

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08626

Priority: July 18, 1989

Maximum Diversion Rate:

0.04 CFS

Maximum Diversion Volume:

1.2 AF

This is to certify, that STEVE GOODELL
4011 E 80TH
SPOKANE WA 99223

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated July 18, 1989; and has submitted Proof of Beneficial Use on November 1, 1991. An examination indicates that the works have a diversion capacity of .050 cfs of water from a **GROUNDWATER** source, and a water right has been established as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
DOMESTIC	01/01 to 12/31	0.04 CFS	1.2 AF

LOCATION OF POINT(S) OF DIVERSION: Lot 1(NENE), Sec. 25, Township 48N, Range 05W
KOOTENAI County

PLACE OF USE: DOMESTIC
TWN RGE SEC

48N 05W 25 Lot 1(NENE)

CONDITIONS/REMARKS:

1. The maximum diversion volume is defined as the maximum allowable volume of water that may be diverted annually from the source under this right. The use of water confirmed by this right is limited to the amount which can actually be beneficially used. The maximum diversion volume may be adjusted to more accurately describe the beneficial use or to implement accepted standards of diversion and use efficiency.
2. This water right is appurtenant to the described place of use.
3. This right is subject to all prior water rights and may be forfeited by five years of non-use.
4. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.
5. Domestic use is for 2 homes.

This license is issued pursuant to the provisions of Section 42-219, Idaho Code. Witness the seal and signature of the Director, affixed at Boise, this 25TH day of AUGUST, 1992.

Acting for R. Keith Higginson, Director

RECORDED

SEP 17 1992

BEFORE THE DEPARTMENT OF WATER RESOURCES
OF THE STATE OF IDAHO

IN THE MATTER OF PERMIT NO. 95-08626)
IN THE NAME OF STEVE GOODELL) ORDER OF
REINSTATEMENT)

WHEREAS, the Department issued the above-captioned permit with the condition that proof of construction of works and application of water to beneficial use (proof of beneficial use) be submitted on or before November 1, 1991; and,

WHEREAS, the Department notified the permit holder by certified mail that proof was due and instructed the permit holder of the steps to be taken to submit the proof of beneficial use; and,

WHEREAS, the Department notified the permit holder that the permit lapsed for failure of the permit holder to submit the proof of beneficial use; and,

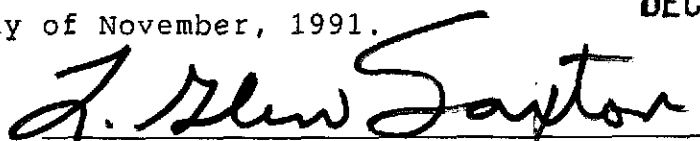
WHEREAS, Section 42-218a of the Idaho Code provides that a permit may be reinstated upon a showing of reasonable cause within sixty days of the date of the notice of lapsing; and,

WHEREAS, the permit holder has provided a reasonable showing why the permit should be reinstated by submitting proof of beneficial use on November 1, 1991;

IT IS, THEREFORE, HEREBY ORDERED that Permit No. 95-08626 be REINSTATED with no advance in priority.

Dated this 21st day of November, 1991.

DEC 31 1991


L. GLEN SAXTON
Chief, Water Allocation Bureau

State of Idaho
Department of Water Resources

Permit To Appropriate Water

NO. 95-08626

Proposed Priority: July 18, 1989

Maximum Diversion Rate:

0.04 CFS

This is to certify, that **STEVE GOODELL**
7910 S. CUBA
SPOKANE, WA 99223

has applied for a permit to appropriate water from: **GROUNDWATER**
and a permit is **APPROVED** for development of water as follows:

BENEFICIAL USE

PERIOD OF USE

RATE OF DIVERSION

DOMESTIC

01/01 to 12/31

0.04 CFS

LOCATION OF POINT(S) OF DIVERSION: LOT 1(NENE), Sec. 25, Township 48N, Range 05W
KOOTENAI County

PLACE OF USE: DOMESTIC

TWN RGE SEC

48N 05W 25 LOT 1(NENE)

CONDITIONS/REMARKS:

1. Proof of construction of works and application of water to beneficial use shall be submitted on or before **November 1, 1991.**
2. Subject to all prior water rights.
3. Permit holder shall comply with the drilling permit requirements of Section 42-235, Idaho Code.
4. Permit holder shall commence the excavation or construction of diverting works within one year of the date this permit is issued and shall proceed diligently until the project is complete.
5. Domestic use is for 2 homes.

This permit is issued pursuant to the provisions of Section 42-204, Idaho Code.
Witness the seal and signature of the Director, affixed at Boise, this

10th day of October, 1989

R. Keith Higginson
R. Keith Higginson, Director

for

MICROFILMED

NOV 24 1989

Ident. No. 95-08626

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name: STEVE GOODELL 509-448-0124
Address: 7910 S. CUBA
SPOKANE, WA 99223

2. Source: GROUNDWATER Trib. to:

3. Location of point of diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
48N	05W	25	NE	NE		1	KOOTENAI

4. Water will be used for the following purposes:

Purpose	From	To	CFS	(or)	AFA
DOMESTIC	01/01	12/31	0.040		

5. Total quantity appropriated is:
0.040 CFS (and/or) AFA

6. Proposed diverting works:

- Description of ditches, flumes, pumps, headgates, etc.
WELL, PUMP AND PIPELINE
- Height of storage dam feet; active reservoir capacity
acre-feet; total reservoir capacity acre-feet; period of
year when water will be diverted to storage: to inclusive.
- Proposed well diameter is 6 inches; proposed depth of well is
feet.
- Is groundwater with a temperature greater than 90F being sought? NO

7. Time required for the completion of the works and application of
the water to the proposed beneficial use is 3 years.

8. Description of proposed uses:
D/2 HOMES.

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NOV 24 1989

9. Description of place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
48N	05W	25	NE NE	1	DOMEST	

10. Describe any other water rights used for the same purposes.
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:

13. Map of proposed point of diversion and place of use attached? [Y]

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

Steve E. Goodell
Applicant

Received by TK Date 7/18/89 Time 11:00am Preliminary check by CMH

Fee \$ 30.00 Received by Mr. # N3164 Date 7/18/89

Publication prepared by JD Date 7/26/89 Published in 8/30 10/1989

Publication approved [Signature] Date 8/31/89

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NOV 24 1989

95-08626

T48N

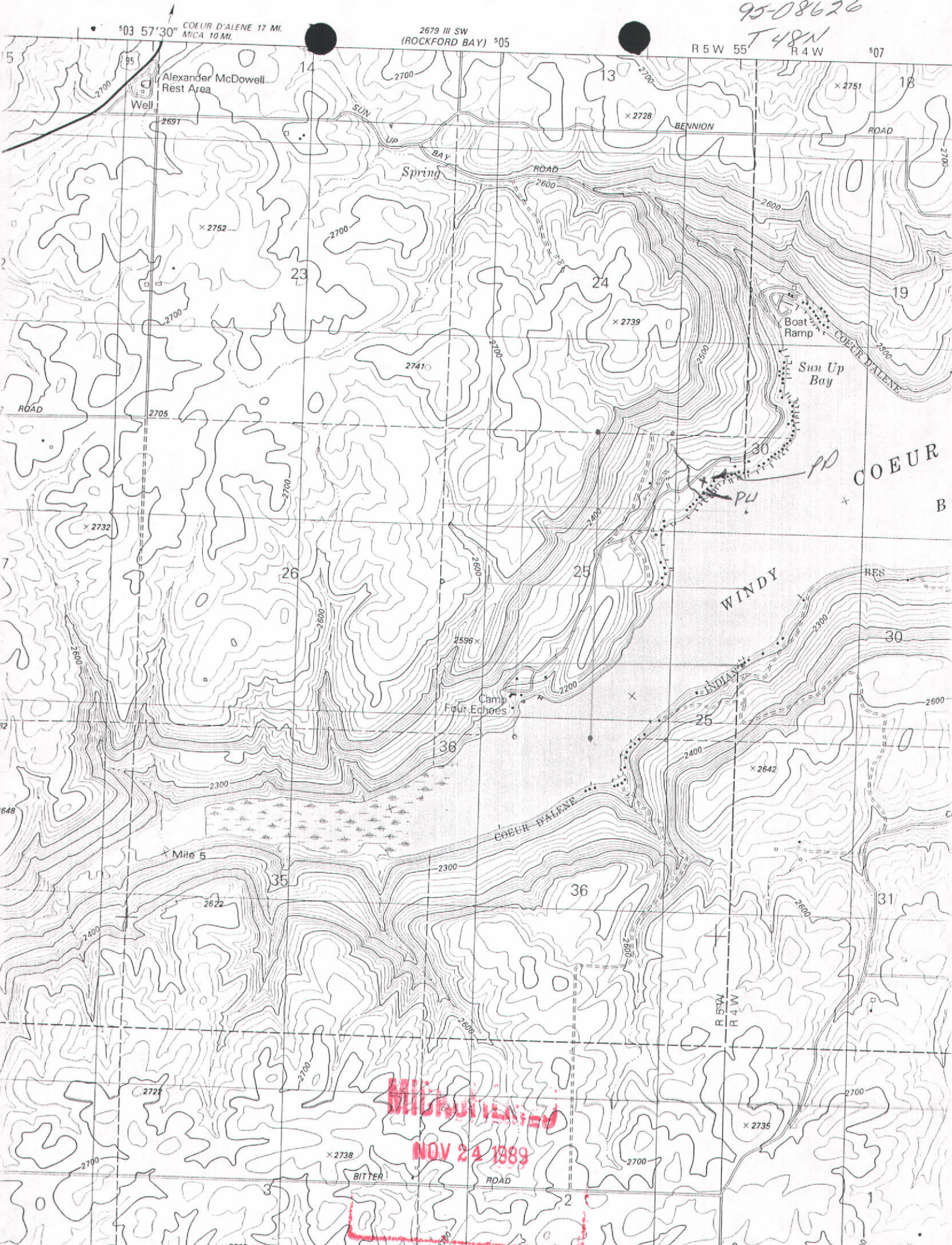
03 57'30" COEUR D'ALENE 17 MI.
MICA 10 MI.

2679 III SW
(ROCKFORD BAY) 05

R 5 W 55

R 4 W

07



Alexander McDowell
Rest Area
Well

SUN
Up
Bay
Spring

BENNION

ROAD

Boat
Ramp

Sun Up
Bay

COEUR
DALENE

WINDY

Camp
Four Echoes

COEUR DALENE

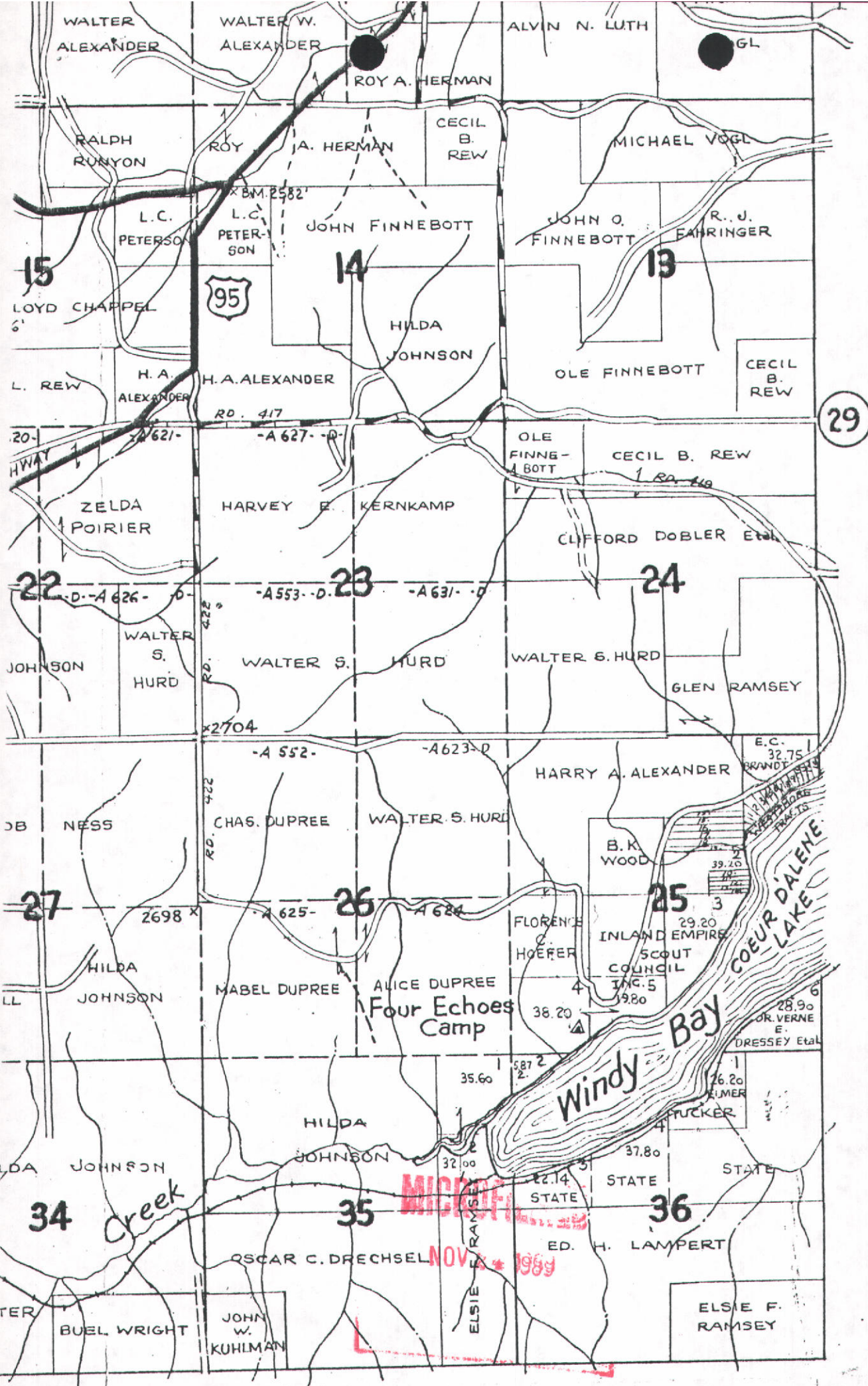
Mile 5

BITTER

ROAD

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NOV 24 1989



LICENSE REVIEW CHECKLIST

Permit # 95-08626

Date 8-12-92

	<u>Yes</u>	<u>No</u>	
NAME	☐	☒	Address Change?
PRIORITY DATE	☐	☒	Advance? _____
	☐	☒	Memo to Advance _____
	☐	☒	Order to Reinstate Needed? <u>DONE</u>
TOTAL CFS	☐	☒	Incorrect Fee for rate recommended? _____
	☐	☒	Disagree with Actual Measurement? _____
	☐	☒	<u>.04 cfs (DOM)</u>
	☐	☒	Disagree with Theoretical? <u>1 x 8.8 x .7 = .050</u>
	☐	☒	Limited by Capacity? <u>.05 cfs 30' (2.31 x 40)</u>
TOTAL VOLUME			Rate/ac _____ AFA Irr. Season _____
			Standard Irr. Season _____
			Season Recommended _____
	☐	☒	Disagree with Examiner's Calculations? _____
	☐	☒	<u>2 x .6 = 1.2 afa (DOM)</u>
	☐	☒	Limited by Flow? _____
SOURCE	☐	☒	Changes? Clarification of <u>Originally</u>
	☐	☒	<u>Intended</u> source _____
	☐	☒	Notice of Intent to Void. _____
P/D			Verify with Map _____
	☐	☒	Amendment Needed? _____
	☐	☒	Is Overlap Analysis a Consideration? _____
P/U			Verify with Map _____
	☐	☒	Amendment Needed? _____
	☐	☒	Is Overlap Analysis a Consideration? _____
USES	☐	☒	Change(s) in Nature of Use? _____
	☐	☒	Amendment Needed? _____
REMARKS	☐	☒	Multiple P/Ds in 1/4 1/4? _____
	☒	☐	Non-Irr. Uses <u>DOM/2 Homes</u>
	☐	☒	Special Overlap Condition _____
	☐	☒	Other _____
CONDITIONS	☐	☒	Measuring Device _____
	☐	☒	W/Master Control _____
	☐	☒	Overlap _____
	☐	☒	Water Quality _____
			DATES/MISC _____
			Water Dist. _____
			App Rec'd _____
			Exam Made _____

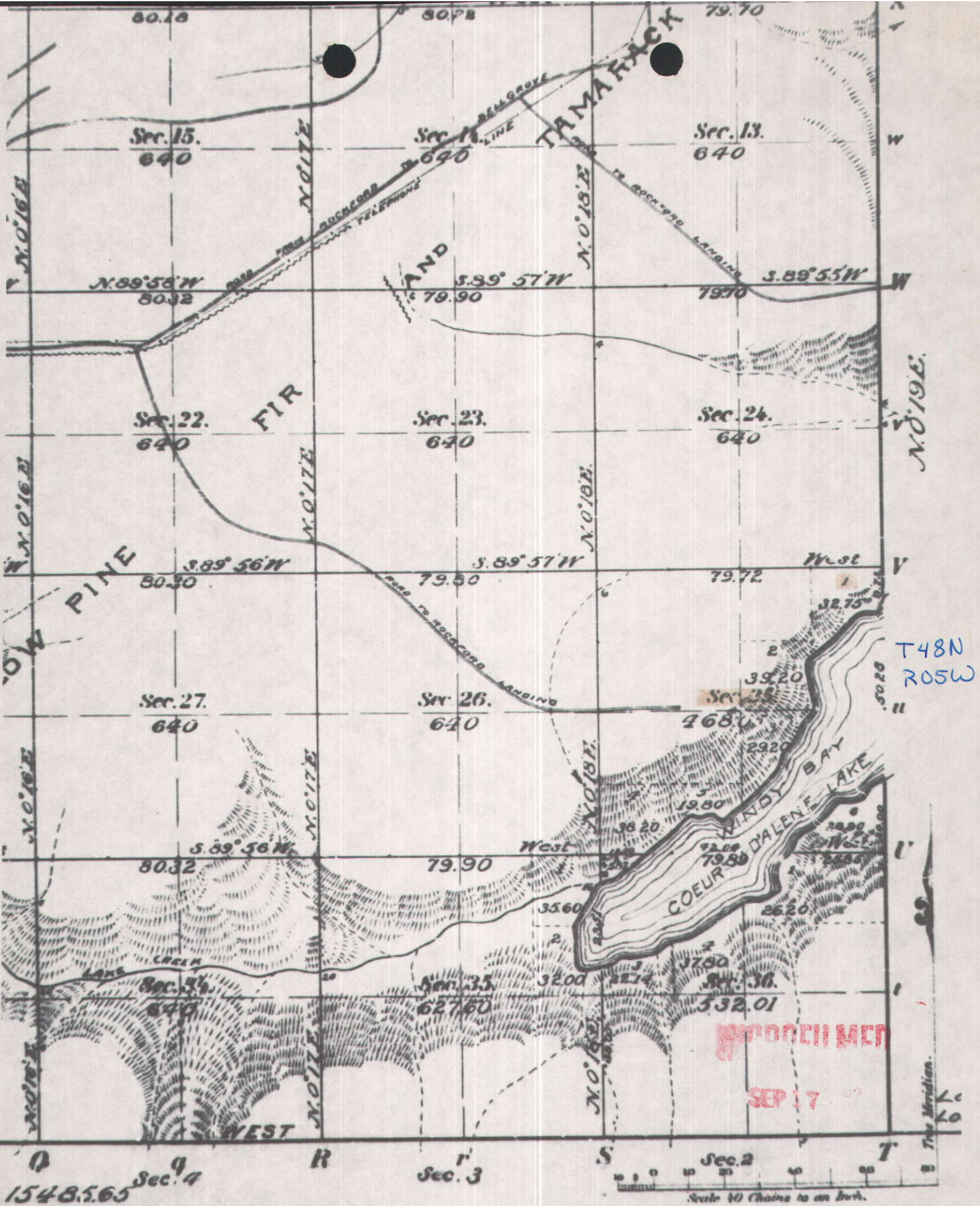
COMMENTS/MEMOS NEEDED:

18' static level / used 30' dynamic estimate
used 40 psi low end DOM estimate

License ☒ 10-Day ☐ 15-Day ☐ Special Correspondence _____

DATE: 08/12/92
PAGE: 1

Audit: 08/12/92 SKAGGS



T48N
R05W

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SEP 17 1902

Scale 40 Chains to an inch.

Map Projection

U.S. GEOLOGICAL SURVEY

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUL 27 1992

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 95-08626

1. Owner: Steve Goodell

Phone No. 448-0124

Current Address: 4011 E. 8TH SPOKANE, WA 99223

2. Accompanied by: NONE

EXAM. DATE: 1/28/92

Address: _____

Phone No. _____

Relationship to Permit Holder: _____

3. Source: Groundwater tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: NONE

☐ Copies Attached

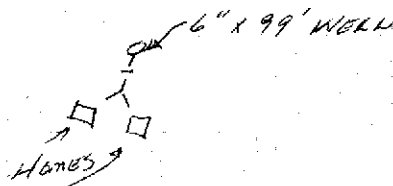
2. Other water rights with same point of diversion: NONE

☐ Copies Attached

☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

1. **Diversion System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached



Scale: 1" = 25

2. ☒ Copy of U.S.G.S. Quadrangle Attached
Showing location(s) of point(s) of diversion and
place(s) of use (required).

☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater.

☐ Aerial Photo Attached
(required for irrigation of 10 acres or more).

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System Description (continued)

3. Narrative: Description (As operating at time of measurement. Indicate pressure, number of sprinklers, etc.)

A 6" X 10' WELL WITH SWL @ 18', & 1 HP SUBMERSIBLE PUMP WITH PIPELINE
TO HOMES

☐ See Remarks on page 4 for continuation

4.

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
<u>SUBMERSIBLE</u>		<u>1</u>			

*Code to correspond with No. on map and aerial photo

5. Point(s) of Diversion:

Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
	<u>1</u>		<u>NE</u>	<u>NE</u>	<u>25</u>	<u>48N</u>	<u>5W</u>	<u>KOOSTENAW</u>	<u>MAP</u>

6. Place(s) of Use:

Indicate Method of Determination MAP

Twp.	Rge.	Sec.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
<u>48N</u>	<u>5W</u>	<u>25</u>	<u>D</u>																

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Do not use this space

Do not use this space

D. FLOW MEASUREMENTS

None

☐ Additional Data Sheets Attached

1.

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date

2. Measurements:

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

2. Alternate Method for Checking Purposes:

2 Homes

F. PUMP EFFICIENCY DATA (Optional)

Discharge Pressure: _____ psi x 2.31 = _____ ft (1); Dynamic pumping level: _____ ft (2)

Total Head: (1) + (2) = _____ (3) ; Flow rate: _____ cfs (4)

Water HP: (3) x (4) ÷ 8.8 = _____ (5)

Meter Input KW: 3.6 x _____ KH x _____ CTR or _____ MULT x _____ PTR x _____ N/ _____ T = _____ (6)

Meter Input HP: (6) x 1.34 = _____ (7)

Panel Input KW: _____ Ave PF x _____ Ave Volts x _____ Ave Amps x .001732 = _____ (6)

Panel Input HP: (6) x 1.34 = _____ (7) Efficiency: (5)/(7) x 100 = _____ %

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) =$ _____

$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 =$ _____

$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} =$ _____

2. Volume Calculations for Other Uses:

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SEP 17 1992

2 Homes

[illegible]

1. Recommended Amounts

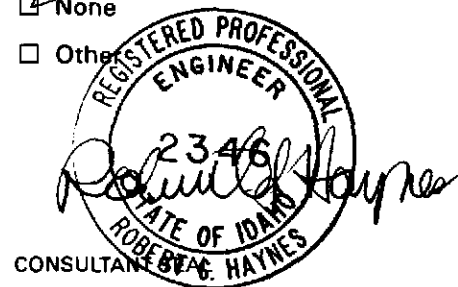
Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
DOMESTIC (2)	1-1	12-31	0.04	1.2
Totals:			0.04	1.2

☐ Change P.D. as reflected above ☐ Add P.D. as reflected above

☐ Change P.U. as reflected above ☐ Add P.U. as reflected above

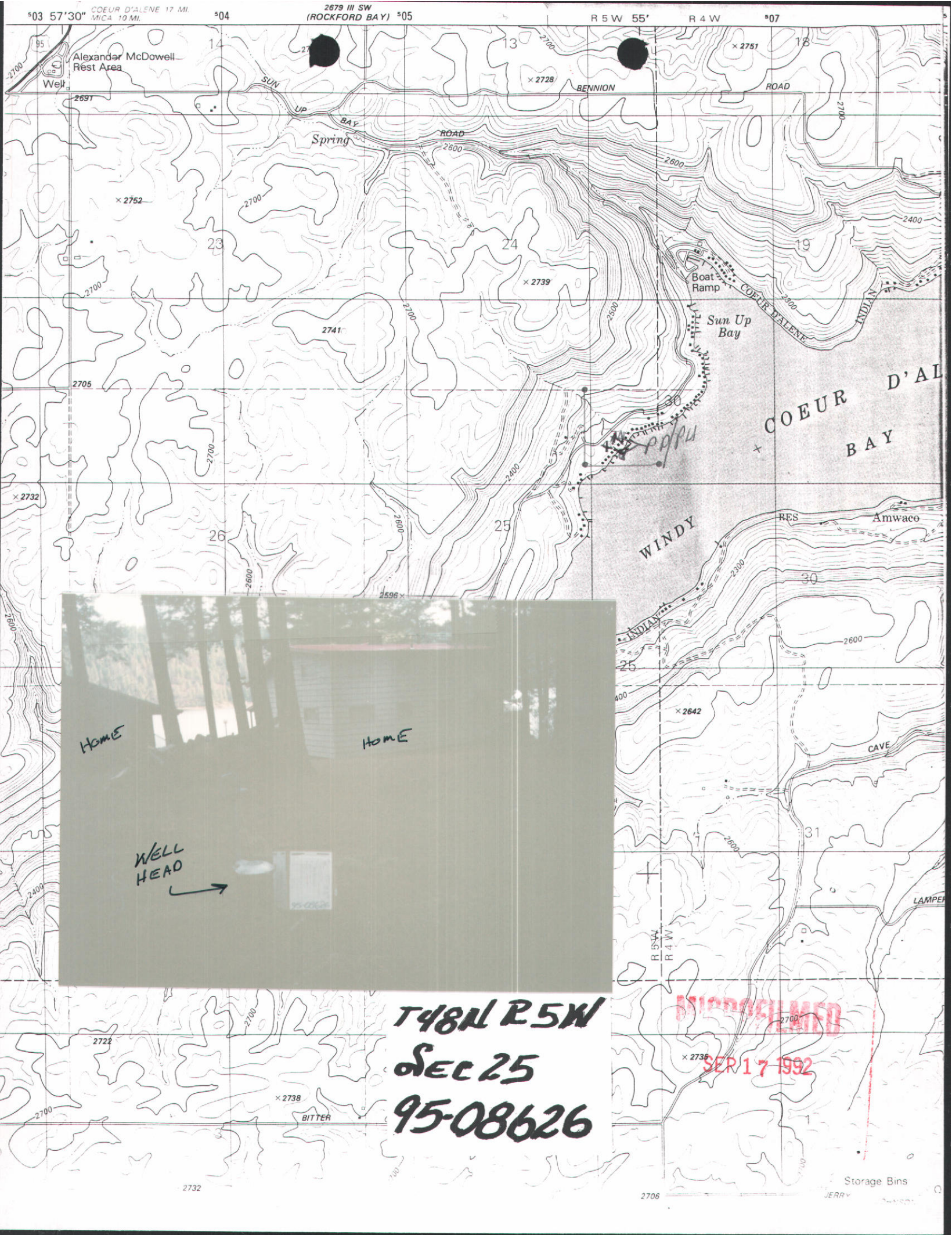
☒ None☐ Other

Field Examiner's Name Tom D. King
Signature Tom D. King
Certification Date 3/10/92
Field Report Preparation Date 1/28/92



K. Licensing recommendation shall be prepared by an Idaho Department of Water Resources employee on a computer printout attached hereto.

SEP 17 1992



HOME

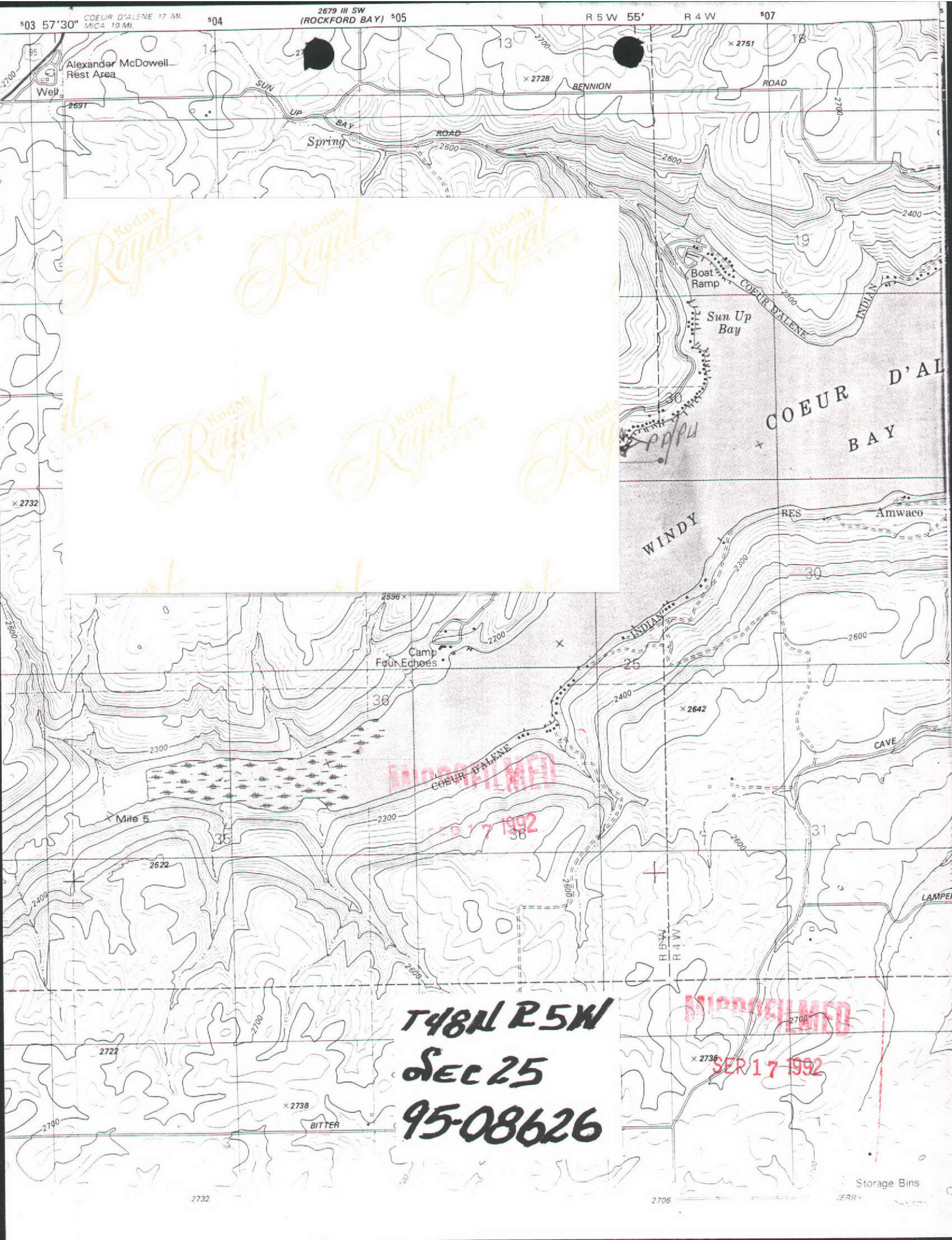
HOME

WELL
HEAD
→

T48N R5W
Sec 25
95-08626

MICROFILMED

SEP 17 1992



T48A R5W
Sec 25
95-08626

MICROFILMED
SEP 17 1992

State of Idaho
Department Of Water Resources
WELL INSPECTION FORM

If well is associated with water right, provide WR Permit No. 95-08626

Otherwise provide legal description and a sketch map and/or address so that the well can be located easily.

1. Legal Description of Well Location:

Twp. _____ N, Rge. _____ Sec. _____, _____ ¼ _____ ¼ Gov. Lot _____

2. Owner: _____

Address: _____

City _____, State _____

3. Casing $\geq$ 12 inches above ground: Yes ☒ No ☐

4. Access Port:	Y ☒	N ☒	Static Water Level:	<u>18</u>
Pressure Gauge:	Y ☐	N ☒	Casing Diameter:	<u>6</u>
Flowing:	Y ☐	N ☒	Temperature:	<u> </u>

5. Are there any obvious construction problems that may be a source for contamination or waste of water: Y ☐ N ☒

If answer to Item 5 is Yes, describe in remarks and attach photo.

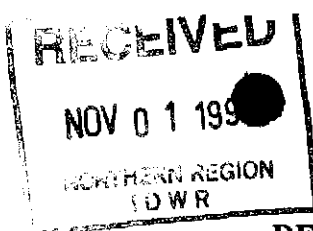
Remarks : _____

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SEP 17 1992

and
(Operator) James J. Carty

USE ADDITIONAL SHEETS IF NECESSARY



STATE OF IDAHO

For Office Use Only
Amt. of Fee \$ N/A
Date _____
Receipt No. _____
Received by _____

DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources will consider this form as 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 or a completed field examination report prepared by a certified water right examiner who has been appointed by the department.

1. Permit No. 95-08626 Telephone No. (509) 448-0124

2. Name(s) of Permit Holder(s): Timme and Steven Goodell

3. Post Office Address: 4011 E. 80th Spokane, Washington 99223

4. Source of Water: ground water

a. If ground water, well driller's name: J & J Drilling Date drilled: 9-12-1990

b. Pump horsepower: 1 hp Pressure (psi): 30-50 Dynamic pumping level (ft.): 100

5. Extent of Use:

Domestic 2 (No. of households) Irrigation _____ (No. of acres)

Stockwater _____ (No. and type of stock) Other _____

6. Total rate and/or volume for which proof is submitted 0.04 cfs _____ acre/feet 60 gals/min

7. Refer to the approval conditions on your permit and respond accordingly:

Measuring device: Required? Yes ☒ No Installed? Yes ☐ No

OR

Flow Measurement Port: Required? Yes ☒ No Installed? Yes ☐ No

8. Fee Enclosed: \$ _____ (See License Examination Fee Schedule)

9. Person to contact to accompany the Department representative during the field examination:

Timme K. Goodell 509-448-0124
Name Telephone No.

4011 E. 80th Spokane Washington 99223
Address

10. The above information is my true statement of the extent to which the above numbered permit has been developed and I relinquish any undeveloped portion of the permit to the state of Idaho.

10-30-91
Date

Steven E. Goodell DEC 31 1991
Signature (and title if on behalf of a company or organization)

ANALYSIS SHEET
for
PROOF OF BENEFICIAL USE

Permit No. 95-08626

Date 11/21/91

GENERAL CONSIDERATIONS

yes Name same as permit?
no Address same as permit? If no, indicate below.
yes Proof timely received? If no, complete priority advancement below.

SOURCE OF WATER

 Surface water source
 Ground water source
yes Drill permit req'd?
yes Copy in file? Drill permit no. 95-89-N-49
no Amt paid for drilling permit? yes Correct?
yes Well log in file?

LICENSE EXAMINATION FEE

no Required?
 Amount submitted?
 Correct amount?

MEASURING DEVICE

NA Measuring device or access port required?
 Installed?
 Waiver requested or needed?

DEFICIENCIES OR ACTION ITEMS new address: 4011 E 80th

lapsed in error - received in northern office 11/1/91
reinstate w/no advance in priority
driller 319

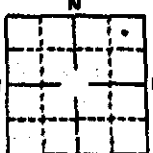
PRIORITY CALCULATION

Date proof received	<u> </u>	<u> </u>
Date proof due	<u> </u>	<u>-</u> <u> </u>
No. of days late	<u> </u>	<u>=</u> <u> </u>
Priority date	<u> </u>	<u>+</u> <u> </u>
NEW PRIORITY DATE	<u> </u>	<u>=</u> <u> </u>

K29
11/22/91

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STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENSEP 15 1989 requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

1. WELL OWNER Name <u>Steve Goodell</u> Address <u>7910 S Clubway</u> Owner's Permit No. <u>26-19H-49</u>		7. WATER LEVEL Static water level <u>18</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality <u>Good</u> Describe artesian or temperature zones below																																						
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____																																						
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		<table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td><u>150+</u></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	<u>150+</u>																																	
Discharge G.P.M.	Pumping Level	Hours Pumped																																						
<u>150+</u>																																								
4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th rowspan="2">Water Yes No</th></tr><tr><th>From</th><th>To</th></tr></thead><tbody><tr><td>10</td><td>0</td><td>1</td><td>TOP SOIL</td><td></td></tr><tr><td>10</td><td>1</td><td>18</td><td>BROWN CLAY - FIRM</td><td>K</td></tr><tr><td>10</td><td>18</td><td>30</td><td>BROWN CLAY - HARD & BRACK</td><td></td></tr><tr><td>9</td><td>30</td><td>45</td><td>STRIPS BRACK - FRAC. W/CLAY</td><td>K</td></tr><tr><td>9</td><td>45</td><td>106</td><td>STRIPS BROWN CLAY - FIRM</td><td>K</td></tr><tr><td>6</td><td>106</td><td>110</td><td>BROWN SAND - FINE, WATER</td><td>K</td></tr></tbody></table>		Bore Diam.	Depth		Material	Water Yes No	From	To	10	0	1	TOP SOIL		10	1	18	BROWN CLAY - FIRM	K	10	18	30	BROWN CLAY - HARD & BRACK		9	30	45	STRIPS BRACK - FRAC. W/CLAY	K	9	45	106	STRIPS BROWN CLAY - FIRM	K	6	106	110	BROWN SAND - FINE, WATER	K
Bore Diam.	Depth		Material		Water Yes No																																			
	From	To																																						
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9	45	106	STRIPS BROWN CLAY - FIRM	K																																				
6	106	110	BROWN SAND - FINE, WATER	K																																				
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td><u>250</u> inches</td><td><u>6</u> inches</td><td><u>1</u> feet</td><td><u>99</u> feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☒ Yes ☐ No ☐ Size of gravel <u>20 Mesh</u> Placed from <u>104</u> feet to <u>110</u> feet Surface seal depth <u>20+</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld _____ ☐ Cemented between strata Describe access port <u>1/4" BSP 110</u>		Thickness	Diameter	From	To	<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>99</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet																			
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6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>KOOTENAI</u> <u>N 1/4 Sec. 25, T. 4 N, R. 5 E</u>		10. Work started <u>8/10</u> finished <u>8/11/89</u>																																						
11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>J. S. JARVIS, INC.</u> Firm No. <u>317</u> Address <u>5150 S. CLARK RD.</u> Date <u>8/14/89</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>[Signature]</u>																																								

3/89

Drilling Permit No. 95-89-N-49Water Permit No. 95-8626

Injection Permit No. _____

State of Idaho
Department of Water Resources

DRILLING PERMIT

1. Applicant Steve Goodell
2. Address 7910 S. Cuba
Spokane, Wa. 99223 Telephone (509) 448-0124
- (☒) Well Owner () Well Operator () Other, specify _____
3. Proposed well location NE 1/4 NE 1/4, or Gov't lot No. 1,
Sec. 25, Twp. 48N, Rge. 5W, County Kootenai,
Lot, block and subdivision _____
4. Proposed use of well: (Check all that apply)
- (☒) Domestic () Stockwater () Monitoring
No. of households 2 No. of livestock _____
- () Irrigation () Industrial () Municipal
- () Injection () Other, Specify _____
5. Well construction information:
- (☒) New well () Deepen () Replace
- Proposed surface diameter 6" Maximum depth _____
- Anticipated bottom hole temperature:
- (☒) 85°F or less (Cold water well)
() 85°F to 212°F (Low temp. geothermal well)
() 212°F or more (Geothermal well)
6. Anticipated construction start date When water right is approved.
7. Well Driller (if known) J & J Drilling
Address Spokane, Wa.
8. Applicant's signature Steve E. Goodell
Title Owner
- Date 7/18/89

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NOV 24 1989

ACTION OF DEPARTMENT OF WATER RESOURCES

This Permit is Approved.

If approved, this permit authorizes the construction of a well subject to the following conditions:

GENERAL CONDITIONS

1. The well must be constructed in compliance with the applicable statutes, specific conditions of approval shown on the water right permit, injection well permit, transfer or amendment and the rules and regulations of the Department for water appropriation, injection wells and well construction standards.
2. This drilling permit is valid for two (2) months from its date of issuance for the start of construction and is valid for one (1) year from the date of issuance for completion of the well unless an extension has been granted.
3. This permit does not constitute the approval of the District Health Department or the Idaho Department of Health and Welfare which may be required before construction of this well.
4. The well shall be constructed by a driller currently licensed in the State of Idaho who must maintain a copy of the drilling permit at the drilling site.
5. Issuance of this drilling permit does not authorize trespass on the land of another party.
6. This permit does not constitute other local, county, state or federal approvals which may be required for construction of a well.
7. This drilling permit does not represent a right to divert and use the water of the State of Idaho.
8. If a bottom hole temperature of 85°F or greater is encountered, well construction shall cease and the well driller and the well owner shall contact the Department immediately.

SPECIFIC CONDITIONS

Dated this 17th day of July, 19 81.

Signed

Title

David D. Laund
Engineering Geologist

RECORDED

NOV 24 1989

Receipt No. N3K4 Receipted by pm Fee \$10.00 Date 7/18/89

Should be \$10.00 - water right app. only 0.04 cfs kw

EXTENSION OF DRILLING PERMIT

Approval Date _____ Extension approved by _____

This extension is good for 60 days beyond the above extension approval date.

Form No. 202a.
4/87

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPROPRIATION APPLICATION ANALYSIS SHEET

INITIAL REVIEW BY: RJA DATE: 7/28/89 APPLICATION: 95-08626

REQUIRED INFORMATION

- ☒ Name: (If applicant is a corporation or partnership, names must be provided for the director, officers, and other partners.)
- ☒ Address:
- ☒ Source: (See USGS Quad for names of water sources)
- ☒ Point of Diversion: (10 acres for spring, lot & block descriptions, for Subdivisions, local name)
- ☒ County:
- ☒ Quantity: (flow and/or volume)
- ☒ Period of use:
- ☒ Nature of proposed use: (Include description of use)
- ☒ Description of diverting works:
- ☒ Time required for beneficial use of water:
- ☒ Place of use or acres irrigated:
- ☒ Map:
- ☒ Signature: (If applicant is corp., partnership, or municipality title of signator is required)
- ☒ Fee:
- ☒ yes ___ No* In form to receipt:

ADDITIONAL INFORMATION

YES NO

- ☒ Overlapping place of use: (Describe source & relationship to present application on the back.)
- ☒ Overlapping point of diversion:
- ☒ Field check required: Field check by: _____
- ☒ Field report attached:
- ☒ Critical groundwater area:
- ☒ Groundwater management area:
- ☒ Send dam safety information:
- ☒ Send power requirement letter:
- ☒ Send fish farm requirement letter:
- ☒ Power residency affidavit:
- ☒ Power efficiency form:
- ☒ Within trust water boundry: (If yes, attach Trust Water Supplementary Analysis Sheet.)
- ☒ Diversion greater than 5 cfs or 500 af: (If yes, attach Large Diversion supplementary analysis sheet.)
- ☒ *REQUEST ADDITIONAL INFORMATION FROM THE APPLICANT

DATE REQUESTED:

☒ Additional information on reverse side:

RECEIVED
SEP 12 1989

Department of Water Resources

PROCESSING

YES NO

- ☒ In form for advertising:
☒ Statewide advertising:
☒ Fee amount, receipt number and date recorded on application:

SEND COPIES TO

YES NO

- ☐ I.D. Health and Welfare
☐ I.D. Fish and Game
☐ I.D. Lands
☐ Adjudication Bureau

YES NO

- ☐ U.S. BLM
☐ U.S. Forest Svc.
☐ Water District # _____
☐ Other _____

FINAL REGIONAL PROCESSING REVIEW

YES NO

- ☒ Affidavit of publication received:
☒ Application published correctly: If not, record action taken.

- ☒ Publication dates and paper recorded on application:
☒ Protests received, Final date for protest 8/24/89
☒ Protests, dates, resolution of protest recorded on application:
☒ Recommendations attached:
☒ Measuring device required:
☒ Measuring port required:
☒ Water delivered by water master? District # _____
☒ Special conditions of approval or cover letter: (see additional info. below)
☒ See Below For Additional Information

Recommended Date of Priority 7/18/89 ✓
Recommended by: PSA Date 9/7/89

STATE OFFICE REVIEW

P23

P17

46 26

See below for additional information. By KW Date 10/2/89

ADDITIONAL INFORMATION

allow 2 yrs. to develop 2 homes-

95-08626

GOODELL, STEVE
7910 S. CUBA
SPOKANE, WA 99223

Source: GROUNDWATER

Diversion Pt: LOT 1 (NENE) Sec 25 T 48N R 05W

Use: DOMESTIC (.040 CFS)

Date Filed: 7/18/1989

In: T48N R05W S25 Lot 1 (NENE)

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NOV 24 1989