## STATE OF OREGON WATER RESOURCES DEPARTMENT

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

1. Name of Registrant: RAY W. JOHN Mailing Address: P. O. Box 647, Winchester, Oregon 97495 Telephone No: 673-6821	i
2. Source of water: North Umpqua River	
3. Purpose(s) for which water is used: Irrigation and Domestic(1 resignification, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)  If irrigation, total number of acres irrigated: 1.60 acres	ldence)
4. Priority Date  a) Date of first use:	
5. Amount of water claimed: 0.03 CFS , in CFS or GPM (Water put to beneficial use)	
6. Location of place of use: NE  Section 19 & the Calvin C. F. Sections, Township 26 ##/S, Range 5 ##/W. D.L.C. N	Reed No. 47
Sections, Township N/S, Range E/W.  (Attach additional pages if necessary)  Irrigation:  7. Usual period of use: April / 1 to October 31 month day month day	
Domestic January 1 thru December 31.	

8. Remarks: Please se	ee attached remarks and correlated data
<u>including</u> Affidavit	g: Pictures. Patent, Deeds & Map,
9. Total fees submitted w	ith claim: \$230.00
Notarized Statement Sign	ned by Claimant.
STATE OF OREGON	) : ss
County of DOUGLAS	<u> </u>
depose and say that I, an water right described he to the best of my knowle are true and correct.	, ,
THIS FORM MUST BE	ACCOMPANIED BY A MAP PREPARED BY A IGHT EXAMINER (CWRE).
	Certified Water Right Examiner
	Name: Bruce A. Shaner CWRE#: 118