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WATER RESOURCES DEPT. SALEM, OREGON

## STATE OF OREGON WATER RESOURCES DEPARTMENT

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

d M	
1. Name of Registrant: David T. and Judith A.S. Chapman  Mailing Address: 32694 S. Dickey Prairie Rd.	*******
Molalla, OR 97038 Telephone No: 829-4983	***************************************
2. Source of water: A spring.	· · · · · · · · · · · · · · · · · · ·
Tributary to: Molalla River	******
	***************************************
3. Purpose(s) for which water is used: Domestic including \frac{1}{2} acres lawn	& gard <b>e</b> n
(Irrigation, Stockwater, Domestic, Hydroelectric power, Industrial, Etc.)	_
If irrigation, total number of acres irrigated:	
4. Priority Date	
a) Date of first use: Prior to 1900 1889	
b) Date water use development first initiated:	· · · · · · · · · · · · · · · · · · ·
c) Name of party who initiated development:	
5. Amount of water claimed: 0.01 , in CFS or GPM	******
(Water put to beneficial use)	******
(,, are, pay or porto), and are,	
6. Location of place of use:	*******
$\frac{14}{}$ Sections, Township $\frac{5S}{}$ N/S, Range $\frac{2E}{}$ E/W.	******
Sections, Township N/S, Range E/W.	******
(Attach additional pages if necessary)	
(	
7. Usual period of use: January 1, to December 31	:::::::
month day month day	· · · · · · · · · · · · · · · · · · ·
	*******

8. Remarks:	
9. Total fees submitted wi	th claim: \$200.00
Notarized Statement Sigr	ned by Claimant.
STATE OF OREGON	)
	: ss
County of Marion	,
David T. Chapman	and an, having been duly sworn,
depose and say that I, and	d being the claimant of the existing surface
	rein, have read the contents of this claim and
to the best of my knowled	rein, have read the contents of this claim and
to the best of my knowled	rein, have read the contents of this claim and
to the best of my knowled are true and correct.	rein, have read the contents of this claim and dge all of the matters stated herein    John   John   Journal     Signature of Claimant
to the best of my knowled	rein, have read the contents of this claim and dge all of the matters stated herein  Signature of Claimant  The me this 25 day of August 1992
to the best of my knowled are true and correct.	rein, have read the contents of this claim and dge all of the matters stated herein  Signature of Claimant  e me this 25 day of August , 19 92
Signed and attested before  OFFICIAL SEAL LARRY H. NUNN NOTARY PUBLIC - OREGON	rein, have read the contents of this claim and dge all of the matters stated herein  Signature of Claimant  The me this 25 day of August 19 92  NOTARY PUBLIC for the State of Oregon
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official seal LARRY H. NUNN NOTARY PUBLIC - OREGON COMMISSION NO.009889 MY COMMISSION EXPIRES SEPT. 19, 199	rein, have read the contents of this claim and dge all of the matters stated herein  Signature of Claimant  The me this 25 day of August 19 92  NOTARY PUBLIC for the State of Oregon  My commission expires: November 17, 1992  Sep 19, 1995
official seal Larry H. NUNN NOTARY PUBLIC - OREGON COMMISSION NO.009689 MY COMMISSION EXPIRES SEPT. 19, 199  THIS FORM MUST BE	rein, have read the contents of this claim and dge all of the matters stated herein  Signature of Claimant  NOTARY PUBLIC for the State of Oregon My commission expires:  November 17, 1992  Sep 19, 1995  ACCOMPANIED BY A MAP PREPARED BY A
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