

RECEIVED

DEC 14 2020

DEPARTMENT OF
WATER RESOURCESSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY	
Amt. of Fee \$	125.00
Receipt No.	C109640
Received By	Ku
Date Received	12.14.2020

The Idaho Department of Water Resources considers this form a statement by the permit holder(s) that development of a water right has been **completed** and that water has been applied to beneficial use to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner.** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, contact any Department office or visit the Department's website at idwr.idaho.gov for an *Assignment of Permit* form. If you wish to relinquish your permit because you have not established the authorized use of the water and are not applying for an extension, please notify the Department in writing.

- Permit No. 95-17123 Telephone No. 208 762-0235
- Name of Permit Holder(s) C & K Leasing
- Mailing Address 3110 N Government Way City Coeur d'Alene
State ID Zip 83815 Email jasonp@cdapaving.com
- Source of Water Ground Water If **GROUND WATER** (well), Date Drilled mo. Apri / yr. 16 & 19
Well Driller Horsley Drilling Drilling Permit Number D69998 & D79452
- Extent of use(s) completed **as authorized by the water right permit:**
Domestic (No. of households) 1 Stockwater (No. and type of stock) _____
Irrigation (No. of acres) _____ Other Industrial
- Total rate of diversion or storage volume for which proof is submitted 2.0 cfs OR _____ acre-feet.

- Compliance with a measuring device requirement, lockable controlling device requirement, and/or other conditions of permit:
Refer to the approval conditions on your permit and respond accordingly.

The Department will not issue a license if permit conditions are not met.

Measuring Device	Is a measuring device required?	Yes ☐	No ☒
	If yes, has the measuring device been installed?	Yes ☐	No ☒
Lockable Controlling Device	Is a lockable device required to control the diversion?	Yes ☐	No ☒
	If yes, has the lockable device been installed?	Yes ☐	No ☒
Fish Screen	Is a fish screen required?	Yes ☐	No ☒
	If yes, has the fish screen been installed?	Yes ☐	No ☒

Other Conditions of Permit

Do the approval conditions on your permit require you to submit additional information in connection with your proof of beneficial use? If yes, list the conditions below and attach documents with the required information.

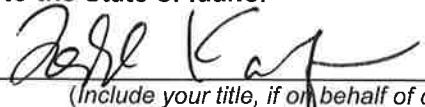
_____ Completed? Yes ☐ No ☒

- Fee Enclosed \$ 125 or not applicable ☐. See fee schedule on page 2 of the instructions.
Proof statements filed without an appropriate fee, will be considered incomplete.

- Person to contact to accompany the Department representative during field examination of the water system.

Name Jason Peterson Telephone Number 208 277-6111
Mailing Address As above City _____
State _____ Zip _____ Email _____

The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted and applied to a beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Signature of Permit Holder  Date 12-9-2020
(Include your title, if on behalf of company or organization)

Mail to: Idaho Department of Water Resources, PO Box 83720, Boise, ID 83720-0098

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0069998

Drilling Permit No. 878422

Water right or injection well # 95-17123

2. OWNER:

Name C & K Leasing

Address 102 E. Anton Ave

City Coeur d'Alene State ID Zip 83814

3. WELL LOCATION:

Twp. 51 North ☒ or South ☐ Rge. 6 East ☐ or West ☒

Sec. 36 1/4 SE 1/4 SW 1/4

Gov't Lot County Kootenai

Lat. 47 43.064 (Deg. and Decimal minutes)

Long. 117 02.243 (Deg. and Decimal minutes)

Address of Well Site N. Beck Rd

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

Lot. Blk. Sub. Name

4. USE:

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

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well☐ Abandonment ☐ Other

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method/procedure
Bentonite Chip	0	18	700 lbs.	Temp. Casing

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
10"	+2	160	.250	Steel	☒	☐	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) Ring @ 180'

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N MethodManufactured screen ☒ Y ☐ N Type Stainless Steel Wire Wrapped

Method of installation Pulled Casing Back

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
160	170	.60	-	8"	Steel	.250
170	180	.100	-	8"	Steel	.250

Length of Headpipe 2' Length of Tailpipe NA

Packer ☒ Y ☐ N Type K-Packer

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
NA				

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG)

Describe control device

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 125' Static water level (ft) 100'

Water temp. (°F) Cold Bottom hole temp. (°F) Cold

Describe access port Steel Welded Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
NA	500+ gpm	240	☐	☐	☒	☐

Test method:

Water quality test or comments:

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
16	0	18	Sand and Gravel		X
12	18	90	Sand and Large Gravel		X
12	90	95	Coarse Sand		X
12	95	125	Coarse Sand and Gravel		X
12	125	170	Coarse Sand and Large Gravel	X	
12	170	180	Large Gravel	X	

Completed Depth (Measurable): 180'

Date Started: 4/21/2016

Date Completed: 4/26/2016

14. DRILLER'S CERTIFICATION:

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

Company Name Horsley Drilling, Inc. Co. No. 632

*Principal Driller C. Mark Horsley Date 4/26/2016

*Driller Steve C. Horsley Date 4/26/2016

*Operator II Date

Operator I Robert R. Miller Date 4/26/2016

* Signature of Principal Driller and rig operator are required.



BRAD LITTLE
Governor

State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street • P.O. Box 83720 • Boise, Idaho 83720-0098

Phone: (208) 287-4800 • Fax: (208) 287-6700 • Website: www.idwr.idaho.gov

GARY SPACKMAN
Director

December 17, 2020

C & K LEASING
3110 N GOVERNMENT WAY
COEUR D ALENE ID 83815-3756

PROOF ACKNOWLEDGEMENT LETTER

RE: Permit No. 95-17123

Dear Permit Holder:

The Department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the Department to conduct a field examination to determine and confirm the use being made of the water.

Please be advised that Idaho Code § 42-248, requires you or the owner of this water right to maintain current ownership and address records on file with the Department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any Department office or at the Department's website at www.idwr.idaho.gov.

If you have any questions concerning the field examination, please contact the Northern Region Office of the Department located in Coeur d'Alene at (208) 762-2800.

Sincerely,

Debbi Judd
Technical Records Specialist

Enclosures