

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 95-10579

Exam Date: 8/4/2014

1. Current Owner: MICHAEL MICHALAK
17523 N WILKINSON RD
RATHDRUM ID 83858
(208) 687-1392

And

RITA MICHALAK
17523 N WILKINSON RD
RATHDRUM ID 83858
(208)687-1392

2. Accompanied by: Michael Michalak

3. **SOURCE****TRIBUTARY**

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 NE1/4NW1/4 Sec. 27, Twp 52N, Rge 04W, B.M. KOOTENAI County

Method of Determination: GPS AND MAPS A0003248

2.

PLACE OF USE: DOMESTIC

Twp Rge Sec	NE				NW				SW				SE				Totals
	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
52N 04W 27					X												

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	
52N 04W 27					3.0												3.0

Total Acres: 3

Method of Determination:

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

4.

<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>
D0041127		3			

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

D. FLOW MEASUREMENTS

1.

<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>
FUJI	ULTRASONIC FLOWMETER		S1011	7K0079TB		3/2/2014

2. Measurements:

E. FLOW CALCULATIONS

Measured Method: 26GPM

____Additional Computation Sheets Attached

F. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 3\text{AC} \times 3\text{AF} = 9\text{AF}$$

$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation season}) \times 1.9835 = 0.06 \times 246 \times 1.9835 = 29\text{AF}$$

$$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 9\text{AF}$$

2. Volume Calculations for Other Uses: DOMESTIC = 0.6AF

G. NARRATIVE/REMARKS/COMMENTS

3HP PUMP, 26GPM. 1 HOME. 3AC OF IRRIGATION. IRRIGATION OCCURS UNDER TREES FOR FIRE PROTECTION. IS NOT VISIBLE FROM ARC VIEW, BUT CAN BE SEEN ON EXAM PHOTOS.

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>
DOMESTIC	01/01 to 12/31	0.040 CFS	0.60 AF
IRRIGATION	03/15 to 11/15	0.060 CFS	9.00 AF
<u>Totals:</u>		0.060 CFS	9.60 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 *Eugene Smith* Date 12-24-2014
 Reviewer *Adam Frederick* Date 12-24-2014

State of Idaho
Department of Water Resources
Water Right License
95-10579

04W



● Point of Diversion

Place Of Use Boundary

Townships

PLS Sections

Quarter Quarters

0 0.035 0.07 0.14 Miles



IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

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

1. DRILLING PERMIT NO. 838281
Other IDWR No. D004127

2. OWNER:

Name Michael Michalak
Address 17523 N. Wilkenson Road
City Rathdrum State ID Zip 83858

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location

W  E

Twp. 52 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 27 $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$
40 acres 160 acres

S Gov't lot _____ County Kootenai
 Lat: 47:49:872 Long: 116:49:204
 Address of Well Site 17523 N Wilkenson Rd
 _____ City Rathdrum

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	20	300#	Dry granular

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

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

8. CASING/LINER:

Diameter	From	To	Gauges	Material	Casing	Liner	Welded	Threaded
6"	+2	298	.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:

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

52 N 4 W 27

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
50			3 hrs

Water Temp. Cold Bottom hole temp.

Water Quality test or comments: Cold, clear

Depth first Water Encountered 274

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

[illegible]

~~RECEIVED~~

FEB 27 2006

IDWR/North

Completed Depth: 298 (Measurable)

Date: Started 1/26/06 Completed 1/26/06

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 McCarty Drilling & Pump Inc - Firm No. 586

Firm Official: [Signature] Date: 2-14-06

Supervisor or Operator Mike Michalik Date 2-16-06
(Sign once if Firm Official & Operator)

Date: 2/16/2006 Time: 10:36:07 AM

95-10579

____/yr. ____

acre-feet.

er conditions of
nent will not issue

☒ No ☒ No

tional information in
with the required

☒ No ☐

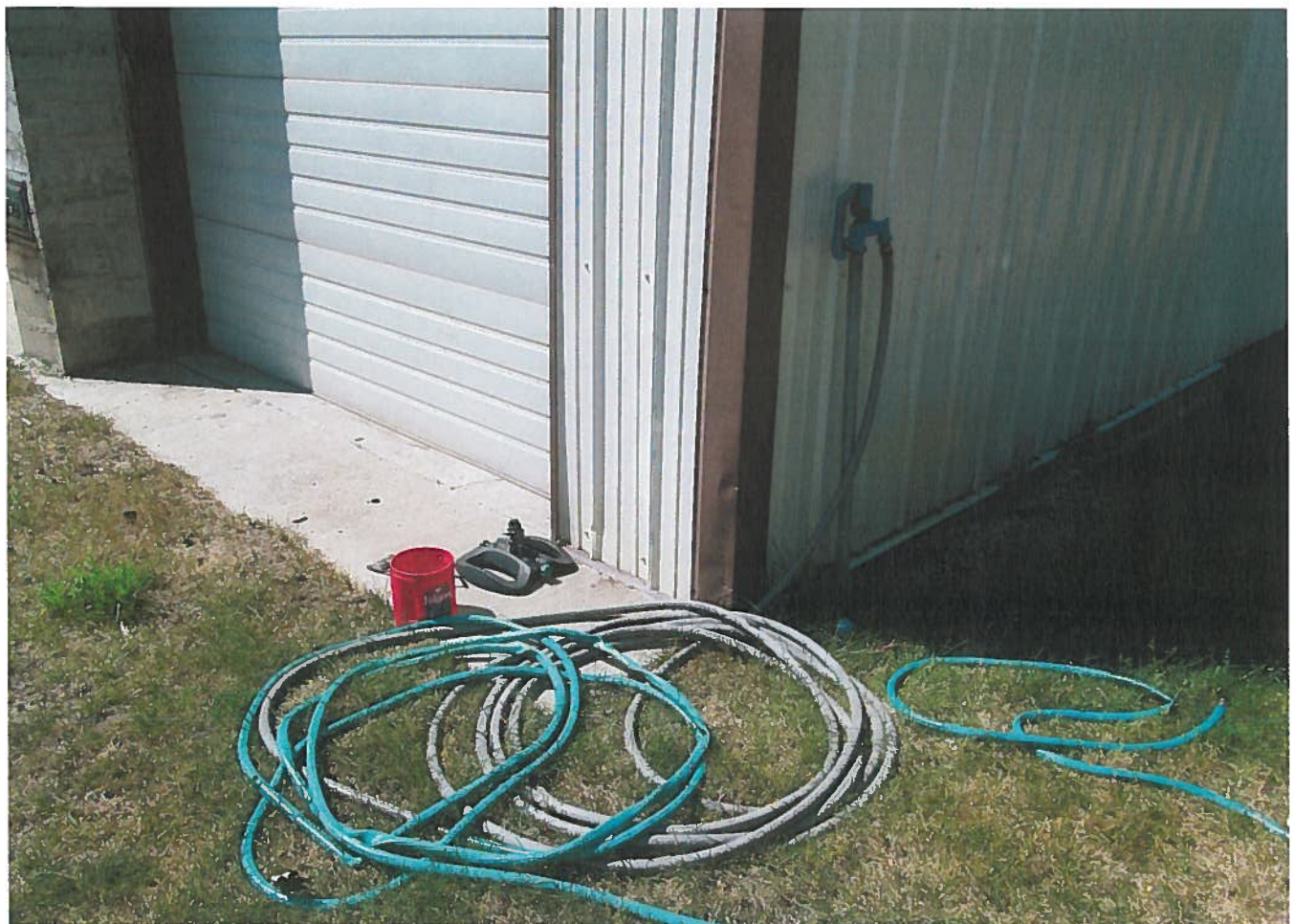
cial use.

ter system.

55947



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9.5-10.579

UP AROUND THE WATER SYSTEM.
HAVE WORK PERFORMED BY TECHNICALLY
QUALIFIED PERSONNEL COMPLYING WITH
ALL GROUNDING AND CODE REQUIREMENTS.

THIS LABEL IDENTIFIES THE FRANKLIN
SUBMERSIBLE MOTOR USED IN THE WELL.
PLEASE DISPLAY PROMINENTLY. A SUGGESTED
LOCATION IS THE DISCONNECT BOX.

MODEL 2343162605 HP 3 KW 2.2 PH 3
VOLTS 230 RPM 3450 HZ 60
AMP 9.5 S.F. MAX. AMP 10.9
SF 1.15 KVA CODE K CONT. DUTY
MIN FLOW FT/SEC 0.25 CSA CERTIFIED

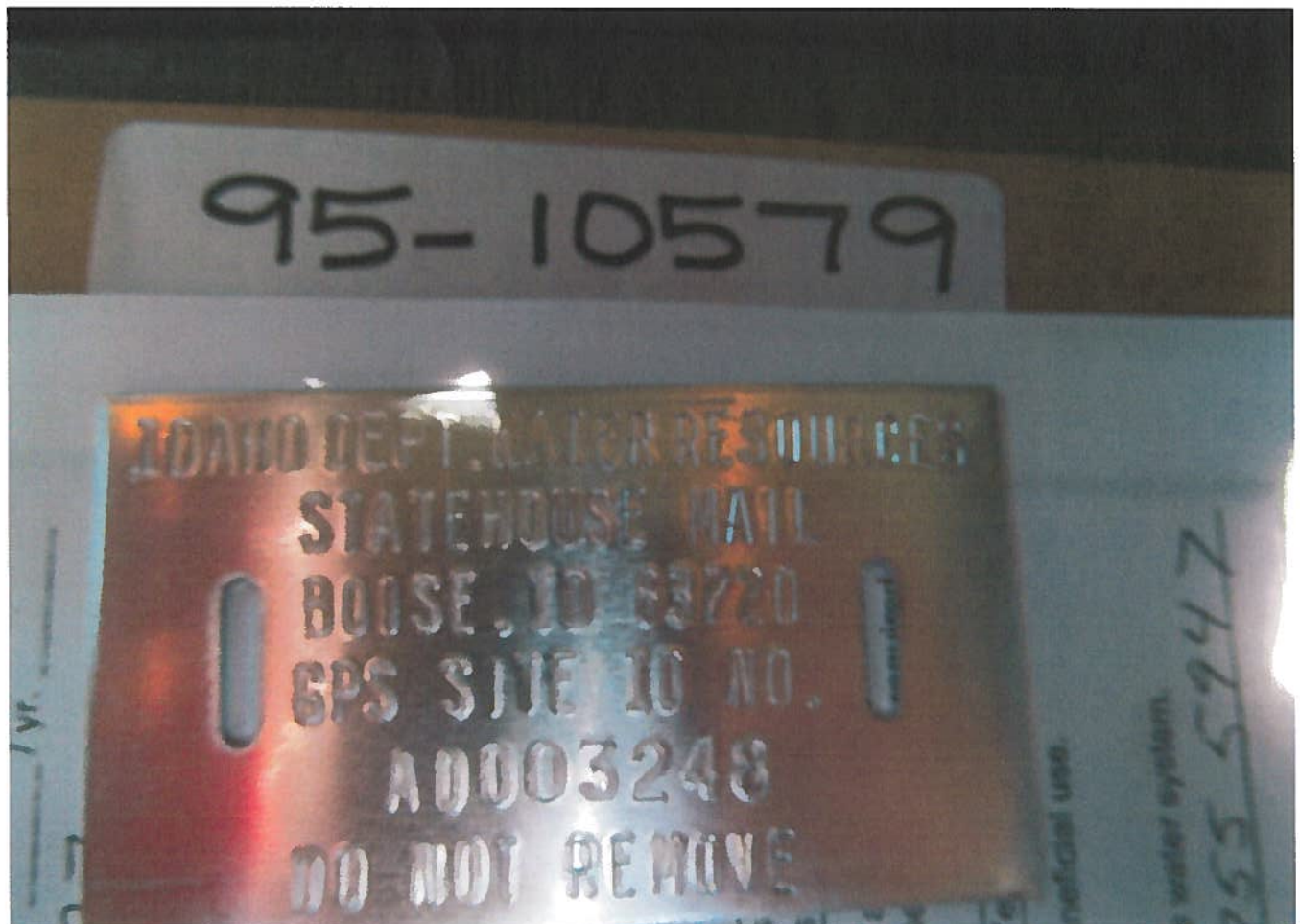


Franklin Electric

www.franklin-electric.com



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