

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08620

Priority: June 8, 1989

Maximum Diversion Rate: 0.09 CFS
Maximum Diversion Volume: 12.6 AF

This is to certify, that NORTHLAND NURSERY
E 3975 PRAIRIE AVE
POST FALLS ID 83854

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated June 8, 1989; and has submitted Proof of Beneficial Use on November 1, 1993. An examination indicates that the works have a diversion capacity of 0.090 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>
IRRIGATION	03/01 to 11/30	0.07 CFS	12.0 AF
COMMERCIAL	03/01 to 11/30	0.02 CFS	0.6 AF
	Totals	0.09 CFS	12.6 AF

LOCATION OF POINT(S) OF DIVERSION: SESE, Sec. 24, Township 51N, Range 05W
KOOTENAI County

<u>PLACE OF USE:</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>TOTAL</u>
IRRIGATION				
TWN RGE SEC				
51N 05W 24	SESE	4		4

Total number of acres irrigated: 4

PLACE OF USE:
COMMERCIAL, same as IRRIGATION use

CONDITIONS OF APPROVAL AND 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 that 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. This right when combined with all other rights shall provide no more than .02 cfs per acre nor more than 3.0 afa per acre for the lands above.

JUN 31 1996

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

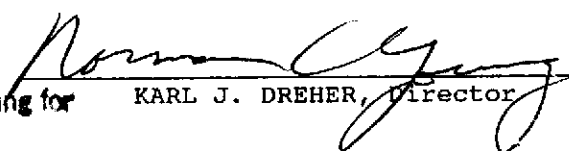
WATER RIGHT NO. 95-08620

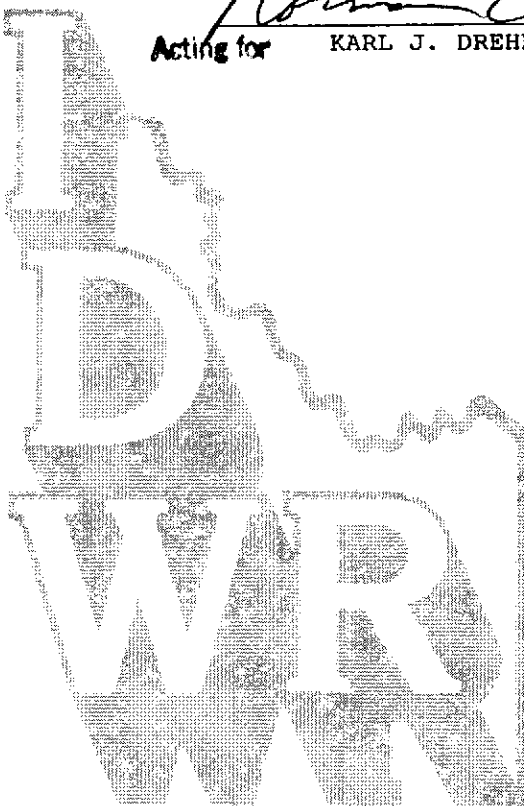
CONDITIONS OF APPROVAL AND REMARKS

6. Commercial use is for an office.

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 JANUARY, 1996.

Acting for


KARL J. DREHER, Director



JAN 31 1996

RECEIVED

NOV 01 1993

Department of Water Resources

OFFICE USE ONLY

Amt. of Fee \$ 50.00

Date 11-1-93

Receipt No. 0028897

Receipt by J. L. Lammant

STATE OF IDAHO
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 a completed field examination report prepared by a certified water right examiner who has been appointed by the department.

1. Permit No. 95-8620 Telephone No. 773-3247
2. Name(s) of Permit Holder(s): Northland Nursery / Jay + Dianna Decker
3. Mailing Address: E. 3975 Prairie Av. - Post Falls, ID 83854
4. Source of Water: Ground Water

If **GROUNDWATER**, Well Driller's Name: Flanigan Well Drillers Date Drilled: 9/89

OPTIONAL:

Pump horsepower: 5HP Pressure (psi): _____ Dynamic pumping level (ft.): _____

5. Extent of Use (as authorized by the permit):

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

Irrigation 5 (No. of acres) Other _____

6. Total rate and/or volume for which proof is submitted .14 cfs OR _____ acre/feet

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: \$ 50.00 (See License Fee Schedule on back of Instruction Sheet)

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

Jay or Dianna Decker 773-3247
Name Telephone No.
E. 3975 Prairie Av., Post Falls, ID 83854
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.

10/27/93
Date

Dianna M. Decker owner
Signature (and title, if on behalf of a company or organization)

DEC 06 1993

RECEIVED

SEP 26 1990

Department of Water Resources

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

REQUEST FOR EXTENSION OF TIME

To provide additional time in which to submit proof
of beneficial use for a water right permit

For Office Use Only
\$15 FEE Received by J. Decker
Date 9/26/90
Receipt # COIB/138

The Idaho Department of Water Resources will consider this form as a request that the permit holder(s) be granted an additional period of time in which to complete development of a water right under the provisions of Section 42-204, Idaho Code.

Permit No. 95-08620

Name(s) of Permit Holder: Northland Nursery / Jay M. Decker

Post Office Address: E. 3975 Prairie Av.

Post Falls, ID 83854 Telephone No. 773-3247

Date Proof is Due: 10/1/90

Describe what work has been completed toward the development of this water right:
(This must be filled out! If no work has been completed, show "none".)

Please see attached Exhibit A

Costing \$ 14,871.05

The permit holder(s) has been unable to complete the remainder of the work for the following reasons:

Please see attached Exhibit B

Permit holder(s) request an extension to Dec., 1995 Jay M. Decker
(1 yr. minimum) (Signature)*

FEE: \$15.00 *IF OTHER THAN PERMIT HOLDER,
POWER OF ATTORNEY MUST BE SUPPLIED.

MICROFILMED

ACTION OF THE DEPARTMENT OF WATER RESOURCES

IT IS HEREBY ORDERED that the above request for extension of time be APPROVED and the time within which to submit proof of beneficial use is extended to December 1, 1993.

Signed this 15th day of January, 1991.

J. Glen Saylor
Chief, Water Allocation Bureau

State of Idaho
Department of Water Resources
Permit To Appropriate Water

NO. 95-08620

Proposed Priority: June 8, 1989

Maximum Diversion Rate:

0.20 CFS

This is to certify, that **NORTHLAND NURSERY**
E. 3975 PRAIRIE AVE.
POST FALLS, ID 83854

has applied for a permit to appropriate water from: **GROUNDWATER**
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	03/01 to 11/30	0.15 CFS
COMMERCIAL	03/01 to 11/30	0.20 CFS
	Totals	0.20 CFS

LOCATION OF POINT(S) OF DIVERSION:

SESESE Sec. 24, Township 51N, Range 05W
KOOTENAI County

PLACE OF USE: IRRIGATION

<u>TWN RGE SEC</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>TOTAL</u>
51N 05W 24	SESE 5			5
	Total number of acres irrigated:			5

PLACE OF USE: COMMERCIAL, same as IRRIGATION use

CONDITIONS/REMARKS:

1. Proof of construction of works and application of water to beneficial use shall be submitted on or before **October 1, 1990**.
2. Subject to all prior water rights.
3. Permit holder shall comply with the drilling permit requirements of Section 42-235, Idaho Code.
4. The rate of diversion of water for irrigation under this permit and all other water rights on the same land shall not exceed 0.02 cubic feet per second for each acre of land.
5. Commercial use is for a nursery.

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

25th day of September, 1989.

MICROFILMED

for R. Keith Higginson, Director

SEP 27 1989

Say M, + Dianna M. Decker } owners/operators
802 "C" St.
Cpa, ID 83854

Form 202
6/85

Ident. No. 95-08620

667-0730

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name of applicant Northland Nursery Phone 667-0730 (Home)
773-3247 (Office)

Post office address E. 3975 Prairie Av, Post Falls, ID 83854

2. Source of water supply ground water which is a tributary of —

3. Location of point of diversion is S.E. $\frac{1}{4}$ of SE $\frac{1}{4}$ of SE $\frac{1}{4}$, Govt. Lot —

Sec. 24 Township 51 North Range 5 W. B.M. hortenai County; additional

points of diversion if any: Hwy 41 + Prairie Av (N.W corner)

4. Water will be used for the following purposes:

Amount 0.20 for COMMERCIAL purposes from MARCH 1 to NOV. 30 (both dates inclusive)
(cfs or acre-feet per annum)

Amount 0.15 for IRRIGATION purposes from MARCH 1 to NOV. 30 (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 to be appropriated is (a) 0.20 and/or (b) —
cubic feet per second acre feet per annum

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. NA JK-6/9/89
WELL, Pump & PIPING

b. 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.

c. Proposed well diameter is 6 inches; proposed depth of well is 260 feet.

d. Is ground water with a temperature of greater than 90°F being sought? NO

7. Time required for the completion of the works and application of the water to the proposed beneficial use is
1 years (minimum 1 year).

MICROFILMED

SEP 27 1989

8. Description of proposed uses (if irrigation only, go to item 9):

- Hydropower; show total feet of head and proposed capacity in KW. _____
- Stockwatering; list number and kind of livestock. _____
- Municipal; show name of municipality. _____
- Domestic; show number of households. _____
- Other; describe fully. WATER WILL BE USED TO IRRIGATE NURSERY STOCK

9. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- 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	RANGE	SEC.	NE¼				NW¼				SW¼				SE¼				TOTALS
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
T.51N	R.5W	24																	JK - 6/9/89 5 ACRES

Total number of acres to be irrigated 5

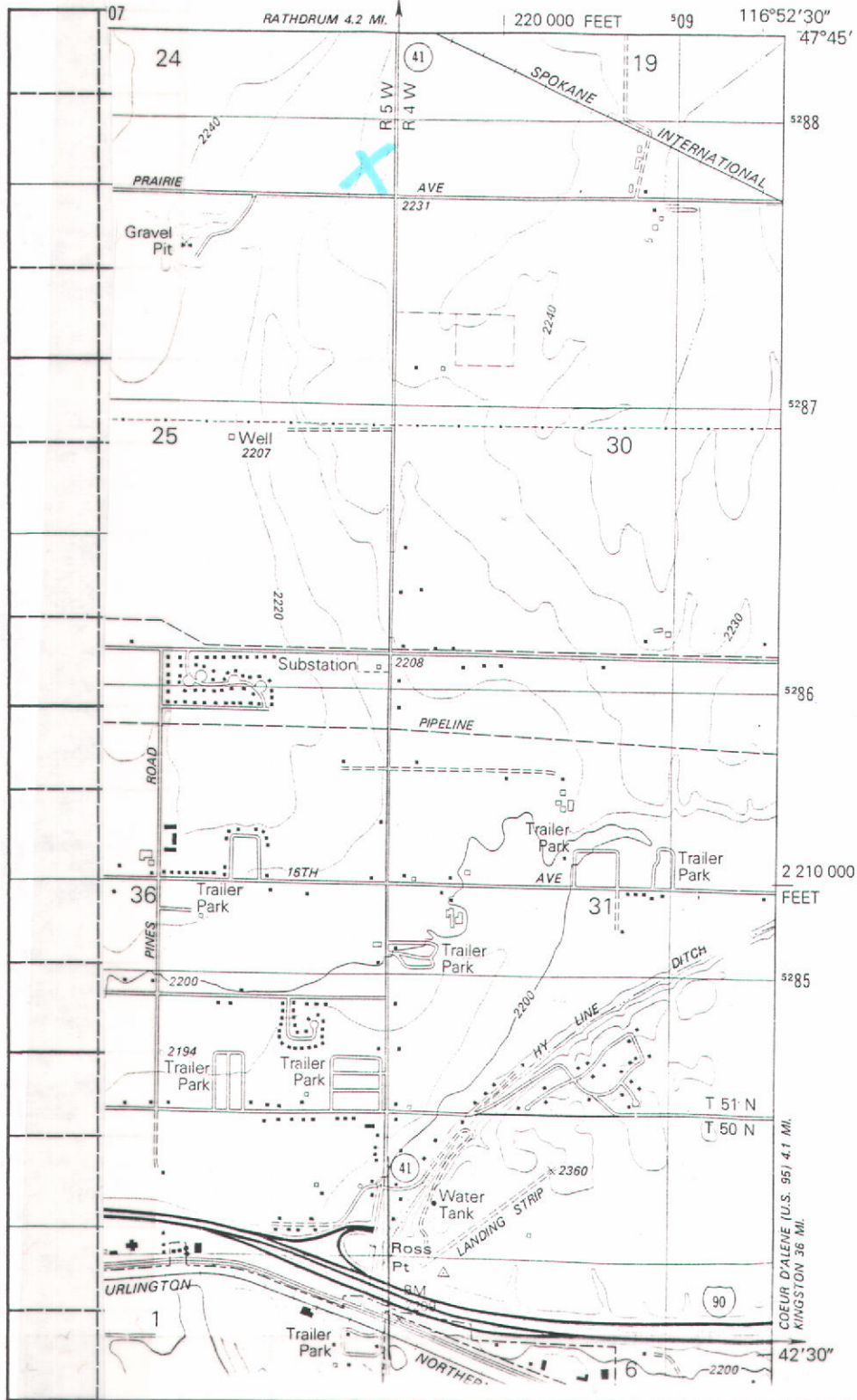
10. Describe any other water rights used for the same purposes as described above. _____

- Who owns the property at the point of diversion? APPLICANT
- Who owns the land to be irrigated or place of use? APPLICANT
- If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing. _____

12. Remarks: _____

IDAHO-COEUR D'ALENE CO.
7.5 MINUTE SERIES (TOPOGRAPHIC)
NW/4 COEUR D'ALENE 15' QUADRANGLE

2879 IV SE
(HAYDEN)



51 N.
5 W.

MICROFILMED

SEP 27 1993

Scale: 2 inches equal 1 mile.

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.

Danna M. Decker

(Applicant)

Received by AP Date 6/8/89 Time 1:20 pm Preliminary check by JK
Fee \$ 30.00 Receipted by AP # N-3046 Date 06/01/89
Publication prepared by pm Date 6/28/89 Published in LDA Bureau 7/6/89 - 7/13/89
Publication approved pm Date 7/29/89

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

This is to certify that I have examined Application for Permit to appropriate the public waters of the State of Idaho No. _____, and said application is hereby _____.

1. Approval of said application is subject to the following limitations and conditions:

- a. SUBJECT TO ALL PRIOR WATER RIGHTS.
- b. Proof of construction of works and application of water to beneficial use shall be submitted on or before _____, 19 ____.
- c. The rate of diversion, if water is to be used for irrigation under this permit, when combined with all other water rights for the same land shall not exceed 0.02 cubic feet per second for each acre of land.
- d. The water right acquired under this permit if for hydropower purposes shall be junior and subordinate to all rights to the use of water, other than hydropower, within the State of Idaho that are initiated later in time than the priority of this permit and shall not give rise to any right or claim against any future rights to the use of water, other than hydropower, within the State of Idaho initiated later in time than the priority of this permit.
- e. Other:

MICROFILMED

SEP 27 1989

LICENSE REVIEW CHECKLIST

PERMIT NO. 95-08620 DATE 1-23-96



NAME Change OK ☒ Or Address Change? ☐

PRIORITY DATE Advance? ☒ Advanced to: Order to reinstate needed? Incorrect fee for rate recommended?

SOURCE Changes or just clarification of originally intended source? Notice of Intent to Void necessary?

POINT OF DIV Amendment needed? Overlaps?

PLACE OF USE Amendment needed? Overlaps?

DIV RATE Permit/fee limits: .20 CFS / IRR 5 acres @ .15
Meas Q = .07 (IRR) Theo Q = .09 Recommend: .09
each zone produces 4 acres x .02 = .08
com use / office / internal use .02
Combined rates exceed capacity
(NURSERY - SEASON CAN BE EXTENDED)
 ANNUAL VOLUME Volume Limit: Season: D3.0 (3-15 to 11-15)
Calculations: 4 x 3 = 12 af
com/int = .6 af
Flow limit: .07 cfs x 246 x 1.9835 =
Combined volumes exceed capacity/allowable

USES Change in Nature of Use or additional uses? Amendment necessary?

ADDITIONAL INFO Replaces Surface Water 050 Supplemental GW
Irr/Dom Combination WB5 PPU Recommendation
Boise River/Wood River Source Aes/Rec Uses W38

NEW REMARKS Multiple p/d(s) in 1/4 1/4? YES Other Edit commercial use to being for an office.

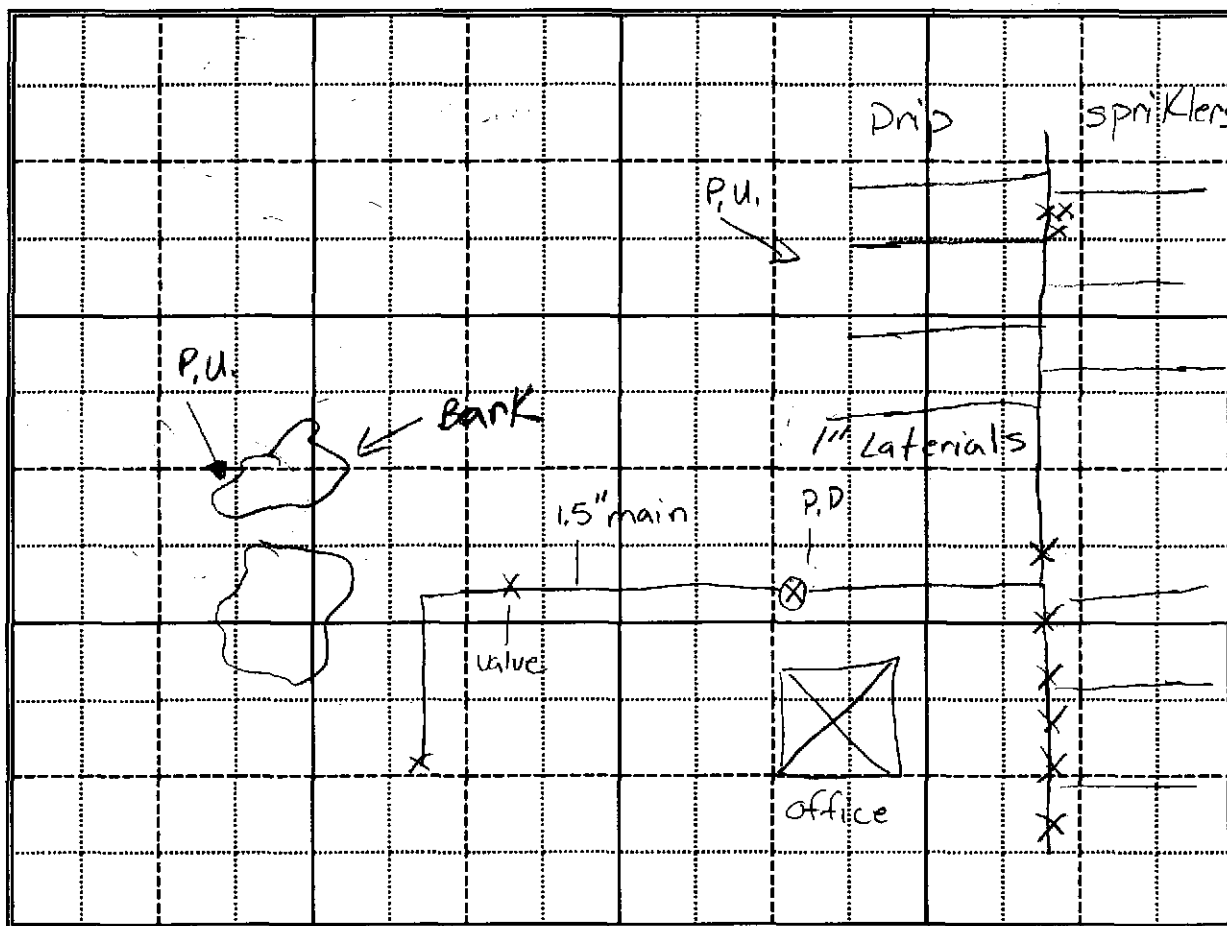
NEW CONDITIONS WM Control- District Meas/Lock Devices
R29 Irrigation Overlap
Other
Water Quality Heat/Cool/Fish verified

COMMENTS: ① Reduce acres
② Reduce commercial rate
③ Note: nursery season of use can be extended beyond the standards.

RECOMMENDATION	CFS	VOLUME	SRBA Claim Filed	
<u>Irrigation</u>	<u>.07</u>	<u>12.0</u>	Adjustment Memo Needed	<u>NA</u>
<u>Commercial</u>	<u>.02</u>	<u>.6</u>	LICENSE	<u>YES</u>
<u>TOTAL</u>	<u>.09</u>	<u>12.6</u>	1ST AMEND LETTER	<u></u>
			2ND AMEND LETTER	<u></u>

[illegible]

3. **Delivery System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe I.D. as applicable.



Scale: 1" = NTS

☒ Copy of USGS Quadrangle Attached Showing location(s) of point(s) of diversion and place(s) of use (required).

☐ Aerial Photo Attached (required for irrigation of 10+ acres)

☒ Photo of Diversion and System Attached

4.

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
	Franklin Elec.	5	#282138310	submersible	1 1/2 in.

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

D. FLOW MEASUREMENTS

1.

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date
None						

2. Measurements: See: Theoretical pump efficiency calculations.

JAN 31 1996

E. NARRATIVE/REMARKS/COMMENTS

The irrigation system has 9 rotating zones
at 32 gpm per zone.

Jay Decker told me he measured his system
by himself and that he use to work for
a irrigation district before. So, he said he
knew what his system produced.

Commercial Use is for the Domestic Use
in the Office.

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

JAN 31 1996

F. FLOW CALCULATIONS

Additional Computation Sheets Attached

Measured Method:

* * See Theoretical Pump Efficiency Calculations.

$$32 \text{ gpm} \times .00223 = .07 \text{ cfs}$$

per zone

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 4 \text{ ac} \times 3.5 = 14.0 \text{ afa.}$$

$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 = (.07 \text{ cfs})(274)(1.9835) = 43.5$$

$$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 14.0$$

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		
Irrigation	03-01	11-30	.07	14.0
Commercial	03-01	11-30	.04	1.2
Totals:			.11	15.2

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. AUTHENTICATIONField Examiner's Name Jon M. Kunz Date _____

Reviewer _____ Date _____

* SEE adjustment memo. BC

JAN 31 1996

MEMORANDUM

TO: File 95-08620 / Northland Nursery
FROM: Brenda Chapman
DATE: January 23, 1996
RE: Recommendation Adjustment(s)

=====

The final licensing recommendations for Right 95-08620 are based on the information below:

F. FLOW CALCULATIONS

The recommended theoretical capacity has been reduced. The pump efficiency has been changed to the standard 70% and the lift has been increased from the static level of 238' to an estimated pumping level of 248'.

$$\frac{8.8 \times .7 \times 5.0 \text{ hp}}{248' + (2.31 \times 40 \text{ psi})} = .09 \text{ cfs}$$

The commercial rate has been reduced. The office use would likely be equivalent to an indoor domestic use, with a rate of .02 cfs.

G. VOLUME CALCULATIONS

The commercial (office) volume has also been reduced to the requirements for an indoor domestic use.

H. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use	Rate of Div	Annual Vol
Irrigation	3-01 to 11-30	.07	12.0
Commercial	3-01 to 11-30	.02	.6

The volume has been changed to the current recommended estimate of the consumptive irrigation requirement for crops/lawns in that area. [3.0 afa per acre]

165-000
JAN 21 1996

THEORETICAL PUMP EFFICIENCY CALCULATIONS

FILE: 95-08620

DATE: 14-JUN-94

COMPLETE BY: KUNZ, JON M.

HORSEPOWER = 5

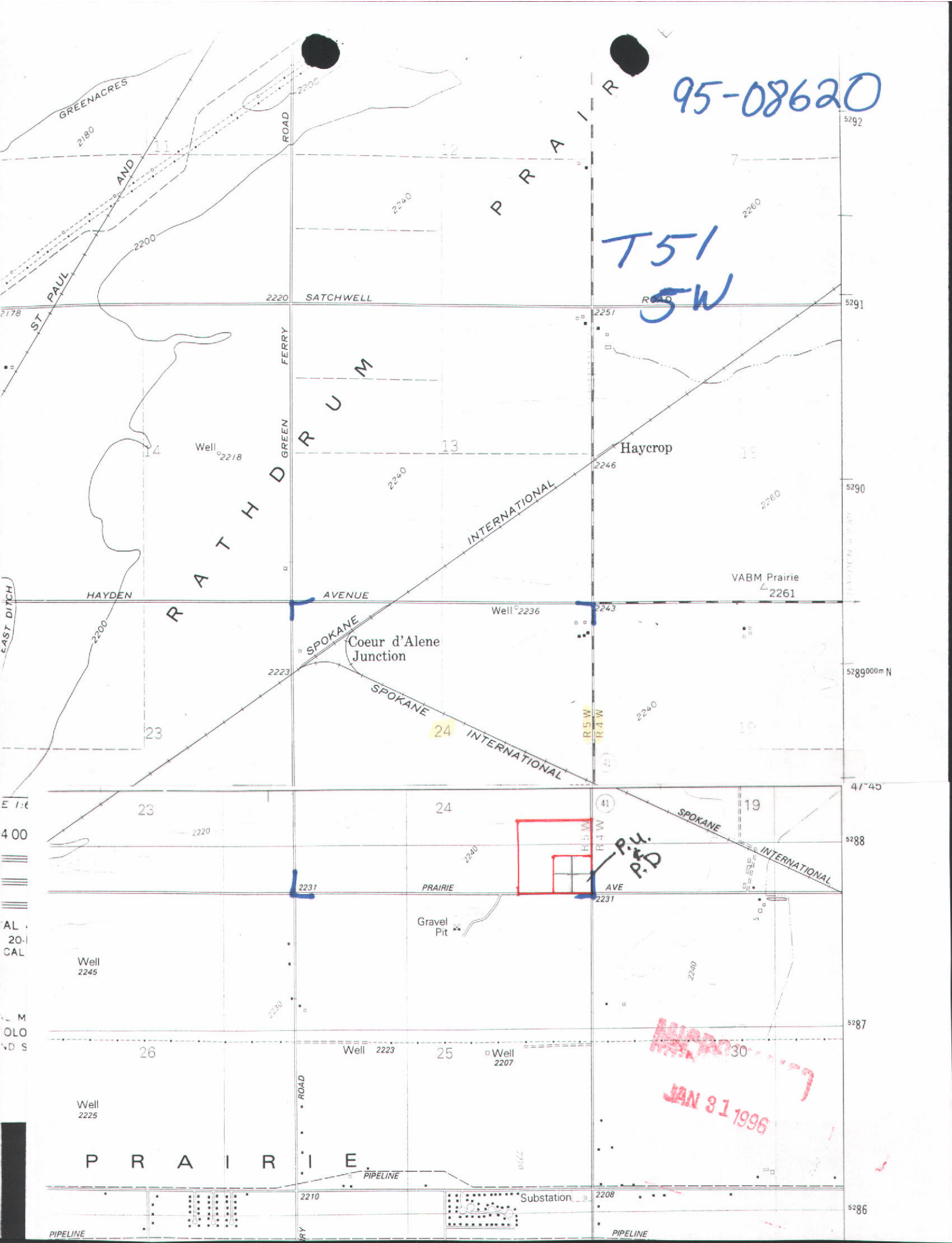
PUMP EFFICIENCY = 75%

DYNAMIC LIFT = 238 FEET

SYSTEM PRESSURE = 40 PSI

QUANTITY = 0.10 CFS = 44.9 gpm

RECEIVED
JAN 21 1996



95-08620

T51
5W

Haycrop

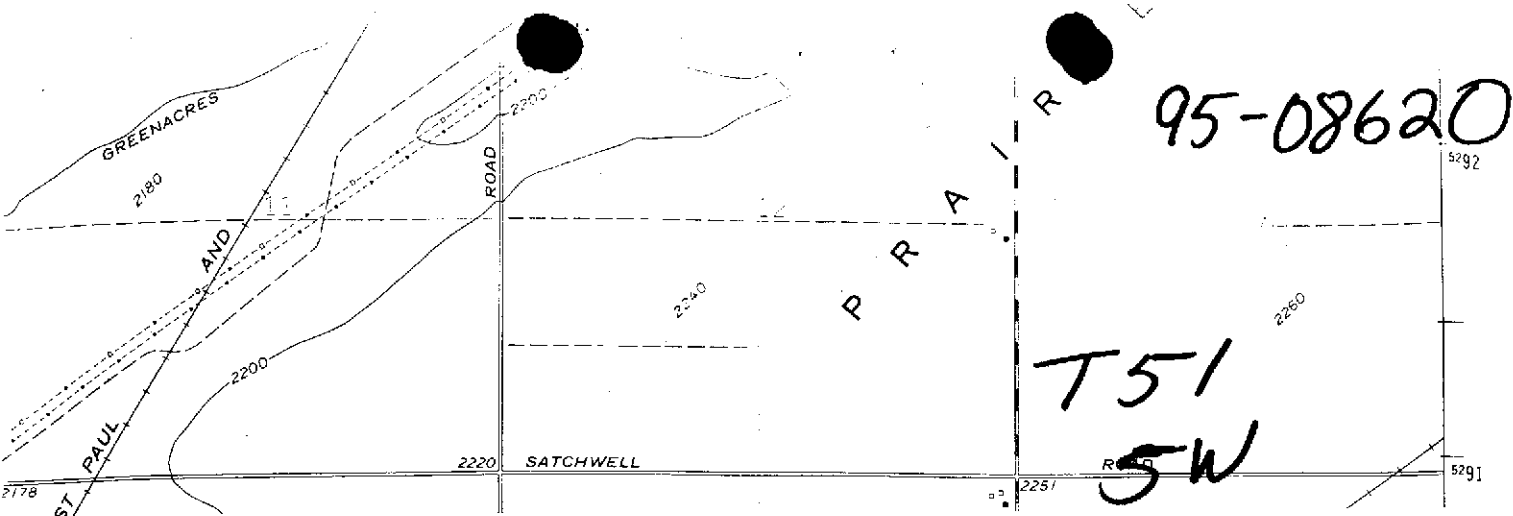
VABM Prairie
2261

Coeur d'Alene
Junction

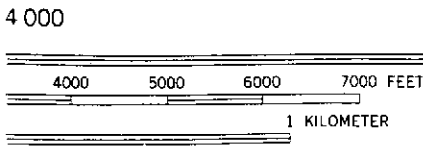
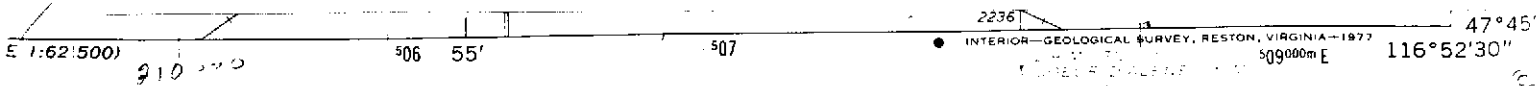
P.U.
P.D.

JAN 31 1996

Substation



EAST DITCH



AL 40 FEET
20-FOOT CONTOURS
CAL DATUM OF 1929



QUADRANGLE LOCATION

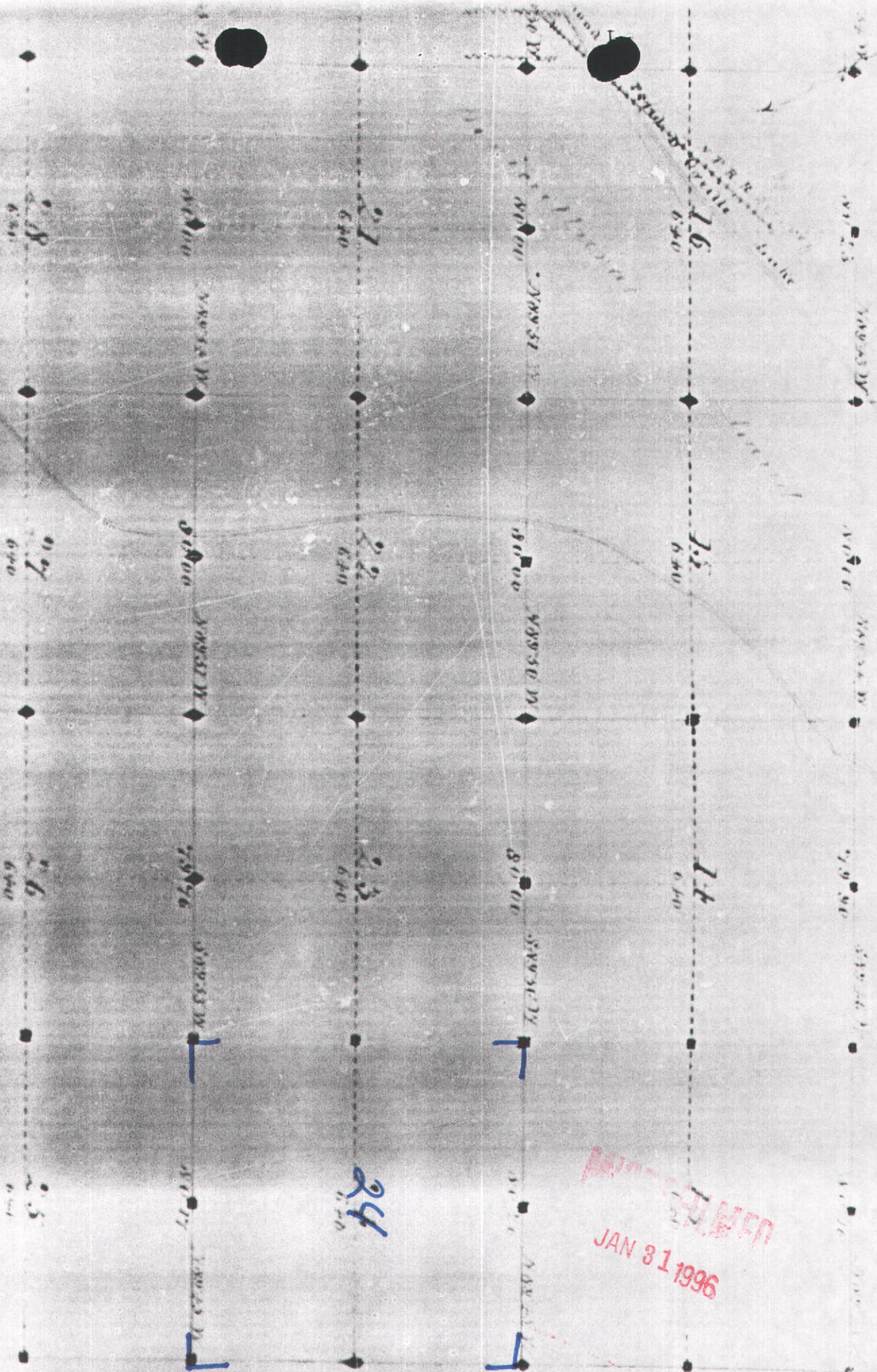
22361
INTERIOR—GEOLOGICAL SURVEY, RESTON, VIRGINIA—1977
509000m E
47°45'
116°52'30"
ROAD CLASSIFICATION
Medium-duty Light-duty
Unimproved dirt =====

State Route
RATHDRUM, IDAHO
SW/4 SPIRIT LAKE 15' QUADRANGLE
N4745—W11652.5/7.5

1961

AMS 2679 IV SW—SERIES V893

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



51 SW 24

95-08620

WELL-DRILLER'S REPORT

State law 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 JAY DECKER *Northland Nursery*
Address E. 3975 Prairie Post Falls, ID 83854
Owner's Permit No. Drilling # 95-89-N-22

7. WATER LEVEL
Static water level 238 feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ OF. Quality _____
Describe artesian or temperature zones below.

2. NATURE OF WORK
☒ New well ☐ Deepened ☐ Abandoned (describe abandoned materials, plug depths, etc.)
Please file under both names please

8. WELL TEST DATA
☐ Pump ☒ Bailer ☐ Air ☐ Other _____
Discharge G.P.M. 20 Pumping Level 238 Hours Pumped 1

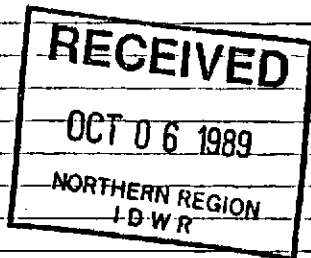
3. PROPOSED USE
☒ Domestic ☒ Irrigation ☐ Test
☐ Industrial ☐ Stock ☐ Waste Disposal (specify type)
☒ Other OFFICE

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
14"	0	5'	GRAVEL COBBLES & SAND		X
6"	5'	21'	GRAVEL COBBLES & SAND		X
	21'	140'	GRAVEL & SAND		X
	140'	172'	GRANITE BOLDER		X
	172'	179'	GRAVEL & SAND		X
	179'	181'	GRANITE BOLDER		X
	181'	214'	GRAVEL & SAND		X
	214'	217'	SLATE BOLDER		X
	217'	238'	GRAVEL & SAND		X
	238'	242'	GRAVEL & SAND	X	
	242'	262'	GRANITE BOLDER	X	
	262'	369'	GRAVEL & SAND	X	

4. METHOD DRILLED
☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary
☒ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION
Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____
Thickness 3.12 inches Diameter 6 inches From 1 1/2 feet To 264 feet
1.250 inches 5 inches 262 feet 264 feet
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 COOK
Type TELESCOPING STAINLESS STEEL No. _____
Diameter 6 Slot size 35 Set from 264 feet to 269 feet
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____
Placed from _____ feet to _____ feet
Surface seal depth _____ 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 1" PLUG IN WELL CAP



6. LOCATION OF WELL
Sketch map location must agree with written location.
Subdivision Name _____
Lot No. _____ Block No. _____
County KOOTENAI
S.E. 1/4 S.E. 1/4 Sec. 24, T. 51 N., R. 5 W.

10. Work started Sept. 4, 1989 finished Sept. 21, 1989

11. DRILLERS CERTIFICATION
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
Firm Name FLANIGAN & FLANIGAN Firm No. 433
Address P.O. Box 320 Rathdrum ID. Date Sept 25, 1989
Signed by (Firm Official) James H. Flanigan
and
(Operator) James H. Flanigan



Northland Nursey's Office
Domestic P.U.



Northland Nursery's Well P.D.

JAN 31 1996

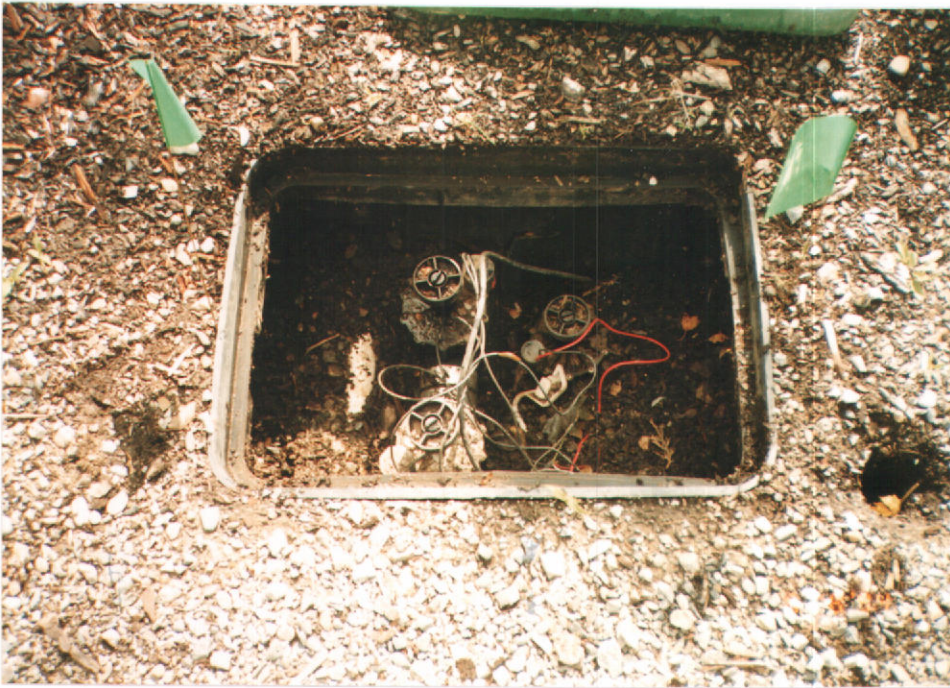
95-08620



Northland Nursery's
Irr. area by sprinkler
& drip.



1996



Northland Nursery area
Irr. by drip system



JAN 31 1996

95-08620

* Fee is \$10 for single family domestic. Other uses may be \$100, \$50 or \$10.

ACTION OF IDWR

☒ Approved () Denied

The approval of this permit authorizes the construction of a well as described on this application subject to the conditions on this permit.

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.

SPECIFIC CONDITIONS:

Dated this 1 day of May, 19 89.

Signed

Title

Received by DL Fee \$ 10 Date 5/1/89

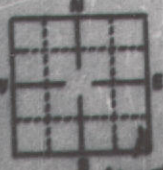
Receipt No. N002820 Construction start extension to DEC 06 1993

Extension approved by _____

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

State law 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>JAY DECKER Northland Nursery</u> Address <u>E. 34th Prairie Root Falls, ID 83454</u> Owner's Permit No. <u>Drilling + 95-89-N-22</u>	7. WATER LEVEL Static water level <u>238</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 _____ of, Quality _____ 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 _____ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td style="text-align: center;">30</td> <td style="text-align: center;">238</td> <td style="text-align: center;">1</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	30	238	1																																														
Discharge G.P.M.	Pumping Level	Hours Pumped																																																			
30	238	1																																																			
3. PROPOSED USE ☒ Domestic ☒ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☒ Other <u>Office</u> (specify type)	9. LITHOLOGIC LOG <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Bore Diam.</th> <th>Depth From To</th> <th>Material</th> <th>Water Yes No</th> </tr> </thead> <tbody> <tr><td>14"</td><td>0' 5'</td><td>GRAVEL COBBLES + SAND</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>5' 21'</td><td>GRAVEL COBBLES + SAND</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>21' 40'</td><td>GRAVEL + SAND</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>40' 42'</td><td>GRAVEL BOLDER</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>42' 17'</td><td>GRAVEL + SAND</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>17' 18'</td><td>GRAVEL BOLDER</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>18' 21'</td><td>GRAVEL + SAND</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>21' 21'</td><td>SLATE BOLDER</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>21' 23'</td><td>GRAVEL + SAND</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>23' 24'</td><td>GRAVEL + SAND</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>24' 26'</td><td>GRAVEL BOLDER</td><td style="text-align: center;">X</td></tr> <tr><td>14"</td><td>26' 26'</td><td>GRAVEL + SAND</td><td style="text-align: center;">X</td></tr> </tbody> </table>	Bore Diam.	Depth From To	Material	Water Yes No	14"	0' 5'	GRAVEL COBBLES + SAND	X	14"	5' 21'	GRAVEL COBBLES + SAND	X	14"	21' 40'	GRAVEL + SAND	X	14"	40' 42'	GRAVEL BOLDER	X	14"	42' 17'	GRAVEL + SAND	X	14"	17' 18'	GRAVEL BOLDER	X	14"	18' 21'	GRAVEL + SAND	X	14"	21' 21'	SLATE BOLDER	X	14"	21' 23'	GRAVEL + SAND	X	14"	23' 24'	GRAVEL + SAND	X	14"	24' 26'	GRAVEL BOLDER	X	14"	26' 26'	GRAVEL + SAND	X
Bore Diam.	Depth From To	Material	Water Yes No																																																		
14"	0' 5'	GRAVEL COBBLES + SAND	X																																																		
14"	5' 21'	GRAVEL COBBLES + SAND	X																																																		
14"	21' 40'	GRAVEL + SAND	X																																																		
14"	40' 42'	GRAVEL BOLDER	X																																																		
14"	42' 17'	GRAVEL + SAND	X																																																		
14"	17' 18'	GRAVEL BOLDER	X																																																		
14"	18' 21'	GRAVEL + SAND	X																																																		
14"	21' 21'	SLATE BOLDER	X																																																		
14"	21' 23'	GRAVEL + SAND	X																																																		
14"	23' 24'	GRAVEL + SAND	X																																																		
14"	24' 26'	GRAVEL BOLDER	X																																																		
14"	26' 26'	GRAVEL + SAND	X																																																		
4. METHOD DRILLED ☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☒ Cable ☐ Dug ☐ Other _____	5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>312 inches</td> <td>6 inches</td> <td>1-4 feet</td> <td>264 feet</td> </tr> <tr> <td>350 inches</td> <td>5 inches</td> <td>262 feet</td> <td>264 feet</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </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 <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> Well screen installed? ☒ Yes ☐ No Manufacturer's name <u>COOK</u> Type <u>Telescopic Screen</u> No. _____ Diameter <u>6</u> Slot size <u>35</u> Set from <u>264</u> feet to <u>267</u> feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth _____ Material used in seal: ☐ Cement grout ☐ Bentonite ☒ Pudding clay ☐ _____ Sealing procedure used: ☒ Shurry pit ☐ Temp. surface casing ☐ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent ☐ Cemented between struts Describe access port <u>1" PLUG IN WELL CAP</u>	Thickness	Diameter	From	To	312 inches	6 inches	1-4 feet	264 feet	350 inches	5 inches	262 feet	264 feet													Number	From	To																									
Thickness	Diameter	From	To																																																		
312 inches	6 inches	1-4 feet	264 feet																																																		
350 inches	5 inches	262 feet	264 feet																																																		
Number	From	To																																																			
6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> <u>SE 1/4 Sec 24 T. 51 N. R. 5 E.</u>	10. Work started <u>Sept 4, 1989</u> finished <u>Sept 21, 1989</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>Flanigan & Flanigan</u> Firm No. <u>433</u> Address <u>Box 320 North Prairie ID</u> Date <u>Sept 5, 1989</u> Signed by (Firm Official) <u>James H. Flanigan</u> and (Operator) <u>James H. Flanigan</u>																																																				

RECEIVED
OCT 06 1989
NORTHERN REGION
IDWR

RECEIVED
OCT 16 1989

DEC 06 1993