

RECEIVED

JUN 05 2012

IDWR / NORTH

RECEIVED

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

JUN 08 2012

STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY	
Amt. of Fee \$:	50.00
Receipt No.:	N929251
Receipt By:	DO
Date Received:	6/5/12

The Idaho Department of Water Resources considers this form a statement by the permit holder(s) that development of a water right has been **completed** and that water has been applied to beneficial use to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner.** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, please contact any Department office or visit the Department's website at: www.idwr.idaho.gov for an Assignment of Permit form. If you wish to relinquish your permit because you have not established the authorized use of the water and are not applying for an extension, please notify the Department in writing.

1. Permit No.: 95-10028 Telephone No.: 707-529-87902. Name of Permit Holder(s): Arthur M. / JEAN A. KRUCKMAN3. Mailing Address: P.O. Box 132 City: AtholState: ID Zip: 83801 Email: KRUCKMAN@sonic.net4. Source of Water: Groundwater If **GROUND WATER** (well), Date Drilled: mo. ____ / yr. ____Well Driller: _____ Drilling Permit Number: 0033559

5. Extent of use(s) completed (as authorized by the water right permit):

Domestic (No. of households): 1 Stockwater (No. and type of stock): 0.02 cfs homeIrrigation (No. of acres): 1 Other: 0.03 cfs IRRIGATION6. Total rate of diversion or storage volume for which proof is submitted: 0.05 cfs OR _____ acre-feet.7. Compliance with a measuring device requirement, lockable controlling device requirement, and/or other conditions of permit: **Refer to the approval conditions on your permit and respond accordingly. The Department will not issue a license if permit conditions are not met.****Measuring Device:** Is a measuring device required?

Yes	☐	No	☒
Yes	☒	No	☐

If yes, has the measuring device been installed?

Lockable Controlling Device: Is a lockable device required to control the diversion?

Yes	☐	No	☒
Yes	☒	No	☐

If yes, has the lockable device been installed?

Other Conditions of Permit: Do the approval conditions on your permit require you to submit additional information in connection with your proof of beneficial use? If yes, list the conditions below and attach documents with the required information.N/ACompleted? Yes ☐ No ☒8. Fee Enclosed: \$ 50.00 See fee schedule on back of the instructions for filing proof of beneficial use. Proofs filed without an appropriate fee, will be considered incomplete.

9. Person to contact to accompany the Department representative during field examination of the water system.

Name: _____ Telephone Number: _____

Mailing Address: _____ City: _____

State: _____ Zip: _____ Email: _____

The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted and applied to a beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

Signature of permit holder: Jean A. Kruckman
(Include your title, if on behalf of company or organization)Date: 6/5/2012

Mail to: Idaho Department of Water Resources, PO Box 83720, Boise, ID 83720-0098

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only			
Well ID No.			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat:	:	Long:	:

1. WELL TAG NO. D 0033559
DRILLING PERMIT NO. 811 446
Water Right or Injection Well No. _____

2. OWNER:

Name George Durrin
Address 3200 N. Sheep Springs Rd.
City Athol State ID Zip 83801

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 53 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 5 E 1/4 SW 1/4 SE 1/4
Gov't Lot _____ County Kootenai

Lat: 47 : 57: 748 Long: 116: 43 : 644 WGS 84

Address of Well Site Rosebud past Sheep Springs

City Athol

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

Lt. _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK check all that apply

(Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	18	250#	dry granular

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

Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	523	250	Steel	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☐ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method _____

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

460 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
50+			5 hrs

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: cold & Clear

Depth first Water Encounter 516

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water	Y	N
10	0	18	Gravel, boulders			
8	18	63	Gravel, cobbles			
	63	121	Gravel, fine			
	121	153	Gravel, coarse			
	153	171	Cobbles			
	171	173	Boulder			
	173	188	Gravel, fine			
	188	219	Gravel, with fines			
	219	240	Cobbles			
	240	278	Gravel, coarse			
	278	280	Boulder			
	280	295	Cobbles, very coarse			
	295	310	Gravel, medium w/fines			
	310	340	Gravel, fine			
	340	378	Gravel, medium			
	378	424	Gravel, coarse			
	424	448	Gravel, fine w/sand			
	448	465	Gravel, fine w/brown silt			
	465	480	Gravel, medium, silt			
	480	498	Gravel, fine w/sand, silt			
	498	516	Sand, coarse, w/sand			
	516	523	Gravel, fine			

RECEIVED

APR - 7 2004

IDWR North

Completed Depth 523' (Measurable)

Date: Started 3/12/04 Completed 3/13/04

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 McCarthy Drilling & Pump Inc Firm No. 586

Principal Driller [Signature] Date 3-17-04

Driller or Operator II _____ Date _____

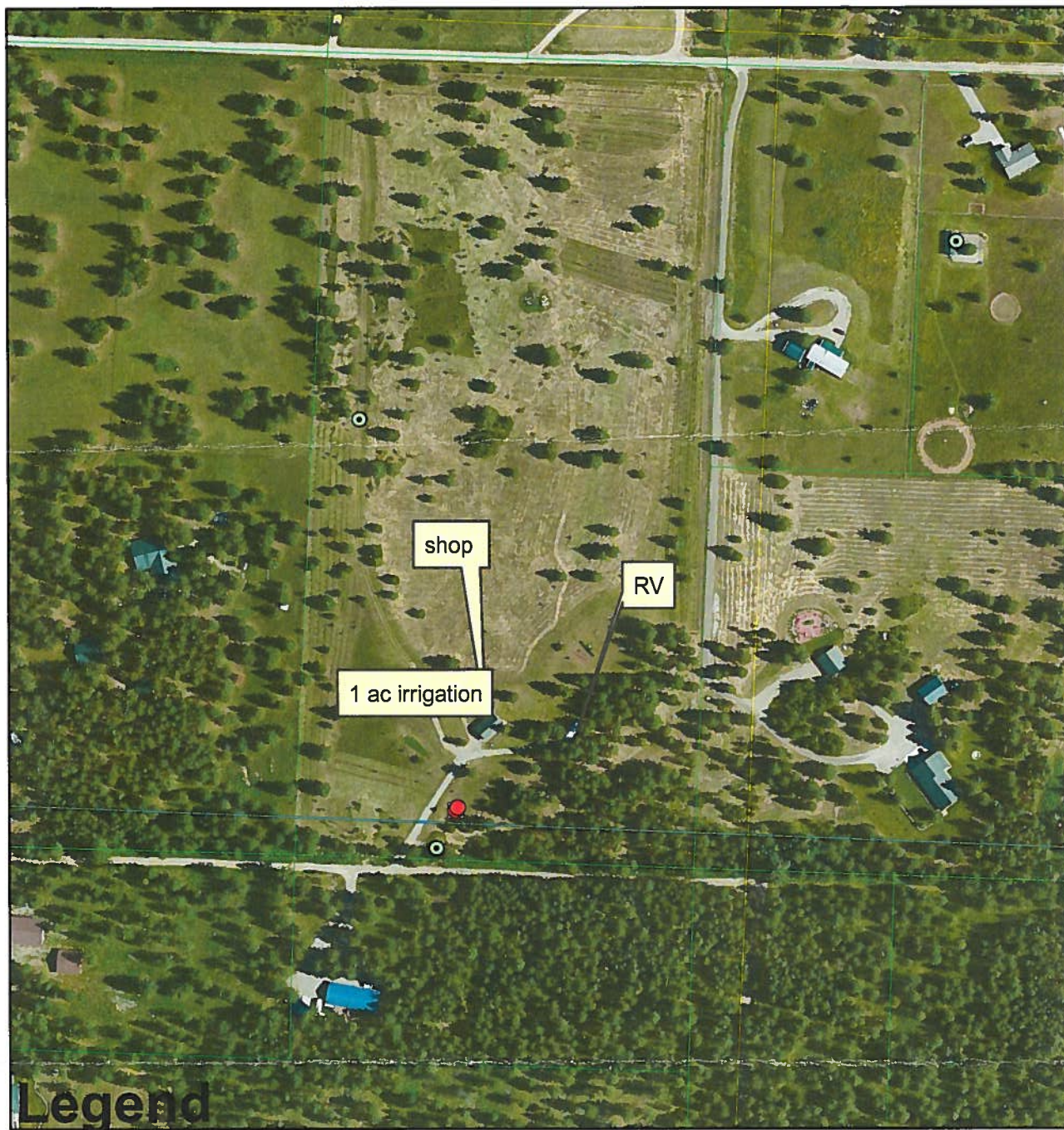
Operator I [Signature] Date 3-17-04

Principal Driller and Rig Operator Required.

Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES

95-10028



- Wells
- QQ
- Water Permit POD
- Right POD
- Taxlots

1 inch = 263 feet

