



State of Washington
Application for a Water Right Permit

SURFACE WATER GROUND WATER
 Permanent Temporary Short Term

For Ecology Use
(Date Stamp)
RECEIVED
AUG 31 2007
Washington State
Department of Ecology

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

| | | |
|---|---------------------------------|----------------------|
| Applicant/Business Name: <i>Marion H. Fry</i> | Phone No: <i>360-2739258</i> | Other No: |
| Address: <i>8837 Gato Rd. S.W.</i> | | |
| City: <i>Olympia</i> | State: <i>WA</i> | Zip: <i>98512</i> |
| Email Address (optional): <i>CMFryb@cs.com</i> | | |

| | | |
|---|-----------|-----------|
| Contact Name (if different from above): | Phone No: | Other No: |
| Relationship to Applicant: | | |
| Address: | | |
| City: | State: | Zip: |
| Email Address (optional): | | |

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: *PASTURE IRRIGATION*
+ FUTURE DOMESTIC

Anticipated length of time to complete your project: _____

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

| Purpose(s) of Use | Rate (check one box only) | | Acre-Feet per Year (AF/YR) (If known) | Period of Use (Continuously or Seasonal) |
|-------------------|--|---|---------------------------------------|--|
| | <input type="checkbox"/> Cubic Feet per Second (CFS) | <input type="checkbox"/> Gallons per Minute (GPM) | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| TOTAL: | | | | |

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? YES NO

Is this request for a temporary permit? YES NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ___/___/___ TO: ___/___/___

| | | |
|-----------------|---------------------------------|---|
| For Ecology Use | APPLICATION NO: <i>G2-30429</i> | SEPA: Exempt/Not Exempt |
| | Fee Paid: _____ Check No: _____ | ECY Coding: 001-001-WR1-0285-000011 |
| Date Returned | By | Priority Date <i>8-31-07</i> By <i>SC</i> WRIA: <i>23</i> |

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

| A.) If Surface Water Source | B.) If Ground Water Source |
|--|---|
| <input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: _____ Tributary to: _____ Number of proposed diversion points: _____ Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO | <input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ _____ Well diameter & depth: _____ Number of proposed points of withdrawal: _____ Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. _____ |

C.) Point of Diversion/Withdrawal – Legal Description

| Parcel No. | ¼ | ¼ | Section | Township | Range | County |
|-------------|----------|---|-------------|----------|-------|--------|
| 09650003000 | | | 16 | 16 | 3W | |
| Lot(s) | Block(s) | | Subdivision | | | |
| | | | | | | |

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
 _____ Feet (North/ South) and _____ feet (East/ West)
 from the (NW SW NE SE _____) corner of Section _____.

| Parcel No. | ¼ | ¼ | Section | Township | Range | County |
|------------|----------|---|-------------|----------|-------|--------|
| | | | | | | |
| Lot(s) | Block(s) | | Subdivision | | | |
| | | | | | | |

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
 _____ feet (North/ South) and _____ feet (East/ West)
 from the (NW SW NE SE _____) corner of Section _____.

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? YES NO
 If no, do you have legal authority to make this application for use of another's land? YES NO
 Provide the owner name(s), address, and phone number: _____

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

| |
|--|
| |
| |
| |
| |

| ¼ | ¼ | Section | Twp. | Range | County | Parcel No. |
|---|---|---------|------|-------|----------|-------------|
| | | 16 | 16 | 3W | THURSTON | 09650003000 |

Do you own all the lands on which the proposed place of use is located? YES NO.
 If no, do you have legal authority to make this application for use of another's land? YES NO
 Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? YES NO
 If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): _____

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

| A.) Domestic Water Systems only | B.) Municipal Water Systems only <i>(defined under RCW 90.03.015)</i> |
|---|--|
| Projected number of connections to be served: _____ | Present population to be served water: _____ |
| Type of connections: _____ <i>(e.g., home, recreational cabin)</i> | Estimate future population to be served: _____ (20 year projection) |

C.) Water System Planning

Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? YES NO

If yes, date plan was approved ____/____/____ Water System Number: _____

Name of water system: _____

Are you within the service area of an existing water system? YES NO

If yes, explain why you are unable to connect to the system: _____

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 4 1/2 ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: 5 Beef cows

Is the proposed project for a dairy farm? YES NO

Other Proposed Farm Uses

Describe all proposed uses: _____

Family Farm Water Act (RCW 90.66):

Calculate 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, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? YES NO

Do you have a controlling interest in a Family Farm Development Permit? YES NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? YES NO

Are you proposing to store more than 10 acre-feet of water? YES NO

Will the water depth be 10 feet or more? YES NO

If you answered yes to any of the above questions, please describe: _____

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 complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: May Town Exit

To LITTLE ROCK 128th to mima $\frac{1}{8}$ mile

left on mima - 3 1/2 miles. to 152

1/8 mile on left on Gate Rd.

Site Address: _____

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application 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 the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Marion Fry
 Print Name
 (Applicant or authorized representative)

Marion Fry
 Signature

 Date

 Print Name
 (Landowner of Place of Use)

 Signature

 Date

 Print Name
 (Landowner of Place of Use)

 Signature

 Date

 Print Name
 (Landowner of Place of Use)

 Signature

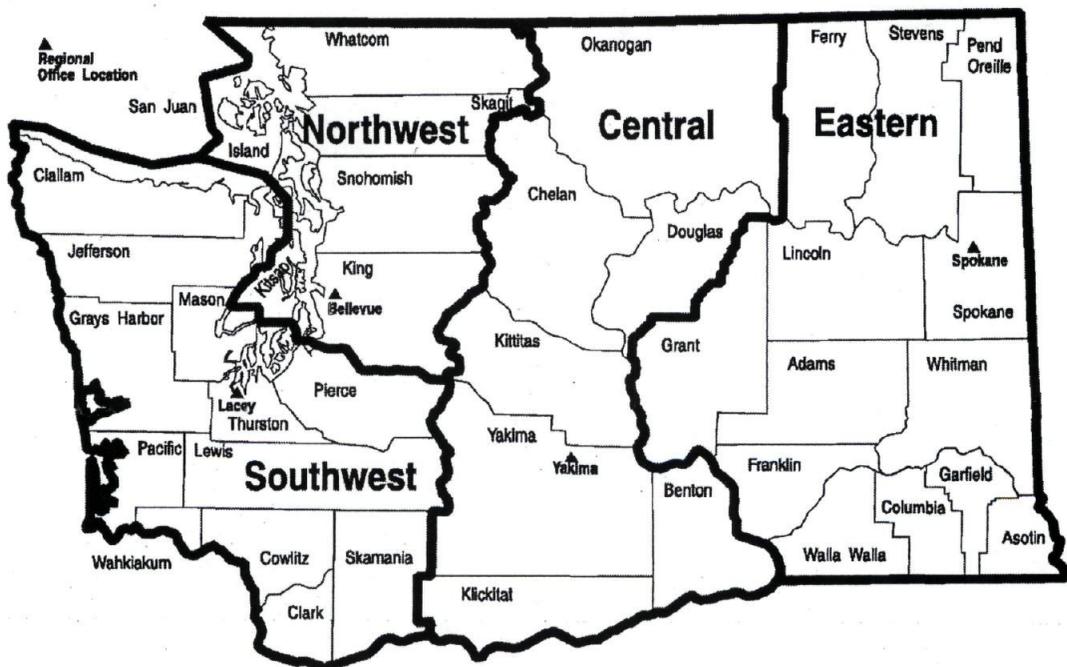
 Date

Submit your application to: DEPARTMENT OF ECOLOGY
 CASHIERING SECTION
 PO BOX 5128
 LACEY WA 98509-5128

Please check the region in which your proposed project is located.

Southwest Northwest Central Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300

Northwest Regional Office: 425-649-7000

Central Regional Office: 509-575-2490

Eastern Regional Office: 509-329-3400

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341

Provide the total number of acres of land to be irrigated in the space provided. The number of acres to be irrigated should not include lands within the general irrigation area that may contain buildings, roads, etc. Outline the area to be irrigated on your attached map from Section 4.

Stockwater

Indicate total number of animals receiving stockwater and the type of animal (e.g. goats, chickens, llamas).

Check yes if the proposed project is for a dairy farm.

Other Proposed Farm Uses

Describe all other proposed farm uses (e.g. frost protection, heat control, or harvesting) listed in Section 2 and provide the proposed number of acres of land upon which each purpose would occur. Also note other uses of water on the farm (e.g. cleaning the milking parlor, washing cattle, or for a cooling system) and how much water is needed for each use.

Family Farm Water Act (RCW 90.66)

In order to comply with the Family Farm Water Act, indicate if you have a controlling interest in more than 6,000 acres of irrigation as defined in RCW 90.66.040(3). This includes the number of acres that are irrigated under water rights acquired after December 8, 1977, acreage that would be irrigated under this application, and acreage proposed to be irrigated under other pending applications on file with the Department of Ecology.

Check yes, if the proposed project is over 6,000 acres.

Enter the permit number(s) of any Family Farm Development Permit in which you hold controlling interest.

Section 8. OTHER WATER USES

Hydropower

For hydropower projects, indicate the total feet of head and proposed capacity in kilowatts. Describe the proposed diversion facility, including the bypass reach. Indicate all uses to which power is to be applied. Enter the FERC license number.

Mining/Industrial Use

Describe use, method of supplying and utilizing water.

Other Use

Describe any other use(s) of water.

Section 9. WATER STORAGE

Check the appropriate box for each question.

If you answered yes to any of the questions, your project may require a reservoir permit, or an approval from Ecology's Dam Safety Program. For criteria on reservoir permits contact the regional office in which your project is located.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions from the nearest town to the project site. If applicable, provide the site address.

Section 11. REQUIRED SIGNATURES

The applicant or authorized representative (e.g. the Public Works Director of a municipality, or the chair of a community water system) AND the landowner(s) of the place of use MUST sign the application.