

77405

Ident. No. 94-8142

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name of Applicant Arlen Lish MURRY WATERWORKS Phone (208) 660-2910
- Mailing address 910 Valleyview Rd Kingston, Idaho
2. Source of water supply well which is a tributary of _____
3. Location of point of diversion is Township 49N Range 5E Sec. 6, in the _____ 1/4, NE 1/4, NE 1/4, Govt. Lot _____, B.M., Shoshone County;
additional points of diversion if any: _____
4. Water will be used for the following purposes:
Amount .2 for Municipal purposes from JAN 1 to Dec 31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
5. Total quantity to be appropriated is (a) .2 and/or (b) _____
cubic feet per second acre feet per annum
6. Proposed diverting works: _____
 - a. Describe type and size of devices used to divert water from the source _____
 - b. Height of storage dam _____ feet; active reservoir capacity _____ acre-feet; total reservoir capacity _____ acre-feet
 - c. Proposed well diameter is _____ inches; proposed depth of well is _____ feet
 - d. Is ground water with a temperature of greater than 85°F being sought? _____
 - e. If well is already drilled, when? 1993; Drilling firm John Carman
Well was drilled for (well owner) Harry Almquist; Drilling Permit No. 94-93-N-23
7. Time required for completion of works and application of water to proposed beneficial use is 5 years (minimum 1 year)
8. Description of proposed uses (if irrigation only, go to item 9):
 - a. Hydropower; show total feet of head and proposed capacity in kW. _____
 - b. Stockwatering; list number and kind of livestock. _____
 - c. Municipal; show name of municipality. Town of Murry DEP #1400039
 - d. Domestic; show number of households. _____
 - e. Other; describe fully. _____

9. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RGE	SEC	NE				NW				SW				SE				TOTALS
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
49N	5E	6	M	M		M													
		5					M	M	M	M									

Total number of acres to be irrigated _____

10. Describe any other water rights used for the same purposes as described above. _____

well & Pump

11. a. Who owns the property at the point of diversion? ARLEN & NANCY LISH

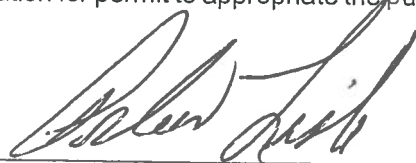
b. Who owns the land to be irrigated or place of use? CITY OF MURRAY

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make the filing: _____

12. Remarks: _____

13. **MAP OF PROPOSED PROJECT REQUIRED** - Attach an 8½"x11" map clearly identifying the proposed point of diversion, place of use, section #, township & range. (A photocopy of a USGS 7.5 minute topographic quadrangle map is preferred.)

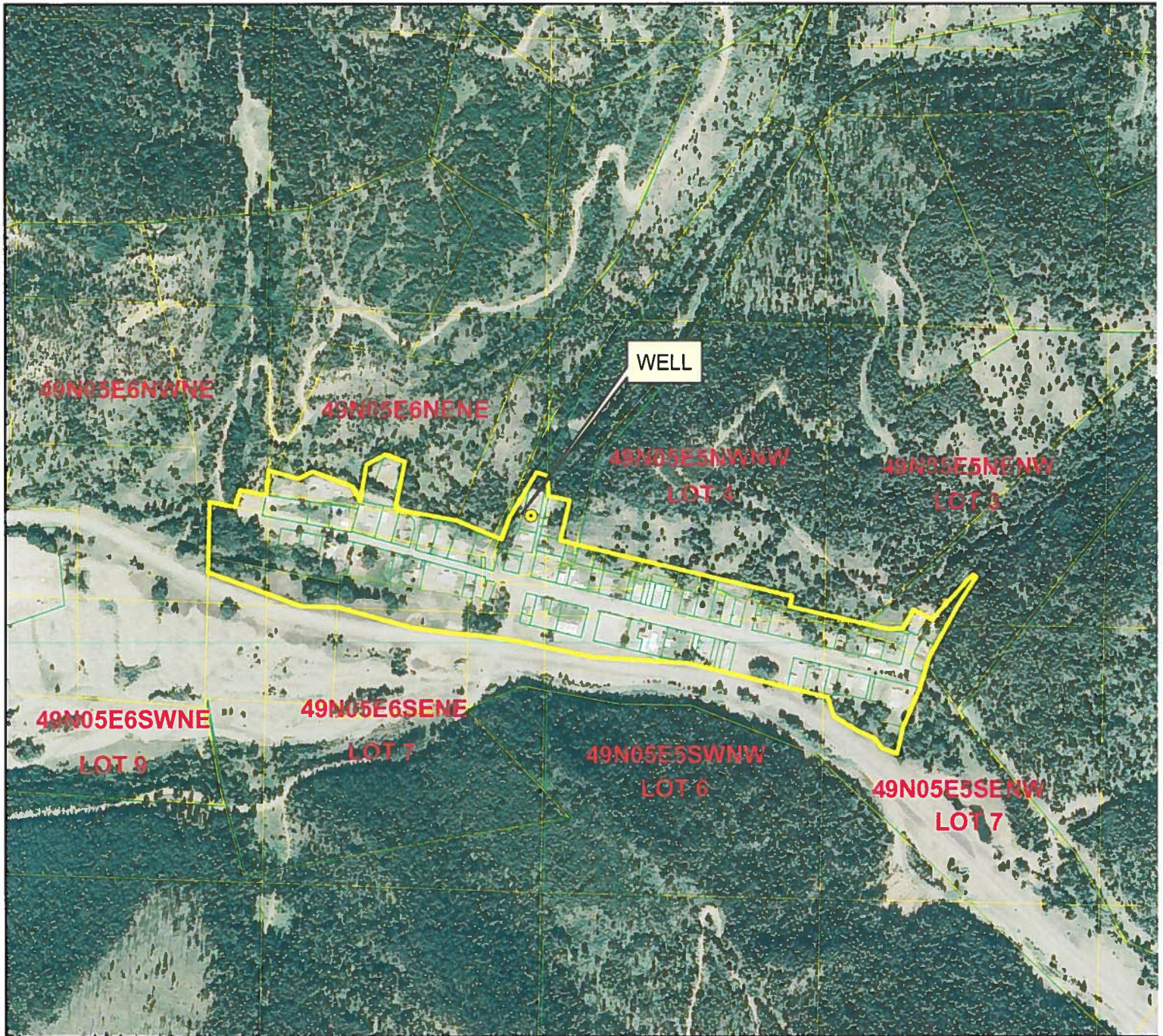
BE IT KNOWN that the undersigned hereby makes this application for permit to appropriate the public waters of the State of Idaho as herein set forth.



Signature of Applicant (and title, if applicable)

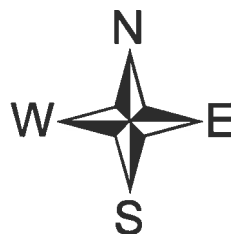
Received by Kew Date 6/22/11 Time 1:30 Preliminary check by _____
 Fee \$ 1001.65 RECEIVED _____ # N021762 Date 6/22/11
 Publication prepared by _____ Date _____ Published in _____
 Publication approved _____ Date _____

94-8142



Legend

-  workingpod
-  workingpou
-  QQ
-  Taxlots





94-8142

MUNICIPAL PROVIDER QUESTIONNAIRE

Date July 12, 2011Applicant MURRAY WATER WORKS

a.) Must be a corporation or association registered to do business in the State of Idaho

Contact Person Arlen LishPhone Number Home 682-3548 Cell 660-2410Public Water Supply Number 1400039

b.) PWS numbers are issued by the Department of Environmental Quality

1. Number of homes proposed

No. 362. Proposed size of lawn & garden per home in acres 0.25Total 9.0

3. Acres of other proposed irrigation such as parks, common areas, open spaces or golf courses

Total 1.0

4. Total acres proposed to be irrigated #2 + #3

Total 10

5. a.) Number of Commercial uses proposed

No. 31.) Specify Type 2 RESTAURANTS
1 County Shop

b.) Total anticipated annual volume use in gallons or acre-feet

No. 2,600,000 gal

6. a.) Number of Industrial uses proposed to be served

No. 11.) Specify Type County Shop

b.) Total anticipated annual volume in gallons or acre-feet

Total 90,000 gal

7. Fire Protection diversion requirement in gallons/minute or cfs.

N/A

a.) Fire Protection will be identified as a separate use on the application.

8. If the source is ground water, has a pump test been performed? Yes +, No _____.

a.) If yes explain the result, including maximum rate of diversion,

well draw down, rate of recovery, etc. DATE AVAILABLE FROMDEQ

MURRAY WATER WORKS
MUNICIPAL PROVIDER CALCULATIONS

DIVERSION RATE COMPARISON

36 HOMES @ 0.28 CFS THEORETICAL

10 ACRES IRRIGATION @ 0.2 CFS THEORETICAL

APPLICANTS REQUEST 0.2 CFS

ANNUAL VOLUME

36 HOMES @ 0.6 AF/HOME = 21.6 AF

10 ACRES IRRIGATION @ 3 AF/AC = 30 .0 AF

COMMERCIAL USE 2,600,000 GALLONS/325,850 GAL/AF = 8.0 AF

INDUSTIAL USE 90,000 GAL/325,850 GAL/AF = 0.3 AF

TOTAL =59.9 AF

FILED EFFECTIVE

94-8142



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

10 SEP 16 AM 8:26

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Murray Water Works

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Arlen M. Lish

410 Valleyview Rd

Kingston, ID 83839

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☒ Services | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Arlen M Lish

410 Valleyview Rd.

Kingston, ID 83839

5. Name and address for this acknowledgment copy is (If other than # 4 above):

Signature:

Printed Name: Arlen M. Lish

Capacity/Title: Owner

Signature:

Printed Name:

Capacity/Title:

Secretary of State use only

0142152

IDAHO SECRETARY OF STATE
09/16/2010 05:00
CK: 177070 CT: 150010 BH: 1239004
1 @ 25.00 = 25.00 ASSUM NAME # 2