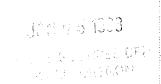
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WAI _____SALEM, OREGON



STATE OF OREGON WATER RESOURCES DEPARTMENT

SURFACE WATER REGISTRATION STATEMENT PRE-1909 VESTED WATER RIGHT CLAIM

1. Name of Registrant: Ray S. and Bessie Waterman
Mailing Address: Route 1 Box 1675
Bandon, Oregon 97411 Telephone No: 347_3446
2. Source of water: See Attachment
Tributary to: See Attachment
3. Purpose(s) for which water is used: <u>See Attachment</u>
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated:
4. Priority Date
a) Date of first use: <u>See Attachment - January 31, 1908</u>
b) Date water use development first initiated: See Attachment
c) Name of party who initiated development: See Attachment
c) I tame of party who minuted development in interesting
5. Amount of water claimed: See , in CFS or GPM
(Water put to beneficial use)
6. Location of place of use: See Attachment
Sections, Township N/S, Range E/W.
Sections, Township N/S, Range E/W.
(Attach additional pages if necessary)
7. Usual period of use: Jan / 1 to Dec / 31 month day month day
month day month day

8. Remarks:	
o. Remarks:	
9. Total fees submitted wi	ith claim: <u>\$400</u>
Notarized Statement Sign	ned by Claimant.
STATE OF OREGON)
County ofCoos	: ss)
water right described her to the best of my knowle are true and correct.	d being the claimant of the existing surface rein, have read the contents of this claim and dge all of the matters stated herein Signature of Claimant a me this
OFFICIAL SEAL MARCY PATRIDGE NOTARY PUBLIC - OREGON COMMISSION NO. 005467 MY COMMISSION EXPIRES MAR. 24, 19	NOTARY PUBLIC for the State of Oregon
	ACCOMPANIED BY A MAP PREPARED BY A IGHT EXAMINER (CWRE).
	Certified Water Right Examiner
	Name: Forest Hales CWRE#: 059
	Address: 1490 N. Ivy Street, Coquille, Orego
	Telephone: 396-2596