

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 37-20726

Exam Date: 3/18/2005

1. Current Owner: DON J FARNES
PO BOX 207
SHOSHONE ID 83352
(208) 487-3636

And/Or

DORLA FARNES
PO BOX 207
SHOSHONE ID 83352
(208)487-3236

And/Or

WEST SHORE SUBDIVISION HOMEOWNERS ASSN
PO BOX 207
SHOSHONE ID 83352
(208)487-3636

2. Accompanied by: Don Farnes
Phone No:
Address:
Relationship to Permit Holder:

- ### 3. SOURCE
- GROUND WATER

B. OVERLAP REVIEW

1. Other water rights with the same place of use: None
2. Other water rights with the same point of diversion: None

C. DIVERSION AND DELIVERY SYSTEM

1. LOCATION OF POINT(S) OF DIVERSION:

GROUND WATER	NW1/4NW1/4NW1/4	Sec. 11,	Twp 02S,	Rge 17E, B.M.
CAMAS County				
GROUND WATER	SW1/4NW1/4NW1/4	Sec. 11,	Twp 02S,	Rge 17E, B.M.
CAMAS County				

Method of Determination: GPS.

2. **PLACE OF USE:** DOMESTIC

[illegible]

PLACE OF USE: IRRIGATION

Tw	Rge	Sec	NE				NW				SW				SE				Totals
02S	17E	11	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	2.4

Total Acres: 2.4

PLACE OF USE: COMMERCIAL

Tw	Rge	Sec	NE				NW				SW				SE				Totals
02S	17E	11	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
								X											

Method of Determination:

3. ☒ Delivery System Diagram Attached (required). Indicate all major components and distances between components. Indicate weir size/pipe as applicable.
- ☐ Map Attached Showing Location(s) of point(s) of diversion and place(s) of use (required). Scale must be 1:24,000 or greater.
- ☐ Aerial Photo Attached (required for irrigation of 10+ acres).
- ☒ Photo of Diversion and System Attached

4.

<u>Well or Diversion</u> <u>ID No.*</u>	<u>Motor Make</u>	<u>Hp</u>	<u>Motor Serial No.</u>	<u>Pump Make</u>	<u>Pump Serial No. or Discharge</u> <u>Size</u>
		3			
		1			

*Code to correspond with No. on map and aerial photo

D. FLOW MEASUREMENTS – Not Measured

1.

<u>Measurement</u> <u>Equipment</u>	<u>Type</u>	<u>Make</u>	<u>Model No.</u>	<u>Serial No.</u>	<u>Size</u>	<u>Calib. Date</u>

2. Measurements:

E. FLOW CALCULATIONS☐ Additional Computation Sheets Attached

Measured Method: Pump #1 Restaurant: 3HP pump rated for 36.2 gpm at 50 psi per pump installer = 0.08 cfs.
Pump #2 Irrigation Well Pump: 1HP pump rated for 30.7 gpm open discharge = 0.07 cfs

F. VOLUME CALCULATIONS**1. Volume Calculations for Irrigation:**

Irrigation volume established per agreement between applicant and protestant to allow withdrawal of protest and subsequent processing of application.

2. Volume Calculations for Other Uses:

Commercial volume established per agreement between applicant and protestant to allow withdrawal of protest and subsequent processing of application.

Domestic: 0.6 AF (Culinary Domestic) x 7 = 4.2 AF

G. NARRATIVE/REMARKS/COMMENTS

Jim Stanton completed this field exam and left adequate notes, prior to his retirement, making it possible for me to complete this Beneficial Use Field Report without performing an additional field exam.

Jim Stanton performed the field exam on March 18, 2005. Applicants provided Jim with evidence of pre-1987 development to allow processing of application for permit under moratorium conditions. Evidence included copies of well logs and a statement from Wood River Drilling Co. verifying the capacity of the diversion works. The irrigation well pumps 0.07 cfs and the domestic /commercial well pumps 0.08 cfs. Jim stated that available GIS data indicated approximately 2.5 acres were irrigated in 1987. Jim's notes indicate there were 4 homes present (Lots 5A; Lot 1 less Tax Lot #1369; Lot 2 less Tax Lot #1369; and Lot 3) and a motel and restaurant on a commercial lot (Lot 14).

Per email from Shelley Keen, the modified condition 020 on the permit, which explained the details of the agreement reached between by the protestant and the applicant, was removed and replaced with the standard 020 condition.

Recommend flow and volume as permitted.

Have conditions of permit approval been met? x Yes No
note: permit subject to special private agreement between protestant and applicant.

H. RECOMMENDATIONS**1. Recommended Amounts**

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>DIVERSION RATE</u>	<u>ANNUAL VOLUME</u>
DOMESTIC	01/01 to 12/31	0.080 CFS	4.20 AF
IRRIGATION	06/01 to 09/30	0.070 CFS	4.20 AF
COMMERCIAL	01/01 to 12/31	0.080 CFS	1.60 AF
<u>Totals:</u>		0.150 CFS	10.00 AF

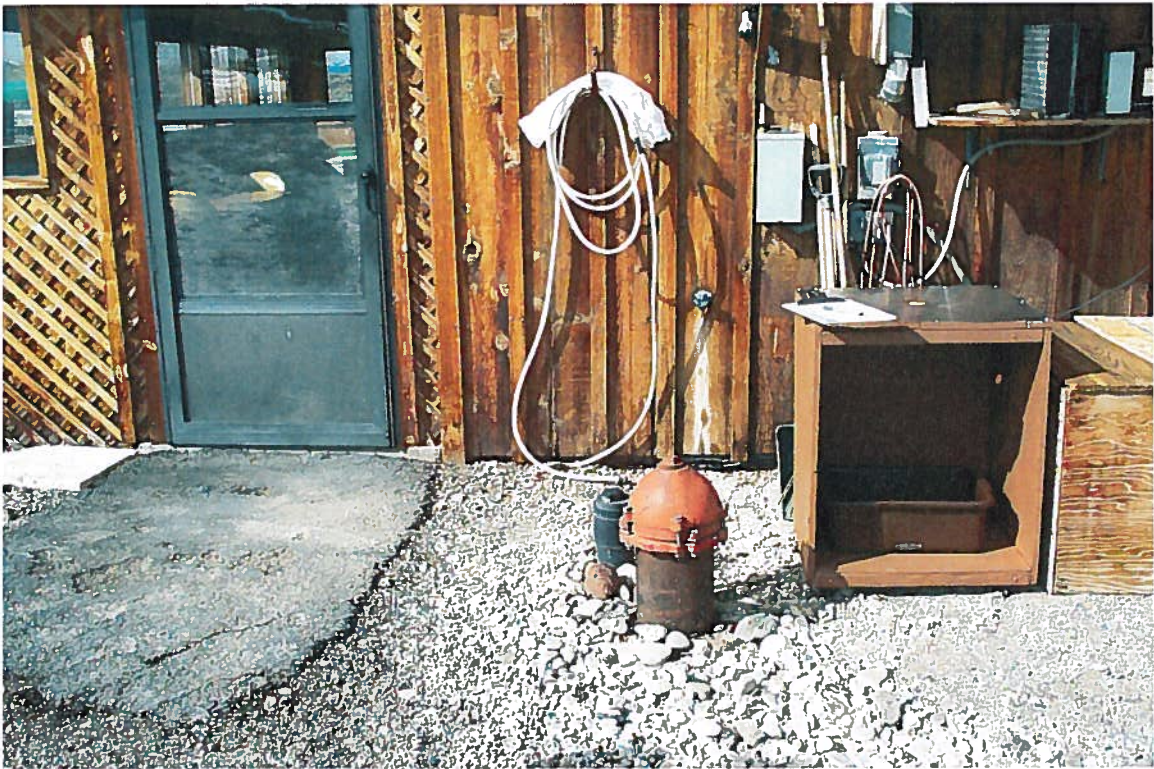
2. Recommended Amendments

 Change P.D. as reflected above Add P.D. as reflected above x None

 Change P.U. as reflected above Add P.U. as reflected above Other

I. AUTHENTICATION

Field Examiner's Name Jim Stanton Date 4/11/11
Reviewer [Signature] Date 5/20/11



Well At Farnes Home Looking North –
Permit 37-20726 By J E Stanton 3-18-05



Golf Course Looking South
By J E Stanton 3-18-05



Golf Course Looking SE – Permit 37-20726
By J E Stanton 3-18-05



Golf Course Looking West (Former Motel On Left)
By J E Stanton 3-18-05



Well On Golf Course Looking SE – Permit 37-20726 By J E Stanton 3-18-05



Pond & Pressure Pump For Golf Course Looking NE From Well By J E Stanton 3-18-05



Home On South End of Property – Permit 37-20726
By J E Stanton 3-18-05



Home West of Golf Course Looking SW
By J E Stanton 3-18-05



Another Home West of Golf Course Looking NW
Permit 37-20726 By J E Stanton 3-18-05



Home West of Pond Looking NW
By J E Stanton 3-18-05



Irrigated Area (0.4 ac) North of Farnes Home – Permit 37-20726
By J E Stanton 3-18-05



Camping Area & Grass NW of Farnes Home
By J E Stanton 3-18-05 Looking North

37-20726
8/2000



Looking North west
(Northern portion of West Shore Subdiv.)

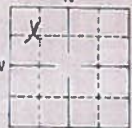


Looking west
(Southern Portion of West Shore Subdiv.)





STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENState 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.

1. WELL OWNER Name _____ Address _____ Owner's Permit No. <u>37-87-5-029</u>		7. WATER LEVEL Static water level _____ feet below land surface. Flowing? ☐ Yes ☐ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ OF. Quality _____ Describe artesian or temperature zones below																																				
2. NATURE OF WORK ☐ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☐ Bailor ☐ Air ☐ Other _____																																				
3. PROPOSED USE ☐ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		<table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td>40 GPM</td><td>30</td><td>10 min</td></tr><tr><td>30 GPM</td><td>55</td><td>10 min</td></tr><tr><td>25 GPM</td><td>42.5</td><td>10 min</td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	40 GPM	30	10 min	30 GPM	55	10 min	25 GPM	42.5	10 min																							
Discharge G.P.M.	Pumping Level	Hours Pumped																																				
40 GPM	30	10 min																																				
30 GPM	55	10 min																																				
25 GPM	42.5	10 min																																				
4. METHOD DRILLED ☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		9. LITHOLOGIC LOG <table border="1"><thead><tr><th>Bore Diam.</th><th>Depth From</th><th>To</th><th>Material</th><th>Water Yes No</th></tr></thead><tbody><tr><td></td><td>55</td><td>65</td><td></td><td></td></tr><tr><td></td><td>65</td><td>83</td><td>hard loose siltstone</td><td></td></tr><tr><td></td><td>83</td><td>87</td><td>gray siltstone</td><td></td></tr><tr><td></td><td>87</td><td>90</td><td>yellow clay</td><td></td></tr><tr><td></td><td>90</td><td>138</td><td>loose rock & clay</td><td></td></tr><tr><td></td><td>138</td><td>142</td><td>hard gray siltstone</td><td></td></tr></tbody></table>		Bore Diam.	Depth From	To	Material	Water Yes No		55	65				65	83	hard loose siltstone			83	87	gray siltstone			87	90	yellow clay			90	138	loose rock & clay			138	142	hard gray siltstone	
Bore Diam.	Depth From	To	Material	Water Yes No																																		
	55	65																																				
	65	83	hard loose siltstone																																			
	83	87	gray siltstone																																			
	87	90	yellow clay																																			
	90	138	loose rock & clay																																			
	138	142	hard gray siltstone																																			
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ Thickness _____ Diameter _____ From _____ To _____ inches inches inches + feet feet feet feet inches inches inches feet feet feet feet inches inches inches feet feet feet feet Was casing drive shoe used? ☐ Yes ☐ No Was a packer or seal used? ☐ Yes ☐ No Perforated? ☐ Yes ☐ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ perforations feet feet feet feet perforations feet feet feet feet perforations feet feet 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 _____		10. Work started _____ finished _____																																				
6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Camas</u> T. _____ S. _____ R. _____ E/W _____		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>D & G GRIMM</u> Firm No. <u>17</u> Address _____ Date _____ Signed by (Firm Official) <u>Dale Grimm</u> and (Operator) <u>Dale Grimm</u>																																				

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT

RECEIVED

MAY 15 2002

Department of Water Resources
Southern Region

MICROFILMED

FEB 10 2004

Irrig. well

37-20726