

No. C 61225	Due no later than May 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SEVENTEES CORPORATION DONA K. MARTIN 60 MEMORY LANE ST. MARIES ID 83861-9569 USA		DONA K. MARTIN 60 MEMORY LANE ST. MARIES ID 83861-9569
			3. <u>New</u> Registered Agent Signature:*
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).			
Office Held	Name	Street or PO Address	City State Country Postal Code
DIRECTOR	WILLIAM B. THURSTON	P. O. BOX 175	VALLEYFORD WA USA 99036-0175
DIRECTOR	ROBERT D. THURSTON	640 WHISKEY JACK RD.	SANDPOINT, ID USA 83864-0175
SECRETARY	DONA K. MARTIN	60 MEMORY LANE	ST. MARIES ID USA 83861-9569
TREASURER	BARBARA K. COWIN	1022 PARK DRIVE	ST. MARIES, ID USA 83861-9569
PRESIDENT	RICHARD K. THURSTON	P.O. BOX 411	ST. MARIES, ID USA 83861-9569
5. Organized Under the Laws of: ID C 61225		6. Annual Report must be signed.* Signature: Dona K. Martin Date: 03/22/2012 Name (type or print): Dona K. Martin Title: Secretary	
Processed 03/22/2012		* Electronically provided signatures are accepted as original signatures.	

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

License of Water Right No. 92-7065 Priority December 27, 1979 Amount .10 cfs

THIS IS TO CERTIFY, that W. D. & BARBARA M. THURSTON
of St. Maries, Idaho, has complied with the terms and conditions of Permit
No. 92-7065 issued pursuant to Application for Permit dated December 27, 1979,
and has submitted proof to the Department of Water Resources on December 8, 1980,
that he has applied water to a beneficial use; an examination by the Department indicates that the works have a
capacity for the diversion of .10 cfs of water from a groundwater source,
tributary to _____, and that the permit holder has applied to a beneficial use and
established a right to use water as follows:

Beneficial Use	Period of Use	Rate of Diversion	Annual Volume
Domestic (2 units)	from <u>January 1</u> to <u>December 31</u>	at <u>.08</u> cfs and	<u>2.4</u> acre feet
Stockwater	from <u>January 1</u> to <u>December 31</u>	at <u>.02</u> cfs and	<u>.2</u> acre feet
(both dates inclusive)			

Subject, however, to the condition that no more than .10 cfs of water be diverted at any one time, and
that the amount of water so diverted and to which such right is entitled and confirmed for the purpose
aforementioned and is limited to the amount which can actually be beneficially used and shall not exceed
2.6 acre feet per year, said waters to be diverted within the NW 1/4, Sec. 26, Twp. 46N,
Rge. 2W, B.M. in the County of Benewah

Description and location of place of use:

Twp.	Range	Sec.	NE 1/4				NW 1/4				SW 1/4				Totals
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
46N	2W	26													

Total number of acres irrigated _____

NOTE: Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho
Code, or the applicable Idaho Law. This right may be forfeited by five years of non-use.

The right to the use of the water hereby confirmed is restricted and appurtenant to the lands or place of use
herein described, as provided by the laws of Idaho.

Witness the seal and signature of the Director, affixed at Boise, Idaho, this 24 day of
July, 19 81.


Director

SCANNED
MAR 18 2013

USE TYPEWRITER OR
BALL POINT PEN



State of Idaho
Department of Water Resources

WELL DRILLER'S REPORT

State 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.

RECEIVED

1. WELL OWNER

Name Dr. W. D. Thurston
Address Rt. 1, St. Maries, Idaho 83861
Owner's Permit No. 92-76-N-15

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe method of abandoning)

3. PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Other (specify type)
☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection

4. METHOD DRILLED

☐ Cable ☒ Rotary ☐ Dug ☐ Other

5. WELL CONSTRUCTION

Diameter of hole 8 inches Total depth 215 feet

Casing schedule: ☒ Steel ☐ Concrete

Thickness	Diameter	From	To
<u>.250</u> inches	<u>8</u> inches	<u>1</u> feet	<u>104</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ 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

Size of perforation _____ inches by _____ inches
Number _____ From _____ To _____
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet

Well screen installed? ☐ Yes ☒ No
Manufacturer's name _____

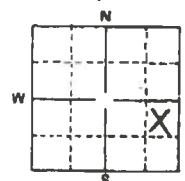
Type _____ Model No. _____
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? ☐ Yes ☐ No Size of gravel _____
Placed from _____ feet to _____ feet

Surface seal depth 20 Material used in seal ☐ Cement grout
Bentonite ☒ Pudding clay ☐ Well cuttings
Sealing procedure used ☐ Slurry pit ☐ Temporary surface casing
☒ Overbore to seal depth

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____
Lot No. _____ Block No. _____

County Benewah

SW 1/4 SE 1/4 Sec. 26 T. 46 N. S. R. 2W E/W

7. WATER LEVEL

Static water level 25 feet below land surface

Flowing? ☐ Yes ☒ No G.P.M. flow _____

Temperature _____ ° F. Quality _____

Artesian closed-in pressure _____ p.s.i.

Controlled by ☐ Valve ☐ Cap ☐ Plug

8. WELL TEST DATA

☐ Pump ☐ Bailor ☒ Other Air Lift

Discharge G.P.M.	Draw Down	Hours Pumped
<u>50</u>		

9. LITHOLOGIC LOG

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
8	1	104	Silt SAND		X
	104	175	Hard Basalt		X
	175	200	Hard Pan Clay		X
	200	215	Broken Basalt	X	

10.

Work started 9-9-76 finished 9-16-76

11. DRILLERS CERTIFICATION

Firm Name Camden Dev. Company Firm No. 228

Address E 6010 Broadway, Sp. WN Date 9-17-76

Signed by (Firm Official) John Camden

and

(Operator) James D. Camden

USE ADDITIONAL SHEETS IF NECESSARY

FORWARD THE WHITE COPY TO THE DEPARTMENT