STATE OF CALIFORNIA
THE RESOURCES AGENCY
STATE WATER RESOURCES CONTROL BOARD
DIVISION OF WATER RIGHTS

STATEMENT OF WATER DIVERSION AND USE

S 4669

This statement should be typewritten or legibly written in ink.

A. Name of person diverting water Mendocino State Hospital
Address Box X, Talmage, Ca. 95481

B. Name of body of water at point of diversion Mill Creek
Tributary to Russian River

C. Place of diversion Seeattached ¼ ¼ Section 25, Township 15 N, Range 12 W, MD B&M, Mendocino County, or locate it on sketch of section grid on reverse side with regard to section lines or prominent local landmarks.

D. Name of works MENDOCINO UPPER DWR # 1-4

E. Capacity of diversion works See attached cubic feet per second / gallons per minute
Capacity of storage reservoir See attached gallons / acre-feet
State quantity of water used each month in gallons or acre-feet

Year	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total Annual
				X	X	X	X	X	X	X			

Probably use one capacity of upper and middle reservoirs each year.
If monthly and annual use are not known, check months in which water [illegible] use in units, such as acres of each crop irrigated, average number of persons served, number of stock watered, etc. 20 acres permanent pasture - 100 acres field crops

Maximum annual water use in recent years ..... gallons / acre-feet
Minimum annual water use in recent years ..... gallons / acre-feet
Type of diversion facility: gravity X, pump .....
Method of measurement: weir ....., flume ....., electric power meter ....., water meter ....., estimate X

F. Purpose of use (what water is being used for) irrigation

G. General description or location of place of use (use sketch of section grid on reverse side if you desire) Mendocino State Farm area

H. Year of first use as nearly as known See attached

I. Name of person filing statement A. J. O'Farrell
Position Hospital Administrator Organization Mendocino State Hospital, Dept. of Mental Hygiene
Address Box X, Talmage, Ca. 95481

I certify that the foregoing statements are true and correct to the best of my knowledge and belief.

Date signed Jan. 3, 1969 Signature A. J. O'Farrell

See Instructions on Reverse Side

WRCB 40 (12 67)

Stream Code 1-105-21-00-0