

JAN 02 2009

DEPARTMENT OF WATER RESOURCES
STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$: 50.00
Receipt No. 5087874
Receipt By: SR
Date Received: 12/28/08

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. 96-9259 Telephone No. 208-290-7105

2. Name of Permit Holder(s): ROBERT MYERS

3. Mailing Address: 418 RAVENWOOD LANE City SANDPOINT

State ID Zip 83864 Email: rmyers@timberlineinv.com

4. Source of Water: WELL If GROUND WATER (well), Date Drilled: mo. _____ / yr. _____

Well Driller: Sweetwater Drilling Drilling Permit Number: _____

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

Domestic (No. of households): 9 Stockwater (No. and type of stock): _____

Irrigation (No. of acres): _____ Other: _____

6. Total rate of diversion or storage volume for which proof is submitted: 0.20 cfs OR _____ acre-feet.

7. Compliance with a Measuring Device requirement and/or other Conditions of Permit: (Refer to the approval conditions on your permit and respond accordingly.)

Measuring Device: Is a measuring device required? _____
If yes, has the measuring device been installed? _____

Yes ☐	or No ☒
Yes ☐	or No ☐

Conditions of Permit: Does your permit require you to submit additional information in connection with your proof of beneficial use? (If yes, please list the conditions below and provide documents if necessary.)

NO

Completed? _____

Yes ☐	or No ☒
Yes ☐	or No ☐

Completed? _____

8. Fee Enclosed: \$ 50.00 (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: ROBERT MYERS Telephone Number: 208-290-7105

Mailing Address: 418 RAVENWOOD LANE City SANDPOINT

State ID Zip 83864 Email: rmyers@timberlineinv.com

10. 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: Robert Myers Date: 12/28/08
(Include your title, if on behalf of company or organization)

Idaho Dept. of Water Resources

Write Tag Number Here

Start Card/Permit - Single Family Domestic Well Only

D 40631

(Cold Water less than 85 degrees F.)

1. Owner's Name (please print): Robert Meyer
 2. Owner's Mailing Address: 435 Woodview Rd
 City: Sandpoint State: ID Zip Code: 83864 Telephone: ()
 3. Proposed Well Location: Twp. 57N Rge. 2W Sec. 29 1/4 NE 1/4 NE 1/4
 Gov't Lot No. County Bonner Lat. Long.
 Street Address of Well Site off Rowenwood Caldesore City Sandpoint
 Must give at least name of road + Distance to Road or Landmark
 Lot Block and Subdivision

4. Are all adjacent septic tanks and drain fields accurately located? By Property Owner: Yes ☒ No ☐ By Health District: Yes ☐ No ☒
 5. Well Construction Information:
 A. ☒ New well ☐ Replace ☐ Deepen ☐ Modify Previous well #: B. Proposed Casing Dia. 6" C. Proposed Maximum Depth: 1000'
 6. Construction Start Date: 9/8/05 7. Well Driller: Sweetwater Drilling Driller's Lic. No. 509
 8. The Driller hereby accepts the terms and conditions of the Start Card/Permit.
 Driller's Signature: Mark Pitts Date: 9/8/05
 9. The Well Owner affirms to have read this Start Card/Permit, validates its accuracy and accepts the conditions.
 Owner's Signature: cel Date: 9/8/05

CONDITIONS FOR USE OF START CARD:

1. This permit authorizes the construction or modification of one domestic well for a single-family residence. No additional residences, businesses, or dwellings may be connected to this well without a valid water right.
2. This form must be complete, including the prepaid tag number and signature of the driller. The owner should sign the start card after reviewing these conditions. Mailing must take place no less than 72 hours prior to construction (Dept. address below), hand delivered or faxed to the Dept. prior to commencing construction. The start construction date shall be no more than 10 days after, the Department receives the permit. An incomplete form will not be considered a valid permit to drill.
3. This permit does not constitute an approval of the District Health Department or the Idaho Department of Health and Welfare. All wells must be drilled a minimum distance of 100' from a drain field. Domestic wells must be drilled a minimum of 50' from a septic tank.
4. Only Well Drillers licensed in Idaho may use a Start Card for construction of a well I.D. tag at the drilling site during construction.
5. This drilling permit does not authorize trespass on the land of another party.
6. This drilling permit does not constitute other local, county, state or federal approval.
7. This drilling permit does not represent a right to divert and use the water of the
8. If a bottom hole temperature of 85° F. or greater is encountered, well construction Department immediately.
9. Idaho Code, S 55-2201 - 55-2210 requires the applicant and/or his contractors notification) not less than 2 working days prior to the start of any excavation for this 1 800-342-1585.
10. The stainless steel I. D. tag must be welded to the well casing upon completing the well and must remain permanently attached above ground level for the life of the well. Other tags may be added following a repair or modification of the well. The well driller is responsible for permanently attaching the I.D. tag to the casing upon completing the well. The well tag shall be attached by welding at least 3 sides or using Four (4) stainless steel, closed-end pop rivets.
11. A start card is not valid for drilling in Areas of Drilling Concern, Critical Groundwater Areas, Groundwater Management Areas or Areas Identified by the Department as Contaminated.
12. The possession of a well tag does not authorize construction of a well.
13. Any well being replaced by a new well, shall be properly abandoned by the well driller prior to removing the drilling equipment, unless otherwise authorized by the department.

208-263-5974

Mark Pitts
Robin PittsServing
North Idaho
Over 20 YearsDRILLING • PUMPS • WATER TREATMENT
Complete Systems • From the Well To The House

435 Woodview Rd. • Sandpoint, ID 83864

Your Start Card/Application and Tag purchase may be submitted to one of the following offices:

Western Region
Idaho Department of Water Resources
2735 Airport Way Boise, ID 83705-5082
Phone: (208) 334-2190 Fax: (208) 334-2348

Northern Region
Idaho Department of Water Resources
1910 Northwest Blvd., STE 210 Coeur d'Alene, ID 83814-2615
Phone: (208) 769-1450 Fax (208) 769-1454

Effective June 1, 2004
Eastern Region
Idaho Department of Water Resources
900 North Skyline Drive STE A Idaho Falls, ID 83402-1718
Phone: (208) 525-7181 Fax: (208) 525-7177
Southern Region
Idaho Department of Water Resources
1341 Fillmore Street, STE 200 Twin Falls, ID 83301-3380
Phone: (208) 736-3033 Fax (208) 736-3037