



State of Washington
Application for a Water Right

RECEIVED
JUN 11 1998
DEPARTMENT OF ECOLOGY
EASTERN REGIONAL OFFICE

For Ecology Use
Fee Paid \$10.00
Date 7/22/98
CK# 82624K

Please follow the attached instructions to avoid unnecessary delays.

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

Name Clarence or Mae Claypool Home Tel: (509) 397-4054
Mailing Address 1102 SR 272 Work Tel: () - -
City Colfax State Wa Zip+4 99111 + FAX: () - -

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

Same as above

Name Clarence Claypool Home Tel: (509) 397-4054
Mailing Address _____ Work Tel: () - -
City _____ State _____ Zip+4 _____ + FAX: () - -
Relationship to applicant Same

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 50 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 Irrigation - 10 Acres + Stock water for 50 cows + Domestic. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient. Seasonal irrigation of 10 acres, continuous domestic + stock water supply
Estimate a maximum annual quantity to be used in acre-foot per year: 33

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>2</u> well(s). <u>6" Wells - 1 - 257'</u> <u>1 - 60' in Backup</u> <u>(wells are already in service)</u>
Number of diversions: _____	Size & depth of well(s):
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: Well - 257' deep - 1370' from SW corner of Section 12 - 844' - East
60' Deep Well - 1060' from SW corner of Section 12 480' from East line

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below: <u>on Map</u>		
						Lot	Block	Subdivision
<u>(Both within SW)</u>	<u>SW</u>	<u>12</u>	<u>16 N</u>	<u>43</u>	<u>Whitman</u>	<u>1, 2, 4</u>		
						<u>6, 7, 8, 9</u>		

For Ecology Use Date Received: 6/4/98 Priority Date: 6-4-1998
SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____
Date Accepted As Complete 4-28-00 By RT Date Returned _____ By _____ WRIA: 34

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: _____
- B. Briefly describe your proposed water system. (See instructions.)
 Well - 257' deep has a 3 horse Pump pumping 30 gallon per minute
 Well 60' - a back-up has a 2 horse pump though the well has a capacity of only 3 gallon per minute.
- C. Do you already have any water rights or claims associated with this property or system? YES NO
 PROVIDE DOCUMENTATION. *no water rights to my knowledge*

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
(Completed for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 10
- B. List total number of acres for other specified agricultural uses:
 Use Orchard Acres 2
 Use Water 50 Cow calf pair Acres _____
 Use Lawn Acres 1
- C. Total number of acres to be covered by this application: 13
- 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 50 pair 10 yr/10 2 Bulls Animal Type Beef (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.

From Colfax Take St. Rt. 272 East 1 mile
Nehoe on Garage Door + 1102 on Mail Box
Left off sharp right Turn on Highway

Section 10. REQUIRED MAP

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

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.

Clarence J. Claypool
Applicant (or authorized representative)

6/1/98
Date

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

Date

G 330200

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

I will irrigate May 15 - Sept 15
All of cattle can be here all winter Nov 1 - May 1
10-20 yrls pasture during summer

We are returning your application for the following reason(s):	
<input type="checkbox"/> Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
<input type="checkbox"/> 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).