



WATER RIGHT CLAIM

APR 18 73037161

CASH _____ OTHER NONE _____

1. NAME Robert Jones

ADDRESS 1507 Jones Rd

Olympia Wash. ZIP CODE 98501

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 5 gal/min PRESENTLY USED 5 gal/min
(CUBIC FEET PER SECOND OR GALLONS PER MINUTE)

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

C. IF FOR IRRIGATION, ACRES CLAIMED XXXX PRESENTLY IRRIGATED XXXX

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

4. DATE OF FIRST PUTTING WATER TO USE: MONTH May YEAR 1950

5. LOCATION OF THE POINT(S) OF DIVERSION/WITHDRAWAL: 700± FEET north AND 700±

FEET west FROM THE center CORNER OF SECTION 19

BEING WITHIN SE 1/4 NW 1/4 OF SECTION 19 T. 18 N., R. 1W (E.G.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: _____

Beginning at the Southeast corner of the South half of the Northwest quarter of the Southeast quarter of the Northeast quarter of Section 19

_____ COUNTY Thurston

7. PURPOSE(S) FOR WHICH WATER IS USED: Domestic - 1 Household of 2 people

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. APR 17 13027332
J. Pigg
DIRECTOR - DEPARTMENT OF ECOLOGY

I HEREBY SWEAR THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
X Robert Jones
DATE _____
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
ORIGINAL DWR

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 98504