



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: Split water right into "A" and "B" portions

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 City of Yelm, Shelly Badger, City Administrator	PHONE NO. (360) 458-8405	FAX NO. (360) 458-4348
ADDRESS 105 Yelm Avenue W, P.O. Box 479		
CITY Yelm	STATE Washington	ZIP CODE 98597

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER Cert. of Ground Water Right No. G2-21613	RECORDED NAME(S) Albert H and John P McMonigle
DO YOU OWN THE RIGHT TO BE CHANGED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: Estate of Alice McMonigle	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

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. See attachments. Water system plan available upon request.

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 #
Well (10" Well)	1	SE	SW	32	17N	2EWM		NA
Well (6" Well)	3	SE	SW	32	17N	2EWM		NA

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
"A" Existing McMonigle Wells	Same as above							
"B" Two existing Tahoma Valley Golf Course wells and one additional or replacement well at the same location	Ferguson #1	SE	SE	24	17N	1EWM	21724440200	NA
	Ferguson #2	SE	SE	24	17N	1EWM	21724440200	NA

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?
 EXISTING: YES NO PROPOSED: YES NO – IF NO, PROVIDE OWNER(S) NAME:
Existing points of withdrawal are owned by the estate of Alice McMonigle. Proposed points of withdrawal are two original "Ferguson" wells owned by the Tahoma Valley Golf and Country Club and one additional or replacement well to be developed. The golf course owner has agreed to support the City's efforts to make improvements and will provide access to golf course wells, as needed for withdrawal of water for municipal water supply purposes.

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. See attachments.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM	ACRE-FT/YR	PERIOD OF USE
Irrigation (150 Acres)	600	300	May 1 to October 1
Domestic supply	60	1	Year-round
Stockwater	"	15.8	Year-round

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
"A" Irrigation*	**	80*	May 1 to October 1
Domestic supply	35	2.21	Year-round
Stockwater	"	15.8	Year-round (homestead)
"B" Municipal water supply purposes	625	188.44	Year-round

* Some of the McMonigle irrigation water rights have been previously changed pursuant to a 1994 Application for Change/Transfer for Certificate No. G2-00792. See attachments.

** Pumping will continue at the rate authorized under Certificate No. G2-00792.

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
The S½ SW¼ of Sec. 32, T. 17 N., R. 2 E.W.M.; Government Lots 2 and 3 of Section 5, T. 16 N., R. 2 E.W.M., LESS ROADS.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
S½	SW	32	17N	2EWM	Thurston		
Gov't Lot 2 and 3		5	16N	2EWM	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: Land owned by the Estate of Alice McMonigle							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
"A" Existing Place of Use (same as above)							
"B" Area served by the City of Yelm as described in Department of Health approved 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 served by the City of Yelm. See attachments.							

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. See attachments.

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):

Certificate of Water Right G2-00792; Certificate of Change of Surface Water Right, Vol. 236, P. 620.

6. Remarks and Other Relevant Information:

The City of Yelm requests that this certificate be split into two superseding certificates. Superseding Certificate "A" will remain at the existing place of use. Water for irrigation, stockwater and domestic purposes will be withdrawn from the original specified wells. Total use at the existing place of use under all rights will not exceed 80 aft for irrigation; 25 aft for group domestic (residential development) plus 5.35 aft nonconsumptive quantity associated with the 25 aft (the nonconsumptive portion will be relinquished as land is taken out of irrigation and converted to residential use); 16.8 aft for stock watering; and 3 aft for domestic use (at the family homestead). Certificate "B" will authorize use of water by the City of Yelm for municipal supply purposes. Water will be withdrawn from two original (Ferguson) wells at the Tahoma Valley Golf Course and one additional or replacement well at the same location.

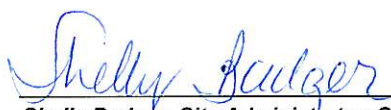


IF FOR SEASONAL OR TEMPORARY, START DATE ___/___/___ END DATE ___/___/___ NA

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.

 _____ Shelly Badger, City Administrator, City of Yelm (Applicant)	4/21/08 _____ (Date)
 _____ Charlotte Zinski for Estate of Alice McMonigle, Water Right Holder	4/21/08 _____ (Date)
 _____ Charlotte Zinski for Estate of Alice McMonigle, Land Owner(s) of Existing Place of Use	4/21/08 _____ (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: ___/___/___