

State of
Washington
Department
of Ecology



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DEPARTMENT OF ECOLOGY
OCT 30 73056618
CASH OTHER NONE

Water Right Claims Registration

Water Right Claim

Name DOROTHY BEHNKEN
Address Rt 8 Box 126
OLY. WN Zip Code 98502

(Short Form) 13
Phone No. 352-9092

1) Source from which the right to take and make use of water is claimed: Surface Water Ground Water
If surface water, please indicate source; give name if known:

(River, stream, lake, pond, spring, etc.)

2) Purpose(s) for which water is used:

Domestic Stockwatering Irrigation (lawn and garden) Other Use (specify) _____

3) Legal description of lands on which water is used:

32-18-24 1S-84A E2-SW4
LESS E 880 F LESS S2-SE-SW.
LESS N 25 F R.

If located within the limits of a recorded platted property:

Lot _____ Block _____ of _____
(Give name of plat or addition)

In addition, please indicate Sec. 32 T. 18 N. R. 2W E/W. W.M.

County in which lands are located THURSTON

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 use claimants and another or others. This acknowledgment constitutes receipt for the filing fee.
Date Registered _____ This has been assigned Water Right Claim Registry No. _____
2574050248
Director, Department of Ecology
John B. [Signature]

I hereby swear that the above information is true and accurate to the best of my knowledge and belief.

Dorothy Behnken
Date 10-30-73

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 DOE

Return all three copies with carbons intact, along with your fee to:
Department of Ecology, Water Right Claims Registration, Olympia, Washington 98504