

THUR 07-06
PATTISON
WATER COMPANY



STATE OF WASHINGTON
**APPLICATION FOR CHANGE/TRANSFER
OF WATER RIGHT**

For filing with Ecology or with County Conservancy Boards

A MINIMUM FEE OF \$50.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.)

- Change purpose(s) of use
- Add purpose(s) of use
- Change point(s) of diversion/withdrawal
- Add point(s) of diversion/withdrawal
- Change/transfer place of use
- Other (i.e. consolidation, intertie, trust water)

Explain: _____

FOR OFFICE USE ONLY	
CHANGE No. _____	WRIA _____
DATE ACCEPTED ____/____/____	BY _____
FEE \$ _____	REC'D ____/____/____
CHECK No. _____	
SEPA: <input type="checkbox"/> Exempt	<input type="checkbox"/> Not exempt

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

1. Applicant Information:

APPLICANT/BUSINESS NAME Jim Casebolt – System Manager Pattison Water Company		PHONE NO. (360) 412-1252	FAX NO. (360) 412-0677
ADDRESS PO Box 3374			
CITY Olympia	STATE Washington	ZIP CODE 98509	

CONTACT NAME (IF DIFFERENT FROM ABOVE) Jill Van Hulle Pacific Groundwater Group		PHONE NO. (360) 413-1510	FAX NO. (360) 413-1520
ADDRESS 3130 60th Loop SE			
CITY Olympia	STATE Washington	ZIP CODE 98501	

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER Cert. of Ground Water Right G2-23793	RECORDED NAME(S) Summer Shores Water Company
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Municipal water right	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

FOR OFFICE USE ONLY			
APP. NO. _____	PERMIT NO. _____	CERT. NO. _____	CERT. OF CHANGE NO. _____

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Summer Shores 2	1	NE	SE	6	17 N	1EWM		

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Evergreen Prairie Well 1	S08	SE	NE	32	18 N.	1 EWM		
Proposed Evergreen Prairie Well 2		NE	SE	32	18 N.	1 EWM		

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: YES NO PROPOSED: YES NO – IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Community Domestic	65 GPM	20	Year-round, as needed

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal water supply	65 GPM	20	Year-round, as needed

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Plat of Summer Shores Acres Divisions No. 1 and 2, Ryan's Lake St. Clair Division 3 Within Section 6, T. 17 N., R. 1 EWM.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		6	17N	1EWM	Thurston		
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							
Area located with in Pattison Water Service area							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
Area served by the Pattison Water Company as described in a water system plan							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
					Thurston	N/A	N/A
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							
Area located within Pattison Water Company's service area							

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
 YES NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

Pattison Water Company holds multiple water rights as identified in their Water System Plan. Specific to this Application for Change are Certificate of Ground Water Right G2-25606 and 5734-A

6. Remarks and Other Relevant Information:

The intent of this request is to transfer the authorized POW from the Summer Shores Well 2 to our Evergreen Prairie Well site - located approx. 8,000 feet to the Northeast of the original site. This site includes one existing well and a nearby proposed well.

The withdrawal rate and total annual withdrawal will be increased at Evergreen Prairie to accommodate both this transfer and also G2-25606 and 5734-A which are associated with Summer Shores Well 1.

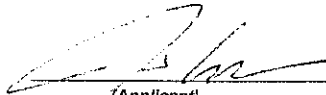

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, P O Box 47477, Olympia, WA 98504-7477.

7. Signatures:

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 am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

 _____ (Applicant)	<u>4 / 16 / 07</u> (Date)
 _____ (Water Right Holder)	<u>4 / 16 / 07</u> (Date)
<u>N/A</u> _____ (Land Owner(s) of Existing Place of Use)	<u> / /</u> (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

APPLICATION FEE NOT ENCLOSED MAP NOT INCLUDED or INCOMPLETE

ADDITIONAL SIGNATURES REQUIRED SECTION _____ IS INCOMPLETE

OTHER/EXPLANATION: _____

STAFF: _____ DATE: ____/____/____