



G1-23088C(?)  
G1-23088C

# State of Washington Application for a Water Right

For Ecology Use
Fee Paid _____
Date <u>11/10/2004</u>

Please follow the attached instructions to avoid unnecessary delays.

CK#1869

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

Name MARIANI WATER SYSTEM INC #51675C Home Tel: (360) 825-9218  
RICHARD ROBERTSON  
Mailing Address PO BOX 725 Work Tel: (360) 825-9219 OR 7400722  
City GRUMLAND State WA Zip+4 98022 + FAX: ( ) -

### 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 \_\_\_\_\_

**RECEIVED**  
NOV 10 2004  
DEPT OF ECOLOGY

### Section 3. STATEMENT OF INTENT

INCREASE INSTANTANEOUS DEMAND BY 50 GPM TO SUPPLY 65 CONNECTIONS APPROVED 1970 BY DOH  
The applicant requests a permit to use not more than 150 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 INCREASE INSTANTANEOUS FROM 100 gpm to 150 ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.  
Estimate a maximum annual quantity to be used in acre-feet per year: 14 ACRE FEET

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>WELL FIELD(s)</u> <u>2 WELLS ABA 849 &amp; 850</u>
Number of diversions: _____	<u>MWS INC #51675C G1-23088C</u>
Source flows into (name of body of water):	Size & depth of well(s): <u>8" 80' &amp; 83' DEEP</u>

### LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:  
WELL FIELD 503 KC PARCEL # 032107-9049

1/4 or	1/4 or	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>SE</u>	<u>NW</u>	<u>3</u>	<u>21</u>	<u>7E</u>	<u>KING</u>			
<u>SE</u>	<u>NW</u>	<u>3</u>	<u>21</u>	<u>7E</u>	<u>KING</u>			

For Ecology Use Date Received \_\_\_\_\_ Priority Date: 11/10/2004  
SEPA Exempt/Not Exempt \_\_\_\_\_ FERC License # \_\_\_\_\_ Dept. Of Health # \_\_\_\_\_  
Date Accepted As Complete: 11/10/2004 By: ROB Date Returned \_\_\_\_\_ By \_\_\_\_\_ WRIA: 9

Appl. No: G1-28278

Richard Robertson 11/9 2004

**Section 5. GENERAL WATER SYSTEM INFORMATION**

A. Name of system, if named: MARIANI WATER SYSTEM INC # 51675C

B. Briefly describe your ~~proposed~~ <sup>EXISTING</sup> water system. (See instructions.)

PLEASE SEE DOCUMENTS SUBMITTED 2/10 2003.

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" <sup>APPROVED</sup> requested: 65 Type of connection RESIDENTIAL  
(Homes, Apartment, Recreational, etc.)

B. Are you within the area of an approved water system? I AM THE APPROVED W.S  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.  
APPROVED FOR 65 BY DOH.

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?  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.  
COMPLETED 7/1 2004 RPE  YES  NO  
IN PROGRESS

D. Do you have an approved conservation plan?  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.  
COMPLETED 7/1 2004 RPE  YES  NO  
IN PROGRESS

**Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION**  
(Complete for all irrigation and agriculture uses.)

A. Total number of acres to be irrigated: 0

B. List total number of acres for other specified agricultural uses:

Use \_\_\_\_\_ Acres \_\_\_\_\_  
Use \_\_\_\_\_ Acres \_\_\_\_\_  
Use \_\_\_\_\_ Acres \_\_\_\_\_

C. Total number of acres to be covered by this application: \_\_\_\_\_

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 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 \_\_\_\_\_

*Robert R. R. R.*  
11/9 2004

**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.

SOUTH FROM BUNTON ON HWY 169, EAST ON KENT KANGLEY RD (AT 4 CORNERS), SOUTH ON KANASKAT KANGLEY RD TO SE 301<sup>ST</sup> ST WEST ON SE 301<sup>ST</sup> ST TO WELL FIELD AND PUMP HOUSE ON THE NORTH SIDE AT THE END OF THE ROAD APPROX 1200 FT.

**Section 10. REQUIRED MAP**

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

ENCLOSURE APPLICATION INFORMATION REPORT

**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):

IN APPLICATION INFORMATION REPORT

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.

Richard Kohler operator # 8948

11/9 2004

Richard Kohler operator # 8948

5/27 2004

Applicant (or authorized representative)

Date

Richard Kohler operator # 8948

Richard Kohler MWS INC

5/27 2004

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

Date

PURVEYOR

G/23088C

APPLICATION

Richard Kohler  
11/9 2004

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

PLEASE REFER TO INFORMATION AND KING COUNTY  
 COMPREHENSIVE PLAN SENT TO DOE FEB, 10 2003,  
 ALSO LETTER SENT TO JANET JORG DATED 4/26/2004  
 WITH ADDITIONAL INFORMATION CONCERNING  
 PART A-1 REMARKS # 3.

THANKS-  
 R. ROBERTSON

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

APPLICATION

*R. Robertson*  
 11/9/2004