



For Ecology Use  
 Fee Paid \$ 10.00  
 Date 12-17-96  
 ek # 3532 ek

State of Washington  
 Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

**G330009**

**Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM**

Name (Steven & Nancy Holdaway) Home Tel: (509) 926-1207  
 Mailing Address East 10518 Ferret Drive Work Tel: (509) 921-3219  
 City (Spokane) State WA Zip+4 99206 + FAX: (509) 921-3335

**Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION**

Same as above

Name \_\_\_\_\_ Home Tel: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
 Mailing Address \_\_\_\_\_ Work Tel: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_ + FAX: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
 Relationship to applicant \_\_\_\_\_

**Section 3. STATEMENT OF INTENT**

*(CONTINUOUS MULTIPLE DOMESTIC SUPPLY FOR 4 HOMES AND STOCKWATER; SEASONAL IRRIGATION OF 26 ACRES)*

The applicant requests a permit to use not more than (200 gpm) ( gallons per minute or  cubic feet per second) from a  surface water source or  ground water source (check only one) for the purpose(s) of crop irrigation, stock water and multiple domestic. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 65

Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:  
 From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

*clarifications per ph call w/ Steve Holdaway etc*

**Section 4. WATER SOURCE**

<b>If SURFACE WATER</b>	<b>If GROUNDWATER</b>
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>(4)</u> well(s). <i>propose: (one well per parcel)</i>
Number of diversions: _____	Size & depth of well(s): <u>6-8" 200-500' approx 50 gal/min each</u>
Source flows into (name of body of water):	

**LOCATION**

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:

wells to be located on property

¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>Southwest SW¼</u>	<u>Northwest NW¼</u>	<u>29</u>	<u>25 N</u>	<u>45 E</u>	<u>Spokane</u>			

For Ecology Use Date Received: 12-17-96 Priority Date: 12-17-96  
 SEPA:  Exempt Not Exempt FERC License # \_\_\_\_\_ Dept. Of Health # \_\_\_\_\_  
 Date Accepted As Complete: 1/8/97 By LK Date Returned \_\_\_\_\_ By \_\_\_\_\_ WRIA: 57

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**Section 5. GENERAL WATER SYSTEM INFORMATION**

- A. Name of system, if named: \_\_\_\_\_
- B. Briefly describe your proposed water system. (See instructions.)  
Wells with water distributed through <sup>fixed &</sup>movable pipes to  
sprinkler heads for irrigation of hay or grain crops.  
In future some of land may be used for orchard
- C. Do you already have any water rights or claims associated with this property or system?  YES  NO  
PROVIDE DOCUMENTATION. See attached claim

**Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION**

(Completed for all domestic/public supply uses.) *per ph call w/ Steve Holdaway 7/30/97 xk*

- A. Number of "connections" requested: 4 Type of connection 4 homes (1 per parcel = 4 parcels)  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system?  YES  NO  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by  
your County Health Department.

**Complete C. and D. only if the proposed water system will have fifteen or more connections.**

- C. Do you have a current water system plan approved by the  
Washington State Department of Health?  YES  NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan?  YES  NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

**Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION**

(Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 26
- B. List total number of acres for other specified agricultural uses:  
Use \_\_\_\_\_ Acres \_\_\_\_\_  
Use \_\_\_\_\_ Acres \_\_\_\_\_  
Use \_\_\_\_\_ Acres \_\_\_\_\_
- C. Total number of acres to be covered by this application: 26
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:  
‡ Acreage irrigated under water rights acquired after December 8, 1977;  
‡ Acreage proposed to be irrigated under this application;  
‡ Acreage proposed to be irrigated under other pending application(s).  
  
1. Is the combined acreage greater than 2000 acres?  YES  NO  
2. Do you have a controlling interest in a Family Farm Development Permit?  YES  NO  
If yes, enter permit no: \_\_\_\_\_
- E. Farm uses:  
Stockwater - Total # of animals 24 Animal type Beet (If dairy cattle, see below)  
Dairy - # Milking — # Non-milking —

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**Section 8. WATER STORAGE**

Will you be using a dam, dike, or other structure to retain or store water?

YES  NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

**Section 9. DRIVING DIRECTIONS**

Provide detailed driving instructions to the project site.

(see attached map)

South from I90 on Barker approx 2 1/2 miles South

**Section 10. REQUIRED MAP**

A. Attach a map of the project. (See instructions.)

**Section 11. PROPERTY OWNERSHIP**

A. Does the applicant own the land on which the water will be used?  YES  NO  
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. Does the applicant own the land on which the water source is located?  YES  NO  
If no, submit a copy of agreement:

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 grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Sam N. Holdaway  
Applicant (or authorized representative)

12/16/96  
Date

Same  
Landowner for place of use (if same as applicant, write "same")

\_\_\_\_\_  
Date

Attachments:  
Water Rights claim # 36744  
Short Plat Map SP 1085-96  
Hydrogeologic characterization Report  
Vicinity Map.

I have examined this application  
and find it to be in compliance with  
the rules of the Department of Ecology.  
 categorically exempt.  
12/19/96  
A. Kiefer  
DIRECTOR

APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).