



APPLICATION FOR PERMIT
TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

SURFACE WATER GROUND WATER

\$10.00 MINIMUM STATUTORY EXAMINATION FEE REQUIRED WITH APPLICATION

(GRAY BOXES FOR OFFICE USE ONLY)

| | | | | | |
|---|-----------------------|----------------------------|---------------------------------|---------------------------|----------------------------|
| APPLICATION NO. G429815 | W.R.I.A. 30 | COUNTY Klickitat | PRIORITY DATE 10-3-88 | TIME | ACCEPTED KB |
| APPLICANT'S NAME - PLEASE PRINT David R Counts | | | | BUSINESS TEL. | |
| ADDRESS (STREET) 310 Anderson Rd | | | | HOME TEL. 723-5001 | (ZIP CODE) 98620 |
| (CITY) Goldendale | | | | (STATE) Wn | |
| DATE & PLACE OF INCORPORATION IF APPLICANT IS A CORPORATION | | | | | |

1. SOURCE OF SUPPLY

| | |
|--|--|
| IF SURFACE WATER | IF GROUND WATER |
| SOURCE (NAME OF STREAM, LAKE, SPRING, ETC.) (IF UNNAMED, SO STATE) | SOURCE (WELL, TUNNEL, INFILTRATION TRENCH, ETC.) |
| | A Well |
| TRIBUTARY | SIZE AND DEPTH |
| | 8" 440' deep |

2. USE

USE TO WHICH WATER IS TO BE APPLIED (DOMESTIC SUPPLY, IRRIGATION, MINING, MANUFACTURING, ETC.)

IRRIGATION

| | | | | |
|---|-----------------------------------|----|------------------------------------|--------------------|
| ENTER QUANTITY OF WATER REQUESTED USING UNITS OF: | CUBIC FEET PER SECONDCFS | OR | GALLONS PER MINUTE 50GPM | ACRE FEET PER YEAR |
|---|-----------------------------------|----|------------------------------------|--------------------|

TIMES DURING YEAR WATER WILL BE REQUIRED

April to Oct

IRRIGATION DURING IRRIGATION SEASON

| | | |
|---|---|--|
| IF IRRIGATION, NUMBER OF ACRES 10 acres | IF DOMESTIC USE, NUMBER OF UNITS BY TYPE, E.G. 1-HOME, 1-MOBILE HOME, 2-CAMPSITES, ETC. | IF MUNICIPAL USE, ESTIMATED POPULATION 20 YEARS FROM TODAY |
| DATE PROJECT WAS OR WILL BE STARTED May 1, 1988 | DATE PROJECT WAS OR WILL BE COMPLETED May 1, 1988 | |

3. LOCATION OF POINT OF DIVERSION/WITHDRAWAL

3A. IF IN PLATTED PROPERTY

| | | | | | | |
|-----|-------|------------------------------------|---------|------|-------|--|
| LOT | BLOCK | OF (GIVE NAME OF PLAT OR ADDITION) | SECTION | TOWN | RANGE | ALSO, PLEASE ENCLOSE A COPY OF THE PLAT AND MARK THE POINT(S) OF WITHDRAWAL OR DIVERSION |
| | | | | | | |

3B. IF NOT IN PLATTED PROPERTY

ON ACCOMPANYING SECTION MAPS, ACCURATELY MARK AND IDENTIFY EACH POINT OF DIVERSION. SHOW NORTH-SOUTH AND EAST-WEST DISTANCES FROM NEAREST SECTION CORNER OR PROPERTY CORNER.

ALSO, ENTER BELOW THE DISTANCES FROM THE NEAREST SECTION OR PROPERTY CORNER TO THE DIVERSION OR WITHDRAWAL.

1000' south and 500' east of the N.W. corner of Sec 33

| | | | | |
|--|----------------------|-------------------------|--------------------------------------|----------------------------|
| LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION) N.W. 1/4, N.W. 1/4 | SECTION 33 | TOWNSHIP N. 5 | RANGE (E. OR W.) W.M. 15 E | COUNTY Klickitat |
|--|----------------------|-------------------------|--------------------------------------|----------------------------|

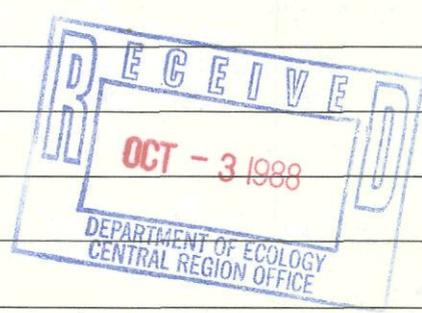
4. DO YOU OWN THE LAND ON WHICH THIS SOURCE IS LOCATED. IF NOT, INSERT NAME & ADDRESS OF OWNER

Yes

5. LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED

ATTACH A COPY OF THE LEGAL DESCRIPTION OF THE PROPERTY (ON WHICH THE WATER WILL BE USED) TAKEN FROM A REAL ESTATE CONTRACT, PROPERTY DEED OR TITLE INSURANCE POLICY. OR, COPY CAREFULLY IN THE SPACE BELOW.

N.E 1/4 of S.W 1/4 of N.W 1/4 of Sec 33, T-5N, R-15 E



129815

Owner

ARE THERE ANY EXISTING WATER RIGHTS RELATED TO THE LAND ON WHICH THE WATER IS TO BE USED (INCLUDING WATER PROVIDED BY IRRIGATION DISTRICTS OR DITCH COMPANIES.)

YES

NO

IF YES, FROM WHAT SOURCE (i.e. SURFACE OR GROUND WATER) AND UNDER WHAT AUTHORITY

6. DESCRIPTION OF SYSTEM PROPOSED OR INSTALLED

(FOR EXAMPLE: SIZE OF PUMP, CAPACITY OF PUMP, PUMP MOTOR HORSE POWER, PIPE DIAMETER, NUMBER OF SPRINKLERS, ETC.)

A 7" pump with 60 H.P. motor in well. Pumped into a holding pond. 75 H.P. pump into main lines, 6" and 8", & 10 sprinklers to cover the 10 acres

REMARKS

7.

IF 10 ACRE-FEET OR MORE OF WATER IS TO BE STORED AND/OR IF THE WATER DEPTH WILL BE 10 FEET OR MORE AT THE DEEPEST POINT, A STORAGE PERMIT MUST BE FILED IN ADDITION TO THIS PERMIT. THESE FORMS CAN BE SECURED, TOGETHER WITH INSTRUCTIONS, FROM THE DEPARTMENT OF ECOLOGY.

SIGNATURES

David R Counts
LEGAL LANDOWNERS NAME
(PLEASE PRINT)

David R Counts
APPLICANT'S SIGNATURE

David R Counts
LEGAL LANDOWNER'S SIGNATURE

310 Anderson Rd, Goldendale, Wn 98620
LEGAL LANDOWNER'S ADDRESS

FOR OFFICE USE ONLY

STATE OF WASHINGTON }
DEPARTMENT OF ECOLOGY } SS.

This is to certify that I have examined this application together with the accompanying maps and data, and am returning it for correction or completion as follows:

8918-130

In order to retain its priority date, this application must be returned to the Department of Ecology, with corrections, on or before....., 19.....

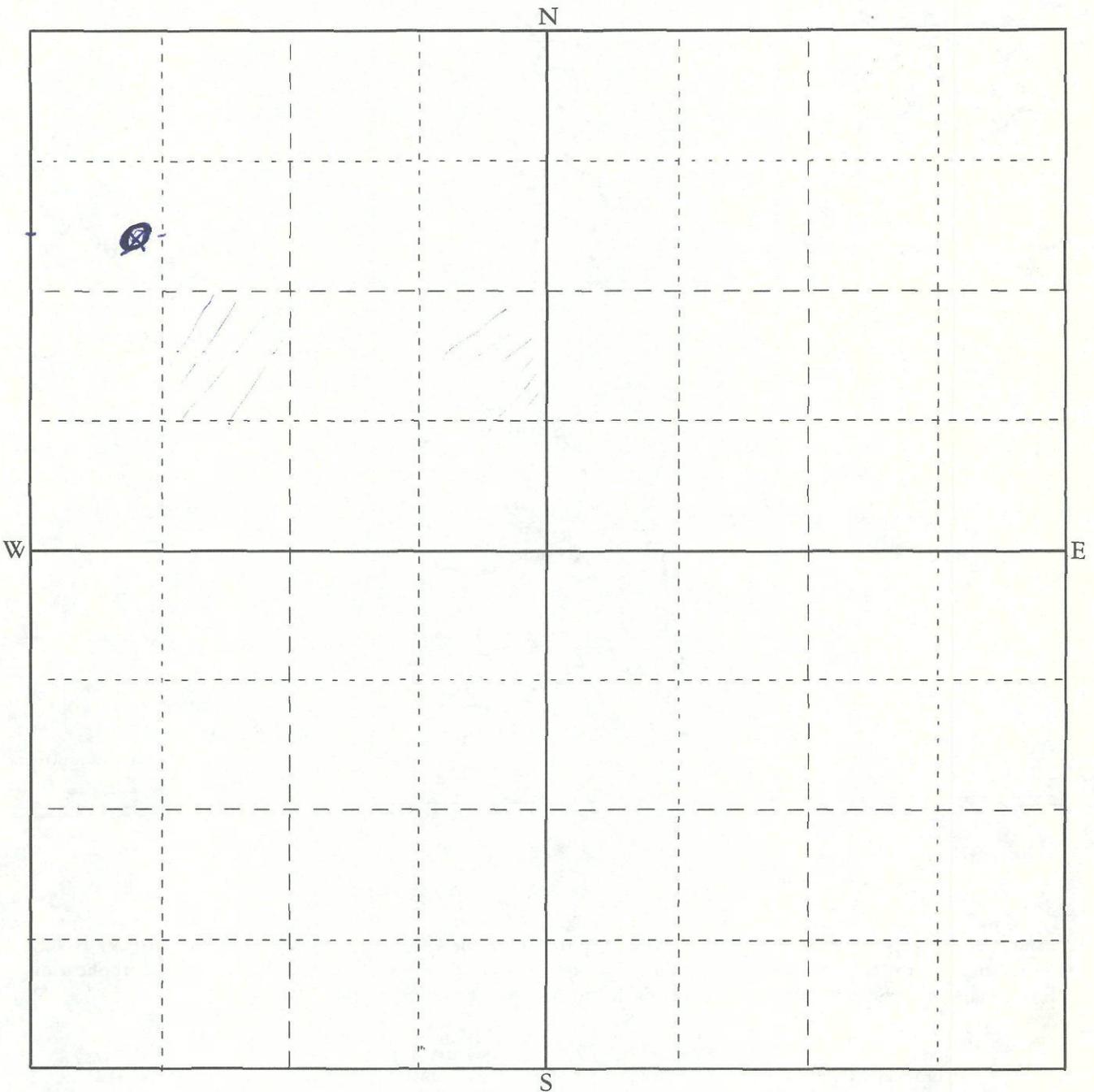
Witness my hand this.....day of....., 19.....

Department of Ecology

G420815

SECTION MAP

Sec. 33 Twp. T N. R. 15 E



Scale: 1 inch = 800 feet (each small square = 10 acres)

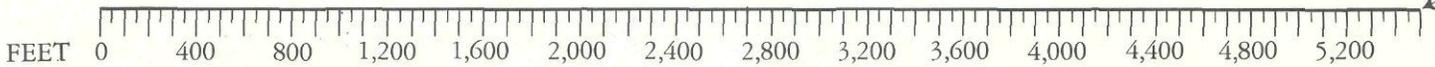
Show by a cross (X) the location of point of diversion (surface water source) or point of withdrawal (ground water source); For ground water applications, show by a circle (O) the locations of other wells or works within a quarter of a mile.

Indicate traveling directions from nearest town in space below.

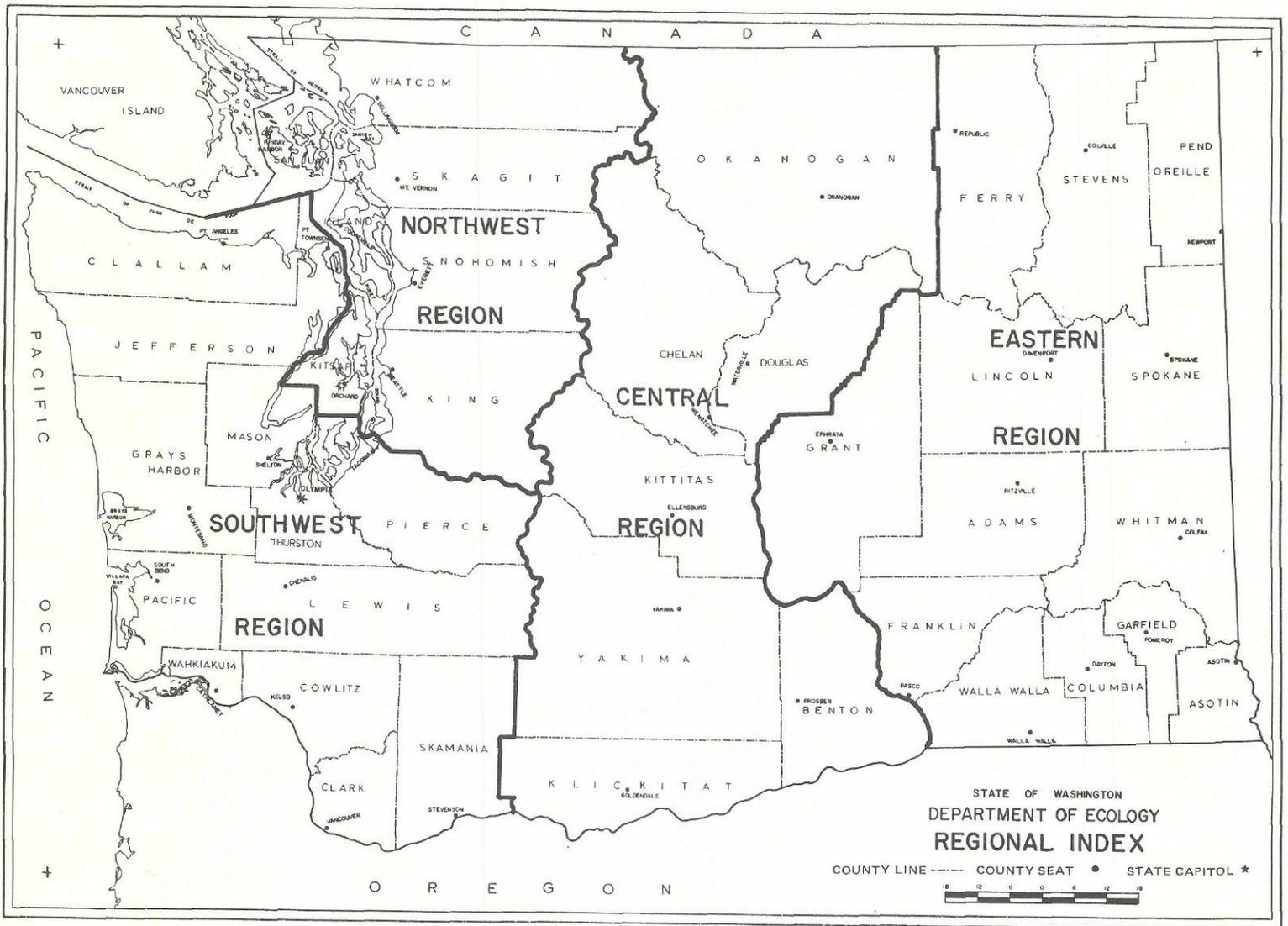
12 miles N.W. of Goldendale

Detach here

Fold along scale



Detach this scale at the perforation, fold excess paper under or cut off excess by cutting along the scale line. This scale corresponds to the SECTION MAP above. You can read feet directly from this scale to outline property and locate points of diversion or withdrawal on the SECTION MAP. Enclose this map along with the application and \$10.00 examination fee.



Your water right application will be processed by the Regional Office of the Department of Ecology having jurisdiction in the area in which your water works are located. Please submit your completed application form, maps, sketches and \$10.00 examination fee to the appropriate Regional Office.

Northeast Regional Office
4350 150th Avenue N.E.
Redmond, Washington 98052
Tel. (206) 885-1900

Central Regional Office
3601 West Washington
Yakima, Washington 98903
Tel. (509) 575-2800

Southwest Regional Office
7272 Cleanwater Lane
Olympia, Washington 98504
Tel. (206) 753-2309

Eastern Regional Office
103 East Indiana Avenue
Spokane, Washington 99207
Tel. (509) 456-2926

The appropriate Regional Office will be happy to answer any further questions you may have.