



STATE OF WASHINGTON
**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 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

CS4-23520C CHEL-15-01

(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: Change POD and move POU to allow for use at A new downstream location.

FOR OFFICE USE ONLY	
CHANGE No. <u>Chel-15-01</u>	WRIA <u>45</u>
DATE ACCEPTED <u>04-27-2015 4,9,15</u>	BY <u>[Signature]</u>
FEE \$ <u>1500.00</u>	REC'D <u>4,9,15</u>
CHECK No. <u>#4771</u>	<u>04-13-2015</u>
ECY Coding: 001-002-WR10285-000011	
SEPA: <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Not exempt	

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

1. Applicant Information:

APPLICANT/BUSINESS NAME Peter Burgoon & Judith Lurie	PHONE NO. (509) 663-3909	CELL NO. (509) 679-5622
ADDRESS 1137 Lower Sunny Slope Road		
CITY Wenatchee	STATE WA	ZIP CODE 98801

CONTACT NAME (IF DIFFERENT FROM ABOVE) Marc Marquis	PHONE NO. (509) 679-0337	FAX NO. ()
ADDRESS Peterson & Marquis Law Office 1227 First St.		
CITY Wenatchee	STATE WA	ZIP CODE 98801

LEGAL LAND OWNER or PART OWNER NAME OF PROPOSED PLACE OF USE J & S Crushing, LLC	PHONE NO. (509) 531-0599	FAX NO. ()
ADDRESS P.O. Box 487		
CITY Quincy	STATE WA	ZIP CODE 988048

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER S4-23520CWRIS	RECORDED NAME(S) Don R. Kay
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 PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

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.

54-23520 CWRIS

FOR OFFICE USE ONLY			
APP. NO. _____	PERMIT NO. _____	CERT. NO. _____	CERT. OF CHANGE NO. _____

ECY 040-1-97 (Rev. 03/11) If you need this document in an alternate format, please call the Water Resources Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

CS4-23520C

CHEL-15-01

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Unnamed Slough		SW	SW	20	23N	20E	232020320250	

45
chelan

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Columbia River			W1/2	22	15	23	TBD	
Well		E1/2	SW	22	15	23	150176001	

36 best

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

EXISTING: YES NO PROPOSED: YES NO - IF NO, PROVIDE OWNER(S) NAME: J&S Crushing LLC

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.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation 17ac	0.30	58.5	April 1 st to Oct. 31 st

B. Proposed

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

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Portion of SW							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
	SW	20	23N	20EWM	Chelan	232020330050	17ac

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

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
NWSE W of Hwy & E1/2 SW ELY of Priest Rapids Public Utility Dist. No. 2 Project Boundary							
LS Tax #15075 22 15 23							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
NW	SE	22	15	23	Grant	150176001	
E1/2	SW						

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO - IF NO, PROVIDE OWNER(S) NAME: J&S Crushing, LLC

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?
 YES NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____

6. Remarks and Other Relevant Information:

Applicant desires to transfer existing irrigation rights to a property located downstream in Mattawa, Grant Co. A new well will be developed located within SW Sec. 22 in addition To a new point of diversion location to be determined within the W1/2 of sec. 22.

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.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

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 am hereby granting 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.

_____ (Applicant Signature)	_____ (Applicant Signature)	___/___/___ (Date)
_____ (Water Right Holder)	_____ (Water Right Holder)	___/___/___ (Date)
_____ (Land Owner(s) of Proposed Place of Use)	_____ (Land Owner(s) of Proposed Place of Use)	___/___/___ (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- APPLICATION FEE NOT ENCLOSED
- MAP NOT INCLUDED or INCOMPLETE
- ADDITIONAL SIGNATURES REQUIRED
- SECTION _____ IS INCOMPLETE
- OTHER/EXPLANATION: _____

STAFF: _____ **DATE:** ___/___/___

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Peter S. Burgson _____ 12/05/2014
 (Applicant Signature) (Applicant Signature) (Date)

 (Water Right Holder) (Water Right Holder) / /
 (Date)

 (Land Owner(s) of Proposed Place of Use) (Land Owner(s) of Proposed Place of Use) / /
 (Date)

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_____	_____	1/21/15
(Applicant Signature)	(Applicant Signature)	(Date)
_____	_____	/ /
(Water Right Holder)	(Water Right Holder)	(Date)
_____	_____	/ /
(Land Owner(s) of Proposed Place of Use)	(Land Owner(s) of Proposed Place of Use)	(Date)

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