



# Emergency Drought Action

## State of Washington Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.



For Ecology Use
Fee Paid <u>10<sup>00</sup></u>
Date <u>3/23/05</u>
CR# <u>039151</u>

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

Name Wyckoff Farms, Inc. Home Tel: ( ) -  
 Mailing Address PO 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 PO 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-feet 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 3/1/05 to 12/31/05 For supplemental irrigation of 123.9 acres during the 2005 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.:						A permit is desired for _____ well(s). Well drilled under Certificate of water Right #G4-25176C See Emerg. Permit #G4-32957		
Number of diversions: _____								
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: <u>650 Ft. North and 1050 Ft. West of the East quarter corner of Section 4.</u>								
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: <u>MARCH 23, 2005</u> Priority Date: <u>MARCH 23, 2005</u> <u>BENTON</u>		
SEPA: Exempt/Not Exempt						FERC License # _____ Dept. Of Health # _____		
Date Accepted As Complete <u>03/23/05</u> By <u>[Signature]</u>						Date Returned _____ By _____ WRIA: <u>37</u>		

6432957

37 Bent

Appl. No.: 64-32957-05

**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. G4-25176C for supplemental irrigating. due to the extremely poor outlook for water supply, we have an urgent, serious need for an alternative supply. We risk 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**  
*(Complete 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 6000 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 and Evans intersection, turn West on the North side of the Roza lateral - follow lateral approx. 400 feet to 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 59074

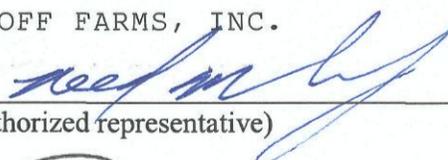
B. Does the applicant own the land on which the water source is located?

YES  NO

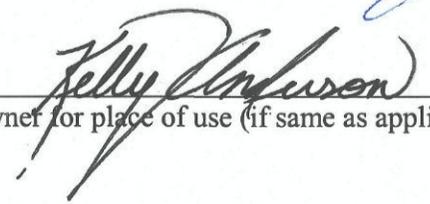
If no, submit a copy of agreement:

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:   
Applicant (or authorized representative)

Date

  
Landowner for place of use (if same as applicant, write "same")

Date

March 18 2005

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