



WATER RESOURCES
Application for Change/Transfer of a Water Right

'16 JAN 28 A6:52

DEPT. OF ECOLOGY
FISCAL & BUDGET

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: _____

No filing fee is required for applications for:

- Drought
- Cost Reimbursement
- Water Conservancy Board

I have completed a pre-application consultation with Ecology.

1. Applicant Information

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED	_____
CHECK NO.	_____ FEE \$ <input checked="" type="checkbox"/>
DATE ACCEPTED	1-28-2016 BY KT
CHANGE NO.	CG3-#07635C
COUNTY	Adams WRIA 41
SPECIAL AREA	Odessa
SEPA:	<input checked="" type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT
ECY CODING:	001-002-WR10285-000011
APP NO.	7635 PERMIT NO. 7186
CERT NO.	6249-A CERT OF CHG NO. _____
	6798819

APPLICANT/BUSINESS NAME <i>Goodrich Farms Inc</i>	PHONE NO. <i>509 989 7777</i>	FAX NO.
ADDRESS <i>1044 Rd. Q SE</i>		
CITY <i>Moses Lake</i>	STATE <i>WA</i>	ZIP CODE <i>98837</i>
EMAIL ADDRESS (IF AVAILABLE) <i>ELLFOTTGOODRICH@GMAIL.COM</i>		
CONTACT (IF DIFFERENT FROM ABOVE) <i>SAME</i>	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE <i>SAME</i>	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER (6249-A)	RECORDED NAME(S) <i>Robert & Gary Melcher</i>
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 #
<i>A Well</i>				<i>GL4 7</i>	<i>20</i>	<i>32</i>		

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

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
<i>Same - No Change</i>								

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):

- 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
<i>Irrigation of 130 Acres</i>	<i>180</i>	<i>192</i>	<i>March to October</i>

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

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
<i>Same</i>			

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:
 (SW 7 20 32 North Half SE 12 20 31)

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
			20	32	Adams		130

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES NO
 IF NO, PROVIDE OWNER NAME(S):

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

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:
 West Half of 7 20 32

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
							130

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES 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):

6. Remarks and Other Relevant Information:

Some Land In CRP

Department of Ecology

IF FOR SEASONAL OR TEMPORARY, START DATE ___/___/___ END DATE ___/___/___ JAN 2016

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

Department of Ecology

JAN 28 2016

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.

Elliott Goodrich Vice President Matt Goodrich VP Goodrich Farms Inc 1-26-16
 Applicant Printed Name - Title Applicant Signature (Date: MM/DD/YYYY)

Goodrich Farms Inc Matt Goodrich VP Goodrich Farms Inc 1-26-16
 Water Right Holder Printed Name Water Right Holder Signature (Date: MM/DD/YYYY)

Goodrich Farms Inc Matt Goodrich VP Goodrich Farms Inc 1-26-16
 Land Owner of Existing Place of Use Printed Name Land Owner of Existing Place of Use Signature (Date: MM/DD/YYYY)

Goodrich Farms Inc Matt Goodrich VP Goodrich Farms Inc 1-26-16
 Land Owner of Proposed Place of Use Printed Name Land Owner of Proposed Place of Use Signature (Date: MM/DD/YYYY)

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<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 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

This form is available electronically.

CRP-1
(07-23-10)

U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

CONSERVATION RESERVE PROGRAM CONTRACT

NOTE: The authority for collecting the following information is Pub. L. 107-171. This authority allows for the collection of information without prior OMB approval mandated by the Paperwork Reduction Act of 1995. The time required to complete this information collection estimated to average 4 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

1. ST. & CO. CODE & ADMIN. LOCATION 53 001	2. SIGN-UP NUMBER 32
3. CONTRACT NUMBER 2600C	4. ACRES FOR ENROLLMENT 331.20
5. FARM NUMBER 4274	6. TRACT NUMBER(S) 11841
8. OFFER (Select one) GENERAL <input type="checkbox"/> ENVIRONMENTAL PRIORITY <input type="checkbox"/>	9. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2008 TO: (MM-DD-YYYY) 09-30-2018

7. COUNTY OFFICE ADDRESS (Include Zip Code):
ADAMS COUNTY FARM SERVICE AGENCY
506 WEBER AVE SUITE A
RITZVILLE, WA 99169-2015
Department of Ecology

TELEPHONE NUMBER (Include Area Code): (509)659-1761

JAN 28 2018

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (who may be referred to as "the Participant"). The Participant agrees to place the designated acreage in the Conservation Reserve Program ("CRP") or other use set by CCC for the stipulated contract period from the date the contract is executed by the CCC. The Participant also agrees to implement on such designated acreage the Conservation Plan developed for such acreage and approved by the CCC and the Participant. Additionally, the Participant and CCC agree to comply with the terms and conditions contained in this Contract, including the Appendix to this Contract, entitled Appendix to CRP-1, Conservation Reserve Program Contract (referred to as "Appendix"). By signing below, the Participant acknowledges that a copy of the Appendix for the applicable sign-up period has been provided to such person. Such person also agrees to pay such liquidated damages in an amount specified in the Appendix if the Participant withdraws prior to CCC acceptance or rejection.

The terms and conditions of this contract are contained in this Form CRP-1 and in the CRP-1 Appendix and any addendum thereto. BY SIGNING THIS CONTRACT PRODUCERS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1, CRP-1 Appendix and any addendum thereto, CRP-2 or CRP-2C, if applicable; and, if applicable, CRP-15.

10A. Rental Rate Per Acre \$ 35.58	11. Identification of CRP Land (See Page 2 for additional space)				
B. Annual Contract Payment \$ 11,784	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
C. First Year Payment	11841	1	CP10	46.70	\$ 3,222
<i>(Item 10C applicable only to continuous signup when the first year payment is prorated.)</i>	11841	15	CP10	12.50	\$ 862
	11841	17	CP10	28.60	\$ 1,973

12. PARTICIPANTS

A(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code): GOODRICH FARMS INC 1044 ROAD Q SE MOSES LAKE, WA 98837-9309	(2) SHARE 100.00 %	(3) SOCIAL SECURITY NUMBER: (4) SIGNATURE DATE (MM-DD-YYYY)
B(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE %	(3) SOCIAL SECURITY NUMBER: (4) SIGNATURE DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Zip Code):	(2) SHARE %	(3) SOCIAL SECURITY NUMBER: (4) SIGNATURE DATE (MM-DD-YYYY)

(If more than three individuals are signing, continue on attachment.)

13. CCC USE ONLY - Payments according to the shares are approved

A. SIGNATURE OF CCC REPRESENTATIVE	B. DATE (MM-DD-YYYY)
------------------------------------	----------------------

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Food Security Act of 1985, (Pub. L. 99-198), as amended and the Farm Security and Rural Investment Act of 2002 (Pub. L. 107-171) and regulations promulgated at 7 CFR Part 1410 and the Internal Revenue Code (26 USC 6109). The information requested is necessary for CCC to consider and process the offer to enter into a Conservation Reserve Program Contract, to assist in determining eligibility and to determine the correct parties to the contract. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in determination of ineligibility for certain program benefits and other financial assistance administered by USDA agency. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law Enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, family status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs). Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

Original - County Office Copy Owner's Copy Operator's Copy