

WATER RESOURCES
Application for Change/Transfer of Water Right

DEPT. OF ECOLOGY
FISCAL & BUDGET

15 JAN -2 10:45
Date Stamp

For filing with the Department of Ecology or with County Conservancy Boards

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION
 IF FILED WITH THE DEPARTMENT OF ECOLOGY**

(Check all that apply.)

- Change purpose(s) of use
- Add purpose(s) of use
- Change point(s) of diversion/withdrawal
- Add point(s) of diversion/withdrawal
- Change/transfer place of use
- Other (i.e. consolidation, intertie, trust water)

Explain: _____

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

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED _____	
CHECK NO. _____	FEE \$ _____
DATE ACCEPTED _____	BY _____
CHANGE NO. _____	
COUNTY _____	WRIA _____
SPECIAL AREA _____	
SEPA: <input type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT	
ECY CODING: 001-002-WR10285-000011	
APP NO. _____	PERMIT NO. _____
CERT NO. _____	CERT OF CHG NO. _____

I have participated in a pre-application conference with Ecology.

1. Applicant Information

APPLICANT/BUSINESS NAME WA State Department of Natural Resources	PHONE NO. (509) 925-8510	FAX NO. (509) 925-8522
ADDRESS 713 Bowers Rd		
CITY Ellensburg	STATE WA	ZIP CODE 98926
EMAIL ADDRESS (IF AVAILABLE)		

CONTACT (IF DIFFERENT FROM ABOVE) Ingrid Ekstrom or Rick Roeder (with DNR)	PHONE NO. (509) 925-0944	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE) ingrid.ekstrom@dnr.wa.gov or rick.roeder@dnr.wa.gov		

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE Please refer to Section 6, Note #2)	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER Portion B of G3-01174C as described in 11/23/2009 water right change authorization	RECORDED NAME(S) Washington State Department of Natural Resources
DO YOU OWN THE RIGHT TO BE CHANGED? <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	

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.

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
well		NE	SE	17	8 N	37E	370817140001	AAM-452

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
well		NE	SE	17	8 N	37E	370817140001	AAM-452

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: YES NO PROPOSED: YES NO - IF NO, PROVIDE OWNER(S) NAME: Corkrum & Derby Family Trust

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.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FI/YR	PERIOD OF USE
Irrigation of 150 acres	740 gpm	166.42	Feb. 1 to Dec. 1

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FI/YR	PERIOD OF USE
Irrigation of 150 acres	740 gpm	166.42	Feb. 1 to Dec. 1

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:
 W1/2 and the SW1/4NE1/4 of Section 16, T. 8 N., R. 37 E.W.M.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
					Walla Walla	370816210002	150ac irrigation

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

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:
 W1/2 and the SW1/4NE1/4 of Section 16, T. 8 N., R. 37 E.W.M.
 and
 5.3 acres within the NW1/4 of SE1/4 of Section 16, T. 8 N., R. 37 E.W.M. as shown in the attached land use exchange map.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		16	8 N.	37 E.	Walla Walla	370816210002; & part 370816420003	150ac irrigation

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO
 IF NO, PROVIDE OWNER(S) NAME: DNR owns all land in W1/2 and SWNE of Section 16; Corkrum and Derby Family Trust owns the land within NWSE of Section 16, but DNR retains sole interest in entire water right and irrigates ~5.3acres within NWSE pursuant to a "land use exchange" agreement between DNR and Corkrum & Derby Family Trust (see attachment 6)

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

YES NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): Portion C of 2005 Change
Authorization of Ground Water Certificate No. 4631-A has an overlapping place of use. However, 4631-A(C) is used on different land than the 150 acres irrigated under G3-01174C. That is, 4631-A(C) is not used on the ~5.3 acres within the NWSE of Section 16, nor is it used on the ~144.7 acres within the W1/2 and the SWNE of Section 16 irrigated under G3-01174C. Please see attachment 6 for the "land use exchange" map.

6. Remarks and Other Relevant Information:

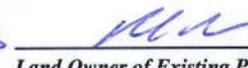
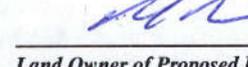
Note #1) Evidence of consistent, historic water use under the water right (part 2 Water Right Information):
 A) Department of Ecology's (Ecology) recent 2009 change decision documents the extent of Part B of G3-01174C to be 740gpm and 166.42 acre-ft/yr for irrigation of 150 acres as described in the 11/23/2009 Ecology decision affirming the Conservancy Board's decision (attached as Attachment 1).
 B) Since the time of the 2009 change decision, there has been steady development of the 150 acres of wine grapes under Part B of G3-01174C. During the development of the full 150 acres on the ground in Section 16, T8N, R37EWM, the balance of the water was seasonally transferred back to the original place of use within Section 34, T7N, R35EWM. Please find seasonal transfer documentation attached (Attachment 2)
 C) Air photos from 2011 and 2013 are attached (Attachments 3 and 4) to show steady development of the ground. DNR does not have air photos for 2014 to show all 150 acres.
 D) Finally, the entire 150 acres of wine grapes was irrigated during the 2014 irrigation season. Please refer to the attached map showing the outline of the 150 acres planted to wine grapes (attachment 5).
 Note #2) Corkrum & Derby Family Trust own the 5.3 acres of proposed place of use within NWSE of Section 16, T8N, R37EWM. However, the 5.3 acres is the subject of a "land use exchange" as shown in attached documents (see attachment 6) and DNR retains sole ownership interest in water right G3-01174C. The Derbys' signature and the land use exchange documents are included in support of this change application.
 Note #3) The well log is also included as attachment 7.

IF FOR SEASONAL OR TEMPORARY, START DATE ___/___/___ END DATE ___/___/___

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. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

7. Signatures:

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 hereby grant staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

WA State Dept. of Natural Resources Applicant Printed Name - Title (DNR Assistant Region Manager)	 Applicant Signature	<u>12/30/14</u> (Date)
WA State Dept. of Natural Resources Water Right Holder Printed Name (DNR Assistant Region Manager)	 Water Right Holder Signature	<u>12/30/14</u> (Date)
WA State Dept. of Natural Resources Land Owner of Existing Place of Use Printed Name (DNR Assistant Region Manager)	 Land Owner of Existing Place of Use Signature	<u>12/30/14</u> (Date)
WA State Dept. of Natural Resources Land Owner of Proposed Place of Use Printed Name (DNR Assistant Region Manager) and see attached signature page Please check the region in which the project is located:	 Land Owner of Proposed Place of Use Signature	<u>12/30/14</u> (Date)

YES NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): **Portion C of 2005 Change**
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 Applicant Printed Name - Title

 Applicant Signature

___/___/___
 (Date)

 Water Right Holder Printed Name

 Water Right Holder Signature

___/___/___
 (Date)

 Land Owner of Existing Place of Use Printed Name

 Land Owner of Existing Place of Use Signature

___/___/___
 (Date)

Deane Derby
 Land Owner of Proposed Place of Use Printed Name

Shari C. Derby
 Land Owner of Proposed Place of Use Signature

12/18/2014
 (Date)

Please check the region in which the project is located:

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902-3463 (509) 575-2490	<input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
<input type="checkbox"/> APPLICATION FEE NOT ENCLOSED	<input type="checkbox"/> MAP NOT INCLUDED or INCOMPLETE
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____ DATE: ____/____/____	