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DEPARTMENT OF
WATER RESOURCESDEPARTMENT OF
WATER RESOURCESSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$: 100Receipt No. 891967Receipt By: SRDate Received: 10/15/2010

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.

1. Permit No.: 57-11752 Telephone No.: 208-337-35812. Name of Permit Holder(s): City of Homedale3. Mailing Address: 31 W. Wyoming Ave City: HomedaleState: ID Zip: 83628 Email: cityofhomedale@cableone.net4. Source of Water: Ground Water If GROUND WATER (well), Date Drilled: mo. May / yr. 2009Well Driller: Stevens & Sons Drilling Permit Number: 907669-855629

5. Extent of use(s) completed (as authorized by the water right permit):

Domestic (No. of households): _____ Stockwater (No. and type of stock): _____

Irrigation (No. of acres): _____ Other: Municipal6. Total rate of diversion or storage volume for which proof is submitted: 0.56 cfs OR _____ acre-feet.

7. 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?

If yes, has the measuring device been installed?

Yes ☒ No ☐
Yes ☒ No ☐

Lockable Controlling Device: Is a lockable device required to control the diversion?

If yes, has the lockable device been installed?

Yes ☐ No ☒
Yes ☐ No ☒

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.

See attached permit w/ conditions 1-9Completed? Yes ☒ No ☐8. Fee Enclosed: \$ 100.00 See fee schedule on back of the instructions for filing proof of beneficial use. Proofs filed without an appropriate fee, will be considered incomplete.

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

Name: Larry Bauer Telephone Number: 208-880-2719Mailing Address: 31 W. Wyoming Ave City: HomedaleState: ID Zip: 83628 Email: cityofhomedale@cableone.net

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: Larry Bauer PWS
(Include your title, if on behalf of company or organization)Date: 10/3/10

Mail to: Idaho Department of Water Resources, PO Box 83720, Boise, ID 83720-0098

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0053559
Drilling Permit No. 907669-855629
Water right or injection well # 57-11752

2. OWNER: City of Homedale
Name _____
Address PO Box 757
City Homedale State ID Zip 83628

3. WELL LOCATION:

Twp. 3 North ☒ or South ☐ Rge. 5 East ☐ or West ☒
Sec. 4 N/E 1/4 S/E 1/4 S/E 1/4
10 acres 40 acres 160 acres

Gov't Lot _____ County Owyhee

Lat. 43 ° 37 : 16 N (Deg. and Decimal minutes)

Long. 116 ° 55 : 56 W (Deg. and Decimal minutes)

Address of Well Site Oregon Av & First St E

City Homedale
Lot _____ Blk. _____ Sub. Name Riverside Park, Hmdt

4. USE:

☐ Domestic ☒ Municipal ☐ Monitor ☐ Irrigation ☐ Thermal ☐ Injection
☐ Other _____

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☐ Air Rotary ☒ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method/procedure
benetone chips	0	3	100#	poured
cement	3	176	6440#	pumped

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
10	+3	206'	6" .355	steel	☐	☐	☐	☒
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) _____

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☐ N Method _____

Manufactured screen ☒ Y ☐ N Type Johnson V wire

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
206'	241'	6"	.20	10	stnls	high flow

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
10-12 sand	176	250	7900#	poured

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____

Describe control device _____

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) _____ Static water level (ft) 112'

Water temp. (°F) _____ Bottom hole temp. (°F) _____

Describe access port _____

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
60	239	1440

Test method:

Pump ☒ Bailor ☐ Air ☐ Flowing artesian ☐

Water quality test or comments: _____

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
12	0	2	topsoil		X
	2	12	cemented sand & small gravel		X
	12	16	tan clay		X
	16	100	blue clayw/ shale streaks		X
	100	112	sandy blue clay		X
	112	130	blue clay		X
	130	162	sandy blue clay		X
	162	192	blue clay		X
	192	205	sandy blue clay		X
	205	234	fine black & blue sand	X	
	234	236	black sandstone	X	
	236	242	black sand	X	
	242	250	blue clay		X

Completed Depth (Measurable): 241' 6"

Date Started: 4/27/09 Date Completed: 5/27/09

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 Stevens & Sons Co. No. 153

*Principal Driller [Signature] Date 5/28/09

*Driller [Signature] Date _____

*Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.

57 Form 235-1
10/1/03

Drilling Permit No. 9071619-8551629
Drilling Permit I.D. Tag No. D0053559
Water Right Permit No. 57-11752
Injection Permit No. _____

State of Idaho
Department of Water Resources

APPLICATION FOR DRILLING PERMIT
(FOR THE CONSTRUCTION OF A WELL)

1. Owner (please print): CITY of HOMEDALE - IDAHO
2. Mailing Address: PO Box 757
City: HOMEDALE State: ID Zip Code: 83628 Telephone (208) 337-4641
3. Proposed Well Location: Twp. 3 N, Rge. 5 W, Sec. 4, NE 1/4 SE 1/4 SE 1/4;
Gov't Lot No. _____ County OWYHEE Lat. 43° 37' 16" N Long. 116° 55' 56" W
Street Address of Well Site OREGON AVE & 1ST STREET EAST City HOMEDALE
Lot, block and subdivision CITY of HOMEDALE RIVERSIDE PARK
Give at least name of road + Distance to Road or Landmark

4. Proposed Use of Well:

- ☐ DOMESTIC: The use of water for homes, organization camps, public campgrounds, livestock and for any other purpose in connection therewith, including irrigation of up to 1/2 acre of land, if the total use is not in excess of 13,000 gpd; or any other uses, if the total use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

Domestic does not include water for multiple ownership subdivisions, mobile home parks, commercial or business establishments, unless the use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

NON-DOMESTIC: ☐ Irrigation ☒ Municipal ☐ Industrial
☐ Livestock ☐ Test ☐ Other _____
Type _____ Number Hd. _____ (Describe)

☐ INJECTION

☐ MONITORING: A well bore schematic and map is required for each blanket permit. No. of proposed wells: _____

5. Well Construction Information:

- A. ☒ New well ☐ Modify ☐ Replace
B. Proposed Casing Diameter 10 1/2" Proposed Maximum Depth 250 ft
C. Anticipated bottom hole temperature:
☒ 85 F or less (Cold Water Well) ☐ 85 F to 212 F (Low Temp. Geo. Well) ☐ 212 F. or more (Geothermal Well)

6. Construction Start Date: Feb 25, 2008 4-27-09

7. Anticipated Well Driller: STEVENS & SONS Well Drilling, INC. Driller's Lic. No. 153
NOTE: The actual well driller must be identified prior to drilling.

8. Applicant's Signature: Harold Wilson, Mayor Date _____

Address (if different than owner): _____

City: _____ State: _____ Zip Code: _____ Telephone 208-337-4641

Title: _____

(Owner, Firm Representative, Other)

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WATER RESOURCES

ACTION OF THE DEPARTMENT OF WATER RESOURCES

This Permit is

Approved

Date

4-27-09

If approved, this permit authorizes the construction or modification of a well subject to the following conditions. READ CAREFULLY!

GENERAL CONDITIONS:

1. This drilling permit is valid for two (2) months from the above approval date for the start of construction and is valid for one(1) year from the approval date for completion of the well unless an extension has been granted.
2. This permit does not constitute an approval of the District Health Department or the Idaho Department of Health and Welfare, which may be required before construction of the well. All wells must be drilled a minimum distance of 100 feet from a drain field. Domestic and Public Water Supply wells must be drilled a minimum of 50 feet and 100 feet respectively from a septic tank.
3. The well shall be constructed by a driller currently licensed in the State of Idaho who must maintain a copy of the drilling permit at the drilling site.
4. Approval of this drilling permit does not authorize trespass on the land of another party.
5. This permit does not constitute other local, county, state or federal approvals, which may be required for construction of a well.
6. This drilling permit does not represent a right to divert and use the water of the State of Idaho. If the well being drilled is associated with approved water right(s) use of the well must comply with conditions of said water right(s).
7. If a bottom hole temperature of 85 or greater is encountered, well construction shall cease and the well driller and the well owner shall contact the Department immediately.
8. Idaho Code, S 55-2201 - 55-2210 requires the applicant and/or his contractors to contact "Digline" (DigLine is a one-call center for utility notification) not less than 2 working days prior to the start of any excavation for this project. The "DigLine" Number for your area is 1-800-342-1585.
9. Please be advised that this drilling permit should be considered and treated as a preliminary permit. If you are in disagreement with this preliminary permit you have fourteen (14) days of the service date of this permit to petition the Department for reconsideration pursuant to Section 67-5243, Idaho Code.
10. The well tag for the drilling permit/start card shall be securely and permanently attached to the well casing through welding or by the use of four closed end domed stainless steel pop rivets. The tag attachment will be done at the time of completion of the well, and prior to removing the drill rig from the drill site.

SPECIFIC CONDITIONS:

Well construction shall be consistent with Attachment I and as approved by IDEC.

Signature of Authorized Department Representative

Title

Sr. WR Agent

Receipt No. WD36162

Received by

SB

Fee

200

Date

2/21/08

EXTENSION OF DRILLING PERMIT

Extension approved by

Approval Date

This extension expires:

Attachment I
D0053559

