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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**

WATER RESOURCES DEPT.  
SALEM, OREGON

CARL W. V

1. Name of Registrant: SUSAN L. MANSDORF  
Mailing Address: 4466 COOS BAY WAGON RD  
ROSELBURG, OREGON 97478 Telephone No: 679-7349

2. Source of water: LOOKINGGLASS CREEK  
Tributary to: South Umpqua

3. Purpose(s) for which water is used: Domestic 1/2 Acre for garden  
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)  
If irrigation, total number of acres irrigated: \_\_\_\_\_

4. Priority Date  
a) Date of first use: November 4, 1881  
b) Date water use development first initiated: Nov. 4, 1881  
c) Name of party who initiated development: Joseph Jones

5. Amount of water claimed: 0.01, in CFS or GPM  
(Water put to beneficial use)

6. Location of place of use:  
32 Sections, Township 27 N (S) Range 7 E (W)  
\_\_\_\_ Sections, Township \_\_\_\_ N/S, Range \_\_\_\_ E/W.  
(Attach additional pages if necessary)

7. Usual period of use: Jan. 1 1 to Dec. 1 31  
month day month day

8. Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Total fees submitted with claim: \$ 200.00

Notarized Statement Signed by Claimant.

STATE OF OREGON )  
: ss  
County of \_\_\_\_\_ )

I, Susan L. MANSDORF, 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.

Susan L. Mansdorf  
Signature of Claimant

Signed and attested before me this 31 day of Dec, 19 92

[Signature]  
NOTARY PUBLIC for the State of Oregon  
My commission expires: 11/12/94

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

Certified Water Right Examiner

Name: Dwane W. Kirby CWRE#: 214

Address: 8087 Lookingglass Rd  
Roseburg, Oregon 97470

Telephone: 679-4692