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WATER RESOURCES DEPT.
SALEM, OREGON

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**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

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

1. Name of Registrant: WALLACE R. STINSON
Mailing Address: 2904 Summers Lane
Klamath Falls, OR 97603 Telephone No: 882-2637

2. Source of water: East Fork of the Coquille River
Tributary to: Coquille River

3. Purpose(s) for which water is used: Irrigation, Domestic
(Irrigation, Stockwater, Domestic, Hydrcelectric power, Industrial, Etc.)
If irrigation, total number of acres irrigated: 11.2

4. Priority Date
a) Date of first use: Apr. 1879
b) Date water use development first initiated: Apr. 1886
c) Name of party who initiated development: John S. Coke

ACREAGE
MAP = 11.2
Form = 11.2

5. Amount of water claimed: 0.265 GPM, in CFS or GPM
(Water put to beneficial use)
For irrigation: 62.83 GPM
For domestic: 56.1 GPM

6. Location of place of use:
10 Sections, Township 28 N/S, Range 10 E/W.
10 Sections, Township 28 N/S, Range 10 E/W.
(Attach additional pages if necessary)

7. Usual period of use: May / 1 to Sept. / 30 Irrigation
month day month day
Jan. / 1 to Dec. / 31 Domestic

Having lived in the area as a boy and as a young man I knew most of the people who owned this property through the early 8. Remarks: 1900's. It was by pure chance that I learned late in 1991 that I needed to file this statement. For whatever reason, I did not receive any notice. Being conservation oriented I intend to use only what water I absolutely need with due consideration for the needs of fish, game, and neighbors.

9. Total fees submitted with claim: \$230.00

Notarized Statement Signed by Claimant.

STATE OF OREGON)
: ss
County of KLAMATH)

I, WALLACE R. STINSON, 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.

Wallace R. Stinson
Signature of Claimant

Signed and attested before me this 10th day of June, 1992

George Doumar
NOTARY PUBLIC for the State of Oregon
My commission expires: 4-3-93

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

Please see enclosed copy of--
ORDER APPROVING
REQUEST FOR
EXCEPTION

Certified Water Right Examiner

In lieu of a CWRE it is ORDERED that Michael J. Stinson may prepare the Surface Water Registration map for Wallace R. Stinson

Name: Michael J. Stinson CWRE#: N/A

Address: 4030 Mack Avenue, Klamath Falls, OR 97603

Telephone: Oreg. State Hwy. Office phone-8835665

Recorded in Special Order Records at Volume 46, Page 214.