DEPARTMENT OF ECOLOGY
State of Washington

Water Resources Program
Application for Change/Transfer of Water Right

For Ecology Use
(Date Stamp)

RECEIVED
SEP 21 2012
Water Resources Program
Department of Ecology

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: **See Associated Earth Sciences, Inc., "Project Summary Report for Water Right G1-022172CL.**

FOR OFFICIAL USE ONLY

DATE APPLICATION RECEIVED 9-21-12
CHECK NO. 4531 FEE $ 50-
DATE ACCEPTED 9/21/12 BY DD
CHANGE NO. G1-022172CL
COUNTY Whatcom WRIA 1
SPECIAL AREA
SEPA: ☑ EXEMPT ☐ NOT EXEMPT
ECY CODING: 001-002-WR10285-000011
APP NO. PERMIT NO.
CERT NO. CERT OF CHG NO.

REET 10/3/12

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

1. Applicant Information

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Mike Douma/MJD Farms, LLC	360-410-2048	
ADDRESS 8300 North Enterprise Road		
CITY Custer	STATE WA	ZIP CODE 98240

CONTACT (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Charles S. Lindsay/Associated Earth Sciences, Inc.	425-259-0522	425-252-3408
ADDRESS 2911 ½ Hewitt Ave., Suite 2		
CITY Everett	STATE WA	ZIP CODE 98201

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE	PHONE NO.	FAX NO.
Mike Douma/MJD Farms, LLC	360-410-2048	
ADDRESS 8300 North Enterprise Road		
CITY Custer	STATE WA	ZIP CODE 98240

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
G1-0221172CLWRIS	Clyde Greene

DO YOU OWN THE RIGHT TO BE CHANGED? ☒ YES ☐ NO

IF NO, PROVIDE OWNER(S) NAME and ADDRESS: _____

HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? ☒ YES ☐ 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.

A detailed discussion of the irrigation operations authorized under water right G1-022172CL is included in Associated Earth Sciences "Project Summary Report for Water Right G1-022172CL".

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Irrigation Well	IW-9	NW	NW	21	40N	2E	400221100424	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Irrigation Well	IW-1	SW	SW	16	40N	2E	400216071150	BHE783
Irrigation Well	IW-2	SW	NE	21	40N	2E	400221337280	BHE785
Irrigation Well	IW-3	SW	NE	21	40N	2E	400221337280	BHE786
Irrigation Well	IW-4	SW	NE	21	40N	2E	400221337280	AAX420
Irrigation Well	IW-5	SE	NW	21	40N	2E	400221234404	BHE788
Irrigation Well	IW-6	SE	SW	21	40N	2E	400221242017	
Irrigation Well	IW-7	NE	NE	20	40N	2E	400220472461	
Irrigation Well	IW-8	NE	NE	20	40N	2E	400220472461	
Irrigation Well	IW-9	NW	NW	21	40N	2E	400221100424	
Irrigation Well	IW-10	NW	NW	21	40N	2E	400221100424	
Irrigation Well	IW-11	SW	SE	21	40N	2E	400221337280	
Horizontal Well	HW-1	NE	NW	21	40N	2E	400221234404	

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 the Associated Earth Sciences "Project Summary Report for Water Right G1-022172CL".**

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Domestic and Stock	10 GPM	2.0	Continuous

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	10 GPM	2.0	April 15 – October 1

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

W3/4, NW1/4 of Section 21, T40N, R2E

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
W3/4	NW	21	40N	2E	Whatcom	400221100424	105.10
S1/8	NW	21	40N	2E	Whatcom	400221077285	11.64

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

IF NO, PROVIDE OWNER(S) NAME: **See attached map and the Associated Earth Sciences "Project Summary Report for Water Right G1-022172CL".**

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

See attached map and the Associated Earth Sciences "Project Summary Report for Water Right G1-022172CL".

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
W1/2	SW	16	40N	2E	Whatcom	400216071150	65.0
SW	SW	16	40N	2E	Whatcom	400216090010	0.0
SE	SE	17	40N	2E	Whatcom	400217523069	4.0
SE	SE	17	40N	2E	Whatcom	400217490067	10.0
NE	NE	20	40N	2E	Whatcom	400220472461	30.0
W3/4	NW	21	40N	2E	Whatcom	400221100424	60.0
S1/8	NW	21	40N	2E	Whatcom	400221077285	5.0
E1/4	NW	21	40N	2E	Whatcom	400221234404	37.0
E1/4	SW	21	40N	2E	Whatcom	400221235138	36.0
W1/2	E1/2	21	40N	2E	Whatcom	400221337280	155.0

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

IF NO, PROVIDE OWNER(S) NAME: **See the attached map and Associated Earth Sciences "Project Summary Report for Water Right G1-022172CL.**

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 the attached map and Associated Earth Sciences "Project Summary Report for Water Right G1-022172CL".**

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): **G1-*04475C, G1-*07005C, G1-022169CL, G1-022170CL, and G1-022173CL. See the Associated Earth Sciences "Project Summary Report for Water Right G1-022172CL".**

6. Remarks and Other Relevant Information:

The result of this change will include spreading the irrigation water over the total irrigable acres (402 acres) located in the proposed place of use.
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.

Mike Douma - President		9/18/2012
Applicant Printed Name – Title	***Applicant Signature***	***(Date)***
Mike Douma		9/18/2012
Water Right Holder Printed Name	***Water Right Holder Signature***	***(Date)***
Mike Douma		9/18/2012
Land Owner of Existing Place of Use Printed Name	***Land Owner of Existing Place of Use Signature***	***(Date)***
Mike Douma		9/18/2012
Land Owner of Proposed Place of Use Printed Name	***Land Owner of Proposed Place of Use Signature***	***(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	☐ Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	☐ Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400
	☒ Northwest Regional Office 3190 – 160th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	☐ 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:*** ____/____/____