



# WATER RESOURCES

## Application for Change/Transfer of a Water Right

For Ecology Use  
**RECEIVED**  
(Date)  
**JUL 21 2015**  
DEPT OF ECOLOGY  
NWRO - WR

**You must include a \$50.00 minimum filing fee with this application for:**

(Check all that apply.)

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

Explain: \_\_\_\_\_

**No filing fee is required for applications for:**

- Drought
- Cost Reimbursement
- Water Conservancy Board

**FOR OFFICIAL USE ONLY**

DATE APPLICATION RECEIVED 7-21-15

CHECK NO. \_\_\_\_\_ FEE \$ W/A

DATE ACCEPTED 7-21-15 BY \_\_\_\_\_

CHANGE NO. \_\_\_\_\_

COUNTY \_\_\_\_\_ WRIA \_\_\_\_\_

SPECIAL AREA \_\_\_\_\_

SEPA:  EXEMPT  NOT EXEMPT

ECY CODING: 001-002-WR10285-000011

APP NO. \_\_\_\_\_ PERMIT NO. \_\_\_\_\_

CERT NO. \_\_\_\_\_ CERT OF CHG NO. \_\_\_\_\_

I have completed a pre-application consultation with Ecology.

### 1. Applicant Information

APPLICANT/BUSINESS NAME <b>Ed Blok</b>	PHONE NO. <b>360-815-3169</b>	FAX NO.
ADDRESS <b>7327 Heisman Place</b>		
CITY <b>Lynden</b>	STATE <b>WA</b>	ZIP CODE <b>98264</b>
EMAIL ADDRESS (IF AVAILABLE) <b>cjblok@aol.com</b>		
CONTACT (IF DIFFERENT FROM ABOVE) <b>cjb</b>	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE <b>Ed Block</b>	PHONE NO. <b>360-815-3169</b>	FAX NO.
ADDRESS <b>7327 Heisman Place</b>		
CITY <b>Lynden</b>	STATE <b>WA</b>	ZIP CODE <b>98264</b>
EMAIL ADDRESS (IF AVAILABLE)		

## 2. Water Right Information

WATER RIGHT OR CLAIM NUMBER SWC 11027 (AKA S1-*21208CWRIS)	RECORDED NAME(S) Thomas Gibson
DO YOU OWN THE RIGHT TO BE CHANGED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: <u>Lloyd A Winterberg 7498 Guide Meridian Lynden, WA 98264</u>	
HAS THE WATER BEEN USED AS AUTHORIZED IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

- Attach copies of any documentation that shows the historical use of water that has occurred since the right was established.
- 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 #
Nooksack River in GL 4		NW	NW	31	40	3	400331068404	

### B. Proposed (if different from 3.A.)

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Nooksack River		S/2	NW	30	40N	3E	400330194044	

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

EXISTING:  YES  NO PROPOSED:  YES  NO - IF NO, PROVIDE OWNER NAME(S): Lloyd A Winterberg

- Include copies of all associated water well reports.
- 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 of 60 Acres	.60 CFS	120	May 1 through October 31

### B. Proposed (if different from 4.A.)

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

## 5. Place of Use:

### A. Existing

**LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:**

That part of Government Lot 4 Lying southerly of the Nooksack River; and Government Lot 6; LESS roads and easements.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		31	40N	3E	Whatcom	400331068404	

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE?  YES  NO

IF NO, PROVIDE OWNER NAME(S): Lloyd A Winterberg

### B. Proposed (if different than 5.A.)

**LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:**

The E 2092 feet of the NE 1/4 of Sec 31, T 40 N, R 03 E, lying North of Scott Ditch, LESS ROADS.

The E 2080 ft of the S 672 ft of the SE 1/4 of S 30, T 40 N, R 03 E, LESS ROADS

(Portions of Parcels 400330307073, 400330453035, & 400331450440

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
					Whatcom		60

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE?  YES  NO

IF NO, PROVIDE OWNER NAME(S):

- 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.

### D. 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): Applications S1-27234, G1-27235, G1-27236, & S1-28775

## 6. Remarks and Other Relevant Information:

IF FOR SEASONAL OR TEMPORARY, START DATE 7/20/2015 END DATE 10/01/2015

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

Phone (360) 570-3265

PO Box 47477  
Olympia, WA 98504-7477

## 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.

Ed Blok Owner  
Applicant Printed Name - Title

Ed Blok  
Applicant Signature

7/21/15  
(Date: MM/DD/YYYY)

Lloyd Winterberg  
Water Right Holder Printed Name

Lloyd Winterberg  
Water Right Holder Signature

7-21-15  
(Date: MM/DD/YYYY)

Lloyd Winterberg  
Land Owner of Existing Place of Use Printed Name

Lloyd Winterberg  
Land Owner of Existing Place of Use Signature

7-21-15  
(Date: MM/DD/YYYY)

Jake Blok Disclaimer Trust  
Land Owner of Proposed Place of Use Printed Name

Ed Blok  
Land Owner of Proposed Place of Use Signature

7/21/15  
(Date: MM/DD/YYYY)

<p><b>*Submit your application to:</b></p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 1250 W. Alder Street Union Gap, WA 98903-0009 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1265 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 <sup>th</sup> 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



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

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 Applicant Printed Name – Title  
 Water Right Holder Printed Name  
 Land Owner of Existing Place of Use Printed Name  
 Land Owner of Proposed Place of Use Printed Name

\_\_\_\_\_  
 Applicant Signature  
 Water Right Holder Signature  
 Land Owner of Existing Place of Use Signature  
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