

77651

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT
To appropriate the public waters of the State of Idaho

Ident. No. 96-9496

1. Name of applicant(s) Sherri L. Mitchell & John T. Polarine Phone 208-255-2713
Name connector (check one): ☐ and ☐ or ☐ and/or

Mailing address: PO Box 1345 City Sagle
State ID Zip 83860 Email: s/mitchell@sandpoint.net

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 #
S6N	1W	27	1		NE	NE	Bonner	Groundwater	D0059594

4. Water will be used for the following purposes:

Amount .04 cfs for Domestic 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) .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. well D0059594
completed 9/28/2011 and connected to existing home.

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 6" inches; proposed depth of well is 200' feet.

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

e. If well is already drilled, when? 9.28.2011; drilling firm Agua Drilling
Well was drilled for (well owner) MITCHELL & POLARINE; Drilling Permit No. 862 862 138

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 1

e. Other; describe fully. _____

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	
56N	1W	27	D																
			66																
			1																

Total number of acres to be irrigated: _____

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? 96 - 09185

10. a. Who owns the property at the point of diversion? Applicants
- b. Who owns the land to be irrigated or place of use? Applicants
- 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. Drilled well D0059594 ~~to be~~ connected to existing home Frost free spigot at well head.

LAT: N48°:10':39" Long W106°:25':10"

12. Time required for completion of works and application of water to proposed beneficial use is 1 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.

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.

Sherri L. Mitchell
Signature of Applicant
Sherri L. Mitchell
Print Name (and title, if applicable)

John T. Polarine
Signature of Applicant
JOHN T. POLARINE
Print Name (and title, if applicable)

For Department Use: mst

Received by dm Date 12/07/2011 Time 5:32 Preliminary check by _____
Fee \$ 100 Received by dm Receipt No. N028754 Date _____

