

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE
WATER RIGHT NO. 95-08380

Priority: June 29, 1983

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

This is to certify, that GREEN ACRES DEVELOPMENT CO.

P.O. BOX 141016

SPOKANE, WA 99214

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated June 29, 1983; and has submitted Proof of Beneficial Use on August 11, 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:

NENE , Sec. 28, Township 47N, Range 04W
KOOTENAI County

PLACE OF USE: DOMESTIC

TWN RGE SEC

47N 04W 28 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 1 home.

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SEP 24 1990

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08380

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 29th
day of AUGUST, 1990.

Acting for

R. Keith Higginson, Director

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SEP 24 1990

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 Green Acres Development Co. Phone 208-686-1116
Post office address P.O. Box 141016 Spokane, Wn. 99214
2. Source of water supply (1) Groundwater which is a tributary of _____
3. Location of point of diversion is NE $\frac{1}{4}$ of NE $\frac{1}{4}$ of Section 28 Township 47N
Range 4W B.M. Kootenai County, additional points of diversion if any: _____

4. Water will be used for the following purposes:

- Amount .08 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. .08 cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

- a. Description of ditches, flumes, pumps, headgates, etc. 6" well with pump,
motor and pipeline to places of use.

- 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 6 inches; proposed depth of well is 175 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: NE $\frac{1}{4}$ of NE $\frac{1}{4}$ of Section 28 Township 47N
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 2.

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

b. If water is for irrigation, indicate acreage in each subdivision in the tabulation below:

TWP	RANGE	SEC.	NE¼				NW¼				SW¼				SE¼				TOTALS
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	

Total number of acres to be irrigated _____

c. Describe any other water rights used for the same purposes as described above. None

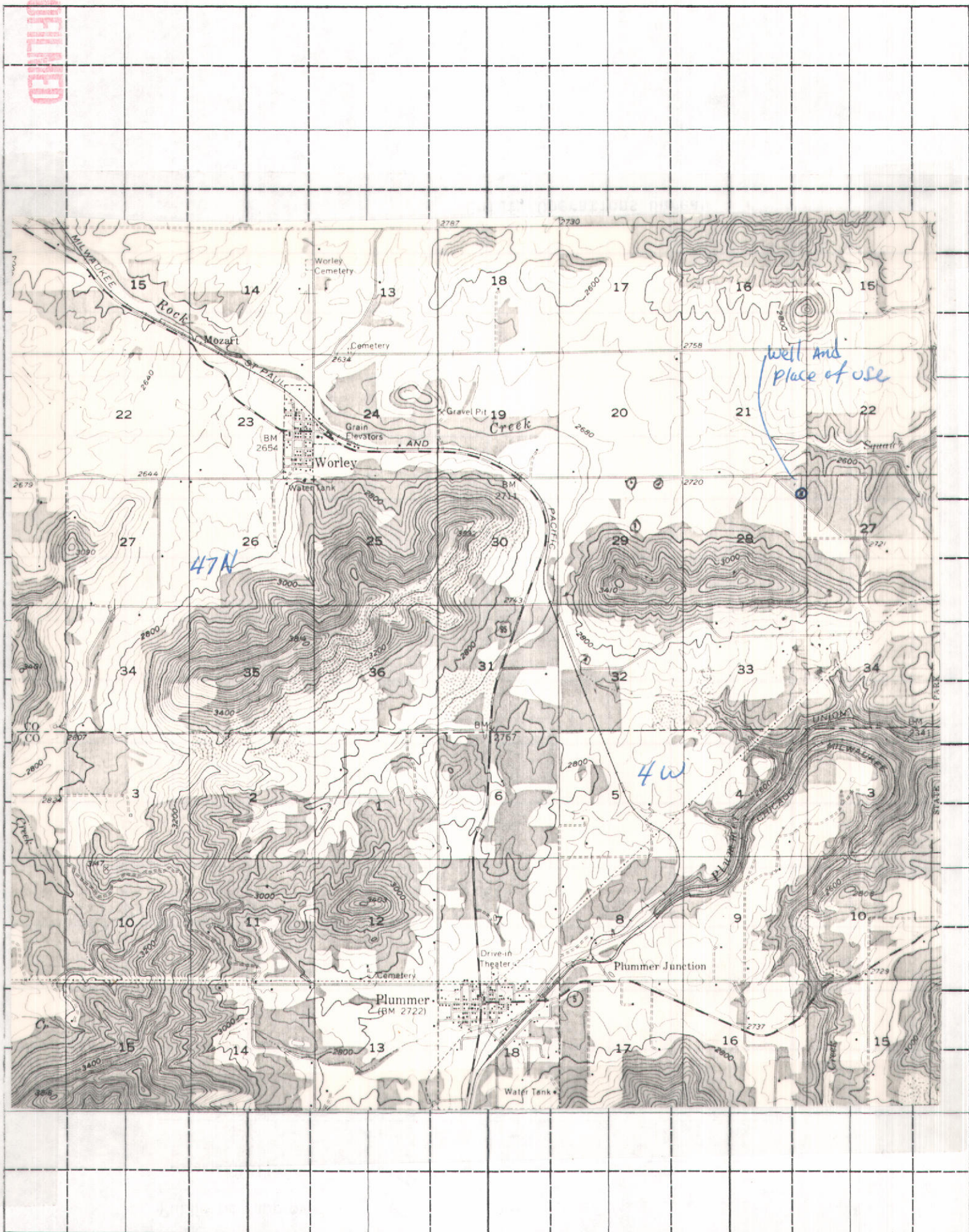
9. a. Who owns the property at the point of diversion Applicant

b. Who owns the land to be irrigated or place of use "

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing _____

10. Remarks _____

11. Map of proposed project: show clearly the proposed point of diversion, place of use, section number, township and range number.



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.

Greenacres Development Co
X Virgil Carroll - Pres
(Applicant)

Proposed Priority 6/29/1983

Received by FE Date 6/29/83 Time 9:30 a.

Preliminary check by ZB Fee \$ 30.00

Received by FE Date 6/29/83 # 28416

Publication prepared by pm Date 7/13/83

Published in CDA Press

Publication dates 7-21, 7-28-83

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] DER

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. 95-8380, 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

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUN 27 1990

Department of Water Resources

A. GENERAL INFORMATION

1. Owner: GREEN ACRES DEVELOPMENT CO Permit No. 95-83810
Current Address: PO Box 141016 Spokane WA 99214 Phone No. 809 455 6617
2. Accompanied by: _____ EXAM. DATE: 8/28/89
Address: _____ Phone No. _____
Relationship to Permit Holder: _____
3. Source: groundwater tributary to _____

B. OVERLAP REVIEW

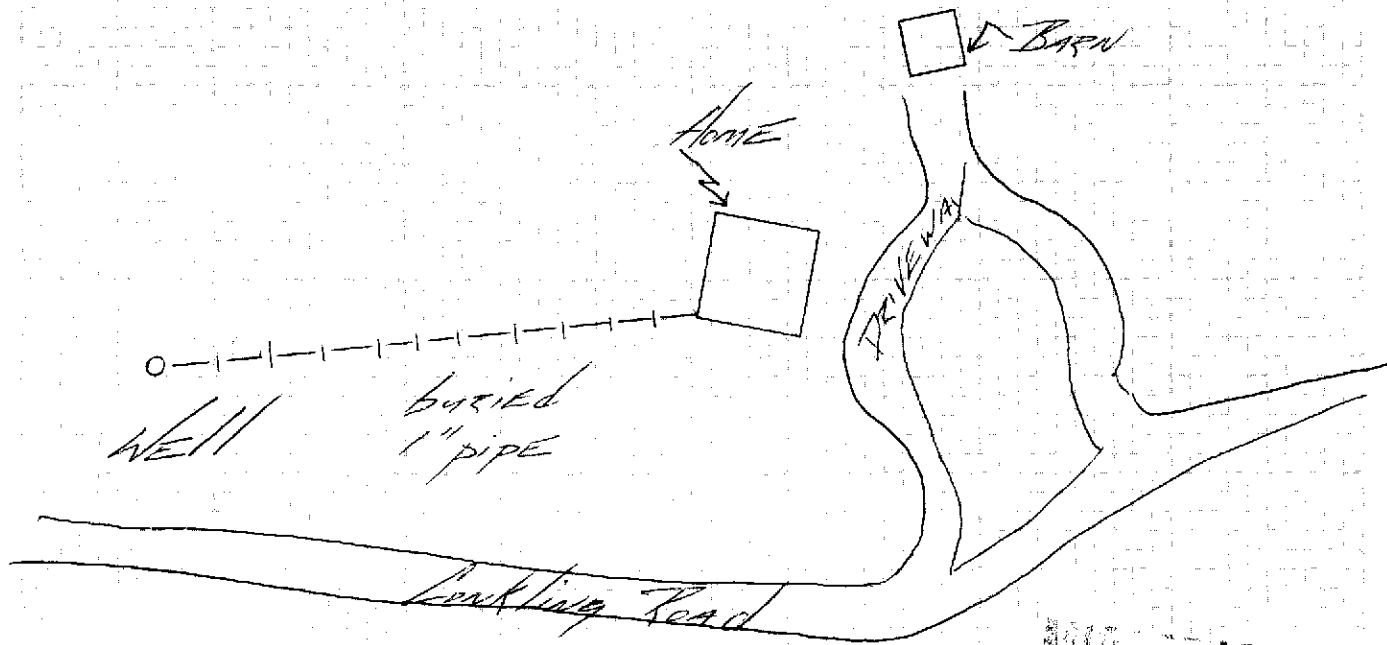
1. Other water rights with same place of use: NONE

☐ 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" = 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).

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System Description (continued)

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

Well with submersible pump and a buried pipe line to house.

☐ 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
<i>SUBMERSIBLE</i>					

*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
					<i>NE NE 28</i>	<i>47N</i>	<i>4W</i>	<i>FOOTENAI</i>	<i>MAP</i>

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	
<i>47N</i>	<i>4W</i>	<i>28</i>	<i>D</i>																

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Do not use this space



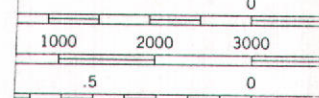
NAME: GREENACRES DEV CO.
 PD: T47N, R4W, SEC.28, NENE
 PU:
 SOURCE: GROUNDWATER

GL:
 AC/IRR:

PERMIT NUMBER: 95-08380
 MAP: # 20
 QUAD: G-4

(CHATCOLET)
 2678 IV SE

SCALE 1:24 00



CONTOUR INTERVAL
 NATIONAL GEODETIC VERTICAL

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 SEP 24 1990

MAP COMPLIES WITH NATIONAL MAP
 ACTING SURVEY, DENVER, COLORADO
 BING TOPOGRAPHIC MAPS AND S

Mapped, edited, and published
 Control by USGS and NOS/NOAA
 Topography by photogrammetry
 taken 1975. Field checked 1975
 Projection and 10,000-foot grid
 system, west zone (transverse
 1000-meter Universal Transverse
 1927 North American Datum
 To place on the predicted North
 move the projection lines 14 m
 78 meters east as shown by d
 Fine red dashed lines indicate
 where generally visible on aerial
 This information is unclassified

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:

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:

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

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

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

2. Volume Calculations for Other Uses:

SEP 24 1990

1.2 AF for ONE domestic use

H. REMARKS AND OVERLAP REVIEW ANALYSIS

IRRIGATE w/ PAN SPRINKLERS FOR LAWN AND GARDEN

HOME OWNED BY THE NAME OF -
Mr/Mrs BROUSE

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
DOMESTIC	1-1	12-31	.04	1.2
Totals:			.04	1.2

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

J. AUTHENTICATION

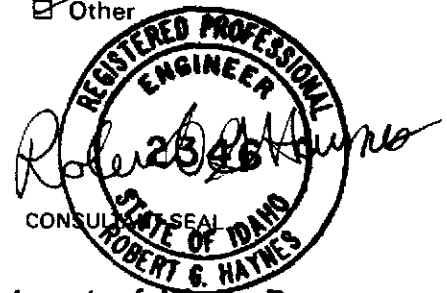
Field Examiner's Name

Signature

Certification Date

Field Report Preparation Date

Charlotte Anderson
Charlotte Anderson
2/17/89
3/28/89



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

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SEP 24 1990



95-08380

Place of use

State of Idaho
Department of Water Resources
WELL INSPECTION FORM

This form should be completed by the examiner when conducting a field examination to determine the extent of beneficial use of water from a well or whenever a well is inspected for other reasons. The form should be forwarded to Groundwater Protection Section in the State Office upon completion.

1. Legal Description of well location. Twp. 47N, Rge. 4W,
Sec. 28, Qtr./Qtr. _____ or Lot _____
2. Owner Virgil Carroll
Address PO Box 141016, City Spokane, State WA
3. Approx. date of well construction 2/74
Well Driller FREDERICK WELL DRILLING
4. Casing: Diameter 6 in Condition _____
5. Casing length above land surface 1 1/2 ft
6. Well depth (ft) 195 Flowing _____ Temp. _____
Access port YES
7. Condition of piping and valving _____
8. Evidence of well seal _____
9. Shut in pressure or static water level 75 ft
10. Evidence of leakage around the casing _____
11. Does well need repair _____
12. Comments _____

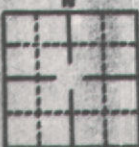
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SEP 24 1990

(OVER)

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>Virgil Carroll</u> <u>Green Arroyo Development Co</u> Address <u>P.O. Box 141016</u> <u>Spokane, Washington 99214</u> Owner's Permit No. _____	7. WATER LEVEL <u>75</u> <u>75</u> <u>75</u> Static water level _____ feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ op. 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 ☐ Sailer ☒ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td>100 gpm</td> <td></td> <td></td> </tr> </tbody> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	100 gpm																												
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100 gpm																																	
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Bore</th> <th>Depth</th> <th>Material</th> <th>Water</th> </tr> <tr> <th>Diam.</th> <th>From</th> <th>To</th> <th>Yes/No</th> </tr> </thead> <tbody> <tr> <td>6</td> <td>175</td> <td>205</td> <td>gray basalt</td> <td></td> </tr> <tr> <td></td> <td>205</td> <td>300</td> <td>black soft basalt</td> <td></td> </tr> <tr> <td></td> <td>300</td> <td>330</td> <td>black broken basalt</td> <td>✓</td> </tr> </tbody> </table>	Bore	Depth	Material	Water	Diam.	From	To	Yes/No	6	175	205	gray basalt			205	300	black soft basalt			300	330	black broken basalt	✓									
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4" style="height: 100px; vertical-align: bottom; text-align: center;"> RECEIVED AUG 5 1988 Department of Water Resources Northern District Office </td> </tr> </table>	RECEIVED AUG 5 1988 Department of Water Resources Northern District Office																															
RECEIVED AUG 5 1988 Department of Water Resources Northern District Office																																	
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>_____ 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> <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 <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>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> 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 ☐ 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 _____	Thickness	Diameter	From	To	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	10. Work started <u>9-01--85</u> finished <u>9-02-85</u>
Thickness	Diameter	From	To																														
_____ 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>1/4</u> <u>1/4</u> Sec. <u>28</u>, T. <u>47</u> N. S. R. <u>4</u> W.	11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Coeur d'Alene Drilling, Inc. 214 Firm Name _____ Firm No. _____ <u>Hayden Lake, Idaho 83835</u> Date <u>9-02-85</u> Signed by (Firm Official) <u>Bill Finley</u> and (Operator) <u>Bill Finley</u>																																

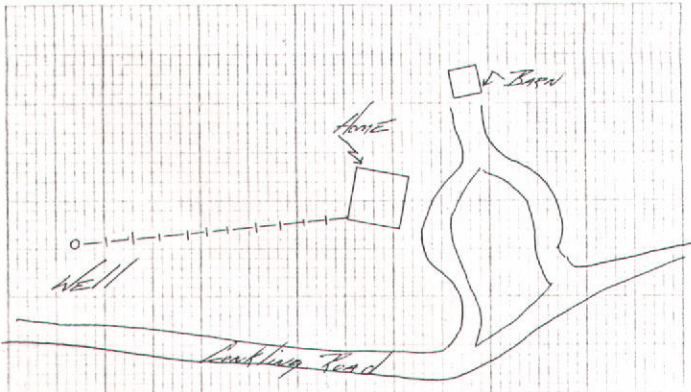
OCT 14 1988

SCHEMATIC

Provide a schematic diagram showing the location of the well in the quarter-quarter with respect to houses, roads, other wells or readily identifiable features.

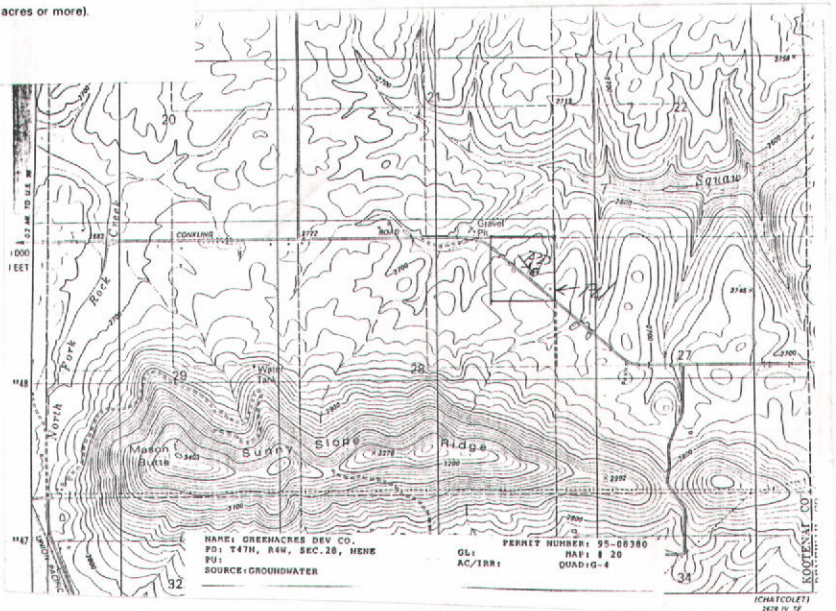
C. SYSTEM DESCRIPTION

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" = MTS

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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SEP 24 1990

Inspected by Charles H. Hunter

Date 8/28/89

USE TYPEWRITER OR
BALL POINT PEN

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

State law requires that this report be filed with the Director, Department of Water Administration within 30 days after the completion or abandonment of the well.

RECEIVED
MAR 14 1974
Department of Water Administration

1. WELL OWNER Name <u>VIRGIL CARROLL</u> Address <u>WALLEY IDAHO</u> Owner's Permit No. _____		7. WATER LEVEL Static water level <u>7.5</u> feet below land surface Flowing ☐ Yes ☒ No G.P.M. flow _____ Temperature <u>62</u> °F Quality <u>GOOD</u> Artesian closed-in pressure ☐ P.S.I. Controlled by ☐ Valve ☐ Cap ☐ Plug																																															
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandonment): _____		8. WELL TEST DATA ☐ Pump ☒ Bailor ☐ Other Discharge G.P.M. <u>15</u> Draw Down <u>30</u> Hours Pumped <u>30 MIN</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>4</td><td>0</td><td>10</td><td>BROWN CLAY</td><td></td><td>X</td></tr><tr><td>4</td><td>10</td><td>20</td><td>DECOMPOSED BASALT</td><td></td><td>X</td></tr><tr><td>6</td><td>20</td><td>70</td><td>BASALT ROCK</td><td></td><td>X</td></tr><tr><td>6</td><td>70</td><td>75</td><td>SOFT BASALT</td><td>X</td><td></td></tr><tr><td>6</td><td>75</td><td>150</td><td>HARD BASALT</td><td></td><td>X</td></tr><tr><td>6</td><td>150</td><td>175</td><td>SOFT BASALT</td><td></td><td></td></tr></tbody></table>		Hole Diam.	Depth		Material	Water		From	To	Yes	No	4	0	10	BROWN CLAY		X	4	10	20	DECOMPOSED BASALT		X	6	20	70	BASALT ROCK		X	6	70	75	SOFT BASALT	X		6	75	150	HARD BASALT		X	6	150	175	SOFT BASALT		
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6	150	175	SOFT BASALT																																														
4. METHOD DRILLED ☒ Cable ☐ Rotary ☐ Dug ☐ Other																																																	
5. WELL CONSTRUCTION Diameter of hole <u>6</u> inches Total depth <u>175</u> feet Casing schedule ☒ Steel ☐ Concrete Thickness <u>2.50</u> inches Diameter <u>6</u> inches From <u>18.0</u> feet To <u>22</u> feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet 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 _____ 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 ☒ Overbore to seal depth																																																	
6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>KOOTENAI</u> <u>NE 1/4 NE 1/4 Sec. 28 T. 47 N. R. 4 E</u>		10. DRILLERS CERTIFICATION Firm Name <u>FRED CRICK WELL DRILLERS</u> Firm No. <u>71</u> Address <u>SPIRIT LAKE IDAHO</u> Date <u>MARCH 14</u> Signed by (Firm Official) _____ and _____ (Operator) <u>Wilbert Fredrick</u>																																															

MICROFILMED

SEP 24 1990

Work started NOV 19-73 finished FEB 26 74

1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 95-8380

Date: 10/4/88

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
Y Groundwater
 ? 1. well log in file *See Groundwater Protection Sheet 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:

Y 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

To: File 95-8380

From: Groundwater Protection

Date: 9/6/88

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.
Ask permit holder when well was drilled
and notify holder of drilling permit
requirement if after July 01, 1987.

No Action Recommended.

MAY be no. & TRA Due

P.D. ?

~~MAY be~~

gr

MICROFILMED

OCT 14 1988

RECEIVED
AUG 11 1988

STATE OF IDAHO

For Office Use Only
Fee Received _____
Date _____
Receipt # _____
Receipt by _____
Reviewed by JS
Sent to region _____

DEPARTMENT OF WATER RESOURCES
No \$ level
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 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. 95-8380-

Name(s) of Permit Holder: Greenacres Development Co. (we Farm only Now)

Post Office Address: P.O. Box 141016 - Spokane, Wash. 99214

Telephone No. (509) 455-6612

Source of Water: Well

Extent of Use:

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

Irrigation 1/2 (acres) Other/Remark _____

Total rate and/or volume for which proof is submitted 1 house hold cfs _____ acre-feet
.04

Show the date water was first diverted and beneficially used under this permit: 1975

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

Fee enclosed \$ -0-
(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:

Virgil Carroll
(Name)

(509) 455-6612
(Telephone Number)

Box 141016 - Spokane, Wash. 99214
(Address)

FILED
OCT 14 1988

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.

8-8-88
Date

Greenacres Development Co., Virgil Carroll, Pres
Signature of Permit Holder (and title, if appropriate)

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

State law requires that this report be filed with the Director, Department of Water Administration within 30 days after the completion or abandonment of the well.

RECEIVED
MAR 10

Mar 30 18 10

[illegible]

USE ADDITIONAL SHEETS IF NECESSARY

FORWARD THE WHITE COPY TO THE DEPARTMENT

Form 220-7
8/82

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
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.

USE TYPEWRITER OR
BALLPOINT PEN

1. WELL OWNER

Name Virgill Carroll
Address Greene Acres Development Co
P.O. Box 141016
Spokane, Washington 99214
Owner's Permit No. _____

7. WATER LEVEL

Static water level 256 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

Cleaned out
☐ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe abandonment procedures such as
materials, plug depths, etc. in lithologic log)

8. WELL TEST DATA

☐ Pump ☐ Sailer ☒ Air ☐ Other _____
Discharge G.P.M. _____ Pumping Level _____ Hours Pumped _____
5 gpm

3. PROPOSED USE

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

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water Yes No
	From	To		
6	275	295	brown sand	X
	295	320	white coarse sand	X

4. METHOD DRILLED

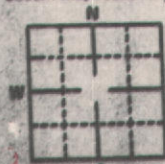
☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☐ Steel ☐ Concrete ☒ Other PVC
Thickness _____ Diameter _____ From _____ To _____
_____ inches PVC inches + 1 feet 320 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 _____ inches by _____ inches
Number _____ From _____ To _____
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
Well screen installed? ☒ Yes ☐ No
Manufacturer's name Johnson
Type _____ Model No. _____
Diameter 8 Slot size 8 Set from 305 feet to 315 feet
Diameter _____ Slot size XX Set from _____ feet to _____ feet
Gravel packed? ☐ Yes ☐ No Size of gravel _____ feet
Placed from _____ feet to _____ feet
Surface seal depth OK Material used in seal: ☐ Cement grout
☐ Bentonite ☐ Pudding 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 _____

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____
Lot No. _____ Block No. _____

County Kootenai

% Sec. 28, T. 47N, R. 4W.

10. Work started 8--30-85 finished 8-31-85

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were
compiled with at the time the rig was removed.
Coeur d'Alene Drilling, Inc. 214
Firm Name _____ Firm No. _____
P.O. Box 386
Address Hayden Lake, Idaho 83835 Date 9-02-85
Signed by (Firm Official) Bill Lindley
and
(Operator) Bill Lindley

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

OCT 14 1988

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: LB APPLICATION NUMBER: 95-8380

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.
☐ 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.

Field check by: _____

Date: _____

Comments: _____

*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT: _____

SEND COPIES TO:

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

Copies sent by: _____ Date: _____

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? _____
6/29/83 Date of priority recommended.
Special conditions of approval or cover letter. _____

By: [Signature] 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