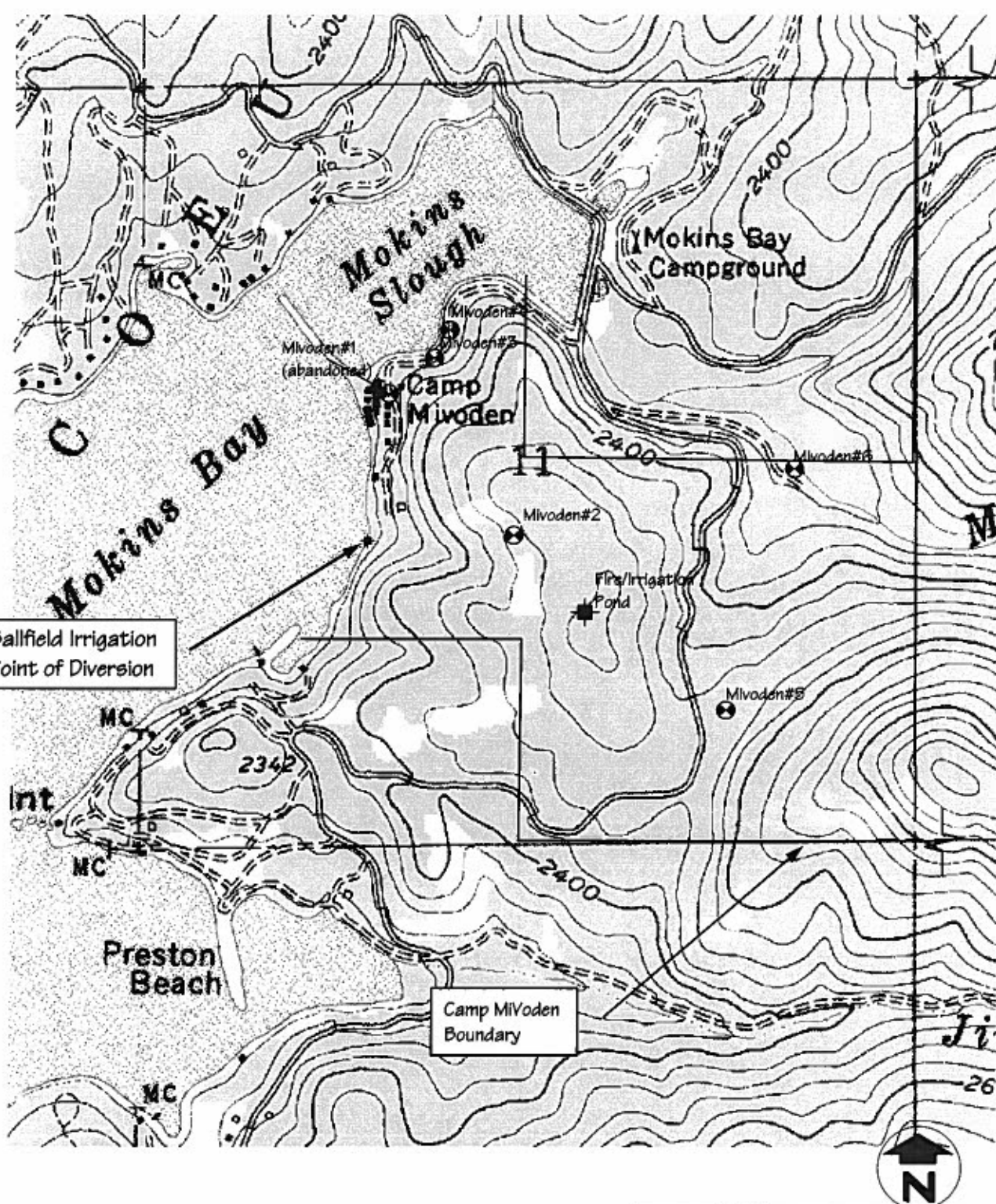




0 500 1500 2500 3500 4500 FT



QUANTUM Engineering
and Geologic Consulting

ENGINEER: Jim De Smet
DRAWN BY: Jim De Smet
DATE: 11/30/09
SCALE: 1"=1000'(approx)
SHEET NO:

Camp Mivoden
T51N, R3W, Sec 11
Kootenai County, Idaho

Close

IDAHO DEPARTMENT OF WATER RESOURCES

Water Permit Report

11/30/2009

WATER RIGHT NO. 95-9502

<u>Owner Type</u>	<u>Name and Address</u>
Current Owner	UPPER COLUMBIA CORPORATION PO BOX 19039 SPOKANE, WA 99219-9039 (208)772-3484

Priority Date: 06/30/2008
Status: Active

<u>Source</u>	<u>Tributary</u>
GROUND WATER	

<u>Beneficial Use</u>	<u>From</u>	<u>To</u>	<u>Diversion Rate</u>	<u>Volume</u>
DOMESTIC	01/01	12/31	0.2 CFS	
Total Diversion			0.2 CFS	

Location of Point(s) of Diversion:

GROUND WATER	SENW Lt 4	Sec. 11	Township 51N	Range 03W	KOOTENAI County
GROUND WATER	SENW Lt 4	Sec. 11	Township 51N	Range 03W	KOOTENAI County
GROUND WATER	NESE	Sec. 11	Township 51N	Range 03W	KOOTENAI County

DOMESTIC Use:

Number of other uses: 4 DORMATORIES, 12 DUPLES CABINS, 1 MAIN COMMONS BUILDING, 2 STAFF HOMES, 1 SHOP FACILITY, 1 OFFICE BUILDING AND 1 CEDAR CABIN

Place(s) of use:

Place of Use Legal Description: DOMESTIC KOOTENAI County

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>Lot</u>	<u>Tract</u>	<u>Acres</u>	<u>Lot</u>	<u>Tract</u>	<u>Acres</u>	<u>Lot</u>	<u>Tract</u>	<u>Acres</u>	<u>Lot</u>	<u>Tract</u>	<u>Acres</u>
51N	03W	11	4	SEnw										
			6	NEsw										
				NWSE			SWSE							

Conditions of Approval:

- 1.046 Right holder shall comply with the drilling permit requirements of Section 42-235, Idaho Code and applicable Well Construction Rules of the Department.
- 2.26A Project construction shall commence within one year from the date of permit issuance and shall proceed diligently to completion unless it can be shown to the satisfaction of the Director of the Department of Water Resources that delays were due to circumstances over which the permit holder had no control.
- 3.004 This right does not grant any right-of-way or easement across the land of another.
- 4.01R When notified by the Department, the right holder shall install and maintain a measuring device of a type acceptable to the Department as part of the diverting works.
- 5.WB5 Domestic use is for 2 staff homes, 4 dormitories, 12 duplexes, 1 main building, 1 shop, 1 office building, 1 cabin and does not include lawn, garden, landscape, or other types of irrigation.

Dates:

Proof Due Date: 08/01/2013

Proof Made Date:

Approved Date: 08/11/2008

Moratorium Expiration Date:

Enlargement Use Priority Date:

Enlargement Statute Priority Date:

Application Received Date: 06/30/2008

Protest Deadline Date: 08/04/2008

Number of Protests: 0

Field Exam Date::

Date Sent to State Off:

Date Received at State Off:

Other Information:

State or Federal:

Owner Name Connector:

Water District Number:

Generic Max Rate per Acre:

Generic Max Volume per Acre:

Swan Falls Trust or Nontrust:

Swan Falls Dismissed:
DLE Act Number:
Cary Act Number:
Mitigation Plan: False

Close

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

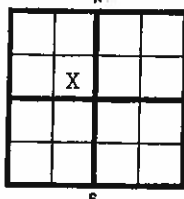
Office Use Only		
Inspected by		
Twp.	Rge	Sec
1/4	1/4	1/4
Lat:	:	Long:

1. WELL TAG NO. D0022123
Drilling Permit No: 773686
Other IDWR No. IDWR/North

2. OWNER CAMP MIVODEN WELL #6 Well Number: 367
Address 17415 E. HAYDEN LK RD

City HAYDEN State ID Zip 83835

3. LOCATION OF WELL by legal description
sketch map location must agree with written location



Twp. 51N ☒ North or ☐ South
Rge. 3W ☐ East or ☒ West
Sec. 11 SE 1/4 NW 1/4 1/4

Gov't Lot _____ County KOOTENAI

Lat: _____ Long: _____

Address of Well Site SAME

City SAME

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK check all that apply (Replacement, etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE			100 LBS	DRY BENTONITE
OTHER SEAL MAT 0		36	0 0 GALLONS	OUT SEAL/OVERE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 39

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	39	.280	STEEL	☒	☐	☒	☐
4	-5	300	.160	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method SKIL SAW

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-260	300	1/8 X 6	170	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

12 ft. below ground Artesian pressure _____ lb.

Depth flow encountered 20 ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump	☐ Bailer	☒ Air	☐ Flowing Artesian
Yield gal./min.	Drawdown	Pumping Level	Time
25		300	1 HR

Water Temp. COLD Bottom Hole Temp COLD

Water Quality test or comments: OK

Depth first Water encountered 20

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Dips	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
10	0	28	Soils w/Gravel w/Water - cased off	☒ Y	☐ N
10	28	37	Clayish Gravel	☐ Y	☒ N
10	37	39	Granite Salt & Pepper	☐ Y	☒ N
6	39	56	Granite Salt & Pepper	☐ Y	☒ N
6	56	63	Broken Granite Black & Brown w/10-1	☒ Y	☐ N
6	63	243	Granite Salt & Pepper	☐ Y	☒ N
6	243	250	Granite Salt & Pepper w/Soft Green 12	☒ Y	☐ N
6	250	300	Granite Salt & Pepper	☐ Y	☐ N

Completed Depth 300 (Measurable)

Date: Started 2/14/02 Completed 2/15/02

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 H2O Well Service, Inc. Firm No. 448

Firm Official [Signature] Date 2-19-02

and Supervisor or Operator [Signature] Date 2-19-02

(Sign Once if Firm Official and Operator)

Louie Hanner

[illegible]

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

1. WELL OWNER Well #4
Name Camp Minors
Address Rte 2 Box 259 Hayden
Owner's Permit No. 95-89-N-101-1

2. NATURE OF WORK
☐ New well ☒ Deepened ☐ Replacement
☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

3. PROPOSED USE
☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

4. METHOD DRILLED
☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION
Casing schedule: ☐ Steel ☐ Concrete ☐ Other PUC
Thickness _____ Diameter _____ From _____ To _____
_____ inches _____ inches + _____ feet _____ feet
_____ inches 4 inches - 10 feet 100 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
Was casing drive shoe used? ☐ Yes ☐ No
Was a packer or seal used? ☐ Yes ☐ No
Perforated? ☒ Yes ☐ No
How perforated? ☐ Factory ☐ Knife ☐ Torch SAW
Size of perforation 1/16 inches by 3 inches
Number _____ From _____ To _____
100 perforations 10 feet 100 feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
Well screen installed? ☐ Yes ☒ No
Manufacturer's name _____
Type _____ Model No. _____
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____
Placed from _____ feet to _____ feet
Surface seal depth _____ Material used in seal: ☐ Cement grout
☐ Bentonite ☐ Pudding clay ☐ _____
Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing
☐ Overbore to seal depth
Method of joining casing: ☐ Threaded ☐ Welded ☐ Solvent
Weld _____
☐ Cemented between strata
Describe access port _____

6. LOCATION OF WELL
Sketch map location must agree with written location
Subdivision Name _____
Lot No. _____ Block No. _____
County Kootenai
SE ¼ NW ¼ Sec. 11 T. 51 (N/S, R. 3 E/W)

7. WATER LEVEL Static water level 22 feet below land surface.
Flowing? ☐ Yes ☐ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ of, Quality _____
Describe artesian or temperature zones below.

8. WELL TEST DATA
☒ Pump ☐ Bailor ☐ Air ☐ Other _____
Discharge G.P.M. _____ Pumping Level _____ Hours Pumped _____
7.5 90' 4
2.7 90' after 4 hrs
Final Yield = 15gpm after
Hydrofrac and Deepening

9. LITHOLOGIC LOG
Bore Depth Material Water
Diam. From To Yes No
6 50 100 gritbed formation ✓
8 unstable fractured

10. Work started 1-10-90 finished 1-12-90

11. DRILLERS CERTIFICATION SR
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
Firm Name Hyo well services Firm No. 48
Address Hayden Id Date 1-15-90
Signed by (Firm Official) John Whisenand
and
(Operator) John Whisenand

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

Office Use Only
 Inspected by _____
 Twp _____ Rge _____ Sec _____
 _____ 1/4 _____ 1/4 _____ 1/4
 Lat: : : Long: : :

POSTE

3. LOCATION OF WELL by legal description
sketch map location must agree with written location

A 4x4 grid with a vertical line down the center. The top is labeled 'N' and the bottom 'S'. An 'X' is in the second row, second column from the left.

Lat: : : Long: : :

Address of Well Site SAME
City SAME

(Give at least name of road + Distance to Road or Landmark)

Lt. Blk. Sub. Name

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

5. TYPE OF WORK check all that apply (Replacement, etc.)

☐ New Well ☒ Modify ☐ Abandonment ☐ Other DEEPEN☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	

Was drive shoe used? ☐ Y ☐ N Shoe Depth(s)

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

Diameter	From	To	Gauge	Material

Casing Liner Welded Threaded

Length of Headpipe _____ Length of Tailpipe _____

☐ Perforations Method _____

☐ Screens Screen Type _____

From	To	Spot Size	Number	Diameter	Material	Casing	Linear

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

Depth flow encountered 20 ft. Describe access port or control devices:

57N 3W 11

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
Final Yield=15gpm			

Water Temp.	Bottom Hole Temp
-------------	------------------

Water Quality test or comments:

Depth first Water encountered 20

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

[illegible]

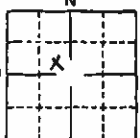
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name H2O WellService, Inc. Firm No. 448
Firm Official Mom R. Keph Date 2-15-02
and
Supervisor or Operator J. E. V. Date 2-15-02

(Sign Once If Firm Official and Operator)

Louie Hanner

Form 238-7
6/89STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENState law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

1. WELL OWNER Name <u>Well#3</u> <u>Camp Invader</u> Address <u>Hayden Lake</u> Owner's Permit No. <u>95-89-N-92</u>	7. WATER LEVEL Static water level <u>23'</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature <u>Cool</u> of. Quality <u>No Smell</u> Describe artesian or temperature zones below.																																													
2. NATURE OF WORK ☒ New well ☐ Deepened ☒ Replacement ☐ Well diameter increase ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA <u>#3</u> ☐ Pump ☐ Baller ☒ Air ☐ Other _____ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td><u>3 gpm</u></td> <td><u>3.50</u></td> <td><u>4</u></td> </tr> </table> <u>Yield=6gpm after Hydrofrac</u>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>3 gpm</u>	<u>3.50</u>	<u>4</u>																																							
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Bore Diam.</th> <th>Depth From</th> <th>To</th> <th>Material</th> <th>Water Yes No</th> </tr> </thead> <tbody> <tr> <td><u>8 1/2"</u></td> <td><u>0</u></td> <td><u>39</u></td> <td></td> <td></td> </tr> <tr> <td><u>6"</u></td> <td><u>39</u></td> <td><u>350</u></td> <td></td> <td></td> </tr> <tr> <td></td> <td><u>0</u></td> <td><u>35</u></td> <td><u>Decomposed Granite</u></td> <td><u>X</u></td> </tr> <tr> <td></td> <td><u>35</u></td> <td><u>330</u></td> <td><u>Salt & Pepper Granite</u></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><u>with soft spots</u></td> <td><u>X</u></td> </tr> <tr> <td></td> <td><u>330</u></td> <td><u>340</u></td> <td><u>Dark Granite (harder)</u></td> <td><u>X</u></td> </tr> <tr> <td></td> <td><u>340</u></td> <td><u>345</u></td> <td><u>Salt & Pepper Granite</u></td> <td><u>X</u></td> </tr> <tr> <td></td> <td><u>345</u></td> <td><u>350</u></td> <td><u>Dark Salt & Pepper Granite</u></td> <td><u>X</u></td> </tr> </tbody> </table> <u>Hit water at 95 ft.</u> <u>3 gals per minute</u> <u>No water below 95 ft.</u>	Bore Diam.	Depth From	To	Material	Water Yes No	<u>8 1/2"</u>	<u>0</u>	<u>39</u>			<u>6"</u>	<u>39</u>	<u>350</u>				<u>0</u>	<u>35</u>	<u>Decomposed Granite</u>	<u>X</u>		<u>35</u>	<u>330</u>	<u>Salt & Pepper Granite</u>					<u>with soft spots</u>	<u>X</u>		<u>330</u>	<u>340</u>	<u>Dark Granite (harder)</u>	<u>X</u>		<u>340</u>	<u>345</u>	<u>Salt & Pepper Granite</u>	<u>X</u>		<u>345</u>	<u>350</u>	<u>Dark Salt & Pepper Granite</u>	<u>X</u>
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	RECEIVED DEC 0 8 1989 NORTHERN REGION IDWR																																													
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>250</u> inches</td> <td><u>6</u> inches</td> <td><u>1</u> feet</td> <td><u>39</u> feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☒ Yes ☐ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun Size of perforation _____ inches by _____ inches <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> Well screen installed? ☐ Yes ☐ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>39</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☐ Overbore to seal depth ☐ Welded ☐ Solvent ☐ Cemented between strata Method of joining casing: ☐ Threaded ☒ Welded Describe access port _____	Thickness	Diameter	From	To	<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>39</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	10. Work started <u>11-28-89</u> finished <u>11-28-89</u>													
Thickness	Diameter	From	To																																											
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6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name <u>DEC 0 4 1991</u> Lot No. _____ Block No. _____ County <u>Kootenai</u> <u>SE 1/4 NW 1/4 Sec. 11, T. 51 N, R. 3 W</u>	11. DRILLERS CERTIFICATION <u>DR</u> I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>Han well serv.</u> Firm No. <u>448</u> Address <u>Hayden Lake</u> Date <u>12-1-89</u> Signed by (Firm Official) <u>John Johnson</u> and (Operator) <u>Wayne Miller</u>																																													

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT