

Ident. No. 37-22436

App ID 75407

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

APPLICATION FOR PERMIT
To appropriate the public waters of the State of Idaho

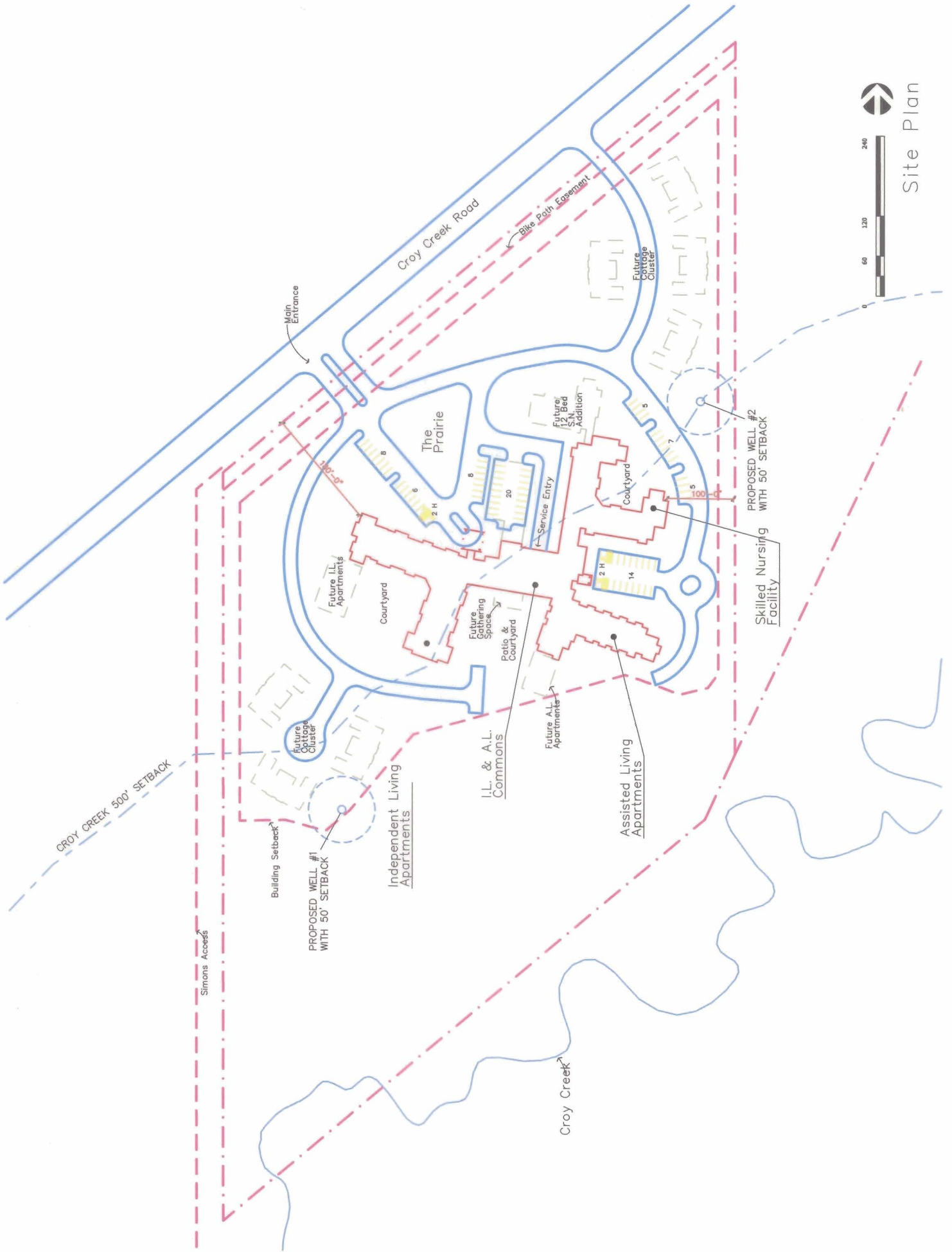
FEB 05 2009
DEPT. OF WATER RESOURCES
SOUTHERN REGION

1. Name of applicant CROY CANYON RANCH FOUNDATION, INC. Phone 208-788-2310
Mailing address P.O. BOX 640, HAILEY, ID 83333
2. Source of water supply GROUNDWATER which is a tributary of _____
3. Location of point of diversion is Township 2N Range 18E Sec. 17, in the NE 1/4, NW 1/4,
NE 1/4, Govt. Lot _____, B.M., BLAINE County; additional points of diversion, if any: _____
SW1/4 NE1/4, Sec.17, T. 2 N., R. 18 E.
4. Water will be used for the following purposes:
Amount 0.64 CFS for Municipal purposes from 1-1 to 12-31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
5. Total quantity being appropriated is (a) 0.64 CFS and/or (b) _____
cubic feet per second acre-feet per annum
6. Proposed diverting works:
 - a. Describe type and size of devices used to divert water from the source: 2 Wells, likely 8" or 10"
diameter, fully cased with perforations &/or screened intervals drilled to 120 feet
below ground or to bedrock
 - b. Height of storage dam _____ feet; active reservoir capacity _____ acre-feet; total
reservoir capacity _____ acre-feet.
 - c. Proposed well diameter is 8 inches; proposed depth of well is 120 feet
 - d. Is groundwater with a temperature of greater than 85° degrees being sought? NO
 - e. If well is already drilled, when? _____; Drilling firm _____;
Well was drilled for (well owner) _____; Driller Permit No. _____
7. Time required for completion of works and application of water to proposed beneficial use is 5 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. CROY CANYON RANCH FOUNDATION, INC.
 - d. Domestic; show number of households. _____;
 - e. Other; describe fully. THREE FACILITY WINGS: 37 SKILLED NURSING BEDS; 42 ASSISTED
LIVING UNITS; 35 INDEPENDENT LIVING UNITS; AND IN ADDITION, UP TO 24 COTTAGES
(INDEPENDENT LIVING UNITS)



- Legend**
- Croy Canyon Ranch Foundation
 - Sections
 - 102n17a
 - 102n18e
 - Proposed Wells

**CROY CANYON RANCH FOUNDATION
PROPOSED WELLS
NAIP 2006 AERIAL**



Site Plan

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	
2N	18E	17		M	M														

Total number of acres to be irrigated _____

10. Describe any other water rights used for the same purposes as described above. 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? APPLICANT

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: _____

12. Remarks: See attached map and water demand estimate.

13. MAP OF PROPOSED PROJECT REQUIRED – Attach an 8 ½ "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.)

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.

Jeannette Cassell - Board President
 Signature of Applicant (include title, if applicable.)
Jeannette Cassell, Board President

Received by B. Walker Date 2/5/09 Time _____ Preliminary check by B. Walker

Fee \$ 250.00 Receipted by B. Walker # 5030684 Date 2/12/09

Publication prepared by _____ Date _____ Published in _____

Publication approved _____ Date _____

CROY CANYON RANCH FOUNDATION - WATER DEMAND ESTIMATION

Brockway Engineering / Revised 1/21/09

COMMERCIAL POTABLE DEMAND

Independent Living Facility

Number of units	35		
Average per-capita demand	100	gpcd (from AWWARF study)	
Average persons per unit	1.5		
Average per-unit demand	150	gpd	
Average daily demand	5,250	gpd	
Total annual withdrawal	5.9	acre-feet/year	
Consumptive use fraction	0.1		
Total consumptive use	0.6	acre-feet/year	
Peak hour : average factor	9		
Peak hourly withdrawal	47,250	gpd =	32.8 gpm 0.07 cfs

COMMERCIAL POTABLE DEMAND

Assisted Living Facility

Number of units	42		
Average per-capita demand	140	gpcd (AWWARF)	
Average persons per unit	1		
Average per-unit demand	140	gpcd total	
Average daily demand	5,880	gpd	
Total annual withdrawal	6.6	acre-feet/year	
Consumptive use fraction	0.1		
Total consumptive use	0.7	acre-feet/year	
Peak hour : average factor	9		
Peak hourly withdrawal	52,920	gpd =	36.8 gpm 0.08 cfs

COMMERCIAL POTABLE DEMAND

Skilled Nurse Facility

Number of beds	37		
Average per-capita demand	165	gpcd (EPA)	
Average persons per unit	1		
Average per-unit demand	165	gpd	
Average daily demand	6,105	gpd	
Total annual withdrawal	6.8	acre-feet/year	
Consumptive use fraction	0.1		
Total consumptive use	0.7	acre-feet/year	
Peak hour : average factor	12		
Peak hourly withdrawal	73,260	gpd =	50.9 gpm 0.11 cfs

COMMERCIAL POTABLE DEMAND**Staff**

Number of staff	30		
Average per-capita demand	20	gpcd (EPA)	
Average daily demand	600	gpd	
Total annual withdrawal	0.7	acre-feet/year	
Consumptive use fraction	0.1		
Total consumptive use	0.07	acre-feet/year	
Peak hour : average factor	24		
Peak hourly withdrawal	14,400	gpd =	10.0 gpm 0.022 cfs

RESIDENTIAL POTABLE DEMAND**Cottages**

Number of units	24		
Average per-capita demand	120	gpcd (from AWWARF study)	
Average persons per unit	2		
Average per-unit demand	240	gpd	
Average daily demand	5,760	gpd	
Total annual withdrawal	6.5	acre-feet/year	
Consumptive use fraction	0.1		
Total consumptive use	0.6	acre-feet/year	
Peak hour : average factor	12		
Peak hourly withdrawal	69,120	gpd =	48.0 gpm 0.11 cfs

Total estimated average demand for residential/commercial	23,595 gpd	
Peak hourly demand	178 gpm =	0.40 cfs

IRRIGATION

Assumed maximum irrigation (0.5 acres each cottage)	12 acres
Per-acre peak diversion rate	9 gpm/ac
Peak demand	108 gpm

TOTAL PEAK DEMAND - ALL USES	286 gpm=	0.64 cfs
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No. C 140673 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than September 30, 2006 Annual Report Form 1. Mailing Address - Correct in this box, if applicable CROY CANYON RANCH FOUNDATION, INC. MARY J. HELMEKE PO BOX 640 HAILEY, ID 83333	2. Registered Agent and Office NO PO BOX Vicki Abrams Croy Canyon Ranch Foundation 706 S. Main Street, Suite #4 Hailey, ID 83333 3. New Registered Agent Signature <i>Vicki Abrams</i>												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td colspan="6" style="height: 150px; vertical-align: top; text-align: center; font-size: 24px;"> <i>See Attached</i> </td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	<i>See Attached</i>					
Office held	Name	Street or P.O. Address	City	State	Zip									
<i>See Attached</i>														
5. Organized Under the Laws of: IDAHO C 140673	6. Signature <i>Vicki Abrams</i> Date <u>7-23-08</u> Name (Typed or Printed) <u>Vicki Abrams</u> Title <u>Exec. Director/2</u>													

Issued 07/01/2008

Do Not Tape or Staple

200809002161



Board of Directors

Revised January 2009

Jeanne T. Cassell, President

PO Box 1688
Sun Valley, ID 83353
(208) 726-4733 Home
(208) 726-1092 Fax
(208) 720-2094 Cell
svjeanne@cox.net

Bill Bozzuto, Assistant Treasurer

733 N. Main Street, Suite G
Bellevue, ID 83313
(208) 578-7807 x102 Office
(208) 578-7865 Fax
bill@mybaco.com

Georgie Fenton, Vice President

PO Box 428
Ketchum, ID 83340
(208) 726-8113 Home
(208) 720-6203 Cell
(208) 726-0096 Fax
georgiefenton@msn.com

William Cassell

PO Box 1688
Sun Valley, ID 83353
(208) 726-4733 Home
(208) 726-1092 Fax
Cassell87W@cox.net

John S. Chapman, Secretary

PO Box 3950
Hailey, ID 83333
(208) 788-2550 Office
(208) 788-2514 Fax
jschap2@cox.net

Brack Davis, M.D.

P.O. Box 313
Sun Valley, ID 83353
(208) 622-7448
brackdavis@earthlink.net

Mary Ann Mix, Treasurer

PO Box 3040
Hailey, ID 83333
(208) 788-3940 Office
(208) 788-4803 Home
(208) 788-6009 Fax
(208) 720-3746 Cell
mix@mpeinc.net

Gail Goglia (Ex-Officio)

PO Box 1585
Ketchum, ID 83340
(208) 578-3502 Office
(208) 788-3609 Home
(208) 788-7210 Fax
(208) 309-0277 Cell
ggoglia@blainemanor.net

Kathleen J. Eder, Assistant Secretary

PO Box 2820
Hailey, ID 83333
(208) 788-2276 Office
(208) 788-9706 Home
(208) 788-2776 Fax
(208) 720-3651 Cell
keder@sunvalley.net

Jed Gray

PO Box 326
Sun Valley, ID 83353
(208) 622-4100 x14 Office
(208) 720-0575 Cell
(208) 622-9567 Fax
jed@sunvalley.net

Vonnie Olsen
PO Box 185
Carey, ID 83320
(208) 823-4330 Home
(208) 823-4056 Fax
(208) 309-2180 Cell
vonols@dishmail.net

Betsy Pearson
38 Fox Hollow Road
Bellevue, ID 83313
(208) 788-3759 Home
(208) 788-4412 Fax
betsypearson@earthlink.net

Pete Van Der Meulen
P.O. Box 537
Hailey, ID 83333
(208) 788-4410 Home
(208) 727-7334 Cell
lindavandermeulen@yahoo.com

Vicki Abrams
Executive Director
Croy Canyon Ranch Foundation
P.O. Box 640
Hailey, ID 83333
(208) 788-2310 Office
(208) 788-1254 Office Fax
(208) 720-6999 Office Cell
(208) 721-0113 Personal Cell
admin@croycanyonranch.com