



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

PO Box 47775 • Olympia, Washington 98504-7775 • (360) 407-6300

September 5, 2008

Pickering Passage Water System  
Diane R. Hartley, President  
PO Box 588  
Grapeview, WA 98546

Re: Water Right Permit No.: **G2-29586** (Pickering Passage Water System)

Dear Ms. Hartley:

Upon review of your file you are in fact in the Proof of Appropriation phase of your development schedule. Therefore in response to your request, you are hereby granted an extension to put the water to full beneficial use for the reasons below:

- The supply needs of the public water system's service area, and the rate of growth as occurring at Pickering Passage.

The new deadline to submit your *Proof of Appropriation* is **September 1, 2015**.

You have a right to appeal this decision. To appeal this you must:

- File your appeal with the Pollution Control Hearings Board within 30 days of the "date of receipt" of this document. Filing means actual receipt by the Board during regular office hours.
- Serve your appeal on the Department of Ecology within 30 days of the "date of receipt" of this document. Service may be accomplished by any of the procedures identified in WAC 371-08-305(10). "Date of receipt" is defined at RCW 43.21B.001(2).

Be sure to do the following:

- Include a copy of this document that you are appealing with your *Notice of Appeal*.
- Serve and file your appeal in paper form; electronic copies are not accepted.

**1. To file your appeal with the Pollution Control Hearings Board**

Mail appeal to:

The Pollution Control Hearings Board  
PO Box 40903  
Olympia WA 98504-0903

OR Deliver your appeal in person to:

The Pollution Control Hearings Board  
4224 – 6th Ave SE Rowe Six, Bldg 2  
Lacey WA 98503



**2. To serve your appeal on the Department of Ecology**

Mail appeal to:

The Department of Ecology  
Appeals Coordinator  
P.O. Box 47608  
Olympia WA 98504-7608

OR Deliver your appeal in person to:

The Department of Ecology  
Appeals Coordinator  
300 Desmond Dr SE  
Lacey WA 98503

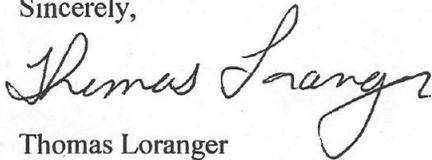
**3. And send a copy of your appeal to:**

Thomas Loranger  
Department of Ecology  
Southwest Regional Office  
PO Box 47775  
Olympia WA 98504-7775

*For additional information visit the Environmental Hearings Office Website:  
<http://www.eho.wa.gov> . To find laws and agency rules visit the Washington State Legislature  
Website: <http://www1.leg.wa.gov/CodeReviser> .*

If you have any questions, please contact Charlotte Lattimore at (360) 407-0274 or by e-mail at [clat461@ecy.wa.gov](mailto:clat461@ecy.wa.gov).

Sincerely,



Thomas Loranger  
Section Manager  
Water Resources Program

Enclosures: *Proof of Appropriation  
Your Right to Be Heard*

# RECEIPT

Department of Ecology (4610)  
PO Box 47611  
Olympia, WA 98504-7611  
(360) 407-7095

Receipt Number **09CJ002785**  
Manual Receipt

Document Number **461P0316 CJ** Date **08/25/2008** FM **14**

Remitter Name **PICKERING PASSAGE WATER SYSTEM** Receipt Name

Check/Draw Number **5056**

Document Amount **50.00**

Method of Payment **Check**

Comment Description **WATER RIGHT G2-29586**

REF DOC NR	REF DOC SFX	INV NR	ID NR	SUB ID NR	T C R	FUND	MAJ GRP	MAG SRC	SUB SRC	CNTY	WORK CLS	PIC	AI	ORG	PRJ	SUB PRJ	PRJ PHS	SUB OBJ	SUB SUB OBJ	VAR GL	SUB DR	SID CR	ALLOC AMT
					001	001	02	85	000011														50.00

SWR2

## Pickering Passage Water System

PO Box 588  
Grapeview, WA 98546  
(360) 275-4835

August 20, 2008

DEPT. OF ECOLOGY  
FISCAL & BUDGET

8 AUG 22 11:58

Ms. Charlotte Lattimore  
Water Resources Program  
PO Box 47611  
Olympia, WA 98504-7611

Re: Water Right Extension Request, Ground Water Application(GWA) No. G2-29586

Dear Ms. Lattimore:

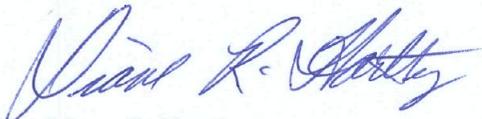
This letter is to request a 15 year extension of the above referenced Ground Water Application, which is due to expire 9-1-08. The \$50.00 extension fee is enclosed.

Pickering Passage Water System is a small rural tract consisting of 12 lots. Currently, five of the lots have year round residences and three have vacation homes. Construction of one of the five permanent residences began around the time the GWA was granted and had its final inspection on 6-14-07. There is another home currently under construction. However, we anticipate significant delays in development of one or all of the remaining three lots. One owner, who originally planned to build immediately, unexpectedly moved out of state. The other two properties appear to be held for investment/retirement plan purposes. We feel this could easily cause a 15 year delay in development. At the same time, all three property owners have always paid water dues to maintain the water system and to reserve their water connections. It is, therefore, imperative that we include all 12 properties in the Water Rights.

Please feel free to contact me or Steve Hartley, System Manager, at the above address and phone number if there are any questions.

Thank you in advance for your consideration.

Sincerely,



Diane R. Hartley  
President

Sept. 5, 2008  
OK to extend  
to 9/1/2015  
[Signature]



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

PO Box 47775 • Olympia, Washington 98504-7775 • (360) 407-6300

June 6, 2006

Pickering Passage Water System  
PO Box 588  
Grapeview WA 98546-0588

Dear Sir or Madame:

RE: Amended Permit No. **G2-29586**

Enclosed is your amended permit No. **G2-29586**, which includes your Development Schedule.

***Proof of Appropriation form***

Our information indicates that your water project is completed. The next step toward securing a water right certificate is to put the water to full beneficial use on or before **September 1, 2008**. Once this is done, complete the enclosed "Proof of Appropriation of Water" form. This form must be **notarized** and returned to the Water Resources Program at Ecology's Southwest Regional Office.

Please submit the following fees when the actual water has been put to full beneficial use:

- **\$50.00** check payable to the Department of Ecology
- and
- **\$34.00** check payable to the **Mason** County Auditor's Office

The **parcel number** for the point of diversion/withdrawal for where your project is located (and the place of use, if different). Parcel numbers can be found on property tax statements.

If we do not receive the completed "Proof of Appropriation of Water" form by **September 1, 2008**, and do not hear from you otherwise, your permit may be cancelled. We understand that occasionally there are extenuating circumstances that may delay putting the water to full use. In this case, you **must** contact us, **in writing**, to request an **extension**.

Upon receipt of your completed "Proof of Appropriation of Water" form, we will review the information and may come out to inspect your project.

***Read your permit***

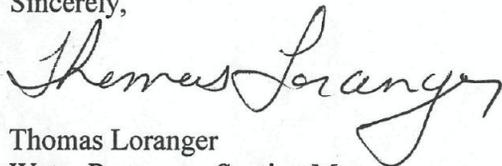
Please read through your entire permit, along with the enclosed water right information sheet, to be sure you fully understand the terms and responsibilities associated with your permit. It is important to remember that this permit is not a *final* water right, it is permission by the state to *develop* a water right. *You must meet the provisions on your permit before we issue your final water right certificate.*

**S**



If we can provide any further assistance, please contact our office at (360) 407-6300.

Sincerely,



Thomas Loranger  
Water Resources Section Manager  
Southwest Regional Office

TL:th

Enclosures: Permit #G2-29586  
"Proof of Appropriation of Water" form  
"Important Information Regarding Your Water Right"

permit-PA.doc

2

Pickering Passage Water System  
PO Box 0588  
Grapeview, WA 98546



INCOMING 01/26/2006 01:

1/27/06  
The original of  
this copy is located  
in metering file  
W/EVA. VC

WR Department of Ecology  
Southwest Regional Office  
PO Box 47775  
Olympia, WA 98504-7775

98504+7775 8001

A second copy  
was sent to SHAWN  
HOPKINS for the  
EIM system. VC

Attached are the chloride  
test results and water measurement  
data for Pickering Passage Water  
System. Please note we do  
not have a measuring device  
on system #1 at the present  
time. In process of hiring  
contractor to install device for  
that system. If you have  
any questions you can call me  
at (360) 275-4835

S

RECEIVED Steve Hartley

JAN 26 2006



# Water Use Measurement Form No. 1 Open Channel and Pressurized Systems

**Please review the instructions and fill out Form No. 1  
for each measuring device you have.**

Name of water right holder: Pickering Passage Water System #2  
 Water Right Claim/ Certificate/Permit No: G2-29586  
 Source of Water: Well  
 User's name for diversion/ withdrawal point; (e.g. Well No. 1, Blue well house) Well No. 2

Does this measuring device measure water from more than one source of water (e.g. several springs, creeks, or wells in different aquifers)?

Yes  No

Does this measuring device measure water from more than point of diversion or withdrawal but still from the same source?

Yes  No

The following water rights are measured through this measuring device:

G2-29586

### INFORMATION ON THE LOCATION OF THE MEASURING DEVICE

WRIA 14 Section 18 Township 21 Range 1W  
 (E)  (W) SE NW (1/4) (1/4) Govt. Lot 3

DOH WFI Number. (for public drinking water systems) 06775 N Well Tag Number (if available or applicable) \_\_\_\_\_

Latitude and longitude of device in decimal degrees or degrees, minutes, seconds (if available): Latitude \_\_\_\_\_ Longitude: \_\_\_\_\_

Horizontal Datum (e.g. WGS84, NAD27) \_\_\_\_\_

Is the diversion or withdrawal located at the same place as the device (within 100 feet)?  Yes  No

If no, provide the location of the diversion or withdrawal in decimal degrees or degrees, minutes, seconds (if available): Latitude \_\_\_\_\_ Longitude: \_\_\_\_\_

Horizontal Datum (e.g. WGS84, NAD27, NAD83, etc.) \_\_\_\_\_

### INFORMATION ABOUT THE MEASURING DEVICE

Type of device: Recorda II Brand of device: Badger Meter

Model Number: 70 Serial Number: 97749244

Most recent date device was calibrated: (MM/DD/YYYY) Calibrated When Built

If a surface diversion, does the diversion have a fish screen?  Yes  No  N/A

If any of the following events occurred within the last year, check the appropriate box and provide a short explanation.

Device Roll-Over  New device  Device repair  
 Other \_\_\_\_\_

I hereby certify that all information reported on this form is correct to the best of my knowledge.

Printed Name: Steven F Hartley

Position: System Manager

Signature: Steven F. Hartley Date: 17 January 06

JAN 26 2006



## Water Use Measurement Form No. 3 - Pressurized Flow

Fill out Form No. 3 ONLY if you have pressurized flow (from either ground or surface water).

Fill out one form for each measuring device.

Washington State

Name/Organization: Pickering Passage Water System #2 Water Right Number(s): G2-29586 Department of Ecology  
 Section 18 Township 21 Range 1W  (E)  (W) SE NW (1/4)          (1/4 1/4) Govt. Lot 3  
 Measuring Device Serial No. name or number: Badger Meter Model 70 S# 97749244  
*Please check APPROPRIATE UNITS*

Week	Date	Meter Reading	Peak Flow
		( <input type="checkbox"/> gallons, <input type="checkbox"/> ac-ft <input type="checkbox"/> other )	( <input type="checkbox"/> gpm <input type="checkbox"/> cfs <input type="checkbox"/> other )
Start			
January			
February			
March			
April			
May			
June			

Week	Date	Meter Reading	Peak Flow
		( <input type="checkbox"/> gallons, <input type="checkbox"/> ac-ft <input checked="" type="checkbox"/> other <u>ft<sup>3</sup></u> )	( <input type="checkbox"/> gpm <input type="checkbox"/> cfs <input type="checkbox"/> other )
Start			
July			
August			
September			
October	<u>01</u>	<u>134576</u>	
November	<u>01</u>	<u>135497</u>	
December	<u>01</u>	<u>135849</u>	

Month	Monthly Volume	Month	Monthly Volume	Month	Monthly Volume	Month	Monthly Volume
	( <input type="checkbox"/> gallons <input type="checkbox"/> ac-ft <input type="checkbox"/> other )		( <input type="checkbox"/> gallons <input type="checkbox"/> ac-ft <input type="checkbox"/> other )		( <input type="checkbox"/> gallons <input type="checkbox"/> ac-ft <input type="checkbox"/> other )		( <input type="checkbox"/> gallons <input type="checkbox"/> ac-ft <input checked="" type="checkbox"/> other <u>ft<sup>3</sup></u> )
January		April		July		October	<u>921</u>
February		May		August		November	<u>352</u>
March		June		September		December	<u>554</u>

Total Annual Volume \_\_\_\_\_ ( gallons  ac-ft  other \_\_\_\_\_) Peak Instantaneous Flow \_\_\_\_\_ ( gpm  cfs  other \_\_\_\_\_)

Comments: \_\_\_\_\_

**TWISS ANALYTICAL LABORATORIES, INC.**

26280 Twelve Trees Lane, Suite C Poulsbo, WA 98370 Telephone (360) 779-5141 FAX (360) 779-5150

**INORGANIC CHEMICALS (IOCS) REPORT**

System ID No: 06775N	System Name: Pickering Passage System #2	
Lab/Sample No: 010 34800	Date Collected: 8/28/2005	DOH Source No:
Multiple Sources:	Sample Type: B	Sample Purpose: C
Date Received: 8/30/2005	Date Reported: 9/7/2005	Supervisor: ST <i>[Signature]</i>
Date Prepared:	Date Analyzed: 9/6/2005	Analyst: KW
County: Mason	Group: B	
Sample Location: Well Head		
Send Report To: Pickering Passage Water System P.O. Box 588 Grapeview, WA 98546		Bill To:

DOH #	Analytes	Results	Units	SRL	Trigger	MCL	Exceeds		Method / Analyst		
							Trigger?	MCL?			
<b>EPA REGULATED (Secondary)</b>											
21	Chloride	<(5.0)	mg/L	20	250	250			SM 4500-Cl E	KW	

**Notes:**

- SRL:** (State Reporting Level), indicates the minimum reporting level required by the Washington Department of Health (DOH).
- Trigger Level:** DOH Drinking Water response level. Systems with compounds detected at concentrations in excess of this level are required to take additional samples. Contact your regional DOH office for further information.
- MCL:** (Maximum Contaminant Level), If the contaminant amount exceeds the MCL, immediately contact your regional DOH office.
- NA:** (Not Analyzed), in the results column indicates this compound was not included in the current analysis.
- ND:** (Not Detected), in the results column indicates this compound was analyzed and not detected at a level greater than or equal to the SRL
- < (0.001):** indicates the compound was not detected in the sample at or above the concentration indicated.

**Comments:**

**S**

**TWISS ANALYTICAL LABORATORIES, INC.**

26280 Twelve Trees Lane, Suite C Poulsbo, WA 98370 Telephone (360) 779-5141 FAX (360) 779-5150

**INORGANIC CHEMICALS (IOCS) REPORT**

System ID No: 672862	System Name: Pickering Passage Water System #1	
Lab/Sample No: 010134799	Date Collected: 8/28/2005	DOH Source No:
Multiple Sources:	Sample Type: B	Sample Purpose: C
Date Received: 8/30/2005	Date Reported: 9/7/2005	Supervisor: ST 
Date Prepared:	Date Analyzed: 9/6/2005	Analyst: KW
County: Mason	Group: B	
Sample Location: Well Head		
Send Report To: Pickering Passage Water System P.O. Box 588 Grapeview, WA 98546		Bill To:

DOH #	Analytes	Results	Units	SRL	Trigger	MCL	Exceeds		Method / Analyst	
EPA REGULATED (Secondary)							Trigger?	MCL?		
21	Chloride	<(5.0)	mg/L	20	250	250			SM 4500-Cl E	KW

**Notes:**

- SRL: (State Reporting Level), indicates the minimum reporting level required by the Washington Department of Health (DOH).
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- NA: (Not Analyzed), in the results column indicates this compound was not included in the current analysis.
- ND: (Not Detected), in the results column indicates this compound was analyzed and not detected at a level greater than or equal to the SRL
- < (0.001): indicates the compound was not detected in the sample at or above the concentration indicated.

**Comments:**







\* 4 \*

# Permit

Document Type Code - 4  
(Bar-code 39, Font 48)



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY  
AMENDED  
PERMIT

TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

- Surface Water (Issued in accordance with the provisions of Chapter 117, Laws of Washington for 1917, and amendments thereto, and the rules and regulations of the Department of Ecology.)
- Ground Water (Issued in accordance with the provisions of Chapter 263, Laws of Washington for 1945, and amendments thereto, and the rules and regulations of the Department of Ecology.)

PRIORITY DATE January 23, 1998	APPLICATION NUMBER G2-29586	PERMIT NUMBER G2-29586	CERTIFICATE NUMBER
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NAME Pickering Passage Water System			
ADDRESS (STREET) PO Box 588	(CITY) Grapeview	(STATE) Washington	(ZIP CODE) 98546-0588

The applicant is hereby granted a permit to appropriate the following public waters of the State of Washington, subject to existing rights and to the limitations and provisions set herein.

PUBLIC WATERS TO BE APPROPRIATED

SOURCE 2 Wells	TRIBUTARY OF (IF SURFACE WATERS)		
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MAXIMUM CUBIC FEET PER SECOND	MAXIMUM GALLONS PER MINUTE 37	MAXIMUM ACRE FEET PER YEAR 5.25
QUANTITY, TYPE OF USE, PERIOD OF USE 5.25 Acre-feet per year	Multiple domestic supply	Year-round, as needed

LOCATION OF DIVERSION/WITHDRAWAL

APPROXIMATE LOCATION OF DIVERSION-WITHDRAWAL  
1000 feet North and 900 feet West of the center of Section 18.

LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION) SE 1/4 NW 1/4	SECTION 18	TOWNSHIP N. 21	RANGE, (E. OR W.) W.M. 1W	W.R.L.A. 14	COUNTY Mason
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RECORDED PLATTED PROPERTY

LOT	BLOCK	OF (GIVE NAME OF PLAT OR ADDITION)
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LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED

That portion of Gov't Lot 3 of Section 18, T. 21 N., R. 1 W.W.M., in Mason County, Washington described as follows: Beginning at the NW 1/4 corner of the Plat of Mountain Shores as per plat thereof recorded in Vol. 6 of Plats, Page 83, records of Mason County, Washington; thence S 0°10'52" E along the Westerly line of said plat 226.67 feet to the true point of beginning; thence N 89°22'26" W 452.26 feet to the boundary line established under Auditor's File No. 248764; thence S 0°11'51" E along said boundary line 226.67 feet to the North line of a tract as conveyed to John T. Carroll and Judy Carroll, husband and wife, et al, by instrument recorded May 4, 1970, under Auditor's File No. 250707; thence S 89°22'26" E along said North line 452.19 feet to the Westerly line of said plat, thence N 0°10'52" W along said Westerly line 226.67 feet to the true point of beginning; SUBJECT TO AND TOGETHER WITH an easement for roadway over the Easterly 20 feet of Lot 3, Section 18, T. 21 N., R. 1 W.W.M., lying Westerly of the Plat of Mountain Shores as recorded in Vol. 6 of Plats, page 83, and also along the Northerly 20 feet of said Plat of Mountain Shores.

S

DESCRIPTION OF PROPOSED WORKS

Two wells, 126 and 127 feet deep.

DEVELOPMENT SCHEDULE

BEGIN PROJECT BY THIS DATE: Started	COMPLETE PROJECT BY THIS DATE: Completed	WATER PUT TO FULL USE BY THIS DATE: September 1, 2008 2015
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PROVISIONS

An approved measuring device shall be installed and maintained for each of the sources identified by this water right in accordance with the rule "Requirements for Measuring and Reporting Water Use", Chapter 173-173 WAC.

Water use data shall be recorded monthly. The maximum rate of diversion/withdrawal and the annual total volume shall be submitted to Ecology by January 31st of each calendar year.

Chapter 173-173 WAC describes the requirements for data accuracy, device installation and operation, and information reporting. It also allows a water user to petition Ecology for modifications to some of the requirements. Installation, operation and maintenance requirements are enclosed as a document entitled "Water Measurement Device Installation and Operation Requirements".

Department of Ecology personnel, upon presentation of proper credentials, shall have access at reasonable times, to the records of water use that are kept to meet the above conditions, and to inspect at reasonable times any measuring device used to meet the above conditions.

Permittee or certificate holder, and its successor(s) shall provide data on chloride concentrations for the well authorized by this permit or certificate with analysis performed by a state accredited laboratory. Accreditation information may be obtained from Ecology's Quality Assurance Program at (360) 895-4649. Sampling shall occur in April and August of each year, with a copy of the laboratory results for both sampling events submitted by October 15 of the same year, to the Department of Ecology, Southwest Regional Office, Olympia, Washington.

If pumping of the well authorized by this permit or certificate causes chloride concentrations to exceed 100 milligrams per liter, immediate action shall be required to prevent concentrations from increasing (such as reducing the instantaneous withdrawal rate (gpm) of the well). If corrective measures fail to prevent chloride concentrations from exceeding said level in the future, permittee or certificate holder shall relinquish the option to perfect additional allocated quantities regardless of the stage of development.

The Water Resources Act of 1971 specifies certain criteria regarding utilization and management of the waters of the state in the best public interest. Use of water may be subject to regulation at certain times, based on the necessity to maintain water quantities sufficient for preservation of the natural environment.

*This permit shall be subject to cancellation should the permittee fail to comply with the above development schedule and/or to give notice to the Department of Ecology on forms provided by that Department documenting such compliance.*

*Given under my hand and the seal of this office at Olympia, Washington,*

this 6<sup>th</sup> day of June, 2006.

Department of Ecology

by Thomas Loranger  
Thomas Loranger, Section Manager

OK [Signature]

*If you require this publication in an alternate format, please contact Water Resources at (360) 407-6300, or TTY (for the speech or hearing impaired) 711 or 800-833-6388.*