

APPLICATION FOR PERMIT
STATE OFFICE ANALYSIS

Reviewed by Sharla Curtis on 10/13/99

No. 95-09026 Name: KIBWUA Corp. Officers ✓see comment Ad ok ✓ Govt Lots

AREA OF CONCERN: No/Yes Moratorium GWMA TRUST/NON-TRUST

GROUNDWATER: (✓Flow Chart)

DRILLING PERMIT

All wells - 046(P23)
Basin 34 - 085
Irr. w/in WD - P05
WMD - North/East/West
≤ 0.24 cfs/5 acres - No MD
> 0.24 cfs/5 acres - 067
~~WMD~~
Supp-irr (irr = only use) - 065-079
Supp-irr (+ other uses) - 100-101
≤ 0.24 cfs/5 acres - No MD
> 0.24 cfs/5 acres - 01M

LOCATION:

Boise Front LoGeo - 058 (<85 GW)
Mitigation - 121
42-248 Area - P84 (20s-70s, 81-86)
Swan Falls Flag -
Trust - 051(P74) (consumptive uses)
Non-Trust - 048-049 (consumptive uses or non-cons. > 1.0 cfs)

USES:

STORAGE - 18A-01H(P01), 01P-18B(P09)-NA
IRR ≤ 5 ac - R66/R67/R68/R69 (0.03 cfs/ac)
> 5 ac - R62/R63/R64/R65 (0.02 cfs/ac)
STOCKWATER - R37 (BLM/USFS)
MINING - 054-081(P10)
FISH PROP - 029(70's only)-007-042-081(P10)
HEAT/COOL - R07(injection well)
FIRE PROT. - 077

SURFACE WATER: (✓Flow Chart)

F&G contacted - Yes/No Response
In/Above MSF - WB9
PLANNING SECTION REVIEW/RESPONSE
In-stream development - P52
WD - R04 (WD#)
≤ 0.20 cfs/others - 01H(P01), 01P or No MD
> 0.20 cfs - 01J(P08)

SPRINGS/SINK, INACTIVE WD & REST OF STATE

≤ 0.24 cfs/5 acres - No MD
> 0.24 cfs/5 acres - 01M or No MD

RIVER BASINS: (SW special considerations)

SNAKE R (01) - W22(P04), N/A
(02.03) - 007 (w/ remark WB9 if above Weiser)
Payette R (65) - 047(P04) (Payette Lake)
Salmon R (70's) - 029 (fish screens)
Weiser R (67) - 086-087

USES:

POWER - 17H-17K (+uses)-08A-025(P18)-01N-081(P10)
MUNICIPAL
Restricted area - 022,075
Irr., GW supp to SW - 102
DOMESTIC
Surface water - WB5 (Big Wood or Boise above Star Bridge)
27A (Payette R)
>1 in restricted area - 070-071-075(no parks/common areas, etc)
Irr use listed separate - WB5

BENEFICIAL USE DUE: 1 / 01 / 2002

MISC CONDITIONS/REMARKS:

Protested - 020-W19
Development Period
≤ 1 yr - P16
> 1 yr - 26A(P17)
Ownership - 004
Non-consumptive - 027
Water Quality - 081-R07

Multiple pd's per 1/4 - W32 2
Subd lot desc (pd) - W59 Lot 3
Subd lot desc (pu) - W60 ?

OTHER CONDITIONS/REMARKS 1/75 homes. ok

COMMENTS run subd xcel spreadsheet

State of Idaho
Department of Water Resources
Water Right License

WATER RIGHT NO. 95-09026

Priority: August 09, 1999

Maximum Diversion Rate: 0.16 CFS
Maximum Diversion Volume: 116.0 AF

It is hereby certified that KIDD ISLAND BAY WATER USERS COOP ASSN
PO BOX 2265
COEUR D ALENE ID 83816-2265 has complied with the terms and
conditions of the permit, issued pursuant to Application for Permit dated August 09, 1999; and has
submitted Proof of Beneficial Use on February 07, 2001. An examination indicates that the works have
a diversion capacity of 0.32 cfs of water from:

SOURCE

GROUND WATER

and a water right has been established as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>DIVERSION RATE</u>	<u>ANNUAL DIVERSION VOLUME</u>
MUNICIPAL	01/01 to 12/31	0.16 CFS	116.0 AF

LOCATION OF POINTS OF DIVERSION:

GROUND WATER	SW $\frac{1}{4}$ SW $\frac{1}{4}$	Sec. 35, Twp 50N, Rge 04W, B.M., KOOTENAI County
GROUND WATER	SW $\frac{1}{4}$ SW $\frac{1}{4}$	Sec. 35, Twp 50N, Rge 04W, B.M., KOOTENAI County

CONDITIONS OF APPROVAL

1. Place of use is within the area served by the public water supply system of Kidd Island Bay Water Users Association. The place of use is generally located within Section 35, Twp. 50N, Rge. 04W.
2. Points of diversion are located within Lot 3, Kidd Island Bay.
3. The issuance of this right does not grant any right-of-way or easement across the land of another.

This license is issued pursuant to the provisions of Section 42-219, Idaho Code. The water right confirmed by this license is subject to all prior water rights and shall be used in accordance with Idaho law and applicable rules of the Department of Water Resources.

Signed and sealed this 9th day of June, 2003.


for KARL J. DREHER
Director

MICROFILMED

NOV 2 5 2003

State of Idaho
Department of Water Resources
APPLICATION FOR AMENDMENT
(For Licensing Purposes)
WATER RIGHT NO. 95-09026

RECEIVED

JUN - 6 2003

Department of Water Resources

Date of Priority: August 09, 1999

Maximum Diversion Rate: 0.16 CFS

Maximum Diversion Volume: 116.0 AF

Comes now KIDD ISLAND BAY WATER USERS COOP ASSN
PO BOX 2265

COEUR D ALENE ID 83816-2265 and represents to the Director of the Idaho
Department of Water Resources that he is the owner and holder of Permit to Appropriate the Public
Waters of the State of Idaho No. 95-09026, and requests that the permit be changed as follows:

Source: GROUND WATER

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
MUNICIPAL	01/01 to 12/31	0.16 CFS	116.0 AF

LOCATION OF POINTS OF DIVERSION:

GROUND WATER	SW $\frac{1}{4}$ SW $\frac{1}{4}$	Sec. 35, Twp 50N, Rge 04W, B.M., KOOTENAI County
GROUND WATER	SW $\frac{1}{4}$ SW $\frac{1}{4}$	Sec. 35, Twp 50N, Rge 04W, B.M., KOOTENAI County

Permit holder asserts that no one will be injured by such change and that such change will be made at
permit holder's own risk. Signed this 2 day of June, 2003.

James W. Babb Pres.
(Signature)

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NOV 26 2003

State of Idaho
Department of Water Resources
APPLICATION FOR AMENDMENT
(For Licensing Purposes)
WATER RIGHT NO. 95-09026

RECEIVED

JUN - 6 2003

Department of Water Resources

FOR DEPARTMENT USE ONLY

Preliminary check by *JD* Fee = \$50.00 Received by JM # C068945 Date 05/06/2003

ACTION OF THE DEPARTMENT OF WATER RESOURCES

I, Karl J. Dreher, of the Department of Water Resources hereby approve the
above Application for Amendment for Permit No. 95-09026 with the following:

CONDITIONS OF APPROVAL

1. Place of use is within the area served by the public water supply system of Kidd Island Bay Water Users Association. The place of use is generally located within Section 35, Twp. 50N, Rge. 04W.
2. Points of diversion are located within Lot 3, Kidd Island Bay.
3. The issuance of this right does not grant any right-of-way or easement across the land of another.

Witness my hand this 9th day of June, 2003.

for

K. J. Dreher
KARL J. DREHER
Director

MICROFILMED

NOV 26 2003

RECEIVED

FEB - 7 2001

FOR OFFICE USE ONLY

Amt. of Fee \$: 50.00

Receipt No. CD52178

Receipt By: S. M. M.

Date Received: 2-7-01

RECEIVED Department of Water Resources

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

JAN 24 2001

Department of Water Resources

PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources considers this form a statement that the permit holder(s) has/have completed all development that will occur under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below. This form must be accompanied by a license examination fee, when necessary, or be accompanied by a completed field examination report prepared by a certified water right examiner.

1. Permit No. 95-09026 Telephone No. (208) 667-6105

2. Name of Permit Holder(s): KIDD ISLAND BAY WATER USERS ASSN

3. Mailing Address: P.O. Box 2265

City COEUR D'ALENE State ID Zip 83816

4. Source of Water: GROUND If GROUNDWATER (well), Date Drilled: mo. 9 / yr. 98

Well Driller: H2O WELL SERVICE #0448 Drilling Permit Number: 95 - 99 - N - 108 -
IDWR# 95-08947

5. Use(s) (as authorized by the water right permit):

Domestic (No. of households): up to 75 NTE Stockwater (No. and type of stock): _____

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

6. Total rate of diversion and/or volume for which proof is submitted: 0.16 cfs OR _____ acre-feet

7. Measuring Device Requirement: (refer to the approval conditions on your permit and respond accordingly)

(This question is not optional. Please check either yes or no. Proofs returned not checked accordingly, will be considered incomplete)

Measuring Device: Is a measuring device required? Yes _____ or No ✓
Has the measuring device been installed? Yes _____ or No _____

8. Fee Enclosed: \$ _____ (See Fee Schedule on back of the instructions for filing proof of beneficial use)

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

Name: JIM BABB Telephone Number: (208) 667-6105

Address: W 3765 BAY SHORE COURT COEUR D'ALENE, ID. 83814 (old address W 319 Kidd Island Rd.)

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. I agree to relinquish any undeveloped portion of the permit to the State of Idaho.

Signature of permit holder: James W. Babb Pres. Date: 1/19/01
(include your title, if on behalf of company or organization)

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FEB 1 2001

State of Idaho
Department of Water Resources
Permit to Appropriate Water

NO. 95-09026

Priority: 08/09/1999

Maximum Diversion Rate: 0.16 CFS

This is to certify, that KIDD ISLAND BAY WATER USERS ASSN
PO BOX 2265
COEUR D ALENE ID 83816

has applied for a permit to appropriate water from:

GROUND WATER

and a permit is APPROVED for development of water as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>
IRRIGATION	03/15 to 11/15	0.08 CFS
DOMESTIC	01/01 TO 12/31	0.08 CFS

LOCATION OF POINT(S) OF DIVERSION:

GROUND WATER SW1/4SW1/4 Sec. 35, Twp 50N, Rge 04W, B.M. KOOTENAI County

PLACE OF USE: IRRIGATION

Twp Rge Sec	NE				NW				SW				SE				Totals
	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
50N 04W 35		4.0	10.0		2.0			15.0	20.0	2.0	3.0						56.0

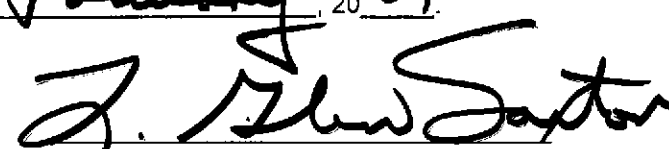
Total Acres: 56

PLACE OF USE: DOMESTIC, Same as Irrigation

CONDITIONS OF APPROVAL

1. Proof of application of water to beneficial use shall be submitted on or before January 01, 2002.
2. Subject to all prior water rights.
3. Right holder shall comply with the drilling permit requirements of Section 42-235, Idaho Code.
4. The issuance of this right does not grant any right-of-way or easement across the land of another.
5. This right when combined with all other rights shall provide no more than 0.02 cfs per acre nor more than 3.0 afa per acre at the field headgate for irrigation of the lands above.
6. Domestic use is for 75 homes and does not include lawn, garden, landscape, or other types of irrigation.
7. Point of diversion is located within Lot 3, Kidd Island Bay.
8. Two points of diversion are located within SWSW, S35, T50N, R4W.

This permit is issued pursuant to the provisions of Section 42-204, Idaho Code. Witness the signature of the Director, affixed at Boise, this 3rd day of January, 2001.


KARL J DREHER, Director

for
MICROFILMED

APR 11 2001

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

RECEIVED

OCT 12 1999

Department of Water Resources

- Name of Applicant Kidd Island Bay Water Users Association Phone (208) 667-6105
Mailing address P.O. Box 2265, Coeur d'Alene, Idaho 83816
- Source of water supply Groundwater which is a tributary of _____
- Location of point of diversion is Township 50 N. Range 4 W Sec. 35 in the NW 1/4, SW 1/4, SW 1/4, Govt. Lot _____, B.M., Kootenai County;
additional points of diversion if any: (2 PTS OF DIVERSION)
- Water will be used for the following purposes:
 Amount 0.08 cfs for Domestic purposes from 1/1 to 12/31 (both dates inclusive)
 (cfs or acre-feet per annum)
 Amount 0.08 cfs for Irrigation purposes from 3/15 to 11/15 (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)
 Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
 (cfs or acre-feet per annum)
- Total quantity to be appropriated is (a) 0.16 and/or (b) _____
 cubic feet per second acre feet per annum
- Proposed diverting works:
 - Describe type and size of devices used to divert water from the source ground water well with submersible pump.
 - Height of storage dam N/A feet; active reservoir capacity _____ acre-feet; total reservoir capacity _____ acre-feet
 - Proposed well diameter is 8 inches; proposed depth of well is 135 feet
 - Is ground water with a temperature of greater than 85°F being sought? No
 - If well is already drilled, when? 7/99; Drilling firm H₂O Well Service
 Well was drilled for (well owner) Kidd Island Bay Water Users; Drilling Permit No. _____
- Time required for completion of works and application of water to proposed beneficial use is 1 years (minimum 1 year)
- Description of proposed uses (if irrigation only, go to item 9):
 - Hydropower; show total feet of head and proposed capacity in KW. N/A
 - Stockwatering; list number and kind of livestock. N/A
 - Municipal; show name of municipality. N/A
 - Domestic; show number of households. 75 Households
 - Other; describe fully. N/A

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APR 11 2001

8. 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	N E				N W				S W -				S E				TOTALS
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
50N	4W	35	--	4	10	--	2	--	--	15	20	2	3	--	--	--	--	--	56
				D	D		D			D	D	D							

Total number of acres to be irrigated 56

10. Describe any other water rights used for the same purposes as described above. N/A

11. a. Who owns the property at the point of diversion? Red Frushour

b. Who owns the land to be irrigated or place of use? Private Owners

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: Applicant has an Agreement to purchase from Owner.

12. Remarks: _____

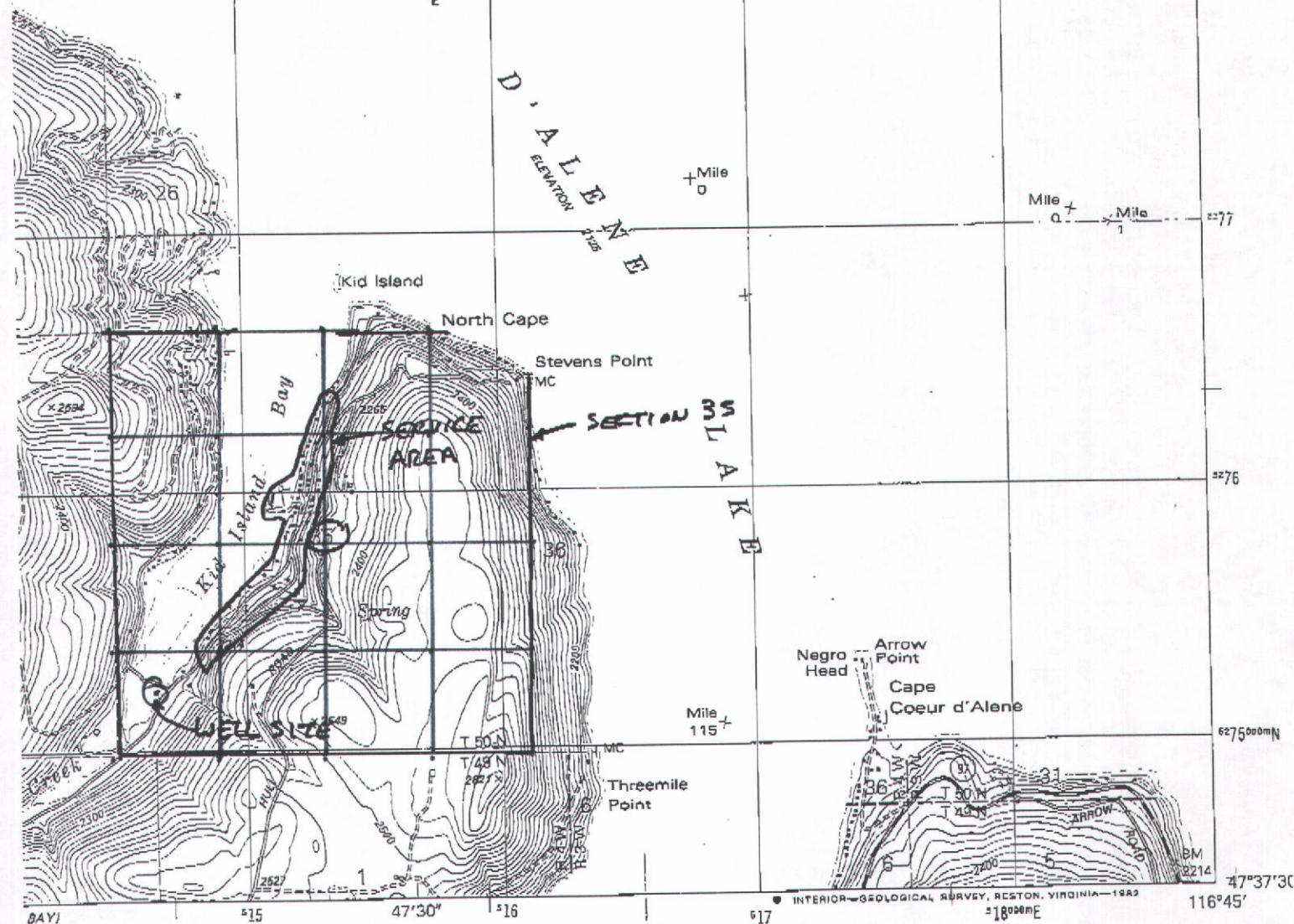
13. MAP OF PROPOSED PROJECT REQUIRED - Attach an 8 1/2"x11" map clearly identifying the proposed point of diversion, place of use, section #, township & range. (A photocopy of a USGS 7.5 minute topographic quadrangle map is preferred.)

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.

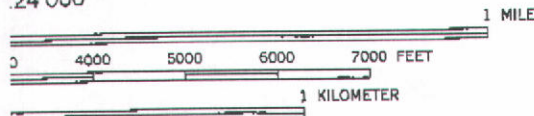
James K. Babb
Signature of Applicant (and title, if applicable)

Received by AS Date 8-9-99 Time 4:00 Preliminary check by TS
 Fee \$ 50- Receipted by TR # 10013134 Date 8-9-99
 Publication prepared by 6 Date 8/25/99 Published in CPA News 9/2 + 9/99
 Publication approved 6 Date 9/14/99

APR 11 2001

Donavon's
PointJasco
Bay

24 000



VERTICAL DATUM OF 1929
 HORIZONTAL DATUM OF 1929

NATIONAL MAP ACCURACY STANDARDS
 COLORADO 80225, OR RESTON, VIRGINIA 22092
 AND SYMBOLS IS AVAILABLE ON REQUEST

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APR 11 2001

ROAD CLASSIFICATION

Primary highway, hard surface	Light-duty road, hard or improved surface
Secondary highway, hard surface	Unimproved road

Interstate Route
 U.S. Route
 State Route

COEUR D'ALENE, IDAHO

NE/4 COEUR D'ALENE 15' QUADRANGLE
 N4737.5-W11645/7.5

1981

DMA 2679 III NE-SERIES V803

Post-it® Fax Note	7671	Date	# of pages ▶
To AI BEARDSLEY	From STEVE JAMES		
Co./Dept.	Co. JUB		
Phone # 769-1450	Phone # 667-1574		
Fax # 769-1454	Fax # 667-2176		

AI,
call if you need anything
else
-SPJ

KIDD IS WATER SYSTEM



Engineers Surveyors Planners

ENGINEER

J-U-B ENGINEERS, INC.

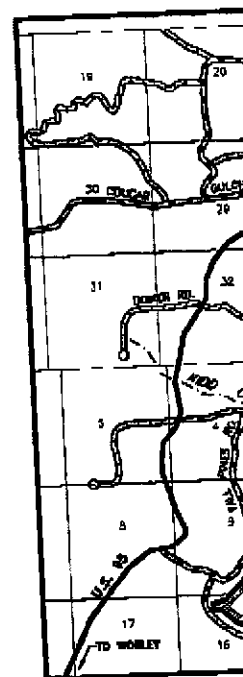
1250 West Ironwood Drive, Suite 220 • Coeur d'Alene, Idaho 83814
Telephone (208) 667-1574
Fax (208) 667-2176

OWNER

**KIDD ISLAND BAY
WATER USERS ASSOCIATION**

PRESIDENT
SECRETARY/TREASURER
BOARD MEMBER
BOARD MEMBER
BOARD MEMBER
BOARD MEMBER
BOARD MEMBER

JIM BABB
JOSIE PATTON
JIM RUYF
MIKE O'HALLORAN
STEVE WHITACRE
GLENN GUSA
BILL FLERCHINGER


VIC

BY: _____
DATE: _____

MICHO...

APR 1 2000

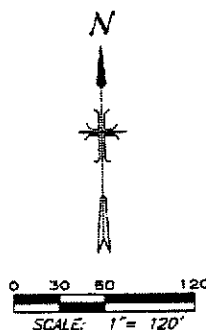
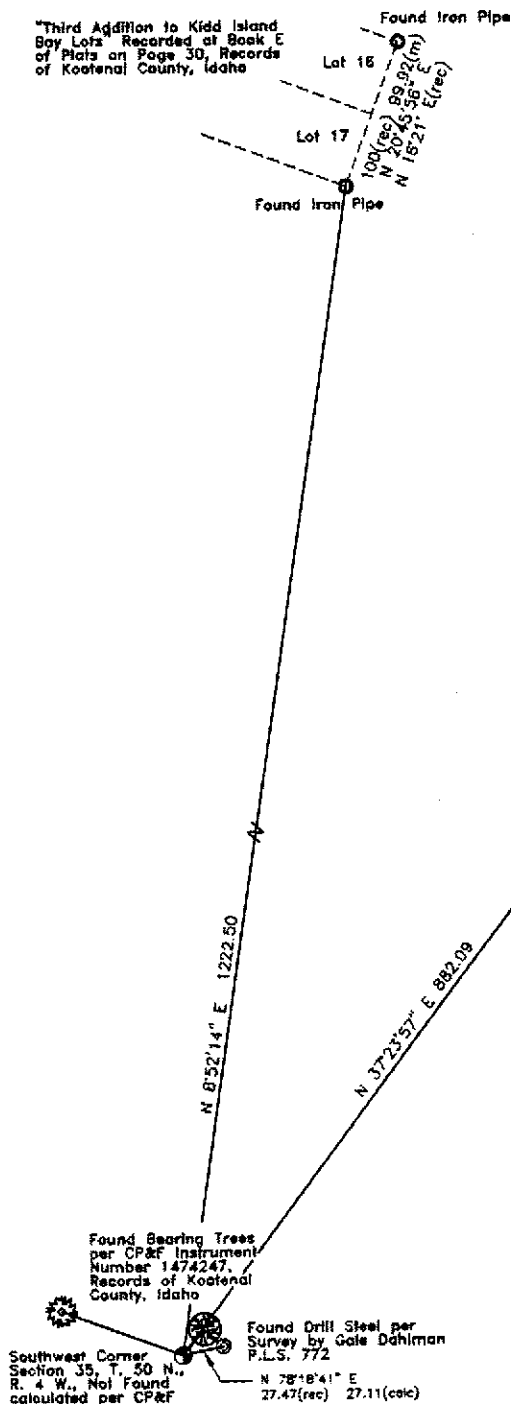
F:\PROJECTS\20007\20007-01\DWGS\00701-COV.dwg Thu Jul 15 14:57:55 1999 TLR

EXHIBIT D

LINE TABLE

LINE	BEARING	DISTANCE
L1	S5°05'12" E	119.17
L2	S3°50'18" W	83.69
L3	S3°50'48" W	61.34

"Third Addition to Kidd Island Bay Lots" Recorded at Book E of Plats on Page 30, Records of Kootenai County, Idaho



LEGEND

- Section Corner (Not Found)
- Iron Pipe Found
- Drill Steel Found
- Staked Well Location
- Bearing Tree (Tamarack)
- Bearing Tree (Alder)
- 27.47(rec) Record Distance
- 27.11(calc) Calculated Distance
- 27.11(m) Measured Distance
- Pressure Sanitary Sewer Line
- Gravity Sanitary Sewer Line
- Sanitary Sewer Manhole

KIDD ISLAND BAY WATER WELL SITE AND EASEMENT

JUB

Engineers Surveyors Planners

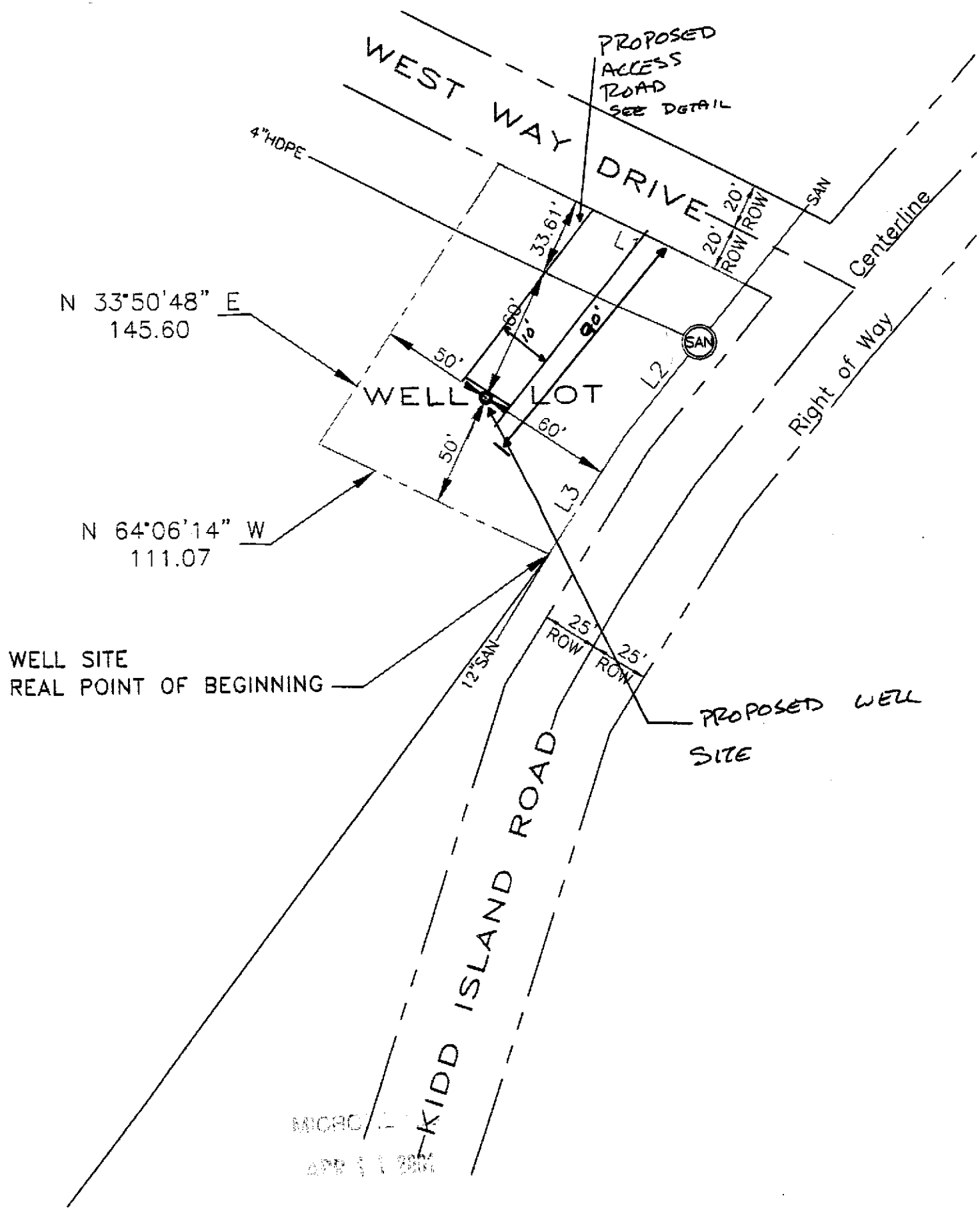
J-U-B ENGINEERS, INC.
Engineers Surveyors Planners
Coeur d'Alene, Idaho

MICROFILM

APR 1 1981

			1	1
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KIDD
ISLAND
BAY



STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED

SEP 28 2001

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 95-09026

1. Owner: Kidd Island Bay Water Users Assn. Phone No. (208) 667-6105

Current Address: PO Box 2265 Coeur D'Alene Id 83816

2. Accompanied by: Jim Babb EXAM DATE: 8/01/01

Address: W3765 Bay Shore Court Coeur D'Alene Id 83814 Phone No. (208) 667-6105

Relationship to Permit Holder: _____

3. Source: Groundwater tributary to _____

B. OVERLAP REVIEW

1. Other water rights with the same place of use: _____

2. Other water rights with the same point of diversion: _____

C. DIVERSION AND DELIVERY SYSTEM

1. Point(s) of Diversion:

Ident No.	Gov't Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
			SW	SW	35	50N	04W	Kootenai	USGS 7.5 min Quad

2. Place(s) of Use:

Indicate Method of Determination

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
50N	04W	35	Within Limits of Kidd Island Bay Water Assn. Per # 1280104																

MICROFILMED

SEP 28 2003

E. NARRATIVE/REMARKS/COMMENTS

These two wells feed an existing system. The old system was lake feed. This sight changes source and point of div. The two wells alternate. Each having a 2 hr shift.

Pumping test showed 70 gpm on each flow meter.

Have conditions of permit approval been met? ☒ yes ☐ no

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NOV 26 2003

F. FLOW CALCULATIONS

Measured Method:

Additional Computation Sheets Attached

Additional Computations

Flow meter 7095 m

$$\frac{70 \times 133681}{60} = 156$$

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$$V_{I,R} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = \underline{\hspace{2cm}}$$
$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 =$$
$$V = \text{Smaller of } V_{I,R} \text{ and } V_{D,R} = \underline{\hspace{2cm}}$$

2. Volume Calculations for Other Uses:

H. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
Municipal	06-01	12-31	16	
Totals:			16	

2. Recommended Amendments

☐ Change P.D. as reflected above ☐ Add P.D. as reflected above ☐ None
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other

I. AUTHENTICATION

Field Examiner's Name Wayne Baldwin Date 8-26-01

Reviewer _____ Date _____

SEAL

MICROFILMED

2002 6 2002

Tasco
Bay

95-09026

This topographic map depicts the Stevens Point area, including Kid Island, North Cape, and Stevens Point. A grid is overlaid on the map. Key features include:

- Service Area:** A shaded region labeled "SERVICE AREA" with a circled point labeled "WELL SITE".
- Geographic Labels:** Kid Island, North Cape, Stevens Point, Bay, Island, Spring, Creek, and Threemile Point.
- Topographic Features:** Contour lines indicating elevation, with labels such as 2554, 2565, 2600, 2627, 2527, 2500, 2400, 2300, 2200, and 2100.
- Infrastructure:** A road labeled "T 50 N" and a road labeled "T 48 N 2627".
- Other Labels:** "SECTION" with an arrow pointing to the right, and "WELL SITE" with an arrow pointing to the circled point.

Negro
Head

Arrow
Point

Cape
Coeur d'Alene

DAY! 15 47'30" 16
18 SE

INTERIOR-GEOLOGICAL SURVEY, RESTON, VIRGINIA-1962

116°45'

24 000

0 4000 5000 6000 7000 FEET 1 MILE

0 1 KILOMETER

RVAL 20 FEET
OUR INTERVAL 10 FEET
RTICAL DATUM OF 1929

NAL MAP ACCURACY STANDARDS
 . COLORADO 80225, OR RESTON, VIRGINIA 22092
 AND SYMBOLS IS AVAILABLE ON REQUEST

ROAD CLASSIFICATION

Primary highway, hard surface _____ Light-duty road, hard or improved surface _____
Secondary highway, hard surface _____ Unimproved road _____
☐ Interstate Route ☐ U. S. Route ☐ State Route



QUADRANGLE LOCATION

MICROFILMED

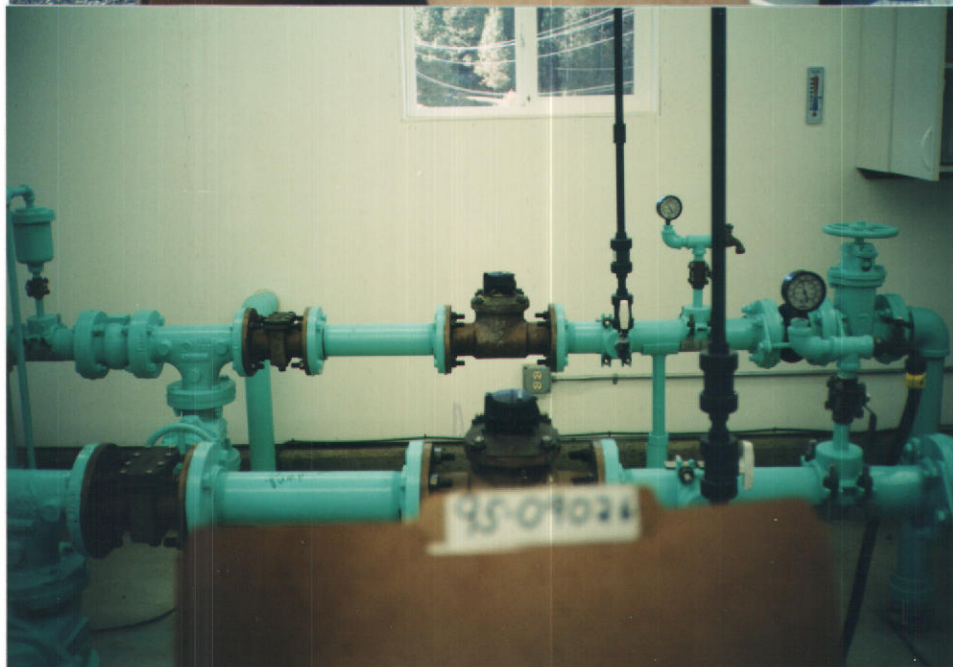
NOV 26 2003

COEUR D'ALENE, IDAHO

NE/4 COEUR D'ALENE 15' QUADRANGLE
N4737.5-W11645/7.5

1981

DMA 2679 III NE-SERIES V883



95-09026

MICROFILMED
NOV 26 2003

ANALYSIS SHEET FOR PROOF OF BENEFICIAL USE

Permit No.: 95-9026

Reviewed By: dgibson

Date: February 8, 2001

	<u>Yes</u>	<u>No</u>		<u>Yes</u>	<u>No</u>
Proof received timely?	X		Drilling permit required?	X	
License examination fee required?	X		Drilling permit No.:		95-99-N-108
Appropriate fee submitted?	X		Drilling permit upgrade needed?		
Receipt No.:		C052178	Well driller's report filed?		X
Additional Amount Due:			Measuring device required?		X
Name and address same as permit?	X		Measuring device installed?		
Are the water uses correct?	X		Measure device waiver requested?		

Priority Calculation

Date proof received		02/07/2001
Date proof due	-	01/01/2002
Lapse notice sent	-	
No. of days late	=	0
Holiday allowance	+	
Priority date	+	08/09/1999
New priority date	=	08/09/1999

Deficiencies of Actions Items

Acknowledge proof.

RECEIVED

JAN 24 2001

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Department of Water Resources

PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources considers this form a statement that the permit holder(s) has/have completed all development that will occur under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below. This form must be accompanied by a license examination fee, when necessary, or be accompanied by a completed field examination report prepared by a certified water right examiner.

1. Permit No. 95-09026 Telephone No. (208) 667-6105

2. Name of Permit Holder(s): KIDD ISLAND BAY WATER USERS ASSN

3. Mailing Address: P.O. Box 2265

City COEUR D'ALENE State ID Zip 83816

4. Source of Water: GROUND If GROUNDWATER (well), Date Drilled: mo. 9 / yr. 98

Well Driller: H2O WELL SERVICE #0448 Drilling Permit Number: 95-99-N-108 -
IDWR# 95-08947

5. Use(s) (as authorized by the water right permit):

Domestic (No. of households): up to 75 NTE Stockwater (No. and type of stock): _____

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

6. Total rate of diversion and/or volume for which proof is submitted: 0.16 cfs OR _____ acre-feet

7. Measuring Device Requirement: (refer to the approval conditions on your permit and respond accordingly)

(This question is not optional. Please check either yes or no. Proofs returned not checked accordingly, will be considered incomplete)

Measuring Device: Is a measuring device required?

Yes _____ or No ☒

Has the measuring device been installed?

Yes _____ or No _____

8. Fee Enclosed: \$ _____ (See Fee Schedule on back of the instructions for filing proof of beneficial use)

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

Name: JIM BABB Telephone Number: (208) 667-6105

Address: W 3765 BAY SHORE COURT COEUR D'ALENE, ID. 83814 (old address W 819 Kidd Island Rd.)

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. I agree to relinquish any undeveloped portion of the permit to the State of Idaho.

Signature of permit holder: James M. Babb Pres.
(include your title, if on behalf of company or organization)

Date: 1/19/01

Form 238-7

7/98

Well Site Consulting and
Management Services

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Office Use Only			
Inspected by _____			
Twp. _____	Rge. _____	Sec. _____	
Lat. _____	1/4 _____	1/4 _____	1/4 _____
Long. _____		Long. _____	

1. WELL TAG NO. D6403

Drilling Permit No. _____

Other Permit No. 95-08947

2. OWNER

Well Number: 776Name KIDD ISLAND BAY WATERAddress JUB/PO BOX 2265City CUAState IDZip 83816

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

Twp. 50 ☒ North or ☐ SouthRge. 04 ☐ East or ☒ WestSec. 35 1/4 SW 1/4 SW 1/4Gov't Lot _____ County KOOTENAI

Lat. _____ Long. _____

Address of Well Site KIDD ISLAND BAYCity CUA

(Draw to legal name of road - Distance to Road or Landmark)

L.L. _____ Bk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK check all that apply (Replacement, etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK		AMOUNT		METHOD
Material	From	To	Backs or Pounds	
BENTONITE	0	54	55 BAGS	OVERBURN

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 0Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

diameter	From	To	Gauge	Material	Casing	Line	Window	Thickness
1	12	54	.250	STEEL	☒	☐	☒	☐
6	13	80	.250	STEEL	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____☒ Screens Screen Type JOHNSON STAINLESS

From	To	Slot Size	Number	Diameter	Material	Casing	Line
80	100	100	20	5	STIEB	☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

20 ft. below ground Artesian pressure _____ lb.Depth flow encountered, 95 ft. Describe access port or control device: _____

11. WELL TESTS:

☒ Pump ☐ Boiler ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
300+			
Pump Test	80GPM		4 HRS

Water Temp. COLD Bottom Hole Temp _____Water Quality test or comments: CLEARDepth first Water encountered 95

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

From	To	Remarks Lithology, Water Quality, Temperature	Water	Y	N
12	0	TOP SOIL		☐	☒
12	3	Clay Brown		☐	☒
12	26	Clay Brown W/Drain		☐	☒
12	37	Gravel Broken		☐	☒
12	41	Gravel W/Clay Brown		☐	☒
12	52	Gravel Interbeds		☐	☒
8	54	Gravel Interbeds		☐	☒
8	90	Void		☒	☐
8	95	Gravel Fractured		☒	☐
		ARTESIAN SEAL		☐	☐

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JAN 24 2001

Department of Water Resources

Completed Depth 104' (Measurable)Date Started 9/24/98 Completed 9/25/98

13. DRILLER'S CERTIFICATION

We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name H2O Well Service, Inc. Firm No. 448Firm Official _____ Date 9/25/98and Supervisor or Operator _____ Date 9/25/98

(Sign Once if Firm Official and Operator)

(Mike Halterman)

MICROFILMED

APR 11 2001

Form 238-7

7/98

Starships Consulting and
Management Services

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Office Use Only			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat	:	:	Long

1. WELL TAG NO. D10378Drilling Permit No: 95-08947-108Other IDWR No. 95-08947

2. OWNER

Name KIDD ISLAND BAYWell Number: 801Address PO BOX 2265City CDA State ID Zip 83816

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

X		

Twp. 50 North or South
Rge. 04 East or West
Sec. 35 1/4 SW 1/4 SW 1/4

Gov't Lot _____ County KOOTENAI

Lat: _____ Long: _____

Address of Well Site KIDD ISLAND BAYCity CDA

(Give at least name of road + distance to Road or Landmark)

Lt. _____ Bk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK check all that apply (Replacement, etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT Bags or Pounds	METHOD
Material	From	To		
BENTONITE	-2	-53	60 BAGS	CASED

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 130Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Line	Wells	Threading
3	+2	-124	-322	STEEL	☒ M	☐ L	☒ M	☐ I

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____☒ Screens Screen Type Stainless Steel

From	To	Depth	Material	Casing	Line
-125	-135	80		☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

80 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
100+			

Water Temp. _____ Bottom Hole Temp _____

Water Quality test or comments: _____

Depth first Water encountered _____

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

			Water	
From	To	Remarks: Lithology, Water Quality, Temperature	Y	N
12	0	Trussell		☒
12	3	Clay Brown		☒
12	26	Clay W/Broken Basalt		☒
12	37	Basalt Black Broken	☒	☒
12	42	Basalt W/Clay Spans		☒
8	60	Basalt Broken		☒
8	72	Basalt Fractured	☒	☒
8	110	Basalt W/Clay		☒
8	116	Basalt Fractured	☒	☒

RECEIVED

JAN 24 2001

Department of Water Resources

5' JS + 5'

Completed Depth 130' (Measurable)Date Started 7/14/99 Completed 7/20/99

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name H2O WellService, Inc. Firm No. 446Firm Official _____ Date 7/20/99

and _____

Supervisor or Operator _____ Date 7/20/99

(Sign Once if Firm Official and Operator)

(Jim McLeslie)

MICROFILMED

APR 11 2001

Analysis of System Capacity for Subdivisions

Operator: S. Curtis

Date: 1/2/01

Right No.: 95-09026

Existing or Proposed System

Storage capacity in gallons	30000 gal	
Pump horsepower	5 hp	
Dynamic lift	100 ft	
Pump discharge pressure	40 psi	
Theoretical pumping capacity	0.16 cfs	71.8 gpm
Measured pumping capacity	0.16 cfs	71.8 gpm

Requirements

Number of homes	75 homes
Gallons per day per home	500 gal
Area irrigated	56 acres
Peak demand period	60 min

Calculations

Peak instantaneous demand	1.57 cfs	704.5 gpm
Suggested pump capacity	0.47 cfs	211.4 gpm
Peak demand volume	72431 gal	
Max potential daily diversion vol.	103404 gal	
Total daily volume required	97819 gal	0.3002 af
Time required to pump daily vol.	22.7 hr	1362 min
Time required to refill storage	16.8 hr	1009 min

Key Questions

Does existing storage capacity exceed peak demand volume?	No
Does existing pumping capacity meet or exceed the suggested pumping capacity?	No
Can the system produce the required daily volume in under 24 hours?	Yes

Notes:

See applicant's letter of 11/14/2000

MICROFILMED

APR 2 2001

APPLICATION FOR PERMIT
STATE OFFICE ANALYSIS

Reviewed by Sharla Curtis on 10/13/99

No. 95-09026 Name: KIBWUA Corp. Officers ✓ See comment Ad ok ✓ Govt Lots _____

AREA OF CONCERN: No/Yes _____ Moratorium _____ GWMA _____ TRUST/NON-TRUST _____

GROUNDWATER: (✓Flow Chart)

DRILLING PERMIT

All wells - 046(P23)
Basin 34 - 085
Irr. w/in WD - P05
WMD - North/East/West
≤ 0.24 cfs/5 acres - No MD
> 0.24 cfs/5 acres - 067
~~WMD~~
Supp-irr (irr = only use) - 065-079
Supp-irr (+ other uses) - 100-101
≤ 0.24 cfs/5 acres - No MD
> 0.24 cfs/5 acres - 01M

LOCATION:

Boise Front LoGeo - 058 (<85 GW)
Mitigation - 121
42-248 Area - P84 (20s-70s, 81-86)
Swan Falls Flag -
Trust - 051(P74) (consumptive uses)
Non-Trust - 048-049 (consumptive uses or non-cons. > 1.0 cfs)

USES:

STORAGE - 18A-01H(P01), 01P-18B(P09)-NA
IRR ≤ 5 ac - R66/R67/R68/R69 (0.03 cfs/ac)
> 5 ac - R62/R63/R64/R65 (0.02 cfs/ac)
STOCKWATER - R37 (BLM/USFS)
MINING - 054-081(P10)
FISH PROP - 029(70'S only)-007-042-081(P10)
HEAT/COOL - R07(injection well)
FIRE PROT. - 077

SURFACE WATER: (✓Flow Chart)

F&G contacted - Yes/No Response _____
In/Above MSF - WB9
PLANNING SECTION REVIEW/RESPONSE _____
In-stream development - P52
WD - R04 (WD# _____)
≤ 0.20 cfs/others - 01H(P01), 01P or No MD
> 0.20 cfs - 01J(P08)

SPRINGS/SINK, INACTIVE WD & REST OF STATE

≤ 0.24 cfs/5 acres - No MD
> 0.24 cfs/5 acres - 01M or No MD

RIVER BASINS: (SW special considerations)

SNAKE R (01) - W22(P04), N/A
(02.03) - 007 (w/ remark WB9 if above Weiser)
Payette R (65) - 047(P04) (Payette Lake)
Salmon R (70's) - 029 (fish screens)
Weiser R (67) - 086-087

USES:

POWER - 17H-17K (+uses)-08A-025(P18)-01N-081(P10)
MUNICIPAL
Restricted area - 022,075
Irr., GW supp to SW - 102
DOMESTIC
Surface water - WB5 (Big Wood or Boise above Star Bridge)
27A (Payette R)
> 1-in restricted area - 070-071-075(no parks/common areas, etc)
Irr use listed separate - WB5

BENEFICIAL USE DUE: 1/01/2002

MISC CONDITIONS/REMARKS:

Protested - 020-W19
Development Period
≤ 1 yr - P16
> 1 yr - 26A(P17)
Ownership - 004
Non-consumptive - 027
Water Quality - 081-R07

Multiple pd's per ¼¼

Subd lot desc (pd) - W32
Subd lot desc (pu) - W59
- W60

OTHER CONDITIONS/REMARKS 5/75 homes. ok

COMMENTS run subd local spreadsheet

IDA DEPARTMENT OF WATER RESOURCES
APPROPRIATION APPLICATION ANALYSIS SHEET

RECEIVED

OCT 12 1999

WRI
WRA
BCA

APPLICATION # 95-09026

DEPARTMENT OF WATER RESOURCES

INITIAL REVIEW

APPLICANT: KIDD ISLAND BAY

BY: AB

DATE: 8/11/99

ITEM REQUIRED INFORMATION

1. (X) Name and Address
2. (X) Source
3. (X) Point of Diversion & County
4. (X) Quantity
 - (X) Nature of Proposed Use
 - (X) Period of Use
5. (X) Total Quantity
6. (X) Description of diverting works
7. (X) Time required for b/u
8. (X) Proposed use
9. (X) Place of use or acres irrigated
10. (X) Other water Rights
11. (X) Ownership
12. (X) Map
 - (X) Signature
 - (X) Fee (Amt, receipt, acknowledgement)

*** Send info sheet Y() N()

ADDITIONAL INFORMATION

- (Yes) (No)
- X Field check: by _____
- Field report attached _____
- Analysis Supp. attached (>5cfs/500af) _____
- Water delivered by water master? _____
- Water District # _____

PROCESSING

(Yes) (No) PRIORITY DATE: 8/9/99

X (Include Moratorium Remark)

X Statewide Advertising: (Diversion rate greater than 10 cfs or 1,000 af).

ADVERTISE IN: KOOTENAI County

LETTERS SENT REQUESTING:

() Dam Information () Fish Information

() Power Information () Other: N/A

INFORMATION RECEIVED:

() Dam Information () Fish Information

() Power Information () Other: N/A

GROUNDWATER SECTION

WD Permit No.'s:	TAG #	Type:	Fees	Receipt No.	Upgrade Needed?
<u>95 98 12 0173</u>		Dom. Non-Dom. <u>X</u>	Paid \$ <u>200</u>	<u>1012401</u>	Y () N (<u>X</u>)
<u>95 99 12 0108</u>		Dom. Non-Dom. <u>X</u>	Paid \$ <u>200</u>	<u>1013670</u>	Y () N (<u>X</u>)
		Dom. Non-Dom. _____	Paid \$ _____		Y () N ()

- Groundwater management area
- Critical ground water area
- Well Drilling Permit required
- Well Drilling Application and Fees received
- Well Drilling Application approved?

Remarks: _____

FINAL REGIONAL PROCESSING/REVIEW

- (Yes) (No)
- Notice of pending void order issued. Final order response date: _____/_____/_____
- Further information required from applicant _____
- Affidavit of publication received _____
- Application published correctly. If not, record action taken: _____
- Publication dates and paper recorded on application _____ Sr. Agent initial _____
- Protests received, Final protest date: 9/20/99
- Measuring device required _____
- Measuring port required _____
- Special conditions: _____

Special conditions of approval supplement and/or cover letter attached: _____

Approval Recommended by: AB

Date: 10/7/99