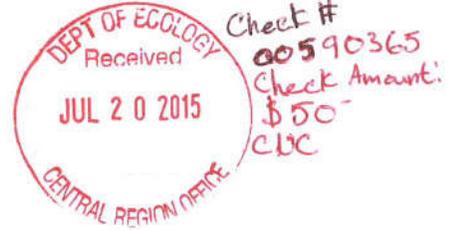


Application for a Water Right Permit

For Ecology Use
(Date Stamp)



Follow the attached instructions. Attach additional sheets as necessary.

- GROUND WATER SURFACE WATER DROUGHT
 PERMANENT SHORT TERM TEMPORARY

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

Section 1. APPLICANT

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

Applicant/Business Name: Yakama Nation	Phone No: 509-865-6262	Other No:
Address: 401 Fort Rd.		
City: Toppenish	State: WA	Zip: 98948
Email Address (if available):		

Contact Name (if different from above): Cory Kamphaus	Phone No: 509-548-9413 x 102	Other No:
Relationship to Applicant: Project biologist for the Mid-Columbia Coho Reintroduction Program		
Address: 7051 Hwy 97		
City: Peshastin	State: WA	Zip: 98847
Email Address (if available): kmc@yakamafish-nsn.gov		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: Methow Valley LLC	Phone No: 206-676-5616	Other No:
Address: 1938 Fairview Ave E, #300		
City: Seattle	State: WA	Zip: 98102
Email Address (if available): dougs@merrillgardens.com		

For Ecology Use	APPLICATION NO: <u>64-33150</u>	SEPA: Exempt/Not Exempt	
	Fee Paid: <u>50⁰⁰</u>	Check No: <u>00590365</u>	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date <u>07-20-2015</u> By <u>[Signature]</u>	WRIA: <u>48 OKAVOGAL</u>
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: The Yakama Nation proposes to acclimate coho, spring Chinook and/or steelhead at the Early Winters site. Acclimation would begin in March and fish would be released to migrate volitionally in April and May.

Anticipated length of time to complete your project: 3 years, construction is planned for 2016.

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 checked="" type="checkbox"/> Cubic Feet per Second (CFS)	<input type="checkbox"/> Gallons per Minute (GPM)		
Salmon acclimation	4		unknown	Seasonal: March 15 to June 15 and Temporary: during surface water interruptions
TOTAL:	4			

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
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<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input checked="" type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: _____ Tributary to: _____ Number of proposed diversion points: _____ Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> _____r: _____ _____ Well diameter & depth: <u>unknown</u> Number of proposed points of withdrawal: <u>2</u> Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. _____
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C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
9001030000	NW	NW	26	36N	19E	Okanogan
Lot(s)	Block(s)		Subdivision			

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OKW

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

See attached map ___ Feet (North/ South) and ___ feet (East/ West)
 from the (NW SW NE SE ___) corner of Section ___.

Parcel No.	¼	¼	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.

EARLY WINTERS MASTER CONDOMINIUM COMMON AREA						
¼	¼	Section	Twp.	Range	County	Parcel No.
NW	NW	26	36N	19E	Okanogan	9001030000

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: Methow Valley LLC, 1938 Fairview Ave E, Seattle, 98102.
206-676-5616

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: Claim G4-060789CL and permit G4-24313A. Through the years, there appears to have been complex redistribution of water rights and claims in the area. A permit for the Wilson Ranch (R.D. Merrill Co.) was a result of the consolidation of seven claims and rights. A redistribution of groundwater rights (e.g. CG4-24314(A)@1) and surface water claims (e.g. CS4-WRC069459@1) in the area has been proposed related to irrigation shares. There are several existing wells associated with this water right

redistribution located to the east of the proposed site.

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.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): Two wells are proposed to be drilled near the acclimation ponds. Pumped water would be moved through buried pipelines to an aerator built on the ground surface. After aeration, water would flow to the ponds, through outlet structures at the ends of the ponds, then through other buried pipelines to Early Winters Creek. See the attached figure.

An evaluation of potential impacts to surface water flow and to groundwater users in the area was conducted by GeoEngineers: GROUNDWATER WITHDRAWAL IMPACT ANALYSIS - EARLY WINTERS SITE, April 21, 2015.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

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: _____ Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Present population to be served water: _____ 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 = _____ ACRES

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

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? YES NO

Other Proposed Farm Uses

Describe all proposed uses: _____

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 _____ 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: _____

Other Use

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: Two earthen ponds (totaling 5,600 square feet of surface area) are proposed for acclimation. Impermeable liners will be installed on the pond bottoms to limit filtration to the ground. Pond sides will be sloped at a run of 2' for every rise of 1'. Steel structures at the outlet of each pond will hold screens in-place while fish are being acclimated.

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

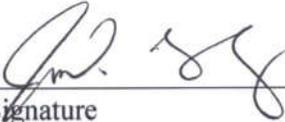
Provide detailed driving directions to the project site: From Winthrop, travel Northwest 15 miles on Hwy 20 to the Freestone Inn. Turn left onto the Inn access road then take the first right turn.

Site Address: _____

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.

JoDe L. Goudy, Chairman
 Print Name Yakama Nation
 (Applicant or authorized representative)


 Signature

5-11-15
 Date

Douglas O. Spear, SVP-CFO
 Print Name Mathew Valley LLC
 (Legal Owner or Part Owner Place of Use)


 Signature

6-25-15
 Date

 Print Name
 (Legal Owner or Part Owner Place of Use)

 Signature

 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 98902-3463 (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

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.

