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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: Jerry C Smith  
Mailing Address: HC 86 Box 190-A Myrtle Birt Oregon  
97458 Telephone No: 572-3195

2. Source of water: East Fork  
Tributary to: Coguille River

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

4. Priority Date  
a) Date of first use: 1906  
b) Date water use development first initiated: 1906  
c) Name of party who initiated development: Grove G. Swan

5. Amount of water claimed: 0.005, in CFS or GPM  
(Water put to beneficial use)

6. Location of place of use:  
~~22~~ Sections, Township 28 N/S, Range 11 E/W  
21 Sections, Township 28 N/S, Range 11 E/W  
(Attach additional pages if necessary)

7. Usual period of use: 5 / 1 to 10 / 30  
month day month day

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

9. Total fees submitted with claim: \$ 200.00

Notarized Statement Signed by Claimant.

STATE OF OREGON )  
County of COOS ) : ss

I, Jerry C. Smith, 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.

Jerry C. Smith  
Signature of Claimant

Signed and attested before me this 30 day of Dec, 19 92

Kelley Stof  
NOTARY PUBLIC for the State of Oregon  
My commission expires: 10/7/93

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

Certified Water Right Examiner  
Name: \_\_\_\_\_ CWRE#: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_