



State of Washington RECEIVED

Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

Fee Paid 10-

Date 9/21/95

V4315

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

Name CITY OF LACEY Home Tel: ( ) - 
Mailing Address P.O. BOX 3400 Work Tel: (360) 438 - 2648
City LACEY State WA Zip+4 98509 + 3400 FAX: (360) 456 - 7799

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

[X] Same as above

Name CORY CREBBIN Home Tel: ( ) - 
Mailing Address Work Tel: ( ) - 
City State Zip+4 + FAX: ( ) - 
Relationship to applicant WATER RESOURCES MANAGER

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 1800 ( [X] gallons per minute or 
[ ] cubic feet per second) from a [ ] surface water source or [X] ground water source (check only one) for the 
purpose(s) of MUNICIPAL WATER SUPPLY. 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: 1456

[ ] 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

Table with 2 columns: If SURFACE WATER, If GROUNDWATER. Includes fields for Name, Number of diversions, Source flows into, Size & depth of well(s).

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the 
nearest section corner:

well A. 1000'S + 650' W of the north Quarter corner of Sec 24
well B. 1050'S + 1150' WEST of the center of Sec 24

Table with 7 columns: 1/4 of, 1/4 of, Section, Township, Range(E/W), County, and 3 sub-columns for Lot, Block, Subdivision.

For Ecology Use Date Received: 9/20/95 Priority Date: 9/20/95 8/13/86
SEPA: Exempt/Not Exempt FERC License # Dept. Of Health #
Date Accepted As Complete 10/25/95 By Date Returned By WRIA: 13

**Section 5. GENERAL WATER SYSTEM INFORMATION**

- A. Name of system, if named: CITY OF LACEY
- B. Briefly describe your proposed water system. (See instructions.)  
SERVICE AREA INCLUDES THE BULK OF THE UGMA FOR THE CITY OF LACEY. THE SERVICE SYSTEM CURRENTLY SERVES A POPULATION OF 34,000. IT IS PROJECTED THAT THE SERVICE POPULATION WILL BE APPROXIMATELY 40,000 BY THE YEAR 2000.
- 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" requested: 13,000 Type of connection VARIOUS  
(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.  

WE ARE THE APPROVED SYSTEM.

**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? APPROVAL PENDING  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? APPROVAL PENDING - DOH HAS REVIEWED  YES  NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

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

- A. Total number of acres to be irrigated: \_\_\_\_\_
- 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 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 \_\_\_\_\_ Animal type \_\_\_\_\_ (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.

#1 EAST ON PACIFIC. THENCE NORTH ON DIRT ROAD IN VICINITY OF EVERGREEN BALLROOM. TAKE 1ST LEFT APPROX 100 YDS TO VICINITY OF PROPOSED WELL.

#2 EAST ON PACIFIC. SOUTH (R) ON MARVIN RD. EAST (L) ON DIRT ROAD SOUTH SIDE OF 1ST RR CROSSING. SOUTH TO BASE OF RIDGE; CONTOUR EAST ALONG BASE OF RIDGE TO VICINITY OF WELL SITE.

**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):

MUNICIPAL WATER SUPPLY

B. Does the applicant own the land on which the water source is located?  YES  NO  
If no, submit a copy of agreement:

- #1 MADRONA PARK - CURRENTLY NEGOTIATING PURCHASE WITH LAND OWNER. COPY WILL BE FORWARDED WHEN EXECUTED.
- #2 MCALLISTER PARK - YES; CITY OWNS LAND.

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.

  
C. J. GREEN

Applicant (or authorized representative)

15 SEP 95

Date

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

Date

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

3. THE CITY OF LACEY HAS PREVIOUSLY RECEIVED A PRELIMINARY PERMIT TO DRILL ONE WELL AT EACH OF THESE SITES (G2-29165). THIS APPLICATION IS FOR A SECOND WELL AT EACH SITE. PLEASE REFER TO DOCUMENTS SUBMITTED WITH G2-29165 FOR HYDROGEOLOGIC INFORMATION.

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 98503-0210
____ 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 \_\_\_\_\_

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).