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WATER RESOURCES DEPT.
SALEM, OREGON

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

**SURFACE WATER REGISTRATION STATEMENT
PRE-1909 VESTED WATER RIGHT CLAIM**

1. Name of Registrant: CHARLES D. JEFFERS
Mailing Address: 1299 Haynes Way, North Bend, Or. 97459
Telephone No: 756 6219
2. Source of water: THREE SPRINGS
Tributary to: PALOUSE CREEK
3. Purpose(s) for which water is used: DOMESTIC AND LIVESTOCK
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: _____
4. Priority Date
a) Date of first use: SEE REMARKS
b) Date water use development first initiated: SEE REMARKS
c) Name of party who initiated development: CYRENUS SANFORD
5. Amount of water claimed: 0.03 cfs, in CFS or GPM
(Water put to beneficial use)
6. Location of place of use:
9 Sections, Township 24 N/S, Range 12 E/W.
____ Sections, Township ____ N/S, Range ____ E/W.
(Attach additional pages if necessary)
7. Usual period of use: Jan 1 / 1 to Dec. / 31
month day month day

8. Remarks: ITEM 4. COOS COUNTY RECORDS FOR TAXES WILL NOT BE AVAILABLE
UNTIL JANUARY. AS SOON AS THE RECORDS ARE AVAILABLE I WILL
OBTAIN THE INFORMATION AND SEND IT TO YOUR DEPT..

9. Total fees submitted with claim: \$ ~~365.00~~ 400.00

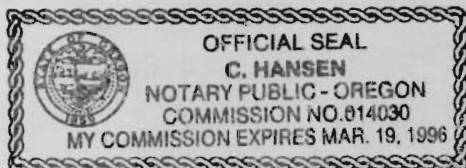
Notarized Statement Signed by Claimant.

STATE OF OREGON)
County of COOS) : ss

I, Charles D. Jeffers, having been duly sworn,
depone 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.

Charles D. Jeffers
Signature of Claimant

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



C. Hansen
NOTARY PUBLIC for the State of Oregon
My commission expires: 3-19-96

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

Certified Water Right Examiner

Name: _____ CWRE#: _____

Address: _____

Telephone: _____