



# State of Washington Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

*\$50*  
*CL# 112*  
*2-2-07*  
*URG*  
RIS OK-EG 2-26-07  
For Ecology Use  
DEPT OF ECOLOGY  
Received  
Fee Paid *50.11*  
FEB 02 2007  
Date  
CENTRAL REGION OFFICE  
*\$61.11 CL# 112990 2-26-07 EG*

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

Name Gerald V. Stanton Jr. M D Home Tel: (847) 837 1963  
 Mailing Address 21505 Lakegreen Dr. Work Tel: (847) 837 1963  
 City Mundelein State IL Zip+4 60060 +5000 FAX: (847) 837-1736

## 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

The applicant requests a permit to use not more than 500 ( 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 \_\_\_\_\_ ATTACH A "LEGAL"

DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient. *The East half of the Northwest quarter of section 15 Township 4 North, Range 27 East, W.M. R. of Benton County WA (see attached sheet)*  
 Estimate a maximum annual quantity to be used in acre-feet per year: 230 acre/feet/year

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

IF SURFACE WATER						IF GROUNDWATER		
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>1</u> well(s). <i>(proposed)</i>		
Number of diversions: _____						Size & depth of well(s): <i>approximately 1000 feet</i>		
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:								
¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<i>E ½</i>	<i>NW ¼</i>	<i>15</i>	<i>9</i>	<i>27</i>	<i>Benton</i>			
For Ecology Use Date Received: <u>02/02/2007</u> Priority Date: <u>02/02/2007</u>								
SEPA: Exempt/Not Exempt _____ FERC License # _____ Dept. Of Health # _____								
Date Accepted As Complete _____ By _____ Date Returned _____ By _____ WRIA <u>37-Benton</u>								

Appl. No.: G4-35134

**Section 5. GENERAL WATER SYSTEM INFORMATION**

- A. Name of system, if named: Stanton well for grape cultivation
- B. Briefly describe your proposed water system. (See instructions.)  
A <sup>deep</sup> well, on the property legally described in the attached sheet, for the purpose of growing wine grapes in the Red Mountain appellation
- C. Do you already have any water rights or claims associated with this property or system?  YES  NO  
PROVIDE DOCUMENTATION.

**Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION**  
(Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: \_\_\_\_\_ Type of connection \_\_\_\_\_  
(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: 80
- B. List total number of acres for other specified agricultural uses:  
Use grape cultivation Acres 80  
Use \_\_\_\_\_ Acres \_\_\_\_\_  
Use \_\_\_\_\_ Acres \_\_\_\_\_
- C. Total number of acres to be covered by this application: 80
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001)  
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 6000 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 \_\_\_\_\_

**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 sheet.*

**Section 10. REQUIRED MAP**

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

*see attached sheet*

**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):

*I am a special trustee for and principal beneficiary of the Alice Stanton (my mother - deceased) trust which holds title to the land. (Listed on Benton County property record as such)*

B. Does the applicant own the land on which the water source is located?

YES  NO

If no, submit a copy of agreement:

*per above*

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.

*Arnold N. Stanton Jr. M.D.*  
Applicant (or authorized representative)

*1/23/07*  
Date

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

*1/23/07*  
Date

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

*See attached sheet.*

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 \_\_\_\_\_

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).