



Application for Change/Transfer of Water Right

14 JAN -6 8:59

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: ADD AREA TO BE IRRIGATED

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

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED	<u>1-6-2014</u>
CHECK NO.	FEE \$ <u>50.00</u>
DATE ACCEPTED	<u>2-3-2014</u> BY <u>KJ</u>
CHANGE NO.	<u>CG3-26346C</u>
COUNTY	<u>Grant</u> WRIA <u>36</u>
SPECIAL AREA	_____
SEPA: <input checked="" type="checkbox"/> EXEMPT <input type="checkbox"/> NOT EXEMPT	
ECY CODING:	<u>001-002-WR10285-000011</u>
APP NO.	PERMIT NO.
CERT NO. <u>G3-26346C</u>	CERT OF CHG NO.

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

1. Applicant Information

APPLICANT/BUSINESS NAME <u>BIGFORK ORCHARDS / HANS GROENKE</u>	PHONE NO. <u>5095392406</u>	FAX NO. <u>5099325002</u>
ADDRESS <u>20620 SW RD 26</u>		
CITY <u>MATTAWA</u>	STATE <u>WA</u>	ZIP CODE <u>99349</u>
EMAIL ADDRESS (IF AVAILABLE) <u>WACHERRIES@SMWIRELESS.NET</u>		

CONTACT (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE <u>HANS GROENKE</u>	PHONE NO. <u>5095392406</u>	FAX NO. <u>5099325002</u>
ADDRESS <u>20620 SW RD. 26</u>		
CITY <u>MATTAWA</u>	STATE <u>WA</u>	ZIP CODE <u>99349</u>
EMAIL ADDRESS (IF AVAILABLE) <u>WACHERRIES@SMWIRELESS.NET</u>		

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER <u>G3-26346C</u>	RECORDED NAME(S) <u>BIGFORK ORCHARDS / HANS GROENKE</u>
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		E ½	SW ¼	10	14	23E		

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
SAME								

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

EXISTING: YES NO PROPOSED: YES NO - IF NO, PROVIDE OWNER(S) NAME: _____

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
IRRIGATION / FROST / COOLING 79 ACRES	790	316	FEB - NOV.

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
IRRIGATION / FROST / COOLING 10 ACRES	790	316	FEB - NOV

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
E ½ SW ¼ S10 T14 N R23E GRANT COUNTY WA 79 ACRES							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

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:							
S ½ S ½ SW ¼ 10-14-23 10 ACRES See Warranty Deed # 2-3-14							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

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

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?

ES NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____

6. Remarks and Other Relevant Information:

THE PROJECT INVOLVES IRRIGATING APPROXIMATELY
 10 ADDITIONAL ACRES WITHOUT ADDITIONAL
 WITHDRAWALS. THERE ARE ADDITIONAL WATER RIGHT CERTIFICATES
 ASSOCIATED WITH THIS WELL. G3-28984C, G3-26715C
 IF FOR SEASONAL OR TEMPORARY, START DATE 2/1/14 END DATE 11/30/14 SEASONAL USE
 G3-27763C, G3-28313, G3-27762,

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.

<u>BIGFORK ORCHARDS</u> Applicant Printed Name - Title	<u>[Signature]</u> Applicant Signature	<u>12/30/13</u> (Date)
<u>HANS GROENKE</u> Water Right Holder Printed Name	<u>[Signature]</u> Water Right Holder Signature	<u>12/30/13</u> (Date)
<u>BIGFORK ORCHARDS</u> Land Owner of Existing Place of Use Printed Name	<u>[Signature]</u> Land Owner of Existing Place of Use Signature	<u>12/30/13</u> (Date)
<u>HANS GROENKE</u> Land Owner of Proposed Place of Use Printed Name	<u>[Signature]</u> Land Owner of Proposed Place of Use Signature	<u>12/30/13</u> (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 (509) 575-2490	<input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400 GRANT COUNTY
	<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: ____/____/____

**ATTACHMENT FOR
Application for Change/Transfer of Water Right**

Signatures:

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HAUS GROENKE OWNER *Haus Groenke* 12/30/13
 Applicant Printed Name - Title Applicant Signature
 Water Right Holder Printed Name Water Right Holder Signature
 Land Owner of Existing Place of Use Printed Name Land Owner of Existing Place of Use Signature
 Land Owner of Proposed Place of Use Printed Name Land Owner of Proposed Place of Use Signature

BIGFORK ORCHARDS by *Haus Groenke* 12/30/13
 Applicant Printed Name - Title Applicant Signature
 Water Right Holder Printed Name Water Right Holder Signature
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