

Certified Examiner Report Review

WR #	63-32236	
Name	Johnson Research LLC	
Representative &/or Examiner	Terry Scanlan @ SPF Water Engineering	
PROOF OF COMPLETION REVIEW		
Date Due	1/1/2014	
Date Rcvd	9/3/2013	
Timely or Priority Advanced	Timely	Order - No
Conditions	None	
Completed & Signed	Yes	
EXAM REVIEW		
Owner(s)	Johnson Research LLC - Current property owner is Edward G Nancy M Johnson	
Overlap Review	Shares common well & system with irrigation portion of Permit 63-31256; recommended together as 47 acre acre PPU. Within canal company rights service area, no evidence of SW use. No apparent overlaps with any other rights. (See attached overlap report.)	
POD	Drop one POD; single well in the SESW, S6, 5N, 4W shared with 63-31256.	Amendment - No
POU	35 acres irrigation combined with irrigation split of 63-31256 for 12 acres irrigation for a total of 47 acres within a 47 acre PPU.	Amendment - No
Diversion & Delivery Description ie. Diversion & System Photos	Exam describes the well, pump, and includes a detailed drawing of the delivery system.	
Map &/or Aerial Photo	Yes	
Well &/or Pump Information	Yes	
Flow Measurements	Measurement and pump curves to support recommendations.	
Narrative	Complete narrative.	
Permit Conditions ie. Measuring Device, Mitigation	No permit conditions to address.	Action - No
Flow Calculation	Good	
Volume Calculations	Volume calculation by rate incorrect, but conclusion correct. $0.70 \text{ cfs} \times 260 \text{ days} \times 1.9835 = 361 \text{ af}$ and $4.5 \text{ af} \times 35 \text{ acres} = 157.5 \text{ af}$	
Recommendations ie. Use, Season, Rate, Volume	License for 35 of 40 permitted acres based on existing pivot system and sprinklers with associated rate & volume.	
Recommended Amendments	None. Prepare license to be issued with irrigation system portion of Permit 63-31256 (needs amendment).	No
Authentication ie. Current Certified Examiner	Yes, current at this time.	
Attachments	Photos of well & POU, pivot system requirements information.	
LICENSING RECOMMENDATIONS	Condition X27 acre-limit, Condition X35 Combined Right Limits with 63-31256-0.94 cfs, 47 acres & 211.5 af (additive) Condition 01M future measuring device or agreement to annually report Condition 121 to require purchase of leased or stored water to mitigate impacts to Lower Snake River flows	

	A	B	C	D	E	F	H	I	J	K	L	M	N	O
1	Notes	Basin	Sequence	Process	Basis	Status	Priority Date	Current Owner	Rate	Volume	Acre Limit	Acres	Source List	Water Use
2	Lot 6 (NWSW) -NE above canal-other land	63	8375	Water Right	License	Active	10/12/1976	FRANK, JUDY M; FRANK, STANLEY R	0.140	17.0		4.0	GROUND WATER	DOM, IRR
3	Overlaps part of 63-8375 - other land	63	32551	Water Right	Decreed	Active	10/12/1976	GOULD, JUDY M	0.090	7.9		2.0	GROUND WATER	DOM, IRR
4	Overlaps other part of 63-8375 - other land	63	32552	Water Right	Decreed	Active	10/12/1976	TUTTLE TENGs, TRACEY	0.050	7.9		2.0	GROUND WATER	IRR
5	Lot 7 (SWSW) - other land	63	21393	Water Right	Decreed	Active	3/1/1950	WAGSTAFF, HAZEL ILEEN; WAGSTAFF, JOHN L	0.040				GROUND WATER	DOM
6		63	2878	Water Right	Decreed	Active	8/30/1951	BLACK CANYON IRRIGATION DIST	18.540				ELIJAH DRAIN, WILSON DRAIN	IRR
7		65	2900	Water Right	Decreed	Active	9/13/1965	BLACK CANYON IRRIGATION DIST	75.600	16,344.8	51.0		TUNNEL NO 2 DRAIN	IRR
8	No evidence of canal company use	63	2322	Water Right	Decreed	Active	10/4/1918	UNITED STATES OF AMERICA ACTING THROUGH	120.000				ELIJAH SLOUGH, WILSON	IRR
9		65	2433	Water Right	Decreed	Active	9/19/1938	UNITED STATES OF AMERICA ACTING THROUGH	1,200.000		57,020.0		PAYETTE RIVER	IRR
11														
12	No POU overlaps found for 63-31258 & 63-32236 in the SW, S6, T5N, R4W.													
13														
14	Pam Skaggs 09-02-2015													

No. W 5375	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		DR. EDWARD G JOHNSON 24007 HWY 20/26 PARMA 83660 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	DR. EDWARD G JOHNSON	24007 HWY 20/26	PARMA ID 83660
MEMBER	JEFFERY S JOHNSON	PO BOX 275	PARMA ID 83660
MEMBER	JENIFER EDMONDS	24007 HWY 20-26	PARMA ID USA 83660
5. Organized Under the Laws of: ID W 5375	6. Annual Report must be signed.* Signature: Charles Jones Date: 11/21/2014 Name (type or print): Charles Jones Title: Controller		
Processed 11/21/2014 * Electronically provided signatures are accepted as original signatures.			

License Review
Right 43-32236