

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 95-10922

Exam Date: 8/26/2014

1. Current Owner: BYRON HATLEY
PO BOX 88
SPIRIT LAKE ID 83869
(208)623-6331

And/Or

TAMMY HATLEY
PO BOX 88
SPIRIT LAKE ID 83869
(208)623-6331

2. Accompanied by: Byron Hatley

3. SOURCETRIBUTARY

GROUND WATER

B. OVERLAP REVIEW

1. Other water rights with the same place of use: None
2. Other water rights with the same point of diversion: None

C. DIVERSION AND DELIVERY SYSTEM1. LOCATION OF POINT(S) OF DIVERSION:

GROUND WATER NE1/4NE1/4 Sec. 20, Twp 53N, Rge 04W, B.M. KOOTENAI County

Method of Determination: GPS and Maps

2.

PLACE OF USE: IRRIGATION

Twp Rge Sec	NE				NW				SW				SE				Totals
	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
53N 04W 20	.5																.5
53N 04W 21						.5											.5

Total Acres: 1

PLACE OF USE: DOMESTIC

[illegible]

PLACE OF USE: COMMERCIAL

[illegible]

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

☒ Map Attached Showing Location(s) of point(s) of diversion and place(s) of use (required). Scale must be 1:24,000 or greater.

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

☒ Photo of Diversion and System Attached

<u>Well or Diversion</u> <u>ID No.*</u>	<u>Motor Make</u>	<u>Hp</u>	<u>Motor Serial No.</u>	<u>Pump Make</u>	<u>Pump Serial No. or Discharge</u> <u>Size</u>
D0033548	FRANKLIN	2			

D. FLOW MEASUREMENTS

<u>Measurement</u>	<u>Equipment</u>	<u>Type</u>	<u>Make</u>	<u>Model No.</u>	<u>Serial No.</u>	<u>Size</u>	<u>Calib. Date</u>
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E. FLOW CALCULATIONS _____ Additional Computation Sheets Attached

Measured Method:

PUMP EQUATIONS WATER RIGHT No. 95-10922						
		HP	H in feet	Efficiency as a decimal	Pumping lift in feet	System pressure in PSI
Q =	HP*8.8*Eff/H	2	777.517	0.8	685	40
Q =		0.018 cfs	8.1 gpm			

F. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$$V_{IR} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 1\text{AC} \times 3\text{AF} = 3\text{AF}$$

$$V_{DR} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation season}) \times 1.9835 = 0.02\text{CFS} \times 214 \times 1.9835 = 8.5\text{AF}$$

$$V = \text{Smaller of } V_{IR} \text{ and } V_{DR} = 3\text{AF}$$

2. Volume Calculations for Other Uses: DOMESTIC USE FOR 2 HOMES = 2 X 0.6AF = 1.2AF COMMERCIAL USE = 4 BATHROOMS AND 1 SHOWER = 0.6AF

G. NARRATIVE/REMARKS/COMMENTS

COMMERCIAL USE IS FOR 4 BATHROOMS AND 1 SHOWER WITH 16 EMPLOYEES. 3 TANKS TOTALING 1200 GALLONS WITH 3HP BOOSTER IN TANK. DOMESTIC FOR 2 HOMES. 1/2 ACRE OF IRRIGATION.

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

H. RECOMMENDATIONS

1. Recommended Amounts

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>DIVERSION RATE</u>	<u>ANNUAL VOLUME</u>
IRRIGATION	04/01 to 10/31	0.020 CFS	3.00 AF
DOMESTIC	01/01 to 12/31	0.020 CFS	1.20 AF
COMMERCIAL	01/01 to 12/31	0.020 CFS	0.60 AF
<u>Totals:</u>		0.020 CFS	4.80 AF

2. Recommended Amendments

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

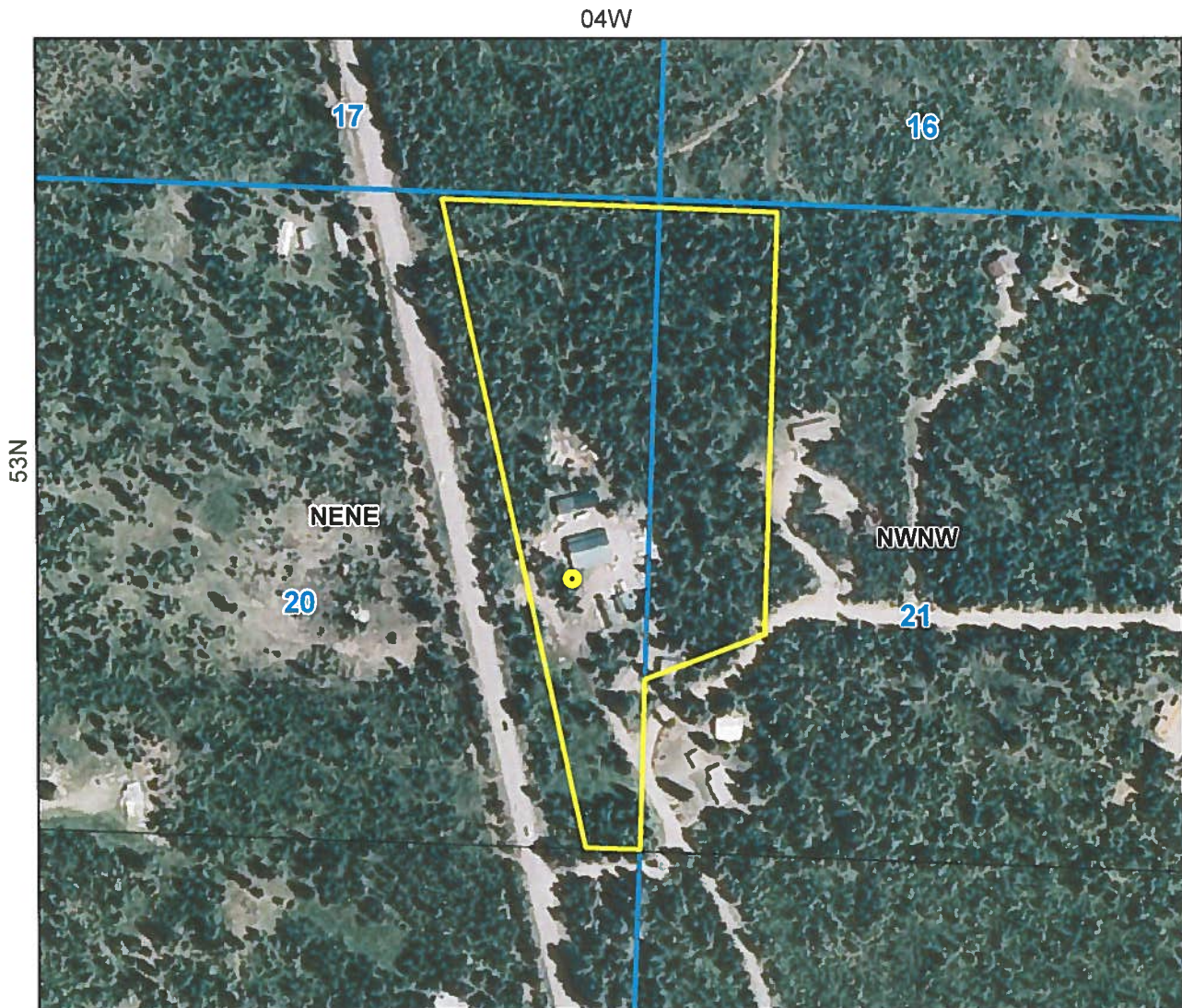
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other

I. AUTHENTICATION

Field Examiner's Name Eric [Signature] Date 12-31-2014

Reviewer Adam [Signature] Date 12-31-2014

State of Idaho
Department of Water Resources
Water Right License
95-10922



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

0 0.045 0.09 0.18 Miles



IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

RECEIVED

CORRECTED REPORT

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

1. WELL TAG NO. D0033548 MAY 03 2004
 Drilling Permit No: 811390
 Other IDWR No: IDWR/North

2. OWNER Well Number:
 Name Hatley, Byron c/o Graystone Custom 731

Address PO Box 88
 City Spirit Lake State ID Zip 83869

3. LOCATION OF WELL by legal description
 sketch map location must agree with written location

N		Twp. <u>53</u> ☒ North or ☐ South	
W		Rge. <u>4</u> ☐ East or ☒ West	
E		Sec. <u>20</u> <u>NE 1/4 NE 1/4 NE 1/4</u>	
S		Gov't Lot _____ County <u>Kootenai</u>	
		Lat: _____ Long: _____	
		Address of Well Site <u>28544 Spirit bend Roa</u>	
		City <u>Spirit Lake</u>	

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

Lt. _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK check all that apply (Replacement, etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK		AMOUNT		METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	18	550 lbs	Overbore

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) _____

Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	2	480	.250	Steel	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____
☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

440 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: _____

53N 4W 20

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
5.5			

Water Temp. Cold Bottom Hole Temp Cold

Water Quality test or comments: _____

Depth first Water encountered 470

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
10	0	3	Top Soil	☐ Y	☒ N
10	3	12	Cobbles, Gravels, Sand	☐ Y	☒ N
10	12	65	Gravels, Sand	☐ Y	☒ N
8	65	170	Sand	☐ Y	☒ N
8	170	172	Boulder	☐ Y	☒ N
8	172	230	Sand, Gravels	☐ Y	☒ N
8	230	470	Gravels, Sand w/Water 2gpm	☒ Y	☐ N
8	470	500	Granite Gray	☐ Y	☒ N
5	500	630	Granite Black&White	☐ Y	☒ N
5	630	632	Granite Fractured w/Water 1gpm	☒ Y	☐ N
5	632	650	Granite Gray	☐ Y	☒ N
5	650	660	Granite w/small Fractures 2gpm	☒ Y	☐ N
5	660	700	Granite Gray	☐ Y	☒ N

Revised

Completed Depth 700 (Measurable)

Date: Started 3/12/04 Completed 3/22/04

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name H2O Well Service, Inc. Firm No. 448

Firm Official Jim McLeslie Date 04/16/04

and Supervisor or Operator Jim McLeslie Date 04/16/04

(Sign Once if Firm Official and Operator)

Jim McLeslie

125-00



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