

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08182

Priority: May 12, 1982

Maximum Diversion Rate: 0.04 CFS
Maximum Diversion Volume:¹ 15.3 AF

This is to certify, that JAY T. STILKEY
RICHARD STILKEY
LYNNE STILKEY

N. 150 SEELEY ST.
POST FALLS, ID 83854

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated May 12, 1982; and has submitted Proof of Beneficial Use on August 11, 1989. 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	0.04 CFS	10.5 AF
DOMESTIC	01/01 to 12/31	0.04 CFS	4.8 AF
	Totals	0.04 CFS	15.3 AF

LOCATION OF POINT(S) OF DIVERSION:

NWSE , Sec. 5, Township 50N, 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>
50N	04W	5	NWSE	3		3

Total number of acres irrigated: 3

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.

AUG 23 1991

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08182

CONDITIONS/REMARKS:

5. Domestic use is for 8 homes.

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 22 1991

RECEIVED

MAY 22 1987

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

REQUEST FOR EXTENSION OF TIME

RECEIVED

MAY 28 1987

Department of Water Resources
Northern District Office

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

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

Permit No. 95-8182

Name(s) of Permit Holder: Jay T. Richard & Lynne Stilkey

Post Office Address: North 150 Seeley

Post Falls, Id. 83854 Telephone No. 765-6851

Date Proof Is Due: June 1, 1987

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

Water system consists of one well,
supplying 5 homes

Costing \$ 12000⁰⁰

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

Not enough time to complete project

Permit holder(s) request an extension to June 1, 1992.
(1 yr. minimum)

Jay T. Stilkey
(Signature)*
*IF OTHER THAN PERMIT HOLDER,
POWER OF ATTORNEY MUST BE SUPPLIED.

FEE: \$15.00

ACTION OF THE DEPARTMENT OF WATER RESOURCES

IT IS HEREBY ORDERED that the above request for extension of time be APPROVED and the time within which to submit proof of beneficial use be extended to June 1, 1990.

Signed this 18th day of June, 19 87.

J. 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 Jay L or Richardson Lynne Stilbey Phone 765-9060
Post office address N 155 Seeley Post Falls Idaho 83854
2. Source of water supply Groundwater which is a tributary of _____
3. Location of point of diversion is NW $\frac{1}{4}$ of SE $\frac{1}{4}$ of Section 5 Township 50N
Range 4W B.M. Kootenai County, additional points of diversion if any: _____

4. Water will be used for the following purposes:

Amount 0.13 for Domestic purposes from 1/1 to 12/31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount 0.08 for Irrigation purposes from 3/15 to 11/15 (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. 0.13 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: NW $\frac{1}{4}$ of SE $\frac{1}{4}$ of Section 5 Township 50N

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 8.

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

MICROFILMED

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	
50N	4W	5														4			4

Total number of acres to be irrigated 4

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 app

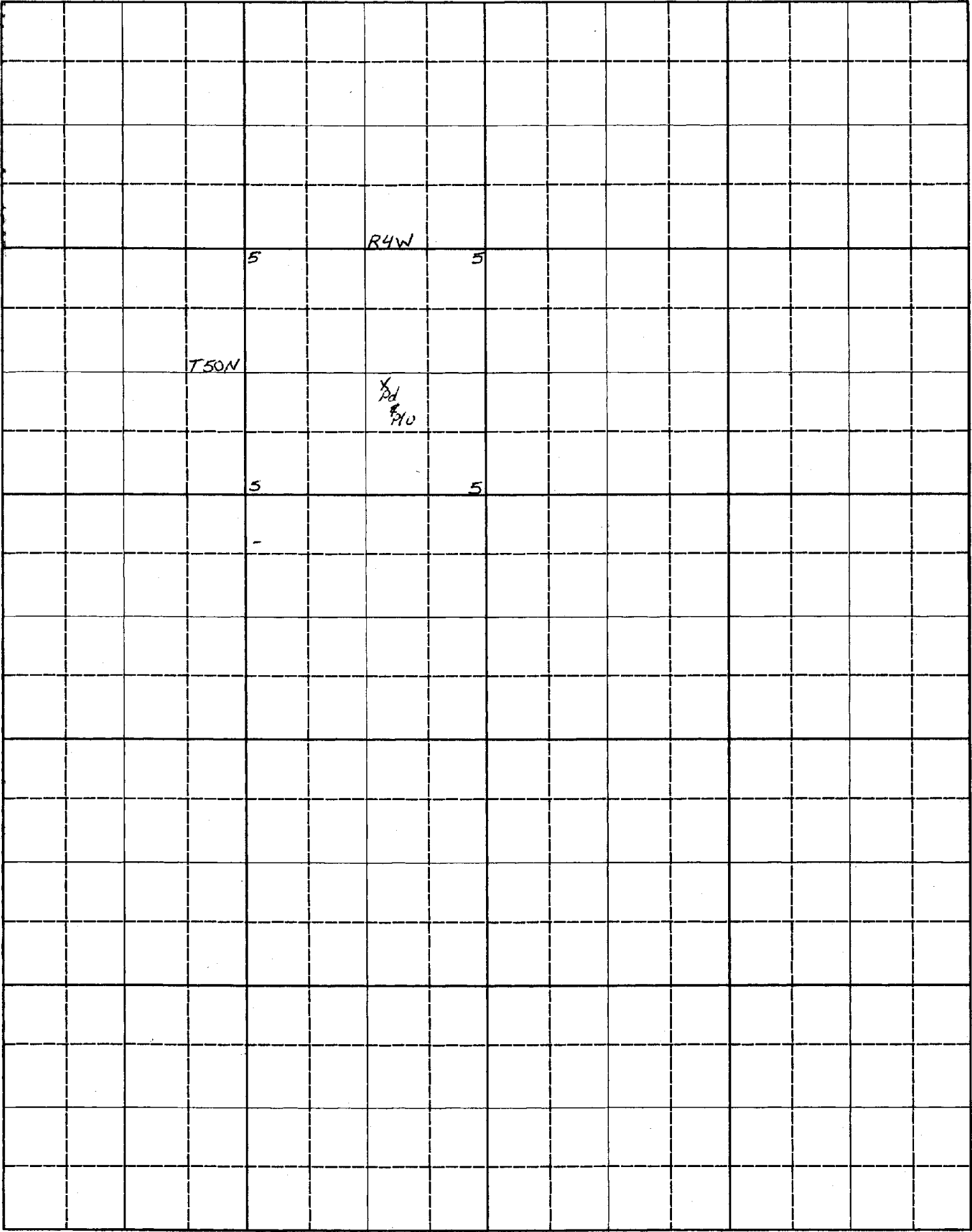
b. Who owns the land to be irrigated or place of use app

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 _____

MICROFILMED

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.

MICROFILMED

Jay T. Stilberg
(Applicant)

Proposed Priority 5/12/1982

Received by AB Date 5/13/82 Time 3:22

Preliminary check by KK Fee \$ 30.00

Receipted by AB Date 5/13/82 (21301)

Publication prepared by Mr Date 5/13/82

Published in Cosmo & Alpine Press

Publication dates 5/20 & 27/82

Publication approved Mr Date 6/2/82

Protests filed by: none

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by RC 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. 95-8182, 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 June 1, 19 87.
- 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 22nd day of June, 1982.

A. Glen Saxton
Chief, Operations Bureau

MICROFILMED

LICENSE REVIEW CHECKLIST

Permit No. 95-8182

Name/Address change? ok ☒

Priority date Advance? yes no ☒

Memo to advance
Order to reinstate needed? yes no ☒

Total cfs Limited by fee .04

Limited by capacity

Total volume Limited by flow
Chart checked for AF rate/ac 3.5

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 ☒

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 **AUG 23 1991**

Add'l fee required

Not filed

Not needed ☒

Comments/Changes to Examiner's Recommendations:

License 10-day 30-day

Back of field report signed?

Reviewer S. Curtis Date 7/24/91 Review time 6 min.

SENIOR AGENT REVIEW

Check List
for
Beneficial Use Field Report

Permit 95-08182

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. Compare USGS/Land Survey? Aerial Photos/Permit.
Method of determination,
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/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

David King

Date

12/26/90

CONVERSATION MEMORANDUM

Telephone _____ In Person ☒ Date 12/18/90

Employee Allen Beardslee Permit # 95-08182

Telephone Number 765-9060 Contact Name _____

Appointment Date 12/18 Time 11 AM Place NISS SEELEY

Are all permitted uses developed? Yes ☒ No _____

Are there existing water rights used for the same purpose? Yes _____ No ☒

List _____

How many points of diversion are used? ONE

If multiple uses are listed, are all uses supplied by one system? ☒ Yes No

Size of motor used for each pd? 1.5 H.P. - WELL, 1.5 H.P. @ CISTERN

Estimated flow at each point of diversion? 18 GPM

Acres irrigated by each PD? 1/2 ACRE PER HOME

Estimate of depth to water? _____

Size, Number, Length and type of laterals used? (vinyl hose, aluminum pipe etc.)

?

Size, Length and type of Mainline ?

Pressure at Well head? ? Pressure at Sprinkler? _____

Type of Sprinkler? _____ Gage of Orifice _____

Have Conditions of approval been Complied with? Yes _____ No _____

Directions for finding site/appointed meeting place. _____

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Remarks _____

State of Idaho
Department Of Water Resources
WELL INSPECTION FORM

If well is associated with water right, provide WR Permit No. 95-08182

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. 50 N, Rge. 4W. Sec. 5, NW $\frac{1}{4}$ SE $\frac{1}{4}$ Gov. Lot _____

2. Owner: STILKEY, JAY

Address: N. 155 SEELEY, POST FALLS, ID 83854,

City _____, State _____

3. Casing $\geq$ 12 inches above ground: Yes X No _____

4. Access Port:	Y <u>X</u> N _____	Static Water Level:	_____
Pressure Gauge:	Y <u>X</u> N _____	Casing Diameter:	<u>6"</u>
Flowing:	Y _____ N <u>X</u>	Temperature:	_____

5. Are there any obvious construction problems that may be a source for contamination or waste of water: Y _____ N X

If answer to Item 5 is Yes, describe in remarks and attach photo.

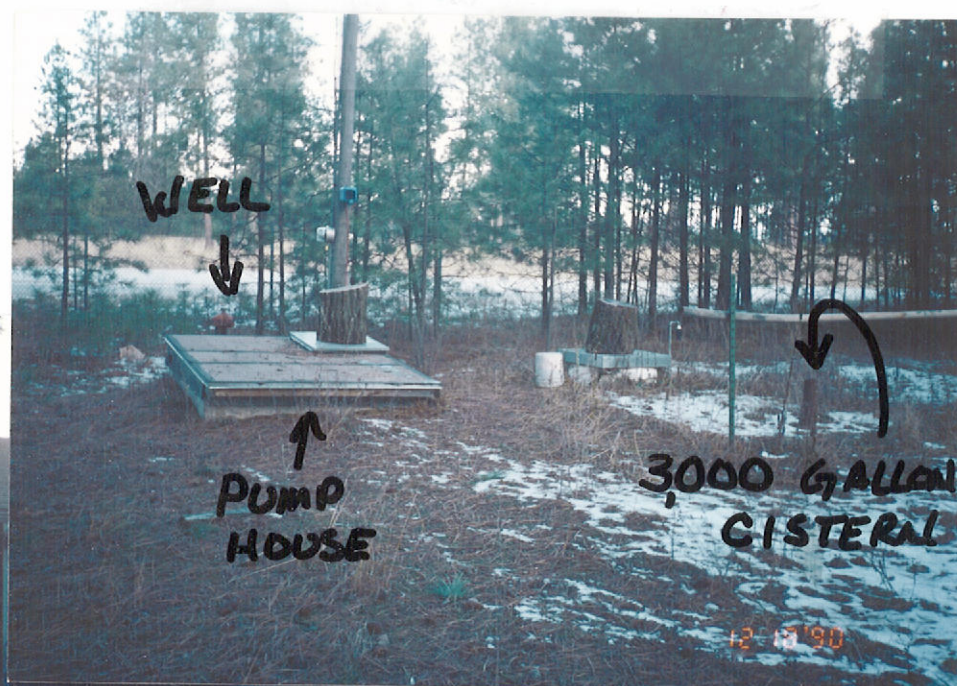
Remarks : _____

REC-120

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WR # 95-0832

NAME: STILKEY, JAY



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WR #

JAY

who's who's who's

#1



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WR #

JAY



AUG 23 1991

WR #

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JAY



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JAY



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WR #

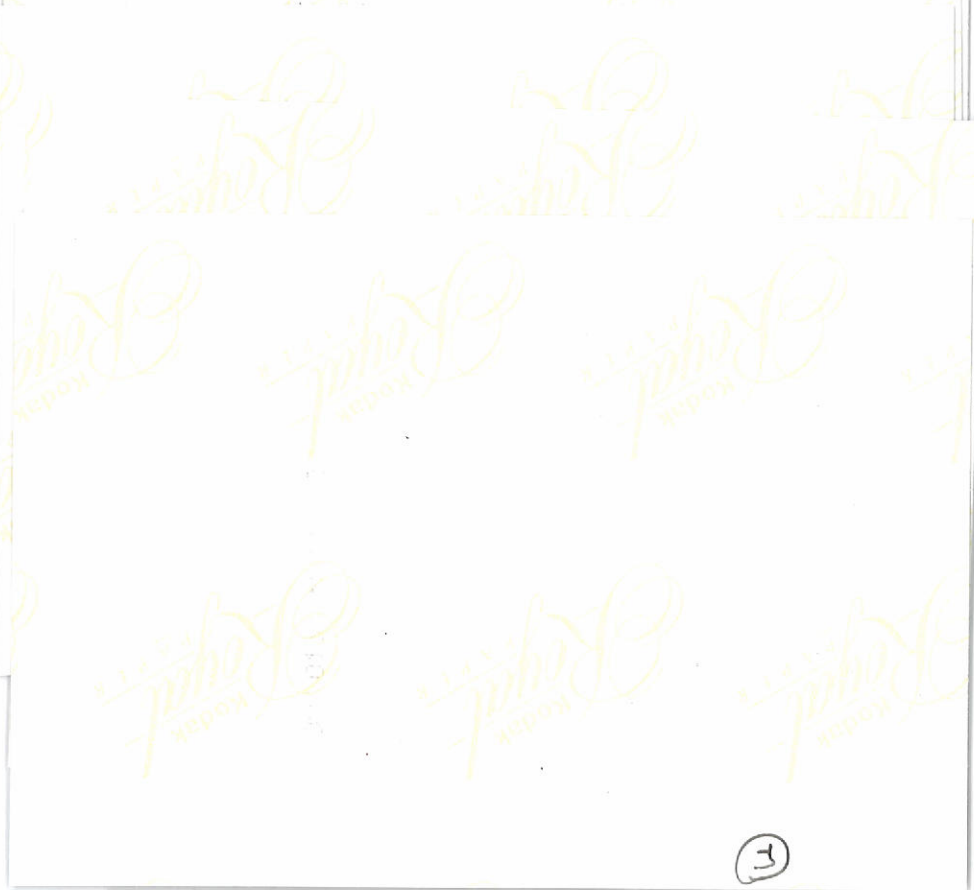
JAY



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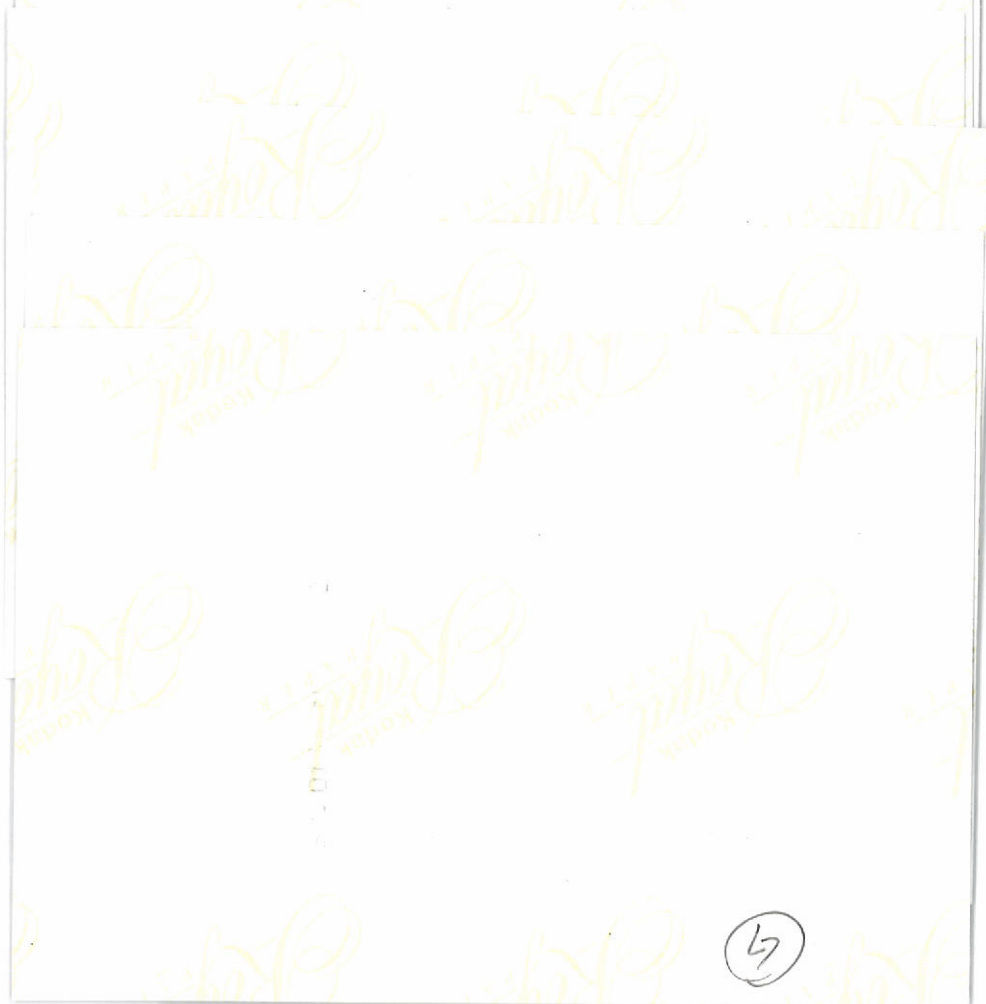
WR #

JAY



WR #

JAY



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BURIED
LATERAL
LINE 1.0'

#5678

#5664

BURIED
MAIN LINE
1.5"

WELL &
CISTERN

000-009-A
9.960 AC.

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NOV 8 1989

NORTHERN REGION
IDWR

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AUG 23 1991

U.S. 10 Westbound

U.S. 10 Eastbound

R/W 1.402 AC.

Mc GILLAN

R/W 1.630 AC.

0-500

Abandoned

44578 Road

Abandoned

County

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15	16

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

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JUN 24 1991

Department of Water Resources

A. GENERAL INFORMATION

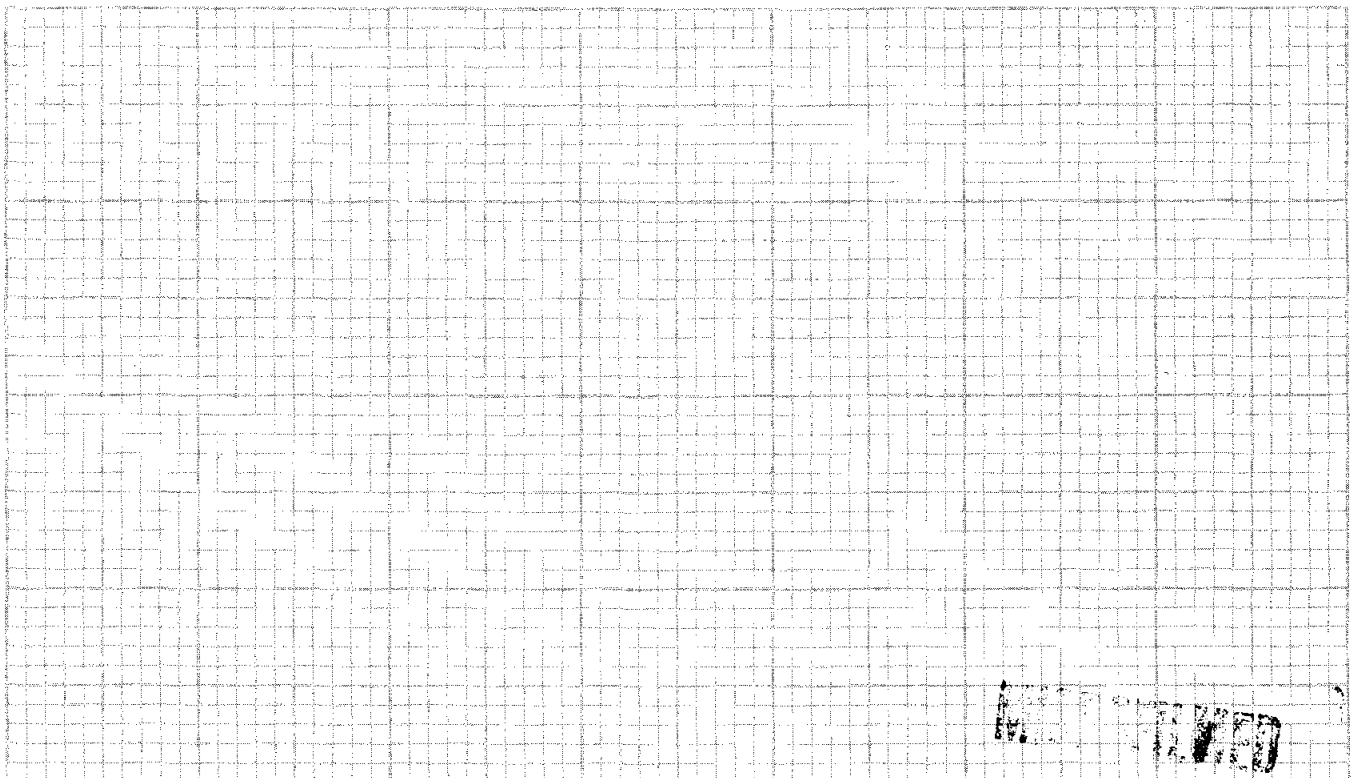
1. Owner: Jay T. / Richard / Lynn Stilkey Permit No. 95-08182
Current Address: N. 150 SEELEY - POST FALLS, ID. 83851 Phone No. 765-83851 / 9060
2. Accompanied by: JAY STILKEY EXAM. DATE: JAN. 18, 1990
Address: SAME Phone No. 765-9060
Relationship to Permit Holder: OWNER
3. Source: GROUNDWATER tributary 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" = _____

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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.)

WELL WILL PUMP 1.5 GPM TO CISTERN (3,000 GAL HOLDING TANK) THERE IS A 1.5 H.P. PUMP IN WELL, & 1.5 H.P. PUMP IN HOLDING TANK. THE WELL IS 235' DEEP. BOTH PUMPS ARE SUBMERSIBLE. THE WATER IS PUMPED FROM THE WELL TO HOLDING TANK (CISTERN) AND PIPED TO LIGHT HOMES. THE MAIN LINE CONSISTS OF 1.5" BURIED PIPE, THE LATERALS ARE 1.0" BURIED PIPE.

☐ 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
WELL	JACUZZI	1.5	2E0700781		354021/A
HOLDING TANK	RED JACKET	1.5	606-150N1		

*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	5	50N.	4W.	KOOTENAI	U.S.G.S. QUAD MAP (7.5 min.)

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	
50N.	4W.	5													D				
50N.	4W.	5													3				3 ACRES

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: NONE

2. Alternate Method for Checking Purposes: $Q = \frac{(8.8)(2)(h_p)}{h_s + h_o} - \frac{(8.8)(.70)(1.5)}{210} = 0.04 \text{ cfs}$

F. PUMP EFFICIENCY DATA (Optional)

Discharge Pressure: _____ psi x 2.31 = _____ ft (1); Dynamic pumping level: _____ ft (2)

Total Head: (1) + (2) = _____ (3); Flow rate: _____ cfs (4)

Water HP: (3) x (4) ÷ 8.8 = _____ (5)

Meter Input KW: 3.6 x _____ KH x _____ CTR or _____ MULT x _____ PTR x _____ N/ _____ T = _____ (6)

Meter Input HP: (6) x 1.34 = _____ (7)

Panel Input KW: _____ Ave PF x _____ Ave Volts x _____ Ave Amps x .001732 = _____ (6)

Panel Input HP: (6) x 1.34 = _____ (7) Efficiency: (5)/(7) x 100 = _____ %

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

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

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

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

2. Volume Calculations for Other Uses:

8 HOMES .6 AFA PER HOME = 4.8 AFA

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H. REMARKS AND OVERLAP REVIEW ANALYSIS

THE PUMP FROM THE CISTERN RUNS 40-60 P.S.I. THE DERIVATED ~~ARE~~
~~LISTED ARE BASED ON 1/2 ACRE OF IRRIGATION OF LAWN GARDEN PER HOME.~~ THE
DIVERSION RATE OF 0.04 GFS WILL PROVIDE SUFFICIENT WATER TO IRRIGATE
3 ACRES OF LAWNS AND GARDENS FOR THE EIGHT HOMES.

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
DOMESTIC	JAN. 1	DEC. 31	0.04	4.8
IRRIGATION	MARCH 15	NOV. 15	0.04	10.5
Totals:			0.04	15.3

TDR

2. Recommended Amendments

☐ Change P.D. as reflected above

☐ Add P.D. as reflected above

☒ None TDR

☐ Change P.U. as reflected above

☐ Add P.U. as reflected above

☐ Other

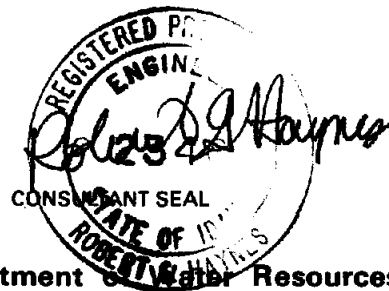
J. AUTHENTICATION

Field Examiner's Name ALLEN BEARDSLEE

Signature Allen Beardslee

Certification Date 4/16/90
DECEMBER 18, 1990

Field Report Preparation Date DECEMBER 18, 1990



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

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1/00

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 95-8182

Date: 10-30-1989

General Considerations:

Y Name same as permit
Y Signature the same as permit holder
X 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 - *no well log found in microfilm*
_____ 2. ~~A~~ drilling permit
N/A 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?
Y Has one been installed?
Y Waiver or modification of measuring device requested

Remarks:

*Well was drilled about 1962
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

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STATE OF IDAHO

Department of Water Resources

DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

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NORTHERN REGION
IDWR

For Office Use Only
Fee Received N/A
Date _____
Receipt # _____
Receipt by _____
Reviewed by _____
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. 95-8582 95-8182

Name(s) of Permit Holder: Jay T. or Richard or Lynne Stilkey

Post Office Address: N. 150 Seeley Post Falls, Id. 83854

Telephone No. 765-6851

Source of Water: Groundwater

Extent of Use:

Domestic 8 (number of households) Stockwater _____ (number and type of stock)

Irrigation 4 (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: 1962 approx.

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

Flow Measurement Port: Required? Yes / No
Installed? Yes X No

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

Same as above.

(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.

NOV 24 1989

8/9/89

Date

Jay T Stilkey
Signature of Permit Holder (and title, if appropriate)

STAFF REVIEW SHEET - EXTENSION OF TIME

Permit No. 95-8182Reviewed by [Signature]Date 6-18-1987

BASIC INFORMATION

y Date stamp received
y Extension received timely
(not prior to 6 month before proof due date or after reinstatement period)
y Fee received and receipted
y Name and signature same as permit
N Address change (indicate on coding sheet)

BASIS FOR EXTENSION REQUEST

y Has adequate work been completed to demonstrate due diligence?
y Has the cost incurred been adequate to demonstrate an intent to complete the project?
N/A Has the permit been involved in litigation?
a. Swan Falls _____ Dismissed from Swan Falls _____
Other _____ Identify _____
b. Is supporting documentation needed to complete the file? _____
Requested _____
c. Calculate the period of delay

Date litigation completed _____

Date litigation began _____

Total period of delay = _____

Present proof due date + _____

NEW PROOF DUE DATE = _____

N/A Is delay by a government agency?
Is supporting documentation needed to complete the file? _____
Requested? _____

ACTION TAKEN - Recommend approval based on due diligence for 3 yrs.

Special conditions or remarks:

/ Reinstatement Date extension received _____ = _____
Proof due date _____ = _____
No. of days late _____ = _____
Priority date _____ = + _____
ADJUSTED PRIORITY DATE _____

/ Prepare coding sheet
/ Change rolodex cardf

MICROFILMED

JUL 10 1987

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: KK

APPLICATION NUMBER: 95-8182

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: 6/9/82
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 5/28/82
☒ 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? _____
5/12/82 Date of priority recommended.
☒ Special conditions of approval or cover letter. _____

By: RWH Date: 6/8/82

OFFICE REVIEW:

- SW/LI2 26
☐ See attached sheet for more information.
By: RWH Date: 6/15/82

RECEIVED
JUN 10 1982