STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY
WATER RIGHT CLAIMS REGISTRATION

WATER RIGHT CLAIM

Office

RECEIVED
DEPARTMENT OF ECOLOGY
JAN 19 72 0 1 0 1 3 8

CASH ✓ OTHER ___ NONE ___

1. NAME Lowell R. Anderson

ADDRESS Route 1, Box 491-A

Olympia, WA ZIP CODE 98506

2. SOURCE FROM WHICH THE RIGHT TO TAKE AND MAKE USE OF WATER IS CLAIMED: Ground (SURFACE OR GROUND WATER)

W.R.I.A. 13 (LEAVE BLANK)

A. IF GROUND WATER, THE SOURCE IS Well

B. IF SURFACE WATER, THE SOURCE IS

3. THE QUANTITIES OF WATER AND TIMES OF USE CLAIMED:

A. QUANTITY OF WATER CLAIMED 15 GPM (CUBIC FEET PER SECOND OR GALLONS PER MINUTE) PRESENTLY USED 15 GPM.

B. ANNUAL QUANTITY CLAIMED 1 (ACRE FEET PER YEAR) PRESENTLY USED 1

C. IF FOR IRRIGATION, ACRES CLAIMED 1/2 PRESENTLY IRRIGATED 1/2

D. TIME(S) DURING EACH YEAR WHEN WATER IS USED: CONTINUOUSLY

4. DATE OF FIRST PUTTING WATER TO USE: MONTH October YEAR 1964

5. LOCATION OF THE POINT(S) OF DIVERSION/WITHDRAWAL: 1100 FEET South AND 350 FEET W FROM THE N 1/4 CORNER OF SECTION 21

BEING WITHIN SE 1/4 NE 1/4 NW 1/4 OF SECTION 21, T. 19 N., R. 1 W (E. OR W.) W.M.

IF THIS IS WITHIN THE LIMITS OF A RECORDED PLATTED PROPERTY, LOT ___ BLOCK ___ OF

(GIVE NAME OF PLAT OR ADDITION)

6. LEGAL DESCRIPTION OF LANDS ON WHICH THE WATER IS USED: ATTACHED

COUNTY Thurston

7. PURPOSE(S) FOR WHICH WATER IS USED: DOMESTIC SUPPLY

8. THE LEGAL DOCTRINE(S) UPON WHICH THE RIGHT OF CLAIM IS BASED: APPROPRIATION

DO NOT USE THIS SPACE

THE FILING OF A STATEMENT OF CLAIM DOES NOT CONSTITUTE AN ADJUDICATION OF ANY CLAIM TO THE RIGHT TO USE OF WATERS AS BETWEEN THE WATER USE CLAIMANT AND THE STATE OR AS BETWEEN ONE OR MORE WATER USE CLAIMANTS AND ANOTHER OR OTHERS. THIS ACKNOWLEDGEMENT CONSTITUTES RECEIPT FOR THE FILING FEE.

DATE RETURNED THIS HAS BEEN ASSIGNED WATER RIGHT CLAIM REGISTRY NO.

JAN 19 72 007573

DIRECTOR, DEPARTMENT OF ECOLOGY

I HEREBY SWEAR THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF

X Lowell R. Anderson

DATE 1/19/72

IF CLAIM FILED BY DESIGNATED REPRESENTATIVE, PRINT OR TYPE FULL NAME AND MAILING ADDRESS OF AGENT BELOW

☐ ADDITIONAL INFORMATION RELATING TO WATER QUALITY AND/OR WELL CONSTRUCTION IS AVAILABLE

A FEE OF $2.00 MUST ACCOMPANY THIS WATER RIGHT CLAIM

RETURN ALL THREE COPIES WITH CARBONS INTACT, ALONG WITH YOUR FEE TO
DEPARTMENT OF ECOLOGY
WATER RIGHT CLAIMS REGISTRATION
P.O. BOX 829 OLYMPIA, WASHINGTON 98501

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