WASHINGTON STATE DEPARTMENT OF ECOLOGY

State of Washington Application for a Water Right

$10.00 CK# 19137 4/3/01 VRJ

For Ecology Use
Fee Paid _____
Date _____

Please follow the attached instructions to avoid unnecessary delays.

DEPT. OF ECOLOGY Received APR 03 2001 CENTRAL

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Wyckoff Farms, Inc. Home Tel: ( ) -

Mailing Address P.O. Box 249 Work Tel: (509) 882 - 3934

City Grandview State WA Zip+4 98930 + FAX: (509) 882 - 5771

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name Janet Mount Home Tel: ( ) -

Mailing Address P.O. Box 249 Work Tel: (509) 882 - 3934

City Grandview State WA Zip+4 98930 + FAX: (509) 882 - 5771

Relationship to applicant _____

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 1420 (☑ gallons per minute or ☐ cubic feet per second) from a ☐ surface water source or ☑ ground water source (check only one) for the purpose(s) of Irrigation - apply water to land to grow crops. **ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.)** *NOTE: A tax parcel number or a plat number is not sufficient.*

Estimate a maximum annual quantity to be used in acre-foot per year: approx. 372 ac. ft.per year

☑ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From 3/1/01 to 12/31/01 For supplemental irrigation of 123.9 acres during the 2001 drought season

Section 4. WATER SOURCE

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: Number of diversions: _____	A permit is desired for a well(s). Well drilled under Certificate of Water Right #G4-25176C
Source flows into (name of body of water):	Size & depth of well(s): See enclosed well report

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:

650 ft. North and 1050 feet west of the east quarter corner of Sec. 4

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
SE	NE	4	9	24E	Benton			

For Ecology Use Date Received: April 3, 2001 Priority Date: April 3, 2001

SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____

Date Accepted As Complete 04/04/01 By _____ Date Returned _____ By _____ WRIA: 37

ECY 040-1-14
Rev. 7/97 * * f

APPLICATION

Appl. No.: G4-32957

Section 5. GENERAL WATER SYSTEM INFORMATION

A. Name of system, if named: _____

B. Briefly describe your proposed water system. (**See instructions.**)

Wyckoff Farms is requesting an emergency drought permit to withdraw water for an additional 123.9 acres from the well covered under Certificate of Water Right No. G4-25176P for supplemental irrigating. Due to the extemely poor outlook for water supply we have an urgent serious need for an alternative supply. We risk a crop loss and damages estimated at $4.6 million. To help reduce these risks and realize some return benefits from drilling our well we ask that the well be approved for supply to these lands. We have no evidence suggesting any other rights would be impaired with this temporary water use.

C. Do you already have any water rights or claims associated with this property or system? ☑ YES ☐ NO
PROVIDE DOCUMENTATION.

Certificate of Water Right attached

Section 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION
(Completed for all domestic/public supply uses.)

A. Number of "connections" requested: _____ Type of connection _____
(Homes, Apartment, Recreational, etc.)

B. Are you within the area of an approved water system? ☐ YES ☐ NO
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

D. Do you have an approved conservation plan? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION
(Completed for all irrigation and agriculture uses.)

A. Total number of acres to be irrigated: 123.9

B. List total number of acres for other specified agricultural uses:

Use _____ Acres _____
Use _____ Acres _____
Use _____ Acres _____

C. Total number of acres to be covered by this application: 123.9

D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up 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;
‡ Acreage proposed to be irrigated under other pending application(s).

1. Is the combined acreage greater than 2000 acres? ☐ YES ☑ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☑ NO
If yes, enter permit no.: _____

E. Farm uses:
Stockwater - Total # of animals _____ Animal Type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

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

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 apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. Well-Go north on Missimer Rd. approx. 1/2 mile North of Missimer & Evans intersection turn west on the North side of the Roza lateral - follow lateral approx. 400 ft to w the well
PLACE OF USE-Pressure pipe from well to property described in attached legal description

Section 10. REQUIRED MAP

A. Attach a map of the project. (**See instructions.**)

See attached

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? ☐ YES ☑ NO
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

Wyckoff Farms leases the land from Kelly Anderson-124 Rendezvous Trail, Livingston. MT 59047

B. Does the applicant own the land on which the water source is located? ☑ YES ☐ NO
If no, submit a copy of agreement:

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 grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

WYCKOFF FARMS, INC.

By: [signature] 4/2/01
Applicant (or authorized representative) Date

Kelly Anderson March 29 2001
Landowner for place of use (if same as applicant, write "same") Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ *(date).*	

Ecology staff _____ Date _____

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).