqua | River |
| | <u> </u> |
| | 7 90 |
| 7. Total fees submitte | d with claim: |
| | |
| Notarized Statement | Signed by Claimant. |
| STATE OF OREGON | J) |
| Country of Day | : ss |
| County of | <i>y/#-5</i> |
| 0.1 1 5 | |
| | , having been duly sworn, |
| - | I, and being the claimant of the existing surface d herein, have read the contents of this claim and |
| | whedge all of the matters stated herein |
| are true and correct. | wheater an or the matters stated herein |
| | |
| | 111111 |
| | Signature of Claimant Prosident |
| igned and attested be | |
| The same of the sa | Cons & alon |
| | NOTARY PUBLIC for the State of Oregon |
| | My commission expires: 5-8-94 |
| | |
| 21 | |
| | BE ACCOMPANIED BY A MAP PREPARED BY A RIGHT EXAMINER (CWRE). |
| | Certified Water Right Examiner |
| | Name:CWRE#: |
| | Address: |
| | Telephone: |

SAU