



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 S2-300719CL
 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 4 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

WA State Department of Ecology (SWRO)

Department of Ecology

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: 300719; 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 300719 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).

Table with 7 columns: 1/4, 1/4, Section 31, Township 3 North, Range 9 East, County Skamania, Parcel Number 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.

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

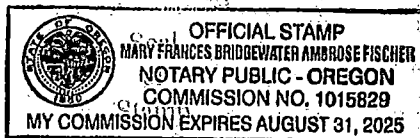
Date: 1/1/

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: 08/31/2025

Notary Public Signature: [Signature]



STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

STATEMENT OF WATER RIGHT CLAIM

FOR OFFICE USE ONLY

29/59
98001203

'98 JUN 24 A8:03

WRIA

Phone No. (509) 327-4997
DEPT. OF ECOLOGY

1. Ronald G Kapp
Name
432 Mt Glade Rd
Mailing Address
STEVENSON Wa. 98648
City State Zip

2. Date water was first put to use on your property (see instructions) Month apr and Year 1901

3. COMPLETE ONLY ONE BOX BELOW (please read the instructions)

<p>3a. GROUND WATER</p> <p><input type="checkbox"/> Well <input type="checkbox"/> Infiltration Trench <input type="checkbox"/> Other _____ Give Name</p>	<p>3b. SURFACE WATER (Give name if known)</p> <p><input type="checkbox"/> _____ River <input type="checkbox"/> _____ Lake <input checked="" type="checkbox"/> <u>Collins</u> Creek <input type="checkbox"/> _____ Spring <input type="checkbox"/> _____ Ditch <input type="checkbox"/> _____ Pond <input type="checkbox"/> Other _____</p>
<p>4a. INSTANTANEOUS QUANTITY _____ gpm (See instructions 10 gpm=0.02 cfs ; 1 cfs=450 gpm)</p> <p>5a. ANNUAL QUANTITY OF WATER _____ afy (One acre foot = 325,581 gallons)</p>	<p>4b. INSTANTANEOUS QUANTITY <u>1</u> cfs (See instructions 10 gpm=0.02 cfs ; 1 cfs=450 gpm)</p> <p>5b. ANNUAL QUANTITY OF WATER <u>100</u> afy (One acre foot = 325,581 gallons)</p>

6. PURPOSE OF USE:
 Irrigation (Number of acres irrigated) 15 acres
 Domestic Use (Number of units) 1
 Commercial (Description) _____
 Stockwater
 Municipal
 Other (List all) ponds

7. PERIOD OF USE: Continuous or Seasonal From _____ To _____

8. LOCATION OF THE POINT OF DIVERSION/WITHDRAWAL: SEE attached map + note on ~~MAP~~ MAP
Approximately _____ Feet (north, south) and 2700 Feet (east, west) From The NE Corner of Section 31
Being Within The NE 1/4 NW 1/4 of Section 31 T. 3 N., R. 9 (E) or W.) W.M.

9. IF THE POINT OF DIVERSION/WITHDRAWAL IS LOCATED ON PLATTED PROPERTY:
Lot _____ Block _____ of _____ (Plat or Addition)
Section _____ T. _____ N., R. _____ (E. or W.) W.M.

10. LEGAL DESCRIPTION OF PROPERTY WHERE WATER IS USED:
see attached

Within Section 31 T. 3 N., R. 9 (E) or W.) W.M., County SKAMANIA

11. TAX PARCEL NUMBER: 03 09 31 2 0 0106 00

12. LEGAL DOCTRINE: Appropriation Riparian Other _____

REGISTRATION NUMBER
300719

THIS IS NOT A WATER RIGHT

If this form is not fully completed, it will be returned.
I hereby swear that the above information is true and accurate to the best of my knowledge.

Signature: Ronald G Kapp
Date: 6-23-98

BOOK 114 PAGE 336

Consent: expires 4-28-90

Society Public in and for the State of Washington, residing at Stevenson

day of

GIVEN under my hand and official seal this 25th day of MAY 1989.

of his free and voluntary act and deed, for the uses and purposes herein mentioned.

the individual described in and who executed the foregoing instrument, and acknowledged that he signed

appeared before me (CARL KAPP, to me

described real property--

including those on Collins Creek and Whalen Creek.

TOGETHER WITH water rights appurtenant thereto.

SUBJECT TO water rights appurtenant to the remaining

tract, or land in the said certain (Gladys, Tracie, Tracie)

AND SUBJECT TO a certain easement of the same (Gladys, Tracie, Tracie)

labor on the above described real property, dated

February 17, 1951, to Carl Kapp, husband and wife of

Blakenfeld, husband and wife of the above

REMARKS: UNTO GRANTOR herein a life estate in the above

described real property, including any after acquired title

of Washington, situated in the County of Shennah, State

and quit claims to RONALD G. KAPP, a married man, as his separate

property, for and in consideration of love and affection, conveys

THE GRANTOR, CARL KAPP, a married man dealing in his separate

QUIT CLAIM DEED

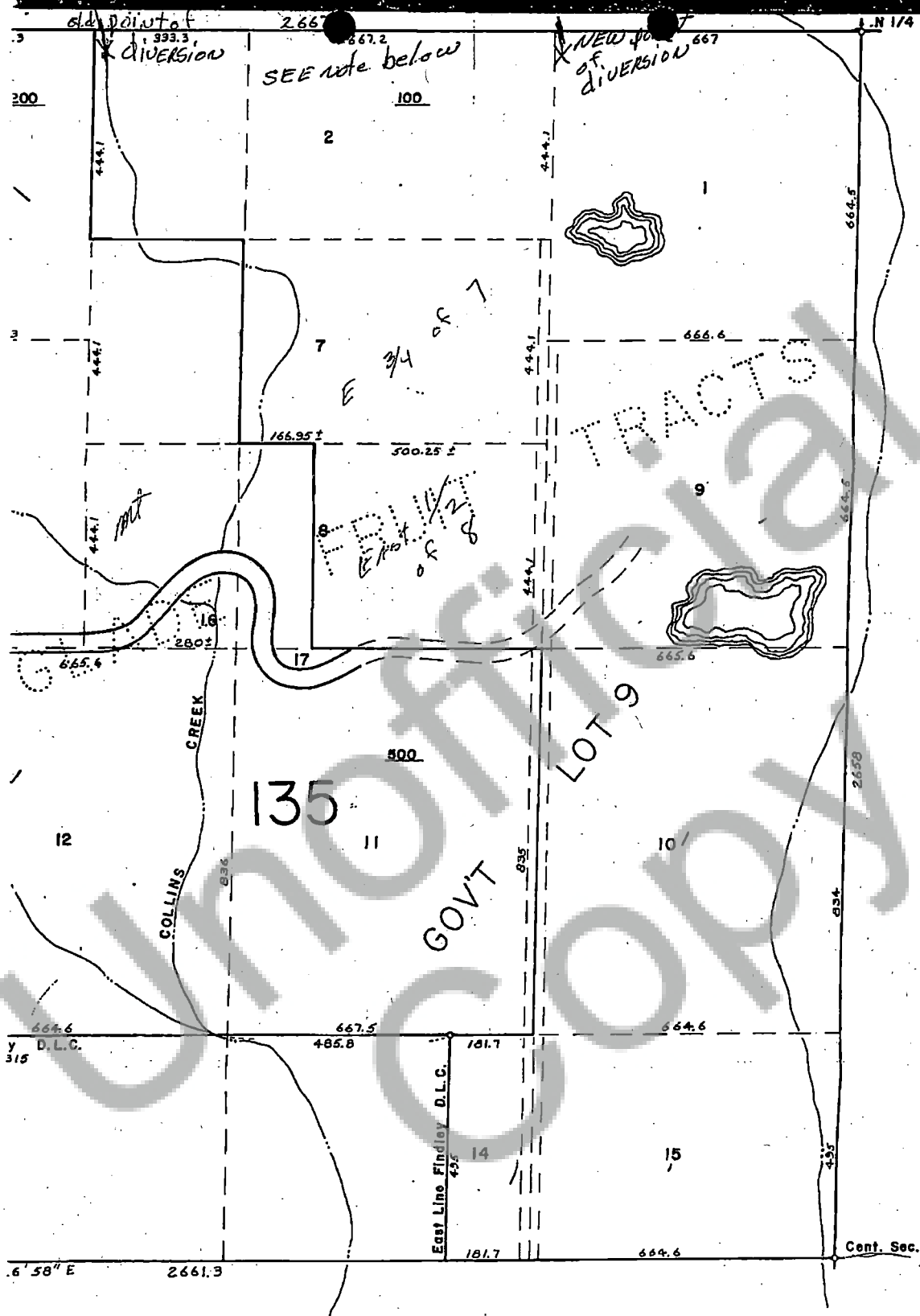
BOOK 114 PAGE 336

107137

FILED FOR RECORD
SHANNON CO. WASH
BY JUDITH KIDWELL
MAY 25 1989
4 50 PM '89
AUDITOR
CARY M. OLSON

PAID
MAY 25 1989
FROST TAX

BOOK 114 PAGE 336



SKAMANIA COUNTY
ASSESSOR

SKAMANIA COUNTY
WASHINGTON
Scale: 1" = 200'
REVISED 8/88

NW 1/4
SEC. 31 T. 3 N., R.
3-9-31-2

NOTE Point of diversion has changed due to Flood damage causing creek to change channel.