

RECEIVED

OCT 22 2012

DEPARTMENT OF
WATER RESOURCES

RECEIVED

NOV 16 2012

STATE OF IDAHO

Ident. No.

74-15989

DEPARTMENT OF WATER RESOURCES

APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name of applicant(s) U.S.D.I., BLM, Idaho State Office Phone (208) 373-3831
 Name connector (check one): ☐ and ☐ or ☐ and/or

Mailing address: 1387 S. Vinnell Way City BoiseState ID Zip 83709-1657 Email: fwprice@blm.gov

2. Source of water supply Groundwater which is a tributary of _____

3. Location of point(s) of diversion:

Twp	Rge	Sec	Govt Lot	1/4	1/4	1/4	County	Source	Local name or tag #
19N	24E	04	1		NE	NE	Lemhi	Groundwater	Tag D0058690

4. Water will be used for the following purposes:

Amount 0.04 for Recreation purposes from 01/01 to 12/31 (both dates inclusive)
 (cfs or acre-feet per year)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
 (cfs or acre-feet per year)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
 (cfs or acre-feet per year)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
 (cfs or acre-feet per year)

5. Total quantity to be appropriated is (a) 0.04 cubic feet per second (cfs) and/or (b) _____ acre-feet per year (af).

6. Proposed diverting works:

a. Describe type and size of devices used to divert water from the source. Existing cold water well (Well Report #0058690) used to cool Sharkey Hot Springs water for recreational use in soaker tubs.

b. Height of storage dam _____ feet; active reservoir capacity _____ acre-feet; total reservoir capacity _____ acre-feet. If the reservoir will be filled more than once each year, describe the refill plan in item 11.

For dams 10 feet or more in height OR reservoirs with a total storage capacity of 50 acre-feet or more, submit a separate Application for Construction or Enlargement of a New or Existing Dam. Application required? ☐ Yes ☐ No

c. Proposed well diameter is 8 inches; proposed depth of well is 61 feet.

d. Is ground water with a temperature of greater than 85°F being sought? ☐ Yes ☒ No

e. If well is already drilled, when? 11-09-2010; drilling firm Foster /Jafco Drilling (license #504);
 Well was drilled for (well owner) U.S.D.I., BLM; Drilling Permit No. 860320

7. Description of proposed uses (if irrigation only, go to item 8):

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 or the applicant's qualifications as a municipal provider. _____

d. Domestic; show number of households _____

e. Other; describe fully. Recreation: cold water (64 degrees) from this well is mixed with hot water (156 degrees) from springs (74-07394) to provide recreationally hot water (104 degrees) at Sharkey Hot Springs soaker tubs.

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8. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- 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	
19N	24E	04					R												
							L1												

Total number of acres to be irrigated: 0

- Describe any other water rights used for the same purposes as described above. Include water delivered by a municipality, canal company, or irrigation district. If this application is for domestic purposes, do you intend to use this water, water from another source, or both, to irrigate your lawn, garden, and/or landscaping? Cold water from this well is used to reduce the temperature of hot water water diverted under permit 74-07394 so that both can be used for recreational purposes in soaker tubs at Sharkey Hot Springs.
- Who owns the property at the point of diversion? BLM
 - Who owns the land to be irrigated or place of use? BLM
 - If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: _____
- Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. This cold water permit from groundwater will be used in conjunction with hot water permit 74-07394 to enable the recreational use of water in soaker tubs at Sharkey Hot Springs.
The pump test at the time of drilling indicates a 25 gpm potential and the pump curve for the pump installed indicates a production of 15 gpm.
- Time required for completion of works and application of water to proposed beneficial use is 5 years (minimum 1 year).
- MAP OF PROPOSED PROJECT REQUIRED** - Attach an 8½" x 11" 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.

The information contained in this application is true to the best of my knowledge. I understand that any willful misrepresentations made in this application may result in rejection of the application or cancellation of an approval.

Signature of Applicant

Fredric W. Price, Water Rights Specialist

Print Name (and title, if applicable)

Signature of Applicant

Print Name (and title, if applicable)

For Department Use:

Received by HP Date 10-22-12 Time 11:00 A Preliminary check by _____
 Fee \$ 100.00 Receipted by HP Receipt No. 1096131 Date 10-22-12

74-15989

8. 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	
19N	24E	04					R												
							L1												

Total number of acres to be irrigated: 0

9. Describe any other water rights used for the same purposes as described above. Include water delivered by a municipality, canal company, or irrigation district. If this application is for domestic purposes, do you intend to use this water, water from another source, or both, to irrigate your lawn, garden, and/or landscaping? Cold water from this well is used to reduce the temperature of hot water water diverted under permit 74-07394 so that both can be used for recreational purposes in soaker tubs at Sharkey Hot Springs.
10. a. Who owns the property at the point of diversion? BLM
- b. Who owns the land to be irrigated or place of use? BLM
- c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: _____
11. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. This cold water permit from groundwater will be used in conjunction with hot water permit 74-07394 to enable the recreational use of water in soaker tubs at Sharkey Hot Springs.
The pump test at the time of drilling indicates a 25 gpm potential and the pump curve for the pump installed indicates a production of 15 gpm.
12. Time required for completion of works and application of water to proposed beneficial use is 5 years (minimum 1 year).
13. **MAP OF PROPOSED PROJECT REQUIRED** - Attach an 8½" x 11" 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.

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Print Name (and title, if applicable)

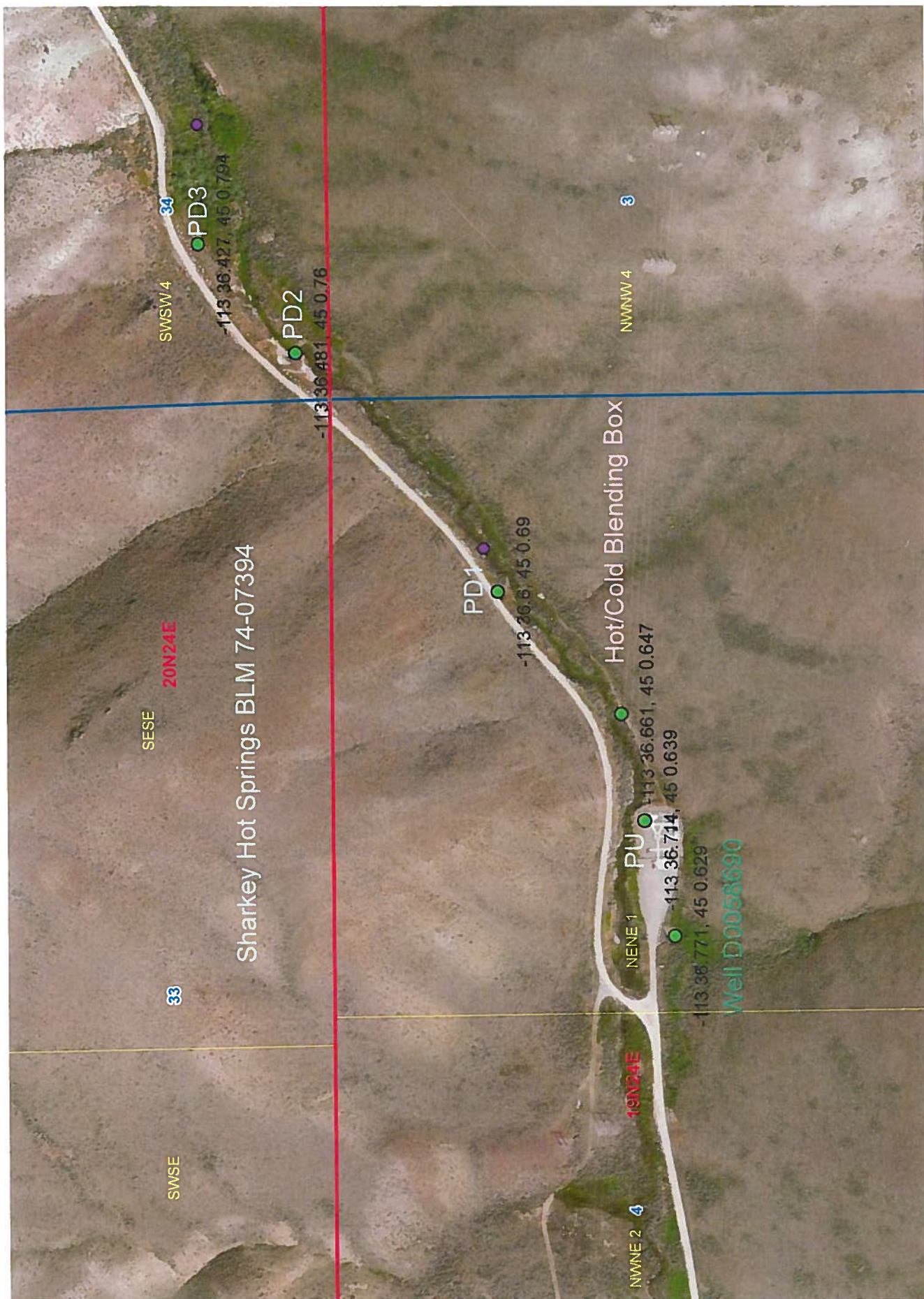
Signature of Applicant

Print Name (and title, if applicable)

For Department Use:

Received by HP Date 10-22-12 Time 11:00 A Preliminary check by _____
 Fee \$ 100.00 Received by HP Receipt No. 1096131 Date 10-22-12

74-15989

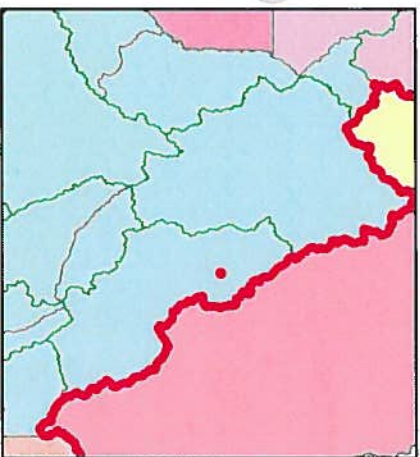




Idaho Department of Water Resources

Application
74-15989
(RECREATION)

- Point of Diversion
- Place of Use
- State Outline
- Townships
- PLS Sections
- Quarter Quarters



0 0.0125 0.025 0.05 Miles



IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTLocation Corrected by IDWR To:
T19N R24E Sec. 4 NENE
By: manders 2012-10-171. WELL TAG NO. D 0058690

Drilling Permit No. _____

Water right or injection well # _____

2. OWNER: Bureau of Land ManagementName Bureau of Land ManagementAddress 1405 Hollipark DriveCity Idaho Falls State Id Zip 83401

3. WELL LOCATION:

Twp. 19 North ☒ or South ☐ Rge. 24 East ☒ or West ☐Sec. 3 10 acres 1/4 SW 40 acres 1/4 NW 160 acres 1/4Gov't Lot _____ County LemhiLat. 45 ° 00.39 (Deg. and Decimal minutes)Long. 113 ° 36.45 (Deg. and Decimal minutes)Address of Well Site Sharky Hot SpringCity Tendoy

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

Lot. _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material Bentonite From (ft) 40 To (ft) 0 Quantity (lbs or ft³) 2,950^{lb} Placement method/procedure overbore/poured

8. CASING/LINER:

Diameter (nominal) 8" From (ft) 18 To (ft) 41 Gauge/Schedule .322 Material Steel

Casing Liner Threaded Welded

☒ ☐ ☐ ☒☐ ☐ ☐ ☐☐ ☐ ☐ ☐☐ ☐ ☐ ☐Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 61 Feet

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____Manufactured screen ☒ Y ☐ N Type LouveredMethod of installation Set - WeldedFrom (ft) 61 To (ft) 41 Slot size 10S Number/ft 3 Diameter (nominal) 8" Material Steel Gauge or Schedule .322☐ ☐ ☐ ☐☐ ☐ ☐ ☐☐ ☐ ☐ ☐☐ ☐ ☐ ☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material 3/8 minus From (ft) 61 To (ft) 40 Quantity (lbs or ft³) 1/4 yard Placement method Poured☐ ☐ ☐ ☐☐ ☐ ☐ ☐☐ ☐ ☐ ☐☐ ☐ ☐ ☐

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____

Describe control device _____

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 18 FT Static water level (ft) 18 FTWater temp. (°F) 64° Bottom hole temp. (°F) 64°Describe access port Removable Well cap

Well test: _____ Test method: _____

Drawdown (feet) 16 FT Discharge or yield (gpm) 25 gpm Test duration (minutes) 24 hrsPump ☒ Bailor ☐ Air ☐ Flowing artesian ☐Water quality test or comments: N/A

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
12"	0	5	Sand		X
	5	10	Sand, clay, some small GRAVEL mix		X
	10	15	Brown clay		X
	15	20	Wet sandy clay & small GRAVEL mix	X	
	20	25	Silty clay small GRAVEL mix		X
	25	30	Clay w/ pea GRAVEL mix		X
	30	32	Clay		X
	32	35	Silty clay		X
	35	36	DRY SAND		X
	36	37	Clay		X
	37	38	Silty clay some small GRAVEL mix		X
	38	40	Rock	X	
	40	42	Black Rock	X	
	42	45	Green Rock	X	
	45	50	Green Rock	X	
	50	53	Green Rock	X	
	53	56	Rock	X	
	56	57	Rock	X	
	57	58	Rock	X	
	58	61	Rock	X	

RECEIVED

NOV 19 2010

Department of Water Resources
Eastern RegionCompleted Depth (Measurable): 61 FTDate Started: 11/2/10 Date Completed: 11/9/10

14. DRILLER'S CERTIFICATION:

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

Company Name Foster/Jafco Drilling No. 504*Principal Driller [Signature] Date 11/17/10*Driller [Signature] Date 11/17/10*Operator II [Signature] Date _____Operator I [Signature] Date _____

* Signature of Principal Driller and rig operator are required.

mailed to IDWR - EASTERN REG on 11/19/10 74-15900

Client Information

Client Name: PLAC SHAW KEY ST

Client Address: 258 N Water Avenue Suite 2 Idaho Falls, IDAHO 83402

Client Phone: 208-529-0077

Client Fax: 208-522-3797

Client Email: info@tetmicro.com

Client Website: www.tetmicro.com

Client Type: Public Water System

Client Category: Preserved With Sodium Thiosulfate

Client Address

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Client Phone: 208-529-0077

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Client Website: www.tetmicro.com

Client Sample Number	Lab Sample Number	Sample Type	Sample Location	Time Collected	Chlorine residual PPM	Original Sample Date	Total Coliforms	Escherichia Coli
	10110141061	S	WELL	12:15 PM			9223B-PA	9223B-PA
							9223B-PA	9223B-PA
							9223B-PA	9223B-PA
							9223B-PA	9223B-PA
							9223B-PA	9223B-PA

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Chain-of-Custody Information

Chain-of-Custody Information

Received by: John Foster

Received by: John Foster

Date: 11/16/10

Date: 11/16/10

Time: 3:43

Time: 3:43

Client Information

Client Name: PLAC SHAW KEY ST

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258 N. Water Ave Suite #2 - Idaho Falls, ID 83402
 phone(208)-529-0077 fax(208)-522-3797 Lab ID: ID06969
 email: tetonmicrolab@gmail.com www.tetonmicro.com

INORGANIC CHEMICAL ANALYSIS REPORT For Public Water Systems

FRDS	Compound	Result	Units	MCL	MDL	Method	Analysis Date	Analyst
1035	Mercury *	ND	mg/L	0.002	0.001	200.8	11/18/2010	RP
1040	Nitrate as N	ND	mg/L	10	1	300.0	11/17/2010	BWH

ND = Not Detected

*Turbidity >1, sample filtered and run for dissolved metals.

LAB RESULT REPORTING CODES:

ND = Not detected within sensitivity of instrument

--- = No analysis performed for this contaminant

Numerical entry = Detection of contaminant at level indicated

Nitric Acid Preservative [] YES [] NO

COMMENTS: Sub-Lab work performed by IAS EnviroChem, Pocatello, ID.

LAB # ID 60952 IAS-EnviroChem warrants the test results, from accepted analytical work, to be of precision normal for sample type and methodology employed for each sample submitted. IAS-EnviroChem disclaims any other warranties, express or implied, including warranty of fitness for a particular purpose and warranty which the client used test results. Any analytical work performed must be governed by the terms and conditions set forth herein.

PWS #:

PWS Name:

Work Order #: 10110142

Lab Sample Tracking #: T10110142001

Date-Time Collected: 11-16-2010 12:15 PM

Sample Type: Water

Date-time Dropped Off: 11-16-2010 03:45 PM

Location Tag #: Well

Sample Collection Location: Well

Date Reported by Lab: 11-18-2010

Jurisdiction:

PWS Contact Phone: (208) 768-2050

Angela J. Jorgensen
 Signature of Lab Supervisor

11/18/10
 Date

SHARKEY'S RECREATION SITE PUMP TEST DATA

DATE: 11/15/10 TO 11/16/10

<u>TIME</u>	<u>GPM</u>	<u>STATIC WATER LEVEL</u>	<u>WATER TEMP in degrees</u>
12:00 pm	15	18 ft	64
12:25 pm	38	24'	64
12:30 pm	97	34'	64
2:30	0	50'	64
Shut it down for 8 ½ minutes that is how long it took to recover to 16 ft			
2:40	32	16'	62
2:44	32	36'	62
2:55	32	36'	62
3:05	32	36'	64
3:15	32	38'	64
3:22	32	48'	64
3:28	32	42'	64
3:40	32	42'	64
3:50	32	42'	64
4:00	32	42'	64
4:10	32	42'	64
4:20	32	42'	64
4:30	32	42'	64
4:30	dropped off to 22 gpm static at 48' still 64 degrees		
4:35	20	48'	64
4:35	shut down took 9 minutes to recover to 20 ft		
4:45	34	20'	64
5:00	34	34'	64
5:15	34	34'	64
5:30	34	34'	64
5:45	34	34'	64
5:50	34	30'	64
6:00	34	30'	64
6:15	34	30'	64
6:20	34	26'	64
6:30	34	30'	64
6:45	34	35'	64
7:00	34	38'	61
7:15	34	39'	62
7:20	34	42'	62
7:40	28	48'	62
7:45	22	50'	63
7:50	24	45'	63
7:55	25	41'	63

8:00	25	45'	63
8:00 to 8:10 shut well down let it recover back to 18 ft			
8:10	30	22'	60
8:15	30	36'	61
8:30	30	46'	60
8:45	24	50'	60
9:00	24	44'	61
9:15	26	40'	62
9:30	28	43'	62
9:45	28	44'	61
10:00	28	42'	60
10:15	28	44'	61
10:30	28	41'	61
10:45	28	40'	61
11:00	28	38'	61
11:15	28	39'	61
11:30	28	39'	61
11:45	28	38'	61
12:00am	28	37'	60
12:15	28	37'	60
12:30	28	37'	60
12:45	28	36'	60
1:00	28	34'	60
1:30	28	34'	59
2:00	28	34'	59
2:30	28	34'	59
3:00	28	34'	59
3:30	28	34'	59
4:00	28	34'	60
5:00	28	34'	61
6:00	28	34'	62
7:00	28	34'	64
8:00	28	34'	65
9:00	28	34'	65
9:30	28	34'	64
10:00	28	34'	64
10:30	28	34'	64
11:00	28	34'	64
11:30	28	34'	64
12:00pm	28	34'	64

Our professional opinion is the well should pump 25 gpm safely, at that your static should maintain between 30 and 34 ft. Our recommendation is setting the pump at 55 ft.

Drilling Permit No. _____
Drilling Permit I.D. Tag No. 50058690
Water Right Permit No. _____
Injection Permit No. _____

State of Idaho
Department of Water Resources

74

APPLICATION FOR DRILLING PERMIT
(FOR THE CONSTRUCTION OF A WELL)

1. Owner (please print): Bureau of Land Management
2. Mailing Address: 1405 Holthpark Drive
City: Idaho Falls State: ID Zip Code: 83401 Telephone: (208) 524-7500
3. Proposed Well Location: Twp. 19N, Rge. 24E, Sec. 4, 1/4 NW 1/4 NW 1/4
Gov't Lot No: _____ County: Lemhi Lat. 45 : 00 : 39 N Long. 113 : 36 : 45
Street Address of Well Site: Sharky Hot Springs City: Tendoy
Lot, block and subdivision: _____
Give at least name of road + Distance to Road or Landmark

4. Proposed Use of Well:

☒ DOMESTIC: The use of water for homes, organization camps, public campgrounds, livestock and for any other purposes in connection therewith, including irrigation of up to 1/2 acre of land, if the total use is not in excess of 13,000 gpd; or any other uses, if the total use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

Domestic does not include water for multiple ownership subdivisions, mobile home parks, commercial or business establishments, unless the use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

NON-DOMESTIC: ☐ Irrigation ☐ Municipal ☐ Industrial
☐ Livestock ☐ Test ☐ Other _____
Type _____ Number Hd. _____ (Describe)

☐ INJECTION

☐ MONITORING: A well bore schematic and map is required for each blanket permit. No. of proposed wells: _____

5. Well Construction Information:

A. ☒ New well ☐ Modify ☐ Replace
B. Proposed Casing Diameter 6" Proposed Maximum Depth 160'
C. Anticipated bottom hole temperature:
☒ 85 F or less (Cold Water Well) ☐ 85 F to 212 F (Low Temp. Geo. Well) ☐ 212 F. or more (Geothermal Well)

6. Construction Start Date: 11/1/10

7. Anticipated Well Driller: Foster/Jafco Well Drilling Driller's Lic. No. 504
NOTE: The actual well driller must be identified prior to drilling.

8. Applicant's Signature: [Signature] Date: 10/25/2010

Address (if different than owner): _____

City: _____ State: _____ Zip Code: _____ Telephone: _____

Title: Supervisory Civil Engineer
(Owner, Firm Representative, Other)

AGENCY OF THE DEPARTMENT OF WATER RESOURCES

This Permit is Approved

Date Oct 25, 2010

If approved, this permit authorizes the construction or modification of a well subject to the following conditions. **READ CAREFULLY!**

GENERAL CONDITIONS:

1. This drilling permit is valid for two (2) months from the above approval date for the start of construction and is valid for one (1) year from the approval date for completion of the well unless an extension has been granted.
2. This permit does not constitute an approval of the District Health Department or the Idaho Department of Health and Welfare, which may be required before construction of the well. All wells must be drilled a minimum distance of 100 feet from a drain field. Domestic and Public Water Supply wells must be drilled a minimum of 50 feet and 100 feet respectively from a septic tank.
3. The well shall be constructed by a driller currently licensed in the State of Idaho who must maintain a copy of the drilling permit at the drilling site.
4. Approval of this drilling permit does not authorize trespass on the land of another party.
5. This permit does not constitute other local, county, state or federal approvals, which may be required for construction of a well.
6. This drilling permit does not represent a right to divert and use the water of the State of Idaho.
7. If a bottom hole temperature of 85 or greater is encountered, well construction shall cease and the well driller and the well owner shall contact the Department immediately.
8. Idaho Code, S 55-2201 - 55-2210 requires the applicant and/or his contractors to contact "Digline" (DigLine is a one-call center for utility notification) not less than 2 working days prior to the start of any excavation for this project. The "DigLine" Number for your area is 1-800-342-1585.
9. Please be advised that this drilling permit should be considered and treated as a preliminary permit. If you are in disagreement with this preliminary permit you have fourteen (14) days of the service date of this permit to petition the Department for reconsideration pursuant to Section 67-5243, Idaho Code.
10. The well tag for the drilling permit/start card shall be securely and permanently attached to the well casing through welding or by the use of four closed end domed stainless steel pop rivets. The tag attachment will be done at the time of completion of the well, and prior to removing the drill rig from the drill site.

SPECIFIC CONDITIONS:

James M. Dunn

Signature of Authorized Department Representative

Sr Water Resource Agent

Title

Receipt No. E036233 Received by SL Fee 75⁰⁰ Date Oct 25, 2010

EXTENSION OF DRILLING PERMIT

Extension approved by _____ Approval Date _____

This extension expires: _____



State of Idaho

DEPARTMENT OF WATER RESOURCES

Eastern Region, 900 North Skyline Drive, Suite A • Idaho Falls, Idaho 83402-1718

Phone: (208) 525-7161 • Fax: (208) 525-7177 • Web Site: www.idwr.idaho.gov

December 12, 2012

C. L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

USDI BLM
IDAHO STATE OFFICE
1387 S VINNELL WAY
BOISE, ID 83709-1657

Application For Permit No. 74-15989

Dear Applicant(s):

The Department of Water Resources has received your water right application. Please refer to the number referenced above in all future correspondence regarding this application.

A legal notice of the application has been prepared and is scheduled for publication in the RECORDER-HERALD on December 20 and 27, 2012. Protests to this application may be submitted for a period ending ten (10) days after the second publication.

If the application is protested, you will be sent a copy of each protest. All protests must be resolved before the application can be considered for approval. If the protest(s) cannot be resolved voluntarily, the Department will conduct a conference and/or hearing on the matter.

If the application is not protested, the Department will process your application and notify you of any action taken on the application. If your application is approved, the Department will send you a copy of the permit.

Please contact this office if you have any questions regarding the application.

Sincerely,

Sharla Cox
Administrative Assistant



State of Idaho

DEPARTMENT OF WATER RESOURCES

Eastern Region, 900 North Skyline Drive, Suite A • Idaho Falls, Idaho 83402-1718

Phone: (208) 525-7161 • Fax: (208) 525-7177 • Web Site: www.idwr.idaho.gov

C. L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

December 12, 2012

STATE OF IDAHO
DEPT OF ENVIRONMENTAL QUALITY
900 N SKYLINE DR STE B
IDAHO FALLS, ID 83402

Application to Permit No. 74-15989

STATE OF IDAHO :

The Department of Water Resources is seeking written comment and/or recommendations from your agency regarding the above referenced water right application. A copy of the application is enclosed for your reference.

This office can publish notice of the application as soon as the initial review is completed; therefore, your prompt response to this request is appreciated. If your agency desires to formally protest the approval of this application, you may do so after the notice is published by filing a written protest along with a \$25.00 filing fee within 10 days after final publication.

Please contact this office if you have any questions regarding the application.

Sincerely,

Sharla Cox
Administrative Assistant

Enclosure(s)

Cox, Sharla

From: Cox, Sharla
Sent: Wednesday, December 12, 2012 12:52 PM
To: 'Recorder Herald (rhlegals@custertel.net)'
Subject: Legal Notice for your paper
Attachments: Recorder Herald.doc

Contacts: Recorder Herald

Sharla

Sharla Cox
Administrative Assistant
Idaho Department of Water Resources
900 N. Skyline Dr. Ste. A
Idaho Falls ID 83402
208-525-7161 - telephone
208-525-7177 - fax
sharla.cox@idwr.idaho.gov

The following application(s) have been filed to appropriate the public waters of the State of Idaho:

74-15988

E DALE JOLLEY

650 LEMHI RD

SALMON, ID 83467

Point of Diversion

SWNW S20 T21N R23E

LEMHI County

Source GEERTSON CREEK Tributary LEMHI RIVER

Use: STOCKWATER

11/01 to 03/15 0.2 CFS

Total Diversion: 0.2 CFS

Date Filed: 12/3/2012

Place Of Use: STOCKWATER

T21N R23E S19 SESW NESE NWSE SWSE SESE

T21N R23E S20 SWNW NWSW

T21N R23E S30 NWNE NENW

This application proposes the diversion and use of water from Geertson Creek tributary to the Lemhi River a tributary of the Salmon Wild & Scenic River. The decreed minimum stream flow rights for the federal Wild & Scenic Rivers are subordinate to certain categories of water use and to specific amounts of water use established after the minimum stream flow. The water use proposed in this application will benefit from the subordination provision because it is for stockwater purposes.

74-15989

USDI BLM

IDAHO STATE OFFICE

1387 S VINNELL WAY

BOISE, ID 83709-1657

Point of Diversion

L1(NENE) S4 T19N R24E

LEMHI County

Source GROUND WATER Tributary

Use: RECREATION

01/01 to 12/31 0.04 CFS

Total Diversion: 0.04 CFS

Date Filed: 10/22/2012

Place Of Use: RECREATION

T19N R24E S4 NENW

This application proposes the diversion and use of water from ground water tributary to the Salmon Wild & Scenic River. The decreed minimum stream flow rights for the federal Wild & Scenic Rivers are subordinate to certain categories of water use and to specific amounts of water use established after the minimum stream flow. The water use proposed in this application will benefit from the subordination provision because it is for recreation purposes.

Permits will be subject to all prior water rights. For additional information concerning the property location, contact Eastern Region office at (208) 525-7161. Protests may be submitted based on the criteria of Idaho Code § 42-203A. Any protest against the approval of this application must be filed with the Director, Dept. of Water Resources, Eastern Region, 900 N Skyline Dr Ste A, Idaho Falls ID 83402 together with a protest fee of \$25.00 for each application on or before January 7, 2013. The protestant must also send a copy of the protest to the applicant.

GARY SPACKMAN, Director

Published on December 20 and 27, 2012