

STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

PROGRESS SHEET

SURFACE WATER

GROUND WATER

NAME: **Stuart Dufree - Gardena Farms District No. 13** TELEPHONE NO.: **509-394-2331 fx:2983**

ADDRESS: **539 White Road** CITY: **Touchet** STATE: **Washington** ZIP CODE: **99360**

ASSIGNED TO: _____ TELEPHONE NO.: _____ DATE ASSIGNED: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

APPLICATION NO.: **S3-30437** *FD # 4215784* PERMIT NO.: _____ CERTIFICATE NO.: _____

DATE AMENDED: _____ DATE CANCELLED: _____ W.R.I.A.: **32 - Walla Walla River Basin**

APPLICATION

DATE APPLICATION RECEIVED: **December 7, 2004** INITIAL \$10.00 FEE RECEIVED: YES NO DATE FEE RECEIVED: **12-7-2004 ck#1140**

STATEMENT OF ADDITIONAL EXAMINATION FEE \$: _____ DATE SENT: _____ DATE RECEIVED: _____

DATE RETURNED FOR COMPLETION OR CORRECTION: _____ DATE RECEIVED: _____

TEMPORARY PERMIT

APPROVED BY: _____ DATE ISSUED: _____

Union Bulletin or The Waitsburg Times PUBLICATION: _____ S

APPROVED BY: *Kay J. Bickel* DATE APPROVED: *January 19, 2005* DATE NOTICE SENT: *December 16, 2004*

PROTESTED BY & DATE: _____

DATE AFFIDAVIT RECEIVED: *January 11, 2005* CHECKED BY: *Kay J. Bickel* TIME EXPIRED: *1-27-2005* DATE AMENDED NOTICE SENT: _____ DATE AFFIDAVIT RECEIVED: _____ TIME EXPIRED: _____

DEPARTMENT OF FISH & GAME REPORT

APPROVED: _____ PROVISIO: _____ PROTEST: _____

EXAMINATION

DATE EXAMINATION MADE: _____ MADE BY: _____ DATE REPORT OF EXAM. WRITTEN: _____ WRITTEN BY: _____ CHECKED BY: _____

DATE PERMIT FEE REQUESTED: _____ AMOUNT DUE: _____ DATE RECEIVED: _____

PERMIT

PERMIT APPROVED BY: _____ DATE APPROVED: _____ PERMIT NO.: _____ DATE ISSUED: _____

BEGINNING OF CONSTRUCTION

DATE NOTICE SENT: _____ DATE FILED: _____ EXTENSION FEE: _____

EXTENDED TO: _____ EXTENDED TO: _____

WELL DRILLER'S AND/OR CONSTRUCTION REPORT

DATE SENT: _____ DATE FILED: _____

COMPLETION OF CONSTRUCTION

DATE NOTICE SENT: _____ DATE FILED: _____ EXTENSION FEE: _____

EXTENDED TO: _____ EXTENDED TO: _____

PROOF OF APPROPRIATION

DATE SENT: _____ DATE FILED: _____ EXTENSION FEE: _____ EXTENDED TO: _____

DATE CERT. FEE REQUESTED: _____ AMOUNT DUE: _____ DATE RECEIVED: _____ DATE APPROVED FOR CERTIFICATE: _____ APPROVED BY: _____

CERTIFICATION

PROOF EXAM REQUIRED: YES NO CERTIFICATE NUMBER: _____ DATE ISSUED: _____

CC: **WWFO 1815 Portland Avenue, Suite No. 1; Walla Walla, Washington 99362**
WDFW 600 Capitol Way North, Olympia, Washington 98501-1091

Field packet sent to WWFO: *01-19-2005* by: *Kay J. Bickel*