

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08305

Priority: June 1, 1983

Maximum Diversion Rate: 0.04 CFS
Maximum Diversion Volume:¹ 4.1 AF

This is to certify, that ROSE HORNER
RONALD O. KRUSE
BARBARA KRUSE

N. 750 TRAILS END RD.
RATHDRUM, ID 83858

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated May 12, 1983; and has submitted Proof of Beneficial Use on July 21, 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>
IRRIGATION	03/15 to 11/15	0.02 CFS	3.5 AF
DOMESTIC	01/01 to 12/31	0.02 CFS	0.6 AF
	Totals	0.04 CFS	4.1 AF

LOCATION OF POINT(S) OF DIVERSION:

NWSE , Sec. 29, Township 52N, Range 04W
KOOTENAI County

PLACE OF USE: IRRIGATION

<u>TWN</u>	<u>RGE</u>	<u>SEC</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>TOTAL</u>
52N	04W	29	NWSE 1			1

Total number of acres irrigated: 1

PLACE OF USE: DOMESTIC, same as IRRIGATION use

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.

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JAN 18 1991

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08305

CONDITIONS/REMARKS:

5. Domestic use is for 1 home and household stock.

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 11TH
day of JANUARY, 1991.

Acting for

R. Keith Higginson
R. Keith Higginson, Director

RECORDED

JAN 18 1991

BEFORE THE DEPARTMENT OF WATER RESOURCES
OF THE STATE OF IDAHO

IN THE MATTER OF PERMIT NO. 95-8305 IN THE
NAME OF RONALD AND BARBARA KRUSE

)
) ORDER OF REINSTATEMENT
)
)

WHEREAS, the Department issued the above-captioned permit with the condition that proof of construction of works and application of water to beneficial use (proof of beneficial use) be submitted on or before July 1, 1988; and,

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

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

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

WHEREAS, the permit holders have provided a reasonable showing why the permit should be reinstated by submitting proof of beneficial use on July 21, 1988;

IT IS, THEREFORE, HEREBY ORDERED that Permit No. 95-8305 be REINSTATED and the priority advanced to June 1, 1983.

Dated this 19th day of October, 1988.

MICROFILMED

JAN 10 1989


L. GLEN SAXTON
Chief, Operations Bureau

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 RONALD O. OR BARBARA KRUSE or Phone _____
ROSE HERNER
Post office address N. 750 TRAILS END RD. RATHDRUM, ID 83858
2. Source of water supply GROUNDWATER which is a tributary of _____
N 1/2 NE 1/4
3. Location of point of diversion is NW 1/4 of SE 1/4 of Section 29 Township 52N
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 JAN 1 to DEC 31 (both dates inclusive)
(cfs or acre-feet per annum)
- Amount 0.02 for STOCKWATER purposes from JAN 1 to DEC 31 (both dates inclusive)
(cfs or acre-feet per annum)
- Amount 0.10 for IRRIGATION purposes from MAR 15 to NOV 15 (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. 0.16 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

- 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 8 inches; proposed depth of well is 265 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: NW 1/4 of SE 1/4 of Section 29 Township 52N
Range 4W B.M.

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

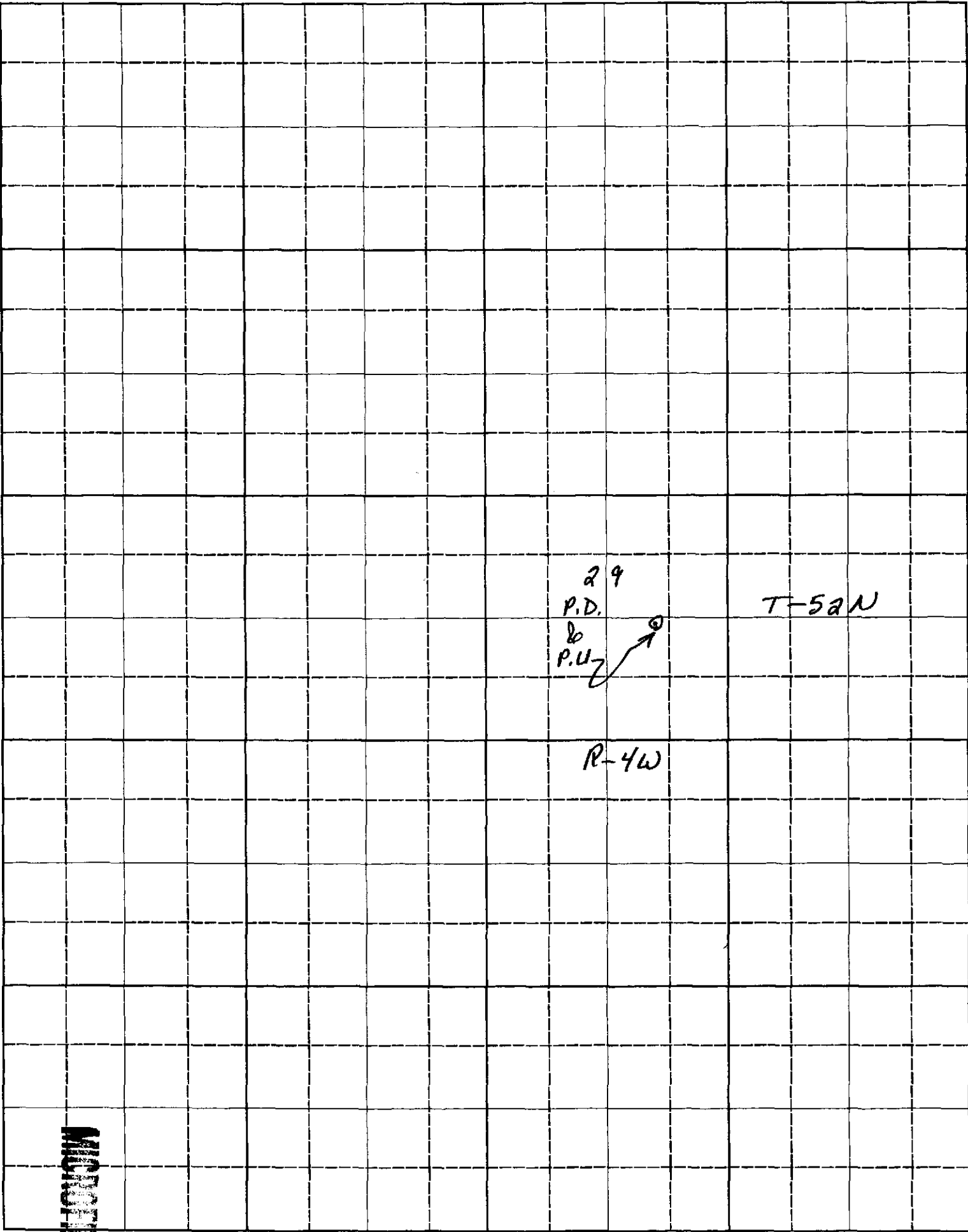
(3) List number of each kind of livestock to be watered 5 HEAD

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

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

RECORDED

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



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.

Ronald O. Kruse
(Applicant)

MICROFILMED

Proposed Priority May 12, 1983

Received by KK Date 5/12/83 Time 11:00

Preliminary check by JK Fee \$ 30.00

Received by KK Date 5/12/83 # 26711

Publication prepared by KK Date 5/19/83

Published in Coeur d'Alene Bureau

Publication dates 5/26 - 6/2/83

Publication approved [Signature] Date 6/6/83

Protests filed by: None

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by [Signature] RC

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. 95-8305, 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 July 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 15 day of July, 1983.

David R. Tuttle
Acting Chief, Operations Bureau

LICENSE REVIEW CHECKLIST

Permit No. 95-8305

Name/Address change? ok ✓
 Priority date Advance? yes no ✓
 Memo to advance no ✓
 Order to reinstate needed? yes no ✓
 Total cfs Limited by fee 004 ✓
 Limited by capacity —
 Total volume Limited by flow —
 Chart checked for AF rate/ac 3.5 ✓
 Capacity Actual measurement checked NONE
 Theoretical checked NONE
 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 ✓

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 —
 Not filed - send form —
 Not needed ✓

Comments/Changes to Examiner's Recommendations:

Domestic use for home & household stock - no stock at time of exam - covered under domestic definition.

License 10-day ✓ 30-day —

Back of field report signed? ✓
 Reviewer J. Curtis Date 11-27-90 Review time 9 min.

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT SUPPLEMENT
C O N T E N T S

RECEIVED
JUN 27 1990

Department of Water Resources

() B/U Acknowledgment Letter Sent

This Examination Report Contains the Following Documents.

(☒) Field Report (☒) Quad Sheet () Gov. Lot Plat (☒) Rules Check list
() Aerial Photo () Photo PD/PU (☒) Well Log

Number of Diagrams Attached _____ Number of Calculation Sheets Attached _____

() Correspondence (Date) _____

() Other (List) _____

Contacts: _____

Remarks: _____

INDEXED

JAN 18 1991

Exam Completed By _____ Date _____

Sr. Agent Review _____ Date _____

Regional Manager Review *RAH* _____ Date *6/12/80*

PERMIT NUMBER

95-08305

SENIOR AGENT REVIEW

Check List
for
Beneficial Use Field Report

Permit 9508905

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)
☒ 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 and Permit.
☒ 6. Irrigation (Rule 5,1,8)

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 and no more than 1/10's (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; all permitted uses not used, also 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)

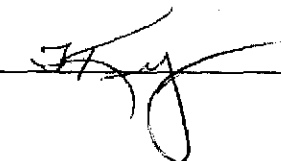
J. AUTHENTICATION

- Name, Signature, Certification Date, Exam Date.

WELL INSPECTION REPORT

- Check with permit and well log for discrepancies

Signature



Date

1-12-89

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUN 27 1990

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 95-08305

1. Owner: RONALD OR BARBARA KRUSE OR ROSE HORNER

Phone No. _____

Current Address: N 750 TRAILS END RO. RAYNDRUM, ID.

2. Accompanied by: NONE

EXAM. DATE: 4/4/89

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

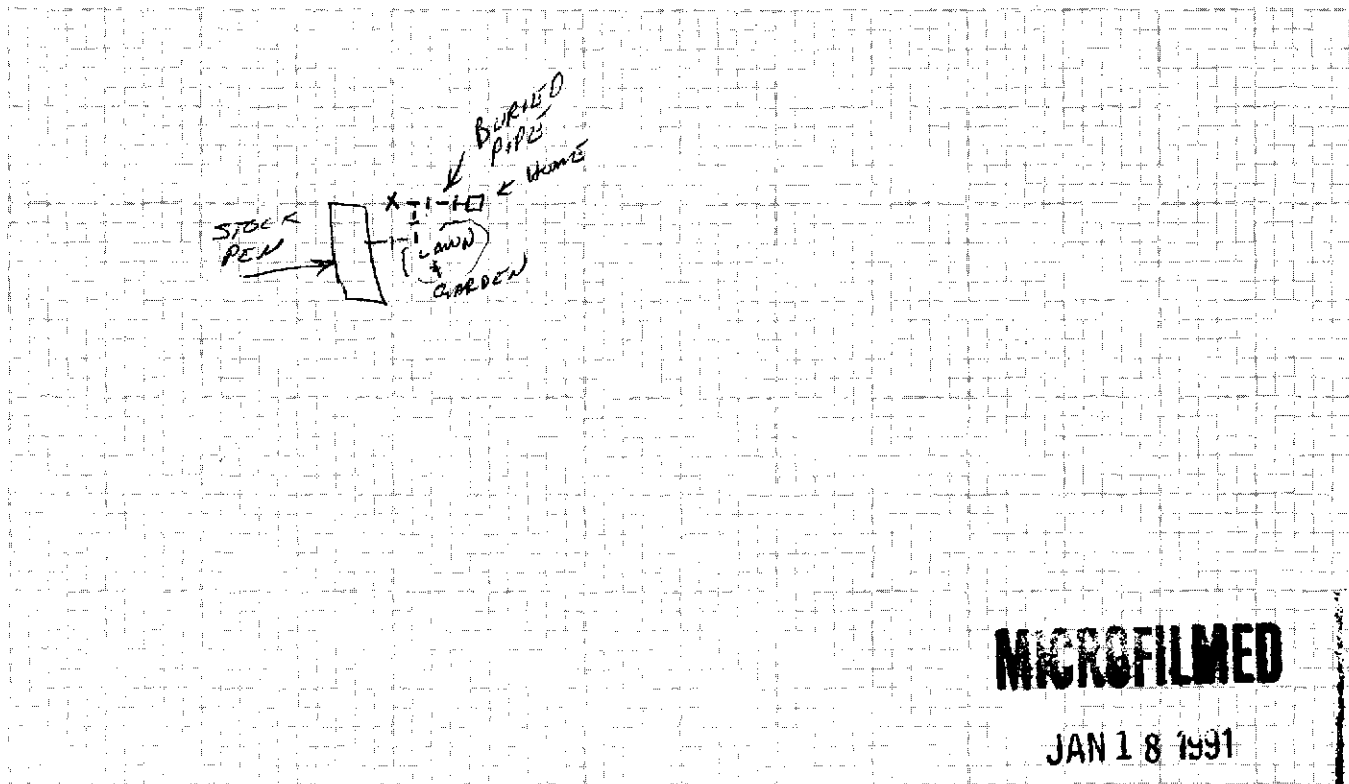
2. Other water rights with same point of diversion: NONE

☐ 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



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Scale: 1" = N.T.S.

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 CAMERA DISFUNCTION
(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.)

8" X 265' WELL, ~~PUMP~~ SUBMERSIBLE PUMP & PIPE TO HOME & GROUNDS

☐ 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
SUBMERSIBLE		UNK			

*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
		NE	NW	SE	29	52N	4W	KOOTENAI	MMP ODOMETER

6. **Place(s) of Use:**

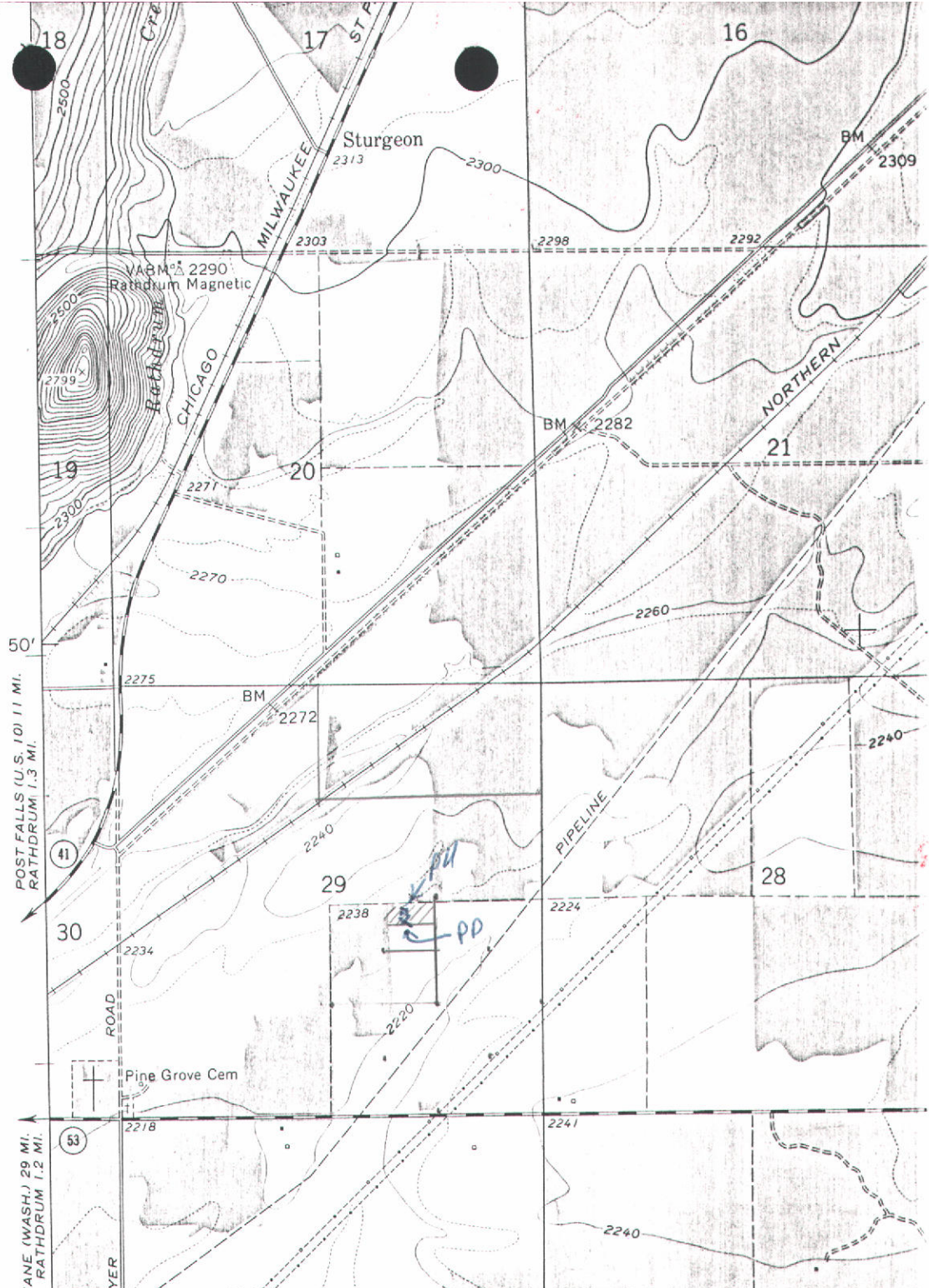
Indicate Method of Determination MMP ODOMETER

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	
52N	4W	29																105	

Do not use this space

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JAN 18 1991



NAME: RONALD KRUSE
 PD: T52N, R4W, SEC. 29, N2NE, NWSE
 PU:
 SOURCE: GROUNDWATER

PERMIT NUMBER: 95-08305
 MAP: # 27
 QUAD: E-54

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JAN 18 1991

Do not use this space

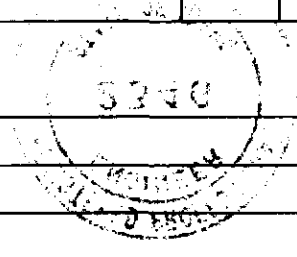
D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1. *NONE POSSIBLE*

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

2. Measurements:



E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

*one HOME
ONE ACRE
5 STOCK*

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 HOME
ONE ACRE
5 STOCK*

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JAN 18 1991

H. REMARKS AND OVERLAP REVIEW ANALYSIS

NO STOCK @ TIME OF EXAM

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
<u>IRR</u>	<u>3-15</u>	<u>11-15</u>	<u>0.02</u>	<u>3.0</u>
<u>STOCK</u>	<u>1-1</u>	<u>12-31</u>	<u>0.02</u>	<u>0.2</u>
<u>DOMESTIC</u>	<u>1-1</u>	<u>12-31</u>	<u>0.02</u>	<u>.6</u>
Totals:			<u>0.0204</u>	<u>3.8</u>

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

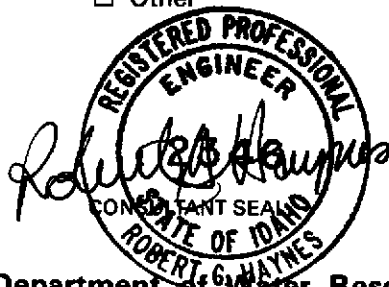
J. AUTHENTICATION

Field Examiner's Name TOM KING

Signature [Signature]

Certification Date 2/17/89

Field Report Preparation Date 4/4/89



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

SC
11-27-90

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JAN 18 1991

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. 52N, Rge. 4W,
Sec. 29, Qtr./Qtr. N²W E N W S E or Lot _____
2. Owner RONALD O. KRUSE
Address N750 TRAILS END RD, City RATHDRUM, State ID
3. Approx. date of well construction 11-4-80
Well Driller ASSOCIATED
4. Casing: Diameter 8 Condition UNK
5. Casing length above land surface UNK IN HOUSE 6" ABOVE FLOOR
6. Well depth (ft) 260 Flowing _____ Temp. _____
Access port NO
7. Condition of piping and valving UNK GOOD
8. Evidence of well seal YES CONC. SLAB
9. Shut in pressure or static water level 235
10. Evidence of leakage around the casing NONE
11. Does well need repair UNK
12. Comments WELL IN PUMPHOUSE LOCKED

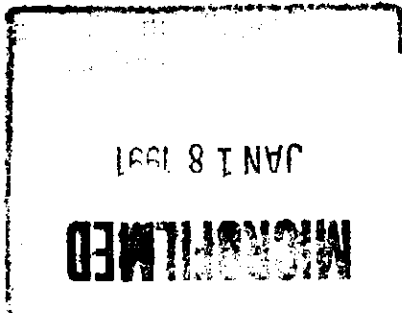
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JAN 18 1991

(OVER)

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.



Handwritten notes and a diagram. A vertical line is labeled "PRAISE RD.". To the left of the line, there are two small squares, one labeled "HOME" and one labeled "WELL". An arrow points from the "HOME" label to the "WELL" label. To the right of the line, there is a handwritten "N" with an arrow pointing upwards.

Inspected by

JK

Date

4/4/89

1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 95-8305Date: 10/17/88General Considerations:

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

Source of Water:

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

Extent of Use and Rate of Diversion:

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

Measuring Device:

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

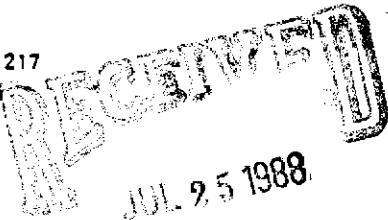
Remarks:

Proof acceptable
 Reinstated

☒	Priority Calculation:		
	Date proof received	<u>July 21, '88</u>	<u>202</u>
	Date proof due	<u>July 1, '88</u>	<u>- 182</u>
	No. of days late		<u>= 20</u>
	Priority date	<u>May 12, '83</u>	<u>+ 132</u>
	NEW PRIORITY DATE	<u>June 1, '83</u>	<u>= 152</u>

SEND FILES TO DATA ENTRY AND THEN TO MICROFILM

Form 217
03/86



Department of Water Resources

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

For Office Use Only

Fee Received 2

Date 7/21/88

Receipt #

Receipt by

Reviewed by JK *gs*

Sent to region

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. 95-8305

Name(s) of Permit Holder: RONALD OR BARBARA KRUSE

Post Office Address: N. 750 TRAILS END RD RATHDRUM, ID 83858

Telephone No. 687 1372

Source of Water: GROUND WATER

Extent of Use:

Domestic 1 (number of households) Stockwater 5 (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: MAY 12, 1985

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

Fee enclosed \$
(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:

(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

Date 7/21/88 Signature of Permit Holder (and title, if appropriate) Ronald O. Kruse

To: File 95-8305

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.

*Original log not found - but
well was deepened in 1980.*

OK

JTB.

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JAN 10 1989

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>Ron & Vera Kruse</u> Address <u>Rt 3 Box 817 Rantonn, Ia. 53557</u> Owner's Permit No. _____	7. WATER LEVEL Static water level <u>235</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 <u>cold</u> OF. Quality <u>good</u>																																
2. NATURE OF WORK ☐ New well ☒ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____	8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <th style="width: 33%;">Discharge G.P.M.</th> <th style="width: 33%;">Pumping Level</th> <th style="width: 33%;">Hours Pumped</th> </tr> <tr> <td style="text-align: center;"><u>20</u></td> <td style="text-align: center;"><u>—</u></td> <td style="text-align: center;"><u>2 hrs</u></td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>20</u>	<u>—</u>	<u>2 hrs</u>																										
Discharge G.P.M.	Pumping Level	Hours Pumped																															
<u>20</u>	<u>—</u>	<u>2 hrs</u>																															
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; margin-top: 5px;"> <thead> <tr> <th rowspan="2">Hole Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th rowspan="2">Water Yield No.</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">8"</td> <td style="text-align: center;">2'4"</td> <td style="text-align: center;">26'2"</td> <td style="text-align: center;">Silt/cl</td> <td style="text-align: center;">X</td> </tr> <tr> <td colspan="5" style="height: 100px; vertical-align: top; padding: 5px;"> 8" casing is 235' shaped at about 10' REC MAR 20 1961 Department of Water Resources </td> </tr> </tbody> </table>	Hole Diam.	Depth		Material	Water Yield No.	From	To	8"	2'4"	26'2"	Silt/cl	X	8" casing is 235' shaped at about 10' REC MAR 20 1961 Department of Water Resources																			
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5. WELL CONSTRUCTION <u>Ft 7 in Cas 49</u> Casing schedule: ☐ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <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; margin-top: 5px;"> <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 _____ Material used in seal: ☐ Cement grout ☐ Puddling clay ☐ Well cuttings 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	
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6. LOCATION OF WELL Sketch map location must agree with written location. Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kearney</u> <u>AW & SE & Sec. 29, T.52, R. 4 E</u>	10. Work started <u>11/4/60</u> finished <u>11/4/60</u> 11. DRILLERS CERTIFICATION <u>cb dl</u> I/We certify that all minimum well construction standards were complied with at the time the rig was removed. <u>Associated W & E</u> Firm Name <u>Dickens Inc</u> Firm No. <u>246</u> Address <u>Box 323 C-69</u> <u>Dec 14/60</u> Signed by (Firm Official) <u>Paul Dickens</u> and (Operator) <u>Paul Dickens</u>																																

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

14N 10 1252

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: JK

APPLICATION NUMBER: 95-8305

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: 6-13-83 ✓
☐ Yes ☐ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 6/3/83 ✓
☒ 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: 5/12/83
Special conditions of approval or cover letter. _____

By: RYA

Date: 6/17/83

STATE OFFICE REVIEW:

SLW/LT

26

- ☐ See attached sheet for more information.

By: Rein

Date: 7/12/83

RECEIVED
JUL 7 1983

Department of Water Resources

MICROFILMED

POINT OF DIVERSION AND STREAM INDEX INFORMATION

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

IDAHO STREAM CODE INDEX

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IDAHO STREAM CODE INDEX

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
COMMENCEMENT OF WORKS

Permit No. 95-8305 ROSE HORNER
Name(s) of Permit Holder(s): RONALD OR BARBARA KRUSE
Post Office Address: N. 750 TRAILS END RD.
RATHDRUM ID 83850 Tel. No. _____

☒ I hereby certify that construction of diversion works for the above referenced permit began on 1971 (date). I understand that I must continue to develop the water system with due diligence to maintain a valid permit.

☐ I hereby certify that construction of diverting works on the above referenced project has not yet begun due to the following reason beyond my control*:

*Note: A financing difficulty is not an acceptable reason.

5/12/83
Date

Ronald O. Kruse
Signature of Permit Holder

95-8305-

KRUSE, RONALD O. &/or BARBARA
HORNER, ROSE

N. 750 TRAILS END RD., RATHDRUM, ID 83858

Source: GROUNDWATER

Date Filed: 05/12/1983

Diversion Pt: NWSE Sec 29 T 52N R 04W

Use: IRRIGATION	(0.10 CFS)
STOCKWATER	(0.02 CFS)
DOMESTIC	(0.04 CFS)

In: NWSE Sec 29 T 52N R 04W FOR 5 ACRES

MICROFILMED