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IDWR / NORTH

77531

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

Ident. No. 96-94931. Name of applicant(s) CRAIG, LEONI Phone _____Name connector (check one): ☐ and ☐ or ☐ and/orMailing address: 447 TAM TAM DR City SAGLEState ID Zip 83860 Email: _____2. Source of water supply GROUND WATER which is a tributary of _____

3. Location of point(s) of diversion:

Twp	Rge	Sec	Govt Lot	¼	¼	¼	County	Source	Local name or tag #
56N	03W	25			SW	SW	BONNER	GROUND WATER	

4. Water will be used for the following purposes:

Amount 0.04 for DOMESTIC purposes from 1-1 to 12-31 (both dates inclusive)
(cfs or acre-feet per year)Amount 0.03 for IRRIGATION purposes from 4-1 to 13-31 (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)5. Total quantity to be appropriated is (a) 0.07 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. PUMP IN WELL

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 ☐ Noc. Proposed well diameter is 6 inches; proposed depth of well is 177 feet.d. Is ground water with a temperature of greater than 85°F being sought? ☐ Yes ☒ Noe. If well is already drilled, when? 11-09-2004; drilling firm AQUA DRILLINGWell was drilled for (well owner) JOHN C WILSON; Drilling Permit No. D0039690

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 ONE

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	03W	25											D						
												1							1

Total number of acres to be irrigated: 1

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? _____
10. a. Who owns the property at the point of diversion? WILLIAM LUCE 447 TAM TAM SAGLE ID 83860 EASMENT
- b. Who owns the land to be irrigated or place of use? APPLICANT
- 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. ONE HOME AND IRRIGATION OF 1 AC.
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.

Signature of Applicant

 Print Name (and title, if applicable)
Craig Leon

Signature of Applicant

 Print Name (and title, if applicable)

Received by  Date 9/20/11 Time _____ Preliminary check by _____
 Fee \$ 100 Received by  Receipt No. N028131 Date 9/20/11

APPLICATION



Legend
QQ
Taxlots
2009 1ft Kootenai County
RGB
Red: Band_1
Green: Band_2
Blue: Band_3

0 87.5 175 350 525 700 Feet



IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Office Use Only

Well ID No. 396642

Inspected by ROE, J2

Twp 56N Rge 3W Sec 25

1/4 SW 1/4 SW 1/4

Lat: : : Long: : :

1. WELL TAG NO. D 0039690
 DRILLING PERMIT NO. 526015
 Water Right or Injection Well No.

2. OWNER:
Name John C. Wilson
Address PO Box 364 Sagle
City Sagle State Id. Zip 83860

3. LOCATION OF WELL by legal description:

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

Twp. 56 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 25 1/4 NE 1/4 NE 1/4 NE 1/4
Gov't Lot _____
County Bonner 10 acres 40 acres 160 acres
Lat: : : Long: : :
Address of Well Site 549 Tamtam Dr

City _____
(Give at least name of road - Distance to Road or Landmark)
Lt. _____ Blk. _____ Sub. Name Round Lake Meadows
Lot #12

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	20	500 lbs	over bore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 177
Was drive shoe seal tested? ☐ Y ☒ N How? Air Pressure

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+1	-177	250	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE *NONE*

Perforation Method _____
Screen Type & Method of Installation _____

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

10. FILTER PACK *NONE*

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

63 ft. below ground Artesian pressure _____ lb.
Depth flow encountered ft. Describe access port or control devices:

Bolted Well Cap

12. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
50			

Water Temp. Cool Bottom hole temp. Cool
Water Quality test or comments: Good

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

[illegible]

Completed Depth 177' (Measurable)

Date: Started 11-8-04 Completed 11-9-04

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 **SEARCH & EXPLORATION INC.** Firm No. **163**

Principal Driller Scott N. Brumfield Date _____

Driller or Operator II Wayne Miller Date 11-10-04

Operator I _____ Date _____

Principal Driller and Rig Operator *Required*
Operator I must have signature of Driller/Operator II