



STATE OF WASHINGTON APPLICATION TO ENTER A WATER RIGHT INTO THE TRUST WATER RIGHT PROGRAM



NOTE: THIS FORM IS ONLY TO BE USED FOR THE
ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)

- Lease
 Purchase
 Donation
 Other

Explain: Trust transfer is contingent upon approval of a new water right application

- Portion of the identified existing water right

IF FOR SEASONAL OR TEMPORARY, START DATE _____
END DATE _____

FOR OFFICE USE ONLY OKANOBAN	
FILE No. <u>C64-27774P</u>	WRIA <u>50</u>
DATE ACCEPTED <u>12/24/2013</u>	BY <u>[Signature]</u>
FEE \$ <u>0</u>	REC'D <u>12/09/2013</u>
CHECK No. <u>[Signature]</u>	
SEPA: <input type="checkbox"/> Exempt	<input type="checkbox"/> Not exempt

IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)

1. Applicant Information:

APPLICANT/BUSINESS NAME The Highland Partnership	PHONE NO. 509-670-6611	FAX NO. ()
ADDRESS P.O. Box 1706		
CITY Wenatchee	STATE WA	ZIP CODE 98807

CONTACT NAME (IF DIFFERENT FROM ABOVE) Mark Peterson	PHONE NO. (509) 264-1882	FAX NO. ()
ADDRESS Peterson & Marquis Law Office 1227 First Street		
CITY Wenatchee	STATE WA	ZIP CODE 98801

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER G4-27774P	RECORDED NAME(S) The Highland Partnership
DO YOU OWN THE RIGHT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
ARE WATER DIVERSIONS/WITHDRAWALS OF THIS WATER RIGHT METERED OR MEASURED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IMPORTANT! PROVIDE INFORMATION SHOWING THE EXTENT OF WATER USE FOR EACH OF THE LAST FIVE YEARS	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

FOR OFFICE USE ONLY	
WATER RIGHT NO. _____	FILE (contract) NO. _____
C64-27774P	

3. How is Water to be Made Available for Trust?

<input type="checkbox"/> Alteration in method of diversion	<input type="checkbox"/> Alteration in water use/ irrigated acreage
<input type="checkbox"/> Alteration in method of delivery/conveyance	<input type="checkbox"/> Nonuse of one or more points of diversion
<input type="checkbox"/> Alteration in method of water application	<input checked="" type="checkbox"/> Nonuse of all or a portion of the named water right
<input type="checkbox"/> Alteration in type of crop	<input type="checkbox"/> Other, Explain below:
Name of funding source(s): NA	

WATER RIGHT DESCRIPTION *

4. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well Field	1	SE	SW	26	30N	26E		
	2		Gov Lots 1 & 2	34	30N	26E		
	3	NE	NW	35	30N	26E		
	4	NW	NW	35	30N	26E		
	5		Gov Lots 2 & 3	35	30N	26E		

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

5. Purpose of Use:

A. Existing Use of the Water Right

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
800ac Irrigation & Frost Protection	2556gpm	600af	Apr. 1 st to Oct. 31 / As Needed

B. Proposed Purpose of the Trust Water Right:

DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST:		ACRE-FEET/YR
PURPOSE OF USE		
Irrigation & Frost Protection		404.1af
Trust transfer for in-stream benefit and to mitigate new out of stream uses		195.9af

6. Place of Use:

A. Existing:

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
S1/2 of Sec.22; Portion of NE Sec. 28; S1/2SW of Sec. 23; W1/2 Sec. 26; Portion of Sec. 27; Portions of SE of Sec. 28 and NE of Sec. 33; Gov Lots 1 & 2 and a Portion of Gov Lot 3, NESW, NE, E1/2NW, and Portion of W1/2NW of Sec. 34; N1/2NW and Gov Lots 2&3 Sec. 35 ALL IN T30N, R26EWM Okanogan County							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
S1/2	S1/2	22	30N	R26E	Okanogan		
	NE	28					
	SW	23					
	W1/2	26					
		27					
	SE	28					

* If additional space is needed, please continue on the form: Attachment for Application to Enter a Water Right into the Trust Water Right Program.

	NE	33					
	Gov	34					
	Lts						
	1,2,3						
NE	SW	34					
	NE	34					
E1/2	NW	34					
W1/2	NW	34					
N1/2	NW	34					
	Gov	35					
	Lts						
	2&3						

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES NO – IF NO, PROVIDE OWNER(S) NAME:

6. Place of Use (continued)

B. Proposed:

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED
Same
Columbia River

7. Remarks and Other Relevant Information:

Trust transfer is for in-stream flow benefit and to mitigate new out of stream uses. Transfer is contingent upon approval of a new water right.

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

8. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

The Highland Partnership
by [Signature] 12.5.13
(Applicant) (Date)

The Highland Partnership
by [Signature] 12.5.13
(Water Right Holder) (Date)

The Highland Partnership
by [Signature] 12.5.13
(Land Owner(s) of Existing Place of Use) (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

6. Place of Use (continued)

B. Proposed:

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED
Same
Columbia River

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_____	____/____/____
(Applicant)	(Date)
_____	____/____/____
(Water Right Holder)	(Date)
_____	____/____/____
(Land Owner(s) of Existing Place of Use)	(Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____	DATE: ____/____/____