

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT
To appropriate the public waters of the State of Idaho

RECEIVED
Permit No. 65D-34281

JAN 03 2017

WATER RESOURCES
WESTERN REGION

AMENDED
Amended 3

1. Name of applicant(s) Air Supply and Pump LLC Phone (208) 999-0261
Name connector (check one): and or and/or

Mailing address 5700 N Willow Creek City Eagle

State Idaho ZIP 83616 Email Devon@AirSupplyandPump.com

2. Name of representative, if any Devon McDonald Phone (208) 999-0261

Mailing address 5700 N Willow Creek City Eagle

State Idaho ZIP 83616 Email Devon@AirSupplyandPump.com

- 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 GROUND WATER 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 #
05N	01E	11			SE	SE	ADA	GROUNDWATER	UPPER WELL

5. Water will be used for the following purposes:

Amount 0.54 cfs for IRRIGATION purposes from 3-1 to 11-15 (both dates inclusive)
(cfs or acre-feet per year)

Amount 0.54 cfs for DOMESTIC purposes from 1-1 to 12-31 (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) 0.54 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. 10" well with 40 hp submersible pump to fill 337,000 gallon tank

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? 9-7-93; drilling firm FRANK SHELLEY; well was drilled for (well owner) BOB HARMON; Drilling Permit No. 63-93-W-6703

For Department Use

Received by CJ Date 8-15-16 Time 10:10 Preliminary check by PH

Fee \$ 250* Received by CJ Receipt No. W044514 Date 8-15-16

* 120* 10-3-16 CJ W044679 *received w/ original App **received w/ Amended 2

8. Description of proposed uses (if irrigation only, go to item 9):
- a. Hydropower; show total feet of head and proposed capacity in kW. _____
 - b. Stockwatering; list number and kind of livestock. _____
 - c. Municipal; must complete and attach the Municipal Water Right Application Checklist.
 - d. Domestic; show number of households 200 HOMES
 - e. Other; describe fully. _____

9. Description of place of use:
- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
 - b. 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	
05N	01E	10													3	1			4
		11									3	3		1		1	4	5	17
		14	5	1															6

Total number of acres to be irrigated: 27 * SEE ATTACHMENT FOR DOMESTIC POU

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? 63-31986 provides water to single parcel. separate source.


11. a. Who owns the property at the point of diversion? Applicant
 b. Who owns the land to be irrigated or place of use? Applicant
 c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: _____

12. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. well will fill a 337,000 gal storage tank at a rate of 0.54 cfs. Storage of water will be used under 24 hr rule.

13. Time required for completion of works and application of water to proposed beneficial use is 5 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
Dawn Marshall company owner

 Print Name (and title, if applicable)

 Signature of Applicant

 Print Name (and title, if applicable)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Ident. No. 63-34281

Point of Diversion/Place of Use Supplement

Attachment to: Application for Permit to Appropriate Water Application for Transfer** Adjudication Claim
 Application for Amendment of Permit Beneficial Use Field Report Statutory Claim

Location of points of diversion (POD):

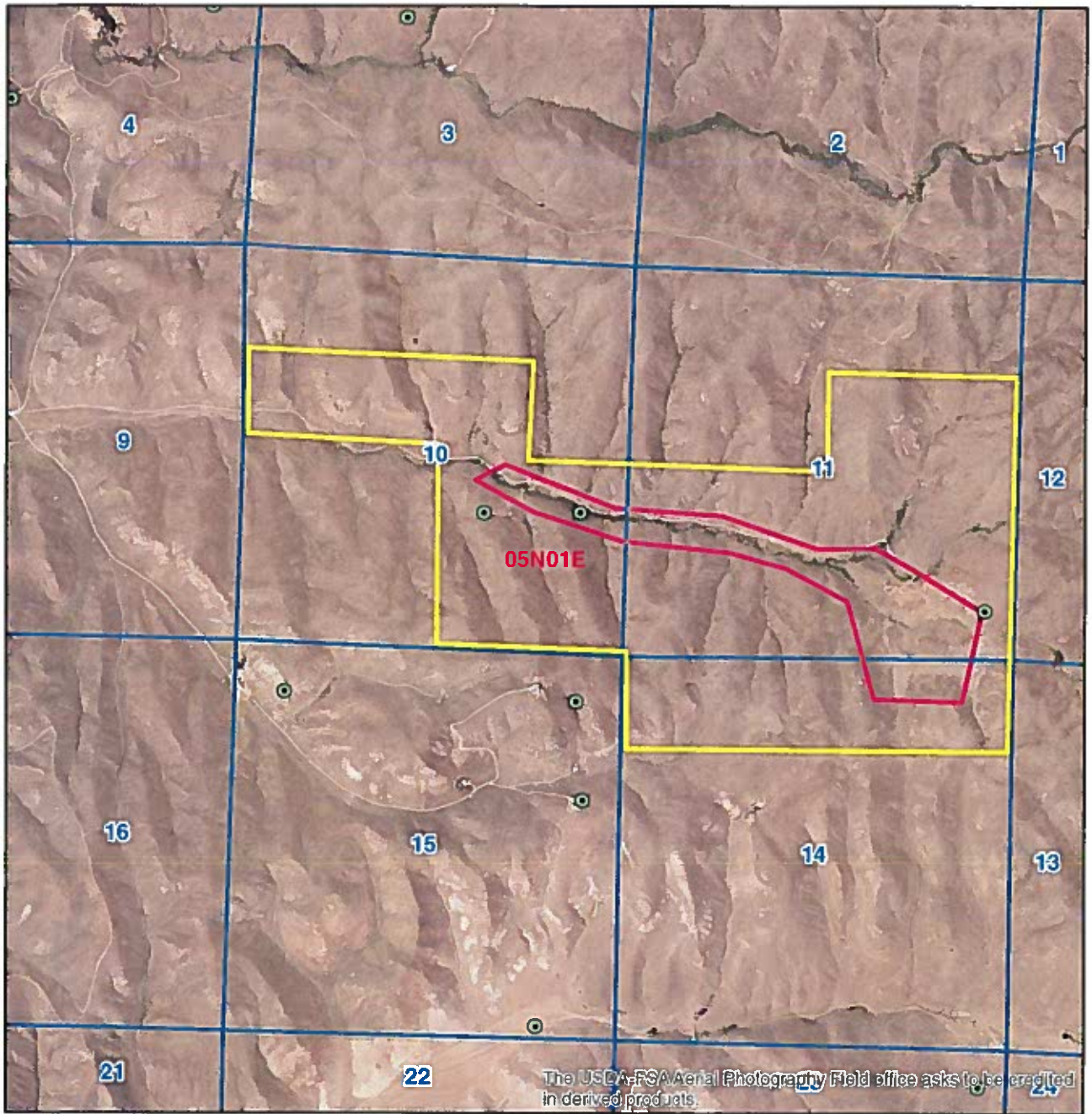
New POD?	Twp	Rge	Sec	Govt Lot	1/4	1/4	1/4	County	Source	Local name or well/diversion tag #
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
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Description of place of use (POU):

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below.

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			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
05N	01E	10			D				D	D					D	D	D	D	
		11			D	D							D	D	D	D	D	D	
		14	D	D				D	D										
05N	01E	1	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D
		12	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D
		13	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D
		24	D	D															
05N	01E	6						03	04	05	D	0	06	07	D				
		7						0	01	02	D	0	03	04	D				
		18						0	01	02	D	0	03	04	D				

**If this supplemental sheet is for an Application for Transfer, insert this page into Part 1B of the application. Page _____



No. W 158343	Due no later than Nov 30, 2016 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. AIR SUPPLY AND PUMP LLC 1164 E BEACON LIGHT RD EAGLE ID 83616	PLEASANT VIEW RANCH STABLES LLC 1164 E BEACON LIGHT RD EAGLE ID 83616-8361			
		3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	PLEASANT VIEW RANCH STABLES LL	1164	EAGLE	ID	USA	83616
MEMBER	WILLOW CREEK APIARIES LLC	5700 N. WILLOW CREEK	EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID W 158343		6. Annual Report must be signed.* Signature: Pleasant View Ranch Stables LLC Name (type or print): Pleasant View Ranch Stables LLC Date: 10/17/2016 Title: Owner				
Processed 10/17/2016		* Electronically provided signatures are accepted as original signatures.				

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Attachments pg 3 - Authorized Signatures 12/23/2016

<p>No. W 149801</p>	<p>Due no later than Mar 31, 2016 Annual Report Form</p>	<p>2. Registered Agent and Address (NO PO BOX)</p>														
<p>Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080</p> <p>NO FILING FEE IF RECEIVED BY DUE DATE</p>		<p>1. Mailing Address: Correct in this box if needed. WILLOW CREEK APIARIES, L.L.C. DEVON MCDONALD 5700 N WILLOW CREEK RD EAGLE ID 83616 USA</p>	<p>DEVON MCDONALD 5700 N WILLOW CREEK RD EAGLE ID 83616-8361</p>													
<p>4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.</p> <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>DEVON MCDONALD</td> <td>5700 WILLOW CREEK RD</td> <td>EAGLE</td> <td>ID</td> <td>USA</td> <td>83616</td> </tr> </tbody> </table>		Office Held	Name	Street or PO Address	City	State	Country	Postal Code	MANAGER	DEVON MCDONALD	5700 WILLOW CREEK RD	EAGLE	ID	USA	83616	<p>3. <u>New</u> Registered Agent Signature:*</p>
Office Held	Name	Street or PO Address	City	State	Country	Postal Code										
MANAGER	DEVON MCDONALD	5700 WILLOW CREEK RD	EAGLE	ID	USA	83616										
<p>5. Organized Under the Laws of: ID W 149801</p>	<p>6. Annual Report must be signed.* Signature: Devon McDonald Name (type or print): Devon McDonald</p> <p>Date: 04/16/2016 Title: Owner</p>															
<p>Processed 04/16/2016</p>		<p>* Electronically provided signatures are accepted as original signatures.</p>														

63-34281

Attachments pg 4 - Authorized Signatures 12/23/2016

No. W 79496	Due no later than Nov 30, 2016 Annual Report Form	2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. PLEASANT VIEW RANCH STABLES LLC COREY & MELANIE BLAINE 1164 E BEACON LIGHT RD EAGLE ID 83616	COREY M BLAINE 1164 E BEACON LIGHT RD EAGLE ID 83616
		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.			
Office Held	Name	Street or PO Address	City State Country Postal Code
MEMBER	MELANIE A BLAINE	1164 E. BEACON LIGHT RD.	EAGLE ID USA 83616
MANAGER	COREY M BLAINE	1164 E. BEACON LIGHT RD.	EAGLE ID USA 83616
5. Organized Under the Laws of: ID W 79496	6. Annual Report must be signed.* Signature: Corey Blaine Date: 10/17/2016 Name (type or print): Corey Blaine Title: Owner		
Processed 10/17/2016		* Electronically provided signatures are accepted as original signatures.	

63-34281

Attachments p 5 - Authorized Signatories

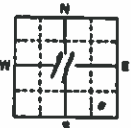
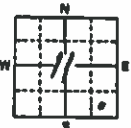
12/23/2016

#1 C

RECEIVED
MAR 15 1994

WELL DRILLER'S REPORT

State 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.

<p>1. WELL OWNER</p> <p>Name <u>Bob Harmon</u> Address <u>P.O. Box 7227 Boise</u> Drilling Permit No. <u>63-93-W-0703</u> Water Right Permit No. _____</p>	<p>7. WATER LEVEL</p> <p>Static water level <u>6</u> feet below land surface. Flowing? <input type="checkbox"/> Yes <input type="checkbox"/> No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug Temperature <u>54</u> °F. Quality <u>good</u> <small>Describe artesian or temperature zones below.</small></p>																																																																						
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement <input type="checkbox"/> Well diameter increase <input type="checkbox"/> Modification <input type="checkbox"/> Abandoned (describe abandonment or modification procedures such as liners, screen, materials, plug depths, etc. in lithologic log, section 9.)</p>	<p>8. WELL TEST DATA</p> <p><input type="checkbox"/> Pump <input type="checkbox"/> Sailer <input checked="" type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td style="text-align: center;"><u>190</u></td> <td style="text-align: center;"><u>180</u></td> <td style="text-align: center;"><u>4</u></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>190</u>	<u>180</u>	<u>4</u>																																																																
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<p>3. PROPOSED USE</p> <p><input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Monitor <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection <input type="checkbox"/> Other _____ (specify type)</p>	<p>9. LITHOLOGIC LOG 081484</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th colspan="2">Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>14</td> <td>0</td> <td>25</td> <td>Sparsa Clay</td> <td></td> <td>X</td> </tr> <tr> <td>8</td> <td>25</td> <td>50</td> <td>Orange Clay</td> <td></td> <td>X</td> </tr> <tr> <td>8</td> <td>50</td> <td>65</td> <td>Granitic soft</td> <td></td> <td>X</td> </tr> <tr> <td>8</td> <td>65</td> <td>75</td> <td>Granite soft</td> <td></td> <td>X</td> </tr> <tr> <td>8</td> <td>75</td> <td>100</td> <td>Red. with clay</td> <td></td> <td>X</td> </tr> <tr> <td>8</td> <td>100</td> <td>125</td> <td>White clay</td> <td></td> <td>X</td> </tr> <tr> <td>8</td> <td>125</td> <td>225</td> <td>Basalt + fine granite</td> <td>X</td> <td></td> </tr> <tr> <td>8</td> <td>225</td> <td>250</td> <td>granite</td> <td></td> <td>X</td> </tr> <tr> <td colspan="4" style="text-align: center;">Water 125-133</td> <td colspan="2"></td> </tr> <tr> <td colspan="4" style="text-align: center;">215-222</td> <td colspan="2"></td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	14	0	25	Sparsa Clay		X	8	25	50	Orange Clay		X	8	50	65	Granitic soft		X	8	65	75	Granite soft		X	8	75	100	Red. with clay		X	8	100	125	White clay		X	8	125	225	Basalt + fine granite	X		8	225	250	granite		X	Water 125-133						215-222					
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<p>4. METHOD DRILLED</p> <p><input checked="" type="checkbox"/> Rotary <input checked="" type="checkbox"/> Air <input type="checkbox"/> Auger <input type="checkbox"/> Reverse rotary <input type="checkbox"/> Cable <input type="checkbox"/> Mud <input type="checkbox"/> Other _____ (backhoe, hydraulic, etc.)</p>	<p>10.</p> <p>Work started <u>8-15-93</u> finished <u>9-7-93</u></p>																																																																						
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table border="0" style="width:100%;"> <tr> <td>Thickness</td> <td>Diameter</td> <td>From</td> <td>To</td> </tr> <tr> <td><u>20</u> inches</td> <td><u>10</u> inches</td> <td>+ <u>1</u> feet</td> <td><u>28</u> feet</td> </tr> <tr> <td><u>30</u> inches</td> <td><u>6</u> inches</td> <td>+ <u>2</u> feet</td> <td><u>34</u> feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </table> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was a packer or seal used? <input type="checkbox"/> Yes <input type="checkbox"/> No Perforated? <u>no</u> <input type="checkbox"/> Yes <input type="checkbox"/> No How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch <input type="checkbox"/> Gun Size of perforation? _____ inches by _____ inches _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet</p> <p>Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Manufacturer _____ Type _____ Top Packer or Headpipe _____ Bottom of Tailpipe _____</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Size of gravel _____ Placed from _____ feet to _____ feet</p> <p>Surface seal depth <u>25</u> Material used in seal: <input checked="" type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Pudding clay <input type="checkbox"/> _____ Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing <input checked="" type="checkbox"/> Overbore to seal depth Method of joining casing: <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Solvent Weld <input type="checkbox"/> Cemented between strata</p> <p>Describe access port <u>Seal Seal</u></p>	Thickness	Diameter	From	To	<u>20</u> inches	<u>10</u> inches	+ <u>1</u> feet	<u>28</u> feet	<u>30</u> inches	<u>6</u> inches	+ <u>2</u> feet	<u>34</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	<p>11. DRILLER'S CERTIFICATION</p> <p>I/We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>Frank Shelly</u> Firm No. <u>326</u> Address <u>960 N W 14TH</u> Date _____ Signed by Drilling Supervisor <u>Frank Shelly</u> and _____ (Operator) _____ (If different than the Drilling Supervisor)</p>																																																						
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<p>6. LOCATION OF WELL</p> <p>Sketch map location must agree with written location.</p>  <p>Subdivision Name _____ Lot No. _____ Block No. _____ County _____ Address of Well Site <u>SM north of east</u> <small>(give at least name of road)</small> <u>SE 1/4 SE 1/4 Sec. 11, R. 1, S. 1</u> <input type="checkbox"/> or S <input type="checkbox"/> <input checked="" type="checkbox"/> or W <input type="checkbox"/></p>	<p>7. LOCATION OF WELL</p> <p>Sketch map location must agree with written location.</p>  <p>Subdivision Name _____ Lot No. _____ Block No. _____ County _____ Address of Well Site _____ <small>(give at least name of road)</small> T. _____ S. _____ or S <input type="checkbox"/> <input checked="" type="checkbox"/> or W <input type="checkbox"/></p>																																																																						

RECEIVED
OCT 19 1993
MICROFILMED
AUG 18 1997
WATER RESOURCES
WESTERN REGION

63-34281

Attachments Pg 6 - well log

RECEIVED 15 2016

SEP 26 2016

WATER RESOURCES WESTERN REGION

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES

APPLICATION FOR PERMIT

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Ident. No. 63-34281

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SEP 08 2016

WATER RESOURCES WESTERN REGION

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Name connector (check one): and or and/or

Mailing address 1164 E. Beacon Light Rd. Eagle Idaho 83616

Email devon@airsupplyandpump

2. Name of representative, if any Devon McDonald

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Table with 10 columns: Twp, Rge, Sec, Govt Lot, %, %, %, County, Source, Local name or tag #. Row 1: 05N, 01E, 11, SE, SE, ADA, Well, Upper Well.

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d. Is ground water with a temperature of greater than 85°F being sought? Yes No
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Received by Chad Jones Date 8/15/16 Time 12:46 Preliminary check by PH
Fee \$ 250.00 Received by Chad Jones Receipt No. W044514 Date 8/15/16
\$120.00 W044679

Amended Application (2) Superseded by Amended Application (3)

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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	01E	10	2	2	1	1				5	2						5	6	27
		11																	
		10												3	1				4
		11								3	3		1		1	4	5		17
		14	5	1															6

Total number of acres to be irrigated: 27

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? yes, domestic water right and stock water


11. a. Who owns the property at the point of diversion? Air Supply And Pump LLC
 b. Who owns the land to be irrigated or place of use? Air Supply And Pump LLC, Avimore
 c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: Devon McDonald owns Air Supply And Pump LLC. Avimore Agreement. farm

12. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. 234 gpm will fill storage at 336960 gallons per day and current use per local Model Home according to Avimore is 180 gpd. which is calculated to 1872 Homes

13. Time required for completion of works and application of water to proposed beneficial use is 5 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
 Devon McDonald

 Print Name (and title, if applicable)

 Signature of Applicant

 Print Name (and title, if applicable)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Ident. No. _____

Point of Diversion/Place of Use Supplement

Attachment to: Application for Permit to Appropriate Water Application for Transfer** Adjudication Claim
 Application for Amendment of Permit Beneficial Use Field Report Statutory Claim

Location of points of diversion (POD):

New POD?	Twp	Rge	Sec	Govt Lot	¼	¼	¼	County	Source	Local name or well/diversion tag #
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										

Description of place of use (POU):

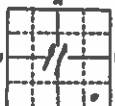
- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below.

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	01E	10			D				D	D					D	D	D	D	
		11			D	D					D	D	D	D	D	D	D	D	
		14	D	D			D	D											
05N	01E	1	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	
		12	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	
		13	D	D	D	D	D	D	D	D	D	D			D	D	D	D	
		24	D	D															
05N	02E	6					D3	D4	D5	D	D	D6	D7	D					
		7					D	D1	D2	D	D	D3	D4	D					
		18					D	D1	D2	D	D	D3	D4	D					

**If this supplemental sheet is for an Application for Transfer, insert this page into Part 1B of the application. Page _____

WELL DRILLER'S REPORT

State 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.

<p>1. WELL OWNER</p> <p>Name <u>Bob Harman</u></p> <p>Address <u>P.O. Box 7227 Boise</u></p> <p>Drilling Permit No. <u>63-93-W-0703</u></p> <p>Water Right Permit No. _____</p>	<p>7. WATER LEVEL</p> <p>Static water level <u>6</u> feet below land surface.</p> <p>Flowing? <input type="checkbox"/> Yes <input type="checkbox"/> No G.P.M. flow _____</p> <p>Artesian closed-in pressure _____ p.s.i.</p> <p>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug</p> <p>Temperature <u>57</u> °F. Quality <u>good</u></p> <p style="font-size: small;">Describe strata or temperature zones below.</p>																																																																						
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement</p> <p><input type="checkbox"/> Well diameter increase <input type="checkbox"/> Modification</p> <p><input type="checkbox"/> Abandoned (describe abandonment or modification procedures such as liners, screen, materials, plug depths, etc. in lithologic log, section 8.)</p>	<p>8. WELL TEST DATA</p> <p><input type="checkbox"/> Pump <input type="checkbox"/> Baller <input checked="" type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <tr> <th style="width: 33%;">Discharge G.P.M.</th> <th style="width: 33%;">Pumping Level</th> <th style="width: 33%;">Hours Pumped</th> </tr> <tr> <td style="text-align: center;"><u>190</u></td> <td style="text-align: center;"><u>180</u></td> <td style="text-align: center;"><u>4</u></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>190</u>	<u>180</u>	<u>4</u>																																																																
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<p>3. PROPOSED USE</p> <p><input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Monitor</p> <p><input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection</p> <p><input type="checkbox"/> Other _____ (specify type)</p>	<p>9. LITHOLOGIC LOG 081484</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th colspan="2">Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td><u>14</u></td> <td><u>0</u></td> <td><u>25</u></td> <td><u>Brown Clay</u></td> <td style="text-align: center;">X</td> <td style="text-align: center;"> </td> </tr> <tr> <td><u>8</u></td> <td><u>25</u></td> <td><u>50</u></td> <td><u>Brown Clay</u></td> <td style="text-align: center;">X</td> <td style="text-align: center;"> </td> </tr> <tr> <td><u>8</u></td> <td><u>50</u></td> <td><u>65</u></td> <td><u>Granite - soft</u></td> <td style="text-align: center;">X</td> <td style="text-align: center;"> </td> </tr> <tr> <td><u>8</u></td> <td><u>65</u></td> <td><u>75</u></td> <td><u>Granite - soft</u></td> <td style="text-align: center;">X</td> <td style="text-align: center;"> </td> </tr> <tr> <td><u>8</u></td> <td><u>75</u></td> <td><u>100</u></td> <td><u>Red - white clay</u></td> <td style="text-align: center;">X</td> <td style="text-align: center;"> </td> </tr> <tr> <td><u>8</u></td> <td><u>100</u></td> <td><u>125</u></td> <td><u>White clay</u></td> <td style="text-align: center;">X</td> <td style="text-align: center;"> </td> </tr> <tr> <td><u>8</u></td> <td><u>125</u></td> <td><u>150</u></td> <td><u>Basalt type</u></td> <td style="text-align: center;">X</td> <td style="text-align: center;"> </td> </tr> <tr> <td><u>8</u></td> <td><u>150</u></td> <td><u>200</u></td> <td><u>granite</u></td> <td style="text-align: center;">X</td> <td style="text-align: center;"> </td> </tr> <tr> <td colspan="4" style="text-align: center;"><u>Water RS-133</u></td> <td> </td> <td> </td> </tr> <tr> <td colspan="4" style="text-align: center;"><u>215-222</u></td> <td> </td> <td> </td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	<u>14</u>	<u>0</u>	<u>25</u>	<u>Brown Clay</u>	X		<u>8</u>	<u>25</u>	<u>50</u>	<u>Brown Clay</u>	X		<u>8</u>	<u>50</u>	<u>65</u>	<u>Granite - soft</u>	X		<u>8</u>	<u>65</u>	<u>75</u>	<u>Granite - soft</u>	X		<u>8</u>	<u>75</u>	<u>100</u>	<u>Red - white clay</u>	X		<u>8</u>	<u>100</u>	<u>125</u>	<u>White clay</u>	X		<u>8</u>	<u>125</u>	<u>150</u>	<u>Basalt type</u>	X		<u>8</u>	<u>150</u>	<u>200</u>	<u>granite</u>	X		<u>Water RS-133</u>						<u>215-222</u>					
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<p>4. METHOD DRILLED</p> <p><input checked="" type="checkbox"/> Rotary <input checked="" type="checkbox"/> Air <input type="checkbox"/> Auger <input type="checkbox"/> Reverse rotary</p> <p><input type="checkbox"/> Cable <input type="checkbox"/> Mud <input type="checkbox"/> Other _____ (backhoe, hydraulic, etc.)</p>	<p>10.</p> <p>Work started <u>8-15-93</u> finished <u>9-7-93</u></p>																																																																						
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <p>Thickness _____ Diameter _____ From _____ feet To _____ feet</p> <p><u>20</u> inches <u>10</u> inches + <u>1</u> feet <u>28</u> feet</p> <p><u>20</u> inches <u>6</u> inches + <u>2</u> feet <u>34</u> feet</p> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was a packer or seal used? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Perforated? <u>NO</u> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch <input type="checkbox"/> Gun</p> <p>Size of perforation? _____ inches by _____ inches</p> <p>Number _____ From _____ To _____</p> <p>_____ perforations _____ feet _____ feet</p> <p>_____ perforations _____ feet _____ feet</p> <p>_____ perforations _____ feet _____ feet</p> <p>Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Manufacturer _____ Type _____</p> <p>Top Packer or Headpipe _____</p> <p>Bottom of Tailpipe _____</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Size of gravel _____</p> <p>Placed from _____ feet to _____ feet</p> <p>Surface seal depth <u>25</u> Material used in seal: <input checked="" type="checkbox"/> Cement grout</p> <p><input type="checkbox"/> Bentonite <input type="checkbox"/> Puddling clay <input type="checkbox"/> _____</p> <p>Sealing procedure used: <input type="checkbox"/> Slurry pit</p> <p><input type="checkbox"/> Temp. surface casing <input checked="" type="checkbox"/> Overbore to seal depth</p> <p>Method of joining casing: <input type="checkbox"/> Threaded <input type="checkbox"/> Welded</p> <p><input type="checkbox"/> Solvent Weld <input type="checkbox"/> Cemented between strata</p> <p>Describe access port <u>Seal Seal</u></p>	<p>11. DRILLER'S CERTIFICATION</p> <p>We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>Frank Shelly</u> Firm No. <u>326</u></p> <p>Address <u>960 N W 14th</u> Date _____</p> <p>Signed by Drilling Supervisor <u>Frank Shelly</u></p> <p>and _____</p> <p>(Operator) _____</p> <p style="font-size: x-small;">(If different than the Drilling Supervisor)</p>																																																																						
<p>6. LOCATION OF WELL</p> <p>Sketch map location must agree with written location.</p>  <p>Subdivision Name _____</p> <p>Lot No. _____ Block No. _____</p> <p>County _____</p> <p>Address of Well Site <u>SM north of creek</u></p> <p style="font-size: x-small;">(give at least name of road)</p> <p><u>SE</u> 1/4 <u>SE</u> 1/4 Sec. <u>11</u>, R. <u>1</u> T. <u>9</u> S. <u>6</u> W. <input type="checkbox"/></p>	<p style="text-align: center;">FORWARDED THE WHITE COPY TO THE DEPARTMENT</p>																																																																						

RECEIVED MICROFILMED
 OCT 19 1993 AUG 18 1997
 WATER RESOURCES
 WESTERN REGION



COPY

September 9, 2016

Idaho Department of Water Resources
P. O. Box 83720
Boise, ID 83720-0098

Dear Department of Water Resources Personnel:

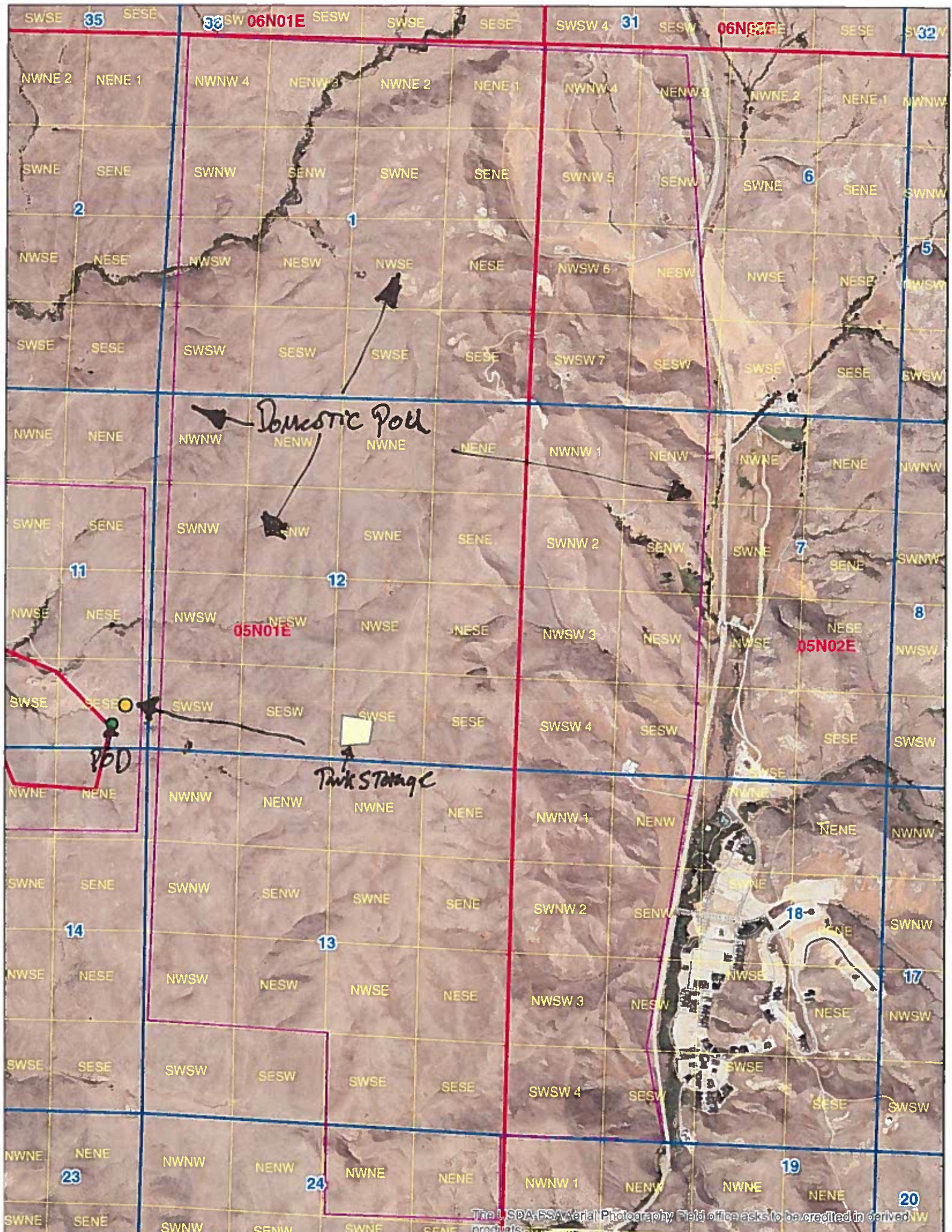
First American Title Insurance Co., as Trustee of Trust No. 8562 ("FATCO"), is the owner of property adjacent to property owned by Mr. Devon McDonald. Avimor Partners, LLC is a beneficiary to the FATCO Trust, and as a result, has an ownership interest in the subject property.

Avimor Partners acknowledges and approves of Mr. McDonald's recent application to change and expand the point of use for his current water right. Specifically, Mr. McDonald is applying to expand the point of use of his water right on the adjacent property owned by First American/Avimor Partners. If you have any questions or comments, please do not hesitate to contact me.

Sincerely,

A handwritten signature in blue ink, appearing to read "Dan Richter".

Dan Richter
Member Manager
Avimor Partners



Domestic Pool

Tank Storage

P50



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code
Filing fee: \$100 typed, \$120 not typed

2015 NOV -9 PM 3: 23

SECRETARY OF STATE
STATE OF IDAHO

Complete and submit the application in duplicate.

1. The name of the limited liability company is:

Air Supply And Pump LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

1164 E. Beacon Light Rd. Eagle, Idaho 83616

(Street Address)

(Mailing Address, if different)

3. The name and complete street address of the registered agent:

Pleasant View Ranch Stables LLC 1164 E. Beacon Light Rd.

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Pleasant View Ranch Stables LLC 1164 E. Beacon Light Rd. Eagle, Idaho 83616

(Name)

(Address)

Willow Creek Apiaries, L.L.C.

5700 N. Willow Creek Rd. Eagle, Idaho 83616

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

1164 E. Beacon Light Rd. Eagle, Idaho 83616

(Address)

Signature of organizer(s).

Printed Name: **Corey Blaine**

Signature: *Corey Blaine*

Printed Name: **Devon McDonald**

Signature: *Devon McDonald*

Secretary of State use only
 IDAHO SECRETARY OF STATE
 11/09/2015 05:00
 CK: 3352902 CT: 172099 BH: 1499734
 1@ 100.00 = 100.00 ORGAN LLC #2

W158343

Attachments on 6 - corporate officers

<p>No. W 93659</p>	<p align="center">Due no later than May 31, 2016 Annual Report Form</p>	<p>2. Registered Agent and Address (NO PO BOX)</p>																						
<p>Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080</p> <p>NO FILING FEE IF RECEIVED BY DUE DATE</p>		<p>1. Mailing Address: Correct in this box if needed. AVIMOR PARTNERS, LLC TERESA MCLEOD C/O 950 W BANNOCK STE 810 BOISE ID 83702</p>	<p>TERESA MCLEOD 950 W BANNOCK ST STE 810 BOISE ID 83702</p>																					
<p>4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.</p>		<p>3. New Registered Agent Signature:*</p>																						
<table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>MEMBER</td> <td>TERESA MCLEOD</td> <td>PO BOX 59</td> <td>MARSING</td> <td>ID</td> <td>USA</td> <td>83639</td> </tr> <tr> <td>MEMBER</td> <td>DAN RICHTER</td> <td>PO BOX 1360</td> <td>CALDWELL</td> <td>ID</td> <td>USA</td> <td>83606-1360</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	MEMBER	TERESA MCLEOD	PO BOX 59	MARSING	ID	USA	83639	MEMBER	DAN RICHTER	PO BOX 1360	CALDWELL	ID	USA	83606-1360
Office Held	Name	Street or PO Address	City	State	Country	Postal Code																		
MEMBER	TERESA MCLEOD	PO BOX 59	MARSING	ID	USA	83639																		
MEMBER	DAN RICHTER	PO BOX 1360	CALDWELL	ID	USA	83606-1360																		
<p>5. Organized Under the Laws of: ID W 93659</p>	<p>6. Annual Report must be signed.* Signature: TERESA MCLEOD Name (type or print): TERESA MCLEOD</p> <p>Date: 04/18/2016 Title: MEMBER</p>																							
<p>Processed 04/18/2016</p>		<p>* Electronically provided signatures are accepted as original signatures.</p>																						

63-34281

Attachments pg 10 - Authorized Signatories

RECEIVED

AUG 15 2016

WATER RESOURCES WESTERN REGION

STATE OF IDAHO DEPARTMENT OF WATER RESOURCES

COPY

APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

Ident. No. _____

RECEIVED

SEP 08 2016

Amended(1) WATER RESOURCES WESTERN REGION

- 1. Name of applicant(s) Air Supply And Pump LLC
 Mailing address 1164 E. Beacon Light Rd. Eagle Idaho 83616
 Name connector (check one): and or and/or
 Email devon@airsupplyandpump
- 2. Name of representative, if any Devon McDonald
 Mailing address 5700 N. Willow Creek Eagle Idaho 83616
 Phone 208-999-0261
 Email devon@airsupplyandpump
- 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 providing authority to sign for the applicant.
- 3. Source of water supply Ground, well which is a tributary of Big Gulch Creek
- 4. Location of point(s) of diversion:

Twp	Rge	Sec	Govt Lot	1/4	1/4	1/4	County	Source	Local name or tag #
05N	01E	11		SE	SE		ADA	Well	Upper Well

- 5. Water will be used for the following purposes:
 Amount .054 cfs for irrigation purposes from 3/1 to 11/15 (both dates inclusive)
 (cfs or acre-feet per year)
 Amount .054 cfs for domestic use purposes from 1/1 to 12/31 (both dates inclusive)
 (cfs or acre-feet per year)
 Amount 1.50 ~~AKA~~ for Domestic Storage purposes from 1/1 to 12/31 (both dates inclusive)
 (cfs or acre-feet per year)
 Amount 1.50 ~~AKA~~ for Domestic for Storage purposes from 1/1 to 12/31 (both dates inclusive)
 (cfs or acre-feet per year)

6. Total quantity to be appropriated is (a) .54 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. 10" well with 40HP submersible pump
To fill Storage Tank 1/2 Million gallon
- 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 11. 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? 9/7/1993; drilling firm see attached well drillers report; well was drilled for (well owner) Bob Harmon; Drilling Permit No. 63-93-W-6703

Received by [Signature] Date 8/15/16 Time 10:40 Preliminary check by PH
 Fee \$ 250⁰⁰ Received by [Signature] Receipt No. WD44514 Date 8/15/16

Superseded by Amended Application (2)

8. Description of proposed uses (if irrigation only, go to item 9):
- a. Hydropower; show total feet of head and proposed capacity in kW. _____
 - b. Stockwatering; list number and kind of livestock. _____
 - c. Municipal; must complete and attach the [Municipal Water Right Application Checklist](#).
 - d. Domestic; show number of households ~~187~~ 1872 - Home S
 - e. Other; describe fully. irrigation

9. Description of place of use:
- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
 - b. 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	
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Total number of acres to be irrigated: 27

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? yes, domestic water right and stock water

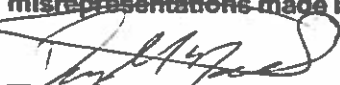
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 b. Who owns the land to be irrigated or place of use? Air Supply And Pump LLC, Avimore
 c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: Devon McDonald owns Air Supply And Pump LLC. Avimore Agreement farm

12. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. 234 gpm will fill storage at 336960 gallons per day and current use per head Model Home according to Avimore is 180 gpd. which is calculated to 1872 Homes

13. Time required for completion of works and application of water to proposed beneficial use is 5 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
 Devon McDonald

 Print Name (and title, if applicable)

 Signature of Applicant

 Print Name (and title, if applicable)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Ident. No. _____

Point of Diversion/Place of Use Supplement

Attachment to: Application for Permit to Appropriate Water Application for Transfer** Adjudication Claim
 Application for Amendment of Permit Beneficial Use Field Report Statutory Claim

Location of points of diversion (POD):

New POD?	Twp	Rge	Sec	Govt Lot	¼	¼	¼	County	Source	Local name or well/diversion tag #
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
<input type="checkbox"/> Yes										
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<input type="checkbox"/> Yes										

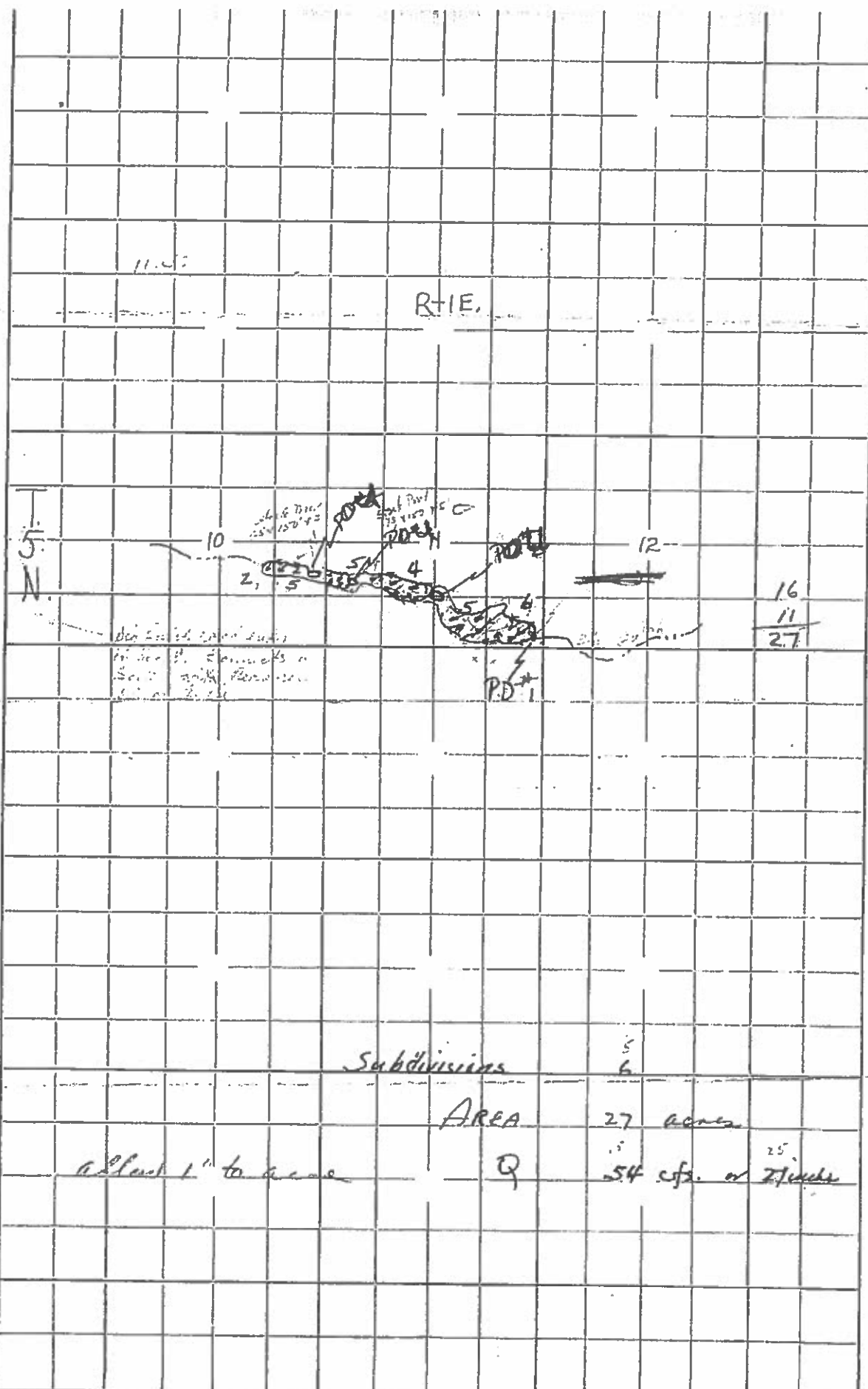
Description of place of use (POU):

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below.

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	01E	10			D				D	D					D	D	D	D		
		11	D	D	D	D					D	D	D	D			D	D		
		14	D	D			D	D												
05N	01E	1	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D		
		12	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D		
		13	D	D	D	D	D	D	D	D	D	D			D	D	D	D		
		24	D	D																
05N	02E	6					D3	D4	D5	D	D	D6	D7	D						
		7					D	D1	D2	D	D	D	D3	D4	D					
		18					D	D1	D2	D	D	D	D3	D4	D					

**If this supplemental sheet is for an Application for Transfer, insert this page into Part 1B of the application.

180 Part 16-52
 Per Day 800 tons
 1/2 1/2 1/2 1/2



234 gal/minute

Scale: 2 Inches Equals 1 Mile. Draw Map In Ink.

25081

WELL DRILLER'S REPORT

State 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.

<p>1. WELL OWNER</p> <p>Name <u>Bob Harmon</u></p> <p>Address <u>P.O. Box 7727 Boise</u></p> <p>Drilling Permit No. <u>63-93-W-6703</u></p> <p>Water Right Permit No. _____</p>	<p>7. WATER LEVEL</p> <p>Static water level <u>6</u> feet below land surface.</p> <p>Flowing? <input type="checkbox"/> Yes <input type="checkbox"/> No G.P.M. flow _____</p> <p>Artesian closed-in pressure _____ p.s.i.</p> <p>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug</p> <p>Temperature <u>57</u> °F. Quality <u>good</u></p> <p style="font-size: small;">Describe artesian or temperature zones below.</p>																																																																						
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement</p> <p><input type="checkbox"/> Well diameter increase <input type="checkbox"/> Modification</p> <p><input type="checkbox"/> Abandoned (describe abandonment or modification procedures such as liners, screen, materials, plug depths, etc. in lithologic log, section 9.)</p>	<p>8. WELL TEST DATA</p> <p><input type="checkbox"/> Pump <input type="checkbox"/> Bailor <input checked="" type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <tr> <th style="width: 33%;">Discharge G.P.M.</th> <th style="width: 33%;">Pumping Level</th> <th style="width: 33%;">Hours Pumped</th> </tr> <tr> <td style="text-align: center;"><u>190</u></td> <td style="text-align: center;"><u>180</u></td> <td style="text-align: center;"><u>4</u></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>190</u>	<u>180</u>	<u>4</u>																																																																
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<p>4. METHOD DRILLED</p> <p><input checked="" type="checkbox"/> Rotary <input checked="" type="checkbox"/> Air <input type="checkbox"/> Auger <input type="checkbox"/> Reverse rotary</p> <p><input type="checkbox"/> Cable <input type="checkbox"/> Mud <input type="checkbox"/> Other _____ (backhoe, hydraulic, etc.)</p>	<p>10.</p> <p>Work started <u>8-15-93</u> finished <u>9-7-93</u></p>																																																																						
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>20</u> inches</td> <td><u>10</u> inches</td> <td><u>1</u> feet</td> <td><u>28</u> feet</td> </tr> <tr> <td><u>20</u> inches</td> <td><u>6</u> inches</td> <td><u>2</u> feet</td> <td><u>34</u> feet</td> </tr> </tbody> </table> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was a packer or seal used? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Perforated? <u>no</u> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch <input type="checkbox"/> Gun</p> <p>Size of perforation? _____ inches by _____ inches</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </table> <p>Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Manufacturer _____ Type _____</p> <p>Top Packer or Headpipe _____</p> <p>Bottom of Tailpipe _____</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Gravel packed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Size of gravel _____</p> <p>Placed from _____ feet to _____ feet</p> <p>Surface seal depth: _____ Material used in seal: <input checked="" type="checkbox"/> Cement grout</p> <p><input type="checkbox"/> Bentonite <input type="checkbox"/> Puddling clay <input type="checkbox"/> _____</p> <p>Sealing procedure used: <input type="checkbox"/> Slurry pit</p> <p><input type="checkbox"/> Temp. surface casing <input checked="" type="checkbox"/> Overbore to seal depth</p> <p>Method of joining casing: <input type="checkbox"/> Threaded <input type="checkbox"/> Welded</p> <p><input type="checkbox"/> Solvent Weld <input type="checkbox"/> Cemented between strata</p> <p>Describe access port <u>Sani Seal</u></p>	Thickness	Diameter	From	To	<u>20</u> inches	<u>10</u> inches	<u>1</u> feet	<u>28</u> feet	<u>20</u> inches	<u>6</u> inches	<u>2</u> feet	<u>34</u> feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	<p>11. DRILLER'S CERTIFICATION</p> <p>I/We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>Frank Shely</u> Firm No. <u>326</u></p> <p>Address <u>900 W 14TH</u> Date _____</p> <p>Signed by Drilling Supervisor <u>Frank Shely</u></p> <p>and _____</p> <p>(Operator) _____</p> <p style="font-size: x-small;">(If different than the Drilling Supervisor)</p>																																														
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 OCT 19 1993 AUG 18 1997

RECEIVED

AUG 15 2016

WATER RESOURCES WESTERN REGION

COPY STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

Ident. No. _____

APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name of applicant(s) Air Supply And Pump LLC Phone 208-999-0261
 Name connector (check one): and or and/or
 Mailing address 1164 E. Beacon Light Rd. Eagle Idaho 83616 Email devon@airsupplyandpump
2. Name of representative, if any Devon McDonald Phone 208-999-0261
 Mailing address 5700 N. Willow Creek Eagle Idaho 83616 Email devon@airsupplyandpump
- 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 providing authority to sign for the applicant.

3. Source of water supply Ground, well which is a tributary of Big Gulch Creek

4. Location of point(s) of diversion:

Twp	Rge	Sec	Govt Lot	1/4	1/4	1/4	County	Source	Local name or tag #
05N	01E	11					ADA	Well	Upper Well

5. Water will be used for the following purposes:
- Amount .054 cfs for irrigation purposes from 3/1 to 11/15 (both dates inclusive)
 (cfs or acre-feet per year)
- Amount .054 cfs for domestic use purposes from 1/1 to 12/31 (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) .54 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. 10" well with 40HP submersible pump
- 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 11. 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? 9/7/1993; drilling firm see attached well drillers report; well was drilled for (well owner) Bob Harmon; Drilling Permit No. 63-93-W-6703

Received by [Signature] Date 8/15/16 Time 10:40 Preliminary check by [Signature]
 Fee \$ 250⁰⁰ Received by [Signature] Receipt No. WD44514 Date 8/15/16

Superseded by Amended Application

8. Description of proposed uses (if irrigation only, go to item 9):
- a. Hydropower; show total feet of head and proposed capacity in kW. _____
 - b. Stockwatering; list number and kind of livestock. _____
 - c. Municipal; must complete and attach the [Municipal Water Right Application Checklist](#).
 - d. Domestic; show number of households 224
 - e. Other; describe fully. irrigation

9. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. 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
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05N	01E	10			4	5			5	2				5				6	27
		11																	

Total number of acres to be irrigated: 27

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? yes, domestic water right and stock water


11. a. Who owns the property at the point of diversion? Air Supply And Pump LLC
- b. Who owns the land to be irrigated or place of use? Air Supply And Pump LLC
- c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: Devon McDonald owns Air Supply And Pump LLC

12. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. See attached.

13. Time required for completion of works and application of water to proposed beneficial use is 3 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
 Devon McDonald


 Print Name (and title, if applicable)

 Signature of Applicant

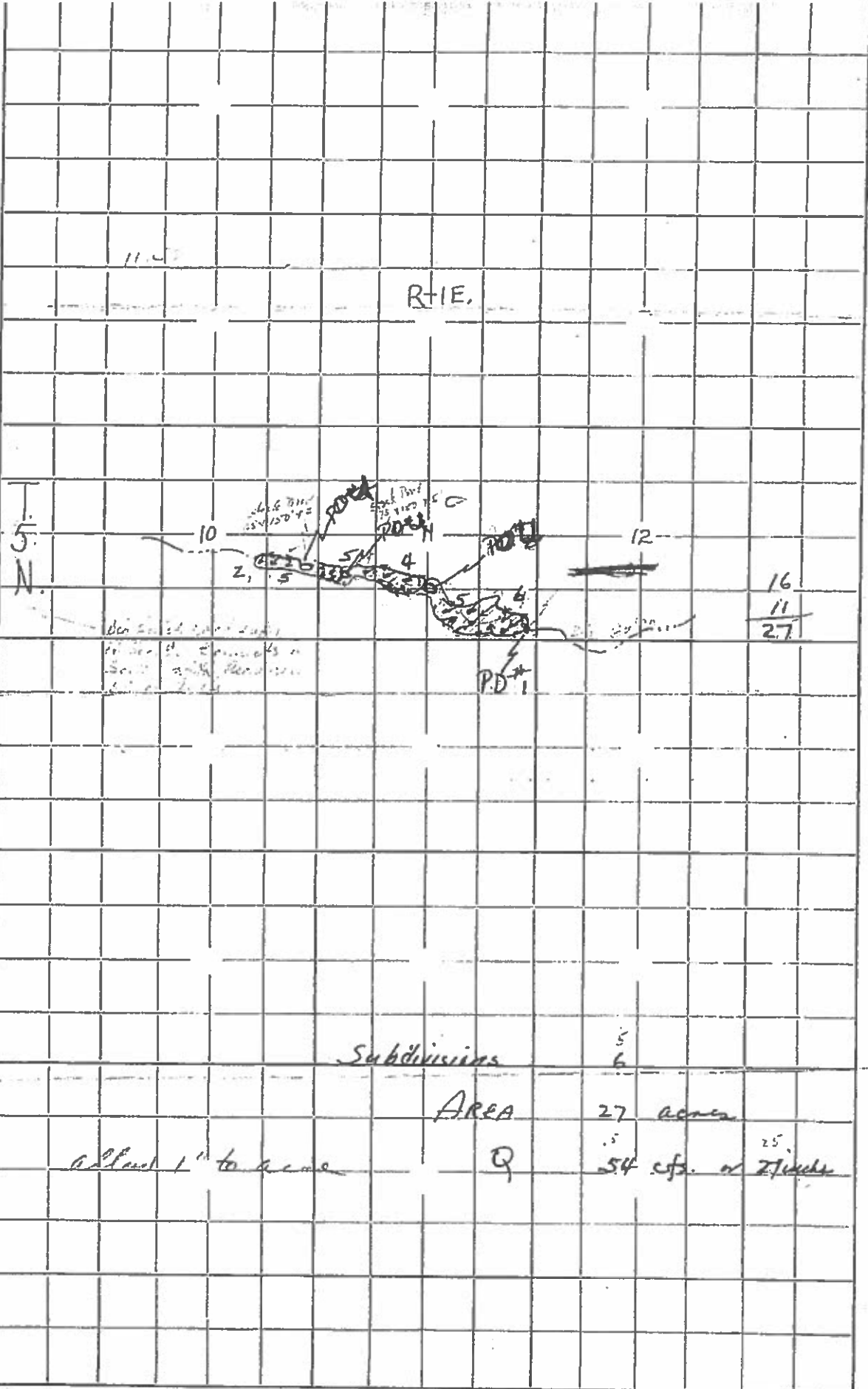
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WELL DRILLER'S REPORT

State 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.

<p>1. WELL OWNER</p> <p>Name <u>Bob Harmon</u> Address <u>P.O. Box 7227 Boise</u> Drilling Permit No. <u>63-93-W-0703</u> Water Right Permit No. _____</p>	<p>7. WATER LEVEL</p> <p>Static water level <u>6</u> feet below land surface. Flowing? <input type="checkbox"/> Yes <input type="checkbox"/> No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug Temperature <u>54</u> °F. Quality <u>good</u> <small>Describe artesian or temperature zones below.</small></p>																																																																						
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Water 125-133																																																																							
215-220																																																																							
<p>4. METHOD DRILLED</p> <p><input checked="" type="checkbox"/> Rotary <input checked="" type="checkbox"/> Air <input type="checkbox"/> Auger <input type="checkbox"/> Reverse rotary <input type="checkbox"/> Cable <input type="checkbox"/> Mud <input type="checkbox"/> Other _____ (backhoe, hydraulic, etc.)</p>	<p>10.</p> <p>Work started <u>8-15-93</u> finished <u>9-7-93</u></p>																																																																						
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table style="width: 100%;"> <tr> <td>Thickness</td> <td>Diameter</td> <td>From</td> <td>To</td> </tr> <tr> <td><u>30</u> inches</td> <td><u>10</u> inches</td> <td><u>1</u> foot</td> <td><u>28</u> feet</td> </tr> <tr> <td><u>30</u> inches</td> <td><u>6</u> inches</td> <td><u>7</u> feet</td> <td><u>34</u> feet</td> </tr> </table> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was a packer or seal used? <input type="checkbox"/> Yes <input type="checkbox"/> No Perforated? <u>NO</u> <input type="checkbox"/> Yes <input type="checkbox"/> No How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch <input type="checkbox"/> Gun Size of perforation? _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet</p> <p>Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Manufacturer _____ Type _____ Top Packer or Headpipe _____ Bottom of Tailpipe _____</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Size of gravel _____ Placed from _____ feet to _____ feet</p> <p>Surface seal depth: <u>5</u> Material used in seal: <input checked="" type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Pudding clay <input type="checkbox"/> _____ Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing <input checked="" type="checkbox"/> Overbore to seal depth Method of joining casing: <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Solvent Weld <input type="checkbox"/> Cemented between strata</p> <p>Describe access port <u>Seal Seal</u></p>	Thickness	Diameter	From	To	<u>30</u> inches	<u>10</u> inches	<u>1</u> foot	<u>28</u> feet	<u>30</u> inches	<u>6</u> inches	<u>7</u> feet	<u>34</u> feet	<p>11. DRILLER'S CERTIFICATION</p> <p>We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>Frank Shelly</u> Firm No. <u>326</u> Address <u>PO Box 1474</u> Date _____ Signed by Drilling Supervisor <u>Frank Shelly</u> and _____ (Operator) _____ (If different than the Drilling Supervisor)</p>																																																										
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<p>6. LOCATION OF WELL</p> <p>Sketch map location must agree with written location.</p>  <p>Subdivision Name _____ Lot No. _____ Block No. _____ County _____ Address of Well Site <u>5 mi north of Oak</u> <small>(give at least name of road)</small> T. <u>5</u> S. <u>6</u> or 8 <input type="checkbox"/> R. <u>1</u> E. <u>12</u> or W <input type="checkbox"/></p>	<p>11. DRILLER'S CERTIFICATION</p> <p>We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>Frank Shelly</u> Firm No. <u>326</u> Address <u>PO Box 1474</u> Date _____ Signed by Drilling Supervisor <u>Frank Shelly</u> and _____ (Operator) _____ (If different than the Drilling Supervisor)</p>																																																																						

RECEIVED
 MICROFILMED
 AUG 18 1997
 OCT 19 1993
 WATER RESOURCES
 WESTERN REGION



234 gal/minute

Scale: 2 Inches Equals 1 Mile. Draw Map In Ink.

25081



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region, 2735 Airport Way • Boise, Idaho 83705-5082

Phone: (208) 334-2190 • Fax: (208) 334-2348 • Web Site: www.idwr.idaho.gov

C. L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

January 26, 2017

AIR SUPPLY AND PUMP LLC
1164 E BEACON LIGHT RD
EAGLE, ID 83616

Application for Permit No. 63-34281

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 IDAHO STATESMAN on 2/2/2017 and 2/9/2017. 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 black ink, appearing to read 'Rachel Neely', is written over a horizontal line.

Rachel Neely
Administrative Assistant

CC:
DEVON MC DONALD
5700 N WILLOW CREEK
EAGLE, ID 83616

Neely, Rachel

From: Neely, Rachel
Sent: Thursday, January 26, 2017 9:02 AM
To: 'BOI Legals'
Subject: Ada Legal Ads
Attachments: Ada Cover Letter.docx; Ada Legal Ad.docx

Good Morning Legal Clerk,

Please see the attached ads for publication on 2/2/17 & 2/9/17.

Please confirm these are okay to publish as shown.

Thank you,

Rachel Neely

Administrative Assistant I
IDWR-Western Region
2735 Airport Way Boise, ID 83705
Rachel.Neely@idwr.idaho.gov

January 26, 2017

LEGAL NOTICE DEPARTMENT
IDAHO STATESMAN
PO BOX 40
BOISE, ID 83707

RE: Application for Permit No. 63-33897
Application for Permit No. 63-34202
Application for Permit No. 63-34281
Application for Permit No. 63-34101
Application for Permit No. 63-34102
Application to Amend Permit No: 63-34042
Application for Transfer No. 79779

Dear Legal Notice Department:

Please publish the enclosed legal notices on the dates indicated (once a week for two consecutive weekly issues). If you cannot publish the notices on the proposed dates, please contact us immediately.

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 2/20/2017. Your cooperation is appreciated.

Sincerely,

Rachel Neely
Administrative Assistant

Enclosure(s)

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

63-33897

STEVEN P CALVERLEY
247 N BENE POSTO PL
BOISE, ID 83712-7598
Point of Diversion NESE S26 T02N R01E ADA County Source GROUND WATER
Use: IRRIGATION 03/01 to 11/15 0.93 CFS
Total Diversion: 0.93 CFS
Date Filed: 1/21/2014
Place of Use: IRRIGATION
T02N R01E S26 SWNE NESE NWSE SWSE
Total Acres: 92
Water bearing zone to be appropriated is from 140 to 200 feet.
Applicant proposes to irrigate 45.3 acres within a 92 acre permissible place of use.

63-34202

CS PROPERTY DEVELOPMENT LLC
PO BOX 27
BOISE, ID 83707
Points of Diversion SESE SWSE S11 T01N R01E ADA County Source GROUND WATER
Points of Diversion SWNW SENW S12 T01N R01E ADA County Source GROUND WATER
Points of Diversion NWNE NWNW NESE S13 T01N R01E ADA County Source GROUND WATER
Point of Diversions NENE NWNE SWNE SENE NESE NWSE S14 T01N R01E ADA County Source GROUND WATER
Use: IRRIGATION 03/01 to 11/15 4.96 CFS
Total Diversion: 4.96 CFS
Date Filed: 2/29/2016
Place of Use: IRRIGATION
T01N R01E S14 SWSE SESE
T01N R01E S23 NENE NWNE
T01N R01E S24 NW(ALL)
Total Acres: 248
Water bearing zone to be appropriated is from 300 to 600 feet.

63-34281

AIR SUPPLY AND PUMP LLC
1164 E BEACON LIGHT RD
EAGLE, ID 83616
Point of Diversion SESE S11 T05N R01E ADA County Source GROUND WATER
Use: DOMESTIC 01/01 to 12/31 0.54 CFS
Use: IRRIGATION 03/01 to 11/15 0.54 CFS
Total Diversion: 0.54 CFS
Date Filed: 8/15/2016
Place of Use: IRRIGATION
T05N R01E S10 NESE NWSE
T05N R01E S11 NESW NWSW SESW NWSE SWSE SESE
T05N R01E S14 NENE NWNE
Place of Use: DOMESTIC
T05N R01E S10 SWNE SWNW SENW SE(ALL)
T05N R01E S11 SWNE SENE SW(ALL) SE(ALL)
T05N R01E S14 NENE NWNE NENW NWNW
Total Acres: 27
Water bearing zone to be appropriated is from 125 to 222 feet.

63-34101

G O INVESTMENTS IDAHO LLC
26358 SAND RD
PARMA, ID 83660
Point of Diversion SWNE S4 T04N R05W CANYON County Source GROUND WATER
Point of Diversion SENE S3 T04N R05W CANYON County Source GROUND WATER
Point of Diversion SWSW S33 T05N R05W CANYON County Source GROUND WATER
Use: IRRIGATION 03/01 to 11/15 13.56 CFS
Total Diversion: 13.56 CFS
Date Filed: 3/31/2015
Place of Use: IRRIGATION
T04N R05W S3 L3(NENW) L4(NWNW)
T04N R05W S4 L1(NENE) L2(NWNE) SWNE SENE L3(NENW) SENW SE(ALL)
T05N R05W S33 SE(ALL)
T05N R05W S34 SWNE NWSW SWSW

Total Acres: 678
Water bearing zone to be appropriated is from 85 to 400 feet.

63-34102

G O INVESTMENTS IDAHO LLC
26358 SAND RD
PARMA, ID 83660
Point of Diversion SENE S3 T04N R05W CANYON County Source GROUND WATER
Use: IRRIGATION 03/01 to 11/15 3 CFS
Total Diversion: 3 CFS
Date Filed: 3/31/2015
Place of Use: IRRIGATION
T05N R05W S34 NESW SESW NWSE SWSE
Total Acres: 150
Water bearing zone to be appropriated is from 85 to 400 feet.

PROPOSED AMENDMENT OF WATER PERMIT

Robert Bruno of 1595 E Via Roberto Ln, Meridian Idaho 83642 filed application no. 81137 on to amend water permit no. 63-34042 with a 05/28/15 priority from groundwater totaling 0.86 cfs for irrigation, wildlife, and aesthetic storage as well as stockwater and domestic purposes. The permit provides water for property located about 6.5 kilometers northeast of Kuna, Idaho near the intersection of S Locust Grove Rd and E Columbia Rd. The applicant proposes to amend the conditions of the permit so that he can deepen the well to be used as the point of diversion.

**NOTICE OF PROPOSED CHANGE OF WATER RIGHT
TRANSFER NO. 79779**

JR SIMPLOT COMPANY, PO BOX 27, BOISE, ID 83707; has filed Application No. 79779 for changes to the following water rights within OWYHEE County(s): Right No(s). 2-10187, 2-10202, 2-2153, 2-2154, 2-2308, 2-2423, 2-7060B, 2-7206, 57-11632, 57-11634, 57-11636, 57-11638, 57-11640, 57-11642, 57-11644, 57-11646, 57-11648, 57-11650, 57-11652, 57-11654, 57-185, 57-187A, 57-187B, 57-2152, 57-2225B; to see a full description of these rights and the proposed transfer, please see www.idwr.idaho.gov/apps/wr/QueryNewTransfers/QueryNewTransfers.aspx. The purpose of the transfer is to create a 2,504.7 acre permissible place of use within a 2,876 acre boundary. Water will be used at the current place of use approximately 4.0 miles south-west of C.J. Strike Dam.

Permits will be subject to all prior water rights. For additional information concerning the property location, contact Western Region office at (208) 334-2190; or for a full description of the right(s), proposed transfer(s), or amendment(s) please see www.idwr.idaho.gov/WaterManagement/WaterRights. Protests may be submitted based on the criteria of Idaho Code §§ 42-203A, 42-222 and 42-211. Any protest against the approval of the application(s) must be filed with the Director, Dept. of Water Resources, Western Region, 2735 Airport Way, Boise, ID 83705 together with a protest fee of \$25.00 for each application on or before 2/20/2017. The protestant must also send a copy of the protest to the applicant.

GARY SPACKMAN, Director

Published on 2/2/2017 and 2/9/2017

Neely, Rachel

From: Neely, Rachel
Sent: Thursday, January 26, 2017 9:16 AM
To: 'todd.crutcher@deq.idaho.gov'
Subject: Application for Permit 63-34281
Attachments: Agency Recommendation Form.docx; Application for Permit 63-34281.pdf

January 26, 2017

TODD CRUTCHER
DEPARTMENT OF ENVIRONMENTAL QUALITY

RE: Application for Permit No. 63-34281

Dear Mr. Crutcher:

The Idaho Department of Water Resources (IDWR) is seeking written comment and/or recommendations from your agency regarding the above referenced water right application. A copy of the application is enclosed with this email for your reference. Please review the application, complete the enclosed recommendation form, and submit your reply, if any, to this office by the protest deadline of February 20, 2017.

If your agency desires to formally protest approval of this application, you may do so by filing a written protest along with a \$25.00 filing fee for each protested application by the protest deadline.

IDWR will assume your agency does not object to this application if a timely response is not received. Please contact me if you have any questions regarding the application. Thank you for your help.

Sincerely,

Rachel Neely

Administrative Assistant I
IDWR-Western Region
2735 Airport Way Boise, ID 83705
Rachel.Neely@idwr.idaho.gov



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region • 2735 Airport Way • Boise, Idaho 83705-5082

Phone: (208) 334-2190 • Fax: (208) 334-2348 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

01/24/17

AIR SUPPLY AND PUMP LLC
C/O DEVON MCDONALD
5700 N WILLOW CREEK
EAGLE ID 83616

Re: Water Right Application No. 63-34281 Well Drilling Fee Upgrade

Dear Applicant:

Your recent water right application proposes ground water use from a well. All wells drilled in Idaho after June 30, 1987, require well drilling permits. A well might need a water right along with the drilling permit, depending on the intended use of the well.

According to the records of Idaho Department of Water Resources (IDWR), your well was drilled in 1993 under a \$35.00 domestic well drilling permit. A \$35.00 drilling permit covers a well that does not require water right approval from IDWR. This is typically a single-family domestic well.

Proposed use from your well does require water right approval, and your water right application seeks that approval. The well drilling fee for a well requiring a water right is \$200.00 instead of \$35.00. Per Well Construction Standards Rules (IDAPA 37.03.09.045.05.b), IDWR must collect the unpaid balance of \$165.00 for a well drilled under those circumstances.

Please remit \$165.00 to upgrade your well drilling permit within the next thirty days to facilitate processing of your water right application.

IDWR forms and other information are available on the Internet at www.idwr.idaho.gov. Please contact me at 208-334-2190 if you have any questions. Thank you for your attention to this matter.

Sincerely,

A handwritten signature in blue ink, appearing to read 'PH' followed by a wavy line.

Phill Hummer

Water Resource Agent

Idaho Department of Water Resources

Phone: (208) 334-2190

Email: phill.hummer@idwr.idaho.gov



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region • 2735 Airport Way • Boise, Idaho 83705-5082

Phone: (208) 334-2190 • Fax: (208) 334-2348 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

12/30/2016

AIR SUPPLY AND PUMP LLC
C/O DEVON MCDONALD
5700 N WILLOW CREEK
EAGLE ID 83616

Re: Application for Permit No. 63-34281 Additional Information Required

Dear Applicant:

Your recent application for permit proposing the use of water for irrigation, domestic, domestic storage, and domestic from storage is being processed. The application has been assigned a priority date but cannot be processed further until the following items are clarified:

- **5 - Proposed Use**

According to department standards the applied for rate for domestic use can only support between 100 and 200 household during times of peak demand. You must provide information that supports the rate proposed.

For your information the beneficial use could be listed as "municipal". This type of application has some benefits. "Municipal purposes" includes water for residential uses and the irrigation of parks and open space within a service area. So the application would only have one beneficial use that includes all the uses currently on the application and the rate would be the total rate required for all included uses. Holding a water right for municipal purposes may allow you as the provider to retain ownership of the water right as opposed to the water right, once licensed, becoming appurtenant to the land and subject to claims of ownership by individual landowners and companies. Another viable option would be to leave the proposed uses as they are.

- **7 - Description of Proposed Use**

The application as it is now is may not be approvable. Since the purpose of the project is to provide drinking water to multiple homes, the diversion works would be considered a public drinking water system. Public drinking water systems (or public water supply) are required to meet certain IDEQ water quality regulations and IDWR well construction requirements. According to the well log submitted with the application, the existing well intended as the point of diversion might not meet some or any of these requirements. For example, the well is not completely sealed from the surface to the water production zone. It is possible that you might be required to pay additional fees associated with application amendments and re-advertisement if you want the department to continue processing the application as it is currently.

- **10 - Other Water Rights**

The application indicates that there are other existing water rights at the place of use. Assuming this statement is not including the water rights and permits held by Avimor Partners LLC and its affiliates then you would need to submit and notice of change in ownership to claim those water rights (or portion of) that you own and intend to use. Enclosed with this letter is the notice of change in ownership form, a copy of a water rights and map showing the place of use and point of diversion of that water right according to current department records.

- **Other - Sufficiency of the Water Supply**

Information must be submitted on the quantity of water available from the proposed source. This information includes but is not limited to the properties of the aquifer (size, volume, source and amount of recharge) from which water will be diverted, other users of the same source, and methods employed to prevent injury to senior water users.

- **Other - Information Relative to Good Faith or Speculation**

To clarify the intent of the application and to assist department staff in properly assessing the application you need to submit more information describing the details of the residential development aspect of the application. Specifically: the number and location of the homes, plans and schematics for the design of the water delivery system including storage facilities, construction plans and timetables showing the project will be complete within the time specified on the application.

Please submit the requested information within ninety (90) days for application processing to continue. You may seek additional time to provide the information by making a written request to interrupt processing for up to six months. The application will become void if a written reply is has not been received within the next ninety (90) days. Refunds are not issued for voided applications.

IDWR forms and other information are available on the Internet at www.idwr.idaho.gov. Please contact me at 208-334-2190 if you need more information. Thank you for your attention to these matters.

Sincerely,

Phill Hummer
Water Resource Agent
Idaho Department of Water Resources
Phone: (208) 334-2190
Email: phill.hummer@idwr.idaho.gov

Enclosure: Copy of Permit Application No. 63-34281
Notice of Change in Ownership Form
Copy of Water Right No. 63-31986
Map Showing the POD and POU for Water Right No. 63-31986



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region, 2735 Airport Way • Boise, Idaho 83705-5082

Phone: (208) 334-2190 • Fax: (208) 334-2348 • Web Site: www.idwr.idaho.gov

September 21, 2016

C. L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

AIR SUPPLY AND PUMP LLC
1164 E BEACON LIGHT RD
EAGLE ID 83616

DEVON MC DONALD
5700 N WILLOW CREEK
EAGLE ID 83616

Re: Water Right Application Incomplete - Returned

Dear Applicant:

The Western regional office received your application on August 15, 2016. The application was sent back to you on September 2, 2016 due to incomplete information. The Department received an amended application on September 8, 2016. Thank you for the corrections you have provided, however the map still does not clearly match the **place of use**. Please provide an amended map that clearly shows the point of use as well as the point of diversion. Listed below are directions on how to create a map using our public website.

- **Section 14-** the map you have provided does not clearly show domestic storage (tank) and it does not outline the location for domestic use.
- **Sections 6-** Please calculate the total acre-feet. It is indicated on Domestic Storage and Domestic from Storage but not listed here.

The original incomplete application is enclosed. Please make the necessary amendments to the original form and re-submit within the next thirty (30) days. If IDWR does not receive your written response within thirty (30) days, a refund will issued for this filing. This letter is an attempt to ensure that your application is complete in order to establish a priority date. You may receive future correspondence regarding more specific details of your application. IDWR forms and other information are available on the Internet at www.idwr.idaho.gov. Please consult the IDWR website or contact this office at (208)334-2190 and ask for the "office day person" if you have any questions about the necessary information.

Sincerely,

Western Region Water Rights Staff

Enclosure: Original Application



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region, 2735 Airport Way • Boise, Idaho 83705-5082

Phone: (208) 334-2190 • Fax: (208) 334-2348 • Web Site: www.idwr.idaho.gov

September 2, 2016

C. L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

AIR SUPPLY AND PUMP LLC
1164 E BEACON LIGHT RD
EAGLE ID 83616

Re: Water Right Application Incomplete - Returned

Dear Applicant:

This office received your application on August 15, 2016. The application cannot be accepted into the records of the Idaho Department of Water Resources (IDWR) until the following items are addressed:

- **Section 2-** Please check box A or B.
- **Section 4-** Point of Diversion(s) was not provided correctly. Please include quarter quarter,
- **Section 14-** the map must clearly identify the proposed point of diversion and place of use. You must include an 8½" x 11" map that clearly identifies the proposed point of diversion, place of use, section #, township, and range. A photocopy of a USGS 7.5 minute topographic quadrangle map is preferred or you may use the mapping tool found on our website at <http://maps.idwr.idaho.gov/map/>. To use the tool click on the "Change layers" button at the top of the screen, select the background drop down menu and add the 2011 NAIP background. Then click on the "Locate" button to find the location of the proposed project.

The original incomplete application is enclosed. Please make the necessary amendments to the original form and re-submit within the next thirty (30) days. If IDWR does not receive your written response within thirty (30) days, a refund will issued for this filing. This letter is an attempt to ensure that your application is complete in order to establish a priority date. You may receive future correspondence regarding more specific details of your application. IDWR forms and other information are available on the Internet at www.idwr.idaho.gov. Please consult the IDWR website or contact this office at (208)334-2190 and ask for the "office day person" if you have any questions about the necessary information.

Sincerely,

Western Region Water Rights Staff

Enclosure: Original Application