

A. GENERAL INFORMATION

Exam Date: 9/21/2012

- ## SINKS

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

1. LOCATION OF POINT(S) OF DIVERSION:

Method of Determination: GPS

2.

PLACE OF USE: DOMESTIC

[illegible]

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

D. FLOW MEASUREMENTS

1. Measurements: No measurement taken.

E. FLOW CALCULATIONS

Measured Method:

☐ Additional Computation Sheets Attached

F. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

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

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

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

2. Volume Calculations for Other Uses:

Standard domestic volume (in-house use only) = 0.6 af/year x 2 = 1.2 acre-feet per year

G. NARRATIVE/REMARKS/COMMENTS

Spring was developed. Water is collected in box and conveyed in 4-inch pvc pipe. Skunk on path in front of spring box, so pictures are from a distance. PVC pipe terminates after 100 feet. Water flows back into natural stream channel and sinks. Homes identified in permit already have domestic wells. Spring source developed as a back-up, emergency supply in times of a power outage.

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	1.20 AF
<u>Totals:</u>		0.040 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

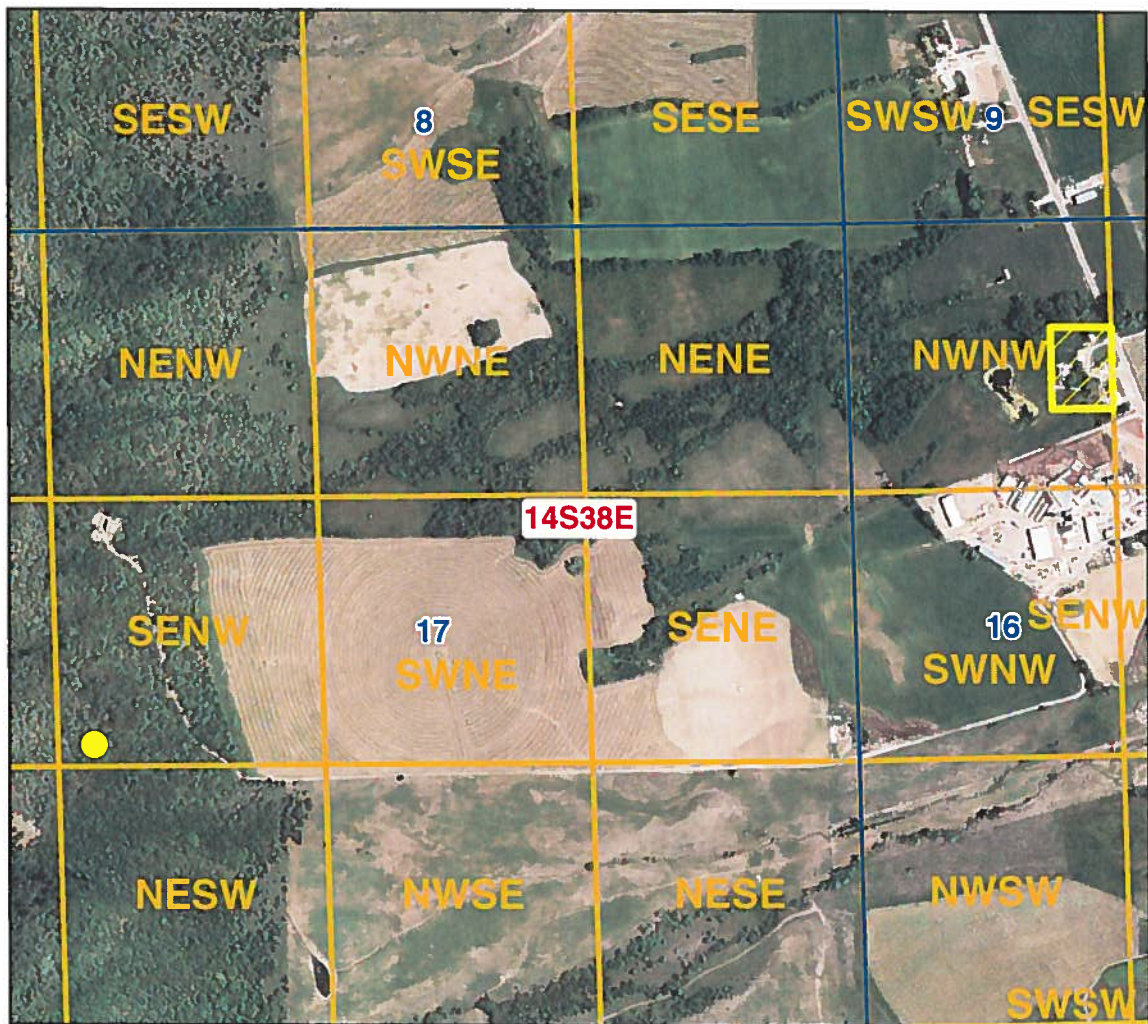
I. AUTHENTICATION

Field Examiner's Name _____ Date _____

Reviewer _____ Date _____



13-7548 (Westover Living Trust)



Legend

-  Water Right POD
-  Water Right POU
-  Township/Range
-  Sections
-  QQ

0 1,250 2,500
Feet

