

**STATE OF OREGON
WATER RESOURCES DEPARTMENT**

RECEIPT # **96007**

3850 PORTLAND ROAD NE
SALEM, OR 97310
378-8455/378-8130 (FAX)

RECEIVED FROM: Albert L. Olson
BY: _____

APPLICATION	
PERMIT	
TRANSFER	

CASH: CHECK: # 96292 OTHER: (IDENTIFY)

TOTAL REC'D \$ 400.00

01-00-0 WRD MISC CASH ACCT

842.010	ADJUDICATIONS	\$ <u>400.00</u>
831.087	PUBLICATIONS/MAPS	\$
830.650	PARKING FEES Name/month	\$
_____	OTHER: (IDENTIFY)	\$

REDUCTION OF EXPENSE

CASH ACCT.	\$
COST CENTER AND OBJECT CLASS	VOUCHER #

03-00-0 WRD OPERATING ACCT

MISCELLANEOUS:

840.001	COPY FEES	\$
850.200	RESEARCH FEES	\$
880.109	MISC REVENUE: (IDENTIFY)	\$
520.000	OTHER (P-6): (IDENTIFY)	\$

WATER RIGHTS:

842.001	SURFACE WATER	EXAM FEE	\$	842.002	RECORD FEE	\$
842.003	GROUND WATER	EXAM FEE	\$	842.004	RECORD FEE	\$
842.005	TRANSFER	EXAM FEE	\$	842.006	RECORD FEE	\$

WELL CONSTRUCTION

842.022	WELL DRILL CONSTRUCTOR	EXAM FEE	\$	842.023	LICENSE FEE	\$
842.016	WELL DRILL OPERATOR	EXAM FEE	\$	842.019	LICENSE FEE	\$
_____	LANDOWNER'S PERMIT	EXAM FEE	\$	842.024	LICENSE FEE	\$

06-00-0 WELL CONST START FEE

842.013	WELL CONST START FEE	\$	CARD #	
_____	MONITORING WELLS	\$	CARD #	

45-00-0 LOTTERY PROCEEDS

864.000	LOTTERY PROCEEDS	\$
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07-00-0 HYDRO ACTIVITY

842.011	POWER LICENSE FEE(FW/WRD)	LIC NUMBER	\$
842.115	HYDRO LICENSE FEE(FW/WRD)	LIC NUMBER	\$
_____	HYDRO APPLICATION	LIC NUMBER	\$

RECEIPT # **96007**

DATED: 1/6/93 BY: C. Engel

January 21, 1994

ALBERT & GLORIA OLSON
PO BOX 222
MYRTLE POINT OR 97458

RE: SWR-567

Dear Mr & Mrs Olson,

I am sending a copy of the letter I sent to you on April 28, 1993. I have not heard anything from you in regards to the required map to support your pre-1909 vested water right claim. I am in the process of reviewing the maps and will pass your file by at this time. I cannot complete my review without the required map. You must send me a map submission date.

If you have any questions, please give me a call.

Sincerely,



Don Knauer
Adjudication Specialist

J:\W\S\C\5\SWR-0567.002



3850 Portland Rd NE
Salem, OR 97310
(503) 378-3739
FAX (503) 378-8130

April 28, 1993

ALBERT L & GLORIA T OLSON
PO BOX 222
MYRTLE POINT OF 97458

Dear MR & MRS OLSON,

This will acknowledge that your Surface Water Registration Statement in the name of ALBERT L & GLORIA T OLSON has been received by our office. The fees in the amount of \$400.00 have been received and our receipt #96007 is enclosed. Your registration statement has been numbered SWR-567.

The map you submitted with your claim is not acceptable. ORS 539.240 (2) (d) requires the map be prepared by a Certified Water Right Examiner (CWRE). Within 60 days of this letter you must send a letter to this address indicating you have contracted with a CWRE to prepare your map. You should send your letter to my attention. In your letter you must identify the name of the CWRE who will prepare your registration statement map. We will contact the CWRE to arrange a map submittal deadline.

We will not be able to process your claim until we have received your map. If you have any questions regarding this process, please do not hesitate to give me a call.

Please feel free to contact this office if you have any questions.

Sincerely,



Don Knauer
Adjudication Specialist

Enclosure

J:\WP51\SWR\CLAIMANT\5\SWR-0567.001



3850 Portland Rd NE
Salem, OR 97310
(503) 378-3739
FAX (503) 378-8130

SURFACE WATER REGISTRATION CHECKLIST

(received after July 18, 1990)

CHECK BASIN MAP Det NAME South Coast # 17 UNADJUDICATED AREA ? Yes
RECEIPT # 96007 S W R NUMBER 567
CHECK ENCLOSURES Det PRELIMINARY DATA BASE ENTRY Det
ACKNOWLEDGEMENT LETTER Det ENTER ON STREAM INDEX _____
CHECK QUADRANGLE MAP _____ CHECK GLO PLATS _____
WATERMASTER CHECKLIST _____ PUBLIC NOTICE PUBLICATION Det

FORM REVIEW

_____ blanks filled in
_____ signed
_____ date received stamped

MAP REVIEW

_____ source and trib
_____ diversion point location
_____ conveyances (pipes, ditch, etc.)
_____ place of use
_____ scale
_____ township, range, section
_____ north arrow
_____ CWRE stamp
_____ disclaimer
_____ date survey was performed
_____ P.O.B. of survey
_____ dimensions and capacity of diversion system
_____ "beneficial use" type title
_____ "permanent-quality" paper

WATER RIGHT RECORD CHECK _____ FIELD INSPECTION _____
FINAL FILE REVIEW _____ FINAL DATA BASE ENTRY _____
ENTER ON PLAT CARDS _____

Watermaster's Office
District No. 19
Coos County Courthouse
Coquille, OR 97423

RECEIVED

JAN 05 1993

WATER RESOURCES DEPT.
SALEM, OREGON

Receipt *Gloria Olson*

Date: December 30, 1992

Amount: \$ 400⁰⁰.

Pre-1989 application form.

Received by:

James Simpson
Asst. Watermaster Dist. XIX

No 8113

ABSTRACT OF TITLE

TO

The following described real property
situated in the County of Coos, and
State of Oregon, to-wit:

In Township 29 South, of Range 12 West,
of the Willamette Meridian:

Section 5: The $S\frac{1}{2}$ of the $SW\frac{1}{4}$;

Section 8: The $NW\frac{1}{4}$ of the $NW\frac{1}{4}$.

RECEIVED

JAN 05 1993

WATER RESOURCES DEPT.
SALEM, OREGON



STATE OF OREGON

INTEROFFICE MEMO

RECEIVED

AUG 24 1993

TO: Don E. Knauer
 Adjudication Section

FROM: James A. Simpson *JAS*
 Deputy Watermaster, Dist. XIX

SUBJECT: CWRE maps for SWR's

DATE: 08-20-93

WATER RESOURCES DEF
SALEM, OREGON

Don, with reference to our conversation of 07-27-93, regarding CWRE maps, I have put together the following list of the SWR's for our district that do not have a CWRE map, therefore as the maps come in Dwight or yourself can forward a copy to our office.

The maps for SWR #113 and #114 were the only ones that I could find that were too large for the copier. If you could send me the mylar copies it would be greatly appreciated.

Need CWRE Map

# 178	486	522	569	594
338	505	523	571	595
356	506	537	581	596
357	509	538	582	597
363	511	545	587	600
364	512	546	588	601
382	516	547	589	602
457	517	551	590	
459	520	552	591	
468	521	567	592	

Your assistance is greatly appreciated, and again I would like to thank you and all the Salem staff that made my visit most productive.

JAS/sn

CF: JPD

RECEIVED

JAN 05 1993

WATER RESOURCES DE
SALEM, OREGON

United States

to

Peter Wies.

Patent.

Dated March 30, 1882.

Filed June 21, 1900.

Book 33 Deeds, 303.

D E S C R I P T I O N

The NW $\frac{1}{4}$ of the NW $\frac{1}{4}$ of Section 8, the S $\frac{1}{2}$ of the SW $\frac{1}{4}$ of Section 5,
and the NE $\frac{1}{4}$ of the NE $\frac{1}{4}$ of Section 7, in Township 29 South, of
Range 12 West, of Willamette Meridian, in Oregon, containing
160 acres.

Subject to any vested and accrued water rights, etc.

VALUE CHANGE NOTICE
 and
 PROPERTY TAX STATEMENT

VALUE CHANGE NOTICE

Real Market Value (RMV)	Last Year	This Year
RMV LAND	15,610	
RMV BUILDINGS		
TOTAL RMV	15,610	
ASSESSED VALUE		
AV LAND		20,422
AV BUILDING		25,713
TOTAL AV		46,135
EXEMPTIONS		
NET ASSESSED VAL	15,610	46,135
Property Taxes		1,613.97

Code	Account Number					
41.01	11140.00					
Oregon Property Tax Year						
1992-93						
County						
COOS COUNTY						
Property Description (Map Number)						
Township	Range	Section	1/4	1/16	Tax Lot	Special Intere
29S	12 W	08			100	
Acres		Property Class		Pull Number		
91.360		542				

OLSON, ALBERT L. & G.T.

PO BOX 222
MYRTLE POINT , OR 97458

POTENTIAL TAX LIABILITY

PROPERTY TAX PAYMENT OPTIONS
(See back of statement for instructions and your appeal rights)

Pay	By	Discount Allowed	Net Amount
In Full	NOV. 15	48.42 3%	1,565.55
2/3	NOV. 15	21.52 2%	1,054.46
1/3	NOV. 15	NONE	537.99

DELINQUENT TAXES

Interest included through:	Tax Year	Amount
NOV. 15, 1992		
Real property accounts with an unpaid balance for any tax year marked with an asterisk (*) are subject to foreclosure if not paid on or before May 15. Any payments received on this account MUST be applied to delinquent taxes first.		Total Delinquent Amount
TOTAL TAXES OWED ON THIS ACCOUNT IF PAID BY NOVEMBER 15		1,565.55

PLEASE MAKE PAYMENT TO:

COOS COUNTY TAX COLLECTOR
250 NO. BAXTER ST.
COQUILLE OR 97423

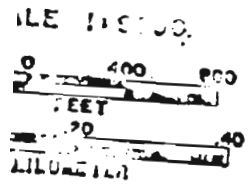
190-550-006 (back) (Rev. 5-92)

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WATER RESOURCES DEPT.
 SALEM, OREGON

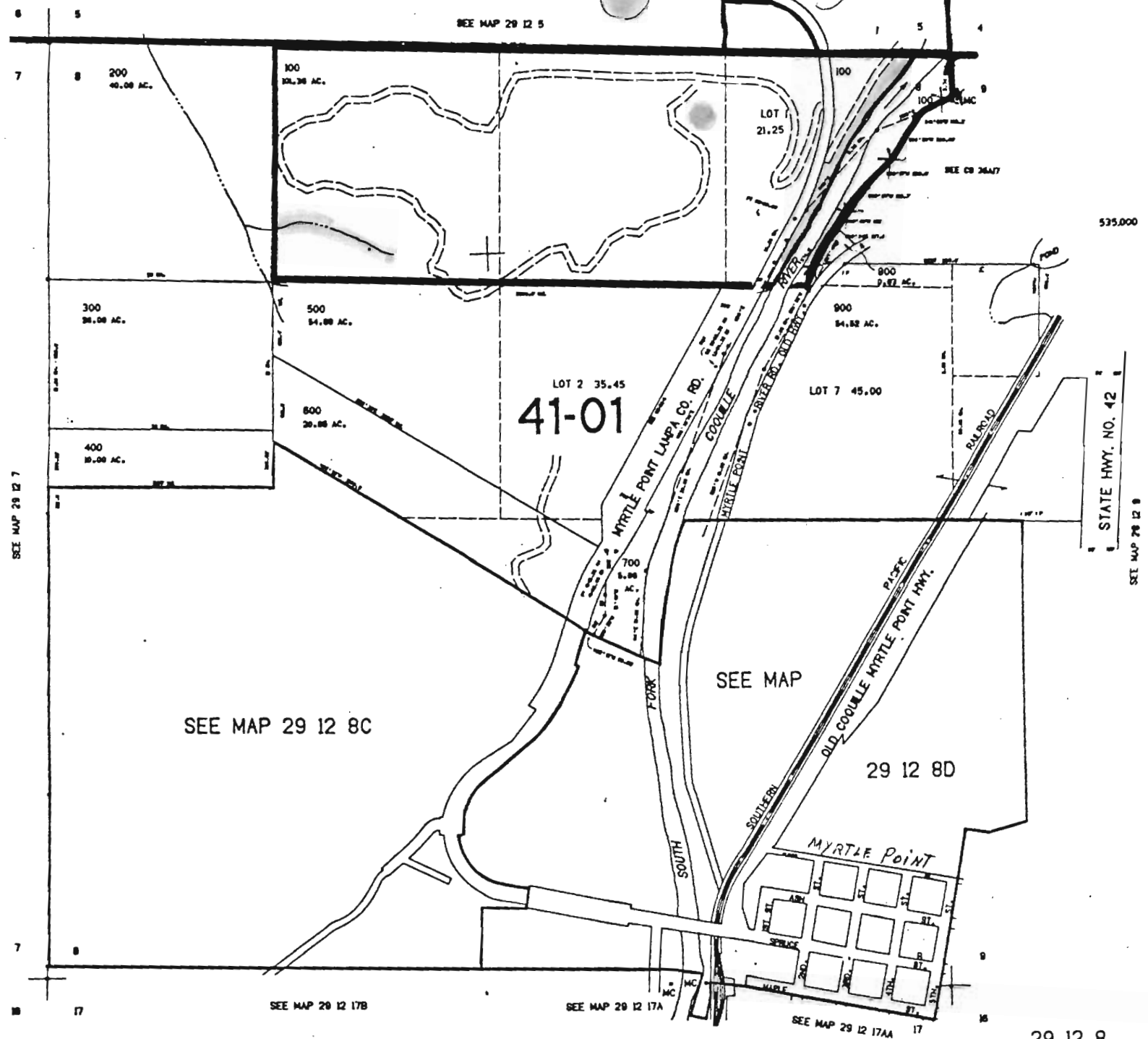
THIS MAP WAS PREPARED FOR
ASSESSMENT PURPOSE ONLY.



RECEIVED

JAN 05 1993

WATER RESOURCES DEPT.
SALEM, OREGON



CONTROL SHEET LAYOUT CHECKED

SEE MAP 29 12 7

SEE MAP 29 12 8C

SEE MAP 29 12 17B

SEE MAP 29 12 17A

SEE MAP

STATE HWY. NO. 42
SEE MAP 29 12 9

535,000