

Water Right #: S4-28609 (HT-100) Right Holder: Sunshine Ag., Inc. CSRIA-Form3

2001 Seasonal Water Right Transfer—Water Use Monitoring Form

(BASED ON TOTAL SYSTEM OPERATION GPM)

Follow the steps indicated below to calculate and record your water use.

Step #1:

For each week, insert the number of days of water application and the estimated gpm for the system being used. The remaining numbers will be automatically calculated.

Date-Week #	Days Application	Estimated System gpm	Estimated Gals/Wk.	Ac-Inches Used	Ac-ft. Used	Cum. Total Ac-ft. Used
4/23/01-1	0.00	0	0	0.0	0.00	0.00
4/30/01-2	0.00	0	0	0.0	0.00	0.00
5/7/01-3	0.00	0	0	0.0	0.00	0.00
5/14/01-4	1.25	600	1,080,000	39.8	3.31	3.31
5/21/01-5	5.00	600	4,320,000	159.0	13.25	16.56
5/28/01-6	5.00	600	4,320,000	159.0	13.25	29.82
6/04/01-7	5.00	600	4,320,000	159.0	13.25	43.07
6/11/01-8	5.00	600	4,320,000	159.0	13.25	56.32
6/18/01-9	5.00	600	4,320,000	159.0	13.25	69.57
6/25/01-10	5.00	600	4,320,000	159.0	13.25	82.82
7/02/01-11	5.00	600	4,320,000	159.0	13.25	96.07
7/09/01-12	5.00	600	4,320,000	159.0	13.25	109.33
7/16/01-13	5.00	600	4,320,000	159.0	13.25	122.58
7/23/01-14	5.00	600	4,320,000	159.0	13.25	135.83
7/30/01-15	5.00	600	4,320,000	159.0	13.25	149.08
8/06/01-16	5.00	600	4,320,000	159.0	13.25	162.33
8/13/01-17	5.00	600	4,320,000	159.0	13.25	175.58
8/20/01-18	5.00	600	4,320,000	159.0	13.25	188.83
8/27/01-19	5.00	600	4,320,000	159.0	13.25	202.09
9/03/01-20	0.00	600	0	0.0	0.00	202.09
9/10/01-21	0.00	600	0	0.0	0.00	202.09
9/17/01-22	0.00	600	0	0.0	0.00	202.09
9/24/01-23	0.00	600	0	0.0	0.00	202.09
10/1/01-24	0.00	600	0	0.0	0.00	202.09
10/8/01-25	0.00	0	0	0.0	0.00	202.09
10/15/01-26	0.00	0	0	0.0	0.00	202.09
10/22/01-27	0.00	0	0	0.0	0.00	202.09
Total	76.25	—	65,880,000	2,425.0	202.09	202.09

Step #2: Insert total irrigated acres.

Total Acres Irrigated
100

Step #3: Total Water use is calculated

Step #4: Total water use per acre is calculated

Est. Ac-Ft/ Acre Used
2.02

Note: Above data are based on pump-system tested gpm and weekly recorded operation periods. Data are for 2001 operations, consistent with the water right requirements.

SENDER: *Ed Smith WR-88* *5B*

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered. *SWC-1052*

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

**BEEBE ORCHARD CO
(WENATCHEE-BEEBE ORCHARD CO)
PO BOX 1807
WENATCHEE WA 98807**

4a. Article Number: *2105-6207*

4b. Service Type

<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Certified
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured
<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> COD

7. Date of Delivery: **MAY 16 2001**

5. Received By: (Print Name)

6. Signature: (Addressee or Agent) *[Signature]*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

Recipient's Name (Please Print Clearly) (To be completed by mailer): *Beebe Orchard Co*

Street, Apt. No., or PO Box No.

City, State, ZIP+4

PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0023 2105 6207



CERTIFIED MAIL

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD AT DOTTED LINE



STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

15 West Yakima Avenue, Suite 200 • Yakima, Washington 98902-3452 • (509) 575-2490

May 15, 2001

CERTIFIED MAIL

Beebe Orchard Co
(Wenatchee-Beebe Orchard Co)
PO Box 1807
Wenatchee WA 98807

RE: Emergency Drought Change Authorization (SWC-1052)

Enclosed please find a copy of the Department of Ecology's Emergency Drought Change Authorization(s). This report constitutes our determination and order regarding the above-referenced application for change. If you have any questions or concerns about any of this information, please call Carol Mortensen of the Department of Ecology at (509) 575-2597.

This Order may be appealed pursuant to RCW Chapter 43.21B. The person to whom this Order is issued must file an appeal with the Pollution Control Hearings Board within thirty (30) days of receipt of this Order. Send the appeal to: Pollution Control Hearings Board, P.O. Box 40903, Olympia, Washington 98504-0903. At the same time, a copy of the appeal must be sent to: Department of Ecology, Fiscal Office, P.O. Box 47615, Olympia, Washington 98504-7615. All others receiving notice of this Order must file an appeal with the Pollution Control Hearings Board within thirty (30) days of the date the Order was mailed in the same manner described above.

Sincerely,

Robert F. Barwin, Section Manager
Water Resources Program

RFB:gg
010544a

Enclosures: Emergency Drought Change Authorization(s)

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STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

15 West Yakima Avenue, Suite 200 • Yakima, Washington 98902-3452 • (509) 575-2490

May 15, 2001

To: Carroll Palmer, Yakama Nation
✓ Gary Passmore, Colville Confederated Tribes

RE: Emergency Drought Change Authorization re: SWC-1052

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Sincerely,

Robert F. Barwin, Section Manager
Water Resources Program

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Enclosures: Emergency Drought Change Authorization(s)

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