

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
IN-OFFICE REVIEW/BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATIONPermit No: 25-14418

Exam Date: 10/17/2016

1. Does this qualify for an in-office field exam (IDAPA 035.02.r)? x Y N
- Irrigation of 5 acres or less
 - Storage of up to 14.6 AF for stockwater purposes only
 - Any use other than irrigation or storage, if the combined diversion rate is 0.24 cfs or less
 - Other < >
2. Current Owner: Name: Gray's Lake LLC
 Owner of Record Correct? x Y N
 Address of Record Correct? x Y N
 If No: Please note that IDSOS shows two addresses on their 2016 annual report form, one matching the tax lot information and one matching the mailing address. See form for verification of address.

3. Beneficial Use Fees have been paid: x Y N Receipt No: S034279, C102522

4. SOURCE**TRIBUTARY**

Ground Water

Method of Determination: Permit information, well log & ArcMap data

Change in Source: Y x N**B. OVERLAP REVIEW**

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

Water Right No.	Source	Purpose of Use	Basis
None			

Comments:

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

Water Right No.	Source	Purpose of Use	Basis
None			

Comments:

C. DIVERSION AND DELIVERY SYSTEM**1. LOCATION OF POINT(S) OF DIVERSION:**

Source	Govt. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.		County
Ground Water			SW	NE	17	5S	43E	B.M.	CARIBOU
								B.M.	
								B.M.	

Method of Determination: Permit information, well log & ArcMap data

Change in POD? Y x N Amendment Required? Y x N

Permit No: 25-14418

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2. **PLACE OF USE:** Use: Stockwater

TWP	RGE	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
5S	43E	17	S		S	S													
		Lot #																	
Total Acres =																			

Method of Determination: Permit information and ArcMap data

Change in POU? Y x N Amendment Required? Y x N

 Delivery System Diagram Attached (required). Indicate all major components and distances between components.
Indicate weir size/pipe as applicable.

 x Aerial Photo Attached (required for irrigation of 10+ acres).

 Photo of Diversion and System Attached

4. Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
Well Unknown					

*Code to correspond with No. on map and aerial photo

D. FLOW MEASUREMENTS

1.Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date
None						

2. Measurements: in-house fx – no measurements required**E. FLOW CALCULATIONS** Additional Computation Sheets Attached

Measured Method:

Measurement = per administration procedure memo #3 - diversion limited to 0.09 cfs**Permit allowed** = 0.09 cfs**License recommend for 0.09 cfs****F. VOLUME CALCULATIONS**

1. Volume Calculations for Irrigation:

$$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = \underline{\hspace{2cm}} \times 3.5 = \underline{\hspace{2cm}}$$

$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation season}) \times 1.9835 = \underline{\hspace{2cm}} \times 214 \times 1.9835 = \underline{\hspace{2cm}}$$

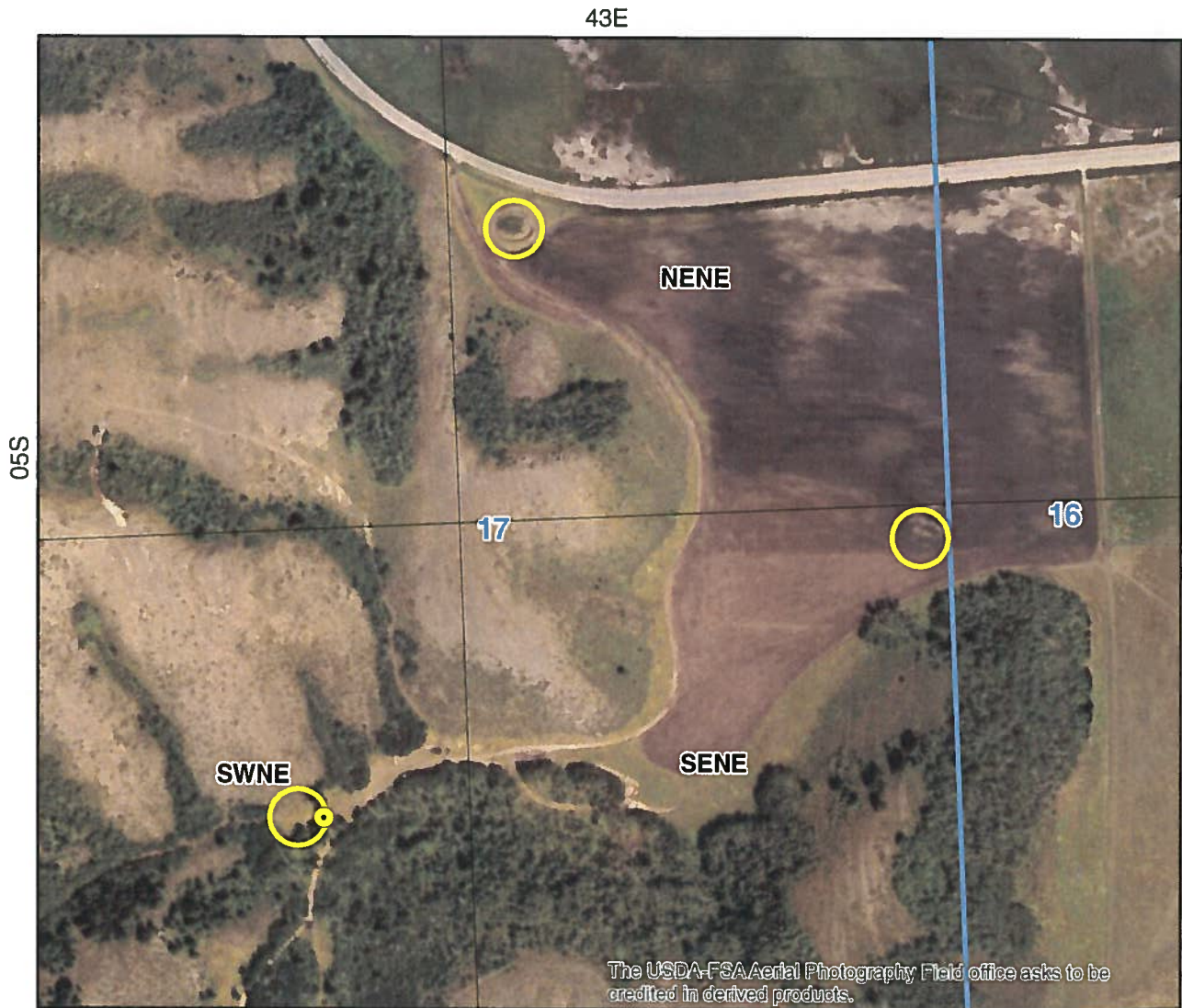
$$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = \underline{\hspace{2cm}}$$

2. Volume Calculations for Other Uses: per administration procedure memo #3 – 12 gpd/head season length 246 days
 $((246 \times 12) \times 400) = 1180800/325850 = 3.6 \text{ af stockwater}$

Reviewer _____ Date _____

State of Idaho
Department of Water Resources
Field Exam Map
25-14418

This map depicts the STOCKWATER place of use boundary for this water right at the time of this approval and is attached to the approval document solely for illustrative purposes.



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

0 0.05 0.1 0.2 Miles





AERIAL CLOSE-UP OF WELL / STORAGE 10/17/16 KR

25-14418

Office Use Only
Inspected by _____
Twp _____ Rge _____ Sec _____
_____ 1/4 _____ 1/4 _____ 1/4
Lat: : : Long: : :

DRIVER'S REPORT 10/12/16 KR 25-14418

No. W 133736	Due no later than Jan 31, 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		NATHAN S HALE 301 BENCH LAGO RD GRACE ID 83241	
1. Mailing Address: Correct in this box if needed. GRAY'S LAKE, L.L.C. NATHAN S HALE 427 RICE HOPE DR MT PLEASANT SC 29464		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	NATHAN HALE	427 RICE HOPE DR	MT PLEASANT SC USA 29464
5. Organized Under the Laws of: ID W 133736	6. Annual Report must be signed.* Signature: Nathan Hale Date: 11/20/2015 Name (type or print): Nathan Hale Title: member		
Processed 11/20/2015 * Electronically provided signatures are accepted as original signatures.			