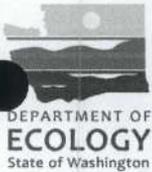


Water Resources Program
Application for Change/Transfer
of Water Right



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

For Ecology Use
 (Date Stamp)

RECEIVED

MAY 26 2015

**DEPT OF ECOLOGY
 NWRO - WR**

**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: See Associated Earth Sciences "Project Summary
 Report for Water Right S1-09968C"

FOR OFFICIAL USE ONLY	
DATE APPLICATION RECEIVED	<u>5/26/15</u>
CHECK NO.	_____ FEE \$ _____
DATE ACCEPTED	<u>5/26/15</u> BY <u>DAJ</u>
CHANGE NO.	<u>CSI-4 69968C</u>
COUNTY	<u>Wahcom</u> WRIA <u>1</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. _____

REET 6/3/15

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

1. Applicant Information

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
<u>John E. VanderVeen/TJ VeenAcre Farms, Inc.</u>	<u>360-988-5924</u>	
ADDRESS		
<u>9501 Van Buren Road</u>		
CITY	STATE	ZIP CODE
<u>Lynden</u>	<u>WA</u>	<u>98264</u>
CONTACT (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
<u>Charles S. Lindsay/Associated Earth Sciences, Inc.</u>	<u>425-259-0522</u>	<u>425-252-3408</u>
ADDRESS		
<u>2911 1/2 Hewitt Ave., Suite 2</u>		
CITY	STATE	ZIP CODE
<u>Everett</u>	<u>WA</u>	<u>98201</u>
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE	PHONE NO.	FAX NO.
<u>John E. and Kristi L. VanderVeen</u>	<u>360-988-5924</u>	
ADDRESS		
<u>9501 Van Buren Road</u>		
CITY	STATE	ZIP CODE
<u>Lynden</u>	<u>WA</u>	<u>98264</u>

10/30/15

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER S1-09968C	RECORDED NAME(S) Alvin E. Swanson
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.

See Associated Earth Sciences "Project Summary Report for Water Right S1-09968C".

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Johnson Creek		SW	SE	5	40N	04E	400405 415038	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Future Irrigation Well(s)		NE SE SW	SE	5	40N	04E	400405 415038	
Future Irrigation Well(s)		NE SE	NE	8	40N	04E	400408 493353	

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. See Associated Earth Sciences "Project Summary Report for Water Right S1-09968C".

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	0.36 CFS	None	April 15 - October 1

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	162 GPM	40.32	April 15 - October 1

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
That part of S 1/2 of SE 1/4 lying South of Johnson Creek and 2 1/2 acres in Southwest corner of SW 1/4 of SE 1/4 on West side of creek, less road, in Sec. 5, Twp. 40 N., Rge. 4 E.W.M.							
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
NE	SE	5	40N	4E	Whatcom	400405 415038	36.0
SE							
SW							
SW	SE	5	40N	4E	Whatcom	400405 285023	0.0

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES NO
 IF NO, PROVIDE OWNER(S) NAME: **Lonnie & Kelli Bauman**

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
See the attached map and Associated Earth Sciences "Project Summary Report for Water Right S1-09968C".							
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
NE	SE	5	40N	4E	Whatcom	400405 415038	36.0
SE							
SW							
NE	NE	8	40N	4E	Whatcom	400408 493353	33.0
SE							

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO
 IF NO, PROVIDE OWNER(S) NAME: **See Associated Earth Sciences "Project Summary Report for Water Right S1-09968C".**

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. See Associated Earth Sciences "Project Summary Report for Water Right S1-09968C".

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):

6. Remarks and Other Relevant Information:

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.

John Vanderveen
Applicant Printed Name - Title

[Signature]
Applicant Signature

4/13/15
(Date)

John Vanderveen
Water Right Holder Printed Name

[Signature]
Water Right Holder Signature

4/13/15
(Date)

John Vanderveen
Land Owner of Existing Place of Use Printed Name

[Signature]
Land Owner of Existing Place of Use Signature

4/13/15
(Date)

John Vanderveen
Land Owner of Proposed Place of Use Printed Name

[Signature]
Land Owner of Proposed Place of Use Signature

4/13/15
(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 checked="" 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: ____/____/____

