

RECEIVED

JUN 10 2013

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESDepartment of Water Resources
Eastern Region

APPLICATION FOR TEMPORARY APPROVAL OF WATER APPROPRIATION

(For a use not intended to become an established water right, not to exceed a total diverted volume of five (5) acre-feet, and not to exceed one (1) year duration in accordance with Section 42-202A, Idaho Code.)

Name of applicant: Ronald S. Wallace Phone: 208 525 2031
 Address: 10928 N 41E Ucon Idaho 83454 Email: rb1mb1@yahoo.com
 1. Source of water: Snake River tributary to Columbia River

2. Location of point(s) of diversion:

TWP	RGE	SEC	GOVT LOT	1/4	1/4	1/4	County	Source	Local name or tag #
05N	38E	7			NE	SW	Jefferson/Madison	Snake River	

3. Location of place of use:

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
05N	38E	7										X	X				X	X	

4. Describe proposed use of water: Plan on using a pump to a highbanker, water goes out onto the bank, then overland flows back to the river.

5. Amount of water:

Maximum rate of diversion _____ cfs or 41.7 gpm.Maximum daily volume _____ AF; total volume 2.7 AF.

6. Duration of diversion: from 6-15 to 11-30
 Day-month Day-month

7. Describe proposed diverting works: pump with collapsing hose to Highbanker.8. a. Who owns the property at the requested point of diversion? BLMb. Who owns the land to be irrigated or place of use? BLM

c. If the property is owned by a person other than the applicant, describe the arrangement allowing access to the water:

public boat docks, and public road.

9. Additional remarks: MAYRA Address: P.O. BOX 605
Ucon, ID 83454

I hereby acknowledge that I assume all risk if the diversion and use of the water under this approval injures other water rights. I certify this is a temporary use and that I am not seeking a continuing right to use water.

Signature of applicant

Date

Received by Km Date 6-10-2013 Time 2:00pm\$50.00 fee received by Km # E038773 Date 6-10-2013

Watermaster Comments received? _____ Date _____

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

This is to certify that the department has examined this application for temporary approval to use water under the provisions of Section 42-202a, Idaho Code, and has determined that:

- ☐ a) The application for temporary approval should be denied.
- ☒ b) The application for temporary approval should be approved, since
1. The temporary approval can be properly administered.
 2. Other water sources are not readily available.
 3. The approval is in the public interest.
 4. The approval will not injure known public values associated with the water source or any known water rights.

This application is therefore hereby:

- ☐ a) DENIED
- ☒ b) APPROVED, subject to the following conditions:
1. Diversion and use of water under this approval is subject to all valid existing water rights.
 2. The applicant assumes all risk the use of the water under this approval may injure other water rights.
 3. This approval authorizes a maximum diversion of 2.7 AF and a maximum rate of diversion of _____ cfs.
 4. This approval does not grant a right-of-way across the land of another, does not create a continuing right to use the water and may not be used in connection with a use which requires a continuing water supply.
 5. The department may cancel this approval at any time if the department identifies injury to other water rights.
 6. This approval expires on November 30, 2013.
 7. This approval does not create a continuing right to use water.
 8. The holder of this temporary permit shall not divert at a rate or in a manner that will significantly reduce the flow in the water source or otherwise adversely affect fish, wildlife or other public vaules.
 9. Other: _____

DATED this 12th day of June, 2013.


For the Director

Department of Water Resources

RECOMMENDATION OF WATERMASTER

Application for Temporary Approval of Water Appropriation

TP-01-43

Ronald Wallace

Watermaster's Recommendation:

a) ☒ I do not oppose approval of this application.
b) ☐ I do not oppose approval of this application if it is conditioned as follows:

c) ☐ I oppose approval of this application for the following reasons:

d) ☐ Additional Comment:

Dated this 12th day of June, 2013.

Water District No: 01

Lyle Swank
Watermaster's Signature



State of Idaho

DEPARTMENT OF WATER RESOURCES

900 N Skyline Dr., Ste A, Idaho Falls, Idaho 83402-1718

Phone: (208) 525-7161 FAX: (208) 525-7177 www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

June 12, 2013

GARY SPACKMAN
Director

Ronald S Wallace
10729 N 41 East
Ucon ID 83454

Applicant:

Enclosed is your approved copy of Temporary Permit TP-01-43. Please take note of the effective dates on line 6 and the conditions on the back.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Sharla Cox', is written over a circular embossed seal. The seal is partially visible and contains some text that is difficult to read.

Sharla Cox
Water Resource Administrative Assistant

Enclosure