



Application for Change/Transfer of Water Right



For filing with the Department of Ecology *or* with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION IF FILED WITH THE DEPARTMENT OF ECOLOGY

(Check all that apply.)

- Change purpose(s) of use
- Add purpose(s) of use
- Change point(s) of diversion/withdrawal
- Add point(s) of diversion/withdrawal
- Change/transfer place of use
- Other (i.e. consolidation, intertie, trust water)

Explain: Add acres through water spreading.

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED _____	
CHECK NO. _____	FEE \$ _____
DATE ACCEPTED _____	BY _____
CHANGE NO. <u>KLIC-14-02</u>	
COUNTY _____	WRIA _____
SPECIAL AREA _____	
SEPA: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT	
ECY CODING: 001-002-WR10285-000011	
APP NO. <u>10374</u>	PERMIT NO. <u>63-00896</u>
CERT NO. <u>63-00896</u>	CERT OF CHG NO. _____

I have participated in a pre-application conference with Ecology.

1. Applicant Information

APPLICANT/BUSINESS NAME Steve Matsen / Don Slater	PHONE NO. 509-896-5231	FAX NO.
ADDRESS 50 Crider Rd.		
CITY Bickleton	STATE WA	ZIP CODE 99322
EMAIL ADDRESS (IF AVAILABLE) matsens@bossig.com		
CONTACT (IF DIFFERENT FROM ABOVE) Same	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE Same	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

AMENDED APP 03-23-2016
CG3-00896C
KLIC-14-02

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER G3-00896C	RECORDED NAME(S) Harland Berk
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: Don Slater is the owner of the water right, his address is: PO Box 167, Bickleton, WA 99322	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO The property covered by this right was held in the Conservation Reserve Program from 1988 through 2012. Documentation of prior historical use is attached.	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well	1	NE	SW	3	4N	20 E	04200300000300	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well	1	NE	SW	3	4N	20E	04200300000300	
Well	2	SW	SE	15	5N	22E	05221500000200	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: YES NO PROPOSED: YES NO -- IF NO, PROVIDE OWNER(S) NAME: **Don Slater owns the property where Well No. 1 is located. Steve Matsen owns the property where Well No. 2 will be located.**

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

3. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	600 GPM	570	May 1 to October 1

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	600 GPM	318.4	March 1 to October 31

4. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: The SW1/4 of Section 2; the S1/2 of Section 3; Section 4 less the SW1/4; the NE1/4 of Section 10; and the NE1/4NW1/4 and the NW1/4NE1/4 of Section 11; all located in Township 4 North, Range 20 East, WM; Klickitat County, Washington; lying within parcel numbers 04200200000300, 04200300000300, 04200400000100, 04200400000300, 04200400000400, 04201000000100, and 04201100000100: All lying within WRIA 31.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
							500
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
IF NO, PROVIDE OWNER(S) NAME: Don Slater, Iona Berk and JIN Grabner LLC own the existing place of use and Steve Matsen owns the additional proposed place of use.							

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER G3-00896C	RECORDED NAME(S) Harland Berk
DO YOU OWN THE RIGHT TO BE CHANGED? X YES X NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: Don Slater is the owner of the water right, his address is: PO Box 167, Bickleton, WA 99322	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input type="checkbox"/> YES X NO The property covered by this right was held in the Conservation Reserve Program from 1988 through 2012. Documentation of prior historical use is attached.	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

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A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well	1	NE	SW	3	4N	20 E	04200300000300	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well	1	NE	SW	3	4N	20E	04200300000300	
Well	2	SW	SE	15	5N	22E	05221500000200	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: X YES X NO PROPOSED: X YES X NO - IF NO, PROVIDE OWNER(S) NAME: **Don Slater owns the property where Well No. 1 is located. Steve Matsen owns the property where Well No. 2 will be located.**

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

3. Purpose of Use:

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PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	600 GPM	570	May 1 to October 1

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	600 GPM	318.4	March 1 to October 31

4. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: The SW1/4 of Section 2; the S1/2 of Section 3; Section 4 less the SW1/4; the NE1/4 of Section 10; and the NE1/4NW1/4 and the NW1/4NE1/4 of Section 11; all located in Township 4 North, Range 20 East, WM; Klickitat County, Washington; lying within parcel numbers 04200200000300, 04200300000300, 04200400000100, 04200400000300, 04200400000400, 04201000000100, and 04201100000100: All lying within WRIA 31.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
							500
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? X YES X NO							
IF NO, PROVIDE OWNER(S) NAME: Don Slater, Iona Berk and JIN Grabner LLC own the existing place of use and Steve Matsen owns the additional proposed place of use.							

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B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
See Attached Proposed Place of Use							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
							372.7
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? X YES X NO							
IF NO, PROVIDE OWNER(S) NAME: Don Slater, Iona Berk and JIN Grabner LLC own the existing place of use and Steve Matsen owns the additional proposed place of use.							

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
X YES <input type="checkbox"/> NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): <u>G3-00654C</u>

5. Remarks and Other Relevant Information:

The provisions under the above noted certificate allows for the utilization of 1 well, pumping 600 GPMs, 570 Acre-Feet, for the irrigation of 500 acres. Under the proposed change the number of wells would increase to 2 wells, with no change in the instantaneous flow, with a reduction in the total annual withdrawal down to 318.4 Acre-Feet, and a decrease in total acreage to 372.7 acres. Attached is the ACQ analysis documenting the historical use and spreading of water to additional acres based upon change of crop requirements associated with converting to wine grape production.

IF FOR SEASONAL OR TEMPORARY, START DATE ___/___/___ END DATE ___/___/___

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

6. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I hereby grant staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

<u>Don Slater</u> Applicant Printed Name - Title	<u>[Signature]</u> Applicant Signature	<u>3/8/16</u> (Date)
<u>Don Slater</u> Water Right Holder Printed Name	<u>[Signature]</u> Water Right Holder Signature	<u>3/8/16</u> (Date)
<u>Don Slater</u> Land Owner of Existing Place of Use Printed Name	<u>[Signature]</u> Land Owner of Existing Place of Use Signature	<u>3/8/16</u> (Date)
<u>Don Slater</u> Land Owner of Proposed Place of Use Printed Name	<u>[Signature]</u> Land Owner of Proposed Place of Use Signature	<u>3/8/16</u> (Date)
<u>Steve Matsen</u> Land Owner of Proposed Point of Withdrawal Printed Name	<u>[Signature]</u> Land Owner of Proposed Point of Withdrawal Signature	<u>3/8/16</u> Date

Please check the region in which the project is located:

<p>*Submit your application to:</p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

<p>WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):</p> <p>o APPLICATION FEE NOT ENCLOSED o MAP NOT INCLUDED or INCOMPLETE</p> <p>o ADDITIONAL SIGNATURES REQUIRED o SECTION _____ IS INCOMPLETE</p> <p>o OTHER/EXPLANATION: _____</p> <p>STAFF: _____ DATE: ____/____/____</p>
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<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____ DATE: ____/____/____	

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COPY

