

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08394

Priority: June 30, 1983

Maximum Diversion Rate: 0.04 CFS
Maximum Diversion Volume:¹ 1.2 AF

This is to certify, that CHESTER KEMMER.

E. 5565 16TH

POST FALLS, ID 83854

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated June 30, 1983; and has submitted Proof of Beneficial Use on July 20, 1988. An examination indicates that the works have a diversion capacity of .040 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:

SENE, Sec. 31, Township 51N, Range 04W
KOOTENAI County

PLACE OF USE: DOMESTIC
TWN RGE SEC

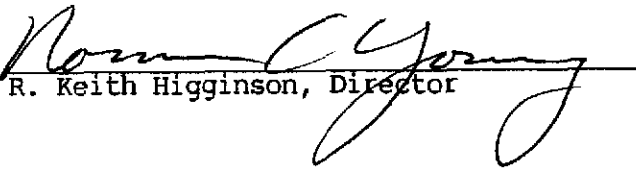
51N 04W 31 SENE

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 1 home.

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 20TH day of AUGUST, 1991.

Acting for


R. Keith Higginson, Director

AUG 23 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

APPROVED

To appropriate the public waters of the State of Idaho

1. Name of applicant Chester Kemmer Phone 773-4309
Post office address E 5565 16th Post Falls, Id 83854
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 Section 31 Township 51N
Range 4W B.M. Kootenai County, additional points of diversion if any: _____

4. Water will be used for the following purposes:

Amount 0.04 for Domestic 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:

a. 0.04 cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. Well, pump and pipeline

b. Height of storage dam _____ feet, active reservoir capacity _____ acre-feet; total reservoir capacity _____ acre-feet, materials used in storage dam: _____

Period of year when water will be diverted to storage _____ to _____ inclusive.
(Month/Day) (Month/Day)

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

7. Time required for the completion of the works and application of the water to the proposed beneficial use is 5 years (minimum 1 year — maximum 5 years).

8. Description of proposed uses:

a. If water is not for irrigation:

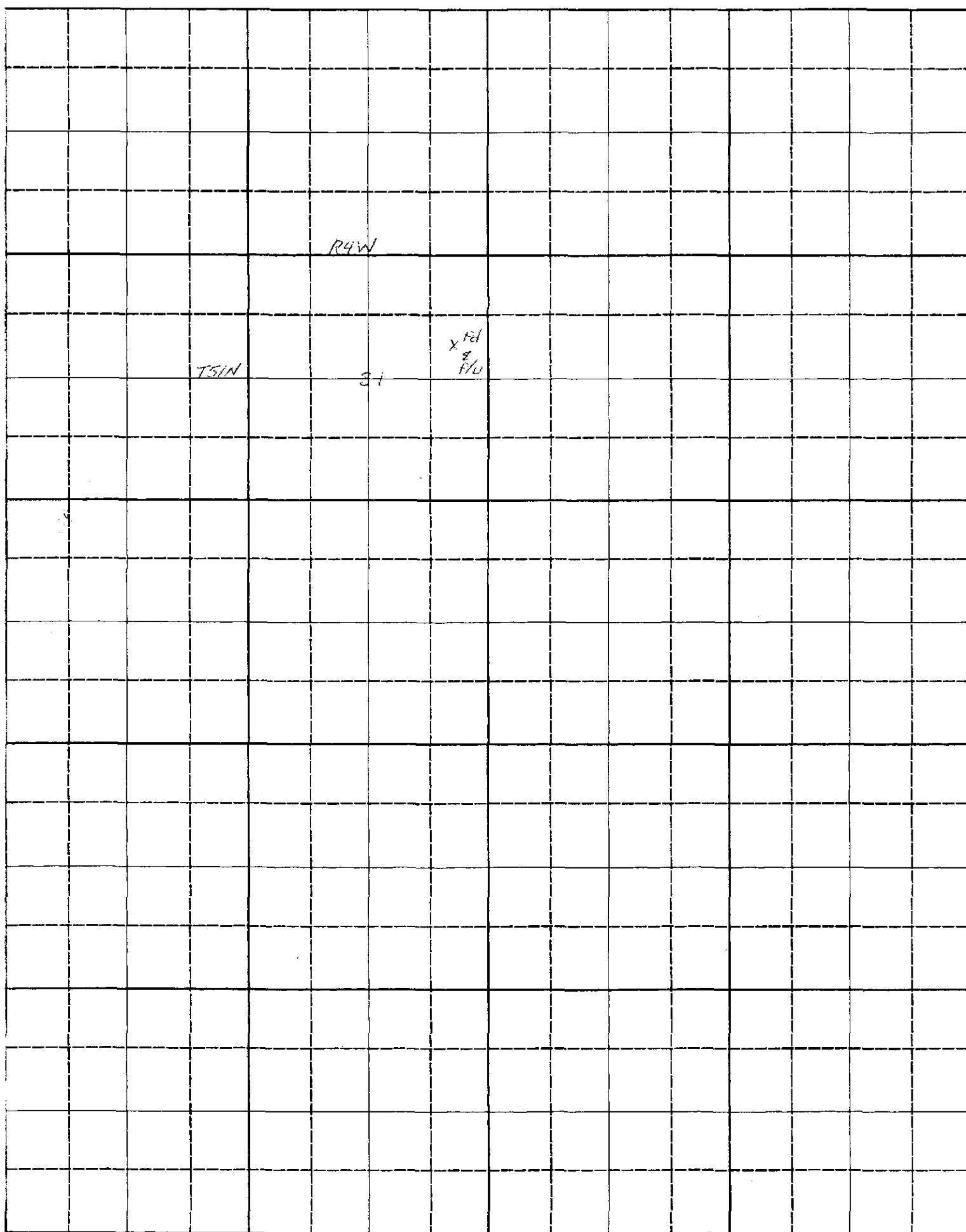
(1) Give the place of use of water: SE $\frac{1}{4}$ of NE $\frac{1}{4}$ of Section 31 Township 51N
Range 4W B.M.

(2) Amount of power to be generated: _____ horsepower under _____ feet of head.

(3) List number of each kind of livestock to be watered _____

(4) Name of municipality to be served _____, or number of families to be supplied with domestic water 1.

(5) If water is to be used for other purposes describe: _____



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.

- Chester Kemmer
(Applicant)

Proposed Priority 6/30/1983

Received by LB Date 6-30-83 Time 1:25

Preliminary check by JK Fee \$ 30.00

Receipted by LB Date 6-30-83 (28564)

Publication prepared by pm Date 7/13/83

Published in CDA Press

Publication dates 7-21, 28-83

Publication approved pm Date 8/29/83

Protests filed by: none

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by [Signature] DCR

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. 95-8394, 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 September 1, 19 88.
- 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. Other:

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.

Witness my hand this 19th day of September, 1983.

[Signature]
Chief, Operations Bureau

LICENSE REVIEW CHECKLIST

Permit No. 95-8394

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 N/A

Uses Check irrigation period of use w/ chart N/A

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

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

Conditions -

Measuring device
W.Master control
Overlap
Water quality
Other

Dates/Misc. -

Water Dist
App Rec'd
Proof Rec'd

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:

AUG 23 1991

License 10-day 30-day

Back of field report signed?
Reviewer SCurtis Date 8/12/91 Review time 5 min.

SENIOR AGENT REVIEW

Check List
for
Beneficial Use Field Report

Permit 95-08374

☒ **A. GENERAL INFORMATION**

- ☒ 1. Name and address are most current available. (Check BU statement)
☒ 2. Exam Date
☒ 3. Source (Check Permit)

☒ **B. OVERLAP REVIEW**

- ☒ 1. & 2. (Rule 5,1,4)

☒ **C. SYSTEM DESCRIPTION**

- ☒ 1. Diversion System Diagram (Rule 5,1,3 / 5,1,4)
☒ 2. USGS (Rule 5,1,7 / 5,1,9) Aerial (Rule 5,1,17)
Photo of pd and/or pu or explanation
☒ 3. Word Picture (Rule 5,1,3 / 5,1,4)
☒ 4. Diversion (Rule 5,1,3)
☒ 5. Compare with USGS Map/Land Survey Maps/Aerial Photos/Permit.
Method of determination
☒ 6. Irrigation (Rule 5,1,8), Method of determination,
Compare USGS/Land Survey?Aerial Photos/Permit.

☒ **D. FLOW MEASUREMENTS** Check math (Rule 5,1,13 / 5,1,14)

☒ **E. FLOW CALCULATIONS** Check math (Rule 5,1,13 / 5,1,14)

☒ **F. OPTIONAL**

☒ **G. VOLUME CALCULATIONS**

- Three significant figures/not less than 0.10 (Rule 6,1,2)
Fish (Rule 5,1,11) number stock, homes, etc... (Rule 5,1,12)

☒ **H. REMARKS AND OVERLAP ANALYSES**

- ☒ All actual uses listed (Rule 5,1,2):
☒ All unused, permitted uses listed (Rule 5,1,2):
☒ Overlaps (Rule 5,1,4):
☒ Return flows (Rule 5,1,5):
☒ Conditions (Rule 5,1,6).

☒ **I. RECOMMENDATIONS**

- ☒ 1. Municipal (Rule 5,1,10): Compare with items E & G, permit, fee, capacity
(Rule 5,1,15): Measured flows for each use listed separately (Rule 5,1,14).
Period of year (Rule 5,1,13)
☒ 2. Compare permit to exam for amendments (Rule 5,1,16)

☒ **J. AUTHENTICATION**

Name, Signature, Certification Date, Exam Date.

☒ **WELL INSPECTION REPORT**

Check with permit and well log for discrepancies

Signature

[Handwritten Signature]

Date

7/2/90

RECEIVED
JUN 24 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT
RE-EXAMINATION

Department of Water Resources

A. GENERAL INFORMATION

1. Owner: CHESTER KEMMER Permit No. 95-08394
Current Address: E 5565 16TH POST FALLS, ID. 83854 Phone No. 773-4309
2. Accompanied by: 1 EXAM. DATE: 6/26/90
Address: _____ Phone No. _____
Relationship to Permit Holder: _____
3. Source: GROUNDWATER tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: ROSS POINT WATER DIST
95-0488, 95-07258, 95-0847 ☐ 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

WELL
BURIED PIPELINE
HOME W/ PRESS
SYSTEM
0-1-0



Scale: 1" = NTS

FILED
AUG 23 1991

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).

System Description (continued)

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

AN 8" X 2 1/2' WELL W/ SWL @ 200' A SUBMERSIBLE PUMP & PIPELINE TO HOME

☐ 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>					

*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>SE</u>	<u>NE</u>	<u>31</u>	<u>51N</u>	<u>4W</u>	<u>KOOTENAI</u>	<u>MAP</u>

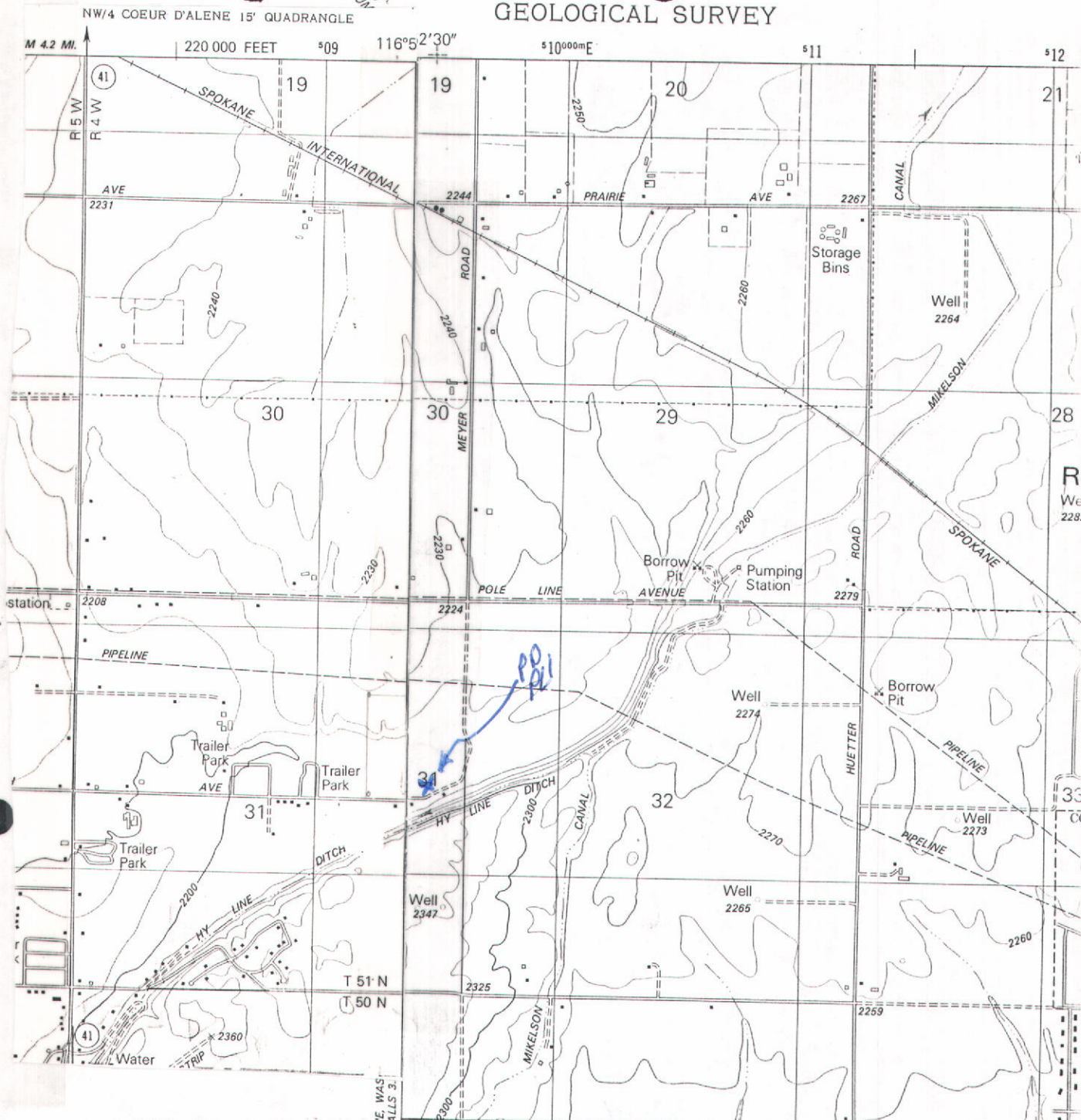
6. Place(s) of Use:

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>51N</u>	<u>4W</u>	<u>31</u>				<u>D</u>													

Do not use this space

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY



NAME: CHESTER KEMMER
PD: T51N, R4W, SEC.31, SENE
PU:
SOURCE: GROUNDWATER

PERMIT NUMBER: 95-08394
GL: MAP: # 27
AC/IRR: QUAD: F-3,4

FILED
AUG 23 1991

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:

ONE NONE

2. Alternate Method for Checking Purposes:

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:

ONE NONE

H. REMARKS AND OVERLAP REVIEW ANALYSIS

THIS IS A STAND BY WELL. MR. KEMMER BUYS WATER FOR HIS HOME FROM ROSS POINT WATER. IF THE WATER DISTRICT SHOULD FAIL TO DELIVER WATER THIS WELL IS PLUMBED TO THE HOME & COULD BE USED AS A REPLACEMENT SOURCE. ANY USE OF THIS WELL OTHER THAN THAT DESCRIBED ABOVE WILL REQUIRE A TRANSFER OR NEW APPLICATION FOR PERMIT

I. RECOMMENDATIONS

1. Recommended Amounts

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

2. Recommended Amendments

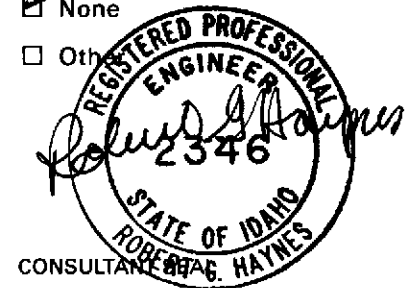
- ☐ Change P.D. as reflected above ☐ Add P.D. as reflected above
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above

☒ None

☐ Other

J. AUTHENTICATION

Field Examiner's Name Tom D King
 Signature TOM D KING
 Certification Date 7/16/90
 Field Report Preparation Date 6/26/90



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

AUG 23 1991

State of Idaho
Department Of Water Resources
WELL INSPECTION FORM

If well is associated with water right, provide WR Permit No. 95-08394

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: 200
Pressure Gauge: Y ☒ N ☐ Casing Diameter: 8"
Flowing: Y ☐ N ☒ Temperature: _____

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 : _____

11/5/91
AUG 23 1991

USE TYPEWRITER OR
BALL POINT PEN

State of Idaho
Department of Water Resources

WELL DRILLER'S REPORT

RECEIVED

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.

SEP 2 1976

1. WELL OWNER Name <u>CHESTER HEAMER</u> Address <u>RT 3 Box 238 POST FALLS ID</u> Owner's Permit No. _____		7. WATER LEVEL Department of Water Resources Northern District Office Static water level <u>200</u> feet below land surface Flowing? ☐ Yes ☒ No G.P.M. flow _____ Temperature _____ ° F. Quality _____ Artesian closed-in pressure _____ p.s.i. Controlled by ☐ Valve ☐ Cap ☐ Plug																													
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____		8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Other Discharge G.P.M. _____ Draw Down _____ Hours Pumped _____ <u>10'</u>																													
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Other (specify type) _____ ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Hole Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>9"</td><td>0</td><td>180</td><td>SAND & GRAVEL</td><td></td><td>X</td></tr><tr><td></td><td>180</td><td>239</td><td>SAND, Gravel & Boulder</td><td>X</td><td></td></tr><tr><td></td><td>239</td><td>241</td><td>Boulder</td><td>X</td><td></td></tr></tbody></table>		Hole Diam.	Depth		Material	Water		From	To	Yes	No	9"	0	180	SAND & GRAVEL		X		180	239	SAND, Gravel & Boulder	X			239	241	Boulder	X	
Hole Diam.	Depth		Material		Water																										
	From	To		Yes	No																										
9"	0	180	SAND & GRAVEL		X																										
	180	239	SAND, Gravel & Boulder	X																											
	239	241	Boulder	X																											
4. METHOD DRILLED ☐ Cable ☒ Rotary ☐ Dug ☐ Other																															
5. WELL CONSTRUCTION Diameter of hole <u>8</u> inches Total depth <u>242</u> feet Casing schedule: ☒ Steel ☐ Concrete Thickness Diameter From To <u>320</u> inches <u>8</u> inches + <u>1</u> feet <u>239</u> feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ 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 <u>6</u> inches by <u>3/16</u> inches Number From To <u>72</u> perforations <u>224</u> feet <u>239</u> 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 _____ Placed from _____ feet to _____ feet Surface seal depth <u>20</u> Material used in seal ☐ Cement grout ☒ Pudding clay ☒ Well cuttings Sealing procedure used ☐ Sherry pit ☒ Temporary surface casing ☒ Overhore to seal depth																															
6. LOCATION OF WELL Sketch map location must agree with written location. <table border="1"><tr><td>N</td><td></td><td></td></tr><tr><td>W</td><td></td><td>E</td></tr><tr><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td></tr></table> Subdivision Name _____ TRACT 32 Lot No. _____ Block No. <u>31</u> County <u>KOOTENAI</u> SE 1/4 NE 1/4 Sec. 31 T. 51 N. R. 4 NW		N			W		E				S			10. Work started <u>8/10/76</u> finished <u>8/23/76</u>																	
N																															
W		E																													
S																															
		11. DRILLERS CERTIFICATION Firm Name <u>Aqua Drill Works & Dev. Inc.</u> Firm No. <u>163</u> Address <u>Post Falls, ID</u> Date <u>8/23/76</u> Signed by (Firm Official) <u>Robert Brown</u> and (Operator) <u>David N. March</u>																													

AUG 23 1976

1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 95-8394

Date: 10/17/88

General Considerations:

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

Source of Water:

Y Surface water
_____ Groundwater
_____ Y 1. well log in file
N/A 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?
_____ 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

JUL 20 1988

Department of Water Resources
Northern District Office

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

For Office Use Only

Fee Received N/A

Date 7/20/88

Receipt # 7

Receipt by JP

Reviewed by JP

Sent to region 7/20/88

The Idaho Department of Water Resources will consider this form as a statement that the permit holder(s) has 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. 95-8394

Name(s) of Permit Holder: Chester Kemmer

Post Office Address: E. 5565 16th Post Falls, Id. 83854

Telephone No. 773-4309

Source of Water: Groundwater

Extent of Use:

Domestic 1 (number of households) Stockwater _____ (number and type of stock)

Irrigation _____ (acres) Other/Remark _____

Total rate and/or volume for which proof is submitted 0.04 cfs _____ acre-feet

Show the date water was first diverted and beneficially used under this permit: 1976

Measuring Device: Required? ☐ Yes ☒ No
Installed? ☐ Yes ☒ No Fee enclosed \$ N/A
(See License Examination Fee Schedule)

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

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

Applicant

(Name)

(Telephone Number)

(Address)

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.

MICROFILMED

JAN 10 1989

7/20/88

Date

Chester Kemmer
Signature of Permit Holder (and title, if appropriate)

To: File 95-8394

From: Groundwater Protection

Date: 10/17/88

Drilling Permit: ☒ Not Applicable
☐ Found and in file
☐ Not Found

Well Drillers Report:

☐ Not found, due to reported age of well
probably not available
☒ Found and is in file
☐ Not found

Follow-up

☐ Request from permit holder the well
drillers report and/or the name of the
well driller, *And date drilled.*
☐ Ask permit holder when well was drilled
and notify holder of drilling permit
requirement if after July 01, 1987.

OK .

JP

MICROFILMED

JAN 10 1989

USE TYPEWRITER OR
BALL POINT PEN

State of Idaho
Department of Water Resources
WELL DRILLER'S REPORT

RECEIVED

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>LESTER HENNINGER</u> Address: <u>RT 3 BOX 239 POST FALLS ID.</u> Owner's Permit No. _____		2. WATER LEVEL Static water level: <u>200</u> feet below land surface Flowing? ☐ Yes ☒ No G.P.M. flow _____ Temperature _____ Quality _____ Artesian closed in pressure ☐ Yes ☒ No Controlled by ☐ Valve ☐ Cap ☐ Plug	
3. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement Abandoned (describe method of abandoning) _____		4. WELL TEST DATA Pump ☐ Rater ☒ Other _____ Discharge G.P.M. _____ Draw Down _____ Hours Pumped _____	
5. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Other (specify type) _____ ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste disposal or injection		6. LITHOLOGIC LOG Hole Diam. _____ Depth _____ Material _____ Water Vel. _____ No. _____ 9 0-150 Sand & gravel 150-239 Sand, gravel & boulders 239-240 Boulder	
7. METHOD DRILLED ☐ Cable ☒ Rotary ☐ Dug ☐ Other _____			
8. WELL CONSTRUCTION Diameter of hole <u>8</u> inches Total depth <u>242</u> feet Casing schedule <u>4</u> Steel ☐ Concrete Thickness _____ Diameter _____ From _____ To _____ inches _____ inches _____ feet _____ feet inches _____ inches _____ feet _____ feet inches _____ inches _____ feet _____ feet inches _____ inches _____ feet _____ 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 <u>6</u> inches by <u>3/16</u> inches Number _____ From _____ To _____ <u>72</u> perforations <u>224</u> feet <u>239</u> feet perforations _____ feet _____ feet perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Model No. _____ Type _____ 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 <u>20</u> Material used in seal ☐ Cement grout ☒ Pudding clay ☒ Well cuttings Sealing procedure used ☐ Slurry pit ☒ Temporary surface casing ☒ Overbore to seal depth			
9. LOCATION OF WELL Sketch map location must agree with written location. (45) Subdivision Name _____ TRA 32 Lot No. _____ Block No. <u>31</u> County <u>KOOTENAI</u> SE 1/4 NE 1/4 Sec. 31 T. 51 N. R. 4 SW		10. Work started <u>8/10/26</u> finished <u>8/23/26</u>	
11. DRILLERS CERTIFICATION Firm Name <u>ALAN DANIELSON & SONS INC.</u> Firm No. <u>163</u> Address <u>PO BOX 1499</u> Date <u>8/23/26</u> Signed by (Firm Official) <u>Robert B. Danielson</u> and <u>David N. Danielson</u> (Operator)			

USE ADDITIONAL SHEETS IF NECESSARY

FORWARD THE WHITE COPY TO THE DEPARTMENT

UNRECORDED

JAN 10 1989

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: JK APPLICATION NUMBER: 95-8394

CHECK:

- ☒ Source.
☒ Point of diversion.
☒ County.
☒ Quantity of water and period of use.
☒ Description of diverting works.
☒ Time required for beneficial use of water.
☒ Place of use or acres irrigated.
☒ Map.
☒ Signature.
☒ Fee.

Field check by: _____

Date: _____

Comments: _____

☐ Yes ☒ No Field check required.

☐ Yes ☒ No Critical groundwater area.

☐ Yes ☒ No Request dam safety information. Sent by: _____ Date: _____

☒ Yes ☐ No* In form to receipt.

*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT: _____

SEND COPIES TO:

- ☐ Idaho State Health Department. Copies sent by: _____ Date: _____
☐ Idaho Fish and Game Department. _____
☐ Idaho Department of Lands. _____
☐ U.S. Bureau of Land Management. _____
☐ U.S. Forest Service. _____
☐ Other _____

PROCESSING:

- ☐ Yes ☐ No Platted by: _____ Map No. _____
☐ Yes ☐ No Other rights on same place of use. _____

- ☒ Yes ☐ No* In form for advertising.
Final date for protests: 8/8/83
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 7/29/83
☒ Application published correctly. If not, record action taken: _____
☒ Fee amount, receipt date & number, recorded on application.
☒ Publication dates and paper, recorded on application.
☒ Protests, dates, withdrawal, etc., recorded on application.
☒ Recommendation & initial, recorded on application.
☐ Yes ☒ No Measuring device required.
☐ Yes ☒ No Access port required.
☐ Yes ☒ No Will water be delivered by watermaster? If yes, what district? _____
Date of priority recommended. _____
Special conditions of approval or cover letter. _____

By: K. Knoblack Date: 9/1/83

STATE OFFICE REVIEW:

L17 26

☐ See attached sheet for more information.
By: DRT Date: 9/9/83

RECEIVED
SEP 07 1983
Department of Water Resources

POINT OF DIVERSION AND STREAM INDEX INFORMATION

TRACT SEC TWP RGE gov't rediv. REACH
lot (R)

IDAHO STREAM CODE INDEX

TRACT SEC TWP RGE gov't rediv. REACH
lot (R)

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IDAHO STREAM CODE INDEX

TRACT SEC TWP RGE gov't rediv. REACH
lot (R)

IDAHO STREAM CODE INDEX

95-8394

KEMMER, CHESTER

E. 5565 16TH, POST FALLS, ID 83854

Source: GROUNDWATER

Date Filed: 06/30/1983

Diversion Pt: SENE Sec 31 T 51N R 04W

Use: DOMESTIC (0.04 CFS)

In: ~~SENE~~ Sec 31 T 51N R 04W