

RECEIVED**SEP 09 2010****IDWR/NORTHERN****STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES****APPLICATION FOR PERMIT**

To appropriate the public waters of the State of Idaho

1. Name of Applicant Richard Opel and or Ellen Opel Phone 760 740-2493
Mailing address 2643 Mary Lane Escondido CA 92025 Email opelellena@hotmail.com
2. Source of water supply Coeur d'Alene lake which is a tributary of Spokane River
3. Location of point of diversion is Township 49 N Range 4 W Sec. 13, in the SW $\frac{1}{4}$,
NE $\frac{1}{4}$, Govt. Lot # 2, B.M., Kootenai County County;
additional points of diversion if any: _____
4. Water will be used for the following purposes:
- Amount 0.06 for domestic purposes from 1-1 to 12-31 (both dates inclusive)
(cfs or acre-feet per year)
- Amount 0.03 for irrigation purposes from 3-15 to 11-15 (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)
- 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 and/or (b) _____ acre feet per year
6. Proposed diverting works:
- a. Describe type and size of devices used to divert water from the source _____
- b. Height of storage dam _____ feet; active reservoir capacity _____ acre-feet;
total reservoir capacity _____ acre-feet
- 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? _____
- e. If well is already drilled, when? _____; Drilling firm _____;
Well was drilled for (well owner) _____; Drilling Permit No. _____
7. Time required for completion of works and application of water to proposed beneficial use is 1 years (minimum 1 year)
8. Description of proposed uses (if irrigation only, go to item 9):
- 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. _____
- d. Domestic; show number of households. 1 home - 1 shop with domestic use
- e. Other; describe fully. _____

9. 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	
49N	4W	13			D														
49N	4W	13			.75														.75

Total number of acres to be irrigated: .75

10. 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? none

11. a. Who owns the property at the point of diversion? applicant
 b. Who owns the land to be irrigated or place of use? Richard Opel and or Ellen Opel
 c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: _____

12. Describe your proposal in narrative form, and provide additional explanation for any of the items above. Attach additional pages if necessary. 0.03 CFS is required for irrigation

13. **MAP OF PROPOSED PROJECT REQUIRED** - Attach an 8½"x11" 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.)

BE IT KNOWN that the undersigned hereby makes this application for permit to appropriate the public waters of the State of Idaho as herein set forth.

Ellen L. Opel
 Signature of Applicant

Ellen L. Opel
 Print Name (and title, if applicable)

For Department Use:

Received by _____ Date _____ Time _____ Preliminary check by _____
 Fee \$ 100.00 Received by ED Receipt No. NO25590 Date 9-9-2010

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