

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08599

Priority: July 18, 1988

Maximum Diversion Rate: 0.04 CFS
Maximum Diversion Volume:¹ 1.7 AF

This is to certify, that TONY'S SUPPER CLUB
E. 4695 I-90

COEUR D'ALENE ID 83814 has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated July 18, 1988; and has submitted Proof of Beneficial Use on November 14, 1989. An examination indicates that the works have a diversion capacity of .170 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>
COMMERCIAL	01/01 to 12/31	0.04 CFS	1.7 AF

LOCATION OF POINT(S) OF DIVERSION: LOT 4(NESE), Sec. 29, Township 50N, Range 03W
KOOTENAI County

PLACE OF USE: COMMERCIAL
TWN RGE SEC

50N 03W 29 LOT 4(NESE)

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. Commercial use is for a restaurant and lounge.

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 27th day of SEPTEMBER, 1991.

Acting for R. Keith Higginson, Director

NOT RECORDED

OCT 07 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

Ident. No. 95-8599

APPROVED

To appropriate the public waters of the State of Idaho

1. Name of applicant TONYS SUPPER CLUB Phone 667-9885
Post office address E. 4696 I-90 COEUR D'ALENE ID 83814
2. Source of water supply GROUNDWATER which is a tributary of _____
3. Location of point of diversion is SE $\frac{1}{4}$ of NE $\frac{1}{4}$ of SE $\frac{1}{4}$, Govt. Lot 4
Sec. 29 Township 50N Range 3W B.M. KOOTENAI County; additional
points of diversion if any: _____
4. Water will be used for the following purposes:
Amount 0.04 for COMMERCIAL purposes from 1-1 to 12-31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
5. Total quantity to be appropriated is (a) 0.04 and/or (b) _____
cubic feet per second acre feet per annum
6. Proposed diverting works:
 - a. Description of ditches, flumes, pumps, headgates, etc. WELL, PUMP, PIPELINE
 - 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 200 ± 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 for proposed beneficial use is
1 years (minimum 1 year).

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JAN 11 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. C/RESTAURANT/LOUNGE (220+ SEATING CAPACITY)

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	
60N	34W	29													GLA C				

Total number of acres to be irrigated _____

10. Describe any other water rights used for the same purposes as described above. NONE

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

12. Remarks: _____

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Proposed Priority 7/18/88

Received by [signature] Date 7/18/88 Time 2:55 PM Preliminary check by clh
Fee \$ 30.00 Received by [signature] # N570 Date 7/18/88
Publication prepared by [signature] Date 7/25/88 Published in CDR Press
Publication approved [signature] Date 9/15/88

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. 95-8599, and said application is hereby APPROVED.

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 January 1, 19 90.

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:

Permit holder shall comply with the drilling permit requirements of Section 42-235, Idaho Code.

Witness my hand this 8th day of December, 1988.

[Signature: J. Glen Saylor]

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JAN 11 1989

LICENSE REVIEW CHECKLIST

Permit No. 95-8599

Name/Address change? ok ☒

Priority date Advance? yes no ☒
Memo to advance
Order to reinstate needed? yes no ☒

Total cfs Limited by fee N/A
Limited by capacity

Total volume Limited by flow
Chart checked for AF rate/ac N/A

Capacity Actual measurement checked
Theoretical checked ☒
If greater than permit, check for other rts

Source Changed? yes no ☒
If so, is memo needed to clarify?

P/D Verify with map ☒ permit ☒
More than one per 1/4? Remember remark
Check p/d overlap

Uses Check irrigation period of use w/ chart

P/U Verify with map ☒ permit ☒
> 5 acres irrigated, run overlap

Remarks More than one p/d in 1/4
Description of non-irrig uses ☒
Special overlap condition

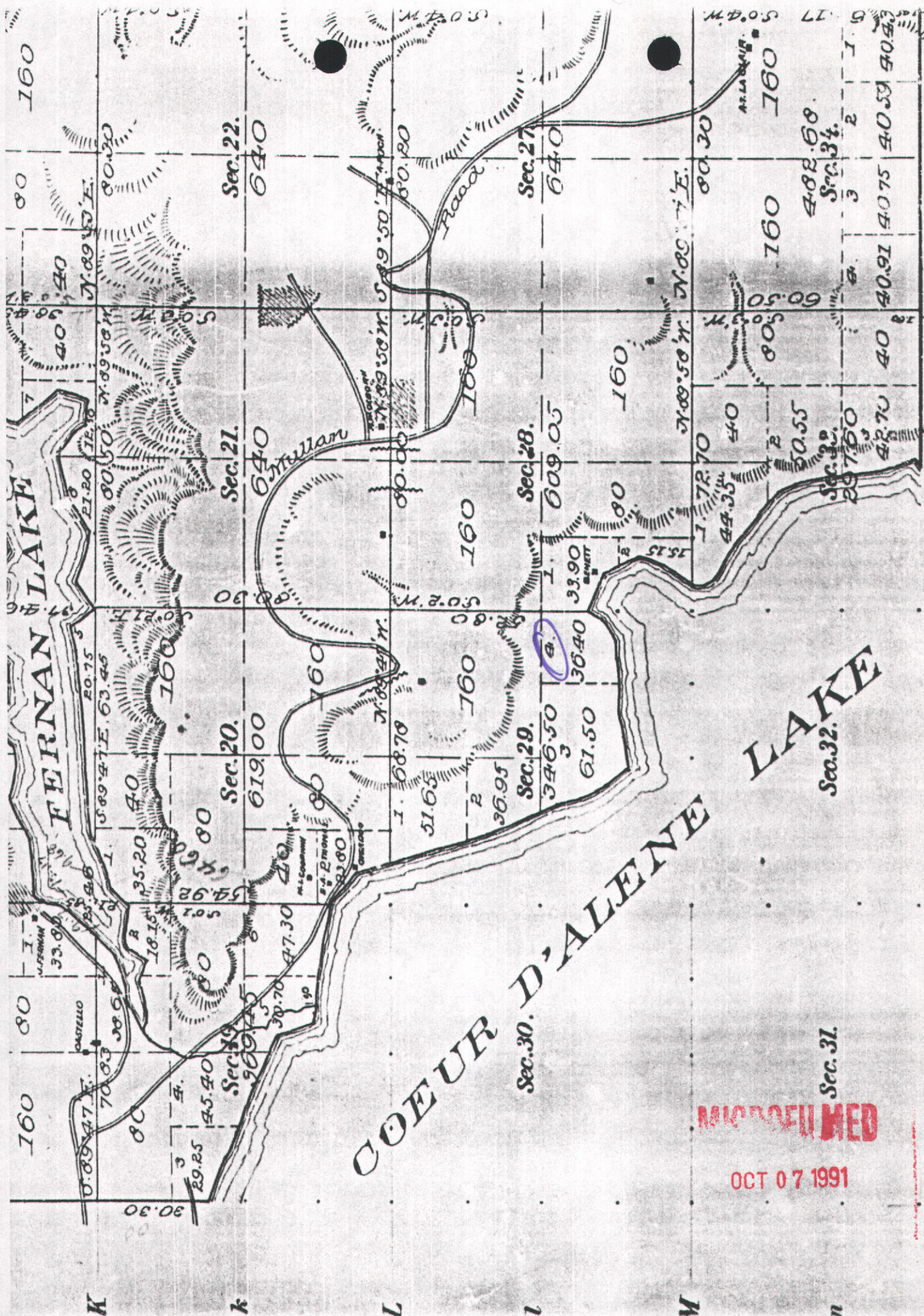
Conditions -	Dates/Misc. -
Measuring device <u> </u>	Water Dist <u> </u>
W.Master control <u> </u>	App Rec'd <u> </u>
Overlap <u> </u>	Proof Rec'd <u> </u>
Water quality <u> </u>	
Other <u> </u>	

CHECK FOR ADJ. CLAIM Needed according to proof filed
 Filed - needs amended
 Add'l fee required
 Not filed -
 Not needed ☒

Comments/Changes to Examiner's Recommendations: OCT 07 1991

License ☒ 10-day 30-day

Back of field report signed?
Reviewer S. Curtis Date 8/13/91 Review time 5 min.



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OCT 07 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUN 28 1991

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 95-08599

1. Owner: TONYS SUPPER CLUB

Phone No. 667-9885

Current Address: E. 4695 I-90 COEUR D'ALENE, ID 83814

2. Accompanied by: _____

EXAM. DATE: 3/15/91

Address: _____

Phone No. _____

Relationship to Permit Holder: _____

3. Source: GROUNDWATER tributary to _____

B. OVERLAP REVIEW

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

☐ Copies Attached

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

☐ 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" = NTS

2. ☒ Copy of U.S.G.S. 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 or more).

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

OCT 07 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUN 28 1991

Department of Water Resources

Permit No. 95-08599

Phone No. 667-9885

A. GENERAL INFORMATION

1. Owner: TONYS

Current Address: E.

2. Accompanied by: _____

Address: _____

Relationship to Per

3. Source: GROUND

B. OVERLAP REVIEW

1. Other water rights w

s Attached

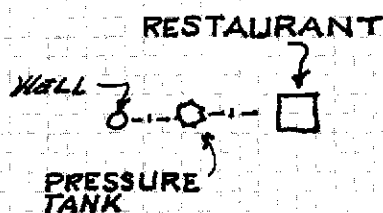
2. Other water rights v

m's Attached

C. SYSTEM DESCRIP

1. Diversion System
size/ditch size/pipe

Indicate weir



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Scale: 1" = NTS

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).

OCT 07 1991

System Description (continued)

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

A 6" X 300' WELL, WITH 1 1/2 HP SUBMERSIBLE PUMP W/SWL
@ 8', A BURIED PIPELINE TO A 150 GAL PRESSURE TANK, THEN
TO RESTAURANT/LOUNGE

☐ 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>SUB</u>		<u>1 1/2</u>			

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

5. Point(s) of Diversion:

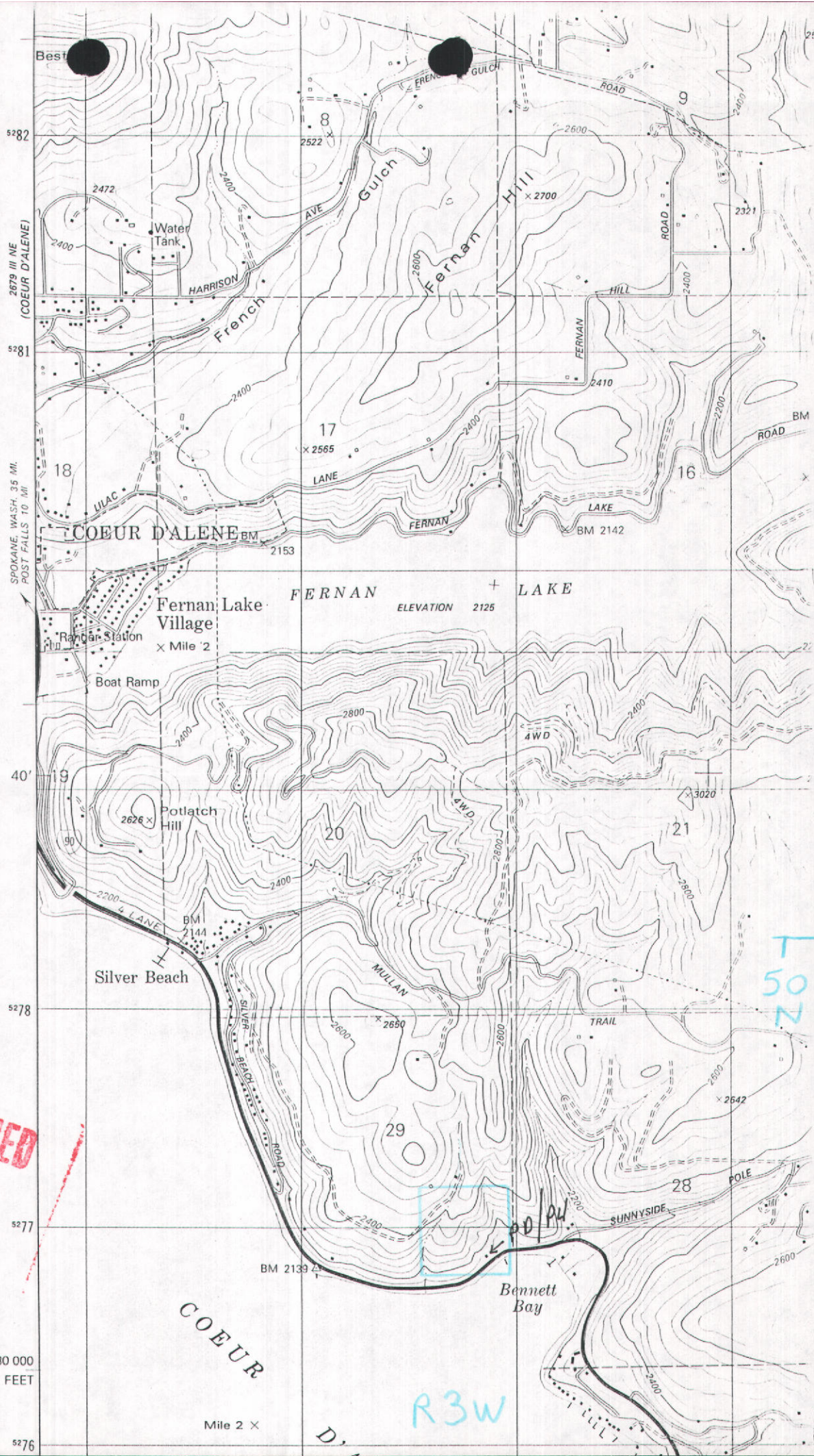
Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
	<u>4</u>	<u>SE</u>	<u>NE</u>	<u>SE</u>	<u>29</u>	<u>50N</u>	<u>3W</u>	<u>KOOTENAI</u>	<u>MAP</u>

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>50N</u>	<u>3W</u>	<u>29</u>													<u>C</u>				

OCT 07 1991



RESTRICTED
OCT 07 1991

2 180 000
FEET

Mile 2 X

R3W

T
50
N

Do not use this space

D. FLOW MEASUREMENTS

☐ 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:

$$\frac{8.8(1\frac{1}{2}) 70\%}{2.3(20) + 8} = 0.17 \text{ cfs} \text{ SYSTEM CAPACITY} \quad \text{WELL LOG STATES 8 gpm}$$

2. Alternate Method for Checking Purposes:

$$\frac{1500 \text{ gal}}{120 \text{ min}} = \frac{12.5 \text{ gpm}}{44.8 \text{ cfs/gpm}} = 0.03 \text{ cfs NECESSARY} \quad \text{PERMIT FOR } 0.04 \text{ cfs}$$

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:

TABLE 7 10WR / 150 DATA SHEET OPEN 4A-
(1051d/p) (150 p/d) (3)
(3 pd) (Patterson) (days per Annum) = gal/Annum

$$\frac{10(150)365}{325,851 \text{ gal/AF}} = 1.7 \text{ AFA}$$

~~SEE ATTACHED~~

OCT 07 1991

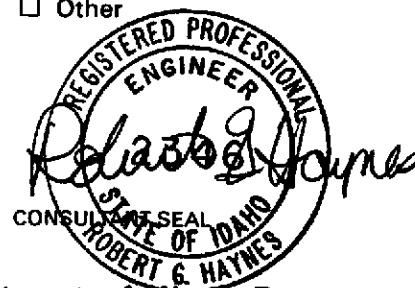
[illegible]

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
COMMERCIAL	1-1	12-31	0.04	1.7
		Totals:	0.04	1.7

☐ 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

Field Examiner's Name Tom D. King
Signature Tom D. King
Certification Date 4/16/90
Field Report Preparation Date 3/19/91



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

OCT 07 1991

State of Idaho
Department Of Water Resources
WELL INSPECTION FORM

If well is associated with water right, provide WR Permit No. 95-08599

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. _____, _____ $\frac{1}{4}$ _____ $\frac{1}{4}$ 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>8'</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 : _____

NOT RECORDED

OCT 07 1991

1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 95-8599

Date: 2-12-90

General Considerations:

Y Name same as permit
Y Signature the same as permit holder
Y Address change _____ If yes, prepare a data entry
Y Proof received timely _____
_____ Reinstated

Source of Water:

Y Surface water
Y Groundwater
 Y 1. well log in file
 Y 2. drilling permit
 _____ A. amount of drilling fee paid for proposed uses

Extent of Use and Rate of Diversion:

Y Rate of diversion appropriate for uses
 Y Is rate or volume and fee appropriate?
Y Has permit holder indicated when water was first put to a beneficial use?

Measuring Device:

N/A Is a measuring device or access port required?
N/A Has one been installed?
N/A Waiver or modification of measuring device requested

Remarks: Proof acceptable

N/A Priority Calculation:
Date proof received _____

Date proof due _____

No. of days late _____

Priority date _____

NEW PRIORITY DATE _____

SEND FILES TO DATA ENTRY AND THEN TO MICROFILM

RECEIVED

NOV 14 1989

no fee incl.

Department of Water Resources

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

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

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.

Permit No. 95-08599 Telephone No. 208-667-9885Name(s) of Permit Holder(s): CATHIE L. THOMAS & NELLA F. TROY dba Tony's Super ClubPost Office Address: E 4695 I-90 Coeur d'Alene, Id 83814Source of Water: 300' WELLIf ground water, well driller's name: H2O Well Service Date drilled: 7/20/88

Extent of Use:

Domestic _____ (No. of households)

Irrigation _____ (No. of acres)

Stockwater _____ (No. and type of stock)

Other RESTAURANT & LOUNGE WITH220 SEATING CAPACITY OPEN LIMITED HOURS (LATE AFTERNOON & EVENINGS)Total rate and/or volume for which proof is submitted .04 cfs _____ acre/feetShow date water was first diverted and beneficially used under this permit: 12/8/88

One of the following may be a condition of approval of your permit:

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

OR

Flow Measurement Port: Required? Yes ☒ No Installed? Yes ☒ NoFee Enclosed: \$ NONE REQUIRED (See License Examination Fee Schedule)

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

Name CATHIE L. THOMAS Telephone No. 208-765-5984Address 1919 E. FAIRWAY DRIVE COEUR D'ALENE, ID 83814**MICROFILMED**

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.

MAR 26 1990

Date 11/8/89 Signature (and title if on behalf of a company or organization) Cathie L. Thomas (Partner)

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.60
305
255
260
PH
225-5 gpm
240 3 more
90

1. WELL OWNER

Name Tony's Restaurant
Address Hwy I-90 Ode
Owner's Permit No. 95-88-N-40

7. WATER LEVEL

Static water level 8 feet below land surface.
Flowing? ☐ Yes ☐ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature 60k OF. Quality Good NO Sulfur
Describe artesian or temperature zones below.

2. NATURE OF WORK

- 95-8599
-
- ☒
- New well
- ☐
- Deepened
- ☐
- Replacement
-
- ☐
- Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Air ☐ Other _____

Discharge G.P.M. Pumping Level Hours Pumped

5 170 3
8 TOTAL 300 4

3. PROPOSED USE

- ☒
- Domestic
- ☐
- Irrigation
- ☐
- Test
- ☐
- Municipal
-
- ☐
- Industrial
- ☐
- Stock
- ☐
- Waste Disposal or Injection
-
- ☐
- Other _____ (specify type)

4. METHOD DRILLED

- ☒
- Rotary
- ☒
- Air
- ☐
- Hydraulic
- ☐
- Reverse rotary
-
- ☐
- Cable
- ☐
- Dug
- ☐
- Other _____

5. WELL CONSTRUCTION

Casing schedule: ☐ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>59</u> feet
<u>PVC</u> inches	<u>4</u> inches	<u>5</u> feet	<u>300</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used? ☒ Yes ☐ NoWas a packer or seal used? ☒ Yes ☐ NoPerforated? ☒ Yes ☐ NoHow perforated? ☐ Factory ☒ Knife ☐ Torch

Size of perforation _____ inches by _____ inches

Number	From	To
<u>40 ft</u> perforations	<u>260</u> feet	<u>300</u> feet
<u>60 ft</u> perforations	<u>160</u> feet	<u>220</u> 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 _____

Placed from _____ feet to _____ feet

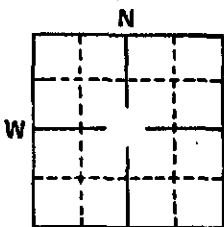
Surface seal depth 59 Material used in seal: ☐ Cement grout☒ Bentonite ☐ Puddling clay ☐ _____Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing☐ Overbore to seal depthMethod of joining casing: ☐ Threaded ☒ Welded ☒ Solvent

Weld

☐ Cemented between strata

Describe access port _____

6. LOCATION OF WELL

Sketch map location must agree with written location.

Subdivision Name _____

Lot No. _____ Block No. _____

County KootenaiSW 1/4 Sec. 29, T. 50 N, R. 3 E

10.

Work started 7-19-88 finished 7-20-88

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were
complied with at the time the rig was removed.Firm Name H2O well service Firm No. 448Address Hayden Date 7-22-88Signed by (Firm Official) John Wheeler

and

(Operator) Wayne Miller

RECEIVED

JUL 22 1988

Drilling Permit No. 75-88-N-60
Water Permit No. _____
Injection Permit No. _____

State of Idaho
Department of Water Resources
Department of Water Resources
DRILLING PERMIT

RECEIVED

(Authorizing Construction of a Well)*

13 1988

1. Applicant CATHIE THOMAS & NELLA TROY of Water Resources District Office
2. Address E. 4095 INTERSTATE 90
COA Telephone _____
- (☒) Well Owner () Well Operator () Other, specify _____
3. Proposed well location 1/4 SE 1/4, or Gov't lot No. _____,
Sec. 29, Twp. 50, Rge. 3W, County KOOTENAI,
Lot, block and subdivision _____
4. Proposed use of well: (Check all that apply)
() Domestic () Stockwater () Monitoring
() Irrigation () Industrial () Municipal
() Injection (☒) Other, Specify COMMERCIAL RESTAURANT
5. Well construction information:
(☒) New well () Deepen () Replace
Proposed surface diameter 6" Maximum depth 200'
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 7/20/88
7. Well Driller (if known) ART LORAIN SERVICE
Address 582 W. HAYDEN AVE
8. Applicant's signature Cathie L. Thomas
Title Owner/Mgr.
Date 7-15-88

MICROFILMED

MAR 26 1990

* After other pre-requisite approvals have been obtained.

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

ACTION OF IDWR

(X) 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:

1. Water from this well cannot be used until the respective water right is approved.

MICROFILMED

MAR 26 1990

Dated this 18th day of July, 19 88.

Signed

Robert G. Haynes

Title

REGIONAL MANAGER

Received by me Fee \$100.00 Date 7/18/88

Receipt No. N570 Construction start extension to _____

Extension approved by _____

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY AWA DATE _____ APPLICATION NUMBER 958599

REQUIRED INFORMATION

- ☒ Name (If applicant is a corporation or partnership, names must be provided for the director, officers, & 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, flow and/or volume)
☒ 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

- ☒ Overlapping place of use (Describe source & relationship to present application on the back.)
☐ Overlapping point of diversion
☐ Yes ☒ No Field check required
Field check by _____
☐ Yes ☒ No Field report attached
☐ Yes ☒ No Critical groundwater area
☐ Yes ☒ No Groundwater management area
☐ Yes ☒ No Send dam safety information
☐ Yes ☒ No Send power requirement letter
☐ Yes ☒ No Send fish farm requirement letter
☐ Yes ☒ No Power residency affidavit
☐ Yes ☒ No Power efficiency form
☐ Yes ☒ No Within trustwater boundary (If yes, attach trust water supplementary analysis sheet.)
☐ Yes ☒ No Diversion greater than 5 cfs or 500 acre ft. (If yes, attach large diversion supplementary analysis sheet.)
☐ See reverse side for additional information

*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT

Date Requested OCT 24 1988

Department of Water Resources

RECEIVED

PROCESSING

☒ Yes ☒ No In form for advertising
☒ Yes ☒ No Statewide advertising
☒ Yes ☒ No Fee amount, receipt date & No. recorded on application

SEND COPIES TO

☒ Idaho Dept. of Health & Welfare ☐ U.S. BLM
☐ Idaho Dept. of Fish & Game ☐ U.S. Forest Service
☐ Idaho Dept. of Lands ☐ Water District
☐ Adjudication Bureau Unit ☐ Other _____

FINAL REGIONAL PROCESSING REVIEW

☒ Yes ☐ No Affidavit of publication received
☐ Yes ☒ No Application published correctly. If not, record action taken.
Print date wrong - re-sdv.

☒ Yes ☐ No Publication dates & paper, recorded on application

☐ Yes ☒ No Protests received

Final date for protest 9/19/88

☐ Yes ☒ No Protests, dates, resolution of protest, recorded on application

☐ Yes ☒ No Recommendations attached

☐ Yes ☒ No Measuring device required

☐ Yes ☒ No Access port required

☐ Yes ☒ No Will water be delivered by watermaster? If yes, what Dist. _____

☐ Yes ☒ No Special conditions of approval or cover letter below. _____

Date of priority recommended _____

By Rya

☐ See below for additional information

Date 7/18/88

10/19/88

STATE OFFICE REVIEW

P23

P16

46

By kw

☐ See below for additional information

Date 12/5/88

ADDITIONAL INFORMATION