



REC'D 8-22-95

For Ecology Use
Fee Paid \$10.00
Date 3/28/96 RK

State of Washington Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

G329920 NEW PRIORITY: 7/2/97

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

Name FAIRCHILD AIR FORCE BASE Home Tel: () -
Mailing Address 92 CES/CEV 100 W. Ent St, Suite 155 Work Tel: (509) 247 - 2421
City FAIRCHILD AFB State WA Zip+4 99011 + 9404 FAX: (509) 247 - 2878

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

Same as above

Name RICK ROSA Home Tel: () -
Mailing Address 92 CES/CEV 100 W. Ent St, Suite 155 Work Tel: (509) 247 - 2421
City FAIRCHILD AFB State WA Zip+4 99011 + 9404 FAX: (509) 247 - 2878
Relationship to applicant Environmental Engineer working for the base.

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 6200 (~~1400~~ 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 Domestic supply/irrigation/light industrial (process water). 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: 1200 3750 See letter dated June 30, 1997 JMS.

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 / /

Section 4. WATER SOURCE

AMENDED 7/15/97 (NEW PRIORITY 7/2/97) PER TEL. CON. & LETTER FROM R. ROSA G. JESPERSEN

<input type="checkbox"/> SURFACE WATER SEPA - THIS APPLICATION IS NOT EXEMPT: Name of water source and indicate if unnamed, write "unnamed spring," "unnamed stream," etc.: <u>LEAD AGENCY:</u> Number of diversions: <u>Completed Checklist Received</u>	<input checked="" type="checkbox"/> GROUNDWATER A permit is desired for <u>ONE</u> well(s). <u>#5, 6, 7, 2</u> Size & depth of well(s): <u>18" casing down to 230"</u>
Source flows into (name of body of water): <u>Determination of Nonsignificance Issued</u> <u>Determination of Significance Issued</u>	

LOCATION **DRAFT EIS ISSUED**
Enter north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner.

1000 feet east and 2980 feet North from the SW corner of section 11

¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>SW ¼ of NW¼</u>	<u>11</u>	<u>25N</u>	<u>42E</u>	<u>SPOKANE</u>				
<u>SW¼</u>	<u>NW¼</u>	<u>11</u>	<u>25</u>	<u>42</u>	<u>"</u>			
<u>S½</u>	<u>NW¼</u>	<u>11</u>	<u>25</u>	<u>42</u>	<u>"</u>			

For Ecology Use Date Received: 8-22-95 Priority Date: 8-22-95 7/2/97
SEPA Exempt/Not Exempt EXEMPT FERC License # Dept. Of Health #
Date Accepted As Complete 4-28-96 By RK Date Returned By WRIA: 54/34

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Section 5. GENERAL WATER SYSTEM INFORMATION

#5, #6

A. Name of system, if named: FAIRCHILD AIR FORCE BASE - WELLS #7

B. Briefly describe your proposed water system. (See instructions.)

This well is one of three located along the Spokane River below Fort George Wright that is used to supply domestic/irrigation/light industrial water to Fairchild AFB. The well was drilled in 1953 and it pumps water up to a ground level storage reservoir located near Geiger Field.

C. Do you already have any water rights or claims associated with this property or system? YES NO
PROVIDE DOCUMENTATION. (However, a claim form was submitted in 1974. A copy is attached.) (#112894 WRC) not used

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION

(Completed for all domestic/public supply uses.)

A. Number of "connections" requested: 2043 Type of connection homes, warehouses, offices, industrial
(Homes, Apartment, Recreational, etc.) facilities

B. Are you within the area of an approved water system? Not applicable YES NO ties
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? October 11, 1990 Please attach the current approved version of your plan.
A revision of this plan is in for review at Department of Health.

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: ~~170~~ 450 per R. Rosa.

B. List total number of acres for other specified agricultural uses: Not applicable.

Use _____	Acres _____
Use _____	Acres _____
Use _____	Acres _____

C. Total number of acres to be covered by this application: _____

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 _____ Animal type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

WIS 51882

Section 8. WATER STORAGE

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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.

Section 10. REQUIRED MAP

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

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.

F. L. Zitterkopf FREDERICK L. ZITTERKOPF
Applicant (or authorized representative) Assistant Civil Engineer

17 Aug 1995
Date

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

Date

I have examined this application as required by SDPA and find that it is: not an "action".

categorically exempt.
2/28/96 DATE L. Kiefer SIGNATURE

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

VERBODEN TOEGANG
INFORMATIE, ALLENKOM

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 98503-0210
_____ 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).