

77224

APR 21 2011

STATE OF IDAHO

Ident. No. 91-7337

DEPARTMENT OF WATER RESOURCES

IDWR / NORTH

APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name of applicant(s) Keith Sibert Phone 208-245-2374
Name connector (check one): ☐ and ☐ or ☐ and/or

Mailing address: # 36 Rivendale DR. City St. Maries

State ID Zip 83861 Email:

2. Source of water supply ST-JOE River which is a tributary of CDA. LAKE

3. Location of point(s) of diversion:

Twp	Rge	Sec	Govt Lot	1/4	1/4	1/4	County	Source	Local name or tag #
<u>T46N</u>	<u>02W</u>	<u>23</u>	<u>7</u>		<u>NW</u>	<u>SE</u>	<u>Benawah</u>	<u>St. Joe River</u>	<u></u>
<u>T46N</u>									

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4. Water will be used for the following purposes:

IDWR/NORTHE

Amount 0.06 for Irrigation purposes from mar. 15 to Oct. 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) 0.06 cubic feet per second (cfs) and/or (b) 2 acre-feet per year (af).

6. Proposed diverting works:

a. Describe type and size of devices used to divert water from the source. 3/4" Honda water Pump.
8 H.P.

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 inches; proposed depth of well is feet.

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

e. If well is already drilled, when? ; drilling firm ;
Well was drilled for (well owner) ; Drilling Permit No.

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.

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	
TH6N	02W	23	4													2			2
		23																	

Total number of acres to be irrigated: 2

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? NO

10. a. Who owns the property at the point of diversion? Keith Sibent
- b. Who owns the land to be irrigated or place of use? Keith Sibent
- 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. TO WATER HAND

12. Time required for completion of works and application of water to proposed beneficial use is 2 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.

Keith Sibent
Signature of Applicant
Keith Sibent / owner
Print Name (and title, if applicable)

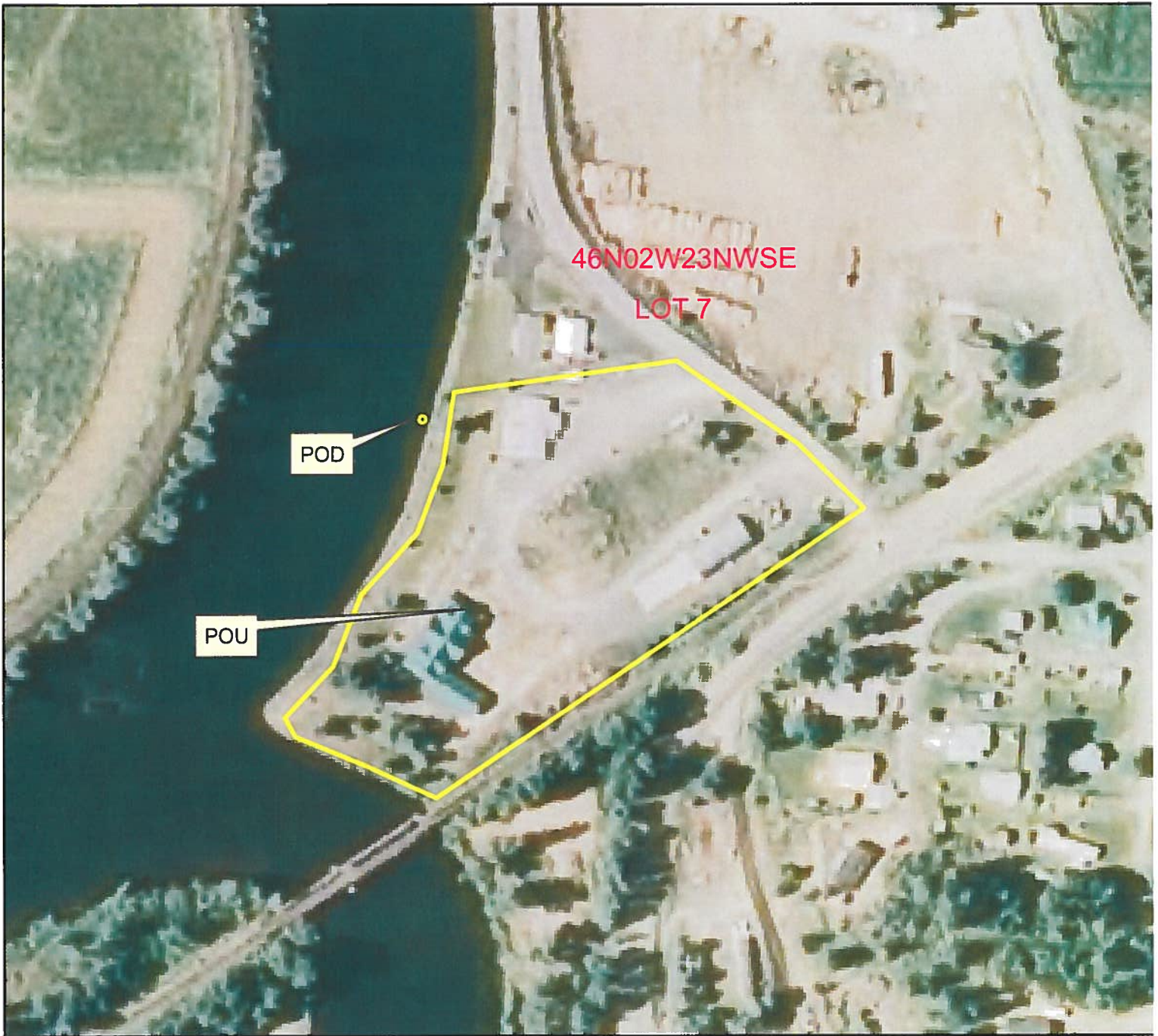
Signature of Applicant

Print Name (and title, if applicable)

For Department Use:

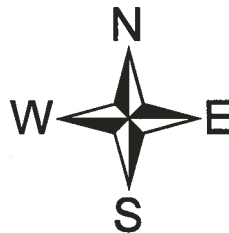
Received by db Date 4/21/11 Time _____ Preliminary check by _____
Fee \$ 100.00 Received by db Receipt No. N026966 Date 4/21/11

91-7337



Legend

- workingpod
- workingpou



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Legend

- ESPA
- GCDB Township/Range
- GCDB Section
- GCDB Quarter-Quarter
- Counties

Division Area

Area to be Inv.

