Watermasters office Called fooling. Dean gend all correspondence to claiment in care & MARIANNE Kristenser same address. The Pouncey's one Lu folles. Jy/+ 7.7-23

## RECEIVED

JAN 0 5 1993

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: Donald + Eva Pouncey  Mailing Address: 6 P.O. Box 116  Bandon, OR 97411 Telephone No: 347-3870
2. Source of water: Cedar Creek  Tributary to: Copuille River
3. Purpose(s) for which water is used: <u>Irrigation</u> Stockwater (Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)  If irrigation, total number of acres irrigated: <u>28</u>
4. Priority Date  a) Date of first use:  b) Date water use development first initiated:  c) Name of party who initiated development:  CO CO CO A Management of the control
5. Amount of water claimed: 88 GPM, in CFS or GPM (Water put to beneficial use)
6. Location of place of use:
Sections, Township <u>28</u> N/S, Range <u>14</u> E/W.  (Attach additional pages if necessary)
7. Usual period of use: 1 / to 12 / 31 (stock water)
Stockwater, Irrigation 6-1

8. Remarks: Ocigina ) Owners Documents	<del>, ,</del>	
9. Total fees submitted with claim: 25600		
Notarized Statement Signed by Claimant.		
STATE OF OREGON ) : ss County of)		
I, Donal Poun Co & Eva Poun C, having been duly swor depose and say that I, and being the claimant of the exist water right described herein, have read the contents of the to the best of my knowledge all of the matters stated here are true and correct.  Signature of Claimant	ing surface is claim and ein	
Signed and attested before me this 3/5 day of		
THIS FORM MUST BE ACCOMPANIED BY A MAP PREPARED BY A CERTIFIED WATER RIGHT EXAMINER (CWRE).		
Certified Water Right Examine	r	
Name:	CWRE#:	
Address:		
Telephone:		