

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08069

Priority: August 26, 1981

Maximum Diversion Rate: 0.08 CFS
Maximum Diversion Volume:¹ 14.1 AF

This is to certify, that RALPH JACOBS
P.O. BOX 506

HAYDEN LAKE, ID 83835 has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated February 4, 1981; and has submitted Proof of Beneficial Use on June 27, 1989. An examination indicates that the works have a diversion capacity of .080 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	0.08 CFS	10.5 AF
DOMESTIC	01/01 to 12/31	0.08 CFS	3.6 AF
	Totals	0.08 CFS	14.1 AF

LOCATION OF POINT(S) OF DIVERSION:

NWNW , Sec. 31, Township 53N, 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>
53N	04W	31	NENW 1	NWNW 1	SWNW 0.5	3
			SENW 0.5			

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.

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JAN 17 1991

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08069

CONDITIONS/REMARKS:

5. This right when combined with all other rights shall provide no more than .02 cfs per acre nor more than 3.5 afa per acre for the lands above.
6. Domestic use is for 6 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 21st day of December, 1990.

Acting Dir J. Glen Saylor
R. Keith Higginson, Director

MICROFILMED

JAN 17 1991

BEFORE THE DEPARTMENT OF WATER RESOURCES
OF THE STATE OF IDAHO

IN THE MATTER OF PERMIT NO. 95-8069)

IN THE NAME OF RALPH JACOBS)

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 March 1, 1986; and,

WHEREAS, the Department granted a request for extension of time until March 1, 1988; and,

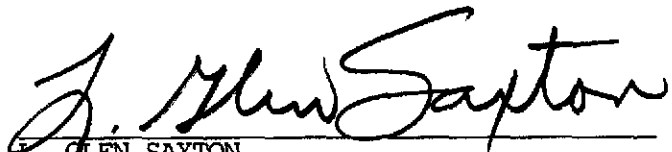
WHEREAS, the Department notified the permit holder by certified mail that proof was due and instructed the permit holder of the steps to be taken to submit the proof of beneficial; and,

WHEREAS, Section 42-218a of the Idaho Code provides that a permit may be reinstated upon a showing of reasonable cause; and,

WHEREAS, the permit holders have provided a reasonable showing why the permit should be reinstated by submitting an acceptable proof of beneficial use and licensing examination fee on June 27, 1989;

IT IS, THEREFORE, HEREBY ORDERED that Permit No. 95-8069 be REINSTATED and the priority advanced to August 26, 1981.

Dated this 17th day of July, 1989.


E. GLEN SAXTON
Chief, Water Allocations Bureau

MICROFILMED

SEP 25 1989

RECEIVED

JUN 9 1986

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

For Office Use Only
\$15 FEE Received by 18
Date 6-9-86
Receipt # 37805

REQUEST FOR EXTENSION OF TIME

Department of Water Resources

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. 95-8067

Name(s) of Permit Holder: Ralph L. Jacobs

Post Office Address: E. 725 Twining Rd. Rothdum, ID 83858

Telephone No. 208-687-0029

Date Proof is Due: _____

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".)

We've drilled, water lines run to parcels
6, 5, 6, 7

Costing \$ 13,000.00

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

Parcels # 3-4 not sold to date

Permit holder(s) request an extension to 3/26, 19 91. Ralph L. Jacobs
(1 yr. minimum) (Signature)*

FEE: \$15.00

*IF OTHER THAN PERMIT HOLDER,
POWER OF ATTORNEY MUST BE SUPPLIED.

ACTION OF THE DEPARTMENT OF WATER RESOURCES

MICROFILMED

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 is extended to March 1, 1989.

IT IS FURTHER ORDERED that the permit be REINSTATED and the priority advanced to March 31, 1981, pursuant to Sec. 42-218a, Idaho Code.

Signed this 21st day of July, 19 86.

J. Glen Saxton
Chief, Operations Bureau

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

APPROVED

1. Name of applicant RALPH JACOBS Phone 687-0029
Post office address RT. 4 Box 266 Rathdeum Id.
2. Source of water supply GROUND WATER which is a tributary of _____
3. Location of point of diversion is NW $\frac{1}{4}$ of NW $\frac{1}{4}$ of Section 31 Township 53 N
Range 4 W B.M. KOOTENAI County, additional points of diversion if any: _____

4. Water will be used for the following purposes:

Amount 0.12 for DOMESTIC purposes from JAN. 1 to DEC. 31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount 0.08 for IRRIGATION purposes from MAY 1 to NOV 1 (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. 0.20 cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. well & water line

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 280 feet.

7. Time required for the completion of the works and application of the water to the proposed beneficial use is 3 1/2 years (minimum 1 year — maximum 5 years).

8. Description of proposed uses: PARTS of

a. If water is not for irrigation:

(1) Give the place of use of water: NW $\frac{1}{4}$ of NW $\frac{1}{4}$ of Section 31 Township 53 N
NE SE SW
Range 4 W 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 7.

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

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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	
53N	4W	31					1	1	1	1									4

Total number of acres to be irrigated 4

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

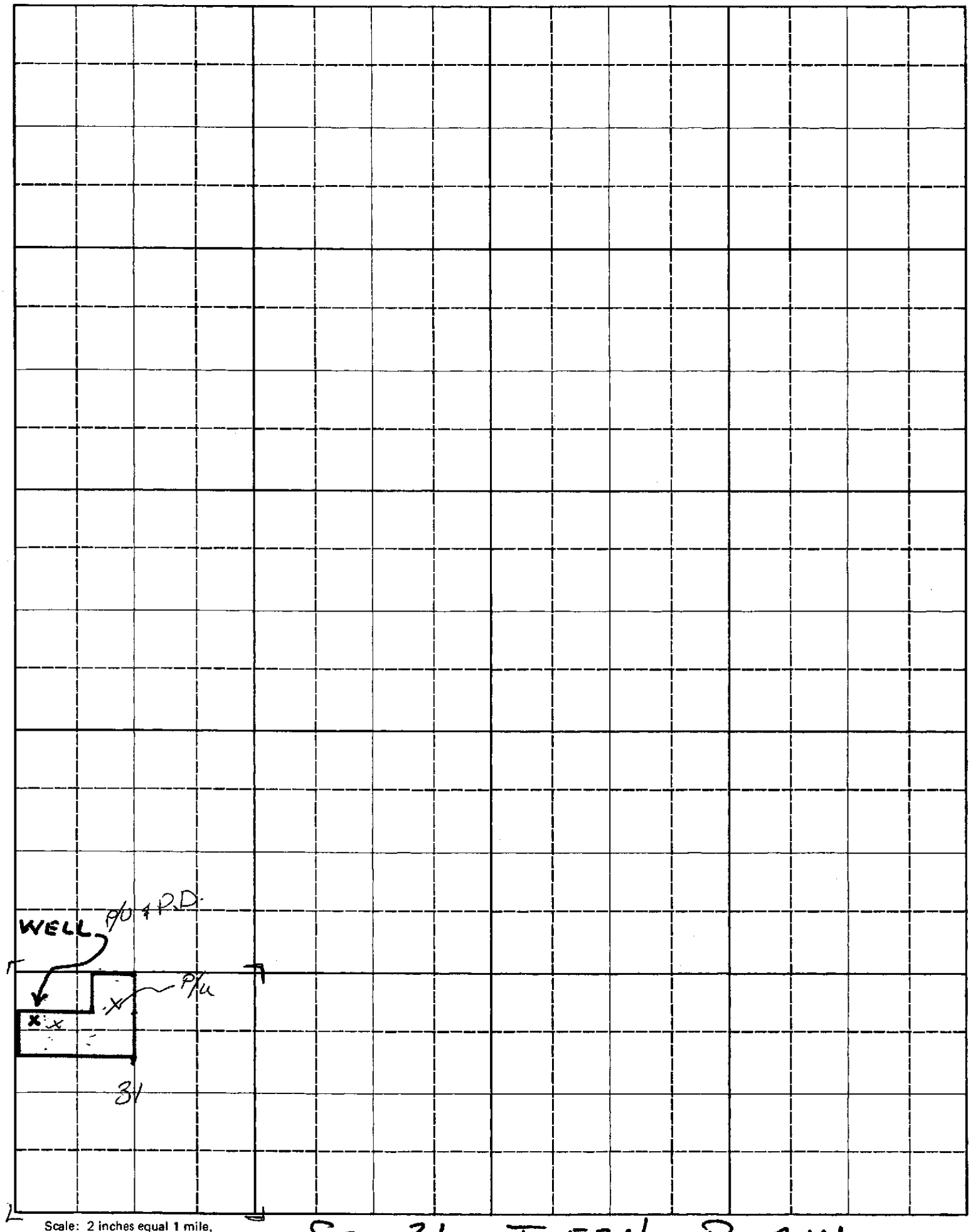
9. a. Who owns the property at the point of diversion RALPH JACOBS

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

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.



Scale: 2 inches equal 1 mile.

SEC. 31 T. 53N R. 4W

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.

Ralph Jacob
(Applicant)

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Proposed Priority

2/4/81

MICROFILMED

Received by JK Date 2-4-81 Time NOON

Preliminary check by TK Fee \$ 30⁰⁰

Received by pm Date 2/4/81 (15560)

Publication prepared by pm Date 2/5/81

Published in Coeur d'Alene Press

Publication dates 2/12-19/81

Publication approved pm Date 3/2/81

Protests filed by: NONE

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by RAA TK

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. 95-8069, 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 March 1, 19 86.
 - 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:

Witness my hand this 13th day of March, 1981.

A. Glen Saxton
Chief, Operations Bureau

LICENSE REVIEW CHECKLIST

Permit No. 95-8069

Name/Address change? ok ☒

Priority date Advance? yes no ☒

Memo to advance

Order to reinstate needed? yes no ☒

Total cfs Limited by fee ☒

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 N/A

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 3/15-11/15

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 <u> </u>	Dates/Misc. -
W.Master control <u> </u>	Water Dist <u> </u>
Overlap <u>230</u>	App Rec'd <u> </u>
Water quality <u> </u>	Proof Rec'd <u> </u>
Other <u> </u>	

CHECK FOR ADJ. CLAIM

Needed according to proof filed

Filed - needs amended

Not filed - send form

Not needed ☒

Comments/Changes to Examiner's Recommendations: **MICROFILMED**

 JAN 17 1991

License 10-day ☒ 30-day

Back of field report signed? ☒

Reviewer S. Carter Date 11-26-90 Review time 10 min.

SENIOR AGENT REVIEW

RECEIVED
JUN 27 1990

Check List
for
Beneficial Use Field Report

Department of Water Resources

Permit 95-08069

☒ **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 and Permit.
☒ 6. Irrigation (Rule 5,1,8) method of determination

☒ **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 Tom D. King Date 10/23/89

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUN 27 1990

Department of Water Resources

A. GENERAL INFORMATION

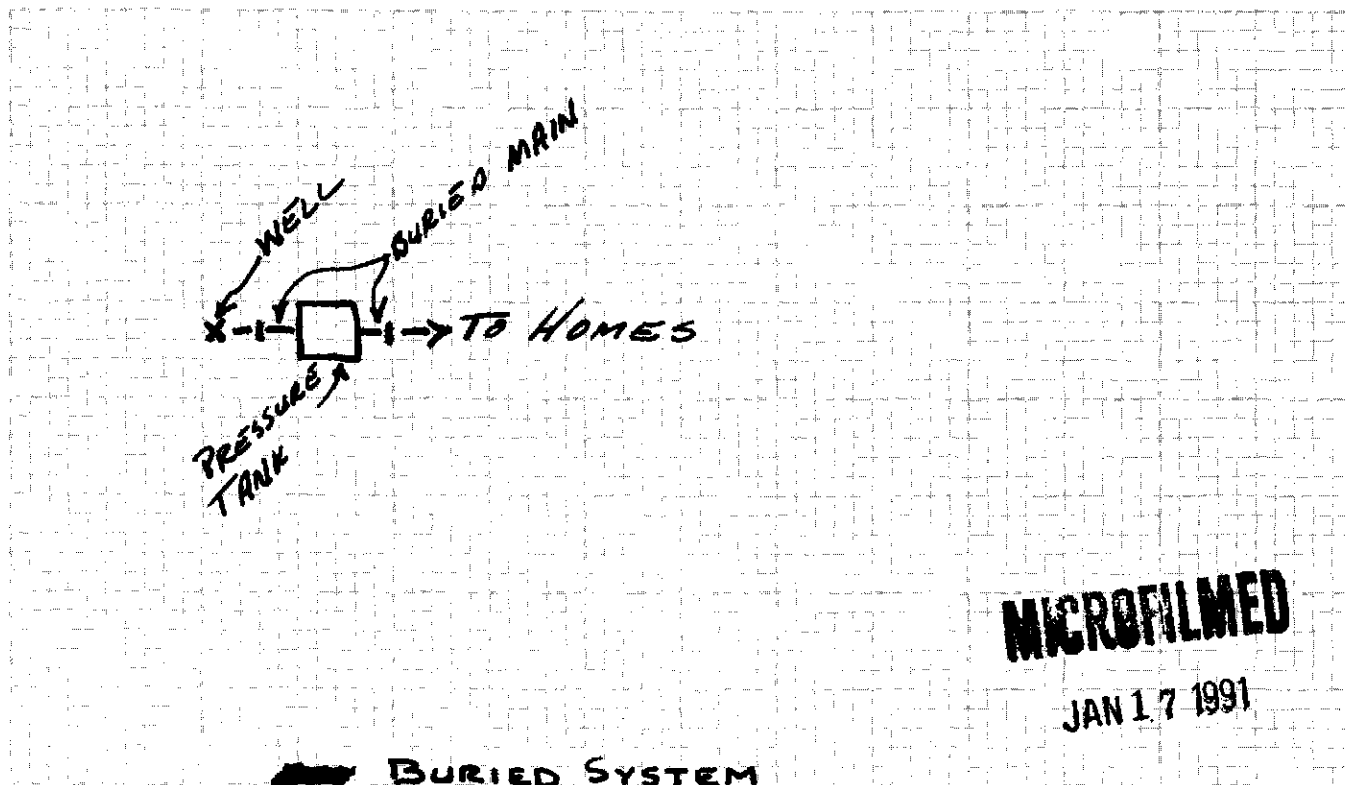
1. Owner: Ralph Jacobs Permit No. 95-08069
Current Address: Box 506 HAYDEN LAKE, ID. 83835 Phone No. 667-7490
2. Accompanied by: Suzie Jacobs EXAM. DATE: 10-4-89
Address: SAME Phone No. _____
Relationship to Permit Holder: SAME SPOUSE
3. Source: GROUNDWATER tributary to _____

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 PHOTO DID NOT DEVELOPE (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.)

6" x 280' WELL W/ SKL @ 138', SUBMERSIBLE PUMP &
BURIED MAN MAINS TO HOMES

☐ 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		2			

*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
			NW	NW	31	53N	4W	KOOTENAI	MAP/ASSESSOR

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	
53N	4W	31					1	1	5	5									3

Do not use this space

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JAN 17 1991

Do not use this space

D. FLOW MEASUREMENTS

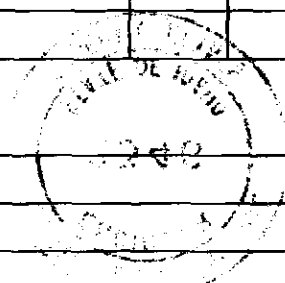
NONE

☐ 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:

$$8.8(2)80\%$$

2. Alternate Method for Checking Purposes:

$$2.3(20)+138 = .08 \text{ cfs}$$

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:

$$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 10.5$$

$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 = 29.2$$

$$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 10.5$$

2. Volume Calculations for Other Uses:

$$6(.6) = 3.6$$

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JAN 17 1991

H. REMARKS AND OVERLAP REVIEW ANALYSIS

HOME OWNERS:

RALPH JACOBS, JOHN TAYLOR, GEORGE FORESTBERG,
TOM RICK, FRED RICK, BILL BESELER
MR. TAYLOR OWNS TWO PARCELS - ONLY ONE CURRENTLY
PLUMBED.

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
IRRIGATION	5/1	11/1	.08	10.5
DOMESTIC (6)	1/1	12/31	.08	3.6
Totals:			0.08	14.1

2. Recommended Amendments

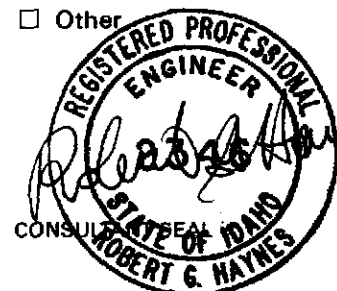
- ☐ Change P.D. as reflected above ☐ Add P.D. as reflected above
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above

☒ None

☐ Other

J. AUTHENTICATION

Field Examiner's Name TOM D KING
Signature [Signature]
Certification Date 2/17/89
Field Report Preparation Date 2/16/1989

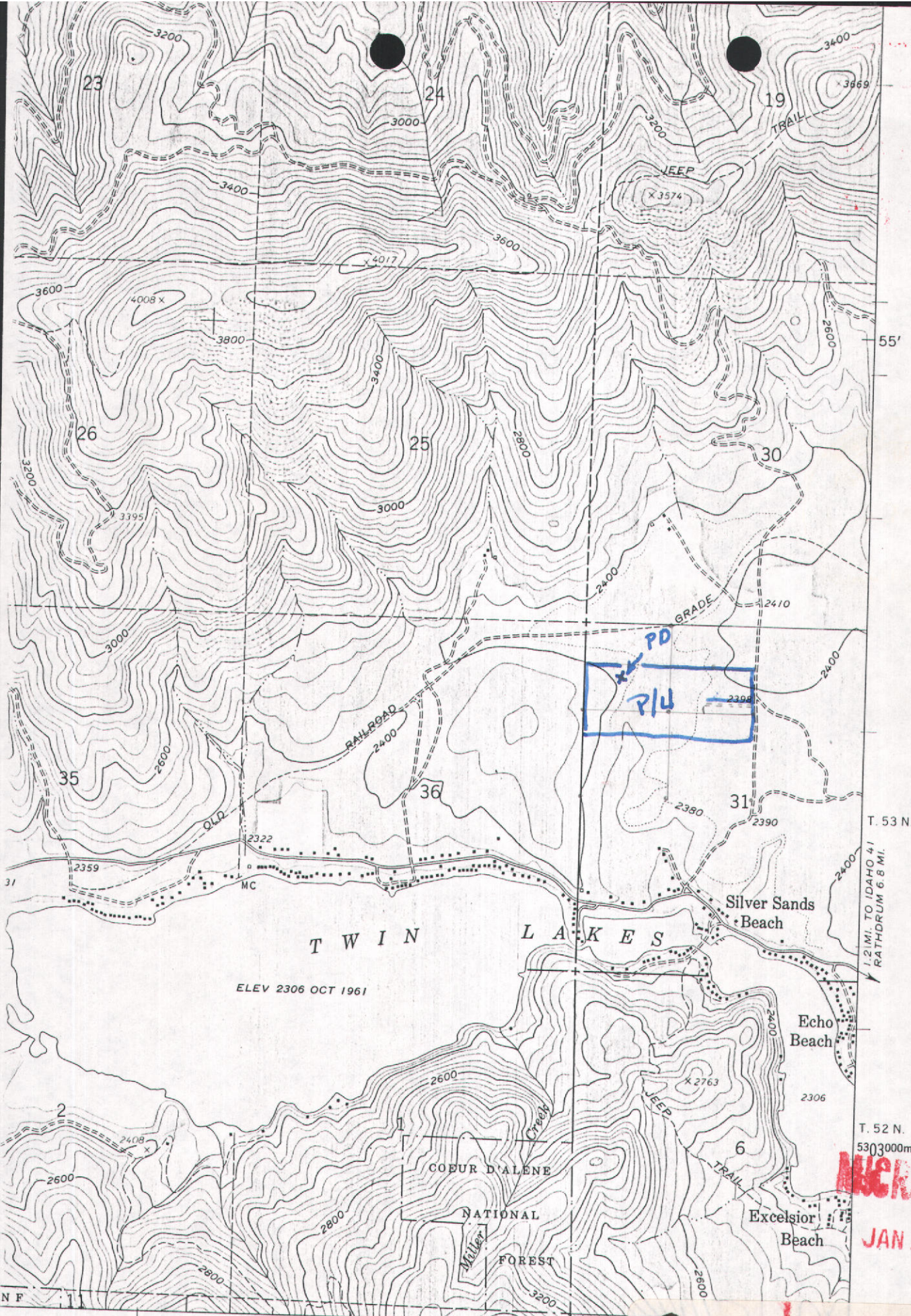


K. Licensing recommendation shall be prepared by an Idaho Department of Water Resources employee on a computer printout attached hereto.

11-26-90
SC

MICROFILMED

JAN 17 1991



5303000m. N.
RECORDED
JAN 17 1991

95-08069

SEC. 31 1WP. 33 14 N. 7 W. D. W.

SEE PLANS 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000



CODE AREA CROSS REFERENCE
COUNTY CODES ARE NOT

TOWNSHIP											
1	2	3	4	5	6	7	8	9	10	11	12
13	14	15	16	17	18	19	20	21	22	23	24
25	26	27	28	29	30	31	32	33	34	35	36

KOOTENAI COUNTY
IDAHO

RECORDED

JAN 17 1991

WEST 1/4
CORNER

QUARTER NAME AND NUMBER SYSTEM IN STANDARD SECTION		TOWNSHIP		RANGE	
1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30
31	32	33	34	35	36

OWNER'S MAP NO.
(LAST THREE DIGITS)
BLOCK NO.
(10TH & 11TH DIGITS)
SUBDIVISION NO.
(8TH & 9TH DIGITS)
QUARTER SECTION NO.
(7TH DIGIT)
SECTION NO.
(6TH & 5TH DIGITS)
TOWNSHIP NO.
(4TH & 3RD DIGITS)

ASSESSOR'S MAP NO. ARE NOT ASSIGNABLE
NOW WHEN AVAILABLE, HAS BEEN REMOVED

DATE		TOWNSHIP		RANGE	
1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30
31	32	33	34	35	36

95-08069

Form 238-I
09/89

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 attached to the beneficial use field report. If well construction standards do not appear to be met, a copy of this form should be forwarded to Groundwater Protection Section.

Water Right Permit No. 95-08069

1. Legal Description of Well Location:

Twp. 5.3 N, Rge. 4W Sec. 31, NW $\frac{1}{4}$ NW $\frac{1}{4}$ Gov. Lot

2. Owner: RALPH JACOBS

Address: Box 506, City HAYDEN LAKE, State ID

3. Approximate date of well construction 6/2/1980

Well driller: CDA WELL

4. Casing: Diameter 6" Condition GOOD

5. Casing length above land surface 2'

6. Well depth (ft) 280 Flowing Temperature Access Port

7. Condition of piping and valving ✓

8. Evidence of well seal ✓

9. Shut in pressure or static water level 138

10. Evidence of leakage around the casing NO

11. Does well need repair NO

12.

MICROFILMED

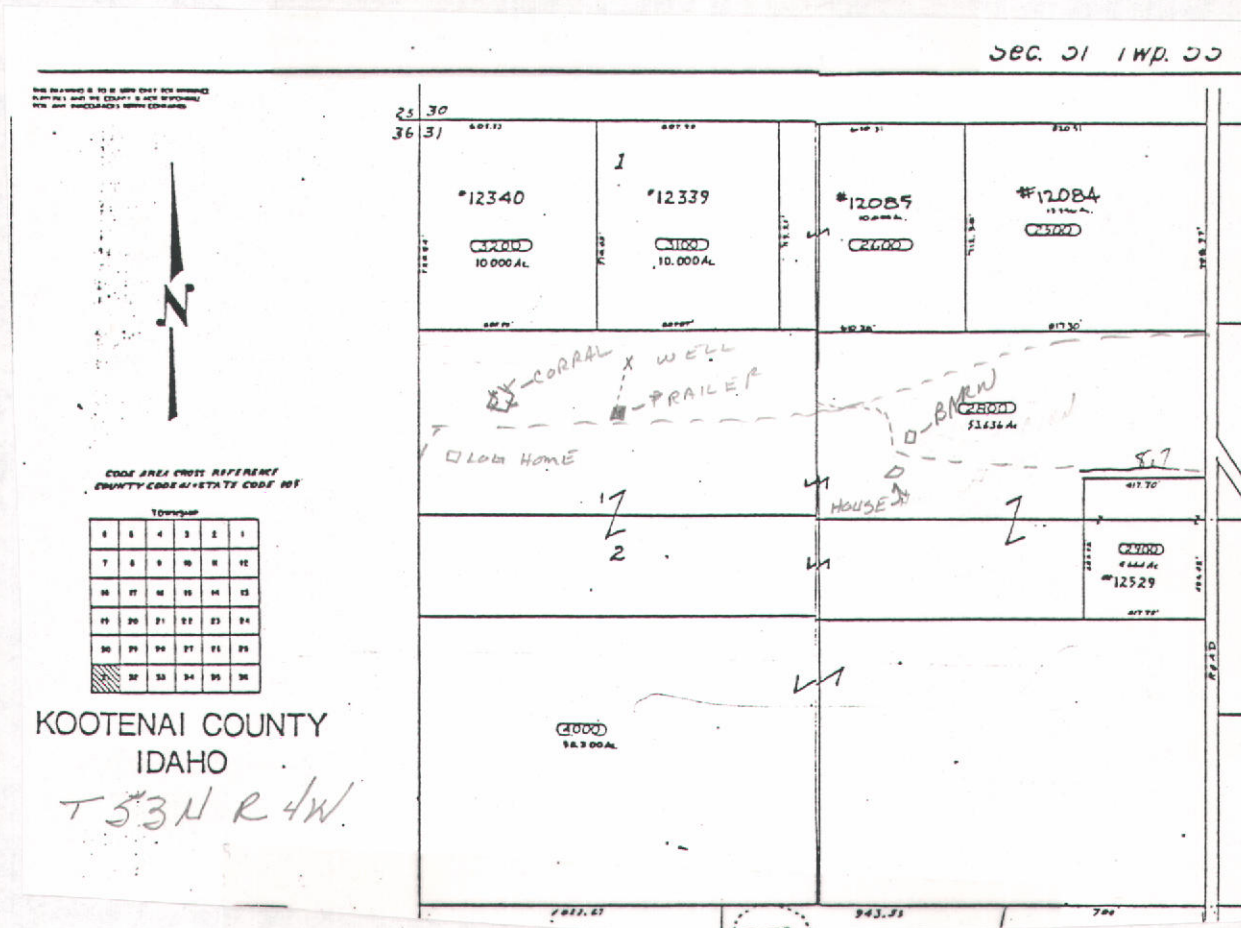
Comments

JAN 17 1991

over

SCHEMATIC

Provide a schematic Diagram showing the location of the well in the 1/4 with respect to houses, roads, other wells or readily identifiable features.



Inspected by

Jon King

Date 10/6/89

MICROFILMED

JAN 17 1991

RECEIVED

APR 24 1989

no enclosed key

STATE OF IDAHO
Department of Water Resources

DEPARTMENT OF WATER RESOURCES

For Office Use Only
Fee Received 50.00
Date 6/27/89
Receipt # C007817
Reviewed by K.Y.
Sent to region

FEB 23 1989

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. 95-08069

Name(s) of Permit Holder: RALPH JACOBS

Post Office Address: P.O. BOX 506 Hayden LAKE, Id.

Telephone No. 208-667-7490

Source of Water: WELL

Extent of Use:

Domestic 3 TO DATE (number of households) Stockwater (number and type of stock)

Irrigation (acres) Other/Remark

Total rate and/or volume for which proof is submitted X 0.04 CFS PER HOUSEHOLD cfs acre-feet

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

Measuring Device: Required? Yes No
Installed? Yes No

Fee enclosed \$ NONE - SINGLE FAMILY
(See License Examination Fee Schedule) RES. -

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

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

RALPH JACOBS
(Name)

208-667-7490
(Telephone Number)

E. 725 TWINLAW Rd. RATHDRUM Id.
(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.

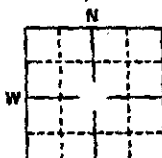
2-20-89
Date

Ralph Jacobs
Signature of Permit Holder (and title, if appropriate)

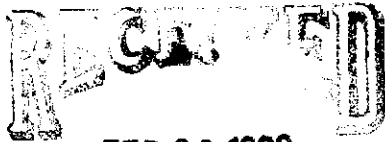
MICROFILMED

SEP 25 1989

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENState 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>Ralph Jacobs</u> Address <u>Rathdrum, Idaho</u> Owner's Permit No. <u>Ph 4 Box 266</u>		7. WATER LEVEL Static water level <u>138</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 _____ 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 _____ Discharge G.P.M. _____ Pumping Level _____ Hours Pumped _____ <u>22+</u>																																						
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type) _____		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 rowspan="2">Water Yes No</th></tr><tr><th>From</th><th>To</th></tr></thead><tbody><tr><td>6</td><td>-</td><td>2</td><td>Top soil</td><td></td></tr><tr><td>2</td><td>24</td><td>34</td><td>Sand & some gravel</td><td></td></tr><tr><td>94</td><td>98</td><td>158</td><td>Brown clay</td><td></td></tr><tr><td>98</td><td>158</td><td>205</td><td>Yellow clay</td><td></td></tr><tr><td>158</td><td>205</td><td>205</td><td>Decomposed granite</td><td></td></tr><tr><td>205</td><td>280</td><td>280</td><td>Salt & pepper granite</td><td></td></tr></tbody></table>		Hole Diam.	Depth		Material	Water Yes No	From	To	6	-	2	Top soil		2	24	34	Sand & some gravel		94	98	158	Brown clay		98	158	205	Yellow clay		158	205	205	Decomposed granite		205	280	280	Salt & pepper granite	
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158	205	205	Decomposed granite																																					
205	280	280	Salt & pepper granite																																					
4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____																																								
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ Thickness _____ inches Diameter _____ inches From _____ feet To _____ 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 _____ 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 ☐ 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 _____																																								
6. LOCATION OF WELL Sketch map location must agree with written location.  County <u>Kootenai</u> Subdivision _____ Lot No. _____ Block No. _____ City _____ State _____ Zip _____		11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. <u>Ralph Jacobs</u> Firm No. <u>214</u> Address <u>Hayden, Idaho</u> Signed by (Firm Official) <u>Bill E. Smith</u> and (Operator) <u>Paul E. Smith</u>																																						

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



FEB 23 1989

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

For Office Use Only
Fee Received 50.00
Date COOTR 17
Receipt # 6/27/89
Receipt by K4
Reviewed by _____
Sent to region _____

~~No \$ enclosed KSY~~
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. 95-08069

Name(s) of Permit Holder: RALPH JACOBS

Post Office Address: P.O. BOX 506 Hayden LAKE, ID.

Telephone No. 208-667-7490

Source of Water: WELL

Extent of Use:

Domestic 3 ^{TO DATE} (number of households) Stockwater _____ (number and type of stock)
Irrigation _____ (acres) Other/Remark _____

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

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

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

Fee enclosed \$ NONE - SINGLE FAMILY
(See License Examination Fee Schedule) RES. -

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

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

RALPH JACOBS
(Name)

208-667-7490
(Telephone Number)

E. 725 TWINLAW RD. RATHDRUM ID.
(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

2-20-89
Date

Ralph Jacobs
Signature of Permit Holder (and title, if appropriate)

SEP 25 1989

* SEE COPY RETURNED 4-24-89.

STAFF REVIEW SHEET - EXTENSION OF TIME

Permit No. 95-80688Reviewed by JDate 7-16-1986
4-18-86

BASIC INFORMATION

- Y Date stamp received
Y Extension received timely
 (not prior to 6 month before proof due date or after reinstatement period)
N Fee received and receipted
 Name and signature same as permit
 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

Request fee
Government approval for 3 yrs based on
due diligence

Special conditions or remarks:

CALCULATION OF PERIOD OF DELAY

<u>Y</u> Reinstated	March 26 - Received extension	26	
	March 1 Permit lapsed	- 1	
			25
	June 9 Received ext. & fee	160	
	May 10 Requested ext. &	-130	
	fee by this date		+30
			55
	Priority = Feb. 4, 1981		+ 35
			90

Advanced priority is March 31, 1981

Prepare coding sheet

Change rolodex card

MICROFILMED

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: JK

APPLICATION NUMBER: 95-8069

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: 3/2/81 ✓
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 2/26/81 ✓
☒ 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? _____
2/24/81 Date of priority recommended.
Special conditions of approval or cover letter. _____

MICROFILMED

By: RAT Date: 3/3/81

STATE OFFICE REVIEW:

Sw/2 cord

☐ See attached sheet for more information.
By: Sw/2 cord Date: 3/11/81