



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY  
WATER RIGHT CLAIMS REGISTRATION

**WATER RIGHT CLAIM**

RECEIVED  
DEPARTMENT OF ECOLOGY  
MAY -273038070  
CASH  OTHER  NONE

1. NAME Roxie C. Grimes  
ADDRESS Rt 11 Box 523  
Olympia Wash. ZIP CODE 98502

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

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

A. IF GROUND WATER, THE SOURCE IS Drilled Well

B. IF SURFACE WATER, THE SOURCE IS \_\_\_\_\_

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

A. QUANTITY OF WATER CLAIMED 25 g.p.m. PRESENTLY USED 4 g.p.m.  
(CUBIC FEET PER SECOND OR GALLONS PER MINUTE)

B. ANNUAL QUANTITY CLAIMED 40.31 PRESENTLY USED 6.45  
(ACRE FEET PER YEAR)

C. IF FOR IRRIGATION, ACRES CLAIMED \_\_\_\_\_ PRESENTLY IRRIGATED \_\_\_\_\_

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

4. DATE OF FIRST PUTTING WATER TO USE: MONTH \_\_\_\_\_ YEAR 1953

5. LOCATION OF THE POINT(S) OF DIVERSION/WITHDRAWAL: 1420' FEET East AND 550'

FEET North FROM THE CENTER ~~CORNER~~ OF SECTION 23

BEING WITHIN N.E. 1/4 OF SECTION 23 T. 18 N., R. 3W (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:

23-18-3W 12.98A W 2-SE-NE LESS Maple  
Valley Rd on W LESS A 145F  
Home site 23-18-3W W 2-SE-NE 1A from  
14-02

COUNTY Thurston

7. PURPOSE(S) FOR WHICH WATER IS USED: Domestic 1 home.

8. THE LEGAL DOCTRINE(S) UPON WHICH THE RIGHT OF CLAIM IS BASED. \_\_\_\_\_

**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 \_\_\_\_\_

MAY 17 1973 28346

DIRECTOR - DEPARTMENT OF ECOLOGY *[Signature]*

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

X Mrs. Roxie Grimes

DATE Apr. 30 - 1973

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 A THREE COPIES WITH LABEL IN CONTACT ALONG WITH YOUR FEE TO  
DEPARTMENT OF ECOLOGY  
WATER RIGHT CLAIMS REGISTRATION  
P.O. BOX 829 OLYMPIA WASHINGTON 98501