

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 47-8047

Exam Date: 9/24/2013

1. Current Owner: MARY D WHITE-OSTRANDER
7637 S. MCLINTOCK PL.
MERIDIAN ID 83642
(208) 342-3424
2. Accompanied by: Buddy Scott
Relationship to Permit Holder: Employee of current facility manager (Lynn Babington)

3. **SOURCE**

NEYMAN TUNNEL

TRIBUTARY

MUD CREEK

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:**

NEYMAN TUNNEL

NW1/4SW1/4

Sec. 28, Twp 09S, Rge 14E, B.M.

TWIN FALLS County

Method of Determination: Waypoints were collected with a Garmin GPSmap 60CSx receiver and downloaded into an ArcMap shapefile that corresponds with 2009 and 2011 aerial photography and verified the point of diversion is located as recorded. See attached map.

2.

PLACE OF USE: FISH PROPAGATION

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>	
09S	14E	28								X		X							

Method of Determination: Tracks were collected with a Garmin GPSmap 60CSx receiver and downloaded into an ArcMap shapefile that corresponds with 2009 and 2011 aerial photography and verified the place of use is located as recorded. See attached map.

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

D. FLOW MEASUREMENTS

1.

Measurement

<u>Equipment</u>	<u>Type</u>	<u>Make</u>	<u>Model No.</u>	<u>Serial No.</u>	<u>Size</u>	<u>Calib. Date</u>
Current Meter		Swoffer	2100	4583		

2. Measurements: Flow measurements were taken in a stream channel approximately 35' downstream of the discharge point from the facility: **4.30 cfs**

Department of Environmental Quality's Discharge Monitoring Reports provided the following recorded flow rates from the facility collected in 2012:

Month:	Cfs:
Jan	3.2
Feb	2.5
Mar	2.3
Apr	2.3
May	2.3
Jun	3.0
Jul	3.5
Aug	3.5
Sep	3.0
Oct	2.5
Nov	2.0
Dec	1.9

E. FLOW CALCULATIONS: None**F. VOLUME CALCULATIONS**

1. Volume Calculations for Other Uses: Fish Propagation:

Volume was calculated based on monthly flow rates reported to DEQ:

Jan: 3.2 cfs x 31 days x 1.9835 = 196.76
 Feb: 2.5 cfs x 28 days x 1.9835 = 138.86
 Mar: 2.3 cfs x 31 days x 1.9835 = 141.42
 Apr: 2.3 cfs x 30 days x 1.9835 = 136.86
 May: 2.3 cfs x 31 days x 1.9835 = 141.42
 Jun: 3.0 cfs x 30 days x 1.9835 = 178.52
 Jul: 3.5 cfs x 31 days x 1.9835 = 215.21
 Aug: 3.5 cfs x 31 days x 1.9835 = 215.21
 Sep: 3.0 cfs x 30 days x 1.9835 = 178.52
 Oct: 2.5 cfs x 31 days x 1.9835 = 153.72
 Nov: 2.0 cfs x 30 days x 1.9835 = 119.01
 Dec: 1.9 cfs x 31 days x 1.9835 = 116.83

Total: **1932.33 AF**

G. NARRATIVE/REMARKS/COMMENTS

Permit is for 12.00 cfs for fish propagation. Application for permit was submitted by Terry White on August 6, 1986, and proof of beneficial use was submitted May 13 1991. Permit was assigned to Mary White, on June 28, 2004.

I contacted the current facility operator, Lynn Babington, to inquire about conducting a field exam and he indicated that he wasn't the operator. So I drove down to the facility and spoke with his employee, Buddy Scott. Buddy called Mr. Babington and then agreed to assist me with the field exam.

The water source at the impoundment is referred to as Neyman Tunnel. At the point of diversion, there is a 25' wide x 50' long impoundment that is covered with metal roofing and is completely fenced off to keep cattle out of the impoundment. A 14" PVC pipe exits the impoundment on the northeast side and runs downhill approximately 672', where it is diverted into a hatch house and then out to raceways. The pipe runs down the ravine in an easterly direction, crosses over Mud Creek and then turns north towards the hatch house and raceways. The water exits the pipeline into concrete diversion that can divert water to the hatch house and the raceways, and/or into a bypass. In the hatch house there are 5 fry troughs that measure 2' wide x 16' long with a water depth of 16 inches, and 7 fry ponds that measure 1.5' wide x 26' long with a water depth of 38 inches. According to the owner, Mrs. Mary White-Ostrander, no fry have actually been reared at this facility in more than 20 years. Outside at the raceways, there are 8 upper raceways that measure 4' wide x 45' long with a depth of 15 inches to the high water mark. Below the upper raceways, there are 4 lower raceways which measure 8' wide x 45' long with a depth 27" to the high water mark. Water is only being diverted to half of the raceways and the owner stated it has been operated this way in recent years due to decreased flows from the tunnel. The facility is currently used to raise sturgeon and rainbow trout.

On the day of the exam I used a Swoffer current meter to take a direct measurement of stream flow 35' below the raceways in a constructed channel of uniform depth. I measured the flow rate twice and then averaged the two measurements, attaining an average flow rate of 4.30 cfs. Mrs. White-Ostrander indicated that when the facility was originally established, there was easily 20 cfs flowing from the Neyman Tunnel and that almost half of it had to be run past the facility in a bypass channel, but the flow from the tunnel has decreased markedly over the years. I asked her for records from the development period that could verify the permitted 12 cfs. Mrs. White-Ostrander indicated her ex-husband had run the facility and kept the records, but his current location is unknown to everyone involved with this operation. I attempted to contact him by calling 4 different phone numbers I managed to locate, but all of them were no longer in service. I went to the Idaho Department of Environmental Quality to see about obtaining Discharge Monitoring Reports from the development period and the only records they were able to locate were from 2012. I had discussed the difference in flows I measured vs. what was originally permitted with Mrs. White-Ostrander, and she indicated that she was comfortable with our licensing the permit using the current flow data.

Several of the original conditions on the permit are now inactive. Condition 002, which required a measuring device, was replaced with condition 01M. The Workflow Approval Condition Search Tool suggests replacing condition 002 with R43 or R02 on licenses. Both R02 and R43 would add the requirement of a lockable device, which wasn't a required condition when the permit was issued. Additionally, both of these conditions are intended for use within water districts and this facility is not currently in a water district. Condition 01M doesn't add additional requirements and is used statewide on surface water diversions greater than 0.24 cfs and therefore seems to be the appropriate condition to replace condition 002 on this license.

Recommend licensing 4.30 cfs with an annual volume of 1,9320.90 AF.

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>
FISH PROPAGATION	01/01 to 12/31	4.30 CFS	1,932.30 AF
	<u>Totals:</u>	4.30 CFS	1,932.30 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



Date

10-10-13

Reviewer



Date

10/23/13



Figure 1: Upper end of impoundment at the point of diversion



Figure 2: Pipeline crossing Mud Creek

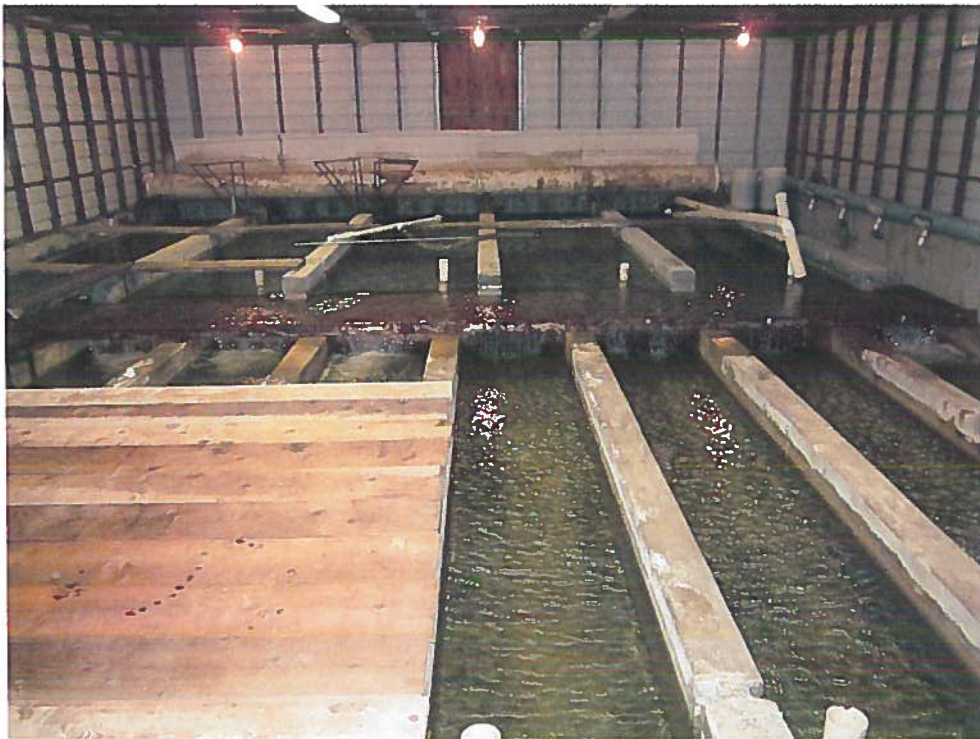


Figure 3: Inside hatch house

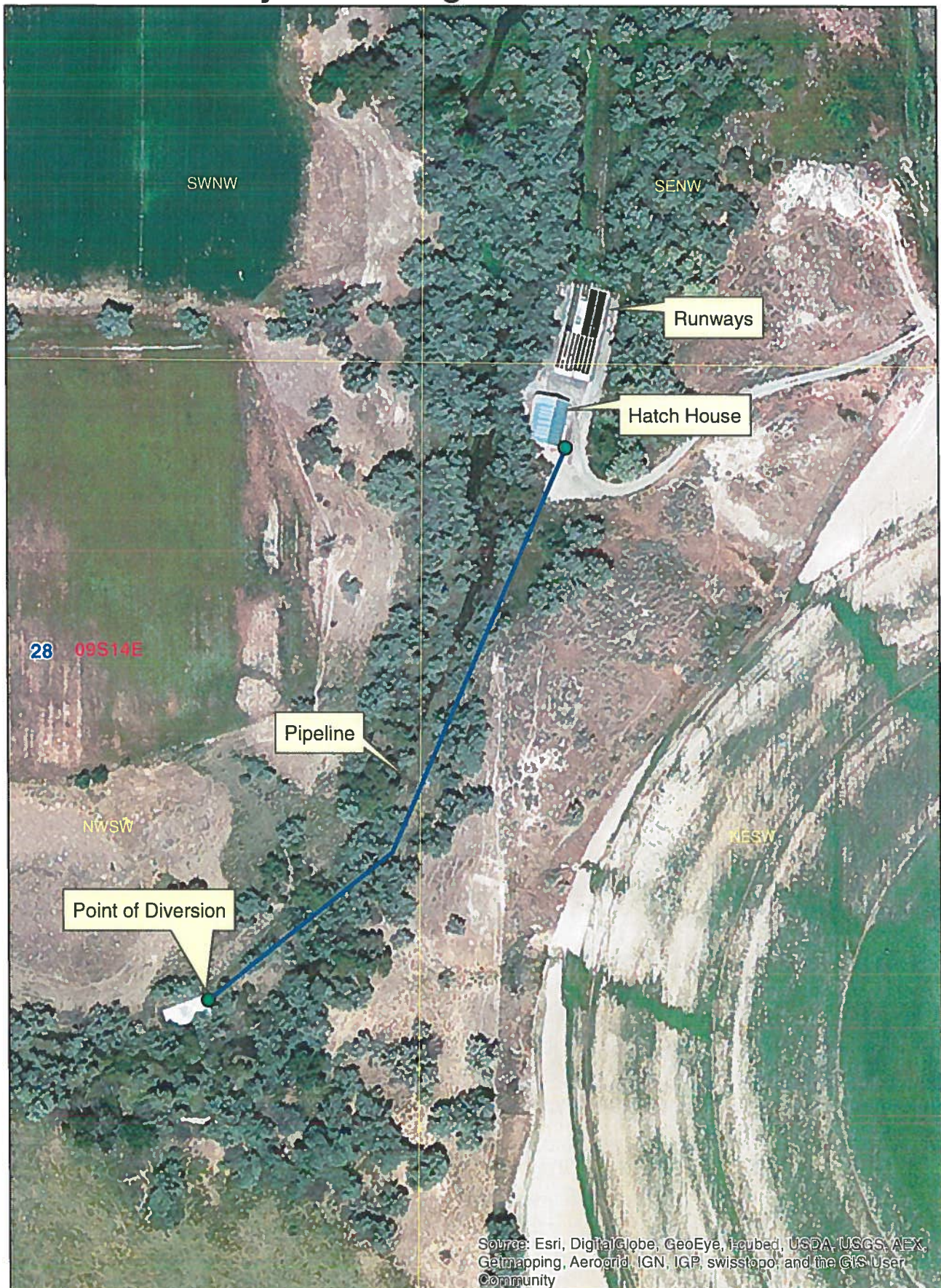


Figure 4: Raceways from upper end looking northeast



Figure 5: Raceways and hatch house from outlet looking southwest

System Diagram 47-8047

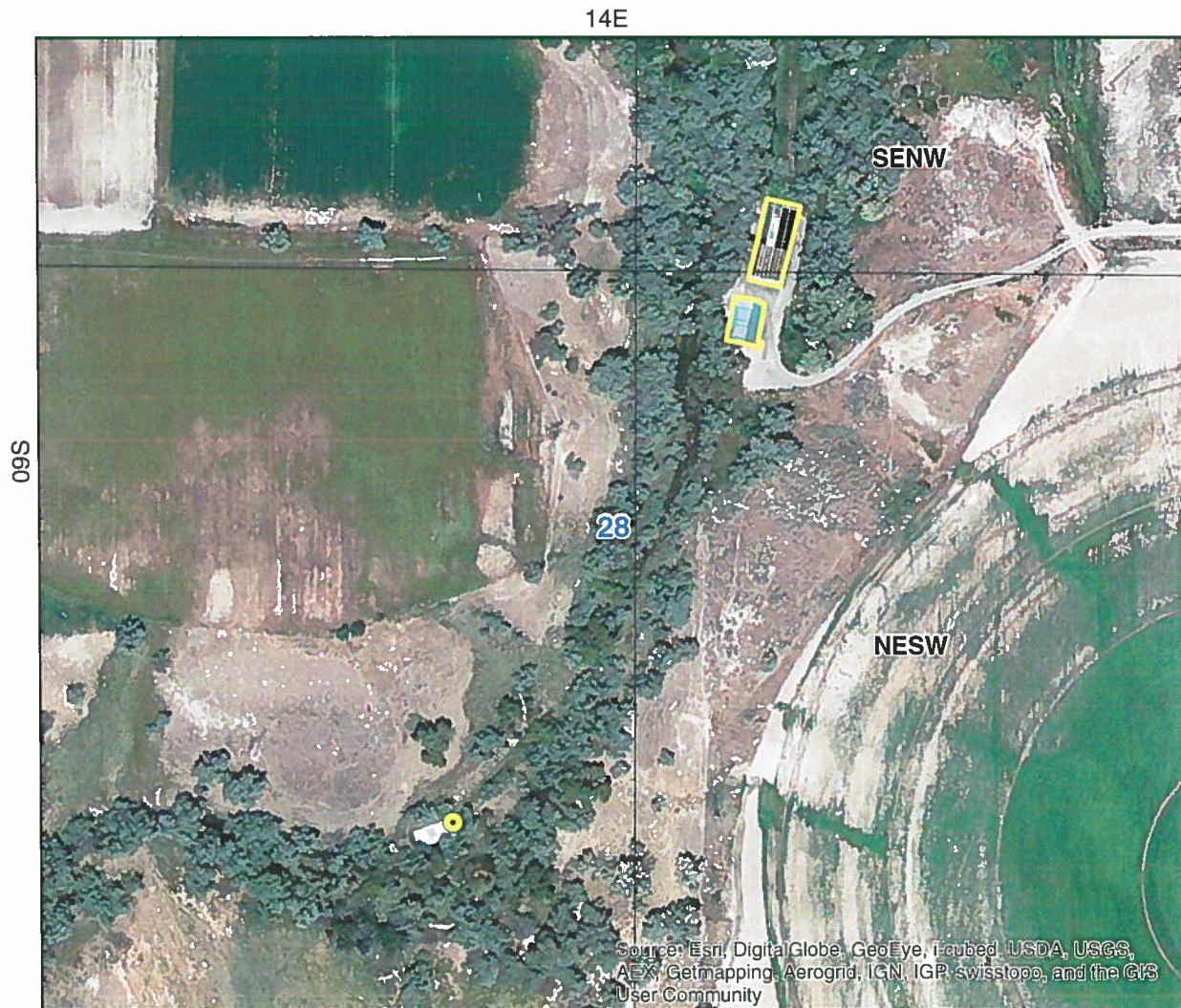


State of Idaho
Department of Water Resources

Attachment To Water Right License

47-8047

This map depicts the FISH PROPAGATION 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
-  Quarter Quarters

0 0.025 0.05 0.1 Miles



DEPARTMENT OF WATER RESOURCES
 Water District
 Meas. No. _____
 Comp. by _____
 Checked by _____
 DISCHARGE MEASUREMENT NOTES

Str. No. _____ Party _____ Date _____
 Width 6.93' Area _____ Vel. _____ G. H. _____ Diach. _____
 Method _____ No. secs. _____ G. H. change _____ in _____ hra. Susp. _____
 Method coef. _____ Hor. angle coef. _____ Susp. coef. _____ Meter No. _____

[illegible]

Measurement rated excellent (2%), good (5%), fair (9%), poor (over 8%), based on following conditions: Cross section

Flow		Weather				
Other		Air		°F@		
Gage		Water		°F@		
				U		
		Record removed		Intake flushed L		
Observer						
Control						
Remarks						

G. H. of zero flow ----- ft.

[illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: WHITES HATCHERY
ADDRESS: 2825 SOUTH 1050 EAST
HAGERMAN, ID 83332
FACILITY: WHITE'S HATCHERY
LOCATION: P.O. BOX 663
BUHL, ID 83316

ATTN: LYNN BABINGTON, OPERATOR

DISCHARGE NUMBER
PERMIT NUMBER

SUM-A
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 83332

MINOR
(SUBR 05)
FACILITY TOTAL
Sum

MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
01/01/2012 TO 01/31/2012

No Discharge ☐

PARAMETER		QUANTITY OR LOADING				QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE		UNITS	VALUE		UNITS					
		VALUE	UNITS	VALUE	UNITS							
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						NS	
01119 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****						Quarterly	COMPOS
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	*****	3.2	cfs	*****	*****	*****	*****	*****		1 / m o	m s
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfs	*****	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE		DATE
			2/13/12
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SEE INSTRUCTION SHEET ACCOMPANYING DMR.

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IDG130063
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DISCHARGE NUMBER

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MINOR
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FACILITY TOTAL
Sum

MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
02/01/2012 TO 02/29/2012

No Discharge ☐

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable		*****	*****	*****	*****	*****	*****	*****			
01119 10 Effluent Gross		*****	*****	*****	*****	*****	*****	*****		Quarterly	COMPOS
Flow, in conduit or thru treatment plant		*****	2.5	cfs	*****	*****	*****	*****		1/14 C	MS
50050 10 Effluent Gross		*****	*****	cfs	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	DATE
				03/19/12
TYPED OR PRINTED	AREA Code	NUMBER	MM/DD/YYYY	

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MM/DD/YYYY TO MM/DD/YYYY
03/01/2012 TO 03/31/2012

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Quarterly	COMPOS
01119 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	2.3	cfs	*****	*****	*****	*****		1/20	W S
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	DATE
				04/17/12
TYPED OR PRINTED	NUMBER		AREA Code	MM/DD/YYYY

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MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
04/01/2012 TO 04/30/2012

No Discharge ☐

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable		*****	*****	*****	*****	*****	*****	*****		NS	
01119 10 Effluent Gross		*****	*****	*****	*****	*****	*****	*****		Quarterly	COMPOS
Flow, in conduit or thru treatment plant		*****	2.3	sf	*****	*****	*****	*****		1/m 6	1m f
50050 1 0 Effluent Gross		*****	*****	cfs	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
		AREA Code	NUMBER
TYPED OR PRINTED		MMDDYYYY	

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**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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MM/DD/YYYY TO MM/DD/YYYY
05/01/2012 TO 05/31/2012

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		VALUE	VALUE	UNITS	VALUE	VALUE	UNITS			
Copper, total recoverable	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		NS	
01119 1 0 Effluent Gross	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	COMPOS
Flow, In conduit or thru treatment plant	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	2.3	cfs	*****	*****	*****		1/14 0	MS
50050 1 0 Effluent Gross	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	cfs	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Lynn Babington</i>		TELEPHONE	DATE
			AREA Code	NUMBER
TYPED OR PRINTED		MM/DD/YYYY		

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MM/DD/YYYY TO MM/DD/YYYY
06/01/2012 TO 06/30/2012

FROM

No Discharge ☐

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable		*****	*****	*****	*****	*****	*****				
01119 10 Effluent Gross		*****	*****	*****	*****	*****	*****	mg/L		Quarterly	COMPOS
Flow, in conduit or thru treatment plant		*****	*****		*****	*****	*****	*****			
50050 1 0 Effluent Gross		*****	*****	cfs	*****	*****	*****	*****		Monthly	MEASRD

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			AREA Code	NUMBER
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MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
07/01/2012 TO 07/31/2012

No Discharge ☐

PARAMETER	SAMPLE MEASUREMENT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable	SAMPLE MEASUREMENT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		NS	
01119 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Quarterly	COMPOS
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT REQUIREMENT	*****	3.5	cfs	*****	*****	*****	*****		1/12/11	1m S
50050 10 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfs	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
TYPED OR PRINTED COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) SEE INSTRUCTION SHEET ACCOMPANYING DMR.			

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MM/DD/YYYY TO MM/DD/YYYY
08/01/2012 TO 08/31/2012

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable	SAMPLE PERMIT MEASUREMENT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		NS	
01119 10 Effluent Gross	SAMPLE PERMIT MEASUREMENT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Quarterly	COMPOS
Flow, in conduit or thru treatment plant	SAMPLE PERMIT MEASUREMENT REQUIREMENT	*****	3.5	cfs	*****	*****	*****	*****		1/40	MS
50050 10 Effluent Gross	SAMPLE PERMIT MEASUREMENT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Lynn Babington</i>		TELEPHONE	DATE
			AREA Code	NUMBER
TYPED OR PRINTED			09/20/12	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		MM/DD/YYYY		

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MM/DD/YYYY TO MM/DD/YYYY
09/01/2012 TO 09/30/2012

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
01119 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		HS	
Flow, in conduit or thru treatment plant	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Quarterly	COMPOS
50050 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	3.0	*****	*****	*****	*****	*****		1/mc	ms
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	DATE
				10/17/12
TYPED OR PRINTED	AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SEE INSTRUCTION SHEET ACCOMPANYING DMR.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (include Facility Name & Location if Different)

NAME: WHITES HATCHERY
ADDRESS: 2825 SOUTH 1050 EAST
HAGERMAN, ID 83332
FACILITY: WHITES HATCHERY
LOCATION: P.O. BOX 663
BUHL, ID 83316

ATTN: LYNN BABINGTON, OPERATOR

IDG130063
PERMIT NUMBER

SUM-A
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 83332

MINOR

(SUBR 05)

FACILITY TOTAL

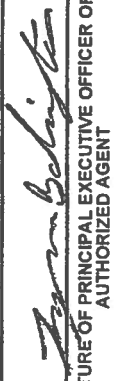
Sum

No Discharge ☐

MONITORING PERIOD	
MM/DD/YYYY	TO
10/01/2012	10/31/2012

FROM

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable		*****	*****	*****	*****	*****	*****			4 J	
01119 10 Effluent Gross		*****	*****	*****	*****	*****	*****	mg/L		Quarterly	COMPOS
Flow, in conduit or thru treatment plant		*****	2.5	cf/s	*****	*****	*****	*****		Monthly	MEASRD
50050 10 Effluent Gross		*****	*****	*****	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	DATE
				11/10/12
TYPED OR PRINTED	AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SEE INSTRUCTION SHEET ACCOMPANYING DMR.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: WHITES HATCHERY
ADDRESS: 2825 SOUTH 1050 EAST
HAGERMAN, ID 83332
FACILITY: WHITE'S HATCHERY
LOCATION: P.O. BOX 663
BUHL, ID 83316

ATTN: LYNN BABINGTON, OPERATOR

IDG130063
PERMIT NUMBER

SUM-A
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 83332
MINOR (SUBR 05)
FACILITY TOTAL
Sum

MONITORING PERIOD	
MM/DD/YYYY	TO
11/01/2012	11/30/2012

No Discharge ☐

PARAMETER	QUANTITY OR LOADING				QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	VALUE			
Copper, total recoverable	*****	*****	*****	*****	*****	*****	*****	*****		NS	
01119 10 Effluent Gross	*****	*****	*****	*****	*****	*****	*****	*****		Quarterly	COMPOS
Flow, in conduit or thru treatment plant	*****	2.0	cfs	*****	*****	*****	*****	*****		Monthly	MEASRD
50050 10 Effluent Gross	*****	*****	*****	*****	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
	<i>Lynn Babington</i>		12-1-12
TYPED OR PRINTED	AREA Code	NUMBER	MMDDYYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SEE INSTRUCTION SHEET ACCOMPANYING DMR.

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: WHITES HATCHERY
ADDRESS: 2825 SOUTH 1050 EAST
HAGERMAN, ID 83332
FACILITY: WHITES HATCHERY
LOCATION: P.O. BOX 663
BUHL, ID 83316

ATTN: LYNN BABINGTON, OPERATOR

DISCHARGE NUMBER	SUM-A
PERMIT NUMBER	IDG130063

DMR Mailing ZIP CODE: 83332
MINOR (SUBR 05)
FACILITY TOTAL
Sum

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2012	12/31/2012

FROM

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			NS	
01119 10 Effluent Gross	SAMPLE MEASUREMENT									Quarterly	COMPOS
	PERMIT REQUIREMENT										
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	*****	1.9	cfh.	*****	*****	*****				
	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfh	*****	*****	*****			Monthly	MEASRD
50050 10 Effluent Gross											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
	<i>Lynn Babington</i>		1/4/13
TYPED OR PRINTED	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
EE INSTRUCTION SHEET ACCOMPANYING DMR.