



# WATER RESOURCES

## Application for Change/Transfer of a Water Right

For Ecology Use  
(Date Stamp)



**You must include a \$50.00 minimum filing fee with this application for:**

(Check all that apply.)

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

Explain: The City of Pateros, WA is applying to add 17 additional points of withdrawal to their existing ground water certs.

**No filing fee is required for applications for:**

- Drought
- Cost Reimbursement
- Water Conservancy Board

FOR OFFICIAL USE ONLY			
DATE APPLICATION RECEIVED	<u>12-2-15</u>		
CHECK NO.	<u>26960</u>	FEE \$	<u>1,000.00</u>
DATE ACCEPTED	<u>12-2-15</u>	BY	<u>JDL</u>
CHANGE NO.	<u>OKAN-15-12</u>		
COUNTY	<u>Okanogan</u>	WRIA	<u>49</u>
SPECIAL AREA	_____		
SEPA:	<input type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT		
ECY CODING:	001-002-WR10285-000011		
APP NO.	<u>01094</u>	PERMIT NO.	<u>-</u>
CERT NO.	<u>01027-D</u>	CERT OF CHG NO.	<u>64-CV2P918</u>

I have completed a pre-application consultation with Ecology.

### 1. Applicant Information

APPLICANT/BUSINESS NAME City of Pateros	PHONE NO. 509-923-2571	FAX NO.
ADDRESS 113 Lakeshore Dr PO Box 8		
CITY Pateros	STATE WA	ZIP CODE 98846
EMAIL ADDRESS (IF AVAILABLE)		
CONTACT (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE Area served by the City of Pateros	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

OKAN-15-12

64-CV2P918

## Dunbar, Mark (ECY)

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**From:** De vera, Lisa <LDevera@wvc.edu>  
**Sent:** Tuesday, December 08, 2015 1:04 PM  
**To:** Dunbar, Mark (ECY)  
**Cc:** ldevera@nwi.net  
**Subject:** FW: City of Pateros Change Application  
**Attachments:** Amended Page 2.pdf

Dear Mr. Dunbar: Attached are 5 One page documents that are page 2 of 5 new applications sent to Ecology last week for City of Pateros identified as OKAN-15-09 through OKAN-15-13. Each page is an amendment to the original applications sent to you last week. Do I need to also print this email and send down hard copies, or will this email suffice. Please advise.

Lisa de Vera

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**From:** Ben Varela [mailto:bvarela@varela-engr.com]  
**Sent:** Tuesday, December 08, 2015 12:56 PM  
**To:** ldevera@nwi.net; De vera, Lisa  
**Subject:** City of Pateros Change Application

Hi Lisa,

As we discussed over the phone last week, I forgot to update Section 4. A. on page 2 of the Pateros change application I submitted to the board last Wednesday. Please see the attached amended page 2 for each of the five certificates change applications. Please replace page 2 of the applications I submitted last week with the attached page 2. The applicable application number is hand written at the top of each page.

Please let me know if there's anything you need.

Thank you,

Ben

**Ben Varela**  
Project Engineer

**VARELA & ASSOCIATES, INC**  
ENGINEERING & MANAGEMENT

601-A W Mallon Ave Spokane, WA 99201 . P 509.328.6066 . F 509.328.1388 . [bvarela@varela-engr.com](mailto:bvarela@varela-engr.com) . [www.varela-engr.com](http://www.varela-engr.com)

## 2. Water Right Information

WATER RIGHT OR CLAIM NUMBER G4-CV2P918	RECORDED NAME(S) City of Pateros
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:	
HAS THE WATER BEEN USED AS AUTHORIZED IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

- Attach copies of any documentation that shows the historical use of water that has occurred since the right was established.
- If you have a water system plan or conservation plan, please include a copy with your application.

## 3. Point(s) of Diversion/Withdrawal:

### A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well No. 1	1	NE	SW	36	30N	23E	3023360182	AGJ116
Well No. 2	2	NE	SW	36	30N	23E	3023360182	AGJ117

### B. Proposed (if different from 3.A.)

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
New Well	3	SW	SW	30	30N	23E		
New Well	4	NW	NW	31	30N	24E		

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

EXISTING:  YES  NO PROPOSED:  YES  NO – IF NO, PROVIDE OWNER NAME(S): Various

- Include copies of all associated water well reports.
- 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.

## 4. Purpose of Use:

### A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal	250 gpm	156	Continuous

### B. Proposed (if different from 4.A.)

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
No Change			

## 2. Water Right Information

WATER RIGHT OR CLAIM NUMBER G4-CV2P918	RECORDED NAME(S) City of Pateros
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:	
HAS THE WATER BEEN USED AS AUTHORIZED IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

- Attach copies of any documentation that shows the historical use of water that has occurred since the right was established.
- If you have a water system plan or conservation plan, please include a copy with your application.

## 3. Point(s) of Diversion/Withdrawal:

### A. Existing

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Well No. 2	2	NE	SW	36	30N	23E	3023360182	AGJ117

### B. Proposed (if different from 3.A.)

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
New Well	3	SW	SW	30	30N	23E		
New Well	4	NW	NW	31	30N	24E		

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

EXISTING:  YES  NO PROPOSED:  YES  NO – IF NO, PROVIDE OWNER NAME(S): Various

- Include copies of all associated water well reports.
- 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.

## 4. Purpose of Use:

### A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal	1,095 gpm	376	Continuous

### B. Proposed (if different from 4.A.)

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
No Change			

**5. Place of Use:**

**A. Existing**

<b>LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:</b>							
Sections 25, 35 & 36 of Township 30 North, Range 23 East, W.M.							
Section 2 of Township 29 North, Range 23 East, W.M.							
Sections 30 and 31 of Township 30 North, Range 24 East W.M.							
<b>¼</b>	<b>¼</b>	<b>SEC.</b>	<b>TWP.</b>	<b>RGE.</b>	<b>COUNTY</b>	<b>PARCEL #</b>	<b># OF ACRES</b>
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
IF NO, PROVIDE OWNER NAME(S): Residents of City of Pateros							

**B. Proposed (if different than 5.A.)**

<b>LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:</b>							
No change							
<b>¼</b>	<b>¼</b>	<b>SEC.</b>	<b>TWP.</b>	<b>RGE.</b>	<b>COUNTY</b>	<b>PARCEL #</b>	<b># OF ACRES</b>
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input type="checkbox"/> NO							
IF NO, PROVIDE OWNER NAME(S):							

- 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.

**D. Are there any additional water rights or claims related to the same property as the one proposed for change/transfer?**

YES  NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): G4-33051, G4-31832(A), G4-CV2P916 and G4-CV2P917

**6. Remarks and Other Relevant Information:**

SEE ATTACHED	
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                      Phone (360) 570-3265  
 Real Estate Excise Tax  
 PO Box 47477  
 Olympia, WA 98504-7477

ECY 040-1-97 (Rev 04-2015) To request ADA accommodation including materials in a format for the visually impaired, call Ecology Water Resources Program at 360-407-6872. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call TTY at 877-833-6341.

## 7. 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.

Carlene Anders - Mayor

Applicant Printed Name – Title

*Carlene R Anders, Mayor*  
Applicant Signature

12/2/2015

(Date: MM/DD/YYYY)

City of Pateros

Water Right Holder Printed Name

*Carlene R Anders, Mayor*  
Water Right Holder Signature

12/2/2015

(Date: MM/DD/YYYY)

Land Owner of Existing Place of Use Printed Name

Land Owner of Existing Place of Use Signature

(Date: MM/DD/YYYY)

Land Owner of Proposed Place of Use Printed Name

Land Owner of Proposed Place of Use Signature

(Date: MM/DD/YYYY)

<p><b>*Submit your application to:</b></p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 1250 W. Alder Street Union Gap, WA 98903-0009 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 <sup>th</sup> 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

**ATTACHMENT FOR  
Application for Change/Transfer of Water Right**

**Point(s) of Diversion/Withdrawal -  Existing  Proposed:**

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
New Well	5	SE	SW	30	30N	24E		
New Well	6	SE	SE	1	29N	23E		
New Well	7	NE	NE	12	29N	23E		
New Well	8	NW	NW	7	29N	24E		
New Well	9	SW	NW	7	29N	24E		
New Well	10	NE	NE	2	29N	23E		

DO YOU OWN THE ABOVE POINT(S) OF DIVERSION/WITHDRAWAL?  YES  NO

IF NO, PROVIDE OWNER NAME(S):

**Purpose(s) of Use -  Existing  Proposed:**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

**Place of Use -  Existing  Proposed:**

LEGAL DESCRIPTION OF LANDS							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE?  YES  NO

IF NO, PROVIDE OWNER NAME(S):





## **6. Remarks and Other Relevant Information: (continued)**

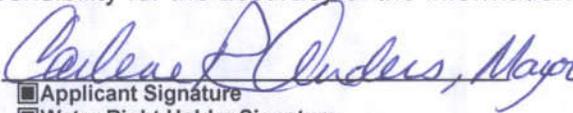
The City of Pateros proposes to drill 2 to 3 new wells. The City's preferred locations are listed in numerical order beginning with Proposed Well No. 3. The City does not propose to drill 17 additional wells. The additional sites are intended as back up sites. Whichever locations contain the new production wells will be referred to as Wells No. 3, 4, 5 and so on. In some cases, the City owns the subject property. In other cases, Pateros will enter into negotiations with the property owner(s) in order to access the property for production well installation and operation. With this application, the City proposes to add points of withdrawal for Water Right # G4-CV2P918 to 2 or 3 proposed new well locations.

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Application for Change/Transfer of Water Right**

**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 the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

Carlene Anders - Mayor



12/2/2015

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- Water Right Holder Printed Name
- Land Owner of Existing Place of Use Printed Name
- Land Owner of Proposed Place of Use Printed Name

- Applicant Signature
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- Land Owner of Proposed Place of Use Signature

(Date: MM/DD/YR)

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