

76054
STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name of Applicant Monica ^{APPROPRIATOR} MANFORD DIETRICH Phone 208-772-2211
Mailing address 5444 E. WAVERLY LOOP NAYARD Email monica.dietrich@adl.com
2. Source of water supply HAYDEN LAKE which is a tributary of LAKE COOBLER
3. Location of point of diversion is Township 51N Range 3W Sec. 16 in the SE 1/4, NW 1/4, Govt. Lot 3, B.M., KOOTENAI Cour
- additional points of diversion if any: _____
4. Water will be used for the following purposes:
- | | | |
|---|---------------------|--|
| Amount <u>0.02</u>
(cfs or acre-feet per year) | for <u>DOMESTIC</u> | purposes from <u>JAN 1</u> to <u>DEC 31</u> (both dates inclusive) |
| Amount _____
(cfs or acre-feet per year) | for _____ | purposes from _____ to _____ (both dates inclusive) |
| Amount _____
(cfs or acre-feet per year) | for _____ | purposes from _____ to _____ (both dates inclusive) |
| Amount _____
(cfs or acre-feet per year) | for _____ | purposes from _____ to _____ (both dates inclusive) |
| Amount _____
(cfs or acre-feet per year) | for _____ | purposes from _____ to _____ (both dates inclusive) |
| Amount <u>0.02</u>
(cfs or acre-feet per year) | for _____ | purposes from _____ to _____ (both dates inclusive) |
5. Total quantity to be appropriated is (a) 0.02 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 PUMP & PIPELINE.
- 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
- e. Other; describe fully. _____

45-11390

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	
51N	31W	16								D DT 3									

Total number of acres to be irrigated: _____

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? 16
 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. _____

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.)

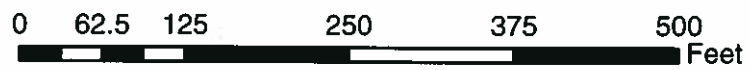
BE IT KNOWN that the undersigned hereby makes this application for permit to appropriate the public waters of the State of Idaho as herein set forth.

Monica Dietrich
 Signature of Applicant

Monica Dietrich
 Print Name (and title, if applicable)

Received by [Signature] Date 10/19/19 Time 2:00p Preliminary check by _____
 Fee \$ 100 Received by [Signature] Receipt No. ND22517 Date 10/19/19

95-11390



Legend

-  workingpod
-  workingpou
-  QQ
-  Taxlots

