

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
BENEFICIAL USE FIELD REPORT

**A. GENERAL INFORMATION**

Permit No: 95-11405

Exam Date: 12/18/2013

1. Current Owner: FRANK HETTMANN  
16735 VISTA DEL VALLE CT  
MORGAN HILL CA 95037  
(408) 779-2778
2. Accompanied by: in office exam.  
Phone No:  
Address:  
Relationship to Permit Holder:

**3. SOURCE**

COEUR D ALENE LAKE

**TRIBUTARY**

SPOKANE RIVER

**B. OVERLAP REVIEW**

1. Other water rights with the same place of use: None
2. Other water rights with the same point of diversion: 95-11447

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

COEUR D ALENE LAKE L3 NE1/4SW1/4 Sec. 29, Twp 50N, Rge 03W, B.M. KOOTENAI County

Method of Determination: Aerial photography, Bing Maps and Arc Map Data.

2.

**PLACE OF USE:** DOMESTIC

| Twp | Rge | Sec | NE        |           |           |           | NW        |           |           |           | SW        |           |           |           | SE        |           |           |           | Totals |
|-----|-----|-----|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|--------|
|     |     |     | <u>NE</u> | <u>NW</u> | <u>SW</u> | <u>SE</u> | <u>NE</u> | <u>NW</u> | <u>SW</u> | <u>SE</u> | <u>NE</u> | <u>NW</u> | <u>SW</u> | <u>SE</u> | <u>NE</u> | <u>NW</u> | <u>SW</u> | <u>SE</u> |        |
| 50N | 03W | 29  |           |           |           |           |           |           |           |           | X         |           |           |           |           |           |           |           |        |
|     |     |     |           |           |           |           |           |           |           |           | L 3       |           |           |           |           |           |           |           |        |

3. N/A Delivery System Diagram Attached (required). Indicate all major components and distances between components. Indicate weir size/pipe as applicable.  
Yes Map Attached Showing Location(s) of point(s) of diversion and place(s) of use (required). Scale must be 1:24,000 or greater.  
Yes Aerial Photo Attached (required for irrigation of 10+ acres).  
N/A Photo of Diversion and System Attached

Method of Determination:

4.

Well or Diversion Information not needed.**D. FLOW MEASUREMENTS**

Flow measurement not required as per IDAPA Rule 37.03.02.035.01.r.iii.

**E. FLOW CALCULATIONS**The diversion rate for this domestic right is limited to ~~0.06~~ <sup>0.04</sup> cfs or ~~27~~ <sup>18</sup> gpm.**F. VOLUME CALCULATIONS**

The annual volume for this domestic right is limited to 0.6 acft.

The annual volume for this Irrigation right is limited to 0.6 acft.

**G. NARRATIVE/REMARKS/COMMENTS**

This office exam is conducted in accordance with IDAPA RULE 37.03.02.035.01. The verification for this right is based upon the following:

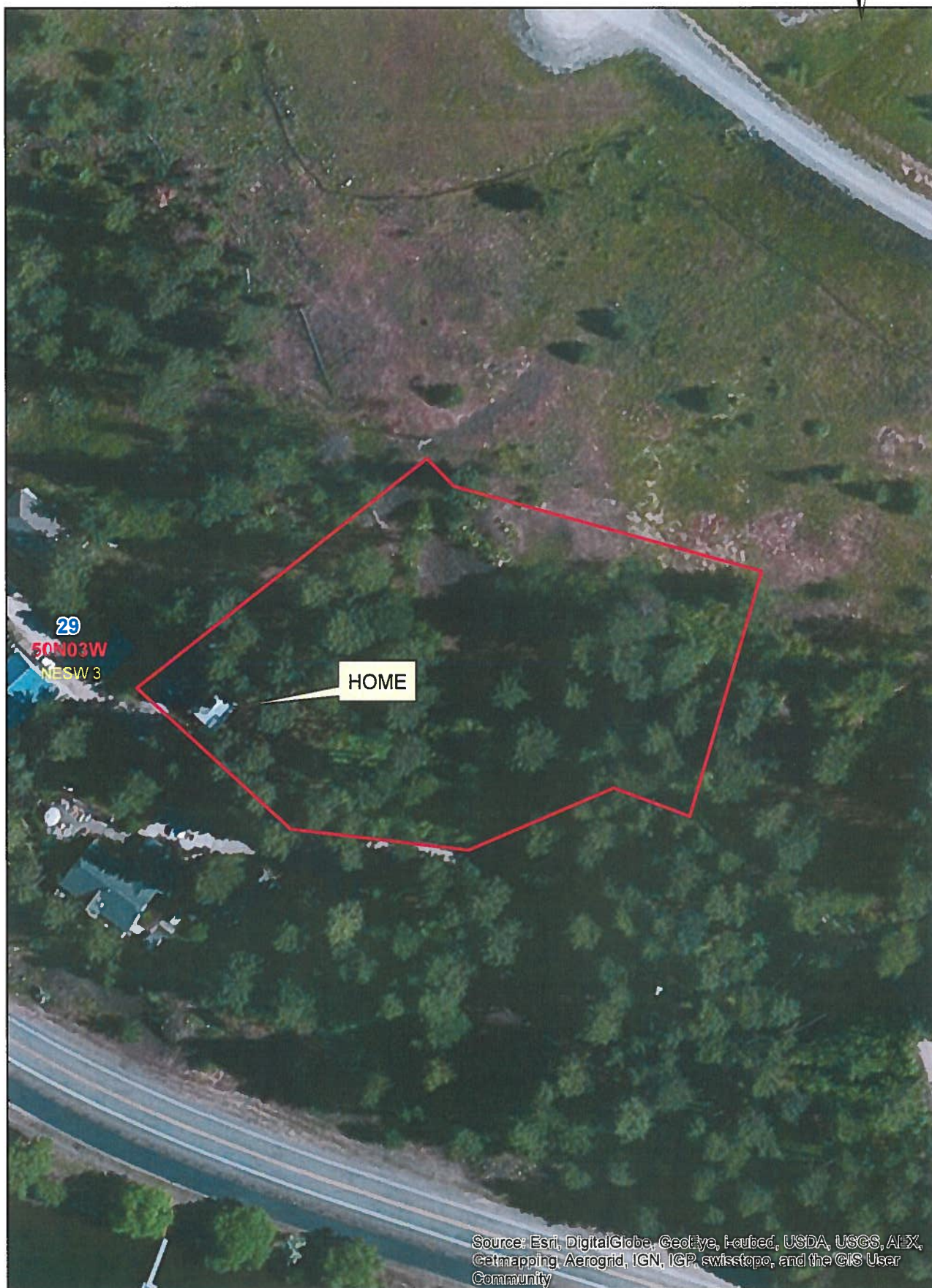
1. Statement of completion
2. Tax Lot information
3. Aerial photography, Bing Maps and Arc Map Data

Have conditions of permit approval been met? ☒ Yes ☐ No**H. RECOMMENDATIONS Home was built in 2007****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                            | 1.20 AF              |
| <u>Totals:</u>        |                      | <del>0.060</del> <sup>0.04</sup> CFS | 1.20 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 J. [Signature] Date 12-18-2013Reviewer Kurtis E. [Signature] Date 12-19-2013

# EXAM 95-11405



STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
**STATEMENT OF COMPLETION**  
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY  
Amt. of Fee \$: 50.00  
Receipt No. N024167  
Receipt By: CD  
Date Received: 4/23/10

The Idaho Department of Water Resources considers this form a statement by the permit holder(s) that development of a water right has been completed and that water has been applied to beneficial use to the extent described below. This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner. Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, please contact any Department office or visit the Department's website at: [www.idwr.idaho.gov](http://www.idwr.idaho.gov) for an Assignment of Permit form. If you wish to relinquish your permit because you have not established the authorized use of the water and are not applying for an extension, please notify the Department in writing.

1. Permit No. 95-11405 Telephone No. 408-779-2778
2. Name of Permit Holder(s): FRANK HETTMANN
3. Mailing Address: 16735 VISTA DEL VALLE CT City MORGAN HILL  
State CA Zip 95037 Email: thetmann@yahoo.com
4. Source of Water: COEUR D'ALENE LAKE If GROUND WATER (well), Date Drilled: mo. \_\_\_\_\_ / yr. \_\_\_\_\_  
Well Driller: \_\_\_\_\_ Drilling Permit Number: \_\_\_\_\_

5. Extent of use(s) completed (as authorized by the water right permit):

Domestic (No. of households): 1 Stockwater (No. and type of stock): \_\_\_\_\_

Irrigation (No. of acres): \_\_\_\_\_ Other: \_\_\_\_\_

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Department of Water Resources

6. Total rate of diversion or storage volume for which proof is submitted: 1.04 cfs OR \_\_\_\_\_ acre-feet.

7. Compliance with a Measuring Device requirement and/or other Conditions of Permit: (Refer to the approval conditions on your permit and respond accordingly.)

Measuring Device: Is a measuring device required?  
If yes, has the measuring device been installed?

Yes ☐ or No ☒

Yes ☐ or No ☒

Conditions of Permit: Does your permit require you to submit additional information in connection with your proof of beneficial use? (If yes, please list the conditions below and provide documents if necessary.)

Completed?

Yes ☐ or No ☒

Completed?

Yes ☐ or No ☒

8. Fee Enclosed: \$ 50- (See Fee Schedule on back of the instructions for filing proof of beneficial use. Proofs filed without an appropriate fee, will be considered incomplete.)

9. Person to contact to accompany the Department representative during field examination of the water system.

Name: JOHN KILDOW Telephone Number: 208 667-6702

Mailing Address: 2707 S EVERGREEN LANE City COEUR D'ALENE

State ID Zip 83814

Email: \_\_\_\_\_

10. The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted and applied to a beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Signature of permit holder: Frank Hettmann  
(include your title, if on behalf of company or organization)

Date: 4/10/10