

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
BENEFICIAL USE FIELD REPORT

**A. GENERAL INFORMATION**

**Permit No:** 96-9751  
**Exam Date:** 1/23/20

1. Current Owner:  
WILLIAM ASELTINE PO BOX 512 CLARK FORK ID 83811-0512 AND/OR  
CYNTHIA ASELTINE PO BOX 512 CLARK FORK ID 83811-0512
2. In-office qualification (IDAPA 035.01.r): Total diversion rate  $\leq$  0.24 cfs and not irrigation or storage
3. **SOURCE:**  
GROUND WATER

**Method of Determination:** Applicant submitted an aerial photo map that outlined POD & POU.

**B. OVERLAP REVIEW**

1. Other water rights with the same place of use: NO Overlap

Water Right No.	Source	Purpose of Use	Basis
N/A	N/A	N/A	N/A

Comments: 3 properties that share the same SW1/4 NE1/4 as the target property however these domestic water rights are pertinent to neighboring properties.

2. Other water rights with the same point-of-diversion: NO Overlap

Water Right No.	Source	Purpose of Use	Basis
N/A	N/A	N/A	N/A

Comments There are no other water rights that share POD.

**C. DIVERSION AND DELIVERY SYSTEM**

1. **LOCATION OF POINT(S) OF DIVERSION:**

GROUND WATER SW $\frac{1}{4}$  NE $\frac{1}{4}$ , Sec. 29, Twp 55N, Rge 03E, B.M. BONNER County

Method of Determination: Legal description in permit validated by PLS data and mapping.

**PLACE OF USE: DOMESTIC**

Twp	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
55N	03E	29			X														

Method of Determination: Map of property submitted by land owner identifies POU clearly. PLSS data through ArcMap also verified.

3.
  - N/A Delivery System Diagram Attached (required). Indicate all major components and distances between components. Indicate weir size/pipe as applicable.
  - X Map Attached Showing Location(s) of point(s) of diversion and place(s) of use (required). Scale must be 1:24,000 or greater.
  - X Aerial Photo Attached (required for irrigation of 10+ acres).
  - N/A Photo of Diversion and System Attached

4.

Well or Diversion ID No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
N/A	N/A	N/A	N/A	N/A	N/A

**D. FLOW MEASUREMENTS**

1. None Taken

**E. FLOW CALCULATIONS**

Domestic Permit 0.04 cfs

B.U. Proof Fee: \$50 → 0.00 cfs to 0.20 cfs

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**License Recommendation 0.04 cfs**
**F. VOLUME CALCULATIONS**

1. Volume Calculations for irrigation: N/A

2. Volume Calculations for Other Uses:

Domestic = 1.2 afa as per Apps Memo No. 22 "Definition of Domestic."

**G. NARRATIVE/REMARKS/COMMENTS**

The field exam was conducted in-office January 17, 2020 by Kate Huelse.

The permit 96-9751 was assigned to Cythia and William Aseltine on May 24, 2019 and authorized the diversion of 0.04 cfs from groundwater for domestic use for 1 home in Section 29, Township 55 North, Range 03 East, NE 1/4, SW 1/4. The proof of beneficial use was submitted at the same time on May 24, 2019 by to Cythia and William Aseltine. Current Bonner county taxlot data represents Mr. and Mrs. Aseltine own the land pertinent to the place of use and point of diversion. Based on the information provided in the water right file, this qualifies for an in office field exam.

Ground water comes from a well drilled in 2004. As per the application, the system diverts water using a pump to serve one home. As a result, I am recommending 0.04 cfs and 1.2 af for domestic purposes. Overlap review found no additional water rights for the POU and POD.

Have conditions of permit approval been met? ☒ Yes ☐ No

#### H. RECOMMENDATIONS

##### 1. Recommended Amounts

<u>Beneficial Use</u>	<u>Period of Use</u>	<u>Rate of Diversion</u>	<u>Max Volume</u>
DOMESTIC	01/01 to 12/31	0.04 CFS	1.2 AF

Totals: 0.04 CFS

##### 2. Recommended Amendments

☐ Change P.D. as reflected above ☐ Add P.D. as reflected above ☒ None

☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☒ None

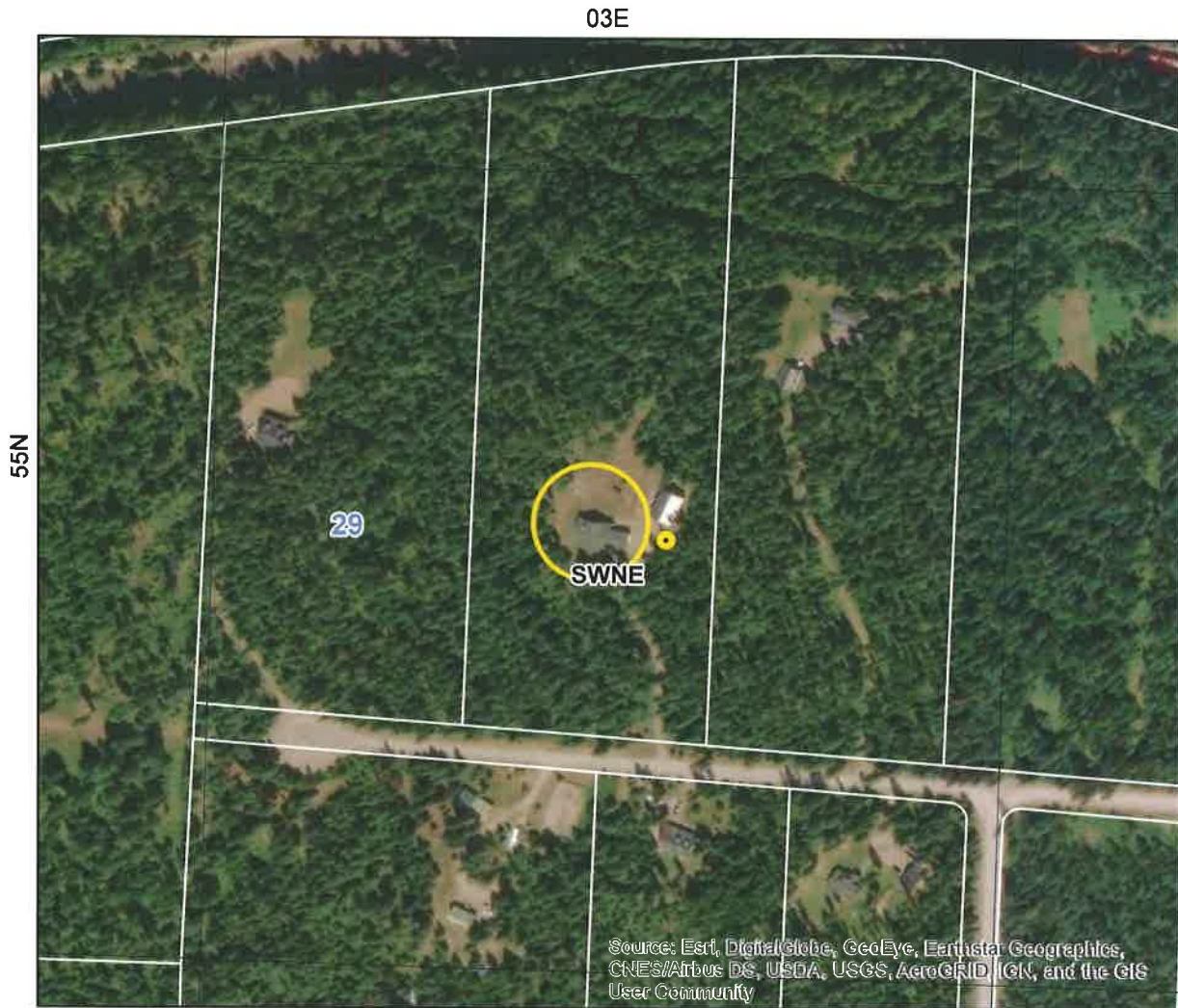
#### I. AUTHENTICATION

Kate Hulse - Water Resource Agent

Field Examiner's Name \_\_\_\_\_ Date \_\_\_\_\_

Reviewer \_\_\_\_\_ Date \_\_\_\_\_

State of Idaho  
Department of Water Resources  
**Beneficial Use In Office Field Report**  
96-9751  
System Diagram



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

0 0.035 0.07 0.14 Miles



# IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____	_____	Long: _____	_____

1. WELL TAG NO. D 0039751  
 DRILLING PERMIT NO. 826636  
 Water Right or Injection Well No. \_\_\_\_\_

2. OWNER:  
 Name William & Cindy Aseltine  
 Address 4701 Cosmo Ct  
 City Bakersfield State CA Zip 93306

3. LOCATION OF WELL by legal description:  
 You must provide address or Lot, Blk, Sub. or Directions to well.  
 Twp. 55 North ☒ or South ☐  
 Rge. 3 East ☒ or West ☐  
 Sec. 29 1/4 NE 1/4 SW 1/4  
 Gov't Lot \_\_\_\_\_ County Bonner  
 Lat: \_\_\_\_\_ Long: \_\_\_\_\_  
 Address of Well Site 109 Kootenai Cabinet Wagon Rd  
 City Clark Fork  
 (Give at least name of road + Distance to Road or Landmark)  
 Lt. 2 Blk. 1 Sub. Name Woodland Trails

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 Material	From	To	Weight / Volume	Seal Placement Method
bentonite	0	18	350lbs	overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 260  
 Was drive shoe seal tested? ☐ Y ☒ N How? \_\_\_\_\_

## 8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+1 1/2	260	250	steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe \_\_\_\_\_ Length of Tailpipe \_\_\_\_\_  
 Packer ☐ Y ☒ N Type \_\_\_\_\_

## 9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method \_\_\_\_\_  
 Screen Type & Method of Installation \_\_\_\_\_

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

## 10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

## 11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

215 ft. below ground Artesian pressure \_\_\_\_\_ lb.  
 Depth flow encountered \_\_\_\_\_ ft. Describe access port or control devices: cap

## 12. WELL TESTS:

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal./min.	Drawdown	Pumping Level	Time
20		260	2 1/2 hr

Water Temp. cold Bottom hole temp. \_\_\_\_\_

Water Quality test or comments: clear

Depth first Water Encounter 215

## 13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8	0	18	sand&gravel		
6	18	53	sand&gravel		
	53	81	brown clay		
	81	83	boulder		
	83	158	sand&gravel		
	158	160	boulder		
	160	220	sand&gravel	x	
	220	255	sand&gravel, boulders	x	
	255	262	sand&gravel	x	

RECEIVED  
 DEC 23 2004  
 IDWR/North

Completed Depth 261ft (Measurable)

Date: Started 12-03-04 Completed 12-15-04

## 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 Bronson Water Wells Firm No. 360

Principal Driller Clint Bronson Date 12-23-04

and Driller or Operator II \_\_\_\_\_ Date \_\_\_\_\_

Operator I \_\_\_\_\_ Date \_\_\_\_\_

Principal Driller and Rig Operator Required.  
 Operator I must have signature of Driller/Operator II.