

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 17-7118

Exam Date: 5/21/2012

1. Current Owner: PAUL D CAMPBELL
430 N 600 W
LOGAN UT 84321
(801)752-8519

2. Accompanied by: **TALKED TO JOHN CAMPBELL**
Phone No:
Address: **SON**
Relationship to Permit Holder:

3. **SOURCE** **TRIBUTARY**
GROUND WATER

B. OVERLAP REVIEW

1. Other water rights with the same place of use: **17-7136**
2. Other water rights with the same point of diversion: **17-7136**

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

GROUND WATER	NE1/4NE1/4	Sec. 16, Twp 16S, Rge 30E, B.M.
ONEIDA County		
GROUND WATER	NE1/4SE1/4	Sec. 16, Twp 16S, Rge 30E, B.M.
ONEIDA County		

Method of Determination: **AIR PHOTOS**

2.

PLACE OF USE: IRRIGATION

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
16S	30E	16	40.0	40.0	40.0	40.0									40.0	40.0	40.0	40.0	320.0

Total Acres: 320

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

4.

<u>Well or Diversion ID No.*</u>	<u>Motor Make</u>	<u>Hp</u>	<u>Motor Serial No.</u>	<u>Pump Make</u>	<u>Pump Serial No. or Discharge Size</u>
North	125 hp		US MOTORS		
South	200 hp				

*Code to correspond with No. on map and aerial photo

D. FLOW MEASUREMENTS

1.

<u>Measurement Equipment</u>	<u>Type</u>	<u>Make</u>	<u>Model No.</u>	<u>Serial No.</u>	<u>Size</u>	<u>Calib. Date</u>

2. Measurements:

5/23/1996 Field exam measurement
 SONIC METER AT 900 gpm just the
 North well
 2.00 cfs

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

Measured Method:

RUNNING 10 LINES @ 33 birds/line @ 3.3 gpm
 = 1089 gpm = 2.42 cfs

F. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 320 \times 3.5 = 1120$$

$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation season}) \times 1.9835 = 2. \times 214 \times 1.9835 = 849$$

$$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 849$$

2. Volume Calculations for Other Uses:

G. NARRATIVE/REMARKS/COMMENTS

two wells/pumps to mainlines and handlines. only one well in the NENE was completed for this exam. It was running 10 handlines, 33 birds X 3.3 gpm or 2. cfs and irrigates a full 320 acres. Measured with a sonic meter at 900 gpm. Both wells in place.

now owned by Black Pine Farms, John Campbell 2475 South Juniper Rd, Malta ID 83342

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>
IRRIGATION	04/01 to 10/31	2.000 CFS	849.00 AF
<u>Totals:</u>		2.000 CFS	849.00 AF

2. Recommended Amendments

☐ Change P.D. as reflected above ☒ Add P.D. as reflected above ☒ None

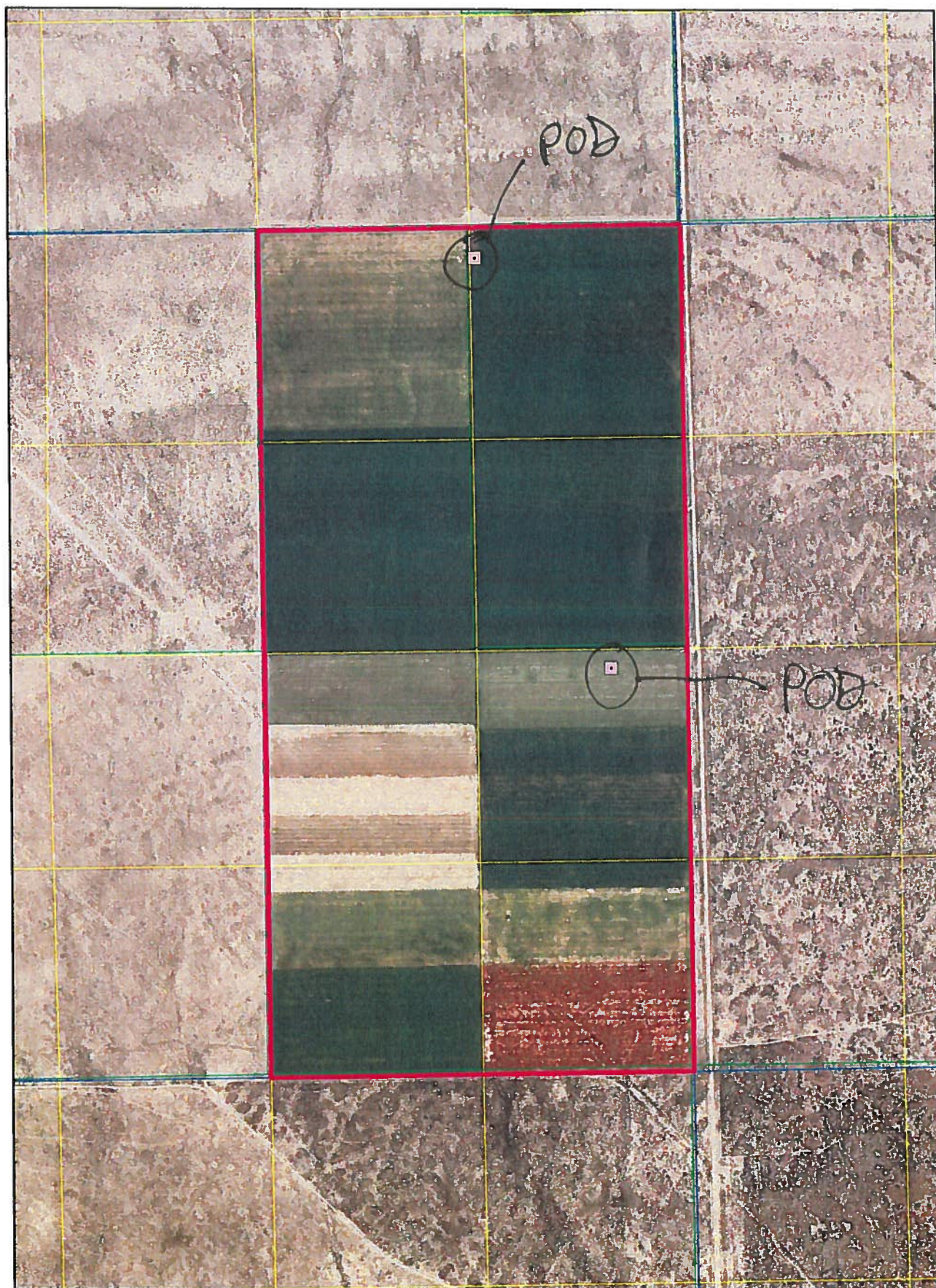
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other

I. AUTHENTICATION

Field Examiner's Name DAVE CARLSON Date 3/21/2012
 Reviewer James Cefalo Date 6/18/2012

No. L 4339		Due no later than Feb 29, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. BLACK PINE FARM, LP JOHN O CAMPBELL 2475 S JUNIPER RD MALTA ID 83342 USA		JOHN O CAMPBELL 2475 S JUNIPER RD MALTA ID 83342			
				3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	JOHN O CAMPBELL	2475 S JUNIPER RD	MALTA	ID	USA	83342	
5. Organized Under the Laws of: ID L 4339		6. Annual Report must be signed.* Signature: John O. Campbell Name (type or print): John O. Campbell Date: 12/12/2011 Title: General Partner					
Processed 12/12/2011		* Electronically provided signatures are accepted as original signatures.					

17-7118



PAUL CAMPBELL

15/4



PERMIT
NUMBER

17-07118

FIELD EXAM NOTES

EXAM # 17-02118

DATE OF EXAM 5/23/96

PERMITEE NAME Paul Campbell

OTHER WATER RIGHTS SAME POD NONE

OTHER WATER RIGHTS SAME POU NONE

PUMP #1 HP 125 MAKE U.S. MOT SERIAL # _____
COLOR AND DESCRIPTION gray / Red / White Out
OUTPUT DIAMETER 10" SYSTEM PRESSURE 40 PSI WELL DEPTH 450'
STATIC H2O 120' WELL DEPTH 450' DYNAMIC PUMP 280'
PSI GAGE TYPE BAROMETER CO. CHECK VALVE [Y] [N] GATE VALVE [Y] [N]
Remick C.A.

PUMP #2 HP _____ MAKE _____ SERIAL # _____
COLOR AND DESCRIPTION _____
OUTPUT DIAMETER _____ SYSTEM PRESSURE _____ PSI WELL DEPTH _____
STATIC H2O _____ WELL DEPTH _____ DYNAMIC PUMP _____
PSI GAGE TYPE _____ CHECK VALVE [Y] [N] GATE VALVE [Y] [N]

BOOSTER PUMP #1 HP _____ MAKE _____ SERIAL # _____
COLOR AND DESCRIPTION _____

BOOSTER PUMP #2 HP _____ MAKE _____ SERIAL # _____
COLOR AND DESCRIPTION _____

CIRCLE PIVOT [Y] [N] NUMBER OF TOWERS _____ PIVOT LENGTH _____
PRESSURE [H] [L]

HAND LINES [Y] [N] NUMBER OF LINES 8-10 LENGTH OF LINES 1320

RAIN BIRDS PER LINE 33/line NOZZEL DIAMETER 1/8

SURFACE WATER TYPE OF MEASUREING DEVICE _____

AA METER PIGMY METER WEIR OR FLUME BUCKET/WATCH _____/_____

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PERMIT
NUMBER

17-07118

4/4



PERMIT
NUMBER

17-07118

214



PERMIT
NUMBER

17-07118

PAUL CAMPBELL

15/4



PERMIT
NKMBE4

17-07118

PAUL CAMPBELL

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PERMIT
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