STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY
WATER RIGHT CLAIMS REGISTRATION

# WATER RIGHT CLAIM

RECEIVED
DEPARTMENT OF ECOLOGY
OCT 11 73 05 16 16
CASH ✓ OTHER ___ NONE ___

1. NAME Albert Paine Sr.
ADDRESS RT9 Box 759
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 10 gpm (CUBIC FEET PER SECOND OR GALLONS PER MINUTE) PRESENTLY USED 10

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

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

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

4. DATE OF FIRST PUTTING WATER TO USE: MONTH ___ YEAR 1956

5. LOCATION OF THE POINT(S) OF DIVERSION/WITHDRAWAL: 100 FEET West AND 1250 FEET north FROM THE E 1/4 CORNER OF SECTION 6
BEING WITHIN SE 1/4 NE 1/4 OF SECTION 6 T. 18 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: Beg at the NE cor of SE 1/4 NE 1/4 Th S 140' Th W 291' Th N 140' Th E 291' To pob AND Beg 1150' S ~~and~~ of NE cor of Sec 6 Th W 5 rods Th S 16 rods Th E 5 rods Th N 16 rods To pob Exc Rds All in Sec 6 Twp 18 N R 1 W 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.
OCT 11 73 037292
DIRECTOR, DEPARTMENT OF ECOLOGY

I HEREBY SWEAR THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
X Mrs Albert Paine
DATE 10-11-73
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