

JAN 24 1994 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: TONY DOMINGUEZ
	Mailing Address: P. O. Box 295
	Mailing Address: P. O. Box 295  Myrtle Creek, Oregon 97457 Telephone No: 503/863-5938
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2.	Source of water: See Supplemental Sheet
	Tributary to: See Supplemental Sheet
<b>.</b>	Durance (a) ( 1:1 I Impigation democtic and stockwater
3. 1	Purpose(s) for which water is used: <u>Irrigation</u> , <u>domestic and stockwater</u>
1	(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)  If irrigation, total number of acres irrigated: 16.0
1	in inigation, total number of acres inigated.
4.	Priority Date
	a) Date of first use: November 16, 1891
	b) Date water use development first initiated: <u>Unknown</u>
	c) Name of party who initiated development:
5.	Amount of water claimed: 0.208, in CFS or GPM
	(Water put to beneficial use)
6.	Location of place of use:
	34 Sections, Township 28 /S, Range 4 /W.
	Castions Teamship N/C Danse E/M
	Sections, Township N/S, Range E/W.
	(Attach additional pages if necessary)
7	Usual period of use: / to /
, ,	Usual period of use: to / to / month day
	SEE SUPPLEMENTAL SHEET

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8. Remarks: A map prepared by a Certified Water Right Examiner will be submitted upon approval of acceptance of a late filing.
\$72.00 (proviously cont)
9. Total fees submitted with claim: \$72.00 (previously sent)  Receipt #103770 received.
Notarized Statement Signed by Claimant.
STATE OF OREGON )
inable : ss
County of Wolffas )
$ \sim$ .
I, Tony Dominguez, having been duly sworn,
depose and say that 1, 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.
4 0 -
Signature of Claimant
Signatury of Claimant
Signed and attested before me this day of day of , 19 94
Il Pando It Vindled
OFFICIAL SEAL NOTARY PUBLIC for the State of Oregon
My commission expires: 1-1-4-45
COMMISSION NO. COM#011227 My Commission Expires NOV 24,1995
THIS FORM MUST BE ACCOMPANIED BY A MAP PREPARED BY A
CERTIFIED WATER RIGHT EXAMINER (CWRE).
Contified Motor Dight Everning
Certified Water Right Examiner
Name: JAMES F. GOSSON CWRE#: 54
Address: 580 S. State St., Sutherlin, OR 97479
Telephone: 503/459-2243