

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

D. FLOW MEASUREMENTS

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calibration Date
N/A						

Measurements N/A

E. NARRATIVE/REMARKS/COMMENTS

DOMESTIC USE: Assessor information per: ArcMap photo (2004), tax lot research, Elmore county Assessor web page confirmed dwelling on site for identified owner.

Parcel # RP03506e249620

See attached well log. Regional well staff notified if exam confirms well log legal incorrect.

Have conditions of permit approval been met? ☒ Yes ☐ No

F. FLOW CALCULATIONS

Measured Method:

☐ Additional Computation Sheets Attached

ALLOW PERMIT RATE

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation: N/A

VI.R. = (Acres Irrigated) x (Irrigation Requirement) =

VD.R. = [Diversion Rate (cfs)] x (Days in Irragions Season) x 1.9835 =

V = Smaller of VI.R. and VD.R. =

2. Volume Calculations for Other Uses: ALLOW
1.2 or 0.6
AF for
domestic,
add stock
AF if
applicable

H. RECOMMENDATIONS

1. Recommended Amount

BENEFICIAL USE	PERIOD OF USE		RATE OF DIVERSION ANNUAL	
	From	To	Q(cfs)	V(afa)
DOMESTIC	1/1	12/31	0.04	1.2
~~STOCKWATER~~ (if applicable)				

TOTALS 0.04 1.2

2. Recommended Amendments

☐ Change P.D. as reflected above
☐ Change P.U. as reflected above

☐ Add P.D. as reflected above
☐ Add P.U. as reflected above

☒ None
☐ Other

I. AUTHENTICATION

Field Examiner's Name Jean Hersley
Reviewer

Jean Hersley

Date 5/18/2011
Date

RECEIVED

FEB 10 2010

WATER RESOURCES
WESTERN REGIONSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES**STATEMENT OF COMPLETION**
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$: 50-
Receipt No. W038131
Receipt By: DB
Date Received: 2-10-2010

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.

- Permit No. 61-07574 Telephone No. 208-587-9362
- Name of Permit Holder(s): Frosty L. Frost Cynthia L. Frost
- Mailing Address: 1113 N. 18th East City MT. HOME
State ID Zip 83647 Email: N/A
- Source of Water: Ground Water If **GROUND WATER** (well), Date Drilled: mo. 04 (Re-Drill) yr. 92
Well Driller: Hiddleston Drill & Pump Co. Drilling Permit Number: 61-92-W-011-100
- Extent of use(s) completed (as authorized by the water right permit):
Domestic (No. of households): ONE Stockwater (No. and type of stock): N/A
Irrigation (No. of acres): .5 ACRES Other: 13,000 GAL PER DAY MAX
- Total rate of diversion or storage volume for which proof is submitted: 0.04 cfs OR — acre-feet.
- 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.

Completed? Yes ☐ No ☒

- 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.

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

Name: Frosty L. Frost Telephone Number: 208-587-9362
Mailing Address: 1113 N. 18th East City MT. HOME
State ID Zip 83647 Email: N/A

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: Frosty L. Frost Date: 8 Feb. 2010
(include your title, if on behalf of company or organization)

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

R-4

1. WELL OWNER Name <u>JACK FROST</u> Address <u>1113 N. 18th East, Mtn Home, ID 83647</u> Drilling Permit No. <u>61-92-W-011-160</u> Water Right Permit No. _____	7. WATER LEVEL Static water level <u>360</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____ Describe artesian or temperature zones below.																																																																																																																																																																																																																																		
2. NATURE OF WORK ☐ New well ☒ Deepened ☐ Replacement ☐ Well diameter increase ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____ <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td></td><td></td><td>1</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>	Discharge G.P.M.	Pumping Level	Hours Pumped			1																																																																																																																																																																																																																												
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG 89128 <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td></td><td></td><td></td><td>No Circulation</td><td></td><td></td></tr><tr><td>6</td><td>125</td><td>138</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>138</td><td>140</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>140</td><td>174</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>174</td><td>177</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>177</td><td>193</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>193</td><td>195</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>195</td><td>222</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>222</td><td>223</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>223</td><td>225</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>225</td><td>228</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>228</td><td>250</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>250</td><td>253</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>253</td><td>272</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>272</td><td>274</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>274</td><td>287</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>287</td><td>289</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>289</td><td>315</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>315</td><td>317</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>317</td><td>320</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>320</td><td>327</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>327</td><td>371</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>371</td><td>373</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>373</td><td>383</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>383</td><td>386</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>386</td><td>481</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>481</td><td>486</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>486</td><td>488</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>488</td><td>492</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>492</td><td>493</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>493</td><td>500</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>500</td><td>518</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>518</td><td>520</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>520</td><td>536</td><td>Medium Hard</td><td></td><td></td></tr><tr><td>"</td><td>536</td><td>538</td><td>Soft</td><td></td><td></td></tr><tr><td>"</td><td>538</td><td>553</td><td>Medium Hard</td><td></td><td></td></tr></tbody></table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No				No Circulation			6	125	138	Medium Hard			"	138	140	Soft			"	140	174	Medium Hard			"	174	177	Soft			"	177	193	Medium Hard			"	193	195	Soft			"	195	222	Medium Hard			"	222	223	Soft			"	223	225	Medium Hard			"	225	228	Soft			"	228	250	Medium Hard			"	250	253	Soft			"	253	272	Medium Hard			"	272	274	Soft			"	274	287	Medium Hard			"	287	289	Soft			"	289	315	Medium Hard			"	315	317	Soft			"	317	320	Medium Hard			"	320	327	Soft			"	327	371	Medium Hard			"	371	373	Soft			"	373	383	Medium Hard			"	383	386	Soft			"	386	481	Medium Hard			"	481	486	Soft			"	486	488	Medium Hard			"	488	492	Soft			"	492	493	Medium Hard			"	493	500	Soft			"	500	518	Medium Hard			"	518	520	Soft			"	520	536	Medium Hard			"	536	538	Soft			"	538	553	Medium Hard		
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>Hiddleston & Son, INC</u> Firm No. <u>#35</u> RT <u>3</u> , Box <u>610-D</u> Address <u>Mtn Home, ID 83647</u> Date <u>3-31-92</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>Matt Hiddleston</u>																																																																																																																																																																																																																																		
5. WELL CONSTRUCTION Casing schedule: ☐ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Was casing drive shoe used? ☐ Yes ☐ No Was a packer or seal used? ☐ Yes ☐ No Perforated? ☐ Yes ☐ No How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun Size of perforation _____ inches by _____ inches Number _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☐ Yes ☐ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☐ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth _____ Material used in seal: ☐ Cement grout ☐ Bentonite ☐ Pudding clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☐ Overbore to seal depth Method of joining casing: ☐ Threaded ☐ Welded ☐ Solvent Weld _____ ☐ Cemented between strata Describe access port _____	Thickness	Diameter	From	To	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	6. LOCATION OF WELL Sketch map location must agree with written location. N W E S Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Elmore</u> SE ¼ SE ¼ Sec. <u>24</u> , T. <u>3</u> N ☐ S ☒ R. <u>6</u> E ☐ W ☐																																																																																																																																																																																																														
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