



Water Resources Program
Application for Change/Transfer
of Water Right

For Ecology Use
 (Date Stamp)

RECEIVED

MAY 25 2012

DEPARTMENT OF ECOLOGY
 EASTERN REGIONAL OFFICE

**For filing with the Department of Ecology or with
 County Water 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: _____

| FOR OFFICIAL USE ONLY | |
|--|-------------------------------------|
| DATE APPLICATION RECEIVED | <u>5/20/12</u> |
| CHECK NO. <u>1032</u> | FEE \$ <u>6,000.00</u> |
| DATE ACCEPTED <u>5/21/12</u> | BY <u>gdm</u> |
| CHANGE NO. <u>STEV-12-03</u> | |
| COUNTY <u>Stevens</u> | WRIA <u>58</u> |
| SPECIAL AREA | _____ |
| SEPA: <input checked="" type="checkbox"/> EXEMPT | <input type="checkbox"/> NOT EXEMPT |
| ECY CODING: 001-002-WR10285-000011 | |
| APP NO. _____ | PERMIT NO. _____ |
| CERT NO. _____ | CERT OF CHG NO. _____ |

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

1. Applicant Information

| | | |
|---|---------------------------|-------------------|
| APPLICANT/BUSINESS NAME Hunters Water District, Ron Bircher | PHONE NO. 509-722-4733 | FAX NO. |
| ADDRESS PO Box 98 | | |
| CITY Hunters | STATE WA | ZIP CODE 99137 |
| CONTACT (IF DIFFERENT FROM ABOVE) Gene St. Godard, WNR Group, Inc | PHONE NO. 509-468-4876 | FAX NO. |
| ADDRESS PO Box 28755 | | |
| CITY Spokane | STATE WA | ZIP CODE 99228 |
| LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE Hunters Water District | PHONE NO. 509-722-4733 | FAX NO. |
| ADDRESS PO Box 98 | | |
| CITY Hunters | STATE WA | ZIP CODE 99137 |

2. Water Right Information

| | |
|--|---|
| WATER RIGHT OR CLAIM NUMBER G3-25329 | RECORDED NAME(S) Columbia School District #206 |
| DO YOU OWN THE RIGHT TO BE CHANGED? X 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? X 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 # |
|-------------|-----|----|----|------|------|------|----------|------------|
| Groundwater | 3 | NW | NE | 07 | 30N | 37E | 8009775 | AEH249 |
| | | | | | | | | |

B. Proposed

| SOURCE | NO. | ¼ | ¼ | SEC. | TWP. | RGE. | PARCEL # | WELL TAG # |
|-------------|-----|------|----|------|------|------|----------|------------|
| Groundwater | 1 | E1/2 | NW | 07 | 30N | 37E | 8000999 | AHC125 |
| Groundwater | 2 | E1/2 | NW | 07 | 30N | 37E | 8000999 | AHC126 |
| Groundwater | 3 | NW | NE | 07 | 30N | 37E | 8009775 | AEH249 |

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

EXISTING: YES X NO PROPOSED: X YES NO – IF NO, PROVIDE OWNER(S) NAME: Columbia School District

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-FT/YR | PERIOD OF USE |
|---------------------------------|------------|------------|---|
| Community Domestic & Irrigation | 30 gpm | 34.4 | 28 AF continuously for domestic supply & 6.4 AF from April 1 to Oct 1 for non-ag irrigation |

B. Proposed

| PURPOSE OF USE | GPM or CFS | ACRE-FT/YR | PERIOD OF USE |
|---------------------------------|------------|------------|---------------|
| Community Domestic & Irrigation | 30 gpm | 34.4 | continuously |

5. Place of Use:**A. Existing**

| LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: | | | | | | | |
|---|---|------|------|------|---------|----------|-------------------|
| Public School grounds served by Columbia School District #206, within Lot 13, Block 1, Plat of Olsen's Addition to Hunters; and NE ¼, all in Sec. 7, T30N, R.37E.W.M. | | | | | | | |
| ¼ | ¼ | SEC. | TWP. | RGE. | COUNTY | PARCEL # | # OF ACRES |
| | | 7 | 30N | 37E | Stevens | 8009775 | 2 irrigable acres |
| DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | | | | | | |
| IF NO, PROVIDE OWNER(S) NAME: <u>It is the Columbia School District, but within defined service area boundary of Hunter's Water District</u> | | | | | | | |

B. Proposed

| LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: | | | | | | | |
|--|---|------|------|------|---------|------------------|------------|
| Area served by Hunters Water District within T.30N, R.37EWM as defined in their most recent water system plan | | | | | | | |
| ¼ | ¼ | SEC. | TWP. | RGE. | COUNTY | PARCEL # | # OF ACRES |
| | | | 30N | 37E | Stevens | HWD Service Area | |
| DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | | | | | | |
| IF NO, PROVIDE OWNER(S) NAME: <u>Multiple private owners within defined service area boundary of Water District</u> | | | | | | | |

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? X YES <input type="checkbox"/> NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): <u>G3-22369, S3-14708</u> |
|---|

6. Remarks and Other Relevant Information:

| |
|---|
| G3-22369 wells are located: #1) 1125 feet south and 385 feet west from the N1/4 corner of Sec 7 #2) 1125 feet south and 400 feet west from the N1/4 corner of Sec 7 |
| G3-25329 well is located: #3) 1050 feet south and 300 feet east from the N1/4 corner of Sec 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 am hereby granting 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.

Ronald R Bircher
Applicant Printed Name - Title

Ronald R Bircher
Applicant Signature

2/17/12
(Date)

Ronald R Bircher
Water Right Holder Printed Name

Ronald R Bircher
Water Right Holder Signature

2/17/12
(Date)

Ronald R Bircher
Land Owner of Existing Place of Use Printed Name

Ronald R Bircher
Land Owner of Existing Place of Use Signature

2/17/12
(Date)

Ronald R Bircher
Land Owner of Proposed Place of Use Printed Name

Ronald R Bircher
Land Owner of Proposed Place of Use Signature

2/17/12
(Date)

Please check the region in which the project is located:

| | | |
|--|---|---|
| <p>*Submit your application to:</p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p> | <input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490 | <input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (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):

- APPLICATION FEE NOT ENCLOSED
- MAP NOT INCLUDED or INCOMPLETE
- ADDITIONAL SIGNATURES REQUIRED
- SECTION _____ IS INCOMPLETE
- OTHER/EXPLANATION: _____

STAFF: _____ **DATE:** ____/____/____