

RECEIVED

FORM 202 Rev. 09/16

MAR 04 2019

83054

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

Ident. No. 96-9738

IDWR / NORTH

APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name of applicant(s) Marc Brinkmeyer Phone 208-255-3211
 Mailing address P O BOX 220 City Laclede
 State Idaho ZIP 83841 Email msapp@rileycreek.com
2. Name of representative, if any Foresite Engineering, Ryan Fobes Phone 208-714-6866
 Mailing address 418 E. Lakeside Ave. #01 City Coeur d'Alene
 State Idaho ZIP 83814 Email ryan@foresite.solutions
- a. ☐ Send all correspondence for this application to the representative and not to the applicant OR
☒ Send original correspondence to the applicant and copies to the representative.
- b. ☒ The representative may submit information for the applicant but is not authorized to sign for the applicant OR
☐ The representative is authorized to sign for the applicant. Attach a Power of Attorney or other documentation.
3. Source of water supply WELLS 4-EA GROUNDWATER which is a tributary of _____
4. Location of point(s) of diversion:

Twp	Rge	Sec	Govt Lot	1/4	1/4	1/4	County	Source	Local name or tag #
57N	03W	24			NE	SW	BONNER	GROUNDWATER	OWEN
57N	03W	24			NE	NW	BONNER	GROUNDWATER	0028724
57N	03W	24			NW	SE	BONNER	GROUNDWATER	MURPHY
57N	03W	24			NE	NW	BONNER	GROUNDWATER	0054541

5. Water will be used for the following purposes:
- Amount 0.06 for DOMESTIC purposes from 1/1 to 12/31 (both dates inclusive)
 (cfs or acre-feet per year)
- Amount 0.11 for IRRIGATION purposes from 4/1 to 10/31 (both dates inclusive)
 (cfs or acre-feet per year)
- Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
 (cfs or acre-feet per year)
- Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
 (cfs or acre-feet per year)
6. Total quantity to be appropriated is (a) 0.17 cubic feet per second (cfs) and/or (b) _____ acre-feet per year (af).
7. Proposed diverting works:
- a. Describe type and size of devices used to divert water from the source. WATER FROM WELLS FILL 9,000 GALLON STORAGE TANK. PUMPED TO HOME AND IRRIGATION FROM THERE.
- b. Height of storage dam _____ feet; active reservoir capacity _____ acre-feet; total reservoir capacity _____ acre-feet. If the reservoir will be filled more than once each year, describe the refill plan in item 12. For dams 10 feet or more in height AND having a storage capacity of 50 acre-feet or more, submit a separate Application for Construction or Enlargement of a New or Existing Dam. Application required? ☐ Yes ☐ No
- c. Proposed well diameter is _____ inches; proposed depth of well is _____ feet.
- d. Is ground water with a temperature of greater than 85°F being sought? ☐ Yes ☐ No
- e. If well is already drilled, when? 91(x2), 03, 08; drilling firm Fogle, American & Bronson(2X)
 well was drilled for (well owner) Marc Brinkmeyer; Drilling Permit No. ATTACHED LOGS

For Department Use

Received by _____ Date _____ Time _____ Preliminary check by _____
 Fee \$ 100.00 Receipted by ja Receipt No. N034072 Date 3-4-19
580.00 4 well upgrade fees N034071 (\$500.00)

8. Description of proposed uses (if irrigation only, go to item 9):
- Hydropower; show total feet of head and proposed capacity in kW. _____
 - Stockwatering; list number and kind of livestock. _____
 - Municipal; must complete and attach the Municipal Water Right Application Checklist.
 - Domestic; show number of households 2
 - Other; describe fully. _____
9. Description of place of use:
- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
 - If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RGE	SEC	NE				NW				SW				SE				TOTALS
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
57N	03W	24			0.3					3	.1					.1			3.5
										D	D								

Total number of acres to be irrigated: 3.5

10. Describe any other water rights used for the same purposes as described above. Include water delivered by a municipality, canal company, or irrigation district. If this application is for domestic purposes, do you intend to use this water, water from another source, or both, to irrigate your lawn, garden, and/or landscaping? _____
11. a. Who owns the property at the point of diversion? APPLICANT, PRIEST RIVER LAND CO
b. Who owns the land to be irrigated or place of use? APPLICANT, PRIEST RIVER LAND CO
c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: APPLICANT IS OWNER OF PRIEST RIVER LAND CO - DOCUMENTATION ATTACHED
12. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. APPLICANT IS APPLYING TO USE WATER FROM 4 EXISTING WELLS FOR DOMESTIC USE IN TWO HOMES AND TO IRRIGATE 3.5 ACRES.
13. Time required for completion of works and application of water to proposed beneficial use is 1 years (minimum 1 year).
14. **MAP OF PROPOSED PROJECT REQUIRED** - Attach an 8½" x 11" map or maps clearly identifying the proposed point of diversion, place of use, section #, township & range. The map scale shall not be less than two (2) inches equal to one (1) mile.

The information contained in this application is true to the best of my knowledge. I understand that any willful misrepresentations made in this application may result in rejection of the application or cancellation of an approval.

Signature of Applicant

Print Name (and title, if applicable)

Signature of Applicant

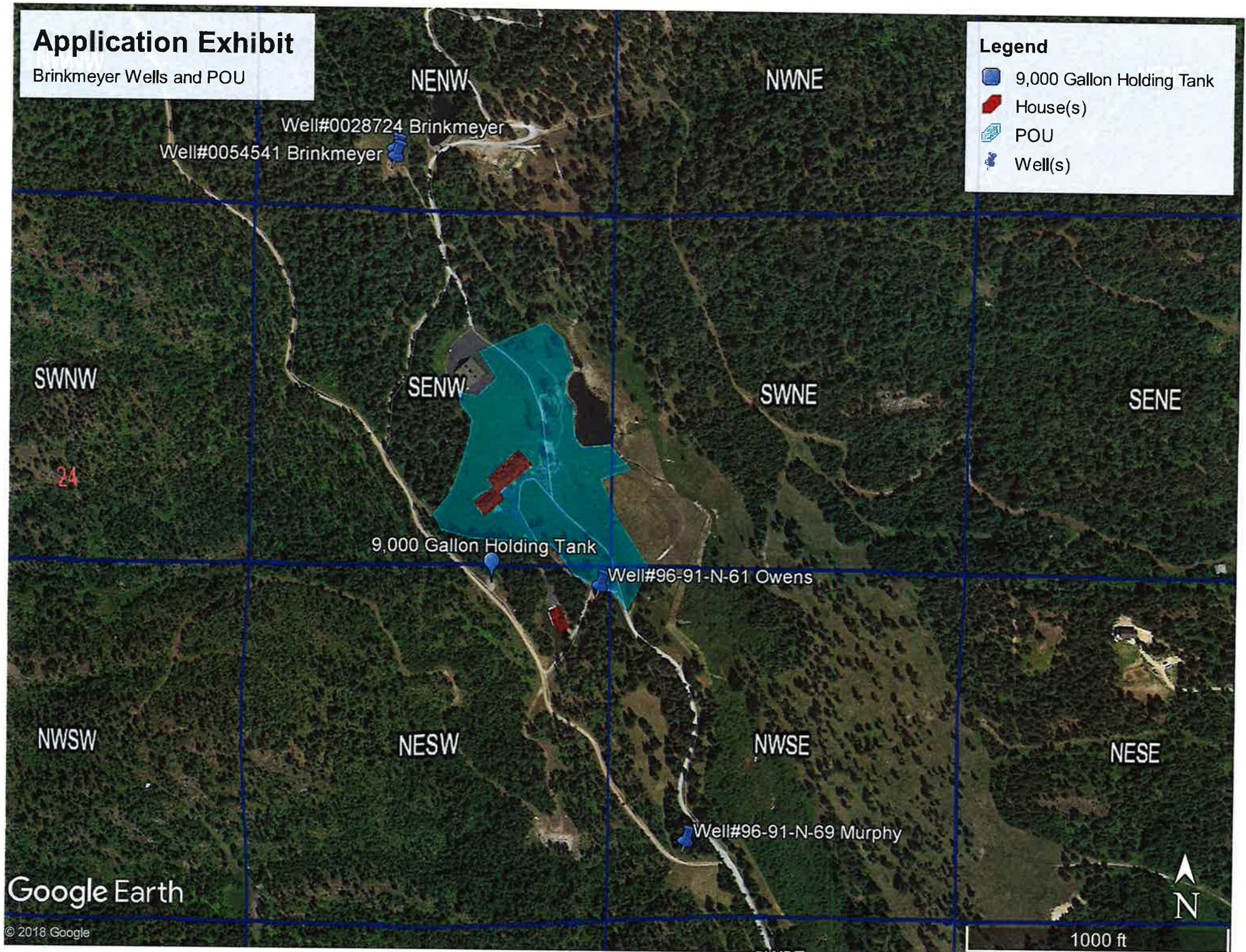
Print Name (and title, if applicable)

Application Exhibit

Brinkmeyer Wells and POU

Legend

- 9,000 Gallon Holding Tank
- House(s)
- POU
- Well(s)



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Form 1007
6/02

SEP 17 2003

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

IDWR/North

1. WELL TAG NO. D

100 28724

DRILLING PERMIT NO.

805391

Water Right or Injection Well No.

SEP 11 2003

2. OWNER:

Name Mark Brinkmeyer

IDWR/North

Address 495 Riley Cr Rd

City Laclede

State ID Zip 83891

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 57N

North ☐

or

South ☐

Rge. 3W

East ☐

or

West ☐

Sec. 24

1/4

or

1/4

Gov't Lot

County

Bene

160 acres

Lat. : : Long. :

Address of Well Site Hornby Cr. Rd

City Laclede

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

Lt. : Blk. : Sub. Name :

4. USE:

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

5. TYPE OF WORK check all that apply

☒ New Well☒ Modify☐ Abandonment

(Replacement, etc.)

☒ Other Amended

6. DRILL METHOD:

☒ Air Rotary☐ Cable☐ Mud Rotary☐ Other

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
Granular Bentonite	0	20	1250#	Poured Dry
			bags	

Was drive shoe used?

☒ Y☐ N

Shoe Depth(s)

137

Was drive shoe seal tested?

☒ Y☐ N

How?

Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8	2	137	.25	ST-1	☒	☐	☒	☐
					☐	☐	☐	☐

Length of Headpipe

Length of Tailpipe

Packer

☐ Y☐ N

Type

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method

Screen Type & Method of Installation

Screen Plugged

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
Coarse Gravel	137	145	500#	Pour From Top

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

60 ft. below ground

Artesian pressure

Depth flow encountered

ft.

Describe access port or control devices:

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SEP 04 2003

IDWR/North

12. WELL TESTS:

☐ Pump☐ Bailor☒ Air☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
40*		130	1

Water Temp.

cold

Bottom hole temp.

Water Quality test or comments:

Never cleared - Si/T

Depth first Water Encounter

125'

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
12	0	1	Top Soil	
12	1	63	Consolidated Sand, Some Gravel	X
8	20	63	Consolidated Sand, Some Gravel	X
8	63	135	Consolidated Sand, Gravel, Cobble	X
8	135	139	Sand Gravel water	X
8	139	145	Consolidated Sand Gravel	X

Screen was pulled
out of hole.Casing Driven to 137'
Gravel pack installed
Repacked - Si/T
Never cleared -

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SEP 8 2003

SCANNED

SEP 23 2003

Department of Water Resources

Completed Depth

145

(Measurable)

Date Started

8-15-03

Completed

8-16-03

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

Fogel Pump & Supply, Inc. Firm No. 537

Principal Driller

Marty Rugo

Date

8-16-03

Driller or Operator II

Date

Operator I

Date

Principal Driller and Rig Operator Required.

Operator I must have signature of Driller/Operator II.

57N 3W 24 SE NW

FORWARD WHITE COPY TO WATER RESOURCES

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

1. WELL TAG NO. D 0054541

DRILLING PERMIT NO

Water Right or Injection Well No.

2. OWNER:

Name MARC BRINKMEYER

Address 1085 HORNBY CREEK ROAD

City SANDPOINT State ID Zip 83864

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. Or Directions to Well.

Twp. 57 North ☒ or South ☐Rge. 03 East ☐ or West ☒

Sec. 25 1/4 NE 1/4 NE 1/4

Gov't Lot _____ County BONNER

Lat: 48:15.960 Long: 116:38.079

Address of Well Site 1085 HORNBY CREEK

City SANDPOINT

Lt. _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK check all that apply

☒ 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	20	5 SACKS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 76Was drive shoe seal tested? ☒ Y ☐ N How? AIR PRESSURE

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing Liner Welded Threaded
6"	+2	76	.250	STEEL	☒ ☐ ☒ ☐
4"	20	560	SCH40	PVC	☐ ☒ ☐ ☒

Length of Headpipe 78' Length of Tailpipe 540'

Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method		SKILL SAW					
Screen Type & Installation							
From	To	Slot Size	Number	Diameter	Material	Casing	Liner
500	560	1/8X6	150	4"	PVC	☐	☒
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight/Volume	Placement Method
N/A				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

60 Ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

BOLT ON CAP

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

12. Well Tests:

☐ Pump ☐ Baller ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Pumping Level	Time
30+			

Water Temp. COLD

Bottom hole temp COLD

Water Quality test or comments:

APPEARS CLEAR W/NO ODOR

Depth first Water Encounter 275

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10	0	3	TOPSOIL		X
10	3	20	DECOMP. GRANITE/SAND		X
8	20	45	DECOMP. GRANITE/SAND		X
8	45	65	GRANITE, BRN, DECOM. SFT		X
8	65	76	GRANITE, GRAY, SOFT		X
6	76	160	GRANITE, GRAY, SOFT		X
6	160	248	GRANITE, SALT & PEPPER		X
6	248	250	BROKEN. 6 GPM	X	
6	250	272	GRANITE, SALT & PEPPER		X
6	272	275	BROKEN 6GPM	X	
6	275	308	GRANITE, SALT & PEPPER		X
6	308	325	GRANITE, BRN, DECOMP.		
			BROKEN, 10 GPM	X	
6	325	420	GRANITE, SALT & PEPPER		X
6	420	425	BROKEN 10 GPM	X	
6	425	560	GRANITE, SALT & PEPPER		X

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JUL 16 2008

IDWR/North

Completed Depth 560'

(Measurable)

Date: Started 6/17/2008

Completed 6/18/2008

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 AMERICAN WELL DRILLING Firm No. 675

Principal Driller *[Signature]* Date 6/23/2008

And

Driller or Operator II

Date

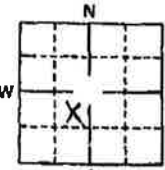
Operator I

Date

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

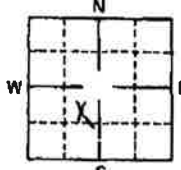
57N 03W 25

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENState 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.

1. WELL OWNER Name <u>John Owens</u> Address <u>5500 Whiskey Rd Sandpoint, ID</u> Drilling Permit No. <u>96-91-N-61</u> Water Right Permit No. _____		7. WATER LEVEL Static water level <u>40</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____ <i>Describe artesian or temperature zones below.</i>																																																																	
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Well diameter increase ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Air ☐ Other _____																																																																	
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		<table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td>30</td><td>145</td><td>6 hr</td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	30	145	6 hr																																																										
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6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Bonner</u> NE 1/4 SW 1/4 Sec. 24, T. 57, S. 3, R. 3, W. 3		10. Work started <u>6-21-91</u> finished <u>6-24-91</u>																																																																	
11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>Bronson Water Wells</u> Firm No. <u>360</u> Address <u>Spirit Lake, ID</u> Date <u>6-26-91</u> Signed by (Firm Official) <u>[Signature]</u> and _____ (Operator) _____																																																																			

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENState 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.

1. WELL OWNER Name <u>Stephen S Murphy</u> Address <u>P.O. Box 1022 Sandpoint, Id 83864</u> Drilling Permit No. <u>96-91-N-69</u> Water Right Permit No. _____		7. WATER LEVEL Static water level <u>40</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ of. Quality _____ <i>Describe artesian or temperature zones below.</i>																																															
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5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>.250 inches</td><td>6 inches</td><td>2 feet</td><td>209 feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun 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 <u>Houston</u> Type <u>Stainless</u> Model No. _____ Diameter <u>5</u> Slot size <u>30</u> Set from <u>209</u> feet to <u>214</u> feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>60'</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld ☐ Cemented between strata Describe access port <u>Well cap</u>		Thickness	Diameter	From	To	.250 inches	6 inches	2 feet	209 feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	RECEIVED JUL 22 1991 Department of Water Resources JUL 3 1991 NORTHWEST REGION IDAHO																											
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6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location.  County <u>Bonner</u> Subdivision Name _____ Lot No. _____ Block No. _____ NE 1/4 SW 1/4 Sec. <u>24</u> T. <u>57</u> S. R. <u>3</u> W. <u>18</u>		10. Work started <u>6-19-91</u> finished <u>6-21-91</u>																																															
11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>Bronson Water Well</u> Firm No. <u>360</u> Address <u>Spirit Lake, ID</u> Date <u>6-20-91</u> Signed by (Firm Official) <u>ADP</u> and _____ (Operator)																																																	

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT



0003365626

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***ANNUAL REPORT**

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: \$0.00

*For Office Use Only***-FILED-**

File #: 0003365626

Date Filed: 12/7/2018 2:01:18 PM

Entity Name and Mailing Address:

PRIEST RIVER LAND COMPANY

The file number of this entity on the records of the Idaho Secretary of State is: 0000300468

Address PO BOX 220
LACLEDE, ID 83841-0220

Entity Details:

Entity Status Active-Good Standing

This entity is organized under the laws of: IDAHO

If applicable, the old file number of this entity on the records of the Idaho Secretary of State was: C97020

The registered agent on record is:

Registered Agent PRENTICE-HALL CORPORATION SYSTEM INC (THE)
Commercial Registered Agent
Physical Address
12550 W EXPLORER DR STE 100
BOISE, ID 83713
Mailing Address
12550 W EXPLORER DR STE 100
ANNE GRIGORAKOS
BOISE, ID 83713

Agent or Address Change

☐ Select if you are appointing a new agent.

Corporate Officers and Directors:

Name of individual or organization	Title	Address
MARC A. BRINKMEYER	President	PO BOX 220 LACLEDE, ID 83841

The annual report must be signed by an authorized signer of the entity.

Marc Brinkmeyer

Sign Here

Signer's Capacity: President

12/07/2018

Date

BULL14-3883 12/07/2018 2:01 PM received by ID secretary of state Lawrence Denney



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region • 7600 N Mineral Drive, Suite 100 • Coeur D'Alene ID 83815-7763

Phone: (208) 762-2800 • Fax: (208) 762-2819

Website: idwr.idaho.gov • Email: northerninfo@idwr.idaho.gov

BRAD LITTLE
Governor

GARY SPACKMAN
Director

March 11, 2019

MARC BRINKMEYER
PO BOX 220
LACLEDE, ID 83841-0220

Application For Permit No. 96-9738

Dear Applicant(s):

The Department of Water Resources has received your water right application. Please refer to the number referenced above in all future correspondence regarding this application.

A legal notice of the application has been prepared and is scheduled for publication in the BONNER COUNTY DAILY BEE on 3/21/2019 and 3/28/2019. Protests to this application may be submitted for a period ending ten (10) days after the second publication.

If the application is protested, you will be sent a copy of each protest. All protests must be resolved before the application can be considered for approval. If the protest(s) cannot be resolved voluntarily, the Department will conduct a conference and/or hearing on the matter.

If the application is not protested, the Department will process your application and notify you of any action taken on the application. If your application is approved, the Department will send you a copy of the permit.

Please contact this office if you have any questions regarding the application.

Sincerely,

A handwritten signature in blue ink that reads 'Tammy Alleman'.

Tammy Alleman
Administrative Assistant

CC:
FORESITE ENGINEERING
C/O RYAN FOBES
418 E LAKESIDE AVE #1
COEUR D ALENE, ID 83814

Alleman, Tammy

From: Alleman, Tammy
Sent: Monday, March 11, 2019 12:28 PM
To: 'bcdblegals@cdapress.com'
Subject: Legal Notice
Attachments: 96-9738 Legal Notice.doc

Please publish the enclosed legal notice in the **Bonner County Daily Bee** on the dates indicated **March 21st and March 28th, 2019** (once a week for two consecutive weekly issues). If you cannot publish the notice on the proposed dates, please contact us immediately. Please send a proof once you have the article ready for print for our review.

An affidavit of publication must be submitted to the Department along with the publication bill. Please send the affidavit and bill to this office before 4/8/2019. Your cooperation is appreciated.

Thank you,

Tammy

*Tammy Alleman
Administrative Assistant
Idaho Department of Water Resources
7600 North Mineral Drive, Suite 100
Coeur d'Alene, ID 83815
Tammy.Alleman@idwr.idaho.gov
208-762-2800 Phone
208-762-2819 Fax*

The following application have been filed to appropriate the public waters of the State of Idaho:

96-9738

MARC BRINKMEYER

PO BOX 220

LACLEDE, ID 83841-0220

Point of Diversion NESW

S24 T57N R03W

BONNER County

Source GROUND WATER

Point of Diversion NWSE

S24 T57N R03W

BONNER County

Source GROUND WATER

Point of Diversion NENW

S24 T57N R03W

BONNER County

Source GROUND WATER

Point of Diversion NENW

S24 T57N R03W

BONNER County

Source GROUND WATER

01/01 to 12/31 0.06 CFS

Use: IRRIGATION

04/01 to 10/31 0.11 CFS

Total Diversion: 0.17 CFS

Date Filed: 3/4/2019

Place Of Use: DOMESTIC

T57N R03W S24

SENEW NESW

Place Of Use: IRRIGATION

T57N R03W S24

SWNE SENEW NESW NWSE

Permits will be subject to all prior water rights. For additional information concerning the property location, contact Northern Region office at (208) 762-2800. Protests may be submitted based on the criteria of Idaho Code § 42-203A. Any protest against the approval of this application must be filed with the Director, Dept. of Water Resources, Northern Region, 7600 N MINERAL DR STE 100, COEUR D ALENE ID 83815-7763 together with a protest fee of \$25.00 for each application on or before 4/8/2019. The protestant must also send a copy of the protest to the applicant.

GARY SPACKMAN, Director

Published on 3/21/2019 and 3/28/2019