

Permit No. 13-7907
Name Bosen Land & Livestock

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
In-Office Beneficial Use Examination

1. ☒ Copy of Permit
2. ☒ Copy of proof of beneficial use
3. ☒ Copies of amendments/orders
4. ☒ Qualifies under Rule 35.01.r (IDAPA 37.03.02)
5. ☒ Point of Diversion

Township 15S, Range 39E, Section 7, QQ NENE

Method used to determine POD: Site visit

6. ☒ Place of Use

Township 15S, Range 39E, Section 6, 7, 8, QQ → See map

Method used to determine POU: Site visit

7. ☒ POD and POU match Permit Approval
8. ☒ Aerial photo of place of use
9. ☒ Well driller's report
10. NO Within a water district? (WD#)

11. ☒ Volume Calculation 13,000 gpd for all uses

12. Other information Permit reinstated, priority advanced to 1/7/14

Examiner Name Dan Nelson / Dennis Dunn Date

Reviewer James Cefalo Date 1/20/2020

State of Idaho
Department of Water Resources
Water Right License

13-7907

Bosen Land & Livestock LLC and/or David Bosen



-  Point of Diversion
-  Place Of Use Boundary
-  Townships
-  PLS Sections
-  Quarter Quarters

0 500 1,000 2,000 Feet



MEMORANDUM

TO: 13-7907

FROM: Daniel A. Nelson, Staff Hydrologist

DATE: February 18, 2016

SUBJECT: Field Exam Required

*David Bensen
(208) 852-1726*

This permit was scheduled for an in-house exam at the state office. The records for this well, suggest that a field exam is necessary to determine what is actually being diverted. The water being used for this system has a top hole temperature of 155 degrees and a bottom hole temperature of 205 degrees. The permit is for stockwater and domestic use, so we don't know if it is possible to cool the water enough to provide stockwater, in-house use, and yard irrigation without some type of cooling unit, or do they mix the well water with the spring water they use.

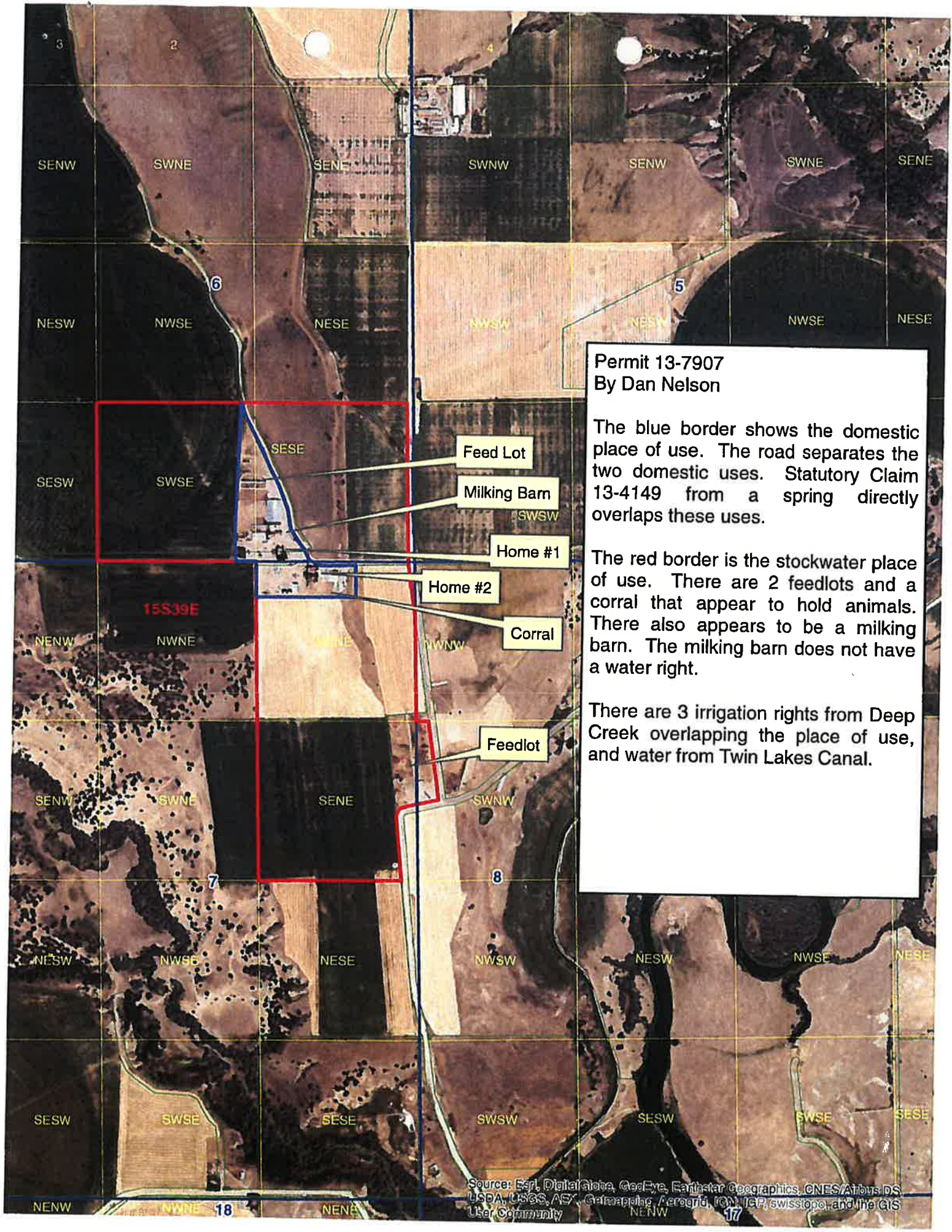
The well driller's report also says that the well yields 6 to 8 gpm. The permit is for 0.06 cfs or 27 gpm. The question needs to be answered whether or not they pump the well with a pump capable of 27 gpm for a shorter period of time or do they have a smaller pump that runs a longer period of time.

They pump slowly to the tank - D.M. Duren

Another question is how are they supplying water to the dairy barn? There is a dairy barn on site, but there are no commercial water rights. How are they supplying commercial use water to the dairy?

The dairy has gone out of business - there is no water being supplied to the barn - D.M. Duren

With these questions, we need to go to the property and figure out what exactly is happening at this site. I have included some maps and well information with this memo.

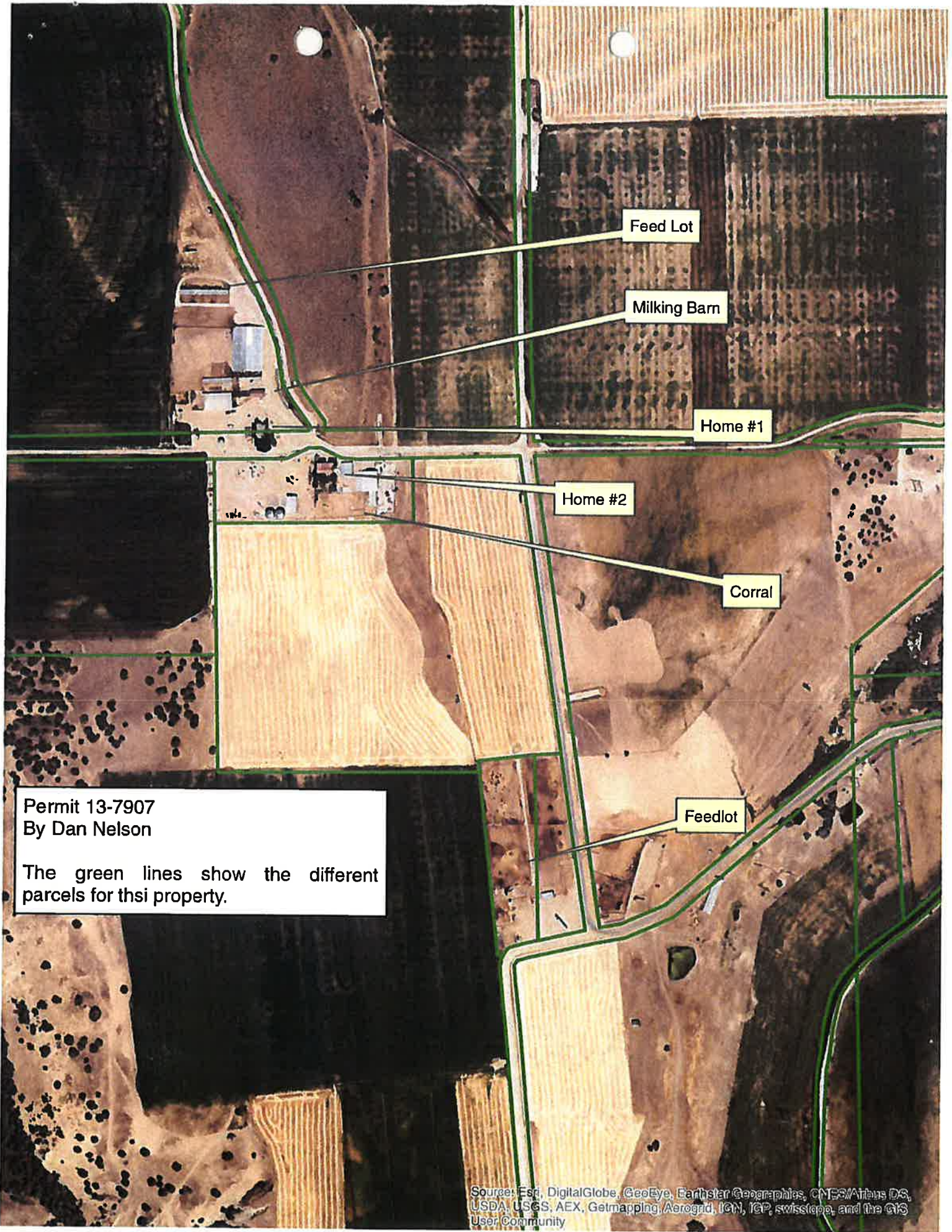


Permit 13-7907
By Dan Nelson

The blue border shows the domestic place of use. The road separates the two domestic uses. Statutory Claim 13-4149 from a spring directly overlaps these uses.

The red border is the stockwater place of use. There are 2 feedlots and a corral that appear to hold animals. There also appears to be a milking barn. The milking barn does not have a water right.

There are 3 irrigation rights from Deep Creek overlapping the place of use, and water from Twin Lakes Canal.



Permit 13-7907
By Dan Nelson

The green lines show the different parcels for thsi property.



D0063559

AIR ROTARY & CABLE TOOL DRILLING • PUMPS

"Our Water Is Well Made"

Dave Bosen
Drilling prospectus

Preston, ID

1-800-499-3788
(208) 684-3788
FAX (208) 684-3582692 A W. HWY. 39
BLACKFOOT, ID 83221

14" Bore Hole 40'

10" Bore Hole 200'

10" casing cemented 0-40'

6" casing cemented 0-200'
open Hole 6" 200-240'Conductor Pipe
10" 40'14" Bore
Hole
40'6" casing
cement grout
seal 0-40'

10" Bore Hole

cement
grout seal
0-200'

200'

open
Bore Hole

0-17 Topsoil & Broken rock

17-32 Brown clay

32-46 Green shale firm

46-61 Brown clay

61-64 green shale

64-78 Brown clay

78-86 Broken green shale

86-88 Hard green shale

88-93 fractured green shale

3-95 Hard green shale

5-122 fractured green shale

122-131 Brown clay & shale

131-174 Brown clay trace shale

174-240 Dark green firm

240-240 fractured green shale firm

Trace H₂O @ 150-160'

1-26 PM Temp 65°

H₂O @ 215-240

8-10 PM Temp 97°

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0063559

Drilling Permit No. _____
Water right or Injection well # _____

2. OWNER:

Name David Bosen
Address 2545 West 2400 North
City Preston State Idaho Zip 83263

3. WELL LOCATION:

Twp. 15 North ☐ or South ☒ Rgs. 39 East ☒ or West ☐
Sec. 7 1/4 NE 1/4 NE 1/4

Gov't Lot _____ County Franklin
Lat. 42 ° 08.372 (Deg and Decimal minutes)
Long. 111 ° 56.220 (Deg and Decimal minutes)

Address of Well Site 2545 West 2400 North
City Preston

(Give at least name of road or distance to road or landmark)
Lot _____ Blk. _____ Sub. Name _____

4. USE:

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

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	0	10		Annular
Cement	10	200	3.5 Yards	Pumped

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6	+1	198	.250	Steel	☒	☐	☐	☒
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 198

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☐ N Method _____

Manufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

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

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) 130 Static water level (ft) 130

Water temp. (°F) _____ Bottom hole temp (°F) 217

Describe access port Well Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Ballor	Air	Flowing artesian
	40	60	☐	☐	☒	☐
			☐	☐	☐	☐

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
10	0	198			
6	198	248			
10	0	17	Top Soil & Broken Rock		X
	17	32	Brown Sandy Clay		X
	32	46	Grey Wacke Hard		X
	46	61	Brown Clay		X
	61	64	Grey Wacke Hard		X
	64	78	Brown Clay		X
	78	86	Broken Grey Wacke		X
	86	88	Grey Wacke Hard		X
	88	93	Grey Wacke Fractured		X
	93	95	Grey Wacke Hard		X
	95	122	Grey Wacke Fractured		X
	122	131	Brown Clay Broken Rock		
	131	174	Brown Clay Broken Rock/Trace H2O	X	
	174	198	Grey Wacke Hard		X
6	198	248	Grey Wacke Hard		X
	248	253	Grey Wacke Fractured	X	
	253	260	Grey Wacke Firm	X	

RECEIVED

MAR 27 2014

Department of Water Resources
Eastern Region

Completed Depth (Measurable): 260'

Date Started: Mar 1, 2014

Date Completed: Mar 10, 2014

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 Independent Drilling Co No 343

*Principal Driller [Signature] Date Mar 10, 2014

*Driller [Signature] Date Mar 10, 2014

*Operator II [Signature] Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0065884

Drilling Permit No _____
Water right or injection well # 13-07907

2. OWNER:

Name David Bosen
Address 2545 West 2400 North
City Preston State ID Zip 83263

3. WELL LOCATION:

Twp 15 North ☐ or South ☒ Rge 39 East ☒ or West ☐
Sec 7 1/4 NE 1/4 NE 1/4

Govt Lot _____ County Franklin
Lat 42 08.372 (Deg. and Decimal minutes)
Long 111 56.220 (Deg. and Decimal minutes)

Address of Well Site 2545 West 2400 North
City Preston

(Give at least name of road - distance to Road or Landmark)
Lot _____ Blk _____ Sub Name _____

4. USE:

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

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
Neat Cement	-176'	-260'	.75 yards	Pumped

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Uner	Threaded	Welded
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

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

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method Knife

Manufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
-160'	-170'	1/4x6	3	6"	Steel	.250

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

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

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) _____ Static water level (ft) 130

Water temp. (°F) 155 Bottom hole temp. (°F) 205

Describe access port Well Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
6-8		60	☐	☐	☒	☐

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
			Modify Existing Well D0063559		
			Highest temperature recorded after well developed was 155° at the surface.		

Completed Depth (Measurable): 176
Date Started: Jan 28, 2015 Date Completed: Jan 30, 2015

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 Independent Drilling / KC Co. No 343

*Principal Driller *Rodney J. ...* Date Feb 10, 2015

*Driller _____ Date _____

*Operator II *Keith Shaw* Date Feb 4, 2015

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required

RECEIVED

FEB 03 2016

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 \$ 50.00Receipt No. C101521Received By EKGDate Received 2/12/2016

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.

1. Permit No. 13-07907 Telephone No. 208-852-1726 208-221-86902. Name of Permit Holder(s) DAVID BOSEN3. Mailing Address 2545 WEST 2400 NORTH City PRESTON
State ID Zip 83263 Email davidscottbosen@yahoo.com4. Source of Water Well If **GROUND WATER** (well), Date Drilled mo. FEB 10th yr. 2015
Well Driller Independent Drilling Drilling Permit Number 343

5. Extent of use(s) completed as authorized by the water right permit:

Domestic (No. of households) 2 Stockwater (No. and type of stock) 1000

Irrigation (No. of acres) _____ Other _____

6. Total rate of diversion or storage volume for which proof is submitted 6-8 gpm cfs OR _____ acre-feet.7. 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 ☒8. Fee Enclosed \$ _____ or not applicable ☐. See fee schedule on page 2 of the instructions.
Proof statements filed without an appropriate fee, will be considered incomplete.

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

Name DAVE BOSEN Telephone Number 208-852-1726 208-221-8690
Mailing Address 2545 WEST 2400 NORTH City PRESTON
State ID Zip 83263 Email davidscottbosen@yahoo.com

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 [Signature]
(Include your title, if on behalf of company or organization)Date 2/1/2016