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JUN 20 2011

DEPT. OF WATER RESOURCES

SOUTHERN REGION

1. Name of applicant(s) Barney & Sherrie GreenerName connector (check one): ☐ and ☒ or ☐ and/orIdent. No. 7740245-14352STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES

## APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

Phone 208-677-4170Mailing address: 19 West 200 SouthCity BurleyState Idaho Zip 83318Email: barneygreener@hotmail.com2. Source of water supply groundwaterwhich is a tributary of na

3. Location of point(s) of diversion:

| Twp | Rge | Sec | Govt Lot | ¼ | ¼  | ¼  | County | Source      | Local name or tag # |
|-----|-----|-----|----------|---|----|----|--------|-------------|---------------------|
| 11S | 23E | 06  |          |   | NE | NW | Cassia | groundwater | EO 009088           |
|     |     |     |          |   |    |    |        |             |                     |
|     |     |     |          |   |    |    |        |             |                     |
|     |     |     |          |   |    |    |        |             |                     |

4. Water will be used for the following purposes:

Amount .02 for heating & cooling purposes from 1/1 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) .02 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. 6" well with 1hp pump

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 70' feet.d. Is ground water with a temperature of greater than 85°F being sought? ☐ Yes ☒ Noe. If well is already drilled, when? June '94; drilling firm Chesley Drilling;Well was drilled for (well owner) Lynn Morgan; Drilling Permit No. 45-94-S-0030-000

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 \_\_\_\_\_

e. Other; describe fully. Daycare Facility - Non consumptive heat pump. Water is pumped from main well then ran through heating/cooling system. Water is then reinjected through well 45W027001

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 |        |
| 11S | 23E | 06  |    |    |    |    | X  |    |    |    |    |    |    |    |    |    |    |    |        |
|     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |        |
|     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |        |
|     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |        |
|     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |        |

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? na
10. a. Who owns the property at the point of diversion? Current owners (Barney & Sherrie Greener)
- b. Who owns the land to be irrigated or place of use? na
- c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: na
11. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. Lorraine's Daycare has a main 6" well to heat and cool the facility. The water is pumped from the main well through the heating and cooling system. Once the water has passed through the system, it is then injected through an injection well (45W027001).
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.

Sherrie Greener  
Signature of Applicant  
Sherrie Greener (co-owner)  
Print Name (and title, if applicable)

Barney Greener  
Signature of Applicant  
Barney Greener (co-owner)  
Print Name (and title, if applicable)

For Department Use:

Received by \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ Preliminary check by \_\_\_\_\_  
Fee \$ 100<sup>00</sup> Received by B. Walker Receipt No. 5031996 Date 6/27/2011

# Legend

ESPA

GCDB Township/Range

GCDB Section

GCDB Quarter-Quarter

Counties

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