



**State of Washington**  
**Application for a Water Right Permit**

SURFACE WATER  GROUND WATER  
 Permanent  Temporary  Short Term

For Ecology Use  
**RECEIVED**  
 MAY 20 2009  
 DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE  
 '09 MAY 18 A8:34

DEPT. OF ECOLOGY  
 PERSONNEL & BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

**Section 1. APPLICANT**

Applicant/Business Name: <b>Wilbur &amp; Mary Ann Mundy</b>		Phone No:	Other No:
Address: <b>2500 Canterbury Ln E #301</b>			
City: <b>Seattle</b>	State: <b>WA</b>	Zip: <b>98112-2564</b>	
Email Address (optional):			

Contact Name (if different from above): <b>Jamie M Morin</b>		Phone No: <b>206-838-7654</b>	Other No:
Relationship to Applicant: <b>Legal Counsel</b>			
Address: <b>315 Fifth Avenue South, Ste 1000</b>			
City: <b>Seattle</b>	State: <b>WA</b>	Zip: <b>98104-2682</b>	
Email Address (optional): <b>morin@mentorlaw.com</b>			

**Section 2. STATEMENT OF INTENT**

Briefly describe the purpose of your proposed project: **The applicant's surface water diversion on the Teanaway River washed on in January, 2009. The applicant proposes to replace the surface water diversion with a groundwater well. Water use from the groundwater well could be mitigated through the transfer of applicant's surface water right to the Trust Water Rights Program per Ecology's draft Policy 1022 "Priority Processing—Yakima River Basin Water Budget Neutral Projects."**

Anticipated length of time to complete your project: 2 years

**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)		
<b>Irrigation</b>	<b>404</b>		<b>292.5</b>	<b>May 1 through September 15</b>
<b>Stockwater</b>	<b>449</b>		<b>5 consumptive</b>	<b>September 16 through April 30</b>
<b>TOTAL:</b>				

For Ecology Use	APPLICATION NO: <b>G4-35240</b>	SEPA: Exempt/Not Exempt <b>EG</b>
	Fee Paid: <b>100% 05-18-09</b> Check No: <b>2019</b>	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date <b>5-18-2009</b> By <b>39 Kittitas</b>

**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

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

**C.) Point of Diversion/Withdrawal – Legal Description**

Parcel No.	¼	¼	Section	Township	Range	County
	<b>NE</b>	<b>NE</b>	<b>33</b>	<b>20N</b>	<b>16E</b>	<b>Kittitas</b>
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\_\_\_\_\_.

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.*

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

Provide the owner name(s), address, and phone number: \_\_\_\_\_

For Ecology Use	APPLICATION NO: _____ SEPA: Exempt/Not Exempt Fee Paid: _____ Check No: _____ ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____ Priority Date _____ By _____ WRIA: _____

**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.

**45 acres within the portion of SE1/4SE1/4 of Section 28 and the NE1/4NE1/4 of Section 33, T. 20N, R. 16 E.W.M. lying southwesterly of the Masterson Ditch**

1/4	1/4	Section	Twp.	Range	County	Parcel No.
NE	NE	33	20N	16E	Kittitas	

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: S4-01647CTCL

**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): \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**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: _____	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)
<b>C.) Water System Planning</b>	

For Ecology Use	APPLICATION NO: _____	SEPA: Exempt/Not Exempt
	Fee Paid: _____	Check No: _____
Date Returned _____		Priority Date _____
By _____		By _____
WR1A: _____		ECY Coding: 001-001-WR1-0285-000011

Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division?  YES  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?  YES  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 = 45 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: \_\_\_\_\_  
\_\_\_\_\_

For Ecology Use	APPLICATION NO: _____	SEPA: Exempt/Not Exempt
	Fee Paid: _____	Check No: _____
Date Returned _____		ECY Coding: 001-001-WR1-0285-000011
By _____	Priority Date _____	By _____
		WRIA: _____

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: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*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: Take exit 85 for WA-903/WA-970 toward Cle Elum / Wenatchee; Merge onto Sunset Hwy; Turn right at WA-970; Turn left at E Masterson Rd; Turn left at Masterson Rd

Site Address: 1501 Masterson Road, Cle Elum, WA

**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.**

Jamie M Morin  
Print Name  
(Applicant or authorized representative)

*Jamie Morin*  
Signature

5/13/09  
Date

Wilbur Mundy  
Print Name  
(Landowner of Place of Use)

*W Mundy*  
Signature

5-9-09  
Date

For Ecology Use	APPLICATION NO: _____	SEPA: Exempt/Not Exempt
	Fee Paid: _____	Check No: _____
Date Returned _____		Priority Date _____
By _____		By _____
		WRIA: _____