

Skamania County, WA
Total: \$306.50
MISC
Pgs=4

2026-000060

01/12/2026 02:15 PM

Request of: WA STATE DEPARTMENT OF ECOLOGY



WHEN RECORDED RETURN TO:

WA State Department of Ecology – SWRO WR

PO BOX 47775

Olympia, WA 98504-7775

Please print or type information **Washington State Recorder's Cover Sheet (RCW 65.04)**

DOCUMENT TITLE(S) (or transaction contained therein) (all areas applicable to your document must be filled in)

Voluntary Relinquishment of a Water Right

REFERENCE NUMBER(S) of Documents assigned or released:

Water Right Claim S2-094421CL

☐ Additional numbers on page _____ of document.

GRANTOR(S):

1. Department of Ecology _____ 2. _____

3. _____ 4. _____

☐ Additional names on page _____ of document.

GRANTEE(S):

1. Friends of the Columbia Gorge Land Trust _____ 2. _____

3. _____ 4. _____

☐ Additional names on page _____ of document.

LEGAL DESCRIPTION (Abbreviated: i.e. Lot, Block, Plat or Section, Township, Range, Quarter):

Section 31, Township 3 North, Range 9 East

☒ Complete legal on page 3 of document.

Assessor's Property Tax Parcel #

03093120010000

☐ Additional parcel numbers on page _____ of document.

The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information.

"I am signing below and paying an additional \$50.00 recording fee (as provided in RCW 36.18.010 and referred to as an emergency nonstandard document), because this document does not meet margin and formatting requirements. Furthermore, I hereby understand that the recording process may cover up or otherwise obscure some part of the text of the original document as a result of this request."

Signature of Requesting Party

Note to Submitter: Do NOT sign above nor pay additional \$50 fee if the document meets margin/formatting requirements.

RECEIVED

FEB 12 2025

Department of Ecology

WA State Department
of Ecology (SWRO)

Water Resources Program
Voluntary Relinquishment of a Water Right

Check appropriate boxes below



- ☒ Full Relinquishment ☐ Partial Relinquishment
☒ Surface Water ☐ Groundwater ☐ Reservoir

Contact Name: Ryan Ruggiero, Land Trust Director	Water Right Number: 094421	
Address: Friends of the Columbia Gorge Land Trust, 16 Oak St, #201		
City: Hood River	State: OR	Zip: 97031
E-mail Address: ryan@gorgefriends.org	Telephone Number: 971.634.2037	

☒ **Full Relinquishment**
I (we) relinquish Water Right Number 094421 to the State of Washington.

☐ **Partial Relinquishment**
I (we) relinquish a portion of Water Right Number _____ described as follows: *(Describe quantity, purpose, place of use to be relinquished).*

Legal Description of the Place of Use: *(This information may be found on a real estate contract, property deed, or title insurance policy).*

1/4	1/4	Section	Township	Range	County	Parcel Number
		31	3 North	9 East	Skamania	03093120010000

ECY 040-1-100 (Rev 05/2015) To request ADA accommodation including materials in a format for the visually impaired, call Ecology Water Resources Program 360-407-6872. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call TTY at 877-833-6341.

Do you own all the land in the place of use? ☒ Yes ☐ No If no, provide the following:

Owner Name(s): Friends of the Columbia Gorge Land Trust		
Address: 16 Oak St #201		
City: Hood River	State: OR	Zip: 97031
E-mail Address: ryan@gorgefriends.org		Telephone Number: 971 634-2037

I (we), Friends of the Columbia Gorge Land Trust, am (are) the holder(s) of the above referenced water right.

The following statements are true, to the best of my knowledge:

- I (we) are not aware of any changes, sales, or transfers of this water right to another party.
- I (we) have no further requirement to put to beneficial use any or the portion of the water right described above.
- I (we) agree to relinquish all or the portion of the water right described above.
- I (we) understand that based on the above information the Department of Ecology may issue an Order of Relinquishment.

Signature(s): [Signature]

Date: 1 / 30 / 2025

Date: / /

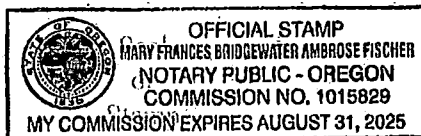
State: Oregon

County: Hood River } s

I hereby certify that I know or have satisfactory evidence that

is (are) the person(s) who appeared before me, and said person(s) acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in this document.

Dated: 30 day of January, 2025.



Notary Printed Name:

Mary Frances Bridgewater Ambrose

My Appointment Expires:

Aug 31 / 2025

Notary Public Signature:

[Signature]



STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY
WATER RIGHT CLAIMS REGISTRATION

WATER RIGHT CLAIM

RECEIVED
DEPARTMENT OF ECOLOGY

APR 1974 092426

CASH ☒ OTHER ☐ NONE ☐

1. NAME Carl Kapp

ADDRESS Box 33

Underwood, Wash ZIP CODE 98651

2. SOURCE FROM WHICH THE RIGHT TO TAKE AND MAKE USE OF WATER IS CLAIMED: Surface
(SURFACE OR GROUND WATER)

W.R.I.A. (29)
(LEAVE BLANK)

A. IF GROUND WATER, THE SOURCE IS _____

B. IF SURFACE WATER, THE SOURCE IS Whalen Creek

3. THE QUANTITIES OF WATER AND TIMES OF USE CLAIMED:

A. QUANTITY OF WATER CLAIMED 1 CFS PRESENTLY USED Same
(CUBIC FEET PER SECOND OR GALLONS PER MINUTE)

B. ANNUAL QUANTITY CLAIMED 105 PRESENTLY USED Same
(ACRE FEET PER YEAR)

C. IF FOR IRRIGATION, ACRES CLAIMED 15 A PRESENTLY IRRIGATED Same

D. TIME(S) DURING EACH YEAR WHEN WATER IS USED: continuously

4. DATE OF FIRST PUTTING WATER TO USE: MONTH Sept YEAR 1905

5. LOCATION OF THE POINT(S) OF DIVERSION/WITHDRAWAL: See description on back
FEET With description of land AND _____

FEET _____ FROM THE _____ CORNER OF SECTION _____

BEING WITHIN _____ OF SECTION 31 T. 3 N. R. 9 (E. or W. M. _____)

IF THIS IS WITHIN THE LIMITS OF A RECORDED PLATTED PROPERTY, LOT See description attached to back OF _____

Mountain Glade Fruit Tracts
(GIVE NAME OF PLAT OR ADDITION)

6. LEGAL DESCRIPTION OF LANDS ON WHICH THE WATER IS USED:

Lot 1, 2, 9, 10, 14, 15, the east 3/4ths of lot 7, and the east half of Lot 8 of Mountain Glade Fruit Tracts according to the official plat thereof on file and of record in the office of the Auditors of Skamania County, Washington; the said property being located in Section 31, Township 3 North, Range 9 E. W. M.

TOGETHER WITH water rights appurtenant thereto, including those on Collins Creek and Whalen Creek.

COUNTY Skamania

7. PURPOSE(S) FOR WHICH WATER IS USED: Domestic and irrigation

8. THE LEGAL DOCTRINE(S) UPON WHICH THE RIGHT OF CLAIM IS BASED: Riparian

DO NOT USE THIS SPACE
THE FILING OF A STATEMENT OF CLAIM DOES NOT CONSTITUTE AN ADJUDICATION OF ANY CLAIM TO THE RIGHT TO USE OF WATERS AS BETWEEN THE WATER USER CLAIMANT AND THE STATE OR AS BETWEEN ONE OR MORE WATER USE CLAIMANTS AND ANOTHER OR OTHERS. THIS ACKNOWLEDGEMENT CONSTITUTES RECEIPT FOR THE FILING FEE.

DATE RETURNED _____ THIS HAS BEEN ASSIGNED
WATER RIGHT CLAIM REGISTRY NO. _____

Dec 1674094421

DIRECTOR, DEPARTMENT OF ECOLOGY

I HEREBY SWEAR THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

X Carl Kapp

DATE April 17, 1974

IF CLAIM FILED BY DESIGNATED REPRESENTATIVE, PRINT OR TYPE FULL NAME AND MAILING ADDRESS OF AGENT BELOW.

☐ ADDITIONAL INFORMATION RELATING TO WATER QUALITY AND/OR WELL CONSTRUCTION IS AVAILABLE.

A FEE OF \$2.00 MUST ACCOMPANY THIS WATER RIGHT CLAIM

ORIGINAL DWR

RETURN ALL THREE COPIES WITH CARBONS INTACT, ALONG WITH YOUR FEE TO:
DEPARTMENT OF ECOLOGY
WATER RIGHT CLAIMS REGISTRATION
OLYMPIA, WASHINGTON 98504