

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-8044

Priority: August 1, 1980

Amount: .04 CFS

1.2 AF

This is to certify, that REASEL M. JONES
BETTY S. JONES

W. 2445 HIDDEN VALLEY RD.

RATHDRUM, ID 83858

has complied with the terms and conditions of the permit issued pursuant to Application for Permit dated August 1, 1980, and has submitted proof to the Department of Water Resources on July 22, 1985, that water has been applied to a beneficial use; an examination by the Department indicates that the works have a diversion capacity of .04 cfs of water from a GROUNDWATER source and that a water right has been established as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>VOLUME</u>
Domestic	01/01 to 12/31	.04 cfs	1.2 af

LOCATION OF POINT OF DIVERSION(S): SESW, Sec. 35, Township 52N, Range 5W
Kootenai County

PLACE OF USE: Domestic

TWN RGE SEC

52N 5W 35 SESW

CONDITIONS/REMARKS:

1. The right to the use of the water hereby confirmed is limited to the amount which can actually be beneficially used and is restricted and appurtenant to the lands or place of use and to the purpose herein described, as provided by the laws of Idaho.
2. This right is subject to all prior water rights and may be forfeited by five years of non-use.
3. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.

MICROFILMED

MAR 20 1987

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 FEBRUARY, 1987.

Acting for the Director

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 REAZEL M. OR BETTY S. JONES Phone _____
Post office address 11202 FALLON, NORWALK, CA. 90650
2. Source of water supply GROUNDWATER which is a tributary of _____
3. Location of point of diversion is SE $\frac{1}{4}$ of SW $\frac{1}{4}$ of Section 35 Township 52N
Range 5W 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 _____ 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. 0.06 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 6 inches; proposed depth of well is 400 feet.

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

8. Description of proposed uses:

a. If water is **not** for irrigation:

(1) Give the place of use of water: SE $\frac{1}{4}$ of SW $\frac{1}{4}$ of Section 35 Township 52N
Range 5W B.M.

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

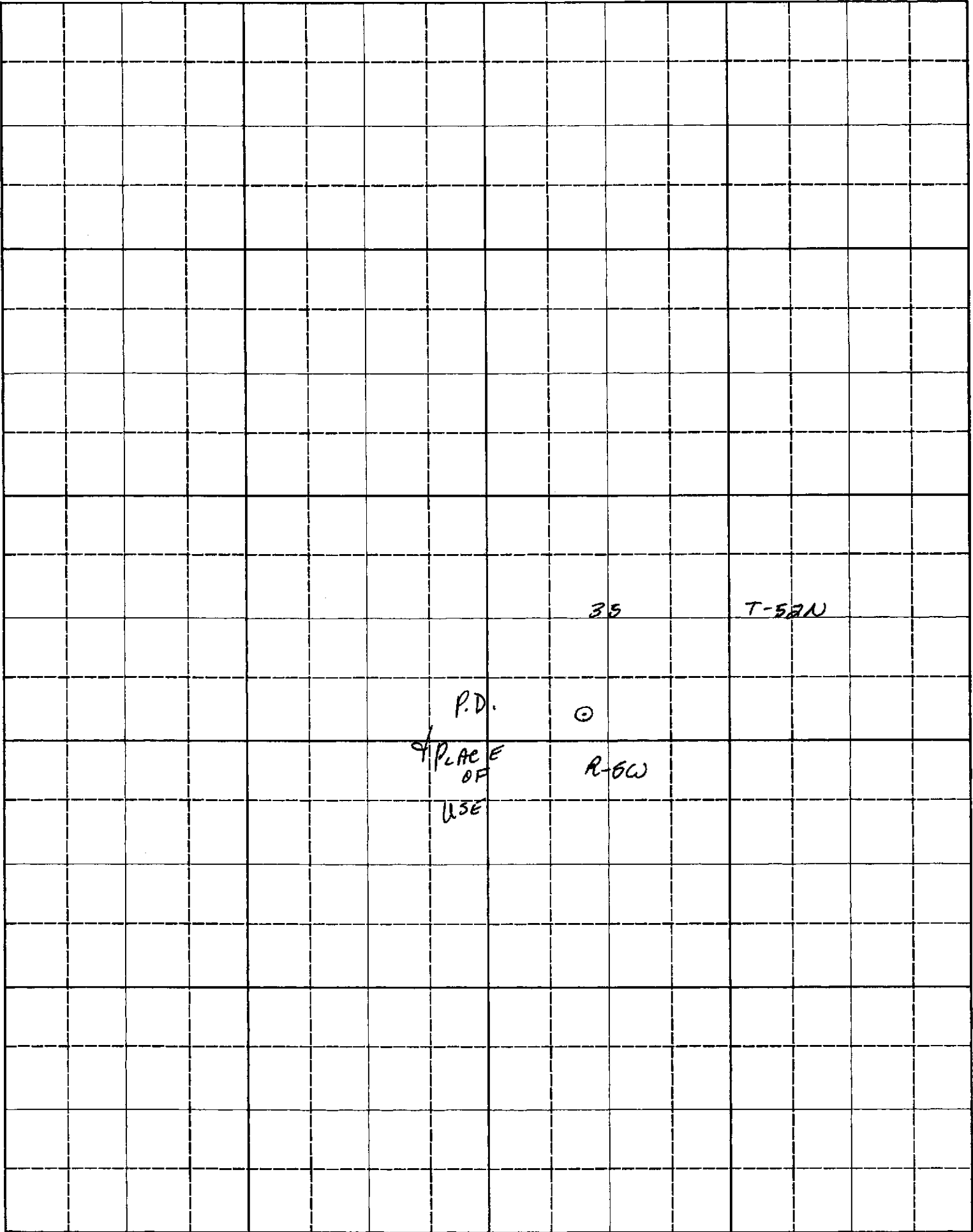
(3) List number of each kind of livestock to be watered 5 HEAD

(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.

Reuel M Jones
(Applicant)

Proposed Priority

8/1/80

Received by KK Date 8/1/80 Time 10:15 A
Preliminary check by JK Fee \$ 30.00
Receipted by KK Date 8/1/80 # 15339
Publication prepared by JK Date 8/7/80
Published in Coeur d'Alene Press
Publication dates 8/14 + 21/80
Publication approved JK Date 8/25/80
Protests filed by: none

Copies of protests forwarded by _____
Hearing held by _____ Date _____
Recommended for approval denial by RA

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. 95-8044, and said application is hereby approved.

1. Approval of said application is subject to the following limitations and conditions:
 - a. SUBJECT TO ALL PRIOR WATER RIGHTS.
 - b. Proof of construction of works and application of water to beneficial use shall be submitted on or before September 1, 19 85.
 - 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 11th day of September, 1980.

J. Glen Saylor
Chief, Operations Bureau

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

95-8044
Permit No.

Staff Analysis Sheet
for
Beneficial Use Field Report

RECEIVED

AUG 4 1986

A. Prior to Conducting the Exam, the File Contains:

- ☒ Blank Field Report Form
- ☒ Copy of Permit
- ☐ Copies of any Amendments/Orders with conditions of approval Department of Water Resources
- ☐ Computer Data Proof Report
- ☒ Copy of U.S.G.S. Quad
- ☒ Check for Government Lots. If so, make a copy of Government Plat

Check of P/D index J.A. 7/18/86 (Initial and date)

Overlap? ☐ yes ☒ no If yes: ☐ copy of exam(s) attached?

Type of Overlap? ☐ Add acres or uses to existing system

☐ Increase rate of flow or volume

☐ Other: _____

Check of P/U index J.A. 7/18/86 (Initial and date)

Overlap? ☐ yes ☒ no If yes: ☐ copy of water right(s) attached?

Type of Overlap? ☐ Increase rate of flow or volume

☐ Add P/D's

☐ Increase number of acres within tracts

☐ Other: _____

Aerial Photo

Required? ☐ yes ☒ no If yes: ☐ copy attached?

Scheduling Letter sent? _____ (Initial and date)

☐ Appointment made and telephone conversation memo attached

B. After Conducting the Exam, the File Contains:

- ☒ Fully completed and signed Field Report Form
- ☐ Photographs of Point of Diversion and Place of Use
- ☒ Corrected Computer Data Proof Report with recommended license information, and date and signature of examiner.

FILED
MAR 20 1987

C. Review and Processing:

Exam Completed Jennifer Argraves (Signature of examiner and date) 7/18/86

Exam Reviewed by Senior Water Resource Agent E. 7/29/86 (Initial and date)

Exam Reviewed by Manager of Regional Office RJA 7/20/86 (Initial and date)

Exam Date Entered in Computer 7/30/86 (Initial and date)

Exam sent to State Office 7/31/86 (Initial and date)

Copy of Staff Analysis Sheet sent to Manager of Regional Office and Original
Refiled in White File _____ (Initial and date)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED

AUG 4 1986

Department of Water Resources

A. GENERAL INFORMATION

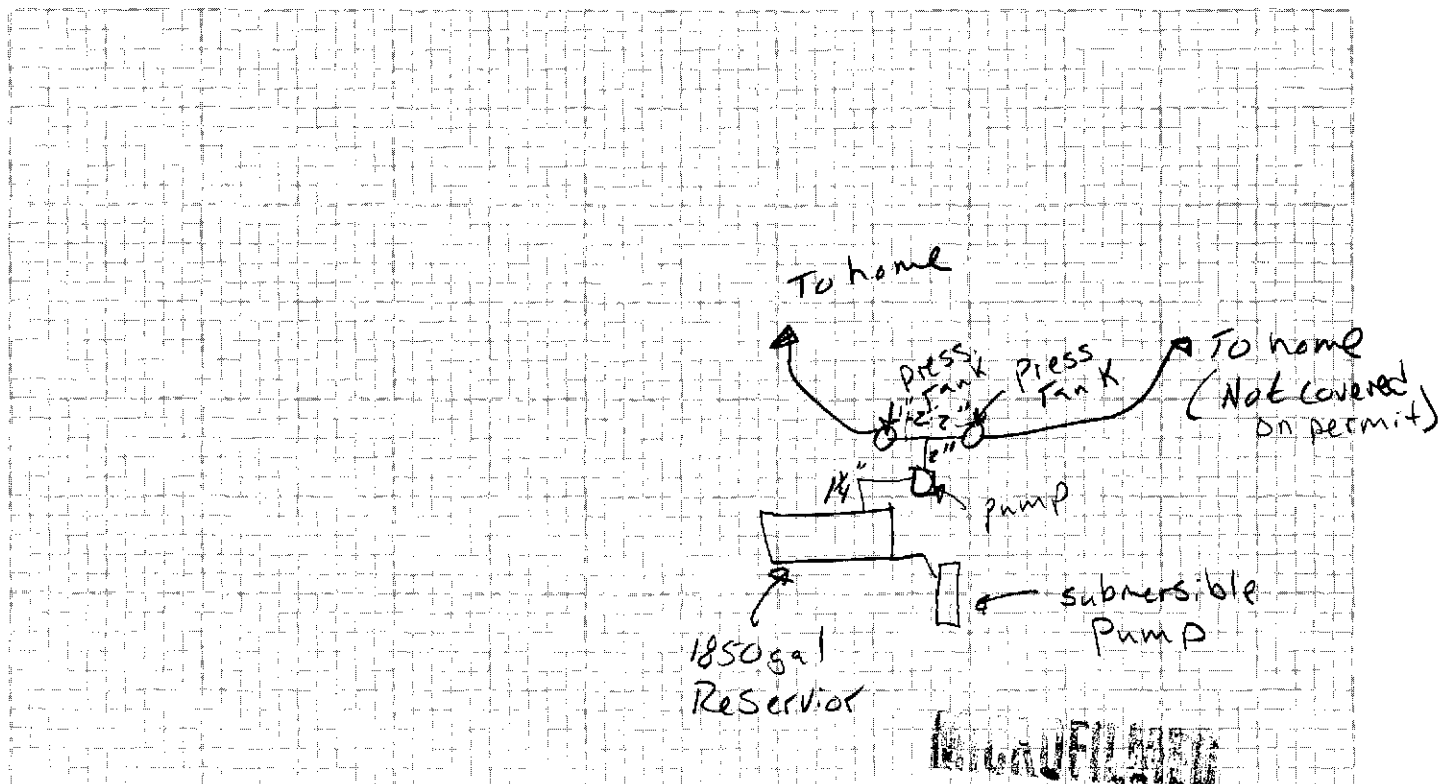
1. Owner: Betty & Reasel Jones Permit No. 95-8044
Current Address: W. 2445 Hidden Vly Rd, Rathdrum, Id. 83854 Phone No. 687-0531
2. Accompanied by: SAME EXAM. DATE: 7/17/86
Address: SAME Phone No. _____
Relationship to Permit Holder: _____
3. Source: Groundwater tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: NONE ☐ Copies Attached
2. Other water rights with same point of diversion: NONE ☐ Copies Attached ☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

1. **Diversion System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached



Scale: 1" = NTS

MAR 20 1987

2. ☒ Copy of U.S.G.S. Quadrangle Attached ☐ Aerial Photo Attached
Showing location(s) of point(s) of diversion and place(s) of use (required). (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.)

Submersible in well to holding tank ¹⁸⁵⁰ 1800 gal. 1 1/4" PVC to pump to 2" PVC to "T" 2" take off to ~~two~~ ^{reduced to 1"} to 80 gal press tank ~~one for one home~~ to one home and 2" take off to 82 gal press tank to another home
→ Only one home on permit

Ward Pump 40 psi

Submersible 140 psi (once a day for 1 hr)

one home ☐ See Remarks on page 4 for continuation

4. Yes - 1/2 ac lawn/garden → For both

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
Submersible					
	Wards	3/4	OM809	Wards	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
					SE SW 35	52N	SW	Hootenai	Map

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	
52N	SW	35																	1/2
																			1/2

Total =

Do not use this space

D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

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

2. Measurements:

NONE

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

$$Q = \frac{8.8(1.8)(\frac{3}{4})}{2.23(40) + 7} = 0.8 \text{ cfs}, 0.6 \text{ cfs}$$

2. Alternate Method for Checking Purposes:

$$Q = .04 \text{ cfs, a permit}$$

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:

$$V_{Dom + \text{Eac lawn \& garden}} = 1.2 \text{ AF} = 2.4 \text{ AF} - 1.8 \text{ AF}$$

[illegible]

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
1 Pom + 1/2 ac. lawn + garden	1/1	12/31	.04 cfs	OK → ~~1.2 A/F~~ 1.8 A/F
Totals:			.04 cfs	OK → ~~1.2 A/F~~ 1.8 A/F
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

Field Examiner's Name Jennifer Hughes
Signature Jennifer Hughes
Certification Date _____
Field Report Preparation Date _____

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

[Faint, illegible markings]

Do not use this space

D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

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

2. Measurements:

NONE

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

$$Q = \frac{8.8(8)(\frac{3}{4})}{2.23(40) + 7} = 0.8 \text{ cfs}, 0.6 \text{ cfs}$$

2. Alternate Method for Checking Purposes:

$$Q = .04 \text{ cfs} \text{ per m.t.}$$

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:

$$V_{Dom + \text{bal lawn \& garden}} = 1.2 \text{ AF} = 2.4 \text{ AF} - 1.8 \text{ AF}$$

H. REMARKS AND OVERLAP REVIEW ANALYSIS

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
1 Pom + 2 ac. lawn d garden	1/1	12/31	.04 cfs	OK → ~~1.2 A/F~~ 1.8 A/F
Totals:			.04 cfs	OK → ~~1.2 A/F~~ 1.8 A/F

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

Jennifer Argaves

Signature

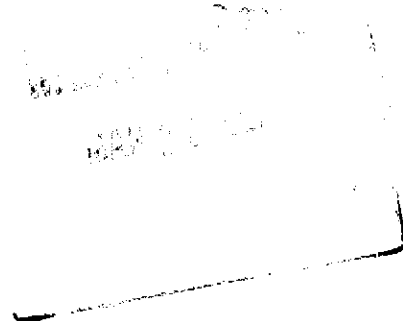
Jennifer Argaves

Certification Date

Field Report Preparation Date

CONSULTANT SEAL

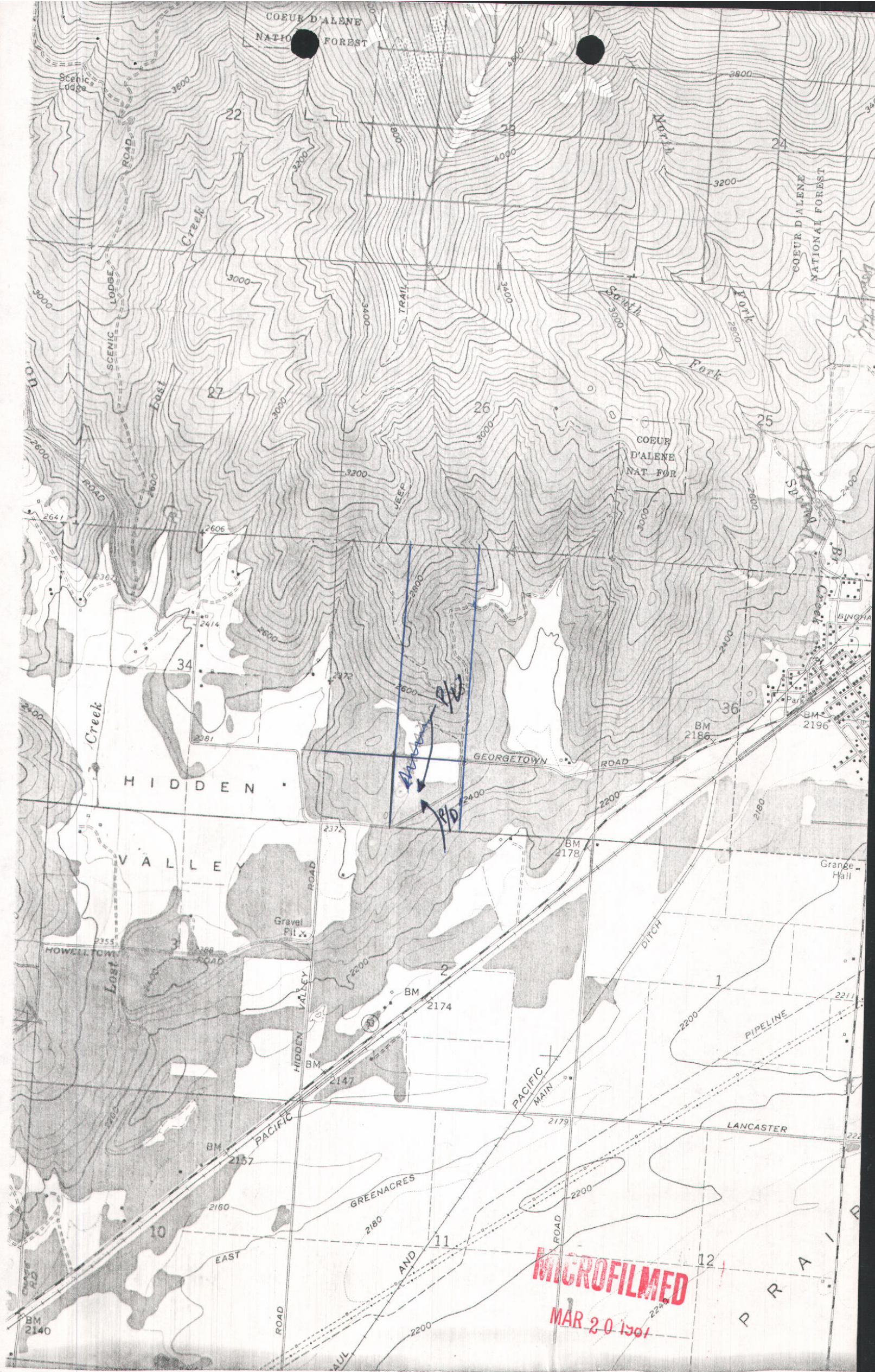
- K. Licensing recommendation shall be prepared by an Idaho Department of Water Resources employee on a computer printout attached hereto.





MICROFILMED

MAR 20 1987



TWP. 52N RGE. 5W SEC. 35 MAP # E53 MAP SCALE _____
DATE OF EXAM _____ PERMIT # 95-8044

4/86

RECEIVED

APR 23 1986

Department of Water Resources
Northern District Office

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

EXAMINATION FEE INFORMATION

For Office Use Only
Fee Received _____
Date _____
Receipt # _____
Receipt by _____
Sent to S.O. 4/23/86

RECEIVED

APR 25 1986

no incl. 85

1. Permit No. 95-8044

ONE OF THE FOLLOWING BOXES SHOULD BE MARKED TO DESIGNATE YOUR CHOICE:

☒ I choose to have the department make the field examination of this permit; attached is the examination fee. (If this box is marked, complete items 1 thru 8.)

2. Permit Holder: JONES, REASEL M. OR BETTY S.

3. Post Office Address: W. 2445 Hidden Vly. Rd.
RATHDRUM, Id. 83858 Telephone No. 687-0531

4. Source of Water: _____

5. Extent of Use:

Domestic 2 (No. of households) Stockwater 5 pigs or 2 cats (No. and type of stock)

Irrigation NONE (acres) Other/Remark _____

6. Total rate &/or volume for which proof is submitted 04 cfs _____ acre-feet

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

MID-JUNE 1981

8. Person to contact to accompany the department representative during field examination:

REASEL or Betty JONES
(Name)

W. 2445 HIDDEN VLY. RD., RATHDRUM, Id. - 83858
(Address)

687-0531
(Telephone Number)

☐ I choose to have the field examination conducted by a certified water right examiner. Attached is a statement from the certified examiner I have selected verifying that he has been retained to conduct the examination. (If this box is marked, complete items 1 thru 7.)

4-23-86
Date

Reasel Maf Jones
Signature of Permit Holder (and title, if appropriate)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
PROOF OF BENEFICIAL USE

RECEIVED
JUL 22 1985

Department of Water Resources

The Idaho Department of Water Resources will consider this form as a statement that the permit holder(s) has completed development under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below:

Permit No. 95-8044

Name(s) of Permit Holder: JONES, REASEL M. + Betty S.

Post Office Address: W. 2445 HIDDEN VALLEY RD.
RATHDRUM, ID. 83858 Telephone No. 208-687-0531

Source of Water: UNDERGROUND / WELL + PUMP

Extent of Use:

Domestic TWO (number of households)

Stockwater 4 PIGS + 4 COWS (number and type of stock) ^{in future}

Irrigation NONE (acres)

Other/Remarks WE HAVE A CISTERN
HOLDING 1,900 GAL.

Indicate the date water was first diverted and beneficially used under this permit: JUNE 20-1981

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

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

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

REASEL M. JONES OR Betty S. Jones
(Name)

W. 2445 HIDDEN VALLEY RD. RATHDRUM 208-687-0531
(Address) (Telephone Number)

The above information is a true statement of the extent to which the above numbered permit has been developed.

7-17-85
Date

Betty S. Jones
Signature of Permit Holder (and Title, if appropriate)

MICROFILMED

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: IK APPLICATION NUMBER: 95-8044

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 info. |
| ☒ 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: 9/2/80 ✓
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 8/25/80 ✓
☒ 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? _____
☒ 8/1/80 Date of priority recommended.
☒ Special conditions of approval or cover letter.

MICROFILM

By: [Signature] Date: 9/2/20

STATE OFFICE REVIEW:

SLW/cond

- ☐ See attached sheet for more information.
By: Robum Date: 9/10/80