Application for Seasonal Change/Transfer of a Water Right



Form No. ECY 070-200 (rev. 8/2021)

- We strongly encourage applicants to seek pre-application consultation prior to applying for seasonal change of water source.
- Refer to accompanying guidance to complete this form.
- Incomplete applications will be returned.
- A \$50 fee is required to apply.
- All fees are non-refundable (RCW 90.03.470(13)).
- Applications must be received by February 15, or at least 60 days prior to your proposed use.

Where to mail your application:

Submit all applications to Ecology's Cashiering Section at the address below.

DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611

Check the box for the region where your project is located.

Central Region
Eastern Region

Northwest Region

Office of Columbia River (OCR)*

Southwest Region

*OCR has jurisdiction for designated OCR projects, and new projects located within one mile of the Columbia River.



To request ADA accommodation including materials in a format for the visually impaired, call Ecology Water Resources Program at 360-407-6872. People with impaired hearing may call Washington Relay Service at 711. People with speech disability may call TTY at 877-833-6341.

MAY 1 2 2025

Dept of Ecology

Central Regional Office

ECY 070-200 (rev. 8/2021)



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I am applying to (check all that apply):

WATER RESOURCES PROGRAM

Application for Seasonal Change/Transfer of a Water Right

Change/transfer place of useChange point(s) of diversion/withdrawalAdd point(s) of diversion/withdrawal		
1. Water Right Information		
Water right or claim number S 4-834 65つ	Recorded name(s) Nile Ditch Assn A	and Dianna Woods
Has the water been used as described on your water right do	ocument in the last five	e (5) years? 🏿 yes 🗌 no
Water right owner Nile Ditch Assn. And Dianna Woods	Phone no. 509-961-946 2	Alt phone no.
Address 504 N. 42 rd Ave		
City Vakima	State WA	Zip code 98908
Email address alwoods anvinto.net		
2. Applicant Information		
Applicant/business name Tim + Lorillee Jefferson	Phone no. <i>509-458-25</i> 37	Alt phone no. 1100 509-949-3699
Address 18060 State Rt. 410	<i>1.</i>	
Oity Naches	State A.	Zip code 98937
Email address US10951@aol.com		
Contact (if different from above)	Phone no.	Alt phone no.
Address		
City	State	Zip code
Email address		
	For Ecology U Coding: 001-00 Amount Receiv	01-0285-000011

Page 2 of 6

3. Point(s) of Diversion or Withdrawal

A. Existing

Provide the source location information. Attach additional sheets if needed.

Source Name (Reference by number below)	QTR QTR	QTR	SEC	TWP	RGE	Well Tag	Parcel No.
1. Maches River	5W1/4	SE 1/4	2	16 N.	15EWM	N/A	151628-14003
3. 4.	v ;		* .	, , , , , , , , , , , , , , , , , , , ,			

B. Proposed

Provide the source location information. Attach additional sheets if needed.

Source Name (Reference by number below)	QTR QTR	QTR	SEC	TWP	RGE	Well Tag	Parcel No.
1. Naches River	NE	NE	35	17N	14EWM	A/N	141601-22008
3.							
4.							

Do you own the proposed point(s) of diversion/withdrawal? \square Yes \square No

4. Place of Use

A. Existing

QTR QTR	QTR	SEC	TWP	RGE	County	Parcel No.	# of Irrigated Acres
S		28	16N	15EWM	1 YAKima		2
						*	
		1					

Legal description of lands where water is presently used:	
Do you own all the lands in the <u>existing</u> place of use? Yes No	

If no, provide name & contact information. Attach additional sheets, if necessary.

Legal land owner(s) of existing place(s) of use (if different than applicant)	Phone no.	Alt phone no.
Address		
City	State	Zip code
Email address		

B. Proposed (if different than 4.A)

QTR QTR	QTR	SEC	TWP	RGE	County	Parcel No.	# of Irrigated Acres
NW	WWY	1	16N	146	Yakima	141601-22008	2
	-						

Legal description of lands where new use is proposed: PACEL No. 141601-22608 being within the NW/4 NW/4 of Sed Do you own all the lands in the proposed place(s) of use		Ξ. W. m.
If no, provide name & contact information. Attach additio	nal sheets, if necess	ary.
Legal land owner(s) of <u>proposed</u> place(s) of use (if different than applicant)	Phone no.	Alt phone no.
Address		
		The second of the second
City	State	Zip code
Email address		

5. Project Description

Provide a brief description of the proposed seasonal change/transfer: Iransfer 2 Acres of irrigation water

6. Historical Use

If not previously provided to Ecology, include information to support historical water use. Ecology may request additional information from you. This information was provided to the Dept. of Ecology on Avaust 7. 2019

11000	1, 7, 2011
Section	Required information
6.1	Describe how the water proposed for seasonal change/transfer has been beneficially used since the water right was established.
6.2	Provide information on historical flow rate and explain how the amount was determined (e.g. meter data or power records).
6.3	If the requested seasonal change/transfer is for a water right claim, include evidence demonstrating use of water prior to 1917 for surface water, or prior to 1945 for groundwater.

7. Map

Attach a detailed map of your proposed seasonal change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place(s) of use, and any other features involved with this application. Also, for irrigation purposes, you must indicate on the map those lands that will not be irrigated within the original place of use.

ECY 070-200 (rev. 8/2021) Page 4 of 6

8. Signatures

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By signing below, the applicant certifies that the information provided on this application is true and accurate to the best of their knowledge. If the applicant was assisted in preparing this application, they understand that they are responsible for the accuracy of the information.

The applicant also understands that, in order to process this application, they are granting staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes.

Tim and Lorillee Jefferson	Toute of the same	5-8-2025
Applicant Printed Name – Title	Applicant Signature	(Date: MM/DD/YYYY)
Dianna Woods	Woods	5-8-25
Water Right Holder Printed Name	Water Right Holder Signature	(Date: MM/DD/YYYY)
Dianna Woods	Da Woods	5-8-25
Landowner of Existing Place of Use	Landowner of Existing Place of Use Signature	(Date: MM/DD/YYYY)
Tim And Lorillee Jefferson	Soulle Jefferson	3-8-25
Landowner of Proposed Place of Use Printed	Landowner of Proposed Place of Use Signature	(Date: MM/DD/YYYY)
Name	Inversion NDA	05/05/2025
Authorized Representative Printed Name	Authorized Representative Signature	(Date: MM/DD/YYYY)
Treasurer NDH	mile ditch associ	h
If addional signatures are required, a	attach a supplemental sheet.	

Ecology regional offices

For additional information, contact the Ecology regional office where your project is located:

Region/ Office	Counties served	Mailing Address	Phone
Central	Benton, Chelan, Douglas, Kittitas, Klickitat, Okanogan, Yakima	wrCRO@ecy.wa.gov 1250 W Alder St Union Gap, WA 98903	509-575-2490
Eastern	Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Spokane, Stevens, Walla Walla, Whitman	wrERO@ecy.wa.gov 4601 N Monroe Spokane, WA 99205	509-329-3400
Northwest	Island, King, Kitsap, San Juan, Skagit, Snohomish, Whatcom	wrNWRO@ecy.wa.gov PO Box 330316 Shoreline, WA 98133-9716	206-594-0000
Office of Columbia River*	OCR has jurisdiction for designated OCR projects, and new projects located within one mile of the Columbia River.	wrCRO@ecy.wa.gov 1250 W Alder St Union Gap, WA 98903	509-575-2490
Southwest	Clallam, Clark, Cowlitz, Grays Harbor, Jefferson, Lewis, Mason, Pacific, Pierce, Thurston, Skamania, Wahkiakum	wrSWRO@ecy.wa.gov PO Box 47775 Olympia, WA 98504	360-407-6300

Attachment A. Hydrogeological Setting (for groundwater changes only)

If not previously supplied, the following may be required for a change in source. We strongly recommend that applicants contact Ecology prior to conducting <u>any</u> hydrogeological work, to determine the scope of data required for processing this application.

Section	Required information
A.1	Provide a description of existing authorized point(s) of withdrawal and proposed well(s), their locations, water well report, static water levels, pumping rates and schedules, etc.
A.2	If known, describe: Geographic recharge and discharge areas Seasonal variations of groundwater elevations Interrelationships between surface water and groundwater, and between aquifers Barriers to flow Hydrologic boundaries
A.3	Attach any available well information, including:
	 Water well reports (well logs) for existing and proposed wells Well diameter and depth Motor and pump specifications (i.e., make, horsepower, and type) Pump test data Well locations (must be identified as outlined in Section 7 (Map))
A.4	If known, describe the following charicteristics of the aquifer, and cite the source of that information: • Aquifer transmissivity • Aquifer storage coefficient and specific yield • Saturated thickness • Aquitard leakage • A detailed description of groundwater-flow boundaries • Water-level hydrographs for wells • Associated waterquality information
A.5	Additional hydrogeological work may be required to process your application.

ECY 070-200 (rev. 8/2021) Page 6 of 6