For Ecology Use
(Date Stamp)

DEPARTMENT OF ECOLOGY
State of Washington

# Water Resources Program
## Application for a Water Right Permit

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DEPT. OF ECOLOGY
FISCAL & BUDGET

X SURFACE WATER ☐ GROUND WATER X PERMANENT

☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT

*Follow the attached instructions. Attach additional sheets as necessary.*

***A NON-REFUNDABLE MINIMUM FEE OF $50.00 MUST ACCOMPANY THIS APPLICATION.**

## Section 1. APPLICANT

| | | |
|---|---|---|
| Applicant/Business Name:<br>Public Utility District No. 1 of Pend Oreille County | Phone No:<br>509-447-3137 | Other No: |
| Address:<br>PO Box 190 | | |
| City:<br>Newport | State:<br>WA | Zip:<br>99156 |
| Email Address (optional):<br>mcauchy@popud.org | | |

| | | |
|---|---|---|
| Contact Name (if different from above):<br>Mark Cauchy | Phone No:<br>509-447-9331 | Other No: |
| Relationship to Applicant:<br>Director | | |
| Address: | | |
| City: | State: | Zip: |
| Email Address (optional): | | |

| | | |
|---|---|---|
| Legal Land Owner or Part Owner Name of the Proposed Place of Use:<br>Colville National Forest | Phone No: | Other No: |
| Address: Attn: Laura Jo West<br>765 South Main Street | | |
| City:<br>Colville | State:<br>WA | Zip:<br>99114 |
| Email Address (optional): | | |

## Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: This application is to make available a total of 14,000 acre feet of water annually for instream flows in Sullivan Creek, Pend Oreille River, and Columbia River (and associated reservoirs) from Sullivan Lake to the confluence of the Columbia River and the Pacific Ocean, and for mitigation of out of stream beneficial uses in Pend Oreille, Stevens, Lincoln, Douglas and Okanogan counties. (Refer to attached MOA)

| For Ecology Use | |
|---|---|
| | APPLICATION NO: S3-30635 SEPA: Exempt/Not Exempt |
| | Fee Paid: 50.00 22,450.00 Check No: 73763 73985 3-4-2011 3-24-2011 ECY Coding: 001-001-WR1-0285-000011 |
| Date Returned Request fee $22,500 By KRyf Priority Date 3-4-2011 By KRyf WRIA: 62 PO County | |

Anticipated length of time to complete your project: 2014

**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) ☒ Cubic Feet per Second (CFS) ☐ Gallons per Minute (GPM) | Acre-Feet per Year (AF/YR) (If known) | Period of Use (Continuously or Seasonal) |
|---|---|---|---|
| Hydropower[1] | Peak flows of 225 cfs[2] | 26,000 | Continuously |
| Instream flow | Peak flows of 225 cfs[2] | 26,000 | Continuously |
| Mitigation for out of stream beneficial uses | Peak flows of 210 cfs[2] | 14,000 | Continuously |
| Mitigation of new reservoir operations, including recreation, aesthetics and in-lake resident fisheries values | Peak flows of 225 cfs[2] | ~~26,000~~ 31,209 | Continuously 3-29-2011 |
| **TOTAL:** | Peak flows of 225 cfs[2] | ~~26,000~~ 31,209 | Per Ruf letter dated 3-24-2011 |

1. Hydropower uses will occur at downstream dams on the Pend Oreille and Columbia River pursuant to the Pacific Northwest Coordination Agreement.
2. Flows Listed here indicate the peak expected beneficial use flow, During flood events and/or during reservoir draining, outlet flows sometimes exceed 225 cfs, but flows in excess of 225 cfs are only to meet operational requirements and are not counted toward the beneficial flows.

**Short Term/Temporary Water Use**

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

Is this request for a temporary permit? ☐ YES X NO

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

FROM: NA/____/____ TO: ____/____/____

## Section 3. POINT OF DIVERSION OR WITHDRAWAL

**(Complete A or B, and C below)**

**A.) If Surface Water Source**

☐ Spring ☐ Creek ☐ River X Lake

☐ Other:_____

Source Name: Sullivan Lake

Tributary to: Outlet Creek / Sullivan Creek

Number of proposed diversion points: 1

Do you have an existing diversion? X YES ☐ NO

**B.) If Ground Water Source**

☐ Well(s) ☐ Other:_____

Well diameter & depth:_____

Number of proposed points of withdrawal:____

Do you have an existing well? ☐ YES ☐ 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 |
|---|---|---|---|---|---|---|
| | SW | NE | 31 | 39N | 44E | Pend Oreille |

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

| For Ecology Use | APPLICATION NO:_____ SEPA: Exempt/Not Exempt<br>Fee Paid:_____ Check No:_____ ECY Coding: 001-001-WR1-0285-000011 |
|---|---|
| Date Returned _____ By_____ Priority Date _____ By_____ WRIA:_____ | |

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 **X** NO
If no, do you have legal authority to make this application for use of another's land? **X**YES ☐ NO
Provide the owner name(s), address, and phone number: Colville National Forest, Attn. Ms. Laura Jo West, Forest Supervisor, Federal Building, 765 South Main St., Colville, WA 99114

## 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.**

In Lake Use (Refer to attached Map)

Out of lake uses – from outlet source (Sullivan Lake) through Sullivan Creek, Pend Oreille River, Lake Roosevelt, to the confluence of the Columbia River and the Pacific Ocean.

| ¼ | ¼ | Section | Twp. | Range | County | Parcel No. |
|---|---|---|---|---|---|---|
| | | | | | | |

Do you own all the lands on which the proposed place of use is located? ☐ YES X NO.

If no, do you have legal authority to make this application for use of another's land? X YES ☐ NO
Provide owner name(s), address, and phone number: Colville National Forest, Attn. Ms. Laura Jo West, Forest Supervisor, Federal Building, 765 South Main St., Colville, WA 99114

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: Water stored in Sullivan Lake under claim embodied in Certificate of Change Vol. 2 Page 817 and Claim 300245. (Refer to attached MOA)

**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): An existing gravity fed concrete dam with parabolic spillways with a storage capacity of 31,000 acre feet, with a cold water facility consisting of a 48 inch diameter pipe with fish screens at the inlet and routed through one of the three existing low-level outlet gates of the dam.

## Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

**(Complete A or B, and C below)**

| A.) Domestic Water Systems only | B.) Municipal Water Systems only |
|---|---|

| | (*defined under RCW 90.03.015*) |
|---|---|
| Projected number of connections to be served: _____ | Present population to be served water: _____ |
| Type of connections:_____ *(e.g., home, recreational cabin)* | 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 = _____ACRES

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

**Stockwater**

List number and kind of stock:_____

_____

_____

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 _____20_____ and proposed capacity in kilowatts: 0

Describe works:_____Power was never generated by the District and instead the lake was operated for recreation

and fisheries uses and indirect power benefits through the management of storage releases pursuant to the Pacific Northwest Coordination Agreement and applicable law.

Indicate all uses to which power is to be applied: See above.

FERC License No: P-2225, currently under a license surrender process through FERC. Future operation will be through a special use authorization (SUA) under the USDA Forest Service.

**Mining/Industrial Use**

Describe use, method of supplying and utilizing water:

**Other Use**

The District will maintain lake levels for summer recreation, and in-lake fisheries, including Kokanee spawning. In Stream benefits will permit use for downstream fishery habitat, and water quality. Out of stream benefit of 14,000 ac ft contracted to Office Of Columbia River (Ecology) pursuant to the attached MOA.

## Section 9. WATER STORAGE

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

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

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

If you answered yes to any of the above questions, please describe: The District has a current storage water right for Sullivan Lake (R-333).

*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: US HWY 2 to SR 20 turn right onto Sullivan Lake Rd as you enter the Town of Ione in north Pend Oreille County.

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.**

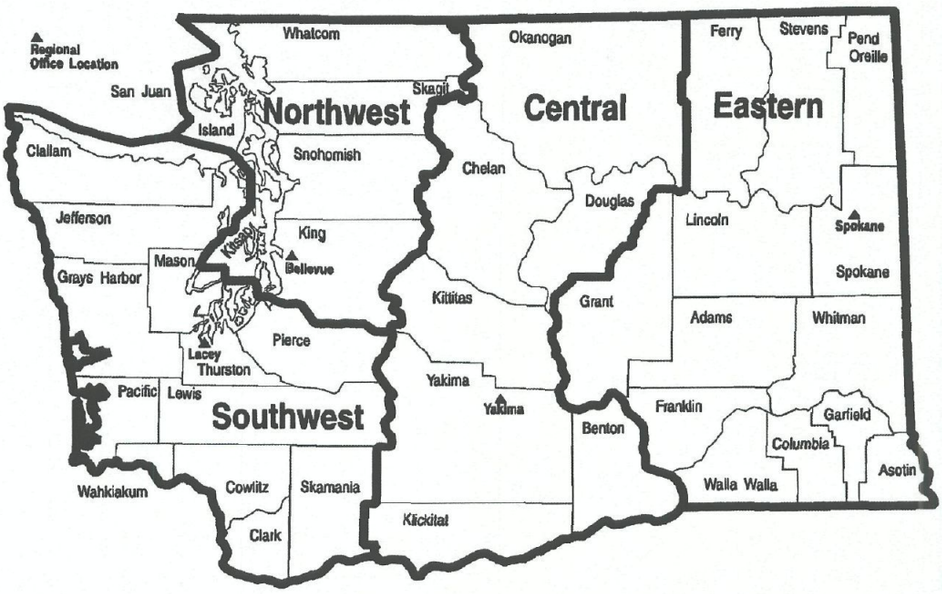
| Mark Cauchy | Mark Cauchy | 2/28/11 |
|---|---|---|
| Print Name (Applicant or authorized representative) | Signature | Date |

| Print Name (Legal Owner or Part Owner Place of Use) | Signature | Date |
|---|---|---|
| Print Name (Legal Owner or Part Owner Place of Use) | Signature | Date |
| Print Name (Legal Owner or Part Owner Place of Use) | Signature | Date |

**Please check the region in which the project is located:**

| ***Submit your application to:** | | |
|---|---|---|
| DEPARTMENT OF ECOLOGY<br>CASHIERING SECTION<br>PO BOX 47611<br>OLYMPIA, WA 98504-7611 | ☐ Central Regional Office<br>15 W Yakima Avenue, Suite 200<br>Yakima, WA 98902<br>(509) 575-2490 | ☐ Eastern Regional Office<br>4601 N. Monroe<br>Spokane, WA 99205-1295<br>(509) 329-3400 |
| | ☐ Northwest Regional Office<br>3190 – 160th Avenue SE<br>Bellevue, WA 98008-5452<br>(425) 649-7000 | ☐ Southwest Regional Office<br>PO Box 47775<br>Olympia, WA 98504-7775<br>(360) 407-6300 |

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.




## INSTRUCTIONS for the Application for a Water Right Permit

Please read these instructions carefully. Be accurate and complete in filling out your application, as the information you provide is very important in processing your application. Be sure to attach your fees, maps, and any additional information related to the water uses you are proposing.

If you need assistance, please contact the regional office in which your project will be located. A map of the Ecology regions is on the back page of the application. If your answers to any questions are longer than the space provided, you may attach additional sheets as necessary.

**Check Boxes**

Check the appropriate box for Surface or Ground Water.
Check the appropriate box for Permanent, Temporary, or Short Term use (duration of 4 months or less).

***Application Fee**

- A minimum fee of $50.00 is required for each new application for a water right permit.
- No fees are required for applications to be processed under a Cost Reimbursement contract.
- No fees are required for Emergency Drought Applications (only when a drought is declared).

If additional fees are required, Ecology will send you a letter requesting those fees. If you are unsure of the appropriate fee amount, contact your regional office for more information, or visit our website: <http://www.ecy.wa.gov/programs/wr/rights/wr_fees.html>.