



Application for a Water Right Permit

For Ecology Use
(Date Stamp)



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DEPT. OF ECOLOGY
FISCAL & BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

- GROUND WATER SURFACE WATER
- PERMANENT SHORT TERM TEMPORARY
- DROUGHT

***A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.**

Section 1. APPLICANT

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

Applicant/Business Name: Erik Folke		Phone No: 509-665-4332	Other No: 509-884-6313
Address: 201 25 th Street NE			
City: East Wenatchee		State: WA	Zip: 98802-4098
Email Address (if available): erik.vfolke@gmail.com			

Contact Name (if different from above):		Phone No:	Other No:
Relationship to Applicant:			
Address:			
City:		State:	Zip:
Email Address (if available):			

Legal Land Owner or Part Owner Name of the Proposed Place of Use: Same as above.		Phone No:	Other No:
Address:			
City:		State:	Zip:
Email Address (if available):			

For Ecology Use	APPLICATION NO: 54-33107	SEPA: Exempt/Not Exempt		
	Fee Paid: 50% Check No: 1933 11-25-13	ECY Coding: 001-001-WR1-0285-000011		
Date Returned	By	Priority Date 11-25-2013	By	WRIA: Leo OKANDBAN
Pre-application interviewer:				

Section 2. STATEMENT OF INTENT

Do you own the land on which the proposed point of diversion/withdrawal is located? YES NO
 If no, do you have legal authority to make this application for use of another's land? YES NO

Briefly describe the purpose of your proposed project: **Purpose is to continue use of my spring to fill backpack sprayer to spot spray noxious weeds and for occasional hand irrigation to establish native plantings. This requires rerouting of spring gravity overflow discharge to my side of the fence.**

Anticipated length of time to complete your project: **One week**

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
1. Noxious weed spot spraying, 25 loads of 4 gallon backpack	0.5 gpm, max. overflow from spring		0.0003 (100 gallons)	Seasonal 3/15-11/15, typ. one weekend in July
2. Hand irrigation to establish native plantings	Using same flow as #1		0.0006 (200 gallons)	Seasonal 3/15-11/15, as needed to establish plants
TOTAL:	0.5 gpm		300 gallons	

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? YES NO

Is this request for a temporary permit? YES NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ___/___/___ TO: ___/___/___

Section 3. POINT OF DIVERSION OR WITHDRAWAL

(Complete A or B, and C below)

A.) If Surface Water Source	B.) If Ground Water Source
<input checked="" type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: Folke Spring	Well diameter & depth: _____
Tributary to: underground/Beaver Creek/Toroda Crk	Number of proposed points of withdrawal: _____
Number of proposed diversion points: One	Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have an existing diversion? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test.
	Well Tag ID No. _____

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	1/4	1/4	Section	Township	Range	County
3931162005	SW	SE	16	39 N	31 E	Okanogan
Lot(s)	Block(s)		Subdivision			

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OKAN

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

200 Feet (North/ South) and 3870 feet (East/ West)
from the (NW SW NE SE) corner of Section 16.

Parcel No.	1/4	1/4	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

_____ feet (North/ South) and _____ feet (East/ West)
from the (NW SW NE SE) corner of Section _____

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Section 4. PLACE OF USE

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 it carefully in the space below.

The southwest quarter of the southeast quarter of Section 16, Township 39 North, Range 31 East W.M., situation in the County of Okanogan, State of Washington.

1/4	1/4	Section	Twp.	Range	County	Parcel No.
SW	SE	16	39 N	31 E	Okanogan	3931162005

Do you own all the lands on which the proposed place of use is located? YES NO.

If no, do you have legal authority to make this application for use of another's land? YES NO

Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? YES NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

See both attached after sheet 7.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): There is currently a concrete cylinder in the ground which collects spring water and discharges overflow through a hole in the side and a pipe. I propose to pipe this overflow through a 1" diameter HDPE tube approximately 100' horizontally to gravity flow to a 150 gallon water trough, where overflow will go back to the ground. The trough will provide a location to fill a backpack sprayer to spot spray noxious weeds and to fill a watering can to hand irrigate native plantings as needed to get them established. Trough will also provide surface water for native wildlife.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below) N/A

A.) Domestic Water Systems only	B.) Municipal Water Systems only <i>(defined under RCW 90.03.015)</i>
Projected number of connections to be served: _____	Present population to be served water: _____
Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: _____	
Name of water system: _____	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 40* ACRES *But only ~ 20 individual plants, such as elderberry or chokecherry scattered on this 40 acres.

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: N/A

Is the proposed project for a dairy farm? YES NO

Other Proposed Farm Uses

Describe all proposed uses: Filling a four gallon backpack sprayer for approximately 25 loads annually to spot spray noxious weeds (musk thistle, knapweed, Houndstongue, etc) scattered over the 40 acres.

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? YES NO

Do you have a controlling interest in a Family Farm Development Permit? YES NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head N/A and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: N/A

Other Use

None.

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? YES NO

Are you proposing to store more than 10 acre-feet of water? YES NO

Will the water depth be 10 feet or more? YES NO

If you answered yes to any of the above questions, please describe: Storage will be a 150 gallon Rubbermaid water trough.

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: From Tonasket, east on SR20 to Wauconda Café, then left and north on Toroda Creek Road, then left and east on Beaver Canyon Road toward Chesaw, then right after ~ 1 mile at mailbox up 'Sqove' road, through locked gate at base (DNR master key will open), through first gate past cabin.

Site Address: Parcel 3931162005. No physical address on Sqove road since no building or improvements on this parcel.

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Erik V. Folke
 Print Name
 (Applicant or authorized representative)

Erik V. Folke
 Signature

11/21/2013
 Date

Erik V. Folke
 Print Name
 (Legal Owner or Part Owner Place of Use)

Erik V. Folke
 Signature

11/21/2013
 Date

Tilina-Lisa Folke
 Print Name
 (Legal Owner or Part Owner Place of Use)

Tilina-Lisa Folke
 Signature

11/21/13
 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 checked="" 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 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

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

