Form No. 600 GW (R 07-2020)



GROUNDWATER

APPLICATION FOR BENEFICIAL WATER USE PERMIT

FILING FEE

\$1000.00 – Inside a Basin Closure Area; Controlled Groundwater Area or Compact Closure \$800.00 – Outside a Basin Closure Area: Controlled

\$800.00 – Outside a Basin Closure Area; Controlled Groundwater Area or Compact Closure

FILING FEE REDUCTION

If you attend a pre-application meeting with DNRC staff and your application is submitted within 6 months of the meeting date, the filing fee will be reduced by \$200.00. The time period may be extended if measurements or an aquifer test is required.

- Use one application for each source of supply.
- To avoid processing delays, submit all required information.
- Attach additional sheets if necessary. Attachments must be labeled as shown in the sections below.
- See page 2 for required Addendums

FOR DEPARTMENT USE ONLY

Application #	Basin		
Priority Date			
Time	AM / PM		
Rec'd By			
Fee Rec'd \$			
Deposit Receipt #			
Payor			
Refund \$	Date		

Applicant Name		
Mailing Address		
City	State	Zip
Phone Numbers: Home	Work	Cell
Email Address		
Contact Person: Contact is Applic	ant Contact is Consultant Con	atact is Attorney
Contact Name		
Mailing Address		
City	State	Zip
Phone Numbers: Home	Work	Cell
Email Address		

Noτε: If a contact person is identified as an attorney, all communication will be sent only to the attorney unless the attorney provides written instruction to the contrary. If a contact person is identified as a consultant, employee, or lessee, the individual filing the water right form or objection form will receive all correspondence and a copy may be sent to the contact person.

PERMIT APPLICATION INFORMATION

The information provided to the questions below is required for the Department to begin processing the application. The Department may require additional information during the processing of the application. For any questions, please contact a Water Resources Division Regional Office.

GROUNDWATER I	PERMIT APPLICA	<u>ATION ADDENI</u>	DUMS & REVIEW					
Aquifer Testing Rep	oort – required for	all groundwater	well applications.	Did you attach th	is report?	Yes 🗌	No 🗌]
Storage Addendum need to submit a Re				ım is not required t	for water	tanks o	r cistern:	s. Do you
Water Marketing Adadendum applicab			e of the permit app	lication will be to n	narket or	sell wat	er. Is th	is
Basin Closure Area applicable?				ated in a basin clo o submit a Hydrog				
South Pine Controll Groundwater Area.				diversion is locate	d within t	he Sout	h Pine C	Controlled
Yellowstone Contro Groundwater Area.				r diversion is locat	ed within	the Yell	lowstone	• Controlled
Sage Grouse Habit sage grouse habita						ithin an	area de	signated as
	ce (canal, ditch, f ent this notice?	ume, pipeline, c	or other constructe] No []		_	·		
	No ☐ Is the pro	posed use temp	_	will the appropria	tion ceas	e?		
Purpose(s) for	Proposed	Acres Irrigated (if applicable)	Period of Diversion	Period of Use	Flow Rate Needed		Volume Needed	
which you want to Divert Water			Month/Day to Month/Day	Month/Day to Month/Day	Flow Rate	CFS	GPM	Volume AF (acre- feet)
			to	to				
			to	to				
			to	to				
GW.2. POINT(S) C		Describe the loc		Flow Rate Require		_	□ nts of Div	/ersion on a
POD #1 Well E		Feet	Developed Sprir	ng Name				
1/4 1/4	1/4 Sec_	Twp	N/S Rge	E/W County_				
Lot Bloc	kTrac	t No	_Subdivision Nam	e				
Government Lot								
POD #2 Well E								
1/4 1/4			_	_				
Lot Bloc	k Troo	t No	Subdivision Nom	^				

Governm	ent Lot	Latit	ude		Lo	ngitude				
<u>GW.3. P</u>	LACE OF L	<u>JSE</u>								
GEOCO	DE(S) of th	e place of	use (17 digits)							
			of use, list the rders Office or			cel on an attacl <u>it.gov</u> .	ned sheet.	The geo	codes ca	n be found at
LEGAL	LAND DES	CRIPTION	: Enter acres	f Irrigation/	Lawn&Gar	den. Include ad	ditional Pla	ces of U	se on a s	separate sheet.
<i>P</i>	Acres	Lot	Block	1/4	1/4	1/4 Sec	Twp	N/S	Rge	E/W
A	Acres	Lot	Block	1/4	1/4	1/4 Sec	Twp	N/S	Rge	E/W
A	Acres	Lot	Block	1/4	1/4	1/4 Sec	Twp	N/S	Rge	E/W
						1/4 Sec				
<i>P</i>	Acres	Lot	Block	1/4	1/4	1/4 Sec	Twp	N/S	Rge	E/W
GW.4. M	AP									
		A Aerial P	hoto or USGS	Quad. Bot	h maps ca	n be obtained f	rom the Inte	ernet or y	our local	Water
Resource	es Office.				·			•		
	Identify the	e proposed e proposed	ners, township, point of divers place of use. facilities or rout	ion	l add a nor	th arrow to the	map.			
<u>GW.5. S</u>	<u>UPPLEMEI</u>	NTAL WAT	TER RIGHTS							
If yes to e	either A or B	s, attach a	detailed explar	ation. Plea	ise label at	tachment GW .	5 Suppleme	ental Rig	ghts.	
GW.5.A GW.5.B	Yes I 1 Yes I 1 source?		•	•		the proposed pact water from a				
GW.6. P	HYSICAL G	ROUNDY	ATER AVAIL	ABILITY						
					33 or Appr	oval of Variand	e from DNF	RC		
	sure Area									
GW.6.B		a complet	e Hydrogeolog	ic Assessn	nent Repor	t Addendum if l	oasin closed	d pursua	nt to § 85	5-2-360, MCA.
GW.7. A	DVERSE E	FFECT								
GW.7.A			d description of ease label attac			hat existing wa rse Effect.	ter rights wi	ll be sati	sfied duri	ng times of
GW.8. A	DEQUATE	DIVERSIO	N MEANS AN	D OPERA	TION					
GW.8.A		the type of		ts you will t	take. Pleas	ur diversion and e label attachm		s, attach	ı a descri	ption of the
GW.8.B						your system frosion Means ar			rsion to th	ne place of
GW.8.C	Yes ☐ N descripti					arge water from Diversion M e				detailed
GW.8.D						of the prelimina				ations for the use. Describe

Adequate Diversion Means and Operation. **GW.9. BENEFICIAL USE** GW.9.A Attach explanation why the requested flow rate and volume is the amount needed for each purpose. Please label attachment GW.9.A Beneficial Use. **GW.10. GENERAL PROJECT PLAN & PROPOSED COMPLETION PERIOD** GW.10.A How many years will you need to complete this project and put all of the requested water to a beneficial use? GW.10.B Why is this needed? _____ **GW.11. AFFIDAVIT & CERTIFICATION** Read carefully before you sign and review with legal counsel if you have any questions. All owners (or trustees) should sign the form. **If the owner is a business or trust, include the title of the representative(s) signing the form (i.e. president, trustee, managing partner, etc.) I affirm the information provided for this application is to the best of my knowledge true and correct. I also affirm I have possessory interest, or the written consent of the person with the possessory interest, in the property where the water is to be put to beneficial use. I understand that making a false statement under oath or affirmation in this application and official proceedings throughout the examination of my application may subject me to prosecution under §45-7-202, MCA, a misdemeanor punishable by a jail term not to exceed 6 months or a fine not to exceed \$500, or both. I have read this Affidavit and understand the terms and conditions I declare under penalty of perjury and under the laws of the state of Montana that the foregoing is true and correct. **Printed Name**

the flow rate capacity of the system and include pump information if applicable. Please label attachment GW.8.D

Applicant Signature

Applicant Signature

Printed Name

Date: _____

WATER RESOURCES OFFICES

BILLINGS: AIRPORT INDUSTRIAL PARK, 1371 RIMTOP DR., BILLINGS MT 59105-1978

PHONE: 406-247-4415 FAX: 406-247-4416

SERVING: Big Horn, Carbon, Carter, Custer, Fallon, Powder River, Prairie, Rosebud, Stillwater, Sweet Grass, Treasure, and

Yellowstone Counties

BOZEMAN: 2273 BOOT HILL COURT, SUITE 110, BOZEMAN MT 59715

PHONE: 406-586-3136 FAX: 406-587-9726 SERVING: Gallatin, Madison, and Park Counties

GLASGOW: 222 6TH STREET SOUTH, PO BOX 1269, GLASGOW MT 59230-1269

PHONE: 406-228-2561 FAX: 406-228-8706

SERVING: Daniels, Dawson, Garfield, McCone, Phillips, Richland, Roosevelt, Sheridan, Valley, and Wibaux Counties

HAVRE: 210 6TH AVENUE, PO BOX 1828, HAVRE MT 59501-1828

PHONE: 406-265-5516 FAX: 406-265-2225

SERVING: Blaine, Chouteau, Glacier, Hill, Liberty, Pondera, Teton, and Toole Counties

HELENA: 1424 9TH AVE., PO BOX 201601, HELENA MT 59620-1601

PHONE: 406-444-6999 FAX: 406-444-9317

SERVING: Beaverhead, Broadwater, Deer Lodge, Jefferson, Lewis and Clark, Powell, and Silver Bow Counties

KALISPELL: 655 TIMBERWOLF PARKWAY, SUITE 4, KALISPELL MT 59901-1215

PHONE: 406-752-2288 FAX: 406-752-2843

SERVING: Flathead, Lake, Lincoln, and Sanders Counties

LEWISTOWN: 613 NORTHEAST MAIN ST., SUITE E, LEWISTOWN MT 59457-2020

PHONE: 406-538-7459 FAX: 406-538-7089

SERVING: Cascade, Fergus, Golden Valley, Judith Basin, Meagher, Musselshell, Petroleum, and Wheatland Counties

MISSOULA: 2705 SPURGIN RD. BLDG.C, PO BOX 5004, MISSOULA MT 59806-5004

PHONE: 406-721-4284 FAX: 406-542-5899

SERVING: Granite, Mineral, Missoula, and Ravalli Counties

MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION

Water Resources Division - Water Rights Bureau

WEBSITE: http://dnrc.mt.gov/divisions/water/water-rights

