

REC'D  
AUG - 2 2005  
DEPARTMENT OF ECOLOGY  
EASTERN REGIONAL OFFICE



STATE OF WASHINGTON  
**APPLICATION FOR CHANGE/TRANSFER  
DROUGHT PERMIT**

For filing with Ecology or with County Conservancy Boards

**A MINIMUM FEE OF \$10.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION**

(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: Drought Assistance for Nela 1600

ID# 424130087

**FOR OFFICE USE ONLY**

CHANGE No. CS3-45077J WRIA 59

DATE ACCEPTED \_\_\_/\_\_\_/\_\_\_ BY \_\_\_

FEE \$ 10.00 REC'D 08/02/2005

CHECK No. 5345

SEPA:  Exempt  Not exempt  
Stevens County

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

**1. Applicant Information:**

APPLICANT/BUSINESS NAME <u>ROBERT M. HARRISON</u>	PHONE NO. <u>(509) 936-0006</u>	FAX NO. <u>( )</u>
ADDRESS <u>BOX 564</u>		
CITY <u>CHEWELAH</u>	STATE <u>WASH</u>	ZIP CODE <u>99109</u>
CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
	<u>( )</u>	<u>( )</u>
ADDRESS		
CITY	STATE	ZIP CODE

**2. Water Right Information:**

WATER RIGHT OR CLAIM NUMBER <u>* #11 w/c: 1-3-175</u>	RECORDED NAME(S) <u>MYRON KLUP / THEO BENJAMIN</u>
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> 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.

**FOR OFFICE USE ONLY**

APP. NO. S3-00846 PERMIT NO. \_\_\_\_\_ CERT. NO. S3-00846C CERT. OF CHANGE NO. 1-3-175

For transfer of 100 acre feet for Remands of Secs

**3. Point(s) of Diversion/Withdrawal:**

**A. Existing**

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Chewelah CREEK	{	NW	NW	2	32	40		
		SW	NE	2				

**B. Proposed**

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Colville RIVER		NE	SW	31	33	40		

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?  
 EXISTING:  YES  NO      PROPOSED:  YES  NO - IF NO, PROVIDE OWNER(S) NAME: OWEN PULLEN

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.

**4. Purpose of Use:**

**A. Existing**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
IRRIGATION FARM CROPS		186	MAY - SEPT

**B. Proposed**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
IRRIGATION - TREES		100	JUNE - OCTOBER

**5. Place of Use:**

**A. Existing**

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:  
 NW¼ of the SW¼ - + Part of the SW¼ of the NW¼ South of County Road - Section 2 Twp 32 N Range 40 E W.M.

SEE ATTACHED

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE?  YES  NO - IF NO, PROVIDE OWNER(S) NAME:

**B. Proposed**

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:  
 LOTS 3 + 4 EXCEPT EAST 660 FEET OF NW½ GOVT LOT 3 - THE WEST 100 FEET OF SE¼ SW¼ - SECT 31 T 33 N RANG 40 E W.M.

SEE ATTACHED

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE?  YES  NO - IF NO, PROVIDE OWNER(S) NAME: OWEN PULLEN

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.

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):

**6. Remarks and Other Relevant Information:**

Enclosed maps of EXISTING + Proposed Pts of Diversion and Place of Use

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IF FOR SEASONAL OR TEMPORARY, START DATE 06/1/05 END DATE 10/31/05

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.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

**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 the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

Robert M. Harrison (Applicant) 07/29/05 (Date)

Robert Harrison (Water Right Holder) 07/29/05 (Date)

Robert M. Harrison (Land Owner(s) of Existing Place of Use) 07/29/05 (Date)

**IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.**

**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: \_\_\_\_/\_\_\_\_/\_\_\_\_

**ATTACHMENT FOR  
APPLICATION FOR CHANGE**

**Point(s) of Diversion/Withdrawal -  Existing  Proposed:**

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Chewelah Creek	77	NW	NE ¼	2	32	40		
			SW ¼					
	<del>71</del>	<del>"</del>	<del>"</del>	<del>"</del>	<del>"</del>	<del>"</del>		

*Handwritten signature and date: 08/08/05*

DO YOU OWN THE ABOVE POINT(S) OF DIVERSION/WITHDRAWAL?  YES  NO - IF NO, PROVIDE OWNER(S) NAME:

**Purpose(s) of Use -  Existing  Proposed:**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation farm crops			

**Place of Use -  Existing  Proposed:**

LEGAL DESCRIPTION OF LANDS			
NW ¼ SW ¼	32	40	
SW ¼ NW ¼	32	40	

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE?  YES  NO - IF NO, PROVIDE OWNER(S) NAME: