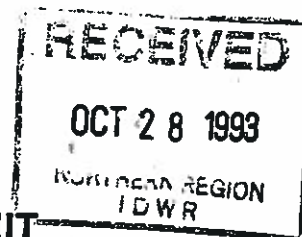


Drilling Permit No. 96-93-N-274-000
 Water Right Permit No. _____
 Injection Permit No. _____

WELL DRILLER: PLEASE COMPLETE FOR VERBALSIDWR Employee Issuing Verbal: PatriciaVerbal Issued Date: 10-26-93 Time: _____

State of Idaho
 Department of Water Resources

APPLICATION FOR DRILLING PERMIT1. Applicant (please print): Dean DeBower2. Mailing Address: P.O. Box 628City & State Athol, IdahoZip Code 83801

Telephone _____

☒ Well Owner ☐ Well Operator ☐ Contractor or Other, specify _____
3. Proposed Well Location: Twp. 54N, Rge. 3W, Sec. 27, NE 1/4 NEGov't Lot No. _____ County BonnerStreet Address of Well Site Old house Rd

Lot, block and subdivision _____

4. Proposed Use of Well:

☒ DOMESTIC: The use of water for homes, organization camps, public campgrounds, livestock (1,000 head or less) for any other purpose in connection therewith, including irrigation of up to 1/2 acre of land, if the total use is not in excess of 13,000 gpd; or any other uses, if the total use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

Domestic does not include water for multiple ownership subdivisions, mobile home parks, commercial or business establishments, unless the use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

NON-DOMESTIC:

☐ Irrigation☐ Municipal☐ Industrial☐ Stock☐ Test☐ Other _____

(Over 1,000 Head)

(Describe)

☐ INJECTION☐ MONITORING: A well bore schematic and map is required for each blanket permit.

No. of proposed wells: _____

5. Well Construction Information:

A. ☒ New well ☐ Modify (Deepen or Enlarge) ☐ Replace - See Condition 9B. Proposed Casing Diameter 6" Proposed Maximum Depth 300

C. Anticipated bottom hole temperature:

☒

85°F or less

☐

85°F to 212°F

☐

212°F or more

(Cold Water Well)

(Low Temp. Geo. Well)

(Geothermal Well)

6. Construction Start Date: Oct 26, 937. Anticipated Well Driller: Bronson Water Wells

NOTE: The actual well driller must be identified prior to drilling.

8. Applicant's Signature Ellen BarisaDate Oct 26, 1993

Title _____

(Owner, Firm Representative, Other)

SCANNED

MAY - 7 2009

ACTION OF THE DEPARTMENT OF WATER RESOURCES

This Permit is Approved

Date 11/3/93

If approved, this permit authorizes the construction or modification of a well subject to the following conditions. READ CAREFULLY!

GENERAL CONDITIONS:

1. The well must be constructed in compliance with the applicable statutes, specific conditions of approval shown on the water right permit, injection well permit, transfer or amendment and the rules and regulations of the Department for water appropriation, injection wells and well construction standards.
2. This drilling permit is valid for two (2) months from the above approval date for the start of construction and is valid for one (1) year from the approval date for completion of the well unless an extension has been granted.
3. This permit does not constitute an approval of the District Health Department or the Idaho Department of Health and Welfare which may be required before construction of this well.
4. The well shall be constructed by a driller currently licensed in the State of Idaho who must maintain a copy of the drilling permit at the drilling site.
5. Approval of this drilling permit does not authorize trespass on the land of another party.
6. This permit does not constitute other local, county, state or federal approvals which may be required for construction of a well.
7. This drilling permit does not represent a right to divert and use the water of the State of Idaho.
8. If a bottom hole temperature of 85° or greater is encountered, well construction shall cease and the well driller and the well owner shall contact the Department immediately.
9. If this permit is for a replacement well, the well being replaced must be abandoned in accordance with Department Rules and Regulations.

SPECIFIC CONDITIONS:

Robert G. Haynes

Signature of Authorized Department Representative

Regional Manager

Title

Receipt No. W 7113 Received by [Signature] Fee \$35.00 Date 10/28/93

EXTENSION OF DRILLING PERMIT

Extension approved by _____ Approval Date _____

Extension expires: _____

SCANNED

MAY - 7 2009

1. DRILLING PERMIT NO. 96 - 93 - n - 274 - 000
Other IDWR No. _____

2. OWNER:

Name Dean DeBower
Address P.O. Box 628
City Atchafalaya State TX Zip 75701

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



T. 54 North ☐ or South ☐
 E. 3 East ☐ or West ☐
 Sec. 27, $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$
10 acres 40 acres 160 acres
 Gov't Lot _____ County Boone

Address of Well Site Old House Rd

(Give at least Direction + Distance to Road or Landmark)

Lot No. _____ Block No. _____ Subd. Name _____

4. PROPOSED USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

5. TYPE OF WORK

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
bentonite	0	10	4	water mix

Was drive shoe seal tested? Y ☐ N ☐ How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Casting	Liner	Steel	Plastic	Welded	Threaded
6	+1	31	250			☐	☐	☒	☐
4	-8	46	160			☐	☒	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐

Final location of shoes _____

Top Packer or Headpipe _____ Bottom Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____

☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/Pipe Size	Casting	Liner
38	40		20			☐	☐
						☐	☐
						☐	☐
						☐	☐

10. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Depth	Time
12		48	2 hr

Temperature of water _____ Was a water analysis done? Yes ☐ No ☒

By whom?

Water Quality (odor, etc.)

Bottom Hole Temperature _____

11. STATIC WATER LEVEL:

22 ft. below surface Depth artesian flow found

Artesian pressure _____ lb. Describe access port _____ Cap _____

Describe Controlling Devices:

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

Date: Started 10-26-93 Completed 10-26-93

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name Bronson Kater Wells Firm No. 360

Firm Official HDR Date 10-27-83

and

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region, 7600 N. Mineral Drive, Suite 100 • Coeur d'Alene, Idaho 83815

Phone: (208) 762-2800 • Fax: (208) 762-2819 • Web Site: www.idwr.idaho.gov

C. L. "BUTCH" OTTER
Governor

DAVID R. TUTHILL, JR.
Director

RECEIVED

JUN 24 2009

IDWR/North

June 19, 2009

Dean DeBower
Box 352
Lincoln City, OR 97367

Dear Mr. DeBower:

We have received your Notice of Claim to a Water Right to withdraw water from a well for domestic and stock water uses. We did not receive the \$25 filing fee with the claim so we are returning your claim. Would you please return the claim with the filing fee?

Sincerely,

Kenneth Knoblock
Water Resources Supervisor

*Paid
\$25.00
6/22/09
3619
\$25.00
Filing Fee*

*Per your request enclosed
is the \$25.00 check filing fee.*

I thank you.

cc: Dean F. DeBowe