



STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY
WATER RIGHT CLAIMS REGISTRATION

WATER RIGHT CLAIM

RECEIVED
DEPARTMENT OF ECOLOGY
FEB 19 74 07 0008
CHECK OTHER NONE

1. NAME Robert H. Word
ADDRESS 3007 29th Ave N.W.
Olympia, Wash. ZIP CODE 98502

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 GAL/MIN PRESENTLY USED Same
(CUBIC FEET PER SECOND OR GALLONS PER MINUTE)

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

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

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

4. DATE OF FIRST PUTTING WATER TO USE: MONTH _____ YEAR 1935

5. LOCATION OF THE POINT(S) OF DIVERSION/WITHDRAWAL: See attached FEET _____ AND _____

FEET _____ FROM THE _____ CORNER OF SECTION _____

BEING WITHIN _____ OF SECTION 4 T. 18 N., R. 2W (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: See attached

COUNTY Thurston

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

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. _____

FEB 19 74 05 2604

John Biggs

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 H. Word

DATE 2/19/74

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